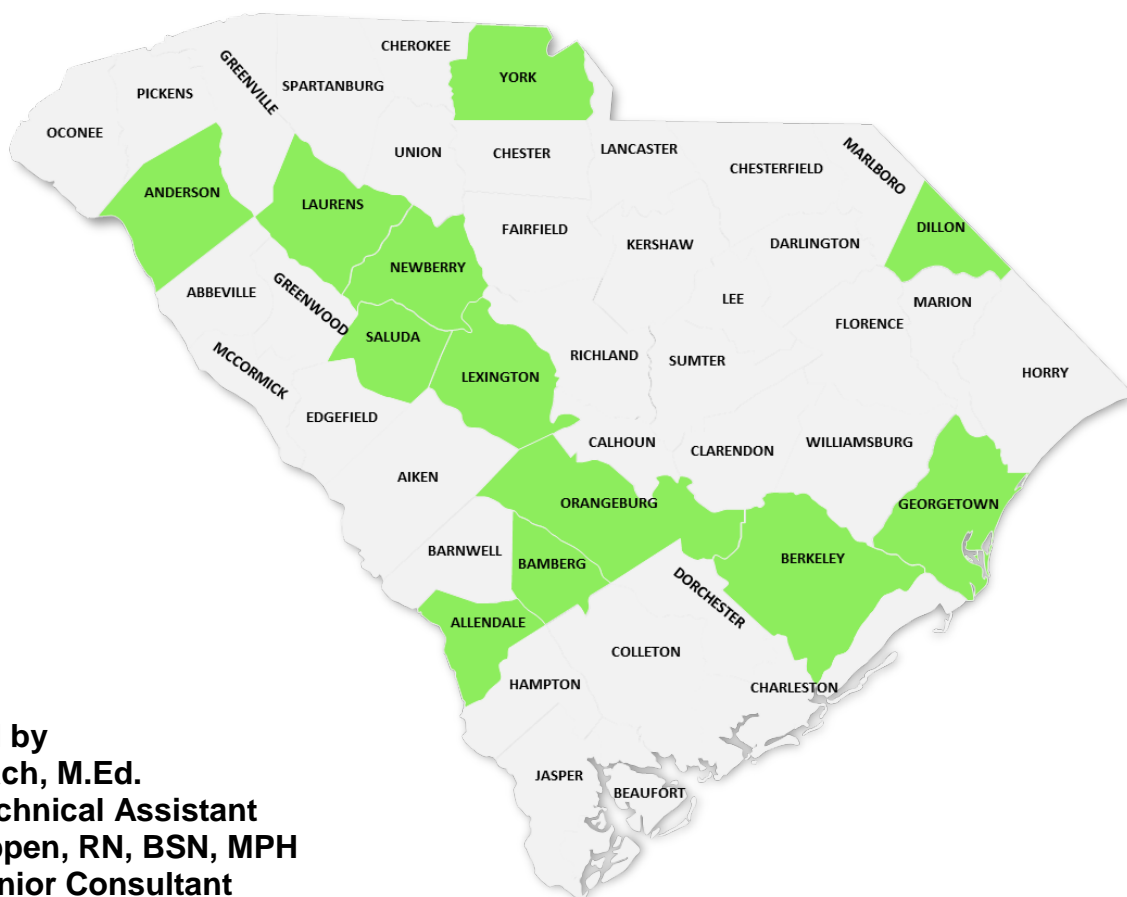




South Carolina First Steps

Early Head Start – Child Care Partnership Community Needs Assessment

August 2016



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Introduction

The health and well-being of families is largely affected by the conditions in which they live, learn, work, and play. Understanding the significant role education has on health risks and outcomes, South Carolina First Steps to School Readiness (SCFS) intentionally addresses these social determinants of health. The agency's mission is to ensure South Carolina's children are ready for school success. It accomplishes this through programs that provide early intervention, strengthen families, improve children's health and well-being, increase the quality of early care and education, and help transition rising kindergarteners into school.

The Early Head Start - Child Care Partnership (EHS-CCP) is one such program that supports this mission. This program's specific goals are to improve the Quality Rating and Improvement System (QRIS) ratings of its childcare center partners; to improve the mental health outcomes of enrolled infants and toddlers, their families, and EHS-CCP staff; to maximize the language and literacy acquisition among enrolled children; and to support families as lifelong learners, facilitate their long-term stability, and promote their connections to peers and community. The EHS-CCP program will accomplish these goals through comprehensive strategies that involve building relationships, connecting families to community resources, and providing health, nutrition, and parent education to children and families.

To meet Early Head Start's mission of serving the greatest number of eligible children and families who have the greatest need for services, the EHS-CCP program conducts ongoing assessment, evaluation, and adaptation to the specific needs of its families. Although this process continues informally, a formal community assessment also takes place every three years and is updated annually. This community needs assessment report provides initial baseline data and a starting point from which to build and to guide future program decisions. Information from this report will assist SCFS in the development of the program's philosophy and goals, the determination of component services, and the determination of recruitment areas, center locations, and selection criteria. The report begins with a geographical orientation to the 12 county service area and includes maps for better visualization and understanding. Public data collected for each county in the service area is organized into tables for easy review and analysis. Community needs and strengths identified from surveys, enrollment forms, and informal conversations are presented in the report and synthesized with the public data to provide further understanding. The community needs assessment serves to inform future programming decisions for the EHS-CCP program and answer the questions of who are the eligible children, what are their needs, and how can they best be met such that they can be ready for school success.

Service Area and Childcare Centers

Figure 1: SC First Steps Early Head Start-Child Care Partnership Service Area

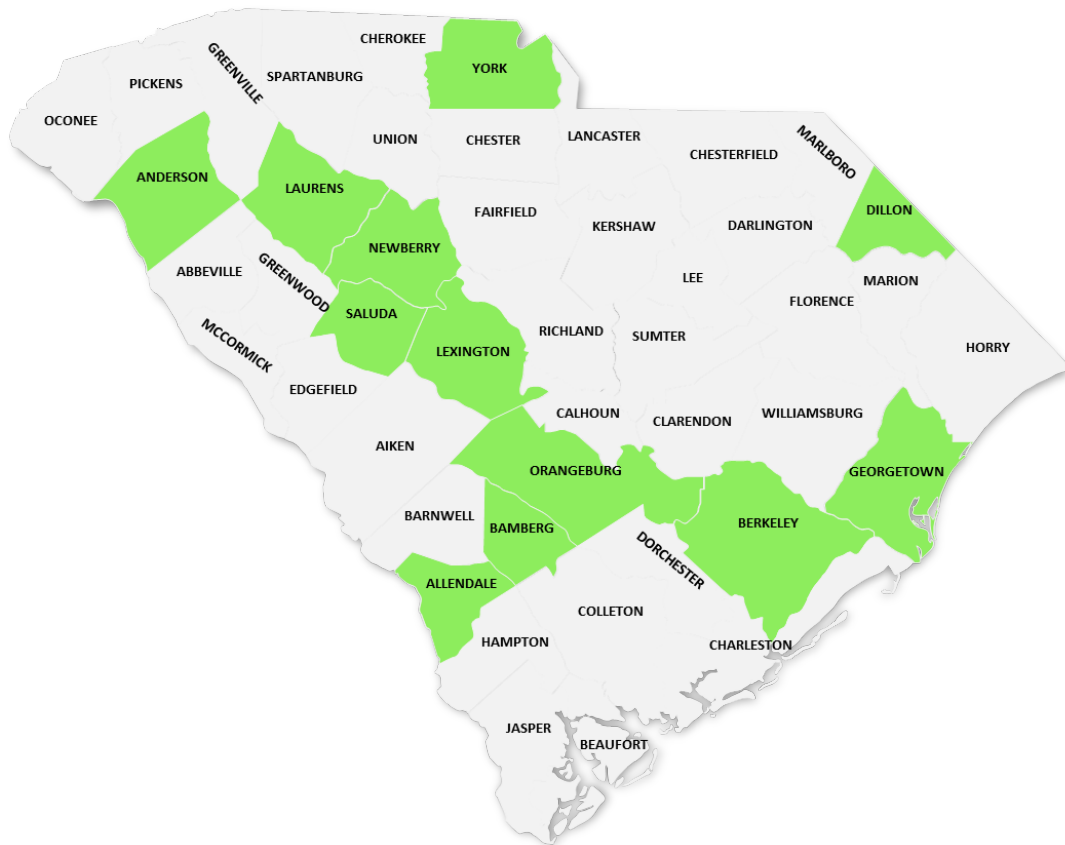
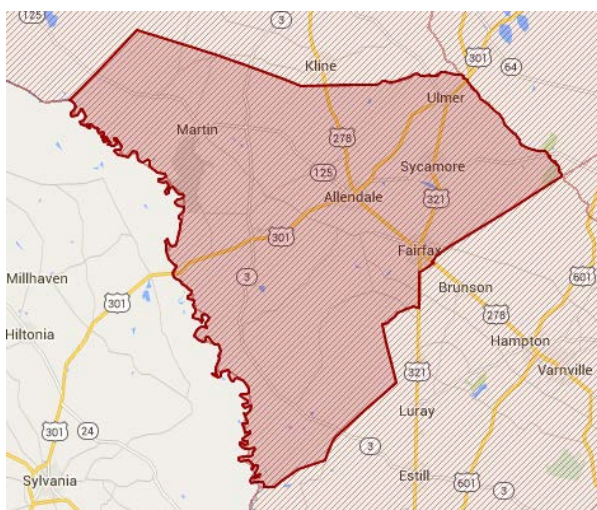


Figure 2: Map of Allendale County



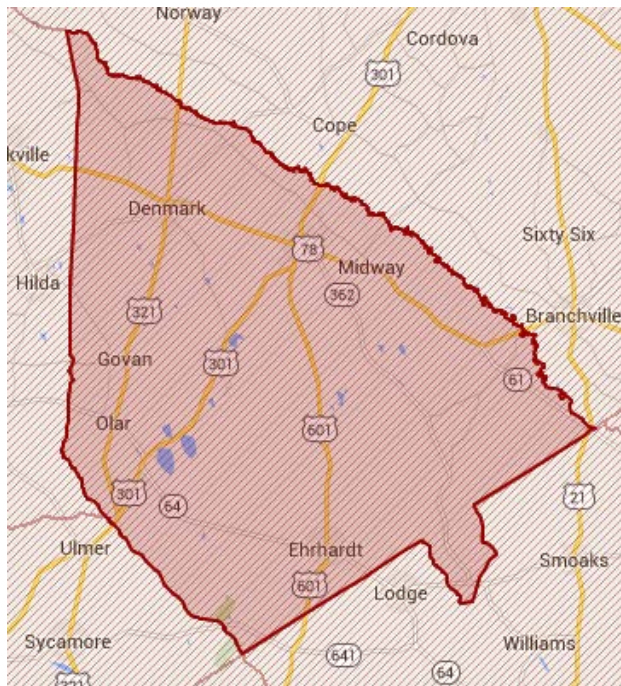
Allendale County is located in the southwestern region of South Carolina and is bordered by Barnwell, Bamberg, Colleton, and Hampton Counties to the north, east, and south respectively. To the west border of Allendale County is the state line of Georgia. Allendale County is the least populated county in the service area. Its geographical size is about 408 square miles and its population density is about 26 people per square mile.

Figure 3: Map of Anderson County



Anderson County is located in the northwestern region of South Carolina and is bordered by Oconee, Pickens, Greenville, Laurens, and Abbeville Counties to the north, east, and south respectively. To the west border of Anderson County is the state line of Georgia. Anderson County is approximately 715 square miles with a population density of about 262 people per square mile.

Figure 4: Map of Bamberg County



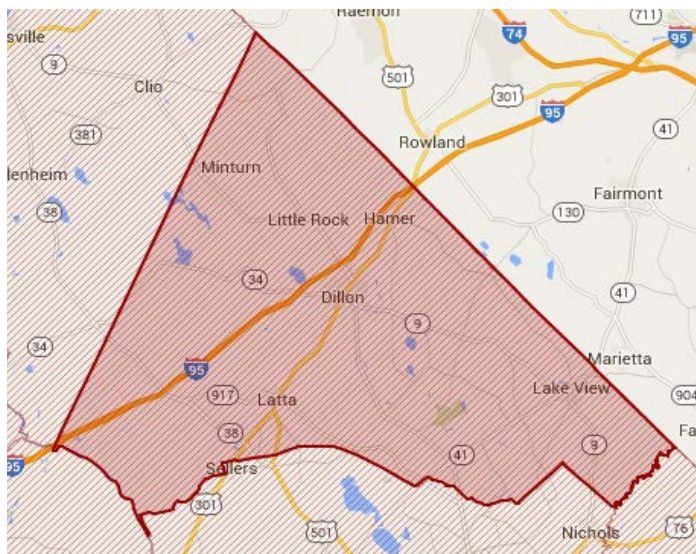
Bamberg County is located in the southwestern region of South Carolina. Starting from the north and moving clockwise, Bamberg is surrounded by Orangeburg, Dorchester, Colleton, Hampton, Allendale, and Barnwell Counties. Bamberg County is approximately 393 square miles with a population density of about 41 people per square mile.

Figure 5: Map of Berkeley County



Berkeley County is located in the southeastern region of South Carolina. Starting from the north and moving clockwise, Berkeley County is surrounded by Clarendon, Williamsburg, Georgetown, Charleston, Dorchester, and Orangeburg counties. Berkeley County is approximately 1099 square miles with a population density of about 162 people per square mile.

Figure 6: Map of Dillon County



Dillon County is located in the eastern region of South Carolina and is bordered by North Carolina to the northwest. South Carolina counties that surround Dillon County include Marlboro, Florence, Marion, and Horry. Dillon County is approximately 405 square miles with a population density of about 79 people per square mile.

Figure 7: Map of Georgetown County



Georgetown County is located along the coast of South Carolina. Horry, Marion, Williamsburg, Berkeley, and Charleston counties surround it. Georgetown County is approximately 814 square miles with a population density of about 74 people per square mile.

Figure 8: Map of Laurens County



Laurens County is located in the northwestern region of South Carolina and is surrounded by seven other counties: Spartanburg, Union, Newberry, Greenwood, Abbeville, Anderson, and Greenville. Laurens County is approximately 714 square miles with a population density of about 93 people per square mile.

Figure 9: Map of Lexington County



Lexington County is located centrally in the state. Starting from the north and moving clockwise, it is bordered by Newberry, Richland, Calhoun, Orangeburg, Aiken, and Saluda counties. Lexington County is approximately 699 square miles and has the greatest population density of the service area with around 375 people per square mile.

Figure 10: Map of Newberry County



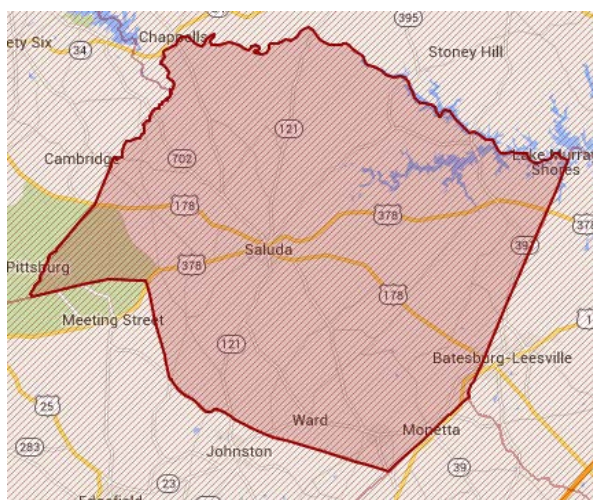
Newberry County is also fairly centrally located within the state. Similar to Laurens County, it is surrounded by seven other counties: Union, Fairfield, Richland, Lexington, Saluda, Greenwood, and Laurens. Newberry County is approximately 630 square miles with a population density of about 60 people per square mile.

Figure 11: Map of Orangeburg County



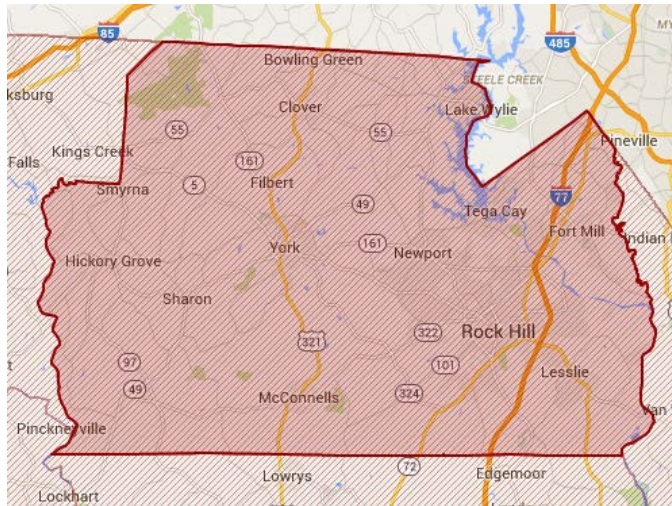
Orangeburg County, another centrally located county, is surrounded by nine other counties with its eastern border following Lake Marion. The nine counties that encircle Orangeburg County are Calhoun, Clarendon, Berkeley, Dorchester, Colleton, Bamberg, Barnwell, Aiken, and Lexington. Geographically, Orangeburg County is the largest county of the service area with 1106 square miles. Its population density is only 84 people per square mile.

Figure 12: Map of Saluda County



Saluda County is located in the west and central region of South Carolina. It is bordered by Newberry, Lexington, and Aiken counties to the north, east, and south respectively. Edgefield, and Greenwood counties border its western edge. Saluda County is approximately 453 square miles with a population density of about 44 people per square mile.

Figure 13: Map of York County



York County is located in the northern central region of South Carolina and is bordered by Cherokee, Union, Chester, and Lancaster Counties to the west, south, and east respectively. To the north border of York County is the state line of North Carolina. York is approximately 681 square miles with a population density of about 332 people per square mile.

Early Head Start-Child Care Partnership Site Locations

Allendale County

Little New Steps
3896 Bluff Rd. Allendale, SC 29810
(803) 584-4072

Anderson County

Kiddie University
1700 S. Main St. Anderson, SC 29624
(864) 224-2064

Bamberg County

Progressive Family Life CDC
282 Progressive Way Denmark, SC 29042
(803) 793-5628

Berkeley County

Betty's Daycare
122 Elm Street Saint Stephen, SC
(843) 567-2624

The House of Smiles
210 Carolina Ave. Moncks Corner, SC 29461
(843) 860-1173

Dillon County

Little Treasures
1612 Commerce Dr. Dillon, SC 29536
(843) 774-8102

Georgetown County

Small Minds of Tomorrow II
52 Hinds Street Georgetown, SC 29440
(843) 318-1852

Pawley's Island CDC
291 Parkersville Road Pawley's Island, SC
(843) 237-4765
Little Smurf's
903 Martin Luther King Dr. Andrews, SC 29510
(843) 264-3262

Laurens County

Thornwell Home for Children
203 West Calhoun St. Clinton, SC 29325
(864) 938-2794

Lexington County

Lexington 4 CDC
135 Lewis Rast Rd. Swansea, SC 29160
(803) 490-7001

Newberry County

Newberry CDC
2300 Evans Street Newberry SC 29108
(803) 276-3045

Orangeburg County

Wright Way CDC
639 Torrington Rd. Eutawville, SC 29048
(803) 492-7295

Saluda County

Saluda Schools
403 D N.Calhoun St. Saluda, SC 29138
(864) 445-0302

York County

House of Joy
546 S.Cherry Rd. Rock Hill, SC 29732
(803) 329-0165

Section I: General and Socioeconomic Demographics

Intrinsic to the community assessment process is a profile of the indicators that comprise the population of the 12 county Early Head Start-Child Care Partnership (EHS-CCP) program. These indicators include general population demographics and social characteristics that provide understanding as to the environmental context in which children and families live. Table 1 portrays the total population and the breakdown in terms of sex. Of the 1,216,958 people who live within the service area, 48.6% (591,022) are male and 51.4% (625,936) are female. Table 1 also demonstrates the extreme population differences between the counties in the EHS-CCP service area as well as the differences in female population for each county, which ranges from 46.8% in Allendale to 53.6% in Dillon.

Table 1: Population

	Total	Male	Female
Allendale	10,027	5,334 (53.2%)	4,693 (46.8%)
Anderson	189,763	91,562 (48.3%)	98,201 (51.7%)
Bamberg	15,649	7,488 (47.8%)	8,161 (52.2%)
Berkeley	188,835	94,192 (49.9%)	94,643 (50.1%)
Dillon	31,529	14,614 (46.4%)	16,915 (53.6%)
Georgetown	60,389	28,757 (47.6%)	31,632 (52.4%)
Laurens	66,390	32,150 (48.4%)	34,240 (51.6%)
Lexington	270,263	132,046 (48.9%)	138,217 (51.1%)
Newberry	37,593	18,259 (48.6%)	19,334 (51.4%)
Orangeburg	91,262	43,000 (47.1%)	48,262 (52.9%)
Saluda	19,973	10,142 (50.8%)	9,831 (49.2%)
York	235,285	113,478 (48.2%)	121,807 (51.8%)
Service Area	1,216,958	591,022 (48.6%)	625,936 (51.4%)

Source: <http://www.factfinder.census.gov>, accessed Tuesday, May 10, 2016

The target population for the EHS - CCP program is women of childbearing age and their children under 5 years old. Table 2 reflects the overall age breakdown for the 12 county service area. The total counts of children under 5 and the primary childbearing ages (15 to 44) demonstrate about 45% of the total population. Although the EHS - CCP program would only serve a subset of this group, that being low-income families, this large percentage suggests the likelihood there may also be a significant number of people who would benefit from the services provided through the EHS-CCP program.

Table 2: Population by Age

	Under 5	5 to 14	15 to 24	25 to 34	35 to 44	45 to 59	60+	Median Age
Allendale	563	1187	1329	1445	1270	2055	2178	38.5
Anderson	11,603	25,464	23,845	21,623	24,342	40,548	42,338	40.3
Bamberg	851	1840	2953	1354	1662	3226	3781	40.2

Berkeley	13,404	25,853	27,333	27,799	25,138	38,077	31,231	35.0
Dillon	2,257	4,691	4,172	3,747	3,848	6,475	6,339	37.4
Georgetown	3,103	7,076	6,612	5,719	6,399	12,918	13,397	47.0
Laurens	4,130	8,321	9,341	7,280	8,096	14,149	15,073	40.7
Lexington	17,194	36,501	34,129	35,557	36,739	58,246	51,897	38.2
Newberry	2,308	4,787	5,109	4,116	4,556	7,731	8,986	40.7
Orangeburg	5,850	11,452	14,355	10,612	9,582	18,825	20,586	38.7
Saluda	1,353	2,476	2,406	2,430	2,393	4,330	4,585	41.2
York	15,427	33,687	31,397	28,607	33,746	50,287	42,134	37.6
Service Area	78,043	163,335	162,981	150,289	157,771	256,867	242,525	39.45

Source: <http://www.factfinder.census.gov>, accessed Tuesday, May 10, 2016

Tables 3 and 4 show the racial and ethnic breakdown in the service area. The general population of the service area is predominantly white. Table 3 demonstrates the differences in racial make-up among the different counties. The majority of the populations in Allendale, Bamberg, and Orangeburg counties is primarily Black or African American, whereas the remaining counties are primarily White. Similarly, Table 4 reflects the concentrations of the Hispanic or Latino populations. Saluda County is home to a significant number of Hispanics and Latinos. Also of interest are the number of American Indians and Asians in each county. York County's population estimate of American Indian/Alaskan Native (1,479) may reflect its unique history and geography that includes the 645-acre Catawba Indian Reservation near Rock Hill. Berkeley, Lexington, and York have the highest numbers of Asian residents. The EHS-CCP program considers these population statistics as it strives to provide services that are culturally and linguistically appropriate for the communities it serves.

Table 3: Population by Race

	Total	White	Black or African American	American Indian / Alaskan Native	Asian	Native Hawaiian / Other Pacific Islander	Other Race or Races
Allendale	10,027	2,439	7,412	3	0	0	173
Anderson	189,763	152,139	31,146	453	1,297	84	4,644
Bamberg	15,649	5,619	9,759	0	60	0	211
Berkeley	188,835	127,306	46,763	973	4,586	134	9073
Dillon	31,529	15,084	14,509	708	92	6	1130
Georgetown	60,389	38,459	20,036	103	245	15	1531
Laurens	66,390	47,014	16,881	74	176	0	2,245
Lexington	270,263	216,946	38,656	745	3,890	134	9892
Newberry	37,593	23,102	11,395	37	207	17	2835
Orangeburg	91,262	31,417	56,695	560	915	16	1659
Saluda	19,973	12,577	5,261	11	0	0	2,124
York	235,285	177,995	43,862	1,479	3,566	87	8,296

Service Area	1,216,958	850,097	302,375	5,146	15,034	493	43,813
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Source: <http://www.factfinder.census.gov>, accessed Tuesday, May 10, 2016

Table 4: Hispanic or Latino Population by Country of Origin

	Number of Hispanic / Latino of any race	Hispanic / Latino as a percent of total population	Mexican	Puerto Rico	Cuban	Other Hispanic
Allendale	269	2.7%	130	1	1	137
Anderson	6,077	3.2%	2,879	1,315	77	1,806
Bamberg	190	1.2%	150	5	0	35
Berkeley	11,388	6.0%	6,313	1,637	94	3,344
Dillon	796	2.5%	668	20	8	100
Georgetown	1,859	3.1%	1,426	277	12	144
Laurens	2,813	4.2%	2,069	201	0	543
Lexington	15,417	5.7%	9,484	1,100	622	4,211
Newberry	2,742	7.3%	2,386	45	44	267
Orangeburg	1,827	2.0%	1,047	628	10	142
Saluda	2,922	14.6%	2,256	106	0	560
York	11,135	4.7%	4,421	2,406	415	3,893
Service Area	57,435	5%	33,229	7,741	1,283	15,182

Source: <http://www.factfinder.census.gov>, accessed Tuesday, May 10, 2016

As expected, language spoken in the home correlates with race and ethnicity. Table 5 depicts the percentages of homes where languages other than English are spoken. Counties with Hispanic communities may need bilingual staff in their childcare centers to meet the needs of those families. Even though many Hispanics are bilingual, there are many who are not proficient in the English language. Of the 13.1% Spanish speaking people in Saluda County, 8% of them speak English less than "very well". According to the survey conducted for this assessment, there is an increase of multigenerational families in the service area, thus increasing the possibility of native languages being used at home. Evidence of this was also seen in a review of children who are either currently enrolled in the EHS-CCP program or have applied.

Table 5: Common Languages Spoken in the Home

	English Only	Spanish	Other Indo-European Languages	Asian and Pacific Islander Languages	Other Languages
Allendale	97.0%	2.7%	0.3%	0%	0%
Anderson	96.3%	2.3%	0.8%	0.4%	0.2%
Bamberg	98.2%	1.1%	0.3%	0.2%	0.2%
Berkeley	92.3%	4.7%	1.2%	1.7%	0.1%
Dillon	96.6%	2.0%	0.2%	0%	1.1%
Georgetown	96.6%	2.5%	0.6%	0.3%	0%
Laurens	95.4%	3.9%	0.5%	0.2%	0%
Lexington	92.8%	4.8%	1.5%	0.9%	0.1%
Newberry	92.2%	6.7%	0.6%	0.5%	0%
Orangeburg	96.7%	1.9%	0.9%	0.4%	0.2%
Saluda	86.7%	13.1%	0.2%	0%	0%
York	93.5%	4.0%	1.5%	0.8%	0.2%

Source: <http://www.factfinder.census.gov>, accessed Thursday, May 26, 2016

The characteristics of households also provide insight to the environment in which children are raised. The American Psychological Association (APA) suggests that life in a single parent household can be quite stressful for both the adult and the child. The APA explains that the single parent's responsibilities of caring for children, maintaining employment, and managing a household are often compounded by additional stresses of custody issues, instability, relationship conflicts, and less opportunity for parents to spend time with their children. Moreover, it is unrealistic to expect a single parent family to function like a two-parent family that often has more financial, social, and emotional support. Table 6 depicts the service area population by household types. Of particular importance is the number of female households with children, but no husband. It is this population that is most likely to be served by the Early Head Start program and perhaps, that will gain the largest benefit. According to data collected from the families who are either currently enrolled or who have expressed interest in the EHS-CCP program, **85 % of families are single mothers.**

Table 6: Household Characteristics

	Total Households	Family Households	Family with children <18 years	Female Households with no husband	Female Households with no husband and with children < 18
Allendale	3,706	2,333	918	996	487
Anderson	73,829	51,922	21,303	10,727	5,683
Bamberg	6,048	3,920	1,513	1,306	649
Berkeley	65,419	47,141	21,455	10,023	5,671
Dillon	11,923	8,342	3,432	2,849	1,432

Georgetown	24,524	17,282	5,898	3,828	1,933
Laurens	25,525	17,707	6,931	4,389	2,204
Lexington	102,733	70,952	31,867	13,331	7,796
Newberry	14,709	10,129	3,980	2,523	1,310
Orangeburg	35,788	23,580	9,194	8,042	3,968
Saluda	7,527	5,393	2,061	1,131	556
York	85,864	61,089	28,300	11,978	6,882
Service Area	457,595	319,790	136,852	71,123	38,571

Source: <http://www.factfinder.census.gov>, accessed Wednesday, May 11, 2016

Educational and employment factors indicate the economic status of a community. On average, eighty-five percent of residents in South Carolina have attained at least a high school diploma or equivalency and the median household income is \$45,033. Although unemployment rates have decreased steadily since 2010, many of the counties in the service area remain above the state unemployment rate. According to the Bureau of Labor Statistics, South Carolina's annual unemployment rate for 2015 is 6.0%. Likewise, many of the counties also exceed the state's poverty rate of 18.3%.

Table 7 shows educational attainment rates in each county of the service area. Table 8 portrays county rates for employment, unemployment, poverty, and household income. Both tables reflect each county's economic well-being and lend understanding as to the availability of other community resources for families. Knowing the economic status of each county provides insight into the economic potential each community has to overcome challenges. It also indicates the level of creativity organizational leaders need to have to accomplish desired outcomes.

When the public data in Tables 7 and 8 is compared to the information received from the families and institutions, some differences are noted. The percentage of EHS-CCP families with a high school education or some college is 38% in both categories, whereas the public data is much lower. Contrastingly, a total of only 10% of families enrolled in the EHS-CCP program have either an Associate's or Bachelor's degree whereas the combined percentage from the public data in these categories (27.76%) is almost triple. This information suggests that education levels of EHS families are lower than the general public. When comparing employment, an average of 69% of EHS families are employed as compared to the general public average of approximately 50% as indicated in Table 8. A synthesis of this data could imply that EHS families are more inclined to pursue employment than to pursue advanced education. Considering this idea, EHS-CCP programs could choose strategies that would facilitate the educational advancement of its families.

Table 7: Educational Attainment For Persons 25 Years and Older

	High School Graduate or Equivalency	Some College, no degree	Associate's Degree	Bachelor's Degree or Higher	Total High School Graduate or Higher
Allendale	34.3%	16.4%	7.8%	12.7%	71.2%
Anderson	31.5%	21.5%	9.7%	19.2%	82.0%
Bamberg	24.4%	21.5%	11.8%	18.3%	75.9%
Berkeley	31.7%	24.8%	9.5%	21.6%	87.5%
Dillon	38.9%	17.8%	6.6%	8.3%	71.7%
Georgetown	32.1%	21.0%	8.8%	23.8%	85.7%
Laurens	36.2%	20.0%	7.7%	14.3%	78.2%
Lexington	28%	22.2%	9.6%	28.7%	88.5%
Newberry	33.6%	16.2%	10%	17.8%	77.7%
Orangeburg	35.3%	17.7%	8.8%	18.7%	80.5%
Saluda	40.5%	15.1%	8.9%	12.1%	76.6%
York	28.1%	21.2%	9.7%	28.6%	87.6%
Service Area	32.88%	19.62%	9.08%	18.68%	80.26%

Source: <http://www.factfinder.census.gov>, accessed Thursday, May 26, 2016

Table 8: Employment, Poverty, and Income

	Percent Employed Civilian Labor Force 16 years and Older	Unemployment Rate in 2015*	Poverty Rate (Individuals Below Poverty Level)**	Median Household Income	Mean Household Income	Per Capita Income of Families
Allendale	34.7%	11.4%	32.5%	\$25,495	\$33,438	\$12,277
Anderson	52.8%	5.4%	16.8%	\$41,822	\$56,000	\$22,216
Bamberg	43.7%	10.5%	28.0%	\$32,738	\$48,582	\$19,136
Berkeley	55.5%	5.5%	14.5%	\$51,844	\$65,032	\$24,474
Dillon	45.5%	8.7%	31.6%	\$28,847	\$39,119	\$15,010
Georgetown	46.2%	8.4%	21.1%	\$41,578	\$59,677	\$24,483
Laurens	50.8%	6.5%	21.0%	\$38,300	\$50,209	\$19,953
Lexington	60.9%	4.8%	14.3%	\$54,170	\$68,230	\$27,026
Newberry	53.2%	5.3%	17.5%	\$41,971	\$55,795	\$22,073

Orangeburg	46.4%	10.7%	24.7%	\$33,615	\$44,954	\$17,645
Saluda	49.7%	5.2%	22.5%	\$38,216	\$50,218	\$19,601
York	59.8%	5.5%	14.3%	\$53,568	\$70,628	\$26,875
Service Area	49.93%	7.33%	21.57%	\$40,180	\$53,490	\$20,897

Source: <http://www.factfinder.census.gov>, accessed Monday, June 13, 2016

*Bureau of

Labor Statistics, <http://data.bls.gov/map/MapToolServlet>, accessed Saturday, June 18, 2016

Poverty rates for families with children under 18 consistently exceed the individual poverty rate of each county. Moreover, in many counties, the poverty rates for single female households with children are more than double the individual rates. Table 9 shows the estimates of children who are living in areas of concentrated poverty; areas in which the poverty rate is 30 % or more. An EHS program, intent on addressing disparity, will appreciate comparisons made between this table and Tables 3 and 4. In Anderson County, there are twice as many Black children living in areas of concentrated poverty as there are White children, however, there are almost five times as many White people in the county as there are Black. Hence, a focused effort is warranted to specifically provide African Americans with the health education and quality childcare offered through the EHS-CCP program. Comparisons made from tables 3, 4, and 9 should impact decisions regarding the selection process or program expansion.

Similar disparities to Anderson County exist in Berkeley, Laurens, Saluda, and York, where even though the county population is primarily White, areas of concentrated poverty are primarily Black. Other counties also exhibit racial disparities, though not as extreme.

Table 9: Children Living in Areas of Concentrated Poverty (2010 - 2014)

	White Non-Hispanic	Black or African American	Some Other Race	Hispanic or Latino	Total Population
Allendale	180	1,650	60	80	1,910
Anderson	1,170	2,520	130	100	3,890
Bamberg	210	1,130	20	0	1,360
Berkeley	80	430	0	0	510
Dillon	1,850	2,730	620	240	5,340
Georgetown	1,030	1,160	60	60	2,260
Laurens	330	660	20	0	1,020
Lexington	2,550	1,610	590	870	5,400
Newberry	*	*	*	*	*
Orangeburg	980	6,140	350	410	7,600
Saluda	190	400	140	250	830
York	670	2,100	140	60	2,910

Source: <http://www.datacenter.kidscount.org>, accessed Thursday, May 12, 2016

* = data not available

Transportation is another factor that greatly affects the economic status of individuals, and ultimately the community. Public data collected regarding transportation provides understanding regarding the habits of people in the community and the time they spend traveling to work. Table 10 provides transportation information that could weigh into decisions made by childcare centers as to hours of operation or assistance with transportation needs. Overall, public transportation is used very little in the service area. The reasons for this are worth exploring. Availability and affordability of public transportation, as well as community acceptance and social norms may explain these statistics and provide direction for the next steps of action. The level of sociality in communities could also be derived from transportation data. In Dillon County, almost 20% of workers carpool to work, whereas in Lexington County, only 7.5% of workers carpool. Hence, in Dillon County, transportation challenges may be more easily resolved with carpooling than in Lexington County.

Table 10: Transportation to Work

	Percent Driving Alone to Commute to Work	Percent Carpooling to Commute to Work	Percent Using Public Transportation to Commute to Work	Mean Travel Time to Work (Minutes)
Allendale	80.7%	11.7%	0.4%	25.5
Anderson	86.4%	7.9%	0.5%	23.4
Bamberg	82.3%	10.5%	0.9%	24.2
Berkeley	83.1%	8.9%	0.8%	25.9
Dillon	75.1%	19.6%	0.6%	22.6
Georgetown	83.4%	7.6%	0.4%	24.9
Laurens	82.4%	12.1%	0.3%	24.9
Lexington	84.5%	7.5%	0.2%	25.3
Newberry	84.7%	10.7%	0.5%	24.0
Orangeburg	84.4%	10.5%	0.1%	26.2
Saluda	76.5%	14.4%	1.5%	29.8
York	82.6%	9.8%	0.6%	25.6

Source: <http://www.factfinder.census.gov>, accessed Monday, June 13, 2016

Demographics of Children Eligible for Early Head Start

Early Head Start provides early, continuous, intensive, and comprehensive child development and family support services to low-income infants and toddlers and their families. To be eligible for the EHS - CCP program, children must be between 0 - 3 years old, meet income specifications, and live within the service area. Tables 11 and 12 show estimations of the potential number of participants, geographical location, and race and ethnicity for EHS eligible children in the service area. These numbers are influenced by up and down swings in the employment rate and migration patterns. It is important to note that the number of *eligible* children does not equate with the number of *available* children. Parents can choose to send their children to other child care programs or to not use childcare at all.

Table 11: Number of Eligible Children for Early Head Start

	Total Number of Children under 5	Number of Children 0 - 3	Rate of Children (under 18) in Poverty (2014)	Number of Children Eligible for EHS
Allendale	497	298	48.7%	145
Anderson	11,492	6,895	23.8%	1,641
Bamberg	776	466	41%	191
Berkeley	13,468	8,081	20.7%	1,673
Dillon	2,207	1,324	41.8%	554
Georgetown	2,979	1,787	31.6%	565
Laurens	3,911	2,347	30.5%	716
Lexington	17,025	10,215	20.1%	2,053
Newberry	2,200	1,320	30.3%	400
Orangeburg	5,670	3,402	43.1%	1,466
Saluda	1,257	754	32.7%	247
York	15,344	9,206	19.0%	1,749

Source: <http://www.datacenter.kidscount.org>, accessed Tuesday, May 17, 2016

(Children under 5 x 0.6 = estimated number of children 0 - 3)

Table 12: Eligible Children for Early Head Start by Race and Ethnicity

	Number of Children Eligible for EHS	Data Type	Non-Hispanic White Alone	Non-Hispanic Black Alone	Non-Hispanic Other Race Alone	Hispanic
Allendale	145	Number	22	119	*	4
		Percent	15%	82%	*	3%
Anderson	1,641	Number	1,165	377	16	98
		Percent	71%	23%	1%	6%
Bamberg	191	Number	59	124	*	8
		Percent	31%	65%	*	4%
Berkeley	1,673	Number	1,004	468	50	167
		Percent	60%	28%	3%	10%
Dillon	554	Number	199	310	17	27
		Percent	36%	56%	3%	5%
Georgetown	565	Number	266	254	6	40
		Percent	47%	45%	1%	7%
Laurens	716	Number	422	222	7	72
		Percent	59%	31%	1%	10%
Lexington	2,053	Number	1,376	411	62	205
		Percent	67%	20%	3%	10%
Newberry	400	Number	192	140	4	64
		Percent	48%	35%	1%	16%
Orangeburg	1,466	Number	381	997	29	73
		Percent	26%	68%	2%	5%
Saluda	247	Number	94	67	*	86
		Percent	38%	27%	*	35%
York	1,749	Number	1,137	420	52	140
		Percent	65%	24%	3%	8%

Source: <http://www.datacenter.kidscount.org>, accessed Thursday, May 12, 2016

* = data not available

Note: Estimates are slightly off due to rounding.

Section II: Other Child Care Programs

Table 13 demonstrates a pressing need for Early Head Start Services in that the number of eligible children greatly outweighs the number of those being served. The table shows the estimated number of children eligible for Early Head Start by income and age only and does not include children with disabilities. As the table presents, there are only two other existing Early Head Start Centers in the service area with a capacity to serve a total of 80 children. Carolina Community Actions, Inc., who currently serves 40 EHS children in Union County, has expressed plans to expand into York County within next 1-2 years.

Table 13 also shows the number of children who have received voucher assistance for the calendar year 2015. Unduplicated counts of children ages 0, 1, 2 receiving vouchers were collected from areas where the zip code is 95% - 100% in the specified county. The number of children receiving vouchers is likely to be underestimated due to the exclusion of data for zip codes that exist in more than one county at lower percentages.

SCFS strives to improve the quality of childcare and education programs throughout the state. The agency acknowledges that the Head Start Performance Standards are significantly more rigorous than the standards under which the vast majority of childcare centers currently operate. Providers that participate in the ABC Quality Rating program can receive childcare vouchers with a rating of either A,B, or C. Because of this variability, children who receive voucher assistance may or may not be receiving the same quality and comprehensive services that Early Head Start provides.

According to staff at the SCDSS, cost and location are two primary factors that greatly influence a parent's selection in child care providers. In Dillon County, childcare vouchers were issued for 8 children in the zip code of 29563, which was listed as a priority zip code in the initial grant proposal. Only two providers in this zip code were eligible to receive vouchers, and they were both "C" rated. Likewise, childcare vouchers were issued for 81 children in zip code 29536, another priority zip code that currently has 2 "B" rated providers and 6 "C" rated providers. Other counties may have similar situations. Consistent with this information are the survey results that indicated the need for quality childcare for low-income families in the 12 county service area. At least half of the survey respondents in Allendale, Anderson, Dillon, Laurens, and Saluda counties identified childcare as a top priority.

Table 13: Child Care Programs Serving Eligible Early Head Start Children

	Number of EHS Eligible Children	EHS Programs / Service Capacity*	Number of Regulated Centers and Home-Based Providers*	Number of Children Receiving Childcare Vouchers**
Allendale	145	EHS-CCP 16	4	16
Anderson	1,641	EHS-CCP 16	114	340
Bamberg	191	OCAB Denmark EHS Center / 45 (32 Center-based; 13 Home-based) EHS-CCP 16	14	32
Berkeley	1,673	EHS-CCP 32	112	210
Dillon	554	EHS-CCP 16	32	93
Georgetown	565	EHS-CCP 32	48	100
Laurens	716	EHS-CCP 48	20	77
Lexington	2,053	EHS-CCP 16	138	372
Newberry	400	EHS-CCP 16	19	81
Orangeburg	1,466	EHS-CCP 16	73	268
Saluda	247	GLEAMS EHS / 35 (32 Center-based; 3 Home-based, prenatal) EHS-CCP 16	10	2
York	1,749	EHS-CCP 16	118	449

Source: *<http://www.sccchildcare.org>, accessed May 18, 2016

**Data received from the South Carolina Department of Social Services.

ABC Quality Ratings

ABC Quality is a voluntary rating and improvement program intended to help South Carolina parents find high quality child care. Child care providers who opt to participate in ABC Quality must demonstrate that they meet, exceed or surpass basic child care standards. The program is administered by the Division of Early Care and Education of the SC Department of Social Services. Providers who participate receive an ABC Quality rating to demonstrate their commitment to creating higher quality experience. Child care providers receive one of the following ratings: A+, A, B+, B, or C. Table 14 shows the number of licensed child care facilities in each county along with the ABC Quality rating distribution. Child care providers range in type of facilities, this data includes child care homes, group child care homes, licensed family child care home, and registered family child care homes.

Table 14: Child Care Access by Type of Care & QRIS Participation

	Number of 0-5 Licensed Providers in County	ABC Quality Level					Does not participate in ABC Quality
		A+	A	B+	B	C	
Allendale	4	0	1	0	0	1	2
Anderson	115	1	0	3	8	19	84
Bamberg	13	0	0	1	1	2	9
Berkeley	109	1	0	6	7	12	83
Dillon	32	0	0	0	4	10	18
Georgetown	31	0	0	1	15	4	11
Laurens	20	0	0	1	1	4	14
Lexington	136	0	0	11	16	22	87
Newberry	19	1	0	0	3	2	13
Orangeburg	117	1	4	4	14	13	81
Saluda	10	0	0	1	0	0	9
York	117	4	1	4	14	13	81

Source: www.abcquality.org, accessed July 29, 2016

Section III: Children with Disabilities

At least ten percent of the total number of enrollment opportunities in the EHS-CCP program must be made available to children with disabilities. Categories of disability or conditions associated with developmental delays for this age group of 0 - 3 were created in consultation with BabyNet and Early Head Start staff. Tables 15, 16, and 17 depict the estimated number of children in each disability category as determined from BabyNet program data.

Table 15: Number of Children with Disability Type in each County

	Autism	Automatic Eligibility	Child Maltreatment	Genetic Syndrome	Hearing Impairment
Allendale					
Anderson	14	1	1	13	1
Bamberg				1	
Berkeley	4	3		8	
Dillon					
Georgetown	3			3	
Laurens	3			1	
Lexington	5		1	14	1
Newberry	4			2	
Orangeburg					
Saluda					
York	7		1	10	4
Service Area	40	4	3	52	6

Source: BabyNet Program Data, accessed June 14, 2016

Table 16: Number of Children With Disability Type in each County

	Muscle Dysfunction	Nervous System Disorders	Neural Tube Defects	Neurologic Brain Defects	Newborn/Premature
Allendale		1			1
Anderson		3	2	4	16
Bamberg					
Berkeley	1	9		7	10
Dillon					
Georgetown		5	1	9	
Laurens		7			4
Lexington		5	2	5	5
Newberry		1			1
Orangeburg					
Saluda		2			1
York		9	4	12	10
Service Area	1	42	9	37	48

Source: BabyNet Program Data, accessed June 14, 2016

Table 17: Number of Children With Disability Type in Each County

	Orthopedic	Visual Impairment	Other	Unspecified	Total
Allendale				1	3
Anderson	1	7	1	11	75
Bamberg					1
Berkeley	3	10		20	75
Dillon	2			1	3
Georgetown		2		5	28
Laurens	2	1		5	23
Lexington		10		27	75
Newberry					8
Orangeburg		4		3	7
Saluda				1	4
York	1	7		10	75
Service Area	9	41	1	84	377

Source: BabyNet Program Data, accessed June 14, 2016

Relevant Services and Resources for Children with Disabilities

Early intervention provides parents an opportunity to have a family-focused, in-home service to assist children with disabilities zero to age three. An early interventionist (EI) is a professional who works a child and his/her parents to help the child grow and develop. Early Intervention services are free to children who qualify for BabyNet. Early intervention services are provided in the home and throughout the community and may include:

- helping parents learn about their child's development or special needs
- providing parents with learning activities to enhance their child's development
- helping parents learn about available services and helping parents decide which services are right for the child and family

Table 18 displays the agencies that provide early intervention services in the EHS-CCP service area.

Table 18: Early Intervention Providers

County	Early Intervention Provider	Provider Services
Allendale	Hermeoine L. Flowers (803) 584-3490 (Fax) (803) 584-2209 (Office) Days of Operation: Monday through Friday Hours of Operation: 8:00am until 4:00pm Address: 210 Dunbar St., Allendale SC 29810	Intellectual Disability
	Allendale/Barnwell DSN Board (803) 259-1351 (Fax)	Intellectual Disability, Autism, Intellectual

	(803) 584-5050 (Office) Days of Operation: Monday - Friday Hours of Operation: 8 am - 4 pm Address: 20 Park St., Barnwell, SC 29812	Disability-Related Disability
Anderson	Aging with Flair Viviana Defelipe 864-982-4577 (espanol) awfreferral@agingwithflair.biz (email) Viviana_defelipe@agingwithflair.biz (espanol)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Ahead Start Valerie Hunt 864-934-3094 864-235-3394 (espanol) Address: 114 Laurens Rd., Greenville, SC 29607 valerie@aheadstart-sc.com (email) www.aheadstart-sc.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Anderson DSNB Teresa Blackmon 214 McGee Rd. Anderson, SC 29625-2104 864-260-4515 teresablackmon@acdsnb.org (email)	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
	Easter Seals Chelsey Norris 864-398-1361 cnorris@sc.easterseals.com (email) www.sc.easterseals.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Playworks Cindy Seagle, Dir. 864-814-2230x 30 Days of Operation: Monday - Friday Hours of Operation: 8 am - 5 pm Address: 340 Blalock Road, Boiling Springs, SC 29316 tina.cooper@playworksinc.com (email) www.playworksinc.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Promising Futures Danielle Watson 864-346-0404 Days of Operation: Monday - Friday Address: 6 Castleton Way, Greenville, SC 29615 danielle@promising-futures.com (email) www.promising-futures.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	SC School for the Deaf and the Blind Elaine Gentry 803-896-9789 or 803-445-4999(cell) 355 Cedar Springs Road Spartanburg, SC 29302 egentry@scsdb.org (email) www.scsdb.org (website)	Blindness, Deaf- Blindness, Other Hearing Impairment
	The Vision Institute Kathryn McNinch 803-250-1653 Days of Operation: M-F	Intellectual Disability, Autism, Intellectual Disability-Related Disability

	Hours of Operation: 8 am - 5 pm kmcninch@tvisc.org (email) www.tvisc.org (website)	
Bamberg	Bamberg DSN Board (803) 793-3778 (Fax) (803) 793-5003 (Office) Days of Operation: Monday - Friday Hours of Operation: 8 am - 4 pm Address: 16553 Heritage Highway, Denmark, SC 29042	Intellectual Disability, Autism, Intellectual Disability-Related Disability
Berkeley	ABA Outreach (843) 297-8470 (Office) (843) 278-9319 (Fax) Days of Operation: Monday – Friday Hours of Operation: 9 am - 5 pm	Autism
	An Angel's Touch (866) 241-4680 (Fax) (843) 291-3355 (Office) Days of Operation: Monday - Friday Hours of Operation: 9 am - 5 pm Address: 2837-F South Live Oak Drive Moncks Corner, SC 29461	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
Dillon	About Play Willie Stokes Address: 1182 Landon Place Drive, Columbia, SC 29229 803-446-6535	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Aging with Flair Kathleen Lint 803-307-9828 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Easter Seals Melanie Brancato 843-598-9555 Days of Operation: Monday - Friday Hours of Operation: 8:30 am - 5 pm	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Pee Dee Kids T'Challa Douglas 843-230-8824 Days of Operation: Monday - Friday Hours of Operation: 8:00 am - 5:00 pm Address: 347 Dovesville Hw, Darlington, SC 29540	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Smiling Faces Agnes McDonald 843-774-6775 PO Box 2072 Dillon, SC 29536	

Georgetown	Aging with Flair Liza McCormick 864-757-9920 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Cornerstone Support Services Casaundra Greene, Owner 843-619-7036, cgreene@ccssllc.org Days of Operation: Monday - Friday Hours of Operation: 8 am - 5 pm Address: 17 Kilmington Court, Fountain Inn, SC 29644	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Georgetown County Board of Disabilities and Special Needs Kim Morris, E.I. Supervisor 843-546-8228 or 843-904-6335, kmorris@gcbdsn.com Days of Operation: Monday - Friday Hours of Operation: 8 am - 4 pm Address: 95 Academy Avenue, Georgetown, SC 29440	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Great Kids – Taylor Consultants, LLC Allison Taylor 843-450-0589, abtaylor1847@gmail.com	
	KIDS Janele Bryant 843-813-4135, janele@kidindevelopment.com Days of Operation: Monday - Friday Hours of Operation: 8:30 am - 5 pm Address: 8403 Sinclair Drive, North Charleston, SC 29406	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	SC School for the Deaf and the Blind Elaine Gentry 803-896-9789 or 803-445-4999(cell) 355 Cedar Springs Road Spartanburg, SC 29302 egentry@scsdb.org (email) www.scsdb.org (website)	Blindness, Deaf-Blindness, Other Hearing Impairment
	Playworks Stephanie Duncan, E.I. Supervisor 843-685-1263, stephaniefuncan@playworksinc.net Days of Operation: Monday - Friday Hours of Operation: 8 am - 5 pm Address: 340 Blalock Road, Boiling Springs, SC 29316 www.playworksinc.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
Laurens	Aging with Flair (864) 757-9920 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability

	Ahead Start (864) 235-3394 Days of Operation: Monday - Friday Hours of Operation: 8 am - 5 pm Address: 114 Laurens Rd., Greenville, SC 29607 www.aheadstart-sc.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Laurens DSN Board (864) 682-2314 (Office) Days of Operation: Monday - Friday Hours of Operation: 8 am - 4 pm Address: 1860 Highway 14, Laurens, SC 29360 http://lcdsnb.org	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
Lexington & Newberry	About Play, LLC Willie Jean Stokes 803-446-6538 Address: 1182 Landon Place Drive, Columbia, SC 29229	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Aging with Flair (864) 757-9920 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Beyond Early Intervention (803) 447 -8449 (Suzanne English) (803) 665 -7063 (Brantley Jenkinson) 5594-C Sunset Blvd. , PMB 306, Lexington, SC 29072 www.beyondearlyintervention.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Bright Start Beth Deason (803) 929-1112 Address: Stephenson Center, 720 Gracern Rd., Ste. 450, Columbia, SC 29210 www.brightstartsc.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Carolina Behavior And Beyond 803-446-8113 (Adrianna Kleckley) 5594-C Sunset Blvd. Box 219 Lexington SC 29072 www.carolinabehaviorandbeyond.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Creative Development Of South Carolina, LLC (803) 391-0654 (Carol Matthis) P.O. Box 23829 Columbia, SC 29224	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Easter Seals South Carolina Karen K. Larson Address: P.O. Box 644, Fort Mill, SC 29716 803-372-9425	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Epworth Early Intervention Center (803) 681-0212 (Jessica Mearns) Address: 2900 Millwood Ave., P.O. Box 50466, Columbia, SC 29250	Intellectual Disability, Autism, Intellectual Disability-Related Disability

	South Carolina School For The Deaf And The Blind (SCSDB) (803) 896-9710 (main number) Department of Outreach Services Address: 101 Executive Center Dr., Suite 120, Saluda Building, Columbia, SC 29210	Blindness, Deaf-Blindness, Other Hearing Impairment
	Step Ahead (803) 252-5179 (Sheila Jenkins or Melissa Curtis) Richland/Lexington Board of Disabilities and Special Needs (RLDSN) Address: 301 Greystone Blvd., Columbia, SC 29210	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
	The Vision Institute Of SC, Inc. (803) 391-2772 Days of Operation: M-F Hours of Operation: 8 am - 5 pm Address: P.O. Box 1923, Irmo, SC 29063	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Therapy Solutions Kim Farmer: (803) 634-3029 Kristen Eagerton: (803) 215-7788 Address: P.O. Box 6862, Aiken, SC 29804 www.therapysolutionsllc.net	Intellectual Disability, Autism, Intellectual Disability-Related Disability
Orangeburg	Aging with Flair (864) 757-9920 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Bright Start Beth Deason (803) 929-1112 Address: Stephenson Center, 720 Gracern Rd., Ste. 450, Columbia, SC 29210 www.brightstartsc.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Carolina Behavior And Beyond 803-446-8113 (Adrianna Kleckley) 5594-C Sunset Blvd. Box 219 Lexington SC 29072 www.carolinabehaviorandbeyond.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Orangeburg DSN Board (803) 536-1170 Days of Operation: Monday - Friday Hours of Operation: 8 am - 4:30 pm 2785 Magnolia Street Orangeburg, SC 29118	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
	Therapy Solutions Kim Farmer: (803) 634-3029 Kristen Eagerton: (803) 215-7788 Address: P.O. Box 6862, Aiken, SC 29804 www.therapysolutionsllc.net	Intellectual Disability, Autism, Intellectual Disability-Related Disability

Saluda	Aging with Flair Viviana Defelipe (864) 982-4577 (espanol) Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	All About Children Tara Tanksley-Stallings Treachia Canady-Bly 803-508-2542 Address: 1469 Wrightsboro Rd., Augusta, GA 30901	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Burton Center Bridgette Gray, 864-942-8910 Days of Operation: Monday - Friday Hours of Operation: 8 am - 4:30 pm Address: 2605 Highway 72/221 East Greenwood, SC 29649	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
	Carolina Behavior and Beyond Adrianna Kleckley, 803-446-8113 Days of Operation: Monday through Friday Hours of Operation: 8:00am until 5:00pm Address: 5594-C Sunset Blvd., Lexington, SC 29072	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Cornerstone Support Services Veronica Dow, 864-980-9963 Days of Operation: Monday - Friday Hours of Operation: 8 am - 5 pm Address: 17 Kilmington Court, Fountain Inn, SC 29644	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Easter Seals Chelsey Norris 864-398-1361 cnorris@sc.easterseals.com (email) www.sc.easterseals.com (website)	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	SC School for the Deaf and the Blind Elaine Gentry 803-896-9789 or 803-445-4999(cell) 355 Cedar Springs Road Spartanburg, SC 29302 egentry@scsdb.org (email) www.scsdb.org (website)	Blindness, Deaf-Blindness, Other Hearing Impairment
York	About Play 803-280-4696 Days of Operation: Monday - Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 1606 Essex Hall Dr., Rock Hill, SC 29730	Intellectual Disability, Autism, Intellectual Disability-Related Disability

	Aging with Flair 803-804-9713 Days of Operation: Monday-Friday Hours of Operation: 8:30 AM - 5:00 PM Address: 219 Gerald Drive, Simpsonville, SC 29681	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Bright Start Beth Deason (803) 929-1112 Address: Stephenson Center, 720 Gracern Rd., Ste. 450, Columbia, SC 29210 www.brightstartsc.com	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Easter Seals (803) 372-9425 Days of Operation: Monday - Friday Hours of Operation: 8:30 am - 5 pm Address: PO Box 644, Fort Mill, SC 29716	Intellectual Disability, Autism, Intellectual Disability-Related Disability
	Encouraging Steps – York DSN Board (803) 628-5999 Days of Operation: Monday - Friday Hours of Operation: 8:30 am - 5 pm Address: 7900 Park Place Road, East York Industrial Park, York, SC 29745	Intellectual Disability, Autism, Intellectual Disability-Related Disability, Traumatic Brain Injury, Spinal Cord Injury, Head and Spinal Cord-Similar Disability
	SC School for the Deaf and the Blind Elaine Gentry 803-896-9789 or 803-445-4999(cell) 355 Cedar Springs Road Spartanburg, SC 29302 egentry@scsdb.org (email) www.scsdb.org (website)	Blindness, Deaf-Blindness, Other Hearing Impairment

Source: SC Department of Disabilities and Special Needs, Provider/Service Directory and SC First Steps System Point of Entry (SPOE) offices

Section IV: Children and Family Data

Table 19 contains statistics that describe certain behaviors regarding educational attainment. This table demonstrates the need for high school completion or attainment of GED in specific age groups. This general information can be compared with subsequent years as well as with the data collected from the Early Head Start eligible families and the organizations that serve them. From the family data collected, 12% of parents had not completed high school. From the survey data collected, participants indicated a priority need for parenting education and parental involvement as opposed to formal education.

Table 19: Educational Data (2010 - 2014)

	High School Drop Out Rate 2013 - 2014	Teens Age 16-19 Not Enrolled in School and Not a High School Graduate	Persons 18 - 24 Who Have Not Completed High School	Persons 25 Years and Older With Some Education Between 9th - 12th Grade, No Diploma*	Families Where Head of Household Lacks High School Diploma
Allendale	2.1%	25.1%	32.9%	20%	23.1%
Anderson	2.1%	8.1%	22.8%	11.5%	15.6%
Bamberg	2.3%	10.7%	17.7%	13.4%	18.8%
Berkeley	1.9%	3.9%	16.9%	8.5%	10.3%
Dillon	2.8%	8.7%	28.0%	17.9%	22.8%
Georgetown	1.7%	3.4%	18.7%	9.3%	13.1%
Laurens	2.8%	10.0%	24.0%	14.4%	19.6%
Lexington	1.4%	5.0%	15.2%	8.0%	9.0%
Newberry	2.4%	1.4%	22.7%	13.2%	19.5%
Orangeburg	1.9%	6.2%	17.3%	13.1%	17.8%
Saluda	1.6%	8.6%	21.6%	10.4%	21.7%
York	2.1%	4.7%	15.3%	8.2%	9.1%

Source: <http://www.datacenter.kidscount.org>, accessed Friday, May 27, 2016;

*<http://www.factfinder.census.gov>, accessed Thursday, May 26, 2016

Tables 20 and 21 provide health data specific to mothers and young children. County Health Rankings and Roadmaps explain that low birth weight is an indicator that represents a mother's exposure to health risks and her infant's current and future morbidity and premature mortality risk. The maternal health risks include the mother's health behaviors, access to health care, the social and economic environment she inhabits, and the environmental risks to which she is exposed. For the infant, low birth weight serves as a predictor of premature mortality and/or morbidity over the life course and also for potential cognitive development problems. Many risks can be reduced or managed with adequate prenatal care, parenting education, and early child intervention. Table 18 presents information that supports the need for programs such as Early Head Start that facilitate these strategies and demonstrates areas upon which to focus efforts.

Table 20: Health Data (2014)

	Babies Born to Mothers with Less than Adequate Prenatal care	Babies Born with Low Birth Weight	Child Deaths Ages 0 - 4*	Number of Infant Deaths Prior to First Birthday (Infant Mortality)
Allendale	48.5%	22.3%	2	2
Anderson	28.2%	8.9%	17	14
Bamberg	32.4%	10.8%	3	2
Berkeley	34.3%	8.3%	22	19
Dillon	30.0%	10.3%	7	6
Georgetown	41.1%	10.1%	1	1
Laurens	30.7%	11.5%	8	7
Lexington	29.2%	8.4%	20	16
Newberry	23.9%	7.8%	4	3
Orangeburg	36.0%	12.6%	13	12
Saluda	39.1%	14.0%	3	3
York	39.4%	8.9%	19	17

Source: <http://www.datacenter.kidscount.org>, accessed Tuesday, May 31, 2016; *<http://scangis.dhec.sc.gov/scan/index.aspx>, accessed Tuesday, May 31, 2016

The top three reasons children are taken to the Emergency Room in the service area are for general and gastrointestinal symptoms, respiratory illnesses, and ear infections. Table 21 lists the percentages of total ER discharges for children ages 0 - 3 in 2014. Many of these trips to the ER can be prevented through medical management with a child's primary care provider, thus emphasizing the importance of families establishing and maintaining relationships with a medical home. Inherent to the EHS program is staff support for this provider-family relationship.

Table 21: Percentages of Total Emergency Department Visits ages 0-3 (excluding newborns)

	General and Gastrointestinal Symptoms	Acute Upper Respiratory Infections and Acute Bronchitis/Bronchiolitis	Otitis Media	Total
Allendale	11.8%	19.3%	9.1%	40.2%
Anderson	12.2%	12.9%	8%	33.1%
Bamberg	13.6%	21.7%	10.1%	45.4%
Berkeley	13.8%	14.4%	8.2%	36.4%
Dillon	9.6%	23.7%	13%	46.3%
Georgetown	12.2%	15.5%	9%	36.7%
Laurens	11%	17.1%	11%	39.1%
Lexington	16.2%	14.8%	7.1%	38.1%
Newberry	13.1%	10.6%	14.4%	38.1%
Orangeburg	10.4%	18.9%	10%	39.3%
Saluda	14.6%	17.2%	12.2%	44.0%
York	14.9%	13.2%	12.7%	40.8%

Source: <http://rfa.sc.gov/>, accessed Monday, June 13 2016

Access to comprehensive, quality health care services is important for the achievement of health equity and for increasing the quality of a healthy life for everyone. Access to health services encompasses four components: coverage, services, timeliness, and workforce. Barriers to services include: lack of availability, high cost, and lack of insurance coverage. These barriers lead to delays in receiving appropriate care and in getting preventive services. Tables 22 and 23 present health care access information as it relates to availability of providers and health insurance coverage. Children often have health insurance coverage when their parents do not and this could impact the parents' healthcare behaviors and decisions. Additionally, despite their availability, providers might not be accessible to families due to restrictions regarding which insurance plans they accept. Adopting and implementing strategies that reduce barriers to care and match providers to families' needs can increase their access to care and improve their health and well-being. SCFS can facilitate such strategies through the EHS program.

Table 22: Access to Health Care Providers (2013)

	Number of Primary Care Physicians	Ratio of Population to Primary Care Physicians	Number of Dentists (2014)	Ratio of Population to Dentists	Number of Mental Health Providers (2015)	Ratio of Population to Mental Health Providers
Allendale	5	1,968:1	2	4,848:1	11	881:1
Anderson	131	1,455:1	76	2,537:1	313	616:1
Bamberg	5	3,086:1	8	1,898:1	5	3036:1
Berkeley	67	2,896:1	54	3,607:1	157	1,262:1
Dillon	17	1,837:1	8	3,891:1	25	1,245:1
Georgetown	35	1,727:1	29	2,096:1	46	1,321:1
Laurens	38	1,743:1	18	3,696:1	41	1,623:1
Lexington	164	1,669:1	115	2,416:1	425	654:1
Newberry	25	1,501:1	10	3,778:1	23	1,643:1
Orangeburg	45	2,021:1	31	2,906:1	123	732:1
Saluda	2	10,046:1	6	3,338:1	10	2,003:1
York	107	2,237:1	109	2,251:1	399	615:1

Source: <http://www.countyhealthrankings.org/>, accessed Tuesday May 31, 2016

Table 23: Financial Access to Health Care

	Percentage of Adults Under Age 65 Without Health Insurance	Percent of Adults >18 Who Did Not See A Doctor Due to Cost*	Percentage of Children Under Age 19 Without Health Insurance
Allendale	22%	19.7%	5%
Anderson	22%	18.2%	6%
Bamberg	23%	22.1%	6%
Berkeley	23%	14.6%	8%
Dillon	27%	23.9%	6%

Georgetown	26%	17.2%	8%
Laurens	23%	16.8%	7%
Lexington	20%	15.1%	7%
Newberry	25%	17.0%	7%
Orangeburg	25%	22.3%	6%
Saluda	29%	13.2%	9%
York	20%	16.4%	6%

Source: <http://www.countyhealthrankings.org/>, accessed Tuesday May 31, 2016;

*<http://wwwn.cdc.gov/CommunityHealth/home>, accessed Wednesday July 6, 2016

According to the Department of Health and Environmental Control (DHEC), obesity affects two out of three South Carolina adults and one out of three South Carolina children. The Centers for Disease Control and Prevention (CDC) reports childhood obesity is associated with adult head of household education level in that twice as many children are obese whose head of household did not complete high school as compared to those who completed college. The CDC also reports obesity among preschoolers is more prevalent in children from low-income families. For these reasons, the nutritional assessments, education, and provision of healthy food in the EHS-CCP centers are essential. Barriers to healthy nutrition for families include inaccessibility, unaffordability, and lack of knowledge and/or motivation to adopt healthy habits. CDC data for the year 2012 shows 12.6% of children ages 2-4 in South Carolina's WIC program had obesity. Table 24 provides a snapshot of the nutritional accessibility of families in the EHS-CCP service area. Once affordability and accessibility needs are met, program objectives can focus on education and behavior change.

Limited family information was available at the time of this report. Information was taken from the family interest survey and the nutritional assessment survey of enrolled families to assess nutritional needs. From data available, nutritional needs appeared to be met. Many families are currently enrolled in WIC and have expressed adequate nutrition for their children. There was an occasional expression of need for nutritional education in the data. For those families who are eligible for WIC and are not currently receiving this service, EHS - CCP staff can facilitate linkage of services. Moreover, explanations for the CDC data might suggest that a parents' knowledge or opinion of nutrition and their definition of good health may not equate with a child's actual health and nutritional status. The EHS-CCP program is perfectly positioned to impact the nutritional health of the children it serves through increasing family knowledge, forming healthy habits, and complementing the efforts of local WIC programs.

Table 24: Nutritional Data

	Percent of Low Income Individuals with Limited Access To Healthy Food*	Percent of Households with Food Stamps/SNAP **	Percent of Children 0 - 5 Receiving SNAP***	Percent of EHS-CCP Enrolled Children Receiving WIC****
Allendale	1.0%	29.6%	99.20%	100%
Anderson	11.0%	15.7%	56.96%	^
Bamberg	6.6%	23.4%	91.49%	^

Berkeley	7.4%	13.5%	49.61%	^
Dillon	6.5%	29%	86.09%	31%^
Georgetown	8.4%	17.1%	76.37%	^
Laurens	9.1%	17.8%	71.13%	^
Lexington	6.3%	13.2%	51.29%	^
Newberry	5.7%	18.1%	74.50%	25%^
Orangeburg	6.3%	22.9%	84.71%	^
Saluda	2.1%	18.2%	67.70%	^
York	6.0%	12.3%	45.99%	^

Source: <http://wwwn.cdc.gov/CommunityHealth/home>, accessed Monday June 13, 2016*; <http://www.factfinder.census.gov>, accessed Monday, June 13, 2016**; SCDSS - Number of Kids By Age Group and County as of July 2015***; EHS-CCP Enrollment Forms****

^Data is limited or not available at time of report

Table 25 presents various social concerns for families in the service area including excessive drinking, violent crime, child abuse and neglect, and children in foster care.

According to the 2013 - 2014 survey by the Substance Abuse and Mental Health Service Administration (SAMSHA), the percentage of South Carolinians aged 12 or older who were dependent on or abused illicit drugs or alcohol were reported to be 2.6% and 5.9% respectively. Moreover 7.6% of adults aged 21 and older reported heavy alcohol use in the past month according to the SAMSHA survey. The Behavioral Risk Factor Surveillance System (BRFSS) demonstrates higher percentages of excessive drinking as presented in the table below. Nonetheless, alcohol and drug abuse is a social factor that impacts the families of the service area.

The median violent crime rate of the United States is 199.2 per 100,000 population. All of the counties in the service area are above this median rate and when compared to peer counties with similar demographics, all the counties except for Orangeburg County is ranked as comparatively worse. Violent crime rates are of significance because witnessing or being a victim of violence such as child maltreatment, youth violence, intimate partner violence or bullying is linked to lifelong negative physical, emotional, and social consequences.

In 2015, there were over 4,000 children in foster care in South Carolina. These numbers result from child abuse and neglect investigations whereby families are having problems and the child cannot safely remain in the home and therefore needs to be placed in foster care.

An awareness of these social concerns and an understanding of how to address them are important for EHS-CCP program staff to obtain. SCFS can support the professional development of staff in these areas.

Table 25: Social Services Data

	Prevalence of Excessive Drinking by Adults (2014)*	Violent Crime Rate (per 100,000)**	Percent of Children 0 - 5 in County with Confirmed Case of Child Abuse or Neglect***	Children 0 - 5 in Foster Care, Including Regional Therapeutic Care Services and Adoption Services ****
Allendale	12%	845.2	3.62%	5
Anderson	15%	594.0	3.52%	107
Bamberg	13%	633.7	4.51%	12
Berkeley	16%	435.4	2.30%	65
Dillon	12%	1229.3	6.07%	57
Georgetown	13%	568.4	2.15%	24
Laurens	14%	721.9	2.48%	100
Lexington	18%	374.4	2.51%	159
Newberry	14%	383.1	3.50%	24
Orangeburg	13%	511.8	1.48%	76
Saluda	14%	506.2	2.07%	5
York	17%	514.9	1.79%	105

Source: *<http://www.countyhealthrankings.org/>, accessed Thursday, July 7, 2016;

**<http://wwwn.cdc.gov/CommunityHealth/home>, accessed Monday June 13, 2016;

SCDSS, Children in Founded CPS Investigations During Fiscal Year 2014-2015 based on Determination Date (data from CAPSS on December 1, 2015); *SCDSS, Total Children in Foster Care on August 1, 2015

Each county in the service area has a local Department of Social Service office that provides social support to its residents. One of these supports is the Temporary Assistance to Needy Families (TANF) program whereby cash assistance, supportive services, and training and employment opportunities are provided to help families in need gain independence. Table 26 presents a snapshot of children whose families have received TANF support and an estimation of how many of them would be in the EHS age group.

Table 26: Social Service Data

	Number of Children 0 - 5 Receiving TANF	Percentage of Children 0 - 5 Receiving TANF	Number of Children 0 - 3 Receiving TANF*
Allendale	80	16.10%	48
Anderson	837	7.28%	502
Bamberg	118	15.21%	71
Berkeley	608	4.51%	365
Dillon	320	14.5%	192
Georgetown	236	7.92%	142
Laurens	347	8.87%	208
Lexington	1,046	6.14%	628

Newberry	166	7.75%	100
Orangeburg	639	11.27%	383
Saluda	61	4.85%	37
York	861	5.61%	517

Source: South Carolina Department of Social Services TANF - Children Count by Age (July 2015)
 (Children under 5 x 0.6 = estimated number of children 0 - 3)

Section V: Data Supplied by Families and Institutions

A group of 98 childcare center staff and other community members who work with low-income families were surveyed to identify the major health, education, nutrition, and social issues facing the families they serve. This group consisted of Executive Directors from First Steps County Partnerships, childcare center teachers, caregivers, coordinators, directors, program assistants, school principals, family advocates, a V.P. for educational services, and EHS parent educators. The group was also asked to identify trends they have observed in their organizations over the last three years and what they believed were the community's strengths and obstacles when working with low income families. The collective results for the 12 county service area are as follows:

The top five issues facing families that were identified by the participants in the survey were:

- 1. Employment**
- 2. Families' ability to provide during financial issues**
- 3. Child care**
- 4. Lack of parent involvement in school/center or at home**
- 5. Poverty**

The top five trends over the last three years that were identified by those surveyed were:

- 1. An increase in the number of single female head of households**
- 2. An increase in the number of low-income families**
- 3. An increase in the number of low-income families contacting the center/organization**
- 4. An increase in the number of multigenerational families**
- 5. An increase in transportation needs.**

The questions regarding the community's strengths and obstacles were open ended.

Overwhelmingly, participants identified a strength as being the fact that members and organizations in their communities are compassionate, caring, and committed to help low income families meet their needs and make gains in their socioeconomic status. Survey participants also frequently acknowledged the presence of a collaborative effort existing among community partners. Many survey participants recognized the current resources available to assist families and listed them as community strengths. However, respondents also reported, that there are not enough of these resources to match the current need. Hence, many respondents listed resource availability as an obstacle. Employment, transportation, and quality child care were identified as the resources most in need. Other top challenges specified by the participants were trust issues and cultural barriers between providers and families. Respondents also indicated there is often a lack of parental involvement, motivation to change behavior, or acceptance to receive recommended help.

Limited information was collected from families of 177 children across the service area who were either interested or became enrolled in the EHS-CCP program. From the data collected,

educational needs of families can be determined. Overall, 12% of families have less than a high school diploma, 38% have a high school diploma, and another 38% have some college. These figures demonstrate both a need and a strength. For families without a high school diploma, there is a need to support completing high school or obtaining a GED. For families with a high school diploma or some college education, there is a strength to build upon. EHS-CCP programs can support parents while they further their education. From the data collected, health care needs do not seem to be prevalent except for the need to establish dental homes. The availability of dentists for each county varies as shown in Table 21 and therefore requires individualization on the part of each childcare center. As mentioned earlier, nutritional needs include ensuring enrollment in WIC programs, increasing knowledge, and supporting healthy habits. Finally, employment percentages and data indicating foster care and homelessness demonstrate families' need for social services. Information from families indicate 27% are unemployed, 69% are employed, and 16% are in training but may also be employed or unemployed. The number of families whose circumstances include homelessness or foster care are 9 and 6 respectively.

Section VI: Community Resources

Education Resources

Early Head Start offers assistance to parents interested in obtaining a high school General Equivalency Diploma (GED) or other adult education opportunities. In addition, their child's enrollment in EHS might enable parents to further their education through obtaining their GED, attending technical college, and/or attending a two or four year college or university. The following section details the educational opportunities and resources available for adults in the EHS-CCP service area.

Adult Education Centers/GED Testing Locations

Adult education programs typically serve individuals sixteen (16) years of age and older who need to improve their basic skills with an emphasis on literacy, mathematics, and English language proficiency. Instructors work with each student to design an individual learning plan that aligns to the student's goals: to get, retain or advance in a job; get off public assistance and achieve a family-sustaining income; earn a high school diploma (HSD) or obtain a high school equivalency diploma (HSED); advance to a community college or training program; help dependent children be successful in school; manage the family's healthcare; or learn English, understand U.S. culture, and be an informed citizen.

As Table 27 displays, of the EHS-CCP service area, Bamberg is the only county without an adult education program.

Table 27: Adult Education Centers/GED Certification Agencies

County	Name of Center	Street Address	City	Zip	Phone
Allendale	Allendale/Fairfax Learning Center	1 Willis Circle	Graniteville	29803	864-366-4226
Anderson	Anderson 5 Adult Education Center	2005 North Main Street	Anderson	29621	864-260-5075
	Anderson Districts 1 and 2 Adult Education Center	214 Lebby St.	Pelzer	29669	864-947-9311
Bamberg					
Berkeley	Berkeley Education Center	113 East Main Street	Moncks Corner	29461	843-899-8703
	Fishburne Educational	6215 Murray Drive	Hanahan	29410	843-820-3742

	Center				
Dillon	Dillon County Adult Education Center	214 West Main Street	Dillon	29536	843-774-1218
Georgetown	Howard Adult Education Center	500 S. Kaminski Street	Georgetown	29440	843-546-0219
Laurens	Laurens County Adult Education - Higher Education Center	663 Medical Ridge Road	Clinton	29325	864-938-1524
Lexington	Adult Education of Lexington-Richland Counties-Irmo	6671 Saint Andrews Road	Columbia	29212	803-476-8229
	Lexington 1 Adult Education Center	420 Hendrix Street	Lexington	29072	803-821-2950
	Lexington 2 Adult Education-Pair Center	2325 Platt Springs Road	West Columbia	29169	803-739-4048
	Lexington District 3 Lifelong Learning Center	101 West Columbia Avenue	Batesburg/Leesville	29006	803-532-2141
	Lexington 4 Adult Education Center	135 Lewis Rast Road	Swansea	29160	803-399-7979
Newberry	Newberry County Adult Education Center	591 McSwain Street	Newberry	29108	803-321-2112
Orangeburg	Orangeburg-Calhoun Technical College	3250 Saint Matthews Road	Orangeburg	29118	803-268-2539
Saluda	Saluda County Adult Education Center	403B North Calhoun Street	Saluda	29138	864-445-3346
York	Rock Hill Flexible Learning Center	1234 Flint Street Extension	Rock Hill	29730	803-981-1375

Source: <http://ed.sc.gov/instruction/adult-education/>, accessed July 25, 2017

Technical Colleges

Comprised of 16 colleges located strategically across the state the SC Technical College System is dedicated to furthering economic and workforce development in South Carolina.

As the state's largest higher education system, the SC Technical System serves more than a quarter million South Carolinians each year and educates more of the state's undergraduates than all the other public higher education institutions combined. Each county in the EHS-CCP service area is served by a technical college, as indicated below.

Name of School	City	Counties Served
Denmark Technical College	Denmark	Allendale, Bamberg, Barnwell
Tri-County Technical College	Pendleton	Anderson
Trident Technical College	North Charleston	Berkeley
Northeastern Technical College	Cheraw	Dillon
Horry Georgetown Technical College	Conway	Georgetown
Piedmont Technical College	Greenwood	Laurens, Newberry, Saluda
Midlands Technical College	West Columbia	Lexington
Orangeburg Calhoun Technical College	Orangeburg	Orangeburg
York Technical College	Rock Hill	York

Source: <https://www.sctechsystem.edu/colleges.html>, accessed July 25, 2017

Two and Four Year Colleges and Graduate Schools

Very few counties in the EHS-CCP service are rich with community resources for higher education as indicated by the list of educational opportunities below. According to studies, the presence of colleges and universities can be valuable contributors to a community's economy. They tend to attract revenue from outside the immediate area through tuition, endowment income or state tax allocations and to attract significant human capital—students and employees from a national market—that can contribute to the area's economic growth (Steinacker, 2004). As the list below shows, Anderson County, Orangeburg County, and York County each have multiple (more than three) higher education institutions, while the counties of Berkeley, Dillon, Georgetown, Laurens, Lexington, and Saluda have none.

Source: Steinacker, A. (2004). The Economic Effect of Urban Colleges on their Surrounding Communities. *Urban Studies* 42(7):1161-1175. Retrieved from https://www.researchgate.net/publication/248974018_The_Economic_Effect_of_Urban_Colleges_on_their_Surrounding_Communities

Name of College	Type	Years	City	County
University of South Carolina - Salkehatchie campuses	Public	2-year	Allendale	Allendale
Anderson University	Private	4-year	Anderson	Anderson
Clemson University	Public	4-year	Clemson	Anderson
Forrest College	Proprietary	2-year	Anderson	Anderson
Voorhees College	Private	4-year	Denmark	Bamberg
Newberry College	Private	4-year	Newberry	Newberry
Claflin University	Private	4-year	Orangeburg	Orangeburg
South Carolina State University	Public	4-year	Orangeburg	Orangeburg
Southern Methodist College	Private	4-year	Orangeburg	Orangeburg
Clinton College	Private	4-year	Rock Hill	York
Winthrop University	Private	4-year	Rock Hill	York

Source: <http://www.sciway.net/edu/colleges/alphalist.html>, accessed July 25, 2017

Nutrition Resources

Women, Infants, and Children (WIC) Nutrition Program

Through the South Carolina Department of Health and Environmental Control (DHEC), the Women, Infants and Children (WIC) Nutrition Program provides health education, healthy foods, breastfeeding support, and other services free of charge to South Carolina families who qualify. Considering the high percentage (85%) of single mothers seeking enrollment in the EHS-CCP program, it is important that these families are able to access quality nutrition resources if they are in need. Below is a list of WIC Clinics, Office Locations and Programs in each of the EHS-CCP counties:

Table 28: WIC Clinics, Office Locations, and Programs

County	WIC Clinic, Office Location, or Program
Allendale	Allendale Public Health Department 571 N. Memorial Street Allendale, SC 29810 (803) 584-3818
Anderson	Anderson Public Health Department 220 Mcgee Rd.

	Anderson, SC - 29625 (864) 260-5641
	Westside Community Center 1100 West Franklin St Anderson, SC – 29624 (864) 231-1791
Bamberg	Bamberg Public Health Department 370 Long Branch Rd Bamberg, SC 29003 (803) 245-5176
Berkeley	Goose Creek Public Health Clinic 106 Westview Blvd. Goose Creek, SC - 29445 (843) 572-3313
	Summerville Public Health Clinic 500 N. Main St. Summerville, SC - 29483 (843) 832-0041
Dillon	Dillon County Health Department 203 W. Hampton Dillon, SC - 29536 (843) 774-5611
Georgetown	Georgetown County Public Health Department 531 Lafayette St Georgetown, SC - 29440 (843) 527-1013
Laurens	Laurens County Public Health Department 93 Human Services Rd Clinton, SC – 29325
Lexington	Lexington County Public Health Department 1070 Suite B South Lake Dr Lexington, SC - 29073 (803) 785-6550
	Batesburg-Leesville Clinic 229 West Church St Batesburg, SC - 29006 (803) 332-6326
	Swansea Health Clinic 500 Charlie Rast Rd Swansea, SC - 29160 (803) 785-3914
Newberry	Newberry County Public Health Department 2111 Wilson Rd Newberry, SC - 29108 (803) 321-2170
Orangeburg	Bowman Public Health Center 139 Poplar St Bowman, SC - 29018 (803) 829-3393
	Elloree Public Health Center

	2610 Cleveland St Elloree, SC - 29047 (803) 897-2858
	Orangeburg County Public Health Department 1550 Carolina Ave Orangeburg, SC - 29116 (803) 536-9060
	Holly Hill Public Health Center 932 Holly St Holly Hill, SC - 29059 (803) 496-3324
Saluda	Saluda County Public Health Clinic 613 Newberry Hwy, Hwy 121 North Saluda, SC - 29138 (864) 445-2141
York	York Public Health Center North Congress St York, SC - 29745 (803) 684-7004
	York County Public Health Department 1070 Heckle Blvd Rock Hill, SC - 29732 (803) 909-7350

Source: www.wicprograms.org, accessed July 20, 2016

Food Pantries by County

Access to food may be a challenge for some families in the EHS-CCP service area. The total child food insecurity rate (that is the availability of food and one's access to) in South Carolina is 28%, that is, 292,840 children who are food insecure. Allendale County has the largest number of food insecure people in the state, with 36% total food insecure and 40% child food insecure (www.feedingamerica.org). Table 29 lists the food pantries present in the EHS-CCP service area to distribute food to those who have difficulty purchasing enough food to avoid hunger.

Table 29: Food Pantries

County	City	# of Food Pantries	Total
Allendale	Allendale	2	2
Anderson	Anderson	1	
	Clemson	8	
	Easley	12	
	Honeapath	1	
	Iva	2	
	Williamston	1	25
Bamberg	Bamberg	1	1
Berkeley	Goose Creek	1	
	Moncks Corner	1	
	Summerville	2	4
Dillon	Dillon	1	1

Georgetown			0
Laurens	Gray Court	1	
	Ware Shoals	1	2
Lexington	Batesburg-Leesville	1	
	Cayce	1	
	Irmo	1	
	Lexington	1	4
Newberry			0
Orangeburg	Orangeburg	1	
	Springfield	1	2
Saluda			0
York	Catawba	1	
	Clover	1	2

Source: www.foodpantries.org, accessed July 20, 2016

SC Farmers Markets and Roadside Markets by County

Due to economic factors such as a low volume of consumers, many rural areas, such as those included in the EHS-CCP service area, lack food retailers and could be considered food deserts - or areas where there is limited availability of fresh, affordable foods.

Therefore, availability of farmers markets and roadside markets is important for families to be able to access healthy, fresh, and affordable food. Table 30 shows the farmers markets and roadside markets in the EHS-CCP service area.

Table 30: Farmers Markets and Roadside Markets

County	Farmers Markets	Roadside Markets	Total
Allendale	1		1
Anderson	8	11	19
Bamberg		1	1
Berkeley	3		3
Dillon		2	2
Georgetown	2	1	3
Laurens	1	2	3
Lexington	3	13	16
Newberry	2	5	7
Orangeburg	2	4	6
Saluda	1	1	2
York	3	13	16

Source: SC Department of Health and Environmental Control
<https://gis.dhec.sc.gov/Farmersmarkets/mobile.html>, access July 20, 2016

As shown in Table 30, some EHS-CCP counties, such as Anderson, Lexington and York have ample access to farmers markets and roadside markets. These are also counties with some of the lowest poverty rates and highest per capita income of the twelve EHS-CCP counties. In contrast, Allendale, Bamberg, Dillon, and Saluda have only one or two farmers markets or roadside markets in their counties. These counties also have some of the lowest per capita

incomes and the highest poverty rates of the twelve EHS-CCP counties. This presumably means that the counties that are most economically deprived are also the counties who may have the least access to healthy, fresh food.

Transportation

There is limited public transportation available in the twelve county program areas, and individuals in each of these counties rely heavily on personal vehicles. Below the public transportation services in each of the twelve counties are detailed.

Table 31: Public Transportation Services

County	Public Transportation Service
Allendale County	Palmetto Breeze, is a commuter fixed route service that follows employment opportunities around the region, many of which are prevalent in Southern Beaufort County. Palmetto Breeze has historically focused on bringing rural residents to jobs in Beaufort County via fixed route commuter lines taking commuters to their workplaces in the morning and returning them to their communities in the evening. The Palmetto Breeze operating hours are from 4:30 am to 8:00 pm, Monday through Sunday. The Breeze offers seven fixed bus routes to and from locations in Allendale, Beaufort, Colleton, Hampton, and Jasper Counties to Hilton Head Island. However, the bus only serves a small portion of southeast Allendale County.
Anderson County	Electric City Transit is the Neighborhood and Transit Services Division of the City of Anderson. Cost for riding the buses is 50 cents for adults and 25 cents for students, seniors and disabled riders. In 2015, the buses average approximately 300,000 passengers per year. Clemson Area Transit, a zero-fare bus line known locally as CAT or the "CAT Bus", it is the most frequently used transit system in South Carolina. Areas with bus service include Clemson University, the City of Clemson, the County of Anderson, City of Seneca and the Towns of Central and Pendleton.
Bamberg County	None
Berkeley County	The TriCounty Link system is comprised of 9 regular fixed routes and 4 commuter routes that provide services to rural residents of Berkeley, Charleston and Dorchester counties. While each of the nine fixed routes follows a published schedule, each route also includes a route deviation option. The current fleet consists of 49 vehicles that seat from 14 to 32 passengers. All TriCounty Link vehicles are ADA

	compliant and include wheelchair lifts, and on average, two wheelchair tie-down positions per vehicle.
Dillon County	None
Georgetown County	None
Laurens County	None
Lexington County	The RTA (Central Midlands Regional Transit Authority) provides public transit service to the heart of the Midlands, including Columbia, Cayce, West Columbia, Forest Acres, Arcadia Lakes, Springdale, and the St. Andrews area. Some areas of Lexington county are included in their routes.
Saluda County	None
York County	The Charlotte Area Transit System, commonly referred to as CATS, is the public transit system in Charlotte, North Carolina, United States. It operates bus and rail service around the Charlotte metropolitan area. Express buses in the CATS system serve north York County, including Rock Hill, South Carolina.

Source: South Carolina's Information Highway (SCIWAY), <http://www.sciway.net/statistics/transportation.html>, accessed July 21, 2016.

Social Service Resources

South Carolina Department of Social Service

The South Carolina Family Independence (FI) program, formerly known as Temporary Assistance for Needy Families (TANF), is designed to help needy families achieve self-sufficiency. States receive grants to design and operate programs that accomplish one of the purposes of the TANF/FI program. The four purposes of the TANF/FI program are to:

- Provide assistance to needy families so that children can be cared for in their own homes
- Reduce the dependency of needy parents by promoting job preparation, work and marriage
- Prevent and reduce the incidence of out-of-wedlock pregnancies
- Encourage the formation and maintenance of two-parent families

In general for this benefit program, you must be a US national, citizen, legal alien or permanent resident, and have very low income. You must also be a resident of the state of South Carolina. TANF is managed through the South Carolina Department of Social Services (SCDSS). Table 32 displays a listing of the SCDSS offices in the EHS-CCP service area.

Table 32: SCDSS Locations/Contact Information

County	SCDSS Location/Contact Information
Allendale	Allendale County DSS 521 Barnwell Hwy Allendale, SC 29810 Telephone:(803) 584-7048 Main Office Hours: 8:30 AM - 5:00 PM

Anderson	Anderson County DSS 224 McGee Rd. Anderson, SC 29625 Telephone: (864) 260-4100 Main Office Hours: 8:30 AM - 5:00 PM
Bamberg	Bamberg County DSS 374 Log Branch Rd. Bamberg, SC 29003 Telephone: (803) 245-4363 Main Office Hours: 8:30 AM - 5:00 PM
Berkeley	Berkeley County DSS 2 Belt Drive Moncks Corner, SC 29461 Telephone: (843) 761-8044 Main Office Hours: 8:30 AM - 5:00 PM
Dillon	Dillon County DSS 1211 Hwy. 34 W. Dillon, SC 29536 Telephone: (843) 774-8284 Office Hours: 8:30 AM - 5:00 PM
Georgetown	Georgetown County DSS 330 Dozier St. Georgetown, SC 29440 Telephone: (843) 546-5134 Main Office Hours: 8:30 AM - 5:00 PM
Laurens	Laurens County DSS 93 Human Services Rd. Clinton, SC 29325 Telephone: (864) 833-0100 Office Hours: 8:30 AM - 5:00 PM
Lexington	Lexington County DSS 1070 S Lake Dr. Suite A Lexington, SC 29073 Telephone: (803) 785-7333 Main Office Hours: 8:30 AM - 5:00 PM
Newberry	Newberry County DSS 2107 Wilson Rd. Newberry, SC 29108 Telephone: (803) 321-2155 Main Office Hours: 8:30 AM - 5:00 PM
Orangeburg	Orangeburg County DSS 2570 St. Matthews Rd. Orangeburg, SC 29118 Telephone: (803) 531-3101 Main Office Hours: 8:30 AM - 5:00 PM
Saluda	Saluda County DSS 613 Newberry Hwy. Saluda, SC 29138 Telephone: (864) 445-2139 Main

	Office Hours: 8:30 AM - 5:00 PM
York	York County DSS 933 Heckle Blvd. Rock Hill, SC 29732 Telephone: (803) 909-7446 or (803) 684-2315 Main Office Hours: 8:30 AM - 5:00 PM

Source: South Carolina Department of Social Services, <https://dss.sc.gov/>, accessed July 19, 2016

Health Resources

Community Health Centers

Community health centers are community-based and patient-directed organizations that serve Medically Underserved Areas (MUAs) which includes persons who are uninsured, underinsured, low-income or those living in areas where little access to primary health care is available. Largely federally and locally funded, typical services covered are family practice and dental care, but some clinics have expanded greatly and can include internal medicine, pediatric, women's care, family planning, pharmacy, optometry, lab, and more.

Medically Underserved Areas/Populations are areas or populations designated by the Health Resources and Services Administration (HRSA) as having: too few primary care providers, high infant mortality, high poverty and/or high elderly population. Health Professional Shortage Areas (HPSAs) are designated by HRSA as having shortages of primary medical care, dental or mental health providers and may be geographic (a county or service area), demographic (low income population) or institutional (comprehensive health center, federally qualified health center or other public facility). Table 33 displays the Community Health Centers in the EHS-CCP service area.

Table 33: Community Health Centers

County	Name of Organization	Address	City	Zip	Phone
Allendale	Carolina Medical Associates	1787 Allendale Fairfax Hwy.	Fairfax	29827	803-632-3421
	Laffitte & Warren Med Center	623 North Memorial Avenue	Allendale	29810	803-584-2128
	Low Country Health Care System, Inc.	333 Revolutionary Road	Allendale	29827	803-632-2533
Anderson	None				
Bamberg	F. Marion Dwight, MD	P.O. Box 120	Bamberg	29003	803-245-5168
	Michael C Watson, RHC	P.O. Box 528	Bamberg	29003	803-245-5144
	R Dale Padgett MD	P.O. Box 524	Bamberg	29003	803-245-

	RHC				2433
Berkeley	Berkeley Medical Center	106 W Main St	Moncks Corner	29461	803-761-1995
Dillon	Latta Internal Medicine	3263 Hwy 301	South Latta	29565	843-752-2091
	McLeod Pediatrics/Dillon	705 N 8th Ave	Dillon	29536	843-774-6091
Georgetown	Andrews Medical Center Georgetown	701 S Morgan Ave	Andrews	29510	843-264-5653
	Georgetown Pediatrics Center	57 Jessamine Street	Georgetown	29442	843-546-8686
	Medical Bldg #1 Georgetown	1530 Highmarket Street	Georgetown	29440	843-546-5128
	Waccamaw Medical Center	1075 N. Fraser Street	Georgetown	29440	843-527-4442
Laurens	Laurens Family Practice- RHC	106 Parkview Drive	Laurens	29360	864-984-0571
	Laurens Family Practice-Gray Ct	670 Hwy 14	Gray Court	29645	864-876-4888
	Piedmont Pediatrics	996 Medical Ridge Road	Clinton	29325	864-833-5654
Lexington	Lexington Medical Ctr/Batesburg	338 East Columbia Avenue	Batesburg-Leesville	29070	803-604-0066
	Lexington Medical Ctr/Swansea	935 W Second Street	Swansea	29160	803-568-2000
Newberry	Newberry Family Health Care	1830 Pond Field Road, #A	Newberry	29108	803-405-1900
Orangeburg	Family Diagnostic Associates	922 Holly Street	Holly Hill	29059	803-496-7174
	Family Health Centers, Inc.	3310 Magnolia Street NE	Orangeburg	29115	803-531-6900
	Family Practice Assoc/Holly Hill	187 Bunch Ford Rd	Holly Hill	29059	803-496-3312
	Medical Center of North	4631 Savannah Highway	Orangeburg	29112	803-247-3900

		North			
	R Dale Padgett MD RHC	1499 John C Calhoun	Orangeburg	29115	803-533- 0007
	Robert L. Smoak, MD	1739 Village Park Drive	Orangeburg	29118	
	Singleton Health Center	1773 Village Park Drive	Orangeburg	29118	803-535- 3600
	Wm E O'Quinn, MD	215 Dorange Road	Branchville	29432	803-274- 8400
York	North Central Family Medical Center, INC	1131 Saluda Street	Rock Hill	29731	803-325- 7744

Source: The South Carolina Department of Health and Human Services (SCDHHS),
<https://www.scdhhs.gov/internet/pdf/CHCs%20by%20County%20Listing.pdf>, accessed July 25, 2016.

Section VII: Needs and Conclusions

In reviewing data from federal, state and local statistical sources; needs data presented by other community agencies; and data collected by staff of First Steps, the following areas of need have been identified, strategies posited, and conclusions drawn.

- 1. Child Care Availability for the Low Income Population:** There are children in the EHS-CCP service area who need and are eligible for the services that Early Head Start provides, yet are currently not receiving those services. A comparison of the estimated proportion of age-income eligible children to the number of enrolled Early Head Start children indicates that just 3% of eligible children in the EHS-CCP service area will be served by an Early Head Start program. While it is possible that other child care programs in the counties account for some of this need, as indicated in the surveys of community members, quality child care was indicated a highly needed resource for all counties.

In the twelve counties, the EHS-CCP program will provide 256 Early Head Start slots in FY 2017, with 80 children served by other Early Head Start programs (Table 13), that means that approximately 11,064 age-income eligible children will not be served. Some of those not served by the Early Head Start may be covered by local child care programs. However, it is unlikely that all of the Early Head Start need has been accounted for. The program will have to prioritize which areas are in most need of EHS and purposefully target those areas for possible expansion of EHS services.

- 2. Single Female Head of Households:** According to surveys of parents of age-eligible children in the EHS-CCP service area, 85% are single mothers. Moreover, according to the surveys of community members, the top trend observed in all EHS-CCP service area counties was the increase in the number of single female head of households. As mentioned previously in this assessment, the American Psychological Association (APA) suggests that life in a single parent household can be quite stressful for both the adult and the child. The APA explains that the single parent's responsibilities of caring for children, maintaining employment, and managing a household are often compounded by additional stresses of custody issues, instability, relationship conflicts, and less opportunity for parents to spend time with their children. Moreover, it is unrealistic to expect a single parent family to function like a two-parent family that often has more financial, social, and emotional support. In many EHS-CCP service area counties, the poverty rates for single female households with children are more than double the individual rates. Since it is this population that is most likely to be served by the Early Head Start program, the program should prioritize support directed to single mothers, such as help with housing stability, employment, continued education, and financial security.

3. **Parenting Education and Involvement:** In a survey of child care staff, respondents prioritized needs in both parenting education and parent involvement in their counties. Therefore, the EHS-CCP program should also focus on supporting and strengthening parent-child relationships, improving parents' skills, and engaging parents in their children's learning and development.
4. **Educational Advancement:** A total of only 10% of parents who enrolled or applied to the EHS-CCP program have either an Associate's or Bachelor's degree; whereas the combined percentage from the public data in these categories almost triples that percentage (27.76%) (Table 7). This information suggests that education levels of EHS families are lower than the general public. When comparing employment, and average of 69% of EHS families are employed as compared to the general public average of approximately 50% as indicated in Table 8. A synthesis of this data could imply that EHS families are more inclined to pursue employment than to pursue advanced education. Considering this idea, EHS-CCP programs could choose strategies that would facilitate the educational advancement of its families.
5. **Black Children Living in Areas of Concentrated Poverty:** In several counties in the EHS-CCP service area, there are high numbers of Black children living in areas of concentrated poverty compared to White children. For example, in Anderson County, there are twice as many Black children living in areas of concentrated poverty as there are White children; however there are almost five times as many White people in the county as there are Black (Table 9). Similar disparities exist in Berkeley, Laurens, Saluda, and York Counties, where even though the county population is primarily White, areas of concentrated poverty are primarily Black. Children in neighborhoods with concentrated poverty experience more social and behavioral problems, have lower test scores, and are more likely to drop out of school (Austin, 2013). Hence, a focused effort is warranted to specifically provide Black children and families with supports offered by the EHS-CCP program in these counties.
Source: Austin, Algernon. (2013). *Economic Policy Institute*. Retrieved from <http://www.epi.org/publication/african-americans-concentrated-neighborhoods/>.
6. **Dental Care:** The data from parents of age-eligible children in the EHS-CCP service area, indicated that the majority of children do not yet have a dentist. According to the *Head Start Performance Standard 45 CFR 1304.20(a)(1)-(2)*, in order to have good oral health development, every child needs a source of continuous, accessible dental care or a "dental home" that is available to the family. Early identification and treatment for dental problems reduces complications and improves oral health outcomes. The availability of dentists for each county varies as shown in Table 21 and therefore requires individualization on the part of each child care center. The EHS-CCP program should consider ways to encourage dental care for Early Head Start children and

families by informing parents about general dental health information and establishing connections to local dental practices.