

What Ignorance Reveals

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In John Rawls's original position, behind a veil of ignorance, you know nothing of yourself, your abilities or your position in society. You know nothing of your sex, race, nationality, or individual preferences. All you know is that individuals are free and morally equal beings, and that when the veil is lifted, society will comprise a natural distribution of assets and abilities distinguishing groups of people from one another.

From this hypothetical vantage point, Rawls pointed out, we are forced to become detached from ourselves. While our usual opinions regarding what is just and unjust are informed by our experiences, race, gender, class, and so on, behind the veil of ignorance none of that exists. Behind the veil of ignorance, we are forced to confront the possibility that we may be part of another group; a group that may be advantaged or disadvantaged in ways different from our own.

I was introduced to Rawls's *A Theory of Justice* by a public policy professor during my second year at UNC. I was initially intrigued by the work, but ultimately cast it aside. As a public health student studying nutrition, I didn't see its relevance to me. I came to UNC believing in an unquestionable truth: that the aim of improving people's health always coincided with what was good and what was just. Public health interventions were scientifically backed programs with the potential to reduce mortality and increase quality of life. Who could argue against such outcomes? For me, the areas of public health and health policy were divorced from notions of justice. At UNC, however, I learned firsthand that anyone with the power to influence policies or programs, particularly those that are health-related, has a responsibility to grasp what is and is not fair.

In a service-learning course during my third year at UNC, I was paired with the Inter-Faith Council for Social Service (IFC), an organization working to respond to the effects of poverty in Chapel Hill and Carrboro. The IFC had announced its plans to demolish and rebuild their community center, and I jumped at the opportunity to become involved with planning a new food pantry that would better serve the needs of community members. In redesigning the way the food pantry operated, I saw an opportunity to address nutritional challenges faced by the food insecure. Perhaps, the pantry could integrate nutritional education into every interaction with a community member. Or, maybe the pantry could

start providing boxes of food that contained the most nutritionally balanced set of ingredients.

During my first meeting with the community services director, I expected to rattle off the numerous ways in which the food pantry could be transformed into a community resource that improved people's diets and overall health. But the IFC already had an idea in mind that they wanted me to investigate further: the client-choice model. The premise was simple, the food pantry would be redesigned to resemble a supermarket. Clients could then come and "shop" for their food just like customers at a

grocery store would. With the client-choice model in place, the community director explained, the IFC could return a sense of dignity and autonomy to community members, especially to those that felt ashamed asking for handouts.

Hearing the rationale behind the client-choice model, it finally occurred to me that I had never taken the time to understand what it might be like to have no control over the foods on my plate. I had neglected to ask one simple question: is it fair to decide what foods people eat regardless of whether the intention is to improve their health? Returning to the same professor that had introduced me to Rawls, I learned that the conflict between paternalistic policies and personal autonomy was a recurring ethical dilemma in almost all of public health practice. I began to realize that the best public health interventions were not those that could yield the best health outcomes, but rather those that were designed with consideration of people's humanity, dignity, and autonomy.

Rawls's original position asks us to separate ourselves from the identities that constitute our day to day experiences to determine whether a policy is fair. Why can't we approach the numerous public health challenges we face with the same determination to adopt a perspective that is detached from the biases and preconceived notions that color our individual worlds? Only when we are willing to examine our most fundamental assumptions about what is good for society, can we begin to assume the responsibility of changing it. It shouldn't be a bold and arduous project for each of us, behind a veil of ignorance, to see ourselves in others.