Inter-organisational collaboration for responsive sustainable health care.

The study revealed that in a multicultural population, it is realistic to implement cross-cultural practice through reflective health workers who are able to negotiate health care with immigrant minority clients. This requires an organisational environment that is accepting of differences, that creates situational opportunities to learn about cultural differences and that deals with the power difference between the health worker and the client that is otherwise a barrier to equitable negotiation. The study has revealed that a critical factor in creating this environment is the skill of the health service manager, particularly when situations arise of cross-cultural conflict. The paradoxical nature of cross-cultural conflict is described as providing both the opportunity to develop understanding through dialogue, as well as the barrier to understanding if attempts are made to avoid it.

To influence change towards more responsive mainstream health care services the study examines first why inside change agents need to be positioned with senior managers and then second how communities can apply external change influence through their involvement in the organisation’s decision-making processes. To provide sustainable, integrated and responsive health care the mutual benefit is described when mainstream health care organisations collaborate with immigrant and other community-based organisations. The immigrant and other community-based organisations bring responsiveness through their connection to communities and the mainstream health care organisations bring the sustainability of their larger resource base.

The new contribution to knowledge that this study provides is the implementation framework for change across the six major themes. The framework is generic to cross-cultural health care delivery and so should be widely applicable in multicultural environments. Because of its focus on implementation, the study fills a gap in the research that has hitherto not led to responsiveness to immigrant minorities broadly across the health system.