

OJJDP Model Programs Guide

PREVENTION	IMMEDIATE SANCTIONS	INTERMEDIATE SANCTIONS	RESIDENTIAL	REENTRY
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Parenting with Love and Limits®

- PREVENTION**
- INTERMEDIATE SANCTIONS**
- REENTRY**

Intervention:

Parenting with Love and Limits® (PLL) integrates group and family therapy into one system of care for adolescent populations with the primary diagnosis of oppositional defiant or conduct disorder. Parents and teens learn specific skills in group therapy and then meet in individual family therapy to role-play and practice these new skills. This integration of group and family therapy enables parents to transfer these new skills to real-life situations and prevent relapse.

During group therapy, teens and parents participate together in a small group, led by two facilitators that can also include siblings and extended family. The groups consist of no more than six families and no more than 15 people total per group. Six 2-hour classes are held weekly. Parents and teens meet together as a group for the 1st hour. During the 2nd hour, the parents meet in one breakout group with one facilitator leading each breakout and the teens meet in another. During family therapy, teens and parents meet individually with one of the group facilitators in between classes in an intensive 1- to 2-hour session to practice the new skills learned in group. Extensive role-plays are used along with the development of a typed-out, loophole-free contract. Three to four family therapy sessions are recommended for low- to moderate-risk adolescents and up to 20 sessions for moderate- to high-risk offenders within an outpatient or home-based setting.

The *Parenting with Love and Limits®* system of care is comprised of 6 group sessions plus 3 or more family therapy sessions, as shown below:

- **Group Session 1. Understanding Why Your Teen Misbehaves:** Parents learn why their teen commit acts of parent abuse. Parents and teens go into their respective breakout groups to vent their feelings.
- **Group Session 2. Button-Pushing:** Parents learn how their teen pushes their hot buttons (whining, disgusted look, swearing, etc.), and teens learn how parents push theirs (lecturing, criticizing, talking in chapters, etc.).
- **First PLL Family Therapy Session** - Parents and teens meet individually to practice anti-button-pushing strategies.
- **Group Session 3. Ironclad Contracting:** Parents learn how and why their old methods of contracting have failed, as well as the steps to assemble a contract that works. Teens meet in their breakout groups to help write their own contract.
- **Second PLL Family Therapy Session** - Parents and teens meet individually to create their own contract.
- **Group Session 4. Troubleshooting:** Parents learn how teens have a special ability called "enhanced social perception" to think two steps ahead.
- **Third PLL Family Therapy Session** - Parents and teens meet individually to review their contracts and troubleshoot any loopholes. Extensive role plays are used to practice delivery of rewards and consequences.
- **Group Session 5. Stopping the Seven Aces:** Parents choose creative consequences to stop the seven "aces" of disrespect, ditching or failing school, running away, drugs or alcohol, sexual promiscuity, violence, and threats of suicide.
- **Fourth PLL Family Therapy Session** - Parents and teens meet individually to review their progress.
- **Group Session 6. Reclaiming Lost Love:** Parents learn to understand how conflict hinders the parent-child relationship and strategies to repair it.
- **Fifth PLL Family Therapy Session and Beyond as Needed** - Parents and teens begin to solidify nurturance as well as address any underlying family dysfunction.

In both group and family therapy counselors are provided with detailed treatment manuals and the parents and teenagers with workbooks.

Program Specification:

Rating:	Exemplary
Program Type:	Alcohol and Drug Therapy / Education Cognitive Behavioral Treatment Family Therapy Parent Training
Ethnicity:	African American Hispanic or Latino (of any race) White
Gender:	Both
Age:	10 - 18
Special Populations:	First-Time Offenders Mentally Ill Offenders Less Serious Offender Serious Offenders Status Offender Truant/Dropout
Target Settings:	Rural Suburban Urban
Problem Behaviors:	Aggression/Violence Alcohol, Tobacco and Other Drug Use Delinquency Family Functioning

Risk & Protective Factors:

Risk
Protective

Additional Information:

Status:

Program is in operation at this time.

Performance Measures:

Suggested OJJDP Performance Measures for the Program Type(s):

- Mental Health Services**
- Cognitive Behavioral Treatment*
- Logic Model: [PDF](#)
- Performance Matrix: [PDF](#)
- Delinquency Prevention**

Evaluation Methodology:

Study 1

Sells and colleagues (forthcoming) used a quasi-experimental, two-group design to evaluate Parenting with Love and Limits® (PLL). The sample consisted of youths in the juvenile justice system who responded to a referral by their probation officer. Of the 105 families who agreed to participate, 67 completed the PLL program and 38 did not finish all six modules. The average length of participation in the program was 36 days. Retention rate was 64 percent, a rate considered high given that participants were not court-ordered to attend the program.

The average age of adolescents was 16 years, with a range of 11 to 17 years. All participants were diagnosed with either oppositional defiant or conduct disorder and were currently on probation through juvenile court. The 65 participants of the control group were also under court supervision and were matched with the intervention group by the county court administrator on similar family structure, age, race, and gender. Study participants were primarily Hispanic (38.1 percent), white (36.1 percent), and African American (21.9 percent). Males accounted for 67.1 percent of the participants. Family composition of the group included single-parent families (65.8 percent), dual families (31.6 percent), and kinship care families or youths raised by extended family members (2.6 percent).

Outcome measures consisted of:

- Recidivism (defined as at least one rearrest for a status or delinquent offense within 12 months following completion of PLL)
- Changes in attitudes and behaviors of parents measured with the survey Prevention and Early Intervention Protective Factor Survey for Caregivers
- Changes in attitudes and behaviors of adolescents measured with the survey Prevention and Early Intervention Protective Factor Survey for Youth

Data was collected immediately before the first PLL group meeting and immediately following the last group meeting. Recidivism data for both groups was through juvenile court records by the court administrator at the local juvenile court 12 months after the completion of the parenting group. Data was analyzed using paired t-tests.

Study 2

Sells, Winokur-Early, and Smith (2011) used an experimental design with random assignment of youths within the juvenile court system. Youths who were diagnosed with oppositional defiant or conduct disorder were eligible to participate. A total of 38 adolescents adjudicated for a delinquent offense and disposed to probation through the juvenile court were matched on type of offense, gender, age, and socioeconomic status and then randomly assigned to a PLL treatment group and a control group that received customary probation services. The large majority of youths were African American (82 percent), along with 12 percent white, and 1 percent Hispanic. Fifty-seven percent of the adolescents were male. The youths committed a variety of crimes, with shoplifting the most commonly occurring offense. No information is given on the equivalence of the groups on demographic and criminal offenses.

The treatment group received the 6-week PLL program in small groups of no more than 12 people per therapy group during six 2-hour classes. The control group received parole services and other services such as outpatient counseling or community service.

The measures used in the study included the Child Behavior Checklist, the Index of Parental Attitudes, the Parent Adolescent Communication Scale, and the Parent Readiness Scale. Both the parents and adolescents in the treatment group received the pretest measures in an interview before the treatment and again immediately following the final PLL class.

Evaluation Outcome:

Study 1

Recidivism Rates

Sells and colleagues (forthcoming) found that participants in the Parenting with Love and Limits® (PLL) treatment group had significantly fewer offenses during the 12 months after program completion than the control group (23.5 percent for PLL attendees, compared with 59.0 percent for control group).

Changes in Caregiver Attitudes and Behaviors

Three of the five constructs of the caregiver survey were significantly improved from baseline to postprogram for the PLL group, compared with the control group. The three constructs were parental resilience, social support, and problem solving and communication.

Changes in Adolescent Attitudes and Behaviors

There was no significant improvement on the total youth survey score from baseline to postprogram between the PLL group when compared with the control group, though there was a trend ($p=0.063$). Two of the 13 constructs, however, did result in significant improvements: high value on helping others and social competencies. The Positive Perception of Self and Others construct neared significance. Changes on the other 10 constructs were not significant.

Study 2

Recidivism Rates

Sells, Winokur-Early, and Smith (2011) found that participants in the PLL treatment group had fewer offenses during the 12 months after program completion than the control group (16 percent for PLL attendees, compared with 55 percent for the control group). Additionally, juveniles in the treatment group spent a total of 72 days in detention, while juveniles in the control group spent 543 days in detention.

Child Behavior

On all but two subscales, the PLL group participants improved significantly more than the control group participants. Moreover, the two subscales on which there were no significant differences between the groups measured concerns (somatic problems and delusional thinking) that are not expected outcomes for the PLL intervention. The most significant difference between the groups was on the aggressive subscale, with the control group scores increasing from baseline to postprogram and the PLL group decreasing during the same time period.

Readiness for Change—Adolescents

Of the four readiness areas measured, only the Action subscale was significantly higher at posttest for the PLL group than for the control group, though it is unclear whether the youths rated this subscale high because they were ready for change or they thought their parents should change.

Family Therapy

Logic Model: [PDF](#)

Performance Matrix: [PDF](#)

Mental Health Services

Family Therapy

Logic Model: [PDF](#)

Performance Matrix: [PDF](#)

Delinquency Prevention

Parent Training

Logic Model: [PDF](#)

Performance Matrix: [PDF](#)

Mental Health Services

Parent Training

Logic Model: [PDF](#)

Performance Matrix: [PDF](#)

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Readiness for Change—Caregivers

Results for PLL group caregivers suggest that these respondents were transitioning from the precontemplation stage to advanced stages of readiness for change. The group mean of PLL group caregivers increased 9 points in the Ready for Action subscale, compared with the group mean for the control group caregivers which decreased at posttest.

Communication Between Mothers and Youths

Adolescents in the PLL group reported that communication with their mothers was significantly improved, compared with the reports of youths in the control group. Mothers in the PLL group also reported improved communication with their youths, compared with mothers in the control group.

Other Information:

The Parenting with Love and Limits program also has a reentry/aftercare component, which breaks down treatment into 4 phases that use group and family therapy to begin the reentry process on the first day of the youth's commitment and continue on into post-discharge. (Please note: The research on PLL does not include the aftercare component.)

Phase I: Months 1 & 2- PLL Foundations

- Face-to-face motivational interview takes place using the Participation and Graduation Agreement where parents are told about the PLL program, and if they sign up and complete their requirements, the likelihood increases that their youth's length of stay will be reduced.
- 3 out of 6 group sessions are held for just the parent/caregiver in the community at the residential, local mental health center, church, or community center. Each module is specific to a core missing skill that is specific to extreme emotional and behavioral problems.
- PLL family therapy sessions are conducted onsite at the residential facility or using some type of video conferencing with the youth at the residential site to put together aftercare plan that addresses each protective factor that caused placement.

Phase II: Months 3 & 4 - PLL Intensive

- The rest of the PLL groups are conducted and additional PLL family therapy is held to produce aftercare plan.
- Post-test scores are calculated.
- Benchmark meeting is held at the end of month #4 or earlier. The family, PLL therapist, aftercare program and residential staff meet to look at measureable risk-levels, youth performance on residential level systems, aftercare plan, and family participation.
- If risk levels are dropping, then early discharge is recommended and youth enter the transition phase (month #4 or an early release). If not, youth continue standard length of stay.

Phase III Month 5- PLL Transitions- Preparation to Transition Back to Community

- One-on-one PLL family therapy continues. PLL dress rehearsals are conducted to practice delivery and execution of aftercare plan.
- Set-up of Community Based Action Team (CBAT), which uses the wraparound philosophy to coordinate with mentors, transitional case manager, school, job placement, GED classes, and others to help the youth transition successfully back into the community.

Phase IV - Months 6-8- PLL Aftercare - Minimum 90 Day Post Discharge

- Aftercare begins in the community with the same PLL therapist.
- PLL case manager oversees CBAT Team to reinforce aftercare plan.
- After 90 days the relapse prevention "red flag" checklist is addressed, and 30, 60, and 90 day callbacks are conducted where the family is proactively contacted to see if there are any relapse warning signs or needs for "tune-up" sessions.
- CBAT Team continues to meet regularly beyond 3 months for up to a year.

References:

Sells, Scott P., Thomas E. Smith, Jeffrey Rodman, and Lisa Rene Reynolds. 2003. "Reducing Substance Abuse and Delinquency: Pilot Research of a Family-Oriented Psychoeducation Curriculum." *Journal of Child and Adolescent Substance Abuse* 15(4):105-115.

Sells, Scott P. 2001. *Parenting Your Out-of-Control Teenager*. New York: St. Martin's Press.

Sells, Scott P., Kristin Winokur Early, and Thomas E. Smith. 2011. "Reducing Adolescent Oppositional and Conduct Disorders: An Experimental Design Using Parenting with Love and Limits." *Professional Issues in Criminal Justice* 6(3).

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