

FOUR PIERS.®



A Comprehensive Family Centered Program
For Youth and Parents Coping with Alcohol, Tobacco, and Other Drug Issues



THE FOUR PIERS PROGRAM®

MISSION STATEMENT

The Four Piers Program is committed to developing and implementing state of the art cost-effective substance abuse Prevention, Early Intervention, and After-care services for adolescents and their parents.

VALUES, VISION, AND PHILOSOPHY STATEMENT:

The Four Piers Program is committed to providing services that:

- Stem from a sound rationale for diagnosis and treatment
- Utilize appropriate and effective science-based screening assessment and diagnostic procedures
- Offer a continuum of care
- Promote a safe therapeutic treatment environment
- Incorporate field-tested treatment strategies
- Include opportunity for parent involvement
- Require a caring and competent staff
- Stress the efficacy and efficiency of services
- Foster spiritual growth and development
- Enhance the dignity and self-worth of the individual
- Encourage healthy empowerment and decision-making skills
- Promote positive healthy life styles free of alcohol, tobacco, and other mind-altering drug usage

BELIEF STATEMENT

As a healing agent for individuals and their families, we believe every person is a unique individual of special worth entitled by birth to “God’s gift of wholeness of life”. Furthermore, it is our belief that the use of mind-altering drugs, alcohol, and tobacco products by children and adolescents are neither normal nor safe activities. Such usage has the potential to significantly interfere with a youth’s physical, emotional, and spiritual development and seriously threatens their “gift of wholeness”.

The services provided by The Four Piers Program are designed to effect change physically, emotionally and spiritually for adolescents and their families. Although The Four Piers Program does not advocate any particular religious view, the program does, however, introduce an underlying philosophy that stresses a concept of spirituality. A spiritual awakening does in fact occur, as teenagers are freed from the shackles of drug usage. As their physical, emotional, and spiritual health drastically improve, they become reunited with their families, and they experience the benefits of being sober, new realms of possibilities emerge.



RATIONALE

The Four Piers Program recognizes the necessity of beginning service with a thorough assessment of each individual to determine one of the following six classifications:

1. Non-user
2. Non-user with mental illness
3. Non-chronic teenage substance user/abuser
4. Non-chronic user with mental illness / co-occurring disorder
5. Chronic teenage substance abuser
6. Chronic user with mental illness / co-occurring disorder

The materials in The Four Piers Program can be used as an effective prevention program for the non-user, as an early intervention program for the non-chronic user, and as an effective after-care program for the chronic user with or without co-occurring disorders, that have successfully completed an effective intensive treatment program that has stabilized the abusers condition. The Four Piers Program also recognizes that our services will most likely prove ineffective for both the previously untreated chronic teenage substance abuser and the profoundly mentally ill. Therefore, this program is best suited for the non-user, the non-chronic teenage substance user and the chronic user that has successfully completed an effective intensive treatment program.

The Four Piers Program is a unique integration of materials and strategies of the *SIGNALS*© program and the *TASA*© program, incorporating elements designed to accomplish the following goals;

1. FOR THE NON-USER:

To teach these adolescents how not to begin the usage of alcohol, tobacco, and other drugs.

2. FOR THE NON-CHRONIC USER / CHRONIC USER AFTER-CARE:

To teach these adolescents how to stop the usage of alcohol, tobacco and other mind-altering drugs.

3. FOR EVERYONE:

To teach these adolescents how to achieve maximum mental, emotional, and spiritual health without the use of mind-altering drugs including alcohol and tobacco. To teach adolescents how alcohol, tobacco and other mind-altering drug usage adversely impacts self-improvement and self-preservation in the area's of: physical, emotional, spiritual health; family relationships; education / vocation; leisure time; meaningful friendships; community service and financial security.



The Four Piers Program starts with the assumption that services to youth differ significantly from services designed for adults. Teenagers require more structure than adults. They also require more time to develop a willingness and readiness to change and to take personal responsibility for their recovery. They must consistently participate, for an extended period of time, in daily activities that foster change. In addition, teenagers require active parental involvement if maximum chances for success are to be realized.

The Four Piers Program is also designed to foster an atmosphere where the parents can openly and honestly accept the condition of their children instead of denying it. The program helps parents honestly confront their children with their feelings of hurt and disappointment as they admit their powerlessness to change their children. Most importantly, the Four Piers approach helps parents learn how to live with their hurt and disappointment in more positive and constructive ways. Parents learn that they no longer have to dwell in feelings of anger, resentment, self-pity, guilt, shame, and fear. They learn that they no longer have to continue to cover up for and enable their children to avoid the consequences of their drug usage.



PROGRAM OVERVIEW

PREVENTION COMPONENT

The prevention component of The Four Piers Program utilizes The SIGNALS© Preservation Awareness Model (*Stonecypher, 2003*). This model stresses the importance of addressing and changing several high-risk attitudes among adolescents that lead to their use and abuse of alcohol, tobacco, and other mind-altering drugs. This mindset includes but is not limited to; invincibility, typology myths, and pseudo-autonomy or false freedom. Accumulatively, these attitudes result in an in-grained core assumption that erroneously promotes drug usage as a normal and safe behavior in which a teenager can engage.

The prevention component of The Four Piers Program assumes that self-preservation is instinctive, can be developed, and can become the primary motivator to stop alcohol, tobacco, and other drug use. This assumption is consistent with the findings of both *The Monitoring the Future Survey* and *The National Survey of American Attitudes on Substance Abuse*. The results from each survey indicate that the most consistent reason young people give for not using alcohol, tobacco and other drugs is fear of physical damage and the fear of addiction.

Strategies of structured storytelling, multi-media presentations and other methods for diffusing destructive attitudes are introduced to lower defensive postures, while simultaneously replacing any misinformation or misperceptions with reality based information. Collectively these strategies help convince the participants of the benefits of being in the program and of accepting help. These strategies are also designed to create dissonance in the mind of the adolescent, countering the culturally promoted belief that alcohol, tobacco and other mind-altering drug usage is a normal and safe activity. This program confronts the culturally held notion that alcohol, tobacco, and other drug usage are an expected rite of passage to adulthood.



PREVENTION OBJECTIVES FOR THE ADOLESCENT

- Determine a science-based personal “*risk level*” regarding substance abuse and chemical dependence with and for the student.
- Disseminate current research on the harmful effects of substance abuse and chemical dependence.
- Raise awareness of advertising aimed at specific targeted audiences by alcohol and tobacco companies.
- Confirm the academic achievements of the student regarding the increased knowledge of harmful effects of substance abuse and chemical dependence through a measurable outcome.
- Document classroom behaviors and responses to class material. Note any action or statement from the student that might indicate Post-Traumatic Stress Disorder (*PTSD*) or grief issues associated with substance abuse and chemical dependence.
- *Decrease* resistance towards acceptance of help. *Increase* awareness of denial issues often associated with substance abuse and chemical dependence. Illustrate the importance of goal setting.
- Give constructive prevention recommendations to the student based on information gathered by screening instruments, measurable academic outcomes, and classroom observations. Give opportunity for the student to agree or disagree with those observations, results, and recommendations.
- Provide a list of resources for other services that may influence positive growth and health. Offer assistance in accessing those services. Provide research sites and sources to assist parents or the student with specific needs associated with substance abuse and chemical dependence issues.



PREVENTION OBJECTIVES FOR PARENTS / GUARDIANS

- Explain and interpret the science-based screening and assessments used to determine the “*risk level*” regarding substance abuse and chemical dependence of the student with their parents or guardians.
- Disseminate current research on the harmful effects of substance abuse and chemical dependence.
- Raise awareness of advertising aimed at specific targeted audiences by alcohol and tobacco companies.
- *Decrease* resistance towards acceptance of help. *Increase* awareness of denial and enabling issues often associated with substance abuse and chemical dependence. Illustrate the importance of goal setting.
- Give constructive prevention recommendations to the parents or guardians based on information gathered by screening instruments, measurable academic outcomes, and classroom observations. Give opportunity for the parents or guardians to agree or disagree with those observations, results, and recommendations.
- Provide a list of resources for other services that may influence positive growth and health. Offer assistance in accessing those services. Provide research sites and sources to assist parents or the student with specific needs associated with substance abuse and chemical dependence issues.



PROGRAM OVERVIEW

TREATMENT COMPONENT

The treatment component of The Four Piers Program is based on the *TASA*© Program (Ross, 1994). The Four Piers Program assumes that chemical dependency is a disease of attitudes leading to the use and abuse of mind-altering substances (e.g., alcohol, marijuana, cocaine) culminating in physical deterioration of the body, alteration of brain functioning, emotional instability, and spiritual bankruptcy. It is a progressive disease with four distinct stages: (1) initial usage, (2) problem usage, (3) psychological addiction, and (4) physiological addiction. It also involves the formation of a distinct self-defeating self-talk that, left unchallenged, will form the foundation of a distinct personality and cognitive structure that will ultimately lead to the untimely demise of the youth.

The Four Piers Program uses various field-tested treatment strategies derived primarily from a cognitive-behavioral therapy approach. Interventions rooted in reality, gestalt, actualizing, and family systems therapies, developmental theories, the twelve steps of Alcoholics Anonymous, and Judeo-Christian principles are also utilized. These treatment strategies are specifically designed to help adolescents identify and change mindsets that create and sustain alcohol, tobacco, and drug usage and other self-defeating emotional and behavioral responses to life's challenges. Recovery is viewed as four distinct but interrelated plateaus: admitting, submitting, committing, and transmitting.



TREATMENT OBJECTIVES FOR THE ADOLESCENT

- Identify and develop a plan of action to change self-defeating irrational thinking patterns that maintain and perpetuate
 - A. Drug usage
 - B. Destructive emotions and behaviors
 - C. Family discord
 - D. Poor school and/or work performance
 - E. Conflict with authority figures
 - F. Conflict with peers
 - G. Attitudes of selfishness and self-centeredness
 - H. Resentments, fears, anger, pity, and depression
 - I. Low frustration tolerance (impatience)

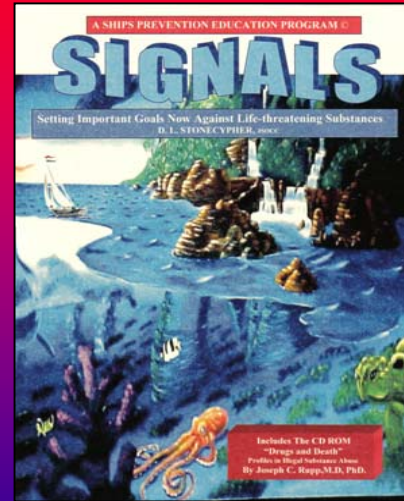
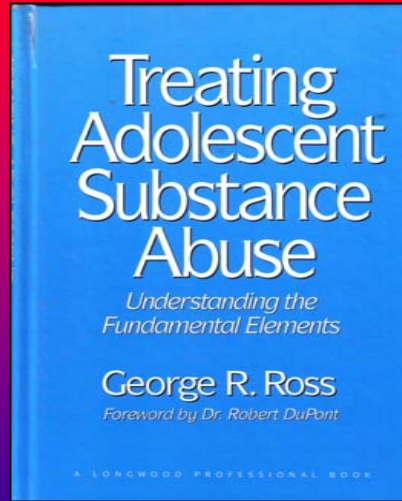
- Practice new rational thinking patterns that will maintain and perpetuate
 - A. Abstinence
 - B. Constructive emotions and behavior
 - C. Family harmony
 - D. Improved school and/or work performance
 - E. Decreased conflict with authority figures
 - F. Reduced conflict with peers
 - G. Attitudes of gratitude and sharing
 - H. Attitudes of forgiveness and tolerance
 - I. High frustration tolerance (patience)

- Demonstrate of a willingness and readiness to
 - A. Actively pursue educational and vocational pursuits
 - B. Work a twelve-step program of recovery
 - C. Make constructive use of leisure time
 - D. Develop solid drug-free friendships
 - E. Accept responsibility for one's recovery
 - F. Develop skills in effective management of financial resources
 - G. Develop healthy patterns for dating and courtship
 - H. Remain free of alcohol, mind-altering drugs and tobacco



TREATMENT OBJECTIVES FOR PARENTS INCLUDE

- Reducing their level of anxiety, depression, and anger
- Identifying self-defeating irrational thinking patterns that maintain a co-dependent enabling personality pattern
- Replacing self-defeating irrational thinking patterns with new self-enhancing rational patterns of thinking
- Practicing new self-enhancing rational thinking patterns
- Admitting powerlessness over their child's condition and accepting the possibility that their child may not recover from the disease
- Fostering a willingness and readiness to ask for and accept the help of others in overcoming their co-dependent enabling personality
- Healing damaged relationships with other family members including the chemically dependent child, spouse, and other children
- Addressing other psychological and/or chemical dependency issues that diminishes the parents' effectiveness to parent their child and act more effectively in other areas of their lives
- Educating parents about the disease of chemical dependency and co-dependency
- Developing more effective communication and parenting skills



George Ross, Ph.D / Lane Stonecypher, JSOCC

THE FOUR PIERS

FOUR PIERS ®



*Prevention *Intervention *Education *Recovery *Services

FOUR PIERS, INC.



Application Process
ASSESSMENTS

CHILD

PARENT (S)

MEETS THE CRITERIA FOR THE FOUR PIERS PROGRAM

CHILD

- Non-User
- Non-User w/ Mental Illness
- Non-Chronic User
- Non-Chronic User w/ Co-occurring Disorder

PARENT

- Slightly Dysfunctional
- Marginally Dysfunctional

RECOMMENDATIONS

**DOES NOT MEET CRITERIA FOR THE FOUR PIERS PROGRAM
REFERRAL OUT FOR SERVICES
*PARENT OR CHILD***

- Chronic Substance Abuser
- Severe / Profound Mental Illness

- INDIVIDUAL COUNSELING
- FAMILY COUNSELING
- GROUP COUNSELING

COMBINED ORIENTATION
Child and Parent Sessions

3 WEEKS

RECOMMENDATIONS AND SUGGESTIONS

- ADVANCED AND SPIRITUAL GROWTH GROUPS
- ADDITIONAL INDIVIDUAL / FAMILY COUNSELING

CHILD GROUP SESSIONS
12 WEEKS

IND. / FAMILY SESSIONS
AS NEEDED

PARENT (S) GROUP SESSIONS
12 WEEKS

PROGRAM FINISH

The Four Piers Program Syllabus Overview

WEEK	DAY #1 COMBINED SESSION	DAY #2 COMBINED SESSION
1	TASA BASIC: Assumptions Determine Outcomes / ABCDE'S Of Emotions Five Rules The Change Process	TASA BASIC: Seven Steps To A Happy Face and Script Writing Eight Rules Of Common Decency: Group Rules, Format Fallible, Correctable, and Transformable Definition Of and Stages Of Chemical Dependency
2	SIGNALS: Orientation / Pre-testing Instructor Presentation / Profile Of Illegal Drug Abuse, Pre-testing	SIGNALS: #1 and #2 Profiles Of Illegal Drug Abuse: Stimulants / Cocaine / Posttest Profiles Of Illegal Drug Abuse: Depressants / Heroin / Posttest
3	SIGNALS: #3 and #4 Profiles Of Illegal Drug Abuse: Marijuana / Posttest Inhalants / Posttest	SIGNALS: #5 Profiles Of Illegal Drug Abuse: Hallucinogens / Posttest

WEEK #	DAY #1. PARENTS ONLY	DAY #2 PARENTS ONLY	DAY #1. TEENS ONLY	DAY #2. TEENS ONLY
4	Alcohol Presentation / Alcohol Video	Rule Setting	Reverse Perc	Alcohol Presentation / Alcohol Video
5	FASD Video / Trauma / Rx / OTC / Club Drug Abuse	Negotiation	Should / Serenity Prayer	FASD Video / Trauma / Rx / OTC / Club Drug Abuse
6	Tobacco Presentation / Tobacco Video	Motivation	Expression, Signs, Consequences Of Anger	Tobacco Presentation / Tobacco Video
7	Genetic Predisposition / Chemical Use Pattern	Guidelines	Handling Of Anger	Genetic Predisposition / Chemical Use Pattern
8	Denial: Team Competition / Straight Talk Video #1.	Co-Dependency	Language Of Worry	Denial: Team Competition / Straight Talk Video #1.
9	Denial: Mask Art Project / Straight Talk Video #2	Should / Serenity Prayer	Language Of Depression	Denial: Mask Art Project / Straight Talk Video #2
10	Straight Talk Video #3. / Goal Setting Auction Activity	Expression, Signs, Consequences Of Anger	Self-Downing Cycle	Straight Talk Video #3. / Goal Setting Auction Activity
11	Recovery Presentation / Homework: Prevention Statements	Language And Handling Of Anger	Self-Acceptance Cycle	Recovery Presentation / Homework: Prevention Statements
12	Prevention Statement Work: Friends and ATOD	Language Of Worry And Depression	Ten Most Common Causes Of Failure	Prevention Statement Work: Friends and ATOD
13	Prevention Statement Work: Family and ATOD	Reverse Perc	Self-Worth Script	Prevention Statement Work: Family and ATOD
14	Contracts / Signals Challenge Area Help Lines and Network	Self- Worth Script	Four Core Beliefs # 1. And #2.	Contracts / Signals Challenge Area Help Lines and Network
15	Post-Testing / Posit follow-up Celebration / Credentialing	Four Core Beliefs	Four Core Beliefs # 3. And # 4.	Post-Testing / Posit follow-up Celebration / Credentialing



FOUR PIERS ®