National Law University Delhi

Mental Health Policy 2026

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I. Preamble

National Law University Delhi (NLU Delhi) affirms that mental health and emotional well-being are integral to academic success, personal growth, and a healthy campus environment. The University recognises that law school can be intensely demanding not only intellectually, but also emotionally and socially and that these pressures may disproportionately affect students from historically marginalised, underrepresented, or vulnerable backgrounds.

This policy reflects NLU Delhi's commitment to building a campus culture where mental health is understood not merely as the absence of illness, but as the presence of safety, support, and dignity. It aims to embed care and wellbeing into the institution's everyday functioning, from classroom structures and hostel life to administrative decision-making.

Mental health must be proactively protected, not reactively managed. This policy sets out an integrated framework that is trauma-informed, student-centric, and rights-based, ensuring that every member of the NLU Delhi community has access to care, the freedom to seek help without fear or stigma, and the institutional backing necessary to live, learn, and thrive.

II. Vision and Values

Vision:

To establish NLU Delhi as a compassionate academic space where mental health is a shared institutional responsibility and where all students, regardless of background or identity, are able to access care, express vulnerability, and pursue their education with dignity and support.

Core Values:

- **Empathy and Care:** All community members, students, faculty, and staff, are entitled to kindness, respect, and non-judgmental support.
- **Inclusion and Accessibility:** Mental health systems must centre the lived realities of students across lines of caste, gender identity, sexual orientation, disability (including neurodivergence), religion, language, and class.
- **Autonomy and Choice:** Individuals have the right to choose how and when to access mental health support, including the option to decline.
- **Preventive and Structural Approach:** The university must address not just symptoms but also the institutional conditions that contribute to student distress.

- **Accountability and Transparency:** Mental health is not a private burden; rather, it is an institutional concern requiring active responsibility from university leadership.

III. Scope and Applicability

This policy applies to the following stakeholders of the NLU Delhi community:

- All enrolled students (Across undergraduate, postgraduate, and PhD programmes including those on exchange or academic leave);
- Full-time, Contractual, and Visiting Faculty Members;
- Hostel Wardens, Administrative Staff and Non-Teaching Staff.
- Interns, research assistants, and short-term visiting scholars affiliated with the University in any academic, research, or residential capacity.

IV. Objectives

The Mental Health and Wellbeing Policy of NLU Delhi is designed to:

- Institutionalise a comprehensive, rights-based framework for mental health that is accessible, inclusive, and free from stigma;
- Ensure timely and confidential support through professional mental health services on campus;
- Facilitate academic accommodations, flexible deadlines, and medical leave on mental health grounds, without punitive consequences;
- Encourage open dialogue, awareness, and peer engagement to normalise conversations around mental health;
- Prevent systemic causes of harm by evaluating and reforming institutional practices that contribute to student stress and burnout;
- Establish clear accountability mechanisms for grievance redressal, service monitoring, and periodic policy review.

V. Mental Health Governance Framework

To ensure coordinated, accountable, and responsive implementation of this Policy, National Law University Delhi shall constitute a Mental Health Task Force (MHTF) as the central committee responsible for the design, oversight, and continual improvement of mental health and wellbeing infrastructure on campus.

A. Leadership and Composition of the Mental Health Task Force (MHTF)

1. Leadership Structure

The MHTF shall be led by a governance model that balances administrative authority, clinical expertise, and student voice:

- **Chairperson:** The Registrar shall serve as the administrative head of the MHTF and shall be responsible for ensuring institutional compliance, resource allocation, and inter-departmental coordination.
- **Secretary:** The Dean of Students' Welfare shall serve as the Secretary of the MHTF and be responsible for recording proceedings, coordinating internal communication, and executing routine follow-ups. The Secretary shall not possess any veto power or final authority in decisions concerning clinical care, student accommodations, or service design.

2. Full Composition of the MHTF

The MHTF shall be a standing institutional body composed of the following members:

Position	Status	Role
Registrar	Ex-Officio Chair	• Presides over all meetings of the MHTF and ensures the timely implementation of all decisions. • Coordinates with the Finance and Administrative department to ensure adequate funds, space, and staffing for mental health infrastructure. • Ensures that all statutory and regulatory responsibilities (UGC guidelines, audit reporting, etc.) are fulfilled. • Maintains neutrality and institutional oversight without intervening in clinical decision-making or student-specific cases. • Signs and forwards the Annual Mental Health Report to the Vice Chancellor and relevant university authorities.
Dean of Students' Welfare	Ex-Officio Secretary	• Coordinates meeting logistics, agenda circulation, and official communication of the MHTF. • Maintains records of proceedings, follow-up action items, and timelines.

Position	Status	Role
		• Facilitates liaison between the Task Force and other university bodies (Office of Deans, SBC Committees, Hostel Administration, etc.). • Responds to non-clinical student needs flagged by the MHTF. • Ensures that mental health concerns raised in student grievance forums are appropriately routed to the MHTF.
Dean of Academic Affairs	Ex-Officio Member	• Acts as the academic interface of the MHTF, ensuring mental health policy implementation is academically feasible, inclusive, and responsive to student needs. • Serves as the Chair of the Academic Wellness Sub-Group, coordinating institutional frameworks for academic accommodations. • Functions as a bridge between the Academic Wellness Sub-Group and the MHTF, conveying key academic insights, trends, and student feedback into policy action. • Reviews anonymised data on academic distress (e.g., deferments, incomplete grades, leave requests) to recommend structural reforms. • Facilitates early identification systems through academic units while upholding confidentiality and dignity. • Supports the reintegration of students post-crisis, including workload calibration and tutorial planning. • Collaborates with faculty on developing inclusive pedagogical practices and leads periodic academic sensitisation drives.

Position	Status	Role

Chief Hostel Warden	Ex-Officio Member	• Acts as the primary liaison between residential student life and the Mental Health Task Force.
		• Coordinates with all hostel wardens and ensures they are sensitised to:
		  ○ Warning signs of distress,
		  ○ Handling disclosures,
		  ○ Referral mechanisms to counsellors and nurses.
		• Oversees the implementation of wellness-enhancing hostel policies, including:
		  ○ Quiet hours enforcement,
		  ○ Curated wellbeing spaces,
		  ○ Preventive campaigns.
		• Plays a central role in midnight/emergency intervention in coordination with fellow wardens, especially for suicidal ideation, self-harm, substance overdose, or panic attacks.
		• Assists in facilitating post-crisis residential accommodations, such as:
		  ○ Temporary room shifts for safety,
		  ○ Relocation away from triggering environments,
		  ○ Support in returning to the hostel after hospitalisation or leave.
		• Ensures non-intrusive and stigma-free protocols in hostel-level responses, particularly avoiding public identification or punishment of vulnerable students.
		• Works with student volunteers and the Peer Support Network to promote inclusion, conflict resolution, and solidarity in hostels.

Position	Status	Role
		• The Chief Warden shall not act as a disciplinary authority in mental health-related incidents unless there is a direct threat to life or others' safety. Their primary responsibility shall be welfare-oriented and non-punitive.
Campus Mental Health Counsellors	Ex-Officio Members	• Provide regular updates on student usage of services (anonymised). • Highlight gaps in access, support trends, and evolving student needs. • Ensure student feedback is collected and analysed periodically to enhance service responsiveness. • Support student mobilisation and peer-led initiatives under clinical supervision. • Collaborate in emergencies and maintain a clear referral escalation system. • Shall be trained in queer-affirmative, trauma-informed, and culturally sensitive practices, and be supported with ongoing supervision and professional development.
Trained Student First Responders or Any Two Elected Student Representatives (With at least one identifying from a historically marginalised group (Dalit, Adivasi, Muslim, queer, disabled, first-generation learner,	Elected Members	• Represent the lived experiences, concerns, and feedback of students across different years and programmes. • Organise student consultations, town halls, and listening circles to inform the MHTF's work. • Safeguard the student perspective in discussions around academic load, peer dynamics, and policy execution. • Mobilise student volunteers for peer support, awareness campaigns, and stigma reduction drives. • Ensure that confidential channels are known and accessible to peers in distress.

Position	Status	Role
etc.), with nomination supported by peers or affinity collectives.)		• **Note:** Student representatives must recuse themselves from case-specific deliberations where confidentiality is at stake, unless expressly permitted by the student concerned.
External Expert (Mental Health)	Invited Member	• Reviews the MHTF's functioning with an external, independent lens to ensure accountability. • Advises on trauma-informed legal frameworks, disability accommodations, and intersectionality. • Participates in clinical audits (anonymised) and offers suggestions for structural reforms. • Serves as an ombudsperson in escalated grievance cases if internal resolution fails. • Mentor internal members on global best practices and compliance with mental health.

B. Roles and Responsibilities of the Mental Health Task Force (MHTF)

The MHTF shall serve as the principal institutional body for strategising, coordinating, and monitoring mental health and wellbeing mechanisms at NLUD. Its functions shall be proactive, preventive, and responsive in nature.

1. Policy Implementation and Strategic Planning

- Translate the objectives of this Mental Health Policy into semester-wise and annual operational plans.
- Set clear timelines, responsibilities, and resource allocations for each arm of implementation (clinical, academic, and administrative).
- Ensure all policy directions are in line with constitutional principles, UGC guidelines, and best practices in student mental health.

2. Monitoring Mental Health Services

- Oversee the functioning of counsellors, psychologists, and medical personnel to ensure availability, continuity, and confidentiality of services.

- Approve protocols for intake, emergency referrals, session documentation, and informed consent.
- Establish a structured and time-bound referral pathway for students requiring specialised psychiatric, psychological, disability-related, or inpatient services, with clearly designated responsibilities, response timelines, and follow-up procedures. All counsellors, wardens, faculty members, and relevant administrative personnel involved in the referral process shall receive periodic training and capacity-building to ensure coordinated and trauma-informed care.
- Ensure that mental health services are available in multiple languages where possible, and are sensitive to caste, gender, sexuality, disability, and trauma histories.

3. **Infrastructure and Resource Management**
   - Recommend budget allocations and infrastructural requirements (counselling rooms, waiting spaces, tele-health tech, etc.) to the university.
   - Ensure digital appointment systems, confidentiality safeguards, and anonymised data tracking are in place.
4. **Student-Centric Reforms and Academic Integration**
   - Review academic structures (e.g., rigid deadlines, penal attendance policies, grading pressures) that may contribute to chronic stress.
   - Recommend accommodations such as deadline extensions, reduced course load, leave on mental health grounds, and alternative evaluation formats.
   - Coordinate with the Academic Wellness Sub-Group to institutionalise such changes through official rules or circulars.
   - Undertake periodic review of the nature, volume, sequencing, and clustering of assignments, research papers, presentations, and examinations across the semester to reduce chronic academic overload, overlapping deadlines, and assessment concentration. The University shall encourage diversified and pedagogically appropriate modes of evaluation that maintain academic rigour while reducing avoidable psychological stress and burnout.
5. **Confidential Feedback and Escalation System**
   - Establish a confidential and accessible feedback system where students can:
     - Anonymously rate and comment on counselling services,
     - Raise concerns about misconduct or unresponsiveness,
     - Seek redressal for mental health-related grievances without fear of academic retaliation.
   - All grievances shall be recorded, reviewed, and resolved within a specified timeframe, with escalation to an external ombudsperson if required.

6. Crisis Response and Emergency Protocols

- Maintain and update a Mental Health Emergency SOP that includes:
  - 24x7 contact persons,
  - Triage protocol (including hostel, medical, and peer response),
  - Coordination with local hospitals or psychiatric care providers,
  - Post-crisis recovery, academic support, and follow-up counselling.
  - Conduct mock drills and training for key staff and student volunteers.

7. Training, Sensitisation, and Peer Engagement

- Conduct mandatory mental health sensitisation sessions for:
  - All incoming students (during orientation),
  - Hostel wardens and security staff,
  - Faculty and administrative personnel.
  - Support the formation and training of a Peer Support Network, ensuring supervision, debriefing, and non-hierarchical engagement.

8. Data Collection, Review, and Reporting

- Maintain anonymised data on:
  - Number and nature of counselling sessions,
  - Requests for academic accommodations,
  - Crises managed and interventions made.
- Prepare an Annual Mental Health Report containing:
  - Trends and patterns (without identifying individuals),
  - Challenges faced,
  - Structural recommendations for the university.
- Share an executive summary with the student body and a full report with the Vice Chancellor.

9. Policy Review and Amendments

- Review this policy biennially (once every two academic years) or sooner if required by student mobilisation, legal reform, or clinical advice.
- Ensure a participatory amendment process involving student representatives and service users.

C. Governance and Implementation

1. Oversight Structure

The Mental Health Task Force (MHTF) shall serve as the primary body responsible for the planning, coordination, monitoring, and review of all mental health and wellness initiatives at NLU Delhi.

The Task Force shall operate with operational autonomy, interdisciplinary collaboration, and strict adherence to principles of confidentiality, student dignity, and clinical ethics.

2. Institutional Hierarchy

Vice-Chancellor (VC):

The Vice-Chancellor shall serve as the ultimate institutional authority responsible for ensuring the effective implementation of the Mental Health Policy.

While not involved in individual case deliberations to preserve confidentiality, the VC shall:

- Review the Annual Report submitted by the MHTF.
- Ensure adequate budgetary allocation, infrastructure, and staffing support.
- Approve strategic partnerships with external mental health organisations.
- Invite an External Expert to the MHTF, ensuring diversity, inclusion, and professional expertise.
- Intervene when systemic reforms are necessary, especially in cases of institutional failure or repeated distress patterns.
- Promote a visible, top-down institutional culture of mental health awareness and anti-stigma discourse.

Registrar (Chairperson, MHTF):

Responsible for convening meetings, enabling administrative implementation, and forwarding key reports to the VC and relevant university bodies. The Registrar shall convene the MHTF meeting at least once in a semester and two in an academic year.

Dean of Students' Welfare (Secretary, MHTF):

Manages documentation, internal communications, and facilitates coordination between student-facing departments.

MHTF Members:

Play specialised roles across clinical care, academic reform, residential life, peer networks, and policy audits, as detailed in the Roles section.

3. Reporting and Accountability

The MHTF shall prepare an Annual Mental Health Report, highlighting:

- Service usage data (anonymised),

- Policy implementation status,
- Infrastructure gaps,
- Feedback from students,
- Recommendations for systemic reform.

The VC shall review this report and relevant statutory bodies (Governing Council, Executive Council, Academic Council), and appropriate institutional responses shall be recorded.

4. Confidentiality and Non-Interference

- The governance structure shall preserve the clinical independence of psychologists, counsellors, and medical professionals.
- No member of the administration, including the VC, shall interfere in:
    - Individual care plans,
    - Counselling content,
    - Student disclosures,
    - unless expressly authorised by law or in case of a life-threatening emergency.

5. Language Access and Cultural Translation

NLU Delhi recognises that its student community reflects India's linguistic and cultural diversity. Effective mental health care must therefore be accessible across languages and attuned to the cultural contexts in which students express, experience, and understand distress.

As part of the university's strategic implementation of this Mental Health Policy:

- Mental health services shall be made available in at least two to three Indian languages, based on student demographics, demand, and feasibility.
- Services may be offered either through in-house counsellors or via formal partnerships with external mental health organisations that provide linguistically competent care.
- All therapeutic communication shall encourage the use of culturally relevant metaphors, idioms, and reference points, especially for students from marginalised, rural, or non-English-medium educational backgrounds.
- During intake sessions, peer support interventions, or crisis response, efforts shall be made to provide translation or interpretation assistance upon request or apparent need.

- The MHTF Secretariat shall ensure that key materials (service directories, consent forms, helpline instructions) are available in plain, translated formats accessible to non-English-speaking students.

6. Academic Wellness Sub-Group

To ensure that the academic functioning of the university is fully responsive to mental health needs, an Academic Wellness Sub-Group shall function as a dedicated interface between the Mental Health Task Force (MHTF), academic authorities, and student representatives.

This Sub-Group shall meet once every quarter, or more frequently if needed, and shall report key issues and recommendations to the Registrar and MHTF.

Dean of Academic Affairs (DoAA)

- Acts as the nodal authority for academic reform driven by mental health concerns raised by the MHTF.
- Coordinates with the Registrar and Dean of Students' Welfare to integrate academic flexibility in cases of chronic distress, temporary crises, or clinical referrals.
- Supports the development of institutional tools such as:
    - Deferred assessment guidelines,
    - Temporary academic load reduction,
    - Exam rescheduling for medically certified mental health needs.

Programme Convenors (UG, PG, PhD)

- Serve as the first academic point of contact for students requiring accommodation due to mental health-related distress.
- Ensure strict non-discrimination and confidentiality when handling requests for:
    - Extensions,
    - Semester withdrawal,
    - Pass/fail conversion,
    - Academic leave or deferral.
    - Coordinate with faculty members to sensitise them to pedagogical stressors, feedback culture, and student burnout.
- Participate in policy formulation and pilot programmes for:
    - Wellness breaks,
    - Mental health leave policies,
    - Low-stress curriculum reforms in each programme.

Convenors of the Academic Committee and the Student Welfare Committee

- Represents student concerns around workload, pedagogy, and exam stress.
- Coordinates the collection of anonymised feedback from student cohorts to present systemic issues.
- Works with faculty to identify high-pressure structures and suggest course-level adjustments.
- Serves as liaison between MHTF and student-led initiatives.
- Identifies barriers to accessing welfare-related accommodations.
- Supports communication campaigns to raise awareness on students' academic rights under the mental health policy.

D. Counselling and Mental Health Services Intake and Informed Consent

Before the commencement of the first counselling session or any other mental health service provided through the University, including psychiatric consultation, psychological assessment, tele-consultation, referral-based care, or other mental health interventions, every student shall be provided with a clear and accessible Informed Consent Form (Annexure E). The form shall explain the nature and scope of the service being accessed, confidentiality protections, the limits of confidentiality (including situations involving imminent risk of harm, legal obligations, medical emergencies, or other circumstances requiring disclosure), record-keeping practices, referral procedures, and the student's rights, including the right to ask questions, seek clarification, and discontinue or decline services where appropriate.

Mental health services shall ordinarily commence only after the student has voluntarily signed the Informed Consent Form. The signed form shall be maintained confidentially by the relevant mental health service provider in accordance with applicable legal and ethical standards.

E. Academic Accommodations & Relief Policies

1. Guiding Principles

Recognising the link between academic stress and mental health, NLU Delhi affirms that academic accommodations are not concessions but an essential component of an inclusive, empathetic, and rights-based education system.

Academic accommodations will be granted to students experiencing:

- Short-term or long-term mental health challenges,
- Diagnosed psychiatric conditions,
- Trauma, bereavement, burnout, or psychosomatic distress,
- Periods of emotional or psychological crisis, whether clinically diagnosed or pending assessment.

All accommodations must be processed without discrimination, breach of confidentiality, or academic stigma.

2. Categories of Accommodations

A. Short-Term Relief Measures

Applicable during periods of temporary crisis, panic attacks, or acute stress:

- Deadline extensions for assignments, papers, and project submissions.
- Rescheduling of internal assessments.
- Attendance leniency during a clinically documented mental health episode (including those awaiting diagnosis).
- Exam de-scheduling within a short window (with Registrar and DoAA's coordination).

B. Long-Term Accommodations

Granted for recurring or chronic mental health conditions with support from medical documentation:

- Temporary academic load reduction (drop one seminar/credit deferment).
- Conversion of grade to Pass/Fail (in seminar/non-GPA subjects), where applicable.
- Leave of absence (with assured re-entry pathway and academic integration).
- Semester withdrawal with credit preservation (subject to consultation).

C. Peer and Pedagogical Adjustments

- Priority access to note-sharing circles or recorded lectures (where permissible).
- Flexible seating, extra time, or quiet space during exams (based on psychologist recommendation).
- Reduced participation requirements in class (for anxiety, trauma triggers, etc.).
- Reduced penalisation for reduced group project participation due to ongoing mental health challenges.
- Allow use of screen readers, speech-to-text tools, or sensory aids (e.g., noise-cancelling headphones) in classrooms for students with neurodivergence or trauma symptoms, based on professional recommendations.

D. Neurodivergence and Disability-Based Accommodations

Recognising that neurodivergent conditions exist across a spectrum and may affect learning, communication, executive functioning, sensory processing, attention, and examination performance in different ways, the University shall provide individualised accommodations based on functional needs rather than a one-size-fits-all model.

Accommodations may include, where appropriate:

- Extended examination time;
- Flexible attendance and participation requirements;
- Access to quiet or low-stimulation examination environments;
- Permission to use assistive technologies, screen readers, speech-to-text software, sensory aids, fidget devices, or noise-cancelling headphones;
- Flexible deadlines and staged submission of major assignments;
- Recorded lectures, note-taking support, or accessible learning materials;
- Alternative modes of assessment where pedagogically appropriate;
- Structured communication of academic expectations and timelines.

Accommodation decisions shall be made through an individualised assessment process involving the student, mental health professional or disability specialist, and relevant academic authorities, with periodic review and adjustment based on the student's evolving needs.

3. Access and Approval Procedure

- Students may approach the Mental Health Counsellors, Psychologists, or Peer Support Network in confidence.
- Based on need and documentation (where possible), a recommendation will be issued to the Dean of Academic Affairs.
- The Dean will coordinate with the relevant Programme Convenor to ensure a seamless accommodation is extended.
- No medical diagnosis shall be disclosed to faculty members or peers unless voluntarily shared by the student.
- Students shall not be required to justify their condition to multiple authorities repeatedly.

Urgent accommodations during midterms or end-terms may be processed directly through a fast-tracked email loop involving the Counsellor, Dean of Academic Affairs, and relevant Programme Convenor.

4. Anti-Discrimination and Appeals

- No faculty member or administrator shall make derogatory or dismissive remarks about any accommodation granted.
- Students who face discrimination or denial of relief may:
    - File a confidential complaint and seek an informal resolution with the MHTF,
    - Appeal formally to the Vice Chancellor via the Registrar's Office.

VI. Emergency Response and Post-Crisis Care Protocols

A. Definition of Crisis

A mental health emergency refers to any situation where an individual's thoughts, emotions, or behaviour pose a risk to their own life or safety, or that of others. This includes (but is not limited to):

- Suicidal ideation or attempts,
- Self-harm with intent or history,
- Panic attacks with medical distress,
- Psychotic breaks or severe dissociation,
- Aggressive or erratic behaviour linked to psychiatric episodes,
- Trauma-related breakdowns (including sexual or physical violence disclosures).

B. Immediate Response Protocol

1. First Responder Framework

- A trained counsellor or psychologist (whoever is available on campus) shall be the first point of contact during a mental health emergency.
- Hostel wardens, Peer Support Network members, security staff, or faculty may escort the student to safety but must:
    - Avoid emotional probing, disciplinary language, or pressuring the student to explain their condition,
    - Ensure physical safety and privacy, especially in public or residential settings,
    - Immediately notify the university's mental health counsellors.
- In situations occurring during class hours or inside hostels:
    - Prioritise the student's removal to a calm, safe space,
    - Involve the Chief Warden and medical nurse if the situation involves medical or physical risk.
- All first responders shall be trained to avoid harmful assumptions or intrusive language based on the student's sexuality, gender identity, caste background, disability status, or family history.

2. Medical Escalation

Where medical attention is required:

- The student will be taken to the designated partner hospital or referred for inpatient care with confidentiality preserved.
- University Ambulance shall be coordinated by the administrative staff or the Registrar's office.

3. Parent/Guardian Contact

Contact will be made only after assessing risk and consent, unless:

- The student is unconscious, severely impaired, or poses a life-threatening danger.
- In such cases, the Chief Warden, with the Registrar's approval, shall contact and ensure that communication is supportive and trauma-sensitive.

C. Post-Crisis Support and Reintegration

1. Stabilisation and Follow-Up

Within 24–72 hours of the crisis, the student shall be provided:

- A follow-up counselling session,
- An optional wellness meeting with a student mentor or peer support worker,
- Support in academic and residential arrangements, such as temporary leave, room change, or deferment of deadlines.

A re-integration plan shall also include:

- Identity-safe practices, such as not requiring public disclosure of the reason for the crisis or mental health absence;
- Access to an affinity-based peer mentor (e.g., same gender, caste, or language background) upon request, to ensure emotional safety and belonging.

2. No Penalisation or Disciplinary Tagging

- No student undergoing a mental health crisis shall be issued show-cause notices, disciplinary warnings, or negative annotations in their academic or hostel records.
- Crisis shall never be interpreted as "misconduct" or "indiscipline."

3. Postvention and Community Healing

In the event of a campus-wide crisis or suicide, the university shall:

- Immediate pause of academic activities for a minimum of 48 hours
- Avoid speculative or triggering communication.
- Host healing spaces facilitated by trained professionals.
- Distribute vetted resources on grief, survivor support, and trauma.
- Offer counselling hours for friends, roommates, or faculty affected.
- Conduct an institutional audit of stressors that may have contributed (academic, social, structural).

4. Confidential Incident Reporting

- The Dean of Student Welfare shall prepare a crisis report in consultation with the Dean of Academic Affairs and the Chief Warden, anonymised where appropriate, and submit it to the Registrar and Chairperson, MHTF.
- The report shall include:
    - Timeline of events,
    - Reasons,
    - Measures taken,
    - Recommendations for systemic change.

These reports shall not contain any identifying personal or clinical details unless mandated by law or medical necessity.

D. Community-Building and Preventive Measures

At the heart of this policy is the belief that mental health is not merely a response to crisis but a daily collective practice. Prevention requires a proactive, participatory culture that reduces isolation, encourages help-seeking, and dismantles stigma.

E. Preventive Mental Health Screening

The University may conduct periodic mental health screening using brief, validated, and voluntary screening tools to identify early signs of psychological distress, anxiety, depression, burnout, or other concerns. Screening shall be treated as a preventive public-health measure rather than a diagnostic exercise. Appropriate follow-up protocols, confidential referrals, and informed consent procedures shall be established for students who may benefit from further assessment or support.

F. Periodic Mental Health and Well-Being Sessions

The University shall institute a bi-weekly Mental Health Hour, preferably every alternate Saturday or another designated academic period, to promote emotional awareness, resilience, stress management, and help-seeking behaviour. These sessions shall be facilitated by qualified mental health professionals and may include psychoeducation, group discussions, coping-skills workshops, mindfulness and relaxation practices, and awareness programmes on topics such as burnout, relationships, neurodiversity, substance use, and suicide prevention. Participation models may be adapted for undergraduate, postgraduate, and research programmes while ensuring accessibility and inclusivity.

G. Suicide Prevention and Environmental Safety

The University shall adopt a comprehensive suicide prevention strategy that combines clinical, environmental, and institutional measures.

- Conduct periodic environmental safety audits of hostels, academic buildings, and other campus spaces to identify and mitigate suicide risk factors.
- Where feasible, implement environmental safety measures such as anti-ligature fixtures, secure access to rooftops and other high-risk areas, and appropriate architectural modifications.
- Ensure that crisis support services, emergency contact information, and referral pathways are clearly visible and accessible across campus.
- Review environmental safety measures annually through the MHTF in consultation with mental health professionals and relevant administrative authorities.

H. Affirmative Action and Cultural Safety

Mental health does not exist in a vacuum. It is deeply affected by one's social location, historical exclusions, and systemic marginalisations. NLU Delhi recognises that its responsibility to foster well-being includes addressing structural injustices that often go unacknowledged in traditional clinical models.

1. Recognition of Structural Trauma

- Mental health services and campus policies shall explicitly recognise and respond to:
  - Caste-based trauma and everyday discrimination,
  - Minority stress due to gender identity, sexual orientation, and religious or regional marginalisation,
  - Intergenerational trauma, especially among first-generation learners and marginalised communities.
- To ensure meaningful support:
  - These concerns shall be reflected in training modules for faculty, staff, and peer supporters,
  - Recruitment shall prioritise mental health professionals with cultural and caste sensitivity.

2. Culturally Safe Healing Spaces

The University shall maintain identity-affirming, non-clinical spaces of healing, such as:

- Cultural rooms for reflection, community rest, and dialogue,
- Quiet sensory rooms for students with neurodivergence or sensory distress,
- Peer-led affinity groups (e.g., Dalit, Adivasi, queer, disabled, or religious minority students) that are confidential and supported.

3. Non-Discrimination and Proactive Outreach

- No student shall face discrimination or delay in care, accommodation, or leave due to their caste, gender identity, disability, religion, or family background.
- The University shall pursue proactive engagement with vulnerable groups, recognising that stigma often deters help-seeking.

4. Peer Support Structures

Peer Support Network (PSN)

- A trained and confidential group of students across batches and programmes who provide emotional first-aid, resource navigation, and an empathetic listening space.
- PSN members shall:
    - Undergo structured training in basic mental health literacy, trauma sensitivity, and referral protocols.
    - Be supervised periodically by mental health professionals.
    - Be representative across gender, caste, region, sexuality and student backgrounds.
    - PSN is not a replacement for therapy but acts as a peer-led bridge to formal support.
- Training shall include handling disclosures, promoting inclusive language, and understanding referral protocols.

Awareness & Anti-Stigma Campaigns

The university shall conduct regular campaigns to:

- Normalise conversations around anxiety, burnout, trauma, and neurodiversity.
- Educate students and staff about early warning signs, how to support others, and institutional resources.
- Mark Mental Health Day, Suicide Prevention Week, and other global awareness days with inclusive programming.
- Maintain an online and offline repository of resources: self-help tools, therapist directories, FAQs on accommodations, etc.

Mental Health Library Initiative

To expand access to non-clinical, peer-driven mental health resources, the university shall support the creation of a "Mental Health Library" in collaboration with the Peer Support Network, the MHTF, and student-led collectives.

- The library shall house zines, artworks, comics, personal narratives, media, and multilingual resource guides that reflect the lived realities of queer, Dalit, Adivasi, neurodivergent, disabled, and other marginalised students.
- Contributions may be curated from existing open-source collections, student submissions, or community-authored materials, and should prioritise relatable, identity-affirming voices over clinical abstraction.
- The space may be physical (e.g., a corner in the library or wellness room) and/or digital (e.g., via the university intranet or ERP), ensuring anonymous browsing and easy accessibility.
- The MHTF shall provide oversight for content sensitivity, accessibility, and language diversity, without curating in ways that sanitise or erase lived experiences.

I. Faculty & Staff Sensitisation

Faculty Training

All faculty members must undergo periodic training in:

- Recognising signs of distress,
- Managing classroom dynamics with empathy,
- Responding to disclosures with sensitivity and boundaries,
- Respecting accommodations without hostility or penalisation.

Special focus shall be laid on caste-based trauma, gendered experiences of mental health, and academic anxiety linked to performance and ranking.

Non-Teaching Staff Training

Hostel wardens, security personnel, clerical and admin staff will be trained to:

- Respond calmly to distress,
- Direct students to appropriate resources,
- Avoid punitive or moralistic language.

VII. Student and Community Participation in Policy Review

- Students shall have the right to initiate mid-term review requests by submitting a written petition (endorsed by 10 enrolled students) to the Registrar.
- Suggestions and critiques may also be routed through the:
    - Student Welfare Committee,
    - Peer Support Network,

- Academic Committee,
- Direct submission to the MHTF.

- Students from marginalised identities may request an anonymous consultation or submission process for policy critiques, especially in cases involving power hierarchies or fear of retaliation.
- Revised drafts shall be debated and approved through a consultative process involving students, faculty, and staff.

VIII. Policy Amendment and Evolution

- This policy shall be reviewed for revision every two years or as warranted by changes in law, public health guidance, or institutional needs.
- Amendments must undergo vetting by the MHTF, be tabled before the Vice Chancellor for approval and implementation.

IX. Legal and Ethical Compliance

This policy shall operate in consonance with:

- The Mental Healthcare Act, 2017,
- UGC Guidelines for Student Mental Health and Wellbeing,
- Rights of Persons with Disabilities Act, 2016 (for neurodivergence),
- NMC/AICTE mental health directives (where applicable),
- International best practices from WHO and UNESCO on campus mental health.

X. Conclusion

This policy is both a safety net and a cultural compass. It acknowledges the pain that has gone unseen, the healing that is still ongoing, and the dignity that every member of this campus deserves. NLU Delhi shall not merely respond to mental health challenges; it shall lead with empathy, accountability, and resolve.

Annexure A: Contact Directory for Mental Health Support

Name/Designation	Email ID	Availability
Dr. Rajeev Kumar Bhatnagar, Physician	–	Monday – Saturday (4 PM to 6 PM)
Dr. Poulami Basu, Psychiatrist	–	Monday, Wednesday & Friday (3:45-4:45 PM)
Dr. Neena Yadav, Obstetrician and Gynaecologist	–	Tuesday & Thursday (4 PM to 5 PM)
Ms. Sheetal, Choudhary, Campus Mental Health Counsellor	sheetal.choudhary@nludelhi.ac.in	Monday to Wednesday – 1:00 PM to 8:00 PM; Thursday to Saturday – 11:00 AM to 6:00 PM
Ms. Akanksha Singh, Campus Mental Health Counsellor	akanksha.singh@nludelhi.ac.in	Monday to Wednesday – 12:00 PM to 7:00 PM; Thursday to Saturday – 11:00 AM to 6:00 PM
Ms. Gurbani Singh, Visiting Counsellor	gurbani.singh@nludelhi.ac.in	Sunday, 2:00 PM – 8:00 PM
Ms. Udisha Mriash, Visting Clinical Psychologist	udisha.mriash@nludelhi.ac.in	Saturday, 2:00 PM – 8:00 PM
Ms. Yogita, Staff Nurse	yogita@nludelhi.ac.in	Monday – Saturday (9 AM to 5 PM)
MindPeers - Mental Health Helpline	+91 8626899833	24/7

Annexure B: Request Form for Mental Health Accommodations

To be submitted to the Registrar's Office (Confidential)

Name/ Roll No.:

Programme & Year:

Type of Accommodation Requested:

- Extension for assignment(s)
- Deferred examinations
- Reduced course load
- Temporary leave of absence
- Room change
- Others: _____

Reason :

Do you have documentation from a counsellor, psychologist, clinical psychologist, or psychiatrist? (If available, please attach along with this form)?

Yes

No

In process

Signature:

Date:

(To be reviewed within 3 working days)

Annexure C: Peer Support Network (PSN) Confidentiality and Ethics Charter

All Peer Support Network (PSN) members agree to:

- Maintain strict confidentiality, unless the student is in danger.
- Avoid giving clinical advice or making diagnoses.
- Refrain from forming dual relationships (e.g., romantic, evaluative).
- Attend mandatory training and supervision.
- Prioritise referral over personal judgment.
- Use inclusive, non-discriminatory language and avoid ableist expressions.

Signature: _____

Name: _____

Date: _____

Annexure D: SOP For Mental Health Emergencies

Standard Operating Procedure (SOP) for Mental Health Emergencies

Mental Health Emergency SOP for Students and Faculty

1. **Identifying a Mental Health Emergency**

   A mental health emergency includes, but is not limited to:

- **Immediate risk of suicide or self-harm**- any suicidal ideation reported by the student, suicidal thoughts, self-mutilation, reported thoughts or ideations.
- **Severe panic attacks or extreme distress**
- **Psychotic episodes or disorientation**
- **Severe depression**

A student may be experiencing significant distress if they exhibit:

Emotional Signs:

- Excessive sadness, anxiety, or irritability.
- Sudden mood swings or emotional outbursts.
- Expressions of hopelessness or worthlessness.
- Social withdrawal from peers, faculty, or activities.

Behavioral Signs:

- Noticeable changes in academic performance (e.g., missed assignments, frequent absences).
- Sudden lack of motivation or disinterest in studies.
- Increased substance use (alcohol, drugs, excessive smoking).
- Increased conflicts with peers or faculty.

Physical Signs:

- Neglect of personal hygiene or sudden weight changes.
- Frequent headaches, fatigue, or unexplained physical complaints.
- Sleep disturbances—insomnia or excessive sleeping.

Verbal Cues:

- Mentioning feeling "trapped" or like a "burden."
- Talking about "not being here anymore" or wishing to "disappear."
- Frequent self-deprecating statements.

Signs of a Student Experiencing Psychosis

Psychosis involves a loss of contact with reality and may present with the following:

Cognitive Signs:

- Disorganized thoughts, confusion, or difficulty following conversations.
- Trouble concentrating or responding to questions appropriately.
- Paranoia—believing others are plotting against them.

Perceptual Signs:

- Hallucinations — hearing voices, seeing things that are not there.
- Delusions — believing things that are clearly untrue (e.g., "I am being watched," "I have special powers" "Someone is out to get me").

Behavioral Signs:

- Speaking in a disorganized or incoherent manner.
- Unusual or inappropriate emotional responses (e.g., laughing during serious discussions).
- Agitation, pacing, or excessive suspicion.
- Poor judgment or risky behaviors.

Severe Cases Requiring Immediate Medical Attention:

- Complete inability to communicate logically.
- Threats of harm to self or others.
- Extreme disorientation—forgetting their identity or location.

2. Immediate Steps for Students in Crisis

If you or someone you know is experiencing a crisis, **call the 24/7 Mental Health Helpline: 8626899833 (Mindpeers), 18008914416 (Tele-Manas), 02225521111 (i-CALL)**

Seek immediate support from the following:

- **Chief Warden: Prof. (Dr.) Niraj Kumar - 98910 80985**

- **Wardens:**
  Girls Hostel:
  - **Dr. Garima Tiwari, Associate Professor of Law - Warden**
  - **Dr. Monika Negi, Assistant Professor of Law - Warden**
  - **Dr. Kheinkor Lamar, Assistant Professor of Law- Warden**

  Boys Hostel:
  - **Dr. Prem Chand, Associate Professor of Law- Warden**
  - **Dr. Sidharth Dahiya, Deputy Registrar- Warden**

Campus Counsellors:

- **Ms. Sheetal Choudhary - 7289 972 307**
- **Ms. Akanksha Singh - 79066 56994**

Trained Peer Mentors:

- **Mr. Yash Kanwat (2028), SWC Co-Convenor, Cell: 9829427901**
- **Ms. Vedanshi Keyal (2027), SWC Convenor, Cell:9102153020**

- If in a public area, move to a quiet, safe space or an open space with no active means to harm oneself, checking with the person concerned what feels safe in the moment.
- Use campus mental health apps for immediate guidance (**Mindpeers, Calm, Headspace, Outlive Chat**).
- If the situation is critical (e.g., suicide attempt, complete loss of functioning), a member of faculty needs to be informed and consequently emergency services need to be informed (Venkateshwara Hospital or Akash Hospital)

3. Faculty and Staff Response Protocol

- If a student approaches you with a mental health emergency, the following steps should be taken:

a) **Ensure safety**: Make sure the student is in a secure, calm space; refer to the resource packet for taking necessary steps.

b) **Assess risk**:
- If there is an **immediate risk of self-harm or suicide**, take measures to get the student in a secure place where he/she has no access to means to harm them. Also take measures to ensure that the student is not left alone till necessary formal steps are taken.
- If the student is in distress but not at immediate risk, encourage them to talk to you since they have approached you with a sense of trust, listen to whatever extent possible and then gently encourage them to reach out to the mental health helpline service or the campus counsellors.

c) **Provide support**: Use active listening and assist the person as per the SOP. Avoid judgment or giving advice beyond your expertise.

d) **Refer appropriately**: Guide the student to available resources (counseling center, health center, faculty mentor, peer support).

e) **Follow up**: Ensure that the student receives ongoing support and follow up with them. In case of need, a Faculty Mentor to be appointed

4. Night-Time Support Protocol

- If a crisis arises at night:
  - **Contact the trained first responder or in their absence any friend on campus, any student, faculty, or warden.**

- Move the student **to a safe location**.
- **Use digital resources** (e.g., mental health helplines, mindfulness apps mentioned above) for immediate relief along with the resource packet attached below.
- Inform a trusted emergency contact of the person concerned.
- If the situation escalates, **call campus emergency services or arrange transport to a medical facility.**

5. **Confidentiality and Reporting**

- Any case of mental health crisis should be reported to the university counselor while maintaining **strict confidentiality**.
- Peer mentors, faculty, and staff must adhere to the **ethical guidelines on mental health support**.
- Any imminent risk to life should be reported to the appropriate emergency contacts immediately including the emergency contact of the person concerned.

6. **Mental Health Resources on Campus**

- **Campus Counselor**: Ms. Sheetal Choudhary: sheetal.choudhary@nludelhi.ac.in or Ms. Akanksha Singh: akanksha.singh@nludelhi.ac.in
- **Visiting Clinical Psychologist and Counselors on weekends**
  Clinical Psychologist- Udisha.mriash@nludelhi.ac.in,

  Visiting Counselor Gurbani.singh@nludelhi.ac.in
- **Faculty Mentor Program**: You may meet your Faculty Mentor.
- **Digital Mental Health Platforms**: Calm, Headspace, Outlive Chat, Mindpeers
- **National Mental Helplines:-**
  NIMHANS, Bengaluru- 0804611007

  KIRAN, Ministry of Social Justice- 18005990019

  ASARA (Suicide Helpline 24*7)- 9820466726

7. **Post-Crisis Support**

- Students who experience a crisis should be offered **follow-up counseling and peer support**.
- Faculty and staff involved in crisis response should receive **post-incident debriefing and guidance**.
- The university should periodically **review and improve crisis response protocols** based on feedback and effectiveness.

This SOP should be included in student orientation materials, displayed across campus, and periodically reviewed for updates.

Enclosed Resources to be used:
1. Grounding Technique: https://www.youtube.com/watch?v=30VMIEmA114
2. Progressive Muscle Relaxation: https://www.youtube.com/watch?v=ClqPtWzozXs

Annexure E: Informed Consent Form for Counselling and Mental Health Services

National Law University Delhi

Preliminary Information

Name: _____

Age: _____

Gender / Pronouns: _____

Programme / Year of Study: _____

Roll Number: _____

Contact Number: _____

Email ID: _____

This Informed Consent Form aims to explain the nature of the counselling and mental health services provided through National Law University Delhi, the limits of confidentiality, the potential risks and benefits of participation, and to obtain your voluntary consent before such services are provided.

Counselling and Mental Health Services at NLU Delhi

The Counselling and Mental Health Services at National Law University Delhi provide confidential psychological and mental health support to students through counsellors, psychologists, psychiatrists, and other mental health professionals engaged by the University. Services may include counselling sessions, psychological assessment, psychiatric consultation, tele-consultation, referral-based care, crisis intervention, and other mental health interventions.

These services are provided through a structured yet collaborative process in a safe and supportive environment, where students may discuss academic, personal, emotional, behavioural, or psychological concerns. The purpose of these services is to support emotional well-being, develop healthy coping strategies, facilitate appropriate mental health care, and promote personal growth and academic functioning.

Participation in these services is voluntary, and students may choose to continue, discontinue, or decline services at any time, except where immediate intervention is necessary to prevent serious harm.

Important to Note

Mental health services may involve discussing painful, traumatic, or emotionally difficult experiences. Such discussions may temporarily increase feelings of sadness, anxiety, discomfort, or distress. While these services are often beneficial, no specific outcome or improvement can be guaranteed, and the effectiveness of mental health interventions may vary from person to person.

Limits of Confidentiality

Information shared during counselling sessions, psychiatric consultations, psychological assessments, or other mental health services will ordinarily remain confidential. However, confidentiality may be breached in the following circumstances:

1. **Risk of Harm to Self or Others**: If there is a serious and immediate risk of harm to you or another person, relevant information may be shared with appropriate professionals or authorities to ensure safety and provide necessary support.
2. **Abuse, Neglect, or Exploitation**: If there is a disclosure or reasonable suspicion of abuse, neglect, or exploitation of a minor or vulnerable person, confidentiality may be breached in accordance with applicable legal and ethical obligations.
3. **Medical or Psychological Emergency**: If you are unable to ensure your own safety due to a medical or psychological emergency, necessary information may be shared with medical professionals, emergency contacts, or relevant University authorities to facilitate care.
4. **Legal Requirements**: Confidentiality may be breached if disclosure is required by a court order or any other applicable law.
5. **Threat to Campus or Public Safety**: If there is credible information indicating a serious threat to campus or public safety, relevant authorities may be informed.

Except in the situations described above, information will not be shared with faculty members, administrative staff, parents or guardians, peers, or other third parties without your knowledge and consent.

Records and Referrals

The University may maintain confidential records relating to the mental health services provided. Such records shall be stored securely and accessed only by authorised mental health professionals or other persons legally entitled to access them.

Where clinically appropriate, you may be referred to an external psychologist, psychiatrist, hospital, or other specialised mental health service provider. The reasons for such referral and available options shall ordinarily be explained to you before the referral is made.

Nature of Services

The counselling and mental health services provided through NLU Delhi are intended to offer psychological support, assessment, guidance, and referral assistance. These services do not guarantee diagnosis, treatment, medication management, or long-term psychiatric care, and may not be a substitute for comprehensive medical or psychiatric treatment where such treatment is clinically required.

Student Rights

By accessing these services, you understand that you have the right to:

- ask questions about any aspect of the service before or during the process;
- seek clarification regarding confidentiality, referrals, or record-keeping;
- decline to answer particular questions;
- discontinue or withdraw from counselling or other mental health services where appropriate;

- request information about available support options and referral pathways.

Consent

I confirm that I have read and understood the information contained in this Informed Consent Form. I have had the opportunity to ask questions and seek clarification regarding the counselling and mental health services offered through National Law University Delhi. I understand the nature of the services, the limits of confidentiality, the circumstances under which information may be disclosed, and my rights as a student accessing these services.

By signing below, I voluntarily consent to participate in counselling and/or other mental health services provided through National Law University Delhi in accordance with the terms set out above.

Student's Signature: Name: _____ Date: _____	Emergency/Trusted Contact Name: _____ Relationship: _____ Contact Number: _____

Mental Health Professional:

Name: _____

Designation: _____

Date: _____