

What can Compassionate Communities learn from the “Caring Neighbourhood”-movement in Belgium?

Prof. Liesbeth De Donder

*“There was a family, a mother with three children. That little girl has a degenerative disease. And she is already in a wheelchair. They live on the third floor. That mother has to **carry her downstairs and upstairs on her back**. That girl can't go outside or anywhere by herself. I have been **looking for them for over a year, for a solution. Nobody helps**. I really find that ... You can't imagine that. There are many cases like this.”*

(Professional, sector persons with disabilities)

Testimonials from informal carers about caregiver burden:

Carer who has been taking antidepressants for 4 months: *"If I didn't take them, I would have already been in hospital. I cried every day. From the moment I got out of bed."*

Informal carer who cooks for 18 people in her neighbourhood, everyday.

Informal carer who cares for her father with dementia living at home, paralysed mother and father-in-law with incontinence and diabetes.



1. Background to “caring neighbourhoods” in Belgium

“Socialisation of care”

PHASE 1

De-institutionalisation

1980 - 2000

Care outside the community
(in institutions/ nursing homes)

From...

Professional care outside the walls
of institutions => Care in the
community by professionals

Towards...

“Socialisation of care”

	PHASE 1 De-institutionalisation	PHASE 2 De- professionalisation and Individualisation
From...	1980 – 2000 Care <u>outside</u> the community (in institutions/ nursing homes)	2000 – 2020 Care <u>in</u> the community (by professionals)
Towards...	Professional care outside the walls of institutions => Care <u>in</u> the community by professionals	Care <u>by</u> the community (focus on self-care, informal care, own social network, neighbours)

DEFINITION

In a caring neighborhood...

“the conditions are met so that people, **regardless of age** and major or minor **support needs in multiple life domains**, can (continue to) **live comfortably in their home** or familiar neighborhood. It is a neighborhood where **young and old live together**, where people feel good and secure, where quality of life is central, where **residents know each other and help each other**, where individuals and families with large and small support needs receive support and where **services and facilities are accessible and available.**”

Context and conditions

For all ages

Broad view on care/needs

Ageing well in place

Intergenerational

Neighbours care and support

Accessible care services

3

2014-2016



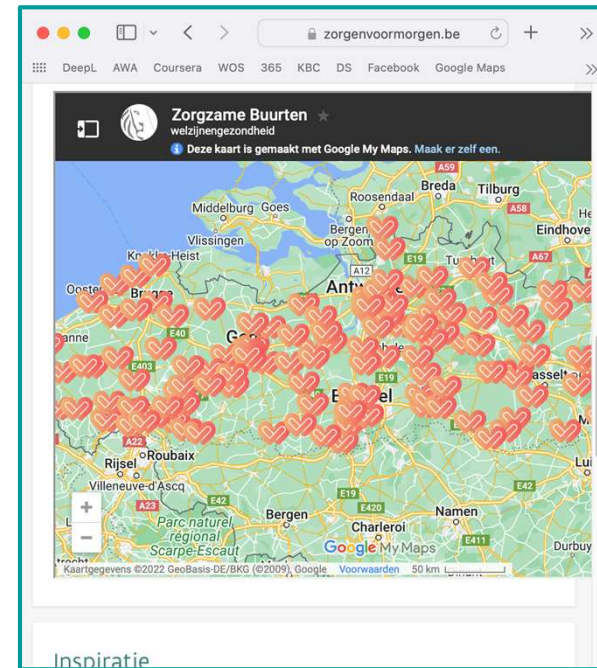
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2018-2021



133

2022 - 2024





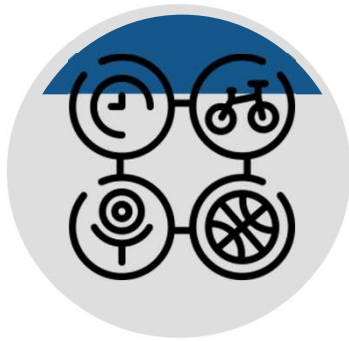
2. Lessons learned from 8 years “caring neighbourhoods”

CONNECT

02 NETWORK BASED GOVERNANCE



CONNECT



Connecting activities



CONNECT



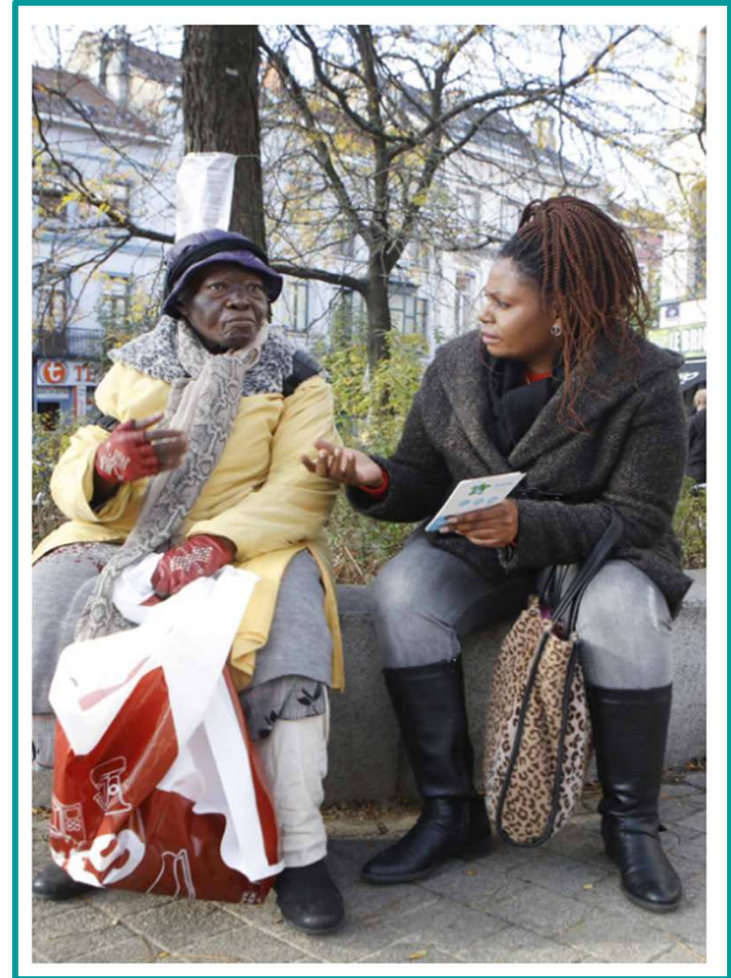
PUBLIC SPACES
CONNECT

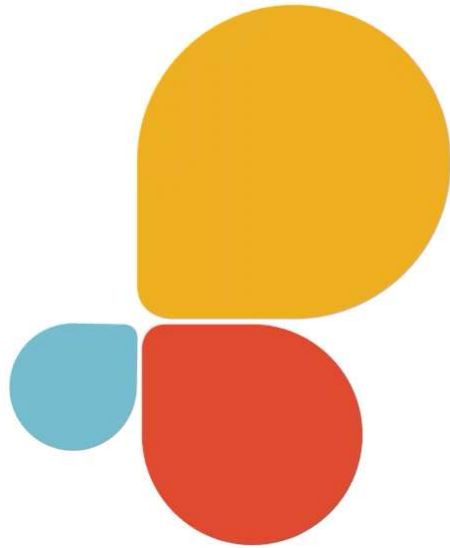


CONNECT



CONNECTORS





You do not know what you are missing

An innovative 'community care' model
tailored to a vulnerable neighborhood

TOO LITTLE ATTENTION FOR...



01. "CLASSICAL" HEALTH CARE

Where was the GP? Where was the home nurse?



02. HOUSING

Hardly any projects on housing and living environment (e.g. housing quality, housing adaptation, moving, housing innovation, cohousing, mobility, transport, etc.)



03. COMBATING STEREOTYPES

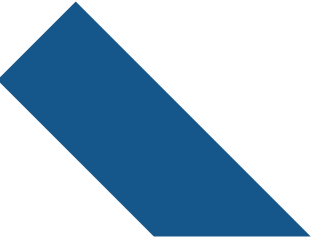

Need for combating NIMBY-sentiments, stereotypes attached to frailty, ageism and care stigma.



TOO LITTLE ATTENTION FOR...



04. EQUITY – SOCIAL JUSTICE



Attention for people in disadvantaged situations, experiencing social exclusion. How can caring neighbourhoods increase access to quality care, not increase the care gap?



05. SYSTEMIC CHANGE

Caring Neighbourhoods are more than merely 'neighbourhoods where neighbours care for each other'

No warm solidarity (i.e. engagement of citizens for their community) without cold solidarity (i.e. structural, institutional basis).



06. DYING, DEATH, GRIEF

Are caring neighbourhoods intended to support "low care" and "little help"?

Or to help people with complex needs, in the most difficult moments of life?



3. FINAL REFLECTION

"I would say 'let it go'. Let people go, let end results go, let project plans go, let people do their thing. That does not mean abandoning or deserting them. It's holding on differently."

social worker in the "soup stone project"



Thank you for your attention

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Society and Ageing Research Lab

