

Facing Facts:

A Study of Issues that Shape Our Region



Preface

Facing Facts: A Study of Issues that Shape Our Region

This document is the result of months of study and research into the critical needs in Richland and Lexington Counties. The intent is to biannually measure progress on the identified issues and keep the community aware of those issues that need investment of resources.

Five partners have come together to lend their support for this project and have, with the assistance of key volunteers and local professionals, gathered the data. The partners are:

Central Carolina Community Foundation
Central Midlands Council of Governments
Greater Columbia Chamber of Commerce
Sisters of Charity Foundation of South Carolina
United Way of the Midlands

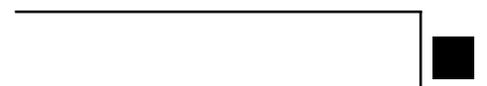
Five general focus areas are included. They are:

- Building Stronger Families, Individuals and Children
- Promoting Health and Recovery
- Creating Quality Education, Job Training and Life Skills
- Securing Food, Shelter, Safety and Transportation
- Assuring Economic Development and Quality of Life

This document is being made available for comment before the final edition is released to the community. Please email your comments to richlex@uway.org. Thank you for your interest and concern for our community.

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**BUILDING STRONG FAMILIES,
INDIVIDUALS,
and
CHILDREN**

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BUILDING STRONG FAMILIES, INDIVIDUALS AND CHILDREN

The Strategy Committee for *Strong Families, Individuals and Children* developed a goal to guide their study. It is based on a philosophy that organizations, agencies and government should develop a system to help citizens help themselves and others. Their goal is:

to provide community systems to empower citizens to help themselves and each other through maximizing strengths within individuals and families.

This Strategy Committee named many of the same issues identified by other groups such as poverty, violence, low family literacy, and lack of quality childcare. Three Strategy Committees listed poverty as a major issue, violence was named by two groups, family literacy by three groups and childcare by three groups. Some of their issues have been included in two other Strategy Committee Reports. Their concern about childcare is outlined under *Quality Education, Job Preparation and Life Skills* strategy. Their concern about crime is outlined under the *Food, Shelter, Safety and Transportation* strategy.

The Strategy Committee prioritized 28 issues and concerns they identified during the first two meetings. Based on the priorities and the issues transferred to other Strategy Committees, they developed three major areas: (1) effective parenting, (2) a safety net for children and families, and (3) the need for public/private services and business/industry coordination to address needs of citizens. Outcome measures are listed under each issue. The same measures will be taken in future years to see if the issue has improved because of community action.

1. Effective Parenting

Outcome Measures: Literacy Level of Adults Over 25 Years
Births to Single Females
Family Structure
Child Abuse and Neglect
Family Poverty

2. Safety Net for Families and Children

Outcome Measures: Childcare Programs for Low-Income Families
Childcare Availability
Grandparents As Childcare Providers
Silverxcard for Seniors
Food Stamps and TANF Recipients
Free and Reduced Lunches
Transportation Provided By Medicaid

3. Coordination Between Public/Private Services and Business/Industry Cooperation for Social Needs

Outcome Measures: Community Engagement
Foundations and Trusts
University Research and Laboratory Centers
Business Involvement in School to Work

1. EFFECTIVE PARENTING

Introduction: Several different Strategy Committees identified the need for effective parenting. The goal of the Strategy Committee is not to develop programs and services to give to parents but rather, to develop a system that will support parents to help themselves and each other to be effective parents for their children. They selected 5 long-term outcome measures including education of parents, single parents, amount of child abuse and neglect, and the income level of families.

Literacy Level of Adults Over 25 Years

Description: One way to measure the literacy level of adults over 25 years of age is to determine the highest degree or number of years they attended school. The following chart shows the number of years attended, highest degree earned, and percentage of the total population for specific counties in South Carolina.

Analysis: Parents are their children’s first teachers, a key component of parenting. Early developmental activities such as reading to their children and later activities of helping their children with homework are influenced by the adult’s literacy level.

County	Less than H.S. degree	% Less than H.S. degree	High School Degree	% HS Degree	Bachelors Degree	% Bachelors Degree
Lexington	24,147	13.6%	117,936	66.6%	34,965	19.7%
Richland	29,506	11.2%	169,197	64.2%	64,552	24.5%
Charleston	36,852	14.1%	162,509	62.3%	61,253	23.5%
Dorchester	10,929	14.6%	50,405	67.6%	13,133	17.6%
Berkeley	17,037	17.3%	68,978	70.0%	12,392	12.5%
Spartanburg	45,143	22.7%	122,659	61.8%	30,486	15.3%
Greenville	51,412	16.2%	198,846	62.9%	65,651	20.7%
State	614,279	19.6%	1,981,731	63.0%	530,055	17.0%

Source: SC Community Profile, 2000

Births to Single Females

Description: There is a dramatic increase in the number of births to single females. The following data shows the increase from 1980 to 1998.

Analysis The single female head of the family often lacks the support system, time, and economic stability to be an effective parent to a new infant. The problem is even more complicated if other children are in the single adult family. All comparison counties show a percentage increase in births to single females within a range of 34.2% in Charleston County to a 261.3% increase in Lexington County. The state percentage increase is 75.4%. The state data shows that white females had a percentage change of

269.6% from 1980 to 1998 and African Americans and others had a percentage change of 35.5% during the same time period.

County	1980	1990	1998	% Change from 1980 -98
Lexington	222	1,614	802	261.3%
Richland	995	1,685	1,730	93.9%
Charleston	1,312	1,924	1,761	34.2%
Dorchester	151	335	376	149.0%
Berkeley	289	557	703	143.3%
Spartanburg	647	1,126	1,124	73.7%
Greenville	782	1,329	1,565	100.1%
State	11,913	19,097	20,891	75.4%

Source: Kids Count, 2000

Family Structure

Description: Based on the 2000 Census, a comparison is made for the number and percentage of children (less than 18 years) living in a two adult family and a single parent family.

Analysis: There are many variables that influence effective parenting and the structure of the family is one of them. Two adult families can divide the time and economic responsibilities of effective parenting. Between 65% and 75% of all children live in two adult families as reported in 2000 Census.

County	Total Families with Children	Two Adult Families	% of Two Adult Families	Single Adult Families	% of Single Adult Families
Lexington	51,641	38,992	75.5%	12,649	24.5%
Richland	66,521	43,283	65.1%	23,238	34.9%
Charleston	63,272	39,884	63.0%	23,388	37%
Dorchester	24,995	18,224	72.9%	6,771	27.1%
Berkeley	35,114	25,402	72.3%	9,712	27.7%
Spartanburg	55,129	39,126	71.0%	16,003	29%
Greenville	84,114	62,276	74.0%	21,838	26%
State	875,535	601,655	68.7%	273,880	31.3%

Source: SC Budget and Control, Office of Research and Statistics (Summary File 1(SFI)).

Child Abuse and Neglect

Description: The Department of Social Services (DSS) is required to investigate all reported cases of child abuse/neglect. The following information reports the number of cases that were proven or found to be true. These cases are classified as: (1) physical abuse, (2) sexual abuse, (3) neglect and (4) mental injury/threat of harm.

Analysis: Five of the seven comparison counties had an increase in child abuse/neglect proven cases between 1997 and 2000, including Lexington and Richland Counties.

County	1997	1998	2000
Lexington	423	525	451
Richland	534	526	691
Charleston	774	750	636
Dorchester	179	183	207
Berkeley	345	304	410
Spartanburg	565	583	486
Greenville	715	890	717
State	8,366	8,837	9,836

Source: SC Budget and Control, Office of Research and Statistics, 2002

Families In Poverty With Children

Description: The 2000 Census estimates poverty families based on 1999 estimate data. 2000 poverty data is not available yet. All family units are included in this analysis, including elderly families that have a high percentage of poverty families. The data identifies the total number of poverty families and the number and percentage of these families with children less than 18 years.

Analysis: Between 6% and 12% of all families live in poverty but poverty families with children range from 27% to 43%. Low-income parents may have difficulty providing sufficient food, housing, and emotional stability to be effective parents.

County	Total Number of Families in Poverty	% of Total Population	# of Families in Poverty with Children	% of Families in Poverty with Children
Lexington	3,842	6.4%	1,842	27.9%
Richland	7,717	10.1%	4,557	33.4%
Charleston	9,643	12.4%	5,700	43.1%
Dorchester	1,883	7.1%	1,033	29.1%
Berkeley	3,664	9.7%	1,775	34.7%
Spartanburg	6,401	9.2%	3,102	35.6%
Greenville	8,158	7.9%	4,036	32.9%

Source: 2000 Census

2. SAFETY NET FOR FAMILIES AND CHILDREN

Introduction: There are many programs and services for families and children but there are always families that do not fit the requirements, do not have transportation to the services, and/or do not know about the services. Media report cases about children lost from the system, seniors who can not afford medication and food within the same month, children who lose weight in the summer because they do not have breakfast and lunch under the school Free and Reduced Lunch program, and parents who leave their children at home unattended because they can not afford or secure childcare. The Strategy Committee identified the need for a safety net for families and children. The outcome measures represent some of the programs that can serve as a safety net.

Childcare Support Programs for Low-Income Families

Description: South Carolina’s public Child Care and Development Program is funded by the ChildCare and Development Fund and some Social Service Block Grant funds. First priority is to Welfare Reform (Family Independence) clients; however, the program also funds childcare subsidies for low-income working families based upon the **availability of funding**. This is state data only.

Analysis: Assistance with childcare is a critical safety net for low-income families with young children. Welfare Reform requires that adults seek education and job training within a certain amount of time or they will lose their welfare assistance. The largest amount of childcare money goes to families pursuing education and job training. Working poor families receive assistance based on the availability of funds, which is limited. *Childcare Availability*, the next outcome measure, shows the number of children without space in a quality childcare facility.

Year	1998-99	1999-00	2000-01
Total Children receiving services	41,725	36,359	41,525
Number of low-income working poor children served.	16,767	12,483	17,272
Number of Family Independence children served	24,958	23,876	24,253
Average monthly cost per child served	\$240	\$241	\$250

Source: ors.state.sc.us/hd.index.html

Childcare Availability

Description: The SC Department of Social Services (DSS) classifies childcare facilities as : (1) child daycare centers, (2) licensed churches, (3) registered churches, (4) registered Family daycare homes, (licensed family daycare homes), and (6) group daycare homes. The following data comes from the SC DSS and SCDHHS.

Analysis: While there is some financial support for low-income families needing childcare, not all childcare facilities will accept the vouchers and many facilities are full.

A major problem is that few high quality (Level 3) programs are available, primarily because both standards and pay scales are very low. The problem is that while quality care enhances child development, poor care can harm children developmentally. Approximately 25% of all citizens interviewed through the Knight Communities and the Nation Report believe that affordable quality childcare is a big problem. Based on the number of children 6 years and less, column 3 reflects the number of children who fill one space. For example, there are 2.1 children in Berkeley County for every one space. Column 4 shows the estimated number of children (6 years and under) without a childcare space.

County	Total Facilities	Total Spaces	Children per space	Number of Children without space
Lexington	207	10,985	1.0	493
Richland	264	16,473	1.0	561
Charleston	244	16,205	1.1	1,869
Dorchester	64	3,666	1.6	2,025
Berkeley	108	4,716	2.1	4,052
Spartanburg	188	10,111	1.4	3,139
Greenville	253	21,304	1.2	2,271
State	3,602	168,168	1.4	49,381

Source: SC Institute on Poverty and Deprivation, Research Series on Poverty, March 2002; SC Department of Social Services, July 2000 In Table II-4.

Grandparents As Caregivers of Grandchildren

Description: There are an increasing number of grandparents who have some or total responsibility for their grandchildren. This data does not include aunts, uncles or other relatives providing care for relative's children. Grandparents are serving as a safety net for many families and children.

Analysis: An increasing number of grandparents are responsible for the care of grandchildren in 2000. A breakdown of the number of grandparents caring for the grandchildren of single adult families is not available; however, agency personnel report that grandparents are taking care of a higher percentage of grandchildren from single adult families than two adult families.

County	GP living in household with 1 or more grandchildren	% of all families	GP responsible for grandchildren	% of all families
Lexington	3,567	1.6%	1,833	0.85%
Richland	6,817	2.1%	3,533	1.1%
Charleston	7,166	2.3%	1,145	1.1%
Dorchester	2,190	2.2%	1,145	1.1%
Berkeley	3,770	2.6%	1,914	1.3%
Spartanburg	5,753	2.2%	2,893	1.1%
Greenville	7,365	1.9%	4,070	1.0%

Source: proximityone.com/dp.htm

Food Stamp and TANF Recipients

Description: This data represents the average monthly participation of households in food stamps and TANF (Temporary Assistance for Need Families) for 1998 and 1999. A household includes all members living in the household.

Analysis: Food Stamps and TANF serves as a safety net for low-income families and children. Recipients of food stamps and TANF are eligible because of low family income. All counties have seen a reduction in the number of households receiving food stamps and TANF; however, many social service staff believes that part of the reduction has to do with a change in the requirements. Child Trends (April 2002) reports there has been a dramatic change in the lives of parents on welfare but little change in child outcomes. Midland providers report an increase in homeless, hungry young women with children.

County	Food Stamps 1998 Households	Food Stamps 1999 Households	TANF 1998 Households	TANF 1999 Households
Lexington	3,992	3,788	720	579
Richland	9,245	8,096	2,547	1,480
Charleston	11,347	9,889	2,366	1,569
Dorchester	2,824	2,555	547	313
Berkeley	4,174	3,969	791	544
Spartanburg	4,939	4,288	1,120	820
Greenville	7,713	7,549	1,033	878
State	137,041	128,882	26,626	18,973

Source: ors.state.sc.us

Free and Reduced Lunches

Description: Students in all grades are eligible for free or reduced-price meals based upon family income. Families must apply each year.

Analysis: School personnel report that older students do not apply for food stamps as often as younger children from the same family. They report that older students feel embarrassed about requesting free or reduced lunches.

County	Total School Population	Number Eligible	Percent Eligible
Lexington	46,139	12,813	27.7%
Richland	44,126	20,554	46.6%
Charleston	44,219	23,560	53.3%
Dorchester	19,294	6,239	32.3%
Berkeley	26,817	12,821	47.8%
Spartanburg	41,791	16,791	40%
Greenville	59,272	17,937	30.3%
State	666,428	310,803	46.6%

Source: *Ranking of Counties and School Districts in South Carolina, 2001*, D.O.E

Transportation Provided to Medicaid Eligible Recipients

Description: Medicaid will pay for transportation to medical facilities for Medicaid eligible recipients. Transportation is provided through the provision of contractual, individual, and ambulance transportation services. The following chart shows Medicaid transportation data on the state level.

Analysis: The number of Medicaid recipients has more than doubled in three years; however, there was a decrease between 1999-00 and 2000-01. This may be due to a change in the requirements between the two years. The cost per recipient shows a small increase. Medicaid match dollars have been controversial in the SC Assembly. They have not agreed to match what SC is eligible for through Medicaid or SC Child Health Insurance Program (SCCHIP).

	1998-99	1999-00	2000-01
Number of recipients served	52,463	152,452	136,239
Number of Medicaid appointments kept	799,200	1,418,218	1,672,524
Cost per recipient served	\$200	\$237	\$260
Number of Medicaid-enrolled transportation providers	1,066	797	1,072

Source: ors.state.sc.us/hd/index.html

SilverxCard for Seniors

Description: The Silverxcard program serves qualified SC senior citizens with limited income who have no other prescription drug insurance coverage. Qualification is based on: (a) a person 65 years and older, (b) lived in SC for past six months, (c) has an annual household income between \$8,861 to \$17,720 for a single household member or \$11,941 to \$23,880 for a two-member household, and (d) has no other prescription drug insurance, including Medicaid.

Analysis: Children of older citizens often find themselves caring for their own children and their parents. The Silverxcard can serve as a safety net for prescription drugs for low-income seniors without any other source of prescription drug insurance. Medicaid recipients are not eligible for this service. The number of eligible seniors is excellerating at a very fast pace as well as longevity.

County	Enrolled 2001 1-01-6-01	Enrolled 2001 7-01-12-01
Lexington	1522	1806
Richland	1370	1769
Charleston	1013	1209
Dorchester	420	494
Berkeley	454	524
Spartanburg	3253	4032
Greenville	3207	4106
State	32,407	39,098

Source: Silverxcard.com/2001a/reports_enroll.html

3. COORDINATION BETWEEN PUBLIC/PRIVATE SERVICES AND BUSINESS/INDUSTRY

Introduction: Living is not departmentalized; it is the integration, partnerships, and relationships of individuals, neighborhoods, faith communities, educational institutions, businesses, and different cultures and ethnic groups. In keeping with the goal established this Strategy Committee wants *to develop a community system to empower citizens to help themselves and each other.* Part of the “community system” should be coordination between public/private and business/industry entities to “help citizens help themselves and others.” There are many stories about how one person helped someone else but there are not a lot of quantitative measures that can be used to evaluate this issue.

The Strategy Committee chose 4 outcome measures that show how citizens volunteer, how foundations and trusts work with communities, how two universities provide technical assistance and research, and how businesses work with schools.

SC Community Engagement

Description: Community engagement can be defined as “people helping people.” Businesses, organizations and individuals give of their finances and time to help others. One way to measure community engagement is through the number of individuals who give volunteer time. The United Way Caring Index analyzes 32 leading social and economic indicators at the state and national level. One of the 6 key areas is Voluntarism/Charity/Civic Engagement. The following chart shows the number of volunteer hours per week, the percentage of adults who volunteer and the financial support to non-profit groups per capita. This data is only available on the state level.

Analysis: Over half of the population volunteers time in non-profit organizations. The amount of time they volunteer decreased from 1998 to 1999; however, the amount of financial support more than doubled in the same time period in South Carolina.

Area	1998	1999	Change
Average Weekly Volunteer Hours	4.3 hrs.	3.4 hrs.	-21.3%
% of adult Population Who Volunteer	49.8%	56.1%	+12.5%
Financial Support to Non-profit Groups Per Capita	\$142	\$301	\$111.7%

Source: <http://national.unitedway.org/sc>

Foundations and Trusts

Description: Foundations and trusts form public/private partnerships with non-profit agencies and organizations to provide leadership, financial support, and technical assistance for issues of concern in different counties.

Analysis: Foundations and trusts are valuable partners in counties. They establish goals based upon their funding priorities. Some foundations and trusts are designated for specific groups or subject areas such as health, recreation, youth, etc. Others accept unsolicited requests from organizations focusing on specific needs in the community. Most foundations and trusts stipulate certain requirements such as funding in a specific location, specific subject or only funding non-profit organizations.

County	Number between 1997-1999
Columbia (Lexington and Richland)	75
Charleston (Charleston, Dorchester)	34
Spartanburg	31
Greenville	60

Source: SC Foundation Directory, 7th edition, 2000, published by the SC State Library.

University Research/Laboratory Centers

Description: Universities and service organizations form valuable partnerships, both state agencies and non-profit organizations. The following data reports the number of research units (Institutes, Centers, and Laboratories) in the two large universities in the state, Clemson and the University of South Carolina. Clemson University listed the data under the three types of programs, USC data was hand divided.

Analysis: Institutes, Centers and Laboratories are headed by university professors and directors with valuable expertise in their fields. Service providers and governmental agencies and organizations can secure research or request assistance in conducting research areas of interest and concern. College students need research projects and often the work can be done as part of their study.

	Institutes	Centers	Laboratories	Total
Clemson University	14	66	23	103
University of South Carolina	23	75	8	106

Source: www.clemson.edu/centers/ and www.sc.edu/research/list.shtml

Business Involvement in School to Work Initiative

Description: The School to Work Initiative is a business/education partnership created through 16 Tech Prep programs in South Carolina. The project was funded for three years through federal money. It was designed to help k-12 students begin career exploration at a young age to make the connection between education and careers.

Table 1 shows the number of businesses who served on the School to Work Boards (Column # 1) and participated in the Work-based Learning (Column # 2). Teachers who were on-site at participating businesses are shown in Column # 3. **Table 2** shows the involvement of businesses in one of the School to Work programs called Groundhog Shadowing. Students from middle school and high school shadowed an employee at the business for a day at one of the participating businesses.

Analysis: The Strategy Committee believes that business/education partnerships are important to help students select careers and to help them prepare for the workplace. School to Work partnerships helped meet this goal; however, the federal funding of this program was only for three years. Business and education will need to continue their partnership and figure out how the program can be continued.

Table 1

Area	# of Businesses Serving on School to Work Boards	# of Businesses Involved in Work-based Learning	# of Teachers On-Site at Work-based Learning
Central Midlands	99	900	68
Charleston	55	3,405	117
Spartanburg	320	520	15
Greenville	22	560	N/A

Source: Shaw, Kaye. Central Midlands Career Partnership. kshaw@lex.4.k12.sc.us

Businesses in Groundhog Shadowing Program

Table 2

	2000-01	2001-02
Central Midlands	2,087	2,148
Charleston	4,175	3,713
Spartanburg	704	269
Greenville	130	67

Source: Shaw, Kaye. Central Midlands Career Partnership. kshaw@lex.4.k12.sc.us

PROMOTING HEALTH

AND

RECOVERY

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PROMOTING HEALTH AND RECOVERY

The Strategy Committee for *Promoting Health and Recovery* established a goal definition for health and recovery in order to formulate a direction for the project. The goal of the committee is to:

“Engage citizens, health agencies and other organizations to work together to stimulate collaboration in order to develop healthy communities that support conditions that encourage individuals to be healthy.”

The Strategy Committee then identified 23 issues and concerns about health and recovery. They gathered and analyzed health data from a variety of sources and evaluated it against the Indicator Selection Guidelines outlined in the Preface. Based upon their goal and the Indicator Selection Guidelines, 23 issues and concerns were organized into four general topics with outcome measures for each issue. The outcome measures indicate the status of the issue in South Carolina today with the expectation the same issue would be evaluated in future years to determine if the issue has improved because of community awareness and action.

1. Preventive Health for Chronic Disease
Outcome Measure: Death Rate for Selected Chronic Diseases
2. Mental Illness, Alcohol and Drugs
Outcome Measures: Community Mental Health Services
School-based Mental Health Programs
2000 Alcohol Drug Clients by Program Referral Type
Drug Arrests
3. Health Knowledge and Behaviors
Outcome Measures: Smoking
Physical Activity
Overweight and Obesity
HIV/AIDS and STDs
4. Access to Health Care
Outcome Measures: Prenatal Care
Low Birth-Weight Infants
Teen Pregnancy
Oral Health

1. PREVENTIVE HEALTH FOR CHRONIC DISEASES

There are many proven prevention strategies that can have a significant impact on the mortality rate of chronic diseases. Among the strategies are breast, cervical and colorectal cancer screening, mammograms, and monitoring cholesterol levels. For individuals who have family members with chronic diseases, yearly screenings and appropriate health behaviors are even more important. The Health and Recovery Strategy Committee believes that citizens and providers should take a more proactive and cost-effective approach to health care by employing proven preventive health strategies. The following outcome measure will evaluate Preventive Health for Chronic Diseases:

- a. Death Rate for Selected Chronic Diseases

Death Rate for Selected Chronic Diseases

Description: The death rate for selected chronic diseases is presented by the rate per 100,000 population (all ages) in each county.

Analysis: Research has made dramatic strides in reducing the deaths due to selected chronic diseases; however, there is a need for continual research as well as modifying citizen’s risk behaviors such as lack of exercise, smoking, high cholesterol, and overweight and obesity.

County	Heart Disease	Stroke	COPD	Diabetes	Cancer (all)
Lexington	170	80	50	27	190
Richland	162	80	45	28	230
Charleston	158	90	52	37	234
Dorchester	174	131	42	32	226
Berkeley	163	95	59	43	207
Spartanburg	198	98	56	28	214
Greenville	169	65	50	36	198
State	181	81	46	31	212

Source: Impact of Chronic Conditions. Division of Biostatistics, Office of Public Health and Statistics and Information Systems, DHEC, 2000.

2. MENTAL ILLNESS AND ALCOHOL AND DRUG ABUSE

Introduction: Mental illness and alcohol/drug abuses have a significant impact on the health and economic well being of children and families. The Strategy Committee believes “we have not had a major commitment to the identification and treatment of mentally ill citizens in South Carolina.” They also feel South Carolina needs to emphasize programs and services directed towards the prevention of alcohol and drug use, especially among children and teens. The following outcome measures will be used to measure mental illness and alcohol and drug abuse.

- a. Community Mental Health Services
- b. School-Based Mental Health Services
- c. 2000 Alcohol and Drug Clients
- d. Drug Arrests

Community Mental Health Services

Description: The Community Mental Health Centers provide emergency, inpatient and outpatient mental health services to county residents through agency referrals, self-referrals or through court order actions from the justice system. These figures do not represent citizens served through private pay providers.

Analysis: Statistics reflect the fact that one out of four citizens will develop a mental illness in their lifetime. On the state level, forty percent (40%) of all individuals who receive mental health services through a Community Mental Health Center are children. Lexington and Richland Counties serve fewer children, 34% and 25% respectively.

Utilization of Community Mental Health Services			
County	1999 Total	1999 Children	1999 Adults
Lexington	2,206	761	1,445
Richland	2,906	744	2,160
Charleston	1,984	852	1,132
Dorchester	787	405	382
Berkeley	1,756	802	954
Spartanburg	1,784	775	1,009
Greenville	3,804	1,488	2,336
State	43,347	17,215	26,132

Source: South Carolina Budget & Control Board Office of Research and Statistics (www.ors.state.sc.us)

2001 School-Based Mental Health Services

Description: South Carolina Kids Count 2002, reports that 20% or 132,709 South Carolina children and youth have emotional disabilities. In 1993, the first full-time school-based mental health program was initiated in Simpsonville, South Carolina at Bryson Middle School. Based upon the success of this pilot program, Community Mental Health Centers are partnering with school districts across the state to obtain funding through grants and foundations to support school-based mental health programs.

Analysis: Mental health professionals report a dramatic increase in the number of children with mental health problems. The number of schools with mental health professionals has grown from 90 in 1994 to 398 in 2001. Unfortunately, many schools do not benefit from the services of a full-time mental health professional, as reflected in the table below by the number of schools with mental health programs compared with the number of mental health professionals.

2001 School-Based Mental Health Services

County	Number of Schools with Programs	Number of Mental Health Professionals
Lexington	23	13
Richland	37	17
Charleston	61	31
Dorchester	16	9
Berkeley	8	8
Spartanburg	25	12
Greenville	17	18
State	398	265

Source: Department of Mental Health (www.scgov.com)

2000 Alcohol and Drug Clients by Program Referral Type

Description: Citizens served by the Department of Alcohol and Other Drug Abuse Services (DAODAS) in each county can be referred or remanded by specific programs such as DUI, criminal justice, schools, employers and general referrals. Citizens can also be self-referred. Private pay citizens are not accounted for in these figures.

Analysis: Alcohol and drug use can have a devastating affect on the emotional and economic stability of children and families. Lexington, Richland, and Greenville Counties followed the state pattern that shows the highest number of citizens are receiving alcohol and drug counseling as a result of DUI offenses. The other counties have the highest number of citizens from the general classification that includes self-referrals.

2000 Alcohol and Drug Clients by Program Referral Type

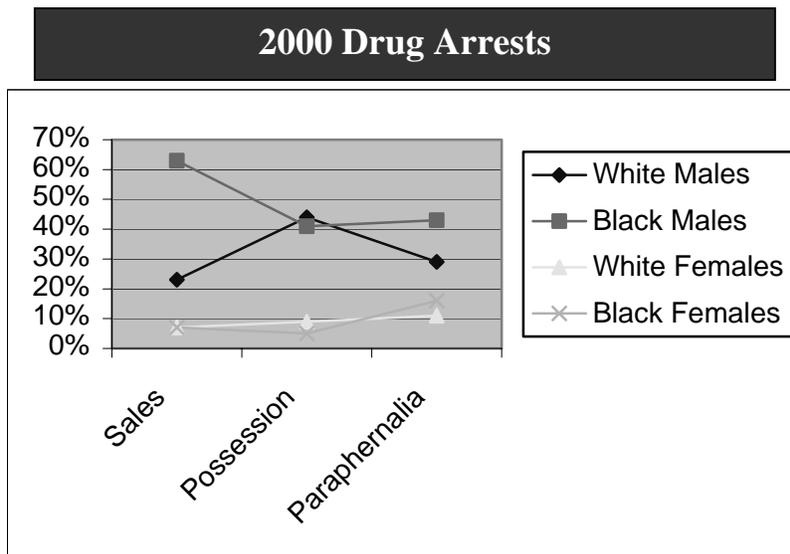
County	Total	DUI	Criminal Justice	School	Employer	General
Lexington	1,922	951	296	100	32	543
Richland	2,882	1,178	510	58	29	1,107
Charleston	4,864	808	1,865	70	198	1,923
Dorchester	1,880	356	589	354	51	530
Berkeley	1,616	363	469	67	142	575
Spartanburg	4,282	1,383	660	222	408	1,609
Greenville	4,093	1,940	671	187	44	1,251
State	54,255	18,761	12,994	3,232	2,144	17,174

Source: South Carolina Budget & Control Board Office of Research and Statistics (www.ors.state.sc.us)

2000 Drug Arrests

Description: The SC Institute on Poverty and Deprivation, April 2002, completed a study of the criminal justice system in South Carolina. They reported the number of drug arrests for the state by type of drug offenses committed, race, and gender.

Analysis: Drug use affects the health of the individuals, families, and society. The risk factors include mental illness, nutritional intake, heart disease, family conflict and domestic violence, poor child supervision and crime. A higher percentage of black males than white males are arrested for drug sales but both black and white males are equal in the percentage arrested for possession. A fewer percentage of females are arrested for drug charges.



Source: Research Series on Poverty Issues: *Criminal Justice in South Carolina*. SC institute on Poverty and Deprivation, April 2002

3. HEALTH KNOWLEDGE AND BEHAVIORS

Introduction: Knowledge is power! Citizens need knowledge about the risk factors that can lead to poor health but they also have to apply this knowledge to their daily behaviors. Health education should be provided regularly by health professionals and health and social service organizations. Some of the most pronounced risk behaviors for good health are alcohol/drug abuse, smoking, overweight/obesity, lack of physical exercise and poor nutrition. While many citizens know these are risk factors, they have not changed their behaviors by stopping smoking, reducing their weight, or exercising 15 minutes a day. Strategy Committee members believe that prevention is an important key to *Promoting Health and Recovery*. They recommend that we implement successful prevention programs for alcohol, drugs and smoking in addition to an increased emphasis on physical activities during school time, after school programs and leisure time activities. It is estimated that 60% of children have at least one modifiable risk factor for heart disease by age 12 including obesity, elevated cholesterol levels,

high blood pressure and physical inactivity. The following outcome measures will be used to measure health knowledge and behaviors over time.

- a. Smoking
- b. Physical activity
- c. Overweight and obesity
- d. HIV/AIDS

Smoking

Description: The Behavioral Risk Factor Surveillance System (BRFSS) was developed in the early 1980s to evaluate the prevalence of risk behaviors and their perceptions of a variety of health issues among Americans. All 50 states participated in the early assessment but the quantity of telephone interviews (approximately 600 in SC) are not of sufficient size to provide county data, only state data. This survey is administered to adults over the age of 18 years.

Analysis: Smoking is a very addictive habit. There is a clear linkage between smoking and cancer but smoking is a behavior that many citizens continue. The number of South Carolinians who report they smoke has remained constant from 1996 to 2000. There is a slight decrease in the number of cigarettes they smoke each day, but there is also a decrease in the percentage of citizens who are trying to stop smoking.

Smoking in South Carolina

BRFSS Question about Smoking	1996	1998	2000
Do you smoke now?			
Yes	24.5%	24.7%	24.9%
No	75.5%	75.3%	75.1%
How many cigarettes do you smoke a day?			
1-20 cigarettes	82.8%	77%	76.9%
21-40 cigarettes	14.8%	20.9%	22%
40+ cigarettes	2.5%	2.1%	1.1%
Within 12 months have you quit smoking 1 day or longer?			
Yes	46.6%	45.9%	44 % %
No	53.4%	54.1%	56 %

Source: apps.nccd.cdc.gov/brfss/index.asp

Physical Activity

Description: The Behavioral Risk Factor Surveillance System (BRFSS) is used as outcome measure to determine physical activity. This survey is administered to adults over the age of 18 years.

Analysis: Unlike the beginning of the century, chronic diseases are not our nation's leading killers. In many cases, the roots of chronic diseases are grounded in a limited number of health-damaging behaviors practiced by people every day of most of their lives. A lack of physical activity is a risk factor for cardiovascular disease, strokes and overweight/obesity. In 1998, the

BRFSS identified ten states with the highest percentage of adult who reported no leisure-time physical activity. South Carolina ranks number 10.

Physical Activity in South Carolina

BRFSS Questions about Physical Activity	1996	1998	2000
1. During the past month, did you participate in any physical activity?			
Yes	70.3%	66.3%	71.9%
No	29.7%	33.7%	28.1%
2. Are you using physical activity to lose weight?			
Yes	N/A	54.2%	59.2%
No	N/A	43.8%	41.8%
3. Percentages of citizens at-risk for health problems because of a lack of physical activity.	N/A	82 %	79.3%

Source: apps.nccd.cdc.gov/brfss/index.asp

Overweight and Obesity 2000

Description: The Behavioral Risk Factor Surveillance System (BRFSS) report shows the percentage of citizens overweight or obese by regions: Piedmont (upstate), Midland (central), Pee Dee (coastal) and Low Country (southern).

Analysis: Overweight and obesity are risk factors for cardiovascular disease, strokes, diabetes and general healthy well being. African American men (64.9%) and women (64.2% have a slightly higher percentage than Caucasian men (58,6%) and women (40.0%). South Carolina ranks 10th highest in the nation for individuals classified as overweight and obese.

Percentage of South Carolina Citizens Overweight or Obese (BRFSS)

	Piedmont	Midlands	Pee Dee	Low Country
2000	53.0%	54.5%	57.5%	50.2%

Source: SC BRFSS 1998 & 2000; www.cdc.gov/nchs/products; *Impact of Obesity on Health in South Carolina*. DHEC, 12/1999

HIV/AIDS AND STDs 1999, 2000, 2001

Description: Infected citizens are reported the year they are diagnosed; therefore, the following data reflects the new diagnoses for each year. Sexually Transmitted Diseases (STD) combines chlamydia, gonorrhea, and syphilis.

Analysis: HIV/AIDS and STDs are preventable diseases by practicing protective sex. Some HIV/AIDS cases are contracted through blood transfusions, blood contact, or infants of infected females. Most comparison counties show a decrease in HIV/AIDS and STDs cases from 1999 to

2001. This decrease in also reflected in the state data. Lexington County shows a slight increase in new HIV/AIDS cases and decrease in STDs from 1999 to 2001. Richland County shows a small decrease in new HIV/AIDS cases and a constant number with STDs.

Number Infected with HIV/AIDS and STDs in Selected Counties

Year		Lexington	Richland	Charleston	Dorchester	Berkeley	Spartanburg	Greenville	State
1999	HIV/AIDS	31	228	89	13	15	45	52	1,004
	STD	482	3,147	2,782	262	284	1,177	1,856	27,921
2000	HIV/AIDS	33	201	95	17	12	41	49	926
	STD	407	2,675	1,331	192	291	1,021	671	22,709
2001	HIV/AIDS	35	219	95	10	16	28	55	935
	STD	439	3,122	2,579	259	366	1,235	898	24,880

Source: SC BRFS 1998 & 2000. *Impact of Obesity on Health in South Carolina*. DHEC, 12/1999
(www://cdc.gov/nchs/products)

4. ACCESS TO HEALTH CARE

Introduction: There are a number of variables that affect access to health care. Do citizens have transportation to and from doctor's offices and can they afford to pay for the visit? Do females, especially young pregnant females, seek prenatal care all through their pregnancy? Do children receive dental care? Do doctors and dentists accept Medicaid patients and are there enough medical providers in rural as well as urban locations. Members of the Strategy Committee feel that access to health care is an important health issue but they also believe that families must accept responsible and be accountable for securing health care for their children, seniors in their extended family, and themselves. The following outcome measures will evaluate access to health care. Transportation is measured in the Food, Shelter, Safety and Transportation Strategy.

- a. Prenatal care
- b. Low birth-weight infants
- c. Teen pregnancy
- d. Infant mortality
- e. Oral health

Prenatal Care for Females

Description: The Kessner Index outlines the criteria for adequacy of prenatal care. The following chart outlines the percentage of pregnant females that did not have adequate prenatal care. The percentage is based on all pregnant females within each year.

Analysis: Continuous prenatal care is one of the strongest indicators for a healthy newborn. South Carolina reports an improvement in the percentage of females receiving adequate prenatal care. Both Lexington and Richland Counties report a significant improvement in prenatal care or a reduction in the number of females without adequate care as measured by the Kessner Index.

Females Receiving Less Than Adequate Prenatal Care

County	1996	1997	1998	1999
Lexington	22.7%	22.2%	18.7%	17.8%
Richland	36.9%	31.9%	28.9%	27.5%
Charleston	20.5%	29.5%	22.1%	20.3%
Dorchester	22.1%	21.6%	11.4%	10.3%
Berkeley	23.2%	24.9%	13.8%	11.5%
Spartanburg	30.2%	27%	28.3%	29.4%
Greenville	26.9%	21.6%	26.6%	28.3%
State	28.1%	27.1%	25.7%	26%

Source: SC Maternal and Child Health Data Book 2001, DHEC

Low-Birth Weight Infants

Description: Low birth weight babies weigh at or less than 2500 grams (less than 5 pounds). Low birth weight babies are based on the total live births for the year in each county.

Analysis: Children born healthy and with an appropriate weight have a much better change of growing up to be healthy adults. Most counties show an increase in the percentage of low birth weight babies from 1996 – 1999. This increase parallels the state increase from 9.2% of live babies in 1996 to 9.8% in 1999.

Percentage of Low Birth Weight Babies

County	1997	1998	1999
Lexington	7.4%	7.6%	8.1%
Richland	10.2%	10.2%	10.9%
Charleston	9.9%	9.8%	9.4%
Dorchester	9.0%	7.1%	9.2%
Berkeley	7.7%	8.6%	9.5%
Spartanburg	8.9%	9.3%	9.8%
Greenville	7.7%	8.7%	9.1%
State	9.2%	9.5%	9.8%

Source: 2001 SC Maternal and Child health Data Book, DHEC.

Teen Pregnancy

Description: The teen pregnancy rate for teenagers between 15 and 17 years is based on a rate per 1,000 youth between 15 and 17 years.

Analysis: When a teen becomes pregnant between 15 and 17 years, this not only affects the teen’s ability to complete an educational goal but it also affect the rearing of the new infant because “ a child is rearing a child.” Teen pregnancy has dropped significantly from 53.0 per 1,000 youth in 1996 to 46.5 per 1,000 in 1999. All comparison counties also report a significant drop from 1996 to 1999.

Teen Pregnancy Rates

County	1996	1997	1998	1999
Lexington	39.9	36.7	40.9	38.3
Richland	43.3	41.0	35.3	38.3
Charleston	58.3	52.3	48.3	45.4
Dorchester	51.4	41.5	8.3	37.6
Berkeley	59.6	55.1	51.2	49.3
Spartanburg	58.2	60.9	54.0	43.9
Greenville	47.4	45.7	40.9	39.5
State	53.0	52.1	48.5	46.5

Source: 2001 S.C. Maternal and Child health Data Book, DHEC.

Infant Mortality (All Races)

Description:

Infant mortality is reported as the percentage of infant mortality rate based on the number of live births.

Analysis: Lexington and Richland Counties have fewer infant deaths than the state average; however, more than half of the comparison counties show an increase in infant deaths from 1995 to 1999. According to South Carolina Kids Count, for every 1,000 babies born in South Carolina, 10 die in their first year of life, thereby ranking South Carolina 50th in the nation in terms of infant mortality. The national infant mortality rate is 7 deaths per 1,000.

Infant Mortality in South Carolina

County	1995-97	1996-98	1997-99
Lexington	5.9%	6.8%	7.7%
Richland	7.4%	8.8%	10.6%
Charleston	12.4%	11.0%	12.3%
Dorchester	10.6%	10.2%	10.0%
Berkeley	8.4%	7.2%	8.9%
Spartanburg	6.9%	6.7%	7.5%
Greenville	7.1%	6.5%	6.8%
State	9.1%	9.1%	9.8%

Source: SC Maternal and Child Health Data Book 2001. SC Department of Health and Environmental Control. January 2001.

Oral Health

Description:

The following chart reports the total number of licenses dentist practicing in each county. Dental specialists were taken out of the total number of dentist to better reflect the number of dentists providing yearly dental care for children and families.

Analysis: National data reveals that 37.3% of children and youth ages 5 to 17 years have at least one (1) untreated cavity. Dental cavities are the single most common chronic disease in children, 5 times greater than asthma. Only 48% of all dentists are Medicaid enrolled dentists. Low-income children and families are particularly affected by the low percentage of dentists who will accept Medicaid patients.

Dentists in South Carolina

County	Total Dentist 2000	General Practice Dentists	% of General Practice Dentists
Lexington	123	88	72%
Richland	189	149	79%
Charleston	275	181	66%
Dorchester	55	35	64%
Berkeley	30	23	77%
Spartanburg	105	82	78%
Greenville	207	160	77%
State	1,713		

Source: [www://ors.state.sc.us/](http://ors.state.sc.us/)

Medicaid Enrolled Dentists 2000

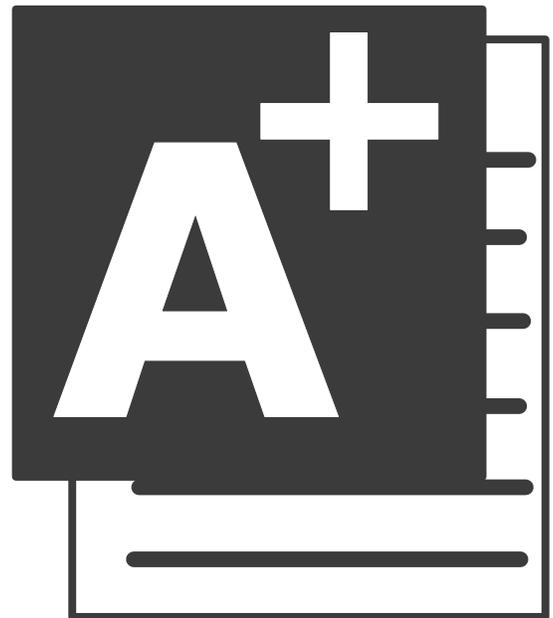
Number of Medicaid enrolled Dentists (state only)	824
Number of Medicaid Children Served (state only)	126,340
Number Medicaid Adults Served (state only)	26,354

Source: [www:/ors.state.sc.us/](http://ors.state.sc.us/)

CREATING QUALITY EDUCATION, JOB PREPARATION, AND LIFE SKILLS

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CREATING QUALITY EDUCATION, JOB PREPARATION AND LIFE SKILLS

Introduction: The Strategy Committee for *Quality Education, Job Preparation and Life Skills* developed a goal to guide their study of this focus area. The goal is:

to develop a community of learners who view education as a civic virtue, value education as a quality of life issue, and insure that all citizens receive an education that allows them to achieve their potential for self-sufficiency.

The work of the Strategy Committee began by identifying issues and concerns around three independent but related areas of education, job preparation, and life skills. They identified **educational** issues connected to funding, teacher training, classroom management, and public support of education. They were concerned about assessment data related to the percentage of students ready for first grade, PACT assessment scores for 3rd and 8th graders, the number of high school students passing the high school exit exam, and the high school graduation rate. They discussed the need for consistent, quality standards for high school and college students. Teen pregnancy and childcare for teen parents was also listed as a major problem to high school graduation rates. While **job preparation** is interwoven with education, committee members were concerned about how and when students began exploring career options. They discussed mentoring, internship, and shadowing programs for career exploration that should begin in the 6th grade. **Life skills** can cover a wide variety of issues. Committee members were concerned about the lack of problem-solving and critical thinking skills and communication skills, both written and oral, among high school graduates and working adults. All of these issues are life skills that impact family life and the workplace.

The Strategy Committee evaluated all of the issues and concerns around education, job preparation and life skills and organized them under two major headings: (1) early intervention and (2) work and life skill preparation. The following outline lists the issues under each heading. Assessment measures are provided in the document to determine the status of the issue today. The same measures will be taken in future years to see if the issue has improved because of community action.

1. Early Intervention

A. Childcare

Outcome Measures: Average Daycare Cost
Childcare Support for Low-Income Families

B. School Assessment Indicators

Outcome Measures: First Grade Readiness
Third Grade PACT Assessment
Eighth Grade PACT Assessment
High School Exit Exam
SAT

C. Physical and Mental Health

Outcome Measures: School Social Workers
School Nurses
School-based Mental Health Services

2. Work and Life Skill Preparation

A. Educational preparation

Outcome Measures: High School Drop-Out Rate
High School Graduates Enrolled in College (also in
Economics)
GED and High School Diploma Graduates
Adult Education Enrollment
Literacy Level of Adults Over 25 years (also in
Families and Economics)

A. CHILDCARE

Average Daycare Costs

Description: Average daycare costs are shown by geographic area, type of care facility and age. A description of Levels 1, 2, and 3 helps evaluate the difference in the costs of the three levels. **Level 1** childcare may be registered or licensed family childcare homes, group child care homes or approved or exempt centers. **Level 2** childcare facilities agree to meet higher voluntary standards of quality than Level 1. They receive a \$5 weekly quality incentive bonus from SCDHHS for each low-income child. They must agree to unannounced visits from SCDHHS. **Level 3** facilities have met the standards of a national professional accrediting association. They must meet all standards of Level 2, agree to a reevaluation every three years and to meet standards for staff training, curriculum, adult-to-child ratios, health and safety and physical environment and administration.

Analysis: Childcare affordability is a major concern for low-income families. This may be the most limiting factor to quality childcare among low-income families. “A minimum-wage, one wage-earner family would spend about \$346/month or 37% of its gross income on childcare at a facility charging \$80/week/child.” (Marsh, Janet)

Area	FCC Weekly Cost	Level 1 Weekly Cost	Level 2 Weekly Cost	Level 3 Weekly Cost
Columbia (29201, 29203, 29204, 29205)				
0-2 years	\$62.00	\$76.66	\$74.22	\$121.45
3-5 years	60.00	77.91	66.00	80.20
6+ years	40.00	38.21	35.00	N/A
Charleston: (29401, 29403, 29407)				
0-2 years	65.33	90.42	87.56	110.00
3-5 years	60.00	73.88	83.50	98.00
6+ years	40.23	41.33	38.75	N/A

Source: Marsh, Janet. *Childcare In SC: Quality, Affordability, Availability*. SC Department of Health and Human Services, AN ABC Child Care Program, April 2000

Childcare Support Programs for Low-income Families

Description:

The South Carolina’s public Child Care and Development Program is funded by the ChildCare and Development Fund and some Social Service Block Grant funds. First priority is to Welfare Reform (Family Independence) clients; however, the program also funds childcare subsidies for low-income working families based upon the **availability of funding**. This is state data only.

Analysis: The largest amount of the childcare money goes to Family Independence families seeking education and job training. They have a limited amount of time to seek training and secure a job. Working poor families receive assistance based on the availability of funds.

Year	1998-99	1999-00	2000-01
Total Children receiving services	41,725	36,359	41,525
Number of low-income working poor children served.	16,767	12,483	17,272
Number of Family Independence children served	24,958	23,876	24,253
Average monthly cost per child served	\$240	\$241	\$250

Source: [www://ors.state.sc.us/hd.index.html](http://ors.state.sc.us/hd.index.html)

B. SCHOOL ASSESSMENT INDICATORS

First Grade Readiness

Description: The CSAB (Cognitive Skill Assessment Battery) is used to measure student readiness for first grade. The CSAB is an untimed test that requires about 30 minutes to administer to each child individually.

Analysis: All counties show an increase in the number of children ready for first grade.

County	2000 - % Ready for 1st Grade	2001--% Ready for 1st Grade
Lexington	85.3%	87.2%
Richland	80.9%	82.2%
Charleston	83.0%	84.0%
Dorchester	82.9%	84.2%
Berkeley	83.2%	88.2%
Spartanburg	85.3%	87.7%
Greenville	86.4%	88.0%
State	85.2%	86.4%

Source: [www://sde.state.sc.us/reports/csab01/index.htm](http://sde.state.sc.us/reports/csab01/index.htm)

Third Grade Pact Assessment - 2001

Description: The Palmetto Achievement Challenge Test (PACT) is administered to third graders in April of each year. Students throughout South Carolina take the test on the same days. It measures English/language arts and mathematics and ranks students as below basic, basic, proficient and advanced. The report represents the percentage of students in each of the four classifications.

Analysis: A larger percentage of students were below basics in mathematics than in English/language arts; however, a much higher percentage of students placed in advanced mathematics than in advanced English/Language Arts.

County	ENGLISH/LANGUAGE ARTS				MATHEMATICS			
	% Below	% Basic	% Proficient	% Advanced	% Below	% Basic	% Proficient	% Advanced
Lexington	14.7	30.4	49.9	5.6	18.8	34.6	21.7	24.7
Richland	22.7	34.6	38.1	4.3	30.4	36.2	15.9	17.4
Charleston	19.9	36.4	39.8	3.9	28.4	37.4	15.7	18.5
Dorchester	18.2	40.8	37.8	2.9	26.5	41.9	17.4	14.0
Berkeley	17.9	41.5	38.0	2.6	27.1	43.3	16.2	13.3
Spartanburg	18.6	35.8	41.4	4.0	22.6	37.4	19.2	20.5
Greenville	18.5	34.0	43.3	4.3	26.5	38.3	17.3	18.0
State	21.5	37.1	38.0	3.4	28.2	39.0	16.8	16.0

Source: www://sde.state.sc.us

Eighth Grade PACT Assessment - 2001

Description: The Palmetto Achievement Challenge Test (PACT) is administered to eighth graders in April. Students throughout South Carolina take the test on the same days. It measures English/language arts and mathematics and ranks students as below basic, basic, proficient and advanced. The report represents the percentage of students in each of the four classifications.

Analysis: A larger percentage of eighth graders tested below basic than third graders in both language arts and mathematics. The percentage of advanced placement for eighth graders compared to third graders in English/language arts but advanced placement in mathematics for eighth graders was a significantly smaller percentage than third graders in English/language arts.

County	ENGLISH/LANGUAGE ARTS				MATHEMATICS			
	% Below	% Basic	% Proficient	% Advanced	% Below	% Basic	% Proficient	% Advanced
Lexington	18.5	47.4	29.5	4.8	21.9	45.8	20.1	12.4
Richland	31.6	41.5	23.4	3.0	40.8	39.5	13.0	6.0
Charleston	30.4	44.4	21.9	3.3	39.3	41.0	14.1	5.6
Dorchester	28.5	48.5	20.1	3.0	32.2	48.3	13.6	5.6
Berkeley	28.9	52.3	17.0	1.9	29.9	53.5	13.0	3.7
Spartanburg	24.3	48.4	24.0	3.0	34.6	46.2	15.4	4.9
Greenville	28.2	44.2	24.8	2.8	36.7	43.2	14.6	5.4
State	30.7	45.9	20.9	2.5	37.1	44.6	13.0	5.3

Source: www://sde.state.sc.us

High School Exit Exam

Description: South Carolina state law mandates the Basic Skills Assessment Test as a high school exit exam in order to earn a high school diploma instead of a certificate. The test measures reading, mathematics and writing. It is first administered in tenth grade. Students who do not pass all sections of the examination are given an opportunity to re take the sub test (s) they did not pass. Students may retake the test four times. The following chart shows the percentage of tenth graders who passed the test on their first attempt.

Analysis: Between 2000 and 2001, there was a 2.6% increase in the percentage of SC students who passed the Exit Exam on their first attempt from 66.5% in 2000 to 69.1% in 2001. Lexington County schools had the highest percentage of students passing the test but they had a slight decrease from 2000 to 2001.

County	2000 % Passed on 1st Attempt	2001 % Passed on 1st Attempt
Lexington	78.7%	78.4%
Richland	57.4%	61.8%
Charleston	56.2%	55.9%
Dorchester	57.9%	66.1%
Berkeley	65.7%	69.4%
Spartanburg	72.5%	72.4%
Greenville	68.3%	70.2%
State	66.5%	69.1%

Source: www://sde.state.sc.us

SAT (Scholastic Aptitude Test)

Description: The SAT is a nationally administered test to high school students planning to attend higher education. The SAT measures verbal and mathematics skills and is based on a total score of 1600.

Analysis: Both Lexington and Richland Counties average scores exceeded the state average. They also increased the average from the previous year. Richland County Schools tested a higher percentage of their students than Lexington County.

County	2000 Average	2001 Average	% of students tested
Lexington	988	999	56%
Richland	972	980	65%
Charleston	946	943	70%
Dorchester	904	871	45%
Berkeley	963	986	40%
Spartanburg	982	988	55%
Greenville	999	1000	68%
State	966	974	57%

Source: www://sde.state.sc.us/

C. PHYSICAL AND MENTAL HEALTH

School Social Workers

Description: Social Workers can provide a safety net for children, families and individuals. They can coordinate needs and services through case management. They work in hospitals, nursing homes, schools and universities, state agencies, and non-profit organizations. The chart shows the decrease in social workers from 1996 to 2001

Analysis: Hospitals, private offices, colleges/universities and elementary/high schools increased the number of social workers from 1996 to 2001. The decreases are seen in agencies that provide social services to low-income families, i.e., Department of Social Services (DSS), non-profit organization and other government organizations.

Location	1996	2001	% Change
Hospital	273	315	+ 15%
Nursing Home	102	97	- 4%
Private Office	288	349	+ 21%
College/University	78	114	+ 46%
Elementary/High School	114	164	+ 44%
Dept. of Social Services	793	587	- 26%
Non-Profit Organizations	325	204	- 37%
Other Government	797	668	- 16%
TOTAL	2,770	2,498	-10%

Source: www.ors.state.sc.us/manpower/sowk/sowk5.html

School Nurses

Description: School nurses, with a recommended ratio of 750:1, provide health education, health intervention, and emergency health services to children. Because of large number of children and families who do not have health insurance, the school nurse may be the only source of health education and referral that the children have available.

Analysis: Lexington and Richland Counties have the best ratio of nurses to students of all comparison counties and Berkeley County has the lowest ratio.

County	1997		1999		2000	
	Needed	Available	Needed	Available	Needed	Available
Lexington	52	51	50	60	60	51
Richland	51	59	60	60	60	60
Charleston	51	18	59	27	57	27
Dorchester	22	18	26	17	26	18
Berkeley	31	13	36	12	34	12
Spartanburg	47	29	55	36	55	36
Greenville	92	67	79	50	79	53
State	875	555	892	548	766	551

Source: SC Budget and Control, Division of Research and Statistics, 2002

School-based Mental Health Services

Description: In 1993, the first full-time school-based mental health program was initiated in Simpsonville at Bryson Middle School. Based on the success of this pilot program, the community mental health centers are partnering with school districts across the state to obtain funding through grants and foundations to support school-based mental health programs. The number of programs in schools has grown from 90 in 1994 to 398 in 2001.

Analysis: Kids Count, 2002 reports that 20% or 132,709 South Carolina children and youth have emotional disabilities. The Department of Education through Special Education programs serves approximately 97,040 children. This means that over 35,000 with emotional disabilities receive no services.

County	Number of Schools with programs	Number of M.H. professionals
Lexington	23	13
Richland	37	17
Charleston	61	31
Dorchester	16	9
Berkeley	8	8
Spartanburg	25	12
Greenville	17	18
State	398	265

Source: Department of Mental Health (www://scgov.com)

2. ADULT WORK AND LIFE SKILL PREPARATION

A. EDUCATIONAL PREPARATION

High School Drop-Out Rate

Description:

School retention is reflected by comparing the number of 8th graders to the number of graduates in each high school and district. This data is not based on specific students in 8th grade to specific graduates in 12th grade but rather on the number of students. For school districts that increase the school-age population, the actual rate may be lower than it appears in the chart. The reverse will be true for districts reducing the school-age population.

Analysis: Business and industry emphasizes the need for skilled employees that requires more than a high school diploma in today's technological workplace. Less than 20% of all jobs require basic skills that might be completed by less educated citizens. While method of calculating these figures can be argued, there are alarming trends in the number of high school dropouts who are not prepared for today's workplace.

County	1997 Average Drop-out	1998 Average Drop-outs	1999 Average Drop-outs
Lexington	24.9	24.7	23.5
Richland	29.6	30.9	32
Charleston	40.9	43.3	44.7
Dorchester	28.2	31.5	31.3
Berkeley	33.5	34.3	35.1
Spartanburg	32.1	31.5	32.5
Greenville	26.9	26.4	26.2
State	31.9	32.6	33.4

Source: SC Budget and Control, Office of Research and Statistics, 2002

High School Graduates Enrolled in College

Description: The following chart shows the number and percentage of 1999-2000 high school graduates who entered college as a freshmen in two year, four year and technical colleges in South Carolina or other states. The percentages of students attending 4, 2 and technical colleges are based on the total number of high school graduates for 1999-2000.

Analysis: “The difference between a successful organization and one that struggles to compete often comes down to a single important dimension: the availability of a qualified workforce.” (Workkeys in Search of a Quality Workforce, 2002) Depending on the type of career, advanced education is a critical component for the new technologies in today’s jobs.

County	Total Graduates	% Entering College		% 4-Year Colleges	% 2-Year Colleges	% Technical College
Lexington	2,521	74.3%		51.5%	.005	21.8%
Richland	2,296	67.3%		47.9%	1.4%	17.8%
Charleston	1,746	56.9%		44.8%	0.8%	11.2%
Dorchester	1,047	52.4%		36.1%	0.0%	15.6%
Berkeley	1,397	52.4%		29.8%	2.8%	19.8%
Spartanburg	2,066	57.4%		42%	3.6%	10.6%
Greenville	3,238	65.9%		42.9%	8.6%	14.4%
State	33,918	59.5%		39.7%	3.4%	16.4%

Source: www://sde.state.us.sc

GED and High School Diploma Graduates (2000-01 School Year)

Description: Adults 17 years and older can enroll in Adult Education. They are assessed and can be placed to a GED or a high school diploma program. The first three columns show the number of adults placed in GED/high school diploma program (#1), the number who earned a GED (#2), and the number of high school diploma graduates in 2000-01 school year (#3). The fourth column shows the total number of adults who passed the GED as reported by the Department of Education. Some adults take the GED without enrolling in an adult education preparation course or they may choose to take the GED test the following year.

Analysis: Some high school dropouts enroll in Adult Education; however, the numbers of Adult Education enrollees who complete a GED or diploma program are very small. The total number of adults completing a GED, including the Adult Education enrollees are considerable larger. These numbers will be reported on the 2002 SC Report Card for schools districts within each county.

County	Total Number Placed in HS or GED	Completed GED	Completed high school diploma	Total Number Completing GED As Reported on SC Report Card
Lexington	594	55	78	385
Richland	951	129	122	313
Charleston	368	247	127	247
Spartanburg	301	235	167	422
Greenville	1441	429	81	510

Source: Clark, Colleen. Columbia, SC: SC Literacy Resource Center, 2002.

Adult Education Enrollment

Description: The following chart reflects the number of adults over 17 years served in all adult education programs. This includes GED and high school diploma programs shown in the previous chart. It also includes ESL (English as a Second Language) program, basic skill instruction, and work-based projects. Work based projects can include instruction for employees before they begin working with an employer or more specialized workshops for employees currently employed.

Analysis: While the total number of adults enrolled in Adult Education has increased on the state level, Lexington and Richland Counties recorded a decrease from 1998 to 2001. Only Spartanburg and Greenville Counties showed an increase from 1998 to 2001.

County	1998-99	1999-00	2000-01
Lexington	3,980	3,928	2,026
Richland	4,775	5,700	3,459
Charleston	3,363	2,752	N/A
Dorchester	2,588	2,527	N/A
Berkeley	2,641	2,496	N/A
Spartanburg	1,034	1,051	N/A
Greenville	6,667	8,609	N/A
State	91,304	92,508	94,452

Source: Department of Education. Rankings of Counties and School Districts in SC, 2000.

Literacy Level of Adults Over 25 Years

Description: One way to measure the literacy level of adults over 25 years is to determine the highest degree or number of years they attended school. The following chart shows the highest degree earned and percentage it represents of the total population over 25 years by counties.

Analysis: Richland County has the highest percentage of adults with a bachelor's degree of all comparison counties. The percentage of high school graduates range from 61.8% in Spartanburg County to a high of 67.6% in Dorchester County. Lexington and Richland Counties have the lowest percentage of adults with less than a high school degree.

County	Less than H.S. degree	% Less than H.S. degree	High School Degree	% HS Degree	Bachelors Degree	% Bachelors Degree
Lexington	24,147	13.6%	117,936	66.6%	34,965	19.7%
Richland	29,506	11.2%	169,197	64.2%	64,552	24.5%
Charleston	36,852	14.1%	162,509	62.3%	61,253	23.5%
Dorchester	10,929	14.6%	50,405	67.6%	13,133	17.6%
Berkeley	17,037	17.3%	68,978	70.0%	12,392	12.5%
Spartanburg	45,143	22.7%	122,659	61.8%	30,486	15.3%
Greenville	51,412	16.2%	198,846	62.9%	65,651	20.7%
State	614,279	19.6%	1,981,731	63.0%	530,055	17.0%

Source: SC Community Profile, 2000

FOOD, SHELTER, SAFETY

AND

TRANSPORTATION

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FOOD, SHELTER, SAFETY AND TRANSPORTATION

The Strategy Committee for *Food, Shelter, Safety and Transportation* developed a goal for this focus area to guide their study. The goal is:

to identify and remove barriers for families and individuals to secure the basic needs of food, shelter, safety, and transportation so that they are able to achieve self-sufficiency.

Food, shelter and safety are three basic needs of all citizens – food to nourish the mind and body, shelter to protect citizens from the elements, and safety to keep citizens from physical and emotional harm. As the Strategy Committee began studying the issue of food, shelter, safety and transportation, they identified specific concerns for each topic. Concerns about **food** included the need to improve distribution of food assistance programs, the need for education about nutrition and food preparation, and a need to improve access to food for the homeless, elderly, working poor, and citizens in transition. They listed concerns about **shelter** that included a lack of affordable housing for low-income and working poor citizens and families, the inequity of taxation on mobile homes and permanent homes, and a lack of transitional shelter for individuals and families in an emergency situation or individuals leaving institutional settings. **Safety** issues centered on safety in downtown and park areas and the need for a continuum of care for citizens with mental illnesses transitioning from the criminal justice system or mental health facilities. Discussion about **transportation** centered on the need to provide transportation to jobs, healthcare services, and childcare. Low-income adults frequently do not own vehicles; therefore, jobs are limited to areas where they can use public transportation and healthcare is frequently on a costly emergency basis only.

The Strategy Committee selected four issues of the greatest concern. The outcome measures are listed under each heading. These measures indicate the status of the issue today; the same measures will be taken in future years to see if the issue has improved because of community actions.

1. Access to Food

Outcome Measures: Food Stamps for Family Households (also in Family)
Poverty and Access to Food
Free and Reduced Lunches (also in Family)
Food Distribution

2. Access to Affordable Housing

Outcome Measures: Owner and Renter Occupied Housing
Cost Burden of Housing
Number of Unsuitable Housing Units
Monthly Average Housing Costs
Homeless Shelters

3. Safety

Outcome Measures: Index Crimes
Arrests by Program Type
School Crime Incident Report

4. Access to Affordable and Timely Transportation

Outcome Measures: Vehicles in Family
Transportation Services
Transportation for Medicaid Eligible Clients

1. ACCESS TO FOOD

Introduction: “We eat to live. We need food for the basics of everyday life – to pump blood, move muscles, think thoughts.” The issue of “*access to food*” emphasizes the basic need for food – having something in the refrigerator for dinner or having enough breakfast foods for the children before they go to school. While children and adults need a balance of meats, dairy products, fruits, vegetables and cereals, the bigger questions are do they have the money, a means of transportation to buy or receive the food, and a place to store and cook the food. The following data will measure Access to Food:

- a. Food Stamps for Family Households
- b. Poverty and Access to Food
- c. Free and Reduced Lunches
- d. Food Distribution

Food Stamps for Family Households

Description: This data represents the average monthly participation of households in temporary assistance for food stamps for 1998 and 1999. All members in the household would count in the total number of individuals served through food stamps.

Analysis: Income is one risk factor that affects whether families have adequate food. Recipients of food stamps are classified as low-income families. All counties have seen a reduction in the number of households receiving food stamps; however, many social service staff members believe the reduction is due to more restrictive regulations for eligibility and not a change in the number of low-income families.

County	1998 Households	1999 Households
Lexington	3,992	3,788
Richland	9,245	8,096
Charleston	11,347	9,889
Dorchester	2,824	2,555
Berkeley	4,174	3,969
Spartanburg	4,939	4,288
Greenville	7,713	7,549

Source: [www://ors.state.sc.us](http://ors.state.sc.us)

Poverty and Access to Food

Description: The 2000 SC Census uses poverty figures from 1999. **Column # 1** identifies the number of poverty families by counties. In **Column # 2**, the percentage is based on the total families in the county. Of the total poverty families, the census data also identifies the number of poverty families with children (**Column # 3**).

Analysis: Low-income is another risk factor associated with the issue of *Access to Food*. Approximately three-fourths of all poverty families have children; therefore, it can be assumed that many of these families and children need help with adequate quantity and quality of food. The numbers of poverty families correlate with the number of families receiving food stamps.

County	Total Number of Poverty Families	% of Poverty Families of Whole Population	Poverty Families With Children Under 18
Lexington	3,842	6.4%	3,019
Richland	7,717	10.1%	6,157
Charleston	9,643	12.4%	7,534
Dorchester	1,883	7.1%	1,478
Berkeley	3,664	9.7%	2,923
Spartanburg	6,401	9.2%	4,741
Greenville	8,158	7.9%	6,139

Source: Census 2000

Free and Reduced Lunches Recipients

Description: Students in all grades are eligible for free or reduced-price meals based upon family income. Families must apply each year.

Analysis: School personnel report that older students do not apply for food stamps as often as younger children from the same family. They report that older students feel embarrassed about requesting free or reduced lunches.

County	Total School Population	Number Eligible	Percent Eligible
Lexington	46,139	12,813	27.7%
Richland	44,126	20,554	46.6%
Charleston	44,219	23,560	53.3%
Dorchester	19,294	6,239	32.3%
Berkeley	26,817	12,821	47.8%
Spartanburg	41,791	16,791	40%
Greenville	59,272	17,937	30.3%
State	666,428	310,803	46.6%

Source: *Ranking of Counties and School Districts in South Carolina, 2001*, Department of Education.

Food Distribution

Description: There are five food banks in South Carolina serving designated counties. They collect and distribute to non-profit member agencies that distribute to low-income families. The following chart shows the number of pounds distributed during 2001 by food banks. Not all food banks maintain county data.

Analysis: Transportation and geographic locations of distribution centers are two contributing factors affecting whether citizens can secure food. Between 5% and 11% of low-income families do not own one car and rural or isolated families do not have any public transportation.

2001	Lexington	Richland	Dorchester	Berkeley
Pounds distributed	668,626 lbs.	3,222,970 lbs.	417,152 lbs.	724,979 lbs.

Source: Holland, Denise. Harvest Hope Food Bank. Food Distribution, 2001.

2. AFFORDABLE HOUSING

Introduction: Within the last decade, the population rose by approximately 500,000 and the housing (both owner and rental) rose by 330,000 units in South Carolina. Approximately 70% of all households are located in the MSAs (Metropolitan Statistical Areas) or urban areas. Housing is less available in Non-MSA counties. These counties have a disproportionate share of vacant, dilapidated, and abandoned housing units. Low-income families often lack the necessary down payment to buy a home but the rental costs equal or exceeds the cost of owning a home. Assisted rental units, which cost significantly less than their market rate counterparts, are filled in just a few days because of the demand and long waiting lines. Given the costs of rentals and the size of current waiting lists, there appears to be a substantial need for additional assisted rental units. The following data will measure affordable housing:

- a. Owner and Renter Occupied Housing
- b. Cost Burden of Housing
- c. Number of Unsuitable Housing Units
- d. Monthly Housing Costs
- e. Homeless Shelters

Owner and Renter Occupied Housing

Description: Census 2000 identifies the number of owner occupied and renter occupied housing units in each county.

Analysis: During the period from 1990 to 2000, owner-occupied units increased over 26% and rental dwelling increased by 12.4 %; however, the total vacant housing units (both rental and home owned) increased by over 32 percent. Analyzing the vacant housing unit percentage suggests there should be enough housing for all South Carolinians; the real questions is whether it is affordable and accessible where citizens need it.

County	2000 Owner Occupied	% Owner	2000 Renter Occupied	% Renter
Lexington	64,265	77.2%	18,975	22.8%
Richland	73,757	61.4%	46,344	38.6%
Charleston	75,267	61.4%	48,059	39%
Dorchester	26,023	75%	8,686	25%
Berkeley	37,052	74.2%	12,870	25.8%
Spartanburg	70,339	72%	27,396	28%
Greenville	101,977	68.2%	37,579	31.8%

Source: US Census Bureau, 2000

Cost Burden of Housing – 1999-2000

Description: Cost burden refers to the amount of the household income being spent on housing. A **Cost Burden** is incurred if 30% or more of the family monthly income is spent on housing. A **Severe Cost Burden** is when a family spends 50% or more of the monthly income on housing.

The following chart shows the number of homeowners and renters who are classified as having a Cost Burden or Severe Cost Burden in housing.

Analysis: Home owners in all comparison counties except Lexington have a higher percentage of homeowners in the cost burden or severe cost burden classification than the state percentage of 9.9%. There is more county variation for renters, probably attributable to the difference in rental costs among counties.

County	Homeowners with cost burden/severe cost burden	Percent with cost burden or severe cost burden	Renters with cost burden or severe cost burden	Percent with cost burden or severe cost burden
Lexington	7,954	9.6%	4,744	5.6%
Richland	13,571	11.2%	16,758	13.9%
Charleston	14,775	11.9%	19,640	15.9%
Dorchester	3,827	11%	2,469	7%
Berkeley	5,228	10.4%	2,621	5%
Spartanburg	9,975	10.2%	8,771	8.9%
Greenville	15,238	10%	15,224	10%
State	152,733	9.9%	140,243	9.2%

Source: Proximity (<http://proximityone.com/dp.htm>) (based on Census 2000)

Number of Unsuitable Housing Units by MSA

Description: Representatives of local government were surveyed as to the type and number of substandard units in their jurisdiction in January 2002. It must be noted that a survey is not a precise analysis. The survey asked the respondents to identify the degree of housing problems by MSA (Metropolitan Statistical Areas).

Analysis: Based on this survey, there are large numbers of units that are defined as unsuitable to use as housing units. More than half of the unsuitable units are single family units. There is a strong need to rehabilitate these dwellings or to demolish them and “infill.”

County	Single family homes	Apartments	Mobile Homes	Manufactured Homes	Non-Traditional Units	Total Unsuitable
Columbia MSA	1,477	150	202	14	2	1,845
Charleston MSA	4,197	128	2,276	N/A	119	6,720
GSA MSA	4,941	196	3,005	2,507	100	10,749
State	43,192	2,913	18,422	8,352	2,446	75,325

Source: SC Comprehensive Housing Needs Assessment, Vol. I, July 2002, pg. 29.

2001 Monthly Average Housing Costs – Owner and Renter

Description: Total housing costs are those costs that must be paid in order for the dwelling unit to be a viable residence. For **renters**, housing costs include the monthly rent plus energy expenses. For **homeowners**, it includes the monthly cost of the mortgage principle, plus interest, taxes, insurance, energy expenses, water and sewer charge and garbage collection fees.

Analysis: Two and three bedroom rentals exceed the cost of two and three bedroom owner homes in Columbia and Charleston MSA. The overall costs of rentals and homeowners are higher than the state average. The GSA (Greenville, Spartanburg and Anderson) MSA. follows the patterns for two bedroom rentals but three-bedroom homes are more expensive than the rental in this MSA. These figures represent a “weighted” average based on population size.

County	Renter 2 bd.	Renter 3 bd		Owner 2 bd	Owner 3 bd
Columbia MSA	\$651	\$883		\$647	\$764
Charleston MSA	\$824	\$1,165		\$737	\$928
GSA MSA	\$569	\$797		\$537	\$829
State	\$597	\$830		\$562	\$802

Source: SC Comprehensive Housing Needs Assessment, Vol. 1, 2002,

Homeless Shelters

Description: The homeless population is very difficult to count. **Table 1** shows the results of a survey of “basic need” service providers that estimated the unsheltered, sheltered and total need of homeless in January 2002. The difference between the Census 2000’s sheltered persons and the opinions of the “basic need” service providers is too large to attribute to differences in definition or a miscount by the Census Bureau.

Because of the difference, a **second chart** is developed that consists of a state estimate based on a collection of all available State and Entitlement Consolidated Plans (**Table 2**). This data presents a tabulation of use, demand, and unmet demand for housing for special needs populations in South Carolina. This is calculated on the whole state, not by MSA's. **Table 3** reflects the organizations, type of services, and the operating hours.

Analysis: It is difficult to accurately count the homeless. The SC Comprehensive Housing Needs Assessment, 2002, describes the homeless as “individuals and families who may have experienced an economic dislocation and then loss of their home or apartment. Others may be veterans, the alcohol or drug dependent, the mentally or physically disabled, victims of domestic violence, or simply person displaced through natural disaster.” Detailed information about the homeless is not yet available through the Census 2000 data. The survey in **Table 1** reports that there are over 24,000 homeless in South Carolina and the Columbia MSA shelters a higher percentage of the homeless than the Charleston and GSA MSA's. **Table 2** illustrates that over 15,000 homeless are not sheltered on the state level. This data is not available on the MSA level. **Table 3** illustrates the number of shelters available in each county and the type of services available, i.e. operates 24 hours, provides some referral services, and whether they provide transitional housing.

Table 1

County	Unsheltered	Sheltered	Total Homeless
Columbia MSA	2,915	4,980	7,895
Charleston MSA	4,970	4,980	9,950
GSA MSA	2,730	2,845	5,565
State	13,423	11,271	24,694

Table 2

Housing Type Needed	Estimated Need	Inventory Use	Unmet Need or Gap
Emergency & Temporary Shelters	7,842	2,549	5,293
Transitional Housing	4,724	1,656	3,068
Permanent Supportive Housing	7,544	2,591	4,953
Charleston County Unseparated	3,648	1,186	2,462
State Total	23,758	7,982	15,774

Table 3

County	2000 Shelters	Provides shelter and emergency services	Operates 24 hr.	Provides referral services only	Provides transitional housing
Lexington	7	5	3	2	2
Richland	14	8	5	3	2
Charleston	11	6	1	2	2
Dorchester	5	3	3	3	0
Berkeley	4	1	2	2	0
Spartanburg	6	3	1	1	1
Greenville	16	8	8	5	1

Source: Tables 1 and 2 -SC Comprehensive Housing Needs Assessment, Vol. 1, 2002, p.48;
Table 3 – SC Budget and Control: homeless_shelters, HUD

3. SAFETY

Introduction: Safety is a basic need of all citizens. Children need to be safe going to school and during school. Families need to be safe when they go on a picnic or attend a community function. Adults need to be safe as they travel to work and in the workplace. While many crime statistics have decreased, others have increased. Measures for safety include the following:

- a. Index Crimes
- b. Crimes by Program Type
- c. School Crime Incident Report

Index Crimes

Description: The Crime Index is used as the basic measure of crime. The data represents the number of crimes per 10,000 population in each county. The specific crimes within the Index are selected on the basis of their nature, frequency of occurrence, and reliability of reporting. Index crimes are larceny, breaking/entering, aggravated assault, motor vehicle theft, robbery, rape and murder.

Analysis: Four of the seven comparison counties have a decrease in the number of reported index crimes from 1999 to 2000, including Richland, Dorchester, Spartanburg and Greenville Counties. The state also shows a decrease from 542.1 per 10,000 population to 527.5.

County	1999	2000
Lexington	416.3	423.4
Richland	725.1	653.8
Charleston	690.8	729.1
Dorchester	363.1	364.8
Berkeley	386.1	431.8
Spartanburg	584.4	551
Greenville	535.6	509.5
State	542.1	527.5

Source: SLED, 2000.

Arrests By Program Type

Description: Arrests by program type shows where the crime was committed. DUI, school and employer crime arrests are from a specific location. School arrests are far less than the School Crime Incident Report because these are arrests recorded by SLED and not county or municipal areas. The columns that record criminal justice and general crimes are not specific to a program type.

Analysis: DUI crimes range from 14% to 47% of the total crimes in specific counties (Table 1). The Strategy Committee was surprised about how significant DUI crimes were in specific counties, i.e. Lexington at 47.4% and Greenville at 43.4% of total county crimes. The largest percentage of youth crime (Table 2) is committed through criminal justice or general.

2001 – All Ages

Table 1

County	Total	DUI	Crim Just	School	Employer	General
Lexington	1,886	895	346	80	31	534
Richland	2,963	970	516	86	34	1,357
Charleston	4,646	856	1,817	53	82	1,838
Dorchester	1,620	232	534	295	32	527
Berkeley	1,650	353	463	134	8	612
Spartanburg	4,268	1,211	624	200	326	1,907
Greenville	3,768	1,639	820	97	47	1,165

2001 - Ages 0 –17 Years

Table 2

County	Total	DUI	Crim Just	School	Employer	General
Lexington	294	3	168	78	1	44
Richland	465	9	255	80	0	121
Charleston	770	10	383	51	0	326
Dorchester	434	3	71	274	0	86
Berkeley	364	2	155	127	3	77
Spartanburg	472	9	170	192	37	64
Greenville	520	20	251	93	1	155

Source: SLED, 2002

School Crime Incident Report

Description: The School Crime Incident Report identifies the total school crimes and the top ten offenses. The top four offenses are (1) simple assault, (2) drug possession, (3) larceny/theft and (4) disturbing school. Six of the ten offenses have decreased between 2001 and 2002 school year in South Carolina and four offenses have increased. The increases appeared in drug possession, aggravated assault, non-forcible sex offenses, and trespassing.

Analysis: There is a wide discrepancy in the way school districts report school crime. Most schools have one or a shared Resource Officer that is hired by the county’s Sheriff Office. If the Resource Officer makes an arrest, this incident is usually reported on the crime report; however, the school district can use their discretion about what to report.

County	2000-2001	2001-2002	Change
Lexington	1044	1055	Increase
Richland	657	675	Increase
Charleston	1036	956	Decrease
Dorchester	526	596	Increase
Berkeley	632	712	Increase
Spartanburg	341	367	Increase
Greenville	787	598	Decrease
State	12,568	12,291	Decrease

Source: Department of Education (www://myschools.com)

4. TRANSPORTATION

Introduction: In many community needs assessments through South Carolina, transportation is named as the first or second biggest problem faced by families and individuals with limited incomes. Low-income families, elderly, and physically handicapped individuals have to rely on public transportation, family members, or neighbors to take them to work, to visit a doctor, to pick up prescription drugs, or go to the grocery store. Public transportation has limited routes and time schedules, and family members or neighbors can not or will not provide transportation on a regular basis. The Strategy Committee identified transportation as a major issue in this focus area. The assessment data to measure whether transportation improves in future years are:

- a. Vehicles in Family
- b. Transportation Services
- c. Transportation Provided to Medicaid Eligible Recipients

Vehicles in Family

Description: The Census 2000 completed sample data on the number of vehicles in a family. The following chart reflects the percentage of families with no car, one car, two cars, and 3 or more cars in each county.

Analysis: There are 4,434 families in Lexington and 10,776 families in Richland Counties that do not have a family car. These family members must rely on alternative transportation. All comparison counties are served by a public transportation system (MSA); however, public transportation routes are often limited in the number of routes and hours of operation. No public transportation is provided in rural sections of the counties.

County	No vehicle	1 vehicle	2 vehicles	3 or more
Lexington	5.3%	30.6%	42.4%	21.7%
Richland	9%	37.4%	37.8%	15.9%
Charleston	11.9%	37.6%	38.1%	12.4%
Dorchester	6.5%	31.9%	42.7%	18.8%
Berkeley	6.7%	32.1%	42%	19.2%
Spartanburg	8.4%	31.8%	39.8%	20%
Greenville	7.6%	34.3%	40.3%	17.9%

Source: Census 2000, Sample Data

Transportation Services

Description: According to the mission of the SC Department of Transportation (SCDOT), passenger transportation should be available statewide and designed to ensure that all South Carolinians have access to basic services, education, employment opportunities and social activities. SCDOT also emphasizes that all services should be accessible to people with disabilities and affordable for people with limited incomes. There are 10 transportation regions in the state and three serve the 7 comparison counties.

Analysis: Federal and state money pays for approximately 75% of the public transportation services. Approximately 50% come through federal funds and a 50% match is paid by the state. Fees for service (riderships) and local municipal governments pay the remaining percentage. Bus routes and operating schedules are based on the available ridership at specific hours. Federal and state transportation dollars have been decreased within the last 1 ½ years. The rural 53-11 portion of federal money has seen the biggest decrease. Many human service agencies run their own transportation vans as seen in column # 2; these programs rarely coordinate with each other to be more effective and efficient in providing needed services.

Region	Current Providers	Other Providers
Appalachian	Anderson Transit Authority (ATS) Clemson Area Transit System (CATS) Greenville Transit Authority (GTA) Spartanburg Transit System (SATA) Spartanburg Transit Bureau (SCTB)	Human Services – 32 Taxicabs – 24 Intercity bus - 1
Central Midlands	Fairfield County Transit System (FCTS) Central Midlands Regional Transit Authority	Human Services – 39 Taxicabs – 10 Intercity bus - 2
Berkeley, Charleston and Dorchester	Berkeley-Charleston-Dorchester Regional Transit Authority (BCD RTA) Charleston Area Transit Authority (CATA)	Human Services – 14 Taxicabs – 9 Intercity bus - 3

Source: Research Series on Poverty Issues: *Public Mass Transportation in South Carolina*. January 2002

Transportation Provided to Medicaid Eligible Recipients

Description: Medicaid will pay for transportation to medical facilities for Medicaid eligible recipients. Transportation is provided through the provision of contractual, individual, and ambulance transportation services. The following chart shows Medicaid transportation data on the state level.

Analysis: The number of Medicaid recipients has more than doubled in three years. It is anticipated that this will continue to increase as a larger percentage of the population becomes 65 years and older.

	1998-99	1999-00	2000-01
Number of recipients served	52,463	152,452	136,239
Number of Medicaid appointments kept	779,200	1,418,218	1,672,524
Cost per recipient served	\$200	\$237	\$260
Number of Medicaid-enrolled transportation providers	1,066	797	1,072

Source: [www://ors.state.sc.us/hd/index.html](http://ors.state.sc.us/hd/index.html)

ECONOMIC DEVELOPMENT AND QUALITY OF LIFE

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ECONOMIC DEVELOPMENT AND QUALITY OF LIFE

The *Economic Development and Quality of Life* Strategy Committee established a goal during the first of five two-hour planning meetings. The goal is:

to attract and stimulate private investment to build our community; to insure that the SC General Assembly and its budget supports community “infrastructure,” not only capital improvement but also social, health and cultural initiatives that attracts sound investment

This Strategy Committee used a different approach from the other four Strategy Committees. They conducted a SWOT Analysis that provides a framework for identifying and analyzing strengths, weaknesses, opportunities and threats within the Greater Columbia area community. They developed a list of 9 to 12 items in each area. The analysis also served as an impetus to analyze economic and quality of life issues and concerns and to help develop strategies for community improvement. Four strategies were developed and these strategies were quantified by determining the degree to which a strategy leverages a strength, reduces a weakness, exploits an opportunity, and mitigates a threat. The numerical value for each analysis ranged from 0, $\frac{1}{2}$, $\frac{3}{4}$ to 1 point. Based on the quantitative data and follow-up discussion, two strategies were selected by the Strategy Committee. Outcome measures were identified by the Committee to measure the progress and eventual success of each strategy.

Strategy # 1: To develop and implement a regional economic development strategy for the Greater Columbia area, maximizing regional cooperation to both locate target industries to the area while nurturing local opportunities for wealth creation.

Outcome Measures: Job Creation
Job Sector Average Wages
Job Sector Percentage of Employment
Tourism Impact

Strategy # 2: To improve the standard of living by aligning the workforce capabilities for available job opportunities.

Outcome Measures: Literacy Level of Workforce (also in Family)
High School Completion Rate (also in Education)
High School Completers Enrolling in College(also in Education)
Per capita Personal Income
Median Family Income

Strategy # 1: To develop and implement a regional economic development strategy for the Greater Columbia Area, maximizing regional cooperation to both locate target industries to the area while nurturing local opportunities for wealth creation.

Introduction: This metropolitan area in two counties has numerous municipalities, taxing entities, school districts, public safety departments, social agencies, and special interest items. That the Greater Columbia Area is also home for the state government adds an additional dimension to the location. The departments, agencies, schools and special groups experience competition for the same tax dollars, duplication of similar services in the region especially of administrative services, and territorialism to protect their tax base or service area. There are positive alliances and collaborations that can serve as a model for future regional cooperation such as the River Alliance, Convention Center, Carolina Arena, Columbia Metropolitan Airport and the Central Carolina Economic Development Alliance.

Capital Investment and Job Creation - 2000

Description: Capital investments include expenditures on new businesses as well as expansions of existing businesses. Investments are tracked in manufacturing, distribution/warehousing, data processing centers, research/development, headquarters, computer related services and corporate office facilities. In 2000, the state experienced the second highest level of investments in state history. Job creation includes new and expanding businesses as well as other announced new jobs. Over 27,000 jobs were created through capital investment activities and over 8,000 jobs were announced by existing businesses.

Analysis: In a period with a stable economy, capital investments and new job creations usually indicate a growth in the economy. If the economy is not stable, new investments and jobs may be replacing those that have closed.

County	Capital Investment	Jobs Created
Lexington	\$208,305,005	1,836
Richland	320,967,174	5,533
Charleston	159,582,243	1,677
Dorchester	171,861,005	496
Berkeley	161,015,059	1,017
Spartanburg	528,789,297	2,893
Greenville	978,843,317	3,629
State	\$6,134,373,548	35,132

Source: Labor Market Information, SC Employment Security Commission, 2002.

Average Weekly Wages By Job Sectors - 2000

Description: There are approximately 10 job sectors reported by the SC Employment Security. Each job sector consists of a series of specific job types. The average weekly wage for each job sector is an average of all of the specific job types under the sector. MSA stands for the Metropolitan Statistical Area and combines counties within the MSA for total average wages.

Analysis: The Columbia and Upstate MSAs exceed the state total average wage of \$541. Average wages are most affected by the percentage of citizens working in the different job sectors (see next metric). As an example, over 23% of the Midland WAI (Columbia) workforce is in one of the lower paying job sectors of Service but only 8% works in one of the higher average wage sectors of Finance, Insurance and Real Estate.

MSA	Total All Industry	Agr	Min	Const	Manu	Trans, Com	Retail trade	Fin., Insur, RT	Service	Non-Class	Fed
Columbia MSA	\$558	\$407	\$794	\$573	\$722	\$719	\$322	\$716	\$515	\$501	\$787
Charleston MSA	530	469	718	570	773	590	305	708	487	496	847
Upstate MSA	572	394	732	587	723	691	334	754	500	501	780
State	541	407	748	569	676	739	314	687	489	616	765

Source: www://scses.org/lmi/data/wages

Percentage of Employment by Job Sectors

Description: Midlands WIA (Workforce Investment Act) counties consist of Fairfield, Lexington and Richland, Trident consists of Berkeley, Dorchester and Charleston, and Upstate consists of Spartanburg, Cherokee, and Union.

Analysis: The WIA reports slightly different job sectors than the MSA. New industry and businesses in higher paying sectors will have a significant impact on the weekly wages and over-all standard of living. Transportation and Public Utilities had the biggest increase (43%) in employees in South Carolina from 1996 to 2000 because of job additions in trucking, warehouse industry and communications.

WIA	Govt.	Manufact.	Const	Trans, PublicUtil.	Trade	Finan, Insur, RT	Service
Midlands WIA	25%	10%	6%	5%	23%	8%	23%
Trident WIA	20%	9%	8%	6%	24%	4%	30%
Upstate WIA	14%	32%	6%	4%	23%	2%	18%

Source: www://scses.org (Spotlight)

Per Capita Personal Income

Description: Per capita income is calculated by taking the total personal income in the county divided by the total population living in the county, including children, working adults and non-working adults.

Analysis: Charleston and Berkeley Counties had a significantly higher percentage increase than any other comparison counties, the state, southeastern and national regions. This is particularly interesting because the Trident area has a high percentage of the population working in two lower weekly wage job sectors, Services and Trade.

County	1998	2000	% Change
Lexington	\$25,174	\$27,053	+ 7%
Richland	26,547	28,206	+ 6%
Charleston	24,490	28,466	+ 16%
Dorchester	20,735	20,906	+ .008%
Berkeley	16,258	18,160	+ 12%
Spartanburg	22,274	23,800	+ 7%
Greenville	27,131	28,743	+ 6%
State	\$22,372	24,000	+ 7%
S.E.	24,258	26,179	+ 8%
US	26,909	29,451	+ 9%

Source: www://sces.org/lmi and www://ors.state.sc.us

Median Family Income

Description: Median Family Income is the middle income point if all individual incomes were ranked from the lowest to the highest income.

Analysis: Between 1990 and 2000, Richland, Charleston, Dorchester and Greenville exceeded the 10.1% percentage increase of the state. Charleston County had the most significant percentage increase of 15.2%. Charleston's increase correlates to their per capita increase of 16% from 1998 to 2000.

County	1990	2000	% Change
Lexington	\$37,358	\$52,639	+ 8%
Richland	34,357	49,466	+ 10.4%
Charleston	31,374	47,139	+ 15.2%
Dorchester	34,209	50,177	+ 12.4%
Berkeley	30,913	44,242	+ 9.7%
Spartanburg	31,857	45,349	+ 9.1%
Greenville	34,560	50,332	+ 11.6%
State	30,797	40,179	+ 10.1%

Source: 2000 Census

Tourism Impact of Direct Visitor Expenditures

Definition: Tourism is reported by the total travel expenditures spent in each county and the total state and local taxes paid. These estimates are of the Direct impacts excluding film and do not include the indirect and induced effects.

Analysis: There were 121,706 South Carolinians directly employed by the tourism industry in 1998 and 118,770 employed in 2000. A 1999 South Carolina summary report (compiled from TIA/USTDC reports, capital investments reported by tourism related businesses and tourism composite RIMSII multipliers) shows that the total economic impact of tourism, including indirect and induced effects, was \$15.6 billion. State government collected 409 million in sales, excise and personal/corporate income taxes and local governments collected 152 million from the tourism industry.

County	Travel Expenditures		Local/State Tax Receipts	
	2000	1998	2000	1998
Lexington	378,370,000	\$367,394,815	22,120,000	\$20,345,979
Richland	326,210,000	298,545,518	22,420,000	20,257,269
Charleston	1,154,550,000	1,033,042,529	90,790,000	77,291,226
Dorchester	39,630,000	37,779,327	2,960,000	2,678,835
Berkeley	54,120,000	50,957,677	5,120,000	4,520,535
Spartanburg	246,140,000	241,202,456	15,310,000	14,270,680
Greenville	760,300,000	628,892,556	44,6550,000	35,589,888
State	7,359,070,000	6,754,570,000	586,520,000	513,558,638

Source: ors.state.sc.us/abstract_99/chap15/rec3.htm

Strategy # 2: To improve the standard of living by aligning the workforce capabilities for available job opportunities.

Introduction: The educational level of the workforce must match the available job opportunities. In order to attract businesses with higher level job opportunities, the workforce must align themselves educationally with the job requirements. The metric for measuring this strategy is:

- a. Literacy level of workforce over 25 years
- b. High school completion rate
- c. High school completers enrolling in technical, two and four year colleges and universities
- d. Per capita personal income
- e. Median family income

Literacy level of Workforce Over 25 Years

Description:

One way to measure the literacy level of the adult workforce is to determine the highest degree or number of years citizens attended school. The following chart shows the number of years attended, highest degree earned, and percentage of the total population for the state and comparison counties in South Carolina.

Analysis: The nature of the economy is changing in South Carolina. Just a few decades ago, 65% of the jobs in South Carolina were unskilled. Today, 85% of the jobs in the state require education and skills beyond high school. The current workforce shows over More than 19% of the current workforce earned less than a high school degree and another 63% earned a high school degree. Business and industry leaders across South Carolina are looking for ways of retraining the current workforce to meet the educational challenges of the new economy. They are working with educators to initiate educational reforms in order to insure that high school graduates have the skills for the rapidly advancing technological workplace upon graduation and are aware of their challenges.

County	Less than H.S. degree	% Less than H.S. degree	High School Degree	% HS Degree	Bachelors Degree	% Bachelors Degree
Lexington	24,147	13.6%	117,936	66.6%	34,965	19.7%
Richland	29,506	11.2%	169,197	64.2%	64,552	24.5%
Charleston	36,852	14.1%	162,509	62.3%	61,253	23.5%
Dorchester	10,929	14.6%	50,405	67.6%	13,133	17.6%
Berkeley	17,037	17.3%	68,978	70%	12,392	12.5%
Spartanburg	45,143	22.7%	122,659	61.8%	30,486	15.3%
Greenville	51,412	16.2%	198,846	62.9%	65,651	20.7%
State	614,279	19.6%	1,981,731	63%	530,055	17%

Source: SC Community Profile, 2000

High School Graduation Rate (Number of student enrollees from 8th grade to graduation)

Description: School retention is illustrated through a comparison of the number of 8th graders and the number of 12th grade graduates from high school. This data is not based on specific students in 8th grade to specific graduates in 12th grade but rather, it is based on the number of students in 8th grade compared to the number of graduates. For school districts that had an increase in their school-age population, the graduation rate may be lower than reported in the chart because they added new students as they lost previously enrolled 8th grade students. The reverse will be true for districts that lost school-age population. Their graduation rate may be higher than the chart shows.

Analysis: Currently, state data is not collected on whether a specific 8th grade student actually graduates from high school. While this is less than a perfect way of determining the percentage of 8th graders who graduate from high school, it does project an alarming trend. This data illustrates that as many as 45% of 8th graders may not be graduating from high school.

County	1997% of Graduates	1998 % of Graduates	1999 % of Graduates
Lexington	75.1	75.3%	76.5%
Richland	70.4%	69.1%	68%
Charleston	59.1%	56.7%	55.3%
Dorchester	71.8%	68.5%	68.7%
Berkeley	66.5%	65.7%	64.9%
Spartanburg	67.9%	68.5%	67.5%
Greenville	73.1%	73.6%	73.8%
State	68.1%	67.4%	66.6%

Source: SC Budget and Control, Office of Research and Statistics, 2002

Industrial Training/Economic Development 2000-2001

Description: There are 16 Technical Colleges in South Carolina designed to provide tailor-made training to new and expanding industries through the Center for Accelerated Technology Training (CATT). This information does not include contract training between businesses and technical colleges that is much larger than CATT. Data is not available on contract training.

Analysis: In 2000, more than 8,500 people went through training at CATT. The numbers of companies represent new or expanding businesses with a high of 16 in Spartanburg and a low of 2 in Lexington, Richland and Dorchester Counties.

County	2001-01 Companies Served
Lexington	2
Richland	2
Charleston	4
Dorchester	2
Berkeley	4
Spartanburg	16
Greenville	9
State Companies	101
State Enrollees	7,610

Source: www://sctechsystem.com

1999-00 Graduates Enrolled in Higher Education

Description: The following chart shows the number and percentage of 1999-2000 high school graduates who entered college the following fall in a two year, four year, or technical college in South Carolina or another state. The percentages of students attending 4, 2 and technical colleges are based on the total number of high school graduates.

Analysis: Lexington, Richland and Greenville Counties exceeded the state percentage of 59.5%. Lexington County had the highest percentage (74.3%) of high school graduates entering higher education; however, these percentages do not reflect educational entry that matches the types of jobs increasingly available.

County	Total Graduates	% Entering College		% 4-Year Colleges	% 2-Year Colleges	% Technical College
Lexington	2,521	74.3%		51.5%	.005	21.8%
Richland	2,296	67.3%		47.9%	1.4%	17.8%
Charleston	1,746	56.9%		44.8%	0.8%	11.2%
Dorchester	1,047	52.4%		36.1%	0.0%	15.6%
Berkeley	1,397	52.4%		29.8%	2.8%	19.8%
Spartanburg	2,066	57.4%		42%	3.6%	10.6%
Greenville	3,238	65.9%		42.9%	8.6%	14.4%
State	33,918	59.5%		39.7%	3.4%	16.4%

Source: www://sde.state.us.sc

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Analysis: Charleston and Berkeley Counties had a significantly higher percentage increase than any other comparison counties, the state, southeastern and national regions. This is particularly interesting because the Trident area has a high percentage of the population working in two lower weekly wage job sectors, Services and Trade.

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