

NOTICE: This order was filed under Supreme Court Rule 23 and is not precedent except in the limited circumstances allowed under Rule 23(e)(1).

IN THE
APPELLATE COURT OF ILLINOIS
FIRST DISTRICT

<i>In re</i> W.C. and J.C., Minors)	
)	Appeal from the Circuit Court
(The People of the State of Illinois,)	of Cook County.
Petitioner-Appellee,)	
)	Nos. 22 JA 00079
v.)	22 JA 00080
)	
Chelsea J.,)	The Honorable
Respondent-Appellant).)	Peter J. Vilkelis,
)	Judge Presiding.
)	

JUSTICE REYES delivered the judgment of the court.

Presiding Justice Martin and Justice Rochford concurred in the judgment.

ORDER

¶ 1 *Held:* The juvenile court's finding of unfitness is affirmed, where its finding that respondent failed to make reasonable progress toward the return of her children to her during at least one specified nine-month time period was not against the manifest weight of the evidence.

¶ 2 The instant appeal arises from orders finding that respondent Chelsea J. was unfit to parent her two minor sons, six-year-old W.C. and five-year-old J.C., and that it was in the minors' best interest to terminate her parental rights. On appeal, respondent challenges only the

unfitness finding, claiming that the juvenile court's order was against the manifest weight of the evidence. For the reasons that follow, we affirm.¹

¶ 3

BACKGROUND

¶ 4

Respondent is the mother of two sons: minor W.C., who was born on September 16, 2019, and minor J.C., who was born on August 17, 2020.² On February 10, 2022, the State filed petitions for adjudication of wardship for both children, asking for the minors to be adjudicated wards of the court; the State also filed a motion for temporary custody for each child on the same day. The adjudication petitions alleged that the minors were neglected due to an injurious environment under section 2-3(1)(b) of the Juvenile Court Act of 1987 (Juvenile Court Act) (705 ILCS 405/2-3(1)(b) (West 2022)) and were abused due to a substantial risk of physical injury under section 2-3(2)(ii) of the Juvenile Court Act (705 ILCS 405/2-3(2)(ii) (West 2022)). The facts underlying both claims were the same. According to the petitions, respondent had three prior indicated reports for substance misuse and “substantial risk of physical injury/environment injurious to health/welfare by neglect,” which had resulted in the children being placed into the custody of the Department of Children and Family Services (DCFS) before being returned to respondent's care in August 2021. The State's petition further alleged that, on February 8, 2022, respondent was involved in a physical altercation while under the influence of drugs and alcohol; J.C. was present during the altercation. Respondent admitted to using illegal substances while her children were present, and police observed drug

¹ The instant appeal is an accelerated appeal pursuant to Illinois Supreme Court Rule 311(a) (eff. July 1, 2018), which requires us to issue a decision within 150 days after the filing of the notice of appeal, except for good cause shown. The notice of appeal in this case was filed on October 28, 2024. All parties, however, requested multiple extensions of time to file their briefs on appeal, which we granted. Accordingly, we find that good cause is shown for the delay in filing this disposition.

² The father of both children is deceased.

paraphernalia in her apartment. Respondent also admitted to “creating an inappropriate care plan” for W.C.

¶ 5 On the same day, based on the allegations contained in the petitions for adjudication of wardship, the juvenile court found probable cause that the minors were neglected, and that immediate and urgent necessity existed to support their removal from the home. The juvenile court granted temporary custody of both minors to the DCFS guardianship administrator.

¶ 6 On September 7, 2022, after an adjudication hearing, the juvenile court entered an adjudication order finding the minors neglected due to an injurious environment, due to “the mother’s admitted illegal substance use; the mother was engaged in a physical altercation while using illegal substances and the minor [W.C.] [*sic*] was present.” On October 5, 2022, the juvenile court entered a disposition order making the minors wards of the court and finding respondent (1) unable for some reason other than financial circumstances alone to care for, protect, train, or discipline the minors and (2) unfit. The juvenile court further found that reasonable efforts had been made to prevent or eliminate the need for removal of the minors from their home, but that it was in the best interest of the minors to remove them from the custody of respondent. The juvenile court placed the minors in the custody of the DCFS guardianship administrator with the right to place them.

¶ 7 Initially, the juvenile court entered a permanency order with a goal of return home pending status hearing; the initial permanency order stated that three-year-old W.C. and two-year-old J.C. were currently residing in a nonrelative foster home together. On June 15, 2023, the juvenile court entered a permanency order modifying the permanency goal to substitute care pending court determination on termination of parental rights; the order indicated that the minors were residing together in a nonrelative foster home, where they were engaged in all

recommended services, but that “[t]he mother is engaged in some services but is inconsistent,” and was also “visiting but is inconsistent.”

¶ 8 On December 5, 2023, the State filed supplemental petitions for the appointment of a guardian with the right to consent to adoption (termination petitions) with respect to both minors. In its petitions, the State alleged that respondent was unfit under sections 1(D) of the Adoption Act (750 ILCS 50/1(D) (West 2022)) and 2-29 of the Juvenile Court Act (705 ILCS 405/2-29 (West 2022)). Specifically, the petitions alleged that respondent was unfit under (1) section 1(D)(b) of the Adoption Act for failure to maintain a reasonable degree of interest, concern, or responsibility as to the children’s welfare (ground (b)); and (2) section 1(D)(m) of the Adoption Act for failing to make reasonable efforts to correct the conditions that were the basis for the removal of the children and/or failing to make reasonable progress toward the return of the children to her (ground (m)). Additionally, the petitions alleged that it would be in the minors’ best interest to appoint a guardian with the right to consent to their adoption, as they had resided with their foster parents since April 10, 2022, the foster parents desired to adopt them, and adoption by the foster parents would be in the minors’ best interest.

¶ 9 On March 28, 2024, respondent filed a motion to reconsider the juvenile court’s June 15, 2023, permanency order which had modified the permanency goal to substitute care pending court determination on termination of parental rights. Respondent contended that, as of the date of the order, she had been engaged in a substance abuse assessment and substance abuse programs, and had completed classes on parenting, domestic violence, and anger management. Respondent further claimed that she had tested negative for any substances other than methadone on May 15, 2023, and June 5, 2023. Respondent also maintained that, since the date of the goal change, she had completed an intensive outpatient treatment program, had

tested negative for any substances other than methadone, and had reengaged in substance abuse services, and that she had been “consistently engaged in and committed to these services outside of hospitalizations due to ongoing, unrelated health issues.” Respondent further indicated that she had secured a three-bedroom apartment. Respondent’s motion to reconsider was denied on May 15, 2024.

¶ 10

The parties came before the juvenile court for a hearing on the termination petitions on August 8 and September 26, 2024. The first day of the trial was focused on the admission of the parties’ exhibits. The State’s exhibits consisted of (1) respondent’s certified and delegated records from Haymarket Center (Haymarket), St. Mary of Nazareth Hospital (St. Mary’s), PCC Community Wellness Center (PCC Wellness), and Healthcare Alternative Systems (HAS); (2) a 2020 integrated assessment for the family, from the family’s earlier involvement with DCFS; (3) service plans from August 2022, February 2023, August 2023, and February 2024; (4) a court report authored by the DCFS case worker in preparation for the June 15, 2023, permanency hearing; and (5) a supervision case note authored by the case worker’s supervisor. In addition, respondent submitted two exhibits consisting of (1) additional certified records from HAS and (2) a certificate of completion from HAS. All of the exhibits were admitted into evidence, with respondent’s exhibits being admitted over the public guardian’s objection. In addition, the juvenile court took judicial notice of (1) the March 10, 2022, finding that the minors’ father is deceased; (2) the September 7, 2022, adjudication findings; (3) the October 5, 2022, dispositional hearing; (4) the June 15, 2023, change of permanency goal; and (5) the State’s nine-month pleadings, which specified the nine-month periods at issue as September 7, 2022, through June 7, 2023, and March 5, 2023, through December 5, 2023.

¶ 11 As relevant to the instant appeal, the admitted exhibits established the following. The case came into the system when respondent was discovered by police outside her apartment, holding one-year-old J.C., while under the influence of alcohol and drugs and bleeding from the head; respondent had given two-year-old W.C. to the care of a woman named Yesenia but did not know Yesenia's last name or address. Respondent admitted to police that she and two men were using cocaine in the home in the presence of J.C.³ Responding officers observed the home to have "broken doors, clutter everywhere, old syringes laying on the floor, and all types of 'junk' in the baby crib." Respondent admitted to leaving J.C. alone in the home with the two men, and J.C. was observed to have "bruises, abrasions and marks on his body." Respondent had a history of substance abuse and had previously lost custody of her children.

¶ 12 At the time of the August 2022 service plan, respondent was referred to (1) Family Focus for individual therapy and parenting education/coaching; (2) HAS for substance abuse treatment/assessment; (3) Haymarket for substance abuse treatment/assessment, individual therapy, domestic violence treatment, and parenting classes; and (4) Abraxas Services (Abraxas) for substance abuse treatment. Respondent had not engaged in any of the referred services, other than enrolling in an inpatient detox program at Haymarket from which she withdrew after five days when she was hospitalized for a blood clot. Between May 11, 2022, and July 26, 2022, respondent was also referred for eight random urine drops: two returned positive for drugs, one returned negative but had a note that the "Lab reported sample was diluted," and respondent failed to appear for the remaining five. Respondent was also required to initiate psychiatric care, which she reported doing, but the case worker was unable to obtain

³ The record indicates that Yesenia was the girlfriend of one of the men; W.C. was later recovered from her home.

records confirming the service. The service plan indicated that parent-child visits were planned to occur weekly, but that respondent was inconsistent. In addition, on three occasions, the visits were cut short after respondent was suspected of being under the influence.

¶ 13 Respondent's medical records for the relevant time periods indicated that she completed a substance abuse assessment at HAS on August 12, 2022, where she was recommended to complete a minimum of 75 hours of intensive outpatient (IOP) substance abuse treatment and continued care programming.

¶ 14 On August 25, 2022, however, she was admitted to St. Mary's complaining of chest pain and dizziness, where she remained for 14 days after being diagnosed with streptococcal sepsis. On the day of her admission, she informed the hospital that she had used heroin, cocaine, and marijuana that day, and had also received methadone from a local clinic. Slightly less than three weeks after her discharge, she was returned to St. Mary's emergency department by the fire department after reporting difficulty breathing. Respondent reported that she was an intravenous drug user who injected to the left groin area, which was "red and swollen," and requested an evaluation of the affected area. Respondent, however, left before being treated.

¶ 15 During this time, respondent had weekly visits scheduled with the children but was "inconsistent with visits" and continued to struggle with managing and redirecting their behavior. On two occasions, respondent was suspected of being under the influence during visits and was sent for toxicology screenings. On October 4, 2022, she tested positive for "Benzos, cocaine, and heroin," and on November 29, 2022, she did not appear for testing. Respondent was unsuccessfully discharged from the HAS IOP program on November 3, 2022, for relapsing, and it was recommended that she complete a detox program and a 28-day inpatient treatment before resuming treatment.

¶ 16 On January 2, 2023, respondent began a 28-day inpatient treatment at Haymarket and was successfully discharged January 30, 2023. At the time of entering treatment, respondent reported using cocaine, heroin, and Xanax, and consuming alcohol daily. She reported that, during the 90 days prior to treatment, she had used cocaine and heroin on “90 of those days,” Xanax on “87 of those days,” and had consumed alcohol on “90 of those days to intoxication.” On the same day that she was discharged from Haymarket, however, respondent was taken to St. Mary’s in the evening after a heroin overdose. Respondent “admit[ted] to using heroin today because ‘I just got out of rehab.’ ”

¶ 17 A February 2, 2023, service plan indicated that, since the August 2022 service plan, respondent “has progressed in her services, however there are still some outstanding.” While in inpatient treatment at Haymarket, respondent obtained certificates in parenting and anger management. She also enrolled in individual domestic violence counseling and was engaged in parenting classes/coaching at Family Focus. Respondent also reported completing a psychiatric assessment and receiving treatment but had not provided any records of such services despite repeated requests. In addition, respondent had positive urine drops on February 3, 2023, February 17, 2023, March 22, 2023, and May 3, 2023.

¶ 18 On May 3, 2023, respondent completed another substance abuse assessment at HAS, where she reported that she had last used heroin on December 30, 2022, and had last used cocaine on April 29, 2023. A drug test administered at the time of the assessment returned positive results for cocaine and methadone. Respondent was recommended to complete a minimum of 75 hours of IOP substance abuse treatment and continued care programming. After completing the IOP program in August 2023, respondent did not engage in any supportive services or

follow up care. Respondent's case was closed unsuccessfully on October 28, 2023, for lack of attendance.

¶ 19 An August 8, 2023, service plan indicated that, since the February 2023 service plan, respondent continued to have outstanding services. While respondent had completed parenting classes and anger management, her outstanding services included parenting coaching, individual therapy, substance abuse treatment, psychiatric treatment and medication monitoring, and a parenting capacity assessment. Beginning in July 2023, respondent now had visitation with the children once a month and had "so far been consistent," although the bond between her and her children was "frail."

¶ 20 On November 29, 2023, respondent again completed a substance abuse assessment at HAS, reporting that she had last used heroin on December 30, 2022, and had last used cocaine on April 29, 2023. A drug test returned a negative result for all substances other than methadone. Respondent was recommended to complete a minimum of 20 hours of outpatient substance abuse treatment.

¶ 21 On December 17, 2023, respondent was again admitted to St. Mary's after complaining of severe left leg pain, among other issues, where she remained for 16 days. Respondent reported that "last week she tried multiple times to inject heroin into her left groin and could not hit the vein," and further reported that she felt that she was in heroin withdrawal "as she typically uses about \$40 per day, with last use yesterday."

¶ 22 In addition to the admitted exhibits as described above, the parties presented the testimony of (1) Martha Vega, the assigned DCFS supervisor for the family's case, and (2) respondent. Vega testified that respondent was initially assessed for services including a substance abuse evaluation and assessment; parenting classes and parenting coaching; and domestic violence,

trauma based, and individual therapy. Respondent was also referred for psychiatric services at some point.

¶ 23 With respect to the substance abuse issues, respondent was referred to substance abuse services with Abraxas early in the process but did not engage in such services. She was then referred to HAS in April or May 2022, but did not engage in services there, either. She was eventually referred for services at Haymarket, where she completed a 28-day detox program but did not participate in the outpatient treatment which was recommended following the program. Vega testified that, up to the time of the June 2023 goal change, substance abuse treatment remained a recommended service, as respondent had not completed it.

¶ 24 Vega testified that respondent was required to participate in drug-testing “drops” throughout the life of the case. Shortly after completing the detox program, she tested positive for cocaine. She also tested positive for fentanyl and cocaine while hospitalized in 2023.

¶ 25 Vega also testified that respondent completed parenting classes while engaged in the 28-day detox program. She did not, however, engage in the recommended parent coaching or parenting classes services through Family Focus, a referral which had been made in 2022. She was later referred to Bright Point for parent coaching but did not engage in the service. Vega testified that parenting coaching remained an outstanding service.

¶ 26 With respect to domestic violence services and individual therapy, Vega testified that respondent was referred to domestic violence services at HAS, but did not engage in services either there or through Mujeres Latinas, where she was later referred, and domestic violence services remained outstanding. In addition, respondent was referred to Family Focus at the onset of the case for individual therapy but did not engage in services. She was later referred to HAS and I Am Able Center but never engaged in individual therapy. Respondent reported

that she had been diagnosed with anxiety and engaged with a psychiatrist at Women's Center. She did not, however, provide any verification of such services and the agency reported that respondent was not provided any psychiatric services there.

¶ 27 Vega testified that respondent visited the minors and, prior to the goal change, supervised visits were offered once a week for two hours. Respondent was not consistent in visiting, sometimes participating only once a month; when she missed visits, Vega testified that respondent indicated that she did not have a ride or was hospitalized. Visitation never progressed beyond supervised visitation. At the beginning of the case, there were also concerns at several visits that respondent appeared to be under the influence, so the agency cut the visits short. There was also a period of time in which visits were suspended due to respondent's failure to appear, but visitation resumed after a team meeting with respondent. After the goal change, respondent had attended approximately 80% of her scheduled visits.

¶ 28 On cross-examination by respondent's counsel, Vega testified that she was unaware that respondent had been receiving psychiatric services from PCC Wellness. She further testified that she was unaware of an April 10, 2023, certificate of completion and successful discharge report from Haymarket concerning respondent's domestic violence services, nor was she aware of a December 8, 2022, certificate of completion from Family Focus concerning parenting classes. Vega also admitted that respondent was participating in an outpatient substance abuse treatment program through HAS in November 2023. She did not recall counsel sending her documentation of negative toxicology results in November 2023, and did not follow up with HAS concerning the services, as "[a]t that time, the goal was already changed." Vega explained that, after the goal change, the agency could only "recommend[]" community-based services and was no longer able to refer her to any such services.

¶ 29 Respondent also testified on her own behalf, testifying that during the life of the case, she had participated in parenting classes; services for domestic violence, anger management, and mental health; and substance abuse treatment, both inpatient and outpatient. She testified that she completed parenting classes at both Family Focus and Haymarket, and was participating in parent coaching at Family Focus before her goal changed and services were discontinued. Respondent further testified that her substance abuse treatment included a counseling component, as well as random toxicology tests, which all returned negative results. Respondent testified that she had been sober for “a year and a half” and remained sober currently.

¶ 30 After considering the evidence and the parties’ arguments, the juvenile court found that the State had established respondent’s unfitness by clear and convincing evidence. On the same day, the juvenile court entered an order finding by clear and convincing evidence that respondent was unfit under both ground (b) and ground (m) of the Adoption Act and that it was in the minors’ best interest to terminate her parental rights.⁴ This appeal follows.

¶ 31 ANALYSIS

¶ 32 On appeal, respondent contends that the juvenile court’s unfitness finding was against the manifest weight of the evidence. Under the Juvenile Court Act, termination of parental rights requires a two-step process. First, there must be a showing, by clear and convincing evidence, that the parent is unfit, as defined in section 1 of the Adoption Act. *In re C.W.*, 199 Ill. 2d 198, 210 (2002); *In re Brown*, 86 Ill. 2d 147, 152 (1981). Since the juvenile court is in the best position to view and evaluate the parties, its decision is entitled to great deference, and a finding of unfitness will not be reversed unless it is against the manifest weight of the evidence. *In re*

⁴ As respondent does not challenge the juvenile court’s best interest finding, we have no need to set forth the evidence presented on that issue.

Brown, 86 Ill. 2d at 152. A finding is against the manifest weight of the evidence only where the opposite conclusion is clearly apparent. *In re Gwynne P.*, 215 Ill. 2d 340, 354 (2005). Additionally, due to the “delicacy and difficulty of child custody cases *** wide discretion is vested in the [juvenile court] to an even greater degree than any ordinary appeal to which the familiar manifest weight principle is applied.” (Internal quotation marks omitted.) *In re Lakita B.*, 297 Ill. App. 3d 985, 994 (1998). If the juvenile court makes a finding of unfitness, it then must decide whether it is in the best interest of the child to terminate parental rights. See 705 ILCS 405/2-29(2) (West 2022); *In re C.W.*, 199 Ill. 2d at 210. However, the best interests of the child cannot be considered when the court is determining fitness. *In re Adoption of Syck*, 138 Ill. 2d 255, 276 (1990).

¶ 33 In this case, the juvenile court found respondent unfit under multiple grounds. Since, however, the grounds for unfitness are independent, evidence supporting any one of the alleged statutory grounds is sufficient to uphold a finding of unfitness. *In re E.O.*, 311 Ill. App. 3d 720, 726 (2000); *In re T.Y.*, 334 Ill. App. 3d 894, 905 (2002); *In re M.J.*, 314 Ill. App. 3d 649, 655 (2000); see also *In re D.L.*, 191 Ill. 2d 1, 8 (2000) (section 1(D) lists a variety of discrete grounds for finding a parent unfit, and a challenge of only one ground of unfitness among several renders the appeal moot). Accordingly, if we determine that the juvenile court properly found respondent unfit under any of the grounds, we must affirm its decision.

¶ 34 We first consider the juvenile court’s unfitness finding pursuant to ground (m), which provides that a parent may be found to be unfit based on (1) a failure to make reasonable efforts to correct the conditions that were the basis for the removal of the children during any nine-month period following the adjudication finding or (2) a failure to make reasonable progress toward the return of the children to her during any such nine-month period. See 750 ILCS

50/1(D)(m) (West 2022). Each of these represents an independent basis for a finding of unfitness. *In re C.N.*, 196 Ill. 2d 181, 210-11 (2001).

¶ 35 Whether a parent has made reasonable efforts under ground (m) is judged on a subjective review of the parent’s achievements. *In re H.S.*, 2016 IL App (1st) 161589, ¶ 28. “The court must determine whether the parent has made ‘earnest and conscientious strides’ toward correcting the conditions which led to the removal of the children.” *In re D.F.*, 332 Ill. App. 3d 112, 125 (2002) (quoting *In re B.S.*, 317 Ill. App. 3d 650, 658 (2000)).

¶ 36 “Reasonable progress” under ground (m), by contrast, is judged on an objective standard, focusing on the steps the parent has taken toward reunification. *In re H.S.*, 2016 IL App (1st) 161589, ¶ 27. The “reasonable progress” prong of ground (m) has been interpreted to require demonstrable movement toward the goal of reunification, “judged under the familiar ‘reasonableness’ standard.” *In re C.N.*, 196 Ill. 2d at 211. Where a service plan has been established, “ ‘failure to make reasonable progress’ ” includes the parent’s failure to substantially fulfill her obligations under the service plan and correct the conditions that brought the child into care. 750 ILCS 50/1(D)(m) (West 2022). “[T]he benchmark for measuring a parent’s ‘progress toward the return of the child’ under section 1(D)(m) of the Adoption Act encompasses the parent’s compliance with the service plans and the court’s directives, in light of the condition which gave rise to the removal of the child, and in light of other conditions which later become known and which would prevent the court from returning custody of the child to the parent.” *In re C.N.*, 196 Ill. 2d at 216-17.

¶ 37 Here, the State identified two nine-month time periods during which it claimed that respondent failed to make reasonable efforts or reasonable progress: September 7, 2022,

through June 7, 2023, and March 5, 2023, through December 5, 2023. Thus, we must consider whether the juvenile court properly found unfitness under either basis for either time period.

¶ 38 On appeal, respondent acknowledges that “[t]here is no question here that the exhibits and testimony established that *** [respondent] did not complete all services that she had been referred for” during the nine-month periods alleged by the State. She argues, however, that the evidence established that she had engaged in a number of services and sufficiently demonstrated that she had made reasonable progress and reasonable efforts toward the return of the children. We do not find this argument persuasive.

¶ 39 Much of respondent’s argument concerns her claims that Vega’s testimony was “vague and uncertain and contradicted by [respondent’s] testimony” with respect to the services completed by respondent. We observe, however, that the juvenile court heard all of the evidence—and was presented with all of respondent’s records—and was in the best position to judge the credibility of Vega’s testimony and to determine what weight to give it. See *In re Brown*, 86 Ill. 2d at 152; *In re D.F.*, 201 Ill. 2d 476, 499 (2002) (the reviewing court “must not substitute its judgment for that of the trial court regarding the credibility of witnesses, the weight to be given to the evidence, or the inferences to be drawn”). In addition, in finding respondent unfit, the record demonstrates that the juvenile court primarily relied on the documentary evidence, which it described at length in its oral ruling. Indeed, the only reference at all to Vega’s testimony was the juvenile court’s observation that “we heard testimony from Ms. Vega[,] whose testimony [respondent’s counsel] described as inconsistent or incomplete. But Ms. Vega did kind of give an outline of the history of that case. And the exhibits are what they are.”

¶ 40 More importantly, respondent’s arguments do not account for the major reason for the juvenile court’s findings. As respondent recognizes in her brief on appeal, “[c]learly, [respondent’s] fundamental problem[,] and the one which was the bane of her existence, was drug use. Drug use was the reason her two boys’ cases came into the Juvenile Court system.” That “fundamental problem,” unfortunately, was one which continued to be present throughout the case—certainly within the first nine-month period identified by the State. This alone is sufficient to affirm the juvenile court’s judgment.

¶ 41 During the time period from September 7, 2022, through June 7, 2023, respondent’s medical records established that she was an active drug user. At the beginning of the time period—and while ostensibly engaged in an IOP program—she was hospitalized at St. Mary’s for sepsis, where she reported using heroin, cocaine, and marijuana. Less than three weeks after that hospital stay, she returned to the hospital after attempting to inject drugs into her groin area. She also tested positive on a drug test in October 2022 before being unsuccessfully discharged from the IOP program in November 2022 for relapsing. Respondent successfully completed a 28-day inpatient treatment program but was hospitalized for an overdose the same day she was discharged, admitting to using heroin “because ‘I just got out of rehab.’ ” She also tested positive for drugs multiple times in February, March, and May 2023 before entering another IOP program.

¶ 42 During the first nine-month time period, there is simply no way to interpret respondent’s conduct as representing “demonstrable movement toward the goal of reunification” (*In re C.N.*, 196 Ill. 2d at 211). While the record indicates that respondent made some attempts at resolving her substance abuse issues by entering into treatment, respondent immediately relapsed on every occasion. In other words, respondent was no closer to correcting her substance abuse

issues on June 7, 2023, than she had been on September 7, 2022. In that case, the juvenile court's finding that respondent failed to make reasonable progress during that time period was certainly not against the manifest weight of the evidence.

¶ 43 Respondent's reliance on later evidence as to her sobriety does not affect this result. Ground (m) provides that a parent may be found to be unfit based on a failure to make reasonable progress toward the return of the children to her during any nine-month period following the adjudication finding. See 750 ILCS 50/1(D)(m) (West 2022). In considering fitness under this ground, the juvenile court was permitted only to consider the evidence of her conduct during the alleged time periods. *In re D.L.*, 191 Ill. 2d 1, 10 (2000); *In re C.N.*, 196 Ill. 2d at 219. Thus, evidence as to respondent's later conduct has no bearing on the juvenile court's unfitness finding and would not have been appropriate for the court to consider at that stage. See *In re D.L.*, 191 Ill. 2d at 12-13 (the respondent has the opportunity to introduce such evidence at the best-interest stage of the termination proceedings).

¶ 44 Here, as noted, the juvenile court's finding that respondent failed to make reasonable progress during at least one of the alleged time periods was not against the manifest weight of the evidence. Accordingly, where there is at least one basis for the juvenile court's unfitness finding, we affirm the juvenile court's judgment and have no need to consider any other basis.

¶ 45 CONCLUSION

¶ 46 The juvenile court's judgment is affirmed, where its finding that respondent had failed to make reasonable progress toward reunification during a nine-month time period was not against the manifest weight of the evidence.

¶ 47 Affirmed.