

# MENTAL HEALTH AND PROFESSIONAL BOUNDARIES IN HIGHER EDUCATION INSTITUTIONS IN INDIA

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## **Introduction**

Human life is very precious. The “right to life” is a fundamental human right, most excellently preserved in Article 21 of the Constitution of India, which states, “No person shall be deprived of his life or personal liberty, except according to procedure established by law<sup>1</sup>,” ensuring life with dignity, livelihood, and liberty, and extending to privacy, health, and environment. In *Maneka Gandhi vs. Union of India*<sup>2</sup> the Supreme Court has given a very unique meaning of ‘right to life’. The court held that everyone has a right to have very dignified life full of mental, physical and spiritual well-being. In *Francis Coralie Mullin vs. Union Territory of Delhi*<sup>3</sup> (1981, the court held that any procedure for the deprivation of life or liberty of a person must be reasonable, fair and just and not arbitrary, whimsical or fanciful as peace has been considered as universal demand of every person.

Mental health in Higher Education Institutions (HEIs) is an acute concern as students navigate academic pressures, social changes, and personal growth. Ensuring ethical practices in mental health care is essential to nurturing a safe and comprehensive environment. This has been a serious concern to explore strategic traits of mental health ethics in HEI, focusing on maintaining confidentiality, safeguarding

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professional boundaries, and addressing the distinctive challenges institutions face in supporting student well-being.

Mental health responsiveness is about empathetic, recognizing, and sinking the stigma around mental health issues, promoting emotional well-being as vivacious as physical health, and heartening people to seek help by knowing symptoms like lethargy, mood swings, withdrawal and available support, fostering supportive environments where discussing mental health is normal, and arranging self-care like exercise, sleep, and social linking. Ethical mental health practice requires transparency and answerability. This means conceding mistakes, accessing supervisors, and upholding detailed records.

Many ethical issues in mental health stem from a lack of documentation or failure to follow through on responsibilities, both clinical and legal. In Higher Education Institutions (HEIs), mental health ethics midpoint on protecting susceptible students through strict discretion, clear proficient restrictions to build trust, and upholding core principles like autonomy, generosity, and justice, all requiring vigorous institutional guidelines, ongoing training, and self-evaluation to traverse multifaceted student-staff dynamics and maintain faith. Confidentiality in ethics is the principle that teachers or mentor/providers must keep a student's personal information private and secure. This principle is crucial for building trust in the relationship, as it encourages to disclose sensitive information honestly, which is essential for quality care.

Violations can harm and result in professional and legal consequences for providers. Life must be protected at any cost. While the principle is strong, it has a few exceptions, such as when there is a risk of public harm or with the patient's explicit consent. Key ethical pillars are self-sufficiency which respecting students' right to make decisions about their care, generosity will acting in the greatest awareness of the student, Avoiding harm to the student and justice and good conscience.

**Core Pillars of Mental Health:**

Trust is a significant mental behaviour to connect people. Marinating trust by protecting students personal and sensitive information. Spiritual well-being involves finding meaning and

purpose, developing core values, connecting with something larger than oneself (self, others, nature, God), and practicing self-reflection, compassion, and forgiveness, leading to inner peace, hope, and better stress management, with resources often available as downloadable guides or articles from university wellness centres or health sites, focusing on practices like journaling, meditation, and ethical living. The core pillars are:

a) **Building Trust and Relationship:** Trust is the foundation of any therapeutic relationship, without it, progress in treatment is often stalled or superficial. Upholding ethical standards is how professionals earn and protect that trust.

b) **Professional Relationships:** Many times, mental health practitioners have the responsibility to maintain clear professional boundaries. Dual relationships, such as treating a friend or entering into a business relationship with a client, can cloud judgment and lead to exploitation, even if unintentional. Ethical concerns in psychology often stem from blurred boundaries, so maintaining a clear therapeutic role is non-negotiable.

c) **Confidentiality:** One of the most sensitive ethical issues in mental health is confidentiality. Everyone must feel safe disclosing personal thoughts, histories, and vulnerabilities without fear of judgment or breach of privacy. While confidentiality is sacred, it does have legal limits, such as when there's an imminent risk of harm to self or others. Navigating these exceptions ethically and transparently is essential for both legal compliance and client trust.

Confidentiality in mental health is a legal and ethical cornerstone, ensuring patients can share sensitive info with therapists without fear, fostering trust crucial for effective treatment, but it's not absolute; it can be legally limited to protect the patient or others from serious harm involves specific rules for records, and requires clear communication about its limits

d) **Informed Consent:** the person must be fully aware of the nature, goals, risks, and benefits of therapy or psychiatric treatment. Informed consent isn't just a signed document but an ongoing conversation. This includes explaining treatment options, the use of any medications, possible side effects, and even limitations of

confidentiality. In psychiatric nursing, informed consent is especially critical when administering medication or initiating emergency interventions, directly tying into legal issues in psychiatric nursing.

e) Ensuring Client Well-being: At the heart of mental healthcare is the responsibility to do well and to do no harm. These ethical principles guide daily decisions and long-term treatment planning, helping practitioners uphold their professional and legal responsibilities.

f) The Issue of Confidentiality in Psychotherapy The fundamental principle in psychotherapy is one of confidentiality regarding what is spoken to the therapist. Patients may speak out content that they may associate with shame, guilt, remorse, self-loathing, fears of disapproval, and a host of other anxieties.

**Common Mental Health Disorders:**

- a) Anxiety and Obsessive Compulsive Disorder.
- b) Mistreatment and Bodily Violence in Educational Institutions.
- c) Co-Occurring Disorders.
- d) Eating Disorders
- e) Mood Ailments/Depression
- f) Psychosis and Schizophrenia.
- g) Substance Abuse and Addictions.
- h) Suicide
- i) self-harm

Mental and emotive well-being are not amenities; they are essential for living a vigorous and satisfying life. By arranging our psychological and emotive health, we are investing in our overall wellness. We owe it to ourselves to make mental and emotional wellness a top priority. The confidentiality encouragement permits them to open up in a way that they probably would not even to their family members. Hence, secrecy is regarded as the most imperative professional boundary. However the teacher must have emotional immunity to deal with mental health issues of students.

Emotional immunity is the ability to efficaciously handle life's anxieties and acclimate to change and difficult times. It involves being in tune with our feelings, considerate how to express them in a productive way, and knowing when to pursue support when needed.

Emotive wellness is considered by self-care, hassle reduction, lessening, and the development of innermost strength. It's about being concentrating to both positive and negative feelings, and having the tools to manage and understand those emotions. The Mental Healthcare Act 2017 is vital as it aims at decriminalizing the attempt to die by suicide by seeking to ensure that the individuals who have attempted suicide are offered opportunities for rehabilitation from the government as opposed to being tried or punished for the attempt. The principle of confidentiality extends beyond not repeating what the patient says.

Numerous cases exist in which a third party realized that the only source of specific information could have been from the patient, and there were justifiable feelings of violation or breach of privacy. A breach of confidentiality can make one vulnerable to litigation or to action from professional bodies that govern therapists<sup>4</sup>. Sometimes in order to protect confidentiality, the therapist may have to lie to others outside the consulting room. He may have to pretend that he does not know information which has learned of solely through a patient. Over time, psychotherapists develop the capacity to compartmentalize certain information so as to keep it sequestered in a private sector of the psyche belonging to information heard in psychotherapy<sup>5</sup>. Confidentiality is not an absolute boundary. One is required to break confidentiality to report child abuse or any form of sexual abuse. A threat of imminent violence or suicide to an individual requires a 'duty to warn' exception to confidentiality<sup>6</sup>. Media has been the keystone of the previous action in the field of mental health awareness. Celebrity endorsements, like the recent one by actress Deepika Padukone who shared her experience of depression, together with succinct tag-lines of advertisements and content-rich narrations and documentaries; have been the mainstay of media drives so far.<sup>7</sup>

Making evidence-based mental health information easily available to journalists and other content providers like internet portals from trusted and reliable sources like Indian Psychiatry Society, research organizations, medical colleges, etc., through their websites is a relatively simple step. Accessibility of simply translated jargon-free content in various regional languages in written and spoken forms will go a long way. It also behoves professionals in the mental health

domain to take the lead in engaging and partnering with the media. Encouraging recovered patients to make their success stories accessible to all shall make good the paucity of authentic narratives.

**Challenges of Mental Health Ethics, Confidentiality:**

a) Dual Relationship is one of the challenges. Therefore the teacher/councillor should maintain harmony and fairness. Youth is a crucial period for developing social and emotional behaviours important for mental well-being. These include implementing healthy sleep patterns; exercising regularly; developing coping, problem-solving, and interpersonal skills; and learning to manage emotions. Protective and supportive environments in the family, at school and in the wider community are important.

b) Mandatory Reporting is a serious issue when the student is not willing to go and inform about his problem. Some adolescents are at greater risk of mental health conditions due to their living conditions, humiliation, discernment or exclusion, or lack of access to quality support and services. These include adolescents living in humanitarian and fragile settings; adolescents with chronic illness, autism spectrum disorder, an intellectual disability or other neurological condition; pregnant adolescents, adolescent parents, or those in early or forced marriages; orphans; and adolescents from minority ethnic or sexual backgrounds or other discriminated groups.

c) Social Media sometimes act as an influencing factor. Establishment of clear social media policies is essential to maintain boundaries. The more risk factors students are exposed to, the greater the potential impact on their mental health. Factors that can contribute to stress during this period include exposure to misfortune, pressure to imitate with peers and exploration of identity. Media influence and gender norms can exacerbate the disparity between an youngster's lived reality and their perceptions or aspirations for the future. Other important determinants include the quality of their home life and relationships with peers. Ferocity (particularly voluptuous violence and mistreatment), punitive parenting and severe and socioeconomic problems are predictable perils to psychological fitness.

**Role of Judiciary and Mental Health:**

The judiciary is playing a very significant role in this area of

mental health. In *Tarasoff vs. Regents of the University of California*<sup>8</sup> (1976, USA) the court highlights the tension between confidentiality and the duty to protect others, influencing how HEIs manage risk and boundaries in mental health care. In *Kahetra Pratap vs. State of Uttar Pradesh*,<sup>9</sup> the court touches upon the right to privacy under Article 21 of the Constitution of India which is relevant when discussing confidentiality in mental health care. The Supreme Court emphasises the importance of protecting individual privacy, hinting at implications for sensitive information like mental health records. In *Navtej Singh Johar vs Union of India*<sup>10</sup> the Supreme Court referenced the Mental Healthcare Act to emphasize non-discrimination and universal access to mental health services.

Students are often young, facing various problems. Therefore the teacher should be competent enough to address unique types of issues. HEI should provide training, clear policies, and support systems for staff for the benefits of students. In *Sukdeb Saha vs State of Andhra Pradesh*<sup>11</sup> the Supreme Court acknowledged mental health as a fundamental right under Article 21, moving beyond physical persistence to include psychological well-being and dignity. In the *Sukdeb Saha* case, the Court issued 15 binding guidelines for schools and coaching centres to reduce academic pressure, prevent bullying, appoint counsellors, and display helplines to curb student suicides. Justice in mental healthcare means ensuring fairness, equity, and accessibility in how care is delivered. It demands that all clients, regardless of socioeconomic status, gender identity, caste, race, or ability, receive fair treatment and appropriate resources. Many ethical issues in mental health emerge from systemic disparities: for example, when marginalized communities face barriers to treatment or when implicit bias affects diagnosis and care delivery.

**Concluding Observation:**

Mental health is decisive for overall well-being, touching how we handle stress, relate to others, make conclusions, and cope with life's challenges, leading to better physical health, tougher relationships, improved productivity, emotive balance, and greater life satisfaction, fundamentally enabling us to function well, learn, work, and contribute to our communities. Upholding mental health ethics, confidentiality,

and professional boundaries is vital for creating a supportive and trustworthy environment in HEIs. By prioritizing informed consent, secure record keeping, and clear guidelines, institutions can foster student well-being while navigating complex challenges like dual relationships and mandatory reporting. It is a process to encourage students to come forward with their specific issues.

The field of student's mental health has evolved significantly over the past few decades and it is one of the most challenging issues of present time. Universities are increasing counselling and healing options to provide safe places and professional guidance. Many institutes are investing in group therapy to address issues like social anxiety, eating disorders, and racial trauma. Researchers propose using non-specialists to deliver brief, scalable mental health interventions to fill gaps in care. Enlightened government strategies based on evidence-based tactics, an affianced media, an effervescent educational system, a approachable industry, aggressive deployment of newer technologies and creative crowd-sourcing might together help scatter the disfigurement of mental ailments. As HEIs continue to address the growing mental health needs of students, a commitment to these ethical principles will not only enhance trust but also promote a culture of care and resilience. Moving forward, ongoing training, clear policies and a proactive approach are key to balancing support with professionalism.

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