PROGRAMMES, PROJECTS AND ACTIVITIES
BEST REFLECTING THE PRINCIPLES AND OBJECTIVES
OF THE CONVENTION

Deadline 31 March 2022
for possible selection in 2023

Instructions for completing the proposal form are available at: https://ich.unesco.org/en/forms
Proposals not complying with those instructions and those found below will be considered incomplete and cannot be accepted.

A. State(s) Party(ies)
For multinational proposals, States Parties should be listed in the order on which they have mutually agreed.

Belgium

B. Contact person for correspondence
B.1. Designated contact person
Provide the name, address and other contact information of a single person responsible for correspondence concerning the proposal. For multinational proposals, provide complete contact information for one person designated by the States Parties as the main contact person for all correspondence relating to the proposal.

<table>
<thead>
<tr>
<th>Title (Ms/Mr, etc.):</th>
<th>Ms</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family name:</td>
<td>Cuisinier</td>
</tr>
<tr>
<td>Given name:</td>
<td>Els</td>
</tr>
<tr>
<td>Institution/position:</td>
<td>Flemish Government - Department of Culture, Youth and Media - Cultural Goods Team; Managing Director</td>
</tr>
<tr>
<td>Address:</td>
<td>Arenbergstraat 9, 1000 Brussels, Belgium</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>+32 (0) 2 553 41 40</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:els.cuisinier@vlaanderen.be">els.cuisinier@vlaanderen.be</a></td>
</tr>
<tr>
<td>Other relevant information:</td>
<td><a href="http://www.vlaanderen.be/cjm">www.vlaanderen.be/cjm</a></td>
</tr>
</tbody>
</table>
B.2. Other contact persons (for multinational files only)

Provide below complete contact information for one person in each submitting State, other than the primary contact person identified above.

C. Title

Indicate the official title of the programme, project or activity, in English or French, that will appear in published material. Not more than 200 characters

Safeguarding foster care heritage in the merciful city of Geel: a community-based care model

D. Geographic scope

Tick one box to identify whether the geographic scope of the programme, project or activity is essentially national, subregional, regional or international (the last category includes projects carried out in geographically non-continuous areas).

☒ national (within a single country)
☐ subregional (more than one country)
☐ regional (more than one country)
☐ international (including geographically non-continuous areas)

E. Geographical location

Indicate the locations in which the programme, project or activity was or is being carried out. Not more than 150 words

The programme is carried out in the city and region of Geel (51° 10' 0" N, 5° 0' 0" E) in Belgium, while it has relevance and is inspirational for other communities and groups throughout the world.

F. Status

Tick one box to identify whether the programme, project or activity is completed or in progress at the time the proposal is submitted.

☐ completed
☒ in progress

G. Name of the communities, groups or, if applicable, individuals concerned

Identify clearly one or several communities, groups or, if applicable, individuals concerned with the proposed programme, project or activity. Not more than 150 words

The 135 foster families and their guests (a foster patient is called ‘guest’ in Geel) put psychiatric family foster care (PFC) into practice on a daily basis. They are supported by the multidisciplinary medical team of the Public Psychiatric Care Centre (OPZ Geel). The inhabitants of the area of Geel include people with a psychological vulnerability in their community and in various ways, document, reinterpret and pass on the practice, the narrative and values of PFC. The interaction between OPZ Geel, the city of Geel, foster people and families is anchored in the inclusively composed psychiatric family foster care (PFC) council that meets several times a year.
This heritage community has international connections with practitioners, stakeholders and organisations in various places that are inspired by and interacts with the Geel PFC tradition.

H. Domain(s)

Tick one or more boxes to identify the domain(s) of intangible cultural heritage covered by the programme, project or activity, which might include one or more of the domains identified in Article 2.2 of the Convention. If you tick 'others', specify the domain(s) in brackets.

☐ oral traditions and expressions, including language as a vehicle of intangible cultural heritage
☐ performing arts
☐ social practices, rituals and festive events
☐ knowledge and practices concerning nature and the universe
☐ traditional craftsmanship
☐ other(s) (healthcare and health practices)

1. Description

Criterion P.1 requires that 'the programme, project or activity involves safeguarding, as defined in Article 2.3 of the Convention'. Article 2.3 states that "Safeguarding" means measures aimed at ensuring the viability of the intangible cultural heritage, including the identification, documentation, research, preservation, protection, promotion, enhancement, transmission, particularly through formal and non-formal education, as well as the revitalization of the various aspects of such heritage'.

For sections 1.a and 1.b together, provide succinct descriptions of the programme, project or activity and its main components, describing what actually happened or is underway.

1.a. Background, rationale and objectives

Describe the context in which the programme, project or activity was created – what safeguarding needs were identified and by whom, and how the priorities were identified and established. Identify the primary objectives of the programme, project or activity.

Not fewer than 300 or more than 500 words

Geel, a town of 40,781 inhabitants (2021), is well known for its 700-year-old tradition of community-based mental health practice in which persons with mental disorders are given care in the homes of non-related families. Psychiatric family foster care in Geel is an interesting form of contemporary psychiatric care which has a rich cultural tradition and remains an innovative and inspiring model for the future. It encourages social participation of mentally vulnerable people and destigmatises mental illness. Throughout the years the practice has constantly been recalibrated and enhanced to reflect developments in society and medicine. Past and ongoing safeguarding programmes are well documented, providing insight into the resilience and core values of the PFC model.

Background

The origins of the PFC tradition in Geel lie in the 13th century, in the legend and cult of Saint Dympna, invoked in the region in prayers to cure insanity. Pilgrims – some of them being labelled as ‘possessed’ or ‘mad’ – travelled to Geel to complete religious penitence rituals. The people in need of care were hosted in local families and many of them decided to stay. From 1850 on, Geel family care evolved from being a hagio-therapeutic system to a scientifically and medically supported programme. Between 1850 and 1960, the model took an enormous flight both in and outside Europe. Since 1960, when facilities elsewhere began to improve, the numbers in foster care in Geel dropped but the PFC model was continued in a dynamic way with the support of the local community. Today, 135 guests live with foster families, and the model continues to develop and adapt to evolving contexts.

The PFC safeguarding programme
The PFC system in Geel is resilient thanks to its deeply embedded connection with the local community and the intergenerational transmission of the foster care practice in households. At the same time, it is fragile and challenged by changes in modern society (individualisation, urbanisation) and mental healthcare (diversification of care). The city council, OPZ Geel, the PFC council and various organisations are aware of these challenges, collaborating in a multi-layered, holistic safeguarding programme intertwining medical and cultural methods.

The Geel PFC model rests today on three pillars that function in an integrated approach:
1. Foster families providing care, room and board
2. The Geel community and the local population allowing an inclusive integration into society
3. OPZ Geel ensuring a professional healthcare ecosystem

The safeguarding programme aims at (1) transmitting the PFC practice, the Saint Dympna legend and narrative of the 'merciful city' Geel; (2) researching the healthcare system from historical, medical as well as anthropological perspectives; (3) cultivating a caring culture and ecosystem.

Through the Register of Good Safeguarding Practices, the PFC programme aspires to share its experience in a safeguarding practice embodying the 2003 Convention’s operational directive 179 and giving substance through living heritage to sustainable development goal 3, i.e. the aspiration of achieving quality healthcare for all.

### 1.b. Safeguarding measures involved

Describe the specific safeguarding measures that the programme, project or activity includes and why they were adopted. Identify what innovative methods or modalities were involved, if any. Not fewer than 300 or more than 500 words

<table>
<thead>
<tr>
<th>Research, identification, documentation</th>
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<tbody>
<tr>
<td>Research initiatives and publications have been elaborated since the 19th century by international medical and cultural scientists, as well as the heritage community itself (OD179a). In 2007, OPZ Geel, the city and its heritage workers, the Hospital Museum and local high schools started an oral history project, funded by the Flemish government: 'Among the people: The remarkable history of PFC in Geel'. Former medical staff, foster families, guests and citizens were interviewed. Testimonies on daily life from the 1930s until now were recorded, resulting in a collection of audio-visual oral sources and projects. All research documentation is preserved in OPZ Geel, the city archives and the Hospital Museum.</td>
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<tr>
<th>Transmitting, enhancing and enshrining the PFC practice</th>
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<tr>
<td>PFC is viable because of its intergenerational transmission within families and the community. Additionally, OPZ Geel and the Belgian state financially and legally support the system and the foster families. In 1850 the Belgian Parliament passed the Law on the Mentally Ill. Geel was defined as a 'healthcare community' ('colony') supervised by the state and supported by a psychiatric hospital. Since then, laws and decrees define the conditions, responsibilities and rights of foster families, guests and OPZ Geel (OD179b). The quality of care continuously increases and new insights are being absorbed and balanced with the PFC core values. Adjustments are initiated and monitored by medical professionals as well as the PFC council consisting of foster families, guests, OPZ Geel and community representatives. Recent enhancements are the development of a special PFC model for children, collaboration with other forms of foster care, better coordination with other healthcare services, the implementation of the F-ACT methodology and new rehabilitation programmes empowering guests to take on an active part in these processes.</td>
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<tr>
<th>Raising awareness, education and transmission through festivals, art and storytelling</th>
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<tr>
<td>Storytelling and celebrating were and remain an important method to connect people to the tradition. Since the Middle Ages, an altarpiece in the Saint Dympna church has been telling the story of the town's patron saint. Started in 1900, a procession evokes Geel's history of caregiving.</td>
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New formats were developed, such as the GheelaMania theatre project during the quinquennial Dympna Days, involving a large part of the population. In addition to this Dympna festival, other initiatives bring the story of Dympna and PFC continuously to people's awareness. In the visitor centre of OPZ Geel, trained guides are experienced experts sharing their own story struggling with mental illness as well as the story of Geel and PFC. The Hospital Museum has an educational programme reflecting on Saint Dympna's legend and its meaning today.

**Fostering and promoting a caring ecosystem**

Geel is nicknamed the 'Merciful City'. The PFC tradition's values are everywhere: in policy plans, participatory projects, community life and in the respectful language used in communication. Geel constantly revitalises its attribute 'merciful'. The safeguarding efforts also highlight the value of collaboration and complementarity among diverse healthcare approaches by nurturing a warm-hearted ecosystem where both cultural and healthcare practices (as living heritage) and medical institutions merge (OD179c).

1.c. Competent body(ies) involved

Provide the name, address and other contact information of the competent body(ies), and if applicable, the name and title of the contact person(s), responsible for the local management of the programme, project or activity.

<table>
<thead>
<tr>
<th>Name of the body:</th>
<th>Openbaar Psychiatrisch Zorgcentrum Geel [Public Psychiatric Care Centre Geel]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and title of</td>
<td>Bert Boeckx, archivist - coordinator</td>
</tr>
<tr>
<td>the contact person:</td>
<td>Address: Dr.-Sanodreef 4, 2440 Geel, Belgium</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>+32 14 57 91 11</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:info@opzgeel.be">info@opzgeel.be</a></td>
</tr>
<tr>
<td>Other relevant information:</td>
<td><a href="https://www.opzgeel.be/nl">https://www.opzgeel.be/nl</a></td>
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<th>Name of the body:</th>
<th>Stuifzand</th>
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<tbody>
<tr>
<td>Name and title of</td>
<td>Janna Lefevere, coordinator cultural heritage</td>
</tr>
<tr>
<td>the contact person:</td>
<td>Address: Werft 30b, 2440 Geel, Belgium</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>+32 486 91 27 73</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:janna@stuifzand.be">janna@stuifzand.be</a></td>
</tr>
<tr>
<td>Other relevant information:</td>
<td><a href="https://www.stuifzand.be">https://www.stuifzand.be</a></td>
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<tr>
<th>Name of the body:</th>
<th>Gezinsverplegingsraad [PFC Council]</th>
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</thead>
<tbody>
<tr>
<td>Name and title of</td>
<td>Greet Vandeperre, president</td>
</tr>
<tr>
<td>the contact person:</td>
<td>Address: Scheplakens 2, 2440 Geel, Belgium</td>
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<tr>
<td>Telephone number:</td>
<td>+32 478 75 95 82</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:vandeperregreet@gmail.com">vandeperregreet@gmail.com</a></td>
</tr>
</tbody>
</table>
Other relevant information:

Name of the body: Stad Geel [City of Geel]
Name and title of the contact person: François Mylle, general director
Address: Werft 20, 2440 Geel, Belgium
Telephone number: +32 14 56 60 61
Email address: francois.mylle@geel.be
Other relevant information: https://www.geel.be

2. Coordination at the regional, subregional and/or international levels

Criterion P.2 requires that the programme, project or activity promotes the coordination of efforts for safeguarding intangible cultural heritage on regional, subregional and/or international levels. Explain, if applicable, how the programme, project or activity has promoted such coordination. If the programme was or is conducted exclusively at the national level and has not involved such coordination, state so clearly.

Not more than 500 words

The PFC safeguarding programme is locally coordinated and integrated, and nationally supported. Knowledge is built and shared through many international contacts and active regional networks. OPZ Geel and the municipality of Geel have specific experience in the coordination of PFC and how it is embedded in local cultural life. Their safeguarding approach encourages reflection on aspects and ethics of integration, rehabilitation and community care.

In the Middle Ages, clergy organised the foster care. In 1850, the Belgian Parliament decided to tackle the situation of the mentally ill and passed the Law on the Mentally Ill. Oversight of the PFC was transferred from the church to the government. A hospital was built; the town and its environs were officially designated as an open-air asylum, a 'colony of the mad'. Since 1991 the PFC programme has been regulated by a law that determines the general provisions and standards. Facilitating foster care is a core mission of OPZ Geel. This includes sharing medical knowledge and expertise, also on a regional and international level. Over the years, medical specialists and politicians from numerous countries have visited Geel, and still do so, looking for first-hand information. An international research network was founded in the 1980s (G.R.E.P.F.A., Groupe de Recherche Européen en Placement Familial), with representatives from Germany, France, the Netherlands, Austria, Canada, Ireland, England and Sweden. This initiative strengthened the dissemination and development of PFC in Europe and PFC networks on national levels (GREPFA in France, IESA in Italy, Fachausschuss BWF in Germany). Another active network is the editorial board of Dympnha’s Family, a European magazine on PFC.

OPZ Geel staff members and families contribute to workshops, articles, seminars, conferences and research projects and visit PFC programmes abroad. OPZ Geel organises seminars and congresses. In 2000, more than 300 professionals from various countries attended an international congress. In 2005, 500 professionals participated in the International Congress on Balanced Care; and in 2014, OPZ Geel organised the well-attended symposium 'Socialisation of care: PFC as an inspiring model'.

The PFC safeguarding programme is not only medically embedded on a local and national level; but also culturally. Geel takes part in a heritage covenant and organisation 'Stuifzand' working in this area. The heritage covenant is a cultural brokerage instrument supported by the Flemish government (Cultural Heritage Decree 2017). The cultural brokers of Stuifzand mediate between policy makers, researchers, local communities and stakeholders. This links up, together with the inclusion of PFC on the Inventory of ICH in Flanders, with an active network of professional and competent organisations in Flanders (FARO - the Flemish Heritage Interface Centre, Histories,
PARCUM, Workshop intangible heritage, KADOC-KU Leuven, Museum Dr. Guislain) which support networks of heritage communities, e.g. the network of procession culture. Geel also participates in international networks connecting communities with a Saint Dympna cult and tradition (e.g. Tydavnet Ireland; Xanten Germany).

3. Reflection of the principles and objectives of the Convention

Criterion P.3 requires that 'the programme, project or activity reflects the principles and objectives of the Convention'. Identify the specific principles and objectives of the Convention that are addressed by the programme, project or activity and explain how it reflects those principles and objectives in its conception, design and implementation.

The Geel model and its safeguarding methods are a vibrant embodiment of the thesis in the preamble of the 2003 convention that ICH plays an invaluable role as a factor in bringing humans together, ensuring exchange and understanding among them. After decades of inspiring caregiving and medical networking, the Geel case raises awareness in global heritage networks, in particular of the crucial role of communities, groups and individuals and of ensuring mutual appreciation thereof.

Community participation, collectively giving care
This safeguarding practice is a tribute to article 15 of the Convention. The foster families, guests, medical staff, city services, cultural organisations, heritage workers, and researchers all collaborate in transparency and dialogue to safeguard the PFC heritage (also Ethical Principles, EP1+2+4). Projects such as 'Among People' explicitly aim at facilitating access by communities and individuals to research results conducted among them, as emphasised in OD85 and EP7. OPZ Geel visitor's centre is managed by experts by experience, medical experts and social workers, all sharing their own perspectives (OD108, EP3+5+6+11). The Hospital Museum and City Archives are developing participatory programmes making heritage more accessible to everyone and socially vulnerable groups in particular, collaborating with local organisations and individuals (OD109a). In 2019, Geel installed a participation council (OD109b, EP1+2+4). Representation of PFC and mental illness in media and symposia is actively monitored by the communities and OPZ Geel with regard to respectful language, privacy rights and encouraging mentally vulnerable people to own their narrative (OD173b; 105-107; 111-113; EP4+6+7+10+11).

Acceptance as key to integration
One of the PFC principles is to accept behaviour of people with mental disabilities rather than to change it. PFC is all about inclusion, recognising the skills and abilities of people, encouraging them in taking on responsibilities within the household, social network and safeguarding projects (OD 174; OD194;EP3+11).

Medical community healthcare
The PFC heritage healthcare safeguarding programme strongly embodies the principles of contributing to achieving quality healthcare for all (SDG3), and of OD179 on safeguarding ICH and sustainable development through healthcare, as highlighted in question 1b. The ICH communities involved strive for recognition of, respect for and enhancement of a health practice that they recognize as part of their ICH (EP2). They aim to ensure access to knowledge about, participation in and the transmission of this living heritage and safeguarding practice, as stated in OD179b.

Intergenerational transmission
Many foster families open their homes to guests because they grew up in the tradition. Educational projects are organised in OPZ Geel community centre (t Vooruitzicht) and visitor's centre (Passage), schools, museum and during the Dympna Days (Article 13, 14).

4. Effectiveness
Criterion P.4 requires that 'the programme, project or activity has demonstrated effectiveness in contributing to the viability of the intangible cultural heritage concerned'. Describe how the programme, project or activity has demonstrated such effectiveness and how it has contributed concretely to the strengthened viability of the heritage.

Not fewer than 300 or more than 500 words

The Geel PFC model rests on three pillars functioning in an integrated approach (see 1b). Consequently, these are important dimensions to relate to in describing how the PFC safeguarding programme has demonstrated effectiveness and how it has contributed to the viability of this living heritage.

Research and reports demonstrate effectiveness
Since the 19th century, Geel's PFC has been the subject of studies resulting in international publications in which the effectiveness of the Geel model of safeguarding the foster care tradition comes to the fore. The first generation of psychiatrists tried to solve the 'Geel Question': should the mentally ill be protected from society and treated in specialised asylums or is taking part in normal life, like in the Geel model, a better way to treat these guests? In 1902 an international congress settled this question, declaring PFC as a best practice in mental healthcare, which was re-confirmed in a WHO World Health Report of 2001 and other recent studies.

Multiple benefits generated by safeguarding PFC have strengthened viability of the practice
The safeguarding programme has brought advantages to all actors involved. Psychiatric vulnerable people benefit from living and participating in a foster family and broader community, and vice versa. Several studies show that PFC guests have positive attitudes towards this care system giving them structure, safety, autonomy and emphasising their possibilities. Guests are accepted and integrated as valuable members of society, making it more effective than residential care. The PFC safeguarding programme has also been effective from economic perspective: it combines professional care with the efforts of volunteers. The multiplicity of benefits being fostered through the safeguarding approach have been crucial in the viability and continuance of the PFC tradition.

Strong community participation and awareness: driver and guarantee for viability
Safeguarding objectives focussing on transmitting the practice and on the narrative of PFC and Geel have resulted in several participatory processes, community projects and critical reflection: besides the continued practice by the families, guests and OPZ Geel, there is the participation of youth organisations and diverse nationalities in the Dympna procession/parade (1,600 participants in 2015), integration of mentally vulnerable actors in the GheelaMania crew (500 members, 14,700 spectators in 2015), internationally acclaimed art exhibitions on psychiatry and inclusion of Middle Gate I and II (36,548 visitors), the international project ‘Crazy about Dymphna’ curated by the Phoebus Foundation (Estonia 2021, Geel 2022), schools annually visiting the Hospital Museum and OPZ Geel Visitor’s Centre. The projects have yielded enthusiasm in Geel, strengthened respect and awareness locally, regionally and internationally (See also question 5.a).

A culture of integration and inclusion is successfully fostered through the PFC programme
A warm-hearted culture is essential to the PFC tradition as much as PFC is key to cultivating an inclusive ecosystem. It is acknowledged that PFC increased a culture of hospitality in Geel. In the safeguarding programme, successful integration initiatives were elaborated, such as the participation programmes coordinated by the cultural centre of Geel, job (re)integration programmes for mentally vulnerable people, and the foundation of a city's participation council.

5. Community participation and consent

Criterion P.5 requires that 'the programme, project or activity is or has been implemented with the participation of the community, group or, if applicable, individuals concerned and with their free, prior and informed consent'.
5.a. Participation of the community, group or individuals

Describe how the community, group or, if applicable, individuals concerned have participated in the programme, project or activity at all stages of its planning and implementation, including the role of gender.

Without the consent of families, guests and the community, the PFC system would not be viable. In 2010, in an extensive study (Prof. Chantal Van Audenhove – University Leuven), OPZ Geel staff, external experts, foster families, guests, and the general population of Geel were questioned about their familiarity and attitudes towards PFC. The survey reveals that a majority of respondents have a very positive attitude towards this community-based care. All the respondents regretted a decreasing number of foster families and guests, and they are concerned that the system still gets too little recognition as a psychiatric care system from other institutions and the government. The strengthening and awareness of the cultural heritage dimension and the importance of community care has been seen as one of the potential answers.

In preparation of the Dympna Days 2022 and this UNESCO candidature, foster families were consulted (2021-2022), endorsing their engagement towards the PFC model and safeguarding programme.

Participative methods are integrated in the PFC practice itself. Families and guests are actors in the admission procedure. It is not a one-sided process but a three-way system. The guest, the foster family and the mental healthcare professionals all need to agree in the ‘matchmaking’ process.

The foster families and guests have established their own PFC council. With this PFC council, the PFC practitioners can make their voices heard in the strategic planning of OPZ Geel and the city of Geel. A key concept here is mutual respect and consultation. The PFC council organises meetings on specific themes, shares knowledge within the families and guests, and collaborates with other organisations to enhance and promote the PFC practice and experience.

The policy plans of the Geel city council are made and monitored by local groups and communities, and among others represented in a cultural council, a participation council and via participatory decision processes.

The voices and thoughts of mentally vulnerable people are not only heard in councils and policy plans but also via non-formal methods. A good example is the Art Centre ‘Yellow Art’, situated on OPZ Geel grounds. It is a place where people with a mental disorder and others work together on art projects questioning issues and dilemmas in mental vulnerability in relation to society.

The Dympna Days are a community festival supported by the municipality. The organising committee is composed of local historians, artists, school teachers, entrepreneurs and other volunteers. They collaborate with professional directors and many volunteers who coordinate workshops such as the textile workshop (sewing costumes), construction team (building stage sets), catering team, etc. Many inhabitants of Geel and its surroundings do not only participate in the Dympna Days, but they also (co-)organise the festival’s activities. Special efforts are made to represent and celebrate the diversity within the city and PFC tradition: all nationalities of Geel participate in the Dympna parade, PFC guests are part of the GheelaMania musical crew and cast, and young as well as elderly people perform together on stage. The festival enhances social cohesion, inclusion and community awareness.

5.b. Free, prior and informed consent to this proposal and involvement in its preparation

Submitting States Parties shall involve the community, group or, if applicable, individuals whose intangible cultural heritage is concerned in the preparation of the proposal. Describe below how they have participated actively in preparing the proposal at all stages, including in terms of the role of gender. States Parties are reminded that the communities are essential participants throughout the conception and preparation of nominations, proposals and requests, as well as the planning and implementation of safeguarding measures, and are invited to devise creative measures to ensure that their widest possible participation is built in at every stage, as required by Article 15 of the Convention.

The free, prior and informed consent to the submission of the proposal from the community, group or, if applicable, individuals concerned may be demonstrated through written or recorded concurrence, or through other means, according to the legal regimens of the State Party and the infinite variety of communities and groups concerned. The Committee will welcome a broad range of demonstrations or attestations of community consent in preference to standard or uniform declarations. Evidence of free, prior and informed consent shall be provided in one of the working languages of the
Committee (English or French), as well as in the language of the community concerned if its members use languages other than English or French.

Attach information showing such consent and indicate below what documents you are providing, how they were obtained and what form they take. Indicate also the gender of the people providing their consent.

Not fewer than 150 or more than 250 words

This nomination file was compiled by representatives of the PFC communities and local heritage workers (PFC council, clinical staff of OPZ Geel, Dymphna festival committee, community centre Pas-sage, heritage workers of the hospital museum and local archives, cultural brokers of the heritage organisation Stuifzand in the area). The questions in the nomination file were not only discussed by the representatives writing this document but also within OPZ Geel teams, PFC council and heritage networks. The foster families and guests were also consulted by means of a survey and individual talks (group consultation was not possible because of the pandemic) and informed through diverse media. The video for the Unesco candidature was made by a filmmaker living in Geel with a strong personal connection to the tradition. The communities could rely on the expertise of heritage experts of the Flemish Government, Histories, PARCUM and NGO Workshop intangible heritage. Information included in the nomination file was endorsed by the PFC council, OPZ Geel board and the city council. Local community members, cultural, educational and health organisations provided letters supporting this nomination and explaining their connection with PFC or role in the safeguarding programme. Organisations of the international PFC network also expressed their support. In addition, this nomination is also supported by official cultural agencies and organisations, as illustrated by the letters in the annex.

5.c. Community organization(s) or representative(s) concerned

Provide detailed contact information for each community organization or representative, or other non-governmental organization, that is concerned with the element such as associations, organizations, clubs, guilds, steering committees, etc.:

<table>
<thead>
<tr>
<th>a.</th>
<th>Name of the entity</th>
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<tbody>
<tr>
<td>b.</td>
<td>Name and title of the contact person</td>
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<td>c.</td>
<td>Address</td>
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<td>d.</td>
<td>Telephone number</td>
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<td>f.</td>
<td>Other relevant information</td>
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<thead>
<tr>
<th>a.</th>
<th>Histories</th>
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<tbody>
<tr>
<td>b.</td>
<td>Frea Vancraeynest, staff member</td>
</tr>
<tr>
<td>c.</td>
<td>Sint-Amandstraat 72, 9000 Gent, Belgium</td>
</tr>
<tr>
<td>d.</td>
<td>+32 495 56 12 48</td>
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<tr>
<td>e.</td>
<td><a href="mailto:Frea.vancraeynest@historiesvzw.be">Frea.vancraeynest@historiesvzw.be</a></td>
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<td><a href="http://www.historiesvzw.be">www.historiesvzw.be</a></td>
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<tr>
<th>a.</th>
<th>PARCUM, museum and centre of expertise for religious art and culture</th>
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<tr>
<td>b.</td>
<td>Julie Aerts, Staff member</td>
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<td><a href="http://www.parcum.be">www.parcum.be</a></td>
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<th>a.</th>
<th>Workshop Intangible Heritage</th>
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<tr>
<td>b.</td>
<td>Jorijn Neyrinck, coordinator</td>
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<td><a href="http://www.immaterieelerfgoed.be">www.immaterieelerfgoed.be</a> – UNESCO accreditation No 90186</td>
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<th>a.</th>
<th>FARO, Flemish institution for cultural heritage</th>
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<td>b.</td>
<td>Prof. Dr. Olga Van Oost, director</td>
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6. Regional, subregional and/or international model

Criterion P.6 requires that ‘the programme, project or activity may serve as a subregional, regional or international model, as the case may be, for safeguarding activities’. Describe how the programme, project or activity may serve as such a model for safeguarding activities, identifying the particular components, methods or practices that would be relevant in other contexts.

Not fewer than 300 or more than 500 words

In the first place, the eyeopener effect is to be emphasised. By understanding PFC as ICH, the potential of the ‘inter alia’ part of the definition in article 2 of the convention is highlighted and explored. This awareness-raising aspect, the embedded care model, and the safeguarding methods used can all be enriching. Geel is an instructive case in understanding ICH in relation to sustainable development, and in stimulating debate and actions on ethical principles. The challenge to develop ethical approaches and discuss effective practices can be picked up on an international scale and adapted to the local context, with the Geel experience as one of the most developed practices in a European welfare state in transition. The Geel model has inspired other communities in the past and will continue to do so, e.g. recently in the UNESCO MOOC on living heritage and sustainable development.

In recent years Geel has worked on a contemporary interpretation of the title ‘Merciful City’, thus ensuring the transmission of the PFC tradition and values. The community-based care model is extended to other less-favoured groups in society, e.g. people in poverty, socially vulnerable and elderly people. Through participatory projects and empowerment, Geel tries to integrate these vulnerable groups in society. An example of these ‘merciful models’ is ‘Huis Perrekes’, a small-scale homely house where people with dementia are invited to live a meaningful life. Another example is the participation and hospitality programme of the Hospital Museum developing custom-made museum tours for vulnerable people.

In ‘Among the people’ the scholarly quality was ensured in different ways. The involvement of professional archivists and a museum conservator ensured that the collected material was archived according to international standards. The professionals and volunteers received training by FARO on how to conduct a good oral history interview. Storytelling and cultural festivals are other important methods for transmitting the practice and its values. When telling the story of Saint Dympna and PFC, Geel does not stick to the same storyline or narrative form. The city encourages...
organisations and artists to reinterpret and experiment. Examples are the community musical GheelaMania and theatre production Hobbelkind in which a new city legend was written by mentally vulnerable people.

To monitor the quality of care provided, different tools were developed in Geel. There are various written proceedings that describe the processes. For good cooperation, agreements are written down in a contract. There is an agreement between OPZ Geel and the foster family stating that the family is entitled to an allowance and around-the-clock support, as well as the right to information. OPZ Geel protects the privacy of the foster family and expects from the family well-defined quality in terms of housing, hygiene, health and discretion. All agreements, ethical principles and quality requirements are described in the policies of OPZ Geel, federal and regional legislation, thus ensuring participation of the various parties involved. The quality monitoring, as elaborated in Geel, can be developed and carried out as a model for other initiatives and programmes in other countries.

7. Willingness to cooperate in the dissemination of best safeguarding practices

Criterion P.7 requires that 'the submitting State(s) Party(ies), implementing body(ies), and community, group or, if applicable, individuals concerned are willing to cooperate in the dissemination of best practices, if their programme, project or activity is selected'. Describe their willingness to cooperate in such dissemination.

If you attach supporting evidence demonstrating such willingness, especially expressed by the community, group or, if applicable, individuals concerned, indicate below what evidence you are providing and what form it takes. Such evidence, if any, shall be provided in one of the working languages of the Committee (English or French), as well as in the language of the community concerned if its members use languages other than English or French.

Not fewer than 300 or more than 500 words

With UNESCO recognition, we will start with a new Dympna and PFC ICH-safeguarding platform. This platform will consist of representation from communities and organisations concerned with PFC and Saint Dympna heritage, complemented with intangible heritage experts, care experts and researchers. In PFC, the strength is in the equal cooperation between professionals and volunteers, and we also want to see that mix in the Geel ICH platform.

Coupled with this, we want to develop an international ICH network around the safeguarding of PFC. The assignment of that platform will consist of further monitoring and documenting the various safeguarding initiatives, exchanging ideas, seeking solutions to issues related to PFC, formulating policy advice, ICH reporting to the Flemish Government and UNESCO, etc. The platform will be supported by the professional heritage institutions, namely the archive of OPZ Geel and the Geel Hospital Museum, within the wider networks of ICH in Flanders. Together with Stuifzand, these heritage professionals will observe and inspire the Flemish and UNESCO policy on ICH and liaise with the Geel heritage communities.

The recognition by and commitment within UNESCO will be anchored in the strategic plans of the city of Geel, OPZ Geel, vzw Pas-sage, Hospital Museum Geel and Stuifzand. This anchoring in multi-annual plans of these organisations, each supporting and nurturing PFC from their own expertise and remit, forms a strong and sustainable basis.

Organisations from all over the world are interested in the PFC programme, often with a view to developing a variant of it in their own country. Therefore Geel already has considerable experience in setting up and participating in international programmes and events. The contact with visitors from diverse cultures is one of the strengths of OPZ Geel and the city of Geel. Critical questioning of the model encourages reflection.

As made clear in the attached letters of support, several organisations are willing to collaborate in interesting programmes. FARO, the Flemish interface centre for cultural heritage (www.faro.be), and NGO Workshop intangible heritage (BE) (www.immaterieelvergoed.be), UNESCO-accredited NGOs, have had previous experience in international exchange and consultation programmes. Other centres of expertise, such as Histories (www.historiesvzw.be) and PARCUM (www.parcum.be) have the intention and goal to join international projects. Together with the Flemish government, they all play a mediating role.
The Flemish Government (Belgium) has clearly demonstrated a willingness to cooperate in disseminating practices and sharing experiences both regionally and internationally. A trust fund for UNESCO (Flanders UNESCO Trust fund ‘FUT’), also used for ICH, is funded by the Flemish Government and can be mobilised for such purposes. The Flemish UNESCO Commission has put international collaboration in the implementation of the 2003 UNESCO convention very high on its agenda. The recent (2021) ministerial policy document on the Flemish international cultural policy focuses on international cooperation and orientation as means of professionalising the cultural sector both locally and internationally.

8. Assessing the results

Criterion P.8 requires that ‘the programme, project or activity features experiences that are susceptible to an assessment of their results’. Provide concrete examples of assessments that have been or are being carried out.

Not fewer than 300 or more than 500 words

The PFC programme in Geel is listed in the Inventory of ICH in Flanders. As a result, Geel is required to report on implemented and planned safeguarding activities every two years. This report is evaluated by a commission for safeguarding ICH. This process of reflecting and evaluating stimulates the communities and organisations to keep monitoring the evolution of the ICH practice, its viability and its safeguarding.

The regular assessment of the results of safeguarding projects of the PFC tradition is guaranteed thanks to embedding in several policy plans. The strategic planning of OPZ Geel embeds the trend in western societies of more ambulatory working. Actually, this has been done in Geel for centuries. Through regular surveys, OPZ Geel responds to the needs and values of guests and foster families. Thus, the quality is monitored and guaranteed.

In the policy plan of the city of Geel (2020-2025) two objectives refer to the safeguarding programme: ‘Geel increases the coherence and continuity of care for well-being and health’ and ‘Geel takes care of its heritage in a professional way’.

On a subregional level, the ICH programme of Geel is embedded in the strategic heritage plans (2020-2026) of Stuifzand, supported by municipalities adjacent to Geel and by the Flemish Government.

The planning processes in OPZ Geel, the city and the Flemish Community are characterised by principles of quality control through a system of objectives, actions and annual reports. This model of cyclical strategic planning, in which the ICH and safeguarding programmes are part of strategic plans, is transmissible to any form of local government.

The PFC system in Geel has been a regular subject of intensive research by scholars from Belgium and abroad. For instance, the comprehensive study ‘Place of PFC in future mental health policy’ (Van Audenhove) and the long-term work of anthropologist Eugene Roosens (1979 - 2007). Lorraine Kral McClary (Wabash College, US) will conduct research at OPZ Geel in the summer of 2022 entitled, ‘Care in Community: The Agency of Boarders at Geel’. ‘Among people’ (2007-2010) resulted in a large collection of audio-visual oral sources, a book, website, exhibitions and a documentary film. Many of these research results are present in the archives and library of OPZ Geel and the conclusions are shared in conferences and formulated in policy advice. This well-documented history offers possibilities for assessing effects of safeguarding programmes and of the impact of the 2003 UNESCO convention in a long-term perspective.

The Hospital Museum Geel is recognised by the Flemish Government. This recognition is only granted to museums with a high-quality standard in conservation, research, documentation, collection management policy and participation of visitors, communities and organisations. Every five years a commission evaluates how the museum operates.

In 2017 the PFC safeguarding programme in Geel was awarded with the Flemish cultural award Ultima. The Ultimas are assigned annually by heritage professionals to the best projects or programmes in the cultural field in Flanders.
9. Model for developing countries

Criterion P.9 requires that 'the programme, project or activity is primarily applicable to the particular needs of developing countries'. Describe how the programme, project or activity may be relevant to the needs of developing countries and appropriate to their circumstances, identifying the particular components, methods or practices that would be relevant to them.

Not fewer than 300 or more than 500 words

Geel's approach is exceptionally effective at utilising resources that are already present in the community, such as the extra space in people's homes and their capacity to devote time and energy to caring for people with psychiatric illnesses. Hospitals play a minimal role in the daily life of the PFC family members, although its presence makes it possible for the programme to exist in case help is needed. Researchers note that due to their full integration into family and community life, many guests do not require pharmaceutical medications, or require less medication than before entering the programme. The model is therefore highly cost-effective when compared to other forms of care for the mentally ill and has significant relevance for healthcare programmes in developing countries.

In Geel, a common-sense approach prevails. The foster families receive financial support from the government. However, the families are not bogged down by administrative reporting or regulatory requirements, or medical intervention in the process of care. This approach serves as a strong model for how to put in place enough social complexity to enable positive health outcomes without establishing so much complexity that it undermines effective care or makes the commitment untenable for those involved.

All this makes PFC a model that can be of value in countries in which 'resources' are rather scarce and continuous economic growth is increasingly hitting borders. A model like the PFC could inform care arrangements for developing countries that are looking for ways to organise cost-effective mental healthcare at the same time as families are looking for ways to earn an income and individuals are looking for new sources of meaning, status, and identity. But aside from being inexpensive and leveraging existing community assets, the PFC model first and foremost generates strong health outcomes for the mentally ill.

Merely copying the PFC safeguarding programme makes less sense because PFC can only work if it is sufficiently attuned to the social context in which it operates. PFC systems inspired by Geel in and outside Europe demonstrate that similar outcomes can be achieved. An example is the Broadway Houses Communities (BHC) project in New York. The Geel model inspired Ellen Baxter to apply its principles in a metropolitan context where people find it difficult to access mental healthcare. BHC facilitates an inclusive form of 'supportive living' integrating psychiatric guests in neighbourhoods. Another example is the mental health programme in Guam consisting of a saint Dymphna Festival, in which traditional cultural customs are combined with the story of Geel and innovation in mental healthcare.

The procedures for participatory methods and conducting good research are also valuable in other countries. The training courses and interactive workshops for oral history, the sensibility of thinking about documentation strategies, the experiments with presentations of the narrative of the Geel case, all can be translated into capacity-building tools and initiatives.

10. Documentation

The documentation listed below is mandatory and will be used in the process of evaluating and examining the proposal. It will also be helpful for visibility activities if the programme, project or activity is selected. Tick the following boxes to confirm that related items are included with the proposal and that they follow the instructions. Additional materials other than those specified below cannot be accepted and will not be returned.

- documentary evidence of the consent of communities, along with a translation into English or French if the language of community concerned is other than English or French
- ten recent photographs in high definition
- grant(s) of rights corresponding to the photographs (Form ICH-07-photo)
- edited video (from five to ten minutes), subtitled in one of the languages of the Committee (English or French) if the language utilized is other than English or French
- grant of rights corresponding to the video recording (Form ICH-07-video)

11. Signature(s) on behalf of the State(s) Party(ies)

The proposal should be signed by an official empowered to do so on behalf of the State Party, and should include his or her name, title and the date of submission.

In the case of multinational proposals, the document should contain the name, title and signature of an official of each State Party submitting the proposal.

Name: Jan Jambon

Title: Minister-President of the Government of Flanders, Flemish Minister for Foreign Policy, Culture, Digitization and Facilities

Date: 23 MAART 2022

Signature:

Name(s), title(s) and signature(s) of other official(s) (for multinational proposals only).