

Civil Society, Public Policy and Morality

Dr. Himanshu Sekhar Samal¹, Archanarani Sahoo²

¹Associate professor, Ravenshaw University, Cuttack

²Phd Scholar, Ravenshaw University, Cuttack

Abstract

This paper aims to find a most fruitful way to make public policies work accordingly. Primarily this paper aims to concern about the role of civil society in public policies.

INTRODUCTION

This is a paper primarily concern about the role of civil society in the process of policy making. Here most important thing to take into consideration is that, how civil society plays an important role to influence people towards a qualitative life as well as to plan and progress public policies. Furthermore, this paper is also focus to explore our daily experience with public policies and to highlight some ethical concerns in public policy making process.

Let us discuss about civil society and its fundamental understanding. The term 'civil society' firstly used by Aristotle. Formerly it treated as synonymous to political institution but now a days it is quite opposite to it. Now it is treated as an autonomous body.

In the middle of the 19th century, the term was deserted because the attention of the political philosophers turned to the social and political repercussions of the industrial revolution. It was in 1990's that the phrase 'civil society' became the buzzword in the global arena with every one right from political scientists to an average citizen using it, as a 'mantra' (key) and became a significant constituent of the 'post-cold-war zeitgeist.' Elena Trifonova has mentioned post-cold-war-zeitgeist in that all the European countries worked towards reconstructing civil society. Since 1990s, NGOs have emerged, as an important force working to democratize the decision making process, protect human rights, and provide essential services to the most needy.

Civil society is a vast and diverse group encompassing various organizations within it. It plays significant role in representing the interests of depressed and oppressed classes, mobilization of resources, policy advocacy, and regulating and monitoring state action. It has become one of the key instruments of good governance worldwide. With involvement of stakeholders, there is always a space for inclusiveness.

So this preliminary discussion about civil society and its role shows that, it plays a vital role in decision making, protecting human rights and provide essential services to the most needy. Ultimately it work for people to provide a qualitative life. Here I would like to point out the term 'qualitative life'. This will be the concerned subject in the next part of the paper.

ETHICAL CONCERN OF THE STUDY:

The term 'qualitative life' is very familiar in civil society. If we search for its definition we cannot find any particular definition for it. Because it is different to race, time and place. Wherever we know the sole aim of civil society is to provide a qualitative life to public, but unless we understand what can

make a particular group of people qualitative we cannot work to provide it. So this term looking like a multi dimensional one. For example sometimes we consider health of public is quite important to provide a qualitative life to public. Many NGOs also doing such works to provide a qualitative life. But some of our practical experiences shows that qualitative life not always bounded in health. Let me discuss it through an interesting example,

ETHICAL PROBLEMS AND PRESCRIPTION

CONCLUSION

lic policy making process.

Let us discuss about civil society and its fundamental understanding. The term ‘civil society’ firstly used by Aristotle. Formerly it treated as synonymous to political institution but now a days it is quite opposite to it. Now it is treated as an autonomous body.

In the middle of the 19th century, the term was deserted because the attention of the political philosophers turned to the social and political repercussions of the industrial revolution. In 1990’s that the phrase ‘civil society’ became the policyspeake in the global arena with every one right from political scientists to an average citizen using it, as a ‘mantra’ (key) and became a significant constituent of the ‘post-cold-warzeitgeist. 4 ’ Elena Triffonova has mentioned post-cold-war-zeitgeist in that all the European countries worked towards reconstructing civil society. Since 1990s, NGOs have emerged, as an important force working to democratize the decision making process, protect human rights, and provide essential services to the most needy.

Civil society is a vast and diverse group encompassing various organizations within it. It plays significant role in representing the interests of depressed and oppressed classes, mobilization of resources, policy advocacy, and regulating and monitoring state action. It has become one of the key instruments of good governance worldwide. With involvement of stakeholders, there is always a space for inclusiveness.

So this preliminary discussion about civil society and its role shows that , it plays a vital role in decision making, protecting human rights and provide essential services to the most needy. Ultimately it work for people to provide a qualitative life. Here I would like to point out the term ‘qualitative life’. This will be the concerned subject in the next part of the paper.

ETHICAL CONCERN OF THE STUDY:

The term ‘qualitative life’ is very familiar in civil society. If we search for its definition we cannot find any particular definition for it. Because it is different to race, time and place. Wherever we know the sole aim of civil society is to provide a qualitative life to public, but unless we understand what can make a particular group of people qualitative we cannot work to provide it. So this term looking like a multi dimensional one. For example sometimes we consider health of public is quite important to provide a qualitative life to public. Many NGOs also doing such works to provide a qualitative life. But some of our practical experiences shows that qualitative life not always bounded in health. Let me discuss it through a interesting example, Suppose, government decided to provide free tuberculosis treatment. And specialized doctors prescribe that, TB patient should be treated separately in the hospital and they have to leave their home during the time of treatment. Otherwise its treatment will not be effective. And this strategy became universal. Now it the time to think that, what will be in India? Indian people are very emotional and they give important to their culture, fellow beings etc. They will not

reveal their disease because they have to leave their home. Then can we think to modify the TB treatment according to Indian culture?

Here core point to be highlighted that, qualitative life is not same for all. In our daily life experience, we experience some instance where some people feel pleasure after getting some tasty food and many others after getting some new dresses. Just like that sometimes wants of people vary from person to person. Some people prefer to live healthy in mentally than physically. Let's be close to the concept 'mental health'. Is it universal? Is there any factors those are impact upon people's mental health or it is fully directed by personal interest?

As we know civil society groups begin to engage in policymaking actively, on behalf of citizens and marginalized communities they should guided by ethics and morality. People's well fair is a multi dimensional concept to understand. Sometimes these hidden factors can be cause of unfruitfulness public policies. Another most familiar slogan reside in civil society is 'we the people' but the hidden truth is that practically we experienced secondary participation of people in policy making process.

MORAL PROBLEMS AND PRESCRIPTION

All the discussion about civil society it is quite clear that civil society groups begin to engage in policymaking actively, on behalf of citizens and marginalized communities. Here an important question is that, what is the basis for claiming the 'representation'? How 'representative' of the communities are the CSOs that are entering the policymaking domain? What are the mechanisms or the accountability measures for this? Who is being included, and who is left out? Here, it is important to disaggregate the voice of 'we the people' that are emerging. Does it include women, minorities, and other vulnerable and marginalized sections? How can the question of 'who represents whom' be addressed and brought to the centre of debate in creating democratic spaces for civil society's participation in policy processes.

So as an influential representative body of society CSOs must have a multi demonical perspective to study the society study the public as well as personal interest. The slogan 'we the people' should be treated from its core meaning. In the policy making process only policy makers are not sufficient to make a policy fruitful. It needs ethical guide and public as primary participants. Primary research finding of the study shows that qualitative life which is the sole aim of CSOs is not universal, it differ in race time and place. Factors like autonomy, liberty, personal interest should by analyses in the process of policy making. Now a day's CSOs should be more focused on thought than action.

Let us discuss some ethical theories in this context. Utilitarianisms a moral theory that advocates that an action is good if and only if it produces maximum happiness or greatest number of happiness. It is directed to making social, economic, or political decisions, aims for the maximum good of the society. "The greatest amount of good for the greatest number of people" is a maxim of utilitarianism.

According to Deontological theory, rightness or wrongness of an action doesn't depend on its consequence. Rather, an action is right or wrongs in itself. This attempt of introducing ethical theories in this discussion is aiming to show some moral calculation and its importance in public policy making process.

CONCLUSION

Having a note from the previous discussion regarding the role and problems of CSOs as a student of philosophy, I set out an idea that unless some moral consideration are not included into the mechanism of CSOs, policies and sole aim would loss it's ground.

So as an influential representative body of society CSOs must have a multi demonical perspective to study the society study the public as well as personal interest. The slogan ‘we the people’ should be treated from its core meaning. In the policy making process only policy makers are not sufficient to make a policy fruitful. It needs ethical guide and public as primary participants. Primary research finding of the study shows that qualitative life which is the sole aim of CSOs is not universal, it differ in race time and place. Factors like autonomy, liberty, personal interest should by analyses in the process of policy making. Now a day’s CSOs should be more focused on thought than action.

BIBLIOGRAPHY:

1. Amrith, S. (2007). Political culture of health in India: A historical perspective. *Economic and Political Weekly*, 114-121.
2. Banerjee, A., Iyer, L., & Somanathan, R. (2005). History, social divisions, and public goods in rural India. *Journal of the European Economic Association*, 3(2-3), 639-647.
3. Banerji, D. (2005). Politics of rural health in India. *International Journal of Health Services*, 35(4), 783-796.
4. Barrow, R. (2015). *Utilitarianism: A contemporary statement*. Routledge.
5. Bentham, J., & Mill, J. S. (1961). The utilitarians: an introduction to the principles of morals and legislation.
6. Bhat, R. (1993). The private/public mix in health care in India. *Health policy and planning*, 8(1), 43-56.
7. Brenner, J. (1996). Human rights education in public health graduate schools: 1996 survey. *Health and Human rights*, 2(1), 129-139.
8. Brenner, J. (1996). Human rights education in public health graduate schools: 1996 survey. *Health and Human rights*, 2(1), 129-139.
9. Darwell, S. (2008). Deontology.
10. Das Gupta, M. (2005). *Public health in India: an overview*. The World Bank.
11. Friis, R. H., & Sellers, T. A. (2014). *Epidemiology for public health practice*. Jones & Bartlett Publishers.
12. Gao, Y. (2012). Marketization of the Public Health Care in response to the Economic Reforms in China: A decrease in the government’s responsibilities and growing risks and insecurity among individuals?.
13. Garrett, T. M., Baillie, H. W., Garrett, R. M., & McGeehan, J. F. (1989). *Health care ethics: Principles and problems*. Englewood Cliffs, NJ: Prentice Hall.