

Family Initiated Treatment (FIT): What we are learning

Family Initiated Treatment (FIT) provides an additional access point for youth ages 13-17 to receive the behavioral health treatment they need. This document outlines how FIT has been used across Washington and what the data tells us about demand, access, and trends over time.

How FIT use has changed over time

FIT has supported nearly 3,700 youth statewide since 2020.

- From 2020–2023, FIT use was very steady serving about 580–610 youth each year.
- In 2024, FIT use increased significantly, with 735 youth served, about 25% higher than previous years.
- In 2025 (January–November), FIT has already served 669 youth. While slightly lower than the same period in 2024, this level remains well above pre-2024 years.

Seasonal patterns

School schedules, holidays, and access to services often affect when families seek support.

FIT use shows mild seasonal trends:

- Higher use: Spring and October
- Lower use: August and December

Key takeaway

FIT demand increased in 2024 and remains strong in 2025, suggesting a sustained need rather than a one-time spike.

The chart shows the number of youth who received Family-Initiated Treatment (FIT) each year. FIT use was steady from 2020–2022, dipped in 2023, increased in 2024, and remains higher than earlier years in 2025, indicating continued demand for support.

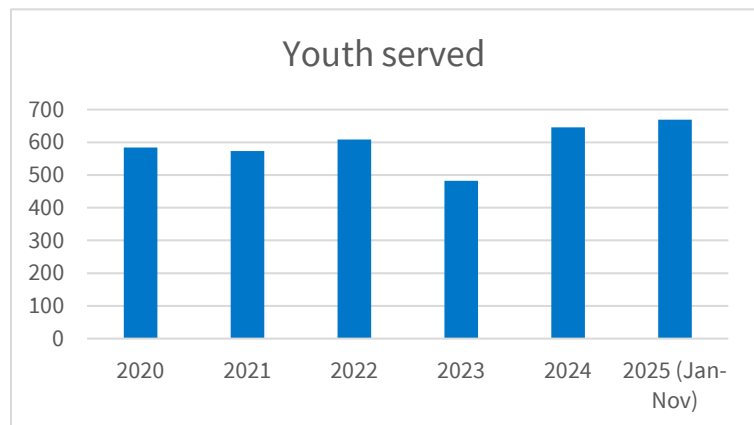
A closer look

- 2020: 584 youth served
- 2021: 573 youth served
- 2022: 609 youth served
- 2023: 482 youth served
- 2024: 646 youth served
- 2025 (Jan-Nov): 669 youth served

Why this matters

When comparing the same months across years, more youth accessed FIT in 2024 and 2025 (Jan-Nov) than in prior years.

While volumes level slightly in 2025 (Jan-Nov), they remain well above pre-2024 levels, pointing to ongoing need among youth and families statewide.



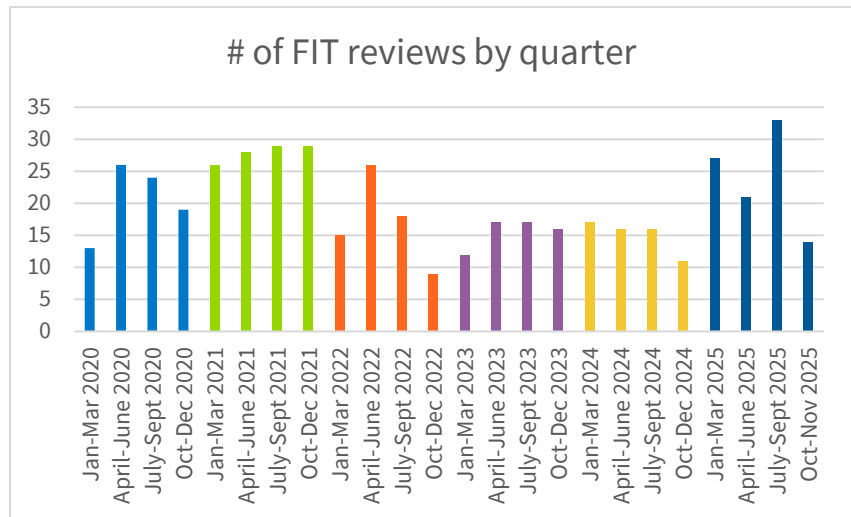
FIT reviews

FIT reviews are part of routine oversight to help make sure services continue to meet youth and family needs and align with program requirements. Reviews are required at certain points during services or when additional review is needed, and they focus on supporting appropriate care and continuous improvement.

- Reviews peaked in 2021
- Fewer reviews occurred during 2022–2024
- In 2025 (Jan–Nov), 95 reviews have already occurred more than most full prior years

What this may reflect

- Stronger use of the review process
- Increasing complexity of youth needs
- Continued focus on service quality and accountability



For more information on FIT reviews, see page 8, of the [FIT Guide](#).

This chart shows quarterly and annual trends in FIT reviews over time. Reviews support services quality and responsiveness, and the higher level of review activity in 2025 may reflect both growing complexity and more consistent use of quality checks across the system.

Substance use related FIT use

Behavioral health includes both mental health and substance use services; this section looks specifically at FIT use related to substance use needs.

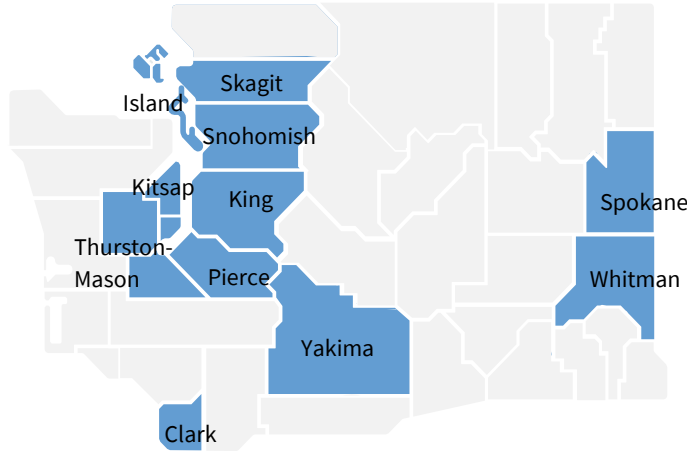
- SUD-related FIT use peaked in 2021 with a total of 22 admissions
- Since 2024, SUD-related FIT admits have been very low or near zero

What we're paying attention to

This trend may suggest potential barriers such as limited awareness, referral pathway challenges, changes in eligibility interpretation, or shifts in how youth with substance use needs are being served through other programs.

FIT across Washington state

The FIT pathway creates the opportunity for youth and families to access outpatient and inpatient providers statewide. This map shows where FIT services have been delivered to date. Lighter areas reflect fewer delivery sites, not absence of FIT use.



Approximate share of total FIT cases statewide (2020-2025 January-November):

- South Puget Sound: 35–40%
- Central Puget Sound: 25–30%
- North Puget Sound & Peninsula: 25–30%
- Eastern Washington: 8–10%
- Central & Southwest Washington: Smaller but present

A small number of hospitals account for a large share of FIT use, highlighting the opportunity to continue to educate the provider network on how to deliver FIT.

What this tells us

FIT is a **statewide pathway to services**, with reach in both Western and Eastern Washington. The map reflects how FIT is being used across regions of the state. Youth and families from across Washington are accessing FIT, with the highest volume centered in Puget Sound, Spokane, and Whitman counties.

This map shows where FIT services are delivered, not where families live. Youth and families from every part of Washington access FIT.

FIT training for individuals supporting youth and families

Family-Initiated Treatment (FIT) includes an online training series designed to help providers, partners, and system partners understand when and how FIT should be used, as well as how to effectively support youth and families throughout the process. The training reinforces shared expectations, legal and clinical considerations, and the family-centered principles that guide FIT implementation statewide.

To date, 1,005 individuals have completed one or more FIT online training modules. Participation spans a wide range of roles across the behavioral health, child-serving, and family support systems, reflecting FIT’s cross-system nature and the importance of shared understanding among partners.

Affiliation	Learners
Youth	8
Parent/guardian	116
Other family member	11
Youth peer partner	18
Family peer partner	43
Family/peer organization	43
DCYF social worker	17
Outpatient behavioral health provider	411
Hospital	53
Juvenile justice	7

Developmental Disabilities Administration	11
School official	32
Managed Care Organization/Administrative Service Organization	19
Other (Students, SUD, Tribal organizations, Community organizations, Nurses, State positions, legal)	216

How training supports consistent implementation

The breadth of training participation demonstrates that FIT implementation is supported by a diverse, multidisciplinary audience, with particularly strong engagement from outpatient behavioral health providers, family members, and peer-based roles. Meaningful participation from hospitals, schools, child welfare, managed care, and community-based partners reinforces the shared responsibility required to implement FIT effectively and appropriately.

By providing a common foundation of knowledge across systems, the FIT online training helps:

- Promote consistent understanding of FIT eligibility, process, and safeguards
- Support timely and appropriate referrals
- Strengthen family-centered and trauma-informed practice
- Reduce variability in how FIT is applied across regions and settings

As FIT utilization continues statewide, ongoing monitoring of training participation by role and region will help identify gaps, inform targeted outreach, and ensure the workforce remains equipped to support youth and families through the FIT process.

Conclusion and what comes next

The data shows that Family-Initiated Treatment (FIT) continues to play a role in Washington’s behavioral health system for youth and families. After several years of steady use, 2024 marked a clear increase in demand, and 2025 (Jan-Nov) data indicate that higher use is continuing. This suggests that families and providers are increasingly utilizing FIT as one pathway within the broader system of care.

FIT is being used across the state, with strong participation in both urban and regional hubs, and review activity points to a continued focus on quality, oversight, and responsiveness as youth needs grow more complex.

Overall, the data reinforces that FIT is not a short-term solution but is a sustained and important pathway for youth and families seeking support during challenging moments.

Next Steps

Looking ahead, HCA will continue to strengthen FIT by:

1. **Continuing to Offer Training and Assistance:** Maintain ongoing training sessions and personalized training support to enhance community understanding of FIT and ensure they can effectively utilize FIT when appropriate.
2. **Expanding Multilingual Educational Resources:** Efforts will continue be made to develop and distribute additional educational and training materials in multiple languages, increasing awareness and access for diverse communities across Washington.
3. **Enhancing Outreach and Community Engagement:** The ongoing marketing and educational campaigns will continue to raise awareness about FIT, gather community feedback, and address barriers, ensuring that families, youth, and providers are well-informed about accessing and offering FIT services.
4. **Exploring Systemic and Policy Changes:** Investigate existing barriers and opportunities related the decline in substance use–related FIT use as well as advocating for systemic changes and potential statutory modifications to improve access to FIT evaluations across the State.

As FIT continues to evolve, data will remain a key tool for learning, improvement, and collaboration, helping ensure youth and families receive the right support, at the right time, in the right place.