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IN THE
COURT OF APPEALS OF IND IANA

IN THE MATTER OF THE TERMINATION OF THE PARENT-CHILD RELATIONSHIP OF:	)	
R.R., A Minor Child, And	)	
J.C., Appellant-Mother,	)	
vs.	)	No. 02A03-0812-JV-626
DEPARTMENT OF CHILD SERVICES, ALLEN COUNTY, Appellee-Petitioner.	)	

APPEAL FROM THE ALLEN SUPERIOR FAMILY RELATIONS DIVISION
The Honorable Charles F. Pratt, Judge
Cause No. 02D07-0703-JT-47

August 19, 2009

MEMORANDUM DECISION - NOT FOR PUBLICATION

BROWN, Judge

Jacqueline C. ("Mother") appeals the involuntary termination of her parental rights to her son, R.R. On appeal, Mother claims there is insufficient evidence supporting the trial court's judgment. Concluding that the Indiana Department of Child Services, Allen County ("ACDCS") provided clear and convincing evidence to support the trial court's judgment, we affirm.

Mother is the biological mother of R.R., born on March 31, 2006, in Fort Wayne.[1] The evidence most favorable to the trial court's judgment reveals that R.R. was born with multiple severe congenital anomalies to all four of his limbs. R.R. was referred to Riley Hospital for Children ("Riley") in Indianapolis, where, several days after his birth, he was diagnosed with Femur Fibula Ulna Complex. Riley doctors also determined that R.R., who had been born without tibia bones in his feet, would need to have rods inserted to stabilize his legs, as well as his feet amputated. R.R. would then require prosthetics.

During the time R.R. was being evaluated at Riley, Mother exhibited inappropriate behavior and threatened to kill hospital personnel. As a result, Mother was transported to Methodist Hospital, but she refused to be admitted for psychiatric treatment. During a subsequent visit at Riley, Mother was involved in another incident where a cell phone was stolen and additional threats were made. Mother was thereafter banned from both Riley and Methodist Hospitals.

Following a hearing held on April 10, 2006, the ACDCS was contacted by Riley staff who reported that R.R. was ready to be released from the hospital, but, due to

[1] R.R.'s biological father, Ray R., voluntarily relinquished his paternal rights to R.R. on September 4, 2007. The trial court subsequently ordered the father's parental rights terminated. R.R.'s father does not participate in this appeal.

continuing concerns regarding Mother's behaviors and the fact paternity had not been established, the hospital was unable to release R.R. to either parent. Following an investigation, an ACDCS case worker took R.R. into protective custody. R.R. was placed in licensed foster care upon his return to Fort Wayne.

On April 13, 2006, the trial court determined there was probable cause to believe R.R. was a child in need of services ("CHINS"). The court authorized the ACDCS to file a CHINS petition and a provisional order for services was entered. The ACDCS subsequently filed a CHINS petition on May 15, 2006. An initial hearing on the CHINS petition was held two days later and, based on Mother's admissions, including her admission that R.R. required specialized medical care, treatment, and daily supervision that she could not provide without the assistance of others, the trial court found R.R. to be a CHINS.

In its dispositional order, entered on May 31, 2006, the trial court directed Mother to participate in a variety of services in order to achieve reunification with R.R. Specifically, Mother was ordered to, among other things, (1) refrain from criminal activity, (2) maintain safe, clean, and appropriate housing at all times, (3) cooperate with service providers and ACDCS case managers, (4) obtain a psychological evaluation and follow all resulting treatment recommendations, (5) take all medications as prescribed, and (6) enroll in and successfully complete home-based services.

Mother's participation in court-ordered services was inconsistent from the beginning of the CHINS case. In May 2006, Mother began in-home supervised visitation with R.R. through the Stop Child Abuse and Neglect ("SCAN") program. Mother

initially attended the visits with R.R. as scheduled and displayed appropriate signs of affection toward her son. However, by the end of June 2006, SCAN family restoration worker Fatima Washington had become concerned because Mother began making comments during visits that R.R. "gets on my nerves" and that she couldn't wait for R.R. to turn one year old because she was "tired of feeding him all the time" and "picking him up all the time." Transcript at 62. Mother also informed Washington during a visit in July 2006 that she was considering placing R.R. up for adoption; however, Mother recanted during the next visit. In August 2006, Mother began missing visits. Mother also told Washington that she heard voices in her house telling her what to do. During a visit in October 2006, Washington observed Mother remove R.R.'s pacifier from his mouth and tell him he would "just have to cry." Id. at 68. Mother also informed Washington that she was going to "ignore" R.R. because he was getting "spoiled." Id. at 71.

Due to continuing safety concerns, Washington decided to move all visits to the SCAN office in late October 2006. Visitation privileges were placed on hold the following month after Mother failed to show for two consecutively scheduled visits. In December 2006, Mother was arrested for criminal trespass.

Mother was also inconsistent in following court orders regarding her mental health issues. Although Mother did participate in the court-ordered psychological evaluation, she failed to successfully follow through with the resulting treatment recommendations. Park Center psychologist Dr. Jennifer Fray conducted a clinical interview and administered several standardized tests to determine Mother's parenting ability, mental health functioning, and intellectual abilities in June and July of 2006. During the clinical

interview, Dr. Fray learned Mother had suffered from paranoia since 1996 and had been hospitalized for this condition in April 2006. Additionally, test scores revealed Mother has a below average intellectual ability and an elevated risk for parenting and maladaptive parenting attitudes.

Based on her overall assessment, Dr. Fray concluded that Mother suffers from Schizoaffective disorder, a mental health condition in which a person can experience a combination of schizophrenia symptoms, such as hallucinations and delusions, in combination with mood disorder symptoms, such as mania, depression, and extreme anger. Dr. Fray also believed Mother's below average intellectual abilities would affect her decision-making ability, making it difficult for her to parent R.R., especially in light of R.R.'s special needs. Dr. Fray therefore recommended that Mother take her medication as prescribed as well as participate in home-based services in order to obtain essential parenting skills and medication management.

Mother's participation in home-based services, however, was sporadic and ultimately unsuccessful. For example, Park Center case manager Angela Dippel provided home-based services for Mother from May 2006 through mid-October 2006. During this time, Dippel provided guidance and counsel to Mother in a variety of areas including: (1) financial budgeting; (2) medication management; and (3) daily living skills including meal preparation, housekeeping, and personal hygiene. Dippel's involvement in the case ended in October 2006, however, due to Mother's threatening behavior and an incident at the Park Center office that resulted in the police removing Mother from the

premises. During the time she worked with Mother, Dippel did not observe any significant progress in Mother's overall functioning.

Similarly, Park Center psychiatric case manager Antionetta Hill testified that she provided home-based services to Mother from October 2006 until Mother moved to Wisconsin in March 2007. During this time, Hill observed that Mother would suffer delusions and hallucinations when not taking her medication as prescribed. Hill likewise indicated that Mother failed to progress with her budgeting skills and failed to successfully complete program goals before services ended.

Mother also received parenting, budgeting, daily living skills, and medication management services through East Wayne Street Center from April 2006 through March 2007. During this time, Clarence Smith, family mentor and case manager, observed that when not on her medication, Mother did not properly care for her own personal hygiene. Her apartment would become filthy with dirty clothes strewn on the floor and dirty dishes and insects observed in the kitchen. By March 2007, Mother had failed to meet budgeting goals, had failed to complete her parenting curriculum, and continued to refuse to consistently take her medication as prescribed.

Mother moved to Madison, Wisconsin, to live with her mother in March 2007. Mother was subsequently arrested for disorderly conduct, resisting arrest, and battery of a law enforcement officer. Mother pled guilty to the battery charge and was incarcerated from August 2007 until June 2008.

The ACDCS filed a petition to involuntarily terminate Mother's parental rights to R.R. on March 12, 2007. An initial hearing on the termination petition was held on

September 4, 2007. Mother, who remained incarcerated in Wisconsin, appeared telephonically and was represented by counsel.

A fact-finding hearing on the termination petition was eventually held on August 27, 2008. During the termination hearing, Mother acknowledged that she had not made any attempts to establish visitation with R.R. since her release from incarceration in June 2008. Mother also informed the court that she was unemployed and admitted she still was not consistently taking her medications. At the conclusion of the hearing, the trial court took the matter under advisement. On November 4, 2008, the trial court issued its judgment terminating Mother's parental rights to R.R. This appeal ensued.

We begin our review by acknowledging that this court has long had a highly deferential standard of review in cases concerning the termination of parental rights. In re K.S., 750 N.E.2d 832, 836 (Ind. Ct. App. 2001). Thus, when reviewing the trial court's judgment, we will not reweigh the evidence or judge the credibility of the witnesses. In re D.D., 804 N.E.2d 258, 265 (Ind. Ct. App. 2004), trans. denied. Instead, we consider only the evidence and reasonable inferences therefrom that are most favorable to the judgment. Id.

Here, the trial court's termination order contained specific findings of fact and conclusions thereon. When reviewing findings of fact and conclusions of law entered in a case involving a termination of parental rights, we apply a two-tiered standard of review. First, we must determine whether the evidence supports the findings. Bester v. Lake County Office of Family & Children, 839 N.E.2d 143, 147 (Ind. 2005). Second, we determine whether the findings support the judgment. Id. In deference to the trial court's

unique position to assess the evidence, we will set aside the court's judgment terminating a parent-child relationship only if it is clearly erroneous. In re L.S., 717 N.E.2d 204, 208 (Ind. Ct. App. 1999), trans. denied; see also Bester, 839 N.E.2d at 147. A finding is clearly erroneous when there are no facts or inferences drawn therefrom that support it. D.D., 804 N.E.2d at 265. A judgment is clearly erroneous only if the findings do not support the trial court's conclusions or the conclusions do not support the judgment. Bester, 839 N.E.2d at 147.

"The traditional right of parents to establish a home and raise their children is protected by the Fourteenth Amendment of the United States Constitution." In re M.B., 666 N.E.2d 73, 76 (Ind. Ct. App. 1996), trans. denied. Moreover, because termination severs all rights of a parent to his or her child, the involuntary termination of parental rights is arguably one of the most extreme sanctions a court can impose; consequently, such a sanction is intended as a last resort, available only when all other reasonable efforts have failed. In re T.F., 743 N.E.2d 766, 773 (Ind. Ct. App. 2001), trans. denied. Nevertheless, parental rights are not absolute and must be subordinated to the child's interests in determining the proper disposition of a petition to terminate a parent-child relationship. Id. Because the purpose of terminating parental rights is to protect the child, not to punish the parent, parental rights may be properly terminated when a parent is unable or unwilling to meet his or her parental responsibilities. K.S. 750 N.E.2d at 836.

In order to terminate a parent-child relationship, the State is required to allege and prove, among other things, that:

(B) there is a reasonable probability that:

(i) the conditions that resulted in the child's removal or the reasons for placement outside the home of the parents will not be remedied; or

(ii) the continuation of the parent-child relationship poses a threat to the well-being of the child; [and]

(C) termination is in the best interests of the child; and

(D) there is a satisfactory plan for the care and treatment of the child.

Ind. Code § 31-35-2-4(b)(2); see also Ind. Code § 31-35-2-8. The State must establish each of these allegations by clear and convincing evidence. Egly v. Blackford County Dep't of Pub. Welfare, 592 N.E.2d 1232, 1234 (Ind. 1992); see also Ind. Code § 31-37-14-2. Mother challenges the sufficiency of the evidence supporting the trial court's judgment with regard to all of the elements set forth above.

Remedy of Conditions

Mother first challenges the trial court's determination that there is a reasonable probability the conditions necessitating R.R.'s removal and continued placement outside her care will not be remedied. The trial court found that the ACDCS presented sufficient evidence to satisfy both prongs of Indiana Code Section 31-35-2-4(b)(2)(B). This statute, however, is written in the disjunctive. Thus, the ACDCS was required to establish, by clear and convincing evidence, only one of the two requirements of subsection (B). See L.S., 717 N.E.2d at 209. We begin our review by considering whether clear and convincing evidence supports the trial court's findings regarding Indiana Code Section 31-35-2-4(b)(2)(B)(i).

Mother acknowledges on appeal that she failed to complete the court-ordered "parenting curriculum" and that she "has inconsistently taken her prescribed medications during the course of her involvement with [ACDCS][.]" Appellant's Brief at 17. Nevertheless, Mother asserts that because she was observed being affectionate towards R.R. during several supervised visits, coupled with the fact the ACDCS's September and December 2006 status reports indicate she was "generally in compliance, but for the issue of her medication use[,]" there is insufficient evidence to support the trial court's conclusion regarding her ability to remedy the conditions which led to R.R.'s removal. Id. at 18. Mother also asserts that the trial court committed reversible error by failing to take into consideration evidence of her change in circumstances, including the facts she "now lives in a home with an additional caregiver, as opposed to previously living in a home alone[,]" that she "sought out mental health care and management on her own initiative" after relocating to Wisconsin, and that she is "now willing, without the court's compulsion, to address her mental health and take [her] medication as prescribed." Id. at 20.

When determining whether there is a reasonable probability that the conditions justifying a child's removal and continued placement outside the home will not be remedied, the trial court must judge a parent's fitness to care for his or her children at the time of the termination hearing, taking into consideration evidence of changed conditions. In re J.T., 742 N.E.2d 509, 512 (Ind. Ct. App. 2001), trans. denied. The court must also "evaluate the parent's habitual patterns of conduct to determine the probability of future neglect or deprivation of the child." Id. Pursuant to this rule, courts have

properly considered evidence of a parent's prior criminal history, drug and alcohol abuse, history of neglect, failure to provide support, and lack of adequate housing and employment. A.F. v. Marion County Office of Family & Children, 762 N.E.2d 1244, 1251 (Ind. Ct. App. 2002), trans. denied. Moreover, we have previously explained that the Indiana Department of Child Services (here, the ACDCS) is not required to rule out all possibilities of change; rather, it need establish only that there is a reasonable probability the parent's behavior will not change. In re Kay L., 867 N.E.2d 236, 242 (Ind. Ct. App. 2007).

In determining there is a reasonable probability Mother's behavior will not change, the trial court made multiple pertinent findings and conclusions, including the following:

> 10. [Mother] came under the care of psychologist, Dr. Jennifer Fray, beginning on or about June 2006. [Mother] presented with a history of mental illness. She suffers from paranoia and is diagnosed with [S]chizo[]affective disorder; an illness that can be treated with medications. As a result of her illness, [Mother] can experience hallucinations, delusions, and confused thinking or behaviors. [Mother] functions at a lower intellectual level and her decision[-]making is thus impaired. [Mother] completed a Child Abuse Potential Inventory (C.A.P.I.) as part of her psychological evaluation. Her scores were elevated indicating that she shared characteristics with people known to have committed child abuse. [Mother's] parenting attitude and risk scores reflected maladaptive parenting attitudes. From Dr. Fray's expert opinion, the Court finds that [Mother] will have difficulty parenting a special needs child.
>
> 11. [Mother] has been prescribed medications for her mental illness. However, when she first saw Dr. Fray [Mother] admitted that she did not consistently take her medications. . . .
>
> 12. From the testimony of Antoinett[a] Hill, . . . the Court finds that [Mother] became delusional if she did not take her medications as

> prescribed. Despite the monitoring and interventions by Park Center's case[]managers, Angela Dibble and Antoinett[a] Hill, [Mother] remained inconsistent in taking her medications. She told her parenting instructor at the East Wayne Street Center that if she got her child back she would no longer take her medications.
>
> 13. When [Mother] was not consistently taking her medications, she became belligerent, rude, and delusional. In October 2006, she threatened case[]manager Angela Dibble and was hospitalized. Later, in 2007, she told Park Center case[]manager Antoinett[a] Hill that rap star Jay-Z was going to take her to New York.
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> * * * * *
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> 19. At present[,] [Mother] lives with her mother in Wisconsin. She has no independent housing. She admits that she is inconsistent in taking her medications.
>
> 20. [R.R.] continues to have significant medical issues. . . . Both feet have been amputated. . . .

Appellant's Appendix at 33-34. The trial court then concluded as follows:

> 2. In the present case, [Mother] has not successfully completed a parenting curriculum, she has not demonstrated an ability to manage her limited resources despite the intervention of service providers from the East Wayne Street Center and Park Center. [Mother] has not shown progression in her ability to parent [R.R.] during her visitations. At times she was nurturing and appropriate and other times she made comments or engaged in acts that were inconsistent with the child's needs. [Mother] has not consistently taken her medications as required to address her mental illness. As a result, [Mother] has threatened a case[]manager and committed criminal acts. She does not, at present, take her medications as prescribed. [Mother] left Indiana and has not seen the child since 2006. By the clear and convincing evidence[,] the [C]ourt determines that there is a reasonable probability that [the] reasons that brought about [R.R.'s] placement outside the home will not be remedied. . . .

Id. at 35. A thorough review of the record leaves us convinced that ample evidence supports the trial court's findings and conclusion set forth above. These findings, in turn, support the trial court's ultimate decision to terminate Mother's parental rights to R.R.

R.R. was initially removed from Mother's care shortly after his birth due to Mother's erratic and threatening behavior, her untreated mental health issues, and her admission that R.R. required specialized medical care, treatment, and daily supervision that she could not provide without the assistance of others. At the time of the termination hearing, those conditions remained largely unchanged, and Mother had failed to successfully complete a majority of the court's dispositional goals. Specifically, Mother had failed to refrain from criminal activity, to maintain safe, clean, and appropriate housing at all times, to complete the parenting curriculum, to consistently take her medications as prescribed, and to successfully complete home-based services. Also significant, Mother admitted during the termination hearing she was unemployed, living with her mother, and taking her prescribed medications on an "[o]ff and on again" basis. Transcript at 135.

Testimony from the ACDCS case managers and various service providers further supports the trial court's findings. For example, during the termination hearing, ACDCS case manager Kimberly Masterson testified that Mother had told her on several occasions that she was unwilling to complete services, telling Masterson, "I definitely know about the service and medications, I'm not going to do it. I don't think there's anything wrong with me." Id. at 107-08. Karen Goodvine, Mother's current ACDCS case manager, testified that Mother had failed to make any contact with R.R. since she was assigned to the case in August 2007. Goodvine also stated that in addition to not completing court-ordered services, Mother had also not provided R.R. with any clothing, gifts, or financial support.

Dippel informed the court that Mother's compliance with taking her medication had been "very inconsistent." Id. at 40. Dippel also testified that Mother reported she "didn't feel as though she was mentally ill and she didn't feel as though she needed the medications." Id. at 41. When questioned as to whether there had been "any progression" with Mother's daily living skills during the time she worked with Mother, Dippel replied, "I didn't really see any. [Mother] just stayed basically the same and [did] not really function[] very well." Id. at 41-42.

Similarly, Hill also reported that, despite her weekly involvement with Mother's case from October 2006 through March 2007, Mother had failed to improve her ability to perform household budgeting tasks and to consistently take her medication. Hill also testified that Mother informed her that "God had healed her[,]" and that she "no longer need[ed] to take medication." Id. at 52.

Washington, who informed the court that she had supervised visits between Mother and R.R., testified that although visits initially "went very well[,]" she became concerned during a visit in June 2006 when Mother told her the baby "gets on my nerves" and that Mother would be glad when R.R. turned one year old because she was getting tired of feeding him and picking him up all the time. Id. at 62. Washington's concern for R.R.'s safety as well as her own continued for the next several months due to numerous incidents where Mother initiated confrontations with the foster parents during visits. Washington also testified that she "didn't feel [Mother] was understanding [R.R.'s] health needs." Id. at 70. Finally, Mother admitted during the termination hearing that she had not seen R.R. since October 2006 and that she had never requested her visitation

privileges be reinstated. This court has previously stated that "the failure to exercise the right to visit one's child demonstrates a lack of commitment to complete the actions necessary to preserve the parent-child relationship." Lang v. Starke County Office of Family & Children, 861 N.E.2d 366, 372 (Ind. Ct. App. 2007), trans. denied.

As previously explained, when determining whether a reasonable probability exists that the conditions resulting in a child's removal from the home will not be remedied, the juvenile court must judge a parent's fitness to care for his child *at the time of the termination hearing*. D.D., 804 N.E.2d at 266. Moreover, receiving services alone is not sufficient evidence to show that conditions have been remedied if the services do not result in the needed change, and the parent does not acknowledge a need for change. See In re A.H., 832 N.E.2d 563, 570 (Ind. Ct. App. 2005) (concluding that trial court properly terminated parent-child relationship where parent with mental health impairment participated in but failed to benefit from services). Here, the record reveals that, at the time of the termination hearing, Mother had shown no significant improvement in her willingness to consistently take her medications as prescribed by her physicians or in her ability to provide R.R. with a safe and stable home environment, despite having a wealth of services available to her. Although we acknowledge the fact that Mother was living with her mother at the time of the termination hearing, there was no evidence presented during the termination hearing as to the condition of the home or whether it was safe and suitable for R.R. The record is also silent as to whether R.R.'s maternal grandmother had any intention, desire, or ability to help Mother care for R.R., should Mother regain custody of R.R. in the future. Mother's assertion that she is now ready, after

approximately two and a half years, to address her mental health issues and take her medication as prescribed is unpersuasive. "[T]he time for parents to rehabilitate themselves is during the CHINS process, prior to the filing of the termination petition." Prince v. Dep't of Child Servs., 861 N.E.2d 1223, 1230 (Ind. Ct. App. 2007).

The trial court was within its discretion to judge Mother's credibility and to weigh her testimony of changed conditions against the significant evidence demonstrating Mother's habitual pattern of refusing to take her medication, her history of mental illness and criminal activity, as well as her past and present inability to demonstrate that she is capable of providing a safe and stable home environment for R.R, which it clearly did. Mother's arguments to the contrary amount to an invitation to reweigh the evidence, and this we may not do.[2] D.D., 804 N.E.2d at 265.

Best Interests

Mother also challenges the sufficiency of the evidence supporting the trial court's determination that termination of her parental rights is in R.R.'s best interests. We are mindful that, in determining what is in the best interests of a child, the trial court is required to look beyond the factors identified by the Indiana Department of Child Services and look to the totality of the evidence. McBride v. Monroe County Office of Family & Children, 798 N.E.2d 185, 203 (Ind. Ct. App. 2003). In so doing, the trial court must subordinate the interests of the parent to those of the child. Id. The court need not

[2] Having determined that clear and convincing evidence supports the trial court's conclusion that there is a reasonable probability the conditions resulting in R.R.'s removal will not be remedied, we need not determine whether sufficient evidence supports the trial court's additional determination that continuation of the parent-child relationship poses a threat to R.R.'s well-being. See L.S., 717 N.E.2d at 209 (explaining that Indiana Code section 31-35-2-4(b)(2)(B) is written in the disjunctive).

wait until a child is irreversibly harmed before terminating the parent-child relationship. Id. Moreover, we have previously held that recommendations by the case manager and child advocate to terminate parental rights, coupled with evidence demonstrating that the conditions resulting in removal will not be remedied, are sufficient to show by clear and convincing evidence that termination is in the child's best interests. In re M.M., 733 N.E.2d 6, 13 (Ind. Ct. App. 2000).

In addition to the findings set forth previously, the trial court also made the following pertinent findings in determining that termination of Mother's parental rights is in R.R.'s best interests:

> 14. [Mother] did not complete her parenting curriculum . . . .
>
> 15. From Ms. Washington's testimony, the Court finds that [Mother] did not comprehend the nature of [R.R.'s] medical condition. [Mother] expressed the belief that [R.R.] was simply bull-legged. Additionally, [Mother's] interaction with [R.R.] during visitations did not show progress over the course of time. Instead, her behavior toward him was erratic. [Mother] referred to her baby as being spoiled. . . . [Mother] did not attend the visitations scheduled in November 2006. [Mother] has not seen [R.R.] since.
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> * * * * *
>
> 22. The Guardian [a]d Litem reports that termination is in [R.R.'s] best interests.

Appellant's Appendix at 34-35. The trial court then concluded that "through termination of the parent[-]child relationship, [R.R.] can be placed in a safe[,] permanent home that is equipped to meet the child's needs. Thus[,] [R.R.'s] best interests are served by granting the petition to terminate the parent-child relationship." Id. at 35. These findings and conclusions, too, are supported by the evidence.

When questioned during the termination hearing how R.R. is progressing, case manager Goodvine indicated R.R. is "doing well" in foster care and is "thriving[.]" Transcript at 143. Guardian ad Litem ("GAL") Brent Vian testified that he believed termination of the parent-child relationship was in R.R.'s best interests. When asked how he arrived at this decision, Vian replied:

> There were a number of components that I based that decision on, but the most significant of which is my concerns regarding [Mother's] unwillingness to consistently take her medications. You've heard testimony today that she has told many people that she does not feel that she . . . needs the medications. . . . She has not demonstrated a willingness over time to take her medications. And she's come to this conclusion . . . in the face of the difficulties that she has in functioning on a day-to-day basis if she doesn't take her medications, and also in complying with the law . . . . So it concerns me greatly that she feels she does not need the medications. In this aspect, I don't think she's demonstrated an ability to benefit from services. . . . If [Mother's] willing not to give herself the care that she needs, what assurance do we have that she will give [R.R.] the care that he needs[?] Also, the case has been going on for close to two and a half years. [Mother] has not even seen her child since he was approximately nine months old. I doubt if . . . young R.R. would even recognize his mother at this point. I think [R.R.] desperately needs permanency."

Id. at 145-47.

Based on the totality of the evidence, including Mother's habitual pattern of criminal conduct, her lack of parental bond with R.R., and her refusal to treat her mental illness by taking her medication as prescribed, coupled with the testimony from Goodvine and Vian recommending termination, we conclude that clear and convincing evidence supports the trial court's determination that the termination of Mother's parental rights is in R.R.'s best interests. See, e.g., In re A.I., 825 N.E.2d 798, 811 (Ind. Ct. App. 2005) (concluding that testimony of child advocate and family case manager, coupled

with evidence that conditions resulting in continued placement outside home will not be remedied, is sufficient to prove by clear and convincing evidence termination is in child's best interests), trans. denied.

Satisfactory Plan of Care

We now turn to Mother's final assertion that the ACDCS failed to prove it had a satisfactory plan for the care and treatment of R.R. In making this claim, Mother acknowledges that the ACDCS informed the trial court that it planned on placing R.R. for adoption and that current caselaw recognizes adoption as a satisfactory plan. Nevertheless, Mother asserts that because there was no evidence presented by the ACDCS to prove R.R. is a likely candidate for successful adoption in light of his serious birth defects, or that anyone had a specific interest in adopting R.R., the ACDCS failed to satisfy its burden of proof on this element.

We agree with Mother that before a trial court may terminate a parent-child relationship, it must find there is a satisfactory plan for the future care and treatment of the child. D.D., 804 N.E.2d at 268. It is well-established, however, that this plan need not be detailed, so long as it offers a general sense of the direction in which the child will be going after the parent-child relationship is terminated. Id. Notably, this court has also previously held that the fact that there is no specific family in place to adopt the child does not make the plan unsatisfactory. See In re B.D.J., 728 N.E.2d 195, 204 (Ind. Ct. App. 2000) (concluding that plan for adoption of special needs children was sufficient even if not adopted by current foster parents because if that avenue did not work other adoption options could be pursued).

"Attempting to find suitable parents to adopt [a child] is clearly a satisfactory plan." Lang, 861 N.E.2d at 375. In the present case, R.R. had lived in licensed foster care for over two years and was thriving. The ACDCS's plan is for R.R. to remain in foster care until he is adopted. This plan provides the trial court with a general sense of the direction of R.R.'s future care and treatment. We therefore conclude the trial court's determination that the ACDCS's plan for adoption is an "appropriate plan" is not clearly erroneous. Appellant's Appendix at 35.

Conclusion

A thorough review of the record reveals that the trial court's judgment terminating Mother's parental rights to R.R. is supported by clear and convincing evidence. This court will reverse a termination of parental rights "only upon a showing of 'clear error'--that which leaves us with a definite and firm conviction that a mistake has been made." Matter of A.N.J., 690 N.E.2d 716, 722 (Ind. Ct. App. 1997) (quoting Egly, 592 N.E.2d at 1235). We find no such error here.

Affirmed.

CRONE, J., and BRADFORD, J., concur.