In order for health care providers to deliver meaningful, comprehensive care that is welcoming for people experiencing homelessness, they must understand what makes consumers feel safe. Service sites that are safe will increase access to services and facilitate more consistent engagement in care, resulting in better health outcomes and higher patient satisfaction.

Feeling safe is a complex experience. “Safety” involves not only the physical environment, but also emotional and psychological well-being, equally critical aspects of feeling safe. Due to high rates of experience with violence and trauma, daily challenges to meet basic needs, strained relationships, and the high prevalence of behavioral health disorders, safety is particularly important for people experiencing homelessness.

To examine whether consumers felt safe at HCH programs, the National Consumer Advisory Board (NCAB) created and administered a Consumer Participation Outreach Survey (CPO) with 537 people experiencing homelessness in 6 cities across the United States. The CPO is a regular project coordinated by NCAB and National HCH Council staff. The CPO aims to engage HCH clients in the research process at all levels in order to learn more about the concerns and needs of our consumers and give them a platform to voice thoughts and share experiences. The results of the survey are meant to improve practices and identify policy changes that would help us meet needs effectively.

Results

- The two most important factors that make consumers feel safe were being treated with respect and the physical presence of security. The two most important factors that made consumers feel unsafe were being in an isolated area and dangerous or disruptive individuals.
- The responses demonstrate that respect is critical to people feeling safe, and a majority of participants (95%) felt they are treated with respect at their HCH project.
  - The environment and surroundings of the clinic also impact patients’ feelings of safety in accessing or being in the clinic (with 17% of participants saying they only feel safe around the clinic sometimes, rarely, or never).
  - Participants also felt that security staff and security barriers made them feel safe at their HCH project (87% and 75%, respectively).
- 77% of participants felt that staff were welcoming and 62% felt that staff are non-judgmental. 73% of participants reported that staff had never done anything disrespectful towards them.
- The majority also believe that security staff should have all of the following skills: communication, cultural awareness/competency, empathy, being able to be assertive without being aggressive, and the ability to respectfully calm a situation down.

For most consumers surveyed, HCH settings are seen as safe places, but there is room for improvement.
Discussion & Recommendations

The experience of being respected is central to these consumers’ sense of safety.

- Staff attitudes are central. Given the realities of secondary trauma and staff burn-out, it is important to constantly reinforce the core value of nonjudgmental interactions and the skill sets that express respect, including motivational interviewing, trauma-informed care, cultural humility, non-violent conflict management, and de-escalation. These values and skills should be expressed by all staff, including front-desk staff. Organizations should institute policies that prevent burnout and emphasize staff self-care.

The physical presence of security staff also increases consumers’ sense of safety.

- The importance that consumers place on the presence of security officers is contrary to stereotypes of hostile relationships between police officers and people experiencing homelessness; this finding about security officers expresses a desire for protection.
- Security staff are expected to be respectful and should exhibit “customer service” skills like those expected in other staff and outlined above.
  - Consumers had mixed reactions to security staff with weapons. In hiring or contracting for security staff, it is important for HCH projects to make clear and explicit decisions on this issue.
- Location is important. Isolated service settings can be seen as unsafe. Physical security should be provided both inside and outside service sites. Consumers desire clean, well-lit, and comfortable spaces.

Many HCH consumers struggle with stress, mental illness, substance use, and/or trauma, and some may respond by acting in ways that are perceived as dangerous, disruptive, or threatening. As organizations committed to addressing both behavioral and physical health needs, health centers play a key role in nurturing a delicate balance in ensuring health care access and general safety for all. It is important for health centers to involve consumers in all discussions of approaches to this issue; Consumer Advisory Boards, agency Safety Committees, and Boards of Directors are appropriate venues for evaluating the safety of the HCH environment, including conducting trauma-informed assessments.

Respondents were not only interested in ways that the staff and organization could create a safer environment, but also in ways that the consumers themselves could learn to be safer, feel safer, or cope with feeling unsafe. Many health centers provide intensive trainings on these topics for their staff and are well-positioned to tailor and provide these trainings for their consumers as well.

The National Consumer Advisory Board is responding to these findings by creating a Safety Task Force that will develop a resource guide for assessing safety and trauma-informed practices at HCH projects.

Such measures will improve the sense of safety that people experiencing homelessness have in HCH settings. However, homelessness itself is inherently unsafe, and the real solution to the dangers of homelessness is a home. Helping consumers to find homes is ultimately the best route towards safety.

Conclusion

Feeling safe in the world is a fundamental need of all people. Finding safety is more complex for people who have experienced trauma and homelessness. Responses to this survey demonstrate that feelings of safety are intrinsically tied to feelings of respect, dignity, and relationships with others. As service providers work to reconnect people to their health, wellbeing, and dignity, the environment of care needs to ensure physical, emotional, and psychological safety—founded in respect—in order for people to feel comfortable accessing services and staying engaged in care.