

SAFE SPACES

When looking at safe spaces, we need to account for all of the above aspects and ensure that not only are we providing support in the right way, but also that we are not retraumatizing people by offering support in any way that feels unsafe to the individual i.e. do not create situations in which women have experiences similar to their original trauma – environments, staff (i.e. not having the choice of female staff), imagery etc. Often working in a trauma-informed approach can be beneficial, but always be aware of your scope of practice and what is and is not appropriate for you to provide.

SOME THINGS TO THINK ABOUT AND PUT IN PLACE

- Do you have a distress protocol in place when potential for harm is disclosed?
- Do you have safeguarding checklists included in your risk assessments?
- What training and supervision are you providing to support and refresh your approach to safeguarding? Do you have processes in place to learn from incidents where safeguarding has been an issue?



WHAT FEMALE VETERANS SAY

What we heard in the consultation and codesign was that 'safe spaces' were a high priority when providing support to female veterans. Some may have faced issues such as sexually inappropriate behaviour, including rape and sexual assault and, safe spaces were vital given the way in which their experiences make them feel now in male dominated environments and services. Two notable themes emerged:



Better supported access to statutory and non-statutory services are needed across the whole of the UK, both face to face and online. Where appropriate these should include, childcare / child friendly environments. Currently many women are both unaware and do not feel like they are able/feel welcomed to access services.

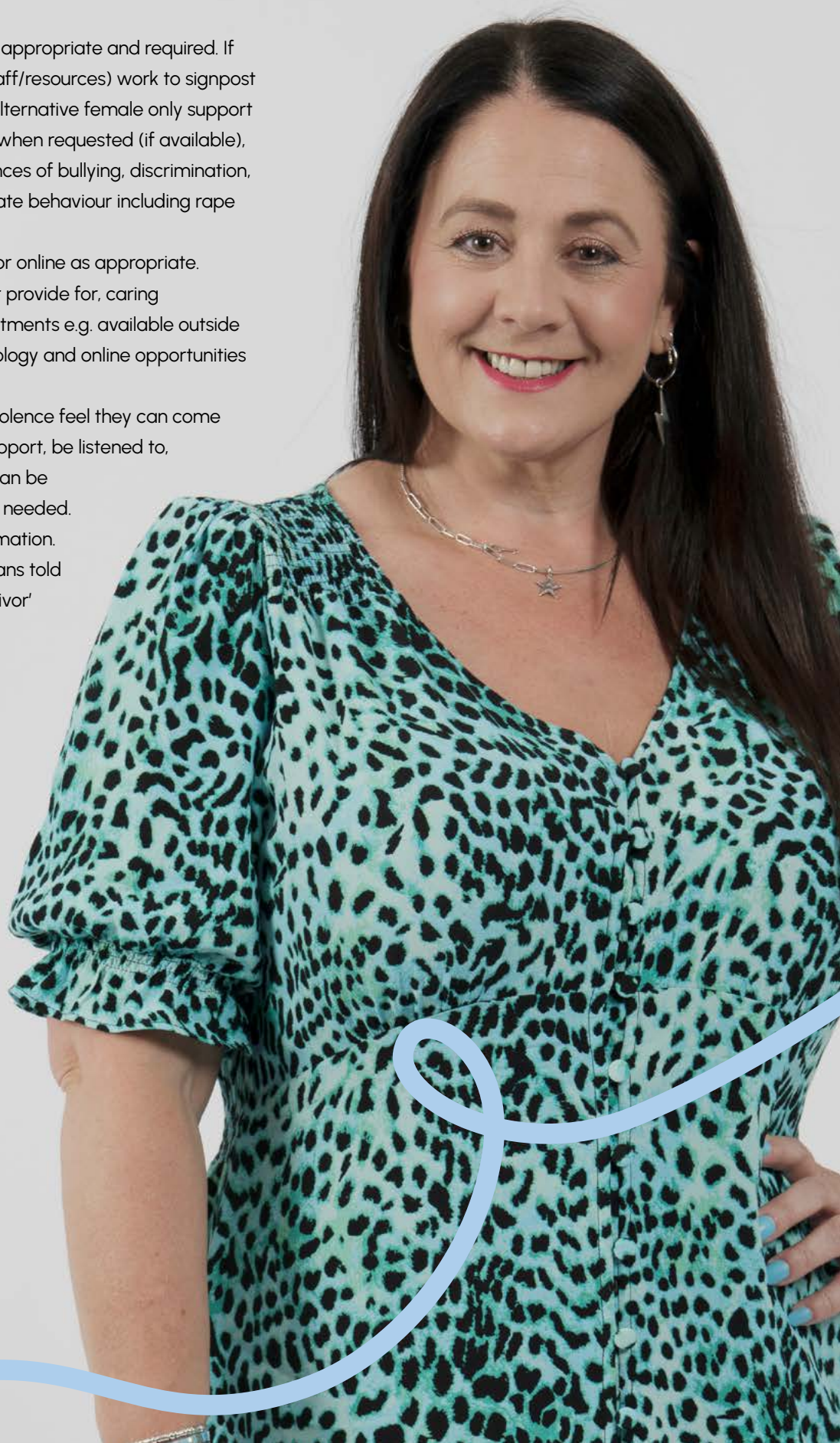


All statutory and non-statutory services and to be delivered in a person-centered way, noting that this can mean many different things. For example,

- some women don't want separate gendered services, they just want to be welcome in services that exist already but
- for some issues and some women, female only services are essential such as for those that have experienced sexually inappropriate behaviours.
- including rape and sexual assault.

RECOMMENDATIONS FROM FEMALE VETERANS

- All services to be welcoming to women, non-judgmental and confidential and being aware of the specific needs of female veterans.
- Female-only safe spaces where appropriate and required. If this can't be provided (due to staff/resources) work to signpost and support women to access alternative female only support
- Female staff made available or when requested (if available), especially in supporting experiences of bullying, discrimination, harassment, sexually inappropriate behaviour including rape and sexual assault.
- Services in accessible locations or online as appropriate.
- Services that take account of, or provide for, caring responsibilities and other commitments e.g. available outside of working hours by using technology and online opportunities where appropriate.
- Ensuring all survivors of sexual violence feel they can come forward and get appropriate support, be listened to, validated / taken seriously and can be appropriately signposted where needed. Please see toolkit for more information.
- Use of language – female veterans told us that services should use 'survivor' rather than 'victim'.



VULNERABLE ADULTS

Some of the people you may support might be defined as a 'vulnerable adult'. Being vulnerable is defined as "in need of special care, support, or protection because of age, disability, risk of abuse or neglect". <https://www.gov.uk/government/publications/vulnerabilities-applying-all-our-health/vulnerabilities-applying-all-our-health>

The Department of Health and Social Care defines a vulnerable adult as "a person aged 18 or over who may need community care services because of a disability (mental or other), age, or illness".

A person is also considered vulnerable if they are unable to look after themselves, protect themselves from harm or exploitation or are unable to report abuse. <https://www.carecheck.co.uk/the-definition-of-vulnerable-adults-and-the-services-they-receive/>

FEMALE ONLY SPACES

For some women and some issues female only spaces are not only wanted but essential to providing the right support. When thinking about female only spaces it is important to take account of the guidance and things you need to put in place to do this in the right way and ensure you are not being discriminatory in any way.

The Equality Commission provides guidance on providing single gender spaces here <https://www.equalityhumanrights.com/equality/equality-act-2010/separate-and-single-sex-service-providers-guide-equality-act-sex-and>

Following the UK Supreme Court Ruling on 16 April 2025, guidance is under review (as of October 2025). Whilst this can be a difficult area to navigate, organisations should remember that the Equality Act 2010 still applies, and sex and gender reassignment are protected characteristics. A link to information on the equality act can be found here - <https://www.legislation.gov.uk/ukpga/2010/15/contents>

SAFETY OF PROFESSIONALS

Safe spaces aren't just an issue for female veterans, it is also important when protecting and safeguarding staff, particularly when certain situations are high risk and sit outside someone's professional boundaries

It is therefore also important to follow all your organisations safeguarding policies for staff wellbeing and risk, alongside that of working with and supporting individuals, ensuring staff feel and are safe at all times.

VETERANS COVENANT HEALTHCARE (VCHA) TOOL FOR EXPLAINING CONFIDENTIALITY TO VETERANS

[This document](#) can be helpful to services when explaining confidentiality and helping veterans to understand what their rights are.



Patient Confidentiality
The Armed Forces Community - A Staff

1 UNDERSTAND
Some veterans may not disclose their service due to sensitive operations or fear of reprisal. Family members may also choose to remain anonymous.

2 AWARE
It is important to make patients aware of their rights to confidentiality. There are many confidentiality reasons why people may not want to identify themselves.

3 THE 'ACT'
Joining the military means signing the Official Secrets Act, which prohibits unauthorised disclosure of information. But they can talk about their healthcare needs.

4 FAMILIES
Some may believe that a serving person's career may be affected by their healthcare needs. It is important that they are made aware that the military are not entitled to know their medical history.

5 EXPLAIN
It may need to be explained to the patient/s that they have the same rights to patient confidentiality as the rest of the population. This can be done verbally, or through an Armed Forces Community Patient FAQ.

CLICK TO VIEW

VETERAN AWARE