

**COMPASSIONATE COMMUNITIES UK RELEASES
NEW EDITION OF THE COMPASSIONATE CITIES CHARTER**

*Our city will promote **compassionate communities** programmes to engage neighbourhoods and local streets in direct care activities for their local residents living with health crisis, ageing, caregiving, and grief.*

Professor Allan Kellehear and Dr Julian Abel have created a new edition of the Compassionate City Charter, adding in the ABOVE extra domain about compassionate communities as point 8 of 13. The reason for doing this is to bring the charter into streets and neighbourhoods, making it as inclusive as possible in covering the full range of human activities. This new addition to the Charter creates: (1) recognition of the local neighbourhood as a key civic part of all cities, and (2) integrates both compassionate cities and compassionate communities as seamless public health endeavours in end of life care at both the local and wider levels that shape and influence modern cultural life.

The Charter is a 13 point action list that encompasses the major areas that can be part of creating a society in which death, dying, loss and caregiving is everyone's civic responsibility. It includes our workplaces, our educational institutions, our churches and temples, our unions, our health and social care institutions and our public facing organisations such as museums and media. The central key is that we all experience crisis, caring, grief, and loss and how we support each other makes an enormous difference, both to the person receiving the support and those giving it. The charter has focussed on institutions and public bodies. In the context of civic action, streets and neighbourhoods are an integral part of our lives. How we help care for the dying or the bereaved is a social experience. What happens in our homes and local streets is as equally important as the support experienced while in schools and workplaces and this is now reflected by adding in compassionate communities at a neighbourhood level to the Charter.

The Charter does not prescribe *how* to enact the 13 domains. The emphasis is to identify and map all the areas that can benefit from integrated action on returning death and dying into the hearts of everyone involved, wherever they find themselves. The methods of implementation - whether initially 'top-down' or bottom-up' approaches - are united in their requirements for a participatory process, one in which the people involved are the ones who determine how best to meet local needs. This is true whether it be a policy in a workplace or a local neighbourhood that supports its dying and caregivers. How this happens will depend on those involved who will interpret what is needed to best fit local circumstances.

The Charter is as inclusive and broad as possible. People isolated in their neighbourhoods may need help and support but not have the social contact to be able to get it. Proactively supporting those people through local knowledge and attention to neighbours and community members weaves compassion and care into the fabric of our homes and self-identity, and from there, the rest of our lives.