



## RESEARCH ARTICLE

## Examining the Intersection of Seva and Public Health Policy

**Pragat Patel\***

*University of Maryland, College Park, USA*



\*Corresponding author: Pragat Patel, University of Maryland, College Park, 8308 Dawn Court, Ellicott City, Maryland, 21043, USA, Tel: +1-443-374-7669

### Abstract

In today's globalized and multifaceted world, policymakers are faced with the challenge of crafting policies that cater to the diverse needs of different communities. One approach that has shown promise in achieving this goal is the Hindu concept of seva or selfless service. Seva involves the selfless act of serving others without any expectation of reward or recognition. Rather, the motivation is behind serving God through serving humanity. This principle has deep roots in Hindu culture and has been practiced for centuries as a way to foster social cohesion and community empowerment. This research paper aims to explore the potential of seva to inform and improve public health policies in India and beyond. Specifically, seva can be integrated into public health policy to promote community engagement, foster social cohesion, and enhance the overall effectiveness of public health interventions. Seva provides a humanistic approach to addressing public health issues that prioritizes the needs of affected communities.

### Keywords

Public health policy, Service approaches, Community betterment, Seva, Hindu ideology, India

### Introduction

Public policy is a multidisciplinary approach towards legislature, intended to protect and improve the health and well-being of individuals and communities. The deep process of designing and implementing interventions which address societal issues and challenges has guided public health movements and standards for a major part of organized government. However, due to its holistic focus, it is influenced by various factors, such as scientific evidence, political interests, ethical values, cultural norms, and religious beliefs. As country with an immensely intertwined community, India provides an excellent standard for developing a better approach

to public policy, especially on a religious front. Among the various religions in India, Hinduism is undoubtedly the most dominant, with about 79.8% of the population identifying with the ancient religion [1]. Hinduism is not a monolithic religion, but rather a dynamic tradition which engrains deep complexity sourced from various schools of thought, practices, rituals, and scriptures. One of the foundational concepts in Hinduism is selfless service, referred to as seva [2]. It highlights the notion of helping others without expecting anything and is a way of expressing gratitude, compassion, and above all, social responsibility. Seva is also considered to be a form of devotion to God and humanity, contributing your part to the whole. This paper will argue that seva is a positive Hindu ideology which if applied, will present tangible benefits to public health policy. Besides forming a holistic and humanistic approach, seva helps address the root causes and consequences of public health issues by empowering affected communities and fostering social cohesion. Seva could complement and improve upon other models and ideologies which are already instilled into public policy by respecting the diversity and dignity which already shines in today's governmental affairs.

### The Concept of Seva in Hinduism and the Connection to Public Health

The word "seva" is a Sanskrit term that describes the act of selfless service. Its meaning is said to be embodied by the root words saha, meaning "with that," and eva, meaning "too," which together mean "together with." [2]. Over the course of time, the word has evolved to define the concept of selfless service, serving as a cornerstone for thousands of organizations worldwide dedicated to improving the world through contribution.

[2] As one of the fundamental values of Hinduism, it has evolved into a sense of duty for adherents worldwide. For many, it has become more than just a virtue; it is a way of life and a deeply engrained lifeline. Seva is accessible to all because it can be undertaken in innumerable ways, from serving one's own family to caring for nature to even serving God. In addition, there are several different approaches to seva, including physical service (kaya seva), mental service (man seva), verbal service (vachan seva), and spiritual service (atma seva), all of which are respected and widely practiced.

The concept which sets seva apart is the motivation that drives it. It is a pure act of gratitude and social responsibility. Unfortunately, today, many individuals perform service with the intention of personal gain or recognition. Philanthropy, which initially began as a noble cause, has gradually devolved into a tool for ill intentions and misuse. Seva, on the other hand, is exceptional in that it is a form of devotion to God and humanity, serving as a firm social structure that fosters personal growth, community, and service.

The significance of seva is profound, as it provides an ethical framework and foundational metric for individuals to uphold values such as selflessness, humility, and compassion. Moreover, it serves as a means of fostering interconnectivity between individuals, communities, and the environment. By embracing the practice of seva, individuals can revitalize their commitment to the growth and betterment of society.

Seva relates to public health in several ways. First, seva reflects the ethical principle of beneficence, which means doing good or promoting well-being [3]. The organizations which perform seva can help improve the health and well-being of individuals and communities by providing or facilitating essential services or support that meet their needs and expectations. It is often also used to help prevent or reduce the harm or suffering caused by various public health issues or challenges. Following natural disasters, countless humanitarian organizations have been seen to play an integral role in aide efforts. Seva can also deeply enhance the quality of life and happiness of both the service providers and recipients by creating a sense of gratitude, compassion, and social responsibility.

## Seva as a Framework for Alleviating Social and Economic Disparities in India

As the country who has served as a haven of this ideology, it is imperative to see the myriad of societal issues India faces. India is a country with a large and diverse population, but also with significant social and economic disparities. According to a report by the World Bank, the COVID-19 pandemic has pushed 71 million people into extreme poverty globally in 2020 [4]. Out of these, nearly 79% were from India. Furthermore, the World Bank's latest report suggests that by the end

of 2022, 685 million people could be living in extreme poverty worldwide, which could potentially increase poverty rates in India [5]. India additionally has high rates of hunger, malnutrition, stunting, and wasting among children under five years of age. According to the 2022 Global Hunger Index, India ranks 107th out of 121 countries with a score of 29.1, indicating a serious level of hunger [6]. Besides widespread hunger, India also has a large number of people who are homeless or live in inadequate housing conditions, further necessitating a holistic effort towards national betterment. According to the Census of India (2011), there were about 1.8 million people who are homeless in India, accounting for 0.15% of the population [7]. However, this number may be an underestimate, as many people who are homeless may not be counted or registered. Within the past few years, many countries have seen spikes in homeless population rates due to COVID-19 among other factors and there is no doubt India may have as well [8]. Moreover, many people live in slums or informal settlements that lack basic amenities such as water, sanitation, electricity, and security.

According to the Census of India (2011), there were about 65 million slum dwellers in India, accounting for 17% of the urban population [7]. Additionally, quality education and literacy issues continually persist in the subcontinent though much progress has been made in the recent past to overcome said shortcomings. According to the UNESCO Institute for Statistics (2020), India youth literacy rate of 91% in 2018 [9]. Additionally, according to a report published by the National Survey of India, the literacy rate of India in 2022 is 77.7% [10]. However, these rates vary widely across states, regions, genders, and social groups. As time passes, societal structures dictate these issues more strongly, often forcing certain individuals to resort to dire means to maintain bare necessities. Moreover, many children drop out of school or do not acquire basic skills due to various factors such as poverty, gender discrimination, child labor, poor infrastructure, teacher absenteeism, etc. According to the Annual Status of Education Report (ASER) (2018), only 50% of children in grade 5 could read a grade 2 level text and only 28% could do a simple division [11].

These public health issues are not only detrimental to the health and well-being of individuals and communities, but also to the social and economic development of the country. They reflect the structural inequalities and injustices that pervade Indian society and hinder its progress.

Seva can provide a framework for alleviating these issues by addressing their root causes and empowering the affected communities. It helps foster a culture of compassion and solidarity that recognizes the dignity and diversity of all people and utterly respects their rights and needs. Seva also helps to mobilize resources

and volunteers to provide essential services and support to those who are marginalized or vulnerable. Above all, seva develops social cohesion and harmony by bridging the gaps and conflicts between different groups and promoting dialogue and cooperation. As a true inspirer of social change and reform, it raises awareness and advocacy on various public health issues and challenges the status quo.

### **Exploring the Differences between Seva and Other Models of Public Health Policy**

Public health policy can be intertwined with various models and strategies with the conjoined aim to improve the health and well-being of individuals and communities. Some common models currently highlighted are charity, empowerment, and advocacy. Widely accepted, charity is the act donating money, goods, or services to assist those in need. Especially with a rise in billionaire philanthropy, its impact has been highlighted time and time again. Empowerment is the process of enabling or supporting people to gain control over their lives and participate in legislative and policy decision-making. Advocacy is the act of speaking or acting on behalf of a cause or a group of people to influence policy or practice. These models or strategies have their merits and limitations, and they can be compared and contrasted with seva in the following ways:

Charity and seva both involve helping others, but they differ in their motivation and outcome. Charity is often motivated by pity or sympathy for the needy, and it may create a sense of dependency or inferiority among the recipients. Seva is motivated by gratitude or devotion for God and humanity, and it may create a sense of dignity or equality among the recipients. By recognizing God in all, people feel a more intrinsic dedication and commitment towards the respectful service. Charity may also be selective or conditional, depending on the donor's preferences or expectations. Seva is universal and unconditional, regardless of the recipient's background or behavior. Integrating this mindset and ideology into policy could help overcome existing inequities.

Empowerment and seva both involve supporting others, but they differ in their approach and scope. Empowerment focuses on enhancing the capabilities and opportunities of individuals or groups to improve their own lives and situations. Seva focuses on serving the needs and interests of others without expecting anything in return. Empowerment may also be limited by the availability or accessibility of resources or information. Seva may also transcend the material or physical aspects of life and address the spiritual or emotional aspects as well. By being involved in seva, communities which may also feel empowered by feeling connected to their society and seeing tangible impacts.

A sense of equality would be fostered as the actions are with pure intent and without any expectations in return.

Advocacy and seva both involve speaking or acting for others, but they differ in their purpose and perspective. Advocacy aims to influence or change policies or practices that affect the health and well-being of individuals or communities. Seva aims to express or demonstrate love and compassion for God and humanity. Advocacy may also be confrontational or adversarial, depending on the nature or extent of the issue or conflict. Seva may also be harmonious or cooperative, depending on the attitude or intention of the service provider. In addition, a form of seva deemed vachan seva could exist as speaking out for others and working towards the collective good. The perspective one takes on advocacy would also be affected because it is difficult to weigh the positive and negative impacts of policy change on different populations. With no instilled bias in mind, seva could help outweigh these difficulties and serve as a step towards a more equitable and fair legislative process.

### **Applying Seva to Public Health Policy: Recommendations and Implications**

Based on the analysis of seva and its relation to public health policy in India, the following recommendations or implications can be proposed:

Seva can be integrated into the existing or new public health policies or programs in India by incorporating its principles and practices into the design, implementation, and evaluation of the interventions. For example, seva can be used as a criterion for selecting or prioritizing the target populations or areas that are most in need or most deserving of public health services or support. By recognizing selflessness in the intended service, a focus on equality could be reached in a more facile manner. Seva can also be used as a method facilitating the services or support in a respectful, compassionate, and efficient manner that meets the needs and expectations of the service recipients. It is also a measure for assessing or monitoring the outcomes or impacts of the services or support in terms of the health and well-being of the individuals and communities as well as the satisfaction and gratitude of the service providers and recipients.

Another invaluable front is promoting and encouraging public health stakeholders to form platforms for seva activities, undoubtedly spreading an inherently positive nature. For example, seva can be included or emphasized in the curriculum or training of public health professionals and workers as a core value or skill that enhances their competence and commitment to public health. Seva can also be used as a mode or incentive for engaging or mobilizing the community members and volunteers as active partners or agents of public health. As another front for cooperation, seva would bring the interests of

different groups involved in public health together, encouraging a joint dedication to a good cause. It also be used as a recognition or reward for acknowledging or appreciating the service providers and recipients for their contributions and achievements in public health. Policy would benefit from this because without being guided by the larger players in governmental affairs, it can help break boundaries and contribute towards an underlying unity being formed.

Seva can also be enhanced or enriched by the public health stakeholders in India by learning from or collaborating with other religious or cultural traditions, which share similar notions. For example, seva can be inspired or informed by the teachings or examples of other organizations or movements which have contributed to public health issues and challenges, such as Mother Teresa's Missionaries of Charity, which provides care and support to the poor, sick, and dying in India and around the world [12]; Dalai Lama's Tibetan Buddhism, which promotes peace, compassion, and interfaith dialogue in India and globally [13]; Guru Nanak's Sikhism, which emphasizes service to humanity as a way of serving God; etc [14]. Seva is enhanced by collaborating with these organizations or movements to exchange knowledge, resources, and experiences on public health issues and solutions. There has been joint efforts in the past following disasters and global issues with multiple organizations coming together with the same intentions in mind [15]. Some guided by seva, some by necessity, but the impact of this work has been shown to be immensely powerful and further emphasizes the need to utilize this ideology in policy.

However, the impact of seva on policy could raise ethical concerns including misuse and misunderstanding. Individuals can capitalize upon human nature to spread their causes, even when their true intentions are apart from seva. It needs to be contextualized and adapted at a deep level to leave a significant impact because without a united effort towards understanding this ideology, it becomes difficult to connect it to the multidisciplinary nature of public policy. It may also raise issues of dependency because it would necessitate the willingness of service providers and recipients to understand, accept, and utilize this concept on their own time and motivation. Hence, seva should be used as a means to complement ongoing large components of public service and health policy.

To further explore the potential of seva in public health, there are several directions for research and action. These include conducting studies to assess the impact and effectiveness of seva in public health interventions, developing guidelines or standards for implementing seva in public health practice, and raising awareness and advocating for the value and relevance of seva in public health policy. There have already been ongoing missions and movements utilizing seva as a

forefront of their work; delving into their work could better highlight where to apply this concept most. Setting boundaries in practice could help alleviate concerns of the utilization of seva on large-scale policy. As with other changes, seva does have potential to cause harm but with appropriate guidelines, it could be a guiding factor. Lastly, raising awareness is the best way to utilize this concept in public health policy. As aforementioned, to see a tangible impact, seva must be understood and utilized by larger populations for a concerted effort.

However, appropriate advocacy and awareness could lead to proper complementation and still provide perceivable benefits. By pursuing these avenues of research and action, it may be possible to better understand and harness the power of seva in promoting public health.

## Conclusion

This paper has explored how seva, a Hindu ideology of selfless service, can inform public health policy in India. Seva is a positive ideology that can offer a holistic and humanistic approach to public health policy in India. It helps address the root causes and consequences of public health issues by empowering the affected communities and fostering social cohesion. The ideology can also complement or improve upon other models or strategies that are used in public health policy by respecting the dignity and diversity of all people. This paper has proposed some recommendations or implications for applying seva to public health policy in India, such as integrating seva into the existing or new policies or programs, promoting seva among the public health stakeholders, and enhancing seva by learning from or collaborating with other religious or cultural traditions. The paper has also acknowledged some of the limitations and challenges of seva, such as its potential for misuse or misunderstanding, its need for contextualization and adaptation, and its dependence on the availability and willingness of service providers and recipients. There are some directions for further research or action on this topic, such as conducting empirical studies on the impact and effectiveness of seva in public health interventions, developing guidelines or standards for implementing seva in public health practice, and creating awareness and advocacy on the value and relevance of seva in public health policy. It concluded that seva is a Hindu ideology that can contribute to the improvement of public health and well-being in India and beyond.

## Acknowledgements

The author has no funding or acknowledgements to disclose.

## Conflicts of Interest

The author has no conflict of interest to disclose.

## References

1. Kramer S (2021) Key findings about the religious composition of India. Pew Research Center.
2. Yogapedia (2017) What is Seva? - Definition from Yogapedia.
3. Beauchamp TL, Childress JF (2001) Principles of biomedical ethics. Oxford University Press, New York, USA.
4. World Bank (2022) Poverty and shared prosperity.
5. Aggarwal R (2022) Standard 685 million could be living in extreme poverty by 2022-end: World Bank. Business Standard.
6. Global Hunger Index (GHI) (2022) India.
7. Census of India (2011) Homeless population in India.
8. Lee L (2020) World Homeless Day: Covid-19 is worsening housing insecurity. Here's how you can help.
9. UNESCO Institute for Statistics, Literacy rate, youth total (% of people ages 15-24) in India. Index Mundi.
10. National Survey of India, Literacy Rate of India in 2022. Times of India.
11. ASER Centre (2019) Annual Status of Education Report (rural) 2018.
12. Missionaries of Charity, Mother Teresa - The Holy Saint.
13. The Editors of Encyclopaedia Britannica (2023) Dalai Lama. Tibetan Buddhism.
14. Guru Nanak, Sikhism.
15. United Nations (2015) Humanitarian Response to the 2015 Nepal Earthquake.