Safe Space for Traumatic Urban Youths

Kok Hui Yen[1], Mohd Zairul[1,2]

[1]Department of Architecture, Faculty of Design and Architecture, Universiti Putra Malaysia,
[2]Institute for Social Sciences Studies, Universiti Putra Malaysia, Serdang Selangor, Malaysia
Email: m_zairul@upm.edu.my

Abstract
For traumatized urban youths, a youth safe space can 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 to congregate, participate in activities catering to their wide range of needs and interests, influence decisions, and express themselves freely. The traumas and mental health problems affecting today's youth are brought to light in this safe space environment, along with what the community can do to support them. 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-informed design approaches that create a safe space for urban youths. This research will produce a safe space in the rehabilitation design framework for traumatic youths in urban areas. This study will also identify the needs of the traumatic community and trauma-informed design in community-based rehabilitation that will help the community cope with life's stresses and work productively. Future research can conduct a qualitative study to examine the interface between community-based rehabilitation and trauma-informed design in a safe space.
Keywords: Traumatized Urban Youths, Youth Safe Space,Trauma-Informed Design, Community-Based Rehabilitation, Refuge

Introduction
Urbanization can positively affect health and the economy. However, 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 aged between ages 15-30 are classified in urban vulnerable groups as they are one of the most affected by cities' urban growth. They frequently congregate in deprived neighborhoods and areas with the least prospects for mobility, employment, education opportunities, the worst access to health care, and below-average health outcomes. United Nations has provided a 'One Stop Youth Resource Center' to overcome this crisis. The main purpose of the youth center 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, One Stop aimed to enhance youths' livelihoods by offering "youth

empowering services" such as employment training, counseling, recreation, and cultural events and as a networking hub for youth and other stakeholders (United Nations, 2022). Trauma and mental health issues have always been urgently needed attention, and Malaysia has begun to participate in the movement to de-stigmatize them. This was true before COVID-19 hit Malaysia, and it still is 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 organized to create a safe space for the youth community to share about their mental health issues. Suria KLCC recently announced that it will collaborate again with the Green Ribbon Group, an NGO that promotes a community approach to youth mental health. Other than that, as part of this year's campaign's collaboration with the Mental Illness Awareness & Support Association (MIASA), 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, allows young people to congregate and discuss their mental health challenges by 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. This approach gives Malaysia an advanced understanding of trauma and mental health awareness. It has increased by designing Malaysia's first and only shopping center to implement a safe space for the community.

Figure 1 Youth Safe Space in Shopping Centers
Source: Lifestyle Asia (2021)

Figure 2 The Meaning of Safe Space for Traumatic Youths
Source: United Nations (2018)

Rising trauma cases amidst urban growth in Malaysia have been a concern among urban youths who are more vulnerable and less able to protect themselves as threats and stress factors that affect their physical and mental well-being are increasing in cities (Fadhilah. J, 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 many symptoms, including externalizing issues like violence, conduct issues, oppositional or defiant behavior, and internalizing issues like sadness or anxiety. According to the Department of Social Welfare, more than 2,000 abuse cases were reported yearly, and the number of cases in 2020 stood at 5,858. As many as 2,040 abuse cases were reported in the first four months of 2021 (Jabatan Kebajikan Masyarakat, 2020). Selangor and Kuala Lumpur reported the highest cases of abuse, leading to rising trauma cases among youths, children, and adolescents. The reports also stated that 5,000 young people require care and protection due to their abuse, leading to trauma. In that year alone, the young people in Selangor and Kuala Lumpur areas have the highest number of children, adolescents, and youths that require a place that offers protection and care.

Besides that, the mental health of young Malaysians living in low-resource communities continues to be a topic of concern. According to the recent report by the Ministry of Health (MoH) and the United Nations Children's Fund (Unicef), "Contributing Factors to Psychological Distress, Coping Strategies, and Help-Seeking Behaviours among Adolescents Living in the Klang Valley People's Housing Project (PPR)", it was mentioned that "there were higher than average rates of psychological distress among young people from PPR communities". The report found that, out of the adolescents living in PPRs, 12.3 percent had psychological distress, and 13.4 percent reported suicidal and self-harm thoughts. Trauma exposure is frequently overlooked while evaluating and treating young people involved (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 care system is underdeveloped, and insufficient training institutes to ensure effective treatments. (Evaldas, 2017).

Increasing public awareness and distributing specialized trauma-informed training, a continuum of prevention-to-intervention services incorporating community-based and clinic-based manualized protocols is implemented. Furthermore, the sole strategies currently employed to assist low-income urban minority children who disproportionately experience trauma in reducing and preventing such experiences involve flexible programs for the distribution, implementation, and evaluation of trauma-informed training (Hallett & Freas, 2018).

In addition, there is mounting evidence that experiential arts-based programs aid in people's 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, Orkibi, Elefant, & Salomon-Gimmon, 2019). Despite current symptoms, it promotes resilience and improves people's feelings of control, self-efficacy, hope, and meaning in life. The recovery process adopts an all-encompassing 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 gap in this research is that current rehabilitation facilities or programs do not cater to traumatic youths' physical and psychological needs as they are not well designed for the safety and comfort of traumatic people. Furthermore, safe spaces for youths are limited to counseling rooms in schools that 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 by fostering people's skills, interests, and pastimes. It can also motivate them to establish new objectives and form relationships that enrich their lives and improve their general quality of life. Besides that, the current model is limited to protocols and training 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 a lack of studies on arts-based programs, 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 programs 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, healing, and financial independence for those suffering from traumas to de-stigmatize medical health centers for post-traumatic disorder in society. Therefore, this dissertation will formulate an open community-based design approach that diminishes the indoor and outdoor boundaries of a safe space for urban youths.

Method

In conjunction with the main Research Question (RQ), literature reviews have been done following the sub-themes 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 behavior, disengagement, or disaffection have prompted concerns. Most of these concerns are found in low-income and high crime-rate neighborhoods. The various negative effects of being exposed to community violence have been extensively studied. However, far less research is being conducted to study how and where young people feel safe and strong while residing in high-crime rate areas (DaViera, 2020).

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

Other studies suggest that youth lifestyles and the area they live in are big contributions to trauma. Including housing instability, neighborhood 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 organized 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 an investigation into how universal school-based interventions affect urban youths' academic, emotional, and behavioral 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 enhancing personal identity, which can be incorporated into school-based interventions. Little is known about how these programs 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 programs in community rehabilitation services in many countries. (Oren, 2019).

Various artistic activities are being increasingly put forward and investigated in psychiatric rehabilitation, most of which are only run by non-therapist artists or art instructors. Despite that, this paper lacks a 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 to elicit, build trust, find one's voice, share ideas, and develop a shared vision. (Mulvale, 2019).
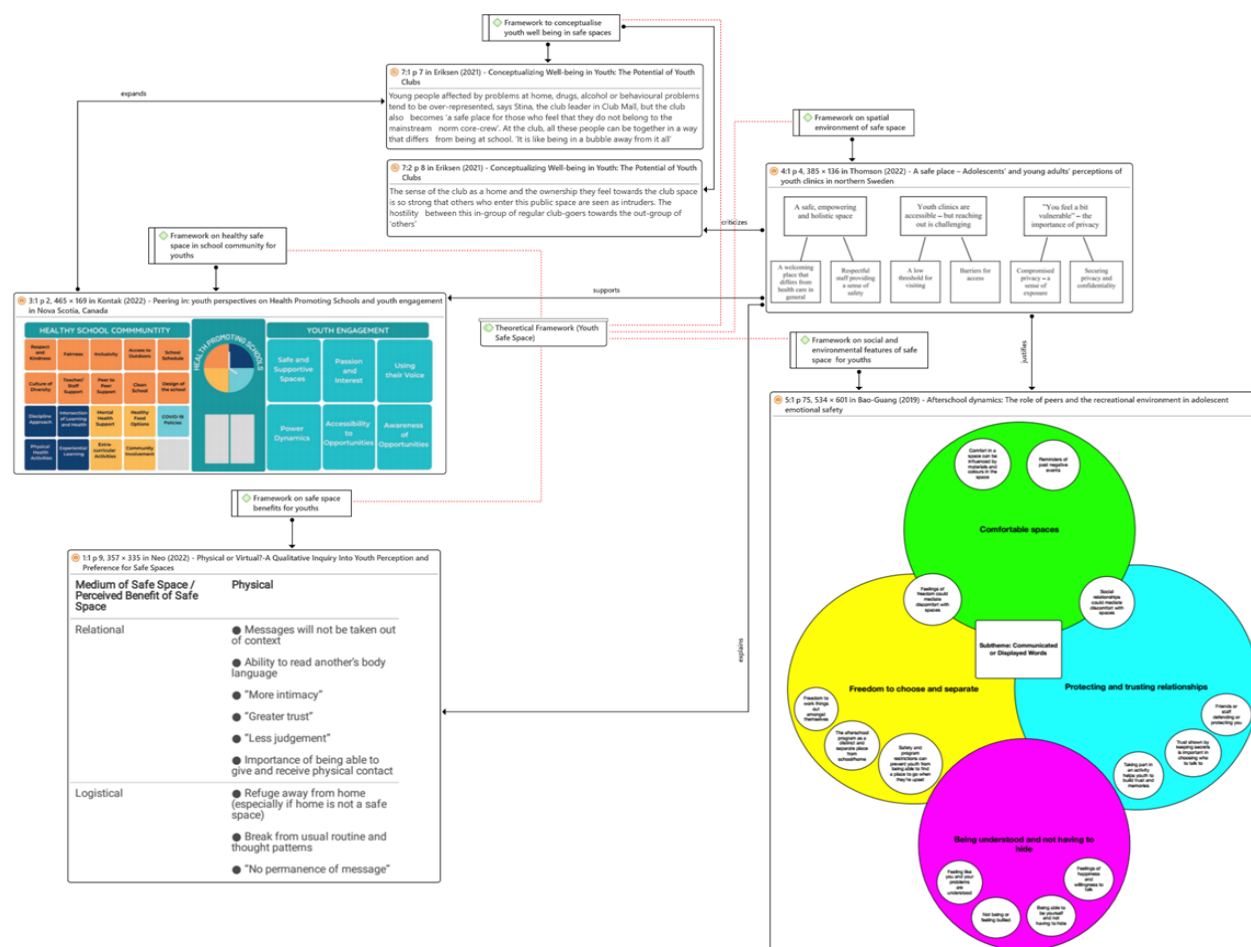
Figure 3. Theoretical Framework on Youth Safe Space
Source: Author (2023)

The theoretical framework concludes that youths' safe spaces are like a 'HOME' with a sense of ownership and intimacy. It is a place to create new bonds and freedom to make decisions and be who they are without judgment. A safe space must be physical because some aspects are lacking when verbal information is converted to text, and you do not 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 judgment (Kontak, 2022). The traumatized individuals felt more comfortable sharing when they knew someone was listening to what they had to say, especially regarding delicate subjects that affect their emotional wellness. It is also mentioned how vital it is to hug someone and 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 using trauma-focused therapy with individuals experiencing psychosis, as there are successful treatments for PTSD (Chadwick, 2022). It is common for young people seeking mental health treatment to have a history of trauma. Other than that, it is well known that trauma permeates society and impacts how people with mental illnesses develop, behave, and are treated (Nation, 2022). Furthermore, the lack of widespread adoption of person-centered treatment in healthcare impacts those

who suffer from mental health issues and have experienced trauma disproportionately. (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 cannot offer counselling to youngsters. At the same time, some schools have been successful in implementing unique programs that support children with their social and emotional needs. Other factors, such as cost and budgets, lead to some schools being unable to hire counselors and implement these programs (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 "transition phase 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, many youngsters frequently find themselves experiencing a wide range of emotions and have varied levels of well-being. According to the Malaysian context, the youth group comprises young adults and adolescents. Young adults and adolescents are diverse populations with various health requirements (Thomson, 2022).

Over the years, youth health hazards have changed due to 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 to comprehend important requirements for youth friendliness. Residents' quality of life 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 study on the urgent need for safe spaces among young people today and how society may meet these demands when social interaction is scarce. In addition, when it comes to their health and well-being, 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 a 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 regarding alternative therapy venues and outdoor areas being perceived as a poor fit in services where a dominant reductionist and biomedical treatment model predominate (Cooley, 2022).
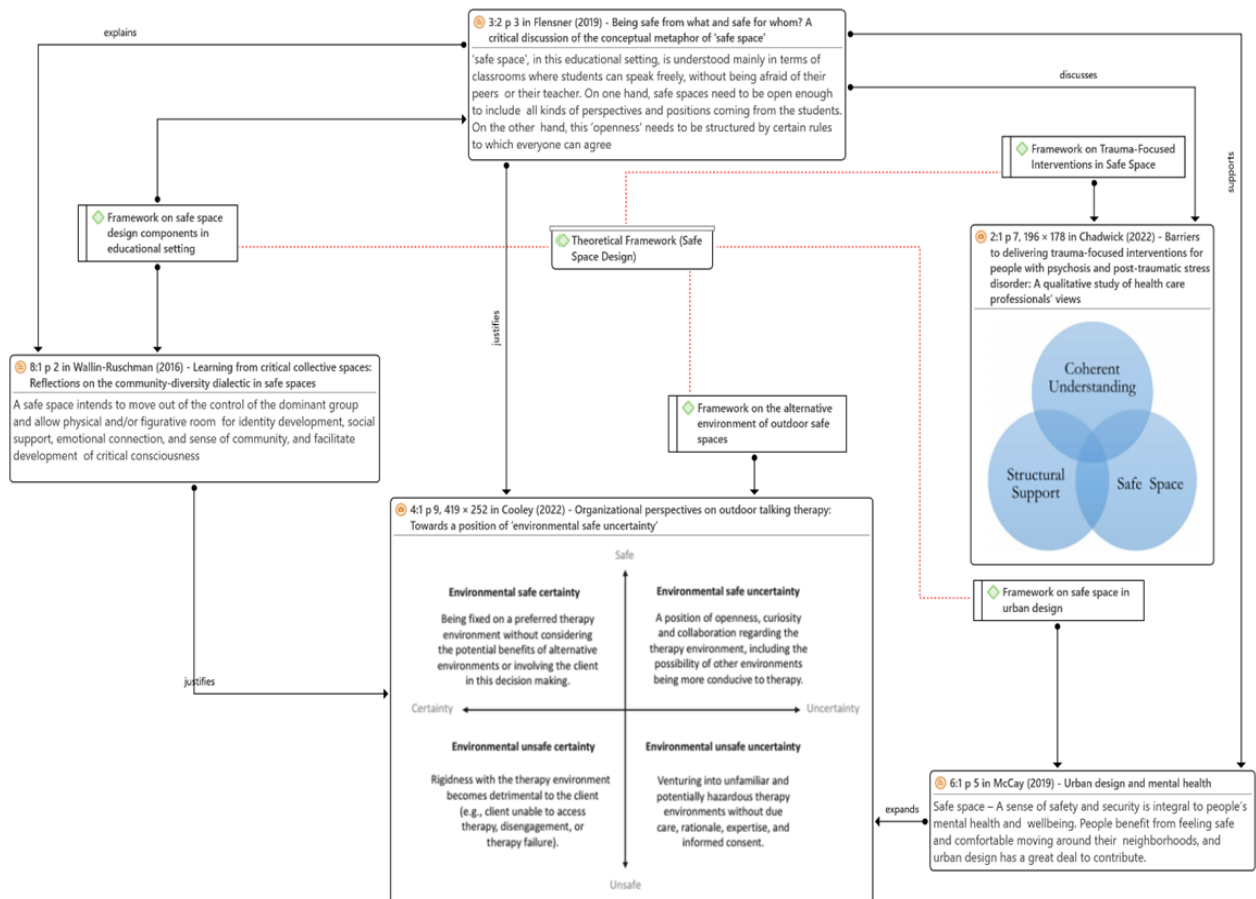
Figure 4 Theoretical Framework on Safe Space Design
Source: Author (2023)

The theoretical framework concludes that safe spaces require a degree of 'openness' while creating a sense of safety and security (Flensner, 2022). A safe uncertainty environment should be encouraged whereby the therapy work is structured and guided by formulating a safe yet open and curious towards new possibilities and collaboration with others, 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 traveling around their neighborhoods, so there is a lot that urban design can contribute. Urban risks include those posed by others, traffic, loss, and environmental toxins. Important urban design interventions include things like proper street lighting and monitoring, recognizable landmarks that help residents with dementia traverse their neighborhoods, and routes that are centered on people (McCay, 2019). Hence, for a rehabilitation environment that might increase comfort and accessibility, a balanced strategy is required. At the same time, avoiding being affected by other environments and outside social communities is necessary.

The conceptual framework highlights the needs of the traumatic urban youths, which are improving their self-esteem. They require a sense of belonging in their safe space. Besides, they require a sense of security to feel safe and comfortable and 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 experiences and free of judgment and discrimination. A safe space is also a neutral space to be yourself and express emotions easily without prejudice and an affirmative place to seek assistance and encouragement whenever needed.

There are certain design aspects of a new model of safe space in rehabilitation that can be integrated to improve user experience to create a safe space, 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 is the example of architectural elements that affect the experiential qualities of the traumatic users, which includes the physical attributes of a therapeutic setting, particularly the type of materials, the lighting quality, color schemes, temperature, acoustics, natural ventilation, furnishing and the surrounding views as well as the overall aesthetics. These factors are linked to various enhancements to treatment procedures and results, including patient satisfaction, mood, pain, stress levels, recovery times, and the well-being of patients and personnel.

Therefore, understanding the user needs, the perceptions of safe spaces, and the various design aspects that must be considered help to evolve safe spaces 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 into society.
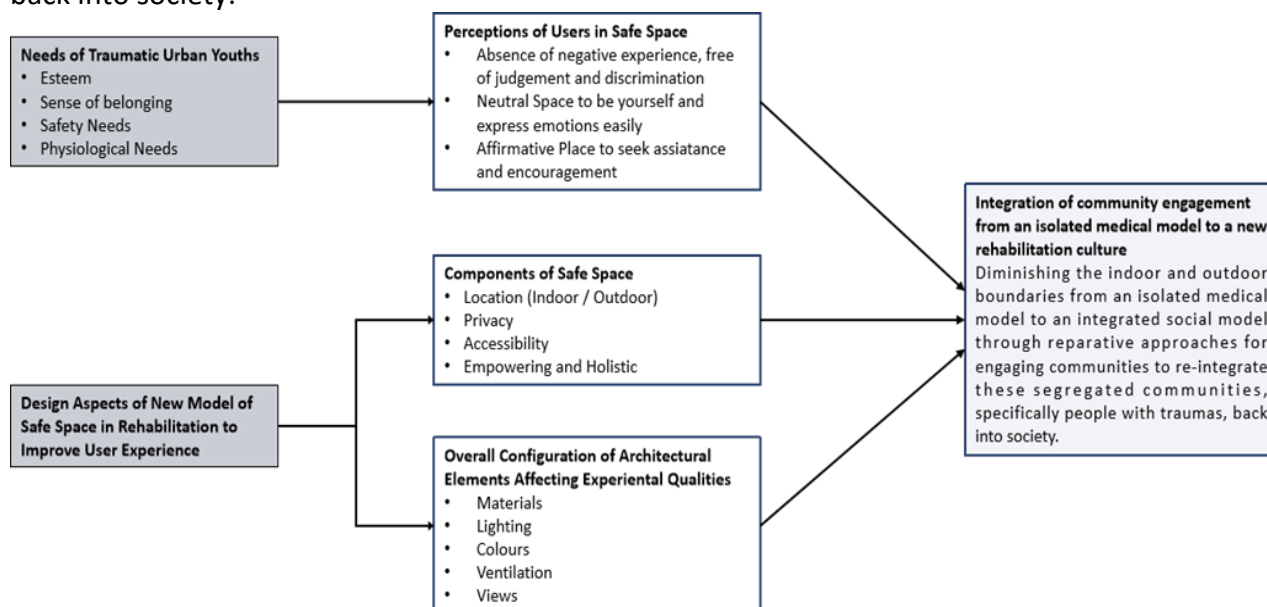

Figure 5. Conceptual Framework
Source: Author (2023)

Result and Discussion
Thematic analysis matrix are often used to organize and analyze qualitative data in research studies. The matrix examines the inductive codes and categories connected to the current existing limitations of safe spaces. It identifies the design considerations that should be adapted into the design of a safe space using a thematic analysis technique. Before producing the interview questions for data collection, the main and sub-research questions are identified along with the deductive. The research questions help determine the scope and focus of the interview questions. Through that, we can focus on our informants and who we should focus our interview on. The interview transcripts are examined as additional data, and a thematic analysis matrix is used to classify the identified codes within the preset qualitative data themes.

Table 1
Thematic Analysis Matrix (TAM) adopted from (Zairul et al., 2017)

Main RQ: What are the open community-based design guidelines implemented to create a safe space that diminishes the indoor and outdoor boundaries for traumatic urban youths in Kuala Lumpur?
Aim of Research: To formulate an open community-based design approach that diminishes the indoor and outdoor boundaries of a safe space for urban youths.
Informants: Counsellors, Psychiatric Specialist, NGO's

Sub Research Questions	*Deductive*	*Strategy of Inquiry*	*Interview Questions*	*Inductive codes*	
				Coding	*Final theme*
What are the current limitations on youth safe space in the urban area?	Youth Safe Space	In-depth Interviews, Desk Review, Observation	IQ1: Who are the traumatic youths? IQ2: What are the triggering factors of urban areas that cause trauma among youths? IQ3: What are the disadvantages of the existing facilities for traumatic youths? IQ4: How do you define a safe space for traumatic urban youths? IQ5: What are the challenges and difficulties when providing a safe space for youths, and how does a safe space benefit the traumatic youths? IQ6: Do you think a safe space is important? If yes, how do you encourage/promote safe spaces for people with trauma?	Various needs Diversity of perspectives Inadequate Resources Inaccessibility Lack of awareness Stressful Environment Non-Privacy	Limitations on youth safe space in urban areas are: Theme 1: Needs and Resources Theme 2: Perspectives and Awareness Theme 3: Accessibility and Privacy Theme 4: Well-being

Source: Author (2023)

Main RQ: What are the open community-based design guidelines implemented to create a safe space that diminishes the indoor and outdoor boundaries for traumatic urban youths in Kuala Lumpur?

Aim of Research: To formulate an open community-based design approach that diminishes the indoor and outdoor boundaries of a safe space for urban youths.

Informants: Counsellors, Psychiatric Specialist, NGO's

Sub Research Questions	Deductive	Strategy of Inquiry	Interview Questions	Inductive codes	
				Coding	Final theme
How to formulate a safe space design for traumatic urban youths in the city of Kuala Lumpur?	Safe Space Design	Desk Review, In-depth Interviews	IQ1: What are the components/factors that need to be considered when creating a safe space? IQ2: How does one create a healing safe space that considers traumatic users' physical and psychological safety? IQ3: What is the overall ambience or atmosphere that a safe space aims to achieve to heal traumatic youths, and what features are required to enhance the overall spatial quality of a safe space? IQ4: Traumatic people's experiential qualities should be considered when undergoing treatment. What are the design considerations implemented in your safe space? IQ5: Is there currently any safe space provided? Can you elaborate in detail about the existing safe spaces?	Spatial Quality Views Greeneries Connectivity and Wayfinding Urban Area Flexible Design Inclusivity Private and Quiet Safe Daylighting and Natural Ventilation Materials Spatial Quality Color Code	Design considerations for a safe space shall include: Theme 1: Urban Design Theme 2: Design Principles and User Experience Theme 3: Sustainability and Natural Elements

Source: Author (2023)

The data collected is then divided into distinct categories to enable focus analysis. Each coding is classified into various themes for each sub-RQ, and thus, the final theme is generated. The

findings show that "Limitations" and "Design Considerations," which emerged as the major themes generated for each sub-RQ from the data analysis, are two prominent inductive codes. In-depth interviews are conducted on the limitations of existing youth safe spaces and safe space design, and the results are presented. As part of the data analysis, a method known as qualitative data analysis was used to organize, analyze, and interpret non-numerical, conceptual information and user input. The goal of qualitative data analysis is to identify themes and patterns, provide answers to research questions, and pinpoint steps that can be taken to improve existing youth safe spaces through safe space design.

Based on experts' interviews, two main themes are identified. The first theme concerns the inadequacy of the healing environment whereby the questions aim to identify the shortcomings of the current government and Nongovernmental Organizations (NGOs) in providing youth safe spaces. Despite having mental healthcare facilities and organizations providing safe spaces, very little is known about them. Traumas and mental health issues are increasing alarmingly, and the current facilities are inefficient in overcoming the traumas and mental issues. The theme covers the various issues with the existing facilities faced by government and nongovernment bodies and the connectivity and wayfinding of how the traumatic youth community seeks help. Mr. Afiq (2023) mentioned that "There are also difficulties in collaborating with schools as schools do not provide cooperation to raise awareness regarding this issue despite monetary rewards being provided … the lack of initiatives by schools is a concern as most of the traumatic cases comes from school-going youths". Pam Goodwin (2023) also mentioned that "The main challenges are the lack of professionals in this field. The number of professionals is unable to keep up with the rising trauma cases that are increasing each year… the appointment times can be very long…take you 2-3 months to see a psychiatrist or psychologists." Ms. Anisa (2023) also mentioned that "It is very difficult to find a healing facility that is located nearby a public transport or accessible by public transportation… the barrier of people unable to afford to pay for Grab thus they have to take the public transport which is very inconvenient if it is located very far away".

In addition, the lack of awareness and the diversity of perspectives from society regarding knowledge of youth safe spaces is one of the main challenges when providing safe spaces for youths. This is further expanded by Mr. Fawwaz (2023): "There is a lack of focus training at home… lack of support from teachers as well as their parents… the acceptance of the community towards youth who suffers from trauma and physical or mental health issues…the stigma of parents who cannot accept that their child requires special needs… difficult to inculcate all the issues and problems faced by the youths to the public due to the learning culture that is not open-minded." Mr. Afiq (2023) also mentioned, "Majority of the people are unknown to all these traumas and mental health due to the lack of education among the parents that leads to youths being unaware as well".
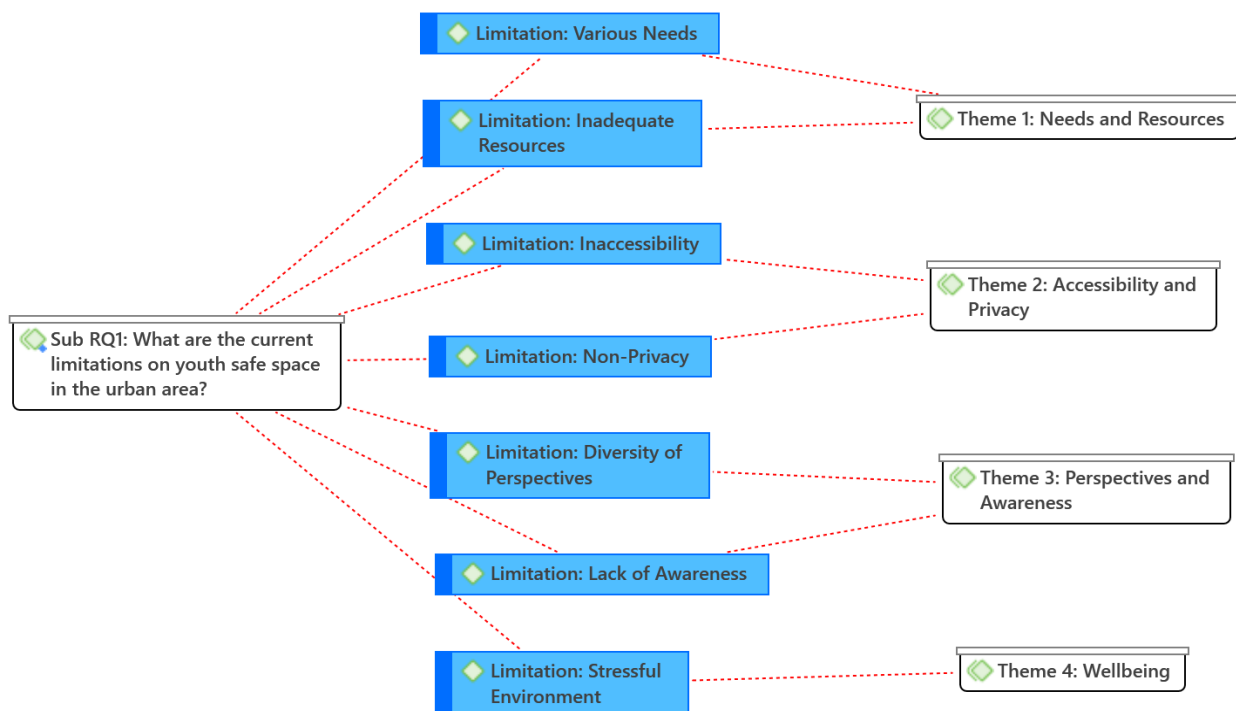
Figure 6. Thematic Network for Theme 1 – Safe Space Constraint
Source: Author (2023)

The second theme concerns urban infrastructures and spatial design, whereby the questions sought to identify the required design aspects to be considered when designing a safe space. Design considerations are crucial in safe spaces to provide the optimum environment for the traumatic youth community to recuperate and overcome their trauma. Urban designs are emphasized to allow the traumatic youths easy access to help and treatments whenever and wherever needed. Spatial designs must also be considered to provide the most suitable healing space that is safe and maximizes the users' comfort. Most organizations also emphasize natural elements, which are important during their healing journey. The theme covers the type of design elements in a safe space.

Urban design and infrastructure considerations should be implemented when designing a safe space. Connectivity of safe spaces to the nearest public transport services and easy wayfinding for traumatic youths to seek help and treatment is essential when providing a safe space. Mr. Fawwaz (2023) mentioned, "Safe spaces must also be permeable to pedestrians by locating at ground level, and it must be within walking distance from the neighborhood community… enhances the safety and security of the traumatic youths with clear sightlines of the community so that they don't feel trapped and insecure". Mr. Afiq (2023) also highlights: "The safe spaces should also be near other facilities such as eateries, libraries, commercials for traumatic youths to get what they want and do what they want during their free time".

Moreover, a safe space design can positively impact psychological well-being by reducing stress, anxiety, and fear. Thoughtful consideration of natural lighting, ventilation, materials, and comfortable spatial arrangements can contribute to a calming and supportive environment, comfort, a sense of security, and inclusivity for all occupants and a positive user experience. Ms. Anisa (2023) mentioned, "A 'HOME' like healing safe space that has proper daylighting and ventilation as well as warm tone colors are provided to maximize the spatial quality for the users ... decorated with a homey vibe and warm lighting ... avoid a safe space

that has a clinical vibe that is mostly found in healthcare facilities". This is further expanded by Mr. Kenny (2023): "The types of spatial arrangements and furniture arrangement is incorporated such that none of the furniture's are at 90-degree angle... arranged to encourage comfortable and engaging conversation... creating intimate groupings or conversation areas".

Safe spaces shall also be physically accessible to individuals with disabilities. This includes providing ramps, elevators, accessible restrooms, and designated parking spaces. Consider the needs of individuals with mobility impairments, visual or hearing impairments, or other disabilities to ensure equal access to all areas of the space. It is crucial to create a safe space where all individuals are treated with dignity and respect, regardless of race, ethnicity, age, religion, or other disabilities. Ms. Anisa (2023) highlights that "There are many traumas that people suffer from and people from different cultures and identities... as the person providing services, there is a need to respect each and every person's identities that come to the safe space... the safe space should foster a culturally sensitive environment that acknowledges and respects the diversity of individuals".

Moreover, flexible design in a safe space is an approach that allows for adaptability and versatility, enabling the space to meet changing needs and accommodate various activities or occupants. Mr. Afiq (2023) mentioned that "Mobile safe spaces act as platforms for community engagement and empowerment for youths... facilitate dialogue, workshops, skill-building sessions, or recreational activities, fostering social cohesion and resilience for youths who are unable to reach their permanent safe space".

Besides that, sustainability and natural elements can provide individuals with a healthy, rejuvenating, and environmentally responsible environment while contributing to a more sustainable future and promoting the well-being of both users and the surrounding ecosystem. Ms. Pam Goodwin (2023) mentions that "exposure to nature or views of green spaces can expedite healing processes, reduce pain perception, and enhance overall patient well-being... well-placed greenery can provide privacy and screening, particularly in outdoor safe spaces... shielding the area from external views and enhancing the sense of security and seclusion". She also mentioned that big windows with proper daylighting provide a well-lit space and natural ventilation to improve overall comfort, indoor air quality, and energy efficiency. Besides enhancing the indoor environment of the space, the natural elements also help to reduce the overall cost, especially air conditioning and lighting. Sustainable materials such as timber should be incorporated. Mr. Fawwaz (2023) highlighted that timber material in a safe space enhances the biophilic connection, fostering a sense of harmony with nature. Exposure to natural materials, such as timber, can positively impact mood, stress reduction, and cognitive performance.
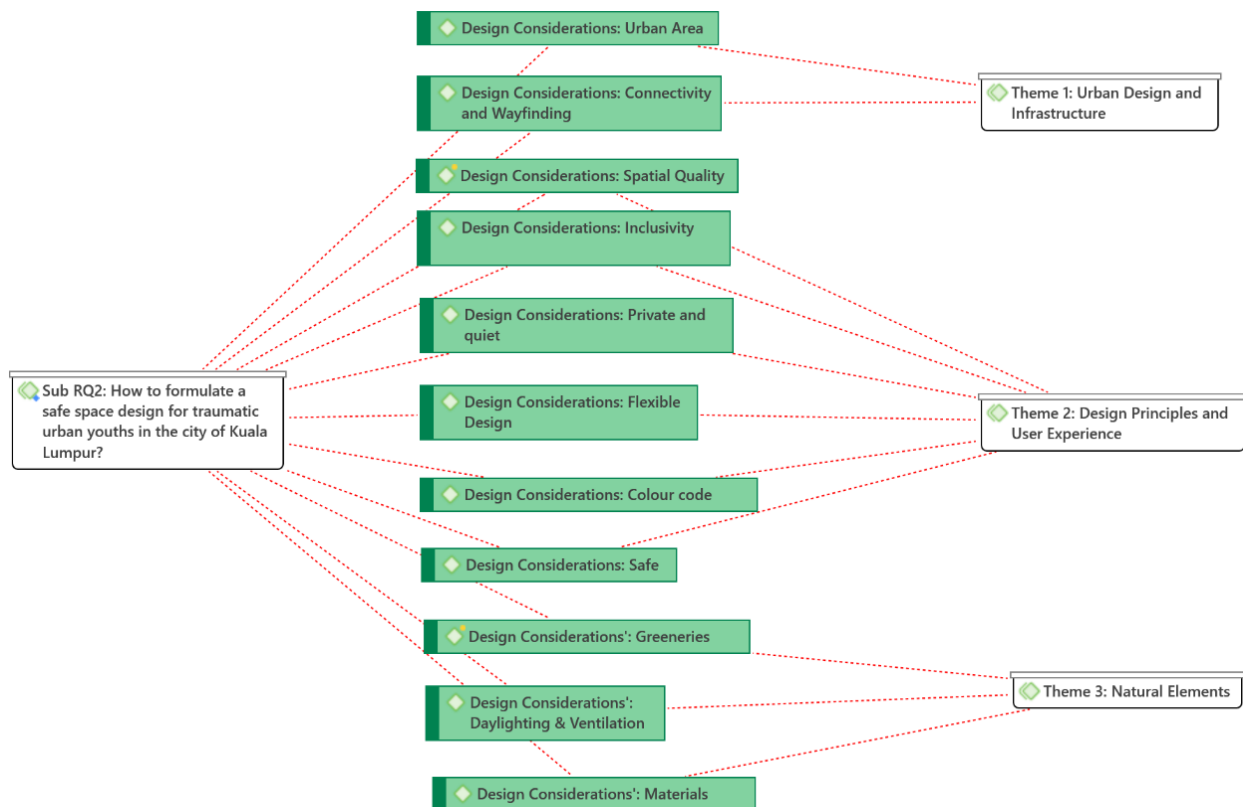
Figure 7. Thematic Network for Theme 2 – Urban Infrastructures and Spatial Design
Source: Author (2023)

Through in-depth interviews with the experts, many safe spaces and healthcare facilities are being provided for youths in the urban areas of Kuala Lumpur. However, the experts have identified that there are still lots of shortcomings and limitations in the current existing facilities. These limitations should not be overlooked, as the number of trauma cases increases yearly. Other than that, the experts highlighted that society's stigma towards trauma and mental health in youths is very common in urban areas, and action needs to be taken against the stigma. Rajendran (2018) states young people are now working to create inclusive, universal alternatives, particularly in the arts, which are crucial contributors to moving towards more powerful choices that consider cultural diversity and permeability. However, the analysis from experts shows that there is a lack of initiatives by youths to promote trauma and mental health in their age group towards society and a lack of action taken to voice out about this rising issue. The experts also mentioned that another limitation is the funds and resources needed to serve the various needs of the traumatic youths. Overall, the analysis only highlights the existing limitations in urban areas and does not include rural contexts or other age groups.

In addition, the expert's discussion mentioned that design consideration of a safe space should be enhanced as many aspects are lacking in the current healthcare facilities, thus creating an unhealthy environment for people with trauma and mental health issues. Starting from urban design and extending to the minute spatial qualities and visual exposures to natural elements, all are essential for creating a positive and healthy safe space. As stated by Ma. N et al. (2021), in the daily life of traumatized people, humans need various visual access and exposure spaces, either an open space to partake in social activities or a quiet space with low visual exposure values for self-communion. In conclusion, experts have a positive outlook

on this research, which can contribute to developing new architectural guidelines for a youth safe space design.

Consequently, the data collection was summarized, followed by the overall summary and discussion of the findings. The discussion of the findings highlights the key themes, patterns, or concepts identified through the data analysis. The findings are then compared with previous studies and existing literature. The areas of convergence or divergence between the data analysis and those of other researchers are identified. Subsequently, the limitations of qualitative research have been identified, and areas for future research based on the findings have been proposed. The significance of the qualitative research findings highlights the study's contribution and implications for the field.

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 traumatized adolescents spend their time significantly impact their development. Thus, providing a safe environment is crucial to successful community adolescent health promotion programs that seek to promote good youth development and integrate themselves back into 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 help or hinder a user's ability to investigate and utilize alternative therapy venues. The notion of environmentally safe uncertainty assists traumatized urban teenagers in keeping an open, secure, and critical curiosity toward the safe space environment.

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 various safe spaces for other users in other urban areas is essential to fulfilling the users' different needs. There is also a barrier regarding existing facilities and how to improve these facilities and amenities to enhance the experiential quality of a safe space and provide a better healing environment for traumatic youths. The research can explore 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.

References

Wallin-Ruschman, J., & Patka, M. (2016). Learning from critical collective spaces: Reflections on the community-diversity dialectic in safe spaces. Journal of Social and Political Psychology, 4(1), 318–331. https://doi.org/10.5964/jspp.v4i1.530

Tinner, L. (2022). Exploring young people's perceptions of health and inequality through art: a co-produced qualitative study. Lancet (London, England), 400, S6. https://doi.org/10.1016/S0140-6736(22)02216-4

Eriksen, I. M., & Seland, I. (2021). Conceptualizing Well-being in Youth: The Potential of Youth Clubs. Young, 29(2), 175–190. https://doi.org/10.1177/1103308820937571

Herrenkohl, T. I., Hong, S., & Verbrugge, B. (2019). Trauma-Informed Programs Based in Schools: Linking Concepts to Practices and Assessing the Evidence. American Journal of Community Psychology, 64(3–4), 373–388. https://doi.org/10.1002/ajcp.12362

Whitton, N. (2018). Playful learning: Tools, techniques, and tactics. Research in Learning Technology, 26. https://doi.org/10.25304/rlt.v26.2035

Cooley, S. J., Jones, C. R., Moss, D., & Robertson, N. (2022). Organizational perspectives on outdoor talking therapy: Towards a position of 'environmentally safe uncertainty.' British Journal of Clinical Psychology, 61(1), 132–156. https://doi.org/10.1111/bjc.12315

Flensner, K. K., & Von der Lippe, M. (2019). Being safe from what and safe for whom? A critical discussion of the conceptual metaphor of 'safe space.' Intercultural Education, 30(3), 275–288. https://doi.org/10.1080/14675986.2019.1540102

Chadwick, E., & Billings, J. (2022). Barriers to delivering trauma-focused interventions for people with psychosis and post-traumatic stress disorder: A qualitative study of health care professionals' views. Psychology and Psychotherapy: Theory, Research and Practice, 95(2), 541–560. https://doi.org/10.1111/papt.12387

Bellantuono, A., Saigh, P. A., Durham, K., Dekis, C., Hackler, D., McGuire, L. A., … Oberfield, R. A. (2018). A comparative analysis of family adaptability and cohesion ratings among traumatized urban youth. School Psychology Quarterly, 33(1), 21–29. https://doi.org/10.1037/spq0000238

Oren, Reut & Orkibi, Hod & Elefant, Cochavit & Salomon-Gimmon, Maayan. (2018). Arts-Based Psychiatric Rehabilitation Programs in the Community: Perceptions of Healthcare Professionals. Psychiatric Rehabilitation Journal. 42. 10.1037/prj0000325.

Massey WV, Williams TL. Sporting Activities for Individuals Who Experienced Trauma During Their Youth: A Meta-Study. Qual Health Res. 2020 Jan;30(1):73-87. doi: 10.1177/1049732319849563. Epub 2019 Jun 3. PMID: 31154911

Mulvale, Gillian & Moll, Sandra & Miatello, Ashleigh & Murray-Leung, Louise & Rogerson, Karlie & Sassi, Roberto. (2019). Co-designing Services for Youth with Mental Health Issues: Novel Elicitation Approaches. International Journal of Qualitative Methods. 18. 160940691881624. 10.1177/1609406918816244.

Daviera, Andrea & Roy, Amanda & Uriostegui, Marbella & Fiesta, Denise. (2020). Safe Spaces Embedded in Dangerous Contexts: How Chicago Youth Navigate Daily Life and Demonstrate Resilience in High-Crime Neighborhoods. American Journal of Community Psychology. 66. 10.1002/ajcp.12434.

Overbey, Tracey & Diekmann, Florian & Lekies, Kristi. (2021). Nature-based interventions for vulnerable youth: a scoping review. International Journal of Environmental Health Research. 33. 1-40. 10.1080/09603123.2021.1998390.

Bassuk, Ellen & Latta, Rachel & Sember, Robert & Raja, Sheela & Richard, Molly. (2017). Universal Design for Underserved Populations: Person-Centered, Recovery-Oriented and Trauma Informed. Journal of Health Care for the Poor and Underserved. 28. 896-914. 10.1353/hpu.2017.0087.

Slade, Mike & Egglestone, Stefan & Blackie, Laura & Llewellyn-Beardsley, Joy & Franklin, Donna & Hui, Ada & Thornicroft, Graham & Mcgranahan, Rose & Pollock, Kristian & Priebe, Stefan & Ramsay, Amy & Roe, David & Deakin, Emilia. (2019). Post-traumatic growth in mental health recovery: Qualitative study of narratives. BMJ Open. 9. e029342. 10.1136/bmjopen-2019-029342.

Sweeney, Angela & Clement, Sarah & Filson, Beth & Kennedy, Angela. (2016). Trauma-informed mental healthcare in the UK: what is it and how can we further its development? Mental Health Review Journal. 21. 174-192. 10.1108/MHRJ-01-2015-0006.

Kim Archambault, Élyse Porter-Vignola, Marilyn Lajeunesse, Victor Debroux-Leduc, Rocio Macabena Perez, and Patricia Garel. Transition Space at the Museum: A Community

Arts-Based Group Program to Foster the Psychosocial Rehabilitation of Youths with Mental Health Problems. Canadian Journal of Community Mental Health. 39(1): 65-83. https://doi.org/10.7870/cjcmh-2020-005

Neo, P., Nagashima-Hayashi, M., Gan, S., & Lin, W. H. (2022). Physical or Virtual? -A Qualitative Inquiry into Youth Perception and Preference for Safe Spaces. Retrieved from https://doi.org/10.21203/rs.3.rs-2083793/v1.

Scannell, Kelcey, "Community Building in the Classroom to Support Students Dealing with Trauma" (2020). Master of Science in Education | Master's Theses. 29. https://doi.org/10.33015/dominican.edu/2020.EDU.08

Thomson, A., Christensen, E., Wiklund, M., & Christianson, M. (2022). A safe place – Adolescents' and young adults' perceptions of youth clinics in northern Sweden. Sexual and Reproductive Healthcare, 33. https://doi.org/10.1016/j.srhc.2022.100752

Skalna, B., & Haupt, P. (2019). Urban spaces in residential areas as an environment for continuous prevention and rehabilitation - Design and benefits. International Journal of Engineering and Advanced Technology, 8(5 Special Issue 3), 327–331. https://doi.org/10.35940/ijeat.E1070.0785S319

Nation, L., Spence, N., Parker, S., Wheeler, M. P., Powe, K., Siew, M., … Dark, F. L. (2022). Implementing Introductory Training in Trauma-Informed Care into Mental Health Rehabilitation Services: A Mixed Methods Evaluation. Frontiers in Psychiatry, 12. https://doi.org/10.3389/fpsyt.2021.810814

Hallett, R. E., & Freas, A. (2018). Community College Students' Experiences with Homelessness and Housing Insecurity. *COMMUNITY COLLEGE JOURNAL OF RESEARCH AND PRACTICE*, *42*(10), 724–739. https://doi.org/10.1080/10668926.2017.1356764

Zairul, M. (2017). flexZhouse: New business model for affordable housing in Malaysia. In *A+BE Architecture and the Built Environment* (Vol. 2, Issue 2). A+BE Architecture and the Built Environment. https://doi.org/10.7480/abe.2017.2