

STATE OF SOUTH CAROLINA



2012 ANNUAL REPORT JOINT CITIZENS AND LEGISLATIVE COMMITTEE ON CHILDREN

EXECUTIVE SUMMARY
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STATE OF SOUTH CAROLINA
JOINT CITIZENS AND LEGISLATIVE COMMITTEE ON CHILDREN

February 1, 2012

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As Chair and Vice-Chair of the Joint Citizens and Legislative Committee on Children, we are pleased to present the 2012 Annual Report of the Committee. The Committee offers a forum for citizens, legislators, and agency directors to identify and study the needs of children and to promote sound strategies for the development of children's policy.

In this Annual Report, the Committee offers a logic model to promote healthy child development, indicators of how well children are faring, and resource mapping to show our expenditures to serve children. This Annual Report provides sound data and informed guidance to identify the issues facing children and to address those issues.

The 2012 legislative session offers challenges to balance the needs of children with the realities of diminished resources. Clearly, it is desirable and more cost-effective to prevent or to resolve a problem early on, than to wait until the only option is a more costly treatment. Accordingly, the Committee has adopted four initiatives:

- **Safe sleeping practices for infants** to prevent infant fatalities
- **Immunizations** to prevent illness and avoid long term health care costs
- **"Trauma-informed practices"** within state child-serving agencies to mitigate trauma that will adversely affect healthy child development
- **Obesity** to promote healthy lifestyles and prevent chronic illness

Following is the Executive Summary of the 2012 Annual Report. You are invited to review the 2012 Annual Report in its entirety at the Committee's website at www.sccommitteeonchildren.org.

Handwritten signature of Michael L. Fair.

Michael L. Fair
Chair

Handwritten signature of Joan B. Brady.

Joan B. Brady
Vice-Chair

Joint Citizens and Legislative Committee on Children Executive Summary

This 2012 Annual Report of the Committee on Children is intended to create awareness of the status of children in South Carolina, to stimulate informed discussion of children's issues, and to encourage sound public policy that promotes child well-being. To guide policy, the Committee on Children adopted three conceptual frameworks which identify the causal factors that influence child development, indicate how well children are faring, and report the allocation of state resources to provide public services for children. These three frameworks are:

- A **logic model** presenting a visual overview of child development outcomes, determinants, and services;
- **Indicators of "child well-being"** showing how children are faring; and,
- **Resource mapping** showing how state funds are allocated for services.

These three frameworks provide essential perspectives for devising prudent strategies to achieve substantial improvements in child well-being:

- Sound public policy that promotes healthy child well-being must address the child holistically, and it must consider the many diverse factors which influence how well a child develops emotionally and physically.
- The impacts of childhood trauma are pervasive. Undiagnosed child trauma affects physical health, academic achievement, teen pregnancy, and juvenile crime¹ and can have a profoundly negative effect on adulthood. Ultimately, these factors can contribute to long-term dependence on costly state services. Focused consideration on the identification and treatment of childhood trauma in state systems for education, child protection, health, courts, and juvenile justice should promote more positive outcomes and help direct resources toward early treatment rather than later, more intensive interventions.
- The state often delays action when a child's problem is in an initial stage. Thus, by failing to intervene early in the problem, the state ends up funding a more intensive and expensive intervention. Proven preventive interventions are generally less costly and more effective.
- State expenditures for the early childhood age group are only slightly higher than expenditures for middle childhood and adolescence age groups, despite research touting the benefits of early intervention.
- The indicators of child well-being and resource mapping in this report inform us that South Carolina expends some funds to mitigate the poor status quo of children which could be more wisely spent on preventive care and early intervention services.

¹ South Carolina Joint Citizens and Legislative Committee on Children, Summary of Testimony: 2011 Public Hearings. <http://www.sccommitteeonchildren.org/doc/PublicHearingFinalReport.pdf>. (last visited, February 22, 2012).

Joint Citizens and Legislative Committee on Children Recommendations

To impact identified needs and to encourage an emphasis to more effective, less costly preventive services, the Committee on Children recommends an initial focus of state efforts and resources to respond to specific topical areas. Based upon the three frameworks presented in this report, the Committee recommends immediate action in the following four focus areas.

Safe Sleeping for Infants: When an adult shares a bed with an infant, there is a risk of suffocation if during sleep, the adult rolls over on top of the baby. Good work is currently being done to educate and create public awareness of the risk of unsafe sleeping practices. These efforts have the potential to prevent infant deaths, and this work needs to be expanded. **The Committee on Children recommends that a comprehensive state and community-based initiative be undertaken to coordinate and mobilize the resources of state and private resources to prevent infants from dying from unsafe sleeping practices.**

Immunization: Children on Medicaid and those with comprehensive health insurance coverage receive immunizations; however, many children living just above poverty and in middle income families do not have adequate insurance that pays for recommended immunizations. Such non-immunized children are exposed to costly long term illnesses and place other children and adults at risk of contracting their illnesses. **The Committee on Children recommends that a comprehensive initiative be undertaken to secure the immunization of all children and prevent unnecessary childhood illness.**

“Trauma Informed” Practices: When a child experiences trauma in childhood which is not resolved, the long range effects of the trauma will hinder the child’s healthy development. The effects of childhood trauma caused by abuse, neglect, or family violence are often misdiagnosed as acting out or behavior issues. As a result of experiencing trauma, younger children may be irritable, aggressive, or distracted,² and older children may engage in self-destructive or reckless behaviors.³ When child trauma is properly diagnosed, a child can receive appropriate treatment for the underlying issue and avoid spiraling downward into an aftermath of preventable problems. Adoption of “trauma informed” practices by schools, child protection and treatment systems, courts, and juvenile justice will lead to more positive outcomes and save the state the cost of unnecessary and more intensive interventions. **The Committee on Children recommends that a comprehensive initiative be undertaken to promote “trauma informed” practices for state services which properly diagnose and treat childhood trauma as positive steps toward healthy child development.**

Childhood Obesity: Childhood obesity is reaching epidemic levels exposing many children to numerous and costly life-long effects. Improved nutrition and increased exercise among children will decrease the numbers of obese and overweight youth. Failure to address this problem will result in unnecessary and significant long term costs to the state for public support and health care as these children become adults. **The Committee on Children recommends that a comprehensive state and community-based initiative be undertaken to improve nutrition and to involve children in physical activities which promote healthy lifestyles.**

To access a copy of the full report and supplemental data workbook, please visit www.sccommitteeonchildren.org.

² National Child Traumatic Stress Network, The Effects of Trauma on Schools and Learning, <http://www.nctsn.org/resources/audiences/school-personnel/effects-of-trauma#q2> (last visited January 19, 2012).

³ Id.