



POSITIVE TRENDS

Infant Deaths

- In 2016, there were 401 infant deaths, with a rate of 7.0 per 1,000 live births, or roughly 1 death for every 140 live births.
- While worse than the U.S.,¹ the infant death rate in S.C. has decreased during the past decade.
- The S.C. teen birth rate in 2016 (23.8 per 1,000 women 15-19 years old) was half of what it was in 2007 (53.6 per 1,000 women 15-19 years old).
- Though below the HP2020 objective of 77.6%, the percent of mothers in S.C. who received at least adequate prenatal care has increased from 71.0% in 2007 to 75.3% in 2016.

Colorectal Cancer

- In 2015, there were 2,320 new cases of colorectal cancer in S.C. The age-adjusted incidence rate of colorectal cancer in S.C. decreased from 50.8 per 100,000 in 2005 to 39.7 per 100,000 in 2015, the most recent year for which data are available. The annual decrease in incidence rates in S.C. was not significantly different from that in the U.S.

Violence

- In 2016, over 24,000 violent crimes were reported in S.C. The violent crime rate in S.C. decreased from a high of 771 per 100,000 in 2006 to a low of 488 per 100,000 in 2016. The decreasing crime rate in S.C. has been more modest in recent years (since 2012). Though the violent crime rate in S.C. was worse than the U.S. across the decade, the decreasing trend in S.C. was better than that in the U.S., which decreased from 479 per 100,000 in 2006 to 387 per 100,000 in 2012, and then remained stable in subsequent years.

Access to Care

- While worse than the U. S. median across years 2011 through 2016, the prevalence of adults who delayed medical care due to costs decreased in S.C. from 19.6% in 2013 to 15.8% in 2016.

¹ Discussions in this document about worse, better, increased, or decreased health indicators, and disparities in health indicators, reflect statistically significant events ($p < 0.05$), which were tested using a one-sided binomial distribution.

Highlights from State Health Assessment

- The prevalence of persons less than 65 years old who had no health insurance was stable from 2008 to 2012, averaging 19.6% annually. In the years since 2012, however, the prevalence of persons less than 65 years old who had no health insurance decreased to 13.0% in 2015 (about half a million), the most recent year for which data are available.
- The ratio of primary care physicians, physician assistants and nurse practitioners in S.C. increased at similar rates between 2010 to 2016. The ratio of primary care physicians, physician assistants, and nurse practitioners increased from 9.0, 1.4, and 2.6 per 10,000 in 2010 to 10.0, 2.5, and 4.1 in 2016, respectively.

Preventable Hospitalizations

- In 2015, there were over 69,000 preventable hospitalizations in S.C. The rate of preventable hospitalizations decreased from a high of 1,780 per 100,000 in 2006 to a low of 1,415 per 100,000 in 2015, the most recent year for which data are available.
- While asthma is the second leading cause of hospitalizations among children less than 5 years old, the rate decreased from a high of 32.1 per 100,000 in 2010 to a low of 16.6 per 100,000 in 2015, the most recent year for which data are available. From years 2014 to 2015, S.C. surpassed the HP 2020 goal of 18.2 per 100,000.

Smoking

- Though above the HP2020 people objective of 12.0%, the age-adjusted prevalence of current cigarette use among adults in S.C. decreased from a high of 23.8% in 2011 to a low of 20.8% in 2016. More than 800,000 adults were current cigarette users in 2016. In 2016, the prevalence of adult cigarette smoking in S.C. was worse than the U.S. median percent of 17.1%.
- There was a significant decrease in current cigarette use among high school youth in South Carolina between 2013 (16.0%) and 2015 (9.6%). The prevalence of current cigarette use among high school youth in S.C. (9.6%) has fallen below the HP2020 target of 16.0%.
- In S.C., the prevalence of high school youth who had attempted to quit smoking increased from 59.9% in 2007 to 63.0% in 2015.
- Among high school youth in S.C., second-hand smoke exposure in the homes and vehicles decreased from 71.4% in 2007 to 40.8% in 2015.

Childhood Lead Poisoning

- In 2016, 36,083 children were tested for childhood lead poisoning, representing an increase from the 31,223 children who were tested in 2010. Of the children tested in 2016, 2.6% tested positive for elevated levels of lead (at or above 5 micrograms per deciliter), a value better than the percent in 2010 (3.2%).

Highlights from State Health Assessment

Tuberculosis and Hepatitis B

- The rate of active tuberculosis disease cases in 2016 was less than half of the 2007 rate (2.1 per 100,000 *versus* 4.9 per 100,000).
- The rate of new Hepatitis B cases among adults 19 years old and older decreased from 1.50 per 100,000 in 2007 to 0.67 in 2016. The rate of new Hepatitis B cases surpassed the HP2020 goal of 1.50 in all years from 2009 through 2016.

High School Diplomas

- Approximately 3 million S.C. residents, or 86.6%, had at least a high school diploma in S.C. in 2016, the most recent year for which data are available. This is an increase from a low of 82.1% of S.C. residents having at least a high school diploma in 2007.

LITTLE OR NO CHANGE IN TRENDS

Cervical Cancer

- In 2015, there were 216 new cases of cervical cancer in the state. The incidence of cervical cancer in S.C. varied from years 2005 through 2015, ranging from a low rate of 7.0 in 2012 to a high of 10.0 in 2009. There was no statistically significant trend. Across the decade, the average incidence rate of cervical cancer was 8.0 per 100,000.

Oral Health

- In 2015, the prevalence of high school youth in S.C. who had seen a dentist within the past year (69.6%) was worse than the U.S. prevalence (74.4%). Between 2013 and 2015, there were no significant trends in the prevalence of high school youth in S.C. having had a dental visit in the past year.

Hypertension (High Blood Pressure)

- In 2016, more than 1.4 million adults reported having hypertension. The prevalence of adults in S.C. ever told they have hypertension varied from 36.4% in 2011, to 37.8% in 2015, but this increase was not significant. For both years, however, the median prevalence in the U.S. overall (30.8% in 2011 and 30.9% in 2015) was better than that in S.C.

ISSUES OF CONCERN/NEGATIVE TRENDS

Increasing Substance Abuse

- The percent of adults who reported binge drinking increased from 15.4% in 2011 to 16.8% 2016 (roughly 650,000 adults).
- More than one quarter of adults 25-34 years old reported binge drinking in 2016 (26.8%), a value worse than that among adults 45 years old and older.
- Twice as many males as females in 2016 reported binge drinking (22.9% for males *versus* 11.3% for females); this difference was significant.
- In recent years, the age-adjusted rate of drug overdose deaths in S.C. has increased from a low of 12.1 per 100,000 in 2012 (573 deaths), to a high of 17.7 per 100,000 (876 deaths) in 2016. Prior to 2012, the rate was stable, averaging about 13.0 per 100,000.
- During fiscal year 2017 among facilities managed by DAODAS, alcohol was the most common substance use disorder resulting in treatment admission (14,440 admissions).
- In 2016, the rate of drug overdose deaths among non-Hispanic White persons (17.8 per 100,000) was worse than non-Hispanic Black persons (2.8 per 100,000).

Worsening Depression and Suicide

- The percent of adults ever diagnosed with depression increased from 15.3 in 2011 to 20.5% in 2016 (more than 650,000 adults).
- In 2016, the percent of S.C. adults who experienced at least 14 poor mental health days in the last month (13.7%) was not significantly different from the U.S. (11.7%).
- The suicide rate in S.C. increased from 11.7 per 100,000 (529 deaths) in year 2007 to 15.7 per 100,000 (818 deaths) in year 2016.
- Although the age-adjusted suicide rate of S.C. and the U.S. did not differ in year 2007 (11.7 per 100,000 in S.C. *versus* 11.4 per 100,000 in the U.S.), the increase in the suicide rate of S.C. was worse than that in the U.S., and surpassed the U.S. rate by 2013. In 2016, the suicide rate in S.C. was 15.7 per 100,000, compared to 13.5 per 100,000 in the U.S.
- The prevalence of S.C. adults in 2016 who reported ever having been diagnosed with depression was worse among 55-64 year old adults (26.2%), compared to 18-24 years old (14.5%), 25-34 years old (18.9%), 35-44 years old (20.9%), and at least 65 years old adults (17.7%).
- The percent of adolescents 12-17 years old who reported a major depressive episode in the past year increased from a low of 8.1% in years 2010-2011 to 10.8% in years 2015-2016.

Increasing Prevalence of Obesity

- In 2016, more than 1.2 million adults were obese. The prevalence of age-adjusted obesity among adults in South Carolina at least 20 years old increased from 31.6% in 2011 to 33.1% in 2016. The prevalence of obesity in 2016 was higher than the HP 2020 objective of 30.5%.

Highlights from State Health Assessment

- The percent of adults who did not eat fruit at least once per day worsened from 2011 to 2015 (44.4% *versus* 47.1%). The prevalence in 2015 was worse than the U.S. median (40.1%).
- In 2016, more than 880,00 adults did not meet the physical activity guidelines. The prevalence of adults who met physical activity guidelines improved from 18.7% in 2011 to 22.8% in 2016. The prevalence in S.C. was better than the U.S. median (20.3%), and surpassed the HP2020 objective of 20.1%.
- The prevalence of S.C. adolescents who met physical activity requirements was 23.6%, a value worse than the U.S. median (25.3%).
- In 2016, over half a million adults reported having diabetes. The prevalence of diabetes varied from 12.1% in 2011 to 13.0% in 2016, but the change was not significant. The prevalence in 2016 was worse than the U.S. median of 10.5%.
- In 2016, more than 360,000 adults reported having prediabetes. The prevalence of adults ever diagnosed with prediabetes increased from 6.7% in 2011 to 9.4% in 2016.
- In 2016, S.C. ranked among the worst six states for adults ever diagnosed with diabetes.

Decreasing Immunizations

- The percent of toddlers 19 to 35 months old in S.C. who completed the combined 7-vaccine series did not change significantly from 2012 through 2016, with an average coverage rate of 69.8%. Similarly, the vaccination coverage rate in the U.S. did not change significantly, with an average coverage rate of 70.7%. The coverage rate, however is far below the Healthy People 2020 objective of 80%.
- The percent of girls 13-17 years old who received at least two doses of HPV vaccine initially increased in S.C. from a low of 17.3% in 2008 to a high of 53.0% in 2013. This trend was not significantly different from the increase observed in the U.S., which increased from 28.3% in 2008 to 47.7% in 2013. In years 2014 through 2016, however, the percent did not change significantly, and in 2016, only 37.0% of girls 13-17 years old received at least two doses of the vaccine. This percent is far below the Healthy People 2020 objective of 80%, and S.C. ranks worst among all 50 states for vaccination of adolescent girls against HPV.
- South Carolina ranks worst among all 50 states in the U.S. for adolescents (13-17 years old) vaccinated against Tdap.

Increasing Injury Deaths

- The age-adjusted injury death rate in S.C. increased from 68.1 per 100,000 in 2013 (3,329 deaths) to 84.2 per 100,000 (4,291 deaths) in 2016. From 2007 through 2012, the death rate was stable, at an average of 70.6 per 100,000 annually.
- The male age-adjusted injury death rate in S.C. during 2016 (124.6 per 100,000) was nearly three times that of females (47.3 per 100,000). Similarly, the U.S. male injury death rate (98.9 per 100,000) was worse than that among females in the U.S. (40.5 per 100,000).
- One out of four age-adjusted injury deaths in 2016 was due to motor vehicle accidents (21.0 per 100,000 motor vehicle deaths, compared to 84.2 per 100,000 total injury deaths).

Highlights from State Health Assessment

Sexually Transmitted Infections

- The annual number of new cases of chlamydia and gonorrhea has been stable across the decade, averaging 29,142 and 9,049 new cases, respectively.
- Of all chlamydia and gonorrhea cases in 2016, more than half (57% and 55%, respectively) were among adults 20 to 29 years old.
- While the percent has increased since 2007, only about half of people living with HIV/AIDS were retained in continuous care during 2016 (54%).

Infants Born at a Low Birth Weight/Preterm Birth

- In 2016, 5,497 infants were born at a low birth weight. While low birth weight in S.C. has improved since 2007 at a rate comparable to the U.S., the state ranks among the bottom five states for infants born at a low birth weight.
- In 2016, 6,391 infants were born before 37 weeks of gestation. While higher than the U.S., the preterm birth rate in S.C. has improved in the past decade.
- In 2015, the most recent year for which U.S. values are available, the percent of preterm births was 10.4%, a value better than the percent of preterm births among women in the state (11.0%).
- The percent of preterm births in S.C. during the past decade has improved, though the decrease has been modest, from a high of 12.2% in 2007 to a current value of 11.1% in 2016.

Increasing Emergency Department Utilization

- In 2015, there were over 213,000 preventable emergency department visits in the state. Avoidable emergency department visits increased from a rate of 3,732 per 100,000 in 2006 to 4,362 per 100,000 in 2015, the most recent year for which data are available.
- In 2015, the most recent year for which data are available, the rate of preventable emergency room visits was nearly twice as high for Black persons as White persons (6,887 per 100,000 for Blacks and 6,887 for Other Races *versus* 3,267 per 100,000 for Whites).

Racial and Economic Disparities

- In 2015, the most recent year for which data are available, the percent of uninsured among Hispanic persons 18-64 years old was more than three times higher than that among non-Hispanic White persons (43.0% *versus* 13.3%), a value that was statistically significant. The percent of uninsured among non-Hispanic Black persons 18-64 years old (17.9%) was also worse than that among non-Hispanic White persons.
- In 2015, there were 1,192 children less than 18 years old hospitalized for asthma. The asthma hospitalization rate among children less than 18 years old was four times higher for children of a minority race (209 per 100,000), compared to White children (52 per 100,000), a value that was statistically significant.

Highlights from State Health Assessment

- Concentrated disadvantage is a composite measure of social and economic factors and is comprised of five U.S. Census variables that includes poverty, public assistance, female-headed households, unemployment, and number of children. In the state, areas of high disadvantage were largely clustered in the eastern and southeastern regions. In some counties, more than 50% of the census tracts were determined to have a high level of concentrated disadvantage.
- Whereas preterm births among non-Hispanic White women in S.C. was 9.6%, the percent among non-Hispanic Black mothers was 1.5 times higher (14.8%).
- In 2016, approximately one-third of adults in S.C. reported having a disability. Historically, the prevalence of individuals with disability in S.C. has been consistently higher than the national average. As has been the case in previous years, the prevalence of adults in the state with disability was worse for adults without a high school diploma or higher degree, adults who were unemployed, and adults with an annual household income less than \$25,000 annually. Adults with disability reported a higher prevalence of chronic conditions, including arthritis, cardiovascular disease, and cancer. In addition, the prevalence of adults with disability who had healthcare coverage was worse than that of adults without disability.

Childhood Trauma

- Adverse childhood experiences (ACEs) are those occurring before age 18, and can have a lasting impact well into adulthood. In 2016, an estimated 2.3 million adults in S.C. reported at least one ACE during childhood. Approximately 51% (about 2 million), reported at least one instance of household dysfunction; approximately 39% reported at least one instance of emotional/physical abuse; and approximately 13% (about 450,000) reported at least one instance of sexual abuse. Overall, and compared to their counterparts, the prevalence of at least one ACE in childhood was greater among younger adults, adults with a lower income, and females.
- The rate of nonfatal child maltreatment in 2015 was 13.3 per 1,000, a value higher than the U.S. rate of 9.1 per 1,000 and the Healthy People 2020 goal of 8.5 per 1,000. Statistical significance testing could not be conducted.

Aging Population

- The age-adjusted death rate due to Alzheimer's disease in S.C. increased from a low of 30.9 per 100,000 in 2007 (1,395 deaths), to a high of 45.3 per 100,000 in 2016 (2,481 deaths). The death rate in the U.S. also increased, but the degree of increase was less than that in the state (23.8 per 100,000 in 2007 to 30.3 per 100,000 in 2016). Across all these years, the death rate in S.C. was worse than that in the U.S.
- The death rate due to falls among S.C. adults at least 65 years old increased from 30.7 per 100,000 in 2007 (176 deaths) to 48.3 per 100,000 in 2016 (401 deaths). A similar but less dramatic increase in falls was observed among adults in the U.S. at least 65 years old (48.5 per 100,000 in 2007 to 60.2 per 100,000 in 2016). Across the decade, the U.S. rate was greater than the S.C. rate.