



Department of Health & Family Welfare  
Government of Karnataka



# MENTAL HEALTH POLICY FOR EDUCATIONAL INSTITUTES





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Department of Health & Family Welfare  
Government of Karnataka

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## 1. BACKGROUND

In a landmark judgment delivered on July 25, 2025, in *Sukdeb Saha v. State of Andhra Pradesh & Ors.*, the Hon'ble Supreme Court of India affirmed that the right to mental health is integral to the right to life under Article 21 of the Constitution. Expressing concern over rising student suicides, the judgment emphasized India's constitutional and international obligations to protect and promote mental health.

In this context, the Hon'ble Supreme Court issued fifteen binding guidelines for educational institutions and coaching centres to strengthen mental health support and prevent suicides. These guidelines are broad in scope, applicable to all types of institutions, and will remain in force until appropriate regulatory frameworks are enacted.

Key elements include accessible mental health policies, professional counselling services, capacity-building for staff, protocols for managing suicidal risk, confidential grievance mechanisms, and other safeguards.

The first and foundational guideline mandates that all educational institutions adopt and implement a uniform mental health policy, drawing from the UMMEED Draft Guidelines, MANODARPAN initiative, and the National Suicide Prevention Strategy.

This policy must be reviewed annually and made publicly accessible via institutional websites and notice boards. It should transparently outline existing systems and structures supporting student mental health and reflect a clear institutional commitment to student wellbeing.

In response, the State of Karnataka has developed a Mental Health Policy for educational institutes through collaboration between the Department of Health and NIMHANS. This policy broadly aligns with national frameworks—including the National Suicide Prevention Strategy (2022), UMMEED Guidelines (2023), MANODARPAN (2020), and UGC Guidelines (2023)—and underscores commitment to work towards facilitating implementation of the Supreme Court's directives. It draws upon insights from extensive stakeholder consultations and field observations conducted as part of the ongoing ICMR-initiated multistate implementation project on suicide risk reduction and student wellbeing, being led by NIMHANS for Karnataka site, in partnership with the Departments of Education, Health, and Medical Education, Government of Karnataka.

## 2. PURPOSE

This policy provides a framework for promoting student mental health and well-being across all educational institutions in Karnataka.

It defines institutional roles, responsibilities, and proactive measures to create inclusive and responsive mental health environments. It also highlights key practices educational institutions can adopt to demonstrate their commitment to student well-being.

The policy is guided by principles of confidentiality, inclusiveness, accessibility, non-discrimination, and evidence-based support.

## 3. KEY OBJECTIVES

1. To establish approaches that foster a supportive and enabling environment for students
2. To promote mental health awareness, reduce stigma, and encourage help-seeking among students
3. To facilitate early identification of psychological distress and create provisions for first-line support within campuses
4. To improve access to professional mental health services

The following sections present the key components of the policy along with essential implementation details. A ready-to-use template for institutional adoption, along with a checklist to track implementation status at any given point in time, is provided at the end.

## 4. KEY COMPONENTS

**4.1 Commitment to Equity, Inclusion and Safe Environment:** Institutions shall foster an inclusive campus environment that prevents harassment, discrimination, or exclusion based on diverse identities and backgrounds, promotes belongingness, and establishes transparent mechanisms for grievance redressal and student support in line with regulatory requirements. (Refer Page 5)

**4.2 Orientation and Capacity Building for Mental Health Support & wellbeing:** Annual orientation sessions on mental health shall be conducted for all administrators, teachers, and students. A select group of faculty members and non-teaching staff (Student Wellbeing Ambassadors) shall receive gatekeeper training for suicide prevention, and a representative pool of students shall be trained as Wellbeing Champions. (Refer Page 6)

**4.3 Institutional Structures for Student Wellbeing:** Each institution shall constitute a Student Wellbeing Team comprising an overall coordinator, faculty and student- coordinators from the pool of Student Wellbeing Ambassadors and Wellbeing Champions and counsellors, to coordinate mental health promotion and support activities. (Refer Page 7)

**4.4 Access to Educative and Self-help Resources:** Institutions shall make credible mental health information and self-help resources including helpline numbers accessible for students through libraries, institute websites and student led groups. (Refer Page 8)

**4.5 Access to Mental Health Services and Referrals:** Confidential and professionally delivered in-campus counselling services shall be made available, with clear referral pathways to mental health professionals as per need. (Refer Page 9)

**4.6 Crisis Management Protocols:** A Crisis Response Team (including members from the student wellbeing team) shall be constituted to implement a written crisis response protocol and ensure timely, sensitive, and stigma-free response to psychological crises. (Refer Page 9)

**4.7 Institutional Support to In-Campus Mental Health Initiatives:** Adequate time and resources shall be allocated for the student wellbeing team to engage in its roles and responsibilities throughout the year. Contributions of Wellbeing Ambassadors and Champions shall be formally recognized. (Refer Page 11)

**4.8 Visibility and Access to Information on Student Support:** Details of the Student Wellbeing Team, counselling services, and helpline information shall be prominently displayed on institutional websites and notice boards. (Refer Page 11)

**4.9 Reporting, Documentation and Accountability:** Institutions shall maintain confidentiality of all mental health data, and annually submit information on training and other activities, anonymized summary on uptake of counseling services and any occurrence of suicide, to the concerned regulatory authorities and the district monitoring committee. (Refer Page12)

**4.10 Feedback and Continuous Improvement:** Structured feedback shall be obtained annually from students and staff for strengthening institutional mental health initiatives (Refer Page 13)

## DETAILS OF THE KEY COMPONENTS

### 4.1 Commitment to equity, inclusion and safe environment

- Institutes are committed to fostering a campus environment that actively prevents discrimination, harassment, and exclusion based on diverse identities and backgrounds - including gender, region, language, religion, caste, socioeconomic status as well as disabilities and more. The policy covers all students, and the educational institutions shall ensure that mental health provisions under this policy also adequately address the needs of Children in Need of Care and Protection (CNCP) and Children in Conflict with Law (CICL) studying in their educational institutes while residing in statutory care facilities under the Juvenile Justice (Care & Protection of Children) Act, 2015.
- In alignment with regulatory requirements and institutional values, it is to be ensured that necessary structures as per existing regulations and functional mechanisms are in place and made known to the students to enable them to express concerns, raise grievances and access appropriate and timely support for their resolution without fear of punitive consequences.
- Educational institutions implement practices and initiatives that actively promote inclusivity, cohesion, and a sense of belonging. These efforts are especially geared toward supporting students from disadvantaged backgrounds who may be at heightened risk for poor mental health or feelings of isolation and alienation. A few examples of these may include organizing events that celebrate and showcase cultural diversity and promote engagement and collaboration amongst different social groups in campus environments, providing orientation sessions or making provision for additional support to students from disadvantaged backgrounds and first-generation learners to ease transitions, ensuring representation of students from different backgrounds in cells and committees and career guidance sessions at appropriate time-points.
- Information regarding a student's residence in a CCI/Observation Home or involvement in JJ proceedings shall remain strictly confidential and shared only on a need-to-know basis with authorised personnel. Educational institutions shall provide academic flexibility such as remedial support, adjusted timelines, and bridge courses for students from CCIs/OHs, ensuring uninterrupted education.

- Institutions undertake proactive measures to prevent bullying, harassment, and discrimination, and establish transparent procedures for identifying and addressing such instances, thereby ensuring a safe and respectful environment for all students

## 4.2 Orientation and Capacity building for mental health support & wellbeing

- Educational institutes organize an annual orientation workshop specifically for senior administrative personnel of the institutes, focusing on student mental health, and planning and implementation of related initiatives.
- In addition, institutes organize a general orientation and interactive session on mental health for all students, held twice a year, with each session lasting no less than two hours each.
- All teachers participate in a half-day training each year focused on supporting student mental health.
- To the extent feasible, institutions may organize orientation sessions for parents focused on supporting student mental health and de-stigmatizing help-seeking for mental health concerns.
- Furthermore, institutions ensure that at least one faculty member per class or batch is trained to serve as a gatekeeper— to enhance knowledge, skills and sensitivity in identifying and engaging with students who may be at risk of suicide, offering initial support, and facilitating timely referral to professional services as needed. This training should involve a structured and interactive program of one day duration, designed and vetted by a professional in the field of mental health. The broader goal is to equip at least one-third of the teaching staff with gatekeeper training over the course of three academic cycles. Such teachers may be named as **Student Wellbeing Ambassadors**.
- Educational institutes actively engage a diverse group of volunteering students themselves to spread awareness, de-stigmatize mental health, help-seeking for mental health and strengthen peer support. This group can comprise of students from diverse backgrounds and from different classes and batches who are provided with structured training session of a minimum 1-day duration. New batches of students may be trained annually. Such students may be named as **Wellbeing Champions**.
- Institutions shall adopt trauma-informed practices and ensure that teachers, Wellbeing Ambassadors, and counsellors receive basic orientation on trauma, behavioural

manifestations, and supportive responses for all students including those from vulnerable and institutional-care backgrounds. Institutes shall also conduct substance use prevention campaigns that promote awareness, encourage early help-seeking, and ensure stigma-free guidance to professional services.

- Institutions shall ensure that mandatory orientation sessions for teachers and non-teaching staff are not limited to mental health but include relevant information on regulations such as redressal of grievances of students, sexual harassment, ragging, promotion of equity, guidelines on prevention of bullying, JJ Act, POCSO Act, & child protection protocols to strengthen capacities to ensure safety and wellbeing of all students including those from vulnerable backgrounds. Information on relevant policies & welfare schemes shall also be included in such sessions (e.g. Karnataka child protection policy, sponsorship & foster care schemes, Vishsha Palana Scheme).

### 4.3 Institutional structures for student wellbeing

To ensure a coordinated, inclusive, and responsive approach to student mental health, institutions shall establish a multi-tiered structure led by the Head of Institution and anchored by a **Core Student Wellbeing Team**. The head of the Institution is expected to provide overall oversight, receive regular reports, and ensure institutional accountability.

#### Composition of the core student wellbeing team

- **An overall coordinator** with some administrative authority (e.g. Vice Principal / Dean of Student Affairs)
- **Teacher Coordinator & Co-Coordinator** (from the pool of Wellbeing Ambassadors-trained in mental health support)
- **Student Coordinator & Co-Coordinator** (from the pool of Wellbeing Champions-students trained in basics of mental health and peer support)
- **Extended Student Wellbeing Network:** Embedded within the Core Student Wellbeing Team, this network comprises all trained teachers and students whose efforts are coordinated and supported by designated teacher and student-level coordinators.
- **Campus Counsellor(s):** Provides mental health services, conducts mental health promotion workshops and supports other team members in organizing promotive activities and campaigns

The core Student Wellbeing Team should report to the head of the institution and also collaborate closely with representatives from the management committee, parent groups, wardens, and other support staff.

Institutes are also encouraged to form an external advisory group comprising 2-4 local mental health professionals to provide expert input and consultation on student wellbeing initiatives and their implementation.

**Roles of the Student Wellbeing Team:** a) Regularly organize activities that promote mental health awareness, reduce stigma related to mental health and help-seeking, b) Facilitate confidential outreach to students who may be experiencing significant psychological distress, ensuring sensitivity and discretion in all interactions. c) Develop and implement systems—led by trained teachers within the team—to engage with students in a confidential manner to evaluate levels of distress and suicide risk, offer initial emotional support, and guide them toward professional mental health services, ensuring timely and appropriate care.

The Wellbeing champions (trained students) can serve as a bridge to facilitate supportive interactions between students in distress and the wellbeing ambassadors (trained teachers). Both these groups undergo periodic refresher training to strengthen their skills in mental health support provision and referral processes.

Activities related to promoting mental health should be included throughout the year as part of the academic calendar rather than conducted as one-off events. This includes activities directed towards all students as well as periodic programs/events for parents to orient and sensitize them about student mental health as well as multiple career pathways.

#### **4.4 Access to Educative & self-help resources on mental health and wellbeing**

- Basic informative materials such as infographics, posters, and videos addressing common mental health concerns and help-seeking from credible sources should be made accessible through library, institutional website, emails, text messages or other appropriate means and student-led groups to promote awareness and reduce stigma surrounding mental health.
- Institutes shall disseminate information on diverse self-help resources (e.g. websites, books, manuals, mobile applications) from credible sources so that the students are informed about their availability and appropriate use.
- Institutions are encouraged to incorporate mental health and wellbeing content into the curriculum to the extent feasible.

## 4.5 Access to mental health Services and Referrals

- Institutions should strive to ensure access to confidential and professionally staffed counselling services on campus, thereby supporting timely help-seeking among students. The relevant circulars from the state need to be referred to regarding qualifications of counselors and optimum counselor student ratio in campuses. In addition, clear pathways need to be established for referrals to mental health professionals for students who may need specialised mental health services.
- For students residing in Child Care Institutions (CCIs), Observation Homes (OH), Special Homes, or District Child Protection Units (DCPU), the educational institutions shall coordinate with the counsellors mandated under the JJ Act at the respective CCI/OH/DCPU to ensure continuity of care, alignment of psychosocial interventions, and prevention of duplication. DCPUs shall be included as district-level partners to support implementation of mental health protocols for children enrolled from CCIs/OHs, assist in referrals, and ensure follow-up care.
- As and when feasible, institutions may pursue formal collaborations with nearby professional mental health services and undertake systemic efforts to facilitate student access to quality care at reasonable rates.
- Educational institutions may engage trained volunteer support providers from credible organizations to assist educational institutes in carrying out low intensity mental health promotion activities (e.g. organization of interactive sessions on self-care for wellbeing, life-skills) and offering basic first line support for students in distress to strengthen the mental health support ecosystem, subject to verification and institutional approval. However, these will not be treated as substitutes for professional counsellors for mental health.
- Institutions should ensure that students accessing mental health support are treated without discrimination and where feasible, supported through academic flexibility and additional inputs for managing educational demands, while ensuring that the students meet the minimum mandated requirements of their curriculum and course.

## 4.6. Crisis management protocols

- Institutes must develop a written protocol for managing psychological crises and establish a crisis response team that may consist of trained gatekeeper teachers, campus counsellor, an administrative head and other relevant positions such as hostel warden.

- All stakeholders—including administrative staff, parents, local guardians, teachers, and students—should be proactively made aware of this protocol. It should clearly outline: The individuals responsible for supporting students in crisis (whom to approach), the process for sharing information strictly on a need-to-know basis; The steps for initiating timely and appropriate actions (e.g., referral to emergency services); Measures to minimize suicide risk and prevent experiences of stigma, shame, or embarrassment during crisis management.
- The protocol should also outline basic and broad steps to be taken to sensitively and empathetically handle any unfortunate situations involving suicide attempts and deaths by suicide (e.g. condolence meeting, supportive meeting with parents, affected subgroup of students).
- The content of the above-mentioned training modules and written protocols for crisis management should be designed by mental health professionals or vetted by a panel of experts.

#### **Elements to be included in the written protocol:**

- Identify designated individuals responsible for supporting students in crisis (e.g., counsellors, wellbeing coordinators, administrative leads).
- Clearly state who students and staff should approach when a crisis arises.
- Information Sharing-Define procedures for communication and coordination among stakeholders and ensure that information is shared strictly on a need-to-know basis. For example, during crisis situations involving CCI/OH children, institutions will need to inform the CCI Superintendent/Probation Officer and the DCPU Social Worker, and coordinate follow-up actions as per JJ Act procedures.
- Delineate crisis Response Steps- outline step-by-step actions to be taken during a crisis, including procedures for timely and appropriate referral to mental health professionals or emergency services when required.
- Risk Minimization and sensitivity-include measures to minimise suicidal risk such as curtailing access to high-risk areas (e.g. roof tops, balconies) and unsafe materials as well as. prevent experiences of stigma, shame and embarrassment during crisis management, encourage sensitive and empathetic response to unfortunate situations involving suicide attempts and deaths by suicide (e.g. condolence meeting, supportive meetings with parents, affected subgroup of students).

## **4.7 Institutional support to in-campus mental health initiatives**

Educational institutes shall ensure that trained gatekeeper teachers (student wellbeing champions) are provided with dedicated time to the extent feasible (e.g. one hour a week) to engage meaningfully with students experiencing distress. Similarly, student wellbeing champions involved in mental health promotion activities must be allotted time and institutional support to plan and conduct activities/campaigns at regular intervals that foster wellbeing across campus. These may include a mix of low-effort activities that can be quickly executed and relatively high-effort activities that require planning, logistic support and time for implementation.

- All mental health support initiatives must be grounded in empathy and non-discrimination, ensuring that students undergoing mental health challenges are treated with dignity and respect, regardless of their background or circumstances.
- Annual recognition of student wellbeing ambassadors and champions for their contributions during institute functions can signal institutional commitment to collaborative efforts in fostering supportive campus environments.

## **4.8 Visibility and access to information on student support**

- The composition and contact details of the Student Wellbeing Team should be prominently displayed on the institution's website and notice boards to ensure easy visibility and access to all students on campus. This information should also be integrated during any orientation session conducted for new students
- Clear procedures for seeking counselling or other mental health services as may be available within the campus must be accessible to students through announcement boards, the institute website, email and text messages through appropriate channels, and student handbooks or booklets. These should include essential information such as service timings, mode of delivery (e.g., in-person or online), qualifications of mental health service providers, and standard operating procedures (SOPs) related to confidentiality that are followed by the institutes, including its scope and limitations.
- Educational institutes should also display details of national helplines such as TeleMANAS, along with information about seeking professional support from DMHP and other professional mental health services available in proximity. This should

include basic information on how to access such services, associated costs, operating hours, and contact details.

#### **4.9 Reporting, documentation and accountability**

- Any data obtained in relation to student mental health or the utilization of support services shall be handled with the utmost confidentiality and shared strictly on a need-to-know basis, in full compliance with applicable laws and regulations in order to mitigate the risk of any misuse and protect student wellbeing.
- Any mental health information pertaining to CCI/OH students shall be collected, stored, and shared in compliance with confidentiality norms under JJ Rules, ensuring that no identifiable information is disseminated without statutory approval.
- In cases of deaths by suicide or suicide attempt, institutes are required to report the incident to the relevant regulatory authority and the district-level monitoring committee, in accordance with established protocols in the state.
- Documentation related to such incidents (e.g. deaths by suicide of enrolled students in or outside educational premises) , number and nature of mental health related training programs and other activities organized and anonymized details of number of referrals made to in-campus counsellors, if any and summary figures on uptake of such services, referrals made by the institute to external mental health services must be systematically maintained and shared on an annual basis with the district monitoring committee as part of ongoing oversight and accountability. All reporting processes must comply with applicable national mental health legislation, human rights statutes, and regulatory frameworks
- In any engagement with the media, educational institutions must apply respectful and sensitive reporting practices that preserve and protect the privacy and dignity of all students. Media personnel engaging with educational institutions shall strictly follow and adhere to JJ Act provisions, child privacy norms, and child-sensitive reporting guidelines to ensure protection of vulnerable children.

#### **4.10 Feedback and continuous improvement in support mechanisms**

Feedback mechanisms shall be embedded within all institutional mental health initiatives to ensure responsiveness and accountability. Feedback will be actively solicited on an annual basis from students—as key stakeholders—through open discussions, anonymized satisfaction surveys, and structured review processes. Inputs will also be gathered from teachers and other relevant stakeholders. Annual policy reviews shall incorporate feedback and data on the mental health relevant outcomes for students in statutory care who are attending educational institutions, with inputs from DCPUs and CCI/OH counsellors. All such insights shall inform continuous improvement, ensuring that mental health programs remain aligned with student needs and reflect best practices in student mental health promotion. The institute-level policy needs to be updated accordingly, and updated versions accordingly made publicly accessible by the respective institutes.

## 5. ANNEXURES

### I How can educational institutions adopt this policy?

- Institutions are advised to establish the necessary systems to implement this mental health policy within their respective campuses. Each institution should formally adopt this framework as its own institutional mental health policy and make it available on institution’s website or other accessible location. This is to ensure transparency and reflect its commitment to supporting student wellbeing.

### Template for Educational Institutes to adopt The Mental Health Policy

*(This is a basic draft structure of the policy wherein relevant details may be inserted by the institutes.)*

1. **[Insert Institute Name]** is committed to fostering a campus environment that actively prevents discrimination, harassment, and exclusion based on diverse identities and backgrounds—including gender, region, language, religion, caste, socioeconomic status, and disability. We have established committees and cells in accordance with regulatory requirements and institutional values to ensure safe, timely, and transparent mechanisms for student grievance redressal and support. The details of these committees and cells, along with contact information, are as follows: **[Insert Details]**

We implement practices and programs that promote a sense of belonging among diverse student groups and make active efforts to support disadvantaged students, thereby minimizing risks of isolation, alienation, discrimination, or academic disadvantage. A few examples of such practices on our campus include: **[Insert Details]**

1. Annual orientation sessions on student mental health are organized for all stakeholders in our institute (e.g., students, faculty, administrative staff, parents). We conduct training sessions for a select and representative group of faculty and non-teaching staff (e.g., wardens) to serve as *Student Wellbeing Ambassadors*, offering basic empathetic support to students experiencing psychological distress and facilitating timely referrals to relevant services as needed. **[Insert Date of Last Training]**
2. We also conduct annual training for a representative pool of students to serve as *Wellbeing Champions*. Their role is to promote awareness and open conversations about mental health, reduce mental and social barriers to help-seeking, and strengthen peer support mechanisms. **[Insert date of Last Training]**
3. We have established a *Student Wellbeing Team* to ensure a coordinated, inclusive, and responsive approach to student mental health. The core team comprises the overall coordinator, faculty and student coordinators from the pool of Student Wellbeing

Ambassadors and Wellbeing Champions, and counsellors who jointly coordinate mental health promotion and support activities.

The details of the **Student Wellbeing Team** are as follows: **[Insert Details]**

4. The institute disseminates information from credible sources on mental health and maintaining wellbeing, including guidance on managing common mental health concerns and links to self-help resources in various formats (e.g. offline/online). This information is accessible to all students from: **[Insert Details about locations where such information is available]**
5. The institute strives to facilitate professional help for students' mental health needs in a non-stigmatizing, confidential, and respectful manner. The following mechanisms are currently in place:  
**[Insert Details prominently on website, notice boards, and common areas regarding:**
  - a) In-campus counselling services by qualified professionals, including names, qualifications, and procedures for seeking appointments and accessing services
  - b) Liaison with external mental health service providers/hospitals near the campus, including details on service access, costs, and contact information
  - c) Helpline numbers, including the TeleManas 24/7 national tele-support service available in multiple languages (Toll-free number: 14416). Other relevant helpline numbers are also displayed.
6. The institute has a crisis response protocol in place for managing psychological crises and suicidal risk. This involves a crisis response team drawn from the Student Wellbeing Team, acting empathetically and responsively to maximize student safety through appropriate means, mobilizing support from relevant sources (e.g., family, trusted friends, warden), and ensuring access to professional help. Crisis interventions are carried out on a strictly need-to-know basis to minimize risks of stigma, embarrassment, or social consequences. Any of the following may be contacted for reporting any psychological crisis [ **[Insert Details]**
7. The institute documents information on training and other activities conducted, along with anonymized summaries of counselling service utilization, for annual reporting to the concerned competent authorities.
8. The institute conducts annual feedback surveys and stakeholder discussions (including anonymized student surveys) to gather perspectives and suggestions and uses this input to improve student mental health support systems on campus.

## II. Checklist of provisions as per the policy to be displayed in institutes

	<b>Key Policy Elements</b>	<b>Implementation Status</b> <b>Yes/planned</b>
1	Accessible Mental Health Policy of the institute: Mental Health Policy is adopted for the institute and made publicly accessible on website /notice board	
2	Display of information on functional committees and cells related to student matters, contact details and procedure	
3	Student Wellbeing Team formed and information displayed	
4	Orientation for all students, teachers and staff conducted annually on student mental health	
5	Annual training session for select group of faculty & non-teaching staff to serve as Student Wellbeing Ambassadors and implement crisis response protocol when needed	
6,	Annual training for representative group of students to serve as Wellbeing Champions	
7.	Provision of institute support to Student Wellbeing Team for performing their roles (e.g. conducting campaigns to promote help seeking)	
8	Access to educational resources and self-help materials on mental health & wellbeing	
9	Display of information on access to in-campus counseling services	
10	Display of information on where and how to access mental health services outside campus	
11	Display of helpline details: 24/7 access to TeleManas number (14416), and other relevant national helpline numbers (e.g. Anti ragging helpline, SC/ST atrocities prevention, National commission for women helpline numbers)	
12.	Annual feedback from students (including anonymized surveys), faculty and others to understand needs, suggestions to evolve support systems	

**GOVERNMENT OF KARNATAKA**

No:ED 69 UPC 2024 (E)

Karnataka Government Secretariat,  
M.S. Building,  
Dr. B.R. Ambedkar Veedhi,  
Bengaluru, Dated:27-11-2025

**CIRCULAR**

**Sub:** Regarding implementation of guidelines on mental health safeguards issued by Hon'ble Supreme Court in all Educational Institutions of Karnataka, as detailed in this Circular.

**Ref:** 1. GO No: ED 69 UPC 2025, Bangalore, dated: 23rd September 2025  
2. Addendum Order No: ED 69 UPC 2025, Bangalore, dated:06.10.2025

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In recent years, rising instances of student distress and suicides have been issues of serious concern and warrant immediate attention of educators, parents, and society at large. Educational Institutions are not only centres of learning but also spaces that nurture emotional growth, resilience, and overall well-being of students. It is, therefore, crucial for schools and colleges to ensure a sensitive, supportive, protective, and empathetic environment that responds effectively to students' emotional and psychological needs. Alarmed at the growing prevalence of emotional disturbance among students and in recognition of the crucial role that Educational Institutions can play in suicide prevention and mental health promotion, Hon'ble Supreme Court of India has directed that all schools and colleges shall adopt and implement a uniform mental health policy and issued binding guidelines to all public and private schools, colleges, universities, training centres, coaching institutes, residential academies and hostels for preventing student suicides.

In conformity with the guidelines issued by the Hon'ble Supreme Court in para 35 of Criminal Appeal 6378/2025 on mental health safeguards, Government of Karnataka is releasing this circular prepared by the High-Power Committee constituted as per Ref(1&2) for this purpose, for mandatory and immediate compliance by all Government/Aided/Private Schools, PU Colleges, Degree Colleges, Engineering Colleges, Polytechnics, Agriculture Colleges, Veterinary Colleges, Nursing Colleges, Medical Colleges, Universities, Tutorial Institutions, Training Centres, Coaching Centres, residential academies, all other Educational Institutions and hostels in the State.

1. All Educational Institutions with 100 or more enrolled students shall appoint/engage at least one in-campus qualified counsellor, psychologist, or social worker with demonstrable training in child and adolescent mental health. This target should be achieved by all Government, Aided and Private Educational Institutions within 06 months from the date of issue of this circular or at the start of the next academic year, whichever is earlier.

- i. All Government Educational Institutions shall establish formal liaisons for facilitating needy care and treatment to their students with mental health problems to avail psychiatric services from the available Mental health teams at the nearest public health institutions (For eg: Nearest Govt Medical College Hospital or District Hospital or Taluk Hospital etc.,) till administrative approval is granted for the posts of qualified counsellor, psychologist, or social worker.
  - ii. Over and above engaging minimum 1 in-campus qualified counsellor for 100 or more students as mentioned above, all Educational Institutions with student strength less than 100, shall establish formal referral linkages with external mental health services in proximity to the respective Institutions.
  - iii. Institutions shall ensure a minimal student-counsellor ratio of at least one counsellor for 1500-2000 students. The number of counsellors shall proportionally increase as the number of students increases. This standard shall be reviewed periodically.
2. The in-campus counsellors appointed by Educational Institutions shall mandatorily have a UGC recognized postgraduate degree (MA/MSc.) in Psychology/Human Development/ Counselling/Social Work with at least 1 month of demonstrable supervised training /Internship (essential) and preferably 6 months of experience in any clinical or community setting of conducting psychological interventions after their qualifying postgraduate examination (desirable). The requisite qualifications, experience and training criteria will be periodically reviewed and revised.
3. The in-campus counsellors engaged by Educational Institutions need to be considered as health service providers under the non-teaching staff category and should be exclusively engaged for counselling as well as supporting other mental health promotion activities.
4. Dedicated faculty Mentors shall be assigned to smaller batches of students, especially during examination periods and academic transitions, to provide consistent, informal, and confidential support. A definite action plan regarding the mentors assigned and the details of the activities undertaken to support students in coping with academic stress shall be documented. A report of the same shall be submitted to the district monitoring committee headed by the respective Deputy Commissioner and the concerned regulatory bodies on an annual basis.
5. All Educational Institutions, more particularly the coaching institutes/centres, shall, as far as possible, refrain from engaging in batch/class/section segregation based on academic performance, public shaming, or assignment of academic targets disproportionate to students' capacities. These Institutions shall ensure that the academic burden on students will not be overwhelming.
6. All Educational Institutions shall establish written protocols for immediate referral to mental health services, local hospitals, and suicide prevention helplines. The written protocols refer to Standard Operating Procedures (SOPs) for supporting students in high distress and management of instances involving suicidal crisis. It is encouraged that all heads of institutes undergo brief orientation session on formation of student wellbeing team, development of

SOPs/written protocols for crisis management and basics of implementing student mental health initiatives in their respective campuses.

7. Suicide Helpline numbers, including Tele-MANAS and other national services, shall be prominently displayed in hostels, classrooms, common areas, corridors and on websites in large and legible print. A few such contact numbers and services have been given in **Annexure-I**.
8. Educational Institutions shall ensure that their teachers are oriented and sensitized about the basics of student mental health and faculty shall address the mental health concerns of students in distress.

All teaching and non-teaching staff shall undergo mandatory orientation session at least twice a year, conducted by certified mental health professionals, on psychological first-aid, identification of warning signs, response to self-harm, suicide-risk management and referral mechanisms. The training providers could be qualified psychiatric doctors and other competent mental health professionals of Government/Private Hospitals/Organizations. A standard model developed by NIMHANS can be adapted. An outline of such an orientation session developed by NIMHANS is annexed for reference **(Annexure-II)**

Additionally, all educational institutions shall ensure that a minimum of 2-3 teachers mandatorily undergo standardised detailed training that equips them to support mental health promotion activities, interact with students in distress, assess level of distress or suicidal risk, offer basic support and to know when to refer them to a counsellor or mental health professional. Details of a standardized training model for this purpose derived from ICMR implementation project being conducted by NIMHANS -Karnataka site will be communicated separately.

9. All Educational Institutions shall ensure that all teaching, non-teaching, and administrative staff are adequately trained to engage with students from vulnerable and marginalized backgrounds in a sensitive, inclusive, and non-discriminatory manner. This shall include, but not be limited to, students belonging to Scheduled Castes (SC), Scheduled Tribes (ST), Other Backward Classes (OBC), Economically Weaker Sections (EWS), LGBTQ+ communities, students with disabilities, those in out-of-home care, and students affected by bereavement, trauma, or prior suicide attempts, or intersecting form of marginalisation.
10. All Educational Institutions shall establish robust, confidential, and accessible mechanisms for the reporting, redressal, and prevention of incidents involving sexual assault, harassment, ragging, and bullying on the basis of caste, class, gender, sexual orientation, disability, religion, or ethnicity.
  - i. In alignment with regulatory requirements and institutional values, all institutes shall ensure that necessary structures and functional mechanisms are in place and made known to students, for prevention and redressal of incidents such as ragging, discrimination and harassment (e.g. anti ragging cell, internal complaints committee for prevention, prohibition and redressal of sexual harassment of women, student grievance redressal committee). Respective committees or a designated authority shall be empowered to take immediate action on complaints and provide psycho-social support to victims.

- ii. Institutions shall also maintain zero tolerance for retaliatory actions against complainants or whistle-blowers. In all such cases, immediate referral to trained mental health professionals must be ensured, and the student's safety, physical and psychological, shall be prioritized. Failure to take timely or adequate action in such cases, especially where such neglect contributes to a student's self-harm or suicide, shall be treated as institutional culpability, making the administration liable to regulatory and legal consequences.
11. Every Educational Institution shall constitute a Student Wellbeing Team (SWT) comprising of representatives from counsellors, trained faculty, students and parents. This Team shall create awareness about maintaining mental health, mechanisms like complaint box, grievance redressal committee, anti-ragging committee and internal complaint committee/POSH Committee etc already in place in the Institution to deal with concerns of students and assist in processing emotional problems faced by students. This committee shall also take appropriate measures to publicize mental health safeguard measures through brochures, handbooks, prospectus brought out by the Institution and Induction Program.
12. All Educational Institutions shall maintain anonymized records and prepare an annual report indicating the number of wellness interventions, student referrals, training sessions, and mental health-related activities. This report shall be submitted annually through the District Monitoring Committees to the respective regulatory bodies. Template for such reporting is enclosed herewith as **Annexure III**.
13. All Educational Institutions shall prioritize extracurricular activities, including sports, arts, and personality development initiatives. The period earmarked for Physical Education plays a vital role in stress management and shall be utilized exclusively for this purpose, and not be diverted for academic engagements.
14. All Educational Institutions, including coaching centres and training institutes, shall provide regular, structured career counselling services for students and their parents or guardians. These sessions shall be conducted by qualified counsellors/subject experts/other competent people and shall aim to reduce unrealistic academic pressure, promote awareness of diverse academic and professional pathways, and assist students in making informed and interest-based career decisions. Institutions shall ensure that such counselling is inclusive, sensitive to socio economic and psychological contexts, and does not reinforce narrow definitions of merit or success. Resource persons for career counselling at block levels when appointed under Samagra Shiksha or trained Block Resource Persons (BRP) may be actively utilized by Government schools and PU colleges for career counselling support for students. The services of Placement Cells shall be availed in Higher Education Institutions for career counselling.
15. All residential-based Educational Institutions, including hostel owners, wardens and caretakers, shall take proactive steps to ensure that campuses remain free from harassment, bullying, drugs, and other harmful substances, thereby ensuring a safe and healthy living and learning environment for all students.

16. All Educational Institutions, including residential-based Educational Institutions, shall adopt appropriate safety mechanisms such as installation of tamper-proof ceiling fans and other equivalent safety devices, curtailment of access to unsafe materials and high-risk areas like rooftops, balconies, etc. in order to deter impulsive acts of self-harm.
17. In cities where students migrate in large numbers for competitive examination preparation, heightened mental health protections and preventive measures shall be implemented by coaching centres.



(M. DAYANANDA)

Deputy Secretary to Government,  
Higher Education Department  
(Collegiate Education)

To,

1. Additional Chief Secretary to Government, Home Department, Vidhana Soudha, Bengaluru
2. Principal Secretary to Government, Department of School Education, M.S.Building, Bengaluru.
3. Principal Secretary to Government, Medical Education Department, M.S.Building, Bengaluru
4. Principal Secretary to Government, Department of Law, Justice and Human Rights, Vidhana Soudha, Bengaluru
5. Principal Secretary to Government, Health and Family Welfare Department, Vikasa Soudha, Bengaluru
6. Principal Secretary to Government, Department of Youth Empowerment and Sports, M.S.Building, Bengaluru
7. Principal Secretary to Government, Agriculture Department, M.S.Building, Bengaluru
8. Secretary to Government, Department of Skill Development, Entrepreneurship and Livelihoods, M.S.Building, Bengaluru
9. Secretary to Government, Social Welfare Department, Vikasa Soudha, Bengaluru
10. Secretary to Government, Parliamentary Affairs and Legislation Department. Vidhanasoudha, Bengaluru
11. Secretary to Government, Backward Classes and Welfare Department, Vikasa Soudha, Bengaluru
12. Secretary to Government, Minority Welfare, Huzz, Auqaf Department, Vikasa Soudha, Bengaluru
13. Secretary to Government, Department of Women and Child Development and Empowerment of Persons with Disabilities and Senior Citizens, M.S.Building, Bengaluru
14. Secretary to Government, Horticulture Department, M.S.Building, Bengaluru
15. Secretary to Government, Department of Animal Husbandry and Fisheries, Vikasa Soudha, Bengaluru
16. Commissioner, Department of Collegiate and Technical Education, Bengaluru
17. Director, Department of Collegiate Education, Bengaluru

18. Director, Department of Technical Education, Bengaluru
19. Director of Public Instruction, Secondary Education, Bengaluru
20. Director of Public Instruction, Primary Education, Bengaluru
21. Director, Department of State Educational Research and Training, Bengaluru
22. Director, Directorate of Child Protection, Bengaluru
23. Joint Director, Mental Health Department of Health and Family Welfare.  
Bengaluru
24. Deputy Secretary to Government, Higher Education Department (Universities)  
and (Technical Education), M.S. Building. Bengaluru
25. Director of NIMHANS, Bengaluru
26. Registrars of all Public Universities.
27. Registrars of all Private and Deemed / Deemed to be Universities.
28. Principal, B.M.S. Engineering College. Bengaluru
29. Principal, P.E.S College. Bengaluru
30. Registrar, Christ University, Bengaluru

**Copy To:**

1. PS to Secretary to Government, Department of Higher Education.
2. Section Guard File/Additional copy.

## ANNEXURE-I

### Student-Support Resources

Category	Helpline Name	Number	Purpose	Availability
Emergency	Emergency Response System	112	Police, fire, ambulance	24/7
Mental Health	Tele-MANAS	14416/1800-891-4416	Mental health support	24/7
Mental Health	Manodarpan	8448440632	Emotional support for students	24/7
Protection	Women Helpline	181	Immediate emergency response and crisis intervention for Women	24/7
Protection	National Commission for Women Helpline	78271-70170	Grievance redressal and complaint tracking for Women	24/7
Protection	National Anti-Ragging Helpline	1800-180-5522	Report ragging/harassment	24/7
Protection	National Cyber Crime Reporting Helpline	155260/1930	Online abuse, fraud, harassment	24/7
Legal/Rights	National Helpline for Prevention of Atrocities Against SC/ST Communities	14566	Report caste-based discrimination or violence	24/7
Legal/Rights	National Disability Information Helpline Service	14456	Support for persons with disabilities	Mon-Sat, 9 AM-5:30 PM
Legal/Rights	National Legal Aid Helpline	15100	Free legal help for vulnerable groups	Mon-Fri, 9:30 AM-5:00 PM
Protection	Child Helpline	1098	Crucial link between children in distress conditions and services available for their rehabilitation & restoration	24/7

## ANNEXURE II

### A TENTATIVE OUTLINE OF ORIENTATION SESSION FOR TEACHERS

- i) Understanding student mental health and wellbeing and associated outcomes.
- ii) Myths and facts related to mental health and wellbeing.
- iii) Promoting skills and practices for mental wellbeing.
- iv) Understanding the self-help, informal help and professional help.
- v) Recognizing signs of distress in students.
- vi) Identifying and responding to suicide risk in students.
- vii) Role of teachers in supporting student mental health.

## ANNEXURE III

### Annual Reporting Template for Educational Institutes (add rows if needed)

From \_\_\_ to \_\_\_ (yearly)

S.No	Parameter	Details				
		Date	Duration	No. of participants	Theme/nature	Remarks
1.	Training program conducted for teaching and teaching staff for supporting student mental health and wellbeing, including suicide prevention					
2.	Training program for student volunteers on mental health promotion					
3.	Mental health campaigns or events organized					
4	Educative materials and basic information on when to seek professional help/where/how-displayed on website/notice boards					
5	Workshops on mental health for students					
6	Counselling services- in campus (Mention total number of in campus counsellors)					
7	Number of new registrations (students) with- in campus counselling service					
8	Online counselling services if any facilitated by the institute through external service provider (Mention name of external services provider and total number of sessions)					
9	Referrals made to external mental health services (e.g. hospitals, clinics etc) (Mention total number of external referrals given)					
10	Any incidence of death by suicide of any enrolled student Please mention details: course/gender / social group/mode of suicide/ date of death/ action taken (in brief)					
11	Any new initiative for student mental health/any other remarks/challenges encountered and solutions attempted/ Feedback (not more than 250 words)					



## PROCEEDINGS OF THE GOVERNMENT OF KARNATAKA

**Subject:-** Constitution of District Level Monitoring Committees to oversee the implementation, conduct inspections and receive complaints pertaining to mental health of students.

**Read:-**

1. Government Order No.ED 69 UPC 2025, dated:23-09-2025.
2. Addendum Government Order No.ED 69 UPC 2025, dated:06-10-2025.

### **PREAMBLE:**

In pursuance to the direction No. 38 of the Supreme Court of India dated 25.07.2025 in Criminal Application No. 3177 of 2025 (Arising out of SLP (Crl.) No. 6378 of 2024) in Sukdeb Saha Vs The State of Andhra Pradesh and others, District Level Monitoring Committee is being constituted to oversee implementation, conduct inspections and receive complaints pertaining to mental health of students.

As read in (1) and (2) above, it is ordered for constitution of a high-level committee to amend The Karnataka Tutorial Institutions (Regulation and Control Rules) 2001 based on the directions in the case of The Guidelines on Mental Health Safeguards issued by Honorable Supreme Court in para 35 of Criminal appeal 6378/2025. The said committee has submitted an interim report and as per its recommendation, district level committees have to be constituted. Hence the order as under.

### **GOVERNMENT ORDER NO.ED 69 UPC 2025.**

#### **BENGALURU. DATED:27-11-2025**

In view of details given in the preamble, as per the recommendation of the high-level committee constituted to amend The Karnataka Tutorial Institutions (Regulation and Control Rules) 2001 based on the directions in the case of The Guidelines on Mental Health Safeguards issued by Honourable Supreme Court in para 35 of Criminal appeal 6378/2025, district level committees have been constituted as follows:

#### **BENGALURU URBAN DISTRICT:**

1	Chief Commissioner, Greater, Bengaluru Authority	Chairman
2	Commissioner of Police	Member
3	Deputy Director of Public Instruction	Member
4	Deputy Director of Pre-University Education	Member
5	Deputy Director Women and Child Development	Member
6	Deputy Director of social welfare department	Member
7	Deputy Director (Mental Health)	Member
8	District officer form backward Classes	Member
9	District Health Officer	Member
10	Member Secretary, District Legal Service Authority, Bengaluru Urban	Member
11	Regional Joint Director, Department of Collegiate Education, Bengaluru	Member
12	Principal of lead district Government First Grade College, Government Engineering College and Government Polytechnic	Member
13	Medical Superintendent of an Medical College	Member
14	NGO/Representative from civil society nominated by chairman	Member

### For other Districts

1	District Magistrate/Collector	Chairman
2	Chief Executive Officer, Z.P	Member
3	Superintendent of Police	Member
4	Municipal Commissioner	Member
5	Deputy Director of Public Instruction	Member
6	Deputy Director of Pre-University Education	Member
7	Deputy Director Women and Child Development	Member
8	Deputy Director of social welfare department	Member
9	District officer from backward Classes	Member
10	District Health Officer	Member
11	Member Secretary, District Legal Service Authority	Member
12	Principal of lead district Government First Grade College, Government Engineering College and Government Polytechnic	Member
13	Medical Superintendent of an Medical College	Member
14	NGO/Representative from civil society nominated by chairman	Member

#### Terms of Reference:

1. Implementation of Karnataka Tutorial Institutions (Registration and Regulation) Rules
2. To follow and ensure implementation of directions issued by Supreme Court in the judgement of Sukdeb Saha vs The State of Andhra Pradesh and ors.

By Order and in the Name of the  
Governor of Karnataka,

  
(M. DAYANANDA) 21/11/25

Deputy Secretary to Government,  
Higher Education Department  
(Collegiate Education)

#### To:

1. Chief Commissioner, Greater, Bengaluru Authority, Bengaluru
2. Commissioner of Police, Bengaluru
3. Deputy Director of Public Instruction, Bengaluru
4. Deputy Director of Pre-University Education, Bengaluru
5. Deputy Director Women and Child Development, Bengaluru
6. Deputy Director of social welfare department, Bengaluru
7. Deputy Director (Mental Health), Bengaluru
8. District officer from backward Classes, Bengaluru
9. District Health Officer, Bengaluru
10. Member Secretary, District Legal Service Authority, Bengaluru Urban, Bengaluru
11. Regional Joint Director, Department of Collegiate Education, Bengaluru
12. Principal of lead district Government First Grade College, Government Engineering College and Government Polytechnic, Bengaluru
13. Medical Superintendent of an Medical College, Bengaluru
14. NGO/Representative from civil society nominated by chairman, Bengaluru
15. All District Magistrate/Collector
16. All Chief Executive Officer, Z.P
17. All Superintendent of Police
18. All Municipal Commissioner

19. All Deputy Director of Public Instruction
20. All Deputy Director of Pre-University Education
21. All Deputy Director Women and Child Development
22. All Deputy Director of social welfare department
23. All District officer form backward Classes
24. All District Health Officer
25. All Member Secretary, District Legal Service Authority
26. All Principal of lead district Government First Grade College, Government Engineering College and Government Polytechnic
27. All Medical Superintendent of an Medical College
28. All NGO/Representative from civil society nominated by chairman

**Copy to:**

1. PS to Secretary to Government, Department of Higher Education.
2. The Commissioner, Department of Collegiate and Technical Education, Bengaluru
3. Section Guard File/ Additional copy.

## V. Informational resources for educational institutions

### Relevant Regulations, Guidelines and Acts

- ❖ National Commission for Protection of Child Rights- Education Guidelines-  
<https://ncpcr.gov.in/education-guidelines>
- ❖ UGC regulations-Student Centric Regulations  
[https://www.ugc.gov.in/regulations/UGC\\_Regulations\\_Student\\_Centric](https://www.ugc.gov.in/regulations/UGC_Regulations_Student_Centric)
- ❖ Mental Health Care Act  
<https://hfwcom.karnataka.gov.in/storage/pdf-files/MentalhealthAct,2017.pdf>
- ❖ National Suicide Prevention Strategy  
<https://cdnbbsr.s3waas.gov.in/s3bc88bb2c377261b0336312714b96fcfd/uploads/2025/04/20250507983470082.pdf>
- ❖ 15 binding guidelines for educational institutes and coaching centre by Hon'ble Supreme court of India  
<https://lawbeat.in/news-updates/sc-issues-15-point-binding-guidelines-to-prevent-student-suicides-orders-cbi-probe-in-neet-aspirants-death-1514087>

### Relevant informational resources on mental health and suicide prevention

- ❖ UMMEED-Prevention of Suicide Guidelines for schools  
[https://dsel.education.gov.in/sites/default/files/update/Draft\\_UMMEED\\_Guielines.pdf](https://dsel.education.gov.in/sites/default/files/update/Draft_UMMEED_Guielines.pdf)
- ❖ MANODARPAN- Psychosocial support for mental health & wellbeing of students  
<https://manodarpan.education.gov.in/>
- ❖ SAMVAD - Support, Advocacy & Mental health interventions for children in Vulnerable circumstances And Distress  
<https://www.youtube.com/c/nimhanschildprotection>
- ❖ SAMVAD  
<https://nimhanschildprotect.in/>
- ❖ Educative resources on mental health in multiple languages  
<https://www.whiteswanfoundation.org/>
- ❖ Self-help resources for students for mental health & wellbeing  
<https://mywellbeingshelf.in/main/home>
- ❖ National Tele Mental Health Program of India  
<https://telemanas.mohfw.gov.in/home>



**Department of Health & Family Welfare  
Government of Karnataka**

