Asset Mapping for "Raise the Age" in Washington State: Exploring Extension of Juvenile Court Jurisdiction to 18-20-Year-Olds

TECHNICAL ASSISTANCE FOR THE WA-PCJJ
RAISE THE AGE POLICY PROJECT

AUGUST 28, 2025

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Technical Assistance for the WA-PCJJ Raise the Age Policy Project

GLOSSARY

Asset Mapping: In this report, a process identifying and mapping the service providers across the state relevant to serving youth and emerging adults at risk of involvement or involved with the justice system.

Emerging Adults: Young people ages 18, 19, and 20 years old. Throughout this report, refers to those at risk of involvement or involved with the justice system.

Evidence-Based Programs (EBPs): Programs that encompass a range of effective approaches that could cost-effectively reduce juvenile offender recidivism. These evaluations were conducted by WSIPP in collaboration with WAJCA and JR. Funding for juvenile courts is provided by a block grant, and priority of these funds is given to EBPs.[1]

Referrals, Cases, and Filings: A *referral* is a formal request made to the prosecutor, typically by law enforcement, alleging that a youth committed an offense. If the prosecutor determines that the facts bring the case within the jurisdiction of the juvenile court and there is probable cause to believe that the juvenile did commit the alleged offense, the prosecutor can *file* it as a *case.* "Cases" and "filings" are generally used interchangeably.

Formal vs. Informal Services: Formal services are those that may be required of a youth or Emerging Adult as a part of their involvement with the justice system, they always are operationalized as a referral to a specific service provider. Informal services are likely beneficial but not required as a part of their involvement with the justice system, they may be operationalized as a referral (e.g. from a defense attorney or social worker) or sought out independently as an individual navigates involvement with the justice system.

Lived Expertise: Someone with the knowledge and understanding that comes from personal experience of involvement with the justice system.

Raise the Age Workgroup (Workgroup): A group of diverse stakeholders charged by the Washington State Legislature and led by the Washington State Partnership Council on Juvenile Justice (WA-PCJJ) to study and provide recommendations

[1] https://dcyf.wa.gov/sites/default/files/pdf/reports/JuvenileCourtBlockGrant-2024.pdf

regarding the implementation of juvenile court jurisdiction expansion to encompass persons 18, 19, and 20 years old.

Service Provider: An organization or individual that provides supports for youth and/or emerging adults at risk of involvement or involved with the justice system. May be an individual, nonprofit organization, healthcare provider, legal service provider, or government entity.

Youth: Young people ages 12-17 years old. Throughout this report, refers to those at risk of involvement or involved with the juvenile justice system

EXECUTIVE SUMMARY

Introduction

The Washington State Legislature directed the Washington State Partnership Council on Juvenile Justice (WA-PCJJ) to provide recommendations to implement the expansion of juvenile court jurisdiction to include 18-, 19-, and 20-year-olds. This initiative, known as Raise the Age (RTA), aims to align juvenile justice practices with neuroscience research on brain development and improve rehabilitation opportunities for emerging adults. The Evans Policy Innovation Collaborative (EPIC) at the University of Washington was contracted to assess service provision in the state of Washington for youth and/or emerging adults involved in or at risk of becoming involved in the justice system. The EPIC team evaluated service capacity, identified gaps, and assessed the readiness of existing programs to serve this expanded population across Washington State. This evaluation was done through academic literature review, coordination with the Workgroup, data analysis, and qualitative interviews with service providers and those with lived expertise.

Key Findings

1. Service Provider Landscape
    a. We identified **976 service providers** across the state working across **22 defined service categories**.
    b. We found geographic variation in access to services:
        i. **Some rural counties lack key services**, requiring cross-county travel for access.
        ii. **Some counties (ex. Clark, Spokane, and Snohomish) with the highest numbers of filings have a low ratio of service providers** compared to that of counties like King with a similar number of filings.
        iii. **Some counties (ex. Grays Harbor, Clallam, and Stevens) with middle numbers of filings have comparatively few service providers** and are generally in more rural areas of the state.
    c. Many service providers operate **at or near capacity**, raising concerns about their ability to accommodate increased demand.
    d. The **service landscape in Washington is vast**; annual expenses, staff numbers, and number of clients served annually have an extremely wide variation.

2. Essential Services for Emerging Adults
    a. According to interview participants (including service providers and those with lived experience), **critical service areas for 18-, 19-, and 20-year-olds** include:
        i. **Education & Vocational Programs,**
        ii. **Housing,**
        iii. **Mental Health & Therapeutic Services,**
        iv. **Substance Use Disorder & Recovery Treatment,** and
        v. **Mentorship**
    b. Our research suggests that it would be crucial for service delivery to address the **unique developmental needs** of emerging adults in community-based and pro-social ways.

3. Stakeholder Perspectives
    a. We generally observe **broad support for RTA** due to its potential to **provide developmentally appropriate and rehabilitative supports** for young adults, whose brains are still developing until age 26, and potential **racial equity benefits** given the juvenile justice system is federally required to monitor and report on racial disparities.
    b. Significant concerns include **funding shortages, staffing limitations, and operational challenges** (for both providers and in the juvenile court system generally). All individuals cited needing resources to 1) **address increased caseloads** and 2) **expand or adjust services**.
    c. Some stakeholders fear **unintended consequences**, such as diluting quality services for youth or harsher sentencing for younger juveniles.

4. Evidence-Based Programs (EBPs) & System Readiness
    a. **Five EBPs** (e.g., Functional Family Therapy, Multi-Systemic Therapy) currently serve youth, but are not available in every county, and **have not been tested for 18-, 19-, and 20-year-olds**.

Recommendations

1. Reflecting the wide breadth in the service provider landscape in Washington state, the EPIC team recommends **a tiered approach** towards funding development:
    a. **Increase funding for juvenile courts, EBPs, and non-EBP partnerships:** Some counties may require double their current budgets to manage caseload increases. Block grant funding should be

expanded to cover both EBPs and non-EBP community-based programs that can serve emerging adults. **Current funding sits at approximately $38 million every two years.** Expanding block grant funding to **allow non-EBP community-based programs** to serve youth and emerging adults more readily allows for **a saturation of accessible services across the state**.

   b. Establish **capacity-building grants** for service providers to expand capacity and develop specialized content for emerging adults. **Grants should be unrestricted and multi-year,** recognizing that provider budgets range widely but in this report, service providers were found to have a median annual expense of $2.6 million.
   c. Offer **technical assistance and training** for youth-serving providers potentially transitioning to serve 18-, 19-, and 20-year-olds and to providers already serving emerging adults but needing guidance to operate in the juvenile court system.

2. Implementation Strategies
   a. **Stagger RTA rollout** to allow service providers time to scale up. **Release funds 6-12 months** before expansion milestones to give providers time to recruit, hire, and train staff
   b. Prioritize funding for **geographically underserved areas**, **areas with expected significant filings,** and for **providers operating in the critical service categories.**
   c. **Address workforce shortages** in fields such as mental health, case management, and social services through long term investment in recruitment and retention.
   d. Balance fidelity and innovation, **center service quality for existing youth populations** throughout the expansion.
   e. **Center racial equity and accountability**, embedding mechanisms for monitoring, feedback, and course correction throughout RTA implementation.

Conclusion

Expanding juvenile court jurisdiction to include **18-, 19-, and 20-year-olds** presents both opportunities and challenges. While the policy aligns with research supporting **developmentally appropriate and rehabilitative outcomes over punitive measures**, **significant investments and strategic planning** are necessary to ensure a successful transition. **Ensuring equitable access to services, increasing provider capacity, and securing funding** will be critical to achieving RTA's intended goals.

INTRODUCTION

Project Background and Purpose

During the 2023 legislative session, the Washington State Legislature directed the Washington State Partnership Council on Juvenile Justice (WA-PCJJ) to study and provide recommendations regarding the implementation of juvenile court jurisdiction expansion to encompass persons 18, 19, and 20 years old. The recommendations will include an implementation plan for the expansion, a timeline for structural and system changes within the juvenile justice system, and an operations and business plan defining benchmarks for resource allocations and cost. Full language regarding the directive can be found in ESSB 5187, pages 396-397.

To accomplish this, the Raise the Age Workgroup (Workgroup) was formed, co-lead by individuals from the Office of Juvenile Justice (OJJ) and WA-PCJJ. The workgroup includes a diverse group of stakeholders that would be impacted by this policy and/or can provide expertise on the age of juvenile court jurisdiction. A full list of members can be found on the Raise the Age policy studies page.

To support the production of "*reports and recommendations for each policy area through broad community and system partner engagement, research and data analysis, consideration of brain science, best practices, and the potential impacts on recidivism and racial equity*"[2] the workgroup contracted with the Evans Policy Innovation Collaborative (EPIC) at the University of Washington, Evans School of Public Policy & Governance to provide technical assistance in assessing service provision in the state of Washington for youth and/or emerging adults involved in or at risk of becoming involved in the juvenile or adult criminal legal system. Expansion of the juvenile justice system to include 18-, 19-, and 20-year-olds would have important implications for the system itself and community-based service providers. Of particular concern discussed in this report is anticipation of the changing demand placed on service providers currently working with youth in the juvenile justice system and how organizational capacity or access to services may be increased to accommodate 18-, 19-, and 20-year-olds. There also is reason to expect existing service organizations will weigh developing new programs or services to address the different needs that 18-, 19-, and 20-year-olds may present compared to those under 18.

[2] https://dcyf.wa.gov/practice/practice-improvement/ojj/policy-studies

To begin inquiry into potential local service capacity demand, EPIC led an asset-mapping field analysis of human services currently available to (1) at-risk youth, (2) youth interacting with the juvenile justice system, and (3) potentially services already being provided for or available to 18-, 19-, and 20-year-olds. This work included:

- Conducting asset mapping in Washington State to identify available services and support for at-risk youth and youth interacting with the juvenile justice system, focusing on informal and formal responses.
- Determining the needs of the 18-, 19-, and 20-year-old age group compared to 12- to 17-year-olds within the juvenile justice system and potential related service provision provided by community organizations.
- Evaluating the potential impacts of raising the age of juvenile jurisdiction on existing resources and services for at-risk youth aged 18, 19, and 20.
- Assessing the readiness of existing service providers to accommodate an expanded age range in the juvenile justice system.
- Engaging stakeholders, including experts, service providers, community members, and youth or emerging adults, to gather input and recommendations.
- Assisting Workgroup with cost analysis for additional state investment needed to appropriately fund the creation or expansion of services to effectively serve 18-, 19-, and 20-year-olds.

Additionally, EPIC provided a Benefits-Costs Analysis of serving emerging adults under juvenile court jurisdiction, including new costs and costs avoided by local and state government. This companion report can be found at the EPIC website for the Raise the Age Project.

Key Assumptions

The Raise the Age (RTA) initiative and this asset mapping report is grounded in several key assumptions about the broader goals of justice reform, system capacity, and service provision. First, the policy shift raises questions about the role of the legal system in responding to emerging adults in a manner that takes into consideration their developmentally unique needs to improve outcomes for both emerging adults and public safety. Second, investment in expanding the capacity of juvenile courts is not assumed to come at the expense of prevention and diversion

efforts for those under or over 18; rather, both tracks are understood as essential and complementary to achieving meaningful reform.

The age expansion for juvenile courts described in this report does not center on juvenile rehabilitation (JR) facilities or law enforcement agencies as primary service providers needing to expand their capacity to meet the increased caseloads, instead the expansion focuses on community-based organizations and other supportive services.

Regarding service provision, it assumes that service providers are already operating at or near capacity, meaning that expanding juvenile jurisdiction to include 18-, 19-, and 20-year-olds will increase demand on an already strained system. It also assumes that there are not Emerging Adult tailored services in the adult criminal legal system that could be transferred to the juvenile system. Another assumption is that most services are designed to be accessible to all individuals unless explicitly stated otherwise, meaning that, in theory, existing programs could be adapted for emerging adults. Lastly, the landscape of service providers is highly diverse in terms of funding, staffing, and operational models, requiring a multifaceted approach to understanding how RTA will impact their ability to serve an expanded age group.

About the Evans Policy Innovation Collaborative (EPIC)

Operating out of the Evans School of Public Policy & Governance, EPIC partners with communities, organizations, and government to design, test, and scale policy innovations for the public good. Our work involves the blending of human-centered design principles, traditional mixed methods policy research designs, inquiry into current implementation practices, and the perspectives of those with lived experience to inform recommendations for action. Through a unique toolkit of facilitation, research, and implementation support, EPIC works to share knowledge, explore and analyze ideas, and develop plans and action steps that keep the needs and perspectives of stakeholders centered to build institutional capacity to support systems change over time. A full list of project team members contributing to this report can be found in Appendix A.

OUR WORK

Forming an Inventory of Service Providers

To assess the State's capacity to provide services to at risk youth, youth involved with the juvenile justice system, and potential emerging adults to be involved with the juvenile justice system, the EPIC team began by creating a novel, comprehensive inventory of providers serving this group. This inventory of service providers drew information from four sources:

1) Internal databases from the Washington State Department of Children, Youth, and Families (DCYF)
2) Sources provided by Workgroup members and leads
3) Sources provided by interviews (lived experts and service providers)
4) Sources publicly available from web-based directories (using keyword searches when applicable)

The combination of the four methods above resulted in the following lists to be combined to form our inventory of current and potential service providers [citing relevant keyword searches when applicable]:

- Free Youth Program Directory for Washington State from Elevate Washington [juvenile justice, juvenile diversion]
- Imagine Justice Youth Serving Agencies Network (YSAN)
- Juvenile Rehabilitation Program Inventories
- Juvenile Court Evidenced Based Programs Service Provider Inventory
- King County CSEC Task Force Contacts and Advocates
- King County Intensive Provider Tracking Sheet
- Kids' Mental Health Pierce County Resources
- Washington Department of Commerce Family and Adult Coordinated Entry Sites
- The Washington Association of Prosecuting Attorneys Prosecutors of Washington Prosecutor Directory
- Washington State Department of Health Sex Offender Treatment Provider Directory
- Washington 211 [juvenile justice, juvenile diversion]
- Washington Reentry Resources (WA) from Reentry Essentials, Inc.
- Washington State Dispute Resolution Centers
- Youth Access and Resource Program (YARP) Resources [advocacy and education, behavioral health services, Black – Indigenous – People of Color, crisis information, employment resources, food and housing, general resources/services, inpatient mental health, LGBTQIA+, parent supports,

substance use disorder – recovery and support organizations, substance use disorder – outpatient services, substance use disorder – inpatient services]
- Youth Support Resources in King County [counseling mental health, education classes, employment, housing shelters, housing support assistance, job readiness, legal services, mentorship, parenting assistance, substance use, violence prevention, pro social recreation fun]

Defining Service for Youth and Emerging Adults

To build an understanding of what types of services are available across the state, the EPIC team drafted an initial roster of service categories available from current service providers. To do this, EPIC researchers began with a literature review to define what types of services are critical for youth at risk of or interacting with the juvenile justice system. Workgroup members provided extensive feedback and input into how this roster of service categories was developed and defined. A summary literature review discussing the types of services for justice involved youth and the Emerging Adult population can be found in Appendix B. The finalized list of service categories (with descriptive definitions and/or example activities) are as follows:

- **Educational and Vocational Programs**: Education and job training, may include school-based programs
- **Mental Health and Therapeutic Support**: Mental health counseling and therapeutic services
- **Family-Based Therapeutic Support**: Therapeutic approaches that engage family members
- **Community-Based Programs**: Local, culturally relevant, and/or restorative justice-based programs designed in person-centered ways and for specific communities - can encompass a wide range of services and programs
- **Civic Engagement**: Involvement in community and governance, may include volunteer opportunities
- **Recreation**: Physical activities, sports, and leisure programs
- **Mentoring**: Guidance and support from experienced mentors
- **Family Support**: Services assisting family stability and functioning, may include parenting classes
- **Health and Wellness**: Programs promoting physical and mental health
- **Housing**: Supporting safe and stable living arrangements
- **Gender-Specific and LGBTQIA+**: Services tailored for gender and LGBTQIA+ individuals

- **Residential and Institutional Care**: Structured living environments with support
- **Substance Use Disorder and Recovery Treatment**: Addiction treatment and recovery programs
- **Case Management and Support Services**: Coordinated care and support planning
- **Direct Resource Assistance:** Providing basic needs and tangible resources, may include food, clothing, or transportation support
- **Personal Development/Independent Living/Self-Management**: Teaching independence, financial management, and digital skills
- **Tribal Services**: Cultural, educational, and social services for Native American populations
- **Immigrant Services**: Legal, education, and integration support for immigrants
- **Faith-Based Programs:** Faith-based guidance and support
- **Recreation**: Physical activities, sports, and leisure programs
- **Arts and Music:** Visual arts, music production, dance, and theatre activities
- **Youth Justice/Peer-Led Justice:** Engaging youth in justice to promote accountability and rehabilitation, may include mediation, dispute resolution, and youth court programs

In our inventory, service providers were "tagged" as operating in these service categories from provided descriptions and website review. Multiple tags were given to a single service provider when applicable. The team operated on the assumption that more tags would be helpful in this circumstance, where services provided to youth and emerging adults would have an impact in other categories, better representing the whole picture of a service provider's impact.

Adding Descriptive Information about Service Providers

To assess geographic capacity across the state, the project team tagged service providers with county or counties of operation, and addresses were obtained from their provided source, websites, or the Candid online public database.

To provide detail on populations served, we entered the following demographic information (followed by specific entry options) into the inventory through website and annual report review. The EPIC team operated under the assumption that all service providers serve all people. Service providers associated with any of the

demographic information below means they operate entirely or with specific programming options for that demographic group.

- Age (Under 18 or Over 18)
- Gender (Male, Female, or Transgender/Non-binary/non-conforming)
- Race/Ethnicity (BIPOC, Black or African American, Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, or Hispanic or Latino)

To provide detail on organizational capacity, the team entered the number of individuals or families served annually into the inventory from service provider websites when provided anytime between 2020-2024. To supplement, the team entered reported annual expenses from Fiscal Year 2023 along with the number of staff into the inventory from the online public database Candid when available.

Engaging Stakeholders

Qualitative interviews and focus groups were held with 35 total individuals over the course of the project. Interviews included service providers, those with lived expertise, and RTA experts from other states. Service provider interviews included individuals representing nonprofit service providers, health, mental health, or therapeutic service providers, legal service providers, and juvenile court administrators. A number of these service providers engaged included individuals with lived expertise. The EPIC team also engaged individuals with lived expertise who were not service providers separately. The Workgroup also shared a number of focus group notes or other written accounts from lived experts that are exemplified in this report.

The EPIC team began by interviewing members of the Workgroup's Community-Based Services Subcommittee. The interview guide for this set of 1-hour discussions can be found in Appendix C. A final question asked participants to identify any other organizations that the EPIC team should engage. These referrals formed the basis for the second round of interviews to engage service providers around the state who are not a part of the Workgroup. To formulate a sample of service providers who represented a variety of geographic areas, sizes or capacities, and service categories provided, the EPIC team added additional service providers from our inventory to capture a representative group. The interview guide for this set of 30-minute discussions can be found in Appendix D. Between both sets of interviews, 52 service providers were invited to participate in interviews and26 participated.

Additionally, the EPIC team interviewed representatives from two states, Vermont and Massachusetts, with experience passing or attempting to pass similar RTA legislation. In these conversations, the EPIC team asked about the state's planning for service provision changes and service provision outcomes with the inclusion of emerging adults in the juvenile justice system. The interview guide for these 1-hour conversations can be found in Appendix E.

The EPIC team took detailed notes during sessions, and most were recorded with the consent of the interviewees. Interviewees who were not compensated for their time by their employer as operating in their professional capacity were compensated at a rate of $50 an hour. Following each interview, we synthesized findings with short summaries, enabling us to identify themes, contrast perspectives, and synthesize findings into recommendations for the Workgroup in this report.

RESULTS

Total Service Providers

Our inventory identified approximately 976 service providers operating statewide. Map 1 provides a visualization of the distribution of these relevant service providers across Washington's 39 counties, and Table 1 reports precise counts of service providers by county. It is important to note that this is not intended to represent every single service provider in every county, but rather reflects those identified through the approach described above.

Table 1: Number of Service Providers by County

County	# of Service Providers serving each county	County ctd.	# of Service Providers serving each county ctd.
Adams	9	Lewis	37
Asotin	49	Lincoln	6
Benton	109	Mason	18
Chelan	36	Okanogan	14
Clallam	11	Pacific	9
Clark	26	Pend Oreille	8
Columbia	80	Pierce	114
Cowlitz	21	San Juan	12
Douglas	16	Skagit	20
Ferry	6	Skamania	10
Franklin	100	Snohomish	42
Garfield	48	Spokane	51
Grant	27	Stevens	7
Grays Harbor	11	Thurston	49
Island	11	Wahkiakum	10
Jefferson	9	Walla Walla	89
King	262	Whatcom	20
Kitsap	27	Whitman	35
Kittitas	51	Yakima	134
Klickitat	8	Statewide	76

While approximately 76 organizations operate statewide, in all counties, and 78 organizations operate in large multi-county service areas (more than three), the vast majority of service providers work in one county (N=599) or in two to three counties (N=232).

Map 1: Number of Service Providers Operating by County

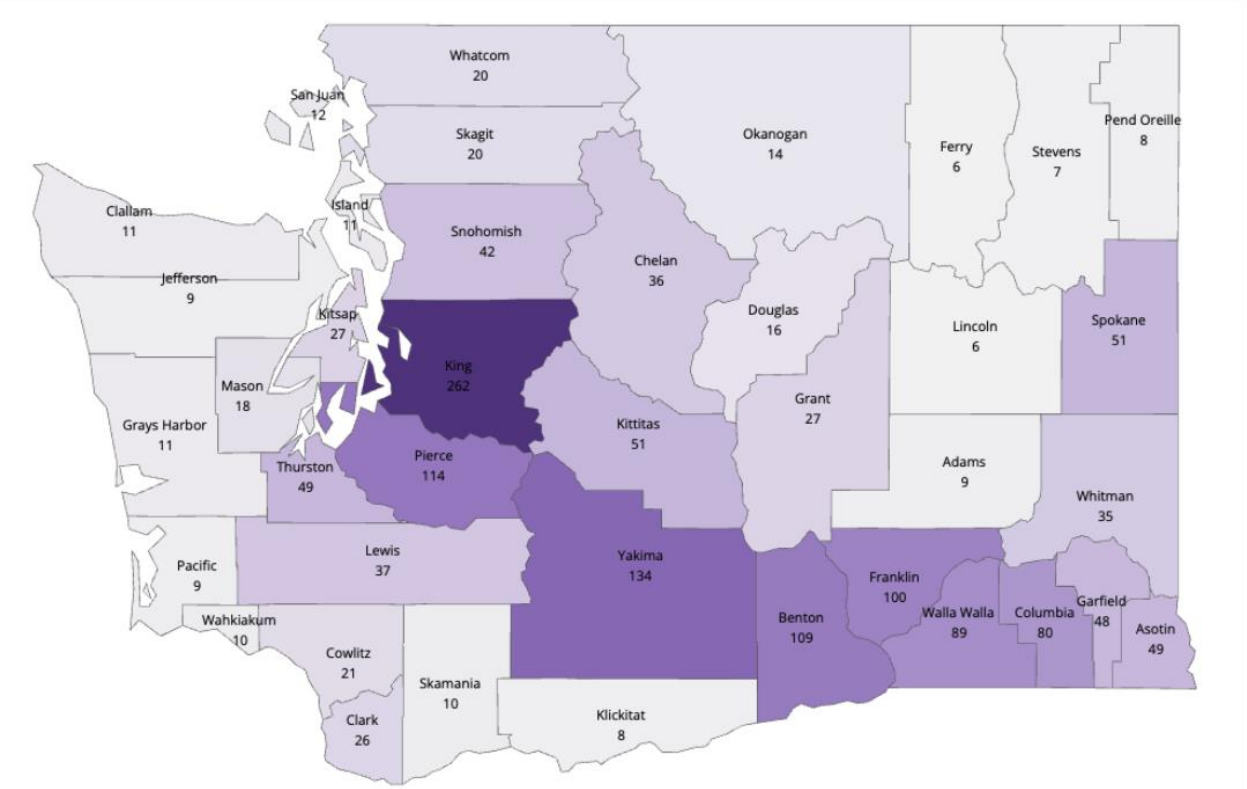
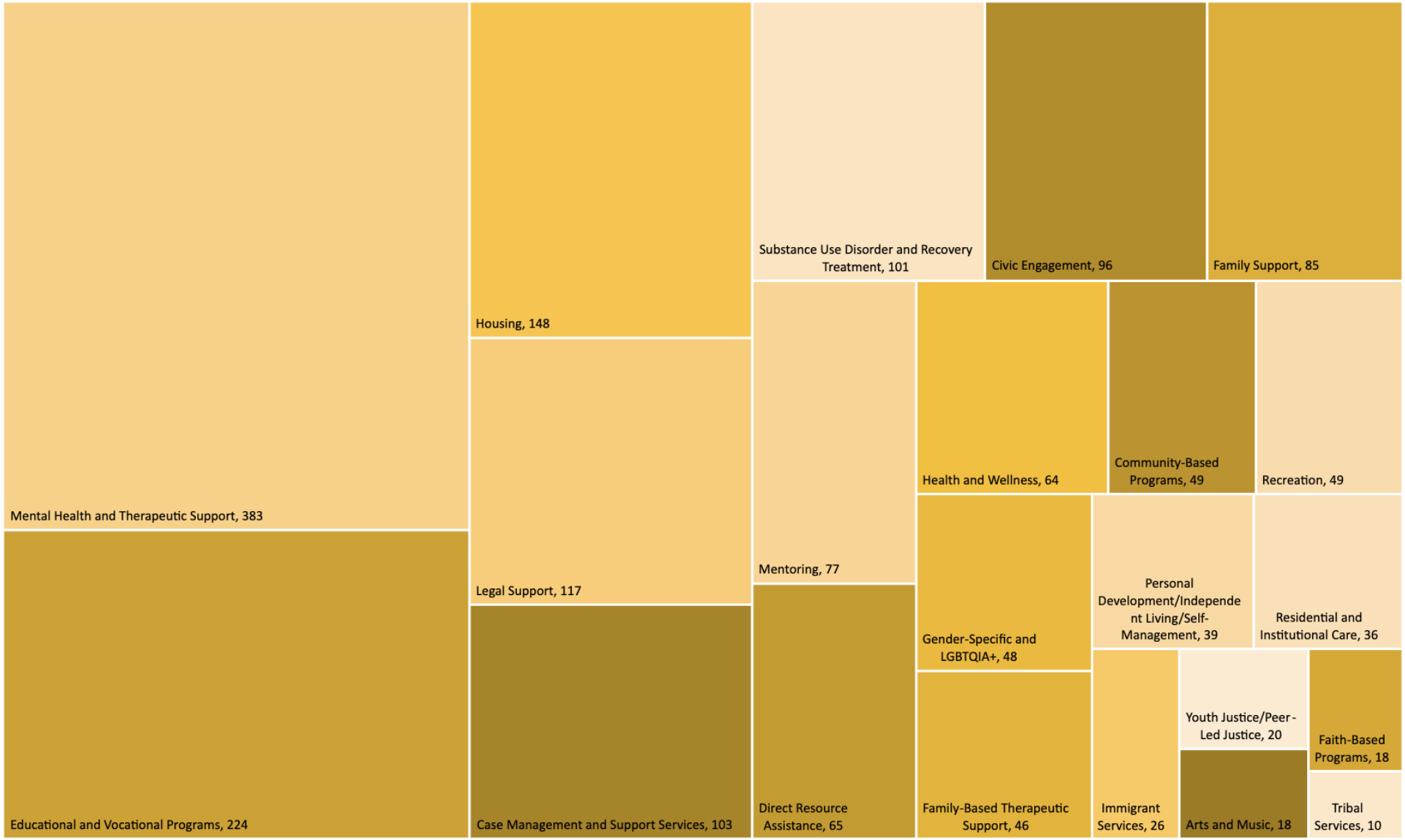


Figure 1 reports the number of providers operating in each of the 22 different service categories, with Table 2 providing specific counts within each service category. The vast majority of service providers operate in 1 service category (approx. N=463) or 2-3 service categories (approx. N=330). Still, some organizations operate in 4-5 service categories (approx. N=80), or 6-12 service categories (approx. N=38).

Table 2: Number of Service Providers by Service Category

Service Category	# of Service Providers in Service Category
Arts and Music	18
Case Management and Support Services	103
Civic Engagement	96
Community-Based Programs	49
Direct Resource Assistance	65
Educational and Vocational Programs	224
Faith-Based Programs	18
Family Support	85
Family-Based Therapeutic Support	46
Gender-Specific and LGBTQIA+	48
Health and Wellness	64
Housing	148
Immigrant Services	26
Legal Support	117
Mental Health and Therapeutic Support	383
Mentoring	77
Personal Development/Independent Living/Self-Management	39
Recreation	49
Residential and Institutional Care	36
Substance Use Disorder and Recovery Treatment	101
Tribal Services	10
Youth Justice/Peer-Led Justice	20

Figure 1: Number of Service Providers Operating by Service Category



Who Service Provider Serve

142 service providers indicated specific populations they entirely serve or provide specific programming for. The demographic characteristics and numbers of service providers providing specific services for these groups can be seen in Table 3.

Table 3: Number of Service Providers Serving Specific Demographic Groups

Client Population	# of Service Providers
Race/Ethnicity	
American Indian or Alaska Native	15
Asian	6
BIPOC	17
Black or African American	23
Hispanic or Latino	14
Native Hawaiian or Other Pacific Islander	6
Gender	
Female	21
Male	7
Transgender/Non-Binary/Non-Conforming	11
Age	
O18	17
U18	45

48 service providers indicated the number of individuals or families they serve annually on their websites or annual reports (provided between 2020-2024). The range of individuals or families served annually varies from 35 – 290,556. The middle 50% sits between 1,233 and 7,360.

Service Provider's Operational Capacity

To begin understanding service providers operational capacity, the EPIC team investigated two metrics, annual expenses in Fiscal Year 2023, and the number of staff at an organization. The EPIC team was able to provide annual expense information for 238 service providers. The range of annual expenses for all service providers was $8,824 - $288,130,769. The middle 50% sits between $701,068 and $14,039,705 and the median annual expenses sits at $2,557,838.

The EPIC team was able to provide staff size information for 212 service providers. The range of staff size was from 1 – 5,879. 48 service providers operate within 1-10 staff members, 82 operate within 11-50, 51 within 51-200, and 31 above 200.

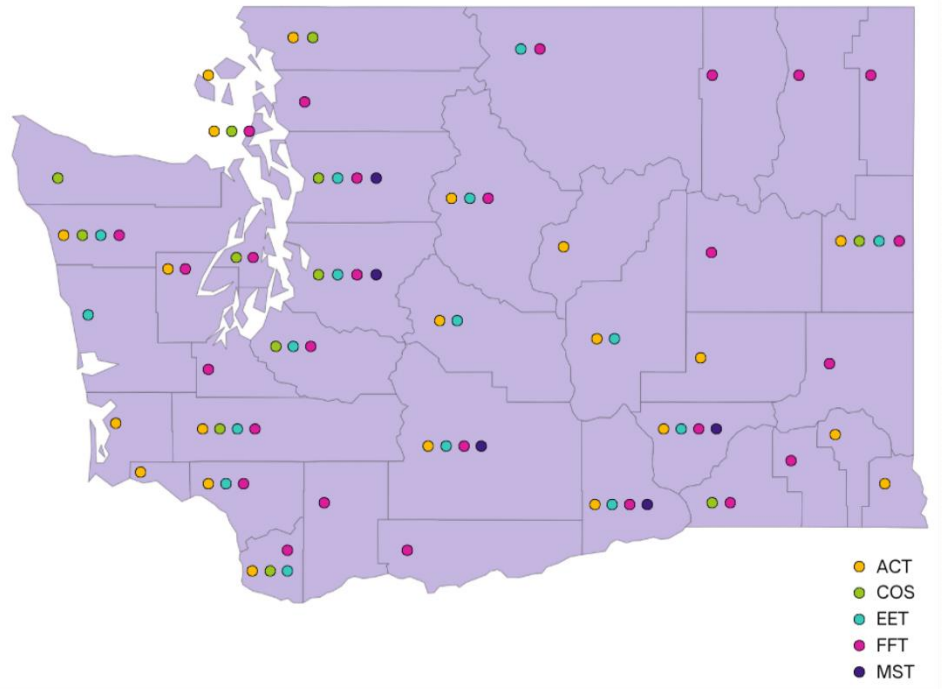
Evidence-Based Programs (EBPs) in Washington State

While the entirety of our inventory and the recommendations in this report are based on services provided to justice involved youth and emerging adults through both formal and informal responses, there is an important callout to be made

regarding EBPs in Washington State. As a part of the commitment to reducing state and juvenile court involved youth and emerging adults in the juvenile justice system, Washington State has provided funding to court systems *"for programs that are effective at reducing juvenile criminal behavior."*[3] Currently, priority of these funds is given to EBPs, meaning one formal pathway for justice involved youth and emerging adults to connect to services will be through EBPs. This report provides information on five EBPs in Washington State:

- Alternative Choice Training (ACT)
- Coordination of Services (COS)
- Education and Employment Training (EET)
- Functional Family Therapy (FFT)
- Multi-Systemic Therapy (MST)

Map 2: Evidence-Based Programs (EBPs) by County (as of October 2024)



Every EBP has differing availability across the state and some EBPs are provided by the juvenile court system, while others are by contracted providers. Eligibility for these programs is determined by the combination of a risk-assessment of the individual as well as availability in the county in which the individual is served. As of October 2024, ACT is available in 21 counties, COS is available in 12 counties, EET is available in 16 counties, FFT is available in 25 counties, and MST is available in 4 counties. A map of their availability can be seen in Map 2. Since October 2024, this availability has likely changed.

[3] https://dcyf.wa.gov/sites/default/files/pdf/reports/JuvenileCourtBlockGrant-2023.pdf

Evaluations and information about these programs have been reported by DCYF, notably according to their December 1, 2023 report on Fiscal Year 2023:

- There were 3,592 total EBP eligibilities across COS (1,427), EET (897), FFT (1,041), and MST (227).*
- There were 1,025 EBP program starts across COS (438), EET (200), FFT (267), MST (40), and ACT (80).*
- There were 689 EBP program successful completes across COS (420), EET (91), FFT (151), and MST (27).*

*Further detailed information across demographic characteristics such as gender and race, as well as historical information over time between 2018-2022 are available in the report.

Also noted in the report are costs per participant, with COS at $1,080, EET at $7,216, FFT at $3,713, MST at $12,228, and ACT at $11,040.

Takeaways from Engaging Stakeholders

Perceptions of Raise the Age

A majority of those interviewed support Raise the Age (RTA), citing neuroscience research that demonstrates brain development continues until the mid-20s. Many believe emerging adults should be given access to rehabilitation-focused juvenile justice rather than facing punitive measures in the adult system. Some shared that this rehabilitative focus in the juvenile justice system could further anti-racist efforts for BIPOC 18-, 19-, and 20-year-olds, given that the juvenile justice system is federally required to monitor and report on racial disparities[4], but some also feared that while white youth might receive rehabilitative services, Black and Indigenous youth would still face harsher penalties, including transfers to adult court in serious cases.

"[RTA] Aligns with adolescent brain development, decision-making capabilities don't suddenly change at the age of 18."

While the policy has broad support in principle, there is skepticism about whether the juvenile system is prepared for an influx of older youth. Participants

[4] https://ojjdp.ojp.gov/about/legislation

expressed concerns about staffing, funding, and court capacity, emphasizing the need for additional resources to avoid overwhelming the system.

"Cart before the horse—we can't successfully manage those already in juvenile court, and now we want to add 20-year-olds?"

While many service providers already serve 18-, 19-, and 20-year-olds in their day-to-day operations, providers shed light on important programs—including EBPs—that have only been validated for individuals under the age of 18. These providers suggest that programs would need to be evaluated and refined to consider the needs of emerging adults. Several respondents highlighted concerns about mixing older and younger juveniles in detention centers, citing risks of harm, exploitation, and supervision challenges. There is also fear of unintended consequences, such as overcrowding or increased recidivism if services are not appropriately tailored to older youth. Some providers also voiced that even if they already serve emerging adults, they do so in the context of the adult system. There would need to be transition assistance into doing this in the juvenile system.

"The conversations and language are different, but we need to capture all components so youth are set up to sustain stability"

Some providers worry about political backlash, particularly concerns that raising the age for 18, 19, and 20-year-olds might lead to harsher treatment for 16-17-year-olds. Few voiced that there is a public perception that will need to be fought that the emerging adults will be receiving a lesser sentence than they deserve. Skepticism remains regarding whether the policy will be adequately funded and effectively implemented.

"if 18 to 20-year-olds start getting leniency, you might see harsher punishments for 16-year-olds to make up for it... it's an experiment—there needs to be a lot of eyes on it to see if it's actually working."

Need for Resources

Every individual interviewed voiced the need for expanded resources and service provision targeting youth and emerging adults. RTA raises a particular need

for increased resources stemming from two places: (1) the potential for increased caseloads, and (2) the need to expand or adjust services for emerging adults compared to youth. We heard many concerns about system overload and the need for additional staff capacity to handle more cases. However, most viewed this opportunity positively, expressing their desire to help more people and/or provide more services. Few warned that while this might be true, quality staffing and training take time to develop, particularly given there is currently high staff turnover in mental health, case management, and social services which makes the need for expansion difficult to sustain.

"If we're going to raise the age, we also need to raise the amount of funding that we are putting towards programming. If we don't raise the amount of funding, that would be really hard. Setting up for failure. Invest in young people to have them succeed."

Some participants highlighted the need for additional training to support effective interaction with emerging adults, including specialized training surrounding mental health support, trauma-informed care, and reentry programming. A number interviewed also expressed concern that shifting focus to include 18-, 19-, and 20-year-olds could inadvertently divert resources from younger, high-risk youth.

"Being very clear about what people in their 20's need vs. people in their teens. JPCs have said 'I need to serve people who are 22, I don't know what they need.' A fear that people have to work with young people over 18 that they don't know how to do that."

Critical Services and Approaches for Emerging Adults

Service providers and those with lived expertise identified the following service categories as crucial to supporting an Emerging Adult at any stage of justice involvement: Education and Vocational Programs, Housing, Mental Health and Therapeutic Support, Substance Use Disorder and Recovery Treatment, and Mentorship. Service providers advise that these programs should be delivered in ways that center on the specific needs of each community and provide opportunities for pro-social interactions.

"Biggest part that would need to emphasize would be social interactions. Teaching jobs, how to be situated, manage money. Build in social support, how do they socialize in a pro-social manner? People who have had problems with alcohol, partying—how can it not be a trigger? Network and support to fit into more beneficial networks?"

Further, while many of the same services are provided for youth, service providers and those with lived expertise noted that they are often delivered differently to emerging adults either in tone or content, particularly due to increased independence and societal expectations of adults. The need to adapt youth-centered services is most felt by providers that do not already serve that population.

"Going to look different because of need. When we are serving youth under 18, don't tell them how you do an apartment search; focus on physical housing. If you are 18, you likely have a job; should be looking at physical housing aspect."

FINDINGS AND RECOMMENDATIONS

Capacity Based on Geography

Many counties lack the services they would need to expand the youth justice system to include those 18-, 19-, and 20-years-old. In many rural counties, individuals must already travel across county lines to receive services. Therefore, RTA success would hinge on new investments in support services across the state.

The number of filings for youth (age 8-17) in 2019 by county can be seen in Table 4.[5] The number of forecasted filings in 2030 (encompassing ages 18, 19, and 20-years old) by county can also be seen in that table. Heatmaps displaying these filings can be seen respectively in Map 3 and Map 4. A ratio has also been created to compare rates of the total service providers compared to the number of filings in 2019, this can be seen in Table 5.

[5] https://www.dcyf.wa.gov/sites/default/files/pdf/2022WA-PCJJgov.pdf

When comparing Map 3 to Map 1 (displaying the number of service providers in each county), there is alignment between counties with a higher number of filings and counties with a higher number of service providers. However, when comparing counties with the highest numbers of filings (such as Clark, Spokane, and Snohomish) to the service landscape in King, these counties have less than half of the number of service providers comparatively.

It is also seen that some counties that have middle numbers of filings (such as Grays Harbor, Clallam, or Stevens) and will need to expand further have comparatively few service providers. It is also of note that many of these counties are generally in more rural areas of Washington.

While juvenile court caseloads will expand in every county, it is important to consider how investments may be made to ensure the counties with the greatest need as defined by the highest numbers of filings and the lowest numbers of service providers are best prepared for the increased service demand.

Table 4: Youth Filings and Forecasted Youth and Emerging Adult Filings in 2019 versus 2030

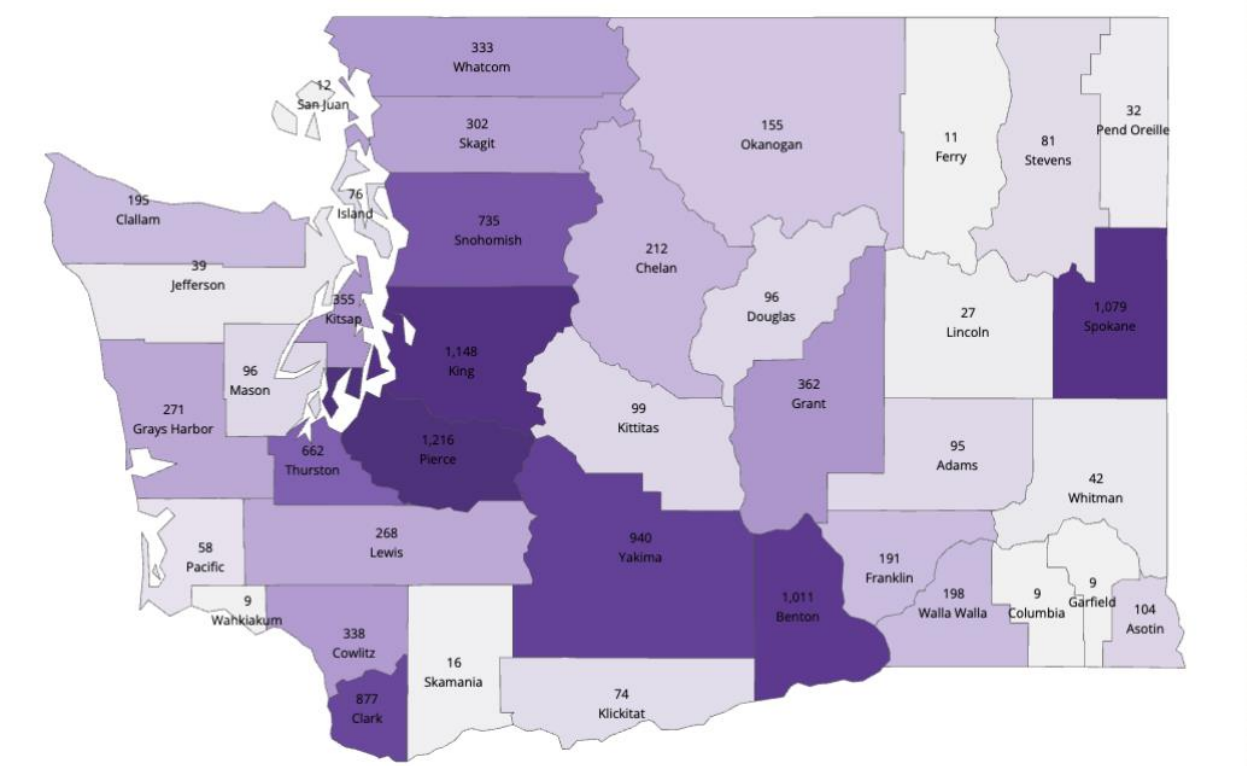
County	Filings (2019) - Youth (8-17)	Forecasted Filings (2030) - Youth & RTA Eligible Emerging Adults**	Total New Filings in 2030 Compared to 2019
Pierce	1216	1653.9	437.9
King	1148	1561.4	413.4
Spokane	1079	1467.5	388.5
Benton	1011	1375.0	364.0
Yakima	940	1278.5	338.5
Clark	877	1192.8	315.8
Snohomish	735	999.7	264.7
Thurston	662	900.4	238.4
Grant	362	492.3	130.3
Kitsap	355	482.8	127.8
Cowlitz	338	459.7	121.7
Whatcom	333	452.9	119.9
Skagit	302	410.7	108.7
Grays Harbor	271	368.6	97.6
Lewis	268	364.5	96.5
Chelan	212	288.3	76.3
Walla Walla	198	269.3	71.3
Clallam	195	265.2	70.2
Franklin	191	259.8	68.8
Okanogan	155	210.8	55.8

County ctd.	Filings (2019) - Youth (8-17) ctd.	Forecasted Filings (2030) - Youth & RTA Eligible Emerging Adults ctd.**	Total New Filings in 2030 Compared to 2019 ctd.
Asotin	104	141.4	37.4
Kittitas	99	134.6	35.6
Douglas	96	130.6	34.6
Mason	96	130.6	34.6
Adams	95	129.2	34.2
Stevens	81	110.2	29.2
Island	76	103.4	27.4
Klickitat	74	100.6	26.6
Pacific	58	78.9	20.9
Whitman	42	57.1	15.1
Jefferson	39	53.0	14.0
Pend Oreille	32	43.5	11.5
Lincoln	27	36.7	9.7
Skamania	16	21.8	5.8
San Juan	12	16.3	4.3
Ferry	11	15.0	4.0
Columbia*	9	12.2	3.2
Garfield*	9	12.2	3.2
Wahkiakum*	9	12.2	3.2
TOTAL	**11817**	**16072.0**	**4255.0**

**Filings are not reported as they are under 10 per year. An estimate of 9 is used in this report.*

***Based caseload forecasts produced by the Emerging Adult Justice Project and the distribution of 2019 filings by county as reported by the Partnership Council on Juvenile Justice. Chester, L. E. H. & Carey, N. (2025). Raise the Age Caseload Analysis for Washington State. Emerging Adult Justice Project, Columbia University Justice Lab.; Washington State Partnership Council on Juvenile Justice. (2022). Washington State Juvenile Justice Report to the Governor & State Legislature. (pg. 64). Department of Children, Youth, and Families. https://www.dcyf.wa.gov/sites/default/files/pdf/2022WA-PCJJgov.pdf*

Map 3: Youth Filings (2019)



Map 4: Youth & RTA Eligible Emerging Adults Forecasted Filings (2030)

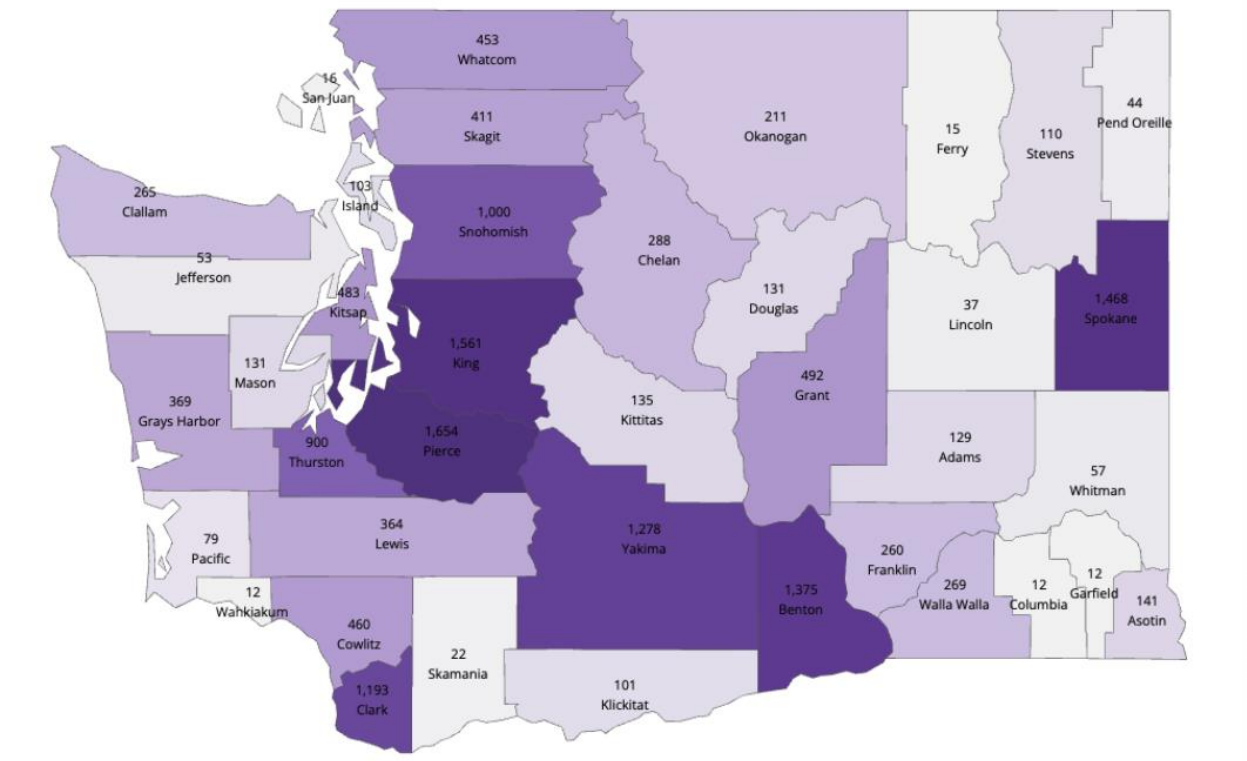


Table 5: Ratio of Filings to Service Providers by County

County	Filings (2019) - Youth (8-17)	Total Service Providers	Ratio
Counties with Filings (2019) between 1-50			
Wahkiakum*	9	10	1.111
Garfield*	9	48	5.333
Columbia*	9	80	8.889
Ferry	11	6	0.545
San Juan	12	12	1.000
Skamania	16	10	0.625
Lincoln	27	6	0.222
Pend Oreille	32	8	0.250
Jefferson	39	9	0.231
Whitman	42	35	0.833
Counties with Filings (2019) between 50-500			
Franklin	191	100	0.524
Kittitas	99	51	0.515
Asotin	104	49	0.471
Walla Walla	198	89	0.449
Mason	96	18	0.188
Chelan	212	36	0.170
Douglas	96	16	0.167
Pacific	58	9	0.155
Island	76	11	0.145
Lewis	268	37	0.138
Klickitat	74	8	0.108
Adams	95	9	0.095
Okanogan	155	14	0.090
Stevens	81	7	0.086
Kitsap	355	27	0.076
Grant	362	27	0.075
Skagit	302	20	0.066
Cowlitz	338	21	0.062
Whatcom	333	20	0.060
Clallam	195	11	0.056
Grays Harbor	271	11	0.041
Counties with Filings (2019) between 500-1200			
King	1148	262	0.228
Yakima	940	134	0.143
Benton	1011	109	0.108
Pierce	1216	114	0.094
Thurston	662	49	0.074
Snohomish	735	42	0.057
Spokane	1079	51	0.047
Clark	877	26	0.030

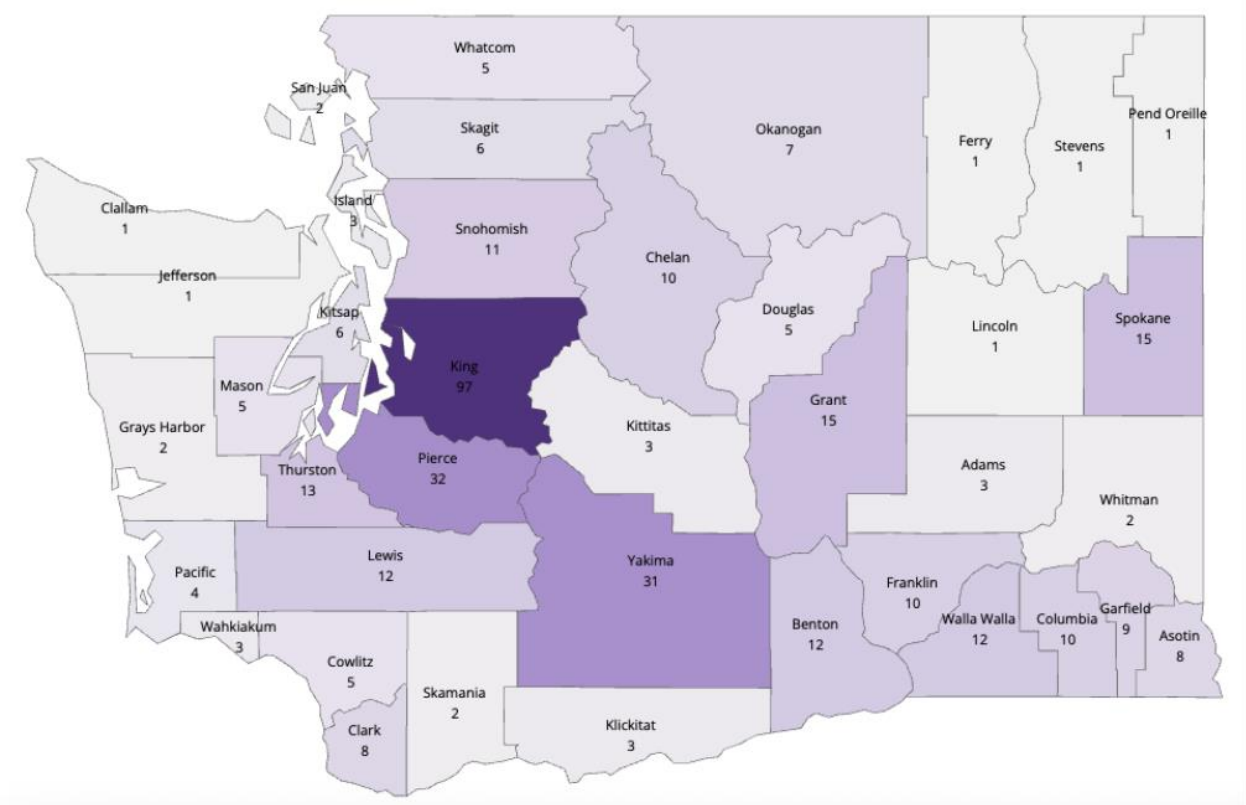
**Filings are not reported as they are under 10 per year. An estimate of 9 is used in this report.*

Capacity Based on Essential Services for Emerging Adults

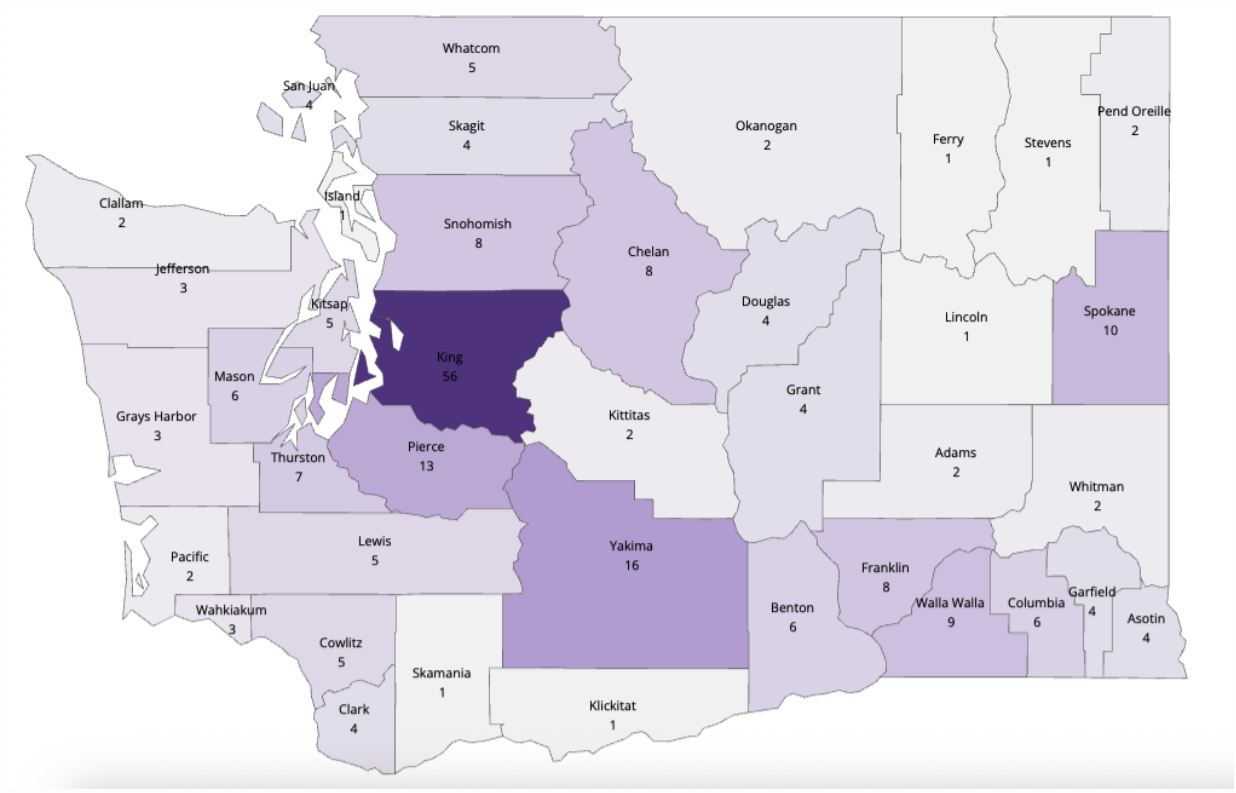
While all service categories we identified would likely be helpful in some form for emerging adults that are already provided to those under 18, some may be more crucial for those over 18. From our engagement with stakeholders including those with lived expertise, the Education and Vocational Programs, Housing, Mental Health and Therapeutic Support, Substance Use Disorder and Recovery Treatment, and Mentorship service categories were identified as essential to supporting emerging adults.

Table 6 shows the count of service providers by county in Washington in these critical service categories. Map 5 - Map 9 also show this distribution across the state. It is clear that across every critical service category, there is varying availability across the state, in some counties not having access to any service providers in a particular service category thereby requiring cross-county travel to obtain services.

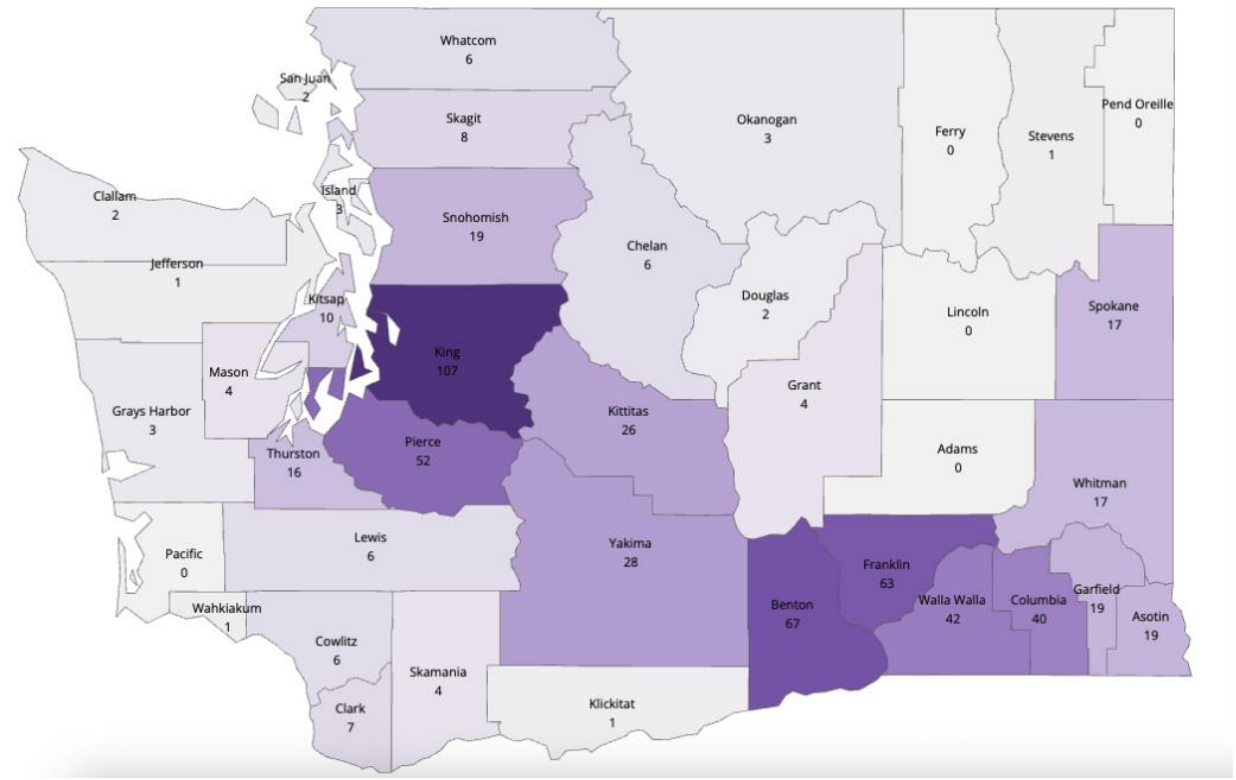
Map 5: Number of Education and Vocational Program Providers by County



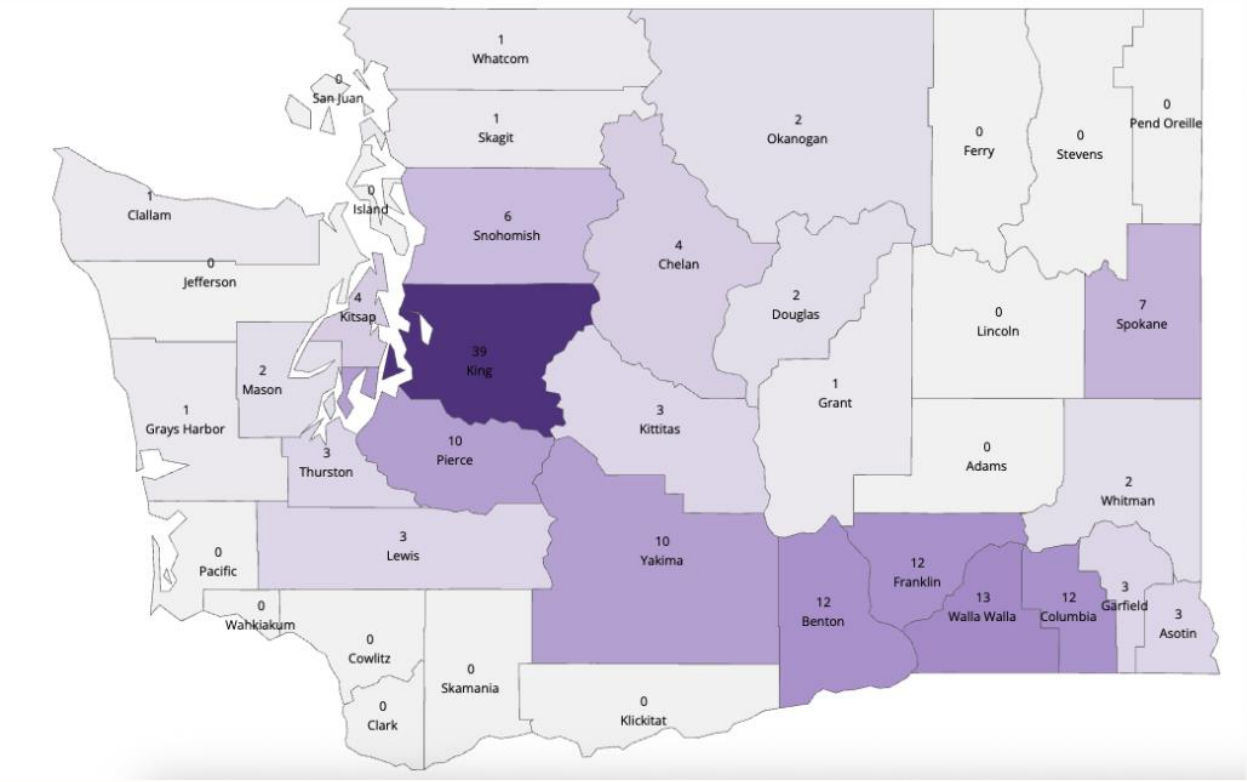
Map 6: Number of Housing Service Providers by County



Map 7: Number of Mental Health and Therapeutic Support Providers by County



Map 8: Number of Substance Use Disorder and Recovery Treatment Service Providers by County



Map 9: Number of Mentorship Service Providers by County

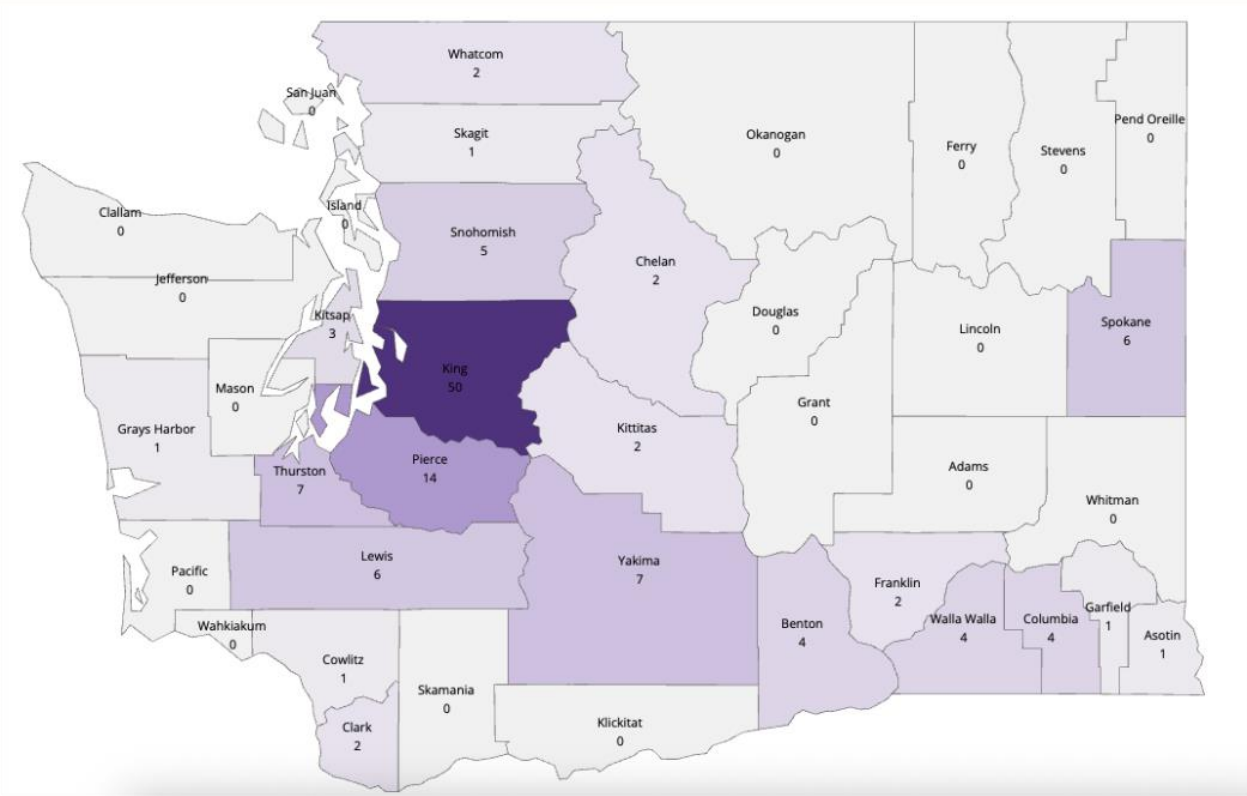


Table 6: Number of Service Providers in Critical Service Categories by County

County	Education and Vocational Programs	Housing	Mental Health and Therapeutic Support	Substance Use Disorder and Recovery Treatment	Mentorship
Adams	3	2	0	0	0
Asotin	8	4	19	3	1
Benton	12	6	67	12	4
Chelan	10	8	6	4	2
Clallam	1	2	2	1	0
Clark	8	4	7	0	2
Columbia	10	6	40	12	4
Cowlitz	5	5	6	0	1
Douglas	5	4	2	2	0
Ferry	1	1	0	0	0
Franklin	10	8	63	12	2
Garfield	9	4	19	3	1
Grant	15	4	4	1	0
Grays Harbor	2	3	3	1	1
Island	3	1	3	0	0
Jefferson	1	3	1	0	0
King	97	56	107	39	50
Kitsap	6	5	10	4	3
Kittitas	3	2	26	3	2
Klickitat	3	1	1	0	0
Lewis	12	5	6	3	6
Lincoln	1	1	0	0	0
Mason	5	6	4	2	0
Okanogan	7	2	3	2	0
Pacific	4	2	0	0	0
Pend Oreille	1	2	0	0	0
Pierce	32	13	52	10	14
San Juan	2	4	2	0	0
Skagit	6	4	8	1	1
Skamania	2	1	4	0	0
Snohomish	11	8	19	6	5
Spokane	15	10	17	7	6
Statewide	21	9	25	10	3
Stevens	1	1	1	0	0
Thurston	13	7	16	3	7
Wahkiakum	3	3	1	0	0
Walla Walla	12	9	42	13	4
Whatcom	5	5	6	1	2
Whitman	2	2	17	2	0
Yakima	31	16	28	10	7
TOTAL:	**398**	**239**	**637**	**167**	**128**

Investment Recommendations

To provide a recommendation on what the state should invest or prepare to invest given the possibility of RTA's impact on service provision landscape in Washington State, the key question becomes - what does capacity building look like for this landscape? Given the breadth of the service providers identified in the inventory here in Washington, the EPIC team recommends the Workgroup consider a tiered system for statewide investments:

- Juvenile Court Systems, EBPs, and court partnerships with non-EBP community-based programs:
    - Depending on county, increase budget allocation to meet increased caseload numbers, even doubling current budget allocations, depending on operational and programmatic needs.
    - The state currently appropriates approximately $38 million to local county juvenile courts each two-year budget cycle.[6]
    - According to the estimates in this report, while 20 counties will see an increase in filings of less than 50, 19 will see an increase in filings between 50-450.
    - Since the juvenile court block grant funding must be prioritized for EBPs, EBPs have varying availability across the state, and eligibility is restrictive particularly based on availability, these programs warrant further investigation to expand and/or for the state to provide additional funds for courts to fund non-EBP community-based services for youth and Emerging Adults. The latter approach to fund non-EBP community-based services more readily serves to achieve a saturation, availability, and access to diversion programming statewide.
- For service providers already primed to provide services through informal and formal supports to emerging adults, release Washington State Government administered grants to increase organizational capacity.
    - The annual expenses for service providers in this report vary greatly, however the median annual expense amount is approximately $2.6 million, and the middle 50% sits between approximately $700,000 and $14 million.
    - Capacity building grants should be unrestricted (to reflect both the operational and programmatic needs of service providers) and multi-year (to allow for sustainability).

[6] https://dcyf.wa.gov/sites/default/files/pdf/reports/JuvenileCourtBlockGrant-2024.pdf

- For service providers that only serve youth, but may consider expanding services to encompass emerging adults given extra training or non-fiscal resources, provide Technical Assistance for them to assess whether including 18-, 19-, and 20-year-olds within their services is appropriate. Technical assistance may also be provided to service providers that serve 18-, 19-, and 20-year-olds, but may need training on engaging emerging adults involved with the juvenile justice system.
    - Funding for technical assistance can be calculated to include the cost to create any trainings and education efforts, for staff attendance and time, and lastly organizational evaluation to determine programmatic steps forward to encompass serving Emerging Adults.

Additional Considerations for Implementation

The staggered implementation timeline for Raise the Age provides a degree of breathing room for service providers; however, it will be critical to ensure that resources are available well in advance of each expansion milestone. Releasing funds six months to a year ahead of new requirements would allow providers to recruit, hire, and adequately train staff to meet demand. Without this early investment, many organizations risk falling behind in building the workforce capacity necessary to support emerging adults.

At the same time, the state must continue to invest in professions that are already experiencing shortages, such as mental health providers, case managers, and social service workers. These fields face persistent turnover and low entry rates, which pose serious challenges for meeting the needs of young people the juvenile justice system serves. Sustained and targeted investment will help ensure a sufficient pipeline of qualified professionals capable of supporting youth and emerging adults.

Capacity-building efforts should also acknowledge that providers vary widely in their readiness to serve emerging adults. Some organizations may require only modest support to expand their services, while others will need more significant investment in infrastructure, staff training, and program adaptation. For this reason, guidance and training should be offered to all community-based providers engaging with emerging adults and navigating new laws, regardless of whether they receive direct funding. This will help promote consistency in service quality across the system.

Attention should be given to the categories of services most critical for emerging adults, ensuring that expansion strengthens rather than dilutes resources for those under 18. A particular challenge lies in the application of evidence-based practices (EBPs) that have not yet been tested or validated for 18-, 19-, and 20-year-olds. Policymakers and practitioners will need to balance innovation with fidelity, while also monitoring outcomes closely to ensure quality and effectiveness.

Finally, equity must remain at the forefront of implementation. Any expansion of the juvenile justice system has the potential to either reduce or exacerbate existing racial and ethnic disparities. Recommendations should be evaluated for their equity implications, and implementation should include mechanisms for continuous monitoring, accountability, and course correction. By centering equity, the state can help ensure that reforms benefit all youth and emerging adults, particularly those who have been disproportionately impacted by the justice system historically.

Areas for Future Research

While this report provides an overview of existing service capacity and potential challenges associated with expanding juvenile court jurisdiction to include emerging adults, several areas require further exploration to guide effective implementation and policy decisions.

Some questions arise about whether an alternative justice system specifically designed for individuals 18-25 years old may be more effective than expanding the juvenile justice system. Or, whether a hybrid system where individuals 18, 19, and 20 years old are served in the juvenile justice system with 21-25-year-olds are served in a separate system should be implemented at the same time. Research into models that differentiate legal responses and services based on age-specific needs could provide insights into whether a distinct system would yield better rehabilitation outcomes and reduce recidivism rates.

Research is also needed to examine which services currently delivered in the adult system could be adapted for use in the juvenile system, and whether these services are appropriate for emerging adults. For example, mental health and substance use treatment programs, vocational training, and reentry supports may already exist in adult settings but require tailoring to meet developmental needs and align with juvenile system practices. Comparative analysis of outcomes between adult and juvenile delivery of similar services could provide valuable

insights into what should be transferred, modified, or discontinued. This research would help ensure that emerging adults benefit from a continuity of supports without simply importing adult-focused interventions that may not fit the rehabilitative goals of the juvenile system.

Additionally, future research should evaluate which service providers are best positioned to deliver high-quality, developmentally appropriate interventions for emerging adults. While this report highlights key service categories and gaps, a deeper assessment of evidence-based approaches and community-based solutions could help tailor investments to ensure services are both effective and sustainable. Finally, an ongoing evaluation framework should be established to track how service provider capacity, funding allocations, and youth outcomes evolve as RTA is implemented. This should include longitudinal studies on system-wide impacts, ensuring that policy adjustments can be made in response to emerging challenges and that justice-involved youth and emerging adults receive the most effective support possible.

CONCLUSION

Washington's effort to expand juvenile court jurisdiction to include 18-, 19-, and 20-year-olds reflects a major shift in how the state responds to justice-involved young people. The findings of this report highlight both the promise and the complexity of Raise the Age (RTA). On the one hand, neuroscience and stakeholder perspectives affirm the value of developmentally appropriate, rehabilitative responses for emerging adults. On the other, Washington's service landscape reveals significant gaps in capacity, uneven geographic distribution, and evidence-based programs not yet validated for this population.

Successful implementation will require sustained state investment, early release of resources to service providers, and deliberate attention to workforce shortages in mental health, case management, and social services. Equally important is the need to adapt existing services to meet the unique needs of emerging adults while safeguarding resources for those under 18. By monitoring outcomes and centering racial equity, Washington has the opportunity to build a system that not only accommodates older youth but also strengthens the overall juvenile justice framework.

In short, RTA is both a challenge and an opportunity: a challenge to expand capacity equitably and responsibly, and an opportunity to improve long-term outcomes for young people and communities across the state.

APPENDIX

APPENDIX A: PROJECT TEAM MEMBERS LIST

Scott W. Allard, Professor, Evans School of Public Policy & Governance
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Calista Jahn, Innovation & Engagement Manager, EPIC
Ekaterina (Katya) Jardim, Senior Research Scientist, EPIC

APPENDIX B: SERVICE CATEGORIES LITERATURE REVIEW

Introduction

Juvenile justice interventions require a comprehensive and multidimensional approach that addresses the diverse needs of justice-involved youth. Family-based and therapeutic programs, mental health services, community-based interventions, and legal support play a critical role in rehabilitation and recidivism reduction. Additionally, programs focusing on education, vocational training, mentoring, housing, health and wellness, and direct resource assistance help youth reintegrate successfully into their communities. This paper explores various intervention models, emphasizing the importance of evidence-based, trauma-informed, and culturally competent practices that foster personal development, civic engagement, and long-term well-being.

Family-Based and Therapeutic Interventions

Family-based and therapeutic interventions are fundamental in addressing juvenile delinquency. Prominent programs include Multisystemic Therapy (MST), Functional Family Therapy (FFT), Multidimensional Family Therapy (MDFT), Multidimensional Treatment Foster Care (MTFC), and Brief Strategic Family Therapy (BSFT) (May, et al., 2014).[1] These interventions emphasize the importance of family involvement and comprehensive treatment strategies. The involvement of family is crucial for the success of juvenile justice interventions. Studies by Henggeler and Sheidow illustrate the extensive validation of MST, FFT, MTFC, and BSFT, demonstrating their widespread implementation across over 800 community settings (2012). Wraparound services further provide structured support tailored to the needs of youth and their families and demonstrate the importance of early and consistent family involvement in reducing recidivism and supporting the reintegration of youth into the community (Carney and Buttell, 2003; Early et al., 2013).

Mental Health and Psychological Services

Given the high prevalence of mental health disorders among justice-involved youth, mental health treatment and psychological evaluations are crucial. Programs aligning with the Risk-Need-Responsivity model, such as MST and Multidimensional Family Therapy, effectively address these mental health needs (White, 2017). Trauma-informed interventions like Attachment, Self-Regulation, and Competency Therapy (ARC), Sanctuary Therapy, SPARCS Therapy, TARGET Therapy, and Trauma Systems Therapy (TST) are implemented in juvenile justice facilities to support the emotional well-being of youth (Ford & Blaustein, 2013).[2]

Community-Based Programs

Community-based programs are shown to effectively reduce juvenile recidivism. Programs like the Minnesota Comprehensive Offender Reentry Plan (MCORP) highlight the impact of collaborative case management and community support (Duwe, 2012).[3] Studies reveal that participation in community-based reentry services significantly lowers the likelihood of new convictions. Additionally, restorative justice programs offer alternatives to

punitive systems, emphasizing community and victim involvement and promoting positive behavior change (Bergseth and Bouffard, 2013).

Civic Engagement/Youth Advocacy

Research shows that youth civic engagement leads to positive individual and community benefits, but access to such opportunities is not equal for all (Smith, 2013). Factors like race, class, and system-involvement, particularly justice-involvement, play a significant role in this disparity. Systemic barriers, such as removal from communities and zero tolerance school discipline policies, especially impact youth of color, leading to long-term negative outcomes like decreased civic participation in adulthood (Smith, 2013). It also advocates for a new civic engagement reentry model that focuses on changing community perceptions of formerly incarcerated individuals and enhancing their self-image and skills for successful reintegration (Bergseth and Bouffard, 2013).

Recreation

Programs like the Teaching Games for Understanding (TGfU) and Sports, Play, and Recreation for Kids (SPARK) provide frameworks for incorporating sport, recreation, and leisure into juvenile rehabilitation, linking these activities to treatment goals (Strean and Bengoechea, 2009; Brusseau, et al., 2018). TGfU progresses through stages like game form, appreciation, tactical awareness, decision-making, skill execution, and performance, aligning with rehabilitation processes (Brusseau, 2018). SPARK, implemented in juvenile justice facilities, has demonstrated potential in reducing sedentary behavior and increasing physical activity among incarcerated youth (Strean and Bengoechea, 2009). Both studies emphasize the necessity of structured, inclusive, and well-implemented approaches to support youth development and engagement, advocating for better execution and tailored support to maximize positive outcomes.

Health and Wellness

Constitutional mandates ensure access to medical testing and treatment, including sexual and reproductive health (SRH) services, in correctional settings, but do not extend to community-supervised youth, who make up the majority of justice-involved individuals. A study examined ways to increase SRH service access for court-involved, non-incarcerated (CINI) youth, revealing substantial unmet SRH needs due to a lack of services, policies, and procedures (Tolou-Shams, et al., 2022). Barriers include limited resources, perceived irrelevance, and confidentiality concerns. Effective strategies suggested include co-locating services, systematic referrals, and staff education. Overcoming these barriers through cross-system approaches, such as integrating SRH with mental health and substance use services, is crucial (Tolou-Shams, et al., 2022). Additionally, youth in juvenile correctional systems face higher health issues compared to their peers, necessitating continuity of care between community and correctional facilities (Committee on Adolescence, et al., 2011; Clark and Gehshan, 2007). These findings underscore the need for inclusive, well-implemented strategies to support youth development and successful reentry, advocating for a culturally and trauma-responsive healthcare system.

Housing Services

Justice-involved youth face significant challenges, particularly in securing stable housing, which is crucial for their successful transition to adulthood. Studies highlight the importance of supportive housing and services that address both instrumental and relational needs. Effective interventions, such as the Bridging the Gap (BTG) program, integrate housing services with independent living coaches to provide material, relational, and moral support (Brisson, et al., 2022). These supports include financial aid, housing resources, and practical advice, helping youth develop necessary life skills (Brisson, et al., 2022). Research emphasizes the need for community-based participatory approaches, involving stakeholders and leveraging existing resources to improve system coordination (Walker, et al., 2018). Additionally, findings suggest locating housing facilities in resourced areas to better support justice-involved youth and prevent homelessness (Walker, et al., 2018). Comprehensive, collaborative strategies are essential to address the diverse needs of these youth and facilitate their successful reintegration into society.

Gender-Specific and LGBTQIA+ Services

The design and operation of youth programs must consider gender in a way that explores the social construction of gender, inviting young women and men to challenge gender norms, examine gender privilege, and create a balance of power between girls and boys (Goodkind, 2005). This approach is essential for addressing the differential social locations of girls and boys without reinforcing socially constructed gender differences. Additionally, LGBTQ+ youth, particularly those who are transgender, face unique challenges within the juvenile justice system due to systemic discrimination, family rejection, and homelessness. Structural barriers such as inadequate access to gender-affirming care, misgendered housing assignments, and a lack of staff training on gender identity issues exacerbate these challenges (Fader and Shaud, 2021; Watson et al., 2024). These issues contribute to higher rates of detention and adverse outcomes compared to their cisgender peers, highlighting the need for juvenile justice systems to adopt best practice guidelines, including trauma-informed and culturally competent care, and to expand legislative protections. Tailored interventions and diversion programs that address the specific needs of LGBTQ+ youth are essential (Mountz, 2011).

Family Support

Research on family stability within the juvenile justice system highlights the importance of maintaining parent-child relationships during incarceration. Positive interactions can enhance child resiliency and aid in rehabilitation, potentially reducing future criminal behavior. The Baby Elmo Program exemplifies effective support, using videos and child-friendly environments to improve relationships and reduce recidivism (King, et al., 2015). A literature review of parenting interventions for young male offenders found improvements in knowledge and attitudes, though behavior change remains under-evaluated (Buston, et al., 2012). Experts acknowledge short-term benefits but emphasize the need for addressing young people's unique needs (Buston, et al., 2012).

Recommendations include incorporating elements from community-based programs and offering alternative models of positive fatherhood (Buston, et al., 2012). Such services are vital for fostering family stability and reducing reoffending among young offenders.

Legal Support

Best practices in legal services for justice-involved youth emphasize early intervention, comprehensive support, and culturally relevant services. Despite the landmark In re Gault decision in 1967, which granted juveniles the right to counsel, many states struggle to provide effective defense representation (Feld and Schaefer, 2010). Notable programs, such as First Defense Legal Aid (FDLA) in Chicago and the Public Defender Service (PDS) in D.C., highlight the importance of early legal support and addressing root causes of delinquency (Jones, 2004). These findings underscore the need for policies prohibiting waivers of counsel and monitoring judicial compliance to ensure juveniles receive appropriate legal representation (Feld and Schaefer, 2010). Effective legal services must integrate valid assessments, youth development knowledge, and access to community resources to improve outcomes for justice-involved youth.

Arts and Culture Services

Art and cultural services in juvenile justice, particularly strength-based approaches, focus on leveraging the strengths and competencies of incarcerated youth for personal growth and change (Ezell and Levy, 2003). One qualitative case study demonstrated that visual arts education in juvenile correctional facilities enables youth to engage in the "5 C's"—connection, community, contribution, concentration, and completion—fostering behavioral and cognitive improvements, and a sense of responsibility (Oesterreich and McNie Flores, 2009). Similarly, a study on an ensemble-based music education program for incarcerated adolescents highlighted high rates of participation and positive outcomes, including improved self-esteem, engagement, mood, and reductions in antisocial and externalizing behaviors (Wolf and Holochwost, 2016). These findings underscore the efficacy of art and cultural programs in promoting personal development and positive behavioral changes among justice-involved youth, emphasizing the importance of environmental context in their success.

Immigration

Immigrant youth in the juvenile justice system face significant challenges related to their immigration status. Services include legal support to navigate these complexities, as interactions with law enforcement can lead to severe immigration consequences (Kloet, 2016). Immigrant youth often lack access to government-funded legal counsel in immigration proceedings, making private legal representation crucial. Defense attorneys are encouraged to advise noncitizens on immigration consequences, as even basic knowledge of immigration law can significantly enhance their effectiveness (Kloet, 2016).

Residential and Institutional Care

Residential and institutional care services encompass various interventions provided within juvenile correctional facilities. Quality program management, healthcare services, facility security, and intervention management are linked to lower recidivism rates (Hancock, 2017). Residential Treatment Centers (RTCs) serve as an alternative form of juvenile correctional facility, providing intensive, multidisciplinary treatment for youth with severe behavioral and emotional challenges, including various therapies and psychiatric care. Missouri's model, which focuses on rehabilitation through treatment, education, and family involvement, has demonstrated notably low recidivism rates, emphasizing the potential of structured treatment environments to support successful reintegration of justice-involved youth (Mallett and Boitel, 2016).

Substance Use Disorder and Recovery Treatment

Substance abuse treatments are crucial to address the prevalent issue among justice-involved youth. Common services include drug and alcohol education and counseling (Young et al., 2007). A review found that interventions like Multisystemic Therapy, Multidimensional Treatment Foster Care, Teaching Family homes, and Life Skills Training can reduce substance use (Tripodi and Bender, 2011). Both individual-based and family-based treatments showed small to moderate effectiveness. These services are available within correctional facilities and upon reentry into communities. These interventions engage youth in various therapeutic settings, some involving family participation and some offering a structured home-like environment.

Case Management and Support Services

Case management and support services are essential for addressing the holistic needs of justice-involved youth. These services include employment support, housing assistance, and SMART planning. Programs like MCORP demonstrate the effectiveness of comprehensive case management in reducing recidivism. By fostering collaboration between institutional caseworkers and community supervision agents, these programs support successful reintegration into the community (Duwe, 2012). The focus on dynamic case planning and evidence-based strategies, such as motivational interviewing and SMART planning, bridges the gap between confinement and community reentry (Abrams et al., 2011; Duwe, 2012).

Educational and Vocational Programs

Educational services in correctional facilities are essential for supporting the academic development of justice-involved youth. Efforts to improve educational services should focus on increasing instructional time, providing advanced courses, and ensuring that youth receive the necessary support to succeed academically and professionally (Christian, 2022; Greenwood, 2008). Programs like the Community Restitution Apprenticeship-Focused Training (CRAFT) have demonstrated that enhancing employability through vocational training can significantly increase youth employment and GED attendance rates. This supports the view that access to well-paying jobs plays a crucial role

in reducing long-term antisocial behavior. Educational and vocational support has been shown to reduce recidivism rates.

Faith-Based Programs

Faith-based organizations administer various programs aimed at reducing recidivism and supporting youth involved with the juvenile justice system or at risk of becoming involved. These programs, rooted in religious organizations, involve exposure to religion for specific purposes, such as Christian-based prison programs, mentoring for at-risk youth, and faith-based drug rehabilitation (Dodson, 2011). Research indicates an inverse relationship between religiosity and delinquency, suggesting potential benefits of faith-based programs (Dodson, 2011). An environmental scan highlights the diversity and potential of these programs in improving criminal justice outcomes ("Development of a Guide to Resources on Faith-Based Organizations in Criminal Justice"). Continued research and collaboration with the faith community are essential for developing long-term solutions.

Mentoring

Mentoring programs provide youth with positive role models and support networks, fostering a sense of belonging and promoting positive behavior change. Research suggests mentoring can reduce delinquency (Hawkins et al., 2020; Blechman et al., 2000). A study by the Center for Criminal Justice Research at the University of Cincinnati, funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP), highlighted the importance of high-quality mentoring programs that adhere to best practices. This research, conducted across urban and rural counties in Ohio, showed that these programs improve self-esteem, academic achievement, and peer relationships, while reducing substance misuse, aggression, depressive symptoms, and delinquent acts. This emphasized that effective mentoring services can support personal development, social skills, and community integration (Duriez et al., 2017).

Tribal Services

Collaborative, culturally competent, and community-based interventions have shown promise in addressing the needs of Native youth involved in or at risk of becoming involved with the juvenile justice system. The Leech Lake-Cass County Wellness Court and the Green Reentry program are notable examples. The Wellness Court, a partnership between the Leech Lake Tribal Court and the Cass County District Court, enhances public safety by providing treatment and accountability, while the Green Reentry program strengthens partnerships among tribal agencies and improves service coordination (Wahwassuck, 2009; Lindquist et al., 2014). Both initiatives highlight the importance of holistic approaches, emphasizing cultural knowledge, community engagement, and strong interpersonal relationships to improve outcomes for Native youth.

Direct Resource Assistance

Food insecurity and poverty have a profound impact on the behavior of justice-involved youth. Providing direct resource assistance is crucial in supporting these vulnerable youth. This includes offering essential services like food, hygiene supplies, and clothing, as well as connecting them to broader resources such as food banks and social services (Nolan, 2024; Friend, 2015). Programs like the Runaway and Homeless Youth – Prevention Demonstration Program (RHY-PDP) launched by the Family & Youth Services Bureau at the Department of Health and Human Services in 2023 provide grants to support community-based initiatives aimed at preventing youth homelessness, with flexible cash assistance as a key component (Administration for Families and Children, 2024). This innovative approach is also being tested in pilot programs across the country, highlighting the positive impact that direct cash assistance can have on vulnerable youth.

Personal Development/Independent Living/Self-Management

Positive Youth Development (PYD) has shown significant positive effects on justice-involved youth by focusing on strengths and protective factors. Research shows that PYD helps youth build resilience and develop essential life skills, such as problem-solving, communication, and decision-making (Butts et al., 2010). Programs based on PYD principles foster positive relationships and provide opportunities for youth to engage in pro-social activities, which can reduce recidivism and promote successful transitions to adulthood. Youth involved in PYD programs often demonstrate improved behavior, increased self-esteem, and a greater sense of responsibility and community belonging. By equipping youth with a wide range of life skills, PYD programs help them navigate challenges, embrace their responsibilities, and contribute positively to their families and communities, ultimately supporting their overall development and rehabilitation.

Youth Justice/Peer-Led Justice

Youth courts, also known as teen or peer courts, are alternative systems where trained youth volunteers hold their peers accountable. The formal use of teen courts began over four decades ago, and they have become a popular diversion program with over 1,000 programs nationwide (Smith and Blackburn, 2011). They handle cases where the youth has admitted the offense, focusing on first-time, non-serious misdemeanor or status offenses. Research suggests that youth courts offer quick accountability without creating a juvenile record, leveraging positive peer pressure and community involvement to encourage rehabilitation (Bouchard and Wong, 2017; Smith and Blackburn, 2011). They provide benefits such as greater accountability, swift processing, lower costs, and enhanced community cohesion, while also reducing the burden on traditional juvenile courts.

Conclusion

Effective juvenile justice interventions must be holistic, collaborative, and adaptable to the unique needs of justice-involved youth. By integrating family support, therapeutic services, education, legal advocacy, and community-based programs, these approaches promote rehabilitation and reduce recidivism. Addressing systemic barriers—such as access to healthcare, stable housing, and civic engagement opportunities—is essential for

ensuring successful reintegration and long-term success. Investing in these evidence-based strategies not only benefits the youth but also strengthens families and communities, fostering a more just and supportive society.

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APPENDIX C: WORKGROUP'S COMMUNITY-BASED SERVICES SUBCOMMITTEE INTERVIEW GUIDE

[Informants First and Last Name]
[Title, Organization]
[Date]
[Interview Location]
Interview Length: [in minutes]
Interviewed By: [Interviewee(s) name(s)]

Key Initial Questions (to be supplemented as interview occurs):

1. How did you and your organization come to be involved with the RTA Workgroup?
    a. What perspective do you bring, what is the type of input you feel you are able to provide, etc.
2. How would you describe your organization's populations served (demographically, by geography, etc.), and the types of services provided?
3. What services do you currently provide to 12–17-year-olds at-risk, currently involved with, or involved with the juvenile justice system in the past?
    a. Are there additional services you would characterize 12–17-year-olds needing that your organization does not provide?
4. Do you also provide any services to 18–21-year-olds or "emerging adults" at-risk, currently involved with, or involved with the justice system in the past?

a. Are there additional services you would characterize 18–21-year-olds needing that your organization does not provide?

5. Are there any organizations that you partner with to provide services? Are there organizations that you regularly refer 12–17-year-olds/18-21-year-olds to?
6. How does your organization decide which programs, activities, or services you provide?

a. How does or did you organization decide which populations you serve?

7. Do you believe that expanding the age of juvenile court jurisdiction to encompass 18–21-year-olds would impact your organization's work?
    a. How would it impact your service capacity or resources?
    b. How would it impact your funding streams?
    c. How would it impact your staff's day to day work?
8. How would you answer a question regarding the cost to perform one hour of service within your organization?
9. Who else or what other organizations would you recommend we talk to about questions like these?

APPENDIX D: SERVICE PROVIDER INTERVIEW GUIDE

[Informants First and Last Name]
[Title, Organization]
[Date]
[Interview Location]
Interview Length: [in minutes]
Interviewed By: [Interviewee(s) name(s)]

Key Initial Questions (to be supplemented as interview occurs):

1. Can you introduce yourself and describe your current role?
    a. What does a typical day look like for you in your position?
2. How do you generally feel about the Raise the Age policy, which would expand juvenile court jurisdiction to encompass *most* persons 18, 19, and 20 years old?
3. How do you see the Raise the Age policy impacting your day-to-day work?
4. Do you feel equipped to serve 18, 19, and 20-year-olds compared to those under 18?
5. In the event of Raise the Age, do you feel equipped for your organization (if applicable) to handle an increased caseload? What would happen if the need were to increase to 150% or 200% of your current caseload?
6. How many people do you serve a week, or in a year? Is there a way to describe your cost per service hour, or cost per client?
7. What services do you see as most critical to provide for the 18-20 year old age group compared to those under 18?
8. We're checking with everyone just to be sure, are you being compensated for this time by your employer? IF NO: we'd love to provide you support for your time in the form of a gift card – UW uses something called tango gift cards, much like a visa gift card. It'll be sent to your email within a couple weeks.

APPENDIX E: OTHER STATES INTERVIEW GUIDE

[Informants First and Last Name]
[Title, Organization]
[Date]
[Interview Location]
Interview Length: [in minutes]
Interviewed By: [Interviewee(s) name(s)]

Vermont

1. How did you get involved with Raise the Age in Vermont?
2. Can you describe the existing services and resources available to Emerging Adults in Vermont?
3. From your experience, which resources that are already available to adults need to be leveraged for an expanded juvenile court jurisdiction that includes Emerging Adults?
4. What has been the potential impact of expanding juvenile court jurisdiction on existing community- and court-based services, such as therapy and family counseling?
5. How have these services adapted to include Emerging Adults?
6. Based on your experience, how has the expansion of services impacted 18 year olds in Vermont?
7. Are these youth experiencing different outcomes in the new system compared to the previous system?
8. Are there any lessons learned or best practices from your work that you would like to share with us as we explore similar initiatives in Washington state?
9. Who else or what other organizations would you recommend we talk to about these questions?

Massachusetts

1. How did you get involved with Raise the Age in Massachusetts?
2. Can you describe the types of existing services and resources available to young people involved with the juvenile justice system in Massachusetts?
3. What process did you use to analyze the juvenile justice system's capacity to absorb the new cohort of youth?
4. In the Court Capacity report, you mention that the system has "programmatic infrastructure to effectively intervene with these older adolescents." Could you expand on what this infrastructure entails?
5. Which resources that are already available to young people need to be expanded or introduced for a juvenile court jurisdiction that includes 18-21 year olds?
6. We are investigating the existing community- and court-based services and resources available to young people. What has been your experience in assessing these services for court-based interventions? Any recommendations?

a. Have you performed any analysis regarding community-based services for young people? What has been your experience in this area? Any recommendations?
7. Have you faced any challenges in analyzing whether the juvenile justice system and its community- or court-based supports can handle an increased number of cases? If so, what were they?
8. Are there any lessons learned or best practices from your work that you would like to share with us as we explore similar initiatives in Washington state?
9. Who else or what other organizations would you recommend we talk to about these questions?