Young adulthood—spanning approximately ages 18 to 26—is a critical period of development, with long-lasting implications for a person’s economic security, health, and well-being. Young adults are key contributors to the nation’s workforce and military services. And many are parents who will play an important role in the healthy development of the next generation.

The Institute of Medicine (IOM) and National Research Council (NRC) report *Investing in the Health and Well-Being of Young Adults* explores today’s landscape for young adults and offers guidance in developing and enhancing policies and programs for this population. The report finds that today’s world is more global and networked than in previous decades, and it is marked by increased knowledge and information transfer, heightened risks, fairly low social mobility, and greater economic inequality. These factors place greater demands on young adults. In previous generations, the general path for most young adults was to graduate from high school, enter college or the workforce, leave home, find a spouse, and start a family. Today, those pathways are considerably less predictable, often extended, and sometimes significantly more challenging, presenting more choice and opportunity for some young adults—and more barriers to others.

Marginalized young adults—such as children of low-income immigrants, those aging out of foster care, those in the justice system, those with disabilities, those who dropped out of school, and those who bear responsibility for raising young children—are much less likely than other young adults to experience a successful transition to adulthood. Meeting the needs of marginalized young adults not only improves their lives and can reduce persistent inequalities due to family background, but also has the potential to help them become fully contributing members of society. Absent deliberate action, however, this period of development is likely to magnify inequality, with lasting effects through adulthood.

This brief outlines findings and recommendations from the report that are most relevant to policy makers and program leaders serving marginalized young adults.
OVERLAPPING CHARACTERISTICS IN POPULATIONS AND PROGRAMS

Although marginalized young adults are a heterogeneous group, they often share a number of characteristics and experiences. Similarly, the report says that there is considerable overlap in the populations targeted by the many programs that serve marginalized young adults.

Marginalized young adults are very likely to have low incomes and experience economic hardships, and they are disproportionately likely to be disadvantaged racial and ethnic minorities. Many of them are parents, quite often raising their children without another parent. They are likely to have disabilities, trauma histories, and mental health and substance abuse problems; to engage in risky behaviors; and to become victims of physical and/or sexual violence.

Most marginalized young adults enter adulthood with limited education and work experience. And many are estranged from their families or have problematic family relationships and few positive adult connections on which to rely. They often face the consequences of stigma and discrimination. Many, particularly those with a history of justice system involvement and unauthorized immigrants, are ineligible to receive assistance that is routinely available to similarly situated young people.

There is considerable population overlap across the programs that serve marginalized young adults. For example, young people in the corrections system often spent time in foster care and/or frequently have mental health disorders, many former foster youth have disabilities and/or receive Supplemental Security Income, young Temporary Assistance for Needy Families (TANF) recipients often have contact with child protective services, and many homeless young adults have had experience with the child welfare and corrections systems and/or are parents.

Despite this overlap, program eligibility criteria create obstacles to collaboration across programs and gaps in marginalized young adults’ access to needed help. Most programs either do not explicitly acknowledge young adults as having needs distinct from those of older adults and children or have not adapted well to those unique needs. Moreover, program age restrictions, generally imposed at the state-determined age at which a person is no longer considered a minor, often result in loss of services—for example, foster care and some homeless services—as young people transition to adulthood.

The committee found that most programs are not held accountable for improving the health or well-being of marginalized young adults; program data generally focus on eligibility determination and service provision at the expense of data on young adults’ outcomes. With few exceptions, when programs are held accountable for outcomes, each program focuses on one or a few outcomes specific to that program. For example, corrections programs focus on avoidance of re-entry to jail and prison, TANF on employment, and homeless programs on housing stability. This is true even though these distinct outcomes arguably are inextricably linked.

Most programs that serve marginalized young adults fall far short of serving the entire population eligible for assistance. In some cases—such as homeless youth services—programs are funded on a competitive basis through federal grants to local public or private agencies, leaving many jurisdictions with no services at all. In other cases, variation between state and local governments in the implementation of federal programs—such as extended foster care—means that some young adults receive assistance, while those across a state or county line do not. In many cases, inadequate funding means that there is a long list of young people waiting for help.

DIFFERENTIATING YOUNG ADULTS

The report offers the cross-cutting recommendation that federal, state, and local governments and nongovernmental entities that fund programs serving young adults or research affecting the health, safety, or well-being of this population—including marginalized young adults—differentiate young adults from adolescents and older adults whenever permitted by law and programmatically appropriate. This may be implemented through the following specific actions:

- modify reporting of data to identify young adults (aged 18-26) as a distinct age group in all reports, evaluations, and open data systems in which they are included;
- enhance new or existing surveys or experimental research focused on either adolescents or adults to advance knowledge regarding the health and well-being of young adults and healthy transitions into young adulthood;
- ensure that services provided to young adults are developmentally and culturally appropriate, recognizing that while adolescent or general adult services may sometimes be appropriate, modifications to existing services or entirely new approaches may be needed;
• engage diverse young adults in designing and implementing programs and services;
• support workforce training for health and human services providers to develop the skills and knowledge needed to work with young adults and their families;
• seek opportunities for coordinating services and, where possible, integrating them to achieve greater effectiveness and efficiency; and
• develop, implement, and evaluate systematic policy and program experiments to help identify the most effective approaches to improving the prospects of young adults.

PROMOTING A COMPREHENSIVE VIEW

The current lack of a comprehensive view of populations of marginalized young adults limits the development of policies and programs intended to reduce their marginalization. Gaining better knowledge of how marginalized young adults fare is complicated by the fact that the character of their marginalization often changes over time, and many subpopulations make up a very small portion of the overall population of young adults. For example, young people move in and out of the foster care and corrections systems, and these systems generally collect little or no information about what happens when a young person is not “in the system.” Integration of information across systems serving marginalized young adults and over time can provide a more complex, longitudinal perspective on their health and well-being.

The report recommends that federal and state government agencies—including the departments of Health and Human Services, Labor, Justice, Housing and Urban Development, and Education, as well as corresponding state agencies—incorporate a greater focus on marginalized young adults in ongoing and new population-based, cross-sectional, and longitudinal studies of young adults. Federal and state governments also should continue encouraging programs that serve marginalized populations to make better use of administrative data for describing the overlap of populations across service systems and young adults’ trajectories into and out of these systems, and for evaluating policies and programs affecting young adults.

IMPROVING POLICIES AND PROGRAMS

Policies and programs aimed at supporting marginalized young adults are fragmented and have narrow and idiosyncratic eligibility criteria that pose obstacles to young adults getting the help they need, frequently create lapses in the help that is provided, and too often are stigmatizing. Major entitlement programs intended to help vulnerable populations provide limited support for young adults, and discretionary programs targeting these populations often fall far short of meeting demonstrable need. In addition, variations across programs in how marginalized young adults are categorized result in a lack of accountability, with multiple distinct outputs and outcomes being associated with the plethora of programs. As mentioned earlier, there is no collective accountability for improving the overall health and well-being of marginalized young adults.

The report recommends that Congress and the executive branch should amend federal laws and regulations to allow for more flexible and efficient eligibility determination and service provision across marginalized young adult populations. In funding evaluations of programs for marginalized young adults, the federal government and philanthropic funders should emphasize evaluation of programs aimed at improving outcomes across multiple marginalized populations while remaining sensitive to differences across subpopulations. The report also recommends the amendment of laws and regulations to create accountability for achieving improvement on a limited set of key outcomes for marginalized young adults. Outcomes could include employment, education, housing stability, safety, health, connections to responsible adults, and effective parenting.

The committee found that a promising policy trend involves two-generation approaches, which invest in both young adult parents and their young children at the same time. These programs aim to move parents onto a pathway that leads to self-sufficiency and economic independence, supporting human capital development and physical and behavioral...
health among both parents as children, as well as providing parenting support. Investing in parents is also likely an investment in the long-term development of children.

CONCLUSION

Despite extensive challenges, some marginalized young adults ultimately fare very well as adults, and their hopes and aspirations are similar to those of young people who have not been marginalized. Young adults are resilient and adaptable, and many make remarkable accomplishments, demonstrating an extraordinary capacity for creative insight and innovation. At the same time, however, too many young adults are struggling to find a path to employment, economic security, and well-being.

Healthy, productive, and skilled young adults are critical to the nation’s workforce, global competitiveness, public safety, and national security. The report emphasizes the need to provide resources and support that will promote independence and productivity for all young adults.