## **COMMUNITY PERSPECTIVE**

## Introduction

In the first methodological paper, Tom Sensky outlines ethnographic techniques for eliciting health beliefs, where the lay informant is viewed as the expert. While making the point that every clinical consultation is, in one sense, a cross-cultural exchange (as clinicians have their own distinct culture) Sensky highlights the need for health professionals to be aware of the ethnocentricity of their own attitudes to patients. This issue should be addressed in medical training programmes.

Naomi Pfeffer and Clare Moynihan also raise a number of methodological issues, including who are the most appropriate members of different ethnic groups to become involved in programmes: participation by a broad constituency will probably prove to be the best approach. The authors' perspective is that of the academic, still largely drawn from the white majority population (an issue taken up in the discussion following this session). However, research on minority ethnic health needs also arises when members of the ethnic groups themselves raise issues and ask for action. This highlights the importance of dialogue between researcher and community, so that academics do not just pursue their own agenda, but address legitimate community needs.

The two final papers by Raman Bedi and by Cecilia Farren and Jennie Naidoo address the key issue of smoking and tobacco use among minority groups and discuss effective measures for tobacco control at community level.