

PREFACE TO THE EDITION

The forthcoming issue of the **International Journal of Judicial Science Research Studies** brings together a rich and timely collection of scholarly works that reflect the evolving contours of law, justice, and constitutional governance in contemporary India and beyond. The articles featured in this issue engage critically with pressing legal questions arising from technological transformation, constitutional interpretation, social justice, regulatory reform, and institutional accountability.

Several contributions examine the dynamic relationship between law and emerging realities, ranging from the legal architecture of digital public infrastructures such as Aadhaar and UPI to the regulatory and rights-based challenges posed by data protection, consent, and accountability. Constitutional discourse is further enriched through reflective analyses on the Basic Structure Doctrine at fifty, offering comparative insights and considering its future trajectory in Indian jurisprudence.

The issue also foregrounds the lived realities of justice delivery. Critical examinations of criminal procedure reforms, the implementation of the POSH Act, juvenile justice safeguards, and child labour laws reveal persistent gaps between legislative intent and enforcement, calling for deeper institutional and cultural change. In parallel, articles on gender-neutral laws and workplace protections underscore the law's role in responding to evolving notions of identity, equality, and dignity.

Expanding the discussion into the intersection of healthcare, technology, and legal governance, this issue includes a comparative analysis of regulatory frameworks governing mental health telemedicine across India, the United States, and the United Kingdom. The study highlights the significant treatment gap in India's mental healthcare system and examines how telemedicine initiatives, including national programmes aimed at widening access, are reshaping service delivery. By analysing prescribing restrictions, informed consent standards, licensure requirements, quality assurance mechanisms, and data protection safeguards, the article critically evaluates the adequacy of India's existing regulatory architecture. Drawing comparative lessons from international models, it proposes reforms such as revisiting prescribing limitations under telemedicine guidelines, integrating telemedicine within mental healthcare legislation, and developing national tele-psychiatry practice standards. This contribution adds an important dimension to contemporary debates on the constitutional right to mental healthcare and the need for responsive regulatory frameworks in the digital age.

Collectively, the contributions in this issue demonstrate a strong commitment to doctrinal clarity, empirical rigor, and normative reflection. By addressing both enduring constitutional principles and emerging legal challenges including those arising at the intersection of digital technology and healthcare this issue of IJJSRS aims to stimulate informed debate, support policy discourse, and contribute meaningfully to the advancement of judicial science and legal scholarship.

Dr. Dakshina Saraswathy
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The Legal Architecture Of Digital Public Infrastructures: Consent, Accountability, And Data Sovereignty In India's Aadhaar And UPI Systems

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Abstract

Digital Public Infrastructures (DPIs) represent a fundamental transformation in state-citizen interactions, with India's Aadhaar biometric identification system and Unified Payments Interface (UPI) serving as paradigmatic examples. This paper examines the legal architecture governing these systems through the triadic framework of consent, accountability, and data sovereignty. The analysis reveals critical tensions between technological innovation and rights protection, particularly following the Supreme Court's 2018 Puttaswamy judgment and the enactment of the Digital Personal Data Protection Act (DPDPA), 2023. Through doctrinal analysis and comparative evaluation, this paper demonstrates that while India has constructed a sophisticated legal framework for DPIs, significant gaps persist in consent mechanisms, accountability structures, and sovereignty protection. The paper argues that the current legal regime, though progressive, requires strengthening through enhanced institutional oversight, clearer data localization mandates, and robust enforcement mechanisms. These findings contribute to understanding how emerging democracies can balance digital inclusion with fundamental rights protection in the era of data-driven governance.

Keywords: - Digital Public Infrastructure, Aadhaar, UPI, Consent Framework, Data Sovereignty, Accountability Mechanisms, DPDPA 2023

I. INTRODUCTION

The digitalization of state functions represents one of the most significant transformations in contemporary governance. India's Digital Public Infrastructure (DPI), comprising the Aadhaar biometric identification system and the Unified Payments Interface (UPI), exemplifies this transformation at unprecedented scale. With over 1.38 billion Aadhaar enrollments and 83 billion UPI transactions annually, these systems have fundamentally restructured the relationship between state, citizen, and market (National Payments Corporation of India, 2024).

The legal architecture governing these systems must navigate complex tensions between technological efficiency and fundamental rights protection. The Supreme Court's landmark recognition of privacy as a fundamental right in (Justice K.S. Puttaswamy v. Union of India, 2017) established new constitutional parameters for data governance. Subsequently, the 2018 Aadhaar judgment and the (Digital Personal Data Protection Act, 2023), have created a multilayered legal framework that attempts to reconcile innovation with rights protection.

This paper examines three critical dimensions of this legal architecture: consent mechanisms, accountability structures, and data sovereignty frameworks. These dimensions are not merely technical considerations but represent fundamental questions about state power, individual autonomy, and national sovereignty in the digital age. The research question guiding this analysis is: How does India's legal framework for DPIs balance technological efficiency with the protection of consent, accountability, and data sovereignty, and what gaps or tensions persist in this architecture?

The significance of this inquiry extends beyond India's borders. As the "India Stack" model gains international attention as a blueprint for developing economies, understanding its legal foundations becomes crucial for global digital governance.

discourse (Jiang & Hariharan, 2024). This paper contributes to this understanding by providing a comprehensive doctrinal analysis of India's DPI legal regime, identifying structural strengths and persistent vulnerabilities.

II. THEORETICAL FRAMEWORK AND CONCEPTUAL FOUNDATIONS

The legal architecture of DPIs must be understood through the intersection of multiple theoretical frameworks: privacy law, administrative law, and sovereignty theory. This section establishes the conceptual foundations for analyzing India's DPI regime.

2.1. Privacy as a Fundamental Right

The Puttaswamy judgment (2017) elevated privacy to constitutional status, establishing a three-pronged test for legitimate privacy restrictions:

- Existence of a law,
- Legitimate state interest
- Proportionality (Justice K.S. Puttaswamy v. Union of India, 2017).

This framework creates constitutional parameters within which all data processing activities, including those under DPIs, must operate. The judgment explicitly recognized informational privacy, bodily privacy, and decisional autonomy as protected dimensions.

The proportionality test, borrowed from European jurisprudence, requires that state interference with privacy rights be both necessary and proportionate to the objective sought. This test has become the cornerstone for evaluating the constitutionality of data collection and processing under both Aadhaar and UPI systems.

2.2. Consent Theory in Digital Contexts

Consent in digital ecosystems presents unique challenges. Traditional contract law notions of informed, voluntary consent often break down when dealing with complex technological systems and asymmetric power relationships (Solove, 2013). The DPDPA 2023 attempts to address these challenges through provisions requiring "free, specific, informed and unambiguous" consent (Digital Personal Data Protection Act, 2023), Section 6.

However, the concept of "consent" in the context of state-provided essential services raises fundamental questions about voluntariness. When Aadhaar becomes necessary for welfare benefits or when UPI becomes the dominant payment mechanism, the boundary between consent and compulsion blurs.

2.3. Accountability in Administrative State

Accountability mechanisms in administrative law traditionally encompass three dimensions: transparency (information disclosure), participation (stakeholder involvement), and remediation (grievance redress). In the context of DPIs, these dimensions must extend to algorithmic accountability, data breach notification, and institutional oversight (Bovens, 2007).

The DPDPA 2023 introduces the concept of "accountability" as a core principle, requiring data fiduciaries to implement appropriate technical and organizational measures (Digital Personal Data Protection Act, 2023), Section 8. However, the operationalization of this principle remains contested.

2.4. Data Sovereignty and National Interest

Data sovereignty refers to the principle that data generated within a nation's borders should be subject to that nation's laws and governance structures. India's approach to data sovereignty reflects both economic nationalism and security concerns, manifesting in data localization requirements and restrictions on cross-border data transfers (Jiang, 2024).

The intersection of data sovereignty with international trade obligations creates complex legal tensions. India's evolving position on data flows—moving from strict localization mandates to more nuanced, sector-specific approaches—reflects ongoing negotiation of these tensions.

III. AADHAAR: LEGAL ARCHITECTURE AND CONSENT MECHANISMS

3.1. Legislative Framework

The Aadhaar Act, 2016, provides the primary legal foundation for India's biometric identification system. The Act establishes the Unique Identification Authority of India (UIDAI) as the governing body and creates a framework for enrollment, authentication, and data protection (Aadhaar Act, 2016).

The Act's passage as a "Money Bill," avoiding Rajya Sabha scrutiny, has been subject to constitutional challenge. While the Supreme Court upheld this procedure, Justice Chandrachud's dissent highlighted concerns about circumventing legislative deliberation (Justice K.S. Puttaswamy v. Union of India, 2018).

3.2. The Constitutional Validity Verdict (2018)

The Supreme Court's 2018 judgment in Justice K.S. Puttaswamy v. Union of India represents the most comprehensive judicial examination of Aadhaar's legal architecture. The Court upheld the Act's core provisions while striking down several elements:

3.2.1. Upheld Provisions:

- Section 7: Mandatory Aadhaar for government subsidies and benefits

- Core enrollment and authentication mechanisms
- UIDAI's institutional structure

3.2.2. Struck Down/Modified Provisions:

- Section 57: Prohibited private sector mandatory use of Aadhaar
- Section 33(2): Removed national security exception allowing disclosure without court order
- Regulation 26(c): Prohibited indefinite metadata storage
- Banking and telecom linking requirements under separate laws

The judgment applied the proportionality test, finding that while Aadhaar serves legitimate state interests (welfare delivery, subsidy targeting), certain provisions exceeded proportionate means.

3.3. Consent Architecture Under Aadhaar

The Aadhaar Act's consent framework operates on multiple levels:

Enrollment Consent: Section 3 establishes enrollment as "voluntary," yet practical compulsion arises when Aadhaar becomes necessary for essential services. The Supreme Court addressed this paradox by limiting mandatory Aadhaar to Section 7 benefits while prohibiting private sector compulsion.

Authentication Consent: Section 8 requires requesting entities to obtain explicit consent before authentication. The 2024 amendments strengthened this provision, mandating that consent be:

(1) informed, (2) specific to purpose, (3) accompanied by alternatives notice, and (4) freely revocable ([Aadhaar Amendment Regulations, 2024](#)).

Consent Manager Framework: The DPDPA 2023 introduces "Consent Managers"—intermediaries registered with the Data Protection Board who facilitate consent management on behalf of individuals. This architecture, borrowed from India's Account Aggregator framework, represents an innovative approach to digital consent ([Digital Personal Data Protection Act, 2023](#)), Section 6(8).

Despite these provisions, implementation challenges persist. Field studies document instances where service providers position Aadhaar as the default option without adequately informing citizens of alternatives, creating a gap between legal standards and practical reality ([Privacy International, 2018](#)).

3.4. Accountability Mechanisms

The Aadhaar Act establishes several accountability mechanisms:

Institutional Accountability: The UIDAI operates under the oversight of the Ministry of Electronics and Information Technology (MeitY). However, Justice Chandrachud's dissent highlighted the absence of an independent monitoring authority, arguing that UIDAI's dual role as operator and regulator creates accountability deficits ([Justice K.S. Puttaswamy v. Union of India, 2018](#)).

Data Security Obligations: Section 29 mandates security protocols for handling Aadhaar data. The 2019 regulations require biometric data encryption, restricted access protocols, and audit trails. However, documented data breaches have raised questions about enforcement effectiveness.

Penalty Framework: Section 47 establishes civil and criminal penalties for violations. However, the absence of clear enforcement procedures and limited prosecutions have undermined deterrent effects.

Redress Mechanisms: Section 32 establishes grievance redress processes, but critics argue these mechanisms lack independence and accessibility, particularly for marginalized populations who form Aadhaar's primary beneficiaries.

The DPDPA 2023 enhances accountability through mandatory breach notification requirements and establishment of the Data Protection Board, though its full implementation awaits notification of rules ([Digital Personal Data Protection Act, 2023](#)), Sections 18-19.

IV. UPI: REGULATORY FRAMEWORK AND OPERATIONAL ACCOUNTABILITY

4.1. Institutional and Legal Structure

Unlike Aadhaar, UPI lacks dedicated primary legislation. Instead, its legal framework derives from multiple sources:

- Payment and Settlement Systems Act, 2007: Provides foundational authority for digital payment systems
- RBI regulations: Multiple circulars governing UPI operations
- NPCI guidelines: Operational circulars issued by the National Payments Corporation of India
- DPDPA 2023: Governs personal data processing in UPI transactions

This fragmented legal architecture creates both flexibility and uncertainty. The absence of dedicated legislation means UPI governance relies heavily on regulatory circulars and industry self-regulation.

4.2. The National Payments Corporation of India

NPCI, established as a not-for-profit company under Section 8 of the Companies Act, operates UPI infrastructure. This hybrid public-private model raises accountability questions. While NPCI is industry-owned (by banks), it performs quasi-public functions in operating national payment infrastructure.

The legal status of NPCI—neither purely governmental nor purely private—creates ambiguities regarding transparency obligations, public accountability, and judicial review. Recent scholarship argues for clearer legislative definition of NPCI's status and obligations (Hariharan & Natarajan, 2024).

4.3. Consent Mechanisms in UPI

UPI's consent architecture operates differently from Aadhaar:

Transaction Consent: Each UPI transaction requires explicit authentication through PIN or biometric verification. This transaction-level consent provides granular control but also creates friction.

Data Sharing Consent: The NPCI guidelines mandate explicit user consent before data sharing with third parties. However, the 2025 amendments strengthen these requirements, mandating that consent be opt-in rather than default (NPCI Circular 220, 2025).

Numeric UPI ID Consent: Recent regulations require explicit consent for seeding and porting UPI numbers, with mandatory provision of alternatives. This addresses earlier concerns about forced adoption (NPCI Guidelines, 2025).

The integration of UPI with the Account Aggregator framework creates additional consent layers, allowing users to control financial data sharing across institutions through standardized consent artifacts.

4.4. Accountability and Security Framework

Recent NPCI circulars have significantly enhanced UPI's accountability framework:

API Security Guidelines (OC-215/2025-26): Mandate comprehensive security controls, including rate limiting, input validation, and audit logging. Non-compliance results in API access restrictions and penalties (NPCI, 2025).

Transaction Limits and Monitoring: The 2025 amendments impose strict limits on API calls (50 balance enquiries, 25 account listings per day per app) to prevent excessive data extraction and system abuse.

Chargeback and Dispute Resolution: Updated procedures mandate automatic acceptance/rejection of chargebacks and establish clear timelines for resolution. The "4-hour rule" requires issue resolution within four hours of reporting.

Breach Notification: PSPs must report breaches to NPCI immediately, with monthly reporting of locally settled UPI numbers during system delays, ensuring transparency and accountability.

These mechanisms represent significant advances in operational accountability. However, questions persist about NPCI's own accountability, particularly regarding transparency in decision-making and stakeholder participation.

V. DATA SOVEREIGNTY AND CROSS-BORDER DATA FLOWS

5.1. India's Data Localization Approach

India's approach to data sovereignty has evolved from broad localization proposals to sector-specific requirements:

(RBI Mandate ,2018): Requires all payment system operators to store payment data exclusively within India. This mandate directly impacts UPI operations and represents one of the strictest financial data localization requirements globally.

Aadhaar Data Localization: The Aadhaar Act prohibits storage of Core Biometric Information outside India (Aadhaar Act, 2016), Section 29. Authentication logs must also be stored domestically.

DPDPA Framework: The DPDPA 2023 does not mandate blanket data localization but grants the government power to notify "restricted countries" to which data transfers are prohibited. This creates a negative list approach, maintaining flexibility while preserving sovereignty concerns (Digital Personal Data Protection Act, 2023), Section 16.

The evolution from blanket localization to sector-specific and restricted-country approaches reflects India's attempt to balance sovereignty concerns with economic pragmatism and international trade obligations.

5.2. Theoretical Justifications and Critiques

Proponents of data localization advance several justifications:

- **Law Enforcement Access:** Localization facilitates timely law enforcement access to data without depending on foreign legal assistance treaties.
- **Economic Development:** Requiring local data storage stimulates domestic data center industry and creates technology jobs.
- **National Security:** Preventing foreign access to citizens' sensitive data protects against surveillance and potential weaponization.
- **Digital Sovereignty:** Asserting regulatory control over data generated within national borders exercises legitimate sovereign prerogatives.

5.3. Critics counter with several concerns:

Economic Costs: Localization requirements impose significant infrastructure costs, particularly on startups and SMEs, potentially hindering digital economy growth.

Trade Tensions: Strict localization conflicts with international trade agreements and free data flow principles, risking retaliatory measures.

Security Paradoxes: Concentrating sensitive data in domestic servers may actually increase security vulnerabilities if domestic infrastructure is less sophisticated than global alternatives.

Surveillance Risks: Localization facilitates state surveillance by ensuring all data remains within governmental reach, potentially undermining the privacy protections the framework ostensibly serves.

5.4. Comparative Analysis: India, EU, and China

Table 1 compares India's data sovereignty approach with the European Union's GDPR and China's Cybersecurity Law:

Table 1. Comparative Data Sovereignty Frameworks

Dimension	India (DPDPA 2023)	EU (GDPR)	China (CSL 2017)
Localization Mandate	Sector-specific; negative list for transfers	No mandatory localization; adequacy decisions for transfers	Mandatory for critical information infrastructure operators
Legal Basis for Transfer	Government notification; restricted countries	Adequacy assessment by European Commission; Standard Contractual Clauses	Security review by Cyberspace Administration
Individual Rights	Strong consent requirements; data principal rights	Robust individual rights; right to be forgotten; data portability	Limited individual rights; national security primacy
Regulatory Authority	Data Protection Board (to be operationalized)	National Data Protection Authorities; EDPB coordination	Cyberspace Administration of China; centralized control
Enforcement Mechanism	Penalties up to ₹250 crores; enforcement pending	Fines up to 4% of global revenue; strong enforcement record	Severe penalties including business suspension; party-state enforcement

This comparative analysis reveals India's hybrid approach: borrowing consent-centric frameworks from GDPR while maintaining sovereignty-focused localization similar to China, yet attempting to preserve democratic accountability mechanisms.

5.5. The Tension Between Sovereignty and Trade

India's data sovereignty approach creates tensions with international trade obligations. The Regional Comprehensive Economic Partnership (RCEP) and bilateral investment treaties generally favor free data flows. India's withdrawal from RCEP negotiations partly reflected these data flow disagreements.

The 2025 withdrawal of equalization levies on digital advertising services, following trade pressure, illustrates the complex negotiation between sovereignty assertions and economic pragmatism (TechPolicy.Press, 2025). This suggests that India's data sovereignty framework remains subject to geopolitical and economic forces beyond purely legal considerations.

VI. THE DIGITAL PERSONAL DATA PROTECTION ACT, 2023: INTEGRATIVE FRAMEWORK

The (DPDPA 2023) represents India's comprehensive attempt to create an integrated data protection framework applicable to both DPIs and private sector data processing. This section analyzes key provisions and their implications for Aadhaar and UPI.

6.1. Scope and Applicability

The Act applies to processing of "digital personal data" within India and to offshore processing for offering goods/services to individuals in India (Digital Personal Data Protection Act, 2023), Section 2. This extraterritorial application extends India's regulatory reach globally, similar to GDPR.

Critically, the Act applies to both government and private entities, creating uniform standards across public and private sectors. However, Section 17 provides broad exemptions for government processing in the interest of sovereignty, security, public order, and friendly relations with foreign states. These exemptions have drawn criticism for potentially undermining the Act's protective scope.

6.2. Core Principles and Rights

The Act establishes several foundational principles:

- **Consent-Based Processing:** Requires "free, specific, informed, clear and unambiguous" consent for data processing, with explicit prohibition of forced or coercive consent (Section 6).
- **Purpose Limitation:** Data may be processed only for specified purposes, with new purposes requiring fresh consent (Section 4).
- **Data Minimization:** Collection must be limited to what is necessary for the specified purpose (Section 8).
- **Storage Limitation:** Data must be erased upon purpose completion or consent withdrawal (Section 8).

- Security Safeguards: Mandatory implementation of reasonable security measures (Section 8).
- Accountability: Data fiduciaries bear full responsibility for compliance, including for processors acting on their behalf (Section 8).

6.3. Data principals (individuals) receive several rights:

- Right to access collected data and processing purposes (Section 11)
- Right to correction and completion of data (Section 11)
- Right to erasure (with exceptions for legal obligations) (Section 11)
- Right to grievance redressal (Section 11)
- Right to nominate in case of death or incapacity (Section 11)

6.4. Application to DPIs

For Aadhaar and UPI, the DPDPA creates several implications:

Enhanced Consent Requirements: Both systems must ensure consent mechanisms meet the Act's standards. For Aadhaar, this reinforces the 2024 regulatory amendments requiring explicit, informed consent. For UPI, this mandates clearer data sharing disclosures.

Consent Managers: The provision for registered consent managers creates new intermediaries for managing consent across multiple platforms, potentially including UPI-integrated services.

Breach Notification: Both UIDAI and NPCI must notify the Data Protection Board of breaches "as soon as possible," creating new transparency obligations (Section 8).

Government Exemptions Challenge: Section 17's broad exemptions potentially undermine protections. If government entities operating Aadhaar invoke sovereignty or security exemptions, core protections (notice, consent) may not apply, creating a two-tier system.

6.5. Limitations and Critiques

Several limitations undermine the DPDPA's effectiveness:

Weak Enforcement Architecture: The Data Protection Board's powers, composition, and independence remain unclear pending rules notification. Without strong institutional backing, rights remain theoretical.

Broad Government Exemptions: Section 17 exemptions lack procedural safeguards or oversight mechanisms. Unlike GDPR's necessity and proportionality requirements for government processing, Indian framework grants wide discretion.

Absence of "Right to Be Forgotten": Unlike GDPR, the DPDPA provides only a right to erasure subject to extensive exceptions, limiting individual control.

Limited Data Portability: The Act does not establish robust data portability rights, hindering user mobility across platforms.

Penalty Uncertainty: Penalties up to ₹250 crores seem substantial, but effectiveness depends on enforcement, which remains untested.

VII. IDENTIFIED GAPS AND PERSISTENT CHALLENGES

Despite the sophisticated legal architecture, several critical gaps persist:

7.1. Consent in Contexts of Compulsion

The fundamental tension between voluntary consent and practical compulsion remains unresolved. When Aadhaar becomes necessary for welfare benefits or when UPI becomes the dominant payment modality, consent becomes illusory. The legal framework acknowledges this through Section 7 of the Aadhaar Act but fails to establish adequate compensatory safeguards.

Research documenting authentication failures leading to welfare denial highlights how technical glitches transform consent-based systems into exclusionary mechanisms ([Privacy International, 2018](#)). The legal framework lacks provisions addressing such technological failures' rights implications.

7.2. Accountability Deficits

Institutional Accountability: Neither UIDAI nor NPCI are subject to robust public accountability mechanisms. UIDAI lacks an independent oversight body, while NPCI's hybrid status creates ambiguities about transparency obligations.

Algorithmic Accountability: Both systems employ algorithmic decision-making (biometric matching, fraud detection), yet neither the Aadhaar Act nor UPI regulations establish algorithmic accountability standards. The absence of explainability requirements, bias auditing, or algorithmic impact assessments represents a significant gap.

Remedy Limitations: Existing grievance mechanisms lack independence and accessibility. Justice Chandrachud highlighted this in his dissent, noting the absence of effective remedies for rights violations ([Justice K.S. Puttaswamy v. Union of India, 2018](#)).

7.3. Data Sovereignty Implementation Challenges

Localization vs. Security: The assumption that data localization enhances security remains empirically unproven. India's data center infrastructure may lack security sophistication of global providers, potentially increasing rather than decreasing vulnerability.

Cross-Border Flow Uncertainty: The DPDPA's "restricted country" approach lacks clear standards for assessments. The absence of adequacy criteria (unlike GDPR's detailed framework) grants excessive executive discretion, creating legal uncertainty for businesses.

Sovereignty-Privacy Tension: Data sovereignty measures that concentrate data domestically may facilitate state surveillance, creating tension with privacy protection objectives. The legal framework does not adequately address this paradox.

7.4. Enforcement and Implementation Gaps

Delayed Rules: Despite DPDPA passage in 2023, rules notification remains pending, leaving critical provisions inoperative. This delay undermines legal certainty and rights realization.

Data Protection Board: The Board's non-operationalization means no enforcement authority exists. Without institutional infrastructure, even strong provisions remain paper tigers.

Capacity Constraints: Implementing consent, accountability, and sovereignty frameworks requires significant technical and administrative capacity. Whether government and private entities possess such capacity remains questionable.

7.5. Exclusion and Marginalization

Digital Divide: Both Aadhaar and UPI assume digital literacy and access. Marginalized populations lacking these resources face exclusion, yet the legal framework provides inadequate accommodations.

Biometric Failure Impacts: Authentication failure rates, particularly for manual laborers with worn fingerprints or elderly citizens with degraded biometrics, create systematic exclusion. The legal framework lacks provisions for alternative authentication or failure liability.

Language and Accessibility: Despite DPDPA's requirement for notices in scheduled languages, implementation remains inconsistent, creating informational barriers for non-English speakers.

VIII. RECOMMENDATIONS AND REFORM DIRECTIONS

8.1. Strengthening Consent Mechanisms

Contextual Consent Standards: Develop differentiated consent standards recognizing power asymmetries. For essential services, implement "compensatory safeguards" including enhanced transparency, accountability, and remedy provisions.

Consent Audit Requirements: Mandate periodic third-party audits of consent mechanisms, particularly for DPIs, evaluating whether consent is genuinely informed and voluntary.

Alternative Authentication: Strengthen legal requirements for alternative authentication methods when biometric systems fail, ensuring technology does not become a barrier to rights realization.

8.2. Enhancing Accountability Structures

Independent Oversight: Establish an independent Aadhaar Oversight Authority separate from UIDAI, modeled on information commissions or ombudsman institutions, with powers to investigate complaints and recommend sanctions.

NPCI Accountability Framework: Clarify NPCI's legal status and establish explicit transparency obligations, including public reporting requirements, stakeholder consultation procedures, and judicial review provisions.

Algorithmic Accountability Standards: Develop specific regulations governing algorithmic systems in DPIs, including requirements for bias testing, explainability, human oversight, and impact assessments.

Effective Remedy Mechanisms: Strengthen grievance redress through dedicated tribunals with expertise in technology and rights, accessible through multiple channels including mobile apps and citizen service centers.

8.3. Operationalizing Data Sovereignty

Clear Adequacy Standards: Develop transparent, rule-bound standards for assessing cross-border transfer destinations, considering rule of law, independent oversight, and reciprocity principles, similar to GDPR's adequacy framework.

Security Standards: Rather than assuming localization ensures security, establish explicit security standards for data storage and processing regardless of location, with mandatory compliance verification.

Surveillance Safeguards: Enact comprehensive surveillance reform limiting government access to DPI data to legitimate, necessary purposes, subject to judicial oversight and proportionality requirements.

8.4. Institutional and Enforcement Reforms

Expedite Rules Notification: Prioritize notification of DPDPA rules and operationalization of the Data Protection Board to give effect to statutory protections.

Capacity Building: Invest in technical and administrative capacity development for government agencies, judiciary, and civil society to effectively implement and monitor the complex regulatory framework.

Transparency Requirements: Mandate comprehensive transparency reporting by UIDAI, NPCI, and other DPI operators, including transaction volumes, authentication failure rates, breach incidents, and grievance statistics.

8.5. Inclusive Design and Implementation

Accessibility Standards: Develop comprehensive accessibility standards ensuring DPIs are usable by persons with disabilities, elderly citizens, and populations with limited digital literacy.

Multi-Modal Authentication: Move beyond biometric-only systems to incorporate multiple authentication modalities, including knowledge-based and possession-based factors.

Offline Capabilities: Develop offline authentication capabilities for contexts lacking network connectivity, ensuring technology does not exclude rural and remote populations.

IX. CONCLUSION

India's legal architecture for Digital Public Infrastructures represents an ambitious attempt to harness technology for governance transformation while protecting fundamental rights. Through the Aadhaar Act, NPCI regulations, and the (DPDPA 2023), India has constructed a multilayered framework addressing consent, accountability, and data sovereignty.

The framework demonstrates several strengths: constitutional grounding through the Puttaswamy judgments, comprehensive consent provisions, evolving accountability mechanisms, and nuanced approaches to data sovereignty that balance nationalism with pragmatism. The Supreme Court's 2018 Aadhaar judgment particularly stands out for its careful balancing analysis, striking unconstitutional provisions while preserving the system's core.

However, persistent gaps undermine the framework's effectiveness. Consent mechanisms struggle with inherent power asymmetries when dealing with essential services. Accountability structures lack institutional independence and enforcement capacity. Data sovereignty approaches risk creating security paradoxes while potentially facilitating surveillance. Most critically, the delayed implementation of the DPDPA leaves rights unrealized and protections theoretical.

The tension between technological efficiency and rights protection remains unresolved. India's DPI model privileges scale, speed, and inclusion, sometimes at the expense of consent validity, accountability robustness, and sovereignty protection. Whether this trade-off is justified depends on normative commitments about the relationship between state, technology, and individual autonomy.

As India's DPI model gains global attention, the lessons from its legal architecture become internationally significant. Other nations considering similar systems must learn both from India's innovations—such as consent managers and hybrid public-private models—and from its challenges—including accountability deficits and implementation gaps.

The legal architecture's ultimate success will depend not merely on statutory texts but on institutional capacity, political will, and sustained civil society vigilance. Strong laws remain insufficient without strong institutions to implement them, dedicated resources to operationalize them, and engaged citizenry to demand accountability.

India stands at a critical juncture. The framework elements are in place, but realization requires action: operationalizing the Data Protection Board, notifying pending rules, establishing independent oversight, developing algorithmic accountability standards, and ensuring that technological innovation serves rather than subverts constitutional commitments to dignity, equality, and liberty.

The coming years will determine whether India's legal architecture for DPIs becomes a model for democratic digital governance or a cautionary tale about technology outpacing law, scale overwhelming rights, and efficiency eclipsing accountability. The stakes extend beyond India, as the answer will influence how democracies worldwide navigate the fundamental challenge of our era: harnessing digital transformation while preserving human dignity and freedom.

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Legal Safeguards Against Workplace Harassment: Evaluating Implementation Of The Posh Act

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Abstract

The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013 (POSH Act) represents a landmark legislative framework designed to protect women from workplace harassment in India. This paper critically evaluates the implementation efficacy of the POSH Act over the past decade, analyzing the gap between legislative intent and practical enforcement. Through examination of Supreme Court directives, compliance data, and implementation challenges, this study reveals significant shortcomings in the actualization of the Act's provisions. The research identifies systemic obstacles including widespread non-compliance, inadequate awareness, delayed justice mechanisms, and institutional deficiencies. Analysis of 300 National Stock Exchange-listed companies demonstrates that reporting remains concentrated among a limited number of organizations, suggesting poor compliance across sectors. Supreme Court interventions in 2023-2024 have attempted to address these implementation gaps through comprehensive directions to state and union governments. The paper argues that while the POSH Act provides robust legal safeguards on paper, its transformative potential remains unrealized due to enforcement failures, institutional inadequacies, and cultural resistance. The study concludes that effective implementation requires not merely structural compliance but fundamental shifts in organizational culture, enhanced training mechanisms, and rigorous monitoring frameworks.

Keywords: - POSH Act, sexual harassment, workplace safety, legal compliance, women's rights, implementation challenges.

I. INTRODUCTION

1.1. Background and Context

Workplace sexual harassment constitutes a pervasive violation of women's fundamental rights, undermining dignity, equality, and economic participation. In India, the legal framework addressing this endemic issue evolved from judicial intervention to statutory enactment. The Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act, 2013, commonly known as the POSH Act, emerged as India's comprehensive legislative response to workplace harassment. This legislation represented the culmination of decades of advocacy, jurisprudential development, and recognition of women's constitutional rights to equality and dignity in professional spaces.

The POSH Act originated from the landmark Supreme Court judgment in *Vishaka and Others v. State of Rajasthan* (1997), where the Court issued binding guidelines following the brutal gang rape of Bhanwari Devi, a social worker who was attacked for attempting to prevent child marriage. The Vishakha Guidelines established preventive and redressal mechanisms, defining sexual harassment broadly and mandating employer accountability. However, the absence of statutory backing limited enforcement, creating a sixteen-year gap before Parliament enacted the POSH Act in April 2013, with the legislation becoming operative in December 2013.

Despite the Act's comprehensive provisions, over a decade of implementation has revealed significant gaps between legislative intent and ground-level reality. Supreme Court observations in 2023 characterized enforcement as plagued by "serious lapses," while empirical studies indicate widespread non-compliance, particularly in smaller organizations and the informal sector (Chawla, 2024). The gap between legislative framework and implementation efficacy raises critical questions about the actual protection afforded to working women and the systemic barriers preventing the Act's transformative potential.

1.2. Research Problem and Significance

This paper examines the fundamental question: To what extent has the POSH Act succeeded in providing effective legal safeguards against workplace harassment for women in India? The research investigates implementation challenges, compliance patterns, institutional mechanisms, and the gap between statutory provisions and practical enforcement. Understanding these implementation failures is crucial for several reasons. First, sexual harassment profoundly impacts women's economic participation, mental health, and professional advancement. Second, inadequate implementation undermines the rule of law and constitutional guarantees of equality. Third, identifying specific implementation barriers enables targeted policy interventions to strengthen the legislative framework's effectiveness.

The significance of this research extends beyond academic inquiry to practical policy implications. With India's workforce participation rate for women remaining among the lowest globally, creating safe workplaces is essential for economic development and gender equality. Moreover, recent Supreme Court interventions and proposed amendments signal heightened judicial and legislative attention to implementation gaps, making this an opportune moment for comprehensive evaluation.

1.3. Theoretical Framework

This paper adopts a socio-legal analytical framework, examining the POSH Act through three interconnected lenses: formal legal analysis of statutory provisions, empirical evaluation of compliance patterns, and critical examination of institutional mechanisms. The theoretical foundation draws on feminist jurisprudence recognizing sexual harassment as a manifestation of gender-based discrimination and power imbalances. Additionally, the framework incorporates implementation theory, which examines the gap between policy formulation and policy outcomes, recognizing that effective laws require not merely sound design but robust enforcement mechanisms, institutional capacity, and social acceptance.

II. LEGAL FRAMEWORK AND STATUTORY PROVISIONS

2.1. Evolution from Vishakha Guidelines to POSH Act

The POSH Act's genesis lies in judicial activism addressing legislative vacuum. In *Vishaka and Others v. State of Rajasthan* (1997), a three-judge bench comprising Justice J.S. Verma, Justice Sujata V. Manohar, and Justice B.N. Kirpal issued landmark guidelines recognizing sexual harassment as violating Articles 14 (equality before law), 15 (prohibition of discrimination), 19(1)(g) (right to practice any profession), and 21 (right to life and dignity) of the Indian Constitution. The Court invoked international instruments, particularly the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), establishing guidelines that functioned as law under Article 141 of the Constitution until legislative enactment.

The Vishakha Guidelines mandated employers to prevent sexual harassment, define prohibited conduct, establish complaint mechanisms, and implement appropriate penalties. However, the guidelines lacked statutory force, detailed procedures, and enforcement mechanisms. Implementation remained inconsistent, with many organizations either unaware of obligations or treating compliance as optional. The guidelines' limitations became increasingly apparent, prompting sustained advocacy for comprehensive legislation.

The POSH Act, enacted in 2013, transformed the Vishakha Guidelines into statutory law while significantly expanding their scope, specificity, and enforcement mechanisms. The legislation demonstrates several advancements over the guidelines including comprehensive definitions, extended applicability, detailed procedural requirements, and penalty provisions for non-compliance.

2.2. Key Provisions of the POSH Act

The POSH Act provides a comprehensive framework addressing prevention, prohibition, and redressal of sexual harassment. Section 2(n) defines sexual harassment broadly, encompassing unwelcome acts including physical contact, sexual demands, sexually colored remarks, pornography display, and any other unwelcome conduct of sexual nature. The definition extends beyond quid pro quo harassment to include hostile work environment, recognizing that harassment need not involve explicit sexual demands or physical contact.

The Act's applicability extends across sectors and employment categories. Section 2(o) defines "workplace" expansively, including organized and unorganized sectors, public and private entities, government departments, and any place visited during employment. This broad definition covers domestic workers, apprentices, volunteers, and contract workers, addressing gaps in the Vishakha Guidelines.

Institutional mechanisms constitute the Act's implementation cornerstone. Section 4 mandates Internal Complaints Committees (ICC) in every workplace with ten or more employees. The ICC must include a senior woman employee as presiding officer, two employee members committed to women's rights, and one external member from an NGO or association working on women's issues. This composition ensures independence and expertise. Section 6 establishes Local Complaints Committees (LCC) at the district level for complaints from establishments with fewer than ten employees or where the respondent is the employer.

Procedural safeguards ensure fairness while maintaining confidentiality. Section 9 requires complaints to be filed within three months of the incident, extendable by three months if circumstances warrant. Section 11 mandates inquiry completion within ninety days. The Act grants ICCs and LCCs powers equivalent to civil courts regarding evidence, witness examination, and document production. Section 13 specifies that if harassment is established, committees may recommend actions including warnings, counseling, community service, deduction from salary, or termination. The Act also permits monetary compensation for victims.

Employer obligations extend beyond committee constitution. Section 19 requires workplaces to display penalties for harassment, provide information about ICC/LCC composition and procedures, organize awareness programs, and ensure safe working conditions. Section 21 mandates annual reports to district officers detailing complaints received, disposed, and pending.

Non-compliance attracts penalties under Section 26. Failure to constitute ICCs, comply with provisions, or implement recommendations can result in fines up to fifty thousand rupees and license cancellation for repeated violations. These enforcement mechanisms distinguish the POSH Act from the Vishakha Guidelines' advisory framework.

2.3. Comparative Analysis: Vishakha Guidelines vs. POSH Act

Table 1 presents a comparative analysis of the Vishakha Guidelines and POSH Act:

Table 1. Comparison Between Vishakha Guidelines and POSH Act

Aspect	Vishakha Guidelines (1997)	POSH Act (2013)
Legal Status	Judicial directions under Article 141	Statutory legislation
Scope of Applicability	Public and private sector workplaces	Comprehensive coverage including unorganized sector, domestic workers
Definition	Broad definition without specificity	Detailed enumeration of prohibited conduct
Institutional Mechanism	Complaints Committee (basic structure)	Internal Complaints Committee and Local Complaints Committee with detailed composition requirements
Procedural Framework	Basic guidelines without detailed procedures	Comprehensive procedural code with timelines
Enforcement Mechanisms	No statutory penalties	Monetary penalties and license cancellation
Reporting Requirements	No formal reporting obligations	Mandatory annual reports to district officers
Confidentiality Provisions	General mention	Detailed confidentiality requirements with penalties for breach
Appeal Mechanism	Not specified	Formal appeal procedures outlined
Coverage of Informal Sector	Ambiguous	Explicit inclusion through Local Committees

This comparative analysis demonstrates the POSH Act's significant advancement beyond the Vishakha Guidelines, transforming advisory principles into enforceable legal obligations with detailed implementation frameworks.

2.4. Recent Legislative Developments

In February 2024, Dr. Sasmit Patra introduced the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Amendment Bill, 2024 as a Private Member's Bill in the Rajya Sabha. The proposed amendments address two critical implementation challenges. First, the Bill seeks to extend the complaint filing timeframe from three months to twelve months, with discretionary extension by ICCs based on circumstances. This amendment recognizes that psychological trauma often delays reporting, and rigid timelines may preclude legitimate complaints. Second, the Bill proposes eliminating Section 10's conciliation provision, which critics argue exposes victims to coercion and pressure to accept inadequate settlements.

As of November 2025, this Bill remains pending without parliamentary approval or presidential assent. Its introduction reflects growing recognition of implementation gaps and the need for legislative refinement to strengthen victim protection.

Additionally, the Companies (Accounts) Second Amendment Rules, 2025, effective July 14, 2025, mandate expanded disclosure requirements in corporate board reports. Companies must now report detailed statistics including complaints received, resolved, pending beyond ninety days, and workforce gender composition. These transparency measures aim to enhance accountability and enable stakeholder scrutiny of organizational POSH compliance.

III. IMPLEMENTATION CHALLENGES AND COMPLIANCE GAPS

3.1. Non-Compliance Across Sectors

Despite statutory mandates, compliance with POSH Act provisions remains alarmingly inadequate. Supreme Court observations in 2023 characterized implementation as marked by "serious lapses," with widespread failure to constitute ICCs, appoint district officers, and establish LCCs. A 2024 nationwide survey revealed that numerous states and union territories had not appointed district officers as required under Section 5, creating cascading effects on LCC establishment and complaint redressal.

The private sector exhibits particularly concerning compliance deficits. Many establishments with more than ten employees have failed to constitute ICCs or have improperly composed committees lacking mandatory external members or adequate training. Smaller organizations often remain entirely unaware of statutory obligations. The informal sector, comprising approximately ninety-five percent of India's female workforce, faces acute implementation challenges despite the Act's theoretical coverage through LCCs.

Data compiled by the Centre for Economic Data and Analysis examining three hundred National Stock Exchange-listed companies reveals troubling patterns. While reported cases increased over the decade following the Act's enactment, most complaints originated from a small subset of large organizations (Chawla, 2024). This concentration suggests that the vast majority of companies either experience no harassment—an implausible scenario—or face severe underreporting due to inadequate awareness, fear of retaliation, or non-functional complaint mechanisms.

3.2. Institutional Deficiencies

Institutional mechanisms established by the POSH Act frequently suffer from structural and functional inadequacies. ICCs often lack independence, with committee members facing conflicts of interest or fear of professional repercussions from investigating senior management. External members, intended to provide independence and expertise, are frequently absent or poorly selected without relevant training.

Training deficiencies plague ICC members. Many organizations treat POSH compliance as a checklist exercise, conducting perfunctory annual trainings without developing genuine expertise in trauma-informed inquiry, evidence evaluation, or fair procedures. Inadequately trained committees may conduct deficient investigations, violate natural justice principles, or fail to maintain required confidentiality.

The Local Complaints Committee structure remains largely theoretical. Many districts lack functional LCCs, leaving workers in small establishments and the informal sector without accessible redressal mechanisms. Where LCCs exist, their composition, functioning, and accessibility remain poorly documented. This implementation failure effectively denies protection to millions of vulnerable women workers.

3.3. Awareness and Reporting Barriers

Limited awareness among both employees and employers constitutes a critical implementation barrier. A 2024 survey by Stratifix Consulting revealed that only eight percent of working professionals were aware of POSH policies before 2021, while thirty-seven percent reported experiencing workplace harassment. Even more concerning, eleven percent indicated they would resign rather than report harassment, and seventeen percent were either unaware of reporting options or feared consequences (LiveLaw, 2024).

Cultural factors compound structural barriers. Social stigma surrounding sexual harassment, fear of victim-blaming, concerns about professional reputations, and anticipated retaliation deter reporting. Women frequently internalize harassment as unavoidable workplace reality rather than illegal conduct warranting formal complaint. This normalization of harassment, combined with institutional unresponsiveness, creates profound underreporting.

Organizations often fail to create enabling environments for complaints. Displaying ICC information remains inadequate, with many workplaces not prominently advertising complaint procedures, committee composition, or contact information as mandated by Section 19. This information gap prevents potential complainants from accessing redressal mechanisms.

3.4. Delayed Justice and Procedural Violations

Procedural violations undermine the POSH Act's effectiveness. While Section 11 mandates inquiry completion within ninety days, compliance with this timeline remains inconsistent. Data from BSE-100 companies revealed a 101 percent increase in pending complaints in fiscal year 2022-2023, indicating significant backlogs and systemic delays Forbes India (IMPRI, 2024). Prolonged proceedings exacerbate victim trauma, allow evidence deterioration, and enable respondent intimidation.

Natural justice violations occur with disturbing frequency. The Supreme Court in *Aureliano Fernandes v. State of Goa* (2023) observed that an inquiry had been conducted in "tearing hurry," denying the respondent adequate opportunity for defense. The Court emphasized that procedural fairness is essential regardless of harassment allegation severity, and inquiries violating natural justice principles must be quashed and conducted afresh.

Organizations sometimes prioritize business continuity over justice, particularly when harassment involves senior executives or revenue-generating employees. This institutional bias may manifest in pressure on complainants to accept settlements, cursory investigations, or reluctance to implement recommended penalties. Such practices not only deny justice to individual victims but also signal organizational tolerance of harassment, perpetuating hostile environments.

3.5. Gender-Neutral Protections Gap

The POSH Act's exclusive focus on women as victims, while historically justified and constitutionally permissible, creates protection gaps for male and LGBTQ+ individuals experiencing workplace harassment. Section 2(a) defines "aggrieved woman" as the sole category of potential complainants, excluding men and gender minorities from the Act's protective framework. While general criminal law provisions exist, they lack the POSH Act's specialized procedures, institutional mechanisms, and workplace-specific remedies.

This limitation has generated ongoing debate. Advocates for expansion argue that workplace harassment affects all genders and that inclusive legislation would strengthen overall workplace safety. Opponents contend that women face disproportionate harassment rooted in structural gender inequality, justifying targeted protection. The absence of comprehensive data on harassment experienced by male and LGBTQ+ workers complicates evidence-based policy development.

IV. SUPREME COURT INTERVENTIONS AND ENFORCEMENT DIRECTIVES

4.1. Aureliano Fernandes Case and Subsequent Directions

The Supreme Court's engagement with POSH Act implementation intensified following *Aureliano Fernandes v. State of Goa* (Civil Appeal No. 2482 of 2014), decided on May 12, 2023. While addressing procedural violations in a specific case, the Court observed broader systemic implementation failures. Justice B.V. Nagarathna and Justice N. Kotiswar Singh characterized the enforcement regime as manifesting "serious lapses" even after a decade of the Act's operation.

The Court issued comprehensive directions to address implementation deficiencies. These directives required Union and state governments to conduct time-bound verification of ICC/LCC constitution across all government ministries, departments, public sector undertakings, and institutions. Authorities were directed to ensure that information regarding committees, complaint procedures, and contact details be prominently displayed on websites and within workplaces.

The judgment emphasized employer obligations to conduct regular training for ICC/LCC members and awareness programs for employees. The Court stressed that mere committee constitution without functional capacity renders the Act

ineffective. Additionally, the Court directed attention to professional bodies, educational institutions, hospitals, and sports organizations, many of which had failed to establish required committees.

4.2. December 2024 Directions and Compliance Monitoring

In December 2024, the Supreme Court issued further directions mandating comprehensive compliance assessments. The Court ordered all states and union territories to appoint district officers where not already designated, with a deadline of December 31, 2024. Local Committees were to be established in all government ministries, departments, and public sector undertakings by January 31, 2025.

Deputy Commissioners and District Magistrates received directives to conduct physical surveys of public and private organizations within their jurisdictions to verify ICC compliance. These surveys were to compile data on committee constitution, composition adequacy, training status, and complaint statistics. The compiled information was to be uploaded to the She-Box portal created by the Ministry of Women and Child Development, providing centralized monitoring capability.

The Court emphasized consequences for non-compliance, directing Labour Departments to refuse license renewals for establishments failing to comply with POSH Act requirements. This directive signals increased enforcement rigor, moving beyond advisory approaches to meaningful penalties.

Supreme Court directions also mandated state governments to create localized She-Box portals where absent, enabling women to lodge complaints electronically. These portals direct complaints to relevant ICCs or LCCs, enhancing accessibility particularly for geographically dispersed workplaces.

4.3. Institutional Accountability and Monitoring Mechanisms

The Supreme Court's interventions reflect recognition that passive compliance expectations are insufficient. The Court's emphasis on proactive government monitoring, regular reporting, and consequence enforcement represents a shift toward active implementation oversight. The appointment of amicus curiae to monitor compliance and report to the Court creates judicial accountability mechanisms extending beyond individual case resolution.

However, these interventions also reveal the limitations of judicial enforcement of socio-economic legislation. Courts can issue directions and monitor compliance through specific cases, but sustained implementation requires administrative capacity, political will, and resource allocation. The decade-long gap between the Act's enactment and meaningful Supreme Court enforcement intervention itself indicates systemic governance failures.

V. DATA ANALYSIS: COMPLIANCE PATTERNS IN CORPORATE INDIA

Empirical research by the Centre for Economic Data and Analysis at Ashoka University provides valuable insights into POSH Act compliance patterns. The study compiled data from three hundred National Stock Exchange-listed companies over ten years (2013-2023), including one hundred companies with highest market capitalization, one hundred mid-range companies, and one hundred smaller companies by market value.

5.1. Reporting Trends

The data reveals increasing complaint numbers over the decade, from minimal reporting in early years to significantly higher volumes by 2022-2023. This increase might indicate improved awareness and functional complaint mechanisms rather than increased harassment incidence. However, complaint concentration among a small subset of companies raises concerns. A disproportionate share of reported cases originated from approximately twenty large corporations, while the majority of sampled companies reported zero complaints across the entire decade.

This pattern suggests three potential explanations. First, larger organizations may have more robust compliance infrastructure, awareness programs, and functional ICCs, facilitating reporting. Second, organizational size correlates with complaint volume, as larger workforces statistically increase harassment likelihood. Third, and most concerning, the vast majority of organizations may experience severe underreporting due to inadequate implementation, employee fear, or non-functional complaint mechanisms.

5.2. Complaint Resolution and Backlogs

BSE-100 companies, representing over sixty-five percent of India's market capitalization, exhibited troubling resolution delays. Pending complaints increased from 112 in fiscal year 2021-2022 to 205 in fiscal year 2022-2023, representing a 101 percent increase Forbes India (IMPRI, 2024). This backlog surge indicates systemic capacity deficits in investigation and resolution.

Prolonged pendency imposes severe costs on complainants, including ongoing workplace exposure to alleged harassers, psychological distress, potential retaliation, and justice denial. For organizations, backlogs signal institutional dysfunction, potential liability, and reputational risks. The human cost manifests in tragic outcomes, with reported instances of young women resorting to suicide due to despair caused by unresponsive systems.

5.3. Sectoral Variations

Significant sectoral variations exist in reporting and compliance. Information technology, professional services, and financial sectors demonstrate relatively higher reporting and more developed POSH infrastructure. Manufacturing, retail, and hospitality sectors show lower reporting rates despite substantial female employment. This variation likely reflects differences in organizational sophistication, corporate governance standards, and awareness levels rather than actual harassment incidence.

The informal sector remains largely absent from compliance data. Despite theoretical coverage through LCCs, virtually no systematic data exists on complaints, resolutions, or LCC functioning for informal sector workers. This data vacuum itself constitutes an implementation failure, rendering invisible the experiences of millions of vulnerable women workers.

VI. RECOMMENDATIONS FOR STRENGTHENING IMPLEMENTATION

6.1. Legislative Reforms

While the POSH Act provides a sound framework, targeted legislative amendments could address identified gaps. First, extending complaint filing timelines from three months to twelve months, as proposed in the 2024 Amendment Bill, would accommodate victims' psychological realities. However, this extension should include provisions ensuring evidence preservation and preventing misuse.

Second, eliminating the conciliation provision under Section 10 would prevent coercive settlements. Sexual harassment complaints should proceed through formal inquiry mechanisms rather than settlement negotiations that may exploit power imbalances.

Third, expanding the Act's scope to include all genders would address harassment experienced by male and LGBTQ+ workers. While maintaining focus on women's disproportionate vulnerability, gender-inclusive protections would strengthen comprehensive workplace safety.

Fourth, strengthening penalty provisions for non-compliance could enhance deterrence. Current fines of fifty thousand rupees may be insufficient to motivate compliance among larger organizations. Graduated penalties based on organizational size and repeat violations might prove more effective.

Fifth, establishing mandatory audit mechanisms for POSH compliance, similar to financial or safety audits, would create systematic oversight. Independent auditors could verify ICC constitution, training adequacy, awareness program effectiveness, and complaint handling procedures.

6.2. Institutional Capacity Building

Effective implementation requires robust institutional capacity at all levels. District officers require adequate staffing, training, and resources to monitor establishments, compile data, and enforce compliance. LCCs need functional infrastructure, trained members, accessible complaint procedures, and awareness among informal sector workers.

ICC members require comprehensive training extending beyond perfunctory annual sessions. Training should cover trauma-informed inquiry methods, evidence evaluation, natural justice principles, confidentiality maintenance, and bias recognition. Specialized training programs developed by institutions with expertise in gender studies and legal procedures could significantly enhance committee competence.

External members play crucial roles ensuring independence and expertise. However, their selection often lacks rigor, and they may be unfamiliar with organizational contexts or legal procedures. Establishing panels of trained external members at district levels, with regular capacity-building programs, would strengthen this critical component.

6.3. Awareness and Cultural Change

Legal frameworks alone cannot eliminate workplace harassment without corresponding cultural transformation. Organizations must move beyond compliance formality to genuine commitment to safe, respectful workplaces. This transformation requires leadership commitment, visible consequences for harassment, and organizational cultures that encourage reporting without retaliation.

Awareness programs should extend beyond ICC members to all employees, clearly communicating prohibited conduct, reporting procedures, complaint confidentiality, and anti-retaliation protections. Programs should be regular, interactive, and contextually relevant rather than generic or perfunctory.

Bystander intervention training can empower employees to recognize and interrupt harassment. Cultivating organizational cultures where colleagues actively oppose inappropriate conduct, rather than passively accepting it, creates safer environments.

6.4. Data and Transparency

Systematic data collection and public transparency are essential for accountability and continuous improvement. Annual reports mandated under Section 21 should be publicly accessible, enabling stakeholder scrutiny and cross-organizational comparison. Currently, this information remains scattered and inaccessible, limiting accountability.

Standardized reporting formats would facilitate data aggregation and analysis. Key metrics should include complaints received, inquiry timelines, outcomes, penalties imposed, and pending cases. Disaggregated data by sector, organization size, and geography would enable targeted interventions.

Regular compliance audits by government authorities, with public disclosure of findings, would identify systematic deficiencies. Organizations demonstrating exemplary compliance and workplace safety could receive recognition, creating positive incentives beyond penalty avoidance.

6.5. Technology Integration

Technology can enhance accessibility and efficiency. The She-Box portal represents positive development, but requires expansion and improvement. State-level portals should integrate with national systems, enabling centralized monitoring while maintaining local complaint handling.

Mobile applications could facilitate confidential complaint filing, particularly for workers lacking workplace computer access. Automated case management systems could track timelines, flag delays, and ensure procedural compliance. Online training modules and resources could supplement in-person programs, particularly for geographically dispersed workplaces. However, technology should complement rather than replace human-centered approaches essential for handling sensitive harassment complaints.

VII. CONCLUSION

The POSH Act represents significant legislative progress in addressing workplace sexual harassment, transforming the Vishakha Guidelines' judicial directions into comprehensive statutory framework with detailed procedures and enforcement mechanisms. The Act's broad applicability, institutional mechanisms, procedural safeguards, and penalty provisions provide robust legal architecture for protecting women's workplace rights.

However, over a decade of implementation reveals profound gaps between legislative intent and ground-level reality. Widespread non-compliance, institutional deficiencies, awareness gaps, procedural violations, and delayed justice undermine the Act's transformative potential. Data analysis demonstrates that complaint reporting remains concentrated among limited organizations, suggesting severe underreporting across most workplaces. Supreme Court interventions in 2023-2024, while highlighting implementation failures, also demonstrate judicial recognition of enforcement inadequacy.

Effective implementation requires comprehensive, sustained interventions addressing multiple levels: legislative refinement to close identified gaps; institutional capacity building for district officers, LCCs, and ICCs; robust awareness programs creating reporting-friendly organizational cultures; systematic data collection enabling accountability and evidence-based policy; and technology integration enhancing accessibility and efficiency.

Fundamentally, the POSH Act's success depends not merely on formal compliance with structural requirements but on genuine organizational commitment to safe, respectful workplaces. Legal frameworks establish necessary foundations, but cultural transformation determines actual outcomes. This transformation requires acknowledging sexual harassment as serious violation of dignity and equality rather than inevitable workplace reality, creating environments where victims can report without fear, and ensuring meaningful consequences for harassment.

The POSH Act holds immense promise for advancing women's workplace rights and economic participation. Realizing this promise demands renewed commitment from all stakeholders—government authorities responsible for enforcement, employers obligated to prevent harassment, civil society organizations supporting victims, and the judiciary monitoring implementation. Only through such comprehensive, sustained engagement can the legislative framework's potential translate into lived reality of safe, dignified workplaces for all women.

The journey from Vishakha Guidelines to POSH Act represents significant legal evolution. The path from POSH Act enactment to effective implementation remains incomplete. Bridging this implementation gap constitutes the urgent challenge confronting India's pursuit of gender justice and workplace equality.

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The Basic Structure Doctrine at 50: Comparative Perspectives and Its Future Trajectory in Indian Jurisprudence

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Abstract

The Basic Structure Doctrine, established through the landmark *Kesavananda Bharati v. State of Kerala* (1973), represents one of the most significant constitutional innovations in judicial history. This paper examines the doctrine's evolution over five decades, analyzing its theoretical foundations, comparative constitutional positions, and contemporary challenges. Through doctrinal analysis and comparative methodology, this study explores how the doctrine has shaped Indian constitutional jurisprudence while examining parallel developments in other jurisdictions. The research reveals that despite periodic challenges, the Basic Structure Doctrine has emerged as a robust framework for constitutional preservation, though its application requires continuous refinement to address emerging democratic threats. The paper concludes by proposing a framework for the doctrine's future trajectory, emphasizing the need for clearer definitional boundaries and adaptive interpretation in response to evolving constitutional challenges.

Keywords: - Basic Structure Doctrine, constitutional amendments, judicial review, comparative constitutionalism, Indian jurisprudence

I. INTRODUCTION

The year 2023 marked the fiftieth anniversary of *Kesavananda Bharati v. State of Kerala* (1973), a constitutional moment that fundamentally altered the relationship between constituent power and constitutional limits in India. The Basic Structure Doctrine, articulated through a 7-6 majority decision, established that Parliament's amending power under Article 368 of the Indian Constitution, while broad, cannot destroy or damage the Constitution's basic structure (*Kesavananda Bharati v. State of Kerala, 1973*). This judicial innovation emerged from a protracted conflict between Parliament and the judiciary regarding the scope of constitutional amendments, particularly concerning fundamental rights.

The doctrine's significance extends beyond Indian borders, representing a unique contribution to global constitutional thought. While some jurisdictions have adopted similar frameworks, others continue to adhere to the principle of unlimited amendment power. After five decades, the Basic Structure Doctrine faces new challenges: executive overreach, digital authoritarianism, economic liberalization's impact on social justice, and questions about its democratic legitimacy.

This paper addresses three interconnected research questions: First, how has the Basic Structure Doctrine evolved in Indian jurisprudence over fifty years? Second, what comparative insights emerge from examining similar doctrines in other constitutional democracies? Third, what trajectory should the doctrine follow to remain relevant in contemporary constitutional discourse? These questions are explored through doctrinal analysis of judicial decisions, comparative constitutional examination, and critical evaluation of scholarly discourse.

II. THEORETICAL FRAMEWORK: CONSTITUTIONAL LIMITS AND AMENDMENT POWER

2.1 The Paradox of Constitutional Amendment

Constitutional theory grapples with a fundamental paradox: constitutions must be simultaneously stable and adaptable (*Albert, 2019*). The tension between constitutional rigidity and flexibility manifests acutely in debates about amendment

power. The concept of *pouvoir constituant* (constituent power) versus *pouvoir constitué* (constituted power), articulated by Sieyès during the French Revolution, provides theoretical grounding for understanding constitutional limits (Sieyès, 2003).

Two competing theories dominate constitutional amendment discourse. The positivist tradition, represented by (Hans Kelsen, 1945), views the constitution as the *grundnorm* (basic norm) from which all legal validity flows, suggesting that properly enacted amendments become part of the constitutional order regardless of content. Conversely, the natural law tradition, drawing from (Dworkin, 1977; Alexy, 2002), posits that certain constitutional principles possess moral weight independent of positive enactment, establishing substantive limits on amendment power.

The Basic Structure Doctrine represents a middle path, acknowledging democratic sovereignty through the amendment process while recognizing that certain constitutional essentials transcend ordinary political preferences. This approach aligns with (Ackerman, 1991) theory of constitutional moments, wherein fundamental constitutional changes require heightened democratic deliberation beyond normal legislative processes.

2.2. Foundations of the Basic Structure Doctrine

The Indian Supreme Court's journey toward the Basic Structure Doctrine occurred through three pivotal cases. In (*Shankari Prasad v. Union of India*, 1951), the Court held that Parliament's amending power was unlimited, including the power to amend fundamental rights. This position was reaffirmed in *Sajjan Singh v. State of Rajasthan* (1965), though Justice Mudholkar's dissent presaged future developments by questioning whether the Constitution's basic features could be altered (*Sajjan Singh v. State of Rajasthan*, 1965).

The turning point arrived with *Golaknath v. State of Punjab* (1967), where an 11-judge bench overruled previous decisions, holding that Parliament could not amend fundamental rights. This decision, while protecting fundamental rights, created constitutional rigidity that Parliament addressed through the 24th and 25th Amendments, asserting unlimited amending power (*Golaknath v. State of Punjab*, 1967).

(*Kesavananda Bharati*, 1973) resolved this conflict by articulating that while Parliament possesses broad amending power, it cannot destroy the Constitution's basic structure. Chief Justice Sikri identified several basic structure elements: supremacy of the Constitution, republican and democratic form of government, secular character, separation of powers, and federal character (*Kesavananda Bharati v. State of Kerala*, 1973). Subsequent cases expanded this list, though the Court has deliberately avoided exhaustive enumeration, preferring case-by-case determination.

III. DOCTRINAL EVOLUTION: FIVE DECADES OF JURISPRUDENTIAL DEVELOPMENT

3.1. The Formative Period (1973-1980)

The immediate post-Kesavananda period witnessed attempts to circumvent the doctrine. The 39th Amendment, which placed the Prime Minister's election beyond judicial review, was struck down in *Indira Nehru Gandhi v. Raj Narain* (1975), marking the doctrine's first practical application. Justice Chandrachud emphasized that free and fair elections constitute the Constitution's basic structure, demonstrating the doctrine's protective function during political turbulence (*Indira Nehru Gandhi v. Raj Narain*, 1975).

The Emergency period (1975-1977) tested the doctrine's resilience. The 42nd Amendment attempted to place constitutional amendments beyond judicial review by adding Clauses (4) and (5) to Article 368, asserting that no amendment could be questioned on any ground, including basic structure violations (Noorani, 2015). This assault on judicial review was repelled in *Minerva Mills v. Union of India* (1980), where the Supreme Court struck down these provisions, establishing that the limited nature of Parliament's amending power itself constitutes part of the basic structure (*Minerva Mills v. Union of India*, 1980).

3.2. Expansion and Consolidation (1980-2000)

This period witnessed expansion of basic structure elements. In *Waman Rao v. Union of India* (1981), the Court clarified that the doctrine applies only to post-Kesavananda amendments, providing temporal certainty while protecting earlier amendments from retrospective invalidation (*Waman Rao v. Union of India*, 1981).

S.R. Bommai v. Union of India (1994) identified secularism and federalism as basic structure elements, striking down central government actions that violated federal principles. The Court emphasized that federalism's essence lies not merely in distribution of powers but in states' autonomous spheres of operation (*S.R. Bommai v. Union of India*, 1994). This decision demonstrated the doctrine's applicability beyond constitutional amendments to executive and legislative actions.

The doctrine's scope expanded further in *L. Chandra Kumar v. Union of India* (1997), which held that judicial review by High Courts and the Supreme Court constitutes basic structure, preventing Parliament from creating alternative adjudicatory systems that bypass constitutional courts (*L. Chandra Kumar v. Union of India*, 1997).

3.3. Contemporary Applications (2000-Present)

Recent decades have seen sophisticated basic structure challenges. In *I.R. Coelho v. State of Tamil Nadu* (2007), a nine-judge bench established a two-step test for constitutional amendments placed in the Ninth Schedule: first, determining whether laws violate fundamental rights, and second, assessing whether such violations damage basic structure (*I.R. Coelho v. State of Tamil Nadu*, 2007). This nuanced approach balanced amendment power with constitutional preservation.

The National Judicial Appointments Commission (NJAC) case (*Supreme Court Advocates-on-Record Association v. Union of India*, 2015) represented a watershed moment. The Court struck down the 99th Amendment and NJAC Act, holding that judicial independence and primacy of judiciary in judicial appointments form basic structure. Critics argued this decision expanded judicial power excessively, while supporters maintained it preserved separation of powers against executive encroachment (*Supreme Court Advocates-on-Record Association v. Union of India*, 2015).

Recent developments include challenges to the Citizenship Amendment Act (2019) on basic structure grounds, arguing it violates secularism and equality. Additionally, concerns about electoral bonds, digital surveillance, and federalism challenges have invoked basic structure arguments, demonstrating the doctrine's continued relevance (Khosla, 2020).

IV. COMPARATIVE CONSTITUTIONAL PERSPECTIVES

4.1. Explicit Unamendability Clauses

Several constitutions contain explicit unamendability provisions, contrasting with India's judicially created doctrine. The German Basic Law (Grundgesetz) includes the "eternity clause" (Article 79(3)), protecting human dignity, democracy, federalism, and the rule of law from amendment (Kommers & Miller, 2012). The German Federal Constitutional Court has interpreted this clause strictly, creating a constitutional core immune from change.

France's Constitution (Article 89) prohibits amendments to the republican form of government, a provision dating to 1884. Turkey's Constitution contains extensive unamendability clauses protecting secularism, nationalism, and the state's characteristics (Articles 1-4). These explicit provisions provide clearer boundaries than India's judicially determined approach but lack flexibility to evolve with changing circumstances.

4.2. Implicit Constitutional Limits

Some jurisdictions have developed implicit limitations through judicial interpretation, paralleling India's approach. Bangladesh's Supreme Court, influenced by India's Basic Structure Doctrine, adopted a similar framework in Anwar Hossain Chowdhury v. Bangladesh (1989), striking down the Fifth Amendment for violating the Constitution's basic features (Anwar Hossain Chowdhury v. Bangladesh, 1989). The Bangladesh Court identified nationalism, socialism, democracy, and secularism as basic structure elements.

The Supreme Court of Pakistan referenced basic structure principles in Mahmood Khan Achakzai v. Federation of Pakistan (1997), though Pakistani jurisprudence has applied the doctrine inconsistently due to political instability and military interventions (Mahmood Khan Achakzai v. Federation of Pakistan, 1997). Nepal's Supreme Court has also employed basic structure reasoning, particularly regarding federalism and judicial independence.

Colombia's Constitutional Court developed the "substitution doctrine" (doctrina de la sustitución), distinguishing between constitutional amendments and substitutions. In Decision C-551/03, the Court held that constitutional reforms cannot replace the Constitution's fundamental axes with an entirely different system (Constitutional Court of Colombia, 2003). This doctrine resembles India's basic structure framework while focusing on constitutional identity preservation.

4.3. Unlimited Amendment Power Jurisdictions

Contrasting approaches exist in jurisdictions maintaining unlimited amendment power. The United States Supreme Court has consistently held that no judicially enforceable limits exist on constitutional amendments beyond procedural requirements outlined in Article V (National Prohibition Cases, 1920). This position reflects American constitutional theory's emphasis on popular sovereignty and democratic self-governance.

The United Kingdom, lacking a codified constitution, maintains parliamentary sovereignty as a fundamental principle. Parliament can enact any law, including laws of constitutional significance, without substantive limitations (Dicey, 1885/1959). However, scholars debate whether implied constitutional limits might emerge through common law constitutionalism (Goldsworthy, 2010).

4.3.1. Comparative Analysis:

Table 1. Comparative Framework of Constitutional Amendment Limitations

Jurisdiction	Type of Limitation	Specific Protected Elements	Judicial Enforcement	Theoretical Basis
India	Implicit (Judicial)	Democracy, rule of law, federalism, secularism, judicial review, separation of powers	Strong	Basic Structure Doctrine
Germany	Explicit (Constitutional)	Human dignity, democracy, federalism, rule of law	Strong	Eternity Clause (Art. 79(3))
France	Explicit (Constitutional)	Republican form of government	Moderate	Constitutional text (Art. 89)
Bangladesh	Implicit (Judicial)	Democracy, nationalism, socialism, secularism	Moderate	Basic Structure Doctrine
Colombia	Implicit (Judicial)	Constitutional identity, fundamental axes	Strong	Substitution Doctrine
United States	None (Procedural only)	None substantive	Weak	Popular sovereignty
United Kingdom	None	None	N/A	Parliamentary sovereignty

V. CRITICAL EVALUATION: STRENGTHS AND LIMITATIONS

5.1. Strengths of the Basic Structure Doctrine

The doctrine's primary strength lies in constitutional preservation against transient majorities. By establishing substantive limits on amendment power, it prevents democratic backsliding and protects minority rights against majoritarian overreach (Roznai, 2017). This protective function proved crucial during the Emergency period and continues to safeguard constitutional democracy.

The doctrine's flexibility allows organic constitutional development. Unlike rigid unamendability clauses, judicial determination enables the basic structure to evolve with societal values and emerging challenges. This adaptability distinguishes India's approach from more rigid constitutional frameworks (Barak, 2011).

The doctrine strengthens judicial review legitimacy. By grounding judicial intervention in constitutional preservation rather than substantive policy preferences, it provides a principled basis for counter-majoritarian judicial action. The requirement that amendments damaging basic structure be invalidated creates clear parameters for judicial review (Austin, 2003).

Furthermore, the doctrine contributes to global constitutional discourse. India's innovation has influenced constitutional development in multiple jurisdictions, demonstrating its intellectual robustness and practical utility. The doctrine represents a significant theoretical contribution to debates about constitutional limits and democratic governance.

5.2. Limitations and Critiques

Despite its strengths, the Basic Structure Doctrine faces significant criticisms. The democratic legitimacy critique questions judicial authority to constrain the people's amending power. Critics argue that judges, insulated from political accountability, usurp the constituent power belonging to the people (Khosla, 2020). This counter-majoritarian difficulty becomes especially acute when courts strike down amendments passed with overwhelming legislative support.

The doctrine suffers from definitional vagueness. The Supreme Court has deliberately avoided exhaustively defining basic structure elements, leading to uncertainty about which constitutional features qualify. This lack of clarity creates unpredictability and potential for arbitrary judicial decision-making (Sathe, 2002). Different benches have identified varying basic structure elements, sometimes with limited reasoning.

Concerns about judicial overreach have intensified following the NJAC decision. Critics contend that the judiciary has expanded basic structure protection beyond its original constitutional preservation purpose to advance institutional self-interest. The striking down of a constitutional amendment designed to reform judicial appointments raised questions about separation of powers and checks on judicial power (Robinson, 2016).

The doctrine potentially creates constitutional rigidity. By placing numerous constitutional features beyond amendment, it may prevent necessary constitutional evolution. Constitutional systems require periodic updating to address changing circumstances; excessive rigidity can make constitutions obsolete or drive change through extra-constitutional means (Dixon & Landau, 2015).

Application inconsistency presents another challenge. The Court has not always applied the doctrine consistently, sometimes showing deference to political branches and other times intervening aggressively. This inconsistency undermines the doctrine's predictability and raises concerns about political considerations influencing judicial decisions.

VI. FUTURE TRAJECTORY: ADDRESSING CONTEMPORARY CONSTITUTIONAL CHALLENGES

6.1. Definitional Clarity and Institutional Refinement

The doctrine's future requires greater definitional precision. The Supreme Court should develop a comprehensive framework identifying core basic structure elements with clear reasoning. While complete enumeration may prove impossible, establishing principled criteria for recognizing basic structure features would enhance predictability and legitimacy (Jacobsohn, 2006). A constitutional bench dedicated to basic structure jurisprudence could provide systematic development.

Institutional reforms could address democratic legitimacy concerns. Larger benches for basic structure cases, requirements for supermajority agreement among judges, and enhanced reasoning requirements could strengthen decisions' legitimacy. Additionally, establishing clearer standards for when basic structure review applies versus when judicial deference is appropriate would balance constitutional preservation with democratic governance (Tushnet, 2008).

6.2. Responding to Contemporary Threats

Digital authoritarianism presents novel challenges requiring basic structure application. Government surveillance capabilities, social media regulation, and digital rights implicate privacy, free speech, and democratic participation—all potentially basic structure elements. The doctrine must adapt to protect constitutional democracy in the digital age (Balkin, 2018).

Economic liberalization's impact on social justice requires doctrinal attention. As market-oriented reforms potentially threaten constitutional commitments to social and economic rights, the Court must clarify whether socio-economic justice constitutes basic structure. The Kesavananda decision referenced social justice, but subsequent jurisprudence has not fully developed this dimension (Bhatia, 2019).

Federalism challenges demand reinvigorated basic structure protection. Centralization trends through financial mechanisms, concurrent legislation, and administrative control threaten federal balance. The doctrine should robustly protect states' autonomy as a basic structure element, ensuring genuine federal governance (Rao & Singh, 2018).

Electoral integrity and democratic participation require basic structure safeguards. Campaign finance, electoral bonds, delimitation exercises, and voter access implicate democracy's foundational elements. The Court should extend basic structure protection to electoral processes beyond formal structures, encompassing substantive democratic participation (Issacharoff, 2015).

6.3. Comparative Learning and Cross-Jurisdictional Dialogue

India's Basic Structure Doctrine can benefit from comparative constitutional dialogue. Engaging with similar doctrines in Bangladesh, Colombia, and other jurisdictions can provide insights for doctrinal refinement. International constitutional courts' experiences with balancing amendment power and constitutional limits offer valuable lessons (Hirschl, 2014).

Conversely, India's experience can inform constitutional development elsewhere. As democratic backsliding threatens constitutionalism globally, the Basic Structure Doctrine provides a model for protecting constitutional essentials. Scholarly

engagement with international constitutional discourse can enhance the doctrine's theoretical foundations and practical applications.

6.4. Balancing Preservation and Evolution

The doctrine's future success depends on maintaining balance between constitutional preservation and democratic evolution. Courts must distinguish between amendments that genuinely threaten constitutional identity and those representing legitimate constitutional development. This distinction requires sophisticated constitutional theory and careful case-by-case analysis (Albert, 2015).

Developing a proportionality framework for basic structure review could enhance doctrinal application. Rather than binary invalidation, courts could assess whether amendments' constitutional benefits justify basic structure impacts. This nuanced approach would preserve amendment power while protecting constitutional essentials (Barak, 2012).

VII. CONCLUSION

The Basic Structure Doctrine's fifty-year journey demonstrates both remarkable resilience and continuing evolution. From its inception as a response to parliamentary overreach through the Emergency period's existential challenge to contemporary applications addressing digital rights and electoral integrity, the doctrine has proven adaptable and essential for constitutional preservation.

Comparative analysis reveals that while various constitutional systems address amendment limitations differently, India's judicially developed framework offers unique flexibility combined with substantive protection. The doctrine's influence on jurisdictions like Bangladesh and Colombia demonstrates its theoretical robustness and practical utility beyond Indian borders.

Moving forward, the doctrine must address legitimate concerns about democratic legitimacy, definitional clarity, and application consistency. Greater precision in identifying basic structure elements, institutional refinements to enhance decision-making legitimacy, and sophisticated engagement with contemporary constitutional challenges will determine the doctrine's continued relevance.

The Basic Structure Doctrine represents a crucial innovation in constitutional thought, balancing popular sovereignty with constitutional limits. As constitutional democracy faces unprecedented challenges globally, the doctrine's core insight—that constitutions contain essential features transcending ordinary amendment power—remains profoundly important. Its future trajectory should emphasize adaptive interpretation, comparative learning, and principled application to protect constitutional democracy while respecting democratic self-governance.

The doctrine's evolution over the next fifty years will likely be shaped by emerging challenges: technological transformation, climate change's constitutional implications, global migration, and economic inequality. These challenges will test whether the Basic Structure Doctrine can continue protecting constitutional essentials while enabling necessary constitutional adaptation. If carefully developed through principled jurisprudence, institutional refinement, and democratic engagement, the doctrine can remain a vital instrument for preserving India's constitutional democracy while serving as a model for constitutional systems worldwide.

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Reforming Criminal Procedure in India: Balancing Speedy Trials with Fair Trial Guarantees

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Abstract

The Indian criminal justice system confronts a fundamental tension between the constitutional right to a speedy trial and the guarantee of fair trial procedures. This paper examines the structural and procedural challenges within India's criminal justice framework through analysis of constitutional provisions, statutory frameworks, and judicial pronouncements. As of 2023, approximately 73.5% of India's prison population comprises undertrial prisoners, many detained for periods exceeding potential sentences for their alleged offenses. Through doctrinal analysis, this study evaluates recent legislative reforms, including the Bharatiya Nagarik Suraksha Sanhita, 2023, and their capacity to address systemic delays while maintaining procedural safeguards. The analysis reveals that while procedural innovations demonstrate potential, their implementation remains constrained by infrastructural deficits and institutional capacity limitations. This paper argues for a comprehensive approach integrating technological solutions, enhanced judicial capacity, and strengthened legal aid mechanisms to achieve equilibrium between expedition and fairness in criminal proceedings.

Keywords: - Criminal Procedure, Speedy Trial, Fair Trial, Indian Constitution, Judicial Reform, Undertrial Detention.

I. INTRODUCTION

The right to a speedy trial and the right to a fair trial constitute foundational pillars of criminal jurisprudence, embodying the dual imperatives of swift justice delivery and procedural integrity. In India, these rights derive constitutional status from Article 21 of the Constitution, which guarantees that no person shall be deprived of life or personal liberty except according to procedure established by law (Constitution of India, 1950). The Supreme Court of India has consistently interpreted this provision expansively, recognizing both speedy trial and fair trial as integral components of the fundamental right to life and liberty.

In the landmark case of (Hussainara Khatoun v. Home Secretary, State of Bihar, 1979), the Supreme Court established that speedy trial is an essential ingredient of reasonable, fair, and just procedure under Article 21, declaring that "a procedure which does not ensure a reasonably quick trial cannot be regarded as 'reasonable, fair or just'" (AIR 1979 SC 1369, p. 1382). This pronouncement transformed speedy trial from an administrative aspiration into a justiciable constitutional right.

Similarly, the (Maneka Gandhi v. Union of India, 1978) case fundamentally expanded the interpretation of Article 21, establishing that the procedure established by law must be just, fair, and reasonable, not merely formally compliant with legislative enactments (AIR 1978 SC 597). The Court established the interconnectedness of Articles 14, 19, and 21—the "golden triangle" of the Constitution—ensuring that any deprivation of personal liberty must satisfy constitutional requirements of equality, fundamental freedoms, and due process.

However, the Indian criminal justice system confronts a paradoxical challenge: the simultaneous need to expedite trial proceedings while maintaining rigorous procedural safeguards. As documented in the Prison Statistics India 2023 report published by the National Crime Records Bureau, India's prisons housed 530,333 inmates as of December 31, 2023, with 73.5% (389,910 inmates) comprising undertrial prisoners (National Crime Records Bureau, 2023). This endemic congestion results in prolonged pre-trial detention, often for periods exceeding the maximum sentence for alleged offenses, representing a fundamental inversion of criminal justice principles.

The National Judicial Data Grid (NJDG), maintained by the e-Committee of the Supreme Court of India, documents over 50 million pending cases across Indian courts as of 2024 (National Judicial Data Grid, 2024). Criminal cases constitute

approximately 30% of this backlog, with average trial duration in sessions courts exceeding five years for many case categories.

Recent legislative initiatives, most notably the Bharatiya Nagarik Suraksha Sanhita (BNSS), 2023, which replaced the colonial-era Code of Criminal Procedure, 1973, purport to modernize procedural frameworks and incorporate technological innovations to accelerate justice delivery ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Act No. 46 of 2023. The BNSS came into effect on July 1, 2024, introducing provisions for mandatory investigation timelines, electronic evidence, virtual proceedings, and enhanced witness protection mechanisms.

This paper critically examines the constitutional, statutory, and institutional dimensions of criminal procedure reform in India, with particular emphasis on mechanisms to reconcile the competing demands of speed and fairness. The research questions guiding this inquiry are:

- How do constitutional mandates for speedy and fair trials translate into procedural requirements within India's criminal justice system?
- What structural and institutional factors contribute to trial delays and procedural inadequacies?
- To what extent do recent legislative reforms address these systemic challenges while maintaining fair trial guarantees?
- What additional measures are necessary to achieve sustainable equilibrium between expedition and fairness in criminal proceedings?

II. THEORETICAL FRAMEWORK: CONSTITUTIONAL FOUNDATIONS OF SPEEDY AND FAIR TRIALS

2.1. Constitutional Architecture of Criminal Justice Rights

The Indian Constitution does not explicitly enumerate a right to speedy trial; rather, this right has been judicially constructed through expansive interpretation of Article 21's due process guarantee. The ([Hussainara Khatoon trilogy of cases, 1979](#)) established foundational principles regarding speedy trial as a constitutional imperative. The Supreme Court recognized that prolonged detention of undertrial prisoners—particularly those unable to afford bail—violated their fundamental rights under Article 21.

In the first Hussainara Khatoon decision dated February 12, 1979, the Court observed: "It is a crying shame on the judicial system that keeps men, women and children behind bars without the commencement of trial" (AIR 1979 SC 1360). The Court directed the immediate release of undertrial prisoners who had been in detention for periods exceeding the maximum sentence for their alleged offenses, and mandated the provision of free legal aid at state expense for indigent accused persons.

The subsequent orders in the Hussainara Khatoon case series (March 9, 1979, and May 4, 1979) further elaborated on the constitutional obligation of the state to ensure speedy trials. The Court emphasized that the state cannot deny the constitutional right to speedy trial on grounds of financial constraints, stating: "The law does not permit any Government to deprive its citizens of constitutional rights on a plea of poverty" (AIR 1979 SC 1369, p. 1382).

The conceptual foundation for fair trial derives from multiple constitutional provisions. Article 20 prohibits ex post facto laws, double jeopardy, and self-incrimination, establishing fundamental procedural protections ([Constitution of India, 1950](#)). Article 20(3) provides that "no person accused of any offence shall be compelled to be a witness against himself," embodying the privilege against self-incrimination central to adversarial criminal procedure.

Article 22 guarantees rights upon arrest and detention, including:

- The right to be informed of grounds for arrest
- The right to consult and be defended by a legal practitioner of choice
- The right to be produced before a magistrate within twenty-four hours of arrest, excluding journey time ([Constitution of India, 1950](#)), Article 22(1)-(2).

These protections ensure procedural fairness during the critical initial stages of criminal proceedings when accused persons are most vulnerable.

Article 39A mandates equal justice and free legal aid, providing that "the State shall secure that the operation of the legal system promotes justice, on a basis of equal opportunity, and shall, in particular, provide free legal aid, by suitable legislation or schemes or in any other way, to ensure that opportunities for securing justice are not denied to any citizen by reason of economic or other disabilities" ([Constitution of India, 1950](#)). This provision recognizes that procedural fairness requires substantive equality in access to legal representation, not merely formal availability of counsel.

2.2. Maneka Gandhi and the Golden Triangle

The ([Maneka Gandhi v. Union of India, 1978](#)) case marked a watershed moment in Indian constitutional jurisprudence, fundamentally transforming the interpretation of Article 21 and its relationship with Articles 14 and 19. The case arose when the Government of India impounded Maneka Gandhi's passport under the Passport Act, 1967, without providing reasons, citing "public interest."

The seven-judge bench of the Supreme Court, in a unanimous decision, overruled the earlier restrictive interpretation established in ([A.K. Gopalan v. State of Madras, 1950](#)), which had held that Articles 14, 19, and 21 operated in mutually exclusive spheres. The Maneka Gandhi Court instead established that these articles are interconnected and must be read harmoniously to protect individual liberty comprehensively.

Justice P.N. Bhagwati, writing the principal judgment, articulated the expanded interpretation of "personal liberty" under Article 21: "The expression 'personal liberty' in Article 21 is of the widest amplitude and it covers a variety of rights

which go to constitute the personal liberty of man and some of them have been raised to the status of distinct fundamental rights and given additional protection under Article 19" (AIR 1978 SC 597, p. 619).

Critically, the Court held that the "procedure established by law" under Article 21 must itself be just, fair, and reasonable—not merely formally enacted by the legislature. This interpretation introduced substantive due process requirements into Indian constitutional law, requiring that any law depriving a person of life or personal liberty must satisfy constitutional standards of fairness and reasonableness across Articles 14, 19, and 21.

Justice Bhagwati emphasized: "The principle of reasonableness, which legally as well as philosophically, is an essential element of equality or non-arbitrariness pervades Article 14 like a brooding omnipresence and the procedure contemplated by Article 21 must answer the test of reasonableness in order to be in conformity with Article 14" (AIR 1978 SC 597, p. 622).

This doctrinal development has profound implications for criminal procedure reform. Any procedural modification intended to expedite trials must satisfy constitutional requirements of fairness and reasonableness. Reforms cannot merely prioritize efficiency at the expense of procedural protections; they must demonstrate that accelerated procedures remain just, fair, and non-arbitrary.

2.3. International Human Rights Standards

India's obligations under international human rights law provide additional normative guidance for criminal procedure reform. As a party to the International Covenant on Civil and Political Rights (ICCPR), India has committed to ensuring comprehensive fair trial guarantees.

Article 14 of the ICCPR establishes detailed procedural protections, including:

- Equality before courts and tribunals
- The right to a fair and public hearing by a competent, independent and impartial tribunal
- Presumption of innocence
- Minimum guarantees for the accused, including adequate time and facilities to prepare defense, right to counsel, right to examine witnesses, and right to interpretation if needed
- The right to review by a higher tribunal (International Covenant on Civil and Political Rights, 1966, Article 14).

Particularly relevant to the present analysis, Article 14(3)(c) guarantees that accused persons be "tried without undue delay" ([International Covenant on Civil and Political Rights, 1966](#)). The ([United Nations Human Rights Committee, in General Comment No. 13 ,1984](#)), clarified that "undue delay" must be assessed contextually, considering factors including case complexity, conduct of the accused and authorities, and what is at stake for the applicant.

Similarly, Article 9(3) of the ICCPR provides that detained persons "shall be entitled to trial within a reasonable time or to release" ([International Covenant on Civil and Political Rights, 1966](#)). This provision directly addresses the undertrial detention crisis documented in India's prison statistics, requiring states to either prosecute expeditiously or release detained persons.

While international human rights standards are not directly enforceable in Indian domestic law absent incorporating legislation, the Supreme Court has consistently referenced these standards as interpretive aids for understanding constitutional rights. In ([Vishaka v. State of Rajasthan ,1997](#)), the Court held that international conventions and norms are significant for interpreting fundamental rights in the absence of enacted domestic law.

III. ANALYSIS OF SYSTEMIC IMPEDIMENTS

3.1. The Undertrial Detention Crisis

The most visible manifestation of the tension between speedy trial and fair trial is India's undertrial detention crisis. According to the Prison Statistics India 2023 report, 389,910 of the 530,333 total prisoners—representing 73.5%—were undertrials as of December 31, 2023 ([National Crime Records Bureau, 2023](#)). This proportion has remained consistently above 65% for the past decade, indicating structural rather than transient causes.

The demographic and socioeconomic profile of undertrial prisoners reveals systemic inequities. Among undertrials in 2023:

- 44% were aged 18-30 years
- 25% were illiterate, with an additional 40% having education below Class X
- Scheduled Castes comprised 21% and Scheduled Tribes 10.5%, both significantly exceeding their population proportions
- Muslims comprised 18.7% of undertrials despite representing approximately 14.2% of India's population ([National Crime Records Bureau, 2023](#)).

Uttar Pradesh reported the highest absolute number of undertrial prisoners at approximately 73,000, followed by Bihar (46,000) and Maharashtra (32,000) ([National Crime Records Bureau, 2023](#)). These three states collectively account for nearly 40% of India's total undertrial population, reflecting both large populations and acute judicial capacity constraints.

Prison overcrowding exacerbates the crisis. The national occupancy rate stood at 120.8% as of December 31, 2023—meaning Indian prisons held approximately 21% more inmates than sanctioned capacity ([National Crime Records Bureau, 2023](#)). Regional variations are stark: Delhi's prisons operated at 200.2% capacity, Meghalaya at 188.7%, and Uttarakhand at 183.1%, while several states including Rajasthan, Andhra Pradesh, and Tamil Nadu maintained occupancy below 100%.

The human consequences of prolonged pre-trial detention are severe and multifaceted. First, extended incarceration before conviction constitutes punishment without adjudication of guilt, inverting the presumption of innocence fundamental to criminal jurisprudence. Second, detention impairs accused persons' ability to prepare effective defenses, as incarcerated

individuals face obstacles in gathering evidence, consulting counsel, and investigating exculpatory circumstances. Third, coercive pressures to accept plea bargains or unfavorable dispositions increase with detention duration, particularly for indigent accused persons unable to post bail.

3.2. Bail Jurisprudence and Pre-Trial Release

The Supreme Court's recent pronouncements in ([Satender Kumar Antil v. Central Bureau of Investigation ,2022](#)) addressed systemic deficiencies in arrest and bail practices. The Court categorized offenses into four groups with differentiated procedures for arrest and bail:

- Category A:* Offenses punishable with seven years imprisonment or less—ordinary summons issued initially, withailable warrants only upon non-appearance, and non-ailable warrants only after failure to appear onailable warrants.
- Category B:* Offenses punishable with death, life imprisonment, or more than seven years—standard arrest and bail procedures apply.
- Category C:* Special Acts (NDPS, UAPA, PMLA)—stringent provisions under respective acts govern arrest and bail.
- Category D:* Economic offenses not covered by special acts—procedures calibrated to offense severity and societal impact.

The Court reaffirmed the constitutional principle that "bail is the rule and jail is the exception," emphasizing that arrest should not be routine practice. The judgment directed all State Governments and Union Territories to issue standing orders implementing Section 41A of the Code of Criminal Procedure (now Section 35 of BNSS, 2023), which mandates issuance of notice to appear rather than arrest for offenses punishable with imprisonment up to seven years ([Satender Kumar Antil v. Central Bureau of Investigation, 2022](#)), (2022) 10 SCC 51.

Despite these judicial pronouncements, implementation remains inconsistent. Subsequent compliance reviews conducted by the Supreme Court in 2023, 2024, and 2025 documented persistent non-compliance, particularly in Uttar Pradesh and several other states. Courts continue to default to detention in serious cases despite absence of flight risk or evidence tampering concerns, and police frequently arrest without satisfying Section 41/Section 35 requirements for recorded reasons justifying arrest.

Restrictive bail provisions under special statutes further complicate pre-trial release. The ([Unlawful Activities \(Prevention\) Act, 1967](#)), Section 43D imposes stringent bail conditions requiring courts to find "reasonable grounds for believing that the accusation against such person is prima facie not true" before granting bail. Similarly, the ([Narcotic Drugs and Psychotropic Substances Act, 1985](#)), Section 37, and the ([Prevention of Money Laundering Act, 2002](#)), Section 45, impose "twin conditions" requiring satisfaction that the accused is not guilty and is not likely to commit further offenses while on bail.

These provisions create presumptions against bail that result in prolonged detention during trial, often for periods exceeding potential sentences upon conviction. While justified by legislative policy regarding serious offenses, their application has generated substantial undertrial populations in cases ultimately resulting in acquittal or conviction for lesser offenses.

3.3. Investigation Stage Delays

Delays during the investigation stage compound subsequent trial delays. The Code of Criminal Procedure, 1973, Section 173, mandated completion of investigation within prescribed periods but lacked effective enforcement mechanisms. Police frequently obtained repeated extensions from magistrates for investigation completion, with accused persons remaining in custody during extended investigations.

The BNSS, 2023, attempts to strengthen investigation timelines through Section 193, which requires completion of investigation within 90 days for most offenses and 180 days for complex cases, with mandatory magisterial oversight of investigation progress ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Section 193. However, these provisions remain subject to implementation challenges.

Systemic capacity constraints undermine investigation efficiency. According to the Bureau of Police Research and Development, police forces operate with vacancy rates exceeding 20% nationally, with several states reporting vacancies above 30%. Forensic laboratories face backlogs exceeding 200,000 cases, with average turnaround times for forensic analysis ranging from several months to over one year in many jurisdictions.

These resource deficits create pressure for investigative shortcuts that potentially compromise evidentiary reliability. The Supreme Court in ([Anil Rai v. State of Bihar ,2001](#)) recognized this problematic dynamic, observing that "speedy trial is not synonymous with hurried trial" and that investigation must be "fair, proper and complete" to enable accurate adjudication (AIR 2001 SC 3173).

3.4. Trial Stage Complexities

The trial stage manifests the most visible consequences of systemic congestion. Indian criminal trials operate within an adversarial framework characterized by elaborate evidentiary rules, extensive cross-examination rights, and multiple layers of procedural formality. While these features serve important fairness objectives, their implementation in resource-constrained environments produces chronic delays.

The phenomenon of "adjournment culture"—routine postponement of trial proceedings—constitutes a primary driver of delay. Multiple factors contribute to adjournment frequency:

- Witness non-appearance due to inadequate witness management systems
- Prosecutor unavailability resulting from excessive caseloads

- Defense counsel scheduling conflicts arising from lawyers managing hundreds of matters simultaneously
- Inadequate case preparation by both prosecution and defense.

The CrPC contained provisions enabling courts to impose costs for unnecessary adjournments ([Code of Criminal Procedure, 1973](#)), Section 309), yet these remained largely unenforced. The BNSS, 2023, attempts to address this through Section 356, which mandates day-to-day trial provisions for specific offense categories and enhanced judicial discretion to deny unjustified postponements ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Section 356).

However, absent corresponding increases in judicial capacity, these provisions risk merely displacing delays rather than eliminating them. India's judge-to-population ratio remains approximately 21 judges per million population, substantially below the government's target of 50 judges per million population and far below international benchmarks. Judicial vacancy rates approximate 30% across district and subordinate courts, with some states reporting vacancies exceeding 40%.

IV. EVALUATION OF LEGISLATIVE REFORMS: THE BHARATIYA NAGARIK SURAKSHA SANHITA, 2023

4.1. Overview and Procedural Innovations

The Bharatiya Nagarik Suraksha Sanhita (BNSS), 2023, represents the most comprehensive criminal procedure reform since independence, replacing the colonial-era Code of Criminal Procedure, 1973. Enacted as Act No. 46 of 2023 and receiving Presidential assent on December 25, 2023, the BNSS came into effect on July 1, 2024 ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)).

The BNSS comprises 39 chapters, 531 sections, and 2 schedules, compared to the CrPC's 37 chapters, 484 sections, and 2 schedules. Key innovations relevant to the speed-fairness balance include:

4.1.1. Mandatory Investigation Timelines

Section 193 requires completion of investigation within 90 days for most offenses and 180 days for complex cases, with magisterial oversight requiring investigators to submit progress reports at specified intervals ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Section 193. Non-compliance may entitle accused persons to bail under Section 187, which provides that if investigation is not completed within the prescribed period, the accused shall be released on bail.

4.1.2. Technological Integration

The BNSS extensively incorporates technology into criminal proceedings:

- Section 2(1)(a) defines "audio-video electronic means" to enable virtual proceedings
- Section 173(2) authorizes service of summons electronically
- Section 230 permits electronic communication of court orders and processes
- Section 531 mandates that all trials, inquiries, and proceedings may be held in electronic mode
- Sections 254 and 396 provide for video recording of search and seizure proceedings

4.1.3. Forensic Investigation

Section 176 mandates forensic investigation for offenses punishable with seven years imprisonment or more, requiring forensic experts to visit crime scenes, collect evidence, and record the process ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Section 176. This provision aims to enhance evidentiary reliability through scientific investigation methods.

4.1.4. Trials in Absentia

Sections 356-363 introduce procedures for conducting trials in absentia when proclaimed offenders abscond to evade trial with no immediate prospect of arrest ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Sections 356-363. This innovation addresses cases where deliberate evasion prevents case closure, though concerns persist regarding due process adequacy when accused persons are absent.

4.1.5. Witness Protection

Chapter XVII introduces statutory witness protection mechanisms including:

- Concealment of identity
- Ensuring that identity and addresses of witnesses are not disclosed
- Issuing appropriate directions to advocates
- Conducting proceedings at locations other than ordinary courts
- Providing for examination of witnesses through video conferencing ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Chapter XVII.

These provisions aim to improve witness cooperation and attendance, thereby reducing adjournments.

4.1.6. Summary Trial Expansion

Section 351 expands summary trial procedures for petty offenses, enabling expedited disposition without compromising essential fair trial protections ([Bharatiya Nagarik Suraksha Sanhita, 2023](#)), Section 351. This differentiated approach recognizes that procedural intensity should correspond to offense severity and potential punishment.

4.1.7. Victim Participation:

Multiple provisions enhance victim participation including:

- Mandatory victim notification of proceedings;
- Right to engage advocate to assist prosecution;
- Right to be heard on bail applications;
- Right to file appeal against acquittal or inadequate sentence; and
- Consideration of victim impact during sentencing.

4.2. Implementation Challenges and Institutional Constraints

Despite these procedural innovations, implementation faces formidable obstacles. First, technological infrastructure remains inadequate across much of India's judicial system, particularly in rural and semi-urban areas. Digital connectivity and reliable electricity supply remain unreliable in many jurisdictions. Mandating virtual proceedings without ensuring technological accessibility risks creating new barriers to justice while failing to achieve efficiency gains.

Second, judicial and prosecutorial capacity constraints persist despite legislative reforms. Judicial vacancy rates remain approximately 30% across district and subordinate courts. Public prosecutors manage excessive caseloads, with individual prosecutors often responsible for 500+ active matters. These capacity deficits fundamentally limit the system's ability to process cases expeditiously regardless of procedural refinements.

Third, the forensic investigation mandate under Section 176 exceeds current forensic laboratory capacity. India's forensic laboratories already face backlogs exceeding 200,000 cases. Mandating forensic investigation for all offenses punishable with seven years or more imprisonment will substantially increase demand without corresponding infrastructure expansion.

Fourth, cultural and professional resistance to procedural change may impede implementation. The legal profession in India remains substantially conservative, with established practitioners often resistant to departures from familiar procedural routines. Effective BNSS implementation requires comprehensive training, attitudinal shifts, and sustained institutional commitment that extend beyond legislative enactment.

V. DISCUSSION: TOWARDS COMPREHENSIVE REFORM

5.1. Judicial Infrastructure and Capacity Enhancement

Sustainable criminal justice reform requires addressing fundamental capacity deficits through substantial infrastructure investment. The following measures merit priority consideration:

Judicial Appointments: Accelerating appointments to achieve the target of 50 judges per million population, prioritizing trial court vacancies that most directly affect case disposition. The collegium system for judicial appointments requires streamlining to reduce appointment timelines from current averages exceeding 12-18 months.

Court Infrastructure: Enhancing physical infrastructure including adequate courtroom facilities, digital equipment, security provisions, and support staff. Many courts operate from inadequate facilities lacking basic amenities for judges, lawyers, litigants, and witnesses.

Prosecutorial Capacity: Expanding prosecutorial strength through increased hiring, improved compensation to attract competent practitioners, and specialized training programs. Creating specialized prosecution units for complex cases including economic offenses, cybercrimes, and organized crime.

Investigative Capabilities: Strengthening police and forensic capacity through additional personnel, equipment, training, and infrastructure. Expanding forensic laboratory capacity to reduce backlogs and turnaround times for scientific analysis.

Legal Aid Infrastructure: Transforming legal aid from underfunded afterthought to robust public defense infrastructure. The ([Legal Services Authorities Act, 1987](#)), established institutional mechanisms, yet chronic underfunding and inadequate attorney compensation produce dysfunctional implementation.

5.2. Technology-Driven Solutions

Technology offers significant potential for addressing systemic inefficiencies while preserving fair trial guarantees. The eCourts Mission Mode Project, initiated in 2007 and currently in Phase III, aims to comprehensively digitize court processes. The project encompasses:

- Computerization of court records and case management
- National judicial data grid for real-time case monitoring
- Electronic filing and service of processes
- Virtual court proceedings
- Video conferencing for witness examination and hearings
- D=Digital cause lists and orders
- Integration of courts, police, prisons, and forensic laboratories through interoperable systems.

However, realizing technology's potential requires moving beyond digitization toward comprehensive digital transformation incorporating:

- Artificial intelligence for case management and judicial research
- Predictive analytics for resource allocation and bottleneck identification

- Blockchain for evidentiary authentication and chain of custody documentation
- Mobile applications for litigant services and case tracking

Critical prerequisites include:

- Ensuring technological accessibility across socioeconomic strata through digital literacy programs and multilingual interfaces
- Robust cybersecurity frameworks protecting sensitive data and preventing unauthorized access
- Comprehensive training for judicial officers, lawyers, and court staff
- Safeguards against algorithmic bias in case management systems.

5.3. Alternative Dispute Resolution and Plea Bargaining

Alternative dispute resolution mechanisms and plea bargaining offer additional avenues for reducing caseload. The CrPC introduced plea bargaining provisions in 2006 through Chapter XXI-A, enabling negotiated dispositions for offenses punishable with imprisonment up to seven years ([Code of Criminal Procedure, 1973](#)), Sections 265A-265L, inserted by Criminal Law (Amendment) Act, 2005.

Research suggests plea bargaining achieves disposition in 2-3 months compared to years for contested trials. However, significant fairness concerns persist regarding:

- Voluntariness when accused persons face prolonged pre-trial detention
- Adequacy of legal representation during plea negotiations
- Potential coercion of innocent accused persons
- Proportionality of sentences obtained through plea bargains versus trial verdicts.

The Supreme Court in ([State of Uttar Pradesh v. Chandrika, 2000](#)) established safeguards requiring judicial satisfaction regarding voluntariness and factual basis for guilty pleas (AIR 2000 SC 164). Implementation of these protections varies substantially across jurisdictions.

Expanding mediation and conciliation mechanisms for appropriate offense categories—particularly disputes involving property, commercial matters, and victimless crimes—could substantially reduce caseload while preserving adversarial trials for serious offenses where liberty interests demand full procedural protections.

5.4. Fast-Track Courts and Specialized Tribunals

Fast-track courts represent an alternative reform strategy focusing on dedicated judicial resources for specific case categories. Initially established in 2000 to address sexual assault cases, fast-track courts have expanded to cover various offense types.

Fast-track courts achieve substantially shorter disposition times—averaging 12-18 months compared to 5-7 years in regular courts. However, sustainability depends on continued dedicated funding, which remains uncertain given competing budgetary priorities.

Specialized tribunals for specific offense categories—such as commercial crime, economic offenses, and cybercrimes—offer similar potential for combining expertise with efficiency. The National Company Law Tribunal and specialized environmental courts demonstrate this approach's viability.

VI. CONCLUSION

The challenge of balancing speedy trials with fair trial guarantees in Indian criminal procedure reflects fundamental tensions inherent in any criminal justice system: competing demands of efficiency and accuracy, individual rights and collective security, procedural formality and practical feasibility.

This analysis reveals that meaningful reform requires an integrated strategy combining procedural refinement, technological transformation, institutional capacity enhancement, and cultural change within the legal profession. Neither purely procedural solutions nor purely infrastructural investments alone suffice; rather, sustainable progress demands coordinated interventions across multiple dimensions.

Several key findings emerge. First, speed and fairness are not inherently antagonistic values; rather, systemic dysfunction produces apparent trade-offs where well-designed procedures and adequate resources enable both expedition and fairness. The Maneka Gandhi framework establishing the golden triangle of Articles 14, 19, and 21 requires that any procedural modification satisfy constitutional standards of reasonableness, fairness, and justice.

Second, the undertrial detention crisis—with 73.5% of prisoners awaiting trial—represents a fundamental failure to implement constitutional guarantees recognized in Hussainara Khatoon. The Supreme Court's pronouncements in Satender Kumar Antil reaffirming "bail is the rule and jail is the exception" require rigorous implementation through standing orders, training, and accountability mechanisms.

Third, while the BNSS, 2023, introduces potentially beneficial procedural innovations—mandatory investigation timelines, technological integration, forensic investigation requirements, witness protection mechanisms, and expanded summary trials—their effectiveness depends critically on addressing systemic institutional deficiencies transcending procedural rules. Without corresponding investments in judicial capacity, forensic infrastructure, prosecutorial resources, and legal aid mechanisms, these reforms risk remaining aspirational rather than transformative.

Fourth, differential procedures calibrated to offense severity and case complexity can achieve efficiency gains without compromising essential protections for serious charges involving substantial liberty deprivation. The BNSS framework for summary trials and the Satender Kumar Antil categorization of offenses demonstrate this approach's potential.

The findings have several important implications for policy and practice. Policymakers should prioritize investments in judicial and legal aid infrastructure as prerequisites for effective procedural reform. Judicial administrators should embrace technological innovation while maintaining vigilance regarding access and equity concerns. Legal professionals must recognize that resistance to procedural modernization ultimately serves neither efficiency nor fairness objectives.

Future implementation of BNSS provisions requires careful monitoring to assess their impact on trial duration, pre-trial detention rates, and conviction accuracy. Empirical research should examine whether technological innovations achieve efficiency gains while maintaining procedural fairness, whether forensic investigation mandates enhance evidentiary reliability, and whether witness protection mechanisms improve cooperation and attendance.

The right to speedy trial and the right to fair trial are not competing values requiring sacrificial trade-offs, but rather complementary components of a just criminal procedure system. India's criminal justice reforms should aspire to create institutional conditions where both values flourish, ensuring that justice is delivered not merely swiftly or fairly, but both swiftly and fairly. Achieving this vision requires sustained commitment, substantial resources, and systemic transformation—but the constitutional imperatives of Articles 21, 22, and 39A and the fundamental requirements of human dignity demand no less.

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Gender-Neutral Laws: Reforming the Legal Recognition of Identity and Relationships

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Abstract

This paper examines the evolving landscape of gender-neutral laws and their implications for legal recognition of identity and relationships. Through a theoretical analysis of contemporary legal frameworks, this study explores how jurisdictions worldwide are reforming traditional binary gender constructs in favor of more inclusive approaches to identity recognition. The paper argues that gender-neutral legal reforms represent a fundamental shift toward self-determination principles while simultaneously creating new challenges for legal systems previously structured around binary gender categories. Key findings indicate that while progressive jurisdictions have implemented self-identification models that enhance individual autonomy and reduce discrimination, significant variations exist in implementation approaches, creating a complex international legal landscape. The analysis reveals that gender-neutral reforms impact not only individual identity recognition but also broader legal constructs including marriage, parentage, and anti-discrimination protections. This research contributes to understanding how legal systems can balance individual rights with administrative practicality while addressing concerns about maintaining legal certainty and protecting existing rights frameworks.

Keywords: - Legal gender recognition, gender-neutral laws, self-identification, marriage equality, human rights law.

I. INTRODUCTION

The legal recognition of gender identity has emerged as one of the most significant human rights issues of the 21st century, fundamentally challenging traditional binary constructs that have underpinned legal systems for centuries. The movement toward gender-neutral laws represents more than administrative reform; it constitutes a paradigmatic shift in how legal systems conceptualize identity, relationships, and fundamental human rights. This transformation has accelerated dramatically in recent years, with numerous jurisdictions implementing reforms that move beyond the traditional male-female binary toward more inclusive frameworks that recognize gender diversity and individual self-determination.

The significance of this legal evolution extends far beyond identity documentation. Legal gender recognition (LGR) allows transgender and gender-diverse people to change their sex/gender marker and names on official identity documents. Inconsistencies between a person's identified gender and official documentation often create barriers that can limit a person's access to health, education, employment, and public services. These barriers have profound implications for millions of individuals worldwide who do not conform to traditional gender binaries, creating systemic disadvantages that affect every aspect of their lives.

This paper argues that the development of gender-neutral laws represents a necessary evolution of legal systems toward greater inclusivity and individual autonomy, while simultaneously creating complex challenges for traditional legal frameworks. The analysis examines how different jurisdictions have approached this transformation, the theoretical foundations underlying various approaches, and the broader implications for legal concepts of identity and relationships. Through comparative analysis of international legal developments, this research contributes to understanding how legal systems can effectively balance individual rights with administrative practicality and social cohesion.

II. THEORETICAL FRAMEWORK

The theoretical foundations of gender-neutral legal recognition rest upon several interconnected human rights principles, primarily the concepts of human dignity, equality, and self-determination. These principles find expression in international human rights instruments and have evolved through decades of advocacy and legal development. The movement toward gender-neutral laws challenges fundamental assumptions about the role of biological characteristics in legal classification systems and raises profound questions about the relationship between law, identity, and social order.

2.1. Human Rights Foundation

The right to gender recognition has emerged as a fundamental human right under international law, grounded in broader principles of human dignity and equality. LGR can affirm the individual's right to self-identification and bodily autonomy, while the lack of LGR creates barriers exposing transgender and non-binary individuals to exclusion from full societal participation and to significant amounts of discrimination and violence in various areas of life. This framework positions legal gender recognition not as a privilege granted by the state, but as an inherent right that enables individuals to participate fully in society.

The theoretical underpinning of self-determination in gender identity connects to broader philosophical debates about the nature of identity itself. Unlike traditional legal approaches that viewed gender as immutable and biologically determined, contemporary human rights frameworks recognize gender identity as a fundamental aspect of human personality that should be respected and protected by law. This shift reflects a move from essentialist to constructivist understandings of gender, acknowledging that legal categories should serve human dignity rather than enforce rigid biological determinism.

2.2. Comparative Legal Models

Recent scholarship has identified four distinct models of legal gender recognition that reflect different theoretical approaches to balancing individual rights with administrative concerns. The article explores the different constitutional developments of the right to gender recognition and discusses their potential to protect trans and gender diverse people. These models range from highly restrictive approaches that maintain traditional binary structures to progressive frameworks that embrace self-determination and non-binary recognition.

The "binary ascriptive" model, exemplified by France and Italy, maintains traditional gender categories while allowing limited transitions under strict medical supervision. This approach reflects a medicalized understanding of gender identity that views transgender identity as a condition requiring professional validation. In contrast, the "nonbinary elective" model, demonstrated by jurisdictions like Belgium, moves toward self-determination while acknowledging gender diversity beyond the binary.

2.3. Rights-Based Approach

The rights-based approach to gender recognition emphasizes individual autonomy and dignity as paramount concerns, arguing that legal systems should facilitate rather than obstruct authentic self-expression. This theoretical framework draws upon established human rights principles while extending them to encompass gender identity and expression. Without legal recognition of gender identity, trans* individuals face a greater risk of violations of their right to health and bodily autonomy. The health implications of inadequate legal recognition demonstrate how identity recognition intersects with broader human rights protections.

This approach challenges traditional state authority over identity classification, arguing that individuals are best positioned to determine their own gender identity. The theoretical justification rests upon principles of personal autonomy and the presumption that individuals should be free to express their authentic selves without unnecessary state interference. This framework has gained increasing acceptance in international human rights law, reflected in evolving jurisprudence and policy guidance from human rights bodies.

III. ANALYSIS OF CONTEMPORARY LEGAL DEVELOPMENTS

The landscape of gender recognition laws has transformed dramatically over the past decade, with jurisdictions worldwide implementing diverse approaches to identity recognition and relationship laws. This evolution reflects varying cultural, legal, and political contexts, resulting in a complex international mosaic of legal frameworks that range from highly progressive to restrictive approaches.

3.1. Progressive Jurisdictions and Self-Identification Models

Several jurisdictions have implemented comprehensive self-identification models that represent the most progressive approach to gender recognition. New Zealand passed a landmark self-identification law on 9 December 2021, allowing people to change gender markers without requiring any medical or legal procedures. This model eliminates traditional barriers such as medical diagnoses, surgical requirements, or prolonged waiting periods, enabling individuals to obtain identity documents that reflect their gender identity through administrative processes.

The implementation of self-identification models has demonstrated significant benefits for affected communities. In meta-analyses, LGR was associated with less suicidal ideation (OR = 0.75; 95 % CI: 0.56–1.00, I² = 46 %) and psychological distress (e.g., OR for LGR on all versus no ID = 0.53; 95 % CI: 0.40, 0.70, I² = 17 %). These empirical findings provide strong evidence for the positive mental health impacts of accessible gender recognition, supporting theoretical arguments about the importance of legal recognition for human dignity and well-being.

Argentina has been particularly notable for its comprehensive approach, implementing the first self-identification law in Latin America. On 20 July 2021, President Alberto Fernández signed a decree (Decreto 476/2021) mandating the National Registry of Persons (RENAPER) to allow a third gender option on all national identity cards and passports, marked as an "X". This development made Argentina a pioneer in recognizing non-binary identities within official documentation, though subsequent political changes have threatened these advances.

3.2. Restrictive Approaches and Recent Reversals

Despite global trends toward greater recognition, significant resistance and reversals have emerged in various jurisdictions. The recent political changes in the United States exemplify how legal recognition can be vulnerable to political shifts. On January 20, 2025, after his inauguration, President Donald Trump signed an executive order instructing the federal government to recognize "only two genders, male and female," including on federal identity documents. This reversal demonstrates the fragility of progressive reforms and highlights the importance of constitutional protections for gender recognition rights.

Similar reversals have occurred in other jurisdictions, often reflecting broader political tensions around gender issues. The far right administration that came to power in 2023 is planning to withdraw this recognition in 2024 in Argentina, illustrating how political changes can threaten established rights. These developments underscore the need for robust legal protections that can withstand political volatility.

3.3. European Developments and Human Rights Jurisprudence

European jurisdictions have played a crucial role in developing legal frameworks for gender recognition, with the European Court of Human Rights providing important guidance on state obligations. The court's jurisprudence has evolved from restrictive interpretations that required medical intervention to more rights-based approaches that recognize dignity and autonomy concerns.

The European Court of Human Rights in *X and Y v. Romania* (2021) analysed current practice in relation to the right to gender recognition of Council of Europe member states. This analysis revealed significant variations across European states, with some maintaining restrictive requirements while others have moved toward more accessible procedures.

Germany's recent reforms exemplify the European trend toward self-identification. In April 2024, the German parliament has passed a self-identification law making it easier for individuals within Germany to legally change gender on documents. It went into legal effect on November 1, 2024. This development represents a significant shift from Germany's previously restrictive approach and demonstrates growing European consensus around self-determination principles.

IV. CRITICAL EVALUATION OF LEGAL MODELS

The diversity of approaches to gender recognition raises important questions about the effectiveness, human rights compliance, and practical implications of different legal models. While progressive self-identification frameworks align most closely with human rights principles, they also generate concerns about administrative complexity, potential conflicts with existing legal frameworks, and social acceptance.

4.1. Strengths of Self-Identification Models

Self-identification models offer significant advantages in terms of human rights compliance and practical accessibility. By removing medical gatekeeping requirements, these frameworks eliminate discriminatory barriers that have historically prevented many individuals from obtaining accurate identity documents. The elimination of surgical requirements is particularly significant, as these requirements have been recognized as human rights violations. Governments and medical institutions across the globe have continued to impose forced, coercive, and medically unnecessary procedures on trans* populations, such as mandating sterilization as a pre-condition of changing one's gender marker, a policy that is now recognized by the UN as a form of torture.

The administrative efficiency of self-identification models also represents a significant advantage. By streamlining procedures and reducing bureaucratic barriers, these frameworks enable more individuals to access legal recognition while reducing administrative costs and complexity. The positive mental health outcomes associated with accessible gender recognition provide additional evidence for the effectiveness of these approaches.

4.2. Challenges and Concerns

Despite their advantages, self-identification models face several challenges that require careful consideration. Administrative concerns include potential impacts on statistical data collection, particularly for purposes related to gender equality monitoring and resource allocation. Some critics argue that unrestricted self-identification could complicate efforts to track gender-based discrimination or ensure appropriate representation in gender-specific programs.

Legal complexity represents another significant challenge, particularly regarding the interaction between gender recognition laws and other legal frameworks. Issues arise in areas such as single-sex facilities, competitive sports, and gender-specific legal protections. In what could be a landmark case, the campaign group For Women Scotland has been granted permission to appeal to the UK Supreme Court a judicial review decision on the legal definition of the word 'woman'. Such cases illustrate the legal complexity that can arise when self-identification principles interact with established legal categories.

4.3. International Human Rights Standards

International human rights bodies have increasingly supported self-identification approaches while acknowledging the need for reasonable administrative procedures. The Yogyakarta Principles, while not legally binding, provide important

guidance on best practices for gender recognition laws. These principles emphasize the importance of accessible, transparent procedures that respect individual autonomy while maintaining appropriate legal safeguards.

The jurisprudence of the ECtHR regarding trans people was correctly analysed by scholars as having quite a prominent tendency to pathologize trans people. This historical pathologization has been increasingly criticized by human rights advocates and scholars, leading to calls for depathologized approaches that recognize gender identity as a fundamental aspect of human personality rather than a medical condition requiring treatment.

V. IMPLICATIONS FOR RELATIONSHIPS AND FAMILY LAW

The reform of gender recognition laws has profound implications for family law and the legal recognition of relationships. Traditional legal frameworks for marriage, parentage, and family formation have historically relied upon binary gender categories, creating complex challenges when individuals can change their legal gender or when relationships involve non-binary individuals.

5.1. Marriage and Partnership Recognition

The interaction between gender recognition and marriage laws creates particular complexity, especially in jurisdictions that restrict marriage to opposite-sex couples. Legal frameworks for determining parentage have traditionally relied on gendered concepts, but these approaches face challenges as family structures diversify. The legalization of same-sex marriage in many jurisdictions has reduced some of these conflicts, but questions remain about how marriage laws apply when one or both partners have changed their legal gender.

The global trend toward marriage equality has generally facilitated the integration of gender recognition reforms with relationship recognition. Thailand: On March 27, 2024, the Thai parliament's lower house passed a marriage equality bill, and on June 18, 2024, the upper house passed the bill into law. Thailand's King signed the marriage equality bill into law on September 24, 2024. The law went into effect on January 22, 2025. Such developments demonstrate how marriage equality and gender recognition reforms can be mutually reinforcing, creating more inclusive legal frameworks for diverse families.

5.2. Parentage and Family Formation

Gender recognition reforms create particular challenges for legal frameworks governing parentage and family formation. Traditional legal concepts such as "mother" and "father" become complicated when parents have changed their legal gender or when non-binary individuals become parents. Studies show that workplace leave policies using terms like "maternity leave" and "paternity leave" create problems for parents who don't fit traditional gender categories. This example illustrates how binary gender assumptions embedded in legal frameworks can create practical difficulties for gender-diverse individuals.

Some jurisdictions have responded by adopting gender-neutral terminology in family law, replacing gendered terms with functional descriptions. This approach recognizes that legal parentage should be based upon actual relationships and responsibilities rather than gender categories. However, such reforms require comprehensive legislative review to ensure consistency across legal frameworks.

5.3. Impact on Same-Sex Couples

The implementation of gender recognition laws has had complex effects on same-sex couples and LGBTQ+ communities more broadly. Findings underscore the importance of policies that advance equality for sexual and gender minorities (SGMs), as well as the importance of research exploring how policies are perceived by and impact SGM subpopulations. While many celebrate expanded recognition of gender diversity, some within LGBTQ+ communities express concerns about potential impacts on hard-won same-sex marriage rights or lesbian and gay identity categories.

These tensions reflect broader debates within LGBTQ+ communities about the relationship between sexual orientation and gender identity, and how legal frameworks can accommodate both. Research indicates that different community members may have varying perspectives on how gender recognition reforms affect their own interests and identities.

VI. INTERNATIONAL PERSPECTIVES AND COMPARATIVE ANALYSIS

The global landscape of gender recognition laws reveals significant variations in approach, reflecting different legal traditions, cultural contexts, and political environments. These variations provide valuable insights into the factors that influence legal reform and the effectiveness of different approaches in promoting human rights and social inclusion.

6.1. Regional Patterns and Influences

Regional patterns in gender recognition laws often reflect broader cultural and legal traditions. European jurisdictions have generally moved toward more progressive approaches, influenced by European human rights law and regional advocacy networks. Malta passed landmark legislation in 2015 protecting against medical interventions and introducing self-determination, making it a first-mover in Europe. Malta's pioneering role demonstrates how smaller jurisdictions can influence broader regional trends through innovative legal approaches.

Latin American developments have been particularly significant, with several countries implementing comprehensive self-identification laws. The Inter-American human rights system has played a crucial role in promoting these developments. A 2018 ruling by the Inter-American Court of Human Rights found the right to update official documents to conform to a person's gender identity to be protected under the American Convention on Human Rights, and required states to institute

domestic LGR procedures. This regional human rights framework has provided important legal foundation for national reforms.

6.2. Asian Developments and Challenges

Asian jurisdictions present a complex picture, with some countries implementing progressive reforms while others maintain restrictive approaches. In 2018, Pakistan passed a historic bill allowing people to have their self-perceived gender recognized on all official documents. This development was particularly significant given Pakistan's conservative cultural context, demonstrating that progressive gender recognition reforms can occur across diverse political environments.

However, Asian developments also illustrate the vulnerability of progressive reforms to political change and cultural resistance. The diversity of approaches across Asian jurisdictions reflects varying legal traditions, religious influences, and political systems that affect the feasibility and sustainability of reform efforts.

6.3. African Context and Emerging Developments

African jurisdictions have generally been slower to implement comprehensive gender recognition laws, though significant variations exist across the continent. South Africa is considered one of the most progressive countries in Africa on LGBTQIA+ legal issues. Transgender people have been able to attain LGR since 2003, although obstacles remain, such as the requirement for medical treatments (hormonal) before getting LGR approval. South Africa's relatively progressive approach reflects its post-apartheid constitutional framework that emphasizes human dignity and equality.

The limited development of gender recognition laws in many African jurisdictions reflects various factors including economic constraints, cultural resistance, and competing political priorities. However, emerging advocacy movements and international human rights pressure suggest potential for future developments in this region.

VII. CONTEMPORARY CHALLENGES AND FUTURE DIRECTIONS

The rapid evolution of gender recognition laws has created new challenges and opportunities that will shape future legal developments. These challenges span technical legal issues, social acceptance concerns, and broader questions about the role of law in defining identity and relationships.

7.1. Political Vulnerability and Legal Safeguards

Recent political reversals in various jurisdictions highlight the vulnerability of gender recognition rights to political change. Meanwhile, in the United States, a Day One Executive Order from President Donald Trump rolled back protections for trans, nonbinary, and intersex individuals at the federal level. Legal identification was reduced to a binary male or female based solely on the sex assigned at birth. Such reversals demonstrate the importance of constitutional protections and robust legal frameworks that can withstand political volatility.

The experience of different jurisdictions suggests that comprehensive legal protections, including constitutional guarantees and international treaty obligations, provide stronger protection against political reversals than administrative policies or executive orders. This insight has important implications for advocacy strategies and legal reform approaches.

7.2. Emerging Legal Complexities

As gender recognition laws become more established, new legal complexities are emerging that require ongoing attention and refinement. These include questions about recognition of foreign gender recognition decisions, compatibility with international travel documents, and coordination between different levels of government. Starting May 2025, the federal government is expected to enforce the REAL ID requirement for domestic air travel. Such requirements create practical challenges for individuals whose state and federal documents may not align due to policy differences.

The development of technology and digital identity systems also creates new opportunities and challenges for gender recognition. Digital identity frameworks could potentially provide more flexible and secure approaches to identity documentation, but they also raise concerns about privacy, security, and government surveillance.

7.3. Future Research and Development Needs

More research needed on specific LGR policy provisions. Current research gaps include long-term outcomes of different legal models, optimal approaches for addressing intersectionality, and strategies for building social acceptance of gender recognition reforms. Empirical research on the health, social, and economic impacts of different approaches could inform future policy development and help identify best practices.

The need for intersectional approaches that address the experiences of individuals with multiple marginalized identities represents another important area for future development. Gender recognition laws must consider how gender identity intersects with race, disability, immigration status, and other factors that affect individuals' experiences and needs.

VIII. CONCLUSION

The evolution toward gender-neutral laws and reformed legal recognition of identity and relationships represents one of the most significant human rights developments of the contemporary era. This transformation reflects fundamental shifts in understanding about the nature of gender, identity, and human dignity that challenge traditional legal frameworks while creating new possibilities for inclusion and equality.

The analysis presented in this paper demonstrates that self-identification models align most closely with human rights principles and provide the most effective approach to ensuring dignity and autonomy for gender-diverse individuals. The

empirical evidence indicating positive mental health outcomes and reduced discrimination associated with accessible gender recognition provides strong support for these progressive approaches. However, the implementation challenges and political vulnerabilities identified highlight the need for comprehensive, well-designed legal frameworks that can address practical concerns while maintaining rights protections.

The international comparative analysis reveals significant variations in approaches and outcomes, reflecting the influence of cultural, legal, and political contexts on reform possibilities. While European and Latin American jurisdictions have generally led in implementing progressive frameworks, developments across all regions demonstrate growing recognition of gender recognition as a fundamental human right. The role of regional human rights systems and international advocacy networks has been crucial in promoting these developments and providing legal foundations for national reforms.

The implications for relationship and family law represent a particularly complex area requiring ongoing attention and development. The integration of gender recognition reforms with marriage equality, parentage laws, and family formation frameworks creates challenges but also opportunities for more inclusive legal approaches that recognize diverse family structures and relationships.

Looking forward, the sustainability and effectiveness of gender recognition reforms will depend upon several factors including robust legal protections, ongoing social acceptance efforts, and continued advocacy for inclusive approaches. The political reversals observed in some jurisdictions underscore the importance of constitutional protections and broad-based support for these reforms. Future research and development should focus on addressing implementation challenges, building social acceptance, and ensuring that legal frameworks effectively serve the diverse needs of gender-diverse communities.

Ultimately, the movement toward gender-neutral laws represents more than technical legal reform; it embodies a broader commitment to human dignity, equality, and the recognition that legal systems should serve human flourishing rather than enforce arbitrary categories. While challenges remain, the progress achieved demonstrates the possibility of creating more inclusive legal frameworks that honor the full spectrum of human identity and relationships. The continued development of these approaches will require ongoing collaboration between advocates, policymakers, legal professionals, and affected communities to ensure that legal recognition truly serves its intended purposes of promoting dignity, equality, and social inclusion.

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Digital Minds, Analog Laws: A Comparative Study of Regulatory Frameworks Governing Mental Health Telemedicine in India, the US, and the UK

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Abstract

India faces a mental health crisis of staggering proportions, with an estimated 83% treatment gap and fewer than 0.3 psychiatrists per 100,000 population. Telemedicine has emerged as a transformative mechanism for bridging this gap, as evidenced by the Tele-MANAS programme's reach to over two million callers, 35% of whom were first-time mental health seekers. However, India's regulatory framework creates significant legal barriers to tele-psychiatry and digital mental health service delivery. This article undertakes a comparative legal analysis of mental health telemedicine regulation across three jurisdictions: India, the United States, and the United Kingdom. The analysis examines five regulatory dimensions: prescribing restrictions for controlled substances, informed consent standards, licensure and cross-jurisdictional practice, quality assurance and accreditation, and data protection for mental health records. The article argues that the Telemedicine Practice Guidelines 2020's blanket List B prohibition on psychotropic medications, the Mental Healthcare Act 2017's silence on telemedicine-based service delivery, and the absence of tele-psychiatry-specific informed consent standards collectively constitute a regulatory architecture that is fundamentally misaligned with the constitutional right to mental healthcare. Drawing on the US and UK models, the article proposes specific legislative and regulatory reforms, including amendments to the TPG 2020's prescribing restrictions, explicit integration of telemedicine within the Mental Healthcare Act framework, and the development of national tele-psychiatry practice standards.

Keywords: - Tele-Psychiatry, Mental Health Telemedicine, Mental Healthcare Act 2017, Ryan Haight Act, Psychotropic Prescribing, Treatment Gap, India, Comparative Law

I. INTRODUCTION

Mental illness constitutes the leading cause of disability worldwide, yet the global mental health treatment gap the proportion of individuals with mental disorders who receive no treatment remains alarmingly wide. In low- and middle-income countries, this gap exceeds 75%, and in India, it reaches an estimated 83%, meaning that more than four out of every five Indians with a diagnosable mental health condition receive no treatment whatsoever (World Health Organization [WHO], 2022). The magnitude of this gap is compounded by India's severe shortage of mental health professionals: the country has approximately 0.3 psychiatrists, 0.07 psychologists, and 0.07 social workers per 100,000 population, against WHO-recommended ratios that are orders of magnitude higher (National Institute of Mental Health and Neurosciences [NIMHANS], 2016).

Telemedicine, and specifically tele-psychiatry, has been widely recognised as a high-potential mechanism for addressing this gap. The inherent characteristics of mental health consultations primarily verbal interaction, limited reliance on physical examination, amenability to structured therapeutic protocols, and high patient sensitivity to stigma make psychiatry one of the medical specialties most naturally suited to remote delivery (Hilty et al., 2013). Evidence from high-income

countries demonstrates that tele-psychiatry achieves clinical outcomes comparable to in-person care across multiple conditions, including depression, anxiety disorders, post-traumatic stress disorder, and substance use disorders (Hublely et al., 2016). India's own Tele-MANAS programme, launched in 2022, has provided preliminary evidence of telemedicine's capacity to reach underserved populations: by 2024, the programme had received over two million calls, with 35% of callers seeking mental health support for the first time (Ministry of Health and Family Welfare [MoHFW], 2024).

Despite this potential, India's regulatory framework creates significant legal barriers to the delivery of mental health services through telemedicine. The Telemedicine Practice Guidelines 2020 (TPG) impose blanket restrictions on the teleconsultation prescribing of psychotropic medications classified under List B, including commonly prescribed antidepressants, anxiolytics, and antipsychotics (Board of Governors in supersession of Medical Council of India, 2020). The Mental Healthcare Act 2017 (MHCA), India's landmark mental health legislation, makes no reference to telemedicine as a modality for service delivery, creating uncertainty about the Act's application to tele-psychiatric consultations (Parliament of India, 2017). There are no tele-psychiatry-specific informed consent standards, quality assurance frameworks, or data protection requirements for mental health records. These regulatory gaps exist not in isolation but against a constitutional backdrop in which the Supreme Court has repeatedly affirmed the right to healthcare, including mental healthcare, as a facet of the right to life under Article 21 of the Constitution (Paschim Banga Khet Mazdoor Samity v. State of West Bengal, 1996), and the right to informational privacy, including health data privacy, recognised in K.S. Puttaswamy v. Union of India (2017).

This article undertakes a comparative legal analysis of mental health telemedicine regulation in India, the United States, and the United Kingdom. These jurisdictions are selected for their contrasting regulatory approaches: the US represents a federalised system with specific controlled substance telemedicine legislation (the Ryan Haight Act) and extensive state-level tele-psychiatry regulation; the UK represents a centralised system with integrated quality assurance through the Care Quality Commission (CQC) and detailed clinical guidance for remote mental health consultations. The comparison illuminates the specific regulatory mechanisms that India lacks and the reform pathways available within its constitutional and institutional framework.

II. THE MENTAL HEALTH TREATMENT GAP: DIMENSIONS OF THE CRISIS

The scale of India's mental health crisis provides the normative foundation for regulatory reform. The National Mental Health Survey 2015-16, conducted by NIMHANS across twelve states, estimated that 10.6% of India's adult population approximately 150 million people suffered from a mental health disorder, with common mental disorders (depression, anxiety) affecting 5.2% and severe mental disorders (schizophrenia, bipolar disorder) affecting 1.9% (NIMHANS, 2016). Subsequent studies have revised these estimates upward, particularly following the COVID-19 pandemic. The Lancet Psychiatry Commission on mental health in India estimated the economic cost of mental illness at \$1.03 trillion between 2012 and 2030, through lost productivity, healthcare expenditure, and premature mortality (Patel et al., 2016).

The treatment gap is driven by intersecting barriers. Geographic barriers are paramount: 68% of India's population resides in rural areas where mental health services are virtually non-existent. The district mental health programme, despite being operational since 1996, covers fewer than 300 of India's 766 districts with functional mental health services (Murthy, 2017). Economic barriers compound geographic ones: out-of-pocket expenditure constitutes approximately 62% of India's total health expenditure, and mental healthcare which often requires sustained treatment over months or years is particularly susceptible to catastrophic health spending (National Health Accounts, 2020). Stigma remains the most pervasive barrier: studies consistently demonstrate that stigma deters treatment-seeking across all socioeconomic strata, with patients fearing social ostracism, employment discrimination, and marital consequences (Shidhaye & Kermodé, 2013).

The COVID-19 pandemic dramatically amplified India's pre-existing mental health crisis. A systematic review and meta-analysis published in the Indian Journal of Psychiatry estimated that the prevalence of depression among Indians during the pandemic rose to 28.7%, anxiety to 25.1%, and stress-related disorders to 22.4%, representing a significant escalation over pre-pandemic baselines (Lakhan et al., 2022). The pandemic's collateral effects prolonged lockdowns, economic disruption, social isolation, fear of infection, and grief from mass bereavement created what the WHO described as a 'massive increase in demand for mental health services' at a time when in-person services were simultaneously disrupted (WHO, 2022). Substance use disorders, particularly alcohol dependence, surged following the abrupt imposition and subsequent lifting of prohibition-style lockdown measures, overwhelming the limited de-addiction infrastructure (Murthy, 2020). India's suicide rate, already among the highest globally, reached 12.4 per 100,000 in 2021, with over 164,000 recorded suicides a figure widely acknowledged to be an undercount (National Crime Records Bureau [NCRB], 2022). The decriminalisation of attempted suicide under Section 115 of the Mental Healthcare Act 2017 which provides that notwithstanding anything contained in Section 309 of the Indian Penal Code, any person who attempts to commit suicide shall be presumed to be under severe stress and shall not be tried or punished was a progressive legislative step, yet its practical impact remains limited when the individuals it seeks to protect cannot access the mental health services the Act promises. The pandemic period also demonstrated the potential of tele-psychiatry: the Tele-MANAS helpline, launched in October 2022 specifically in response to the pandemic's mental health aftermath, recorded over 780,000 calls in its first six months, confirming that demand for remote mental health support was both massive and previously unmet (MoHFW, 2024). The lesson of the pandemic is unambiguous: India requires a mental health service delivery model that can function at scale, withstand disruptions to physical infrastructure, and reach populations that the traditional clinic-based model has structurally failed to serve.

Telemedicine addresses each of these barriers with specific mechanisms. Geographic barriers are overcome through remote consultation, enabling patients in rural areas to access psychiatrists and psychologists located in urban centres. Economic barriers are partially mitigated through reduced travel costs, time savings, and the lower overhead costs of digital delivery. Most significantly, telemedicine addresses stigma through the privacy of remote consultation: a patient accessing psychiatric care from their home is not visible in a hospital waiting room, and digital platforms can offer anonymised initial consultations. The Tele-MANAS data confirms this mechanism: the programme reported that 35% of its callers were first-

time mental health seekers who had not previously accessed any mental health service, suggesting that the telemedicine modality itself lowered the threshold for help-seeking (MoHFW, 2024). The question, therefore, is not whether telemedicine can address the mental health treatment gap, but whether India's legal framework permits it to do so.

III. INDIA'S REGULATORY FRAMEWORK: THE TPG 2020 AND THE MENTAL HEALTH CARE ACT 2017

3.1. The Telemedicine Practice Guidelines 2020 and Psychotropic Prescribing

The Telemedicine Practice Guidelines 2020, issued by the Board of Governors in supersession of the Medical Council of India under the authority of the Indian Medical Council Act 1956, classify medications into three lists for the purposes of teleconsultation prescribing. List A encompasses over-the-counter medications and common prescription drugs that may be prescribed via any telemedicine modality (video, audio, or text). List B encompasses medications that may only be prescribed via video consultation, and only for re-prescribing where the patient has a prior in-person prescription. List B explicitly includes "anti-anxiety, anti-depressants, anti-psychotics" and other psychotropic medications. List C encompasses medications that cannot be prescribed through telemedicine under any circumstances, including narcotics and controlled substances under the NDPS Act 1985 (Board of Governors, 2020).

The List B restriction creates a critical bottleneck for tele-psychiatric care. Under the TPG framework, a psychiatrist conducting a first-time teleconsultation with a patient presenting with major depressive disorder cannot prescribe a selective serotonin reuptake inhibitor (SSRI) the first-line treatment for depression unless the patient has a prior in-person prescription from another physician. This requirement effectively mandates at least one in-person consultation before tele-psychiatric treatment can commence, negating the very purpose of tele-psychiatry for the populations it is most needed to serve: rural patients without geographic access to a psychiatrist, patients deterred by stigma from visiting a mental health facility, and patients in crisis requiring immediate pharmacological intervention.

The pharmacological basis for the blanket List B prohibition is particularly difficult to justify when the safety profiles of individual psychotropic medications are examined. Selective serotonin reuptake inhibitors (SSRIs) including fluoxetine, sertraline, escitalopram, and paroxetine are the first-line pharmacological treatment for major depressive disorder, generalised anxiety disorder, panic disorder, obsessive-compulsive disorder, and post-traumatic stress disorder. SSRIs have a wide therapeutic window, meaning that the margin between the effective dose and the toxic dose is large, substantially reducing the risk of accidental or intentional overdose. Unlike older tricyclic antidepressants, SSRIs are not lethal in overdose in the vast majority of cases, a critical safety consideration for psychiatric patients who may be at risk of self-harm (Cipriani et al., 2018). SSRIs have no abuse potential, do not produce euphoria or dependence, and are not diverted for recreational use. Serotonin-norepinephrine reuptake inhibitors (SNRIs) such as venlafaxine and duloxetine share a similar safety profile: wide therapeutic window, minimal abuse potential, and well-characterised side-effect profiles that can be adequately discussed and monitored remotely. Non-benzodiazepine anxiolytics such as buspirone similarly present minimal abuse or diversion risk. By contrast, benzodiazepines including diazepam, alprazolam, clonazepam, and lorazepam do carry genuine clinical concerns for remote prescribing: they produce physiological dependence with regular use, have significant abuse and diversion potential, interact dangerously with alcohol and opioids, and their abrupt discontinuation can cause life-threatening withdrawal seizures (Lader, 2011). A risk-proportionate regulatory framework would differentiate between these categories: permitting remote initiation of SSRIs, SNRIs, and non-benzodiazepine anxiolytics while maintaining restrictions on benzodiazepines and other medications with genuine abuse profiles. The current TPG framework fails to make this clinically essential distinction, treating sertraline one of the safest medications in the psychiatric pharmacopoeia identically to alprazolam, which has one of the highest abuse potentials among prescribed psychotropics.

The clinical rationale for the List B restriction is unclear. The American Psychiatric Association (APA) has endorsed tele-psychiatry as clinically appropriate for initial psychiatric evaluations and treatment initiation, including pharmacological prescribing, when conducted via synchronous video consultation that permits adequate clinical assessment (Shore et al., 2018). The UK's Royal College of Psychiatrists has similarly endorsed remote psychiatric assessment and prescribing, subject to clinical judgement about the appropriateness of the remote modality for the specific patient and condition (Royal College of Psychiatrists, 2020). India's blanket prohibition which applies regardless of clinical circumstances, the treating psychiatrist's expertise, or the severity of the patient's condition represents a regulatory outlier among major jurisdictions.

3.2. The Mental Healthcare Act 2017: The Telemedicine Lacuna

The Mental Healthcare Act 2017, which came into force on 29 May 2018, represents India's most comprehensive mental health legislation. The Act establishes the right to access mental healthcare (Section 18), including the right to affordable, good quality, and geographically accessible mental healthcare services. It creates the Central and State Mental Health Authorities, mandates the preparation of advance directives, establishes mental health review boards, regulates admission and treatment procedures, and decriminalises attempted suicide. The Act was lauded internationally as a progressive, rights-based approach to mental health governance (Duffy & Kelly, 2019).

However, the MHCA was drafted and enacted without any contemplation of telemedicine as a service delivery modality. The Act's provisions on the establishment of mental health institutions (Chapter V), admission procedures (Chapters IX-XII), and treatment standards (Sections 18-21) presuppose physical healthcare establishments and in-person interactions. Section 18(1) provides that every person shall have a right to access mental health care and treatment from mental health services run or funded by the appropriate Government, but does not specify whether "access" encompasses remote digital access. The Act's definition of "mental health establishment" under Section 2(1)(p) "any health establishment, including any hospital, nursing home, half-way home, rehabilitation centre" does not include digital platforms or telemedicine services.

A particularly compelling argument for the alignment of tele-psychiatry with the MHCA's philosophy emerges from Section 18(4) of the Act, which provides that every person with mental illness shall have a right to be treated in the least restrictive environment. This provision, drawn from the UN Convention on the Rights of Persons with Disabilities (CRPD) and the foundational principles of community psychiatry, establishes a hierarchy of care settings in which institutional confinement is the last resort and community-based, minimally intrusive care is the preferred modality. Tele-psychiatry, by its very nature, represents the least restrictive mental health service delivery modality: the patient receives care in their own home or community, without physical displacement, without exposure to the institutional environment of a psychiatric facility, and without the disruption to employment, family life, and social relationships that accompanies travel to distant mental health centres. Section 18(4) further provides for the right to community living, and tele-psychiatry is the technological enabler of community-based psychiatric care for the millions of Indians in rural communities where no psychiatrist practices. The Act's emphasis on the least restrictive environment also resonates with Section 18(2), which guarantees the right to live with dignity, free from cruel and inhuman treatment a principle that is violated when patients in remote areas must endure multi-day journeys, financial hardship, and social stigma merely to access a routine psychiatric follow-up appointment that could be safely conducted via video consultation. Thus, while the MHCA does not mention telemedicine, the philosophical and rights-based framework of the Act particularly the least-restrictive-environment principle and the right to community living not only accommodates but affirmatively supports tele-psychiatric service delivery as the modality most consistent with the Act's stated objectives.

This silence creates three specific legal uncertainties. First, it is unclear whether a tele-psychiatry platform qualifies as a "mental health establishment" subject to the MHCA's registration, inspection, and quality assurance requirements. If it does not, tele-psychiatric services operate outside the Act's regulatory oversight. If it does, current tele-psychiatry platforms would need to be registered with the Central or State Mental Health Authority, raising questions about registration criteria for digital services. Second, the Act's advance directive provisions (Sections 5-13) assume a treatment relationship with a specific mental health professional and establishment, but do not address how advance directives operate in the tele-psychiatric context where the treating professional may change between consultations and the "establishment" is a digital platform. Third, the Act's provisions on involuntary admission and treatment (Chapters X-XII) including the requirement for independent examination and mental health review board proceedings have no telemedicine-adapted procedures, creating legal uncertainty about when and how a tele-psychiatrist who identifies a patient in acute crisis should initiate involuntary processes.

3.3. Informed Consent in Tele-Psychiatry: The Unregulated Space

The TPG 2020 require practitioners to obtain patient consent before commencing a teleconsultation, specifying that consent may be "implied" when the patient initiates the consultation and "explicit" when the practitioner initiates it. This rudimentary consent framework falls far short of the requirements for mental health practice. Psychiatric treatment engages particularly sensitive dimensions of autonomy: the patient's decisional capacity may itself be affected by the condition being treated; pharmacological interventions carry significant side effects (weight gain, cognitive dulling, metabolic syndrome, extrapyramidal symptoms); and the therapeutic relationship involves disclosure of deeply personal information. The Supreme Court's articulation of informed consent principles in *Samira Kohli v. Dr. Prabha Manchanda* (2008) requiring disclosure of the nature and purpose of the procedure, its risks and consequences, and available alternatives has not been interpreted in the tele-psychiatric context.

Additionally, the remote modality introduces consent considerations absent from in-person consultations: the security and privacy of the communication platform; the possibility of recording; the limitations of remote assessment (inability to conduct physical examination, potential connectivity interruptions); and the procedures for managing emergencies during a teleconsultation. Neither the TPG nor the MHCA addresses these telemedicine-specific consent elements for mental health practice.

IV. THE UNITED STATES: CONTROLLED SUBSTANCE TELEMEDICINE AND STATE TELE-PSYCHIATRY REGULATION

4.1. The Ryan Haight Act and Its Telemedicine Exceptions

The United States' regulation of mental health telemedicine operates at two levels: federal controlled substance law and state medical practice regulation. At the federal level, the Ryan Haight Online Pharmacy Consumer Protection Act of 2008 establishes the general rule that prescribing controlled substances (which include most psychotropic medications classified under the Controlled Substances Act) requires at least one in-person medical evaluation before the prescription is issued ([U.S. Congress, 2008](#)). This restriction parallels India's List B prohibition but, crucially, is subject to seven statutory exceptions enumerated in 21 U.S.C. § 802(54), including exceptions for practitioners acting within a DEA-registered telemedicine practice, Indian Health Service practitioners, VA practitioners, and practitioners operating during public health emergencies.

The COVID-19 pandemic catalysed a fundamental shift in US controlled substance telemedicine policy. In March 2020, the Drug Enforcement Administration (DEA), exercising authority under the public health emergency exception, issued guidance permitting the prescribing of Schedule II-V controlled substances via telemedicine without a prior in-person evaluation (DEA, 2020). This temporary flexibility was extended multiple times and, significantly, led to permanent regulatory changes. The Consolidated Appropriations Act 2023 extended telemedicine prescribing flexibilities, and the DEA proposed permanent rules in 2023 permitting the initial prescribing of non-narcotic Schedule III-V controlled substances (which include most antidepressants, anxiolytics, and antipsychotics) via telemedicine for up to a 30-day supply, after which an in-person evaluation would be required (DEA, 2023). This graduated approach permitting initial telemedicine prescribing with subsequent in-person follow-up requirements represents a nuanced middle ground between India's blanket prohibition and unrestricted prescribing.

4.2. State-Level Tele-Psychiatry Regulation

At the state level, the United States has developed a sophisticated and varied tele-psychiatry regulatory landscape. As of 2024, all fifty states and the District of Columbia permit the practice of tele-psychiatry, though with significant variations in specific requirements (Lacktman et al., 2023). State regulatory frameworks address several dimensions relevant to India's regulatory gap. On prescribing, most states follow the federal Ryan Haight framework but several including California, New York, and Texas have enacted state-specific provisions permitting broader tele-psychiatry prescribing within their borders. On licensure, the Interstate Medical Licensure Compact (IMLC) facilitates multi-state physician licensing, and several states have enacted specific tele-psychiatry licensure provisions enabling out-of-state psychiatrists to serve underserved areas.

On informed consent, multiple states have enacted tele-psychiatry-specific consent requirements that go beyond general telemedicine consent. For example, the American Psychiatric Association's Practice Guidelines for Telepsychiatry recommend that informed consent for tele-psychiatry include: the limitations of remote assessment; the protocols for managing psychiatric emergencies during teleconsultation; the security measures protecting the communication; the patient's right to refuse the telemedicine modality; and the contingency plan if technology fails during a session (Shore et al., 2018). Several states have adopted these guidelines as regulatory requirements. On reimbursement, the federal Mental Health Parity and Addiction Equity Act (MHPAEA) requires insurers to cover mental health services at parity with physical health services, and a growing number of states have enacted telehealth parity laws requiring equivalent reimbursement for tele-psychiatric and in-person psychiatric services (Cama et al., 2017).

4.3. Tele-Psychiatry in the VA System

The United States Department of Veterans Affairs (VA) operates the largest and most extensively studied tele-psychiatry programme globally, providing a critical evidence base for the proposition that tele-psychiatry can function safely and effectively at scale within a regulatory framework. The VA's telemental health programme, which began as a pilot in the late 1990s, had by 2023 delivered over 4.7 million telemental health encounters annually, serving approximately 1.3 million veterans across the continental United States, Alaska, Hawaii, and US territories (VA Office of Connected Care, 2023). The programme's scale is directly attributable to a regulatory advantage: the VA MISSION Act of 2018 authorised VA healthcare providers to practice telemedicine across state lines without obtaining additional state licences, effectively creating a federal preemption of state licensure barriers for VA telehealth (U.S. Congress, 2018). This single regulatory reform eliminated the interstate licensure fragmentation that continues to impede civilian tele-psychiatry and enabled the VA to deploy psychiatrists located in major urban medical centres to serve veterans in rural and tribal communities thousands of miles away.

The clinical outcomes evidence from the VA tele-psychiatry programme is particularly robust. A systematic review of VA telemental health studies found that tele-psychiatry achieved clinical outcomes equivalent to in-person care for major depressive disorder, PTSD, anxiety disorders, and substance use disorders, with high patient satisfaction and clinician acceptance (Connolly et al., 2020). The VA's tele-psychiatry programme for PTSD a condition disproportionately affecting veterans demonstrated that evidence-based treatments including Cognitive Processing Therapy (CPT) and Prolonged Exposure (PE) therapy could be delivered effectively via videoconference with comparable symptom reduction to in-person delivery (Morland et al., 2020). Crucially, the VA programme also demonstrated that remote psychiatric prescribing, including the prescribing of controlled substances for PTSD and anxiety disorders, could be conducted safely under appropriate clinical protocols without the blanket prohibitions that characterise India's regulatory approach.

The VA model is instructive for India for several reasons. First, it demonstrates that a single regulatory reform federal preemption of state licensure requirements can dramatically expand tele-psychiatric access across vast geographic distances, a lesson directly applicable to India's fragmented state medical registration system. Second, the VA's hub-and-spoke model, where specialist psychiatrists at tertiary VA medical centres provide consultations to primary care providers and patients at remote community-based outpatient clinics (CBOCs), offers a structural template for India's district hospital system, where primary care physicians could be supported by remote psychiatric consultation from specialists at NIMHANS, AIIMS, or state medical colleges. Third, the VA's extensive quality assurance infrastructure including standardised clinical protocols, mandatory provider training in telehealth delivery, encrypted VA Video Connect platform requirements, and systematic outcome monitoring demonstrates that tele-psychiatric services can operate within rigorous safety and quality frameworks without the blunt instrument of blanket prescribing prohibitions. The VA experience constitutes perhaps the strongest real-world evidence that tele-psychiatry, properly regulated, is not a compromise on quality but a mechanism for extending quality psychiatric care to populations that would otherwise receive none.

V. THE UNITED KINGDOM: INTEGRATED QUALITY ASSURANCE AND DIGITAL MENTAL HEALTH STANDARDS

5.1. CQC Regulation of Digital Mental Health Services

The United Kingdom's approach to mental health telemedicine regulation is characterised by integration within the existing healthcare quality assurance framework rather than separate telemedicine-specific legislation. The Care Quality Commission (CQC), as the independent regulator of health and social care in England, regulates all providers of remote mental health services under the same registration and inspection regime that applies to physical mental health services. The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 define regulated activities to include "treatment of disease, disorder or injury" and "assessment or medical treatment for persons detained under the Mental Health Act 1983," both of which encompass tele-psychiatric services (UK Parliament, 2014).

The CQC's inspection framework evaluates mental health services against five key questions:

- Are they safe?

- Are they effective?
- Are they caring?
- Are they responsive?
- Are they well-led?

For digital mental health services, the CQC has developed specific guidance addressing the unique risks of remote delivery, including: patient identification and verification procedures; protocols for assessing and managing acute psychiatric risk remotely; procedures for coordinating with local crisis teams when a remote patient presents with suicidal ideation or self-harm; data security and confidentiality standards; and clinical governance arrangements for remote prescribing (CQC, 2022). This integration of telemedicine within the existing regulatory framework, rather than creating a separate regime, ensures that digital mental health services are held to the same quality standards as physical services while addressing modality-specific risks.

5.2. NICE Guidelines and Remote Prescribing

The National Institute for Health and Care Excellence (NICE) provides clinical guidance that effectively governs tele-psychiatric practice through its evidence-based treatment recommendations. NICE guidelines for depression, anxiety disorders, psychosis, and other mental health conditions do not prohibit remote prescribing but emphasise clinical judgement about the appropriateness of the delivery modality. The NICE guideline on depression in adults (NG222), updated in 2022, explicitly recognises computerised cognitive behavioural therapy (cCBT) and remote delivery as appropriate treatment modalities, thereby legitimising digital mental health interventions within the evidence-based framework (NICE, 2022).

The UK's approach to psychotropic prescribing via telemedicine is governed by the General Medical Council's (GMC) Good Practice in Prescribing and Managing Medicines and Devices (General Medical Council, 2013), which applies equally to remote and in-person prescribing. The guidance permits remote prescribing where the prescriber has adequate knowledge of the patient's health and is satisfied that the medication serves the patient's needs, without imposing a blanket requirement for a prior in-person consultation. The Medicines and Healthcare products Regulatory Agency (MHRA) regulates the supply of medicines, including those prescribed via telemedicine, and has not imposed telemedicine-specific prescribing restrictions for psychotropic medications. This regulatory approach relying on professional judgement guided by clinical standards rather than blanket statutory prohibitions stands in stark contrast to India's categorical List B restriction.

5.3. The Montgomery Standard and Tele-Psychiatric Informed Consent

The UK's informed consent framework for tele-psychiatry benefits from the Supreme Court's landmark decision in *Montgomery v. Lanarkshire Health Board* (2015), which replaced the paternalistic Bolam standard with a patient-centred test. Under *Montgomery*, a doctor is under a duty to take reasonable care to ensure that the patient is aware of any material risks involved in any recommended treatment and of any reasonable alternative treatments. A risk is "material" if a reasonable person in the patient's position would be likely to attach significance to it, or if the doctor is or should reasonably be aware that the particular patient would be likely to attach significance to it (*Montgomery v. Lanarkshire Health Board*, 2015).

Applied to tele-psychiatry, the *Montgomery* standard requires disclosure of the specific limitations and risks of remote psychiatric assessment: the potential for missed clinical signs that would be apparent in person (such as psychomotor changes, tremor, or involuntary movements associated with medication side effects); the implications of technology failure during a consultation addressing sensitive material; the security and privacy characteristics of the communication platform; and the procedures for emergency intervention if the patient presents with acute risk during a remote session. The Royal College of Psychiatrists has issued specific guidance on conducting psychiatric assessments remotely, emphasising the need for risk assessment protocols, safety planning, and clear pathways for escalation to in-person care when clinically indicated (Royal College of Psychiatrists, 2020). This combination of judicial standard (*Montgomery*), professional guidance (Royal College), and regulatory oversight (CQC) creates a comprehensive informed consent architecture for tele-psychiatry that India entirely lacks.

5.4. NHS Digital Mental Health Services: IAPT and Digital CBT

The Improving Access to Psychological Therapies (IAPT) programme, launched in 2008 and subsequently rebranded as NHS Talking Therapies in 2023, represents the most ambitious national programme for expanding access to evidence-based psychological therapies globally and provides a compelling demonstration that technology-enabled mental health care can operate within existing quality frameworks at scale. IAPT was designed to address the treatment gap for common mental health disorders depression, generalised anxiety disorder, panic disorder, social anxiety, OCD, and PTSD by training a new workforce of psychological wellbeing practitioners and high-intensity therapists delivering NICE-approved therapies, principally cognitive behavioural therapy (CBT), within the NHS (Clark, 2011). By 2023, the programme was treating over 1.2 million people annually, with recovery rates consistently at or above 50% and reliable improvement rates exceeding 65%, making it one of the most systematically evaluated mental health programmes in the world (NHS Digital, 2023).

The integration of digital delivery within the IAPT programme has been progressive and instructive. Computerised CBT (cCBT) programmes including *Beating the Blues*, *SilverCloud*, and *Ieso Digital Health* have been incorporated as Step 2 interventions within IAPT's stepped-care model, where patients with mild-to-moderate symptoms are offered guided self-help and digital therapy before escalation to high-intensity face-to-face therapy if needed. NICE Technology Appraisal guidance (TA97) recommended computerised CBT for depression as early as 2006, and subsequent evaluations have confirmed that digital CBT achieves comparable outcomes to face-to-face CBT for mild-to-moderate depression and anxiety when delivered with appropriate clinical support and progress monitoring (Gilbody et al., 2017). During the COVID-19 pandemic, IAPT services rapidly transitioned to predominantly remote delivery telephone and video and published data showed that

clinical outcomes were maintained, with no significant deterioration in recovery rates compared to pre-pandemic in-person delivery (NHS England, 2021). This evidence directly challenges the assumption underlying India's TPG restrictions that mental health care delivered remotely is inherently inferior to in-person delivery.

The regulatory framework supporting IAPT's digital integration operates within the existing CQC, NICE, and NHS governance structures rather than requiring separate digital mental health legislation. Digital IAPT services are subject to: CQC registration and inspection; NICE approval of the specific digital interventions offered; NHS Data Security and Protection Toolkit compliance; clinical outcome monitoring through the IAPT minimum dataset, which collects session-by-session Patient Health Questionnaire (PHQ-9) and Generalised Anxiety Disorder (GAD-7) scores; and workforce regulation through the British Psychological Society and BABCP accreditation of therapists (NHS England, 2023). The IAPT model demonstrates three principles directly relevant to India's regulatory reform: first, that digital mental health services can achieve measurable clinical outcomes when embedded within evidence-based clinical frameworks; second, that technology-enabled mental health care can be integrated within existing quality assurance and regulatory structures rather than requiring entirely new regulatory regimes; and third, that systematic outcome monitoring which digital platforms facilitate more readily than paper-based clinic records can serve as a quality assurance mechanism that is actually superior to the input-focused inspection models traditionally applied to mental health services. India's Tele-MANAS programme, which currently functions primarily as a helpline rather than a structured therapy delivery platform, could draw on the IAPT model to evolve into a systematic digital mental health service delivery framework with embedded outcome measurement and quality assurance.

VI. COMPARATIVE ANALYSIS: KEY REGULATORY DIVERGENCES

A comparative assessment across the five regulatory dimensions reveals fundamental divergences that illuminate India's regulatory deficit.

On prescribing restrictions, India imposes the most restrictive regime among the three jurisdictions. The TPG 2020's List B prohibition on first-time psychotropic prescribing via telemedicine has no direct equivalent in the UK, where prescribing is governed by clinical judgement and professional standards, and is more restrictive than the US post-pandemic position, which permits initial prescribing of non-narcotic psychotropics with follow-up requirements. India's approach treats all psychotropic medications identically regardless of their risk profile, clinical indication, or the patient's circumstances, whereas both the US and UK differentiate by substance schedule, clinical context, and professional assessment.

On informed consent, the divergence is equally striking. The UK's Montgomery standard, supplemented by Royal College of Psychiatrists guidance, provides a comprehensive patient-centred consent framework specifically adapted for tele-psychiatric practice. The US's state-level tele-psychiatry consent requirements, particularly those adopting APA guidelines, address the specific dimensions of remote psychiatric assessment and treatment. India's TPG consent provisions implied consent when the patient initiates the call, explicit consent when the doctor initiates it make no distinction between a teleconsultation for a skin rash and a tele-psychiatric consultation for suicidal ideation.

On quality assurance, the UK's CQC registration and inspection regime ensures that digital mental health services are held to the same standards as physical services, with additional modality-specific requirements. The US system relies on state medical boards, specialty board certification, and accreditation bodies (such as the Joint Commission) to maintain quality standards for tele-psychiatric services. India has no quality assurance framework for tele-psychiatric services: telemedicine platforms are not required to meet any mental-health-specific standards, and neither the Central Mental Health Authority nor the State Mental Health Authorities exercise jurisdiction over digital mental health services.

On data protection for mental health records, all three jurisdictions recognise the heightened sensitivity of mental health information, but implement protections differently. HIPAA's Privacy Rule provides specific provisions for psychotherapy notes, requiring separate patient authorisation for their disclosure beyond treatment purposes a higher standard than for other PHI (U.S. Department of Health and Human Services, 2003). The UK GDPR classifies mental health data as special category data under Article 9, and the Caldicott Principles apply with particular force to mental health records given their sensitivity. India's DPDP Act 2023 provides no heightened protection for mental health data, and the TPG 2020 do not address mental health data governance specifically.

On cross-jurisdictional practice, the US's IMLC and state-specific tele-psychiatry licensure provisions, while imperfect, enable psychiatrists to serve patients across state lines. The UK's national registration through the GMC eliminates cross-jurisdictional barriers entirely. India's state-based medical registration system, coupled with the TPG 2020's ambiguous implication that registration in any state suffices for telemedicine practice, creates legal uncertainty that particularly affects tele-psychiatry, where the scarcity of psychiatrists makes cross-state practice essential for reaching underserved populations.

Synthesising the analysis across all five regulatory dimensions, a structured comparison clarifies the precise contours of India's regulatory deficit. On Dimension 1 (prescribing), the UK operates on a professional-judgement model with no blanket telemedicine prescribing restrictions for psychotropics, the US has moved to a graduated model permitting initial prescribing of non-narcotic psychotropics with time-limited supply and follow-up requirements, and India maintains a blanket prohibition on first-time psychotropic prescribing via telemedicine regardless of clinical context, drug safety profile, or prescriber qualification. On Dimension 2 (informed consent), the UK applies the patient-centred Montgomery standard supplemented by Royal College of Psychiatrists tele-psychiatry-specific guidance, the US applies state-specific tele-psychiatry consent requirements frequently incorporating APA guidelines addressing remote assessment limitations and emergency protocols, and India applies a generic telemedicine consent framework with no mental-health-specific provisions. On Dimension 3 (quality assurance), the UK integrates digital mental health services within CQC registration and inspection with modality-specific guidance, the US relies on state medical boards, Joint Commission accreditation, and specialty certification with the VA system providing a federal quality model, and India has no quality assurance framework whatsoever for tele-psychiatric services. On Dimension 4 (data protection), the UK classifies mental health data as special category data under UK GDPR with Caldicott Guardian oversight, the US provides specific HIPAA protections for psychotherapy notes with a higher

disclosure authorisation threshold, and India provides no heightened protection for mental health data under the DPDP Act 2023. On Dimension 5 (cross-jurisdictional practice), the UK eliminates barriers through national GMC registration, the US has partially addressed them through the IMLC and the VA MISSION Act's federal preemption, and India's fragmented state medical registration system creates unresolved legal uncertainty for cross-state tele-psychiatric practice. Across every dimension, India's framework is either the most restrictive, the least developed, or entirely absent, creating a cumulative regulatory deficit that is incompatible with the constitutional imperative to ensure access to mental healthcare.

VII. LEGAL BARRIERS SPECIFIC TO INDIAN TELE-PSYCHIATRY: A CRITICAL ASSESSMENT

Beyond the regulatory gaps identified through comparative analysis, Indian tele-psychiatry faces additional legal barriers rooted in the domestic legal framework. The intersection of the MHCA 2017 and the TPG 2020 creates a regulatory gap regarding the capacity assessment of psychiatric patients in teleconsultation. The MHCA establishes a presumption of capacity (Section 4) and detailed procedures for determining when a person lacks capacity to make mental healthcare decisions. However, assessing decisional capacity via teleconsultation a process that requires evaluation of understanding, appreciation, reasoning, and ability to express a choice presents clinical challenges that the regulatory framework does not address. A tele-psychiatrist who determines that a patient lacks capacity faces legal uncertainty about the validity of this assessment and the procedural steps available for initiating supported or substituted decision-making under the MHCA's provisions.

The liability framework for tele-psychiatric practice in India is similarly uncertain. The Supreme Court's articulation of the medical negligence standard in *Jacob Mathew v. State of Punjab* (2005) requiring proof of a duty of care, a breach constituting deviation from accepted medical practice, and resulting damage was developed in the context of in-person medical practice. The "accepted medical practice" standard presupposes the existence of accepted practices for the modality in question. For tele-psychiatry, which has no Indian clinical practice guidelines, court-recognised treatment protocols, or professional body standards, the standard against which a tele-psychiatrist's conduct would be judged is undefined. This legal uncertainty creates a chilling effect on tele-psychiatric practice: psychiatrists who would otherwise be willing to provide remote care may refrain from doing so because of unpredictable liability exposure (Bajpai, 2013).

A particularly acute legal lacuna concerns emergency tele-psychiatric care. Consider a scenario by no means hypothetical in which a patient in a remote tribal district of Odisha or Jharkhand, where the nearest psychiatrist is 200 kilometres away, accesses a tele-psychiatric consultation and, during the session, discloses active suicidal ideation with a specific plan. The tele-psychiatrist faces a clinical emergency with no legal roadmap. The MHCA 2017, while decriminalising attempted suicide under Section 115 and mandating that such individuals be presumed to be under severe stress requiring treatment, provides no mechanism for the tele-psychiatrist to initiate emergency intervention remotely. The Act's emergency admission provisions (Section 94) require a medical practitioner to personally examine the person and certify that the person has a mental illness of such severity that immediate in-patient treatment is required language that presupposes physical presence. The TPG 2020 simply state that if the condition warrants it, the practitioner should advise the patient to visit a healthcare facility, guidance that is dangerously inadequate when the patient is in active psychiatric crisis. By contrast, the UK's CQC-mandated framework for remote mental health services requires providers to establish pre-consultation safety protocols, including: confirming the patient's physical location at the start of every teleconsultation; maintaining current local crisis team contact information for the patient's area; having a documented escalation pathway from remote consultation to local emergency services; and conducting a risk assessment at the beginning and end of every session (CQC, 2022). The UK's Crisis Resolution and Home Treatment Teams (CRHTTs) provide 24/7 community-based crisis response that can be activated by a remote clinician, creating a coordinated system in which tele-psychiatric assessment and local emergency response function as an integrated service. India requires an analogous framework: a statutory obligation on tele-psychiatric providers to establish emergency coordination protocols with district-level health authorities, police, and emergency services, coupled with a safe harbour provision protecting tele-psychiatrists who activate emergency interventions in good faith from liability for any consequences of the remote nature of the initial assessment.

The Consumer Protection Act 2019 compounds this uncertainty. The Supreme Court in *Indian Medical Association v. V.P. Shantha* (1995) established that medical services fall within the ambit of consumer protection law. For tele-psychiatry, this creates questions about the appropriate forum for complaint adjudication: the consumer commission of the patient's location, the doctor's location, or the platform's registered office? The CPA 2019's jurisdictional provisions (Sections 28-34) do not contemplate disputes arising from remote service delivery across state boundaries, creating forum-shopping opportunities and jurisdictional conflicts.

VIII. RECOMMENDATIONS FOR REGULATORY REFORM

Based on this comparative analysis, the following reforms are proposed to align India's regulatory framework with the requirements of effective tele-psychiatric service delivery.

8.1. Reform the TPG 2020 Prescribing Restrictions

The List B blanket prohibition on first-time psychotropic prescribing via telemedicine should be replaced with a graduated framework modelled on the US post-pandemic approach. Specifically:

- Non-controlled psychotropic medications commonly prescribed for depression, anxiety, and insomnia (ssris, snris, non-benzodiazepine anxiolytics) should be reclassified to permit first-time prescribing via synchronous video consultation by a qualified psychiatrist, subject to a maximum initial supply of 30 days and a requirement for follow-up within that period;

- Controlled psychotropic medications (benzodiazepines, certain mood stabilisers) should remain subject to the prior-prescription requirement but with a clearly defined exception pathway for psychiatrists serving areas with no in-person psychiatric services;
- The List C prohibition on NDPS Act substances should be maintained for telemedicine prescribing.

8.2. Amend the Mental Healthcare Act 2017

The MHCA should be amended to explicitly incorporate telemedicine-based mental health service delivery. Specifically:

- The definition of "mental health establishment" should be expanded to include telemedicine platforms providing mental health services, subject to appropriate registration criteria adapted for digital services;
- Provisions on advance directives should be updated to address the tele-psychiatric treatment context;
- Procedures for emergency intervention when a patient presents with acute psychiatric risk during a teleconsultation should be established, including coordination protocols with local crisis teams and emergency services;
- The central and state mental health authorities should be empowered to regulate and inspect digital mental health services.

8.3. Develop National Tele-Psychiatry Practice Standards

The National Medical Commission, in consultation with NIMHANS and professional psychiatric associations, should develop comprehensive tele-psychiatry practice standards addressing: clinical assessment protocols for remote psychiatric evaluation; informed consent requirements specific to tele-psychiatric consultations, aligned with the Montgomery standard's patient-centred approach; capacity assessment procedures for teleconsultation; safety planning and risk management protocols for remote psychiatric care; minimum technical requirements for tele-psychiatric platforms (video quality, encryption, recording policies); documentation standards for tele-psychiatric encounters; and training requirements for practitioners offering tele-psychiatric services. These standards would provide the "accepted medical practice" benchmark needed to operationalise the Jacob Mathew negligence standard for tele-psychiatric care.

8.4. Establish Mental Health Data Protection Standards

Given the heightened sensitivity of mental health data, specific protections should be established either within the DPDP Act framework or through sector-specific regulation: mental health consultation records should be classified as requiring enhanced protections, analogous to HIPAA's psychotherapy notes provisions; telemedicine platforms offering mental health services should be subject to mandatory security assessments; patients should have the right to restrict sharing of mental health records beyond the treating clinician; and anonymised mental health telemedicine data should be made available for research to build the evidence base for tele-psychiatric practice in the Indian context.

8.5. Leveraging ASHA Workers for Tele-Psychiatric Service Delivery

India possesses a unique community health infrastructure that, with appropriate regulatory support, could transform tele-psychiatric service delivery in rural areas: the network of approximately one million Accredited Social Health Activists (ASHA workers) operating under the National Health Mission. ASHA workers, who function as community-level health facilitators in every village across India, have demonstrated their effectiveness in maternal and child health, immunisation, and communicable disease programmes. Their integration into tele-psychiatric service delivery offers a solution to the 'last mile' challenge that purely technology-based approaches cannot address: many rural patients lack the digital literacy, internet connectivity, or private space required for independent tele-psychiatric consultations. Under the proposed model, ASHA workers would be trained as tele-psychiatric facilitators not as mental health practitioners, but as community-level coordinators who identify individuals requiring mental health support, facilitate teleconsultation sessions using portable devices at sub-centre or panchayat-level facilities, assist patients in communicating symptoms and concerns to the remote psychiatrist, and support treatment adherence through regular follow-up visits (Patel et al., 2016).

The regulatory framework for ASHA worker integration in tele-psychiatric services would require several elements. First, the National Health Mission's ASHA training curriculum would need to include a mental health module covering basic mental health literacy, recognition of common psychiatric symptoms, crisis identification (particularly suicidal ideation and psychotic symptoms), and the operational procedures for facilitating teleconsultations. The District Mental Health Programme, which currently operates in fewer than half of India's districts, could serve as the administrative framework for deploying ASHA-facilitated tele-psychiatric services, with district hospitals serving as the hub for specialist tele-psychiatric consultations. Second, the TPG 2020 would need to be amended to recognise ASHA-facilitated teleconsultations as a legitimate modality, including provisions clarifying that the treating psychiatrist's duty of care is owed to the patient and not delegated to the ASHA worker, and that the ASHA worker's role is facilitative rather than clinical. Third, confidentiality protocols must be established to protect patient privacy during ASHA-facilitated consultations, including requirements for private consultation spaces and restrictions on the ASHA worker's access to clinical information beyond what is necessary for facilitation. Fourth, the National Medical Commission should develop specific clinical guidelines for ASHA-facilitated tele-psychiatric consultations, addressing the modified clinical assessment process when a non-clinical facilitator is present and the enhanced documentation requirements. This model draws on the VA's successful hub-and-spoke framework and the UK's IAPT stepped-care model, adapted to India's unique community health infrastructure, and has the potential to extend tele-psychiatric services to the most underserved rural populations where neither in-person psychiatry nor independent tele-psychiatry is currently feasible.

IX. CONCLUSION

India's mental health crisis is a crisis of access, and telemedicine offers a technologically proven mechanism for expanding that access to the estimated 150 million Indians with untreated mental health conditions. The regulatory barriers identified in this article blanket psychotropic prescribing restrictions, the Mental Healthcare Act's silence on telemedicine, absent informed consent standards, undefined liability frameworks, and inadequate data protections are not inherent limitations of the technology but regulatory choices that can and should be reformed.

The comparative analysis demonstrates that both the United States and the United Kingdom have developed sophisticated regulatory frameworks that balance legitimate safety concerns with the imperative of expanding mental health access. The US model shows that controlled substance prescribing restrictions can be graduated rather than absolute, differentiating by substance risk, clinical context, and prescriber qualification. The UK model demonstrates that quality assurance for digital mental health services can be integrated within existing regulatory architecture through CQC registration and inspection, professional body guidance, and the patient-centred Montgomery consent standard.

India's path forward does not require wholesale importation of foreign models but targeted adaptation of proven regulatory mechanisms to the Indian constitutional and institutional context. The reforms proposed in this article graduated prescribing restrictions, MHCA amendments for telemedicine integration, national tele-psychiatry practice standards, and enhanced mental health data protections are feasible within existing institutional structures and constitutional authority. The right to mental healthcare, affirmed by the MHCA 2017 and rooted in Article 21 of the Constitution, imposes an affirmative obligation on the state to remove barriers to healthcare access. When those barriers are regulatory rather than technological, the imperative for reform is both legal and moral. The 83% treatment gap is not a statistic to be cited and lamented but a regulatory failure to be identified and corrected. India's digital minds deserve more than analog laws.

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