



The Need for *Suo-Motu* Cognisance by the Supreme Court against Criminal Offences Affecting Public Health in Nepal: Lessons from a Tragic Medical Case in India

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ABSTRACT

This article examines the critical role of the judiciary, particularly through suo-motu cognisance, in addressing public health-related crimes in Nepal, using the recent rape and murder of a female doctor at R.G. Kar Medical College in India as a tragic reference point. The incident underscores the intersection of violent crime, systemic negligence, and public health emergencies, highlighting the urgent need for proactive judicial interventions in similar contexts. Drawing on constitutional mandates, statutory frameworks such as the Public Health Service Act (2018), and comparative jurisprudence from India, Pakistan, and Bangladesh, the article argues that Nepal's Supreme Court is constitutionally empowered and morally obligated to take suo-motu action in cases where public health and fundamental rights are threatened. The article examines the judiciary's latent potential to address systemic issues, including violence against healthcare workers, environmental hazards, bureaucratic inaction, and policy gaps, when the executive and legislative branches fail to act swiftly. It stresses that health is not only a social good but a legally protected right under the Constitution of Nepal (2015), which mandates state accountability in safeguarding the physical and mental well-being of its citizens. The conclusion contends that suo-motu interventions can serve as a transformative tool for public health justice and institutional accountability, provided they are exercised judiciously and in alignment with the principle of separation of powers. Accordingly, the article recommends the institutionalisation of suo-motu guidelines specific to public health, capacity-building of judges in public health law, collaborative frameworks among state organs, legal safeguards for healthcare workers, and enhanced public awareness to support judicial activism. In doing so, the judiciary can transcend its traditional adjudicative role and emerge as a responsive guardian of public health and human dignity in Nepal's evolving democratic and legal landscape.

Keywords: Suo-motu, Supreme Court, legal, crime, justice, public health, healthcare, gender-based violence, Nepal, India

INTRODUCTION

In South Asia, where systematic violence, institutional indifference, and slow legal remedies continue to harm human rights and the delivery of essential public services, the convergence of criminal justice, public health, and judicial activism has become increasingly important. Among them, the safety and security of healthcare workers, who are the backbone of public health systems, are still relatively weak. Gender-based

violence, attacks on doctors, and neglect in institutions are all crimes that violate people's rights. They also pose a serious threat to public health because they create fear, lower trust, and make people less likely to work in the health sector, especially women (1).

In this context, suo motu cognisance, which means that a court starts legal procedures on its own without a formal request, has become a strong tool for judicial activism. The court has employed this method to address

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serious social and public health issues when the administrative and legislative branches fail to take action, particularly in India. The idea has strong roots in the constitutions of South Asian countries, notably Nepal, where the Supreme Court is responsible for protecting fundamental rights and promoting justice in the public interest. *Suo motu* action is a part of Nepal's legal system, although it is not yet widely used to address crimes related to public health (2, 3).

The rape and murder of a 31-year-old female postgraduate doctor at R.G. Kar Medical College in Kolkata, India, in August 2024 is a terrible case that shows how important it is for the courts to step in. The event took place within the hospital after the doctor had worked a long, tiring 36-hour shift. The Supreme Court of India took notice of the case on its own due to public anger over the safety of female healthcare workers and concerns about perceived errors in the inquiry. The Court not only initiated a high-level investigation but also established a national task group to propose measures for enhancing the safety of medical facilities. The Court agreed that systematic neglect in safeguarding healthcare workers is a breach of their fundamental rights and hurts the public health system as a whole (2-4).

This case is crucial for Nepal because it demonstrates the country's commitment to protecting healthcare workers and ensuring public health as a fundamental right. The Constitution of Nepal protects the rights to health, gender equality, and justice. This aligns with international human rights frameworks, such as the International Covenant on Economic, Social and Cultural Rights (ICESCR). However, in reality, there is an apparent lack of judicial action regarding offences that threaten public health infrastructure. This article suggests that the Supreme Court of Nepal should utilise *suo motu* cognisance strategically to address crimes that have a significant impact on public health. This would not only bring justice but also protect the country's healthcare system (5, 6).

UNDERSTANDING SUO-MOTU COGNISANCE

Suo motu cognisance refers to a court's ability to initiate legal proceedings on its own, without requiring a formal complaint or petition to be filed. "Suo motu" comes from Latin and means "on its motion." This one-of-a-kind judicial tool enables higher courts, particularly constitutional courts, to take action on significant issues that impact the public, especially when the executive or legislative branches fail to address them, thereby putting justice, human rights, or public welfare at risk. In terms of public health, *suo-motu* cognisance may be a vital instrument for addressing systemic problems, criminal negligence, and urgent risks that pose a threat to the health and safety of the general public (7, 8).

Pakistan and India are the primary locations where the practice of *suo motu* cognisance became established in South Asia. The Supreme Court and other High Courts have used it since the 1980s, when Public Interest Litigation (PIL) first started. It was considered a way to make access to justice more democratic, allowing courts to address human rights breaches and socioeconomic injustices that affect marginalised groups. Over the years, Indian courts have used *suo-motu* powers in situations of custodial fatalities, environmental damage, migrant labour difficulties, and medical treatment that wasn't up to par. For instance, during the COVID-19 pandemic, the Indian Supreme Court took *suo motu* action to establish guidelines for the distribution of oxygen and vaccines. This showed how important the court is in protecting public health when the government is having trouble doing so (9-11).

The Constitution grants the Supreme Court certain authorities that enable the concept of *suo motu* cognisance in Nepal's legal system. Article 133 of the Constitution of Nepal, 2015, empowers the Supreme Court to issue writs of habeas corpus, mandamus, certiorari, prohibition, and quo warranto, as well as any other orders deemed necessary and suitable to protect individuals' fundamental rights or to obtain a legal remedy. This clause grants the Court considerable latitude to act in the public interest. In Nepal, *suo motu* interventions occur less frequently than in India. Still, the law and constitution permit the courts to take a more proactive role in protecting public health and justice (12, 13).

However, there are several issues with judicial activism in Nepal. Nepal's courts have been more constrained than those in Pakistan and India, where the judiciary has traditionally played a transformational role. In Nepal, you typically need to submit a petition to initiate a case. Institutional reluctance, political sensitivities, and a lack of resources have made it more challenging to exercise judicial authority in a proactive manner. Article 133 has a strong basis, but there are no clear rules or precedents that encourage *suo motu* cognisance in matters that endanger public health or systemic criminality.

Even with these problems, the changing laws in South Asia may serve as a guide for Nepal to enhance its use of the courts in safeguarding the public good. The Supreme Court has both the constitutional power and moral duty to step in when crimes or systematic failures put public health at risk, including gender-based violence against health workers, poor hospital management, or environmental dangers. Making *suo motu* action a normal court reaction to public health hazards would not only protect the right to health as a fundamental right, but it would also encourage responsibility in areas crucial to the country's health.

THE RAPE AND MURDER CASE OF THE INDIAN DOCTOR: A PUBLIC HEALTH AND LEGAL CRISIS

On August 9, 2024, a shocking incident occurred at R.G. Kar Medical College and Hospital in Kolkata, India. A 31-year-old female postgraduate doctor was discovered raped and killed in a lecture room on the hospital grounds. The victim, who had just finished a long 36-hour shift, was said to have been napping alone at the facility when the attack happened. The site, a state-run teaching hospital, should have been a secure and professional environment in which to work. Still, it became the scene of a terrible crime that highlighted the institution's inadequate security and lack of gender-sensitive workplace safeguards (3, 4).

The event angered people nationwide. Protests erupted at medical schools and in civil society organisations, calling for justice and swift legislative changes to protect healthcare workers, particularly women. Initially, many people were unhappy with the speed and thoroughness of the police investigation. This led to further criticism of how poorly the system handles crimes against women. The Calcutta High Court referred the case to the Central Bureau of Investigation (CBI) due to mounting pressure and media attention. This suggests that people lack confidence in the local police to perform their duties effectively. The Supreme Court of India took suo motu cognisance of the case because it was so severe and had a broader impact on society. This was a key point in the court system's involvement in a criminal case relating to public health (3, 4).

Violence against women and men, particularly at work, has profound effects on public health. The trauma of these kinds of events not only affects the person who was hurt; it spreads across whole institutions and professional groups. There is a lot of evidence that sexual assault has psychological impacts, including PTSD, despair, and anxiety that last for a long time. In healthcare settings, this kind of trauma is hurting the morale, productivity, and mental wellness of healthcare personnel. The message it sends—that women are not secure even in the most recognised professional spaces—can keep women from working in health care, which makes the gender gaps in health care leadership and service delivery even worse (14, 15).

The case also highlighted the inadequacy of India's institutional support structures for protecting female healthcare workers. A lot of hospitals don't have basic security measures, infrastructure that is sensitive to gender, or ways for people to report and deal with harassment or abuse. Not only does this put lives in danger, but it also makes people less sure that the health system can safeguard itself.

The Indian courts responded swiftly and decisively to the event. The Supreme Court's decision to assume suo motu cognisance changed the case from a private criminal case to one of national interest. The Court established a 10-member National Task Force to investigate the institutional roots of the failure and propose changes to make medical facilities safer nationwide. The Court emphasised that these types of crimes, which occur in professional settings, violate fundamental constitutional rights, including the right to life with dignity and the right to work in a safe environment. They need to be dealt with not only through the criminal justice system but also through systemic reform (3, 4).

India's exercise of suo-motu powers in this and other instances is an important example for others to follow. During the COVID-19 crisis, during mass migration, and episodes of custodial assault, all of which had to do with public health and human rights, suo-motu measures were used in the past to make sure there was enough air. These actions demonstrate that the judiciary can serve as a crucial safety net when the government fails to act promptly or effectively (8-11).

This case is helpful for Nepal. It demonstrates that judicial activism, through suo-motu cognisance, may not only address legal problems but also rectify systemic issues that pose a threat to public health and professional integrity. While Nepal works to safeguard health professionals and maintain high public health standards, the Indian example demonstrates the importance of judicial involvement in the delivery of justice and institutional accountability (13, 16).

THE CASE FOR SUO-MOTU COGNISANCE IN NEPAL'S PUBLIC HEALTH CONTEXT

A slew of crimes and failures in Nepal's public health system are rendering it less effective, making people less safe and less likely to trust the government. These include more and more cases of violence against women, attacks on healthcare workers, systematic failure to control infectious illnesses, and ongoing environmental health risks. Although these problems are severe, institutions often fail to address them effectively. This is evident in the police's inaction, bureaucratic delays, and political interference. The court is the final line of defence. In this case, the Supreme Court's proactive exercise of suo-motu cognisance is not only proper but also necessary. It provides people with a strong means of overcoming procedural delays, holding individuals accountable, and defending their constitutional rights when other parts of the government fail to fulfil their responsibilities.

Gender-based violence is still a significant public health problem in Nepal. The rape and murder of Nirmala Panta in 2018, which has not been investigated, shows how deeply flawed Nepal's criminal justice system is.



This case, which is an example of systemic carelessness, shows how survivors and communities are affected psychologically and socially in the long term, and it also creates an environment of fear and impunity. These kinds of things make women less secure in both public and professional settings, including healthcare, where female workers in rural areas are at greater danger and have fewer options for getting help. The larger impact is that it makes women less likely to utilise health services, both as providers and as consumers.

Physical and verbal assaults on healthcare professionals that happen over and over again are making this situation worse. Doctors and nurses, particularly at public hospitals that don't have enough resources, are more and more likely to be attacked by mobs because of disagreements about medical results. These attacks are not just random acts of violence; they are the result of long-term problems in the system, such as bad communication, insufficient infrastructure, and a lack of legal deterrents. The dread and exhaustion that medical staff experience as a consequence of this lead to absenteeism, staff turnover, and ultimately, a decline in the quality of treatment, which threatens the long-term viability of public health services.

Environmental crimes weaken Nepal's public health system. There are numerous unlicensed brick kilns in places like Bhaktapur, which have contributed to dangerously high air pollution. This has made respiratory ailments worse for vulnerable groups, including children and older people. Although there are apparent threats to public health, enforcement of rules remains inadequate or nonexistent. The state's persistent inability to prevent yearly dengue epidemics or ensure access to clean drinking water is another example of how environmental health is poorly managed. However, these problems seldom lead to significant legal or policy changes.

Politically charged, violent crimes that have profound effects on public health have also been ignored. The 2007 Gaur massacre, which killed 27 people during a political fight, and the 2008 Rautahat incident, in which former minister Mohammad Aftab Alam was found guilty in 2024 of planning the mass murder of injured blast victims by burning them alive in a brick kiln, show how dangerous it is when politics and public health break down. These incidents caused not just immediate bodily pain but also long-lasting stress and disappointment with institutions. Despite substantial evidence and advice from human rights groups, the state has not acted promptly. In such situations, the government must intervene to ensure that justice and public health safeguards take precedence over political convenience.

The COVID-19 outbreak highlighted the weaknesses in Nepal's healthcare system even more clearly. The Supreme Court instructed the government to provide free testing and treatment in compliance with Article 35 of the Constitution, but the implementation was not very effective. Delays in obtaining and distributing vaccines revealed that institutions weren't prepared, highlighting the importance of stricter judicial oversight to ensure that constitutional health protections are upheld.

Nepal's Supreme Court has exercised suo motu powers in the past, including when it initiated contempt proceedings against Sidhakura.com in April 2024 for posting false information that damaged the court's reputation. However, it has not been widely used in the field of public health. On the other hand, courts in India and Pakistan have utilised suo-motu powers a lot to enforce environmental laws, protect healthcare workers, and fix problems with the health system. The courts in Nepal need to be as strong as those in other countries.

In Nepal's public health setting, suo motu cognisance is not an abuse of court jurisdiction; it is a constitutional necessity. The court must defend vulnerable groups and restore public trust when the administrative and legislative branches fail to preserve health as a fundamental right. The Supreme Court may utilise its suo-motu powers to become a key component of public health justice in Nepal's evolving legal and political framework by mandating safety audits in hospitals, enforcing environmental health standards, and advocating for structural reforms.

SUO-MOTU COGNISANCE AS A TOOL FOR PUBLIC HEALTH JUSTICE

As public health problems in Nepal become increasingly intertwined with crime, government neglect, and unfair structures, it is essential to view health not only as a policy issue but also as a right that can be enforced. Suo-motu cognisance provides courts with a strong means to recognise and protect this right, especially when other methods are ineffective. The Supreme Court of Nepal can promote public health justice by utilising its constitutional powers and drawing on examples from different countries.

Public Health as a Justiciable Right

Public health is fundamentally a matter of rights and justice. The World Health Organisation (WHO) defines health as a "state of complete physical, mental and social well-being," and not merely the absence of disease. This broad definition requires governments to address the socioeconomic factors that impact health and ensure that everyone has equal access to healthcare, clean environments, and protection from harm. Article 35 of

Nepal's 2015 Constitution guarantees every person the right to health and free basic health care, as well as the right to live in a clean environment.

When criminals hurt people's health, including by attacking healthcare personnel, assaulting women in hospitals, or not taking care of medical infrastructure properly, those crimes create both legal and public health issues. Legal epidemiology examines how laws, rules, and court judgments influence the spread of illness and health consequences among different groups of people, thereby strengthening this connection. From this point of view, neglecting violence in hospitals or problems with hospital safety systems is not just a bureaucratic mistake; it is a violation of the right to health and life.

Comparative Legal Frameworks

Other places have recognised that the courts may protect health rights by becoming directly involved. India has employed suo-motu measures for a long time to address issues with the public health system. During the COVID-19 crisis, the Supreme Court of India intervened to monitor the supply of oxygen and ensure the safety of migrant workers. More recently, the court took suo-motu cognisance of the rape and murder of a young doctor in 2024, saying it had to do with the safety and health of healthcare personnel in general (2-4, 8, 11, 17, 18).

The Constitutional Court in South Africa has made important decisions over health problems such as access of people living with human immunodeficiency virus (HIV) to antiretroviral treatment and maternity health care. The US and South African courts have set key precedents for holding the government accountable for public health outcomes by recognising access to health care as a constitutional right that can be enforced (17, 18).

The Supreme Court of India has exercised suo motu cognisance to address public health emergencies, particularly during the COVID-19 pandemic. The Court initiated a suo motu case in 2021, titled "In Re: Distribution of Essential Supplies and Services during Pandemic." It was about making sure that oxygen, necessary medications, and vaccinations were distributed fairly. The Court made it clear that the right to health is a component of the right to life, as outlined in Article 21 of the Constitution. It instructed both the federal and state governments to ensure that these critical resources are available. The Court also spoke about the black market trade in oxygen concentrators and the well-being of children in protective homes during the epidemic. This demonstrates its commitment to protecting fundamental rights during public health crises (2, 3, 11).

The Supreme Court of Pakistan has also exercised suo motu powers to address public health issues. During the COVID-19 pandemic, the Court took suo motu notice to monitor the government's response to the pandemic. This demonstrated the importance of having a single plan for the country. The Court ordered the federal and provincial governments to submit updates on their efforts to combat the epidemic. It also requested emergency laws to address the emerging problems. The Court has often intervened to address situations that reveal issues with public healthcare facilities. For example, in 2018, it took suo motu notice of the circumstances at Lahore's government hospitals after people complained and called in medical superintendents to report on the availability of emergency equipment and life-saving medicines. These measures demonstrate that the Court is taking the lead in addressing systemic health issues and ensuring that individuals' fundamental rights are safeguarded (7-9).

These international cases demonstrate that courts can and should act when executive inaction, corruption, or systemic neglect compromise public health and violate fundamental rights. Nepal's judiciary has the constitutional and moral authority to follow suit.

Strategic Areas for Intervention

To effectively utilise suo-motu cognisance in the service of public health justice, the Supreme Court of Nepal can identify and prioritise several high-impact areas:

- i) **Violence against healthcare workers:** Given the increasing frequency and normalisation of attacks on doctors, nurses, and paramedics, judicial intervention is necessary to mandate protective legislation, establish institutional safety protocols, and ensure rapid investigation and prosecution of offenders.
- ii) **Environmental pollution cases:** Air and water pollution in cities like Kathmandu pose significant health risks, particularly to children and older people. The Court can act on its own initiative to hold polluters accountable, enforce environmental regulations, and compel local governments to implement pollution control measures.
- iii) **Mental health and suicide prevention:** With rising rates of suicide, especially among youth and health workers, Nepal faces a mental health crisis that lacks an adequate institutional response. Suo-motu cognisance can help highlight systemic neglect, push for mental health policies, and demand the establishment of accessible crisis services.
- iv) **Systemic negligence in health facilities:** Cases of oxygen failure, lack of basic infrastructure,



or denial of care in public hospitals are not only administrative oversights but potential violations of the right to life. Judicial scrutiny through suo-motu proceedings can lead to institutional audits, reparative measures, and future safeguards.

- v) **Politically motivated mass violence with public health implications:** Unresolved crimes like the 2007 Gaur massacre, the 2008 Rautahat brick kiln murders by Mohammad Aftab Alam (convicted in 2024), and the rape and murder of Nirmala Panta reflect dangerous impunity. Suo-motu action can compel state accountability, deter future violations, and restore public trust in politically sensitive cases impacting public health and safety.

Suo-motu cognisance is not only a way to respond in all of these areas; it is also a way to prevent problems before they happen, demonstrate systematic carelessness, and foster a culture of responsibility. In a democracy that is still evolving, like Nepal, whose institutions are not yet fully developed, the court plays a crucial role in protecting public health as a fundamental right. The Supreme Court can significantly enhance the structural integrity of Nepal's public health system by taking decisive, fact-based, and rights-focused action.

CHALLENGES AND CRITICISMS OF SUO-MOTU IN PUBLIC HEALTH

Suo-motu cognisance is a potent instrument for judicial activism in protecting public health, but it also has its problems and critics. A significant concern is that the courts could overstep their bounds. If courts become overly involved, they may blur the lines between the other branches of government by entering into areas that are typically the responsibility of the executive and legislative branches (19-21). Some people argue that excessive judicial involvement may compromise democratic accountability and the policy-making process, particularly in complex sectors such as public health, which require specialised expertise and resource allocation decisions that fall outside the court's jurisdiction. This concern is even stronger in politically sensitive places like Nepal, where an aggressive judiciary might be perceived as upsetting delicate power balances or politicising health governance.

Another problem is that people often fail to follow through with self-motivated interventions. While judicial decisions and decrees are essential in a symbolic aspect, they don't necessarily lead to quick or useful action on the ground. There have been instances when courts have taken suo motu cognisance, issued orders, or established task teams. However, government agencies have been slow, inconsistent, or shallow in carrying out these orders (8,11,22). These kinds of

gaps may lead people to lose faith in judicial activism, making courts seem reactive yet ultimately unable to bring about meaningful change. In Nepal, where political meddling and bureaucratic inefficiency are common, ensuring that enforcement continues after an intervention remains a significant challenge.

Also, using suo-motu powers only when necessary raises problems about justice and consistency. Without defined rules or criteria for initiating suo motu proceedings, the judgments may be arbitrary or influenced by media pressure and public outcry, rather than an impartial evaluation (8,23,24). This might lead to a court system that doesn't react equally to public health hazards, leaving certain towns or situations at a disadvantage. Courts lack the necessary resources to effectively handle complex public health issues, including limited expertise, insufficient time, and inadequate monitoring capabilities. This makes extensive suo-motu participation less likely.

Lastly, there is a concern that suo-motu acts may lead people to overlook the need for institutional duties and broader structural changes by focusing too much on high-profile or symbolic instances (8, 19, 25, 26). Judicial involvement may spark crucial debates and prompt urgent action. Still, long-term changes in public health governance require comprehensive policy planning, intersectoral cooperation, and ongoing political will, which courts alone cannot provide.

STRENGTHENING JUDICIAL ACTION ON PUBLIC HEALTH-RELATED CRIMES

A planned, balanced, and institutionalised strategy is necessary to strengthen the judiciary's role in addressing crimes that harm public health. The following suggestions are meant to make court interventions more effective, especially via suo-motu cognisance, while still obeying constitutional norms and keeping peace amongst institutions:

(i) Institutionalise suo-motu procedures with defined criteria: The Supreme Court should adopt official rules for starting, looking into, and deciding suo-motu issues on public health. These rules should outline how to select cases, safeguard procedures, and monitor activities to ensure that judicial activism is transparent, fair, and accountable.

(ii) Build judicial capacity in public health jurisprudence: The courts should enhance their knowledge of health-related legal issues by establishing specialised benches or hiring expert advisors in medicine, epidemiology, and environmental health. This will enable the Court to better understand complex health concerns and make informed decisions based on solid facts.

(iii) Foster inter-institutional collaboration and enforcement mechanisms: Coordinated implementation must enable effective judicial action. The Court should establish mechanisms to collaborate with the government, regulatory organisations, and civil society actors, ensuring that its orders are executed promptly. To hold people more accountable, regular progress reports, compliance monitoring, and public disclosure are necessary.

(iv) Prioritise the protection of healthcare workers and facilities: Because violence against healthcare workers is on the rise, the courts should order the creation and enforcement of comprehensive protection measures, such as legal protections, gender-sensitive workplace policies, procedures for handling complaints, and prompt response systems in hospitals and health centres.

(v) Expand oversight to systemic and politically sensitive public health threats: The Court should take action in cases of large-scale or politically motivated public health harms, like the Gaur massacre, the Rautahat brick kiln murders, and the Nirmala Panta case. It should achieve this by ordering investigations, ensuring the safety of victims, and holding the state accountable in politically charged situations where individuals are not punished.

(vi) Address environmental and infrastructural health challenges: Suo-motu action should also go after crimes against the environment and problems with the infrastructure that are built into the system. Toxic air pollution from uncontrolled brick kilns, contaminated water, and unmanaged outbreaks of infectious diseases are just a few of the problems that need to be addressed by the courts and rectified so that they don't harm public health in the long run.

(vii) Advance mental health rights and suicide prevention: Because mental health problems are becoming more common, especially among young people and healthcare workers, the Court should work with the relevant ministries to create inclusive mental health policies, emergency response systems, and campaigns to reduce stigma.

(viii) Promote legal literacy and public access to justice: We should promote public education campaigns and easier-to-use legal aid services to give people—especially those who are marginalised and frontline workers—the tools they need to report crimes related to public health and get legal help, which will make the community more involved with the justice system.

(ix) Ensure restraint and respect for constitutional boundaries: Suo-motu powers are essential when the system isn't working, but judges need to be careful when they use them. The Court must not interfere with the

work of the executive or legislative branches. Instead, its interventions should be helpful, time-limited, and based on the Constitution's purpose rather than institutional overreach.

The court in Nepal can help bring about public health justice by institutionalising and improving the practice of suo-motu cognisance. This will fill in gaps in governance, safeguard disadvantaged groups, and strengthen the constitutional guarantee of the right to health for all.

CONCLUSION

The horrifying rape and murder of a female doctor at India's R.G. Kar Medical College shows how weak public health systems are and how important it is for the courts to step in when institutional protections fail. This tragedy is a warning and a call to action for Nepal, where healthcare workers, at-risk groups, and the environment regularly suffer from systematic neglect and political inaction.

When other parts of the government fail, Nepal's Supreme Court has a constitutional duty to uphold the right to health and ensure that justice is served. Suo-motu cognisance is an essential legal tool that allows the courts to step in and make decisions in situations of gender-based violence, attacks on healthcare personnel, environmental risks, and politically sensitive offences that have an impact on public health. The Court may assist in addressing gaps in enforcement, hold states accountable, and initiate structural changes that safeguard both individuals and public institutions by acting proactively.

Reforms should focus on integrating transparent processes into the system, enhancing judges' understanding of public health legislation, and collaborating more effectively with executive agencies, health institutions, and civil society to make suo-motu interventions more effective and lasting. This also means ensuring that healthcare professionals are safe, facilitating access to legal help for people, and upholding constitutional limits to prevent the courts from overstepping their bounds.

The Supreme Court's vigorous and ethical exercise of suo-motu powers may be more than simply a reaction; it can also be a proactive plan for public health justice. When undertaken with openness, legal accuracy, and cooperation among institutions, these kinds of actions may restore public confidence, prevent future damage, and reaffirm the judiciary's position as a protector of rights and accountability in Nepal's evolving democracy.

Conflict of interest

The author declares no conflict of interest.

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