

SOUTH CAROLINA EARLY CHILDHOOD DATA REPORT

DATA BRIEF: FAMILY ENVIRONMENT

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INTRODUCTION

The earliest years of a child’s life, beginning before birth, are among the most impactful in influencing the child’s lifespan potential and outcomes. This means that a child’s environment should include positive factors to encourage development, as well as buffer against life’s inevitable stressors [1, 2]. This data book serves to share information about the environmental factors impacting children, ages 8 and under, in South Carolina, compared to North Carolina, Georgia, and the United States as a whole. In 2017, South Carolina had a population of a little over 5 million, of which 1.1 million were under the age of 18 [3]. Children under the age of 5 comprised 26 percent of the child population with 291,414 individuals [3]. This report provides a snapshot of the well-being of these youngest citizens of the state.

METHODS

This Data Brief focuses on indicators reported in the full *South Carolina Early Childhood Data Report* related to Family Environment. The full report utilizes four domains of indicators. Table 1 below highlights the four major categories of indicators in this report, along with sub-categories on indicator types. This report and the full data table (beginning on page 10) follow the order presented here.

Table 1: Early Childhood Well-Being Indicators

Family Environment	Physical Health	Emotional Well-Being	Cognitive Development
Family income Parent education Parental employment Teenage motherhood Family engagement	Prenatal care Substance use Domestic abuse Preterm births Low birth weight Infant mortality Breastfeeding Immunizations Medical care Oral health Obesity and Activity	Maternal depression Abuse and neglect	Developmental delay Child care Head Start Pre-kindergarten

There is no one comprehensive indicator of child well-being. Rather, well-being spans physical, social-emotional, and cognitive health and development. Since children do not grow up in a vacuum from their parents or communities, there are a variety of factors that influence overall well-being and long-term flourishing.

This brief focuses *only* on findings and conclusions related to Cognitive Development. Given the inter-related conditions across domains which can impact child well-being, we recommend reading the full report for a full discussion of all domains of child well-being, as well as the methodology for collecting these data. The Data Table comparing these data in an easy to read format is available online.¹

¹ The full data report contains analysis of all indicators as well as a full data table of indicators and is available online at: <https://www.instituteforchildsuccess.org/publication/2019-sc-databook/>. Alternately, an Excel file containing only the Data Table and citations is available download at <https://www.instituteforchildsuccess.org/databook-toolkit/>.

RESULTS AND STATE COMPARISONS

Family income

The median income for South Carolina families with children was \$58,000 in 2017, almost 19 percent less than the US median family income of \$71,400. Nearly a quarter – 23 percent - of South Carolina children under the age of 18 live in poverty, defined as family income of less than \$24,600 for a family of four. This is higher than the national rate (18 percent) as well as the 21 percent rate in both North Carolina and Georgia. While federal poverty guidelines determine eligibility for various programs, they are generally an understatement of family economic situations. Another measure of financial well-being is measuring low-income status, defined as living at or below twice the federal poverty level. More than half of South Carolina’s children under age 6 qualify for “low-income” status (54 percent), compared to 43 percent at the national level.

A number of economic support programs are available, particularly for families with young children. Statistics on the reach of these programs focuses on the raw number of families and individuals, which can make it hard to place in context given the varying population sizes across states. Consider that South Carolina is home to 1.5 percent of the nation’s total child population.

Government Assistance

Nearly 25,000 women participated in Women, Infants, and Children (WIC) in 2017, reaching 99,332 individuals; this represents 1.4 percent of total participation nationwide, which closely aligns with the proportion of U.S. children living in South Carolina. In 2016, an average of 8,654 South Carolina families were receiving Temporary Assistance for Needy Families (TANF), with 15,825 children under the age of 18. This represents just 0.8 percent of national participation in TANF, less than we may expect given that 1.5 percent of the nation’s children call the state home. It is difficult to determine from available statistics whether state differences are related to family eligibility, changes in availability of funds, or a combination of factors.

Free and reduced-price lunches are available within schools for children whose families meet income criteria (up to 130 percent of the federal-poverty level for free meals, and up to 185 percent for reduced-price meals). In 2018, 472,193 children in South Carolina received meals through this funding stream which is about 43 percent of the state’s total population under age 18. Nationwide, just 30 percent of the U.S. population under age 18 receives meals through this program.

Parent Education

In 2016, 12 percent of South Carolina parents had not completed high school or earned their GED, similar to the 13 percent reported in 2013 [4]. There has been a slight shift into higher education levels among South Carolina parents, with 48 percent having completed high school or received their GED and another 40 percent completing some degree of education after high school, up from 36 percent in 2013 [4]. See Figure 1 for a graphic representation of South Carolina parental education. For comparison, the rate of parents without a high school degree is lower in South Carolina than it is in neighboring North Carolina and Georgia (13 percent) and the national average (14 percent). South Carolina’s higher education rate is slightly *lower* than these locations, though (ranging from 41 to 43 percent in comparison locations) [4].

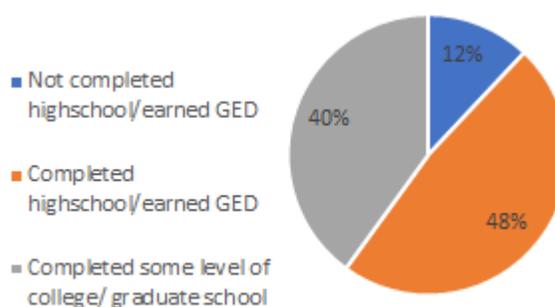


Figure 1. South Carolina Parental Education, 2016 [4].

Parental Employment

In 2017, 10 percent of South Carolina children were in households where no parent was in the workforce, slightly higher than statistics across North Carolina and Georgia (9 percent), and nationally (8 percent). A range of issues can impact, and be impacted by, a parent’s employment and child care scenario, from day-to-day logistics to family budget. Nearly 13 percent of parents with young children reported that their work life was impacted by childcare issues, noticeably higher than the rates in all comparison locations (only 4.9 percent of Georgia parents reported the same; about 10.4 percent of parents in North Carolina and national reported this impact).

Teenage Motherhood

In 2017, South Carolina had a teen pregnancy rate of 21.7 per 1,000 girls ages 15-19 (down from 25.1 per 1,000 girls in 2011). Fifteen percent of teen births in 2016 were to a teen mother who had already given birth at least once [5]. South Carolina's progress on this indicator is part of a larger national trend of reduced teen pregnancy rates. The CDC reports that, nationally, the teen pregnancy rate has declined 51 percent since 2007, or an average of 8 percent per year [6].

Family Engagement

In 2017, 70.6 percent of South Carolina families with children (ages 0-17) ate meals together four or more days per week [7]. Just over 40 percent of South Carolina families with young children (ages 0-5) sang songs with them or told stories to them every day [9]. In 2017, just over a third (34.8 percent) of South Carolina parents reported reading aloud to their children age 0 to 5 every day, with another 45.3 percent reporting that they read to them less than 3 times per week.

Family Structure

It is difficult to get a clear picture of family structure for children in any state, as data collection cannot capture the range of household structures and family dynamics. In South Carolina, over 16,000 children – about 29 percent of all births - were born into potentially single parent households based on information reported on birth certificates [8]. A father's information can either be recorded on a birth certificate through his marriage to the child's mother or through completion of an "Acknowledgement of Paternity" (PATAACK) form that adds the father's information to the birth certificate. While this does not fully give the picture of the status of the family structure for children in South Carolina, it is proxy data for single parent home at birth. According to a report from the Annie E. Casey Foundation, over 400,000 children under age 18 live in single parent families in South Carolina, about 40 percent of the total child population [9].

Research finds a link between birth to a teenage mother and negative child health and development outcomes. Teenage mothers are less likely to receive timely prenatal care, which is linked to negative pregnancy outcomes particularly birth weight [10]. Teen pregnancy is

linked to higher rates of mothers not completing school, which has negative impacts for their income stability in the future. Research also suggests that the children of teenage mother are likely to face a number of challenges, including higher rates that they will drop out of school and be unemployed during young adulthood [5].

Of course, not all children are raised by their own parents. About 6 percent of South Carolina's children under age 18 are in the care of their grandparents, which can include householders where the parents are present or where they are not. This rate is slightly higher than the rate in Georgia and North Carolina (5 percent)[11]. Another family composition to consider is "kinship care" which refers to the full-time care of a child by relatives, family friends, or other adults known to the family; this does not include foster care of a child otherwise unknown to the family. About 6 percent of South Carolina's children live in such a household, higher than the prevalence of the arrangement in North Carolina and Georgia. It is important to keep in mind that some families could be included in both of these statistics.

DISCUSSION AND POLICY IMPLICATIONS

Experiencing extended periods of poverty in childhood significantly decreases a child's likelihood of economic and social mobility, facilitating a multi-generational cycle of poverty from which it is difficult to escape. Families experiencing extended poverty or economic insecurity often experience other forms of instability, like hunger or inadequate nutrition, housing instability or insufficiency, or parental unemployment. Parental education levels are associated with parental involvement in education, academic expectations, academic achievement, and adult employment stability. Additionally, due to the increased earning potential associated with higher educational attainment, parental education levels are associated with children's socio-economic status in early childhood [12]. Family structure impacts the economic well-being of children as well as parental access to resources. Children of unmarried mothers are more likely to live in poverty than children of married mothers and face a higher risk of adverse birth outcomes [13]. These conditions can hinder young children's development and family functioning. Families with wages above the poverty level still face significant challenges.

Young children develop language skills beginning at birth, building their knowledge from ongoing visual, vocal, and verbal exchanges between a very young child and his or her primary caregivers [14]. These interactions are critical developmental building blocks that inform children’s brains on how language works [15]. When adults engage young children in rich conversations, children develop larger vocabularies, learn to read more easily, and develop emotionally [14]. *Quality* of language interactions matter, with value coming from rich conversations between adults and children other than just giving commands and naming objects [16].

Children whose families have incomes below the poverty line face many challenges to well-being and academic success, including parental unemployment [17], housing instability or insufficiency[17, 18], hunger, inadequate nutrition, or “food insecurity,” [19] and toxic stress[20]. Children in families at or below 50 percent of the federal poverty level, children living in chronic poverty, and very young children living in poverty are particularly vulnerable. As the gap between median income and the cost of necessities has increased, family income has become nearly as strong a predictor of children’s achievement as parents’ education levels[21, 22].

Non-parent caregivers. This report does not paint a definitive picture of non-parent-caregiving, however, it is a step towards understanding the prevalence of families beyond the nuclear model. Families headed by someone other than a parent may face a range of challenges across early childhood systems related to accessing services, medical care provision, and housing and may be impacted differently by early childhood policies.

Social Determinants of Health

Poverty is not the only environmental factor which impacts the experiences of children and families. “Social determinants of health” (SDOH) are defined by the World Health Organization as “factors such as where we live, the state of our environment, genetics, our income and education level, and our relationships with friends and family [which] all have considerable impacts on health, whereas the more commonly considered factors such as access

and use of healthcare services often have less of an impact.”[11] SDOH are commonly categorized into several domains:

- Economic stability,
- Education,
- Social and community context,
- Health and health care, and
- Neighborhood and built environment.

Each of these determinants has an impact on child and family well-being, and often have a complicated interplay amongst themselves. Thus, it is important to consider the systems-level and environmental factors, positive and negative, which shape family outcomes and not only individual behaviors.

Adverse Childhood Experiences

This report has focused largely on indicators of child well-being, measured during childhood. Another metric of exposure to risk factors is one’s “ACEs score.” An ACE – or Adverse Childhood Experience – is one of a number of risk factors or exposures which children may have that are linked to startling adult impacts on health and wellness – these include parental divorce, household substance abuse or mental illness, and incarceration, among others [23]. Recent data indicate that 38 percent of South Carolina’s current adult population had exposure to more than two ACEs in their childhood. These data reflect the situation of *adults* – but serve as an important reminder now of the need for two-generation policies to help prevent ACEs exposure for today’s children as well as help adults built their capacity to address their own exposure [24]. Research from the Children and Adolescent Health Measurement Initiative (CAHMI) reports that about a quarter of South Carolina’s current children have been exposed to two or more ACEs [25].

Poverty

As highlighted in the results section, 23 percent of children under 18 live in poverty in South Carolina; more than half of children under age 5 are considered low-income (living below double the poverty level). The poverty level is a standard set at the national level; local economic conditions, including cost of living, must be considered in gauging family economic well-being.

While South Carolina has seen some progress in poverty rates due to improvements in economic conditions, wages have largely stagnated while the cost of living continues to rise. Without economic and social supports, housing and child-care costs alone could consume nearly all the earnings of a low-income family with two children [9].

Experiencing poverty in childhood has long been associated with many of the health, education, and development indicators discussed in this report, including wellness, birth outcomes, infant mortality, developmental delays, and maltreatment.

In the table of indicators, we reported a number of indicators highlighting family engagement, including frequency of reading with children and eating dinner as a family. Young children develop best through “serve and return” interactions which include focused time from a reliable caregiver [26]. While these indicators begin to capture measurements of engagement, they certainly do not show the whole picture as families can engage meaningfully in a number of ways that suit their lifestyle, culture, and parenting styles. In 2017, South Carolina introduced the Palmetto Basics campaign, built from previous work in Boston. The Basics “five fun, simple, and powerful ways to help all our children become the happiest and most successful they can be,” with a particular focus on children ages 0 to 3 are:

1. Maximize Love, Manage Stress
2. Talk, Sing, and Point
3. Count, Group, and Compare
4. Explore Through Movement and Play
5. Read and Discuss Stories

While these specific tasks are not the focus of data in this section, they provide a simple and wonderful framework to understand the everyday interactions that fuel a young child's healthy development.

CONCLUSION

The indicators in this report make it clear that too many young children continue to struggle every day in South Carolina. By providing a snapshot of how young children are faring in the state, we strive to inform statewide efforts to intervene early and effectively in the lives of children. We recognize, however, that this report can only be as informative as the data available for us in the state. To be fully informed about the needs of young children and the outcomes of systemic reforms effecting changes in the lives of these children, we must ensure the availability of reliable, valid, and appropriate data statewide. To this end, the Institute for Child Success recommends continued efforts toward high-quality and timely data collection concerning early childhood well-being.

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