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Extended Foster Care Practice and Program Reform: Perspectives of Workers and Community Partners

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Abstract

Extended Foster Care (EFC) provides services and benefits on a voluntary basis to young adults leaving the foster care system without having attained legal permanency. In the US, more than 19,000 young adults transitioned out of foster care without achieving legal permanency in 2021. As states seek to improve supports to young adults eligible for EFC, it is important to identify institutional barriers and needed practice reforms. This study reports on analyses of qualitative focus group data gathered from workers (N = 24) and interviews with community practitioners (N = 14) as part of Washington state's collaborative systems assessment of EFC. Data from transcripts were analyzed using qualitative thematic analysis of coded content. Rapid qualitative analysis allowed for efficient analysis and sorting of data to gather findings prior to the legislative session. Key themes identified related to (1) service and benefit gaps and needs, (2) organizational practice reforms, and (3) a need for culturally responsive services and a representative workforce. Specifically, workforce staff and community partners emphasized the need for EFC-specific units, developmentally tailored training, working from a clearly articulated practice model relevant to youth and young adults, the importance of reducing caseloads, recruitment and retention of a representative workforce, and more evidence-based practice options for EFC.

Keywords: extended foster care; child welfare practice reform; transition-age youth; child welfare workforce

1. Introduction

Extended Foster Care (EFC) is a federally supported set of voluntary benefits and services that are offered to young adults when they exit the foster care system if they have not attained legal permanency by that point. EFC benefits and services are provided to them because, while they have reached the age of adulthood, they may need that system of support to provide stability as they transition developmentally to adulthood. Federal legislation regarding EFC was first passed in 2008 as the "Fostering Connections to Success and Increasing Adoptions Act." This act amended Title IV-E of the Social Security Act to offer states federal foster care funding to support extending services and benefits from 18 to 21. To be eligible for Federal Title IV-E reimbursement, states must ensure that EFC participants meet at least one out of the five eligibility criteria related to education, employment, vocational preparation, or having a medical exception. The majority of

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states have some form of EFC, providing benefits and services to participants up to age 21 (Gaughen and Langford 2019). States and jurisdictions also have Independent Living Programs (ILPs) offered to youth and young adults in foster care that provide a range of services (e.g., relating to education, employment readiness, life skills, etc.) to help prepare for the transition to adulthood (Tuyishime et al. 2025). ILPs serve a broader age range than EFC, serving teenagers and young adults potentially through age 25. The present study was part of one state's systems assessment of its EFC program to evaluate gaps in services and benefits. Findings from this study may be of interest to those in other jurisdictions as they consider potential program and practice reforms in their state child welfare agency.

In the United States, an estimated 19,000 individuals transitioned out of foster care as adults having never attained legal permanency (2021 data) (Annie E. Casey Foundation 2023). Washington State, the State in which the present systems assessment was conducted, has had an EFC program since 2012, offering services and benefits to all eligible young adults exiting care. The state has seen numerous policy revisions since the EFC program first started, as the Washington State Legislature has been responsive to participant needs and has broadened eligibility criteria and revised the process of enrolling young adults into the program (Miller et al. 2020).

To join EFC in Washington state, individuals must be dependent on their 18th birthday and agree to enroll in the program. In Washington state, individuals who are eligible for EFC may participate at any point up to age 21, including being permitted to enroll, un-enroll, and re-enroll in the program. Participants in EFC may live independently (without a caregiver) in a "Supervised Independent Living" (SIL) setting approved by their caseworker (e.g., shared housing, apartment, college dormitory, etc.), they may have a foster care placement, or may be placed in a transitional living program. A range of services are available to EFC participants, such as case management by a state agency caseworker, independent living skill programming, legal representation, and other community-based resources. Benefits available to EFC participants include health care coverage and eligibility for a monthly stipend. In Washington state, as of 2025, all young adults who are dependent at age 18 are eligible for the monthly stipend regardless of whether they meet the Federal eligibility requirements for receipt of EFC benefits, as Washington state uses state funds to cover the cost of the stipend when EFC participants do not meet Federal eligibility criteria.

In Washington State, administrative data from June 2022 indicate that, at the time, there were 858 individuals enrolled in the EFC program. These young adults were ages 18 through 20, with each age group having similar numbers of participants (about one-third in each group). Most (78%) lived in SIL placements. Of the remainder, about 12% lived in a foster home, a small percentage (4%) lived with relatives (or "suitable others"), an estimated 3.5% lived in a group home (e.g., "Behavioral Rehabilitation Services" (BRS)), and about 1% lived in a "Responsible Living Skills Program" (RLSP). Behavioral Rehabilitation Services (BRS) includes a range of temporary but intensive supports for individuals with significant service needs to help them stabilize and which may be delivered in a group home living arrangement. The RLSP is a transitional living program option for dependent youth and young adults in EFC and structured to provide safe housing and an opportunity to build independent living skills (e.g., regarding education, nutrition, financial management, job readiness, etc.). Youth who lived in an RLSP setting may continue to participate in that program up to age 21 while they are in EFC. In 2022, approximately 25 individuals turned 21 years of age and exited EFC each month in Washington state.

2. The Present Study

This study reports on analyses of qualitative data gathered as part of a larger statewide systems assessment of EFC. The systems assessment sought to highlight the perceived gaps and needed policy and practice reforms based on data from the child

welfare workforce and community partners, as well as data from administrative service utilization records and a needs assessment involving individuals with lived expertise. The quantitative analysis of administrative data offered a snapshot of the service utilization patterns of young adults leaving foster care, highlighting differences between those who participated in EFC compared to those who did not enroll in EFC. The needs assessment portion of the larger systems assessment was an effort to center the perspectives, experiences, and concerns of young adults eligible for EFC through a survey developed and implemented by lived experts. The purpose of the qualitative data collection reported on in the present study was to hear about perceived EFC service needs and benefit gaps from the vantage point of the child welfare workforce and from community-based professionals with insight and experience supporting youth and young adults exiting foster care or the juvenile legal system. The focus groups with state agency workers also sought to explore any regional differences across the state, redundancies in services, and perceived reforms needed. The systems assessment study was conducted by a university-based research team, under contract with the State's child welfare service agency, in collaboration with state-level government agencies, with a local consulting group [anonymized for blind review], and with the guidance of an Advisory Group comprising individuals with child welfare experience who had participated in EFC or who had been eligible for EFC services and benefits. In this paper, the research team focuses on program- and practice-related findings which emerged from our qualitative study of data gathered from workers and community practitioners with the goal of informing our state child welfare agency regarding potential practice and organizational reforms.

3. Background

Effectiveness of EFC: The majority of states offer EFC services and benefits to young adults 18–21 exiting the foster care system through a range of state designs. Evidence points to the effectiveness of EFC in supporting participants in their transition to adulthood. Numerous studies have documented that young people who have experience with the foster care system are more likely to have adverse outcomes compared to those who have not been in foster care (Jones 2014; Courtney and Dworsky 2006). Longitudinal research based on the "California Youth Transitions to Adulthood" Study (CalYOUTH) reported that young adults who received EFC services and benefits had improved outcomes on multiple indicators, such as educational attainment, employment, finances, social supports, welfare usage, housing insecurity, economic insecurity, pregnancy and parenthood, and criminal legal involvement (Courtney et al. 2021). Findings from the prior literature highlight EFC as a positive mechanism for helping young adults transitioning from foster care through the phase of emerging adulthood (Annie E. Casey Foundation 2025; Rosenberg 2025; Courtney et al. 2018). EFC supports may also help reduce the many disadvantages which may come with out-of-home care and child welfare system involvement (Spindle-Jackson et al. 2024). Importantly, EFC is associated with ameliorating critical adult outcomes at a key point in young people's personal and career development (Lee et al. 2014; Spindle-Jackson et al. 2024; Courtney et al. 2021). EFC is therefore pivotal in preventing continued system involvement and may be regarded as a wise social welfare policy investment to support young adults transitioning out of foster care.

EFC Programs and Practice: Programs geared towards emerging adults emphasize the importance of high quality, client-centered case management. For example, a review of practice approaches used in a Minnesota Interdisciplinary program for individuals transitioning from foster care underscored the value of case management and that "young adults need to be given choices, allowed to make the choices, and then learn the consequences of those choices" (Wieland and Nelson 2014, p. 1127).

A challenge with delivering programming for young people in extended foster care is that there are only a small number of interventions that have been tested effective. A systematic review of programs for young adults transitioning from foster care, observed that there were no interventions which received the highest rating of "Well supported by research evidence." The majority of interventions are still designated as "unrated" simply because there is currently insufficient rigorous evaluation of their effectiveness (Greeson et al. 2020). One rare intervention rated as "supported by research evidence" is "MY LIFE" (Powers et al. 2012). MY LIFE is a program that focuses on educational attainment goals, work, stable housing, and tailors its intervention to specialized groups, such as participants who are BIPOC (Black, Indigenous, and People of Color) or who have disabilities.

The literature points to the benefits of case management models that seek to build and sustain networks of supportive and caring adults. One program that follows this approach is "Youth Villages LifeSet" (Greeson et al. 2020), which has been rated by the California Evidence Based Clearinghouse (CEBC) as an intervention with "Promising Research" evidence. The LifeSet model includes program specialists who have small caseloads, enabling them to have weekly meetings with participants and to focus on individualized goals, targeting domains of relational health, employment, safe and affordable housing, and educational goals (Gaughen and Langford 2019).

Emerging adulthood: Emerging adulthood, which is regularly described as encompassing the ages of 18–29 (Arnett 2000; Shek et al. 2019), is conceptualized as a critical developmental phase and also an important turning point, one which in many ways sets the stage for one's well-being in the future (Silvers and Peris 2023). Viewed as the developmental phase, it may be understood as a time in which identity is formed, a time for focusing on oneself, of exploring new possibilities in jobs and relationships, perhaps a time of instability in different domains, as well being characterized by a sense of being 'in-between' (Arnett 2000). However, for many individuals leaving foster care, emerging adulthood is not a time of self-discovery and new career and relationship possibilities but more a premature role transition as they may not have the social safety net which others have, and the long-term consequences are high should they falter.

When conceptualized as a turning point, emerging adulthood is regarded as a "'make or break time,' that for some individuals marks the beginning of socioemotional stability and autonomy, but for others the beginning of a more negative trajectory" (Silvers and Peris 2023, p. 3). As individuals experience emerging adulthood, inequalities from childhood are compounded, especially inequities related to education, finances, and social supports, either accumulating as advantages or as cumulative disadvantages with consequences which may extend throughout one's life (Kim 2020).

Emerging adulthood has also been acknowledged as a notable juncture in one's mental health trajectory (Greeson and Thompson 2014). It is estimated that by the adolescent developmental stage, approximately one fourth of serious mental health difficulties have appeared; by the age of 24 years, approximately three fourths of serious mental illnesses have developed (Akinola and Dunkley 2019). Mental health problems are associated with foster care experience (Akinola and Dunkley 2019) and yet, the rate of participation in mental health services and supports is low among youth and young adults who could benefit from it (Cole et al. 2023; Harwick et al. 2017). Evidence indicates that the rate of engagement in mental health services drops through adolescence and young adulthood, despite it occurring during the developmental stage when many mental health disorders become apparent and when the rate of substance abuse also grows (Zajac et al. 2015).

Current Context for Young Adults: The transition from adolescence to adulthood has become more protracted for young adults in the US, with more varied pathways, and less linear trajectories (Wood et al. 2018). Emerging adulthood roles, statuses, and experiences that used to be characteristic of adults in their early twenties are currently more

characteristic of young adults in their thirties (Sironi 2018). Where emerging adulthood was once characterized by important markers such as marriage, employment, parenthood, and moving out of one's parents' home, currently, emerging adulthood occurs in a new social context, with a prolonged period of self-discovery, longer educational journeys, often while continuing to live with one's parents, or cycling between independent living and moving back home, as one's finances allow (Sironi 2018; Wood et al. 2018). For those exiting foster care at 18–21 years of age without sufficient resources, supports, or preparation, the potential for economic and housing insecurity may be increased.

In the US, the transition to adulthood was significantly affected by the economic recession of 2008, with impacts on work opportunities, economic stability, and many young adults were unemployed or underemployed (Sironi 2018). This was further exacerbated by the COVID-19 pandemic, which left young adults experiencing difficulty finding employment, earning sufficient income, and securing housing (Sironi 2018). A COVID-era Pew Research Center report noted that "The coronavirus outbreak has pushed millions of Americans, especially young adults, to move in with family members. The share of 18- to 29-year-olds living with their parents has become a majority since U.S. coronavirus cases began spreading early this year, surpassing the previous peak during the Great Depression era" (Pew Research Center 2023). For young adults exiting foster care without having attained permanency and the family support it offers, the risk of housing insecurity is significant.

4. Methods

This paper reports on the qualitative research portion of the larger systems assessment. The current study involved original data collection via a series of focus groups and individual interviews (Morgan 2012; Kelly et al. 2010). The research team analyzed the data using rapid qualitative analysis (Keniston et al. 2023; Nevedal et al. 2021) to quickly and efficiently identify the participants' observations, insights and experiences to yield findings in advance of the then-upcoming legislative session. The research team gathered the qualitative data in 2023, conducting four focus groups with State child welfare agency staff (N = 24) and completing 14 interviews with community partners with expertise in EFC.

The research team was contracted by the state child welfare agency to conduct focus groups with staff who worked with young adults in EFC and access to the agency participants was facilitated the department supervisors who identified those staff who worked with young adults in EFC and introduced them to the research team. The focus groups included one group of Regional Leads for the state's EFC program, two groups of caseworkers working with young adults in EFC, and one group of individuals working in the state's "Juvenile Rehabilitation" (JR) and legal services system. Because we sought to better understand regional differences in EFC services, special effort was made to recruit for regional diversity and the focus group participants did represent all regions of the state. Many of the agency staff who participated in the focus groups worked exclusively or primarily with youth and young adults. The focus groups ranged in size from 3 to 11. To access participants in each region, the Regional Leads made the initial outreach to their staff and facilitated introductions to the research team.

Individual interviews were conducted to collect data from community partners with expertise working with youth and young adults. Community practitioners interviewed were a purposive sample, recruited by the EFC Program Lead and through the EFC Community Workgroup, a monthly ongoing community of practice coalition of community partners focused on the needs of young adults exiting foster care. Community partner participants were accessed through their regularly scheduled coalition meetings which research team members attended to introduce the study, respond to questions about the study, and invite participation. Community partners who participated in the study were professionals

with experience with youth-serving systems, services, and supports. We sought to interview practitioners representing different domains and service areas. Interview participants represented legal services, advocacy and youth voice organizations, homelessness prevention supports, policy advocacy, educational services and supports, peer support services, developmental disability services, and child welfare scholars and academics. Demographic information was not collected on the focus group or interview participants.

The sample size of 24 DCYF focus group participants and 14 community partner interviewees was determined in part by the partnering child welfare department who identified and invited the participation of caseworkers across the 6 regions of the state. All 6 regional leads were also invited to participate in a focus group. In addition, the study team requested to interview DCYF staff working in Juvenile Rehabilitation as we wanted to capture service gaps relevant to young adults exiting the juvenile legal system and eligible for EFC; we were able to conduct a focus group with the JR Regional Lead and 2 staff. This last focus group brought the total number of DCYF staff participants to 24. The sample size of 14 community partner participants was determined in consultation with partners in the department, experts in the field, and related to our deliberate effort to seek a range of perspectives and those professionals representing adjoining systems. The research team was able to maximize resources by focusing on key informants and those who were widely recommended as experts and this strategy yielded data from a broad range of professionals knowledgeable about EFC.

The study team recognized that focus groups and interviews are different methods and have implications for the type of data gathered (Morgan 2012; Kelly et al. 2010). The decision to conduct focus groups with the child welfare workforce was made in consultation with the state agency and stemmed in part from the large number of participating workers (N = 24). We also sought to explore child welfare workers' perspectives in groups, so they could respond to or build upon one another's comments, to better capture points of consensus or points of disagreement, and to help identify regional differences. Expediency also played a part in the decision to use focus groups, given the need to collect data efficiently in time to analyze the data prior to the legislative session. The study team considered using focus groups to collect data from community partners; however, each community-based professional was recruited because they represented a distinct service setting or domain of expertise (e.g., legal representation, disability services, or peer supports, etc.), and consequently we decided to conduct individual interviews with those study participants to provide the opportunity to seek greater depth, ask more detailed questions, and better understand unique viewpoints.

The research group discussed trade-offs between collecting data in person or via remote technology and the potential that data collected via a Zoom conference platform may not be of the same quality as data collected in person. For focus groups with child welfare workforce representatives, the decision was made to collect data via Zoom conferencing due primarily to the fact that participants lived all around the state. We sought to understand regional differences in the implementation of EFC, and remote focus groups offered the opportunity to bring together workers representing all 6 regions of the state. Bringing workers together for an in-person focus group was not feasible. For the individual interviews with community practitioners, the researchers offered participants the option of in-person or remote interviews and all participants preferred the remote option.

Measures: Focus groups and semi-structured interviews followed an interview guide, which included questions about perceptions of the important and beneficial aspects of extended foster care, how age and developmental stages affect service delivery, and whether social networks are involved in services. The interview guide included questions about perceived service gaps and barriers to service utilization for those in EFC. Participants were asked about regional differences across the state. The interviews and focus

groups invited participants to describe any additional services and benefits that they believe are needed to better support young adults in EFC.

Focus groups ranged from 60–90 min in length. Interviews with community partners lasted approximately 45–60 min. The video conferencing platform, Zoom was used to conduct all interviews and groups. All sessions were video and/or audio recorded and later transcribed using Otter or Zoom.

Human Subjects: The research team sought human subjects review through both the State and the University Institutional Review Boards; both deemed the study exempt. The recruitment protocol included an informed consent process in which participants were informed that their participation was voluntary and that the research team would keep confidential the information shared, with any identifiable data excluded. We provided state agency staff the opportunity to review the write-up of their focus group.

Data Analysis: The study team members read and reviewed the written transcripts to check for accuracy, editing as needed for clarity of voice (correcting Zoom/Otter auto-transcription errors and eliminating words that were repeated and filler words). The auto-generated transcripts were supplemented with detailed hand-written notes taken by both the focus group facilitator and study team note-taker. Qualitative thematic analysis was done by three study team members, through reading and re-reading notes and transcriptions and coding content. Rapid qualitative analysis (Keniston et al. 2023; Nevedal et al. 2021) enabled the research team to efficiently analyze the data to identify, code, and sort the participants' observations, insights and experiences. To analyze the interview data, the research team developed a spreadsheet template based on the questions and topics from the interview guide (Nevedal et al. 2021; Brooks et al. 2015). Two of the researchers reviewed the qualitative transcripts using the template and coded each participant comment to indicate alignment with a given topic or topics. The researchers also identified verbatim participant quotes that illustrated particular topics or themes (Keniston et al. 2023; Nevedal et al. 2021). Participant quotes are featured to illustrate each theme identified and to provide readers with examples to weigh the credibility of our analyses and interpretations. In interpreting the qualitative data, the research team triangulated over the different sources of data (including evidence from focus groups, interviews, and the literature review) to identify our findings. All transcripts were reviewed by at least two researchers. Quantitative estimates of inter-rater reliability were not calculated; however, the study team met regularly to discuss emerging themes and subthemes and to discuss our interpretation of the findings. In the case of conflicting coding or interpretation, differences were discussed and reconciled by the research team. To support credibility and authenticity in our analyses, the study team engaged in member checking, sharing the findings from the qualitative analysis with state agency workers, EFC Leads, and community of practice partners and providing an opportunity for participants to provide input. The research process also involved consultation with our advisory group of young adults who had experience with child welfare and EFC services and guidance from other lived experts in interpreting findings, making meaning, and discussing implications for practice and policy.

Positionality: This study was a community-based collaboration and the co-author group includes university researchers and students, state agency representatives, and lived experts. The co-authors largely represent minoritized social identities and all have experience working in social service or mental health systems supporting marginalized communities.

5. Findings

The research team found notable consistency across the qualitative data analyzed, with clear themes emerging from the different sources of data. Observations and insights offered by EFC Regional Leads were often reinforced by points made by EFC workers across the

various regions of the state, echoed by input from staff representing JR program staff. Data from interviews with community partners added further nuance and perspective.

This paper highlights the themes and central points that emerged from these focus groups and interviews, illustrating key messages using verbatim quotes from participants shown in italics. The main themes identified in this paper are:

(1) Service and benefit gaps and needs, including resources and the need for greater collaboration, and communication
(2) Organizational practice reforms (including the need for a vision for EFC, the importance of a developmental practice model and the value of EFC-specific units)
(3) Need for culturally responsive services, interventions, and a diverse workforce representative of clients served

5.1. Service and Benefit Gaps

Summary: This thematic area highlighted perceived gaps in services and benefits with regard to the EFC program and surfaced important regional differences. Data from focus groups and interviews pointed to the significant income insecurity of EFC participants and the need for increased and expanded EFC supports such as the monthly "SIL" stipend, as well as the need for supplementing Independent Living Skills programming to fill gaps and better meet the needs. Also a strongly voiced sub-theme in this area was a concern about the perceived lack of communication and coordination of the service system meant to support young adults in EFC. Practitioners in the state child welfare agency and those from affiliated practice domains emphasized the need for more information, clearer communication, and more outreach to increase engagement of individuals eligible for EFC, including those leaving the juvenile legal or behavioral rehabilitation systems.

Numerous participants focused first and foremost on gaps affecting the economic stability of individuals in EFC. Discussion of the service system also highlighted gaps in coordination and communication across systems and the need for more inter-agency collaboration. Workers emphasized that the financial "Supervised Independent Living" or "SIL" stipend was a central and critical benefit of participating in EFC. Both focus group and interview participants underscored that independent living programs and supports are a critical but underfunded component of EFC, especially in the post-pandemic economic context.

One interviewee explained: *I think one of the most important parts of extended foster care is that it's a financial support program for young adults who really have very little other financial support. They don't have the support, generally of family with resources and they're often isolated from community resources that that other people rely on, that I relied on, that most folks would if they if they lose their job, or if they hit a road bump.*

Clearly and repeatedly stated across interviews and focus groups was the need to increasing the Supervised Independent Living "SIL" stipend in order to try to even come close to the rapidly increasing cost of living in the state (Washington), especially in certain parts of the state. For example, several participants shared:

> Interviewee: *We need to make sure that they are getting regular increases in their monthly allotment that is commensurate with what the rest of us are facing in this economy.*
>
> EFC staff: *We do not have concrete goods. $800 does not cover rent or in any way meet the financial needs of these kids.*
>
> EFC staff: *We should at least give them the amount that it would cost to pay rent and then they could figure out, I guess everything else, but at least enough to pay rent.*
>
> EFC staff: *Our ILS program is pretty underfunded, and I'm doing most of those case management things on my own, and when our case loads keep getting higher, that becomes really difficult to do.*

Concerns were raised regarding regional disparities and service gaps in the way EFC is offered and experienced across the state. As one participant explained:

> *We don't have statewide legal representation for young people experiencing foster care in Washington State, but we have been working toward it. And that has been a kind of a regional thing. So, like in King County, any young person that wants an attorney can have one. That is not the case in other in other counties.*

Collaboration, information and communication across service systems: A point repeated across varied groups of agency staff was the importance of increasing coordination and collaboration both within the agency and across partner departments and units, in particular to improve supports for EFC participants with disabilities. Some described the current system as one characterized by a passing of responsibility. As EFC staff said:

> *These systems should be connected better to support these youth when they are transitioning out and need these systems… And those systems will end up having to get involved at some point. I mean, these kids can't go forward without them, so, having them at the table a lot earlier to do some of that really thoughtful planning…*
>
> *We really struggle as a system to partner and provide coordinated responses. It's an easy out to point fingers.*
>
> *But for those kids who are also developmentally behind it gets really, really sticky. I think one of my biggest frustrations I wish that we could work more collaboratively with DDA [Disability Services]. Sometimes I think sometimes that comes off very adversarial.*
>
> *I know myself—when we talk about the development needs of a young adult—half the time I struggle to navigate DSHS or get someone into Sound Mental Health. How could we expect,—my own kid couldn't navigate these systems—I think all of our systems are just not set up to meet the needs of those that are not typically developing.*

Staff working in EFC repeatedly recommended that the agency develop "MOUs" (memoranda of understanding) as a mechanism to improve partnership between units and increase coordination and collaboration. In their words:

> EFC staff: *We need to have more memorandums of understanding. If we want to be able to have our unit help with ID's:—DOL (Department of Licensing). If we are wanting to have our young adults to be able to receive SNAP (Supplemental Nutritional Assistance Program) benefits: an MOU with the CSO (Community Service Organization).*
>
> EFC staff: *We have very limited MOU's with any of those adult systems that we need to be partnering with. We have sick kids that don't understand the importance of signing a consent, and our hands become literally tied. [We need] some MOU's with adult mental health.*

Similarly, within the agency, staff pointed to the need for clearer communication, more information sharing, and increased consistency across regions in order to better support those young adults leaving the state's Juvenile Rehabilitation (JR) system who might be eligible for EFC:

> JR staff: *…more information, a better way to connect with the people that are working with these young people that are going to be going into EFC, to educate them on what the benefit of it is. Because we try our best based on a little pamphlet that we have, or we try to Google whatever we can Google, to get as much information just to try to really boost their curiosity around it, and really encourage them to take advantage of this extra support they can receive. So, I think that that would be number one, especially when we have identified a dually served youth that has a possibility of going into EFC.*
>
> *I think communication is key across the board with the department. We have to all be on the same page about the policy parameters.*

5.2. Organizational Practice Reforms

Summary: This thematic area underscored that EFC staff participating in the focus groups consistently communicated their perspective that the state child welfare agency needs a clear vision for EFC, as that was perceived as absent, unclear, or varying by region of the state. Workers also expressed the importance of having dedicated EFC units across all regions. Having EFC-specific units across the state would support a more specialized workforce, with expertise in the complex rules, policies, and program eligibility requirements and allow EFC caseworkers to center their attention on the needs of the young adults on their caseloads. Lastly, a subtheme that emerged highlighted the need for a developmental perspective and practitioners spoke to the importance of the agency articulating and following a developmental practice model designed with youth and young adults in mind.

Data from focus groups yielded uniform messages about how beneficial it was for young people to participate in EFC and participants shared ideas for improving the program and its services. One particularly consistent and forceful message was the importance of the agency having a clear vision for the EFC program. In the words of some EFC staff and regional leads:

> *We do not have clear EFC policy at all that outlines really anything but eligibility in the WAC (Washington Administrative Codes).*
>
> *I'm thinking we don't really have a mission statement with "What is our goal?" … No matter when we take a child in—"What is our goal?" And are we prepared to practice that? And is it universally valued?*
>
> *I think my biggest thing is just really having policies within our own agency that inform and guide work related to, specifically to EFC youth.*

Focus group and interview participants mentioned that most of the state's regions have a dedicated EFC unit—that is, a unit in which all workers have only youth and young adult clients eligible for the EFC program. We note that this is a strength of the program and something on which the state agency has made good progress. It was noted that some regions have staff with clients of all ages, birth to 21 and it was very clearly stated that dedicated EFC units are preferable. Such EFC-specific units allow caseworkers to specialize and develop expertise in the emerging adulthood phase, which is crucial due to the challenging nature of EFC cases and the complex and complicated array of services and benefits for which EFC participants may qualify. Additionally, the point was underscored that caseworkers with both infant and young adult clients will always prioritize infants. Illustrative points shared by EFC staff include:

> *I think the one regional difference is [our region] we do not have dedicated EFC units. I think there's a lot of disservice to our EFC kids in [this region] because we don't have the dedicated staff that can really learn the policy and everything that needs to be done.*
>
> *We don't even have an EFC unit. The cases are dispersed in the office to whomever.*
>
> *The EFC regional team [should]…include just the 18–21-year-olds, because we can specialize in what they need, and we know it's hard to balance a mixed case load… I've seen other CFWS workers in other parts of the State, with a 20-year-old and a 2-year-old. They have to prioritize the 2-year-old and their safety. They cannot do both. It's just not realistic.*

Some participants voiced similar points about the value of having specialized staff who can focus on adolescents, stressing the need to start preparing adolescents earlier for the transition to the EFC program, not waiting until they are adults. For example, points about focused practice with adolescents were shared by both community partners and EFC staff:

> Interviewee: *…really thinking about having adolescent units, people who, before they're in EFC, people who are dedicated to the health safety and well-being of adolescents, have an expertise and a clinical eye for the unique needs of that population.—Looking at how to engage them in a meaningful way, that is supporting them to be prepared to hit adulthood, even in extended foster care…*
>
> EFC staff: *We need…I will say it again—I'll say it 'til the cows come home—bring adolescent units back. We need people who are focused on working with teenagers, who understand that at 17 and 16—you shouldn't be waiting until their eighteenth or the 17 and a half staffing meeting to go: "So what is it that you want to do?"*

A noted benefit of having staff who are specifically focused on adolescents and who choose to work specifically with youth is that they are particularly dedicated to individuals in the teenage years, and skilled at working with them. As one EFC staff member observed:

> EFC staff: *I think one of the real positive things about EFC is the people that work with these youth are often really, really committed and passionate about the work.*

EFC staff shared concern that there is currently no practice model for EFC. Several staff observed that so much of child welfare policy and practice is designed with infants and young children in mind. Indeed, young children make up a majority of the cases, but that leaves out youth and young adults. As one worker noted:

> EFC staff: *You'll see it across policy. All things. We [EFC] are the afterthought that has to fit into one of those other buckets. But this group needs a really targeted set of services, and practice trainings for the workers themselves.*

These workers want to know: What are the practice goals for the EFC program? What is the vision for practice with young adults? Workers underscore the need for a practice model and evidence-based practices to explicitly include practice goals, methods, and interventions targeted to adolescents and young adults. And they wonder, what does permanency look like for young adults? As one worker said:

> *We need to be talking about best practices. We need to be talking about permanency and what it looks like.*

EFC staff emphasized the need for their practice to be more evidence-informed, for the workforce to be more knowledgeable in the developmental phase of emerging adulthood, and to be guided by evidence-based practice models. One staff member noted:

> *We are not research based, which we should be.*

EFC staff also pointed to the challenge of effectively engaging young adults in EFC when part of their role as workers is to be a gatekeeper and ensure compliance. As they shared:

> EFC staff: *There's plenty of work for us to do in 3 years. We cannot get through it all. Laying on this added layer of compliance, that can be used as punitive, is really damaging, I think, to their psyche, to their engagement, to our rapport building.*
>
> EFC staff: *We don't offer direct services to EFC. the department directly funds evidence-based services for parents. We don't do that for extended foster care—we're doing case management or social work to connect them to other adult systems.*

DCYF staff working in Juvenile Rehabilitation (JR) also discussed training needs to support their work with young adults exiting JR and potentially entering EFC, including the need for greater preparation for trauma-informed practice. As one focus group participant noted:

JR staff: *How do we better work with young people who have experienced trauma?—using not only a trauma-informed lens, but other engagement strategies… healing centered engagement, that kind of approach to working with this population.*

Caseload size was noted as a challenge for caseworkers in EFC and in Independent Living Services (ILS). EFC staff also described being aware of what they regard as a misconception that EFC cases are easier because their clients are older. In describing their cases, EFC workers noted:

But caseloads are crazy. We're still sitting at 30–40 cases. At one point during the pandemic, I had 70, and you know you can't do much. You really can't do much. I think there is a very large misconception… that EFC cases are somehow easier. And really it's not. It's nowhere near easier. It's just different.

We're still walking into unknown situations. We're still walking into drug use. I mean more dangerous stuff because we're actually working with adults who have other adults—who we have no idea about—in our spaces… And so I just think they try to discount the work that we do, because they're adults.

If we can get a cap to our caseload, or more ILS funds, that would go a really long way.

Differing perspectives on EFC: Among the regional differences mentioned were differences in how the courts handled EFC cases, with some courts in some regions aligning with and following the lead of caseworkers' recommendations while judges in other regions seem hesitant to ever dismiss a case. After commenting on this pattern, one EFC staff noted that can make it difficult to motivate young adults in EFC to follow through with goals and expectations:

I think one quick regional difference that in [this county] it's pretty much just like anyone can be in EFC and you don't really have to do anything, and the judge is never going to dismiss the case, and it creates…sort of the word on the street with the kids is like you literally don't have to do anything.

The need for the state agency to have a clear vision for EFC was also connected to the issue of regional differences in perspectives of certain EFC caseworkers and certain judges, underscoring the importance of having a clear philosophy and purpose for the EFC program. This was reflected in the perspective of one EFC staff member who described how this is illustrated in the contradictory messages workers receive regarding the purpose of EFC:

I see different workers feel like they…hear different things: "Get in and get out." "Give the bare minimum." "Make them prove it." Others are: "Give them everything." "Let's file on every 17-and-a-half-year-old, so they could get EFC".

Without a clear perspective and rationale for the program, workers receive mixed messages, lack guidance, and are left to their own interpretations, leading to inconsistent and even conflicting practices.

5.3. Need for Culturally Responsive Services and Workforce Diversity

Summary: A consistent theme emerging from the data was the lack of culturally responsive services available to young adults in EFC, particularly for those from overrepresented racial or ethnic groups or sexual or gender minorities. The practice goal of cultural relevance may support cultural permanency for diverse individuals in EFC. An additional subtheme identified across the interviews and focus groups, was the lack of workforce diversity, particular in certain regions of the state, and numerous participants voiced the need for caseworkers who reflect the identities of their clients, and who share an understanding of the experience of child welfare services.

Participants voiced that the program can be more effective if youth and young adults see themselves in their caseworkers, that is, if workers are representative of the clients they serve. As they describe it:

> *…what I've seen, generally is that often, you know, young people of color, and LGBTQ youth, particularly young people who are Black and Indigenous, are just incredibly overrepresented in care, and the vast majority of caseworkers are White. And so, there's generally a disconnect there, which is not to say that white social workers can't provide culturally competent service. But I think there's just not enough people who share the same identities of youth in care providing services to youth in care. I think that's true under 18 and in EFC.*

> *We do not have service providers that match our population, period. Everybody wants a therapist of color, cool. We've got one covered by Medicaid in [this region]. We cannot pair [EFC participants] with appropriate services.*

> EFC staff: *…one [need] that's come up a couple of times: more culturally relevant services. Services for black birthing folks, a doula with a sliding scale—there's a mortality crisis with black folks.*

> *…bringing in providers that have folks on staff that have lived experience that can walk and navigate those young folks through this…*

In addition to culturally responsive and developmentally appropriate interventions, many of the community practitioners acknowledged the high levels of trauma young people in the child welfare experience in their lives, and how this trauma needs to be addressed to support them in living successful lives. As one participant described:

> *It seems like the trauma that people experience that leads them into the system is really the barrier that has to be addressed before we can move on. Because… as a professional, adult, who was not in child welfare, when my own life events happen, it sets me back as a as an adult. Right? If you have a death in the family, if you get in a car accident—all of those things would set you back. So, if you were in a system, that's a big bureaucracy, that is not tailored to individual needs, that's just going to compound it.*

Training needs were noted by many EFC staff and Leads. Specifically, they spoke to needing more specialized training, from a developmental perspective to prepare EFC workers for case management and practice with youth and emerging adults. Caseworkers noted:

> EFC staff: *I do think it's worth calling out here that there is no internal practice training around engaging this population at all. So, other programs are specifically trained for their program. We are not. So, we are self-identifying appropriate research to use and things like that. But there's nothing agency-wide that's provided to this group.*

Staff interviewed commented on needing more culturally relevant approaches as this has an impact on program participants' receptiveness to the services and potentially even to outcomes. As one staff member noted:

> *Certainly, you know, BIPOC youth are overrepresented in our state. There are some really specific dynamics around indigenous young people in child welfare. And we know that… if ways that are culturally appropriate with tribal communities and their children isn't in the intervention… it doesn't really matter what else is happening… the outcomes will be poor.*

6. Discussion and Implications for Program and Practice Reforms

The themes and sub-themes that emerged from this study offer important implications regarding needed reforms at the individual practice and organizational level. Staff working in the EFC program communicated repeatedly about the importance of

having a clear vision for the program, namely, that at an organizational level, the state agency needs to articulate defined goals and purpose in its EFC programming to help guide practice. Workers urged that this vision for EFC needs to be developmental, that the agency needs to consider the unique developmental stage of the transition to adulthood when designing and articulating their practice model, to ensure that goals and approaches are appropriate for working with youth and young adults. This emphasis is consistent with what Gaughen and Langford (2019) outlined in their brief on promising practices for structuring EFC. In that brief, they cited a 2011 Casey report pointing to the following as key elements of EFC designs: developmentally relevant, geared around permanency, informed by brain science, driven by those with lived experience, with consideration of equity and inclusion.

Another organizational level reform recommended by many of the workers interviewed was to structure dedicated EFC units across all regions. This organizational structure would help workers focus on youth and young adults and their particular developmental needs, enable them to build expertise in working collaboratively with clients, and support a positive practice relationship. This finding reinforces a recent study conducted by Taussig and Munson (2024) that reported that young adults with previous experience in the child welfare system shared that providing age-appropriate and youth-centered services was critical to making the child welfare system better for youth and families. Additionally, other research has underscored the value of a developmental approach when serving children and adolescents in foster care (Healey and Fisher 2011), which may illustrate the unique value of having workers specialize in providing services to specific age ranges of youth with whom they have a certain passion or skillset for serving. Specialized units would also better support specialized training, which might include topics such as complex trauma, developmental theory, cultural relevance in practice approaches, disability-centered practice, and more preparation to deliver evidence-based practice (EBP) interventions with young adults. Having EFC-specific units across all regions of the state would also enable staff to specialize and familiarize themselves with the complex program policies, rules and requirements regarding program eligibility and allow workers to focus on their clients' needs. Acknowledging the demands and challenges particular to EFC cases could help address workload equity concerns expressed by workers in the current study. The organizational level reform of reducing caseloads for those working in EFC might also help workers meet their practice goals with these young adult clients.

Needed individual practice level reforms include increased workforce training. Caseworkers in this study recognized relational permanency as a crucial goal for young adults in Extended Foster Care (EFC), acknowledge that as EFC caseworkers they have a unique opportunity to engage youth and young adults over an extended period of time to help them build and maintain supportive relationships and workers are seeking additional training and preparation to better support their clients' needs for interdependence, connection, and social support. This focus is particularly important given the trauma history common among foster youth. To support EFC caseworkers in promoting relational permanency and building relationship skills, they could benefit from specialized training in trauma-informed approaches, mentoring programs, peer support groups, and workshops on communication and emotional intelligence. Additionally, workers in the present study talked about wanting to facilitate safe re-engagement of young adults with birth families, as many EFC participants reconnect with their families of origin. This can involve counseling, mediation services, and education on boundary-setting and self-advocacy in family relationships. Child welfare agencies can better support caseworkers in helping young adults develop the relational skills and support networks necessary for successful transitions to adulthood and emphasizing *interdependence* rather than a singular focus on independence.

Findings from the present study underscored that programs such as EFC can be more effective if the organization increases the diversity of the workforce, so that it is representative of the clients served, more inclusive of those with lived expertise, and well-prepared to respond to the needs of subgroups, particularly those over-represented in child welfare. This may also help participants maintain cultural permanency (Karatasas et al. 2024; Waniganayake et al. 2019) and this should be a key practice goal. Scholars have suggested that one way of achieving diversity in the child welfare workforce is for organizations to intentionally recruit individuals with lived experience of navigating the child welfare system into child and youth serving programs (Barbee and Antle 2021). Recruiting individuals with lived experience could be a powerful way to promote systems change and empower individuals with invaluable knowledge to facilitate change from the inside of organizations that have historically caused harm in different communities. At the same time, child welfare agencies seeking to recruit a diverse workforce, including BIPOC caseworkers and those with lived expertise must consider how best to support and retain these workers (National Child Welfare Workforce Institute 2022). For example, BIPOC workers hired in rural areas may need additional supportive supervision, including peer supports, mentoring, and may benefit from cluster hiring. At an organizational level, child welfare agencies are challenged to recruit and retain a diverse, prepared, and committed workforce, particularly in this current post-pandemic time and in the context of calls to address long-standing systemic racial injustices, but this time is also an opportunity to re-envision child welfare services and shift organizational culture towards a healthier work environment (Casey Family Programs 2023; Jones et al. 2025). We note that in attempting to reflect the diversity of the EFC participants in the caseworkers, it is difficult to reflect intersectional identities. If a participant identifies with multiple marginalized communities, they may have negative or traumatic experiences with a caseworker representing one of the identities, despite potentially sharing other cultural affinities. This could contribute to distrust among participants regarding the program's ability to meet their cultural needs. Considering intersectionality in the process of assigning caseworkers for EFC participants recognizes the complexity of participants' identity and may support the relationship between workers and clients. Training from an intersectional approach may also aid caseworkers in meeting the goal of cultural permanency for EFC participants.

Study participants' interest in greater training in EBPs with young adults spotlight the lack of tested effective interventions for EFC-eligible populations. No programs currently have the highest rating "well supported by research evidence." More rigorous outcomes evaluation research must be funded and conducted (Greeson et al. 2020). Promising programs include Youth Villages (YV) LifeSet. YV LifeSet is a program that pairs a young person who is preparing to age out of the foster care system with a youth specialist who provides mentorship and teaches the young person tangible skills to help them make a successful transition from foster care to young adulthood (Youth Villages 2024). The specialist provides intentional support around life skills such as financial literacy, utilizing public transportation and resources to obtain employment, higher education, and stable housing. A randomized study on YV LifeSet indicated that young people who were able to utilize the program reported higher earnings, better employment and health, and reduced housing instability after one year when compared with individuals preparing to exit foster care that did not participate in YV LifeSet (Skemer and Valentine 2016). Further research is needed to examine the effectiveness of the Youth Villages LifeSet model (Greeson et al. 2020) to move it up in the CEBC ratings, but this type of model holds promise in providing the support young people in foster care need to make a smooth transition to young adulthood.

Child welfare agencies need to consider brain science and the particular developmental stage of youth and young adults when designing and articulating their organizational

practice approach, including as they consider potential prevention activities. The Federal "Family First Prevention Services Act" (FFPSA) of 2018 now permits federal resources to be used to cover evidence supported prevention services. As agencies look to prevention goals and activities, supported by FFPSA funding, it is critical that they think about their prevention practice model from a developmental perspective and what prevention means for adolescents and young adults in foster care and EFC. For example, taking a "two-generation" approach, increasing supports for those EFC participants who are themselves parents would be appropriate and may help prevent future system involvement. Services for EFC participants who are pregnant or parenting might include home visit support programs that have been tested effective, such as "Promoting First Relationships," a program to strengthen positive, responsive, and nurturing parent–child relationships and is an intervention which reduces the risk of future foster care placements (Oxford et al. 2016). Offering a continuum of care model, Transitional Living Programs such as "Second Chance Homes Network" also offer young mothers support to maintain housing stability (Gaughen and Langford 2019). Further research is needed to build evidence for the effectiveness of such interventions with EFC participants and enable states to access Federal FFPSA funding for prevention.

7. Limitations

This systems assessment has several limitations. Although it was designed and conducted collaboratively with a planning team and implemented with guidance from an Advisory Group of young adults with lived experience and expertise with child welfare, the systems assessment did not originate from the community, nor was it implemented as a community-based participatory study. It is important that research that seeks to inform policy and practice reforms be guided by perspectives of those most affected by the changes. Furthermore, the research team did not gather any data directly from individuals with lived experience with child welfare services. Our focus groups deliberately sought regional diversity in those EFC staff represented, and included staff from the state's Juvenile Rehabilitation services, but not all EFC or JR staff were interviewed and those interviewed were a selected group identified by the state agency. With regard to the community partners interviewed for the systems assessment, those individuals were not a random but rather a purposive sample of professionals known to the research planning team who were recruited due to their deep knowledge of EFC services and benefits and their expertise in the subject. We are therefore not able to claim a representative sample. Additionally, the present study used rapid qualitative analysis, a method which yields expedient findings, but potentially at a cost to the depth of analysis, time to measure inter-rater reliability, and reduced likelihood of reaching data saturation. In the present study, rapid analysis was important to inform legislative testimony and for reporting out to the state agency leadership, but this is a limitation of the chosen methodology. As we described in our Methods section, the study team engaged in member-checking with participants and meaning making with lived experts even with the short timeline however the team did not conduct additional analyses after the legislative session.

8. Conclusions

In this study, we analyzed qualitative data collected through focus groups and interviews and synthesized that with evidence from the literature. The findings from the present study build upon and contribute to the literature on organizational practice in child welfare services, inform how EFC services may be best structured, and offer practice recommendations for improving supports for youth and young adults (Annie E. Casey Foundation 2025; Greeson et al. 2020; Barbee and Antle 2021). This study illustrates the importance of recognizing the transition to adulthood as a particularly distinct stage of

development, made more challenging in the current social and economic context and especially difficult for young adults leaving the child welfare system. The evidence points to significant benefits of participating in EFC for individuals leaving foster care, especially for subgroups whose needs have been marginalized in public service systems. The findings also highlight the need for service and benefit improvements and practice reforms to better meet the needs of young adults, especially those representing potentially intersecting social identities over-represented in the child welfare system. Effective, coordinated, and culturally responsive practice may encourage more young people to engage with EFC programs, build relational health, and better support their transition to adulthood. Workforce staff and community partners interviewed in the current study identified important practice improvements, especially emphasizing the need for EFC-specific units, developmentally tailored training, working from a clearly articulated practice model relevant to youth and young adults, reducing caseloads, recruitment and retention of a diverse workforce, and more evidence-based practice options for EFC. Responsiveness to youth and young adults involved in child welfare services—a bureaucracy traditionally focused on young children—calls for an institutional culture shift to better support the transition to adulthood, including sustained infrastructure, and a culture of workforce well-being, all requiring resources, but worth the investment. Finally, the current study is aligned with scholarship emphasizing that enduring relational supports and social networks are critical to ensuring that emerging adults leaving foster care are set up for long-term stability in housing and to encourage their successes in education, employment, health and well-being (Okpych et al. 2023). EFC services and practice models should therefore be focused on these goals as they are key to a positive transition to adulthood.

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