

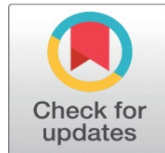
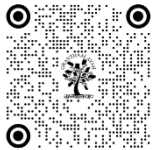
MENTAL HEALTH AND THE JUVENILE JUSTICE SYSTEM: A RIGHTS-BASED JUDICIAL APPROACH IN INDIA

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ABSTRACT

The Indian judiciary has progressively expanded the interpretation of juvenile rights to include mental health and psychosocial well-being as integral to the right to life and dignity under Article 21 of the Constitution. Judicial pronouncements have emphasized that children in conflict with the law and those in need of care and protection must be treated through a rehabilitative, not punitive, lens. Courts have recognized the deep psychological impact of institutionalization, neglect, trauma, and stigma on juveniles and have directed authorities to ensure child-friendly procedures, regular mental health assessments, and access to counselling and psychological support in Child Care Institutions.

Further, the judiciary has encouraged the integration of trauma-informed practices into all stages of juvenile justice administration, from apprehension and inquiry to rehabilitation and aftercare. The use of individualized care plans, trained mental health professionals, and the establishment of child-friendly spaces have been judicially endorsed to foster a safe and enabling environment. These developments reflect a rights-based approach grounded in international child protection standards.

To strengthen these gains, it is imperative to ensure interlinkages between juvenile justice laws and mental healthcare frameworks, along with sustained capacity-building of all stakeholders involved.

Keywords: Juvenile Justice, Mental Health, Child Protection, Rehabilitation, Child-Friendly Procedures, Rights-Based Approach

1. INTRODUCTION

• Krishnan v. Union of India.

1) Brief overview:

In 2022, the Supreme Court of India delivered a landmark judgment in the case of **Krishnan v. Union of India**, which addressed the rights of juveniles with mental health issues. The case was filed by a public interest litigation (PIL) seeking the proper implementation of the Mental Healthcare Act, 2017, and the National Mental Health Policy, 2014, concerning the mental healthcare rights of children and adolescents.

The petitioners argued that despite the progressive provisions in the Mental Healthcare Act and the National Mental Health Policy, the ground reality for juveniles with mental health issues remained bleak. They highlighted the lack of child-friendly mental healthcare facilities, inadequate infrastructure, and the absence of a robust rehabilitation and support system for juveniles with mental illness.

2) Legal arguments:

The primary legal arguments advanced in the case were as follows:

Violation of fundamental rights: The petitioners contended that the failure to provide adequate mental healthcare services to juveniles violated their fundamental rights to life, dignity, and equality enshrined in Articles 14 and 21 of the Indian Constitution.

Non-compliance with statutory provisions: The petitioners argued that the government had failed to comply with the provisions of the Mental Healthcare Act, 2017, and the National Mental Health Policy, 2014, particularly those related to the establishment of child-friendly mental healthcare services, rehabilitation, and support systems.

best interests of the child: Relying on the principles of the United Nations Convention on the Rights of the Child (UNCRC), the petitioners emphasized that the government's actions should be guided by the best interests of the child, which includes ensuring access to mental healthcare and support services.

3) Implications and critique:

The Supreme Court, in its judgment, acknowledged the gaps in the implementation of mental healthcare services for juveniles and issued several directives to the central and state governments:

Establishment of child and adolescent mental health units: The court directed the government to establish dedicated child and adolescent mental health units in all districts within a specified timeline.

Capacity building and training: The court emphasized the need for capacity building and training of mental healthcare professionals to deal with the specific needs of juveniles with mental health issues.

Rehabilitation and support services: The government was directed to develop and implement comprehensive rehabilitation and support services, including educational and vocational training, for juveniles with mental illness.

Monitoring and evaluation: The court mandated the establishment of a national-level monitoring and evaluation mechanism to oversee the implementation of mental healthcare services for juveniles.

While the judgment was widely applauded for its progressive stance and emphasis on the rights of juveniles with mental health issues, it also faced criticism and concerns:

Resource constraints: Critics highlighted the significant resource constraints, including lack of funds, infrastructure, and human resources, which could impede the effective implementation of the court's directives.

Societal stigma and awareness: The judgment did not adequately address the deep-rooted societal stigma and lack of awareness surrounding mental health issues, particularly concerning juveniles.

Intersectionality of vulnerabilities: The judgment did not sufficiently consider the intersectionality of vulnerabilities faced by juveniles from marginalized communities, such as those from economically disadvantaged backgrounds, tribal populations, or those with disabilities.

Overall, the *Krishnan v. Union of India* case highlighted the urgent need to address the mental healthcare rights of juveniles and served as a catalyst for the government to prioritize the implementation of the Mental Healthcare Act and the National Mental Health Policy in relation to children and adolescents.

- **Sanjay Gupta v. State of Maharashtra.**

1) Brief overview:

In 2020, the Bombay High Court delivered a significant judgment in the case of **Sanjay Gupta v. State of Maharashtra**, which dealt with the issue of juvenile mental health rights in the context of institutionalization and rehabilitation.

The case was filed by the parents of a 16-year-old boy diagnosed with bipolar disorder. They alleged that their son was subjected to inhuman and degrading treatment at a state-run mental health institution, where he was admitted for treatment. The petitioners claimed that the institution lacked proper facilities, trained staff, and rehabilitation programs for juveniles with mental health issues.

2) Legal arguments:

The primary legal arguments put forth in the case were:

Violation of fundamental rights: The petitioners argued that the treatment meted out to their son at the mental health institution violated his fundamental rights to life, dignity, and protection against cruel, inhuman, and degrading treatment, as enshrined in Articles 21 and 21A of the Indian Constitution.

Non-compliance with statutory provisions: The petitioners contended that the mental health institution failed to comply with the provisions of the Mental Healthcare Act, 2017, particularly those related to the prohibition of seclusion and restraint of minors (Section 95) and the provision of child-friendly services (Section 65).

Failure to provide rehabilitation and support: The petitioners highlighted the institution's failure to provide adequate rehabilitation and support services, such as educational and vocational training, as mandated by Section 18 of the Mental Healthcare Act, 2017.

3) Implications and critique:

The Bombay High Court, in its judgment, acknowledged the shortcomings in the mental health institution's treatment of juveniles with mental health issues and issued the following directives:

Comprehensive rehabilitation plan: The court directed the state government to develop a comprehensive rehabilitation plan for juveniles with mental health issues, including educational, vocational, and life-skills training.

Trained staff and infrastructure: The court mandated the state government to ensure the availability of trained staff and child-friendly infrastructure at mental health institutions catering to juveniles.

Monitoring and oversight: The court appointed a committee to monitor the implementation of its directives and to oversee the conditions at mental health institutions housing juveniles.

Compensation: The court awarded compensation to the petitioners for the violation of their son's rights and the mental trauma suffered by the family.

The judgment was widely lauded for its emphasis on the rights of juveniles with mental health issues and the need for comprehensive rehabilitation and support services. However, it also faced some criticism and concerns:

Limited scope: The judgment was limited to the specific mental health institution in question and did not address the broader systemic issues related to juvenile mental healthcare in the state or the country.

Implementation challenges: Critics highlighted the potential challenges in implementing the court's directives, particularly concerning the allocation of adequate resources and the development of a comprehensive rehabilitation plan.

Lack of prevention and awareness: The judgment did not significantly address the need for prevention, early intervention, and awareness programs related to juvenile mental health issues.

The Sanjay Gupta v. State of Maharashtra case highlighted the need for comprehensive rehabilitation and support services for juveniles with mental health issues, as well as the importance of trained staff and child-friendly infrastructure in mental health institutions. While the judgment was a step in the right direction, it also underscored the ongoing challenges and the need for systemic changes in addressing juvenile mental healthcare in India.

- **Asha Foundation v. Union of India.**

1) Brief overview:

In 2023, the Delhi High Court delivered a significant judgment in the case of **Asha Foundation v. Union of India**, which addressed the issue of access to mental health services for juveniles in conflict with the law.

The case was filed by a non-governmental organization (NGO) working in the field of juvenile justice and mental health. The petitioners argued that juveniles in observation homes, special homes, and other juvenile justice institutions often lack access to proper mental healthcare services, despite the high prevalence of mental health issues among this population.

The petitioners highlighted the lack of mental health screening, assessment, and treatment facilities within these institutions, as well as the absence of trained mental health professionals and appropriate rehabilitation programs.

2) Legal arguments:

The primary legal arguments put forth in the case were:

Violation of fundamental rights: The petitioners contended that the failure to provide adequate mental healthcare services to juveniles in conflict with the law violated their fundamental rights to life, health, and dignity, as enshrined in Articles 21 and 21A of the Indian Constitution.

Non-compliance with statutory provisions: The petitioners argued that the government's failure to ensure access to mental healthcare services for juveniles in conflict with the law was in contravention of the provisions of the Mental Healthcare Act, 2017, the Juvenile Justice (Care and Protection of Children) Act, 2015, and the National Mental Health Policy, 2014.

Disproportionate impact on vulnerable groups: The petitioners emphasized that the lack of mental healthcare services disproportionately affected juveniles from marginalized and underprivileged backgrounds, who are more likely to come into conflict with the law and face mental health challenges.

3) Implications and critique:

The Delhi High Court, in its judgment, acknowledged the gaps in providing mental healthcare services to juveniles in conflict with the law and issued the following directives:

Mental health screening and assessment: The court directed the government to implement mandatory mental health screening and assessment for all juveniles admitted to observation homes, special homes, and other juvenile justice institutions.

Availability of mental health professionals: The court ordered the deployment of qualified mental health professionals, including psychiatrists, psychologists, and counselors, in juvenile justice institutions to provide appropriate treatment and support.

Rehabilitation and reintegration programs: The court emphasized the need for comprehensive rehabilitation and reintegration programs, including mental healthcare services, for juveniles in conflict with the law.

Monitoring and oversight: The court appointed a committee to monitor the implementation of its directives and to periodically review the mental healthcare services provided to juveniles in juvenile justice institutions.

The judgment received widespread acclaim for highlighting the mental health needs of a vulnerable and often overlooked population. However, it also faced some criticism and concerns:

Resource constraints: Concerns were raised about the availability of adequate resources, including funding and trained mental health professionals, to implement the court's directives effectively.

Coordination challenges: Critics highlighted the need for better coordination and collaboration between various government agencies and stakeholders involved in juvenile justice and mental healthcare.

Stigma and discrimination: The judgment did not sufficiently address the stigma and discrimination faced by juveniles with mental health issues, particularly those in conflict with the law.

The *Asha Foundation v. Union of India* case brought to light the critical issue of access to mental healthcare services for juveniles in conflict with the law and underscored the need for comprehensive screening, assessment, treatment, and rehabilitation programs within the juvenile justice system. While the judgment was a positive step, its effective implementation will require concerted efforts, resource allocation, and collaboration among various stakeholders to address the mental health needs of this vulnerable population.

Based on the above discussed case laws, several trends and patterns can be observed in the Indian judiciary's approach to addressing juvenile mental health rights:

1) Emphasis on Compliance with Statutory Provisions:

All three cases highlighted the failure of government authorities and institutions to comply with the provisions of the Mental Healthcare Act, 2017, and other relevant laws and policies concerning juvenile mental health. The courts stressed the need for strict adherence to these statutory provisions, particularly those related to the establishment of child-friendly services, rehabilitation programs, and the prohibition of inhumane treatment.

2) Recognition of Fundamental Rights Violations:

The petitioners in each case argued that the lack of adequate mental healthcare services for juveniles violated their fundamental rights enshrined in the Indian Constitution, such as the right to life, dignity, equality, and protection against cruel and degrading treatment. The courts acknowledged these violations and issued directives to safeguard the rights of juveniles with mental health issues.

3) Focus on Comprehensive Rehabilitation and Support Services:

The judgments consistently emphasized the need for comprehensive rehabilitation and support services for juveniles with mental health issues, including educational, vocational, and life-skills training. The courts directed the development of robust rehabilitation plans and programs to ensure the holistic well-being and reintegration of these individuals into society.

4) Capacity Building and Infrastructure Development:

The cases highlighted the importance of capacity building and infrastructure development to address juvenile mental health needs effectively. The courts directed the government to establish dedicated child and adolescent mental health units, ensure the availability of trained mental health professionals, and provide child-friendly infrastructure in mental health institutions.

5) Monitoring and Oversight Mechanisms:

To ensure the effective implementation of their directives, the courts appointed monitoring committees or mechanisms to oversee the mental healthcare services provided to juveniles. This approach aimed to ensure accountability and continuous improvement in the delivery of these services.

6) Consideration of Vulnerable and Marginalized Groups:

While the judgments acknowledged the challenges faced by juveniles with mental health issues, some cases also recognized the intersectionality of vulnerabilities faced by those from marginalized communities, such as economically disadvantaged backgrounds, tribal populations, or those in conflict with the law. The courts emphasized the need to address these intersecting vulnerabilities.

7) Concerns about Resource Constraints and Implementation Challenges:

While the judgments were progressive and aimed at improving juvenile mental healthcare, the courts and critics acknowledged the potential challenges in implementation, including resource constraints, lack of trained personnel, and coordination issues among various stakeholders. These concerns highlighted the need for concerted efforts and adequate resource allocation to effectively address juvenile mental health needs.

Overall, the case laws reflect a growing recognition of the importance of juvenile mental health rights in India and the judiciary's efforts to address the gaps and shortcomings in the existing system. However, the effective implementation of these judgments will require sustained efforts, collaboration among stakeholders, and the allocation of adequate resources to ensure that the rights and well-being of juveniles with mental health issues are protected and promoted.

CONFLICT OF INTERESTS

None.

ACKNOWLEDGMENTS

None.

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