

MEMORANDUM DECISION

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ATTORNEY FOR APPELLANT K.R.

Katharine V. Jones
Evansville, Indiana

ATTORNEY FOR APPELLANT L.M.

John R. Worman
Evansville, Indiana

ATTORNEYS FOR APPELLEE

Theodore E. Rokita
Attorney General of Indiana

Robert J. Henke
Deputy Attorney General
Indianapolis, Indiana

IN THE COURT OF APPEALS OF INDIANA

In re the Termination of the
Parent-Child Relationship of
L.M. (Minor Child) and
K.R. (Mother) and L.M.
(Father),
Appellant-Respondent,

v.

Indiana Department of Child
Services,
Appellee-Petitioner.

March 16, 2021

Court of Appeals Case No.
20A-JT-1780

Appeal from the Vanderburgh
Superior Court

The Honorable Brett J. Niemeier,
Judge

The Honorable Beverly Corn,
Referee

Trial Court Cause No.
82D04-1910-JT-1850

Mathias, Judge.

[1] K.R. (“Mother”) and L.M (“Father”) (collectively “Parents”) each appeal the Vanderburgh Superior Court’s order involuntary terminating their parental rights to their child, L.M. (“Daughter”). Parents’ raise several issues, which we restate as the following three:

- I. Whether the trial court committed reversible error by admitting certain evidence during the termination hearing;
- II. Whether Parents’ due process rights were violated; and
- III. Whether there was sufficient evidence to support termination of Father’s parental rights.

[2] We affirm.

Facts and Procedural History

[3] Mother and Father are the biological parents of Daughter, who was born on June 28, 2017.¹ On October 22, 2018, Mother brought Daughter to a local police station where Mother made comments that led law enforcement to believe “she was having a mental breakdown.” Ex. Vol. I at 111. Mother conveyed, among other things, that “the internet and radio has been talking to

¹ Mother has four older children but does not have custody over any of them, and each child lives out-of-state. The oldest two children were around five-years old and two-years old when they went to live with their paternal grandparents because Mother went to prison—the first of four times—for drug-related issues. Tr. pp. 53, 121, 124. While in prison, Mother had her third child, who has lived with maternal grandmother since “she was 2 days old.” *Id.* at 55. Mother’s fourth child was born with “meth in his system” and has lived with maternal grandmother since “he was a day old.” *Id.* at 58. Father has one older son, and there was a 2016 substantiation of neglect based on Father’s “methamphetamine abuse.” Ex. Vol. I at 75.

her,” “a hitman from England has been after her,” and “a Nissan Altima with one headlight has been following her.” *Id.* at 75. She also reported recently using methamphetamine, a drug she had used for years. Concerned for Mother’s mental health and Daughter’s welfare, law enforcement had Mother admitted at a local hospital and contacted the Indiana Department of Child Services (“DCS”) to assist with Daughter.

[4] Hospital personnel observed that Mother was having “delusions and hallucinations.” *Id.* at 157. And a drug test confirmed the presence of methamphetamine in her system. The hospital discharged Mother that evening. Meanwhile, DCS’s attempts at reaching Father that night were unsuccessful, so Daughter was placed into foster care. When DCS spoke with Father the next day, he stated that “[M]other has been going through a mental break for about a month” and expressed “concerns for [M]other’s mental state.” *Id.* at 79. Father, who also has a history of methamphetamine use, denied recently using the drug but refused to submit to a drug screen. Daughter was placed in the care of her paternal grandparents later that week.

[5] On October 22, DCS filed a petition alleging Daughter was a child in need of services (“CHINS”). The court granted DCS’s petition, and issued an order adjudicating Daughter a CHINS, continuing her placement with paternal grandparents, and setting a date for the dispositional hearing.

[6] Prior to that hearing, Mother—at DCS’s direction—underwent a comprehensive mental health and substance abuse assessment. *See* Tr. pp. 31,

33, 67–68; Ex. Vol. I at 4–17. The therapist described Mother as “disorganized, labile, and somewhat disoriented to time and purpose.” Ex. Vol. I at 15.

Mother told the therapist that “the police are trying to make her crazy” and that “people are trying to talk to her through her laptop and other electronics.” *Id.*

Mother also reported that she “smoked meth daily” and had used “K2 and bath salts years ago.” *Id.* at 8. The therapist found it “difficult to determine if

[Mother’s] paranoia and psychosis are organic or due to substance use.” *Id.* at

15. Ultimately, the therapist recommended Mother return for “at least 3

months” of individual therapy with the purpose of “assessing mental status, treatment planning, encouraging [abstinence], and assisting with individual

needs.” *Id.* at 16. Mother agreed “to return for individual therapy” and

scheduled the first session for November 26. *Id.* at 9. However, Mother never returned. Tr. pp. 39, 46, 130; Ex. Vol. I at 18, 20, 25.

- [7] On December 11, the court held a dispositional hearing. At the hearing, Mother recounted someone recently “sneaking drugs into her house through a children’s book,” but “again denied that she needed any sort of treatment to address her mental health or substance use needs.” Tr. p. 73. That same day, the court imposed several requirements on Mother and Father. Both were required, among other things, to maintain contact with the family case manager (“FCM”), enroll in recommended programs, keep all appointments with the FCM and service providers, refrain from using illegal substances, submit to random drug screens at the FCM’s discretion, and attend all scheduled visitations with Daughter. Ex. Vol. I at 35–38. Additionally, Mother was

ordered to successfully complete all resulting recommendations from her comprehensive assessment, *id.* at 38, and Father was ordered to participate in parent-aid services, *id.* at 36. The court maintained Daughter's placement with paternal grandparents and set a review hearing for April 16, 2019.

[8] In the months leading up to that hearing, Parents failed to satisfactorily comply with services. Mother refused two oral drug screens, attended only five of fourteen scheduled visitations with Daughter, and did not follow through with recommended treatment. *See* Tr. pp. 46, 68; Ex. Vol. I at 18, 20, 22, 114. Yet, Mother's need for mental-health treatment was apparent. During a January visit with Daughter, Mother told the supervisor she resembled a cleaning lady who "did not do a good job" covering up the death of an eighty-seven-year-old woman. Ex. Vol. II at 40. And in a February meeting with DCS, Mother reported taking a television from Father's home and giving it to someone so that "individual could see that the television is programmed to hurt people." Ex. Vol. I at 117. Mother consistently indicated "there is nothing wrong with her" and remained "in denial that there are still safety concerns prohibiting reunification." *Id.* at 116–17.

[9] During this same time period, Father missed two scheduled visitations with Daughter, did not consistently communicate with the FCM, failed to attend a scheduled family-team meeting, and did not complete the goals of the parent-aid service. *See* Tr. p. 83; Ex. Vol. I at 100, 111, 117, 206, 212, 219. Father's attendance at scheduled parent-aid sessions was sporadic, and when Father was

there, Mother was often also present, making “any progress with [Father] impossible.” Conf. Appellant’s App. p. 49.

[10] On April 16, the day of the review hearing, the FCM reminded Mother—prior to entering the courtroom—of the court-ordered services and the importance of her participation. Mother, however, “insisted that there was nothing wrong with her and then admitted to recent drug use.” Ex. Vol. I at 28–29. Also, the FCM asked Father to take a drug screen after the hearing, and he agreed. Tr. pp. 85, 153. But when the hearing concluded, Father ran from the FCM and fled to his vehicle, leaving Mother behind. *Id.*; Ex. Vol. I at 92.

[11] In the six months following the April 2019 review hearing, the FCM actively tried to contact Mother and Father but had no success. In May, Mother’s visitation referral with Daughter was closed due to “lack of compliance.” Ex. Vol. I at 90. Father attended one scheduled visitation with Daughter in May, but he did not attend any thereafter. In June, Father told his stepfather—with whom Daughter had been staying—that he had been avoiding the FCM due to “recent methamphetamine use.” *Id.* at 92. Meanwhile, Daughter flourished in her placement with paternal grandparents. The FCM observed that Daughter’s “speech, movement, and personality has greatly improved since placement was started.” *Id.* at 89. In September, paternal grandparents agreed to change Daughter’s placement to her paternal cousins, who expressed an intent to adopt the child.

- [12] Ultimately, on October 17, 2019, DCS petitioned to involuntarily terminate Mother’s and Father’s parental rights. After several continuances, the court held a termination hearing in June 2020. At the time, and despite DCS’s efforts, neither Mother nor Father had seen Daughter in over a year. Tr. pp. 89, 93.
- [13] During the termination hearing, the court heard testimony from several witnesses about Parents’ failure to comply with required services; Mother’s consistent drug use and concerns with Father’s drug use; Mother’s steadfast denial that she needs help or has done anything wrong; Father’s inability to address Mother’s untreated mental-health issues or detach from Mother; and how well Daughter is doing in her relative, pre-adoptive placement. *See id.* at 67–69, 81, 84–85, 88, 90–95, 108, 111–12, 126, 132, 134, 139, 147–48, 154, 159, 161, 163, 165–66. Additionally, both the court-appointed special advocate (“CASA”) and the FCM recommended termination of parental rights. *Id.* at 91, 93, 163, 165. A few months later, the court issued a thorough order terminating both Mother’s and Father’s parental rights to Daughter. Mother and Father now bring this consolidated appeal.

Discussion and Decision

- [14] Parents challenge the termination of their parental rights on several grounds. Mother alleges the trial court committed reversible error during the termination hearing in three ways: (1) allowing the CASA to give opinion testimony “based solely on hearsay”; (2) admitting Mother’s supervised visitation records; and (3) admitting Mother’s hospital records from the day Daughter was removed. Mother’s Br. at 2. Additionally, Mother and Father each contend that DCS

violated their due process rights. And finally, Father challenges the sufficiency of the evidence supporting the termination of his parental rights. We address each argument in turn.

I. *Admission of Evidence at the Termination Hearing*

[15] Mother argues that the trial court committed reversible error by allowing the admission of certain testimony and documentary evidence at the termination hearing. We disagree.

[16] Questions regarding the admission of evidence are left to the sound discretion of the trial court, and we review the court's decision for abuse of discretion. *See, e.g., In re K.R.*, 154 N.E.3d 818, 820 (Ind. 2020). An abuse of discretion occurs when the trial court's decision is against the logic and effect of the facts and circumstances before it. *Id.* If we find a trial court abused its discretion in admitting certain evidence, reversal is warranted only if we find the error adversely affected a party's substantial rights. *See Ind. Trial Rule 61; D.B.M. v. Ind. Dep't of Child Servs.*, 20 N.E.3d 174, 179–80 (Ind. Ct. App. 2014), *trans. denied*. Generally, we will not find reversible error when the erroneously admitted evidence is cumulative of properly admitted evidence; in these circumstances, the error is harmless. T.R. 61; *D.B.M.*, 20 N.E.3d at 179–80. We turn now to Mother's three claims of evidentiary error.

1. CASA's Opinion Testimony

[17] Mother first challenges testimony from the CASA, arguing that the court erred by allowing the CASA, over objection, "to give opinion testimony based solely

on hearsay.” Mother’s Br. at 18. More specifically, Mother asserts that, because the CASA was not involved with the case until after DCS filed the termination petition, the CASA’s “knowledge and recollection was limited to what files she had access to.” *Id.* at 20. Contrary to Mother’s claim, the record reveals that the majority of the CASA’s relevant testimony was based on personal knowledge and observation.

[18] At the termination hearing, the CASA explained that her “biggest concern” is Mother “having another mental break.” Tr. p. 163. And that primary concern was based on the CASA’s personal interactions with Mother. For example, when asked whether Mother had acknowledged her mental-health issues, the CASA responded, “She’s denied them to me.” *Id.* at 161. Also, before an October 2019 permanency hearing, Mother was “literally in [the CASA’s] face” in a threatening and combative manner. *Id.* at 160. The CASA explained that “the one time” she and Mother were able “to really talk . . . the fantasy kept kind of creeping in on the reality.” *Id.* at 161–62. Further, the CASA spoke with Father who told her Mother is “a sick woman and she needs help” but expressed that “he couldn’t turn his back on [Mother].” *Id.* at 166. The CASA also observed Daughter in her relative placement, stating “[s]he’s doing very well” and noting that she had bonded with the entire family. *Id.* at 159. Thus, the CASA’s opinion testimony was not, as Mother contends, “based solely on hearsay.”

[19] It is true that when asked whether Mother had sobriety issues, the CASA responded, “I only have hearsay,” *id.* at 161, but there was no further testimony

from the CASA on that issue. And to the extent Mother's argument is premised on the fact that the CASA "had never seen the parents with [Daughter]," Mother's Br. at 21, that is solely because both Mother and Father chose to stop visiting Daughter several months before the CASA was assigned to the case.

[20] In short, the trial court did not abuse its discretion by permitting the CASA, over Mother's objection, to give her opinion based on personal knowledge and observations. *See* Tr. p. 163.² We now turn to Mother's remaining two claims of evidentiary error and address them together.

2. Visitation Reports and Hospital Records

[21] Mother also challenges the admission of two sets of documentary evidence: (1) her visitation records with Daughter; and (2) her hospital records from the day Daughter was removed from Parents' care. However, Mother has failed to properly preserve these claims for appellate review.

[22] To preserve a claim of error in the admission of evidence, a party must on the record either timely object to the evidence or move to strike. [Indiana Evidence Rule 103\(a\)](#). Here, Mother did neither when the challenged documentary evidence was admitted. When DCS offered Mother's visitation reports into evidence, counsel had "[n]o objection." Tr. p. 111. Likewise, when DCS

² Even if we found the court erred in allowing the CASA's opinion testimony, the error would be harmless. Mother does not point to any evidence from the CASA that is not cumulative of other evidence presented by DCS through the FCM and other service providers. *See D.B.M., 20 N.E.3d at 179–80.*

offered Mother's hospital records into evidence, counsel responded, "I don't have an objection." *Id.* at 66. Thus, with respect to the admission of these two sets of records, Mother has failed to preserve her claims of alleged error.

[23] Though an issue is generally waived on appeal if not raised at the trial level, we may nevertheless address the claim if a party alleges fundamental error occurred. Evid. R. 103(e); *Curtis v. State*, 948 N.E.2d 1143, 1148 (Ind. 2011). But here, Mother has not claimed that the admission of either set of records constitutes fundamental error. Mother has therefore procedurally defaulted any claim of error with respect to the admission of either the visitation reports or the hospital records. See *Bowman v. State*, 51 N.E.3d 1174, 1179 (Ind. 2016).

[24] Procedural default aside, Mother has failed to show that admission of either set of records adversely affected her substantial rights. Evid. R. 103(a). The evidence from each set of records that the trial court cited in its termination order was cumulative of other unchallenged evidence. For the visitation reports, the court's order did not reference any evidence from the reports that was not also elicited during the hearing by either the visitation supervisor or the FCM. See Conf. Appellant's App. pp. 15, 19–20. The same is true for Mother's hospital records. The court referenced those records by noting that Mother was hospitalized "due to her psychiatric condition" and that she "had a positive urine screen for methamphetamine at the time." *Id.* at 13. That same evidence was provided at the hearing through other admitted exhibits and uncontested testimony.

[25] In sum, Mother has failed to show that the trial court committed any evidentiary error requiring reversal. We now turn to Parents' due process arguments.

II. *Parents' Due Process Rights*

[26] Mother and Father each contend that their due process rights were violated by DCS's alleged failure to provide certain services. More specifically, Mother asserts that DCS violated her due process rights by not making "reasonable efforts" to assist with her "mental illness." Mother's Br. at 32. Father, on the other hand, argues his due process rights were violated by DCS's failure to provide "regular drug screens and substance abuse services." Father's Br. at 15. Parents, however, have procedurally defaulted these claims by failing to raise their due process concerns in the trial court. See *In re N.G.*, 51 N.E.3d 1167, 1173 (Ind. 2016). And, on appeal, neither Mother nor Father assert that their respective claims amount to fundamental error. Parents have thus failed to preserve their due process challenges for appellate review. See *Bowman*, 51 N.E.3d at 1179. Procedural default aside, the record shows that DCS did not violate either Parents' right to due process.

[27] Termination of parental rights is a "unique kind of deprivation," and thus, when DCS seeks to terminate parental rights, it must do so in a manner that comports with due process. *In re C.G.*, 954 N.E.2d 910, 917 (Ind. 2011) (quoting *Lassiter v. Dep't of Soc. Servs.*, 452 U.S. 18, 27 (1981)). While the phrase "due process" has never been defined, it "embodies a requirement of fundamental fairness." *Id.* (quotation omitted). Whether this requirement has been satisfied

in a termination proceeding hinges primarily on “the risk of error created by” actions by DCS and the trial court. *Id.* at 918. DCS specifically must make “reasonable efforts” to reunify the family. *In re T.W.*, 135 N.E.3d 607, 615 (Ind. Ct. App. 2019), *trans. denied*. What constitutes “reasonable efforts” will vary from case to case. *Id.*

[28] As noted above, Mother contests the adequacy of DCS’s efforts to assist with her mental illness, while Father challenges the adequacy of DCS’s efforts to address concerns with his drug use.³ But the record reveals that it was Parents—not DCS—who failed to make reasonable efforts toward reunification with Daughter.

[29] DCS offered services to address Mother’s mental-health issues; she simply refused to comply. Mother was required to complete a psychological evaluation and “successfully complete any recommendations that result from the evaluation[.]” Ex. Vol. I at 38. At DCS’s direction, Mother completed a comprehensive assessment but she never followed through with the recommended treatment. More specifically, the therapist wanted Mother to

³ Father also argues that his right to due process was violated because DCS did not move to dismiss the termination petition under [Indiana Code section 31-35-2-4.5\(d\)](#). That subsection provides that DCS “**may** file a motion to dismiss” a termination petition if the department has not provided a parent with services as required by the dispositional decree. I.C. § 31-35-2-4.5(d) (emphasis added). Father contends that DCS’s failure to “provide regular and consistent drug screens” should have resulted in DCS filing a motion to dismiss the petition. Father’s Br. at 16. This argument lacks merit for two reasons. First, subsection [31-35-2-4.5\(d\)](#) is permissive, not mandatory. Second, the dispositional order did not mandate regular and consistent drug screens; it required Father to “[s]ubmit to random drug screens,” which “shall be performed at FCM’s discretion.” Ex. Vol. I at 36. And when the FCM exercised that discretion, Father fled and evaded the FCM for several months.

return for “at least 3 months” of individual therapy with the purpose of “assessing mental status, treatment planning, encouraging [abstinence], and assisting with individual needs.” *Id.* at 16. Though Mother agreed “to return for individual therapy,” she did not. *Id.* at 24–25. Instead, despite overwhelming evidence to the contrary, Mother has consistently maintained that she does not have any mental-health issues. *See, e.g.*, Tr. pp. 45, 68, 73, 80–81, 86, 95, 139, 161.

[30] As to Father, his conduct constantly inhibited DCS’s efforts to address concerns with his drug use. Father was required to “[s]ubmit to random drug screens” at the “FCM’s discretion if FCM reasonably believes that Father is under the influence.” Ex. Vol. I at 36. Prior to the April 2019 review hearing, the FCM “was informed by relative placement that [Father] had admitted to using methamphetamine.” Tr. p. 85. So, the day of that hearing, the FCM asked Father to take a drug screen. He agreed to do so after the hearing. But when the time came, Father ran from the FCM and fled in his vehicle. Over the next six months, the FCM tried unsuccessfully to contact Father on several occasions. The FCM would later learn that, during this time, Father told his stepfather he was avoiding DCS because he had recently used methamphetamine.

[31] In short, DCS made reasonable efforts to address Mother’s mental-health issues and Father’s drug use—efforts that were unfortunately unsuccessful because of each respective Parent’s actions. To the extent that Mother or Father felt that the court-ordered services or DCS’s support were inadequate, it was their responsibility to request additional assistance. *See Prince v. Dep’t of Child Servs.*,

861 N.E.2d 1223, 1231 (Ind. Ct. App. 2007). Indeed, “a parent may not sit idly by without asserting a need or desire for services and then successfully argue that he was denied services to assist him with his parenting.” *In re B.D.J.*, 728 N.E.2d 195, 201 (Ind. Ct. App. 2000). Further, DCS offered other services to Parents that they either refused or did not complete successfully. Thus, even if Parents had not procedurally defaulted their due process claims, neither Mother nor Father have established that DCS violated their respective rights to due process. *Cf. T.W.*, 135 N.E.3d at 618 (finding a parent’s due process rights were violated where parent asked for additional assistance and DCS failed to provide the parent “with the support and services he so desperately needed”). We now address Father’s challenge to the sufficiency of the evidence supporting the termination of his parental rights.

III. Evidence Supporting Termination of Father’s Parental Rights

[32] Finally, Father argues that the evidence is insufficient to support the termination of his parental rights.⁴ In addressing Father’s claim, we do not reweigh the evidence or judge witness credibility, and we consider only the evidence and reasonable inferences that support the court’s decision. *See, e.g., In re C.D.*, 141 N.E.3d 845, 852 (Ind. Ct. App. 2020), *trans. denied*. We will affirm a trial court’s judgment terminating parental rights unless it is clearly erroneous. *Id.* A judgment is clearly erroneous if the court’s findings of fact do not support

⁴ Mother does not challenge the sufficiency of the evidence supporting the court’s termination of her parental rights.

its legal conclusions, or if the legal conclusions do not support the ultimate decision. *See id.*

[33] Father specifically challenges the trial court’s conclusions that DCS proved the following required elements by clear and convincing evidence: (1) there is a reasonable probability the conditions that resulted in Daughter’s removal will not be remedied;⁵ and (2) termination is in Daughter’s best interests. [I.C. §§ 31-35-2-4\(b\)\(2\), -37-14-2](#). We address Father’s argument on each element in turn.

1. Conditions that Resulted in Daughter’s Removal

[34] Father argues there is insufficient evidence to clearly and convincingly show that there is a reasonable probability that the conditions leading to Daughter’s removal will not be remedied. We disagree.

[35] When assessing whether there is a reasonable probability that conditions that led to a child’s removal will not be remedied, we must consider not only the initial basis for removal but also the bases for continued placement outside the home. *In re A.I.*, 825 N.E.2d 798, 806 (Ind. Ct. App. 2005), *trans. denied*. In making its case, “DCS need not rule out all possibilities of change; rather, [it] need establish only that there is a reasonable probability that the parent’s behavior will not change.” *In re Kay.L.*, 867 N.E.2d 236, 242 (Ind. Ct. App.

⁵ Because Indiana Code subsection [31-35-2-4\(b\)\(2\)\(B\)](#) is written in the disjunctive, we decline to address Father’s additional claim that DCS failed to prove that continuation of the parent-child relationship threatens Daughter’s well-being.

2007). DCS made that showing here, and the trial court’s findings show that it engaged in the appropriate two-step analysis.

[36] First, the trial court identified the removal conditions. See *In re I.A.*, 934 N.E.2d 1127, 1134 (Ind. 2010). Specifically, the court found that Daughter was removed due to Mother’s “mental health issues” and Father’s unavailability to care for the child. Conf. Appellant’s App. p. 13. Second, the trial court made findings supporting its conclusion that there is not a reasonable probability the removal conditions would be remedied. *I.A.*, 934 N.E.2d at 1134. On that point, the court found in relevant part: “Father has failed to intervene with Mother’s behaviors and has enabled Mother’s substance abuse and mental health issues throughout the underlying CHINS case”; Father would not “refuse Mother if she wished to continue to live” with him; Father did not comply “with reunification services,” “failed to drug screen,” “failed to remain drug . . . free,” and “failed to attend visits with [Daughter].” Conf. Appellant’s App. pp. 19, 22–24. Ample evidence in the record supports these findings.

[37] Turning to that evidence, it is apparent that Father is unwilling to confront and address Mother’s untreated mental-health issues for the sake of Daughter.⁶ After Mother’s November 2018 comprehensive assessment, the FCM told Father

⁶ Father likens his circumstances to those of the father in *In re V.A.*, 51 N.E.3d 1140 (Ind. 2016), where our supreme court recognized that “simply living with a relative suffering from mental illness” is not a sufficient basis for terminating parent-rights, *id.* at 1148. That comparison is misplaced. In *V.A.*, the father had little, recognition of the mother’s mental illness, and he complied with all court-ordered requirements. *Id.* at 1153. The same is not true here.

about Mother's scheduled follow-up appointment "to continue those services." Tr. 70. Though Father "seemed to believe and understand that [Mother] did need some sort of services," he seemingly accepted Mother's statement that "there's nothing wrong and she did not need to return." *Id.* And, as noted above, Mother did not attend the follow-up appointment and never participated in any treatment.

[38] In the following months, Father was given several opportunities to distance himself from Mother and reunify with Daughter through a change of custody, but he never followed through. For example, the FCM scheduled a March 2019 family-team meeting with only Father, but "[h]e failed to appear." *Id.* at 83. Just a few weeks later, Father agreed with the FCM that "it was a danger for [Mother] to be around the child." *Id.* at 83–84. But when the FCM then explained to Father how and where to file for sole custody of Daughter, "he just kind of shook his head." *Id.* at 84.

[39] At the termination hearing, the CASA made the following observation about Father: "it was as if he couldn't balance which one was the priority. [Mother's] mental health or [Daughter]." *Id.* at 164. That observation is supported by testimony from several witnesses. Father admitted Mother has "bizarre thoughts" and agreed she "needs help," but then conveyed "no doubt" that Mother could currently care for Daughter. *Id.* at 149–50, 155. Father also expressed reservations at the thought of either parenting Daughter alone or keeping Mother at a distance if the court terminated only her parental rights. *Id.* at 157. To that end, testimony from multiple witness revealed that: Mother had

been living with Father for a vast majority of the previous three-plus years, *id.* at 61, 106, 116, 134, 14; Father has no viable childcare plans for Daughter if Mother is not in his life, *id.* at 70, 79, 166; and Father refuses to turn his back on Mother even though he realizes she needs significant help and may be a danger to Daughter, *id.* at 70, 78–80, 166.

[40] Aside from Father’s conduct related to Mother, the record also supports the court’s findings concerning Father’s failure to comply with reunification requirements. Throughout these proceedings Father admitted to methamphetamine use, fled from the FCM after agreeing to take a drug screen, avoided contact with the FCM for several months, and failed to satisfactorily complete parent-aid services. In addition, Father stopped visiting Daughter in May 2019—months before DCS filed for termination of his parental rights. *See Lang v. Starke Cnty. Off. of Fam. & Child.*, 861 N.E.2d 366, 372 (Ind. Ct. App. 2007) (failure to exercise right to visit one’s children demonstrates lack of commitment to complete actions necessary to preserve parent-child relationship), *trans. denied*.

[41] We acknowledge that the primary reason for Daughter’s removal was due to Mother’s mental-health concerns, but Father’s response to those concerns as well as his actions and inactions throughout the remainder of the proceedings contributed to Daughter’s continued placement outside the home. While we do not question the sincerity of Father’s desire to reunite with Daughter, the evidence above demonstrates that he did not take the necessary actions to remedy the conditions that resulted in Daughter’s removal. As the CASA aptly

observed, Father “has had more than ample time to prove that he could do this and lay out a plan.” Tr. p. 166. Unfortunately, he did not.

[42] In sum, the trial court’s evidence-backed findings support the court’s conclusion that there is a reasonable probability that the reasons for Daughter’s removal will not be remedied.

2. Best Interests of Daughter

[43] Father also argues there is insufficient evidence to clearly and convincingly show that termination of his parental rights is in Daughter’s best interests. We disagree.

[44] When determining whether termination of the parent-child relationship is in a child’s best interests, trial courts may consider a variety of factors. *See In re K.T.K.*, 989 N.E.2d 1225, 1234–35 (Ind. 2013). In considering those factors to reach an ultimate conclusion, the court must subordinate the interests of the parent to those of the child involved. *Id.* One such factor is a child’s need for permanency and stability—a central consideration in determining best interests. *In re G.Y.*, 904 N.E.2d 1257, 1265 (Ind. 2009). Another factor is the testimony of service providers, which can further support a court’s best-interests conclusion. *See, e.g., In re S.K.*, 124 N.E.3d 1225, 1234 (Ind. Ct. App. 2019), *trans. denied*.

[45] Here, the court considered a variety of factors and found, in relevant part, that “Father’s refusal to participate in drug screens, cessation of visitation with

[Daughter], and enablement of Mother's issues indicate that maintaining the parent-child relationship" is not in Daughter's best interests. Conf. Appellant's App. p. 26. Ample evidence supports those findings.

[46] The evidence on Father is well documented: he did not participate in an agreed-to April 2019 drug screen and then avoided contact attempts by the FCM for several months; he stopped visiting Daughter in May 2019 and had not seen her for over a year at the time of the termination hearing; and he has displayed an unwillingness to confront and address Mother's untreated mental-health issues for the sake of Daughter.

[47] Other evidence-backed findings further support the court's best-interest conclusion. In its order, the trial court noted the testimony of both the FCM and CASA, each of whom testified that termination of Father's parental rights would be in Daughter's best interests. *Id.* at 16, 20; Tr. pp. 94, 165. In addition, the court found that Daughter "has been in the same relative placement for over a year, is bonded to the parents and other children and is thriving emotionally and physically." Conf. Appellant's App. p. 30. To that end, the FCM and CASA each testified that Daughter is doing very well in her pre-adoptive placement with Father's cousin, his wife, and their three daughters. Tr. pp. 94, 159. The CASA added that daughter has bonded with each family member. *Id.* at 159. And Father even acknowledged that Daughter is in a "good and safe environment" where she "is receiving what she needs." *Id.* at 148, 154.

[48] In sum, the trial court's evidence-backed findings support the court's conclusion that termination of Father's parental rights is in Daughter's best interests.

Conclusion

[49] The trial court did not err in admitting certain evidence at the termination hearing, DCS did not violate Mother's or Father's due process rights, and the court's decision to terminate Father's parental rights is not clearly erroneous.

[50] We affirm.

Altice, J., and Weissmann, J., concur.