

POSTER ABSTRACT

Working towards inclusive integrated care: a possible lens

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According to the World Health Organisation (WHO), integrated care's primary goal is meeting people's needs. Whichever integrative care model is used, the way to gauge the success of this goal is the healthcare user's satisfaction with the care provided, and the extent to which their needs have been met. In the super-diverse context of most Western-Europe cities and regions this is a challenge.

Ethno-cultural diversity as one of the visible aspects of diversity resulting from migration is increasing within our population. The question is therefore how we ensure that integrated care is inclusive for this growing ethnocultural diversity among care users. Our studies involving older labour migrants with dementia and their caregivers, both informal and formal, in Belgium indicated that these older adults do not receive care that meets their needs. The reason for this misfit in care is still too often and one-sidedly sought in these older people's cultural background. Much less attention is paid to the exclusionary mechanisms within the care system.

To sharpen the picture, we developed a conceptual lens for inclusive care. This lens looks at the influencing factors for inclusive care at micro, meso, macro and chrono levels. It helps us to observe the complexity of these influencing factors and to avoid the essentialist framework shaping the current debate on provision of care for the 'culturally other'. We detected three building blocks for complexity-responsive integrated care: 1) awareness of the intersectional position of the 'other', 2) the need for inclusive care organizations and inclusive care landscapes in a globalized world, and 3) addressing societal exclusionary mechanisms. These building blocks can be a starting point to recognize the intersectional identity of each person involved in care, including the care provider's, as a stepping stone to inclusive responsive care. This implies that the exclusionary mechanisms associated with social positions are recognized and addressed at micro, meso and macro level. To conclude, the proposed intersectional inclusiveness is a path worth exploring in attempts to achieve the ultimate goal of integrated care: meeting the needs of all care users.