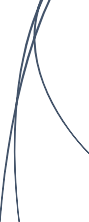




# Compassionate Care

May 6, 2026





This spotlight on compassionate care is part of a collection of publications prepared in collaboration with the research team of the School of Medicine at the University of Crete. This publication series hopes to address important topics relevant to promoting health and well-being in health and community settings. This document does not serve any commercial purpose and has been prepared for educational purposes. The main objective is to share the published research with international organizations and medical student residents, PhD students and early career researchers.

In this spotlight, we discuss the important correlation of health literacy and improved quality of patient care. The aim is to summarise the work of our team at the University of Crete in advancing our knowledge, experience, and understanding in this area. The following researchers have contributed:

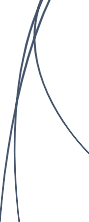
C. Lionis, M. Anastasaki, and S. Papadakis



## Introduction of the published work


Compassionate and patient-centered care has been argued to be a central point of reform needed in Europe, as it can improve healthcare equity and health system outcomes (1-5). There have been many calls to refocus health service delivery to align with the principles of patient-centered and compassionate care, highlighting this as an area of practice that is increasingly needed, as many EU countries face financial and humanitarian refugee crises (2,3,4).

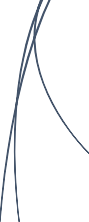
Compassion in healthcare is understood as a state of concern for another's suffering or unmet needs, coupled with a desire to alleviate that suffering (5). Goetz and Simon-Thomas support compassion as a discrete emotion and noted that merely exposing people to suffering does not guarantee they feel compassion (6). It is important to distinguish compassion from other altruistic behaviours, such as empathy. While empathy is the ability to understand and feel another person's emotions, compassion goes further by adding a desire to alleviate that suffering (6). The importance of addressing compassion and



health in specific societal conditions, such as during times of austerity and towards vulnerable individuals, has been discussed in a chapter by Shea and Lionis (7) in the Oxford Handbook of Compassion Sciences. Compassionate care acknowledges that patients wish to be treated with respect and to have their values, traditions, experiences, and cultural backgrounds understood (8,9,10). This has been found to be particularly true of vulnerable groups such as refugees and immigrants (8,9,10). Incorporating compassion into health care training has been shown to be highly desired by both medical students and the academic community (11) and to provide feasible, desired support for doctors (12) and nurses (13).

Compassionate care includes healthcare professionals themselves (2). Healthcare providers not only experience stress and depression due to lack of time, burnout, lack of communication, and organizational structures (1), but they can also suffer from compassion fatigue, especially those who work in hard-to-reach or remote areas (14). This type of fatigue became quite apparent during the COVID-19 pandemic, when healthcare providers had to show themselves self-compassion to






stay protected (15). It is documented that the COVID-19 pandemic could have been better managed if doctors were trained and equipped with skills such as motivational interviewing and compassionate care (16), as these could help them address vaccine hesitancy (12).

Apart from the Oxford Handbook of Compassion Sciences (17), two other books with the titles “Providing Compassionate Healthcare: Challenges in Policy and Practice (18) and “The Art and Science of Compassionate Care: A Practical Guide” (19) could offer a deep and extensive focus on compassion and compassionate care. The Journal of Compassionate Health Care served this field for several years (20).

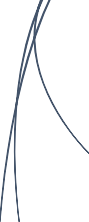
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