

Supporting Vulnerable Youth and Young Adults

Vulnerable youth, such as those who are in state custody, homeless, receive special education services, suffer from poverty, lack health insurance, or have special health care needs tend to be the least healthy members of the adolescent population and therefore need special attention and resources. By improving or impacting the health of vulnerable youth; the health of the overall adolescent population improves.

Tennessee Data

Children with Special Health Care Needs

- As of July 1, 2008, there were 2,132 active clients ages 10 to 21 receiving Children's Special Services (CSS).
- Among this age group, there were 386 different diagnoses. The most frequent diagnosis were: sensor neural hearing loss (347 clients), cerebral palsy (207 clients), sensor neural loss combination type, bilateral (95), idiopathic scoliosis (78), sensory hearing loss, bilateral (73), convulsions (64), diabetes type 1 (47), conduct hearing loss (46), asthma (44 clients), counseling (35). The remaining clients represented a wide variety of different diagnoses.
- More than twice as many white clients (65%) received services from CSS than African-American clients (31%).
- Thirty-one per cent of children with special health care needs ages 0-18 indicated they had adequate private and/or public insurance (including TennCare) to pay for the services they needed.

Youth in State Custody

- The number of children and youth in state custody has been steadily declining since 1995.
- Most children and youth entering state custody were adjudicated as dependent (73%), followed by delinquent (24%) and unruly (3%). Since 1994 there has been a significant increase in the number of children/youth adjudicated dependent/neglect while the number of children/youth determined unruly decreased substantially. The delinquent category has remained steady.

- Most children/youth are placed in foster care (48%) followed by group home (18%), family (18%), kinship (12%), and runaway (from placement) (4%).
- Over half of the children/youth in state custody fall within the 13-17 (52.0%) age group category.
- 53% of children and youth in state custody were male, and 47% were female.
- The majority of children/youth in state custody are white (58%) followed by African American (33%) and “other” racial category (9%).
- The average length of stay in state custody by race shows that there is a decline for African-Americans and “other” race category and an increase for white children/youth.
- The rate of mental health diagnosis among children/youth in state custody was at a high of 54% in 1994, dropped to a low of 31% in 1998 and has since increased to a rate of 50% in 2004.
- As of June 30, 2004, there were 4,827 inmates ages 24 and younger within the custody of Tennessee’s Department of Correction. This represents 18% of the total Department of Correction (DOC) population.

Youth Receiving Special Education Services

- The 2006 Report of Children with Disabilities Receiving Special Education relates that in 2006, 108,368 children and youth ages 6-21 received special education services in Tennessee.
- The 2006 Report also relates that of these children and youth, 42% were diagnosed with specific learning disabilities followed by speech impairment (14.0%), speech or language impairment (24.0%), health impairments (10.7%), mental retardation (9.3%), emotional disturbance (3.5%), developmentally delayed (3.5%), autism (2.7%), multiple disabilities (1.7%), hearing impairments (1.2%), orthopedic impairments (0.8%), visual impairment (0.6%), traumatic brain injured (0.2%), and blind/deafness (.002%).
- The 2006 Report also indicates that the majority of students receiving special education are white (70%), followed by African-American (27%), Hispanic (2%), Asian or Pacific Islander (1.0%), and American Indian (0.0%).

2010 Objectives

Children with Special Health Care Needs

By 2010, 70% of Children with Special Health Care Needs clients will express satisfaction with services received compared to the 2004 baseline of 59%.

By 2010, 75% of all children with special health care needs ages 0-18 will receive coordinated, ongoing, comprehensive care within a medical home compared to the 2004 baseline of 60%.

By 2010, 75% of children with special health care needs ages 0-18 will have adequate private and/or public insurance to pay for the services they need compared to the 2004 baseline of 62%.

By 2010, 90% of the families of children with special health care needs age 0-18 will report that community-based service systems are organized so they can use them easily compared to the 2004 baseline of 80%.

By 2010, 50% of youth with special health care needs will receive the services necessary to make transition to all aspects of adult life compared to the 2004 baseline of 25%.

Websites

Family and Youth Services Bureau, ACYF
<http://www.acf.hhs.gov/programs/fysb/>

National Dissemination Center for Children with Disabilities
<http://www.nichcy.org/>

National Network for Youth
<http://www.nn4youth.org>

Tennessee Commission on Children and Youth Children
Children's Program Outcome Review Team 2004 Evaluation Results
<http://www.state.tn.us/tccy/cport04a.pdf>

Tennessee Department of Children's Services
<http://www.state.tn.us/youth/>

Tennessee Department of Education, Special Education Office
<http://www.state.tn.us/education/speced/>

Tennessee Department of Health
Children's Special Services Program
<http://www2.state.tn.us/health/MCH/css.htm>

U. S. Department Office of Special Education and Rehabilitative Services

Report of Children with Disabilities Receiving Special Education
<http://tennessee.gov/education/speced/doc/11408Idea06TN.pdf>