

2015 IL App (2d) 140755-U
No. 2-14-0755
Order filed April 14, 2015

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IN THE
APPELLATE COURT OF ILLINOIS
SECOND DISTRICT

<i>In re</i> I.P., a Minor)	Appeal from the Circuit Court
)	of Kane County.
)	
)	No. 09-JA-70
)	
)	
(The People of the State of Illinois, Petitioner-)	Honorable
Appellee, v. Shaneya P., Respondent-)	Linda S. Abrahamson,
Appellant).)	Judge, Presiding.

JUSTICE SPENCE delivered the judgment of the court.
Justices Burke and Hudson concurred in the judgment.

ORDER

¶ 1 *Held:* The trial court's finding that respondent was unfit because she failed to make reasonable progress towards I.P.'s return home during the nine-month period from October 8, 2012, to July 8, 2013, was not against the manifest weight of the evidence. Therefore, we affirmed.

¶ 2 Respondent, Shaneya P., appeals the trial court's ruling finding her unfit to parent her daughter, I.P.,¹ who was born on August 14, 2009. Respondent argues that the trial court findings that she (1) failed to make reasonable progress towards I.P.'s return from October 8,

¹ We use the child's initials because her first name is distinctive. See Illinois Supreme Court Rule 341(f) (eff. Feb. 6, 2013).

2012, to July 8, 2013, and (2) failed to demonstrate a reasonable degree of responsibility as to I.P.'s welfare, were against the manifest weight of the evidence. We affirm.

¶ 3

I. BACKGROUND

¶ 4 The State filed a petition for an adjudication of neglect on December 3, 2009, alleging that I.P.'s environment was injurious to her welfare, in that respondent allowed a gun in the home and allowed cannabis to be consumed while I.P. was present. The father was alleged to be unknown. The trial court found probable cause for neglect based on an officer's testimony, and temporary custody of I.P. was given to the Department of Children and Family Services (DCFS).

¶ 5 On February 22, 2010, respondent stipulated to the alleged neglect, and the trial court adjudicated I.P. to be a neglected minor.

¶ 6 At a dispositional hearing on March 17, 2010, caseworker Lisa Entrekin of Catholic Charities testified that respondent was having one-hour weekly visits. Respondent's visits also involved her older daughter, K.P.² Respondent's service plan dated January 4, 2010, required her to have appropriate housing and income, parent mentoring from her therapist, family therapy, and a substance abuse assessment. Respondent had already completed a psychological evaluation. She was cooperative in the area of providing age appropriate discipline, but there had not been a lot of progress in this regard, and the subject was being addressed through parent mentoring. All of respondent's drug tests were negative. Respondent was not currently working; she received disability income. The caseworker recommended that I.P. be made a ward of the court so that respondent would have time to correct the actions that brought I.P. into the system. The caseworker agreed that besides counseling issues, respondent was compliant with

² According to testimony, K.P. was six years old at the time of the hearing and in a relative placement, whereas I.P. was living with a foster family.

the service plan. The permanency goal was to return home.

¶ 7 The trial court found that although respondent was “very willing,” she was unfit and unable to care for I.P. because of her “parenting style and mood swings.” There were some services that respondent had to complete before the environment was safe for I.P. to return. The trial court made I.P. a ward of the court, with custody and guardianship placed with DCFS. The trial court stated that respondent should be able to have supervised visits with I.P. as frequently as possible.

¶ 8 At a permanency hearing on September 28, 2010, Cathy Zeier, a supervisor for Catholic Charities, provided the following testimony. Respondent was involved in individual therapy and parent mentoring, and she had complied with every service requested by the agency. Respondent’s counselor said that while respondent was good in her attendance, she was not progressing and had been hostile in the sessions because she would not address the incidents and her responsibility leading to the children’s removal. Respondent was visiting both girls once per week, and she also went to K.P.’s foster home, which was respondent’s grandparents’ home, an additional two to four times per week. Zeier did not think that respondent’s bond with I.P. was as strong as her bond with K.P., which was possibly due to the less frequent visits with I.P. or because respondent was more attentive to older children. I.P. was in daycare and progressing at a normal rate. She was doing very well in the foster home and starting to walk and talk. Respondent was attending all scheduled visits with I.P. However, I.P. was having difficulty before and after visits, such as problems sleeping and physical illness.

¶ 9 Respondent testified that the situation had made her a better person. She now associated with different people, spent time at church and with her family, and had improved in school. Respondent regretted not being able to spend more time with I.P. because she was missing I.P.’s

milestones, and I.P. seemed to think of her as a babysitter rather than her mother. Respondent had done some things wrong that resulted in the children being removed from her custody, but she now lived for her children and would protect them.

¶ 10 The trial court stated that there had been a “402 Conference” and it agreed with all of the attorneys that there had primarily been one service provider for respondent and that another perspective on the case would be helpful. Respondent had made reasonable efforts, but according to reports from the therapists and caseworkers, there had not been reasonable progress. The goal would remain return home.

¶ 11 Another permanency review hearing took place on March 23, 2011. Entrekin testified in relevant part as follows. I.P. was 1½ years old and receiving physical and occupational therapy. Respondent had recently completed anger management counseling and was successfully discharged. Respondent had moved to a new two-bedroom apartment in Naperville, which was appropriate housing, and also had appropriate income through disability payments. Due to a contract change with DCFS, respondent had recently started individual counseling with a new counselor. Respondent was compliant with all services and doing very well with the parent mentor. The mentor reported that respondent was “at ninety-nine percent of all visitation,” had appropriate interaction, was nurturing, and was “well bonded.” Respondent now planned out a visitation schedule and showed appropriate discipline, which was lacking before. Respondent was currently receiving two hours of visitation per week on Saturdays, and the agency believed that there should be discretion for unsupervised visitation, which the parent mentor also recommended. In order to achieve a return home, Entrekin believed that the focus of the services needed to be to continue to work with the parent mentor, see how respondent could care for the children unsupervised, and continue individual counseling. Respondent had another baby, J.P.,

in October 2010, and he was currently with her “under a safety plan.” Entrekin recommended the goal of return home within 12 months because respondent was doing “everything that the Agency has asked,” “[t]here [was] a significant bond between her and the kids[,] and she would like the kids returned home.” Entrekin believed that respondent was “moving forward.”

¶ 12 The trial court stated that the Catholic Charities report indicated that I.P. did not want to leave respondent at the end of visits whereas the CASA report seemed to have contradictory information about I.P.’s behavior at the end of visits. The trial court asked the foster parents to comment. The foster mother stated that I.P. was acting out more upon being returned to them. “She [was] a completely different little girl when she [came] home from when she left and she [was] very clingy with” them. She also had difficulty sleeping after visits. The foster mother further stated that I.P. was being given some inappropriate food. Respondent stated that candy found in I.P.’s diaper bag was from K.P., “just as a decoration,” not for I.P. to eat, and that respondent would comply with any dietary restrictions.

¶ 13 The trial court found the appropriate goal was return home within 12 months. Respondent had made reasonable efforts and reasonable progress, though not substantial progress. DCFS would be given the discretion to allow unsupervised visits, but not overnight visits.

¶ 14 On June 30, 2011, respondent filed a motion to modify visitation. She alleged that she was receiving unsupervised visitation for eight hours on Saturdays, and that DCFS and CASA were amenable to allowing overnight visitation with the children.

¶ 15 At a permanency review hearing on September 19, 2011, Zeier provided the following testimony, in relevant part. Zeier had become more involved in the case when the foster parents contacted her in March or April regarding I.P.’s reactions after visits. In February the visits were

two hours per week, and they were increased to between four and five hours in April based on respondent's progress on the service plan and the goal of return home. It was always difficult for I.P. after the visits, and her behavior became slightly worse after the length of the visits was increased, and she had difficulty sleeping. Therefore, the visits were reduced back to two hours. The visits were supervised for about two weeks after the foster parents reported that I.P. had made statements about corporal punishment. Based on interviews with respondent and K.P. and random drop-ins, there was no indication that spanking occurred. Respondent also reported I.P. making statements about "daddy" spanking her, and there was no father figure at respondent's house, though CASA reported that J.P.'s dad was frequently there. Zeier agreed that K.P. originally came into custody based on excessive corporal punishment. The visits with I.P. returned to being unsupervised in June or July and were about four to five hours. I.P. continued to make statements about corporal punishment, but I.P. never had any bruising, and the agency ensured that drop-in visits were conducted.

¶ 16 Respondent was living in Naperville in an apartment that was very clean and well-maintained. J.P. lived there, and K.P. had "returned home to visit." The visits with I.P. appeared to be fine, though I.P. appeared to be very quiet and have a "flat affect." I.P. was still having behavioral issues after the visits, so the agency had asked for a clinical assessment. I.P. did not cry when being driven from daycare to respondent's house and appeared fine when she was picked up. She talked more in the foster home, but she did talk in respondent's home as well. It was fair to say that I.P. had a difficult time with transitions, and it was to be expected that she would feel more comfortable in the foster house, where she grew up. Respondent was very cooperative with the agency. There were no concerns about the current parent mentor, but the agency was recommending that a different parenting mentor be used just to have another

perspective and a different treatment style.

¶ 17 Psychotherapist Terri Lee Dalton testified as follows. Respondent was referred to her for individual counseling through her former case manager. Dalton had seen her for eight sessions, beginning in March, and she had seen her interact with J.P. and K.P. Respondent appeared caring, set appropriate limits, disciplined J.P. appropriately, and was watchful. Respondent parented about 90% of the time, and the other 10% she would ask K.P. to do something, like grab a toy.

¶ 18 According to Dalton, respondent first had a hard time understanding why I.P.'s case was moving differently than K.P.'s case. She was now understanding that when babies are in foster care, they have a more difficult time attaching to their birth parents than older children. Respondent had made progress in being able to regulate her moods. She was also progressing on separating her needs from her children's needs, but she was still working on understanding how to handle those needs differently. When asked if it might be confusing for I.P. to go from a Caucasian family to an African American family, Dalton testified that in her past experience, it was often an issue. It would be helpful for Dalton to observe respondent with I.P., but an observation planned for the previous week was canceled due to a change in visitation.

¶ 19 We next summarize the testimony of Jennifer Frazier, the parenting coach. Frazier had a bachelor's degree in psychology, a master's degree in human service, and a degree in philosophy of counseling. Frazier had been meeting weekly with respondent for almost one year, since November 2010. Frazier had seen progress in respondent's understanding of age-appropriate activities and in her anger management. She had also seen respondent appropriately discipline the children, such as through counting and time-outs. Respondent seemed more assertive, competent, and sure of herself than when Frazier first started working with her. Frazier did not

have any concerns about the children's safety if they had unsupervised visits with respondent. Frazier knew the reason the children came into care; K.P. was removed because respondent had engaged in excessive corporal punishment when K.P. wet the bed. Frazier had talked to respondent about how bed-wetting could be the result of a medical condition, and Frazier suggested ways to manage the problem. Respondent was able to redirect the children as needed. Frazier was not aware of a concern that respondent was letting K.P. do too much of the parenting. Respondent "definitely [did] the parenting," and Frazier had not seen her use K.P. as an additional parent.

¶ 20 Frazier had observed respondent interact with I.P. before and during naps, during meal and snack times, at the park, at the mall, and at an art program. In total, Frazier had observed them together 20 to 30 times. I.P. followed respondent around the apartment, was comfortable with her, and called her "mom." Frazier had not observed I.P. feeling uncomfortable around respondent. I.P. was attentive towards respondent and laughed at her. I.P. had recently shown Frazier her bedroom in respondent's house and pointed out what she called "[m]y bed." Respondent was very affectionate with all of her children, and I.P. was physically affectionate towards her as well. There was a "strong bond" between respondent and the children. Respondent was patient, kind, and always willing to learn, such as taking a CPR class that Frazier had recommended. She frequently went to the library to get books, which she read to the children, and she bought age-appropriate crafts for them. She also did activities such as using a hula hoop, blowing bubbles, drawing, coloring, doing puzzles, watching Sesame Street, and going for walks. Respondent further planned meals and snacks and fed the children appropriate food, taking into consideration comments from I.P.'s foster parents. Respondent kept the children clean, kept their diapers changed, and was concerned about their health. Frazier

believed that I.P. would benefit from spending more time with respondent to establish a bond, and that the visits should be unsupervised. Frazier agreed that she had not seen how I.P. acted outside of respondent's presence. The trial court continued the hearing to October 4, 2011.

¶ 21 In the interim, on September 21, 2011, respondent filed a motion for an independent bonding assessment. She alleged that J.P. and K.P. were living with her; J.P. was not a ward of the court while K.P. was a ward of the court but placed with her. She argued that Dalton and Frazier had recommended that she receive more visitation with I.P., but CASA was now recommending that visits be suspended, and two assessments (conducted by Mary Gardner and Wendy Shankman) questioned respondent's parenting ability and I.P.'s comfort with her. Respondent requested that a bonding assessment be conducted to determine whether a bond existed between her and I.P. and whether I.P. could successfully transition from her foster parents' home back to respondent. The trial court later granted the motion.

¶ 22 On October 4, 2011, Wendy Shankman, a board-certified child therapist, provided the following testimony. She evaluated I.P. to determine any factors that were affecting her relationship and visitation with respondent. Shankman met with I.P. 11 times for a total of 13 or 14 hours. Shankman saw her in her biological home, in her foster home, at Shankman's office, and at I.P.'s daycare. Shankman first saw I.P. at the foster parents' house, and I.P. appeared to be very comfortable there. She was a very smart, animated, energetic, and engaging child. The four times I.P. came to the office (two of those accompanied by her foster parents), she was equally comfortable and playful. Shankman knew there were concerns about I.P.'s behavior after visiting respondent, so Shankman observed I.P. at daycare the day after a visit. I.P. was a little more reserved but still comfortable and engaging. At the end of the visit, I.P. was concerned about whether Shankman would be taking her for a ride or visit. It seemed to be

“prompted by concerns about the comings and goings that always seem to be a quality of her week, who is coming to get her, who is taking her.” When Shankman had first come to the foster home, I.P. had grabbed her foster mother’s leg and said that she did not want to go.

¶ 23 At respondent’s house, I.P. behaved very differently. She was much more cautious, guarded, and less animated; she had “more of a flat affect.” There were several occasions when I.P. did reach out for respondent’s attention, specifically during activities like puzzles and games. However, it would trail off and dissolve after a while; the positive interactions were not sustained for very long. Respondent seemed to have difficulty managing what each of the three children were doing. During the visits, Shankman had observed all three children have minor childhood scrapes or falls, which she believed could have been avoided if respondent had been more proactive. Respondent did not seem to know what to do to immediately address the situation, such as getting an ice pack or bandage.

¶ 24 I.P. did not seek much contact with J.P. during the time Shankman observed her. She did reach out for K.P. more and responded to her more; Shankman saw her running around with K.P. for 20 minutes, during which time I.P. was very animated and playful. Shankman also observed I.P. with just respondent on one occasion. When Shankman first got there, respondent was doing I.P.’s hair. I.P. seemed to just be tolerating it and was mainly focused on watching television. They later played a game, which I.P. seemed to enjoy. I.P. did not seem to be afraid at respondent’s house, but her entire demeanor was different, and she did not seem very comfortable. It seemed like she had developed a set of coping strategies to manage her time while she was there.

¶ 25 One concern that Shankman had was whether I.P. had been spanked during visits. Shankman had never seen I.P. being spanked, but during play therapy, I.P. was lightly spanking

a doll on the upper thighs. This behavior and labeling it as a spanking was unusual for a two-year-old. I.P. said that “mommy Shaneya” had spanked her.³ Respondent told Shankman that I.P. had told her that “daddy” had spanked her.

¶ 26 Shankman was also concerned that respondent was not able to read a lot of I.P.’s cues, which created tension in their interactions. For example, in trying to educate I.P., respondent would ask her a lot of repetitive questions about numbers and letters that I.P. was not equipped to answer. Such issues would typically be addressed through parent coaching or mentoring, or sessions with both I.P. and respondent.

¶ 27 The foster home was different than respondent’s home in that the foster home was larger with more child-friendly spaces. Respondent’s home was very dark, and the t.v. was a distraction because it was constantly on. The two different environments could be a part of what was causing I.P.’s difficulty transitioning.

¶ 28 Shankman had heard I.P. call respondent “mom,” which could have been in part from K.P. calling respondent “mom.” Outside of that environment, I.P. referred to respondent as Shaneya. Shankman did not think I.P. had a concept of respondent as her mother in comparison to her understanding of her foster parents as her mom and dad.

¶ 29 In cases where the goal was return home, Shankman generally recommended that visits increase from an hour to up to three or four hours, and then more frequent visits as a regular part of the child’s weekly routine. However, for I.P. she was concerned about the visits’ disruptions to her sleep and her overall adjustment on the days after. It would be helpful for respondent to have services to better understand her parenting of and interactions with I.P. Shankman

³ Shankman agreed that she did not write in her report that I.P. had identified respondent as spanking her. Shankman labeled this as an “omission on [her] part.”

recommended that I.P. remain with the foster family for the time being because Shankman did not believe that I.P. had a strong enough connection to respondent, so it would be potentially traumatic to her to disrupt her current stable home. It was premature to rule out the goal of return home, though Shankman was not sure what factors had contributed to the relationship not already being stronger. Shankman agreed that her focus was on I.P.'s readiness and not whether respondent had completed her services.

¶ 30 Doctor Mary Gardner, a licensed clinical psychologist, provided the following testimony. She had been practicing since 1991 and had done between 50 and 75 parenting capacity assessments for DCFS. She had done a parenting assessment of respondent in July 2010, and she was asked to do a new one in July 2011 due to J.P.'s birth and as an update. The most recent assessment involved a detailed history of respondent's life, an extensive review of documents, and a 90-minute observation of respondent with her three children at Gardner's office. During the observation, respondent's strengths were that she seemed to tremendously enjoy her children's company and was upbeat and happy. Respondent seemed to have a close, interactive relationship with K.P. I.P. also appeared to be very pleased to be in their company and did not appear anxious. Respondent was able to redirect the children.

¶ 31 In terms of weaknesses, respondent remained stationary for the entire time, whereas a parent of two young children should be active, moving around and bending. Also, most of respondent's redirection was done physically, such as by taking an arm or ankle, or asking K.P. to do tasks. K.P. ended up doing "a great deal of parenting" during the observation. Respondent also imposed limits without warning, like taking a toy away without first giving the children a verbal warning not to do something again. Such behavior could be alarming to a child and

decrease the ability to deal with frustration. Gardner would have expected the parent coach to discuss the subject of limit setting.

¶ 32 I.P. did not display much of an outward attachment to respondent, did not seek her out often for comfort, and did not initiate a lot of interaction with her; I.P. appeared more interested in the other children. Respondent attempted to speak with her in ways suitable to an older child, confusing I.P., and respondent had difficulty reading her cues. For example, respondent often engaged in tasks that she liked but in which the children did not have an interest. It was important for a parent to read children's cues so that the parent can respond appropriately both verbally and emotionally. In the first assessment, respondent had spent 45 minutes feeding I.P. but then kept trying to feed her even when she was turning her head away.

¶ 33 Gardner thought that a parent coach who was a "skilled interventionist therapist" might be able to help respondent. She was aware that respondent had been working with a parenting coach, but the coach's approach seemed to be supportive rather than directive. Respondent generally thought that her relationship with I.P. was going very well, which was concerning because she needed to be able to accurately assess the relationship's quality in order to improve it.

¶ 34 Gardner was also concerned about respondent's choice of fathers of the children and her decisions largely limiting the children's relationships with their fathers. Gardner did not believe that it was appropriate to prohibit a relationship with another parent under almost any circumstances. Gardner was additionally concerned about respondent's financial decisions. Since the last evaluation, Gardner had learned that respondent had received a \$100,000 settlement as the result of one of her siblings' deaths. Respondent said that she had given the money to her mother, and Gardner wondered why respondent had not used it for her children's

benefit. Gardner thought that even if the settlement occurred when respondent was 15 or 16 years old, she should have later asked for the money back or at least asked what happened to it. Gardner was further concerned that respondent had three children now, because it made parenting more difficult, especially with an infant. Respondent also stated that DCFS should not have taken I.P. away, showing that respondent was not taking responsibility for the events underlying the removal.

¶ 35 Another area of concern was that respondent was loud and aggressive during the observation. For example, when J.P. was crawling, respondent would suddenly grab his ankle and pull him back. When I.P. did not come when she was called, respondent grabbed I.P.'s arm and forcefully put I.P. on her lap. This could have been upsetting to I.P. given that I.P. was not seeking proximity to respondent during the visit. When asked if respondent currently had the capacity to parent I.P., Gardner opined that respondent's weaknesses outweighed her strengths. There was only a "slim possibility" that services, such as a different parenting coach's approach, could help respondent overcome her weaknesses. Gardner testified that there were a "great many issues and problems that have not been addressed for [respondent] [that] would probably make it very difficult."

¶ 36 Deborah Clifford, I.P.'s foster mother, testified as follows. I.P. was two years old and had been with them since December 2009, when she was taken into care. She received occupational and physical therapy for tremors and hypertonicity, which was tightness in her arms and legs. I.P. also had "some hip rotation" and sensory issues, like aversion to water. I.P. was making progress through services, and Clifford and her husband worked with her at home. The foster parents also had a daughter who was almost 16 and an almost four-year-old African American boy whom they had adopted in March. Clifford described I.P.'s daily routine, which

included visiting respondent on Mondays. Sometimes she verbally said that she did not want to go, and other times she would cry and hang on to Clifford. After visits, she was very clingy, and in the past couple of months she had started becoming aggressive, such as biting, head-butting, and repeatedly throwing a cup from the table. Sometimes reassurances would help her stop. I.P. was also having difficulty sleeping during the nights when she had a visit. I.P. sometimes talked about what she did with K.P. At the end of June or beginning of July, I.P. said that respondent spanked her on her legs and hurt her neck. Clifford did not see any bruises, but she reported the information. Clifford loved I.P. and felt like her mother; she would adopt I.P. if she were available for adoption.

¶ 37 Tasha Curry, a caseworker with the Youth Service Bureau, testified as follows. She was the caseworker for I.P. for six months beginning in 2009 and had been reassigned to it about two months before the hearing. A “clinical staffing” was conducted on August 19 and September 7 of the current year by the DCFS “Clinical Team” of Jane Kelly and Laura Stocco. They issued a report stating that both I.P. and the foster parents were having a tough time transitioning in conjunction with the return home goal. Respondent was also having a hard time with transitioning because of I.P.’s lack of attachment. Recommendations for respondent were to learn to better pick-up on I.P.’s cues, be more aware of her developmental stages, and create an environment that would help transitioning, such as letting in more natural light to help I.P. feel safe. The report recommended that Dalton conduct family therapy. As far as visitation, the report recommended: more frequent but shorter visitation; allowing respondent to transport I.P.; continue unannounced drop-ins; and have some one-on-one visitation, without siblings present. The report also recommended having I.P. carry a “transitional object” between her foster home and respondent’s home, as well as having pictures of respondent in the foster home. The report

recommended that the foster parents continue the journal for communication and talk to I.P. before visits to help mentally prepare her. It also recommended that they undergo certain training to understand the goal of return home and their role in that goal. The agency was still supporting the goal of return home because respondent was compliant, had made a lot of progress, and was successfully parenting K.P. and J.P.

¶ 38 The trial court found that there was consensus that the goal should remain return home. The court believed that there was some evidence of spanking or hitting, but not so much that it would not find that respondent had not made reasonable efforts and reasonable and substantial progress. The evidence indicated that I.P. was having anxiety and difficulties before and after visits. Frazier was a supportive parenting coach who had worked with respondent a long time and was on her side, and her testimony appeared to put respondent in the best light. Portions of Dr. Gardner's testimony were "disturbing," but her observations about respondent pulling J.P. back and grabbing I.P. by the wrists were credible, as well as the observation of K.P.'s role as more of a parent than a child. Shankman spent more time with I.P. in a variety of settings, and she identified strengths and weaknesses. Having respondent pick up I.P. from daycare and having more frequent visits would help facilitate the goal of return home, with the understanding that there was no reason to hit or spank a child. It would also be a good idea to have a new parenting coach who could give a critical assessment of respondent's current abilities, without knowledge of her background or any previous relationship with her.

¶ 39 A status hearing took place on November 2, 2011. DCFS stated that a new parenting coach had been assigned but did not know whether the sessions had begun. Dalton was willing to begin attachment therapy, and the first appointment was the next day. Visitation had decreased to two hours twice a week due to a pending DCFS investigation resulting from a

police phone call and “broken vase.” Clifford stated that she and her husband were not opposed to additional training but had not been contacted about it.

¶ 40 At a permanency review hearing on March 28, 2012, with all parties concurring, the trial court found that the goal of return home for K.P. had been achieved, and her case was closed. Regarding I.P., Curry testified as follows. Respondent and I.P. had begun attachment therapy sessions with Dalton in November. Dalton said that the sessions were going well, and I.P. was more comfortable around respondent and seeking more interaction. Curry had observed I.P. seeking out and engaging respondent more, such as hugging respondent and asking to stay with her. I.P. was still having trouble transitioning home to the foster parents after visits, which was not unusual for a two-year-old. Therapy for I.P. and her foster parents had begun. The foster parents had not always been supportive of the goal of return home but had recently begun to work with respondent more. Based on respondent’s visits with and advice from Dalton, the agency did not feel like respondent currently needed a parenting coach as well. Curry had observed her implement suggestions from Dalton, such as letting I.P. ease into visits and taking her to the grocery store to buy food for dinner. For the past two months, visits were twice a week for six hours. Respondent had been involved in transporting I.P., and that seemed to help.

¶ 41 Curry testified that there was a call the previous week about the condition of respondent’s apartment. Curry went the next day and saw trash bags there, but they were filled with blankets and clothing, and respondent explained that she was rearranging the apartment. There were also some minor housekeeping issues. Curry came back 24 hours later, and everything had been cleaned up.

¶ 42 We next summarize the testimony of Anita Jones Thomas, a licensed psychologist. Thomas prepared an assessment looking at respondent’s general parenting abilities and her

attachment and bonding with I.P. Thomas reviewed documents regarding the case and met with respondent individually for 90 minutes in November 2011. She also observed respondent with I.P. and J.P. for 90 minutes in March 2012.

¶ 43 Thomas was surprised at respondent's high level of insight into the circumstances leading to her children being removed. Respondent was also reflective about her parenting abilities and attributed changes that she had made to individual therapy and parent coaching, as well as church and other support sources. Both I.P. and J.P. seemed very comfortable with respondent and were very interactive with her. Respondent was attentive to the children and allowed them to direct activities, and they were verbal and affectionate with her. The interactions appeared very natural. I.P. called respondent "mom" and recognized J.P. as a sibling. Thomas opined that I.P. was very attached and very well-bonded with respondent. Thomas believed that I.P. was able to form an attachment with respondent before she was removed, which then allowed her to form attachments with other people. Thomas had no concerns regarding I.P.'s relationship with respondent, and she did not believe that there were any barriers that would prevent respondent from successfully parenting her. Thomas believed that the reunification process should happen at a more rapid pace because the longer I.P. stayed in the foster care system, the more difficult and challenging it would be for her. Thomas recommended that the foster parents talk more frankly with I.P. about the transition and express how nice it would be to spend more time with her mom and siblings on a permanent basis.

¶ 44 The trial court found that respondent had made reasonable efforts and reasonable and substantial progress. The goal of return had not yet been achieved solely based on I.P.'s readiness, not based on any failure on respondent's part. The trial court gave DCFS discretion to allow overnight visits, and it set the case for a status hearing.

¶ 45 The next status hearing for which there is a transcript available was August 6, 2012. The State represented there had been three investigations with DCFS, one related to a bruise on I.P.'s face, one related to an incident with respondent's younger sister, and one related to a rash. All three investigations had been determined to be unfounded. During the investigations, visitation had been reduced to weekly one-hour supervised visits. At the hearing, the parties referenced reports suggesting a goal change. Respondent's counsel requested an increase in visitation, and the State argued that additional visitation be "tabled" until a decision was made regarding the goal. The trial court stated that it would leave visitation up to the agency's discretion.

¶ 46 A permanency review hearing was set to take place on September 26, 2012, but it was continued to October 4, 2012, because respondent had new counsel. On that date, Elba Young Karim testified as follows. She was the clinical director and a therapist at Stillwaters Behavioral Health in St. Charles. She specialized in attachment and worked with kids who were in foster care or had been adopted. I.P. was referred to Karim for therapy in June 2012 based on I.P.'s difficulties before and after visitation with respondent. Karim was told that I.P. was hypervigilant about the visits and very clingy with the foster parents afterwards.

¶ 47 Karim had been working with I.P. for three months. At the beginning, the goal was return home, and Karim had planned to eventually work with the foster family and respondent together, with I.P. However, "[e]arly on" "there was some disruption in the case and *** the direction of how the case should go was changed based on some of her behaviors." Some kind of report was made which made the return home less imminent, so the transition portion of therapy was changed so as not to confuse I.P. That is, because it was less clear that I.P. was going to return home, they did not want to confuse her as to where she would end up, or she could decrease her trust in what adults told her. If the therapeutic goal was reducing I.P.'s

anxiety, the transitional therapy would have been important in doing that, though “it may have taken a different form.”

¶ 48 I.P. had just turned three and was very gregarious. She typically came to the office once per week with one of her foster parents. On days I.P. had visited respondent, she was much more clingy to her foster mother. She was also more bossy, which was a way of controlling her surroundings. I.P. had made statements that she did not feel safe during visits with respondent. She said that respondent hit her on the cheek, but she would not elaborate. She also said that J.P. was mean to her and that respondent was mean and nice. I.P. described respondent’s home as “scary,” saying that things were loud and that respondent and J.P. yelled at each other. I.P. said that sometimes there were other people present, whom she could not seem to identify, and said that on one visit she felt alone. I.P. seemed very attached to K.P., who was at school during some visits, which might explain why I.P. sometimes felt alone. Children could feel scared even if adults determined that there was no safety issue.

¶ 49 I.P. was showing signs of disruptive behavior syndrome, which was when a child showed features of conduct disorder and/or reactive attachment disorder but did not meet all criteria. Conduct disorder was a belief that society’s rules do not apply to you, and reactive attachment disorder was the inability to form typical reactions to people throughout one’s lifetime. The features I.P. exhibited were hypervigilance, high anxiety, and bossiness to control situations. The disorders usually set in by age five, so I.P. had a “small window” to alleviate her symptoms. If I.P. did not feel safe with respondent but had to keep visiting her, it would decrease her trust in her foster parents and damage trust with all caretakers. Karim opined that a decision needed to be made about permanency because I.P. could “not last in this sort of limbo of not knowing of [sic] where she is going to belong permanently and not expect to see some damage to her

emotional self.” Otherwise, I.P. would determine that no adults were to be trusted, which would damage her relationships throughout her life.

¶ 50 I.P. identified both respondent and her foster mother as her “real mom.” As I.P.’s therapist, Karim did not have an opinion one way or another about where I.P. should live, but rather just that a decision needed to be made. If the visits continued, Karim recommended changing the visits’ environment so that I.P. felt safer. Karim agreed that I.P. had been able to form positive attachments to her foster parents, which could show “resiliency” in forming future attachments. If a child was feeling unsafe in an environment, it was not helpful to just increase visits because it would exacerbate feelings of anxiety and distrust. First having family therapy would be helpful. Karim was concerned that I.P. had been visiting with respondent her whole life but did not feel safe in respondent’s home. It was possible that anxiety that the foster parents felt towards the visits contributed to I.P.’s feelings of anxiety. A child could also pick up on the biological parents’ anxiety. If an attachment was secure, a small change in frequency of visits over a short time would not really change the attachment.

¶ 51 Katherine Hall, a case aide for Youth Service Bureau, provided the following testimony. She had transported I.P. to visits and had supervised visits. There were times that respondent’s home was very messy, with food on the floor and furniture blocking areas. There was a cycle in which respondent would clean up the apartment, and then it would become very messy again. During the visits, only respondent, K.P., and J.P. were supposed to be present, but during the most recent visit, respondent’s sister’s four young children were there. There were others present during about 40% of all visits.

¶ 52 Respondent spent time with I.P. by doing her hair and nails. I.P. was very quiet and barely talked. The children usually watched television and played by themselves, and

respondent would feed them. Recently, respondent had begun doing crafts with them. Respondent disciplined J.P. by picking him up by his arms and putting him in a corner. She also yelled at him, and Hall had seen her hit him in the arm with a brush. J.P. did not listen well and would scream when respondent yelled at him. Hall had seen J.P. hit I.P., and respondent would tell him not to hit his sister. Once when Hall and I.P. were leaving, a man road up on a bicycle and said “hi, baby” to I.P. I.P. said that the man was her daddy, and that he had come to respondent’s house. Respondent had the neighbor’s pit bull with her when three of the visits were supposed to begin, and I.P. was extremely afraid of the dog. When I.P. was supposed to go to visits, she would sometimes cry or delay leaving. When she left visits, she would tell Hall that she did not want to go back to “mommy Shaneya.”

¶ 53 Hall testified that on September 12, there was a visit at “Funway.” Respondent called after the visit was supposed to start and said that she would be late. Respondent eventually arrived 47 minutes late and had K.P. and one of K.P.’s friends with her. Hall told respondent that she was not supposed to have additional people with her during visits, and respondent said that she could leave the nine-year-old friend in the van, which was improper.

¶ 54 On October 9, 2012, the parties stipulated that no Hot Line calls were made about the condition of respondent’s apartment during the reporting period.

¶ 55 Curry testified as follows. After the last permanency hearing, they created a transition plan with increased visitation and overnight visits. There were two one-night overnights and one two-night overnight in May. As late as mid-May, Curry was comfortable with the goal of return home. In the same time frame, Curry had recommended that the foster parents undergo additional training. However, the training was not available, so they engaged in therapy instead.

¶ 56 The overnights stopped because I.P. had a bruise on her cheek after one of the visits and reported that respondent had slapped her. At that point, visits returned to being supervised. Also in May, the agency learned of a second investigation about a report that respondent had tied and confined one of respondent's sisters. In June, one visit was canceled because I.P. was kicking and screaming and would not get into the agency van.

¶ 57 The complaints were determined to be unfounded around mid-July. The agency did not increase visitation afterwards. It did begin play therapy for I.P. with Karim. The agency was seeking "legal consultation on where to go from that point." Visitation was currently one day per week for two hours, supervised. Curry thought that the next step was to have a "clinical" to talk about how to increase visitation and "how it would work for" I.P. In the three years the case had been pending, respondent had always had at least weekly visits.

¶ 58 Respondent had shown progress in parenting in some ways, such as letting I.P. settle into visits before engaging with her too much. Curry still had several concerns, such as unapproved guests, I.P.'s fear of the home, and respondent's inability to identify risk factors. On a visit in mid-July, respondent and K.P. met Curry at the door for a visit with I.P. They had left J.P., a toddler, alone in the bathtub, which Curry told respondent she could not do. Respondent said that there was only a little bit of water, and when Curry said that one inch of water could be dangerous, respondent said that she would check on him every 10 minutes. Curry insisted that he be supervised, and respondent sent K.P. to do so. On another visit, J.P. started jumping around and dancing on top of a glass table. Respondent and K.P. laughed. Curry said that it was not safe, and respondent said that he did that all of the time; she did not seem to understand that it was dangerous. Once, J.P. spit on Curry when he greeted her. Respondent apologized but did not discuss the behavior with J.P. This showed respondent's limited ability to have appropriate

expectations of a child and lack of appropriate discipline. Curry also did not see appropriate activities for the children's developmental ages. Respondent further had relatives in the house during visits who were not approved to be there, even though the agency had many discussions about not having any guests during visits. Having a dog around was also a problem because it scared I.P., and it was agency policy that no dog could be out while a worker was present. Even after discussing the issue, respondent had the dog in the hallway with her on other visits where Hall was supervising.

¶ 59 At the last permanency hearing, respondent's home was clean and uncluttered. A couple of weeks after the overnights ceased, the house started becoming dirty and cluttered. Once, there was trash spilled on the kitchen floor and J.P. began eating an egg roll from it. There were also many bags of clothes obstructing a door or a closet. Respondent did clean up the apartment, but then it got bad again; it was a cycle that had repeated throughout the case. The messiness was not at a point where it was a health hazard, but it showed that respondent was not identifying that children needed certain spaces. It also showed that respondent was having trouble managing a home.

¶ 60 Respondent had been receiving counseling with Dalton, but Dalton largely became unavailable towards the beginning of summer, and the agency had not had much contact with her. Curry suggested that respondent go to Stillwaters where the agency could get regular reports and feedback, but respondent only wanted to continue with Dalton. Respondent had better contact with Dalton and was allowed to schedule appointments with her.

¶ 61 Respondent seemed to have short-term fixes for problems, like temporarily cleaning the apartment. Another example was that there were issues with J.P.'s behavior when I.P. visited, so respondent decided to not have him present at those times, which did not help with integrating

them for the goal of return home. Respondent seemed to be able to make progress at times but then not maintain it.

¶ 62 At this point, the agency was recommending the goal of substitute care because I.P. had been in the system for about three years, respondent had not been making consistent change, and I.P. had not been handling the transition well. The agency had decided to recommend changing the goal around the end of August.

¶ 63 On November 16, 2012, Dalton provided the following testimony. She began seeing respondent in March 2011 for individual counseling, and from January through May 2012, she had seen respondent almost weekly. The focus was to address respondent's ability to be with her children, specifically I.P. Attachment sessions between I.P. and respondent began in January 2012 and ended up taking place about every other week. The last session was in May 2012, right before the DCFS report was made. The children appeared clean and appropriately-dressed. Respondent was initially over-exuberant with I.P., but by March 2012, respondent had softened her approach. Between March and May, she made definite progress, and I.P. began seeking her out for physical contact, which was something to be expected in a trusting relationship. In the last session on May 17, 2012, all of the children were present, and everything "looked very normal." I.P. was very affectionate with respondent, and the goal of attachment seemed "pretty close to being complete." It was fair to say that respondent had a harder time with all three children at once.

¶ 64 In late May 2012, the goal was return home, and Dalton supported that goal. Dalton believed that respondent was making progress and had no concerns about the plan to return I.P. home in June 2012, as long as respondent had services in place.

¶ 65 Zeier testified that on November 13, 2012, Hall called her about a difficult visit. Hall was 30 minutes late bringing I.P. for the visit because I.P. did not want to leave daycare, and respondent was verbally threatening her. Hall related that at one point, respondent kneeled down behind I.P. and yelled, “Lord Jesus, punish those who destroy.” Zeier offered to call the police, but Hall said that the situation had calmed down. I.P. stayed the full length of the visit and gave respondent a picture and hug at the end. However, Hall later said that she (Hall) was afraid to return to respondent’s house. Based on respondent’s reported behavior, Zeier sent her a letter stating that visits would no longer be conducted in her house. Zeier agreed that respondent thought that Hall was recording the visit, and that there was a discussion about a traffic ticket.

¶ 66 Respondent testified that Hall had confronted her about a traffic ticket, and respondent showed her the ticket. Respondent next went to I.P. and sang and prayed over her, which she often did. Hall held up her phone like she was recording respondent, and respondent said that was disrespectful. Hall said that she was going to leave, and respondent said that she would call the police so that they could document both sides of the story. After that, things calmed down, but Hall then said that she had to force I.P. to visit respondent. Respondent said that Hall should not be saying such things in front of the child. Hall was on her phone at various times during the visit, but it ended well.

¶ 67 The State, DCFS, and CASA requested that the goal be changed to substitute care pending the court determination of termination of parental rights. Respondent argued that DCFS never increased visitation after the incident reports turned out to be unfounded because DCFS had unilaterally decided on a goal change, and that caused I.P. to regress.

¶ 68 The trial court made its ruling on November 26, 2012, stating as follows in relevant part. On March 12, 2012, respondent was found to have completed all of her plan’s terms, and it was

contemplated that I.P. would return home in June 2012. However, when Hot Line reports were made, the transition plan was suspended, and I.P. was put in play therapy. After May 15, 2012, services were focused on reunification, but there was a “holding pattern” until the screening in July. At that point, discussions were about substitute care, and no additional reunification services were implemented. Applying the factors set forth in *In re S.J.*, 368 Ill. App. 3d 749, 756 (2006)⁴, I.P.’s age did not preclude a return home under Karim’s testimony. The factor of available options for permanence was neutral, as both return home and substitute care could provide permanence. Current placement of the child did not preclude a return home. Regarding the child’s emotional, physical, and mental condition, the previous six months were very emotional for I.P. She was very attached to her foster parents and did not feel safe with respondent, and this factor favored substitute care. The next factor was the types of services offered and the availability of service. The transition services here did not fail, so that factor favored a return home. The last factor was the status of siblings, and this factor favored a return home.

¶ 69 The trial court stated that because the May reports were determined to be unfounded, it was not giving them any weight. The concerns about respondent continuing to have many people in the home and the home’s cleanliness were ongoing and nothing new, so it was not giving those issues any weight. The dog’s presence was bad judgment but not a safety risk. I.P.’s fear of respondent’s home, respondent’s difficulty parenting and disciplining all three kids, J.P.’s aggressive behavior, and respondent’s trouble setting appropriate limits were potential risk factors that a parenting coach could help with. There were some safety concerns about J.P. in the

⁴ The case applies the factors set forth in section 2-28(2) of the Juvenile Court Act of 1987 (705 ILCS 405/2-28 (West 2004)), for determining a child’s permanency goal.

tub and on the glass table, and with respondent hitting him with a brush. The trial court also noted that J.P. had always been with respondent and that K.P. had been returned home to her.

¶ 70 The trial court stated, “I find that [respondent] is as ready today as she was in March of 2012, but that [I.P.] is considerably less ready due to the termination of the transition plan and suspension of return home services.” It set the goal as return home but added a protective order due to concerns about respondent parenting three children. Respondent was required to participate in protective daycare for J.P. and I.P.; participate in services with Karim; not exercise any corporal punishment; and not allow anyone other than the children to be present during visits. A transition plan needed to be implemented immediately. The trial court would allow DCFS to present evidence as to whether it (DCFS) made reasonable efforts from May to August 2012, after which the case was delayed due to respondent’s new counsel. The trial court requested to be updated on the case’s status every two weeks by letter.

¶ 71 At a hearing on January 31, 2013, the trial court found that DCFS’s efforts from May 16, 2012, to August 31, 2012, were not reasonable because transition therapy was not continuing. However, based on agency reports from December 2012 and January 2013, the agency’s lack of efforts had been remediated. It was entering a finding of reasonable efforts for the agency “at this time.” The trial court further found that respondent was having weekly visits with I.P. and that the agency was looking to increase visits, but the therapist could not approve the recommendation without observing visits in the home. The agency was addressing “contract issues related to this change.” Respondent and I.P. were having individual counseling, but family counseling had not yet begun.

¶ 72 On March 5, 2013, DCFS filed an emergency motion to modify the visitation order, alleging that one of respondent’s bathrooms had a sewage problem and that the apartment had

bed bugs. A court order entered on the motion stated that the agency would obtain releases to speak to the landlord and handle the concerns.

¶ 73 At a permanency review hearing on May 21, 2013, Karim provided the following testimony. She had been providing therapy for I.P. and had also become respondent's therapist in January 2013. One of the primary goals was attachment with I.P., which was a goal that had existed for respondent in prior therapy since at least 2011. Respondent was late by up to half an hour for some visits, and she did not give a specific reason as to why. She also missed about half of the sessions. Respondent said that she was sick, and Karim believed that at one point respondent was hospitalized, though she never received any verification.

¶ 74 At times Karim had concerns about respondent's perceptions matching reality, as she would generally say that I.P. was very close to her and looked forward to visits, but sometimes she would say that I.P. did not want to visit her. Her description of her relationship with various family members would also change from session to session or even within the same session. It was difficult for Karim to know what was objectively happening and whether the relationships were actually changing if respondent's perceptions were changing too often. This also affected respondent's parenting as it affected whether respondent could distinguish her needs from I.P.'s.

¶ 75 Karim had assigned homework to respondent, most of which she did not complete. One assignment was to describe a virtual celebration that included I.P.'s favorite things. Respondent did not turn anything in but verbally described a welcome home party. However, her description focused on herself rather than I.P., which also indicated respondent's inability to see things from someone else's perspective. It would be very difficult to bond and attach to I.P. without empathy. Karim thought respondent's expectations were for I.P. to make efforts to reach out to her, but children needed adults to be able to read their cues. Karim had only observed them

together during two visits, but respondent seemed unwilling or unable to read I.P.'s cues. For example, at a visit at McDonald's, I.P. was very stiff, extremely quiet, had a glazed look on her face, and at one point completely turned her back away from respondent while seated on a bench. Respondent did not react to those cues. Respondent stroked I.P.'s hair in an appropriate way, but I.P. appeared to just be tolerating it, and she looked uncomfortable. When they moved to the play area, I.P. waved a few times but did not seem to interact with respondent, and when it was time to leave, I.P. came the first time she was called, which was unusual.

¶ 76 Karim had seen I.P. by herself and occasionally with her foster mother. During those times, she was very physical and extremely talkative. The difference in her behavior when respondent was present was "startling," which showed that she was not comfortable being herself with respondent, which was not healthy. The difference in the behaviors meant that there needed to be a plan for permanency.

¶ 77 Karim had been working with I.P. since the previous summer. They had made progress toward treatment goals up through November or December 2012, but then it started to "decompensate" because visits with respondent became irregular after that. I.P.'s behavior became worse in terms of bossiness, defiance, and picking on her foster brother, which were all different ways of trying to have control and feel safe. When the visits were cancelled, I.P. did not usually know about it ahead of time. At one point it was known that respondent was in the hospital, and I.P. was not interested or concerned that respondent was sick, which spoke to the level of the relationship. I.P.'s symptoms of reactive attachment disorder had become "quite a bit worse" than when Karim was in court six months before. I.P. was feeling less safe and therefore becoming more disobedient and defiant. She was showing symptoms four out of seven

days now, whereas it had been 1½ days out of seven before. If the ambiguity in whom I.P. would live with was not determined soon, she would end up with reactive attachment disorder.

¶ 78 If the visits were made regular again, it could possibly deactivate I.P.'s coping mechanisms. A strategy to help would be more attachment work. Respondent would have to commit to doing some of the intervention exercises that she had not been doing. However, respondent was raising two children and considered herself a good parent. She had told Karim that she did not see a need to do anything different for I.P.

¶ 79 I.P. had expressed to Karim that she considered her foster family to be her primary family. I.P. had reported that respondent had said that they were not her real family, and Karim had personally observed such communication during the second visit. This sentiment created a greater feeling of insecurity for I.P. because it made her question if she would ever belong anywhere and feel safe. It also showed respondent putting her own needs ahead of I.P.'s needs.

¶ 80 At the last hearing, Karim had talked about having a transition plan between the two homes to make sure that rules and expectations remained the same. The foster mother agreed to meet with respondent, but when Karim asked respondent about it in general terms, she did not seem agreeable to it and said that she did not trust the foster family. Two weeks before, Karim asked respondent directly about having such a meeting, and respondent said that she was not interested in doing that.

¶ 81 As a therapist for both I.P. and respondent, Karim would have concerns if I.P. was immediately returned to respondent. Karim did not think that respondent could "identify risk and safety features in the relationships and in the environment." Services had been offered to respondent in these areas for at least three years. Respondent had become better in sharing information, but Karim did not think that therapeutic progress had been made in her time with

respondent. Karim did not believe that more interventions would help because respondent had had the same goals with different agencies for a number of years. Respondent had done better at some times and worse at others, and Karim thought that respondent was “at a maximum parenting potential right now.” Karim had observed that I.P. would seek more safety and attachment with her (Karim) than respondent, even though I.P. had not known Karim for nearly as long.

¶ 82 Karim did not think that there was a way to return I.P. home without damaging her because her primary attachment would be disrupted. Karim thought respondent was well-meaning and cared very much about I.P., but Karim thought that there were emotional, psychological, cognitive, and environmental concerns. If I.P. were returned to respondent, she would most likely end up with reactive attachment disorder. Karim agreed that it was a possibility that I.P. could form an attachment with respondent.

¶ 83 In the time that Karim had been on the case, I.P.’s relationship with respondent had deteriorated rather than improved. Although respondent loved I.P., it was like they spoke two different languages. It was the adult’s responsibility to learn the child’s language, and that had not happened here.

¶ 84 The permanency hearing resumed on June 5, 2013, with Curry testifying as follows. During the last reporting period, the primary service for respondent was to attend individual therapy in the hopes that it would lead to more comprehensive attachment therapy and family therapy. Karim did not think that respondent was ready for family therapy. Respondent missed one individual therapy appointment because K.P. was in the hospital and one when she was in the hospital. Three appointments were canceled because respondent was sick, another four because of doctors’ appointments, and two more because respondent was in extended care.

¶ 85 On March 27, 2013, the agency learned that respondent was 12 or 13 weeks pregnant, and respondent said that she had liver issues related to the pregnancy. If respondent had let the agency know earlier, it could have made accommodations to schedule make-up visits or phone sessions. Curry agreed that when respondent disclosed her pregnancy, she said that she had just recently found out as well. The baby's father was the same as J.P.'s father. Respondent was supposed to be discharged from the extended-care facility on April 12. After her release, she missed only one therapy appointment for a doctor's appointment.

¶ 86 Karim had recommended that respondent allow I.P. to lead some activities, but respondent tended to direct everything. At home, almost every visit seemed to consist of t.v. time, eating a snack, and doing I.P.'s hair. Curry expected to see more physical and educational activities, which had previously been discussed with respondent.

¶ 87 Curry had observed three or four visits in the past six months. The first two were in respondent's home, and the second two were in the library. The first home visit was "pretty positive" because I.P. and respondent were doing a computer game together. The second home visit was one of the typical visits with watching t.v. and doing hair, and respondent actually fell asleep several times during the visit. Curry saw affection at the first visit but not the next three.

¶ 88 On February 15, 2013, there was an anonymous call about the condition of respondent's home, and Curry went over. There were a lot of extra bags because respondent had seven other family members staying with her while they were transitioning. Respondent was supposed to have agency approval to have other people stay with her. One of the bathrooms had what appeared to be a sewage explosion or backup, with sewage on the walls, floor, and toilet. Curry suggested ways to clean the bathroom, but respondent said that it was the landlord's responsibility. When Curry came back four days later, respondent would not let her into the

apartment and said that she wanted the landlord to come first. Respondent's behavior was concerning because although she was not responsible for fixing the plumbing issue, she should have taken responsibility of cleaning up after it, especially with children in the house. Curry and Karim had similar concerns with respondent taking responsibility for services such as scheduling, transportation, and child care.

¶ 89 Respondent had been transporting herself to therapy for about 1½ months, but then her car broke down. The agency did not have resources for car repairs, but it said that it would combine transportation for visits and therapy. The expectation was that respondent would meet the vehicle outside, but she was chronically 20 to 25 minutes late. One time, respondent said that J.P. needed to be dropped off for daycare, but she had not called ahead to arrange to start earlier. Respondent's lateness went to concerns about her responsibility for things within her control.

¶ 90 There was a visit on February 27, 2013, where an aide reported that there were bed bugs in the apartment. There could not be a visit in the home again until the problem was remedied because it could otherwise spread the infestation, and the home had not yet been cleared by the landlord. There was a fumigation on March 23 and another one two weeks later. Curry contacted the landlord in mid-May, and he said that he was waiting to hear from the pest company if there needed to be another fumigation or if they needed to dispose of things in the home. Curry did not know if other apartments also needed to be treated. Once the home was cleared of bed bugs, home visits could begin immediately. Curry agreed that the Hot Line calls about the sewage and bed bugs were concluded to be unfounded, which meant that the incidents were determined not to be neglectful.

¶ 91 The agency was now recommending the goal of substitute care because of the lack of progress in the previous six months and because therapists believed that respondent had reached

her maximum capabilities. The goals in the case of maintaining the home, not having house guests, attending therapy regularly, and increasing attachment had not changed. The only other thing the agency could do was force a return home. Curry did not believe that a return home was in I.P.'s best interests, but if it had to happen, it should happen quickly as opposed to slowly according to Karim's recommendations.

¶ 92 The hearing was continued to June 7, 2013. Respondent provided the following testimony. She was late to many of her therapy appointments because the driver mostly came 15 minutes late to pick her up. They would drop J.P. off at daycare and then go to the therapy appointment. Traffic was often backed up. She missed an appointment on May 8, 2013, because the agency car broke down.

¶ 93 At the first session with Karim, Karim said that she should sign over her rights to I.P. Respondent believed that her visits with I.P. over the past six months had gone pretty well. Respondent gave her options of what to do, and I.P. showed affection through hugs and kisses. During visits, I.P. usually played in the room or watched t.v., or they would do crafts.

¶ 94 In a May conversation, respondent was talking about her pregnancy and said that I.P. was going to be an older sister again, like she was to J.P. I.P. started talking about the age of her foster brother, and respondent said she was not talking about him, she was talking about J.P., her brother, who was two years old. Respondent was not trying to say I.P.'s foster siblings were not real siblings, but rather emphasizing that J.P. was her brother because I.P. did not even remember who he was anymore.

¶ 95 Respondent had heard Karim's testimony that respondent thought that I.P. needed to come to her. That was true based on respondent's training with Dalton, who had said to give I.P.

space and let her approach respondent. Respondent agreed to meet with the foster mother but said that she did not trust her.

¶ 96 According to respondent, the landlord said that the extermination of the apartment was complete two weeks before. Four or five other apartments in the building also had bed bugs.

¶ 97 On June 14, 2013, Karim testified in rebuttal that she never discussed with respondent during the first session whether she should surrender her parental rights or sign a consent for adoption. They mostly talked about therapy goals and respondent's relationship with I.P. In subsequent sessions, they talked about what could happen if I.P. was or was not returned home. Karim never indicated that respondent should give up or that I.P. was better off with the foster parents.

¶ 98 The State, DCFS, and CASA argued that the goal should be changed to substitute care pending termination of parental rights. Respondent argued that the goal should remain return home.

¶ 99 The trial court found as follows. In March 2012, respondent was found to have made reasonable and substantial progress. She was working with Dalton, who observed her relationship with I.P. developing. In May 2012, there were several overnight visits. Later that month, several Hot Line calls were made, and visits became one-hour long and supervised. The transitional plan was suspended, and I.P.'s treatment became play therapy. Karim had testified that transition therapy could have continued in a different manner, and that is why the trial court had found no reasonable efforts by DCFS. Regardless, Curry testified that the visit in December 2012 was good. In the fall of 2012, the trial court found that respondent was as ready as she had been in March 2012, but I.P. was having more difficulty, which the trial court attributed to DCFS's failure to make reasonable efforts during the time frame.

¶ 100 In contrast, now both respondent and I.P. were less ready than they were in the fall of 2012. Last time the trial court blamed the failure of progress on the agency, but it could not do that today. It found Karim's and Curry's testimony credible. Since the last time, there had been raw sewage and bed bugs in the home. Neither of those things were respondent's fault or her ultimate responsibility as a tenant, but there is no evidence that respondent did anything other than wait for others, being the landlord and the agency, to solve the problems. Raw sewage with young children present was a safety concern. While there was no evidence that bedbugs presented a safety concern, respondent's reliance on the agency to resolve the issue was a concern, especially because the bedbugs prevented the observation of visits in the house, which was an important part of the transition plan.

¶ 101 Respondent's testimony that she was not late for visits was not credible. Curry had seen respondent fall asleep at visits with I.P. It was significant that respondent did not disclose her on-again relationship with J.P.'s father, which resulted in another pregnancy. Respondent did not complete the homework Karim gave her. Respondent had not taken much, if any, initiative on her own to make progress during the reporting period.

¶ 102 In evaluating the best interest factors, I.P.'s age and the amount of time spent in foster care favored substitute care. Both substitute care and return home would provide permanence, but because of the lack of progress and the fact that respondent was going to have another baby, return home did not appear viable within a reasonable time frame. The intent of the foster family regarding adoption was a neutral factor here. The emotional, physical, and mental condition of the child strongly favored substitute care because since last November, I.P.'s relationship with respondent had deteriorated. Respondent had not improved her ability to read I.P.'s cues, and she had trouble seeing things from I.P.'s perspective. She did not see the need to do anything

different for I.P. even though the onus was on respondent to develop the relationship. I.P.'s "dysregulation" and behavior issues had spread from being before and after visitation to spanning several days. Karim testified that I.P. did not have reactive attachment disorder at this time, but she was concerned that maintaining the status quo would push her that way. "I.P. [was] out of time." Regarding the types of services offered, the agency had put together an "impressive" plan for services around I.P.'s transition home. At the beginning of the year, respondent's attendance fell off; she had medical problems and was expecting a baby in October. At the same time, I.P.'s dysregulation increased, and the focus was on her.

¶ 103 For the availability of services, respondent did not avail herself of all services and those that she had, she failed to make progress. The failure to progress in individual counseling led to the failure to initiate family counseling. The failure to keep the house clean led to the failure to be able to observe visits there and have parent coaching. This factor therefore favored substitute care. As for the status of siblings, respondent testified that I.P.'s relationship with them had deteriorated over the last six months. The factor favored a return home but less than it did at the last permanency review hearing.

¶ 104 Based on the foregoing, and because respondent's progress over the last reporting period had not been substantial and return home was not in I.P.'s best interests, the trial court set the new goal of substitute care pending determination of termination of parental rights. DCFS's efforts over the reporting period were reasonable. Respondent had made efforts but they were not reasonable, and progress had not been substantial.

¶ 105 On July 10, 2013, the State filed a petition for termination of parental rights. It alleged that respondent had failed to: maintain a reasonable degree of interest concern, or responsibility as to I.P.'s welfare (750 ILCS 50/1(D)(b) (West 2012)); (2) make reasonable efforts to correct

the conditions that were the basis for I.P.'s removal, or to make reasonable progress towards I.P.'s return, during the nine-month period from February 23, 2010, through November 23, 2010 (750 ILCS 50/1(D)(m) (West 2012)); and (3) make reasonable efforts to correct the conditions that were the basis for I.P.'s removal, or to make reasonable progress towards I.P.'s return, during the nine-month period from October 8, 2012, through July 8, 2013 (750 ILCS 50/1(D)(m) (West 2012)).

¶ 106 A trial on the petition for termination of parental rights took place November 1 and 8, 2013; January 2, 2014; April 7 and 8, 2014; May 6, 13, 22, and 27, 2014.

¶ 107 Shankman provided testimony consistent with her testimony from October 2011. She further testified that she completed a second assessment on May 19, 2012. She had been asked to observe whether there was evidence of progress and what factors were playing a role. She observed I.P. twice at respondent's home, once at the office, and once at the foster home. There were some positive changes in I.P.'s behavior at respondent's house. She was much more animated and engaged and eager to show Shankman her bed, clothes, and toys. When respondent was doing her hair, she was more relaxed than before. Shankman was present at respondent's home when I.P. was going to stay overnight for the first time, and I.P. was excited, though she was clear that she going home the next day. Shankman observed I.P. coming back to the foster home the next day, and she had a meltdown there.

¶ 108 One concern Shankman observed about respondent's parenting was that she left J.P., who was about one-year-old, in the tub. Respondent also had difficulty managing two children, and when she was focused on I.P., J.P. started climbing on things. Respondent was then 'a little overly physical in pulling on him to get him from place-to-place.' Shankman also would have

expected I.P. to reach out to respondent more by that time, but she still had a stronger parental-type connection with K.P.

¶ 109 Shankman met with I.P. five times subsequently and prepared a report dated July 9, 2012. At one of the sessions, I.P. had a bruise on her cheek and first said respondent had hit her, then said that respondent would hit J.P., and then said that J.P. hit her. I.P. then said that she did not want to talk about it anymore. Shankman noted more aggression and conflict in I.P.'s playing. This showed I.P.'s stress level and difficulty managing the transition. At one time she said that she was pretending to be respondent, and she seemed to associate hitting and yelling with her. After visitation decreased as a result of the bruise, I.P. was not distressed about not visiting respondent, but it was another disruption that added to her confusion. At the time of her final report, Shankman's recommendation was that I.P. needed permanency, wherever it was. She believed that I.P. still considered the foster family to be her family and that there were significant questions as to her experiences in respondent's home that were causing her stress.

¶ 110 Shankman agreed that the decreased visits with respondent at the end of May 2012 to the time she wrote the report had a detrimental impact on I.P.'s relationship with her biological family. I.P.'s experiences in respondent's home, relating to whether she felt safe there, also had a detrimental impact. She would have greater concerns about respondent's ability to manage several children now that respondent had a four-week-old baby.

¶ 111 Anisa Diaz-Dixon, a mental health therapist, testified as follows. She worked with respondent from April 2009 to October 2010. The intent was to provide parenting and adaptive coping skills and therapy to address respondent's various moods. Respondent was diagnosed with "mood disorder not otherwise specified." She also had a reading disorder and had gone through traumatic experiences in her life.

¶ 112 Diaz-Dixon had concerns about respondent's ability to understand and incorporate what she was being taught into actual practice. Respondent recognized that the reason I.P. came into care was because of a bad situation, but she would frequently state that it was not her fault, not recognizing her role. Sometimes respondent would seem open to trying a parenting skill, but then in another session she would say that she was not raised to parent in that way and that things like time-outs were ineffective. Respondent would vacillate in progress. When observing respondent interact with the children, Diaz-Dixon had some parenting concerns that respondent let K.P. play too roughly with I.P. and that respondent did not recognize choking hazards.

¶ 113 Overall, there were times when respondent made good progress but then it became stagnant or "slid back," making it hard to measure any improvement. At the end of her time with respondent, Diaz-Dixon still had the same concern with respondent as she did at the beginning.

¶ 114 Curry provided testimony consistent with that of testimony from prior hearings. She additionally testified as follows in relevant part. She observed the bruise on I.P.'s face within days of the Hot Line call, and she asked I.P. about it. I.P. said that it happened at respondent's house but switched between whether respondent or J.P. had done it. From the end of May 2012 to November 2012, visits were two hours per week, supervised. The visits were also two hours from December to mid-February 2013. The therapists' suggestion was to have respondent develop a relationship with a therapist so they could get a better idea of what respondent should be doing on her end. The agency started talking about increasing visits to three hours, but on February 15, 2013, there was a Hot Line call that the apartment was unclean, and the sewage problem was identified. Later that month, bed bugs were discovered, which resulted in visits changing to public places. Around the same time to April 2013, respondent began attending only about half of the visits due to medical issues. Respondent did not have any visits for 2½ weeks

when she was in the hospital and an aftercare facility. Two-hour weekly visits started up again after that, around April 17, 2013, still supervised outside of the house. When the case's goal was changed in mid-June 2013, the agency decreased visits as a slow transition. In July and August, there were two, two-hour visits, in September and October there were single two-hour visits, and in the current month there would be one, one-hour visit. Visits never resumed at respondent's house because the agency never received verification that the bed-bug issue was resolved.

¶ 115 Curry agreed that between July 2012 and January 2013, the agency had discretion to increase visits but did not. Any increase had to be therapeutically discussed and recommended.

¶ 116 Respondent stopped seeing Dalton consistently in April 2012, and the last visit was in July 2012. When Curry had trouble contacting Dalton, respondent said that she had no trouble scheduling with her. Beginning in August 2012, the agency had requested respondent to attend therapy at Stillwaters because Dalton was no longer available. However, respondent refused until ordered to by the court at the end of November 2012.

¶ 117 During the period of October 18, 2012, to July 8, 2013, respondent was not consistently involved in services or visits. She was also not providing information about her "lifestyle," such as her pregnancy. When respondent did have visits, there were concerns such as respondent not acknowledging I.P.'s foster family and telling her that she was going to come home soon. For the service plan dated April 23, 2013, which "would go back to about October 2012," Curry rated respondent as unsatisfactory because respondent was not consistently participating in therapy and the home was not appropriate. Having J.P. attend protective daycare was part of the service plan based on his aggressive behavior, but respondent was not sending him one or two days per week. Respondent seemed to believe that it was the agency's responsibility to transport him there, but Curry had told her that they would not be providing transportation because it was

a short distance away. Curry also rated respondent unsatisfactory in the category of income because respondent had reported working but never provided the requested verification. The main issues in the client service plan were respondent's lack of participation and progress. She was not invested in parenting, mental health, and completing homework assignments. It was the least participation from respondent that Curry had seen.

¶ 118 In the service plan dated November 27, 2012, which "went back to" May 2012, respondent's overall rating was also unsatisfactory. There were inconsistencies with services, Hot Line calls, unapproved people and a dog at visitation, and respondent's refusal to participate in counseling services at Stillwaters. Since the goal had been changed to termination, the agency had continued to offer services, but respondent had only participated in one therapy session in August. She did attend the visits with I.P.

¶ 119 Curry testified that there was a Hot Line call based on an incident that occurred on October 12, 2013. Respondent said that she had slipped on J.P.'s vomit while she was holding the baby, Nehemiah, and that they were going to the hospital. The discharge paperwork showed that Nehemiah had a skull fracture. There was a safety plan put in place, but not one that removed care of the children from her.

¶ 120 Karim provided testimony consistent with her previous testimony. She additionally testified that from the summer to early fall 2012, I.P. was potty-trained but was wetting her pants at times corresponding to visits, which showed that she was anxious and felt unsafe. During the same period, she would get upset if anyone complimented her hair. Respondent was doing I.P.'s hair, but I.P. seemed to think of it negatively. In October 2012, after Karim testified in court, I.P. said that Karim "told on [her]" and was not her friend. If a person could not trust her therapist, she could not benefit from therapy. I.P. said a few things about getting in trouble if she talked

about respondent. In March 2013, she specifically said that respondent told her not to talk to Karim. I.P. was currently further away from a reactive attachment disorder diagnosis, which Karim attributed to decreased visitation.

¶ 121 Respondent was often late to her own therapy appointments with Karim. She did not volunteer an explanation, but when asked, she would say that the driver was late picking her up or that she had a hard time getting started on her day. Karim had a hard time believing the former explanation because the driver would often call Karim and say that she was waiting for respondent. In a therapy session on April 17, 2013, respondent said that if she died, the foster family would win. This was another example of how respondent had not progressed, as it showed that she was thinking only of herself rather than I.P.'s best interests.

¶ 122 At the end of May 2013, I.P. said that respondent told her that she could bring the new baby to show and tell by herself. When Karim talked to respondent about it, respondent did not seem to think that there would be anything wrong with dropping the baby off at school with I.P. In the same session, respondent said that it was not her fault that I.P. got taken away and that it would not be her fault if I.P. did not return.

¶ 123 On July 4, 2013, respondent admitted to Karim that respondent was untruthful in her June 2013 testimony that Karim had said that she should sign a consent for adoption. Respondent said that her family told her to say those things to get I.P. back, but it backfired. Karim thought that this showed that others could easily manipulate respondent, which negatively impacted her parenting ability. During the same session, respondent said that maybe God was giving her N.P. (the baby) because He was taking away I.P. This thought process was concerning because the traumatic loss of one child cannot be filled with a different person.

¶ 124 In August 2013, respondent said that she did not want to come in for therapy anymore if Karim would not guarantee that coming to the appointments would result in I.P.'s return home. Karim agreed that the purpose of the sessions was to aid in reunification with I.P. Respondent did not come in October, and her last session was in November 2013. Respondent did not seem interested in being there. She said that everything was going great with the baby and did not mention that there was a Hot Line call that he was injured.

¶ 125 Respondent had said that if I.P. was not returned to her, she would not allow her to see K.P. I.P. had a much stronger bond with K.P. than with respondent. At the current time, Karim was not therapeutically recommending continued visits with respondent, but she was recommending sibling contact. Karim opined that respondent made slight progress with her into describing some events that caused her PTSD, but she made minimal or no progress in attaching with and parenting I.P. For family therapy to have begun, Karim would have needed to be sure that respondent would follow directions. However, respondent did not do homework assignments, did not implement parenting suggestions, and there were attendance gaps. It was crucial to have the first few family sessions go really well, or they become more difficult.

¶ 126 Karim did not think that respondent recognized the difference between her needs and her children's needs, did not think that she was effectively reaching out to the children to form an appropriate bond with them, and also had concerns for the children's physical safety.

¶ 127 Entrekin testified consistently with her prior testimony. Laura McCoy, a supervisor at the Youth Service Bureau, also provided testimony.

¶ 128 Frazier provided testimony consistent with her prior testimony. She further testified that in addition to her parent coaching sessions with respondent, for six months respondent voluntarily attended a support group that Frazier facilitated for women with children in DCFS

custody. Respondent would also attend various workshops that Frazier suggested. Respondent would implement the techniques Frazier suggested and was able to follow through in the future. Frazier saw her relationship with respondent as a professional relationship. At the end of her services with respondent, Frazier told her that she felt her “job with her was done, complete.” Frazier was aware that there was still a referral for respondent to have more parenting services.

¶ 129 Thomas provided testimony consistent with her previous testimony. She further testified that based on her interview with respondent, it seemed clear that she had individual relationships with each of her children and was trying to determine the best way to parent them based on their personalities. Respondent recognized her role in the situation that led to I.P.’s removal.

¶ 130 Thomas testified that if respondent spent a lot of time doing I.P.’s hair, Thomas would see it as a significant “cultural marker” and a time for physical and emotional bonding. Spending a lot of time on hair was common for African-American mothers and daughters.

¶ 131 Dalton testified consistently with her prior testimony, including that she worked with respondent from March 2011 to May 2012. She further testified that in the first six months, there were a lot of cancellations, and no goals were achieved. Respondent’s attendance improved in October, and from that time until May 2012, respondent became better at multitasking, negotiating conflicts between the kids, and setting limits. Dalton did not observe any behavior from I.P. indicating that she did not feel safe and secure with respondent. By the end, there was more resonance between respondent and I.P. in that there was more warmth. Her intention with working with both I.P. and respondent was to work on their relationship, and it was not parent coaching. She saw them together for 10 to 12 sessions. She had felt in November 2011 that continued parent coaching would have been helpful for respondent. She opined that the decrease in visits in May 2012 would have been very confusing to I.P. and would be a huge setback in the

goal of reunification. Dalton had a few phone calls with respondent after the last May 2012 visit, but it was not a continuation of therapy.

¶ 132 Respondent provided the following testimony, in relevant part. In the beginning, her relationship with Diaz-Dixon was good. However, it deteriorated in June or July 2009 because Diaz-Dixon would often be on the phone with her husband during sessions and would sometimes leave early. Diaz-Dixon would talk about her personal life, though respondent did not think it was any of her business. Diaz-Dixon also said that respondent was stupid and could not read, so she should not be raising kids. Diaz-Dixon further told respondent that everything was fine, but she testified in court to issues that she had never addressed with respondent. She additionally offered some false testimony, such as that respondent did not know why the children were taken from her and that she said that K.P. should apologize for bed-wetting. Respondent complained about Diaz-Dixon to Curry once.

¶ 133 Respondent's relationship with Frazier was better because Frazier was honest and gave her constructive criticism. Respondent viewed the relationship as professional. Respondent's relationship with Dalton was also good because Dalton similarly provided constructive criticism, and she testified truthfully in court.

¶ 134 Respondent had not wanted to go to Stillwaters for therapy because she believed that the people there had a close relationship with the foster parents, so they would already have formed an opinion about her. Respondent was aware that the purpose of the foster parent's therapy was to support the goal of return home. Respondent later agreed to go, but she did not have a good relationship with Karim. One reason was that Karim kept wanting to talk about respondent's past, such as the death of respondent's sister, even though respondent did not want to keep revisiting those topics. Contrary to Karim's testimony, respondent never let J.P. decide whether

to go to daycare but rather asked him whether he wanted to go so that she could determine why he was reluctant. It turned out that another child there was hitting him, so respondent talked to the teacher. Also contrary to Karim's testimony, respondent never spoke to I.P. about court proceedings. She also did not tell I.P. she could take the baby to school by herself, but rather said that they could bring the baby in one day when respondent was picking I.P. up from school. Respondent completed the homework assignments but did not turn them in because she was embarrassed by her reading disability, and she did not want someone else to question how she could raise kids if she could not spell correctly. Respondent did discuss the topics and once read Karim her written response.

¶ 135 Between August 2013 and December 2013, respondent went to therapy only once or twice because Karim would not return phone calls. Respondent also asked caseworkers to set up an appointment for her. In March 2014, the caseworker said not to call Karim anymore.

¶ 136 Regarding the toilet, it would get clogged, through the sewage never overflowed outside of the toilet. Respondent had asked the landlord to fix it for about two months. He refused because there was not supposed to be a janitor in the house during visits. The landlord eventually sent someone to "rod it out." No one used that bathroom, and respondent kept that bathroom clean.

¶ 137 Respondent had brought the neighbor's dog over because J.P. liked it, and she wanted I.P. to see it. I.P. ended up playing with the dog, but when respondent later learned that I.P. claimed to be afraid of it, she no longer had it at visits.

¶ 138 In January 2014, respondent began working with a parenting coach through K.P.'s school district. She referred respondent to Du Page County Health Department, and respondent currently had bi-monthly therapy sessions there. Her current service providers were not referred

to respondent through DCFS, but she sought them out because she was aware that there were a lot of concerns about her parenting.

¶ 139 Respondent was willing to allow K.P. to visit I.P., but DCFS said that it could not arrange visits because K.P. was not in DCFS custody. Respondent also did not have any contact with I.P.'s foster parents to allow visits to happen.

¶ 140 Kelly Vinehout, a clinical psychologist, provided the following testimony. She performed a psychological evaluation and a neuropsychological screen of respondent in July and August 2009, when K.P. was in DCFS care. The tests took four days. During the sessions, respondent was polite, pleasant, and cooperative, and she continued through tasks even when they were difficult for her. Respondent told her that she had a hard time in school and was labeled as needing special education in high school, but all she ended up doing was sitting in the library. She dropped out in tenth grade.

¶ 141 Respondent's IQ was 78, which meant that her overall intellectual functioning was at or above 7% of the standardization sample, with 93% of the sample scoring higher than her. It placed her at borderline intellectual functioning. Respondent had trouble with working memory and processing nonverbal information, and she had some problems understanding language. These issues would cause difficulty following conversations, understanding instructions, and remembering things. Respondent's reading comprehension was at an eight-year-old level. Her writing scores "were below the limit of the test." Respondent's limitations did not necessarily mean that she could not parent effectively, as there were ways to effectively teach her. Vinehout had suggested giving respondent information in both visual and verbal formats, allowing her ample time to respond, and role playing when working on a particular skill.

¶ 142 Respondent had experienced many life stresses, but she did not necessarily see them as unusual, and she had been able to come to peace with the events. Respondent tended to focus on the positive aspects of her life. At the same time, her overall style was to minimize problems and believe that things were going well, which could be a form of coping with trauma. She was also overly trusting, which could make her vulnerable to others' exploitation. There were no conclusions of a mental illness diagnosis or personality disorder, but this could have changed over time. There was no guarantee that with therapy, a person would reach the level of being an effective parent.

¶ 143 The trial court issued its ruling on June 9, 2014. It began with an extensive review of the case. We summarize only the relevant legal findings and conclusions.

¶ 144 No legal father was ever identified or involved in the court proceedings, so the State had shown by clear and convincing evidence that John Doe and all unknown fathers were unfit.

¶ 145 It was understandable that respondent would question how she could be deemed safe and fit to parent three of her children but not I.P. However, the focus was on respondent's fitness to parent I.P., recognizing the unique circumstances in I.P.'s life, which included a big disruption in her relationship with respondent, unlike the other three children. As a result, respondent had to work particularly hard to form a parent-child relationship with I.P.

¶ 146 There were issues brought up in the case that were red herrings. There was an inference raised that the foster parents were somehow responsible for the lack of progress, but there was no evidence to support such a claim. There were several Hot Line calls, and other than the agency's response to the calls, the facts underlying them and their dispositions were not relevant. There was no evidence to support the claim that Diaz-Dixon or Karim delivered poor services or used improper therapeutic techniques. At all times respondent had the right to a "service appeal" for

the failure of specific service providers, but there was no evidence that she exercised that right. She could also have raised her concerns in court, but she did not. The court did recognize that Diaz-Dixon was replaced on the case by someone the agency selected to be more culturally sensitive. Still, Diaz-Dixon was a well-prepared and credible witness, and the trial court did not detect a bias. Frazier was also credible, but she had a bias in favor of respondent.

¶ 147 In September 2011, K.P. went home, so at that point it was a fair assumption that there was a safe home environment and that respondent was fit, willing, and able to parent K.P. The focus was then to get I.P. ready to go home to the same environment.

¶ 148 Thomas was a very knowledgeable and credible witness. When the trial court ruled in October 2012, it relied a lot on her testimony in deciding to continue with the transition and reunification plan. Thomas testified that if a relationship had a good attachment but became impaired, it could later be repaired with a lot of work.

¶ 149 Based on the May 2012 Hot Line call, visitation was reduced and became supervised, which was a proper response while the incident was being investigated. All other services remained the same. In June 2012, a second Hot Line call, not involving I.P., was made. Based on the pending investigations, it was a logical response for the agency to remove overnight visits and have supervision.

¶ 150 Curry did not know that as of May 2012, respondent was no longer getting individual counseling, because respondent told her that she was working with Dalton by phone. Curry learned about the lack of counseling in August 2012. Curry testified that from May to August 2012, the agency was looking for some case direction from the court to determine how to proceed with visits. The court file reflected that there was a bit of a “holding pattern” awaiting outcome of the investigations. The court file reflected a “402 Conference” on August 22, 2012,

but there was no motion or order addressing visitation. Respondent got a new lawyer in September 2012, which caused some additional delay. The “holding pattern” was addressed through the court’s finding of no reasonable efforts by DCFS from May 2012 to August 2012. This was based on Karim’s testimony that they could still have worked on transitional therapy without visits at the house. However, the court did not find then and continued to not find the agency responsible for any delays after August 2012.

¶ 151 In November 2012 the trial court ordered the transition plan reinstated. The plan looked different than before because of the reduction in contact between respondent and I.P. The agency just could not pick up where it left off with overnights in May 2012, and I.P. was exhibiting symptoms of significant dysregulation. At that point, I.P.’s needs completely controlled the case’s pace. The trial court subjected the agency to frequent reviews and ordered that visits could not be taken away without court order. That was the time that I.P. needed “150 percent” from respondent.

¶ 152 By the end of 2012, all parties knew that respondent was not involved in counseling, so a referral was made for her to go to Stillwaters. Respondent did not initially want to go there because the foster parents were going there, but the November 2012 order required her to participate. Sending respondent there was part of the agency’s coordinated approach “in getting everything all together in one place and putting a huge press on delivering services to mom, and to this child to effect a return.” It was logical to have everything in one place so that respondent could also get involved in I.P.’s treatment there. The foster parents participated in their own therapy at Stillwaters and cooperated in the return home by taking I.P. to all of her sessions and making her available for all visits.

¶ 153 Karim was a credible witness and had a bias in the case only in favor of I.P. She was I.P.'s "absolute best advocate." Karim's goal in September 2012 was to increase I.P.'s regulation to help her return home. In December 2012, I.P. was oppositional, yelling, and generally dysregulated after visits. She was getting angry with Karim when she asked about the visits, and I.P. said that she would get in trouble if she talked to Karim. The difference in I.P.'s behavior when she was not dysregulated indicated to Karim that I.P. did not feel safe during the visits. I.P. was responding to how she felt and not necessarily to any real threat. By that point in time, I.P. was also beginning to show some features of reactive attachment disorder.

¶ 154 Respondent's first referral at Stillwater did not work out because of scheduling issues, so Karim provided individual counseling to her. Karim observed that although respondent claimed to have a close relationship with I.P., she did not seem to know her child. Therefore, Karim gave respondent homework to get to know I.P. better. Karim felt that respondent was inconsistent in her progress and even about why I.P. was in care. Sometimes respondent seemed to accept responsibility, but other times she deflected it, so it was hard to assess whether respondent had actually accepted responsibility. According to Karim, respondent was good at doing some discrete tasks in treatment but not good at following clusters of directions. Karim also felt that, based on reading referral documents, respondent was working on the same goal year after year. Karim felt that respondent lacked either the ability or the willingness to make progress, and she may have hit her maximum counseling potential.

¶ 155 Early in 2013, respondent was late to many counseling sessions and began missing sessions. Respondent was pregnant late in 2012 and had complications, which was one of the reasons her attendance was poor. Curry, who had been involved with the case for years, testified that October 2012 to July 2013 was the period with the least participation she had seen from

respondent. The fact that respondent missed some visits with I.P. caused a problem in trust with her. According to Karim, during this timeframe respondent was still having problems accepting responsibility and seemed unable to distinguish I.P.'s needs from respondent's own needs. Karim was also concerned about respondent's basic parenting skills because she was aware of the report about respondent leaving J.P. alone in the bathtub.

¶ 156 At this point, Karim was trying to push respondent a little bit harder to show independence by making her schedule her own appointments and arrange her own transportation. She wanted to see respondent improve her motivation, but she found that when respondent was not given discrete directions, her follow through became more erratic. In February 2013, there was a Hot Line call about the apartment's condition, and visits were not able to be returned there because there was never proof that the issue was resolved. By March 2013, I.P.'s relationship with respondent was not seen to be improving. I.P. was almost four by then. Per Karim, it was the adult's responsibility to form an attachment with the child.

¶ 157 Curry's testimony that respondent never took the initiative to resolve the sewage and bedbug conditions in the apartment was credible. Respondent's allowing the problems to persist prevented visits and parent coaching from occurring in the home. Respondent could "talk about whose fault the bug and toilet issues were, but the line she drew in the sand was based on her own principles, when she did not take the initiative to get those matters resolved, but it was not in I.P.'s best interests."

¶ 158 In May 2013, Karim watched a visit for the first time, at McDonald's. I.P. behaved very differently with respondent. She was very quiet and there was very little interaction with respondent. At a second visit that month, this time at the library, respondent was unable to really engage with I.P.

¶ 159 In June 2013, Karim provided testimony in court that was unfavorable to respondent, and the goal was changed. Karim later testified that her relationship with respondent also changed after that. Respondent said that she initially thought that Karim liked her, and she went into “victim mode” and made statements about how she deserved to have I.P. home. Karim felt that respondent had not made any real progress and that I.P. was still at risk for reactive attachment disorder. Respondent asked for Karim to be removed as her counselor. There were a few more sessions after that, but respondent seemed more and more disengaged. She said things like she only wanted to attend the counseling if it meant that I.P. would be returned home. Karim testified that respondent was still engaging in “black and white” thinking, that you were either with her or against her, and that if you testified against her, you were bad. Like Vinehout observed, respondent felt that her legal problems were caused by someone out to get her. During the middle or late 2013, respondent only went to counseling because her lawyer advised her to. She was still unable to take correction well, did not have the ability to shift her behavior, was still not recognizing I.P.’s cues, was still not distinguishing her own needs from I.P.’s, and was still not recognizing safety concerns. Karim and respondent were never able to get to the point of family counseling or visits in respondent’s home before respondent’s attendance simply trailed off. Respondent ultimately became accusatory, defensive, hostile, and paranoid with Karim, which was exactly how she had been with Diaz-Dixon and similar to how she started off with Dalton. During respondent’s testimony, the trial court found that she appeared angry and bitter at many times.

¶ 160 The trial court first addressed the State’s allegation that respondent did not make reasonable efforts or reasonable progress from February 23, 2010, to November 23, 2010. During that period, respondent was engaged in all services requested. Diaz-Dixon testified that

respondent did not make progress during that time, and the trial court agreed with that testimony. However, based on its own evaluation by Garner and potentially others, the agency felt that it was necessary to replace Diaz-Dixon with someone who may be able to work better with respondent, and that was ultimately done. Therefore, the trial court found that the State did not meet its burden on this allegation.

¶ 161 The trial court next addressed the State's allegation that respondent did not make reasonable efforts or progress from October 8, 2012, to July 8, 2013. This period began right after the time the trial court found that DCFS had not made reasonable efforts. Respondent argued that the lack of DCFS's efforts impeded her progress and required a lot of time to be made up. The trial court agreed that DCFS's actions the prior months made respondent's job a lot harder, and she needed to give "150 percent" of her efforts. However, it also believed that after its ruling, the agency put all of its efforts into a solid return home plan through the coordinated approach. It brought respondent's individual counseling into Stillwaters, ultimately with the same provider as with I.P. However, respondent's attendance quickly suffered. Some of the problems were due to respondent's health, but there was no evidence that she reached out to the agency for accommodations once she knew that she was pregnant. In early 2013 her home was no longer appropriate for the delivery of services. Her attendance continued to suffer, as did her commitment. She appeared to have given up. Regarding respondent's efforts to reengage at the end of 2013, the trial court gave greater weight to Karim's testimony. "Therefore, the impediments [respondent] faced were caused *** by herself or by circumstances in her own life, but not by impediments given or put up by Ms. Karim or" Stillwaters. Therefore, the State had proven by clear and convincing evidence that, during this timeframe, respondent failed to make both reasonable efforts and reasonable progress towards the return of I.P. to her care.

¶ 162 The trial court last addressed the State's allegation that respondent failed to maintain a reasonable degree of interest, concern, or responsibility as to I.P.'s welfare. This evaluation was based on a subjective standard and depended on what was reasonable for the parent given his or her own circumstances. The evaluation was based on the parent's efforts and not necessarily the success of those efforts. At all relevant times respondent did show a reasonable degree of interest in and concern for I.P. However, she did not show a reasonable degree of responsibility. After the May 2012 Hot Line calls, respondent was not engaged in any services, except for visits, until the end of 2012 or early 2013. That was the time when I.P. needed her the most. Even accounting for the impact of the pregnancy, respondent did not communicate the pregnancy or medical issues to the caseworker, so the agency could not help her develop a plan around the issues. Respondent left her home in an unsatisfactory condition and her attendance continued to suffer, even after her health was not an issue. Her cooperation on services also suffered significantly. Therefore, the State had shown by clear and convincing evidence that respondent did not maintain a reasonable degree of responsibility as to I.P.

¶ 163 The trial court conducted the best interests portion of the hearing on June 24, 2014.⁵ The trial court found that it was in I.P.'s best interest to terminate the parental rights of respondent and any father to I.P. It changed the case's goal to adoption. Respondent timely appealed.⁶

⁵ The report of proceedings incorrectly lists the date as May 27, 2014.

⁶ On January 12, 2015, this court noted that the deadline of December 29, 2014, under Illinois Supreme Court Rule 311(a)(5)(eff. Feb. 26, 2010) (requiring decisions affecting child custody to be issued within 150 days after the filing of the notice of appeal) had passed, but the briefing was not yet complete. We therefore found good cause for the eventual late filing of the disposition. See *In re B'Yata I.*, 2013 IL App (2d) 130558, ¶ 26.

¶ 164

II. ANALYSIS

¶ 165 The termination of parental rights is a two-step process governed by the Juvenile Court Act of 1987 (705 ILCS 405/1-1 *et seq.* (West 2012)) and the Adoption Act (750 ILCS 50/1 *et seq.* (West 2012)). *In re J.L.*, 236 Ill. 2d 329, 337 (2010). The State must first establish by clear and convincing evidence that the parent is unfit under section 1(D) of the Adoption Act (750 ILCS 50/1(D) (West 2012)). *Id.* If the trial court determines that the parent is unfit, the trial court's focus shifts from the parent's fitness to the child's best interest in the second stage of the process, the best interest hearing. *In re B.B.*, 386 Ill. App. 3d 686, 697-98 (2008).

¶ 166 On appeal, respondent challenges only the trial court's finding of unfitness. She argues that the trial court erred by finding that she was unfit in that she: (1) failed to make reasonable progress towards I.P.'s return from October 8, 2012, to July 8, 2013, and (2) failed to demonstrate a reasonable degree of responsibility as to I.P.'s welfare. Respondent argues that these findings are against the manifest weight of the evidence.

¶ 167 A court may find a parent unfit as long as one of the statutory grounds of unfitness is proven by clear and convincing evidence. *In re P.M.C.*, 387 Ill. App. 3d 1145, 1149 (2009). We will not reverse a trial court's finding of unfitness unless it is against the manifest weight of the evidence. *In re Deandre D.*, 405 Ill. App. 3d 945, 952 (2010). A decision is against the manifest weight of the evidence only if the opposite conclusion is clearly evident or the ruling is unreasonable, arbitrary, or not based on the evidence. *In re B.B.*, 386 Ill. App. 3d at 697-98.

¶ 168 Looking first at respondent's argument regarding reasonable progress, we note that the trial court found that the State had proved that respondent had not made reasonable progress *or reasonable efforts* for the period of October 8, 2012, to July 8, 2013. Reasonable efforts and reasonable progress are separate and distinct grounds for finding a parent unfit under section

1(D)(m) of the Adoption Act. *In re Jacorey S.*, 2012 IL App (1st) 113427, ¶ 21. However, as the State points out, at the time the State filed petition for termination of parental rights, the relevant version of the statute allowed the court to assess a parent's reasonable efforts only during the initial nine-month period after the adjudication of neglect or abuse. *In re D.F.*, 208 Ill. 2d 223, 237-38 (2003). Here, the trial court specifically found that the State had not proved a lack of reasonable efforts for that first nine-month period after the neglect adjudication. Therefore, we examine the trial court's findings for the period of October 8, 2012, to July 8, 2013, only as they relate to reasonable progress, and not reasonable efforts.⁷

¶ 169 Our supreme court has defined reasonable progress as “ ‘demonstrable movement toward the goal of reunification.’ ” *In re C.N.*, 196 Ill. 2d 181, 211 (2001) (quoting *In re J.A.*, 316 Ill. App. 3d 553, 565 (2000)). Progress towards return of the child is measured by the parent's compliance with the service plans and the court's directives, in light of both the condition which caused the child's removal and conditions that became known later and which would prevent the court from returning custody of the child to the parent. *Id.* at 216-17. We review reasonable progress using an objective standard relating to making progress toward the goal of returning the child home. *In re R.L.*, 352 Ill. App. 3d 985, 998 (2004). In contrast to reasonable progress, reasonable efforts is a subjective standard related to the goal of correcting the conditions which caused the child's removal; reasonable efforts is not at issue here. A parent's mental deficiencies do not eliminate the requirement of making measurable progress towards the return home of the child. See *In re J.P.*, 261 Ill. App. 3d 165, 175-176 (1994); *In re Edmonds*, 85 Ill. App. 3d 229,

⁷ The statute was subsequently amended to allow a reasonable efforts determination for any nine-month period. See P.A. 98-532 (eff. Jan. 1, 2014). However, that version of the statute is not applicable in this case.

233-34 (1980); see also *In re Devine*, 81 Ill. App. 3d 314, 320 (1980) (a “child is no less exposed to danger, no less dirty or hungry because his parent is unable rather than unwilling to give him care”). Reasonable progress requires measurable or demonstrable movement toward the goal of reunification, and reasonable progress can be found if the trial court can conclude that it can return the child to the parent in the near future. *In re J.H.*, 2014 IL App (3d) 140185, ¶ 22; see also *In re A.L.*, 409 Ill. App. 3d 492, 501 (2011) (affirming trial court’s finding of unfitness based on lack of reasonable progress where the evidence did not show that the mother fully complied with her service plan goals during the relevant nine-month periods such that her child could be placed in her care in the near future).

¶ 170 On the issue of reasonable progress, respondent argues as follows. In spring 2011, she was ready to have I.P. returned to her care, and visits were unsupervised with a large number of drop-ins. However, the foster parents then made a Hot Line call “regarding supposed statements” by I.P. about corporal punishment. Although the report was later determined to be unfounded, it resulted in reduced visitation and regression in the case. Respondent overcame this obstacle, leading to a finding of reasonable efforts and substantial progress towards I.P.’s return. By May 2012, she was well on her way to reunification, with unsupervised, overnight visits. All reports indicated that I.P. was happy and emotionally ready to return. “Then, as though calculated to delay the return,” the foster mother reported that I.P. claimed that respondent had hit her during a visit. Visits were then scaled back to weekly, one-hour supervised events. Two additional Hot Line calls were then made. All three reports were determined to be unfounded, yet visitation remained supervised thereafter. As a net result of reduced visitation, respondent’s relationship with I.P. suffered, making the ultimate goal of return home increasingly difficult to accomplish, through no fault of respondent.

¶ 171 Respondent argues that to compound matters, DCFS unilaterally decided to suspend the transition plan and discontinue certain services for respondent while the reports were being investigated. Thus, she was deprived of seeing I.P. at the crucial time of when she was ready to be returned home. Therefore, in fall 2012, the trial court found that DCFS failed to make reasonable efforts between May 2012 and August 2012. Still, visitation never returned to its previous level. Nonetheless, the trial court subsequently found that DCFS had remediated the problem, though it only alluded to progress that had been made from the time the agency was required to report more frequently to the court.

¶ 172 Respondent argues that it was about this time that she had a high-risk pregnancy leading to hospitalization and aftercare in April 2013. She argues that, as a result, visitation and therapy did not take place as frequently as it could and should have. Respondent maintains that, however, the trial court blamed her for not reporting health complications to DCFS so that it could have arranged for alternate services.

¶ 173 Respondent argues that as of January 21, 2013, DCFS had not increased visitation because it was waiting for therapeutic approval and needed to first observe visits in the home, and because there were “contract issues” relating to the recommendation of therapeutic intervention. Respondent maintains that these were agency shortcomings, not her own shortcomings. Respondent notes that she had plumbing and bug problems between February and April 2013 which had to be taken care of by the landlord. As a result, there were no visits in the home, and by June 2013 the trial court changed the goal to substitute care pending termination of parental rights.

¶ 174 Respondent argues that at every point throughout the numerous permanency review hearings, she was found to have done everything required of her, and she received multiple

reports of substantial efforts and progress towards the goal of return home. Respondent maintains that reasonable progress is an objective standard, so the trial court should focus on the amount of progress that can be expected under the circumstances, which here included DCFS's failure to provide court-ordered services towards the goal of reunification. She argues that balanced against the weight of all of her efforts and progress, the fact that significant delays resulted from unfounded Hot Line reports, and DCFS's unilateral discontinuation in services geared at implementing the transition plan, the State did not prove by clear and convincing evidence that she was unfit in that she failed to make reasonable progress towards the goal of return home during the period between October 8, 2012, and July 8, 2013.

¶ 175 We first address respondent's implicit argument that the foster parents made baseless Hot Line reports for the sole purpose of thwarting progress on the goal of return home. Respondent refers to "supposed statements" by I.P. about spanking in spring 2011. However, according to the record: K.P. came into care based on excessive corporal punishment; Zeier and Shankman both testified that respondent told them that I.P. made statements about "daddy" spanking her in 2011; and Shankman testified in 2011 that she had concerns about I.P. being spanked based on I.P. spanking dolls during therapy, and because I.P. told her that respondent spanked her. Thus, spanking/hitting was a concern that several individuals raised, including respondent herself at one point.

¶ 176 There was a separate Hot Line call made in May 2012 about a bruise on I.P.'s face after an overnight visit. Respondent refers to this call as seemingly "calculated to delay the return." However, Curry observed a bruise on I.P.'s cheek after one of the overnight visits in 2012, and Curry and Shankman both testified that I.P. switched between saying that the bruise was caused by respondent or J.P. hitting her. Therefore, the observation of the bruise and its origin were not

solely brought up by the foster parents. Another Hot Line call was made shortly afterwards regarding a rash on I.P., but a subsequent Hot Line call in May or June 2012 was completely unrelated to I.P., in that it dealt with an alleged incident with respondent's sister. Thus, the evidence does not indicate that the Hot Line calls were an orchestrated attempt to impede the return home goal. As the trial court found, while the reports were being investigated, it was logical for DCFS to have only supervised visits, as there were safety concerns.

¶ 177 The complaints were determined to be unfounded in mid-July. The trial court found that DCFS had not made reasonable efforts between May 2012 and August 2012 because transitional therapy for I.P. could have continued during that time but did not. Contrary to respondent's argument, there is no evidence that DCFS discontinued some services for respondent during this time. Rather, according to testimony, respondent reported that she was continuing to receive counseling from Dalton during this time, whereas actual counseling sessions were not being conducted. When Curry discovered in August 2012 that respondent was not actually in therapy, DCFS requested that she attend therapy at Stillwaters, which respondent only did after being ordered to by the court in November 2012.

¶ 178 Respondent notes that visitation did not return to its previous level in September 2012, at the point which the trial court found that DCFS was engaged in reasonable efforts. However, that was the very time that DCFS was engaged in what the trial court labeled as a coordinated approach, trying to have respondent engage in therapy at the same place that I.P. was receiving therapy. The idea was that they could both eventually engage in family therapy there. The foster parents were also attending therapy there related to the goal of return home. However, according to testimony, I.P. was not psychologically ready to increase visitation at that point. Rather, Karim testified that I.P. was showing some features of reactive attachment disorder, which

usually sets in by age five and results in damaging a person's relationships throughout his or her lifetime. Karim testified that it was the child's subjective feeling of safety that mattered, not whether there were objective safety problems. According to Karim, if I.P. did not feel safe with respondent but was forced to keep visiting her, it would damage her trust in all adults. Shankman did testify that decreased visitation after May 2013 had a detrimental impact on I.P.'s relationship with her foster family, but she further testified that I.P.'s prior experiences in the home, including whether she felt safe there, also had a detrimental impact.

¶ 179 Karim further testified that it was the adult's responsibility to work to form an attachment with the child. In September and October 2012, respondent was still refusing to even attend therapy at Stillwaters. Without respondent progressing in her individual therapy and being open to direction, Karim could not effectively begin family therapy. Without family therapy, which would help with I.P.'s attachment to respondent, increased visitation was not therapeutically recommended. Therefore, DCFS did not withhold additional visitation to impede the goal of return home, but rather was following Karim's therapeutic recommendations. Indeed, Karim testified that simply increasing visits when I.P. did not feel safe would exacerbate feelings of anxiety and distrust.

¶ 180 For the period of January to April 2013, respondent argues that visitation and therapy did not take place as frequently as it could have only because of her high-risk pregnancy and related medical complications. We note that respondent's becoming pregnant was not a circumstance entirely beyond her control. Regardless, the trial court found that respondent did not immediately tell DCFS that she was pregnant and seek accommodations for therapy and visitation. Moreover, it is undisputed that respondent was late to many of the counseling appointments that she did attend. While respondent testified that it was due to the driver being

late, the trial court found Karim to be a more credible witness, and Karim testified that the driver would often call and say that she was waiting for respondent. Even with regard to the counseling sessions she attended, Karim testified that respondent did not complete the homework designed to help her get to know I.P. and see things from I.P.'s perspective. Karim also did not think that respondent was implementing her parenting suggestions. Respondent told Karim that she was a good parent and did not need to do anything different for I.P.

¶ 181 Curry testified that the agency was discussing increasing visits from two hours to three hours in February 2013. However, on February 15, 2013, there was a Hot Line call regarding the apartment's condition, and Curry observed a sewage problem in one of the bathrooms. Later that month, bed bugs were found in the apartment, which meant that visits could no longer be conducted there. Respondent claims that these were landlord problems. What respondent does not acknowledge is that the trial court did not fault her for failing to fix the underlying problems, but rather for not taking the initiative to have the problems fixed. Curry testified that respondent refused to clean up the overflow resulting from the plumbing issue, not recognizing that the feces were a health concern, especially with children in the house. As of the termination hearing, Curry also still had not received confirmation that the bedbug problem was resolved. Thus, visits and parent coaching in the home could not take place, which could have otherwise potentially aided in achieving progress.

¶ 182 Respondent's main service from May to July 2013 continued to be therapy. However, the trial court found credible Karim's testimony that respondent had not accepted responsibility and could not distinguish her own needs from I.P.'s needs. Respondent was also having trouble with basic parenting skills, such as not recognizing the danger in leaving a baby or toddler unsupervised in the bath. At the visits Karim observed in May and June 2013, respondent was

not engaging I.P. Karim testified that respondent seemed to be working on the same goals that she had from the beginning; that she lacked the ability or willingness to make progress; and that she may have reached her maximum counseling or parenting potential. Karim testified that after she provided testimony in June 2013 in court that was unfavorable to respondent, respondent thought that Karim was against her, stated that she deserved to have I.P. home, became more disengaged, and stated that she only wanted to attend therapy if it would result in I.P.'s return.

¶ 183 We agree with respondent that, for many years, she was found to be fully compliant with services and was found to have made reasonable and/or substantial efforts and progress towards the goal of return home. However, we disagree that the shortcomings present from October 8, 2012, and July 8, 2013, should be balanced against the weight of her efforts and progress throughout the case. While we have provided a detailed summary of all of the permanency hearings in the case, we did so to provide context. A parent may be found unfit for failing to make reasonable progress during any nine-month period at the end of the initial nine-month period following the adjudication of neglect or abuse (750 ILCS 50/1(D)(m)(iii) (West 2012)), so respondent's previous progress does not mitigate against the failure to make reasonable progress during the relevant time frame.

¶ 184 For the period of October 8, 2012, to July 8, 2013, respondent's goals remained almost the same as they were when I.P. first came into care. The most significant issue during this time frame was bonding with I.P. In order to work on this bonding, respondent needed to first make progress in counseling. While respondent argues that her pregnancy-related illness should be factored into the missed therapy and visits, we view reasonable progress under an objective standard, which makes a person's personal circumstances irrelevant. *In re F.P.*, 2014 IL App (4th) 140360, ¶ 89 ("That [the mother's] personal circumstances prevented her from making

reasonable progress is irrelevant to the ‘objective standard.’ ”). Even disregarding missed appointments and visits due to illness, as discussed, respondent was late to and/or not fully engaged in many of the counseling sessions that she did attend, and she was not proactive in remedying her apartment’s condition such that visits and coaching could resume there. Rather than having measurable movement towards reunification such that the trial court could expect to return I.P. to respondent’s custody in the near future, which is necessary to show reasonable progress, respondent’s relationship with I.P. deteriorated because respondent was either unable or unwilling to accept responsibility, separate I.P.’s needs from her own, and read I.P.’s cues. Accordingly, the trial court’s ruling that the State proved that respondent was unfit in that she failed to make reasonable progress from October 8, 2012, to July 8, 2013, was not against the manifest weight of the evidence.

¶ 185 As a trial court’s finding of unfitness can be sustained on a single statutory ground (*In re P.M.C.*, 387 Ill. App. 3d at 1149), we do not address respondent’s challenge to the trial court’s ruling that she was also unfit on the basis that she failed to maintain a reasonable degree of responsibility as to I.P. See *In re Shauntae P.*, 2012 IL App. (1st) 112280, ¶ 103 (appellate court did not address additional bases for which the mother was found unfit).

¶ 186

III. CONCLUSION

¶ 187 For the reasons stated, we affirm the judgment of the Kane County circuit court.

¶ 188 Affirmed.