As introduced in the Rajya Sabha on 8th December, 2023

Bill No. LIX of 2023

# THE MENTAL HEALTHCARE (AMENDMENT) BILL, 2023

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BILL

to amend the Mental Healthcare Act, 2017.

BE it enacted by Parliament in the Seventy-fourth Year of the Republic of India as follows:----

1. (1) This Act may be called the Mental Healthcare (Amendment) Act, 2023.

Short title and commencement.

(2) It shall come into force on such date as the Central Government may, by notification in the Official Gazette, appoint.

Amendment of section 2.	2.	In section 2 of the Mental Healthcare Act, 2017 (hereinafter referred to as the principal Act), in sub-section $(1)$ —	10 o	of 2017.
		<ul> <li>(a) after clause (g), the following new clause shall be inserted, namely:—</li> <li>"(ga) "educational institution" means any recognised school imparting primary, elementary and secondary education, encompassing all types of school managements and categories as per the Unified District Information System for Education Plus (UDISE+) records;";</li> </ul>	5	
		<ul> <li>(b) after clause (zb), the following new clause shall be inserted, namely:—</li> <li>"(zc) "student" means a person between six to eighteen years of age, who is pursuing any course of study in any educational institution.".</li> </ul>	10	
Amendment of section 3.	3.	In section 29 of the principal Act, for sub-section (1), the following shall be substituted, namely: —	15	
		"(1) The appropriate Government shall have a duty to plan, design and implement programmes for the promotion of mental health and prevention of mental illness in the country, with special emphasis on programmes catering to the needs of students in educational institutions.".	20	
Amendment of section 34.	4.	In section 34 of the principal Act, in sub-section (1), after clause (f), the following new clause shall be inserted, namely:— "(fa) Joint Secretary to the Government of India in the Ministry of Education — Member <i>ex officio;</i> ".	25	
Insertion of new Chapter XIIIA	5.	After Chapter XIII of the principal Act, the following new Chapter shall be inserted, namely:		
		"CHAPTER XIIIA RESPONSIBILITIES OF EDUCATIONAL INSTITUTIONS		
Responsibilities of Educational		<b>105A</b> . Every educational institution,-	30	
Institutions.				
		(b) shall integrate mental healthcare services into the overall support system of the school, through the appointment of a nodal officer, who has been an employee of the educational institution for at least five years, and may streamline student referrals to nearby mental health establishments within the district;	35	
		(c) shall ensure protection of privacy and confidentiality of students while availing all mental health services;	40	

(*d*) shall undertake initiatives to promote mental health awareness amongst students, and other important stakeholders such as parents and legal guardians and impart education on well-being, stress management, socio-emotional learning, and resilience-building;

 (e) shall strive to integrate mental health education, as provided under the National Council of Education Research and Training's 'Training and Resource Material: Health and Wellness of Schoolgoing Children' within the curriculum; and organize co-curricular activities and teacher training programs;

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(f) shall encourage yoga, meditation, sports and other stress-mitigating activities for students, to increase mental wellbeing of the students; and

(g) shall establish mechanisms for the identification of mental health concerns among students at an early stage.".

### STATEMENT OF OBJECTS AND REASONS

India has the largest youth and adolescent population in the world, comprising 27.2 per cent. of the population. Consequently, India's school education system has also expanded substantially with 15 lakh schools, and nearly 26.5 crore students. Such an expansion has also meant that the anxieties, fears, and mental health pressures of students has increased in magnitude, particularly after the COVID-19 pandemic.

2. As per the National Mental Health Survey, 2015-16, the prevalence of mental disorders in the age group of 13-17 years is 7.3 per cent., and nearly equal in both genders. Facing the pressures of adolescence, and an increasingly competitive examination system, students also have an additional burden of resultant mental health challenges. The Mental Healthcare Act, 2017, does address this challenge to a certain extent, by making provisions for the redressal of mental health issues of children. However, the Act fails to categorize 'students' and youth, particularly in the age group of 13-18, as a primary target group.

3. The proposed amendments to the Mental Healthcare Act, 2017 addresses the mental healthcare needs of students, while also underlining the roles and responsibilities of educational institutions, thus paving the way for holistic redressal of the mental health issues faced by students in the country.

Hence, this Bill.

#### SURENDRA SINGH NAGAR

## FINANCIAL MEMORANDUM

Clause 5 of the Bill proposes addition of a new Chapter XIIIA in the Mental Healthcare Act, 2017, which provides for the referral of students encountering mental health challenges to mental health establishments and to form partnerships with them for the said purpose as well as various initiatives aimed at promoting mental health awareness and overall well-being, potentially entailing supplementary financial requirements. The Bill, if enacted, would involve both non-recurring and recurring expenditure from the Consolidated Fund of India. However, it is difficult to estimate the exact expenditure involved at this juncture.

## ANNEXURE EXTRACT FROM THE MENTAL HEALTHCARE ACT, 2017

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Definitions.	2. (1) In this Act, unless the context otherwise requires,												
	*		*		*	:	ł	\$	*				
	(g) "clinical psychologist" means a person												
	<ul> <li>(i) having a recognised qualification in Clinical Psychology from an institution approved and recognised, by the Rehabilitation Council of India, constituted under section 3 of the Rehabilitation Council of India Act, 1992; or</li> <li>(ii) having a Post-Graduate degree in Psychology or Clinical Psychology or Applied Psychology and a Master of Philosophy in Clinical Psychology or Medical and Social Psychology obtained after completion of a full time course of two years which includes supervised clinical training from any University recognised by the University Grants Commission established under the University Grants Commission Act, 1956 and approved and recognised by the Rehabilitation Council of India Act, 1992 or such recognised qualifications as may be prescribed;</li> </ul>												
	*	*	*	*	*	*	*	*	*	*			
	(zb) "State Authority" means the State Mental Health Authority established under section 45.												
	*	*	*	*	*	*	*	*	*	*			
	*	*	*	*	*	*	*	*	*	*			
Promotion of mental health and preventive	<b>29</b> . (1) The appropriate Government shall have a duty to plan, design and implement programmes for the promotion of mental health and prevention of mental illness in the country.												
programmes.	*	*	*	*	*	*	*	*	*	*			
Composition of Central	<b>34</b> . (1	) The C	Central A	Authority	y shall co	nsist of the	e followin	g, namely:-	_				
Authority.	*	*	*	*	*	*	*	*	*	*			
( <i>f</i> ) Joint Secretary to the Government of India in the Ministry of Women and Child Development—member <i>ex officio</i> ;													
	*	*	*	*	*	*	*	*	*	*			

# RAJYA SABHA

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BILL

to amend the Mental Healthcare Act, 2017.

(Shri Surendra Singh Nagar, M.P.)

RS-P&PS-PMB(E)-047-12.12.2023