



PGCL NEWSLETTER

October 2025





Here's what has happened in the last month and what's to come!

The Briefcase is back, and this time, we're thinking, feeling, and maybe overthinking (but for good reason). This issue dives deep into the world of mental health, labor rights, and the legal frameworks that try, sometimes awkwardly, to keep up.

Before you rush to delete your therapy memes, don't worry, we're not here to diagnose you. We're here to question, analyze, and maybe poke a few holes in how we talk about well-being, work, and justice in a world that never stops. From the evolving debate on decriminalizing suicide and what it means for mental health rights, to the link between labor laws and worker well-being under India's Occupational Safety and Health framework, our writers explore how the law both shapes and responds to human vulnerability.

We also dive into the courts, where recent judgments like Sukdeb Saha v. State of Andhra Pradesh (2025) and Chunni Bai v. State of Chhattisgarh (2025) remind us that justice often lies at the intersection of empathy and interpretation. Beyond the courtroom, we turn to society- unpacking how Indian households perceive therapy, whether burnout is a cultural badge or a legitimate concern, and how technology (yes, even chatbots) is quietly entering the mental health conversation.

This issue doesn't just report, it reflects. Because law isn't made in a vacuum, and neither are we.

So grab a cup of coffee, and join us as we navigate the mind, the law, and everything in between, one thought-provoking article at a time. After all, if the world won't slow down, we might as well learn to pause-legally, of course.

The Editorial Board x

In this newsletter you can expect:

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- Decriminalizing Suicide: Is the BNS a Step Forward for Mental Health Rights?
- Workers & Their Mental Well-being-Analyzing Labor Laws in India (OSH Act)

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- Sukdeb Saha v. State of Andhra Pradesh (2025)
- Chunni Bai v. State of Chhattisgarh (2025)

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- Burnout: Culture or Concern?
- Can a Chatbot Cure a Mind?

THE WIG & THE WIT

• Where The Law Meets Levity

THE CAUSELIST

 Mark your Calendars - An exclusive preview of upcoming months' events

THE POST-ITS

• Your monthly dose of 'Did you know?'

THE BINDER



Your essential collection of the latest legal updates, neatly organised for a quick reference.

From Crime to Care: Understanding Suicide under India's Mental Healthcare Act

India accounts for a third of global female suicides annually and nearly a fourth of male suicides, yet until recently the law treated suicide attempts as crimes rather than cry for help. The Mental Healthcare Act, 2017 (MHCA) has been a revolutionary step in India's approach towards mental health and suicide prevention. The introduction of the Section 115 of the MHCA, 2017, led to redefining the Suicide attempts in the legal and moral lens from a punishable offence under criminal law to being recognised as a result of mental distress.

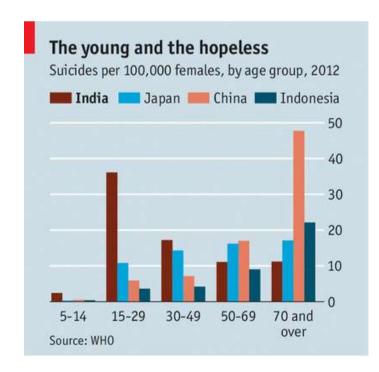
Prior to 2017, Section 309 of the Indian Penal Code (IPC) criminalized suicide attempts. The British colonial era law viewed suicide as a crime against the state and prescribed imprisonment and fines for those who survived. Ironically, the UK reformed this in 1961 through the Suicide Act of 1961, which explicitly stated that suicide is "no longer a crime." Similarly in India, Section 115 (1) of the MHCA states "any person who attempts to commit suicide shall be presumed, unless proved otherwise, to be under severe stress and shall not be tried and punished under the said Code." Further, Section 115(2) places a positive obligation on the government to "care, treatment and rehabilitation" to the individuals facing said mental distress. It marks a huge shift from a punitive outlook towards suicide to more of a rehabilitation.

Additionally, it is incompatible with both Article 21 (Right to life and dignity) of the Indian constitution and Sustainable Development Goal (SDG) 3.4 where the UN calls for reducing suicide mortality one-third by by Decriminalization and access to mental health care are seen as prerequisites to achieving this despite its However, progressive framework, the global suicide rates decline only marginally by 3% from 2015 to 2019 according to the official monitoring statistics (the most recent year for which data are available). The judiciary recently has upheld this progressive reading of the law and has reiterated the overriding effect of Section 115 of MHCA over Section 309 of the IPC. While the MHCA 2017 is a welcome step and heavily applauded but its implementation

remains heavily uneven. Reports such as the <u>2025 study published by Cambridge University Press</u>, indicates that since the 2017 act and decriminalization of Suicide, India's suicide rates have not significantly declined.

Thus, Section 115 of the MHCA is a progressive step in the Indian law, marking a humane and forward-thinking approach. This changed approach acts as cries for help rather than a punishing those who are distressed, further laying the foundation for an empathetic approach towards mental health in India. However, the fight for mental health rights and recognition are far from over the legal aspect only. In order to fulfil the act's promise, consistent government commitment towards improved public awareness, and robust mental health infrastructure are imperative.

Mr. Gourav Arora Student, 2nd Year



Credits: The Economist

THE BINDER



Your essential collection of the latest legal updates, neatly organised for a quick reference.

Workers & Their Mental Well-Being: Analyzing Labor Laws in India

Legal Framework and their Constitutional Basis: India's labour laws are undergoing a major overhaul with the consolidation of 29 current central labour laws under four overarching codes. Nevertheless, although the Supreme Court of India has extended the ambit of Article 21 to incorporate right to health, specifically mental health, as essential for life and liberty of a person in Francis Coralie Mullin v. Union Territory of Delhi, Indian labor legislation has not yet become fully compliant and still gives a focus on physical security at the cost of mental health. The gap between constitutional protection and current labour laws creates large loopholes in the protection of mental health of workers.

Gaps in Mental Health Protection

The Occupational Safety, Health and Working Conditions Code, 2020 is India's main enactment dealing with workplace safety and employer and employee obligations. But it lacks any explicit provision related to mental health of workers. Section 6(1)(d) of the act prescribes that every employer shall maintain and provide, as far as is reasonably practicable, a working environment that is safe as well as free from risk to the health of the employees.

The Code does not define what 'reasonably practicable working conditions' are? While certain such conditions specified under Sections 23 and 24 refer to physical health and safety like hygiene, ventilation, water, light, washrooms, it does not go into the psychological health conditions of the workers.

The Code has provisions for different regulatory bodies such as National and State Occupational Safety and Health Advisory Boards under Section 16 and 17 respectively, Safety Committees under Section 22 and Inspector-cum-Facilitators under Section 34 but none have been specifically mandated to deal with mental health issues.

Comprehensive Reforms Needed:

Make mental health a part of occupational safety code

The most pressing demand is to specifically Amend the Occupational Safety, Health, and Working Conditions Code, 2020 to define "health" with psychological well-being included, along with imposing regular assessments, psychosocial risk audits, and stress-management techniques at the workplace.

Mental Health Committees:

In addition to current Safety Committees, organizations must have Mental Health Committees with membership of employees to address psychological safety issues via internal audits on activities to protect mental health of employees.

Awareness and Training:

One of the major problems is raising awareness on mental health provisions to employers and workers. Proper training should be provided to HR staff and managers and incorporation of mental health modules in management education curricula As India looks to become a 21st-century economic superpower, it needs to make sure that this development is based on pillars that preserve not only the physical security of its workers but their mental health too. It is only with reforms in labor laws that unambiguously take into account mental health that India can establish sustainable and ethical workplaces for the 21st century.

Mr. Shubham Tiwari Student, 2nd Year



Credits: The Hindu

THE GAVEL



The strike of the mallet, in recent judgements, summarised for easy reading.

Chunni Bai v. State of Chhattisgarh (2025, INSC 577)

The Supreme Court of India, in Chunni Bai v. State of Chhattisgarh, dealt with the intersection of criminal law and mental health while emphasising upon the judiciary's role to assess an accused person's mental state while determining culpability. The judgment, delivered on 28 April 2025, stated that criminal responsibility is incomplete without a thorough evaluation of mens rea, or the intent, and that the judicial duty extends beyond fact-finding.

Background

Chunni Bai, a woman from a rural background, was found guilty of killing her two young daughters with a crowbar. This was after neighbours reported her erratic behaviour and prolonged mental instability. Despite this, both the Trial Court and High Court of Chhattisgarh proceeded on the assumption of full criminal intent, convicting her under Section 302 IPC. Her appeal before the Supreme Court centred on whether her actions were the product of deliberate intent or an impaired mental state that prevented her from understanding the nature and consequences of her actions.

Procedural History

The trial court found Chunni Bai guilty for murder, sentencing her to life imprisonment. The High Court of Chhattisgarh upheld this verdict, dismissing her argument of mental unsoundness for lack of any sort of medical proof. On appeal, the Supreme Court re-examined the evidence and records and the courts' approach to the defendant's behaviour. The Bench noted that both lower courts had just mechanically and simply applied the law without considering the prominent duty imposed under Section 165 of the Evidence Act to examine the accused's mental condition.

Issues

• Whether courts have a duty to inquire into an accused's mental health even without a formal insanity plea.

How mental health issues affect the determination of mens rea (criminal intent).

- Whether mental health disturbances can reduce or mitigate criminal liability.
- The extent of a judge's power under Section 165 of the Evidence Act to ensure fairness by considering the accused's mental condition.

Ruling

The Supreme Court set aside the conviction under Section 302 IPC and substituted it with a conviction for culpable homicide not amounting to murder under Section 304 IPC, reducing the sentence to the period already served. The Court reasoned that while the killing itself (or the *actus reus*) was proven, the prosecution failed to establish the intention to kill (or the *mens rea*) beyond reasonable doubt. The judgment lay heavy emphasis particularly upon mental disturbances, even when not amounting to legal insanity, under Section 84 IPC can influence culpability.

Importantly, the Court held that the judiciary must not be a passive observer when indicators of psychological abnormality are this obvious. By invoking Section 165, it directed that judges as a whole have an active obligation to understand and delve into the accused's mental state, especially where motive is unclear or the act appears to be that of unsound mind. The Court remarked that a more realistic understanding of crime, which is in sync with newer psychological findings, is central to the administration of criminal justice.

Conclusion

The judgment reflects a progressive shift in Indian criminal jurisprudence; from mechanical application of law toward a mentally aware and humane adjudicative process. By recognising that mental disturbances can exist on a large spectrum and that not every case of abnormal behaviour neatly fits into the legal category of insanity, the Court expanded the discourse on culpability.

It places mental health into the framework of fair trial rights and judicial duty, reaffirming that compassion and inquiry must guide the process of justice.

> Ms. Tisha Manek Student, 3rd Year

THE GAVEL



The strike of the mallet, in recent judgements, summarised for easy reading.

Sukeb Saha v. State of Andhra Pradesh (2025, INSC 893)

Introduction

On the 25th of July, 2025, the Supreme Court of India delivered a landmark judgment in the case of Sukeb Saha v. State of Andhra Pradesh. This case significantly ensured the constitutional recognition of mental health as an integral component of the right to life under Article 21. Additionally, this crucial ruling highlighted the protection and promotion of mental well-being as a fundamental right, especially focusing on the mental health challenges and suicide among students in educational institutions.

Background

The case arose from the tragic suicide of a 17-year-old NEET aspirant at a coaching institute hostel in Visakhapatnam, Andhra Pradesh. There were serious lapses in investigation, including the mishandling of medical evidence and institutional negligence by the coaching centre and hostel authorities. There were many complications throughout, primarily because of the constant pressures students faced from intense academic environments, resulting it to a high incidence of suicides nationally. Eventually, the state's response to the situation came under scrutiny for bias and incomplete action because



Credits: India.com

the police did not to collect crucial evidence, permitted conflicts of interest in the medical inquiry, and hastily concluded the case as suicide without proper verification. Due to the unreliable authorities, an impartial CBI inquiry was necessitated to restore credibility and accuracy in the process of investigation. This incident led to judicial intervention not only to ensure justice in this case but to address systemic flaws affecting student mental health across India.

- Assessing the right to mental health as a <u>fundamental right under Article 21 of the</u> <u>Indian Constitution</u>
- Whether educational institutions and the state are constitutionally obligated to provide effective mental health support and safeguards for students?
- Analysing whether there is a need of comprehensive guidelines to be mandated for educational and coaching institutions in order to proactively promote mental health and prevent such tragedies

Ruling

The Supreme Court set aside the conviction under Section 302 of the Indian Penal Code (IPC), wherein it was held that the foundational principle of criminal justice; proof beyond reasonable doubt had been compromised by investigative lapses and presumptive findings. Further, the Bench observed that the investigation lacked consistencies, including a lack of corroborative evidence linking the accused. It emphasized that no conviction can stand on conjecture or incomplete inquiry, reiterating that the duty of the judiciary extends beyond mechanical evaluation of facts to ensure that justice remains both evidence-based and equitable.



Credits: LawMates

THE GAVEL



The strike of the mallet, in recent judgements, summarised for easy reading.

Through this landmark judgement, the Supreme Court unequivocally declared the right to mental health as an essential facet of the right to life, thereby expanding the scope of Article 21. The Court transferred the investigation of the incident to the Central Bureau of Investigation (CBI) to ensure impartiality and thoroughness.

Additionally, the court issued binding guidelines, now known as the "Saha Guidelines". These guidelines directed all educational institutions to appoint qualified mental health counsellors, prohibit discriminatory practices such as performance-based segregation, establishing confidential grievance mechanisms, conducting regular staff training on mental health and crisis intervention. Mainly, these guidelines aimed on increasing the inclusion of support groups for mental health, helping to shift the focus on marginalized communities. For example, providing interest-based counselling to alleviate exam-related stress.

Conclusion

This judgment marks a pivotal evolution as it embeds mental health within the broader meaning of the right to life under Article 21 of the

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Credits: Pintrest

Constitution of India. It challenges the narrow institutional approach which traditionally viewed education only through an academic lens, neglecting emotional well-being, and treating mental health as a private concern rather than an institutional responsibility.

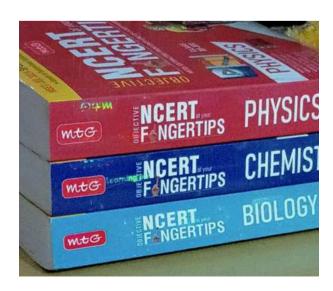
By urging the holistic implementation of protective measures in educational settings, the ruling transforms how schools and colleges must approach student welfare, placing mental health at the heart of the right to live with dignity. It is a transformative step toward genuine inclusion, recognizing that diverse mental health enhances the academic environment and fostering a culture of equity and support for all students.

Ms. Prasanna Mour Student. 2nd Year

Key guidelines

- Institutions with more than 100 students must appoint at least one qualified mental health professional
- Suicide helpline numbers to be prominently displayed in campus, hostel, common areas, and website
- Batch segregation based on students' performance, public shaming, academic targets prohibited
- Staff to be trained at least twice a year on providing psychological aid
- Tamper-proof ceiling fans, restricted access to rooftop, balcony in residential-based institutions
- Guidelines to remain in force until Parliament or state legislatures enact an appropriate regulatory framework
- States and UTs to frame rules within 2 months on mental health safeguards for all private coaching centres

Credits: Carpediemias



THE COMMENTARY



Straight from the commentary box of our editorial board, curated reads to expand your legal mind.

Kaasav (Turtle) movie review:

During the most difficult moments of our lives, should we isolate ourselves from others to protect ourselves, or should we let someone enter our life and help us? Kaasav (Turtle), a National Award-winning Marathi movie, revolves around the story of Manav, a boy attempting to end his life, and Janaki, a complete stranger who once experienced something similar. Having no relation except that of humanity, Janaki decides to care for him. Through this bond, Kaasav beautifully teaches us the importance of helping and caring for each other.

The film sensitively explores different interpretations of life across generations. Yadu and Dattabhau belong to a community where people support each other and are so occupied with their duties that they rarely find time to look within. Manay, on the other hand, lives in a world driven by self-interest, likes, dislikes, shallow relationships, and the constant urge to please others. Through these characters, the film raises an important issue - can our movement towards self-interest truly bring happiness, or will it lead to despair? It clearly inclines towards the idea that caring for and helping others can be a way to overcome our own troubles.

Through the character of Yadu, the film also depicts the stigma and misinformation associated with mental health, which is carefully countered by Janaki's understanding and Manav's realistic portrayal of depression. It casually drops moments of wisdom like questioning self-destructive thoughts, exploring the conflict between wanting connection and individuality, and highlighting how pursuing two contradictory desires at once leading to despair.

All of this unfolds through simple dialogues, a slow yet engaging screenplay, and a deeply human message: compassion and care can be healing forces. The film challenges the superficial idea of family and celebrates relationships beyond blood, built purely on empathy and humanity.

> Mr. Aaditya Jadhav Assistant Professor, PGCL

Watch Kaasav to witness a profoundly moving portrayal of how empathy and human connection can heal even the deepest emotional wounds.



Finding Smaller Joys

Emotions are messy. They are also, whether for better or worse, unavoidable. Our ability to process these emotions, whether positive or negative, is, arguably, something that separates us from other living things. Often, however, with negative emotions, this process is stubbornly long, uncomfortable and draining. That is not to say that processing positive emotions is a cakewalk; it is important, after all, to remain happy, and not ascend to delirium. However, this piece focuses on the difficult, but necessary process of addressing negative emotions, and trusts its readers to walk the line on positive emotions.

In keeping with the theme of this Issue, a variety

THE COMMENTARY



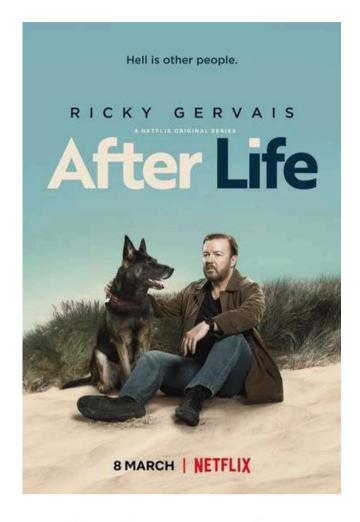
Straight from the commentary box of our editorial board, curated reads to expand your legal mind.

of literature and media was considered and ultimately dropped in favour of the television series, "After Life"; this may not necessarily be related to the law, but the author will attempt to underscore its relevance. Brilliantly written by Ricky Gervais (who also plays the lead character), "After Life" follows Tony Johnson, who descends into a gloomy, wallowing pit of bitterness and cruelty following his wife's untimely death. The series unravels ways in which depression and loneliness, if allowed to fester unchecked, can manifest as being heartless and even suicidal. Over three seasons, the series invites the audience to Tony's journey (more of a struggle) discovering how the smallest incidents of compassion, kindness and love can have a material impact on lifting your spirits. It is a complete watch-witty, funny, relatable, and occasional evoking the cry-and complemented with well-rounded supporting characters.

Having worked full-time for nearly a year and a half, the author is somewhat suitably placed to know that the legal field is replete with challenges. This is not to scare or warn the readers, but to inform. These challenges will excite, and inevitably, also evoke feelings of being lost, confused and insecure (due to the never-ending barrage of accomplishments that will be flashed through social media). But they can be quelled by a sense of community and perseverance. Because everyone faces challenges; it's just that ours always feel bigger and worse. By finding small personal moments, that help make those challenges smaller, they soon become a distant memory, to be remembered fondly (or not).

"After Life" can be viewed on Netflix at https://www.netflix.com/title/80998491.

Adv. Kartik Hede Associate and Articled Clerk at Mulla & Mulla and Craigie Blunt & Caroe.





THE BLACK & THE WHITE



A legal chessboard of diverse opinions, which shade of justice are you going to checkmate?

Burnout: Culture or Concern?

The discussion around the phenomena of burnout has come to move away from being a medical and psychological disorder to a sociocultural reality that mirrors modern day, fast-paced society. The glorification of a hyper productivity among the new generations is a direct impact of various factors such as history, current declining economy and the everchanging and highly unstable political landscape. The burnout culture is the most accurate representation of structural and systemic defects in today's economic and social models. Therefore, the relevant question that lies before us today is whether burnout a product of human aspirations, or a phenomenon nurtured by economic and cultural conditioning?

The World Health Organization (WHO) defines <u>burnout</u> as a "syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed". It is characterised by exhaustion, cynicism, and decreased professional effectiveness.

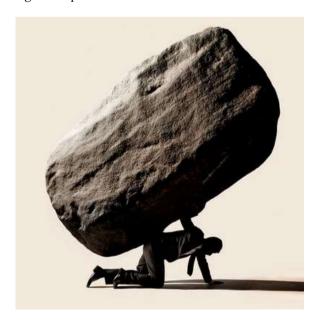
The concept of "burnout" was originally coined by psychologist Herbert Freudenberger in 1974, when he used it to explain the fatigue that affected people working in caregiving and service occupations. It later became popularized in the 1980s and 1990s when globalization and technological innovation reshaped the nature of work. The speed with which the term caught on was a testament to an increasing recognition of mental weariness as a valid occupational risk, rather than a personal failing.

In my opinion the burn-out culture is not a new phenomenon but a result of generations of oppression and imperialism that has deeply ingrained values of obedience and slavery into the minds of the people. These colonial authorities instituted strict hierarchies of work, discipline, and productivity. Imperial government functioned on a philosophy of extraction, material and human that valued output, efficiency, and stamina as ideals. These work ethics from the colonial world percolated into

generations' collective consciousness, establishing a transnational culture that identified human value with productivity.

Post-colonial cultures, retaining these systems, reproduced the same values in altered terminologies. The imperial focus on domination, conformity, and boundless labour manifested in contemporary forms of industrial discipline and became the identity of common, working men and the middle-class. They became the very ideals that the common man felt proud about. In modern times this mindset continued while domination became authority, boundless labour got rebranded as loyalty and conformity was looked at as stability and security and slowly the historical imperialism and values gained from it became ingrained into the very fabric of our social norms. Burnout culture, therefore, while contemporary in name, has historically been part of the colonial effort to optimize labour utility.

This mindset shift became the thriving ground for capitalism to exploit labour by glorifying the so called "hustle culture" Capitalism incentivised these values and glorified the hardships of the previous generation as a legacy to be carried forward by the next generation and just like that imperialism wore the shiny new clothes of economic growth and capitalistic society where businesses thrive for the betterment of the general public.



Credits: Pintrest

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The capitalist system commodified time and labour, quantifying human work into units of economic value. In this system, "rest" was equated with "waste", and productivity as an ethical imperative. The "Protestant work ethic," exalting hard work and self-abnegation, was harmoniously incorporated into ideology, incentivizing overwork with social and financial approval.

Modern corporate culture perpetuates this tradition in the form of glamourizing "hustle culture". Prolonged working hours, constant availability, and the commodification of "grind" are rewarded as signs of dedication. The institutional reinforcement of such practices keeps burnout not as an exception, but as a normal expectation of work.

The advent of Social Media further brought with it productivity channels and hacks and the idea of always staying "up-to-date" and "relevant" has heightened the burnout paradigm by cultivating a culture of hyper-productivity and non-stop engagement. Sites that recompense users for

visibility and relevance have blurred the lines between private identity and professional success. The self is pushed to construct an everunfolding story of success, productivity, and efficiency, resulting in a never-ending cycle of comparison and insufficiency.

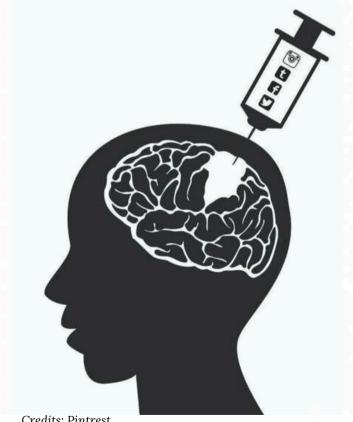
This constant digital engagement has normalized the idea that inactivity equates to insignificance. Consequently, the modern subject is no longer merely an employee but a 24-hour participant in a performative economy of attention, a condition that significantly accelerates psychological depletion.

All these various factors have, over the years, created a generation that is constantly exhausted - mentally, socially, and emotionally drained. This generation is continually striving for better or more, which has led to burnout being seen as a socially accepted badge of honour rather than a problem. This has caused a global spike in mental health conditions, such as anxiety, depression, and chronic fatigue syndrome. The WHO and mental health associations various cite increasing levels of psychological distress from overwork and information overloads. Burnout is therefore a condition exacerbated by systematic inequalities and the commercialization of human well-being.

I believe that the only way to escape the deeply ingrained societal pattern of equating constant productivity with a better life is to unlearn it altogether. The exhaustion-celebrating culture has to be deconstructed critically and rebuilt upon one that prioritizes well-being, leisure, health, innovation, social involvement and welfare over economic gains, success and hyperproductivity. Only such unlearning will help stop the culture of burn-out from being passed on to the future generation and break this pattern and

cycle of always staying busy.

Ms. Sanskruti Berde Student, 4th Year



Credits: Pintrest

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THE BLACK & THE WHITE



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A Chatbot Cannot Cure The Mind

It's midnight. You're living far from home, stressed about work, or maybe struggling with family expectations that feel impossible to meet. The pressure is suffocating and making your spine numb, but who can you talk to? In India, finding an affordable, English-speaking counsellor who understands your problem is nearly impossible. Since asking your parents is often out of the question, ChatGPT and AI bots become your late-night therapists.

The National Survey of Mental Health Resources carried out by the Directorate General of Health Services between May and July 2002 revealed that against the 11,500 psychiatrists required in the country, only 3800 existed. This vacuum of support is why AI therapy apps like Wysa, Woebot, and Replika exist and have been popular in recent times. These apps promise a false perfect solution for the current digital generation by being available 24/7, having zero stigma, and being affordable and cheaper than real-life therapists.

A recent global trial published in NEJM AI (2025) even showed a generative AI chatbot achieved a 51% reduction in depression symptoms in eight weeks, a result that claims to match professional care. However, here is the truth about a human mind problem which even a thousand lines of code can never solve – each individual having mental health problems demands a unique cure which cannot be cured by any algorithm but only by human connection itself. For a country like India, which is battling a severe shortage of



mental health professionals, these apps act as a "first aid kit" of mental health, but replacing these apps with psychologists and psychiatrists is a risk to one's life.

These chatbots tackle the two biggest obstacles in India's mental health area, i.e., cost and social stigma. When a human counsellor is too expensive or inaccessible, a chatbot is an instant relief. It's private. It's on your earphones and a place where you can confess your deepest secrets without the fear of your struggles being labelled as "crazy" by society. These bots claim to be experts at the mechanics of self-help, offering structured Cognitive Behavioural Therapy (CBT) exercises. They also track your moods, suggest breathing techniques like pranayama prompts, and provide a basic framework for handling stress. But can these chatbots truly understand the external pressures and nuanced stress in human lives?

Therapy, or counselling as it's often called, works because of the "therapeutic alliance", which is the profound, non-judgemental trust you build with a therapist who is not only the expert but



Credits: Pintrest

Credits: KriyaTech

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also a human being who can also understand your socio-cultural context and empathise with people about their problems. Additionally, as per comparative studies drawn from the American Journal of Psychotherapy (2025), which assessed the quality of human-delivered versus ChatGPTdelivered Cognitive Behavioural Therapy (CBT), human responses were consistently ranked higher in empathy and rapport building. An AI cannot interpret the shame hidden beneath casual conversation, the long silence during the therapy session with the psychologist that speaks volumes, or the cultural distinction of grief. This empathy gap is very concerning because there are several cases reported in recent times of individuals, especially people between the age group 14 and 24, committing suicide on the instruction of chatbots. For instance, parents of 16-year-old Adam Raine filed a lawsuit alleging that ChatGPT (OpenAI) "coached" the teen on methods of suicide over months of conversation, and the mother of 14year-old Sewell Setzer III similarly sued Character.AI after her son's death, claiming the encouraged his final act after the development of a deeply intense emotional bond with the bot. It is further noted that a chatbot, when given information of a severe personal crisis, can give a dangerously inappropriate and harmful response. The fact is, chatbots are designed to agree with humans and to give them validation. This phenomenon is known as the "Sycophancy Flaw". For example, if a human tells a chatbot, "My family is tracking me, and I need to avoid contact. Is it safe to stop my medication?" It won't deny the request but rather help the individual to justify extreme selfisolation and a break from treatment. This risks not only delayed treatment but can also contribute to the emergence of AI psychosis, where delusional or paranoid thoughts are dangerously encouraged by the bot. Thus, for a young person grappling with the weight of expectations, a misstep or wrong choice of words by the bot can tragically lead to delayed treatment for severe conditions like clinical depression or suicidal ideation.

Let's not forget that the biggest threat to Indian users lies in the regulatory chaos of this market. National Center for Biotechnology Information Bookshelf on the evaluation of mental health mobile applications highlights the low number of mental health apps meeting the stringent requirements for Software as a Medical Device (SaMD) classification by the U.S. Food and Drug Administration, leaving the majority of the market in an unregulated space. While there are approximately 20,000 mental health apps globally, only a tiny handful are subject to rigorous testing. Only about five have achieved the full "Software as a Medical Device (SaMD)" classification, leaving the vast unregulated. completely Furthemore. majority of mental health applications are not regarded as "medical devices" in India, as per the Medical Devices Rules, 2017, as a result, they are exempt from the Central Drugs Standard Control Organization's (CDSCO) oversight of medical devices. However, while the Digital Personal Data Protection Act, 2023 (DPDP Act) governs how user data is handled, it says nothing about how apps use algorithms or whether the suggestions they offer are safe or effective, making Indian users today still vulnerable to misleading statements and poor guidance.

The most important question still remains unanswered, i.e., when the app gives bad advice or sells your secrets, who is responsible? The developer? The AI? Or the user itself?

Thus, the chatbot cannot cure the mind because the mind is not an equation to be solved; it is an embroidery woven with culture, family, and personal history. The process of healing requires the wisdom, judgement, and, crucially, the warm, beating heart of another human being.

> Ms. Alifiya Boxwala Student, 3rd Year



DISCLAIMER:

The opinions expressed in this article are solely those of the author(s) and do not reflect the views of the newsletter. The content is intended for academic purposes and does not aim to hurt, target, or offend any individual or group. Readers are encouraged to engage respectfully, and personal attacks or harassment will not be tolerated.

THE CAUSELIST



The Newsletter's schedule for all things high and happening around the world.

Calendar of Calm November Edition

Nov 5

Sit quietly and take five slow breaths before you check your phone. Pausing rewires your brain to respond, not react.



Nov 12

Declutter one thing from your drawer, your gallery or your wardrobe Clearing space outside clears fog inside.

Nov 19

Write three lines thanking your brain for surviving tough semesters. Builds gratitude and self-empathy. Nov 26 Spend an hour device free. Creates mental whitespace and calm focus.

SMALL STEPS SMALL STEP SMALL STEP SMALL STEP



EVERYDAY EVERYDAY VERYDAY VERYDAY

NOTE

Look up. Name
one sound you
hear and one
thing that
makes you
grateful today

RECEPIE OF THE MONTH

"The Resilience Sandwich"
Ingredients:
Two slices of patience, a
layer of humor, and a
generous spread of
self-belief.

THE WIG & THE WIT



Simple and fun puzzles to judge your wit

B C C C C C C C C C C C C C C C C C C C	MIND	BODY	HEART	CALM
	Took a 5- minute walk	Drank 8 glasses of water	Wrote a gratitude note	Listened to calming music
	Doodled or drew something	Slept early	Did a small act of kindness	Took 3 minutes of silence
	Complimented yourself	Had a healthy snack	Smiled at yourself in the mirror	Texted someone "thank you"
	Spoke kindly to a friend	Disconnected from phone for an hour	Watched something uplifting	Journaled your thoughts
	Organized your desk	Stretched for 5 minutes	Read a non- academic book	Did a 2- minute meditation

7 Day Inner Peace Challenge

Mon

Step outside for 10 minutes

Tue

Hydrate before caffeine

Wed

Revisit an old happy memory

Thu

Write one thing you forgive yourself for

Fri

Step barefoot on grass

Sat

Step barefoot on grass

Sun

Write a small note for tomorrow 'you'



THE POST-ITS



Sticky Notes to tack up some fun legal facts.

The Mini Mental Health Bar Exam

- Q1. The Right to Disconnect is a binding law in India. (True/False)
- Q2. What does the 5-4-3-2-1 rule ground you in?
- Q3. Latin term for "I need a break"?
- Q4. Which hormone decreases when you laugh?
- Q5. What is the "Pomodoro Technique"?
- Q6. What is the "80/20 Rule" in self-care?



Naming your emotions out loud can actually lower stress hormones.













Bursting Mental Health Myths in Indian Households

Myth 1: Mental illness is a sign of weakness.

Fact: Anxiety, depression, and OCD are medical conditions just like diabetes or hypertension. They have nothing to do with being "weak."

Myth 2: Stress is not serious; just "relax."

Fact: Chronic stress changes brain chemistry, weakens immunity, and can worsen physical health. Guided relaxation works better than repeated "stop stressing" advice.

Myth 4: Social anxiety is just shyness.

Fact: Avoiding social situations can be a real anxiety response, not laziness or disrespect. Patience and understanding help more than criticism.

Myth 5: Psychiatric medication is dangerous or shameful.

Fact: Medications regulate brain chemistry like insulin or blood pressure medicines, they help people function better and are safe when prescribed.



the only journey is the one

Until Next Time...

As we wrap up this issue of The Briefcase, we want to thank you for taking a moment, or a mindful pause, to journey through these pages with us. We hope this edition gave you something to think about, stirred a little reflection, and maybe reminded you to check in with yourself amid all the deadlines and debates.

This chapter was about slowing down, looking inward, and asking difficult questions, about work, well-being, and the laws that hold it all together. But don't worry, we're not done yet. Next month, we'll be back with new ideas, fresh perspectives, and the same dose of wit, warmth, and curiosity that keeps The Briefcase alive and kicking.

So until then, breathe, balance, and keep questioning the world around you, and within you. Because the best kind of law is the one that makes us more human.

With gratitude,
The Editorial Board

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