accord prominence to current life issues in this new edition, we also expand our attention of cognitive distortions to include self-debasing distortions.

SOCIAL MEDIA

You're probably also aware of the explosive increase in the use, among youth, of online social media (including smartphone texting, podcasts, video games, networking applications, and even virtual reality simulations). Youths' increase in the use of online social media warrants inclusion of Managing Social Media among the new Current Life Issues in this new edition. In addition, youths' familiarity and comfort with online social media provides an opportunity for the use of supplementary media-related techniques as part of EQUIP's cognitive behavioral curriculum. Our updated social skills curriculum now includes the option of using virtual reality immersion therapy: High-risk youth can try out, practice, and observe their own emerging social interaction skills within an ongoing virtual (or simulated) social environment.

In addition to these four main expansions, certain elements among our refinements are particularly noteworthy. In the Social Behavior Problem Names list, Aggravates Others has expanded to Aggravates or Assaults Others, given the disturbing contemporary increases in youth violence and the need to address it. This edition also accords greater attention to the special needs of high-risk female adolescents, as well as those who may be low functioning intellectually (again, we include, in this edition, how to accentuate social interaction skills training with virtual reality immersion therapy techniques). Finally, we've made various other (pertaining to slang, daily life, etc.) updates in the book, as dedicated EQUIP users among you may discern.

EVIDENCE THAT EQUIP FULFILLS ITS MISSION TO PROMOTE RESPONSIBLE THINKING AND ACTING

Given its foundational attention to peer culture and motivation, EQUIP should, in theory, be at least as effective as other cognitive behavioral programs. What is the evidence that EQUIP works—that is, fulfills its mission to promote responsible thinking and acting? Evidence pertaining to the high-risk youths' treatment outcomes should refer to both their (a) behavior during their commitment period (does EQUIP reduce offenders' irresponsible behavior and thereby promote a humane climate at the residential or community agency?) and (b) post-release conduct (does EQUIP lead to transference of responsible behavior to community settings, as may be evidenced in lower recidivism rates?).

By both criteria, the evidence is that EQUIP works—but only if it is implemented with high fidelity or program integrity. The Red Wing, Minnesota, facility saw its 1-year recidivism rate drop from 53% to 21% following implementation of EQUIP in 1998 (J. Handy, personal communication, February 2, 2008). Langdon and colleagues (2013) concluded,

from a pilot study of their adaptation for male offenders with intellectual disabilities and/or autism, that the program represents "a genuinely promising . . . first-line group-based intervention" (p. 178). Subsequently, Langdon and colleagues completed a feasibility study of EQUIP at medium- and low-security hospitals in the United Kingdom. Their study indicated that the intervention not only was welcomed by many offenders with autism or intellectual disabilities but also led to a reduction in externalizing problem behaviors among those who attended at least four curriculum sessions. Community adaptations of EQUIP for this population have taught effective problem-solving skills and accomplished successful community reintegration (Tearle & Holt, 2018; Tearle et al., 2020).

Studies by Leeman et al. (1993) and Devlin & Gibbs (2010) investigated both outcome effectiveness questions. The results of these studies especially contribute to the evidence-based conclusion that EQUIP works. Leeman's study was conducted at the medium-security juvenile correctional facility where, as we noted earlier, Potter was serving as superintendent. The facility housed approximately 200 court-appointed boys aged 15 through 18 years (mean age 16 years). The 54 participants in the study had been committed for offenses such as breaking and entering, receiving stolen property, and burglary. Also indicated on the offense record of a substantial minority were high-end felonies such as armed robbery, felonious assault, and rape. Average commitment duration was approximately 6 months. During their first week at the institution, participants were randomly assigned to either EQUIP or a control group. The EQUIP treatment program took place at a living unit located in one wing of the agency building.

Leeman and colleagues found that the EQUIP program was effective in inducing both short- and longer-term change toward more responsible behavior. Relative to control group participants, EQUIP participants evidenced gains in both agency and post-release conduct. Residential agency conduct gains were highly significant in terms of self-reported misconduct, staff-filed incident reports (concerning fighting, verbal abuse, defiance of staff, and AWOL attempts), and unexcused absences from school (see Figures 1.1 and 1.2). These results corroborated informal observations and comments by institutional staff that the EQUIP unit was dramatically easier to manage than other units. EQUIP's induction of more responsible behavior, then, contributed to a more humane climate in that wing of the facility. Moreover, the conduct gains appeared to transfer to the community. One year following release from the institution, the EQUIP group's 15% rate of recidivism (defined by parole revocation and/or recommitment) was significantly less than the 40.5% rate evidenced by the control groups.

As did the Leeman et al. (1993) study, Devlin's (Devlin & Gibbs, 2010) study found evidence for both short-term and longer-term behavioral gains among offenders. Devlin and Gibbs analyzed behavioral and other data for 221 participants aged 18 through 61 (mean age 31 years, 70% male) at the Franklin County Community Based Correctional Facility where

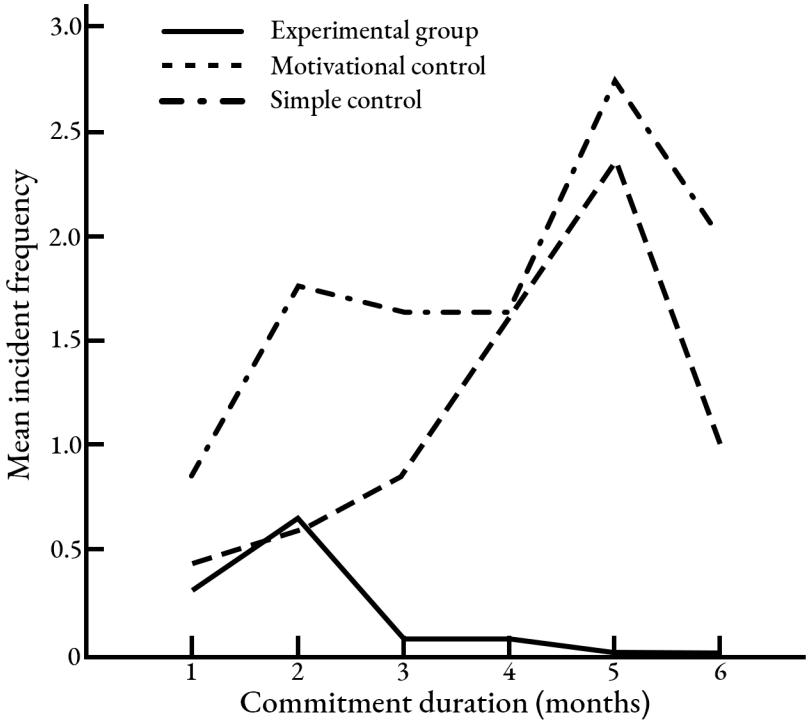

Figure 1.1

Mean Incident Report Frequencies by Month for Experimental and Control Groups

Potter was then serving as director. These offenders, many of whom were 18- and 19-year-olds, were committed to the facility mainly for robberies, assaults, drug-related crimes, and probation or parole violations (many of the violating parolees' original sentences were for murder, sex offenses such as rape, and aggravated assault). Average commitment duration was approximately 5 months. During their stay, the participants' conduct significantly improved by two criteria: (1) Institutional rule infractions reduced in frequency (also found in Leeman et al., 1993), and (2) estimated recidivism risk reduced from moderate-high (57%) to low-moderate (31%; at a comparison facility, the corresponding percentages were 57% and 48%). Such conduct gains made possible a humane agency climate: Although quantitative data are not available, the Franklin County Community Based Correctional Facility enjoyed a reputation as providing a safe and positive environment for both residents and staff. Following a site visit, Professor Clark Power (2010), from the University of Notre Dame, provided a highly favorable evaluation:

> The [EQUIP] approach to corrections is one of the most impressive of the moral development interventions that I have encountered. . . . I visited the CBCF with many questions and cautions about what I might find there. I left in awe. I experienced far more than a very well executed [cognitive] behavioral intervention; I experienced a miracle of moral community. . . . Seasoned staff and novice residents . . . all valued what they were achieving

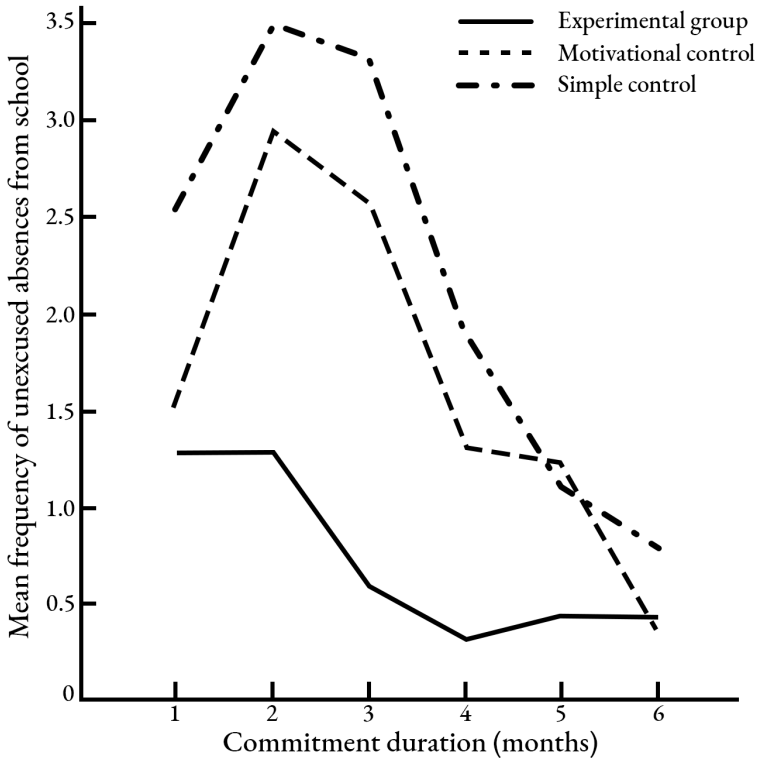

Figure 1.2

Mean Frequency of Unexcused Absences from School by Month for Experimental and Control Groups

> together at the CBCF. . . . The residents were ready to change their lives [and] readily engaged in personal reflection and interpersonal counseling [and] use of program terminology. (pp. xiii, xv)

Longer-term behavioral gains were also evident, suggesting a successful transfer to the community setting. Following release, the participants evidenced, over a 12-month period, an actual recidivism rate of 21%—almost a third lower than the 29% rate at the comparison facility. Among those who did recidivate, latency (number of days before recommitment) was significantly longer for the experimental-group facilitators (214) than for those released from the comparison facility (150). In short, fewer EQUIP participants recidivated, and the fewer who did took longer to recidivate. And by the way, there's evidence of a cognitive link here: Among those who reduced their self-serving cognitive distortions, those who reduced the *most* were the ones *least* likely to recidivate (Brugman & Bink, 2011; Devlin & Gibbs, 2010).

Like that of other cognitive behavioral programs, EQUIP's effectiveness varies with quality of implementation. Lipsey et al.'s (2001) meta-analysis documenting the overall greater effectiveness of cognitive behavioral (relative to other) programs noted that relatively weaker recidivism results were found for cognitive behavioral programs "low in strength and fidelity of implementation" (p. 155)—for example, inadequate staff training, fewer than the prescribed number of weekday meetings, and high turnover among participants and staff. A facility in the Netherlands with poor outcome results evidenced extremely low

program fidelity or integrity in their implementation. In most of the facility's equipment meetings, to train social interaction skills (requiring introduction, modeling, imitation, feedback, and practice of the skill), for example,

> trainers did introduce a specific skill, but did not model the skill to the participants [and] participants were not given the opportunity to practice the skill. . . . Most trainers did not discuss how participants had practiced the skill and participants did not receive feedback on their performances. . . . Trainers did not stimulate participants to practice the skill outside the meeting. (Helmond et al., 2012, p. 13)

Beyond introducing social interaction skills, then, the Dutch trainers in most cases implemented *none* of the other aspects of the social interaction skills curriculum! EQUIP can certainly be included among the referents for Lipsey et al.'s (2001) conclusion that "a great deal of improvement may be possible in the implementation of [cognitive behavioral] programs" (p. 155). Dutch facilities with stronger program fidelity have evidenced more effective outcome results (J. van Westerlaak, personal communication, November 15, 2019). Given adequate implementation, the evidence overall suggests that EQUIP can induce responsible behavior among initially antisocial individuals.

BEYOND THIS BOOK

Again, welcome to this second edition—*The EQUIP Program for High-Risk Adolescents: Serving Residential and Community Agencies*! Now that we have introduced EQUIP, we can proceed to the remaining chapters of this book. In them, we discuss how to get started (see Chapter 2); how to cultivate a responsible adolescent culture through peer-helping (see Chapters 3 and 9); and how to equip, in the equipment meetings, motivated high-risk adolescents with the skills and maturity they'll need to help one another (and themselves) think and act responsibly (see Chapters 4–7). A helpful concluding checklist exercise is provided in Chapter 8, and Chapter 9 addresses adaptations of EQUIP in schools and community agencies. Our appendixes provide representative portions of certain instruments that you may wish to include in order to assess the ongoing effectiveness of your updated EQUIP program. We also refer to certain other supplementary materials beyond this book, such as a broader statement of the program's developmental and empirical underpinnings (Gibbs, 2019). Supplementary services, used concurrently with or following EQUIP, may pertain to nutrition, sexual health, job readiness, faith-building, drug education, and—especially—addiction treatment programs. Supplementary programs for more severe offenders include the more intense social perspective taking entailed in victim awareness and crime reenactment role play (Texas Juvenile Justice Department, 2017).