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Position statement

# Young Adult Health and Well-Being: A Position Statement of the Society for Adolescent Health and Medicine



The Society for Adolescent Health and Medicine

Young adulthood is a unique and critical period of development during which unmet health needs and disparities in access to appropriate care, health status, and mortality rates are high. This is a time when purposeful prevention and intervention strategies may still alter trajectories and decrease threats to health along the adult life course. The Society for Adolescent Health and Medicine provides leadership, advocacy, and supports health policies, practice recommendations, and research that specifically help to ensure the health and well-being of young adults.

# Age Inclusion for "Young Adulthood"

There are no clear guidelines for determining what ages should be included in the designation of young adulthood, and there is a lack of consensus among international experts. The World Health Organization categorizes "young people" as adolescents and young people from 10 through 24 years of age [1]. The United Nations defines a youth as 15–24 years of age [2]. In the author's list serve poll of the Society for Adolescent Health and Medicine's international members including over 10 countries, adolescent and/or youth or young people designations were reported to be used interchangeably to describe individuals in the age range from 15 to 24 years extending in some cases to 30 or 40 years. In addition, there is no consensus regarding specific age designations for young adults in international or national demographic data collection systems or policies.

In the United States over the last decade, there have been over 40 publications that underscore the specific high-risk health status profile of young adults. Those publications identify that young adults between 18 and 25 years of age experience higher rates of mortality and unplanned pregnancy, and they experience lower access to health care compared with those immediately younger (10–17 years of age) and those immediately older (26–30 years of age [3–11]). Biologically, there is increasing evidence that brain development is not complete until the mid to late 20s. The interconnectedness of the emotional and motor

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prefrontal cortex is almost but not quite complete in young adulthood [12–14]. As the disparate health status and the biologic development has become known, young adulthood is increasingly seen by international and U.S. adolescent and young adult health researchers as a vulnerable developmental period in need of specific focus and attention. This is further highlighted in the U.S. Affordable Care Act's continued provision of health insurance for young people from birth up to the age of 26 years and the ability of young adults to stay on their family insurance plan until the age of 26 years [15].

Given the lack of formal international consensus on what ages constitute young adulthood, and given the research that has been published that highlights significant health concerns for this postadolescent age group, the Society for Adolescent Health and Medicine will use the ages 18–25 years (until the 26th birthday) to denote the young adult age group.

## **Unique Health Needs of Young Adults**

The 2014 Institute of Medicine report on investing in the health and well-being of young adults and the article by Park et al. [4] on the status of young adult health in the United States [10] both expertly describe the challenges and opportunities that are unique to 18- to 25-year-olds. In particular, age-related health disparities are present in many areas including injury, violence, health care access, chronic illness, and unplanned pregnancy as well as unstable housing arrangements, lower educational attainment, and increased unemployment. Given that biological and psychosocial development is not complete in the young adult, there is an opportunity to see if a purposeful change in an unhealthy trajectory in areas such as unintended pregnancy, substance use disorders, mortality, mental health, and obesity and educational attainment can be accomplished.

# **Young Adult Development**

From a psychosocial developmental perspective, young adults have challenges and milestones distinct from both adolescents and adults. They must transition from school to career work goals, from parental supervision to individual responsibility,

from living with parents to starting families of their own, and from pediatric to adult health care systems. These opportunities and challenges are also influenced by the context of the larger world that is rapidly evolving. These young and emerging adults now live in highly connected global societies where milestones used to define when adulthood begins are either being challenged globally or are not as consistently applicable to young adults today as they once were believed to be; for example, the completion of puberty, acquisition of full-time employment, family formation, and parenting have all been used historically to define adult status [10].

#### **Positions**

- 1. The Society for Adolescent Health and Medicine defines young adulthood as including the age range 18–25 years (until the 26th birthday) and reaffirms the organization's commitment to ensuring the health and well-being of both adolescents and young adults.
- Young adulthood is a unique and critical time of development where unmet health needs and health disparities are high. Purposeful prevention and intervention strategies should be developed, researched, and implemented during this time to improve health and well-being of young adults.
- Research to inform specific policies and recommendations for promoting the health and well-being of young adults should be a priority.
- 4. To ensure that research and policy decisions take into account the health status of young adults, research and population health data for the 18- to 25-year-old age group should be reported separately from younger and older age groups.

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