

# A healthy foundation for the future



The final report of the Young people's future health inquiry

# Written by

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# Foreword – Julia Unwin CBE, Strategic adviser, Young people's future health inquiry

This is an important report at an important time. At a time of deep division in society – not least between generations – this report brings to life the experiences of young people growing up today. It shines a light on the way we, as a society, are enabling the next generation to make the crucial transition to adulthood.

The Health Foundation led a two-year programme listening to young people, and to those who support young people, and examining the data. The findings make worrying reading for anyone concerned with the way our society, and our public services, will look in 30 years' time.

We heard that young people are facing challenges that are different from those faced by their parents and grandparents. In a world where information is readily available, they lack the guides to help them navigate the increasingly different world they face. The levels of insecurity they report – in housing, in work, in education – defines a life marked by precariousness and uncertainty. In particular, we heard from young people who found it hard to think ahead and envisage a life where they could genuinely flourish.

We met young people showing extraordinary levels of resilience and creativity in very difficult circumstances. We met young people with a glowing pride in their place, their community and their city. We met young people already contributing to their communities and keen to do more. But those same young people also shared their deep concerns about how they would ever be able to craft their lives as adults. In short, they lacked the basic foundations that are essential for a safe, secure transition to adulthood.

It is our considered view that this represents a major threat to all of us. Young people need those foundations if they are to thrive as adults. They have the potential to be the entrepreneurs, civil leaders, creative artists, doctors and teachers of the next generation. But without those secure foundations, their health as adults will be uncertain and is at great risk. For that we will all pay a great price. The health of the next generation matters to all of us. This report sets out the Health Foundation's response to the findings from the inquiry and we call on others to consider the role they too can play.

# Introduction

# Why the future health of young people is important for everyone

The health of a country's young people is one of the greatest assets it holds, determining its future wellbeing, costs and productivity. Young people's wellbeing is critical to a healthy democracy, the economy, and shapes the nation's social fabric. For governments across the world, the stewardship of young people's wellbeing needs to be a priority – any erosion of the population's health is a major risk to the prosperity of the nation.

The transition to adulthood is a critical stage in life. It is a time of moving from education to work, becoming independent, leaving home, and forging key relationships and lifelong connections. These milestones have been largely the same across recent generations. But today's young people face unique opportunities and challenges compared to their parents and carers. The challenges may be different to the ones they imagined themselves to be facing during their teenage years. For some, the transition is one they feel prepared for, but for others it can be marred by challenges and difficulty.

Having a place to call home, secure and rewarding work, and supportive relationships with friends, family and community are the building blocks of a healthy life. There is strong evidence that health inequalities are largely determined by inequalities in these areas – the wider determinants of health. While young people are preparing for adult life, they are also building the foundations for their future health. If they can secure good quality work and housing, and build supportive relationships, then their prospects for a healthy adulthood are improved.

Young people are growing up in an environment that makes securing these vital building blocks more difficult than it was for previous generations. Today's young people face a more precarious labour market and a more challenging housing market. And they are reporting higher levels of loneliness and poor mental health than previous generations.

Young people are the citizens and workforce of tomorrow. If society is going to be able to respond and adapt to the challenges of the future, it is essential that the future generation is healthy. To achieve this, young people need to be supported into an adulthood where they can thrive and not just survive.

# Overview of the Young people's future health inquiry

The Health Foundation's Young people's future health inquiry began in 2017 and set out to discover:

- whether young people currently have the building blocks for a healthy future
- what support and opportunities young people need to secure these building blocks
- the main issues that young people face as they become adults
- what this means for their future health and for society more generally.

To address these questions, the work of the inquiry was structured around a mixture of research and engagement, site visits and policy work. Throughout, it has been led by the views and experiences of young people around the UK.

The conclusions from the inquiry will inform further work by the Health Foundation. It is hoped they will also shape the work of others concerned with the wellbeing of future generations.

# Part 1

# The foundations for a healthy future



The years between age 12 and 24 are a period where the body is changing. It is a period of rapid brain development, growth and

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adaptation. While humans are highly adaptive, there is a limit to how the body is able to respond effectively to challenges and new environments. The stresses young people experience in their social environment are complex. Understanding the exact mechanisms that modify biological processes in the human body is only just beginning. However, it is clear that the social environment has a large influence on people's health.

The social environment's impact on health may not be apparent early in life but becomes biologically embedded in the first few decades of life. If persistent stress is encountered, this places a greater physiological burden – wear and tear, or 'allostatic load' – on the body. Socioeconomic disadvantage in adolescence and early adulthood has been associated

with higher allostatic load. Increased allostatic load has been associated with multiple chronic disease outcomes.

If young people encounter difficulties in achieving the building blocks of a healthy future – that is, they are unable to access good-quality work, housing and relationships – this is likely to place a greater allostatic load on their bodies. Ultimately this will result in declining health prospects in the future. Evidence of this is emerging, as seen in the following examples.

- C-reactive protein (CRP) is a biomarker used to measure a chronic stress response/allostatic load. A recent study<sup>2</sup> tested the association between housing and CRP and found that private renters, those living in flats, overcrowded conditions and claiming housing benefits all had higher levels of CRP.
- A lack of positive relationships and support is associated with higher allostatic load, reinforcing the hypothesis that positive social experiences are protective in terms of future health, and associated with lower physiological 'wear and tear'. If young people are unable to create and maintain meaningful and

supportive relationships, this may predispose them to illness later in life. Unfortunately, young people between the ages of 16 and 24 report feeling lonely more often than other age groups.<sup>3</sup> Many of the challenges encountered by young people in other areas of their lives are acting as barriers to these kinds of relationships.

• Job strain has been found to be associated with increased levels of CRP.<sup>4</sup> An adverse psychosocial working environment, including high job demands and low job control, is associated with an increased physiological response (fibrinogen and glycated haemoglobin A1c (HbA1c) biomarkers).<sup>5</sup>

If conditions are created that enable young people to begin their adult lives with positive relationships, with secure and rewarding work prospects and availability of good-quality housing, this can have a positive effect on their long-term health. This will be of benefit to their individual wellbeing and society as a whole. But if young people grow up in instability, long-term scarring effects are possible, including a higher susceptibility to disease and fewer years lived in good health.

# Part 2

# Understanding young people's experiences



# Initial engagement work

The Health Foundation's Young people's future health inquiry began by engaging with young adults aged between 22 and 26 who had achieved, to various degrees, independence in work and housing. Working with Kantar Public, an independent social research agency, in partnership with Livity, a youth engagement specialist, the aim was to discover what young people felt had helped or hindered them in their ability to achieve the building blocks of a healthy life. The results were reported in Listening to our future: Early findings from the Health Foundation's Young people's future health inquiry (2018).6

Working one-to-one and in groups, around 110 young people provided their perspectives through a variety of social media channels and a series of in-depth, face-to-face workshops in Cardiff, Glasgow, Leeds, London and Newtownabbey.

By reflecting on their experiences while growing up, participants were able to articulate the influences on their life journey to date, their earlier expectations, and how the reality of their current situation matched up with their ambitions.

## What were the findings?

Experiences were diverse, shaped by personal circumstances and the places where they had grown up. Certain themes emerged that typified young people's experiences. It was common for young people to feel stress and anxiety because their lives had not lived up to the expectations they had had as teenagers and what they had hoped to achieve in early adulthood. These expectations had largely been shaped by what they imagined their parents' lives to have been like at that age.

The extent to which young people had been able to secure good-quality work, housing and relationships was found to be shaped by whether or not they had four specific 'assets' to make a successful transition to adulthood.

### The four assets are:



Appropriate skills and qualifications – 'How right my skills are for the career I want'. The academic or technical qualifications needed to pursue their preferred career.



Personal connections – 'The confidence and connections to navigate the adult world'. Confidence in themselves, along with whether they had access to social networks or mentors who could offer them appropriate advice and guidance on navigating the adult world.



**Financial and practical support –** 'Having the support to achieve what I want from life'. Direct financial support from their parents; being able to live at home with parents at no cost; and practical assistance such as help with childcare.



Emotional support – 'People I can lean on emotionally'. Having someone to talk to and be open and honest with, who supports their goals in life. This could include parents or carers, partners and friends, as well as mentors.

The four assets and their outcomes are shown in Figure 1.

Although each asset was identified as being important, not every young person possessed all four. Nevertheless, it was apparent that having a combination of even some of the assets made it easier for young people to make a smooth transition into adulthood. Whether or not a young person possessed the four assets was influenced by factors beyond their control; it was largely determined by their family and community circumstances as well as structural factors such as the local housing and labour markets. While the young people had some understanding of this, they mainly ascribed their successes and failures to personal responsibility – working hard as a way of overcoming challenges. When adversity could not be tackled, they explained this in terms of a lack of self-motivation or laziness.

To illustrate differences in experience, and how the assets had shaped their growing up and their current situation, four groups of young people were identified. These were classified as:

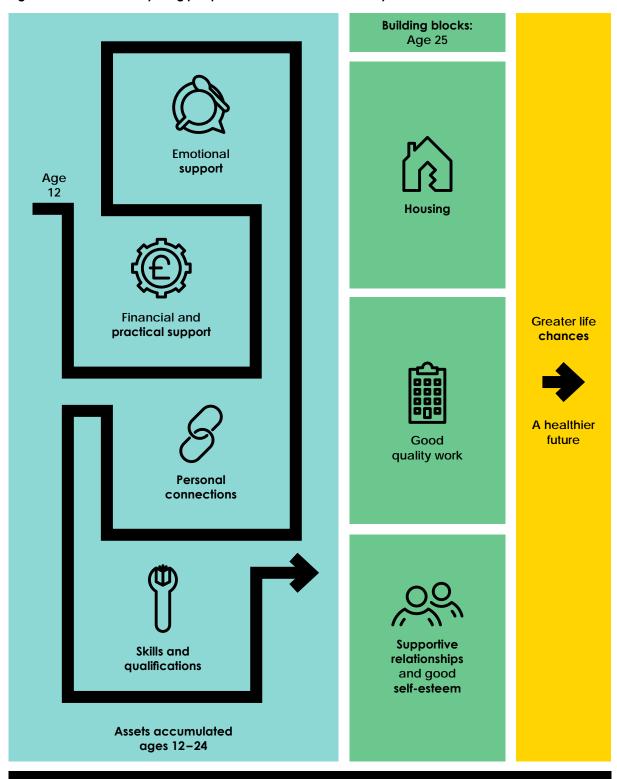
- Starting ahead and staying ahead young people in this group said they had the opportunity to develop all four assets. They had the skills needed for their desired career, connections to help them get their first job, and a safety net of relationships providing emotional, financial and practical support.
- It's not what you know, it's who you know young people in this group had skills and were qualified for their chosen career but did not have access to people who could offer advice and support to turn this into a job. Without these connections, it was more difficult for them to overcome structural challenges such as a competitive job market or a lack of local job opportunities.
- Getting better together young people in this group had faced setbacks in the past but, with the help of supportive relationships, they had been able to get back on the right track. They may have left school with few qualifications but had been supported by others to define their goals and retrain.
- Struggling without a safety net young people in this group struggled to access any of the four assets. Their lack of support pushed them into being at risk of unemployment and homelessness. Their experiences had left them with a low sense of personal agency and control over their future.

These groups are fluid: an individual could be in one group at a certain point in early adulthood, then move into another if their circumstances changed. The way in which the presence or absence of the four assets interacts underlines the importance of the need for a more holistic approach to understanding and enabling young people's experiences and their future potential.

# What are young people aged 12 to 24 experiencing now?

Listening to young people highlighted the complexity of the different pathways that an individual can take through this period of their lives. Large-scale datasets, such as the Labour Force Survey, provide a quantitative assessment of young people across the UK who are in education versus work, their living circumstances, and their financial independence. The information illustrates that becoming an adult is not necessarily as straightforward as it was for previous generations.

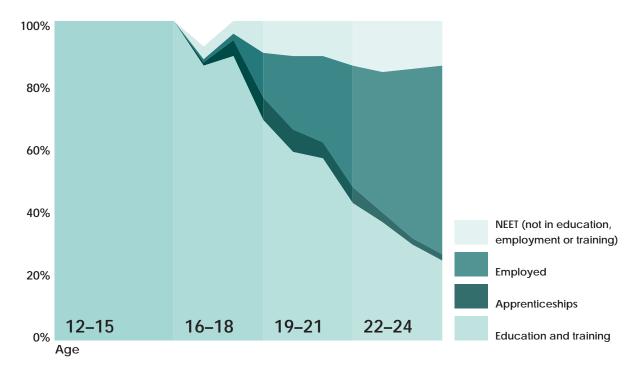
Figure 1: The four assets young people need to move successfully into adulthood.



Structural conditions

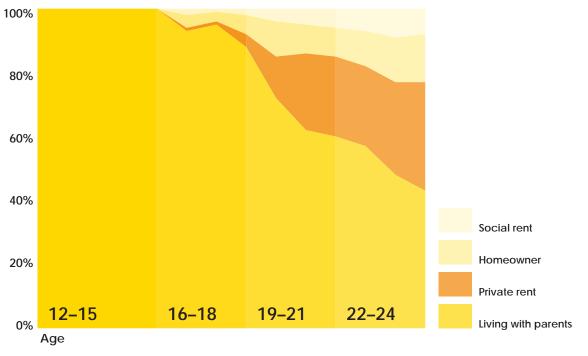
Source: Health Foundation, 2018. Listening to our future: Early findings from the Health Foundation's Young people's future health inquiry.

Figure 2: Overview of young people in education and work 2018.



Source: Labour Force Survey, 2018.

Figure 3: Young people's accommodation 2018.



Source: Labour Force Survey, 2018.

As Figure 2 and Table 1 show, a transition from education to work begins at age 16; this is gradual and, by 24, a significant proportion remain in education and training, and only half are working full time. This elongation of the transition from education to work is, in part, explained by increased rates of young people going to university. In 1994, a fifth of 18-year-olds were in higher education; in 2018 a third of 18-year-olds were in higher education. The trends for where young people are living are changing. By age 24, 42% of young people remain living with their parents. For those not living with parents, privately renting is the predominant form of tenure. There has been an intergenerational trend of declines in home ownership and increases in rates of private renting among young people. Compared to the baby boomer generation, millennials are four times as likely to be privately renting at the same age.8

Table 1: Young people in education, training and work 2018 (%).

Age	16	17	18	19	20	21	22	23	24
Education and training (school, college, university,									
excl. apprenticeships)	87%	89%	69%	58%	57%	44%	37%	30%	25%
Apprenticeships	1%	5%	<b>7</b> %	<b>7</b> %	5%	5%	3%	2%	2%
Employed (not in education or training)	1%	2%	14%	23%	27%	38%	44%	53%	59%
Not in education, employement or									
training (NEET)	4%	4%	10%	11%	11%	14%	16%	15%	14%
Other	8%	0%	0%	0%	0%	0%	0%	0%	0%

Source: Labour Force Survey, 2018.

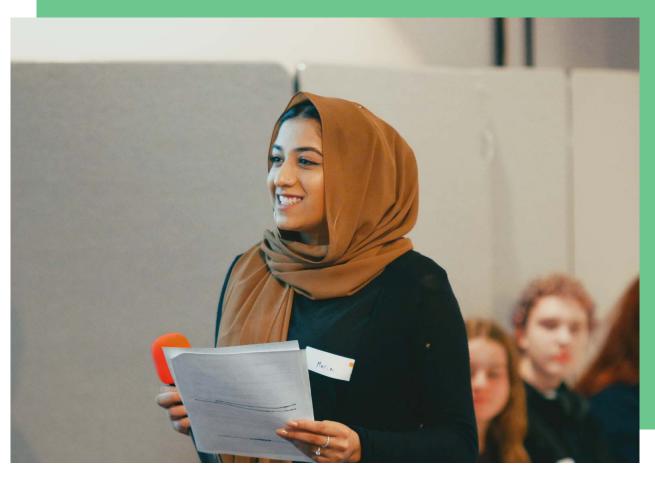
Table 2: Young people's accommodation 2018 (%).

Age	16	17	18	19	20	21	22	23	24
Living with parents	93%	94%	89%	<b>72</b> %	<b>62</b> %	60%	57%	47%	42%
Not living with parents	7%	<b>6</b> %	11%	28%	38%	40%	43%	53%	58%
Homeowner	4%	3%	<b>6</b> %	11%	<b>9</b> %	<b>9</b> %	11%	14%	15%
Social rent	2%	1%	2%	4%	5%	6%	<b>7</b> %	<b>9</b> %	8%
Private rent	1%	1%	<b>4</b> %	13%	24%	25%	25%	29%	34%

Source: Labour Force Survey, 2018.

# Part 3

# Reviewing the evidence: literature review and data analysis



The first stage of engagement with young people defined four assets that they felt influenced outcomes in early adulthood. As well as being important individually, the more assets a young person accumulated, the better their outcomes seemed to be early in adulthood. This provided a theoretical framework to test in existing research literature and longitudinal data. In this part of the report we summarise our literature review.

# Research addressing the four assets

The Association for Young People's Health completed a literature review to understand the extent to which the existing research literature has addressed each of the assets.<sup>9,10</sup>

The review found that, while research has explored the four assets to an extent, there are gaps and limitations. Compared to experiences during the teenage years and earlier childhood, the period of transition to adulthood has received less attention and there is notably less research examining this time of life. The engagement work provided a rounded model of young people's lives that recognised the complexity of moving into adulthood. Academic research, in contrast, is limited in its ability to provide such a rich picture; it is difficult to conduct a study that can incorporate a wide variety of experiences, and a number of confusing factors make it challenging to reach definitive conclusions.

Although there is crossover in the definitions of the four assets and terminology used within the research literature, they are not entirely congruent. Despite the limitations, the literature review echoed the importance of the four assets and provided a framework for testing these ideas further.

# Findings from the literature on the four assets

Appropriate skills and qualifications – described by the young people as 'how right my skills are for the career I want'.

Existing evidence confirmed that not having the right skills for employment is an increasing concern in the changing labour market – for employers and for young people. Issues included achieving the minimum qualifications needed for a job, suitability of qualifications for modern work, and risks posed both by under- and over-qualification. Plenty of evidence supports the importance of educational level to later health outcomes, but the implications of a skills mismatch at work are less clear.

Personal connections – described by the young people as 'the confidence and connections to navigate the adult world'.

Research confirms the importance of social networks, personal connections and neighbourhood resources in setting the context for the transition to adulthood. The relationship between social capital and health outcomes is also supported.

Financial and practical support – described by the young people as 'having the support to achieve what I want from life'. Despite existing evidence on the importance of financial and practical assistance in improving education outcomes and socioeconomic status for young people, research on the direct impact on their health outcomes in early adulthood is limited.

Emotional support – Described by the young people as 'people I can lean on emotionally'. Research confirms that friends, family and romantic partners are critically important to a young person's sense of wellbeing and connectedness. However, most of the research is set within the context of mental health problems, development of self-esteem, identity development and the role of peers in helping each other to manage situations such as college life and study. There was little research on how emotional support can help emerging adults achieve their life goals or lead to better health outcomes.

# Analysis of the Next Steps data set

The literature review uncovered how the four assets are talked about in research reports to date. This provided a framework for the quantitative analysis completed by University College London (UCL) Institute of Child Health to model the assets and building blocks (a place to call home, secure and rewarding work and supportive relationships) in young people as they grow up and transition into adulthood.

A number of longitudinal studies in the UK contain data on various aspects of young people's lives. The Next Steps study (the Longitudinal Study of Young People in England) by the Centre for Longitudinal Studies follows young people born in 1989/90 from the time they were 13 or 14 years old to when they turned 25. Data was collected by annual surveys completed by the young people (earlier rounds of data collection included their parents too). In total, there were eight rounds of data collection. Surveys were completed each year until the young people were 20, and again after a five-year break when the young people were 25 (made available in Spring 2017). The approach taken is described on page 20.



# Research approach used in the data analysis

The initial task for the research team was to measure the presence of the four assets among the young people in the dataset. The data contain a multitude of variables based around each of the questions answered by young people completing the surveys.

The first seven rounds of data were grouped to measure the presence of the assets at three time points (ages 13 to 15, 16 to 17, and 18 to 20). Each of the available variables from when the young people were 13 to when they were 20 were grouped under a particular asset. For each variable the researchers assigned either a 1 or a 0 to reflect whether there was positive evidence of the asset or not. Combining the scores for each variable provided an overall measure of whether an asset could be said to be present or absent for a particular young person. This was done for each of the three time points.

The same variables were not necessarily available at each time point due to different questions being asked across the rounds of surveys. Variables were available at all three time points for each of the assets with the exception of emotional support between ages 16 and 17.

Alongside being able to say whether a particular asset was present at each of the three time points, the pattern in how the presence of a particular asset changed over time was explored – the asset trajectory. Various asset trajectories are possible across the three time points: for example, an asset can be: present at all three time points ('stable present'); or absent at all three time points ('stable absent') with other combinations where the asset is present at some time points but not others.

The next step was to produce a measure of the building blocks at age 25, and to say whether each of the building blocks are present or absent among the young people in the data.

With measures of the presence of the assets and building blocks in place, researchers could explore the association between the assets at the three earlier time points and asset trajectories, and the outcomes in the building blocks at age 25.

Time point

T1 (13–15 yrs)

Iate falling

early falling

stable present

Asset:
Present

Asset:
Not present

early rising

late rising

stable not present

Figure 4: Asset trajectories – which assets were present at which time point.

Source: Health Foundation, 2019. How many young people are accruing the assets they need for a healthy transition into adulthood?

# **Key findings**

The number of assets young people had varied: Different assets were reported to different degrees with over 90% of young people reporting emotional support at one time period to less than 12% reporting personal connections (see Table 3).

While the numbers of young people found to have all four assets was low, around 70–75% of young people had 2–3 assets at all time points (see Table 4). Generally, the assets were found to decrease in prevalence over the three time points.

**Presence of the assets is associated with later outcomes:** The assets available to young people predict their outcomes at age 25 across distinct pathways. The stability of these assets across the three time points is of particular importance to adult outcomes, as young people who reported stable and high levels of assets in their teens showed the best outcomes at the age of 25.

# The importance of appropriate skills and qualifications and personal connections

Having appropriate skills and qualifications is associated with having satisfactory housing, suitable work and good relationships. A young person with appropriate skills and qualifications at any time point between ages 13 and 20 is more likely to have positive outcomes at the age of 25 than a young person without those assets.

The number of positive outcomes attained at age 25 was also positively associated with personal connections at younger ages.

## Financial, practical and emotional support

While financial support is consistently associated with positive outcomes at age 25, the association is generally weaker than for skills, qualifications and personal connections. Unlike the other three assets, no association was found between emotional support and work.

Table 3: Average percentage of young people reported as having each asset at each age band.

Asset	Age 13-15 % (SE)*	Age 16-17 % (SE)	Age 18-20 % <b>(SE)</b>
Skills	72.2 (0.1)	60.2 (1.4)	73.5 (0.7)
Connections	18.6 (0.4)	64.1 (0.7)	11.4 (0.4)
Financial support	79.4 (0.5)	79.3 (0.6)	59.9 (0.7)
Emotional support	93.1 (0.2)	No data	94.4 (.03)

<sup>\*</sup>Percentages are reported on weighted data. Weighting the data means we are estimating the number of people in each group so the standard error reflects how accurately this may reflect the population average. SE: standard error.

Table 4: Number and percentage of young people reporting the presence of different numbers of assets at each age band.

Number of assets	Age 13-15 %	Age 16-17 %	Age 18-20 %
0	0.8	7.1	1.4
1	10.6	20.8	14
2	29.6	34.6	35
3	46.9	37.5	44.1
4	12.1	No data	5.5

Source: Health Foundation, 2019. How many young people are accruing the assets they need for a healthy transition into adulthood?

However, there were some strong associations between emotional support at certain time points and positive outcomes in housing and relationships. The lack of associations between emotional support and later outcomes does not mean that this asset is not important. Variables on emotional support were not available to the same extent as they were for the other assets, and between the ages of 16 and 17 there were no variables, and thus no measure of emotional support for that age group.

### How assets are accumulated and relate to outcomes at age 25

The data indicate that having assets consistently between the ages of 13 and 20 is associated with positive outcomes at age 25. Compared with a young person who does not have assets at any time, having them at all three time points shows the largest association with outcomes at 25. However, achieving positive outcomes does not necessarily rely on having assets at all time points, and there are associations between different asset trajectories and outcomes at 25 (see Table 5). Table 6 shows the percentage of young people reflecting these different patterns for each of the four assets.

When skills and qualifications are not initially present in a young person's life but are gained between the ages of 18 and 20, there is an association with positive outcomes in the building blocks at age 25. The same association between a late-rising trajectory and outcomes in the building blocks at 25 is not seen for the other three assets.

There are strong associations between a late-falling trajectory and positive outcomes: that is, having skills and qualifications, personal connections, and financial and practical support at the two earlier time points, but not at ages 18 to 20. Taken together, this pattern in late-rising and late-falling trajectories may indicate that having assets during early to mid-adolescence is particularly key.

The different patterns observed over the three time points show that young people's paths are not set in stone. The period between the ages of 13 and 20 presents multiple opportunities to intervene and increase young people's opportunities to gain the four assets. These results suggest that it is worth intervening to help young people to acquire the assets they need, as these assets are associated with a range of outcomes at age 25. The results also indicate that intervening early, where effective interventions exist, is likely to have greater success.

However, while it may be more fruitful to intervene sooner rather than later, the association of the late-rising trajectories with positive outcomes at age 25 supports the view that it is 'never too late'. The full analysis of these findings can be found in the inquiry's working paper How many young people are accruing the assets they need for a healthy transition into adulthood?<sup>11</sup>

Table 5: Patterns of accumulating and losing assets across time.

Categorisation	Age 13–15 Asset present	Age 16–17 Asset present	Age 18–20 Asset present
Stable present	Yes	Yes	Yes
Late falling	Yes	Yes	No
Early falling	Yes	No	No
Late rising	No	No	Yes
Early rising	No	Yes	Yes
Stable not present	No	No	No
Unstable	Yes	No	Yes
Unstable	No	Yes	No

Source: Health Foundation, 2019. How many young people are accruing the assets they need for a healthy transition into adulthood?

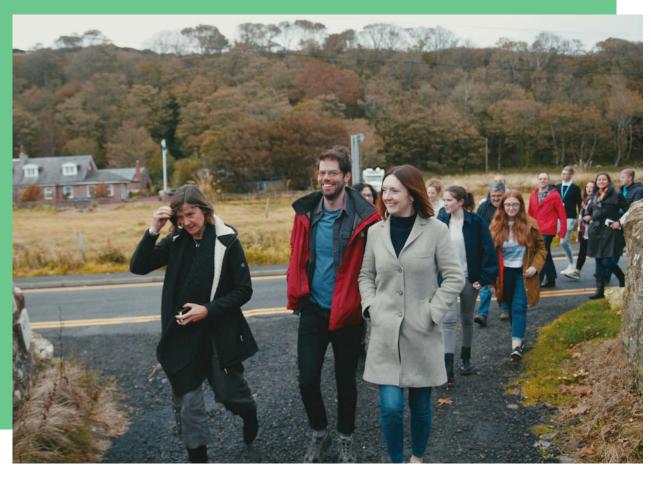
Table 6: Percentage of young people reflecting different patterns of asset accumulation and loss.

Categorisation	Skills and qualifications	Personal connections	Financial support	Emotional support
Stable not present	8.3	29.4	13.9	0.7
Late rising	12.1	1.8	1.2	
Early rising	3.6	6	1.1	6.6
Stable present	42.9	3	56.4	87.8
Early falling	6.2	3.7	3.8	4.9
Late falling	10.7	12.7	19.4	
Unstable	16.2	43.4	4.3	

**Source:** Health Foundation, 2019. How many young people are accruing the assets they need for a healthy transition into adulthood?

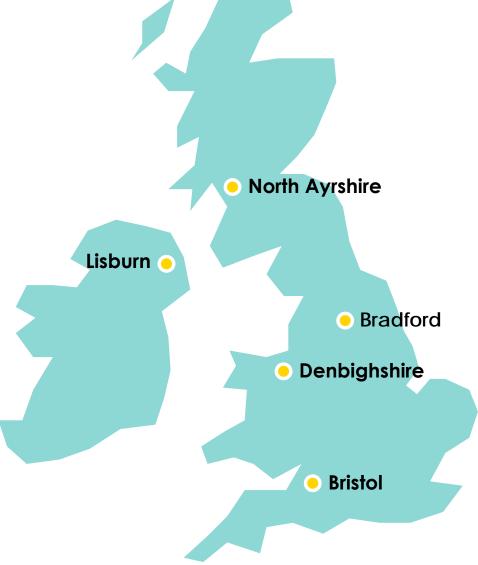
# Part 4

# Engaging with young people across the UK



Through the initial engagement workshops held across the UK, it became clear that there were significant differences in young people's experiences, depending on where they grew up. Where a young person lives is profoundly important in shaping their transition to adulthood. To gain a better understanding of how a place can impact on young people's experiences of growing up and their ability to build the four assets, the Health Foundation organised a series of five in-depth site visits in Bradford, Bristol, Denbighshire, North Ayrshire and Lisburn.<sup>12</sup>

Figure 5: Site visit research map.



Source: Health Foundation, 2018. Listening to our future: Early findings from the Health Foundation's Young people's future health inquiry.

Sites were selected through a systematic process to ensure a diversity of places and experiences and that the four UK nations were represented. There was also the opportunity to explore urban and rural experiences, and to hear from young people growing up in an ethnically diverse area.

Gaining an accurate picture of what it is like growing up in these places involved preparatory work by the Health Foundation inquiry team and young people in each of the areas. Leaders Unlocked recruited 10 to 15 young people aged between 14 and 24 to complete peer-led research in each of the areas. This involved working with other young people in each area to understand their views on how they felt their area was as a place to grow up and live in. Alongside this, the Health Foundation identified members of the community working with or for young people, and they conducted telephone interviews to understand how they felt the area was serving its young population. This ensured that, by the time of the site visit, a range of people in the local population – from teachers, to council workers, and young people – had already engaged with the themes of the inquiry and had a chance to explore how the local context was providing opportunities to build the four assets.

Each site visit took place across two days and began with a youth-led tour of the local area, followed by a visit to a youth-focused service. The visit concluded with a facilitated meeting with the young people who had been involved in the research process and members of the local community who had previously provided perspectives via telephone interviews. This meeting provided an opportunity for the young people to present their research findings to local leaders. The young people shared their experiences and ideas for working together to begin conversations to explore how things could be improved for young people in the local area.

The site visits generated rich qualitative data, and a number of common themes emerged relating to young people's capacity to build the four assets and translate them into the building blocks on transition to adulthood. Some themes emerged repeatedly and consistently across the five locations, indicating that they were evidence of a wider problem, or issues likely to be felt by young people in many more areas of the UK. They were the power of place, a changing support system, education and employment, youth services, and transport.

# Site visit themes

### Location and identity: the power of place

Young people have a strong sense of place: it shapes their identity and how they describe themselves. The services and opportunities available to young people vary within and between places.

## Families and place: a changing support system

Families play a major role in shaping young people's experiences of transition to adulthood. The role of extended families, as well as friends and the wider community can be equally important as the immediate family, especially for young people with fractured relationships with their immediate families and for those who feel they can't add further pressure to already hard-pressed parents.

# Education and employment: developing the whole person and every person

Young people felt that schools and colleges should play a role beyond achievement of academic qualifications in supporting emotional wellbeing and acting as a bridge to employment and voluntary opportunities. There is limited information and advice about non-academic routes into the workplace and opportunities to develop wider life and employability skills.

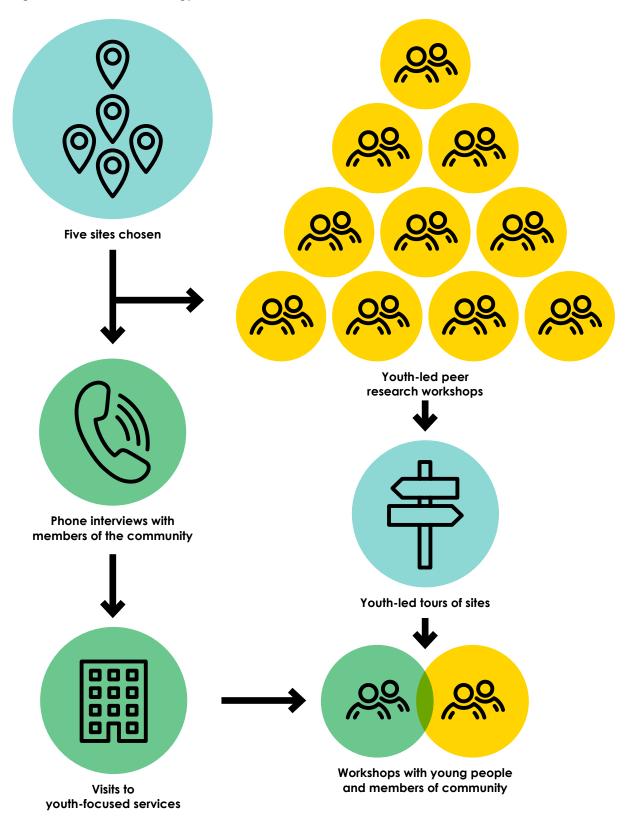
### Youth services and opportunities: creating potential

Opportunities outside of the formal educational environment are widely valued by young people. The nature of these services varies considerably in how they are organised and funded. Due to funding constraints, some of these services have been forced to close. Also, services are not always visible to young people and can be difficult to access.

### Transport: connecting places and people

Lack of transport is a barrier to education, employment and other activities. In many areas we were told that the transport on offer did not meet the needs of young people, with cost and low frequency of services being particular issues. This can deepen inequalities in access to services and opportunities.

Figure 6: Site visit methodology.



Source: Health Foundation, 2018. Listening to our future: early findings from the Health Foundation's Young people's future health inquiry.

Part 5

# How are the wider system and policy context shaping young people's experiences?

Following the site visits, the Health Foundation worked with a selection of expert organisations across seven themes to get a better sense of how the wider system and underlying policy context are shaping young people's experiences.

The themes and partner organisations were:

- quality of work Institute for Employment Studies
- post-16 vocational routes Education Policy Institute
- youth services Centre for Youth Impact
- wellbeing in schools and colleges Centre for Mental Health and the Children and Young People's Mental Health Coalition
- transport Sustrans and University of the West of England
- private rental sector Chartered Institute of Housing partnering with the UK Collaborative Centre for Housing Evidence
- the state safety net for young people Resolution Foundation.

These organisations were commissioned to analyse current policy and evidence around their respective theme and examine how circumstances may vary in different parts of the UK. With a better understanding of how each of these seven themes may affect young people, each policy commission drafted recommendations for change. The draft recommendations were discussed during roundtable meetings hosted by the Health Foundation. Those attending included sector stakeholders and members of the Young People's Reference Group (a group of young researchers from the site visits). This allowed for practitioners working in the field and young people alike to share their experiences and feed into the development of the final recommendations.

# **Policy findings**

The policy phase was designed to examine the structure, systems and communities around young people that support or hinder them from developing their full potential. It is, therefore, not surprising that, while there were seven separate commissions, many uncovered common themes.

While each of the policy commissions found challenges unique to their sector, (discussed in more detail below), the following questions resurfaced repeatedly throughout the policy phase and the inquiry as a whole:

- How do you translate isolated pockets of good practice, and make them work as part of a complete system? There are clearly many excellent and effective initiatives in towns, cities and rural areas across the UK. Yet what is on offer to young people is not consistent. While some young people can benefit from a thriving employment market in their area, or a housing market that works in their favour, too often local planning is unable to make the places where young people live the best places for them to grow up.
- In a fast-changing world, where can young people access appropriate advice and guidance? We heard about issues concerning advice and guidance across the themes from support in deciding their skills and employment pathways, and knowing their rights in a changing rental market, to safeguarding their own mental health and friendships in a fast-changing world. Solutions exist: for example, strengthening careers guidance. However, one overarching issue is that while information is easier to come by than ever before, connecting young people to the right information at the right time remains a problem.
- What are the impacts of siloed decision-making and spending on other parts of the system? Public money is spent on certain activities and areas for young people, yet there seems to be little grasp on whether the total spend is helping to protect young people's future health. Budget cuts in some areas may be causing additional spending in others. The long-term objective of equipping young people to have the best opportunity of a healthy future is a distant factor in much decision-making. At the same time, there is a wealth of family, community and voluntary energy and capacity that can contribute. Young people are a crucial part of this and, if harnessed, could provide ideas and solutions.
- How can outcomes that are difficult to count be measured and valued? Some of the areas that young people insisted were core to their overall health and wellbeing were plagued by a lack of data. These included the essential nature of emotional support, and the impact of interventions that work with the individual 'in the round'. From qualitative reports of the emotional impact of failing maths or English GCSE nine times, to cuts to valued youth services, there were frequent examples of issues important to young people that could not be easily counted numerically. Consequently, these important areas of influence were underresearched, not prioritised and left unfunded.

How can the system pull together to ensure that no one is at a disadvantage? Different characteristics, such as race, sexual identity, being disabled, a young parent, care leaver or young carer, made certain outcomes across each of the different themes more likely to be worse for those young people than other groups. Yet, aside from small, tailored interventions, there seemed to be little in-built structure in the system to help young people facing disadvantage. The lack of integration between different sectors means that responsibility is placed on the individual to 'join-up' the available services. This results in young people with the least resources being left to navigate a system that is not designed for them – often without the necessary support and guidance or a safety net to catch them if their choices do not pay off, for example not being able to live with a parent rent free, or support with childcare.

Alongside these cross-cutting themes, the policy work highlighted sector-specific factors that influenced young people's ability to make a smooth transition into adulthood.

# **Education and wellbeing**

Schools and colleges have a role to play in supporting young people to thrive and to help them take their next steps – whether that is spending more time in education or entering the world of work. As far as possible, schools should help young people define these goals

Young people report that a results-driven culture is common in schools and can be a major source of stress and anxiety.

and support them in gaining the necessary skills and qualifications. However, funding constraints and accountability pressures such as results and inspections, can mean that it is difficult for staff to deliver an individualised level of guidance and support. Young people report that a resultsdriven culture is common in schools and can be a major source of stress and anxiety.

'At school you're told exams are everything, but they're not everything. We still have feelings but feelings don't seem to matter anymore. The stress is too much.'

- Workshop participant, North Ayrshire

For young people struggling during their time at school or college, teachers and in-school counselling can be a source of some support. It is important, however, that the entire onus is not placed on staff in education settings to provide this. Teaching staff commonly experience high levels of stress themselves, and there is a limit to what they can provide with the time and resource available to them; 70% of school staff cite lack of funding – both within schools and for specialist child and adolescent mental health services – as a challenge to providing mental health support.<sup>13</sup>

Young people told us that they may not feel comfortable accessing support within the school environment. They were afraid of breaches in confidentiality and felt that it is important that their needs can be met outside of the school setting.

# Valuing further education pathways

There is a commonly described route through education, progressing from GCSEs to A-levels and on to university. Much of UK public policy is based on this route, yet it is only taken by a minority of young people with only a third of young people in higher education at age 18.7

Young people involved in the inquiry felt that viable alternatives to this route were limited and were not discussed with them in their schools.

'I am not sure what I want to do, but I am pretty sure that I don't need a degree to do it.' - Workshop participant, North Ayrshire

The constant reform and lack of parity of funding means that the large number of young people in further education may be facing more significant challenges than those that follow a higher education route, with potential consequences for their long-term health.

# Valuing the youth sector

Having a trusted adult or service in the community that the young person feels able to open up to can make a difference. Young people and those working in the sector report that having authentic and personalised support can be transformational in building confidence and enabling young people to take positive steps in areas such as work, housing and relationships.

It can be difficult for families to know how to help young people find opportunities and assist in practical ways such as giving advice, introductions and guidance. In the past, pathways to adulthood followed a more straightforward pattern, and parents could offer practical advice to their children based on their own experiences. However, today the wider opportunities and career pathways can make the adult world increasingly difficult to navigate, and young people and parents alike are struggling to make sense of this new context.

Youth services do not have capacity to provide support to all young people. Funding is a barrier and has declined steadily in the past 10 years. For example, between 2011/12 and 2018/19 the annual spend

Today the wider opportunities and career pathways can make the adult world increasingly difficult to navigate, and young people and parents alike are struggling to make sense of this new context.

per person by local authorities in England on young people's services halved from £136 to £65. The tightening of eligibility criteria has been even greater in rural areas with a decline in spending on youth services that are open to all from 48% to 35% between 2011/12 and 2017/18 compared with a decline from 59% to 49% in urban areas. 14

# The importance of good-quality work

Good-quality work that is secure and fairly paid, with room for development and progression, is key in the route to independence. However, 53% of 22- to 26-year-olds polled by OpinionMatters for the Health Foundation said that finding such work was difficult.

University is no longer the avenue to good quality work that it has been in the past. The local job market and a lack of personal connections can make it difficult for young

people to know how to take the first steps in their careers, and many graduates end up working in non-graduate roles. In 2017, 47% of recent graduates were working in non-graduate roles and, even after five years, 36% of graduates remain in non-graduate roles. London offers a range of opportunities and this is reflected in lower proportions of graduates working in non-graduate roles (35% and 26% for recent and non-recent

graduates, respectively). Unfortunately, the labour market in other parts of the UK is not as buoyant. For example, the proportion of graduates in non-graduate roles rises to 56% in Scotland and 40% for young people living in the West Midlands Combined Authority. 15

Young people who participated in the site visits in Bradford, Denbighshire, North Ayrshire and Lisburn consistently noted that lack of opportunities in their areas was a barrier to being able to access goodquality work.

'I think I'll have to end up leaving here to get a real job eventually.'

- Peer researcher, North Ayrshire

Some young people struggle to work the number of hours they would like to. Also, although they would like to be working full time, growing numbers are working in part-time and zero-hour contract roles. The average basic hours worked per week by young people dropped following the financial crisis and has not returned to pre-crisis levels (between 2014 and 2018 this was around 31 hours per week).

'I've had four different jobs – only one of them was full time, but I was self-employed... There isn't enough full-time jobs for people.' – Workshop participant, Cardiff

Particular groups of young people are overrepresented in this sector, with 55% of black young people working in part-time roles. <sup>16</sup> Insecure employment and underemployment may carry various risks for young people. For example, there is a link between being in temporary, part-time and zero-hour contract roles and poorer mental health and wellbeing. <sup>17</sup>

#### Homes in the private rental sector

The condition of young people's housing will impact on their health and wellbeing. As home ownership becomes ever more distant for young people, remaining with parents or renting privately are becoming more common. The stock of privately rented property generally seems to be of poorer condition than owner-occupied housing and social rented housing: more than 30% of privately rented properties fail to meet the 'decent homes standard', compared to 20% of owner-occupied properties and 15% of socially rented properties. Tenants are often unaware of their rights and, when they do have confidence and knowledge, they may feel unable to raise an issue with their landlord for fear of eviction or the rent increasing.

With dwindling social and affordable housing, most young people are renting privately as the only way of living independently. The housing benefits that young people are able to claim are designed around an assumption that they are either able to rely on family or that their housing needs can be met by sharing with others. Until the age of 35, only the shared accommodation rate for local housing allowance is available to single young people, which means they need to live in shared housing. Often the shared accommodation rate will be insufficient for a room in the private rented sector and there will be a shortfall in costs that must be made up from other income. An additional issue faced by those claiming housing benefit is the stigma that they may face, as some landlords and letting agencies do not accept tenants who are claiming housing benefit.

# An adequate safety net for independent living

The housing benefit available to young people is indicative of a wider trend over the past two decades of reduced financial support from benefits for 16- to 24-year-olds. In 1995/96 households headed by 16- to 24 year-olds got 23% of their income from benefits and by 2017/18 this had fallen to 14%.



The rapidly changing context in which young people are growing up and becoming adults adds a layer of complexity in knowing how best to provide support. Families can provide a safety net to young people, for example, by providing a place for young people to stay. However, there is a balance to be struck between families and the state in supporting young people, particularly those from lower socioeconomic backgrounds, in their aspirations to live independently.

#### Transport that connects to opportunity

The site visits revealed how important transport was to enabling young people to access education, work and services, and to maintain relationships with friends, family and communities. Without adequate and affordable transport infrastructure, young people's options were limited. Bus travel is the only form of public transport available in many areas, especially rural ones, but it can be prohibitively expensive for young people.

'If I was to get the bus to work, it would take half my wages away.'

- Workshop participant, North Ayrshire

When young people are limited by public transport and lack of mobility, it becomes more difficult to maintain relationships, and this may deepen feelings of isolation. It can also limit access to locally available youth services that could make a difference to a young person's life.

There has been a general declining trend in the rate of young people who drive since the 1990s, increasing the reliance on a bus infrastructure which is dwindling, particularly in rural communities. For some the only option may be to use a car to get around but learning to drive, owning and maintaining a vehicle carries a substantial cost. This can mean that there is a divide between young people whose parents are able to help with these costs and those who cannot afford to learn to drive.

#### Part 6

# Conclusions and future action

Across a two-year period, the Health Foundation's Young people's future health inquiry has investigated what life is like for young people in the UK, and how they are experiencing the transition to adulthood.

The Young people's future health inquiry has been unique, in that:

- its priorities and scope were set by the views and experiences of young people
- it spanned a breadth of circumstances facing young people growing up across the UK
- it looked across multiple sectors and how they intersect to shape the opportunities available to young people
- it focused on the need to improve young people's experiences today as well as how these experiences will shape their future health outcomes and ultimately society as a whole.

Themes raised by young people in the initial engagement strand provided the framework for the inquiry. Built on young people's experiences, the framework was used to assess their ability to accumulate four key assets: appropriate skills and qualifications, personal connections, emotional support, and a financial and practical safety net. These assets were explored in greater depth through the site visits and policy commissions, which in turn introduced new perspectives to the work and the underlying challenges. Young people also contributed to the development of policy recommendations — the full list of recommendations can be viewed in separate reports published by each of the expert organisations. (See bibliography for a full list of reports).

The inquiry considered the support, services and opportunities young people needed to accumulate the four assets and make a smooth transition into adulthood. Evidence was drawn from the testimony of young people, the research literature and secondary analysis of longitudinal datasets. Through quantitative and qualitative work, the inquiry has outlined the association between the four assets and the outcomes – in employment, housing and relationships at age 25 – that form the building blocks for a healthy life.

## A challenging policy environment

Through qualitative work and policy analysis, the inquiry identified a set of distinct, yet interconnected aspects of policy and practice that shape young people's experience growing up. When these areas fall short, the smooth transition to adulthood – and the independence this brings – becomes challenging, and sometimes very difficult. Some of these issues are related to government spending and investment, but others are related to wider trends in society, including in the

labour market, housing market and changing structures of families and communities.

The challenges and opportunities young people face vary across the country. In some parts of the UK there is evidence of a more enabling policy environment. However, there is much more to be done to ensure that every young person can make a safe and successful transition to adulthood.

On a positive note, the inquiry has shown the optimism, insight and ideas that young people themselves can bring to this debate. Their energy and aspirations have been an inspiration to everyone involved in the inquiry.

#### **Future action**

The breadth of issues raised through the inquiry does not lend itself to simple recommendations. In many areas the work raised as many questions as it sought to answer. This report, while concluding the initial discovery phase, sets an agenda that will inform the further work of the Health Foundation and, it is hoped, the work of those in government and across sectors who have an interest and responsibility for ensuring that today's young people can face a healthy future.

The Foundation's *Creating healthy lives* report makes the case for a whole-government approach to long-term investment in the nation's health. An approach that rebalances investment towards areas that maintain and improve everyone's health – including those areas that ensure young people have the building blocks for a healthy life – such as education, youth services, housing, and social security. The particular needs of young people have often been overlooked in policymaking and a joined-up approach is needed to address the impact of siloed decision-making and public spending on young people's wellbeing and their future health.

The Health Foundation will continue to work with other organisations and individuals responsible for shaping young people's experiences to:

 recognise the critical importance of young people's experience between the ages of 12 and 24 in providing them with the foundations for a healthy life

- consider how they can assist young people in developing the four assets needed to successfully navigate their transition into adulthood
- re-evaluate how recent policy decisions have adversely affected this age group and take steps to redress this
- actively involve young people in analysis and decision-making so that these are based on lived experience.

Between October 2019 and September 2020, the Health Foundation will be responding to the issues raised by:

- supporting further policy analysis and development in the areas outlined in this report
- working in partnership with young people across the UK to explore what makes for a good place to grow up, how this can be assessed and the approaches that will improve their experiences
- scoping further research to build a stronger evidence base on the factors that affect young people's experience of emotional support as they grow up.

Young people are tomorrow's engineers and builders, teachers and care workers, civic leaders and parents. The future prosperity and wellbeing of society depends on how they are supported today.



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The Health Foundation is an independent charity committed to bringing about better health and health care for people in the UK.

Our aim is a healthier population, supported by high quality health care that can be equitably accessed. We learn what works to make people's lives healthier and improve the health care system. From giving grants to those working at the front line to carrying out research and policy analysis, we shine a light on how to make successful change happen.

We make links between the knowledge we gain from working with those delivering health and health care and our research and analysis. Our aspiration is to create a virtuous circle, using what we know works on the ground to inform effective policymaking and vice versa.

We believe good health and health care are key to a flourishing society. Through sharing what we learn, collaborating with others and building people's skills and knowledge, we aim to make a difference and contribute to a healthier population.

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