

TEEN CHALLENGE INTERNATIONAL

A White Paper

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PREFACE

Only recently have scholars broken out of a stereotypical treatment of faith-based organizations such as Teen Challenge, demonstrating among other tentative conclusions that these substance abuse prevention and treatment programs typically act independently of the federal and state agencies, and that they employ strategic initiatives which defy traditionalists patterns. These programs appear to have extraordinary outcome successes while demonstrating a capacity for altering existing social and economic community structures.

At the same time, the glaring absence of theological reflection by faith-based organizations in the current national debate is indicative of the indispensable need for these groups to engage in critical reflection upon the practical and theoretical implications of the intermeshing of their social actions with theological commitments.

Teen Challenge, as a significant participant in the field, has the responsibility to articulate to themselves and to others the presuppositions and assumptions that undergird, deepen and indeed enhance their current social practices, and to present a contextual social doctrine which reflects a cohesive unity between their social practices and theological convictions.

This process holds opportunity for Teen Challenge to give, on the one hand, viability to spiritual transformation and, on the other hand, constructively devise social structures and alternatives able to cope with the problems of civil society.

I. Introduction to Teen Challenge

Teen Challenge is a substance abuse prevention and treatment program comprised of 165 centers in the United States with an equal number of sister entities in 62 foreign countries. Since it's founding by David Wilkerson in 1958, this faith-based network has grown into the largest of its kind in the world.¹

The Teen Challenge network is a confederation of autonomous local centers each with its own volunteer board of directors. Treatment centers tailor programs to meet the contextual needs of their local communities. The local centers generate operating funds from individuals, churches, community organizations, businesses and their own work programs.² Thousands of volunteers recruited largely from churches, contribute valuable time and skills, thus making it possible for Teen Challenge centers to operate with extremely low overhead.

In support of the local centers, the Teen Challenge headquarters promotes a clear and corporate definition of mission and objectives. The central office also sets uniform accrediting standards, provides leadership training and materials, offers systems support, shares best practices and assesses program performance.

¹ In early 2001, Teen Challenge operated 178 ministry centers. One hundred and thirty-five centers offered the in-residence program with an enrollment of 3,334 students. Of these 135 centers, 78 were for adult males, 37 for adult females, 10 for adolescent females, and 10 for adolescent males. There are 1310 fulltime staff and 181 part-timers. See Appendix One for further statistics on selected Teen Challenge programs.

² Most of the centers operate several small microenterprises that produce significant income.

II. Mission and Objectives

The mission of Teen Challenge is to provide youth, adults and families an effective and comprehensive faith-based solution to drug and alcohol addiction and other life controlling problems. Their objectives are to enable students to find freedom from addictive behavior, and to become socially and emotionally healthy, physically well and spiritually alive. With committed staff and effective programs, Teen Challenge's programs and staff wish to produce graduates who function responsibly and productively in civil society, and who have healthy relationships in the work place, family, church and community.

Teen Challenge offers assistance and treatment to people from all backgrounds, but especially the urban poor, women and ethnic minorities.

III. Theological Assumptions

Throughout their history, Teen Challenge has contended that the fundamental reason for their success in treating people with life controlling problems, typically drug addiction, is because their students have had a spiritual transforming experience as an act of God's grace.

However, in a secular forum when members of the Teen Challenge team are called upon to give an account of this experience; to describe why spiritual transformation is the essential component to achieve desired outcomes, or why the centrality of the spiritual

experience serves as the point of departure for a coherent explanation for a “social theology,” it is apparent that these “theological assumptions” are not self-interpreting nor is the organization’s fundamental commitment fully understood in all its content and force. The task for Teen Challenge is to present “an essential connectedness” between the experience of spiritual transformation and the practice of social action.

Teen Challenge believes that when a student makes a decision to surrender his or her will to Jesus Christ and to establish a personal relationship with him, that such a spiritual conversion produces an essential transformation of life. This transformation is received as a gift for all, at God’s initiative, and depends solely on his grace. The conversion experience, known as “being saved” or “born again,” is not a path of escapism chosen as a means to cope with what appears to be insurmountable problems, but rather a spiritual encounter that produces in the convert a sense of dignity, self-worth, hope and personal empowerment. The change in the student’s life is observable, real and often dramatic.³

Along with theological doctrines, Teen Challenge emphasizes an experiential Christianity. They believe that the Holy Spirit enables the new believer to translate creed into conduct, faith into practice and doctrine into daily living. Local centers become laboratories where students demonstrate in practical actions terms how the Gospel works its way out in their lives.

³ The theme of spiritual conversion has been the central core of Christian theology and the Christian tradition since St. Augustine.

Teen Challenge believes that love for God is to be shown not only in their acts of worship and prayer, but is to be demonstrated as well in their deeds of service in fulfillment of the great commandment to love one's neighbor. This love for neighbor reaches across every boundary that divides people bringing reconciliation, restoration and wholeness. Such unconditional love, reflective of God's own character, is to be translated into compassionate human deeds enabled by God's gracious gift of salvation and through the empowerment of the Holy Spirit.

As an integral part and a natural expression of the grassroots communities they serve, the Teen Challenge leadership and staff understand the structural factors—societal and familial—that move people toward drug addictions and other life-controlling problems. In response they have produced programs and strategies that accord with their core values, and that provide youth, adults, and families with faith-based solutions to seemingly insurmountable problems.

Teen Challenge centers have been a significant presence in urban communities for over forty years. They offer field-based knowledge and experience gained over the long term. In a society where few alternatives existed, the students and graduates of Teen Challenge, comprised largely of ethnic minorities, urban poor, women, young people and children, are visible examples and concrete representations of what daily life should look like within the community of faith; living expressions of that “essential connectedness” between spiritual and social liberation.

IV. Personnel, Programs and Strategies

To implement its mission and objectives, Teen Challenge centers offer a range of outpatient and prevention services, in-residence programs and a variety of holistic approaches to substance abuse prevention and treatment. Programs include opportunities to earn a G.E.D., vocational life and job training, mentoring and tutoring for children, after-school activities, counseling and crisis hotlines, formal and informal support groups, and other significant services aimed at particular needs.

A. Personnel

While correctly highlighting spiritual and social transformation, and the programs and strategies which contribute to the processes that alter the realities of an addicted person's existence, it is easy to take for granted one of the most compelling features of treatment: the unrecognized and ordinary people who comprise the Teen Challenge staff—these usually ignored, stable, committed and somewhat invisible persons are the backbone of the Teen Challenge structure. Though generally left out of most “testimonials,” these unheralded masses of people are easily as crucial to the life and growth of the student as are any of the programs or the more acclaimed and charismatic principle players.

Profiles of the staff demonstrate people of unusual commitment and persistence. Their work demands focus and a willingness to invest themselves in the lives of people afflicted with horrific problems. They consistently go beyond the reasonable requirements of the line of duty, receive minimal compensation, and do so often at great

personal sacrifice. This cross-section of people and personalities, who have shaped the character of the program, are the rank and file staff of every Teen Challenge center.

Notably, these faceless but effective workers are for the most part former drug addicts and graduates of the Teen Challenge treatment program. Their considerable numbers (more than 500) and significant contributions to others and to society offer more than anecdotal stories to support claims that Teen Challenge is one of the most successful faith-based drug treatment programs in the world.

B. The in-residence rehabilitation program

A central focus of all the centers is the in-residence program, typically one year in length, which offers an environment of therapeutic support and spiritual formation. The program, where entry and enrollment is always voluntary, requires discipline, responsible decision-making and accountability. Students receive instruction in the fundamental tenets of Christian living, and participate in daily devotions, chapels, church services and outreach activities. Throughout their one-year experience they are equipped with functional tools, including job skills and vocational technical training, to assist them to re-enter society as productive and healthy people.

Though each center practices its own version, for the most part the essential components of the in-residence program would include the following:

1. Spiritual transformation, responsibility and personal discipline

Teen Challenge is convinced that "the transforming power of Christ" is the key to overcome life-controlling problems. The transformation of life offered by Jesus Christ restores dignity, value and worth. More importantly faith restores hope. And hope elicits

moral and ethical responses which discourage negative behavior. Faith and hope enable people to regain control of their lives and accept individual responsibility; to be accountable for their actions. The emphasis upon spiritual conversion has far-reaching implications for encouraging social and ethical transformation—for individuals, families and communities.

Because God created humankind with a free will to choose, a decision to follow Christ is personal and can only be made by each individual. Therefore, it is essential that entry into the in-residence program be voluntary, and that the prospective student clearly understand program distinctiveness, treatment models and services, intensity, duration and expectations.

Almost immediately after entering the residency program, students find themselves involved in a routine of structured activity. They are assigned to work for three or more hours each day in general work detail. They take responsibility for the cleaning and upkeep of the center facility. Similar to work responsibilities, recreational activities like baseball, basketball, weightlifting and ping-pong are vital aspects of the daily restoration process. Students enjoy leisure time, relax and have fun without dependency upon drugs to provide an artificial feeling of well being. The tightly programmed daily schedule (usually in 30 or 60-minute increments) requires order, concentration and active participation. The student is focused upon the activity rather than on maintaining sobriety.

The Teen Challenge Guidelines lists a series of policies and procedures that must be obeyed. While standards of conduct often appear to be arbitrarily defined, they are in

character with the purposes of Teen Challenge. Timeliness, honesty, loyalty, respect, reliability and compassion, for example, are respected ideally by virtually everyone in society even when these values are not practiced. Students submit themselves to the discipline of the group, accept rigid standards of conduct, systematically support the program, exhibit high degrees of loyalty, and have opportunity to freely express themselves to staff or their colleagues. The rewards can be extraordinary.

Personal discipline, acceptable conduct, and accountability not only separate students from the easy-going permissive attitudes toward infidelity, gambling, alcohol and drug abuse that got them into trouble in the first place, but it provides practical norms and rules, of pedagogic importance, particularly when the guidelines are instructive and protect them from harmful patterns of destructive behavior.

2. Christian Formation: worship services, prayer and Bible studies

Worship services are fashioned after the style of a home Bible study. There is a time for singing, sharing testimonies, reading and studying the Bible. The music is generally loud, rhythmic and exciting. Students are encouraged to participate. Their involvement is spiritual and emotional as well as physical. Incentive and motivation culminates in membership in the Teen Challenge choir accompanied with the opportunities afforded to sing in churches, schools and community centers.

Early morning devotions, a daily “quiet hour” and “no talking events” permit time for spiritual reflection and personal prayer. A multiphased discipleship-training curriculum treats attitudes of denial, anger, temptation, depression, self-worth and

acceptance. In later phases, courses integrate the basic principles of Christian faith with Christian practices.

If the student's experience is, on the one hand, intensely personal, spiritual, eternal and mystical; on the other hand, it is unquestionably corporate, practical and committed to life experiences that empower them to live as Christians in the here and now.

3. Personal and leadership development: Apprenticeship programs

Practicality and effectiveness are characteristic of an informal but innovative apprenticeship program that encourages leadership opportunities at all levels. The students, immediately upon entering the program, regardless of social class or economic standing, are given something to do. The apprenticeship system begins with the routine of fulfilling the daily needs of the local center, cleaning the buildings, working in the kitchen, yard, or at other vocational activities.

Responsibility for housekeeping tasks quickly expands, especially for those who demonstrate gifts, into teaching a Bible study to their group, preaching during the daily devotional, or sharing experiences at street services. Recognition of one's leadership gifts and other contributions to the well-being and growth of this new community become circular, as all members are encouraged to invest increasingly in the work, and assume responsibility for its development. Within a short time the new student is involved in a myriad of leadership opportunities.

The right to gain access to leadership is based upon their enthusiasm, commitment and capability to motivate and develop others. Students are encouraged to improve

communication and organizational skills. The most capable, after appropriate seasoning and further training, will be allowed to head program activities. The emerging leader produced by this informal apprenticeship system is "contextual" with the qualifications necessary to work on the popular level. This ladder of career opportunity could take a capable member from the position of new convert to the team head of a group, shortly thereafter to a student leader, and eventually to a staff member or even director of a Teen Challenge Center or other executive positions of leadership.

The exceptional opportunities for student participation provided by the community of faith cannot be overemphasized. Few of their friends and acquaintances from their former "lives" would have such options for similar expression or recognition.

V. Local Church Involvement

The emotional support offered by the faith community goes beyond the fervor of church services. To insecure participants with life-controlling addictions, the church provides a safe place where they can find security, acceptance, wholeness, recognition and even the rights and privileges of membership. Students are encouraged to take risks and practice their developing talents, while enjoying the support of friends within the natural context of church life.

For graduating students, especially those in the transition from the residential program to re-entry and life on their own, the church provides the best setting for healthy personal relationships with non-addicts. To be sure, such benefits also impose demands on them. While recovering addicts enjoy a number of advantages generally denied them

previously, they also must accept individual responsibility for their actions and exhibit a willingness to contribute or sacrifice for the common good of the community.

By developing the self-esteem of formerly drug-addicted persons, by providing hope and arming them with skills applicable to the larger social system, Teen Challenge together with the local church, enables graduates to take part in the larger social and economic struggles for a better life and more secure future when they re-enter society. Ultimately, by empowering people who were previously alienated from their families and communities, with a horizontal linkage from life in the more sheltered environment of the Teen Challenge center, to the arena of daily life where they will have direct access to educational, vocational, and social opportunities within society, Teen Challenge acquires a revolutionary potential to be significant agents of social and spiritual change.

Indeed, the participation of the students in the spiritual activities of the Teen Challenge program, leadership training possibilities and church involvement has much to do with the program's success and relevance to the fulfillment of their students' future aspirations for meaningful alternatives. Rather than viewing these activities as the result of an induced proselytism, the process should be recognized as the dynamic of a grassroots organization which arises in response to the unsatisfied needs of a hurting and addicted person searching for a more secure and wholesome existence.⁴

⁴ The social bonding and social networks, produced formally and informally by the Teen Challenge treatment programs, create the type of social capital necessary for a healthy and productive civic society. For a thorough discussion of these networks, see a compelling argument offered by R. D. Putman, *Bowling Alone: The Collapse and Arrival of American Community* (New York: Simon and Schuster, 2000).

VI. Treatment Outcomes

Since its creation in 1958, this faith-based network--with more than 2000 graduates annually from the one-year residential program—has grown to be the largest of its kind in the world. Sophisticated studies of program and performance outcomes are limited though not non-existent.⁵ Professor John Dilulio is correct in his assertion that empirical data is lacking when he states, “[evangelical organizations] performance in reducing drug addiction relapse rates and achieving other desirable civic goals awaits suitably scientific documentation.”

To be sure, a comprehensive study is overdue and would be welcomed. However, lack of scholarly data does not negate what is clearly observable. There are hundreds of well-known Teen Challenge graduates who serve in positions of leadership in pastorates or with faith-based organizations, and any list of graduates would include scores of educators, businesspersons, government personnel and community leaders who could be located with a simple telephone call.

Notwithstanding, Teen Challenge desires to measure more precisely the influence the in-residence treatment program has had upon the lives of thousands of students who have graduated. Similar to many faith-based groups, it has been difficult to track graduates

⁵ The research studies, while either dated or very limited in scope, do provide encouraging markers. See the Teen Challenge web site for research done by Catherine Hess and NIDA (1975); Elizabeth Robinson, Southwest Missouri State University (1981); Shawna Girgas, University of Indiana (1992); Roger Thompson, University of Tennessee, and Aaron Bickenese, Northwestern University (1999).

given Teen Challenge's limited financial and human resources. Since little scholarly and comprehensive assessment has been done, the leadership has resorted to available criteria to evaluate the program's effectiveness. While there is every indication, albeit in very general terms, that students are breaking the habits of drug addiction and other life controlling problems, virtually no attempt has been made to monitor and evaluate specific programs and strategies nor measure other treatment outcomes.

Because of the recent emphasis upon faith-based drug and alcohol treatment programs, social scientists, drug abuse and prevention scholars, and practitioners are searching for reasonably acceptable methods to measure outcome treatments for both outside evaluation as well as for internal purposes.

A. The problem with measuring treatment outcomes

Federal and state agencies, secular providers and faith-based organizations struggle to establish protocols for monitoring and measuring treatment outcomes. There is considerable debate not only as to how to measure the outcomes, but also as to what those outcomes should be. Unfortunately, outcome monitoring is not a very technical process. "Clean data" needed for "objective assessment" is a mirage. Variation in program philosophies and operations, services provided, funding, patient differences at admission, and services provided are just a few of the variables that hinder direct comparisons between one treatment program and the next.

Whatever the evaluation protocols selected, most experts agree that treatment outcomes must be multidimensional, and should contain selected elements of standardization across programs. For the most part, however, researchers would also

contend that outcome measures should be customized to be practical and applicable, acceptable to a broad base of the stakeholders, and at the same time be scientifically defensible.

In defining outcome standards a variety of important questions must be addressed:⁶

- who defines the outcomes or outcome standards?
- who decides which outcome standards will be used to measure performance?
- who decides if the outcome measurements are fair?
- who decides whether outcome measurements are achieved?
- who monitors to determine fairness? From what set of motives?
- how significant will the “results” be in determining future funding?
- will funds flow to programs that publish “better outcomes”?
- will programs design processes that will provide “better outcomes”?
- will programs hesitate to accept difficult cases for fear of lowering their outcomes?
- will programs decide a person’s treatment priority in monetary terms?
- will programs assign priority to easier cases?
- will funders determine treatment methods?

⁶ Patricia Harrison, *Outcomes-Based Accountability: New CSAT TIP Provides Guidelines for States, 2000*. Online: <http://www.treatment.org/communique/Mcare/harrison.html>.

This study published by CSAT in *The Communique* is representative of the outstanding research resources offered by SAMHSA and its affiliates.

B. Implications for Teen Challenge

Teen Challenge does not have all the answers to these questions. These are difficult and complex issues. The questions of power, fairness, and widely differing perspectives will always be significant elements in setting and assessing outcome measurements. However, since the underlying inferences implicit within these questions are substantial, these concerns must be on the table for debate. Indeed, unqualified agreement and consent to imposed predetermined and arbitrary outcome measurements would produce unfortunate consequences.

Arbitrary outcome standards based on specific indicators could only measure hard data. For example, if a 70% cure rate became the benchmark for a “success standard,” then programs that did not achieve that norm would be designated as “unsuccessful.” Treatment programs could be tempted to engage in practices such as “creaming” to ensure financial incentives. Clients considered to be hopeless, heroin addicts for example, would go left untreated. While Teen Challenge would not consider “creaming” as a viable nor ethical option, they could be forced to compete for funds with other programs that would and do. Private donors would almost certainly fund the more “successful” programs. If cost-effective performance was the basis for funding, why would any agency start new programs in gang and drug-infested communities and take the risk of lowering their “rating”?

Teen Challenge believes that the definition, selection and evaluation of outcomes must reflect their core values. Treatment outcomes should not be measured only with

percentage rates, ratios and efficiency quotients. Teen Challenge is not in the “business” of initiating or conforming strategies to produce “the best bang for the buck,” in expectation that the bottom line figures would trigger private or public funding. In the opinion of Teen Challenge, the tyranny of arbitrary statistics and ratios to determine success or failure would paralyze the single factor that makes the transformational difference for persons suffering from drug addiction.⁷

C. Research Studies

Unquestionably there should be scholarly empirical evidence that treatment programs like Teen Challenge are effective. The need for an adequate profile and program evaluation of Teen Challenge is all the more important in light of the current legislative emphasis upon “charitable choice,” and the subsequent public speculation about the program’s religious character and its purported rates of success. Because of the paucity of scholarly research studies, few firm conclusions can be made about the efficacy or nature of Teen Challenge until reliable empirical data is gathered, performance outcomes measured, and more precise definitions of their orientations, institutional and human resources and infrastructure are provided.

In spite of the complexity and even risk of the task, the time has come for a substantial research study to be done. It is possible, though not easy, to satisfy the

⁷ Roger Conner, Executive Director, Search for Common Ground, has already proposed a Consensus Working Group on Treatment Outcomes in an attempt to secure agreement on certain measurable and verifiable outcomes for faith-based organizations. The Consensus Working Group would include representatives from entities who have a “stake” in any subsequent outcome decisions. Teen Challenge applauds the efforts of Search for Common Ground for proposing this critical initiative.

demands of the secular world and at the same time reflect core values. Certainly it will be a daunting task to establish and assess flexible and acceptable outcome standards.

Nonetheless, the integral involvement in the research process of the participants of this grassroots ministry linked together with qualified scholars from faith-based traditions and other first-rate scientific researchers offers exciting possibilities.

The participative process ensures that core beliefs, values, and practices are considered and integrated into the research design, methodology and assessment. A mutual respect and appreciation of secular scientists, theologians and practitioners for the other's contribution provide integrity, authenticity, and validity to the end product. At the end of the day, what could be learned from this program evaluation would serve as a diagnostic tool for Teen Challenge, benefit similar programs, and contribute to the larger field of substance abuse prevention and treatment.

VII. An Opportunity and Challenge

A. Licensing and educational requirements

There has been extensive debate about the licensing and educational certification for faith-based substance abuse and treatment programs, and especially for Teen Challenge. At present only 5% of the 150 Teen Challenge Centers are licensed.

Teen Challenge is committed to the ongoing improvement of their facilities and staff training programs.⁸ They recognize the need to consider the meaning, value and significance of outside accreditation.⁹ Teen Challenge would like to resolve these licensing and credentialing issues if possible, but in a manner that safeguards the integrity of their mission and objectives.

In the field of substance abuse treatment, the methods and strategies implemented by Teen Challenge to achieve their goals and objectives differ considerably from those of clinical or science-based programs. It would seem reasonable that educational requirements and certification should be designed accordingly. Staff training programs that are “generic” where “one curriculum fits all” are hardly adequate. The educational components should focus on the leadership, management, strategies, and performance outcomes suitable for a faith-based approach to drug treatment.

The unifying center for a certified curriculum must relate directly to the underlying assumptions that Teen Challenge believes produce their targeted treatment outcomes. The curriculum should reflect the essence of Teen Challenge’s mission and objectives: content

⁸ Local Teen Challenge centers are often housed in very modest facilities that comply with local building codes. However, to be a licensed substance abuse treatment center, many of the codes approach "hospital-like equivalency." To bring these buildings up to code, if possible at all, would be prohibitively costly and beyond the capacity of the operating and capital fund budgets of the majority of centers. The implications of this reality are not covered in this White Paper.

⁹ Internal accreditation is granted to local qualifying centers by the central office in accordance with their “National Accreditation Standards and Compliance Reference” guidelines.

that is contextual and applicable, training that is appropriate for their methods and strategies, and programs that are suitable for the purpose for which they are intended.

In short, the subject matter and content of courses (what should be learned) would equip Teen Challenge personnel, to carry out with competence, the programs and strategies that correspond to their expressed aims and objectives. Similarly, evaluation and assessment would measure whether staff members have received the appropriate training that develops the skills and tools to enable them to implement the strategies that fulfill their goals.

Predetermined certification standards appropriate for clinical or science-based treatment programs are not wholly adequate for their faith-based counterparts. A redefinition of certification standards that would take into account the “context of the new reality” or the “mission and method” of faith-based treatment programs could produce exciting results.

SAMHSA and affiliates (CSAP, CSAT, CAPT, ATTC, etc.) have a rich history of working with and recognizing the value of faith-based drug rehabilitation programs.¹⁰

¹⁰ Resources for substance abuse prevention and treatment are immense, and many are accessible through SAMHSA, the federal agency (and its affiliates, e.g. CSAT, CAPT, ATTC, etc.) responsible for the quality and availability of prevention, treatment, and rehabilitation services. Multidisciplinary state-of-the-art resources based on the experience and research of recognized experts in the fields of prevention and addiction, technology-based projects, educational aids, online courses, promotional materials, databases, clearinghouses, and grant opportunities abound. These superb resources designed for local and national training programs will undoubtedly enhance knowledge and improve Teen Challenge’s prevention and treatment policies. For additional information see other agencies like the Office of National Drug Control Policy (ONDCP), National Institute on Drug Abuse (NIDA), and the National Institute for Mental Health (NIMH).

The possibility of collaborative efforts with these agencies to design, develop and produce a non-traditional certificate curriculum relevant to the specific mission of faith-based drug prevention and treatment would be a welcomed innovation.¹¹ If offered cooperatively by both SAMHSA (or affiliates) and Teen Challenge, a course of studies with “suitable content for purpose,” resources that are contextual, and delivery systems that are appropriate would be recognized as “quality and certifiable” by accrediting organizations, external institutions and government agencies.

VIII. Conclusions

Teen Challenge has demonstrated their potential for enabling and empowering large numbers of people, formerly with life controlling problems, to re-enter society as productive citizens. In the process they have also created institutional structures capable of performing various educational, vocational, and social service functions. This national network of autonomous community centers stands at the vanguard—not at the margins—to address a national crisis of drug addiction, and participate in a transformational change that offers to thousands of people a more rewarding and secure future.

¹¹ Teen Challenge, The Institute for Leadership Studies at Vanguard University of Southern California, and the Center for the Application of Substance Abuse Technologies (CAPT) have met to dialogue about several cooperative ventures including collaboration in designing, writing and producing online courses customized for the specific needs of the Teen Challenge network that could be jointly offered, and if desired, receive university credit. The groups have also had preliminary discussions on the sharing of resources and the adapting of other existing materials.

In a society where discrimination, indifference and neglect are all too often characteristic, Teen Challenge has gathered strength precisely among the most disadvantaged or dissatisfied sectors of the urban poor, ethnic minorities, women, young adults and children. Thus, Teen Challenge quite unlike some of its stereotypical portrayals as passive, otherworldly and traditional is deeply involved in its own kind of here-and-now social struggle.

Teen Challenge's commitment to the biblical truth that personal spiritual regeneration is indispensable and at the heart of their methods and strategies is significant both in its degree and volume of effectiveness as well as in its far-reaching implications for social transformation.

APPENDIX ONE

TEEN CHALLENGE STATISTICAL DATA

As of 2/6/2001 there were	78 adult male centers
	37 adult female centers
	10 adolescent female centers
	10 adolescent male centers
	2 free standing prison ministry
	2 free standing reentries
	3 Teen Challenge Ministry Institutes
	17 Crisis and Referral centers
	14 Administrative Offices

Teen Challenge Centers and related programs generated \$68,000,000 in cash gifts and an equivalent amount to that in donated goods and services.