

# All with You: a new method for developing compassionate communities – experiences in Spain and Latin-America

Silvia Librada Flores<sup>1</sup>, Emilio Herrera Molina<sup>1</sup>, Jaime Boceta Osuna<sup>2</sup>, Rafael Mota Vargas<sup>3</sup>, María Nabal Vicuña<sup>4</sup>

<sup>1</sup>New Health Foundation, Sevilla, Spain; <sup>2</sup>Palliative Care Team, Hospital Virgen Macarena, Sevilla, Spain; <sup>3</sup>Spanish Society of Palliative Care SECPAL, Spain; <sup>4</sup>Hospital Arnau de Vilanova, Lérida, Spain

*Contributions:* (I) Conception and design: S Librada Flores; (II) Administrative support: M Nabal Vicuña; (III) Provision of study materials or patients: S Librada Flores; (IV) Collection and assembly of data: S Librada Flores; (V) Data analysis and interpretation: All authors; (VI) Manuscript writing: All authors; (VII) Final approval of manuscript: All authors.

*Correspondence to:* Silvia Librada Flores, MSc. New Health Foundation, Sevilla, Spain. Email: [silvia.librada@newhealthfoundation.org](mailto:silvia.librada@newhealthfoundation.org).

**Background:** In recent years, compassion has motivated the development of programs oriented to create communities and societies involved in the relief of suffering. The development of compassionate communities and cities begins in each one of us, though it relies on organizations, providers and societies as a whole who need tools and methodologies as a part of a set of actions to help compassionate communities and cities to become a reality rooted widely in social values. In order to describe the “All with You<sup>®</sup>” methodology and its components: a method designed to develop compassionate communities and cities at the end of life that can be extended to organizations, communities, municipalities, cities or countries. In addition, this article tries to describe several experiences from applying the method in different cities and contexts.

**Methods:** A search of models for the development of compassionate communities was carried out initially to guide the elements and phases that could help to create a systematized method that will help organizations to create compassionate communities. After analysing the results, alliances were established with some of the main promoters at the time in the development of compassionate communities to validate the designed method. The city of Seville (Spain) was selected to validate the phases of the method and analyse the results based on a series of indicators. Finally, the methodology is being spread throughout cities in various countries, and the experiences are being evaluated with common indicators.

**Results:** The “All with You<sup>®</sup>” method (Todos Contigo<sup>®</sup> in Spanish) has been developed as a systematic approach that enables anyone interested in building compassionate communities or cities to include all of the elements outlined in the Compassionate City Charter. All with You<sup>®</sup> is a method that includes eight phases that allows organizations to be guided in the development of compassionate communities and cities towards a certification process that is evaluated through a series of structures, process and results indicators. The main actions of this method are based on social awareness, training, and the implementation of networks of care using innovative elements like Community Promoters and the RedCuida protocol to provide support, backing and care for those who face advanced chronic disease and end of life situations. Several cities in Spain and Latin America have already joined the movement of compassionate cities using this method, including four in Spain (Seville, Badajoz, Getxo and Pamplona), four in Colombia (Cali, Medellín, Fusagasugá and Bogotá) and one in Argentina (Buenos Aires).

**Conclusions:** The All with You<sup>®</sup> method has made the development of compassionate communities and cities possible, aligning organizations and cities to promote compassionate acts, and to start creating networks involved in a global community united by a vocation for caring.

**Keywords:** Palliative care; public health; compassionate community; social intervention

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## Introduction

Compassion involves identifying and understanding someone else's suffering, with emotional resonance (active imagination of the person's condition, concern for that person's well-being, and a sense of sharing the distress), and the wish to relieve it (1).

At the end of life, compassion also plays an important role for patients, families, networks of care, and supportive care providers to maintain the relief of suffering, despite the many barriers presented by the medicalized systems—medical or social—in which they must operate. Harnessing the power of compassion to aid those dying and their loved ones could provide invaluable clues as to how to use its energy to promote optimal levels of health throughout the entire lifespan.

Compassion is the key to encourage our engagement as members of society in efforts to tackle the sources of our individual, family and community suffering, or even our suffering as members of a species at risk of extinction. This realization has motivated the design, development and nurturing of compassionate communities and cities, as part of a compassionate life in a compassionate world, as well as focused efforts to promote the emergence of compassionate communities and cities to enhance our collective ability to care for each other at the end of life (2).

Kellehear's theoretical framework of a compassionate community, including the creation and mobilization of internal and external support networks around a person living with life limiting illness is gathering momentum internationally (3-5). This new model of care operating in countries including UK (6), Ireland (7), India (8), Canada (9), Australia (10), Latin America (11) and Spain (2-12) brings together not only health and social professionals and primary caregivers, but also the wider community (including extended family members, friends, neighbours, volunteers and work colleagues) to support people and their families at the end of life. At a wider organisational level, the model of care may also include schools, universities, workplaces, companies, social care/community development organisations and policy makers (13). It is intended that through such a model of community intervention there is an awakening and heightened activity of people regarding palliative and compassionate care (3,14). Compassionate communities integrate and promote palliative care socially in the life of people that are creating solidary caring groups and teaching people how to care for people in end of life situations (15-17).

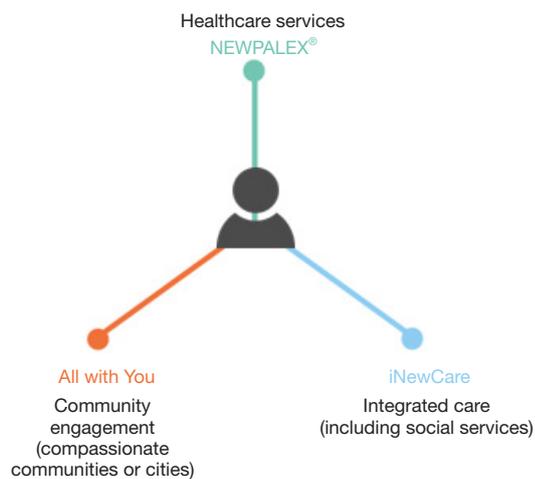
In the context of the new paradigm of people-centred

integrated care models, it is time for palliative care to become the demonstrative example of how to involve excellent palliative care services with social services and the community. So, healthcare organisations and policy makers must be involved in the design, development and evaluation of compassionate communities' models, recognising that they offer an opportunity to support the reconfiguration of health and social services, to reduce costs and facilitate models of integrated care (18,19). This means that a focus on community development provides the opportunity for palliative care to progress towards a vision much more closely linked to public health. So much so that the World Health Organisation (WHO) has included the development of compassionate communities based on awareness, training and implementation of networks in their guide for the planning and implementation of palliative care services (20,21).

In setting up compassionate communities, it is clear that, in addition to raising awareness, empowering the society and bringing together organisations involved in care at the end of life, the understanding of the make-up of the networks of care within both a community setting and at the individual level is considered as fundamental. Only then we can build a personalised response to the needs of people at end of life, adapted to the socio-demographic characteristics of a particular region or country. This is seen when the general public or health professionals act with the community to create and manage networks of care and support (3,22,23). There is evidence (24) that shows that the participation of a larger number of community members at the end of life improves the quality of life of people and their families living with advanced stage diseases or those facing the end of life. Studies also show service and economic impacts, through the reduction in the amount of visits a patient and their relative make to health and social care services, including emergency out-of-hour services.

At an international level, the "Compassionate Communities for End-of-life Care" movement seeks to promote and integrate palliative care socially into everyday life. People are trained to care for people at the end of life, though this does not stop at creating and managing team of volunteers. The concept goes much further: the aim is to enable society to accept and be involved in the backing and care at the end of life as a natural act of compassion.

New Health Foundation (NHF) is a non-profit organisation whose mission is to develop a new model of integrated health, social and community care by improving the effectiveness and efficiency of organisations and the well-being of people with advanced stage diseases, high



**Figure 1** New Health Foundation programmes.

dependency situations and at the end of life.

NHF enables organisations through the judicious and systematic application of three inter-related programs known as: NewPalex®, All with You® and iNewCare® (Figure 1). Each of these three programs complements and strengthens the others, producing a virtuous cycle that builds in momentum with each joint victory towards radical change through the integration of healthcare and social services and community engagement (12). The All with You® (Todos Contigo® in Spanish) programme promotes the development and long-term success of compassionate communities and cities in Spain and Latin America, involving organisations and the general public in the design and execution of activities focused on raising awareness, training, research and implementation of care and support networks for people with advanced stage diseases or who are facing the end of life.

The main objective of the All with You® programme is for people who are living with advanced illness or facing end of life to be able to satisfy their primary needs through the social and health care services provided by palliative and community care, together with their support networks. Within this programme a methodology has been created (All with You®, M = method) to facilitate organisations to develop compassionate communities and cities, supported by a skilled team and tools. Also, to identify the unmet needs of people with advanced illness or who are facing end of life, as well as to obtaining a deep understanding of the network of people and organisations involved in providing care as a part of the All with You® programme, a RedCuida protocol has been developed (25).

Inspired by the compassionate communities' movement the NHF began to identify countries, organisations and different models of implementation of compassionate communities and cities at the end of life, with the main objective being to develop a method that could be extended to organisations, communities, municipalities, cities or countries. With the aim of checking the reliability of this method, the city of Seville in Spain was selected to be the pilot as a demonstration project.

### Objectives

- ❖ To describe a new methodology designed to systematically implement the development of compassionate communities and cities at the end of life;
- ❖ To check and validate this method in a city using a demonstration project;
- ❖ To describe different experiences in Spain and Latin America using the All with You® methodology.

### Methods

From the conception of the model, a series of phases and processes for development were designed that contained criteria in accordance with the Compassionate City Charter (PHPCI) (3) at the end of life that support the following 13 social changes to the city's key institutions and activities.

#### *The process was designed in 4 phases:*

##### **Phase 1. Systematic review of the scientific evidence and design of the methodology**

A search was conducted during 1 year (January 2014–December 2014) about the compassionate communities and cities movement at the end of life with health and social integrated care models based on empathy and compassion around people with advanced stage disease or end of life situations (26).

The search was focused on identifying organisations and institutions that promoted the compassionate communities' movement in order to analyse key elements of the model for the development of community based palliative care from a public health viewpoint.

A search for documents related to this movement was carried out to analyse models already implemented in other cities that would allow an understanding of the different tools used for the development of compassionate cities and communities and to describe the strategic objectives,



**Figure 2** All with You® program image.

indicators and standards that allow measurement of the outcome of their development.

The information would be chosen according to the appearance of the keywords in the institutional webpages, headers and abstracts of the reports and articles. All references or links to institutions would be compiled into a database and sorted by country, city, organisation and document type. Subsequently, two reviewers will consult the information more exhaustively in order to finally select the required documentation.

For the design of this method, a total of 112 articles, 42 reports and 33 organisations were reviewed. The information was screened and culminated with 96 documents obtained for further reading. Of these, 22 publications, 16 reports and 17 organisations were selected to incorporate elements of the development of compassionate cities and communities into the method.

The results were analysed and presented in a narrative text, bringing together the different models and making a comparative analysis of the methods developed and their level of implementation. This method was complimented with in-house tools and resources, as well as step-by-step support from the All with You® team.

From January 2015 to March 2015, the NHF convened the various leaders of the development of compassionate communities in other countries to discuss the elements of the method, establish alliances and extend the movement along with other organisations. Alliances with the International Society of Public Health and Palliative Care (PHPCI) were established and were joined by other

international partners such as the Institute of Palliative Medicine in Kerala (India); Milford Care Centre in Limerick (Ireland); Pallium Latin America Institute in Buenos Aires (Argentina); Pallium Canada and the Societies of Palliative Care of Spain (SECPAL) and Colombia (ASOCUPAC). The method was presented to each of the leaders of these organisations for review and approval.

### **Phase 2. Creation of leadership structures for the implementation of the methodologies (central office and observatory)**

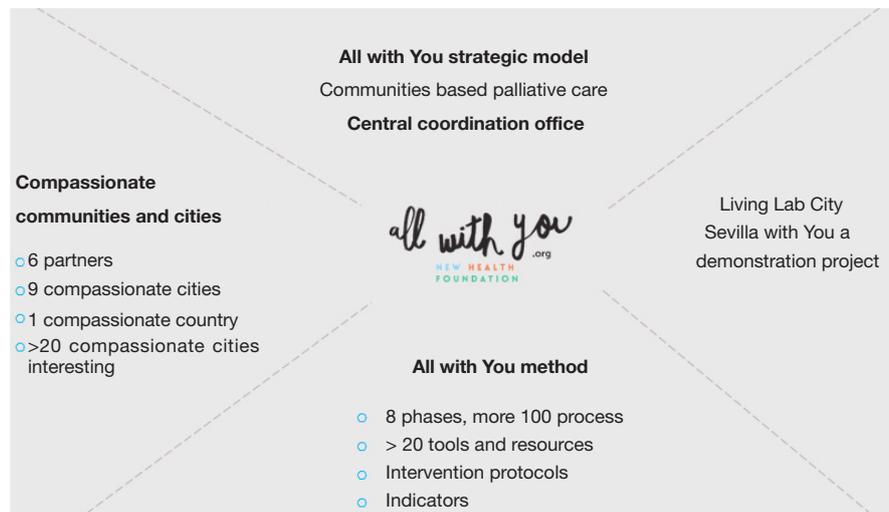
A central office was set up as an observatory structure in order to provide assistance to organisations, raise awareness, train, research, coordinate and evaluate the development of compassionate communities and cities based on the method, and to work as a linked structure of the network of communities and compassionate cities around the world.

From the central office, the NHF focuses its attention and resources to lead the community partner, to provide guidance and training, to support the establishment of alliances and to reinforce the communication and outreach action plan in order to obtain maximum visibility and dissemination of the results obtained. A graphic was designed to represent this methodology (*Figure 2*). The representative partners and the team of experts recognised by the NHF to the initiative then engages in continuous collaborative efforts face-to-face or virtual means in order to secure the successful creation of compassionate communities in the geographic area of interest.

The office is supported by a web platform that contains a compassionate world map where, as an observatory, the initiatives that are being developed by communities and compassionate cities are registered. It also acts as a provider of educational programs (550 hours) to train and recognise participants as experts in the development of compassionate communities and cities.

The Observatory has a large amount of resources and tools for raising awareness and dissemination information of the implementation of activities and the creation of care networks, as well as the activities' schedule of all the compassionate cities, and materials for updating the knowledge supported in lines of research that are developed from the program.

In this way, by joining all the elements described above, the initiatives nurture and connect compassionate centres and institutions, facilitating their convergence into compassionate communities, which come together to form compassionate cities, and in turn form compassionate



**Figure 3** Approach model for the development of compassionate communities and cities. All with You®.

countries that will hopefully give birth to a worldwide movement from which a compassionate humanity will emerge. (Figure 3, Approach model for the development of compassionate communities and cities. All with You®).

### Phase 3. Creation of a living lab and demonstration project to test and check the methodology

A city was selected as a pilot project to analyse the phases of this method and to evaluate, based on a series of indicators, the results measured in terms of effectiveness and efficiency of the health system and the benefits for those people who are in an advanced stage of their disease or at the end of life.

### Phase 4. Replicability of the method within the context of other organisations and cities

The lessons learned from the All with You® method implemented in this city were transferred to other organisations and cities interested in the development of compassionate communities and cities.

## Results

The All with You® method has been developed as a systematic approach that enables anyone interested in building compassionate communities or cities to implement all of the elements outlined in the Compassionate City Charter.

### Result 1. The All with You® Method

All with You® includes an eight-phase method which is co-

developed by members of the team including representatives from the leading community partners and the NHF team. The phases are:

#### Identification of the sponsoring institution and the establishment of contractual agreements

This step defines the leading body that will make the project of a compassionate community or compassionate city possible. These groups tend to be insurance companies, hospitals, universities, foundations, nonprofit organisations and city councils.

#### Definition of the scope of the project and development of a map of key stakeholders

The scope of the project can be defined as a specific population, a group of participating centres or specific activities and initiatives. While defining the coverage of the prospective compassion-driven initiative, the stakeholders are mapped, making it possible to understand how to mobilise them and create resilient care.

#### A baseline analysis and identification of the desired outcomes

This analysis consists of identifying the resources and processes already in place to make a compassionate city or community possible, while defining the plan of action to achieve the proposed goals.

#### Design and implementation process

Once the processes have been rehearsed and revised by

the All with You<sup>®</sup> team, the activities designed are put into action. This enables the leading group to identify opportunities for improvement and perfect their approaches. From this point on, the overall team, representing the host community and the NHF focuses on implementing every key step required to reach the standards established by the charter. Together, they ensure that there is compliance with over 100 parameters, covering issues related to areas as diverse as, community awareness initiatives, the training of stakeholders, registration methods for organisations, research, care network implementation, results monitoring, marketing processes, evaluation methods and asset mapping, among others.

The methodology has also incorporated elements of key innovations that have made the implementation process possible, including:

- ❖ Community promoter: this is a pivotal player in the creation of a successful compassionate city or community as well as for its sustainability. The person in this role is a professional responsible for mobilizing resources and networks around those in need. This role can be filled by anyone who is willing and committed to fulfilling the duties associated with the position, requiring no previous specific training or qualifications. The main mission is to weave a social web and create the ideal environment for those who face end of life situations by aligning social and healthcare services, while strengthening the support systems provided by family, friends, neighbours and other members of the network, and optimizing their resilience and ability to manage crises and any other day-to-day challenges that arise until, and even after, the death of the person;
- ❖ An intervention protocol to enable the creation and management of care networks. RedCuida protocol: to fill the gaps that a particular compassionate community or city have in relation to meeting the needs of people facing the end of their lives within its geographic boundaries, All with You<sup>®</sup> encourages the direct participation of members of the general public, as well as relatives in the care of the frail or those that are dying. To facilitate this, the NHF has created a protocol known as “REDCUIDA” (26) and a new professional role, the community promoter, which are implemented as a part of the All with You<sup>®</sup> method. The protocol was designed to enable the creation and management of care networks to support community members who are

dealing with the complexities of chronic illnesses or those at the end of their lives. It includes seven weekly face-to-face phases aimed at identifying the unmet needs of the person concerned and their family, the identification of others around them who could contribute to satisfying their needs and the assessment and monitoring of their functional status. The protocol also involves an impact evaluation for the support provided, including satisfaction levels of the family members, friends other loved ones, and anyone else involved in the network.

### Verification of achievements

All the activities developed by each of the key agents involved in the project are verified by means of results reports that the organisations to develop and manage themselves.

### Certification and recognition as a compassionate community, institution or city

Following verification by the All with You<sup>®</sup> team of all the activities being conducted, the group will receive recognition and certification as a compassionate community, institution or city. To promote the work being accomplished and to encourage participation in the movement, this milestone will be reported on various news sites, social media and website of the NHF.

### Evaluation and follow-up

Through a series of indicators for structure, processes and results that are common to all cities. This phase allows the measurement of the effectiveness and efficiency of the program used by the Health system, and the benefit transferred to people with advanced disease or at the end of life and its networks of care (*Table 1*).

### Renewal of certification, whenever appropriate

According to the deadlines established with the promoting institutions based on the achievement of the activities, certificates are renewed for the planning of new annual lines of activity that guarantee the sustainability of the programme.

### *Result 2. A living lab: Seville with you*

Seville, Spain (690,566 inhabitants) as the birthplace and home to the NHF, was selected to be the first compassionate city that would demonstrate and shape the All with You<sup>®</sup>

**Table 1** Structure, processes and results indicators for compassionate communities at the end of life (All with You<sup>®</sup> program)

Indicators	Patients/family/network of care	Providers and professionals	Organisations/communities/Cities
Structure	Number of member in the network of care	Number and type of resources: ❖ Board integrated team (health-social and community); ❖ Community promoters	Declare compassionate culture and policies: mission, vision and social values Number of promoter institutions Number of members in the central office Number of resources: Collaborating institutions involved: collaborating and beneficiary centres/volunteer groups, city council, companies, schools, universities, non-profit organisations, hospitals, residential centres, etc.
Process	Inclusion and referral Physical, social, spiritual, emotional needs Identification of a network of care within the community (RedCuida implementation)	Awareness campaigns: ❖ Conferences, congress, workdays, etc. Education actions: ❖ Workshops; ❖ Training courses; ❖ Expert programmes Referrals: ❖ Route for patients/family referral; ❖ Transitional and continuum care; ❖ "RedCuida" protocol to enable the creation and management of networks of care	❖ A method for developing compassionate communities ❖ Strategic alliances and innovative programmes ❖ Multicomponent model (political, management, academic, social) ❖ Pilot projects (Living Lab) ❖ Strategic planning ❖ Programme development ❖ Quality and evaluation ❖ Research actions ❖ Special Interest Groups ❖ Good Neighbourhood's initiatives ❖ Volunteer navigation partnerships
Outcomes	Beneficiaries of the All with You <sup>®</sup> programme: ❖ Increase of care networks; ❖ Improvement of quality of life; ❖ Dignity; ❖ Decrease loneliness; ❖ Decrease burden of the principal caregiver; ❖ Satisfaction of the care network; ❖ Self-compassion; ❖ Self-care Patient and network of care goal achievement Evaluation awareness and education action in: ❖ Dignity; ❖ Commitment; ❖ Empathy; ❖ Humanity; ❖ Compassion	Compassionate health and social care leadership Knowledge of and training in compassion at the end of life for professionals Achieved coverage by the programme Organisational model that allows an accessible, coordinated and evaluable care: ❖ Impact; ❖ Opportunity cost; ❖ Effectiveness and efficiency; ❖ Increased satisfaction; ❖ Decrease burnout Evaluation of awareness and education in: ❖ Empathy; ❖ Humanity; ❖ Compassion	Compassionate organisations, communities and cities that are aware, trained and involved Compassionate community certifications and recognition in organisations involved in the programme Organisation satisfaction

approach, in March 2015.

Since the beginning of its development in the city, the various phases of the method have been created, which has made it possible to analyse the viability for implementation led by other cities.

From March 2015 to December 2015, the city was mapped, identifying key agents and categorizing the types of existing organisations for the creation of partnerships for the development of activities in the city. Once the organisations were identified, meetings were established to create the network of resources involved in the project and to design awareness and training action plans in each of these centres that would help to extend the movement.

As a result, in the first year of networking and activity development, the city hall publicly announced its commitment to the movement, together with 42 other organisations representing the corporate, public and nonprofit sectors. The awareness programmes, which include training workshops in key locations of the city, started to spread with an initial cohort of beneficiaries of over 16,077 general members of the public, 4,040 children, 270 university students, 1,420 professional and nonprofessional caregivers as well as 95 trained health professionals.

As an implementation process with which to cover the needs of patients and the creation of networks, the San Pablo and Santa Justa districts of the city were identified as the epicentre from which waves of compassion could spread to the rest. There, it was possible to put together a 60,000-strong compassionate network, whose leaders host monthly workshops, community gatherings and support sessions, using their community centre as the gathering place. They also hold specialised training courses for professionals, volunteers and citizens within their area, acting as internal connectors with all neighbourhoods, and generating inspiration and offering worthwhile experiences to their peers in other districts.

Implementation of the project began in 2017 in this first district of 60,000 inhabitants, which has managed to bring together professionals from the health, social and community sectors to create work commissions and comprehensively address the needs of these people with the help of the community and with the intervention of the RedCuida protocol. The first results of these interventions are showing an increase in care and support networks (from one person to an average of ten people involved in care); an improvement in the quality of life, especially in the areas of anxiety, loneliness and depression; a decrease in the emotional and physical overload of the main caregiver

thanks to the creation of these networks, and improvement in the satisfaction of family members regarding the care provided in the programme.

During the two and a half years of development of the method in the city, a series of lessons have been identified that have allowed the completion and validation of the method's development phases. Some of these insights include:

- ❖ There is still a lack of knowledge in the population about palliative care, which is why more efforts are needed to raise awareness and to educate society;
- ❖ Talking about death is increasingly accepted by society, so it is necessary to conduct narrative interviews with citizens that allow us to know, as a part of a baseline analysis, the population's needs regarding this topic and regarding the needs of care and support;
- ❖ Being sensitive to suffering does not mean that they are willing to help, so it is important to raise awareness in focused on compassion, relief from suffering and the desire to care;
- ❖ When implementing compassionate cities programmes one of the main barriers is the "community funding" of the project, so it is necessary to strengthen the project from the social responsibility viewpoint;
- ❖ The compassionate cities movement make sense when considering a bigger picture, so it is important to strengthen alliances;
- ❖ Compassion spreads like the flu so it is important to take advantage of a critical mass of population to create a movement;
- ❖ There are numerous needs in people and numerous resources to cover them, but either they are not identified or they are not "linked";
- ❖ The greatest perceived satisfaction is that of helping others: caregivers need to be strengthened;
- ❖ The great challenge and sustainability of the model depends on children taking on and understanding the social value of caring, which is why it is necessary to start awareness and training processes in schools;
- ❖ The indicators designed for the evaluation of the development of Seville with You has allowed guidance for other cities in the development of the phases through the method.

***Result 3. Catalysing the compassionate cities movement: compassionate cities in Spain and Latin America using the All with You® method***

All with You® has been rolled out to other cities in Spain

and Latin America following the same model and method. The implementation of the project in Spain and Latin America has been made through agreements with leading organisations (promoting institutions) in different cities. Each city, as it implements the model, adapts it to its own culture. Actions developed from the beginning of the project in each of the cities are expressed in (Table 2).

#### **“Badajoz with you, Compassionate City” Spain**

Since June 2015, the city of Badajoz started to show interest in the development of the project within their community. Together with the NHF, they embarked upon various awareness campaigns. Since January 2017 the “Asociación Cuidándonos” has started to follow the All with You<sup>®</sup> methodology. They benefit from the support of the city council, the Scientific Palliative Care Spanish Society, The Medical Professional School and the Medical University.

#### **“Getxo with You, Compassionate City” Spain**

Promoted by the “Doble Sonrisa” Foundation, development of its activities began in September of 2017, with the launch of the programme in the city by the city council, public administrations, private institutions and society as a whole. The first phase of the method’s implementation will be based on the identification of key agents and the development of awareness and training activities in the city.

#### **“Pamplona with You, Compassionate City” Spain**

Pamplona launched the programme in October 2017 during the word palliative care day to raise awareness about the importance of caring at the end of life. Promoted by the San Juan de Dios Hospital, it has the fundamental resources required for its development thanks to a large volunteer team that support the actions of project implementation. It has developed programmes in schools (Se + Project) to familiarise parents, teachers and students on the importance of caring and providing support at the end of life. Pamplona will start the methodology in January 2018.

#### **“Medellin with You, Compassionate City” Colombia**

Since November 2015, the Pontifical Bolivarian University started to promote Medellin as a compassionate city, along with the NHF and following the All with You<sup>®</sup> methodology.

They have organized activities for the awareness of its citizens, training programmes for students, professionals

and community members. They have identified and trained community leaders who promote the networks around those who face advanced stage illness and the end of life. The university has built a network of organisations, professionals and members of the public that take part in and create the compassionate network. In addition, they are part of a multicentre research project related with end of life care together with the NHF.

#### **“Cali with You, Compassionate City” Colombia**

Since July 2015, The Palliative Care Foundation in Cali has been promoting the development of Cali as a compassionate city. The Palliative Care Foundation helps to ensure the quality of life of patients who face advanced stage illness. They have been following the All with You<sup>®</sup> methodology since their beginnings. They have the support of a large number of volunteers who help to promote community networks around those who face the end of life.

#### **“Fusagasugá with You, Compassionate City” Colombia**

Fusagasugá has joined the All with You<sup>®</sup> international movement to become a compassionate city since October 2016. The promoter of the project is the Pallium Colombia Foundation. They are inspiring and involving the community to experience the privilege of caring. They are involved in policy development to promote the values of compassion and end of life.

#### **“Bogotá with You, Compassionate City” Colombia**

The Sanitas Foundation promotes Bogotá as a compassionate city in collaboration with the NHF since July 2017. The Sanitas Foundation is a nonprofit institution that provides high quality services in health and social development in Latin America. Its mission is to develop integrated health strategies and create alternatives in the prevention of illnesses and good health promotion. Its developing a project in the city with a local implementation project in Teusaquillo (139,300 inhabitants) and is working on the development of a “Company with You” and “University with You” using the same methodology adapted to organisations to promote compassion in around 12,000 staff and students.

#### **“Buenos Aires with You, Compassionate City”**

##### **Argentina**

Pallium Institute Latin American is a nonprofit civil association based in Buenos Aires. Since 2001, they

**Table 2** Actions developed in compassionate cities. (actualized Nov 2017) (conditioned to the current phases in which the projects are located and in continuous progression of the actions of the project)

Indicators	Seville (SPA) Living Lab	Badajoz (SPA)	Getxo (SPA)	Pamplona (SPA)	Medellin (COL)	Cali (COL)	Fusagasuga (COL)	Bogotá (COL)	Buenos Aires (ARG)
Start-up year	Oct 2015	Jan 2017	Oct 2017	Jan 2018	Nov 2015	July 2015	Oct 2016	Jul 2017	Nov 2016
Coverage									
Target population (inhabitants); approximate coverage on which the project is being developed	690,566 inhabitants; 60,000 inhabitants (implementation project)	149,946 inhabitants	78,500 inhabitants	195,650 inhabitants	2.5 M inhabitants	2.4 M inhabitants	134,500 inhabitants	8 M inhabitants; 139,300 inhabitants (implementation project); 12,000 workpeople of company and university	2.9 M inhabitants
Structure indicators									
Existence of promoter institution/central office/web and social networks. (yes/no)	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Existence of a board (team of professionals) involved in the project (yes/no)	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
Collaborating intuitions involved: collaborating and beneficiary centres/volunteer groups, companies, etc.	42	16	12	4	29	27	23	28	12
Number of professionals involved in the development of the project	19	10	5	4	4	15	16	12	4
Existence of community promoter (1 promoter per 100,000 inhabitants)	Yes	No	Yes	No	No	Volunteer programme (20 people)	Yes	Yes	No

**Table 2** (continued)

Table 2 (continued)

Indicators	Seville (SPA) Living Lab	Badajoz (SPA)	Getxo (SPA)	Pamplona (SPA)	Medellin (COL)	Cali (COL)	Fusagasuga (COL)	Bogotá (COL)	Buenos Aires (ARG)
<b>Process indicators</b>									
<b>Awareness</b>									
Number of awareness campaigns	56 awareness actions; 14 awareness actions in schools	19 awareness actions; 1-day awareness raising university; 8 radio-programmes	4 awareness actions	1 awareness action	38 awareness actions; 6 radio-programmes; 1 spot video compassionate country (National TV)	17 awareness actions; 1 spot video compassionate country (National TV)	12 awareness actions; 1 spot video compassionate country (National TV)	17 awareness actions; 1 spot video compassionate country (National TV)	13 awareness actions
Number of people benefiting from awareness	16,077 citizens; 3,780 children	4,222 citizens; 770 children	370 citizens	150 citizens	2,130 citizens	1,400 citizens	590 citizens	620 citizens	460 citizens; 50 children
<b>Education activities</b>									
Number of education activities	2 editions in compassion cultivation training; 24 citizen training workshops; 17 training courses for professionals (6 h); 4 training cycles all with you to professionals (40 h); 1 expert programme All with You (550 h tele-training, 40 h in person); 3 programmes in schools; 3 programmes at the university and 1 training cycle	1 training cycle All with You to professionals (40 h); 1 programme at the university	1 edition in compassion cultivation training; 12 citizen training workshops (in progress); 1 training cycle All with You to professionals (in progress); 3 programmes in schools (in progress); 1 programme at the university (in progress)	-	Three training cycles all with you to professionals	12 training courses for professionals; 1 training cycle All with You to professionals (40 h)	1 training cycle All with You to professionals; 13 training courses for professionals	1 edition in compassion cultivation training (in progress); 12 citizen training workshops (in progress); 1 training cycle all with you to professionals (in progress); 3 programmes in schools (in progress); 1 programme at the university (in process)	4 training courses for professionals; 1 compassion workshop; 2 workshops in schools; 1 training degree workshop
Number of people trained	1,420 citizens trained; 95 trained professionals; 260 children; 270 university students	135 trained professionals; 100 university students	-	-	125 trained professionals	390 trained caregivers	390 trained professionals	-	40 trained professionals; 50 children; 20 university students

Table 2 (continued)

Table 2 (continued)

Indicators	Seville (SPA) Living Lab	Badajoz (SPA)	Getxo (SPA)	Pamplona (SPA)	Medellin (COL)	Cali (COL)	Fusagasuga (COL)	Bogotá (COL)	Buenos Aires (ARG)
Dissemination and communication									
Workdays with the network of collaborating and beneficiary centres for the inclusion to the programme (total centres) I	9 (47 centres)	1 (21 centres)	1 (17 centres)	0	5 (28 centres)	3 (27 centres)	3 (7 centres)	2 (16 centres)	2 (13 centres)
Participation in conferences, national and/or international congresses	23	7	4	1	9	4	4	6	3
Research									
Development of research projects related to compassionate communities (yes/no)	Yes	No	Yes	No	Yes	No	No	No	No
Number of research/scientific publications	12 scientific publications; 2 publications; 4 in press	–	–	–	6 scientific publications; 1 publication; 2 in press	4 scientific publications	6 scientific publications	8 scientific publications	–
Special interest groups in Compassionate Communities	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Results indicators									
Beneficiaries of the All with You programme (REDCUIDA protocol)	In process	–	In process	–	–	–	In process	In process	–
Increase of care networks									
Improvement of quality of life									
Decrease loneliness									
Decrease burden of the principal caregiver									
Satisfaction of the care network									
Use of the healthcare system									

promote and implement welfare and educational activities and research centred on palliative care. Buenos Aires has started to work on the All with You® methodology since November 2016 and they have built an interdisciplinary team of professionals from the healthcare and psychosocial area, along with teachers and volunteers.

The project in Buenos Aires includes awareness raising and training programmes based on the need for caring community networks around those citizens in palliative care. They are developing expertise and caring resources for the community. They are also working in schools and organizing various seminars and social events to promote compassion related to the end of life.

#### ***Result 4. Towards national networks of compassionate cities: the Colombian experience***

This is the first example of the progress of a nationwide compassionate community.

On 17 March 2017, representatives from various communities in Bogotá, Medellín and Cali, the three largest cities, and Fusagasuga, a mid-size municipality in Colombia (South America), launched the Declaration of Medellín (14). This is a public manifesto that acts as a call to action to Colombians of all backgrounds and ethno-cultural and regional backgrounds to join a network of cities under the banner, “A Compassionate Country: Colombia with You”. This initiative is spearheading efforts to integrate clinical and social services, to organize numerous awareness and training efforts, and to foster the growth and sustainability of a national network of volunteers, eager to provide care and support those at the end of their lives. This achievement is viewed as an additional boost to the sustainability of the integrated national palliative care model that serves as an example for the world to consider.

Other countries seem to be interested in following this large-scale effort, and to contribute to its global proliferation. By April 2017, almost 20 cities around the world have joined the movement and expressed a strong interest in creating a similar national-level initiative.

## **Discussion**

All with You® method gathers a series of topics that have been identified in a review of organisations’ models and literature where the experiences and the main components of the development of compassionate communities adapted to the Compassionate City Charter at the end of life have

been extracted (13). In spite of a movement that is becoming visible and included in public policies (4) and palliative care (3,27,28), validated methods for the development of compassionate communities and cities have not been found in this review.

The majority of the information obtained in the initial search was based on the concept of compassion (29,30), the development in the field of clinical practice (31), education programmes on compassion (32), compassion cultivation training programmes in organisations (33), programmes for training of caregivers (34), experiences of the development of compassionate communities in some cities through neighbourhood experiences (3), social action programmes (35) and analysis of indicators for the evaluation of the development of compassionate communities (36,37). Although it is true that all these elements can be gathered, it has not been possible to find a systematized method that combines all these phases and evaluates them as a whole. A fundamental component that has allowed guidance related to the phases of the method has been the 13 fundamental components that are characterized in the Compassionate City Charter. These components mainly focus on the development of partnerships with the organisations, and on the activities that needed to be developed in terms of awareness and training to build a society to become more aware of the creation of community networks around people at the end of life.

Experiences evaluated by the observatory have been found in the development of social intervention projects, such as SAATIUI (25), INSPIRE (7), ELSA (38), protocols for the creation of neighbourhood networks (22-39), and voluntary programmes aimed at the community (9) that have allowed the identification of performance evaluation indicators in terms of effectiveness and efficiency in these social intervention programmes. These experiences have allowed us to adapt the intervention processes within the All with You® method and create the RedCuida protocol (26) for the creation and management of care networks.

One of the main limitations in the implementation of this method is that no complete evaluations of programmes have been found. That is why evaluating pilot projects, such as in the case of Seville with You, allows us to analyse all the components in terms of structures, processes and the impact on the population in terms of effectiveness, efficiency in the use of the health system, in the improvement of quality of life, increase in care networks, reduction of overload of the main caregiver, decrease in the perception of loneliness and improvement in family satisfaction.

The components of the All with You<sup>®</sup> method have managed to meet the charter's own objectives and the commitments established by other organisations (19) towards the leadership of compassion amongst professionals, as well as to satisfy the commitments to education in compassion and acquiring innate values in the daily practice of care towards people in with terminal illnesses, while providing support for caregivers and family members, resulting in the incorporation of compassion into public policies for end of life care (40,41).

The practice of compassion is being extended to other organisations and other sectors. Since the method's conception, opportunities have been found to create compassionate hospitals (42) compassionate universities, etc. used by other organisations that allows an improvement in workforce productivity (43), a decrease of burnout of professionals (44) thus improving the level of satisfaction of patients and families (45).

One of the barriers identified in the implementation process has been the identification of patients, the health, social and community services that cover the range of palliative care, which are not yet linked. Many integrated health and social initiatives have not yet been incorporated into the processes in the community and vice versa. The development of commissions and referral routes is still a process to be completed. The RedCuida protocol has allowed guidance for the development of these commissions enabling professionals to review the needs that are unmet by the networks, which streamlines the management and creation of networks via the promoter within the community. The community profiles detected in the review still need to clearly define the functions and intervention processes. Once certain protocols have been detected to analyse networks and care circles that this will help guide community professionals throughout the process (46,47).

Systemising the processes is a necessary task for emergent organisations that support the development of compassionate communities and cities. For this reason, observation structures and central offices dedicated to leadership to creating critical mass and to aligning these structures through the creation of networks and benchmarking processes are necessary. These structures, are allowing the guidance of other organisations and cities under development, as is the case with the cities in Spain and Latin American that are already working with the method. The unification of the results measures in *Table 2* acts a guide for these organisations with the same goal as well as aligns with the Compassionate City Charter, which enables them to work towards these same objectives. The proposed indicators are useful to guide

and understand the degree of development in the different cities as a way to benchmark and a resource for learning, and not as matter of competition between them.

The involvement in the development of compassionate communities must also go hand in hand with the professionals and scientific societies that help to implement the change. Therefore, it is a key element to create forums and working groups that promote the development of compassionate communities' initiatives such as those already implemented by SECPAL (48), ASOCUPAC and ALCP.

Finally, identification of other compassionate cities and the construction of new communities also allows for the creation of large networks and the establishment of alliances that can be extended to other organisations. In part, due to the excellent results, other cities are appearing in Spain that are joining the "caring cities" movement, such as Vic, Madrid, Santurce and Vitoria. Internationally there is a similar trend with initiatives promoting compassionate communities and palliative care projects such as those in Rio Grande in Brazil. Although they are not using "All with You<sup>®</sup>" methodology, we share a common social mission. Their experiences and methodologies will continue to contribute to providing a more global view and a diversity of methodologies that can enhance the success of our methods and increase the implementation of compassionate cities projects around the world.

The role of awareness and training is an essential component in the process to achieve a critical mass of people aware of the development of care networks, who can become key figures in mobilising these networks and will establish the sustainability of the movement. The analysis of the results from these actions will help to understand that practicing compassion is a public health process that is necessary to meet the real needs faced by society.

## Conclusions

Compassionate communities is global movement that has been gaining strength and allows us to focus the model of comprehensive attention to the needs of people at the end of life. The development of the palliative care model based on the community and the creation of a method for its development has allowed the movement to be extended to other cities and to make the project a reality. This has led to a collective awareness about the care and support that the society as a whole needs to provide to the elderly and those facing terminal illnesses.

The All with You<sup>®</sup> method has been inspired by compassion and designed to be provided with empathy

alongside scientific methodology, and even to be integrated in public policies and rooted in core social values.

Establishing alliances, developing awareness campaigns and training courses as well as taking part in community interventions evaluated with common indicators, has allowed its roll-out to other cities. The method has acted as a lever for social innovation promoting the Compassionate Cities movement.

The All with You<sup>®</sup> method uses innovative elements such as community promoters and the RedCuida intervention protocol to create and manage care networks.

While leadership structures are useful to ensure the implementation of Compassionate Communities, by using this method the international observatory has proven to be an effective tool for benchmarking and replicability of these experiences in other regional and national contexts.

The All with You<sup>®</sup> method has made it possible to develop compassionate communities and cities aligning organisations and cities in the promotion of compassionate activities and to start creating networks involving a global community, united by the vocation of caring.

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### Footnote

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