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SECOND DIVISION
July 26, 2011

IN THE
APPELLATE COURT OF ILLINOIS
FIRST JUDICIAL DISTRICT

IN THE INTEREST OF:)	Appeal from the Circuit Court
)	of Cook County, Illinois
S.G.)	Juvenile Justice and Child Protection
)	Department, Child Protection
Minor-Respondent-Appellee,)	Division
)	
THE PEOPLE OF THE STATE OF ILLINOIS)	
)	
Petitioner-Appellee)	
)	
v.)	No. 08-JA-690
)	
SUSAN G.,)	Honorable
)	Marilyn Johnson,
Respondent-Appellant-Mother.)	Judge Presiding.

JUSTICE HARRIS delivered the judgment of the court.
Presiding Justice Cunningham and Justice Karnezis concurred in the judgment.

ORDER

Held: The trial court did not abuse its discretion in finding appellant Susan G. unfit pursuant to grounds m and p of the Adoption Act. Also, the court's finding that it was in the best interest of S.G. to terminate Susan G's parental rights was not against the manifest weight of the evidence.

No. 1-11-0512

¶ 1 Respondent Susan G. appeals the order of the circuit court terminating her parental rights as to the minor, S.G. On appeal, Susan G. contends her finding of unfitness should be reversed because (1) the finding under ground (m) of the Adoption Act (750 ILCS 50/1(D) (West 2006)) failed to identify a specific nine month time frame; (2) the finding under ground (m) for the initial nine month time frame is against the manifest weight of the evidence; (3) the finding under ground (m) for times other than the initial nine month period is against the manifest weight of the evidence; (4) the finding under ground (p) is against the manifest weight of the evidence; and (5) the finding that it is in the best interest of the minor to terminate Susan G.'s parental rights is against the manifest weight of the evidence. We affirm.

¶ 2 JURISDICTION

¶ 3 The trial court entered judgment in a final termination hearing order on January 14, 2011. Respondent filed a notice of appeal on February 10, 2011. Accordingly, this court has jurisdiction pursuant to Illinois Supreme Court Rule 307(a)(6) governing interlocutory appeals as of right after the termination of parental rights. Ill. S. Ct. R. 307(a)(6) (eff. Feb. 26, 2010).

¶ 4 BACKGROUND

¶ 5 S.G. was born on December 13, 2006. On January 29, 2007, the State filed a petition for adjudication of wardship pursuant to the Juvenile Court Act, 705 ILCS 405/1 *et seq.* The trial court entered an adjudication order on July 30, 2007, finding S.G. to be dependent pursuant to section 405/2-4(b) of the Juvenile Court Act because she was without proper care due to her parent's physical or mental disability. The order did not find that S.G. was abused or neglected. On that date, the trial court also entered a disposition order pursuant to section 405/2-27, in

No. 1-11-0512

which the court found both the mother and father unable to care for S.G.¹ S.G. was placed in the guardianship of an Illinois Department of Children and Family Services (DCFS) administrator.

¶ 6 Permanency orders entered on November 27, 2007, and March 18, 2008, stated “return home within 12 months” as the permanency goal. However, each order noted that the mother had not made substantial progress toward that goal. On March 19, 2009, the goal was changed to substitute care pending court determination on termination of parental rights. The reason for the change was the mother’s failure “to engage in reunification services over the course of this case.”

¶ 7 On August 19, 2009, the State filed a motion to permanently terminate parental rights and appoint guardian with power to consent to adoption. On August 20, 2010, the State filed a pleading outlining the specific nine-month time frames under which Susan G. was found to be not making reasonable progress: from April 30, 2008, through January 30, 2009; January 30, 2009 through October 30, 2009; and October 30, 2009 through July 30, 2010.

¶ 8 At the unfitness hearing on October 12, 2010, Anne Devaud testified as an expert in clinical psychology. Devaud stated that she gave Susan G. a ground (p) evaluation and met with her four times. She also reviewed hundreds of documents and records, and concluded that Susan G. had a long-term developmental disability, specifically fetal alcohol syndrome. Devaud testified that she conducted four tests with Susan. The I.Q. test showed that Susan had an I.Q. of 70, which was in the borderline range of low to extremely low. On the Child Abuse Potential

¹S.G.’s father, Dave Jones, signed a Final and Irrevocable Consent to Adoption in July, 2008. Therefore, he took no part in the proceedings below and is not a party in this appeal.

No. 1-11-0512

Inventory, Susan G. had elevated scores meaning she responded in a manner similar to how known abusers respond. The Parental Stress Inventory indicated that she had a lot of stressors in her life and felt overwhelmed coping with them. Devaud also gave Susan G. the Parent Opinion Questionnaire.

¶ 9 Devaud opined that Susan G.'s condition had a negative effect on her ability to parent S.G. Susan G. was impulsive and had difficulty following rules or complying with social norms. She had strong mood reactions and found it difficult to manage conflicts. She was also easily distracted (a symptom of fetal alcohol syndrome) and did not always pay attention to S.G.'s safety. Also, Susan G. doesn't take input well and is conflicted interpersonally, which could lead to violence and aggression. Her strong mood reaction can result in chaotic interpersonal relationships that put S.G. at risk for abandonment, neglect, or harm by a paramour due to Susan G.'s poor judgment. Devaud stated that Susan G. knew the basics on how to keep a child safe. On the positive side, Susan G. loves S.G. and expresses joy in being with the child. With supervision, she could manage the child and her supervised visitations were judged appropriate and adequate. Nothing in the record indicated that Susan G. had a substance abuse or alcohol problem. She lives independently and takes care of herself, although her residential situation lacks stability. However, Susan G. was not taking medications and denied she needed medications. Devaud opined that even if she were to become medically compliant, "her improvement would still be limited and not sufficient to appropriately discharge parental responsibilities."

¶ 10 Marybeth Spitzer testified as a child welfare advance specialist with DCFS. Spitzer

No. 1-11-0512

testified that this case was brought to the court on the grounds of inadequate supervision. In March, 2007, she created Susan G.'s first service plan with tasks for her, including therapy, taking parenting assessment and classes, psychotropic medication monitoring, participating in substance abuse assessment and visitation. At the time of the January, 2008, service plan Susan G.'s progress toward the goal of S.G. returning home was rated unsatisfactory. Susan G. did not provide the name of a therapist and she had not seen a therapist. She did not engage in the parenting capacity assessment or substance abuse treatment, and participated in parenting classes a little over a year after being referred. Susan G. did visit S.G., but missed several visits without calling to cancel. As of the July, 2008, service plan, Susan G. was still rated unsatisfactory in the goal of returning the minor home. She still did not provide information showing she was seeing a psychiatrist or engaged in therapy. She also did not participate in parenting classes. Spitzer stated that when she evaluated Susan G.'s service plan in June and July of 2008, and Susan G. told her that she was participating in therapy and had completed parenting classes at an organization which offers neither service.

¶ 11 However, Susan G. was rated satisfactory in her visitation with S.G. although the visits were sporadic and she did not call to cancel when she failed to show. On a few occasions, visitation did not occur because S.G. was unavailable. Susan G. offered make up extended visits. Although Susan G. would sometimes curse or get angry during the visits, overall she was appropriate most of the time. She often brought clothes and snacks for S.G. and received generally favorable reports regarding her visits. In 2008, Susan G. also received satisfactory ratings for following up appointments scheduled with her medical team, maintaining mental

No. 1-11-0512

health stability, taking her medication, seeing her psychiatrist at regular intervals, and completing parenting assessment and following the recommendations. This rating was due to the fact Susan G. resided in a nursing psychiatric facility at the time. She received unsatisfactory ratings for cooperating with psychiatric treatment, participating in therapy, maintaining contact with DCFS, following rules of her placement, participating in parenting classes and substance abuse assessment.

¶ 12 In January, 2009, Susan G. received a satisfactory rating for taking medication, signing consents for release of information, reporting unusual incidents, taking a parenting class, visitation, and maintaining contact with Spitzer. As of the January, 2009, service plan Susan G. was rated unsatisfactory towards the goal of returning S.G. home. A parenting assessment conducted in January, 2009, indicated that a child in Susan G.'s care would be at high risk due to her low cognitive functioning. Susan G. admitted she did not participate in substance abuse assessments as of January, 2009. There was also no verification that Susan G. received psychiatric treatment in January, 2009. On July 14, 2009, the service plan was reviewed again and it was noted that Susan G, was noncompliant with services.

¶ 13 Susan G. presented the testimony of Tracy Vinson. Vinson testified that she is a therapist and parent coach. She provided counseling services to Susan G. based on a referral from DCFS in April, 2009. Susan G. consistently attended her one hour weekly sessions until May 26, 2010, when she was incarcerated for attempted arson. She attended one of Susan G.'s psychiatric appointments in 2009. Susan G. was prescribed medications, but in April, 2010, she informed Vinson that she stopped taking the medications because she was pregnant. Vinson spoke with

No. 1-11-0512

Susan G. about managing emotions, anger, relationships with men, coping skills, and managing symptoms of ADHD or bipolar disorder. She observed a visitation where Susan G.'s interactions were appropriate, and Susan G. told her that she enjoyed her visits. Vinson testified that she never felt Susan G. could parent independently, nor did she think Susan G. should have unsupervised visits with S.G. Vinson observed repeated episodes where Susan G. displayed manic highs and manic lows.

¶ 14 Gretchen Pointer testified that she is a caseworker assigned to the family case and the case of S.G.'s sibling, but she did not have S.G.'s case. She was responsible for providing services to Susan G. Pointer observed several visits between Susan G. and S.G. from 2009 to 2010. Susan G. acted appropriately and brought clothing and snacks to the visits. She had three unsupervised visits with her children at McDonalds and did not harm her children in any way. While Susan G. was incarcerated, she did not visit with her children. While under Pointer's supervision, Susan G. complied with the psychiatric evaluation and was seeing a psychiatrist. At one time, the psychiatrist thought Susan G.'s symptoms were in remission and took her off the medications. Pointer testified that Susan G. would at times disappear before finally letting Pointer know her whereabouts. In 2009, Susan G. went to Wisconsin for a week and a half, missing two visits. In 2010, she went to California for three weeks, also missing visits. Pointer stated that she did not believe Susan G. was making progress toward getting custody of S.G.'s sibling while she was assigned to the case.

¶ 15 The parties also stipulated that if called to testify, Knerew Dickerson, Darnell Bowman, Dorothy Jordan and Keenan Stokes would state that they are friends of Susan G. They have

No. 1-11-0512

observed her with her children and believe she has excellent parenting skills. She always behaved appropriately toward the children and loves them. She has clothed, washed, changed, fed and provided gifts to the children and has never hurt anyone in her care.

¶ 16 The trial court found Susan G. unfit pursuant to grounds (m) and (p) of the Adoption Act. As to ground (p), the court found testimony that Susan G. suffered from fetal alcohol syndrome uncontroverted, and that Susan G. had a developmental disability. As to ground (m), the court noted that Susan G. cared for S.G; however, she “was simply unable to sustain a consistent record or compliance with required services that were calculated for reunification.”

¶ 17 Evidentiary exhibits at the hearing included the March 1, 2007, January 17, 2008, June 3, 2008, January 8, 2009, and July 14, 2009, client service plans for S.G. Also included was the curriculum vitae of Anne Devaud, and a response to a request for clinical information from the Cook County Juvenile Clinic. The response concluded that Susan G. has a long-term developmental disability, fetal alcohol syndrome, which results in significant behavioral and mood instability negatively impacting her ability to parent. Furthermore, such behavioral/mood instability, coupled with Susan G.’s strong impulsivity and poor judgment, makes it unlikely she will obtain sufficient employment to live independently. Her behavioral and mood issues also diminish her ability to plan, anticipate and solve problems to meet the complex demands of parenting. Even with medication, Susan G.’s improvement would not be sufficient to enable her to discharge her parenting responsibilities appropriately.

¶ 18 At the best interest hearing on January 14, 2011, Peggy Chapman testified that she is the caseworker assigned to S.G., and S.G. has been in a foster home from the time she was a week

No. 1-11-0512

old. The foster mother also has a six year old son and a college-age child that comes home periodically. At Chapman's last visit, she saw no signs of abuse or neglect. There have been no unusual incidents or hotline reports regarding S.G.'s care. S.G. calls her foster mother "mommy" and has a good relationship with the six year old. S.G. regularly attends preschool, but is developmentally delayed and needs additional speech and language services. Over the past sixteen months, Chapman has noticed that S.G. has become friendlier, more potty trained, and is talking in sentences. The foster mother is helping S.G. in these areas. S.G. also attends church with her foster family and they generally spend a lot of time together. The foster mother has signed a commitment to adopt S.G. S.G. also has a biological brother with whom she visits at the agency office. The foster mother will allow S.G. to visit with her brother, but only at the brother's home. She has no interest in S.G. maintaining contact with Susan G., and does not want to meet her. Chapman testified that the attachment between S.G. and her foster mother is great, and S.G. is integrated into the life of her extended foster family.

¶ 19 On cross-examination, Chapman stated that the foster mother has been slow at times to get S.G. the services she requires. S.G. also exhibits behaviors such as hoarding food, raiding the refrigerator at night, and playing in her feces. S.G. has not yet been assessed for services. Chapman also observed a visit between S.G. and Susan G. In January, 2011. Susan G. acted appropriately, although she had to be reminded to play with S.G. S.G. does not call Susan G. "mother" or anything at all. Susan G. has expressed her love for S.G. and an interest in maintaining contact with her. She brought S.G. food, snacks, and clothing on the visits. Chapman did not bring S.G. to visit Susan G. while she was incarcerated.

No. 1-11-0512

¶ 20 Counsel for Susan G. made an offer of proof that if Steven Stokes were to testify, he would state that he has observed her with his child over an extended period of time and her parenting skills are very good. He felt his child was never at risk and he is confident in her parenting abilities. Susan G. testified that her last visit with S.G. went well and that she loves and respects her. She believes she is capable of taking care of S.G. She brings food to her visits, and S.G. runs to her and calls her “mommy.” They get along very well together and do things together. Susan G. stated that she has been stable for two years and supports herself through disability payments and savings. She stated that she went to Wisconsin to visit family, and went to California because someone suggested she could find a job there. When she could not find a job, she returned to Illinois. Susan G. acknowledged that she was incarcerated for seven months during the past two years. She testified that she was now taking medication and if given the chance to have S.G. returned to her, she would do everything in her power to keep S.G. safe.

¶ 21 The trial court found that it was in the best interest of S.G. to terminate Susan G.’s parental rights.

¶ 22

ANALYSIS

¶ 23 Susan G. first argues that the trial court’s judgment should be reversed because the State did not file a pleading in the original record reflecting the nine-month period used to determine her unfitness, and the trial court’s oral order appears to consider matters beyond the initial nine-month period. Susan G. did not object to the failure to file the pleading at trial, resulting in forfeiture of the issue on appeal. See *Thornton v. Garcini*, 237 Ill. 2d 100, 106 (2010).

Furthermore, although the pleading itself was not contained in the record, the record shows that

No. 1-11-0512

the parties were aware of the pleading and pursuant to a stipulation by the parties on June 22, 2011, the pleading was presented in the supplemental record submitted to this court. Any error that may have occurred was therefore harmless. Finally, even if the trial court did not make clear which nine-month period it's decision was based on, this court is not limited by the trial court's reasoning and may affirm the court's judgment on any basis supported by the record. *In re Marriage of Holtorf*, 397 Ill. App. 3d 805, 811 (2010).

¶ 24 Under the Juvenile Court Act of 1987 (705 ILCS 405/1-1 *et seq* (West 2006)), the involuntary termination of parental rights is a two-step process. *In re C.W.*, 199 Ill. 2d 198, 210 (2002). First, the State must prove the parents unfit pursuant to section 1(D) of the Adoption Act (750 ILCS 50/1(D) (West 2006)). *In re C.W.*, 199 Ill. 2d at 210. Such proof must be clear and convincing since the termination of parental rights is a complete severance of the parent-child relationship. *In re C.N.*, 196 Ill. 2d 181, 208 (2001). The trial court is in the best position to determine the credibility of witnesses; therefore, this court will not reverse the trial court's finding regarding parental fitness unless it is against the manifest weight of the evidence. *In re C.N.*, 196 Ill. 2d at 208. A finding is against the manifest weight of the evidence if the opposite conclusion is clearly evident. *In re C.N.*, 196 Ill. 2d at 208.

¶ 25 Here, the trial court found Susan G. unfit pursuant to section 1(D)(m) and (p) of the Adoption Act. Unfitness under (m) is defined as

“Failure by a parent (i) to make reasonable efforts to correct the conditions that were the basis for the removal of the child from the parent, or (ii) to make reasonable progress toward the return of the child to the parent within 9 months

No. 1-11-0512

after an adjudication of neglected or abused minor under Section 2-3 of the Juvenile Court Act of 1987 or dependent minor under Section 2-4 of that Act, or (iii) to make reasonable progress toward the return of the child to the parent during any 9-month period after the end of the initial 9-month period following the adjudication of neglected or abused minor ***.” 750 ILCS 50/1 (D)(m) (West 2006).

Reasonable efforts and reasonable progress are separate grounds for unfitness. *In re Daphnie E.*, 368 Ill. App. 3d 1052, 1066 (2006). Reasonable effort is judged by a subjective standard based on what is reasonable to expect from a particular person to correct the conditions that caused the removal of the child from the parent. *In re Daphnie E.*, 368 Ill. App. 3d at 1067. Reasonable progress, however, is judged by an objective standard requiring “measurable or demonstrable movement toward the goal of reunification. *In re Daphnie E.*, 368 Ill. App. 3d at 1067. Such progress may be shown by a parent’s compliance with service plans and court directives, “in light of the condition which gave rise to the removal of the child, and in light of other conditions which later become known and which would prevent the court from returning custody of the child to the parent.” *In re C.N.*, 196 Ill. 2d 181, 208 (2001). Findings under either reasonable efforts or reasonable progress will support a finding of unfitness. *In Re C.N.*, 196 Ill. 2d 181, 210-22 (2001).

¶ 26 Here, S.G. was adjudicated dependent due to the mental or physical disability of a parent on July 30, 2007. The initial nine-month period ended on April 30, 2008. Spitzer, a child welfare advance specialist with DCFS, first met with Susan G. in March, 2007, to create a

No. 1-11-0512

service plan. In the January, 2008, and July, 2008, service plans, Susan G. was rated unsatisfactory with regard to psychiatric services because she had not provided any information indicating she was seeing a psychiatrist or engaging in therapy. In January, 2008, Susan G. did receive a satisfactory rating for psychiatric services and treatment, however, for the fact she was residing in a nursing psychiatric facility at the time. However, she also received an unsatisfactory rating for cooperating with psychiatric treatment and taking required medication. Although she participated in some parenting classes in January, 2008, she did not engage in parenting classes as of July, 2008. There was no verification that she received psychiatric treatment as of January, 2009. She received a satisfactory rating for visitation, although she missed about half her visits and did not call to cancel. She stated that she missed some visits due to medical appointments and offered make-up extended visits. Her visits are generally appropriate, and she received favorable reports regarding her visits with S.G.

¶ 27 Due to Susan G.'s inability to follow through consistently with psychiatric treatment, medication, and parenting classes, Spitzer rated her unsatisfactory with regard to her progress toward the goal of returning S.G. home in the January, 2008, July, 2008, and January, 2009, service plans. Also, in 2009 and 2010, Susan G. sometimes disappeared to other states without informing her caseworker. Visits with S.G. did not occur during those periods. Evidence in the record supports the finding that Susan G. is unfit pursuant to subsection (m), for the initial nine-month period, and even for the subsequent nine-month period. The trial court's determination was not against the manifest weight of the evidence.

¶ 28 The trial court also found Susan G. unfit due to a developmental disability pursuant to

No. 1-11-0512

subsection (p). Unfitness under (p) is defined as the

“Inability to discharge parental responsibilities supported by competent evidence from a psychiatrist, licensed clinical social worker, or clinical psychologist of mental impairment, mental illness or mental retardation, *** or developmental disability *** and there is sufficient justification to believe that the inability to discharge parental responsibilities shall extend beyond a reasonable time period.”

750 ILCS 50/1 (D)(p) (West 2006).

The terms “mental retardation” and “developmental disability” are defined in the Mental Health and Developmental Disabilities Code (Code) (405 ILCS 5/1-100 *et seq* (West 2006)). Section 1-116 of the Code defines mental retardation as

“significantly subaverage general intellectual functioning which exists concurrently with impairment in adaptive behavior and which originates before the age of 18 years.” 405 ILCS 5/1-116 (West 2006).

Section 1-106 of the Code defines developmental disability as

“a disability which is attributable to (a) mental retardation ***; or to (b) any other condition which results in impairment similar to that caused by mental retardation and which requires services similar to those required by mentally retarded

persons.

Such disability must originate before the age of 18 years, be expected to continue indefinitely, and constitute a substantial handicap. 405 ILCS 5/1-106 (West

2006).

No. 1-11-0512

To prove a parent unfit under (p), the State must present competent evidence (1) that the parent suffers from mental impairment, mental illness, or mental retardation sufficient to prevent the discharge of normal parental responsibilities; and (2) to conclude that the inability will extend beyond a reasonable time period. *In re M.M.*, 303 Ill. App. 3d 559, 566 (1999).

¶ 29 Devaud, a clinical psychologist, testified that she gave a ground (p) assessment to Susan G. and met with her four times. She also reviewed hundreds of documents and records. Devaud concluded that Susan G. suffers from fetal alcohol syndrome, which is a long-term disability, and has an extremely low I.Q. of 70. As a result, she is impulsive, has difficulty following rules or complying with social norms and is easily distracted. Her strong mood reactions lead to chaotic interpersonal relationships that could put S.G. at risk for harm, neglect or abandonment. In Devaud's opinion, Susan G.'s condition negatively affects her ability to discharge her parental responsibilities. Vinson, a therapist and parent coach, testified that she provided services to Susan G. who was referred to her in April of 2009. Although she regularly attended the one hour weekly sessions with Vinson, Susan G. stopped seeing her in May, 2010, because she was incarcerated for attempted arson. Vinson worked with her on handling emotions and anger, managing her relationships with men, and managing the symptoms of ADHD and bipolar disorder. Vinson also attended a psychiatric appointment with her in 2009, and has observed repeated episodes where Susan G. displayed manic highs and manic lows. Vinson testified that she does not believe Susan G. can parent independently, nor should she have unsupervised visits with S.G. The trial court's finding that Susan G. is unfit pursuant to section 1(D)(p) is not against the manifest weight of the evidence.

No. 1-11-0512

¶ 30 Susan G. disagrees, arguing that Devaud’s testimony that her disability “negatively impacts” her ability to discharge her parental responsibilities, and that she would not likely be able to independently discharge her responsibilities in her lifetime, does not equate to an inability to discharge parental responsibilities as outlined by the statute. Although Devaud did not use the exact language in the statute, the meaning of her testimony is clear. Her statements support a finding that Susan G. is unfit pursuant to ground (p).

¶ 31 Once the trial court finds a parent unfit, the next step in an involuntary termination proceeding is for the court to determine whether it is in the best interests of the child to terminate parental rights. 705 ILCS 405/1-3(4.05) (West 2006). “[A]t a best interest hearing, the parent’s interest in maintaining the parent-child relationship must yield to the child’s interest in a stable, loving home life.” *In re D.T.*, 121 Ill. 2d 347, 364 (2004). The State bears the burden of proving by a preponderance of the evidence that termination is in the child’s best interests. *In re D.T.*, 212 Ill. 2d at 365-66. This court will not reverse the trial court’s determination in a best interest hearing absent an abuse of discretion. *In re Deandre D.*, 405 Ill. App. 3d 945, 953 (2010).

¶ 32 Section 1-3(4.05) sets forth factors the trial court must consider in making a best interest determination. These factors include:

“(a) the physical safety and welfare of the child, including food, shelter, health,
and

clothing;

(b) the development of the child’s identity;

(c) the child’s background and ties, including familial, cultural, and religious;

- (d) the child's sense of attachments, including:
 - (i) where the child actually feels love, attachment, and a sense of being valued (as opposed to where adults believe the child should feel love, attachment, and a sense of being valued);
 - (ii) the child's sense of security;
 - (iii) the child's sense of familiarity;
 - (iv) continuity of affection for the child;
 - (v) the least disruptive placement alternative for the child;
- (e) the child's wishes and long-term goals;
- (f) the child's community ties, including church, school, and friends;
- (g) the child's need for permanence which includes the child's need for stability and continuity of relationships with parent figures and with siblings and other relatives;
- (h) the uniqueness of every family and child;
- (i) the risks attendant to entering and being in substitute care; and
- (j) the preferences of the persons available to care for the child.” 705 ILCS 405/1-3 (4.05) (West 2006).

The trial court need not explicitly mention every factor in rendering its determination. *In re Deandre D.*, 405 Ill. App. 3d at 954.

¶ 33 At the best interest hearing, Peggy Chapman, the worker assigned to S.G., testified that S.G. had been in a foster home from the time she was a week old. The foster mother also has a six year old son and a college-age child that comes home periodically. S.G. calls her foster

No. 1-11-0512

mother “mommy” and has a good relationship with the six year old. S.G. regularly attends preschool and Chapman noticed S.G. making great strides developmentally with the help of her foster mother. S.G. attends church with her foster family and they generally spend a lot of time together. The foster mother also has signed a commitment to adopt S.G. S.G. has a biological brother and the foster mother will allow S.G. to visit with her brother, but only at the brother’s home. Chapman testified that the attachment between S.G. and her foster mother is great, and S.G. is integrated into the life of her extended foster family. At Chapman’s last visit, she saw no signs of abuse or neglect and there have been no unusual incidents or hotline reports regarding S.G.’s care. The trial court found that S.G. was well integrated as a member of the foster family, and it is the only home she has ever known. S.G. derives her sense of identity from her foster family. The trial court’s determination that termination of parental rights is in the best interest of S.G. was not against the manifest weight of the evidence.

¶ 34 For the foregoing reasons, the judgment of the circuit court is affirmed.

¶ 35 Affirmed.