Vulnerable Populations and the Transition to Adulthood

D. Wayne Osgood, E. Michael Foster, and Mark E. Courtney

Summary

D. Wayne Osgood, E. Michael Foster, and Mark E. Courtney examine the transition to adulthood for youth involved in social service and justice systems during childhood and adolescence. They survey the challenges faced by youth in the mental health system, the foster care system, the juvenile justice system, the criminal justice system, and special education, and by youth with physical disabilities and chronic illness, as well as runaway and homeless youth.

One problem is that the services these vulnerable populations receive from these systems as children and adolescents often end abruptly as they transition to adulthood, even though the need for them continues. Youth must leave systems tailored for clients their age and, if they are eligible for further services at all, enter adult systems that are not equipped to address their needs. One exception is the special education system, whose services extend into early adulthood and are designed for individuals' needs.

The authors review current public policies directed toward vulnerable youth in transition and find problems in four areas: eligibility criteria that exclude youth from services that might benefit them, inadequate funding for transition services, a lack of coordination across service systems, and inadequate training about young-adult developmental issues for service professionals.

The authors then discuss policy options that can help create a developmentally appropriate and socially inclusive system of support for vulnerable youth. Among the options are strengthening all programs for youth in transition, improving the existing systems of care for children and adolescents, addressing the loss of access to services at the age of majority, and coordinating today's multiple systems into a single coherent system. The authors see heightened governmental interest in better supports for vulnerable young adults, both through expanding the federal role in their lives and through improving coordination of the systems that serve them. The Fostering Connections Act of 2008, for example, extended services to adolescents in foster care from the age of eighteen to the age of twenty-one.

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ow an adolescent fares during the transition to adulthood has long-term repercussions. Earning a college degree leads to a higher-paying and more prestigious job, while early parenthood, unsuccessful marriage at a young age, and involvement in crime or problematic substance use all foretell difficulties in finances, family relationships, and beyond.1 More than twenty years ago, the William T. Grant Foundation's influential report on The Forgotten Half demonstrated that non-college-bound youth have much poorer prospects for successful and satisfying adult lives than do college-bound youth.2 In this article we focus on what the transition to adulthood means for youth who are considerably more vulnerable, as evidenced by their involvement in social service and justice systems during childhood and adolescence.³ If the transition to adulthood is likely to be smooth for college-bound middle-class youth, but is often rough sledding for working-class non-college-bound youth, then it can be a minefield for such vulnerable populations.4

As Rick Settersten and Barbara Ray make clear in their article in this issue, moving into adulthood involves a long and often difficult transition in the United States and other industrialized nations in the West. The period after high school and well into the twenties has become a time of semi-autonomy during which youth typically remain dependent on their parents in many ways, not only financially, but also for help ranging from a place to live to extended child care. If the transition to adulthood is slow and arduous for a large share of the general population, how much harder must it be for young people who have spent years in the mental health or juvenile justice system or in foster care? The problems facing these groups as they transition to

adulthood are critically important, to these youths and their families of course, but also to the public institutions that have evolved over time to address their special needs, and to the nation as a whole.

These vulnerable youth populations can be described in terms of the specific challenges they confront—their disabilities, for example, or their trauma histories—over and above those faced by young people generally. They can also be described with respect to the public systems that provide services to them, and often constrain their opportunities, before and during the transition to adulthood. Because vulnerable youth often face multiple challenges and are often served by multiple public systems, it is difficult to estimate precisely the size of the population as a whole, as well as to identify clear policy directions. We have chosen here to describe these youth in terms of the public systems with which they are involved. Although this approach has its limits, its strength is that it illuminates the challenge of how policy reform can help vulnerable youth move successfully into adulthood. We consider the transition to adulthood for seven populations, distinguished by their involvement in specific government systems: the mental health system, the foster care system, the juvenile justice system, the criminal justice system, special education, the health care system (for youth with physical disabilities and chronic illness), and (though these youth really have no comprehensive system of care) runaway and homeless youth.

At the outset, it is important to recognize that the diverse missions of the systems that provide services for vulnerable youth complicate the task of assisting the transition to adulthood. Some of the systems, notably foster care and juvenile justice, are custodial

in nature, while others generally provide support to young people but do not take over parental responsibility. The foster care and juvenile justice systems are held legally accountable for the overall safety and wellbeing (for example, education and health) of youth in their care, though they often rely on other systems for assistance in carrying out these roles. In contrast, although they can provide crucial support to vulnerable youth, the health and special education systems are responsible for more specialized services targeting particular needs of young people. And although the juvenile and adult justice systems are responsible for meeting the needs of the populations they serve, they are also expected to play a role in ensuring public safety. The different missions of these custodial and non-custodial systems are not, at least in principle, in conflict with each other, but their distinct goals can get in the way of close collaboration.

Even if the transition to adulthood had not become so demanding, members of these vulnerable groups would face exceptional challenges finding employment, attending college, and marrying and starting a family. Many struggle with emotional or behavioral problems; many have histories of problems in school and the community. Often their families are unable or unwilling to provide the support that most families provide to their children during this transition—funding for college, child care that permits work or schooling for young parents, a place to live when times are hard. Some of these young adults are hampered by limited capacities and difficulty acquiring skills. The day-to-day tasks of achieving financial and residential independence can be daunting because of physical disabilities, chronic illness, or mental illness. And it has long been thought that involvement in the justice and foster care

systems may exacerbate the problems of some youth or carry a stigma that makes success less likely.⁵

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The difficulties that members of these groups encounter as children and adolescents lead all of them to depend on (or be entangled in) public systems, often for many years. But the transition to adulthood changes their established relationships with these systems, typically in dramatic ways. Reaching the age of eighteen or twenty-one may end eligibility for services, sometimes abruptly. The eligibility cutoffs are increasingly problematic because most other young people their age continue to depend on others and need support and training, often for many years. Only rarely, as with special education services and foster care, are programs already in place to smooth the transition to adulthood. More often, youth leave systems tailored for clients their age and, if they are eligible for further services at all, enter new systems that serve much older people and that are not equipped to address the special issues of young adulthood. Such changes in eligibility and in service systems pose important and complex issues for public policy.

The Challenges They Face

As noted, one reason to pay closer attention to these vulnerable populations is that the

lengthening transition to adulthood poses an even greater challenge for them than for other youth. Some of these vulnerable youth must accomplish tasks that other youth do not face. Whereas most young people begin the transition to adulthood from the security of their family's home, runaway and homeless youth and youth leaving foster care may have to find their own housing. Youth entangled with the juvenile or adult justice system may have to pay restitution or follow rules of probation or parole that restrict their activities. Physically disabled youth often must arrange medical services or assistive devices. Taking on these extra burdens makes it that much more difficult to get a college education or develop a strong romantic relationship that may lead to marriage.

Some of these populations have only limited ability to perform everyday tasks. Those with physical disabilities, for example, may have reduced strength and range of movement; youth in special education may have learning disabilities or cognitive impairments. Such limitations could preclude certain occupations or even rule out independent living without special assistance. Young adults with mental illness and behavioral problems could find it hard to meet the expectations of employers, friends, or romantic partners.

Deficiencies in family support—a common challenge for most of these vulnerable populations—are increasingly significant in the context of the lengthening transition to adulthood. Youth in the general population typically receive valuable support from their families, and even when they do not, they know it would be forthcoming were a special need to arise. Family financial support—in the form, say, of funding for a college education—is essential to the ability of middle-class families to put their children on a professional

career track. Vulnerable youth often have poor relationships with their families, who themselves have limited economic resources. Youth in the juvenile justice system and in special education often come from poor, single-parent families. 6 Most problematic of course, are the limited (even absent) or negative relations with family commonly experienced by runaway and homeless youth and youth who have been living in foster care. The difficulty is not always a family's lack of motivation. In many cases parents and extended family of these youth strive to be supportive, but the cumulative demands of the long journey through childhood can sap parents' ability to take on the burdens of a longer transition to adulthood.

Changing and Narrowly Defined Eligibility for Service Systems

The services these vulnerable populations receive as children and adolescents often come to an end during the transition to adulthood, even if the need for them continues and even if current life circumstances present obvious difficulties. The government assumes different relationships with children than with adults and offers separate sets of service systems for the two groups. Because the government sees children as being dependent, it makes more services available to them and puts less restrictive eligibility criteria on them.

As adolescents move into adulthood, their program eligibility ends, sometimes abruptly and sometimes in phases. State-supported foster care, for instance, stops between ages eighteen and twenty-one, depending on the state, reflecting an outdated notion that the step from childhood dependence to adult independence is a simple one. Independence is, indeed, the appropriate goal, but the modern transition to adulthood is long and complex, and chances of success are much

enhanced by continued support. More than ever, adolescents benefit from assuming responsibility gradually, while receiving continued guidance from concerned adults. After the difficulties that youth in foster care have faced earlier in life, their need for continuing assistance from adults is no doubt greater than that of most other youth. It is deeply problematic that, having assumed the role of parent during the teen years, the state refuses to play the important continuing role of parent during the next decade.

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In the special education system, by contrast, services extend into early adulthood and are tailored to individuals' needs. The federal Individuals with Disabilities Education Act (IDEA) requires secondary schools to begin developing individualized transition plans when students are fourteen. Each special education student must have a plan with long-term goals for education, vocational training, and general life skills, and that plan must specify the services needed to achieve these goals.

In some systems, reaching the age of majority brings drastic change. A stark example is the

shift from the juvenile justice system to the adult criminal justice system. After reaching a state's age of majority (usually eighteen), youth who commit criminal offenses are no longer eligible for the juvenile justice system. Instead they move from the juvenile system, which views children as dependent and malleable and takes rehabilitation as at least its nominal goal, to the adult system, where the explicit goal is punishment.

In all these systems, the state assumes less responsibility for youth once they pass an age threshold beyond which they are no longer considered children. When they move across that arbitrary line and become adults, the systems that have been trying to meet their needs are no longer available. They either lose eligibility for assistance altogether or face a totally new set of eligibility requirements to enter systems with different missions. And when they *are* eligible for new services, adult-focused agencies rarely offer programs that address their specific developmental needs and rarely offer specialized training for staff toward this end. Continuing services for these vulnerable populations might not be necessary if government systems had prepared them fully for the transition to adulthood—and if the transition to wellpaying jobs and early marriages were as smooth today as it was during the 1950s. No doubt some vulnerable youth still make that transition successfully, but for many others whose severe difficulties have kept them involved in these systems for years, success is highly unlikely.

That eligibility for assistance changes just as these youth begin the transition to adulthood is not the only problem with the eligibility criteria of these public programs. Each program is designed to respond to what is perceived to be a distinct need (such as disability or mental illness) or problem (such as crime), even though vulnerable young people do not fit neatly into such narrowly defined eligibility "boxes." Because public support systems for vulnerable youth have been designed around these categorical eligibility criteria, no one system is responsible for meeting the entire range of needs of the young people it serves, and each system uses its own eligibility criteria to engage in a process of gate-keeping that can deny youth access to services. For example, state child welfare and juvenile justice systems can be in conflict over which system should provide care for adolescents engaging in problematic behavior, and the way that conflict is resolved can have significant consequences for the kinds of services available to youth after reaching the age of majority.

Commonalities during the Transition to Adulthood

As these seven vulnerable groups struggle during the transition to adulthood to get work and to start families of their own, the particular profile of outcomes varies across the groups, but they share much in common.⁷ One commonality is that males, the poor, and youth of color are over-represented in every group. Another is that youth in every group vary widely as to the seriousness and type of problem or need. A third commonality is population overlap—that is, that members of one group often belong to another group as well. A fourth is that members of every group have poor outcomes in many domains. And the final commonality is that in every group the factors that contribute to success are the same.

Over-Represented Groups

Vulnerable populations generally have a larger share of males, of youth from poor families, and of youth of color than does the general population.8 Young men are over-represented both because specific biological factors are relevant to certain disabilities and because higher rates of typically male behavior bring them into contact with a government system. For example, autism, a disability that leads to placement in special education, is more common among boys than girls. And illegal behavior, which is far more common for males than females, brings contact with the juvenile and criminal justice systems.¹⁰ Differences in behavior may also elicit reactions from within the service systems that lead to this overrepresentation. Teachers, social workers, and police, for example, may be more troubled by the disruptive behaviors more common among males than by the depressive symptoms more common for females.

Youth of color are also over-represented in each of the vulnerable populations. The criminal justice system incarcerates African American men at six times the rate of whites. 11 And youth with disabilities are twice as likely as youth in the general population to be African American.¹² The over-representation of minority group members is partly attributable to poverty, which is sometimes an eligibility factor (as with foster care) and sometimes a risk factor (as with poor mental health) for the problem targeted by the system. Poverty can also play a role in the decision-making process regarding entry to a system. A family's standing in the community and whether it has the resources to purchase private counseling, for example, may influence whether a school principal decides to allow a family to address its child's misbehavior or to turn the matter over to the police or social services.

It would be a serious mistake, however, to assume that all youth in these vulnerable populations are poor. Even the most advantaged families sometimes have children with serious problems. And these families' resources may help them to obtain public services when needed, as when middle-class parents obtain a private diagnosis and press the special education system to provide corresponding assistance. Even so, the rate of poverty is 50 percent higher among disabled youth than among other youth.13

Poverty is also important at the community level. Rates of crime and delinquency are high in poor neighborhoods, in part because of the absence of the strong ties among neighbors that could enable an effective response to anti-social behavior. 14 High crime rates in these areas enmesh more youth in the juvenile and criminal justice systems, and the resulting victimization and family disruption raise risks for mental health, family stability, and disability. Again, though, there are countervailing dynamics in resource-rich neighborhoods. For instance, because of the higher overall levels of safety and academic achievement in such neighborhoods, a youth's minor transgressions can result in arrests and struggling students are more likely to land in special education.

Diversity of the Populations

It is important to keep in mind that, although each vulnerable group is defined by a problem or need and a corresponding service system, its population is far from homogeneous. Instead, youth in each population vary greatly as to the seriousness and type of problem or need. The special education system, for example, covers youth with mental retardation as well as youth with emotional and behavioral problems. And this diversity in problems or needs may correspond to underlying population differences. For instance, childhood disadvantage and educational failure is more common among serious

and repeat offenders than among first-time offenders.15 Both before and during the transition to adulthood, youth with different problems require different resources. Youth who are blind and youth with an orthopedic impairment require quite different services from the health system; likewise the mental health system must provide different services to those suffering from moderate depression and to those experiencing a serious thought disorder, such as schizophrenia.

Youth in these seven groups also differ in the age at which their vulnerability arises, a variation that has implications for how long they are involved with a particular system. Some youth enter foster care as infants; others, as teenagers. Usually, being in these vulnerable populations as young adults represents at least some continuity from adolescence, but exceptions exist. Some mental health problems, for example, typically appear in early adulthood, and young adults can become involved in the criminal justice system without having previously encountered the juvenile justice system.16 Because research on the transition to adulthood is quite limited for most of these groups, much less is known about them as young adults than as children and adolescents.

Overlap among the Vulnerable **Populations**

Treating vulnerable youth as belonging to distinct groups is somewhat misleading, because the youth served by these different systems overlap to a large degree and in many different combinations. No good epidemiological data document how many youth are involved in more than one of these systems, but evidence shows that overlaps between specific pairs of systems are extensive. For instance, 35 percent of emotionally disturbed youth in special education are arrested as juveniles. 17

One likely source of such overlaps is that the same risk factors, such as parental substance abuse, learning problems, and community disadvantage, dispose involvement in many of these systems. For instance, both incarcerated adolescents and foster youth typically have serious academic deficits, raising the likelihood of special education placement for both.¹⁸

Another source of overlap is the administrative links between the systems, with each sometimes referring youth to others. Special education and mental health professionals may refer youth to one another, and problems at school may lead administrators to call in justice personnel or child welfare. In some cases, one professional suspects a problem that falls into another professional's domain. In other cases, two different systems may provide services addressing the same problem, such as school assistance and outside counseling for an emotional disorder.

Yet another, and unfortunate, source of overlap is that involvement in one system may exacerbate other problems, thereby leading to contact with other systems. For instance, youth who come to the juvenile justice system with high rates of externalizing problems, such as violent behavior, often suffer as well from internalizing problems, such as anxiety and depression.¹⁹ If the justice system removes a youth from friends and family to reside in a correctional facility, that experience could well exacerbate any internalizing problems and lead to contact with the mental health system. Similarly, the disruptions of moving into and out of hospitals, foster homes, and residential treatment facilities will disrupt learning and interfere with success at school, which has consequences not only for special education but also for delinquency.20 In this vein, research has found

that removal from the home and multiple placements occasioned by spending time in foster care are also associated with increased criminal activity.²¹

Poor Outcomes in Many Domains

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Members of all seven of these vulnerable groups fare poorly at completing high school and obtaining the postsecondary education critical to occupational and financial success in today's economy. One study finds that only 54 percent of youth discharged from foster care at age eighteen complete high school within 2.5 to 4 years, compared with 78 percent of same-age peers in the general population.²² Limited education is particularly striking among young adults who have been incarcerated as either juveniles or adults, with studies reporting that fewer than 20 percent have diplomas or GEDs.²³ Similarly, fewer than 15 percent of homeless youth over age eighteen have high school diplomas.24 Educational deficits are genuine but less dramatic for some other groups such as young

adults who were in special education, youth with mental health problems, and youth with physical disabilities.²⁵ Even so, education is often severely limited among the members of these groups whose problems are more serious. For instance, young adults with multiple physical disabilities have only a one in twelve chance of completing a higher education.²⁶ Although data on rates of college attendance generally are more scarce, rates appear to be remarkably low for all vulnerable groups. By age twenty, less than 10 percent of former foster youth have attended college.27

One of the primary tasks of the transition to adulthood—to begin full-time employment with the aim of achieving financial independence—proves a greater challenge for all of these vulnerable groups than for the general population. Again, the differences are moderate for some groups, more stark for others. For instance, 57 percent of youth from special education have full-time employment three to five years after high school, compared with 69 percent for other youth.28 But only about one-third of homeless youth are employed full-time.²⁹ As with education, consequences can be more extreme for youth with more serious problems: 39 percent of young adults aged eighteen to thirty with serious physical disabilities are in the labor force, compared with 72 percent of those with mild disabilities and 79 percent of the general population.³⁰

The combination of limited education and employment has understandable consequences for the living circumstances of the vulnerable groups. Research on this topic for former foster youth, homeless youth, and young adults involved in the juvenile justice system shows that all are likely to live below the poverty level, to have trouble paying bills and other expenses, and to depend on public assistance.31 The nature of the problems that arise also depends on a group's particular challenges and life histories. For instance, former foster youth and homeless youth have high rates of homelessness and unstable living situations, and establishing an independent household is especially problematic for young adults with physical disabilities or mental retardation.32

Rates of marriage do not appear to differ much between the vulnerable groups and the general population.33 Perhaps this similarity between the two groups should not be surprising given the low rates of marriage among all young adults today, a reflection of combined trends toward later marriage among the highly educated and toward lower lifetime marriage rates in some disadvantaged groups.34

A more distinctive feature of family formation for the vulnerable populations is high rates of parenthood, especially outside of marriage. For instance, about a third of female former foster youth are raising children on their own by age twenty-one.35 Similarly, half of young women diagnosed with learning disabilities or emotional disturbances are mothers three to five years after they finish high school, compared with less than one-third of the general population.36 More than a quarter of young women involved in the mental health system experience unplanned pregnancies, compared with less than 10 percent of the general population.³⁷ Taken together with the other difficulties of the vulnerable groups, these high rates of parenthood pose serious problems. A large share of women who had been in foster care, for example, reported that their children suffered from health, education, or behavioral problems, or had been removed from their homes. $^{\rm 38}$ Members of these vulnerable groups also engage in more

high-risk sexual activity, as reflected in the number of partners and sexually transmitted diseases, and they are more often subjected to sexual victimization.³⁹

Other impediments block the path toward adulthood. Some obstacles are simply continuations of earlier problems, such as criminal behavior by young adults who had been involved in the juvenile justice system and mental disorders among young adults with mental health problems as adolescents.⁴⁰ But most of these populations also face a wide variety of new problems. For instance, young adults formerly involved in the foster care, special education, and mental health systems have high rates of criminal behavior;⁴¹ those formerly involved in the foster care and juvenile justice systems have elevated rates of mental health problems;⁴² and almost all the vulnerable groups have high rates of substance use.43

Factors Contributing to Success

Despite their vulnerabilities, many youth in all of the populations achieve at least a basic level of self-sufficiency, and some go on to reach more substantial success. Those who succeed tend to be characterized by resilience—the ability to surmount difficulties and to recover quickly from stressful events or mishaps.44 The resources that contribute to resilience come in many forms, from individuals' skills and personality, to supportive relationships with other people, to involvement in groups like churches and clubs. The more researchers can learn about these sources of resilience, the more they can strengthen social policy by showing how government assistance can enable people to do the most for themselves. A hallmark of policies based on resilience is an emphasis on youth taking an active role in creating their own success—a counter to the notion that

social programs take away from individual responsibility.

Research has also begun to identify other factors that promote success in the transition to adulthood. One is success at school. Not only is school success a positive outcome in its own right, but it is a valuable resource that enhances success in many domains, particularly employment, which places an everincreasing premium on education. Support from family and friends is a second common protective factor, as would be expected given all young adults' need for support from others during today's extended transition to adulthood. For example, research has found healthy interpersonal relationships valuable in helping juvenile offenders desist from crime. 45 Similarly, healthy interpersonal relationships characterize the successful youth who leave residential treatment facilities. 46 Certain personality traits, such as persistence and confidence, also enable some vulnerable youth to make a successful transition to adulthood.47

Four Policy Challenges

A review of current public policies directed toward vulnerable youth in transition reveals problems in four areas. 48 First, eligibility criteria exclude youth from services that might benefit them; second, funding for transition services is inadequate; third, lack of coordination across service systems hampers appropriate service delivery; and, finally, many service professionals lack training in developmental issues for young adults.

Eligibility criteria often prevent needy youth from using the services that *are* available. For instance, before recent changes in federal policy, transition services that were available to youth in foster care were quite limited for those who left care before aging out.⁴⁹ A

youth who spends several years in foster care before being adopted at age fourteen may well benefit from transition services as much as a youth who ages out. Such inconsistency works against other goals of the child welfare system—in this case, although adoption is encouraged by public policy, it penalizes youths in terms of their long-term prospects. Similarly the juvenile justice system offers after-care and support only to youth placed in residential settings, not to those on parole.⁵⁰ Placement on parole may reflect a range of policies determined by the attitudes of judges or the local community, attitudes that may have little to do with a youth's need for assistance in making the transition to adulthood.

Overall service delivery is hampered by limited funding in relation to the actual need.⁵¹ For example, although the federal government gives states \$140 million a year to help prepare foster youth for the transition to adulthood, that total translates into very little per youth. Even if the states allocated all of that funding to services for the approximately 25,000 youth who exit foster care each year to legal emancipation, the share going to each former foster youth between eighteen and twenty-one would be less than \$2,000. Because there are no age restrictions on the use of these funds and because states often target youth sixteen and older, the actual amount spent per youth is undoubtedly even less.

A third policy challenge is that the service systems operate independently and almost in isolation from each other. They rarely even communicate except regarding specific youth, and sometimes not even then. The lack of communication reflects narrow federal eligibility criteria that also make it hard for local government and private-sector service providers to aggregate funding across sources, leading to gaps in, and duplication

of, services. For instance, in many communities youth in the juvenile justice system have no way to obtain mental health services. Service delivery is also hampered because the child- and adult-serving systems operate independently of each other. Youth entering adulthood encounter entirely new systems, such as vocational rehabilitation, and typically there is little communication even between child and adult arms of the same systems.

The attitudes and training of service providers pose the final policy challenge. Even if the relevant agencies and departments were to work well together in a given community, young adults might still have trouble finding providers who are aware of their age-specific needs, much less trained to address them. Research has demonstrated, for example, that medical providers are ill-prepared (or even unwilling) to discuss issues of sexuality with adolescents with disabilities.⁵² Another developmental issue facing medical personnel for patients of this age is the youths' increased rights to privacy on reaching the age of majority. The law provides young adults with important privacy rights, though their families usually remain important in their lives, and medical professionals typically do not know how to explore ways that families might provide support.

Policy Options

We believe that the United States needs a developmentally appropriate and socially inclusive system of support for vulnerable youth in transition to adulthood. In this section we touch on the broad theme of social inclusion and then turn to five policy options that can help create such a system. These options involve a mix of specific reforms in the public systems involved as well as broad policies that would pertain to all youth making the transition.

Vulnerable populations deserve special attention during the transition to adulthood not only because they have more trouble meeting life's challenges than their peers but because all young adults are facing especially big hurdles today. The public programs and entitlements that vulnerable youth receive during childhood and adolescence are the nation's explicit acknowledgment of their special needs, and similar supports should be available as they make their way into adulthood. Such supports should not, however, be viewed as perpetuating a helpless dependence, but as enabling them to shape their own future.

The fundamental principle of social inclusion is that a democratic society benefits when all its members participate in the full range of community affairs. Viewing vulnerable populations from the perspective of social inclusion shifts the focus from the personal difficulties or limitations of the populations to society's portrayal of and treatment of them. This broader perspective calls for identifying policies and practices that exclude or alienate certain groups from the larger community. It also entails themes of agency, rights, and power for vulnerable groups to act on their own behalf; of reciprocity among individuals, groups, and the state; and of affection and obligation among all parties. Social policies that follow from the concept of social inclusion enhance opportunities where they are lacking and remove barriers to the full participation of some groups.

From the social inclusion perspective, the reason for meeting the needs of vulnerable groups is not simply to improve their lives, but to help them to become fully contributing members of society and thereby to benefit the lives of all. Vulnerable youth have a good chance of making a successful transition to

adulthood if society provides the supports that suit their circumstances. For the general population of youth, today's longer and more uncertain transition to adulthood requires increasing supports from their families and the higher education system. The vulnerable populations lack comparable supports that would enable them to participate more fully as citizens. More effective public policies for this group are thus a means for social inclusion.

The policies a society adopts send messages about the relationships between citizens and the state, about who counts and whose voice should be heard. The eligibility cutoffs that deprive these vulnerable populations of services as they make the transition to adulthood carry the message "You're on your own." ⁵³ The services that *are* available to them usually apply to some category of deficiency, such as mental illness, and are likely to carry stigmas. ⁵⁴ Gaining access to services should not require overcoming a tangle of bureaucratic webs, and the services available should be suited to young adults' developmental needs and competencies.

To reach the goal of a socially inclusive support system for vulnerable youth, we recommend five policy options. The first embraces steps that would help all youth, such as better curriculum and support services at community colleges, universal health care, and a higher minimum wage. ⁵⁵ As youth in vulnerable populations move toward adulthood, they face the same difficulties as other youth, but with fewer resources and skills. Any policy steps that can reduce the difficulties that all youth face will be especially valuable to the vulnerable youth.

A second option would be to improve the existing systems of care for children and adolescents. Services and policies that better

meet their needs as children and teens would prepare them more effectively for key life tasks of the transition. First and foremost, the systems of care must minimize the damage they do to those they serve. No doubt any damage they do is unintentional, and it is difficult to distinguish such damage from the very problems that bring youth into these systems in the first place. Even so, the systems sometimes interfere with, rather than aid, the development of those in their care, as when youth experience unstable placements in the child welfare system or become victims of violence in the juvenile justice system. All practitioners involved in social services have struggled with this daunting problem for decades, but it must be addressed.

A third option that would broadly benefit vulnerable youth would be to address the loss of access to programs and services at, or too soon after, the age of majority. Abundant evidence confirms that the difficulties these populations experience during childhood and adolescence have continuing consequences as they transition to adulthood. The heavy dependence of most of today's young adults on their families makes it clear that the need for public investment in the vulnerable populations does not end at age eighteen. Extending the age eligibility of youth-serving systems well into young adulthood would be consistent with normative transitions to adulthood nowadays. And because the life circumstances and developmental needs of early adulthood differ from those of adolescence, policies and practices must be tailored to this age period.

The fourth policy strategy would be to move from a set of independent systems to a single, integrated system. Integration is needed not only across service systems, but also between youth and adult systems. Integration is also needed at two levels—at the administrative

level, to coordinate eligibility and financing, and at the service level, to ensure that clients receive a non-redundant and comprehensive set of services in an efficient manner. Integration would also have to bridge the differing cultures of current systems. For instance, many juvenile justice personnel see their mission as protecting the community rather than providing service to youth.⁵⁶

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The final policy option that would improve both child and adult service systems is to shift to a family focus. Such a focus would recognize the diversity of the clients served and increase the involvement of parties most prominent in youths' lives. Like other youth today, these vulnerable populations remain closely tied to and rather dependent on their families, even when those families are dysfunctional. For example, most youth leaving the foster care system continue to have contact with their families of origin.⁵⁷

Because a system that better recognizes and then meets the needs of its clients may deliver more services, funding will pose a challenge. The critical questions are how much is society willing to invest in vulnerable populations during the transition to

adulthood, and what would be the most effective use of such an investment? Fortunately, there is growing interest at the national and state level in developing policy directed toward better supporting vulnerable youth making the transition to adulthood.

Recent Federal Policy Developments

Washington's heightened interest in improving supports for vulnerable young adults is evident both in moves to expand the federal role in the lives of these youths and in efforts to improve coordination of the systems that serve them.

The Fostering Connections Act of 2008 provides a compelling example of a shift in U.S. social policy toward a socially inclusive approach to a vulnerable population of youth in transition. The law amends Title IV-E of the Social Security Act to allow states, at their option, to care for and support foster youth until the age of twenty-one provided that the youth are engaged in one of four activities completing high school or an equivalency program, attending postsecondary or vocational school, participating in a vocational program, working for at least eighty hours a month—or are incapable of these activities because of a medical condition. Young people aged eighteen and older can be living independently in a supervised setting as well as placed in a foster home or group care setting.

The Fostering Connections Act marks a philosophical shift toward acknowledging continuing state responsibility to act *in loco parentis* for foster youth into early adulthood. The title of the law implies a shift from encouraging youth to be independent (the language used in earlier policy directed toward foster youth in transition) toward helping them make the connections they will

need to be successful adults. The law's provisions stress that state-supervised out-of-home care for young adults ought to differ in significant ways from care provided to minors. States must, for example, engage these young adults in activities that are developmentally appropriate (for example, higher education and employment) and must create more developmentally appropriate care settings for young adults (for example, supervised independent living arrangements).

The new federal law gives states entitlement funding to provide transition-age youth with basic necessities and case management services, thus providing a foundation on which states can build a range of supports. Although many states have policies, at least on paper, that call for providing independent living services through age twenty-one, the poor economic circumstances of youth who leave foster care and the resulting instability of their living arrangements arguably undermine efforts to engage these young people in services. The ability to use Title IV-E funds to stably house foster youth between eighteen and twentyone may allow states to better engage youth in other services available from child welfare agencies. Giving state child welfare agencies IV-E funding to continue providing case management beyond age eighteen may also help these agencies play the coordinating role that is necessary to help young people navigate the various public systems charged with assisting them—postsecondary education, workforce development, health and mental health services, and housing.

It is too soon to know whether the Fostering Connections Act will lead to the improved adult outcomes for foster youth envisioned by its sponsors, particularly because it provides support only to age twenty-one. Moreover, foster youth make up only a small proportion

of all vulnerable youth. However, the foster youth population exhibits all of the challenges that characterize vulnerable youth in transition. If the comprehensive array of support provided by the new law is shown to significantly improve the transition to adulthood for foster youth, states may be encouraged to provide more support to other populations of vulnerable youth.

Perhaps the most important example of federal efforts to improve coordination between the systems that serve vulnerable youth is the Shared Youth Vision Initiative.⁵⁸ It began as a cross-agency partnership formed in response to the 2003 White House Task Force Report on Disadvantaged Youth, which identified the need to integrate systems at the federal, state, and local levels to move vulnerable youth into adulthood. In 2004, the Department of Labor formed a Shared Youth Vision partnership with the Departments of Education, Health and Human Services, and Justice. Since its inception, the partnership has engaged thirty states in planning, and the states now have formally established Shared Youth Vision teams. Nine federal agencies (Defense, Education, Health and Human Services, Housing and Urban Development, Justice, Labor, Social Security Administration, Transportation, and the Corporation for National and Community Service) are involved, and the partnership provides technical assistance, capacity building, and peer-to-peer support. Planning grants have been awarded to sixteen pilot states to provide more intensive and targeted support in advancing the initiative's concepts and implementation.

The Shared Youth Vision effort has led to a wide array of promising state- and local-level collaborations between youth- and adultserving systems. For example, in the Arizona collaboration, several state and local youthserving agencies provide coordinated support to youth transitioning from the child welfare and juvenile justice systems in two counties. The goal is to strengthen partnerships with local educational entities and employers to prepare, employ, and retain young people transitioning from care into employment. Alabama's project serves youth in the child welfare and juvenile justice systems, as well as youth with disabilities, out-of-school youth and dropouts, and youth living in poverty. High-level professional staff, representing each of the several state agencies involved, meet regularly to address inter-agency frictions, budget cuts, and turf battles. The project targets eight counties that make up one of the state's administrative regions. Four Alabama Career (One-Stop) Centers in the region lead the initiative at the local level. Although the Shared Youth Vision initiative has supported a variety of state initiatives, the effectiveness of these efforts in improving outcomes for vulnerable youth has yet to be evaluated.

Moreover, although the initiative is a promising start in cross-system coordination and collaboration, the categorical nature of federal program eligibility and funding is likely to remain a serious obstacle to creating a socially inclusive and developmentally appropriate system of support for vulnerable youth in transition to adulthood. For example, youth served by the juvenile justice and child welfare systems are often housed in the same group care and therapeutic foster care placement settings, but juvenile justice youth who do not meet criteria for Title IV-E funding are not eligible for many transition services available to foster youth, thus complicating the task of providing services in the homes of many young people.

Creative use of waivers of federal funding requirements could offer opportunities for Shared Youth Vision pilot states to experiment with more flexible and comprehensive approaches to providing services to the broad population of vulnerable youth. For example, Title IV-E funding can be used only for room and board for those in child welfare. Waivers, however, could allow some of those funds to be used for mental health services. Similar federal waivers, in combination with rigorous evaluation research, have been used effectively in identifying promising approaches to moving parents from welfare to work, in reforming Medicaid, and in identifying strategies for moving children out of long-term foster care.

Researchers have not yet provided either comprehensive, representative descriptions of the populations or systematic information about how they fare during the transition to adulthood.

Research Needs

Another requirement for developing more effective support for vulnerable youth in transition is more and better research. With a few notable exceptions, such as the National Longitudinal Transition Studies in special education, data on these populations, especially during the transition to adulthood, are limited. Researchers have not yet provided either comprehensive, representative descriptions of the populations or systematic information about how they fare during the

transition to adulthood. And though promising directions for policy and practice are being identified, few interventions have been tested empirically. For the most part, our policy recommendations reflect common sense and matters of fairness and justice, rather than strong evidence. Certainly policies should be logical and ethical, but they must also be based on detailed and accurate analyses of the problems to be addressed and on empirical tests of how well alternative strategies work.

Top research priorities include identifying which youth are in greatest need and which would benefit most from transition programs. The two groups likely overlap in terms of race, gender, and many other characteristics, but whether and how they do is unknown. This issue is critical given the heterogeneity of the populations served and the shortage of funds overall. Quite likely some youth need much more help than others to succeed, and different youth need different types of help. The lack of knowledge about these differing needs is especially problematic because it makes it extremely difficult to target the limited resources available for such help.

Administrative data represent a potential resource to help identify the size of the vulnerable youth population, its involvement over time in various public systems, and important transition outcomes for the population. Developments in information technology are allowing states to develop databases that offer more accurate and more comprehensive information on individuals' needs for services and history of involvement with the systems. These data sources can be linked across systems to identify individuals who have been involved in multiple systems, perhaps signaling greater need for services. Linked administrative data can also help

identify youths' trajectories through various systems, identifying potential gaps in services and opportunities to target interventions. Many outcomes of interest during the transition to adulthood, such as employment, college enrollment and degree completion, crime, and receipt of public assistance, can be monitored using administrative data.⁵⁹

Such data also provide an opportunity to understand innovative practices as they occur. States and localities exercise

considerable autonomy in operating systems for vulnerable youth, leading to variation in the programs and policies implemented. That variation provides a learning opportunity for researchers who can systematically describe these policy and program variations across jurisdictions.60 Linking data on program and policies, system involvement, and outcomes can provide an opportunity to determine which programs and policies are linked to better outcomes.

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