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The quest for culturally sensitive health care systems in Scotland: insights for a multi-ethnic Europe (JPH-11-0189.R1) – Bhopal R et al.

## **Commentary**

## Philosophy is the key

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In his article Bhopal sets out clearly the fundamental importance of culturally sensitive health care systems and proposes that developments in Scotland can provide valuable learning for a multi-ethnic Europe. It is timely to be reminded of the still widespread presence within health care systems of stigma, as well as poor understanding of inequities in health, the meaning of ethnicity or the needs of minority groups. On a more personal level Bhopal laments that professionals have hardly ever heard of or read about law or health policy, but stresses the crucial nature of individual action and professional sincerity.

These two strands of Bhopal's critique of lack of progress on culturally sensitive health care systems in Europe – limited developments in health policy and health institutions, and the lack of awareness amongst health professionals – provide a powerful reminder of the current state of play, despite the excellent foundations for improvements that have been developed in recent years.

It is worth stepping back to consider why the work that Bhopal describes is so important. At its heart lies a value that any civilised healthcare system must place centre-stage: equality. Bhopal's work shows two distinct ways in which equality is vital. First, there are health inequities (inequalities that are unfair) between different ethnic groups which must be tackled. Marmot's work provides vivid examples of ways in which unequal starting places and unequal wealth lead to unequal health outcomes. Some such differences are immense – for example, the 28 year difference in life expectancy between some rich and poor parts of Glasgow. The philosopher John Rawls, in his classic work *A Theory of Justice* argues that how well the worst off groups fare is a key litmus test for a just society. According to his famous "difference principle", inequalities in the things that really matter can be justified only if allowing these inequalities makes the position of worst off groups better than it would be under strict equality. Limited inequalities in wages can be justified

according to this principle, but the type and the current scale of health inequalities cannot. iv

Culturally sensitive healthcare matters for its own sake as well as the important effects it has in reducing health inequalities through better targeted services. Providing culturally inappropriate healthcare sends a corrosive message that only some, but not all, ethnicities fully count. The philosopher Avishai Margalit coined the idea of the decent society as one whose institutions do not humiliate its members. It is this striving after decency which explains why culturally sensitive healthcare matters. Public bodies cannot treat individuals as equals unless they ensure services are suitable for and tailored to people of all ethnicities.

It is salutary to be reminded of the importance of philosophy to health policy and to public health theory and practice. <sup>vi</sup> In his paper Bhopal shares important experiences from Scotland and presses, quite rightly, for more progress in Europe. Yet, as another contemporary philosopher Ludwig Wittgenstein would argue, <sup>vii viii</sup> it is action on such ideas that really matters.

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