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Exploration of Safe Space for Traumatic Urban Youths Amidst Urban Growth

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Abstract

For traumatised urban youths, a youth safe space can simply be access to refuge, a place where they feel safe and protected as well as being comfortable in their own skin. Youth require secure public areas where they can congregate, participate in activities that cater to their wide range of needs and interests, influence decisions, and express themselves freely. However, there is no specific design or guideline for trauma-oriented design to create a safe space for traumatic urban youths. Therefore, this research will formulate trauma-oriented design approaches that creates a safe space for urban youths. A literature review was carried out using various databases to explore solutions to the questions posed in the study. The study shows a safe space in rehabilitation design framework for traumatic urban youths in urban areas. Besides, this study identifies the needs of the traumatic community and trauma-oriented design in community-based rehabilitation that will help the community cope with the stresses in life and work productively. Future research can conduct qualitative study to look in-depth on the interface between community-based rehabilitation and trauma-oriented design in a safe space.

Keywords: Youth, Safe Space, Trauma-Oriented Design, Community-Based Rehabilitation

Introduction

While urbanisation can have positive effects on health and the economy, it can also have many detrimental social and environmental health effects that are especially harmful to the most vulnerable and impoverished (WHO, 2021). According to the Department of Economic and Social Affairs, youths who are aged between ages 15-30 years old are classified in urban vulnerable groups as they are one of the most affected by urban growth of cities. They

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frequently congregate in deprived neighbourhoods and areas with the least prospects for mobility, employment, and education opportunities, the worst access to health care, and below-average health outcomes. To overcome this crisis, United Nations has provided a 'One Stop Youth Resource Centres'. The main purpose of the youth centre is to become a place that "empowers the youthful generation to have ownership of the development process and be agents of transformation in the city." Operationally, the One Stop aimed on enhancing youths' livelihoods by offering "youth empowering services" such employment training, counselling, recreation, and cultural events, as well as serving as a networking hub for youth and other stakeholders (United Nations, 2022).

While trauma and mental health issues have always been urgently in need of attention, Malaysia as well has begun to take part in the movement to de-stigmatise trauma and mental health problems. This was true before COVID-19 hit Malaysia, and it is still true as we are in the recovery phase of the endemic phase. The stigma attached to mental illness and trauma in this nation is among the biggest barriers to treatment. "#YouMatter" programs have been organised to create a safe space for the youth community to share about their about mental health issues. Suria KLCC recently announced that it will collaborate once more with the Green Ribbon Group, an NGO that promotes a community approach to youth mental health. Also, as part of this year's campaign's collaboration with MIASA (Mental Illness Awareness & Support Association), artworks by young artists who have personally struggled with trauma and mental illness were displayed as part of the "Young Art Entrepreneurs" initiative (The Star, 2021). This youth safe space, also known as the Safe Space @ Suria KLCC, is created for young people to congregate and talk about their mental health challenges through fostering a more inclusive approach. The traumas and mental health problems affecting today's youth are brought to light in this safe environment, along with what the community can do to support them. Through this approach, Malaysia has an advanced understanding of trauma and mental health awareness and has brought to a higher level by designing the first and only shopping centre in Malaysia to implement a safe space for the community.

Rising trauma cases amidst urban growth in Malaysia has been a concern among urban youths who are more vulnerable and less able to protect themselves as threats and stress factors that affects their physical and mental wellbeing are increasing in cities. (Fadhilah, Sharifah, Muhammad. & Sofia, 2022). According to Health Ministry figures, the number of Malaysian students experiencing mental health issues has increased from one in ten in 2011 to one in five in 2016. The main causes of mental health issues among students, according to experts, are anxiety and depression, however the influence of drugs cannot be completely ruled out. The notion of mental health includes a wide range of conditions as not only does it focus on mental disorders, but it also addresses conditions like depression, post traumatic stress disorder (PTSD), and attention-deficit or hyperactivity disorder (ADHD), (New Straits Time, 2016).

In addition, according to the National Health & Morbidity Survey (NHMS) 2019, 7.9 percent of Malaysian children and adolescents between the ages of five and 15 suffer trauma and mental health issues, while 2.3 percent of Malaysian adults have depression (The Sun, 2020). Young adults and adolescents exposed to traumatic situations display a wide range of symptoms, including not only externalising issues like violence, conduct issues, and oppositional or defiant behaviour but also internalising issues like sadness or anxiety. While evaluating and treating young people who are involved, exposure to trauma is frequently overlooked (Julian D. Ford, 2007). There are several obstacles to receiving mental health services, trauma-informed therapies are not readily available for trauma survivors, the health

Vol. 13, No. 11, 2023, E-ISSN: 2222-6990 © 2023

care system is underdeveloped, and there are not enough training institutes to ensure that treatments are effective. (Evaldas, 2017).

By increasing public awareness and distributing specialised trauma-informed training, a continuum of prevention-to-intervention services that incorporates community-based and clinic-based manualized protocols is implemented. Also, the only strategies being used to help low-income urban minority kids, who suffer the brunt of this problem, reduce, and prevent traumas, are flexible programmes for distributing, putting into practise, and assessing trauma-informed training (Abdul-Adil, J., Suárez, L.M., 2022).

In addition, there is mounting evidence that experiential arts-based programmes aid in people's personal healing and rehabilitation. As the rehabilitation paradigm does not directly target symptom reduction, the involvement of the arts in community settings frequently takes a nonclinical shape (Oren, R., Orkibi, H., Elefant, C., & Salomon-Gimmon, M, 2019). Despite current symptoms, it tries to promote resilience and improve people's feelings of control, self-efficacy, hope, and meaning in life. The recovery process adopts an allencompassing perspective on people undergoing psychosocial rehabilitation and is seen as a process rather than a target. This process entails encouraging people to adopt new goals and form relationships that give their lives meaning and improve their general quality of life in addition to cultivating their abilities, interests, hobbies, and dreams (Davidson, 2016; Fenton, White, Gallant, Hutchinson, & Hamilton-Hinch, 2016).

The gaps in this research is that current rehabilitation facilities or programs does not cater to the physical and psychological needs of traumatic youths as they are not well designed for the safety and comfort of traumatic people. Furthermore, safe space for youths are only limited to counselling rooms in schools which are not conducive and practical. The improvement and redefinition of conventional rehabilitation centers in cities can enhance the effectiveness of treatments for trauma in urban areas, alleviate the societal stigma of trauma and improve the journey of healing through fostering people's skills, interests, and pastimes as well as motivating them to establish new objectives and form relationships that enrich their lives and improve their general quality of life.

Besides that, the current existing model is only limited to protocols and trainings implemented. There is no specific design or guideline for trauma oriented design to create a safe space and environment for traumatic urban youths by the government. There is lack of studies on arts-based programmes, and it is unclear how health professionals who can refer people with mental health conditions to community-based psychiatric rehabilitation services feel about them. This is true despite the rise of arts-based programmes in community rehabilitation services in many countries.

Hence, reintegrating these segmented groups is necessary, especially for those who have experienced trauma, back into society. The intervention attempts to provide a setting for recovery, a setting for healing, and a setting for financial independence for those suffering from traumas in order to de-stigmatise medical health centers for post traumatic disorder among the society. Therefore, this study will formulate an open community based design approaches that that diminishes the indoor and outdoor boundaries of a safe space for urban youths.

Methodology

Existing literature was explored in several databases such as Scopus, Elsevier, and Google Scholar as the source in developing solutions to the problems. A number of keywords was used such as youth, safe space, trauma-oriented design, community-based rehabilitation in

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the process of literature search. Using these keywords, the search databases was carried out to identify relevant literature pertaining to the study.

Results and Discussion

In conjunction to the main research question, literature reviews have been done following the sub themes that have been added to the RQ Construct. Deductive codes that lead to the two sub-topics identified are youth safe space and safe space design.

Overbey (2021) states that high rates of teenagers and young adults suffering from trauma, mental health issues, adjustment challenges, problem behaviour, disengagement, or disaffection have prompted concerns. Most of these concerns are found in low-income and high crime rate neighbourhoods. The various negative effects of being exposed to community violence have been extensively studied, however far less research is being carried out to study how and where young people feel safe and strong while residing in high-crime rate areas (DaViera, 2020).

Furthermore, young people's voices are frequently disregarded and underrepresented in inequities, despite greater attention to adolescence. Youths are acutely aware of harmful health effects and social disparities among them, and public health interventions are now ineffective and inequitable. Youth perspectives and experiences indicate the need for age-specific and citywide structural policies for them, especially in underprivileged areas, to ensure they lead a balanced and healthy lifestyle (Tinner, 2022). However, this paper lacks the research on a scarcity of age-appropriate activities and public spaces for youths as mental health and health risk behaviours are major problems for their generation group, and highlighted inequalities across these factors.

Other studies suggest that youth lifestyles and the area they lived in are big contributions to trauma. Including housing instability, neighbourhood violence, and other poverty-related hardships, youth in underprivileged metropolitan settings are commonly subjected to chronic stress and trauma (Mendelson, 2020). Targeted mental health approaches have been organised for youths, however, stigma, a lack of resources, and the challenge of identifying all pupils who may benefit from intervention are obstacles to in-school screening. Regardless, this paper lacks the investigation towards how universal school-based interventions affect the urban youths' academic, emotional, and behavioural functioning and how they benefit society.

Besides, arts-based programs help in the distinctive role that recovery processes play by facilitating self-expression and communication, socialization and enhances personal identity which can be incorporated in school-based interventions. Little is known about how these programmes are viewed by health professionals who can send people with mental health issues to community-based psychiatric rehabilitation services, despite the rise in arts-based programmes in community rehabilitation services in many countries. (Oren, 2019).

Various artistic activities are being increasingly put forward and investigated in the area of psychiatric rehabilitation most of which are only run by non-therapist artists or art instructors. Despite that, this paper lacks the study on how art-based interventions are associated with improvements in diverse aspects relevant to mental health recovery. Therefore, a youth "safe space" is required in order for the crucial processes of elicitation, building trust, finding one's voice, sharing ideas, and developing a shared vision to take place. (Mulvale, 2019).

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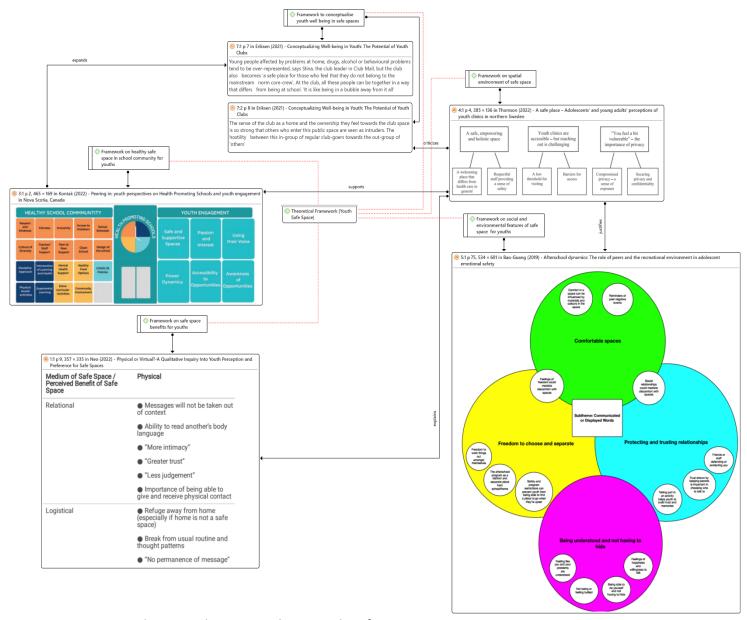


Figure 1: Theoretical Framework on Youth Safe Space

The theoretical framework concludes that youths' safe spaces is like a 'HOME' with a sense of ownership and intimacy. A refuge place to create new bonds and freedom to make decisions and to be who they are without judgement. A safe space must be a physical space because There are some aspects that are lacking when verbal information is converted to text, and you don't get the full picture of the person's issue. In addition, physical settings are their preferred choice of safe space because they foster greater trust, more intimacy, and reduced judgement (Kontak, 2022). The traumatised individuals felt more comfortable sharing more when they knew someone was listening to what they had to say, especially when it came to delicate subjects that affected their emotional wellness. It is also mentioned how vital it is to be able to physically hug someone to help them feel comfortable.

The rehabilitation of youths with psychiatric disorders remains a challenge and there is a pressing need to identify innovative approaches to complement conventional care in addressing the increasing prevalence and severity of mental illness in the younger population (Archambault, 2020). Clinical recommendations support the use of trauma-focused therapy

Vol. 13, No. 11, 2023, E-ISSN: 2222-6990 © 2023

with individuals who are experiencing psychosis as they have been found to be successful treatments for post-traumatic stress disorder (PTSD) (Chadwick, 2022). It is common for young people seeking mental health treatment to have a history of trauma. It is well known that trauma permeates society and has an impact on how people with mental illnesses develop, behave, and are treated (Nation, 2022). Furthermore, those suffers from mental health issues and those who have experienced trauma disproportionately are impacted by the lack of widespread adoption of person-centered treatment in healthcare settings. (Bassuk, 2017).

Schools play a crucial and vital role in intervening and fostering children's resilience when they encounter stress and hardship in their communities and at home (Herrenkohl, 2019). However, certain schools lack the capacity to offer counselling to youngsters, while there are also some schools that have been successful in implementing unique programs that support children with their social and emotional needs.

There are also other factors such as cost and budgets which leads to some schools being unable to afford to hire counsellors and are unable to implement these programmes (Scannell, 2019). This affects their mental health as an adult because significant physical and emotional growth occurs at their youth age. The experience they encounter helps to shape their growth and perspectives.

Neo (2022) states that youths are best viewed as going through a phase of "transition from the dependency of childhood to adulthood's independence". Due to finishing school, landing their first job, and experiencing significant milestones and losses for the first time during this time, many youngsters frequently find themselves experiencing a wide range of emotions and having varied levels of well-being. The youth age group according to the Malaysia context comprises of both young adults and adolescents. Young adults and adolescents are a diverse population with a range of health requirements (Thomson, 2022).

Over the years, youth health hazards have changed as a result of socioeconomic, epidemiological, and demographic factors. Obesity and mental diseases have increased, even while the prevalence of sickness has decreased in many places and times. Thus, there is a need to better comprehend youth-friendly health care from the viewpoint of children, adolescents, and young adults, as well as to obtain a deeper comprehension of important requirements for youth friendliness. The quality of life of residents could be shaped and preserved by creating a suitable living environment and public areas to undertake prevention and rehabilitation training (Skalna, 2019).

Furthermore, there is a lack of the study on the urgent need for safe spaces among young people today, as well as how society may meet these demands in a time when social interaction is scarce. In addition when it comes to their health and wellbeing, youths are a diverse group with unique requirements. Therefore, there is a need to learn more about the essential elements of youth friendliness and to comprehend youth-friendly health care from the viewpoint of children, adolescents, and young adults (Thomson, 2022).

There is also the rising consensus among those in the therapy professions to use talking therapy in unconventional settings, such as open air areas as an alternative safe space. Further organizational impediments included a general lack of orientation, support, and direction within professions with regard to alternative therapy venues, as well as outdoor areas being perceived as a poor fit in services where a dominant reductionist and biomedical treatment model predominate (Cooley, 2022).

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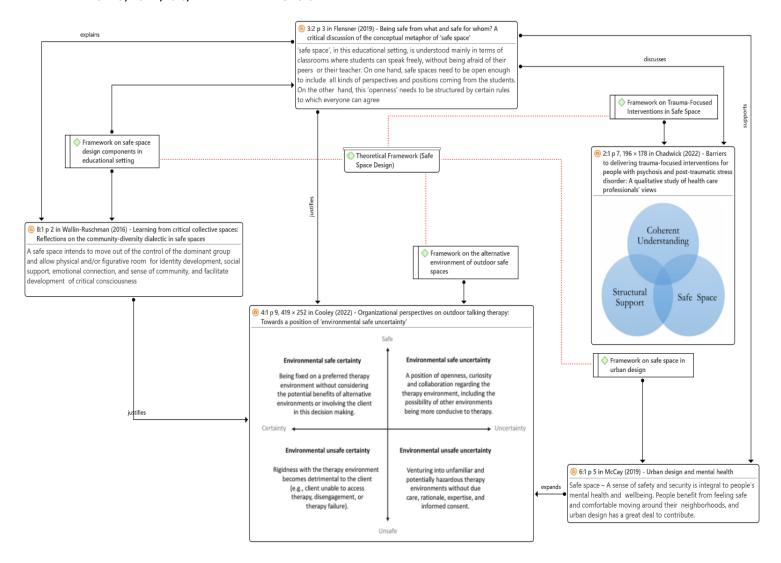


Figure 2: Theoretical Framework on Safe Space Design

The theoretical framework concludes that safe spaces require a degree of 'openness' and at the same time create a sense of safety and security (Flensner, 2022). Safe uncertainty environment should be encouraged whereby the therapy work is structured and guided by a formulation of a safe, yet remains open and curious towards new possibilities, collaboration with others, thus creating a more conducive healing environment (Cooley, 2022). Urban design also plays an important role when creating a safe space. The traumatic youths benefit from a secure environment and feel at ease travelling around their neighbourhoods, and there is a lot that urban design can contribute. Urban risks include those posed by other people, traffic, being lost, environmental toxins, and traffic. Important urban design interventions include things like proper street lighting and monitoring, recognisable landmarks that help residents with dementia traverse their neighbourhoods, and routes that are centred on people (McCay, 2019). Hence, for a rehabilitation environment that might increase comfort and accessibility, a balanced strategy is required. and at the same time the need to avoid being affected up by other environments and outside social communities.

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Conceptual Framework

The conceptual framework highlights the needs of the traumatic urban youths which are improving their personal self-esteem and they require a sense of belonging in their safe space. Besides they require a sense of security to feel safe and comfortable as well as the different physiological needs of the traumatic youths. This is followed by the perceptions of the users in a safe space which are absences of negative experience, and free of judgement and discrimination. A safe space is also a neutral space to be yourself and able to express emotions easily without prejudice as well as an affirmative place to seek assistance and encouragement whenever needed.

To create a safe space, there are certain design aspects of a new model of safe space in rehabilitation that can be integrated to improve user experience such as the location, the privacy of the users, the accessibility of traumatic youths to seek treatment and an atmosphere that is empowering and holistic for the traumatic urban youths. Next are the example of architectural elements which affects the experiential qualities of the traumatic users which includes the physical attributes of a therapeutic setting, particularly the type of materials, the lighting quality, colour schemes, temperature, acoustics, natural ventilation, furnishing and the surrounding views as well as the overall aesthetics. These factors are linked to a variety of enhancements to treatment procedures and results, including patient satisfaction, mood, pain and stress levels, recovery times, and the well-being of patients and personnel.

Therefore, with the understanding of the user needs, the perceptions of a safe spaces, the various design aspects that must be taken into consideration helps to evolve from an isolated medical model in rehabilitation into a new rehabilitation culture. The new rehabilitation culture diminishes the indoor and outdoor boundaries from an isolated medical model to an integrated social model through reparative approaches for engaging communities to reintegrate these isolated communities, particularly those who have experienced trauma, back to the society.

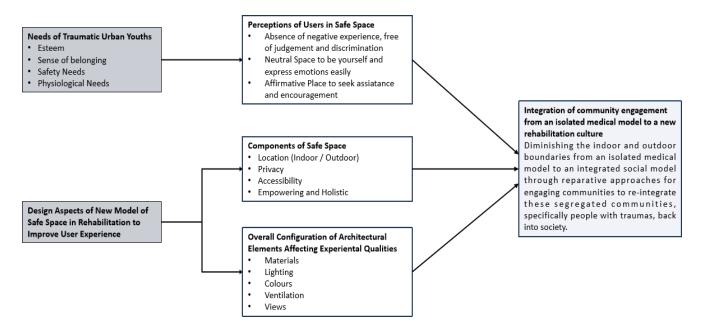


Figure 3: Conceptual Framework

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Conclusion

In conclusion, the purpose of this research is to aid in the investigation of safe space design. It has been discovered that the characteristics of a safe area where traumatised adolescents spend their time have a significant impact on their development. Thus, the provision of a safe environment is a crucial element of successful community adolescent health promotion programmes that seek to promote good youth development and integrating themselves back to the society.

The research indicates that the physical environment of a safe space can benefit access, therapy procedures, therapeutic results, and healthcare equity. The current study found several factors that can either help or hinder a user's capacity to investigate and utilise alternative therapy venues. To assist traumatised urban teenagers in keeping an open, secure, and critical curiosity towards the safe space environment, the notion of environmentally safe uncertainty is given.

The current study also only focuses on safe spaces for traumatic youths in the urban areas of Kuala Lumpur. The lack of research or studies on exploring other various safe spaces for other users in other urban areas is essential in order to fulfil the different needs of the users. There is also a barrier regarding current existing facilities and how to improve these facilities and amenities to enhance the experiential quality of a safe space and providing a better healing environment for the traumatic youths. The research can explore more on improving the experiential and spatial quality of a healing safe space for youths. The safe space in rehabilitation can be a node for the traumatic community to come together and seek the help they need to get better and improve their overall quality of life.

This study will be using a qualitative research method to collect data. To further collect data, conducting in-depth interviews is required. The set of research interview questions will be prepared online using an online medium. Then, on-site interviews can be done through one-on-one or group interviews (focus groups). The interviews focus in depth on 5-8 numbers of participants who are selected purposefully that are involved in the traumatic community field and has the experience.

The emerging theme that can be found in the interview questions that have been answered by the interviewees. The in-depth interviews help to seek meaning and comprehension about the process, with a focus on each of their narratives and individual experiences on how to develop a safe space design that is conducive and beneficial for traumatic urban youths.

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Vol. 13, No. 11, 2023, E-ISSN: 2222-6990 © 2023

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