## **Transitions to adulthood**

**Richard Garside** sets the scene for the themed section of this issue.



he articles in this themed section explore the question of young adulthood from a variety of perspectives: crime and criminal justice, harm, social exclusion and social justice. A number of them emerged as a result of the Transition to Adulthood (T2A) alliance, established and supported by the Barrow Cadbury Trust. I would like to acknowledge the support of the Barrow Cadbury Trust, the T2A alliance members, and the other contributors in the production of this themed section.

Rather than seek to summarise the articles here, I will attempt to set the scene for the articles that follow, drawing on the work I have recently been involved in as part of the T2A alliance (Garside, 2010).

Every year many hundreds of thousands, perhaps millions, of young adults in England and Wales are processed by one or more agency of the criminal justice system. This activity, justified on the grounds of its putative crime fighting and crime prevention efficacy, causes enormous harm to the lives of one of the most vulnerable groups in society. It tends to entrench rather than resolve the disadvantage, distress and trauma experienced by many young adults, while doing little if anything to make society safer or crime less prevalent. As the 2005 report from the Barrow Cadbury Trust, Lost in Transition, puts it:

Criminal justice policies in England and Wales do unnecessary damage to the life chances of young adult offenders and often make them more, not less, likely to re-offend. They make it harder for young adults to lead crime-free lives and exacerbate the widespread problems of social exclusion that other government policies aspire to ameliorate. (Barrow Cadbury Trust, 2005)

Young adults subject to criminal justice control occupy, for the most part, a distinct social position characterised by entrenched need and profound vulnerability. They have typically experienced a range of personal, social and economic problems, ranging from blighted childhoods, mental distress, trauma and violence through to substance misuse, poverty and exclusion and other social challenges. This is particularly the case with young adults who end up in the prison system or under probation supervision, as has been demonstrated in numerous research

findings published by a range of institutions and organisations – government departments, criminal justice inspectorates, voluntary organisations – as well as those by independent researchers and academics.

The starting point of the criminal justice

system tends to be the deeds of young adults – what they have done to get into trouble – rather than their needs as individuals and members of society. So let us start by considering the social needs and vulnerabilities of young adults.

Significant mortality patterns emerge as a child grows into an



adult. Across the world, adolescents who become young adults enter a period of their life when they are much more likely to die. In 2004, the worldwide mortality rate for 10 to 14 year olds was 95 per 100,000. For 15 to 19 year olds it was 139 per 100,000. It was 224 per 100,000 for 20 to 24 year olds (Patton et al., 2009), more than double the rate for 10 to 14 year olds.

The distribution of this increased risk of death was not spread evenly across the entire population of young adults. Worldwide, females and males experienced similar rates of mortality in the 10 to 14 age range in 2004: 94 per 100,000 and 95 per 100,000 respectively. For young adult age groups a distinct gender difference is notable. The mortality rate for 15 to 19 year old females was 131 per 100,000, compared with 147 for males. For 20 to 24 year

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olds, it was 191 for females and 255 for males (Patton et al., 2009). But this is not all. If gender was one axis along which the increased risk of death was distributed in 2004, the social structure of wealth and poverty was the other. The

mortality rate for children and young people and young adults in highincome countries was 16, 49 and 69 per 100,000 for the 10 to 14, 15 to 19 and 20 to 24 age groups respectively. In low- and middle-income countries, the rates were much elevated, at 103, 150 and 244 per 100,000 respectively (Patton et al., 2009).

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In summary, life chances and life outcomes are strongly mediated by social structures. Young adulthood is a watershed in terms of mortality; a

distinct increase in mortality rates is found internationally at this age across rich and poor countries. Gender differences in mortality also start to open up during young adulthood. The socia

adulthood. The social structures of wealth and poverty are key.

A similar pattern is observable at a UK level (ONS, 2009). Deaths below the age of 50 were comparatively uncommon in 2008, but they increased at an accelerating rate after that. There is also a distinct gender difference in mortality rates that starts in the 15 to 19 age range, with men having an elevated mortality rate compared with women. This is a consistent pattern until people reach their early eighties. While injuries such as traffic incidents, violence and self-harm were the main cause of death for both young adult females and males, a distinct gender pattern was observable. There were 809 young adult females' deaths as a result of injuries in 2008. For young adult males, the figure was 2,034.

What of the social structures of wealth and poverty and their relationship to levels of mortality? Research published in the British Medical Journal in 2002 studied the mortality rates of 2,132 women and 2,322 men between the ages of 26 and 54 born in March 1946 (Kuh et al., 2002). It found a strong correlation between social position and rates or mortality. In both childhood and adulthood, males and females from manual classes were nearly three times as likely to die between the ages of 26 and 54 than those from non-manual classes.

A more recent study in the *British Medical Journal* examined census and mortality data across England and Wales. It compared the relationship between mortality rates and deprivation in 1900 with those in 2001. It found that the link between mortality and deprivation was as strong in 2001 as it had been in 1900: 'Patterns of mortality and deprivation

*In summary, life chances and life outcomes are strongly mediated by social structures.*  ad been in 1900: and deprivation are deeply entrenched such that in both cases the patterns of a century ago are strong predictors of today's patterns' (Gregory, 2009). A number

of practical policy implications flow from this analysis. The first of these relates to criminal justice: its role and function; its contribution to the cause of social justice. The criminal justice system is very good at affecting the lives of those most likely to experience early death. Its target group is predominantly made up of young adult males who come from a background of poverty and exclusion. As Lost in Transition points out, criminal justice tends towards exacerbating these problems, rather than ameliorating them. Whatever its other functions as a means of maintaining order, it has little or nothing to offer the cause of social justice for this age group.

There is therefore a need to conceptualise the challenge of social justice within a much broader framework than the narrow one represented by the criminal justice system. The first dimension relates to the question of wealth, poverty and its unequal distribution. Research for the Joseph Rowntree Foundation published in 2000 examined mortality rates across Britain. The authors estimated that 7,500 people under the age of 65 would not die prematurely each year if income inequality levels were returned to the levels they were at in the early 1980s (Mitchell et al., 2000). Given the crucial threshold of increased mortality represented by the entry into young adulthood, the effects of such policies would be potentially dramatic for this age group.

Gender, and the construction of masculinity in particular, is the second main dimension to consider. For boys, the process of growing up is a process of learning socially mediated gender roles. These typically include the celebration of physical strength, sexual prowess, emotional distance, risk-taking, and face and 'respect', to name but a few. These learned practices are deeply embedded in society, with historical roots that go back many centuries. The gender roles that young men learn and internalise partly explain why far more young men than young women die in traffic incidents (too often the result of risktaking behaviour) and through homicide and self-harm (different routes out of a crisis of masculine identity). A commitment to social justice therefore requires serious policies aimed at challenging prevailing masculine norms and developing new, far less lethal, masculine identities in their place.

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## References

Barrow Cadbury Trust (2005), *Lost in Transition: A Report of the Barrow Cadbury Commission on Young Adults and the Criminal Justice System*, London: Barrow Cadbury Trust.

Garside, R. (2010), From criminal justice to social justice: rethinking approaches to young adults subject to criminal justice control. London: Centre for Crime and Justice Studies.

Gregory, I. (2009), 'Comparison between geographies of mortality and deprivation from the 1900s and 2001: spatial analysis of census and mortality statistics', *BMJ*, 339: b3454.

Kuh, D., Hardy, R., Langenberg, C., Richards, M., Wadsworth, M., (2002), 'Mortality

in adults aged 26–54 years related to socioeconomic conditions in childhood and adulthood: post war birth cohort study', *BMJ*, 325, pp.1076–1080.

Mitchell, R., Dorling, D. and Shaw, M. (2000), Inequalities in Life and Death: What if Britain Were More Equal? Bristol: Policy Press.

ONS (2009), Mortality Statistics: Deaths Registered in 2008, Cardiff: ONS.

Patton, G., Coffey, C., Sawyer, S., Viner, R., Haller, D., Bose, K., Vos, T., Ferguson, J., Mathers, C. (2009), 'Global patterns of mortality in young people: a systematic analysis of population health data', *The Lancet*, 374, pp.881–892.