



Darlington County

2011 Indicators of Child Well-Being

Safety		County Number	State Number	County %	State %
Total Child Deaths		10	665	.06%	.06%
Non-Fatal Injuries Reported by Hospitals		1,315	105,496	8.1%	9.7%
Children with Founded Maltreatments		228	10,474	1.4%	1.0%
Selected Founded Maltreatment Types	Physical Abuse	40	3,368	0.2%	0.3%
	Neglect	182	6,593	1.1%	0.6%
	Sexual Abuse	*	441	*	.04%
No Maltreatment Recurrence at Six Months		117	5,473	99.2%	96.7%
Children in Foster Care		97	4,334	0.6%	0.4%
Health					
Babies with Low Birth Weight		91	4,590	11.5%	8.0%
Babies with Very Low Birth Weight		17	1,064	2.2%	1.9%
Children on Medicaid Dentist Visits		4,893	282,043	41.7%	49.8%
Children Receiving Mental Health Treatment	Community-Based	364	30,614	2.2%	2.8%
	Inpatient and Residential-Based	6	506	.04%	.05%
Children on Medicaid with Access to Primary Care Practitioners		Not Available		90.4%	87.7%
Education					
Children Enrolled in Public Pre-K		352	25,939	19.5%	21.0%
Children with Identified Special Education Needs		1,636	99,611	9.2%	8.4%
PASS Scores: % of Students Scoring <i>Not Met</i>	3 rd Grade on English and Language Arts	Not Available		24.1%	20.0%
	3 rd Grade on Math	Not Available		30.2%	29.6%
	8 th Grade on English and Language Arts	Not Available		37.3%	32.2%
	8 th Grade on Math	Not Available		33.0%	30.5%
High School Graduation Rate		Not Available		88.4%	73.6%
Responsibility					
Juveniles Charged with an Offense		194	13,680	2.5%	2.8%
Types of Juvenile Offenses	Violent Offenses	30	1,545	11.7%	8.5%
	Status Offenses	17	1,477	6.6%	8.2%
	Total Offenses	256	18,114	3.3%	3.7%
Births to Teens		33	1,761	0.9%	0.7%
Attendance Rate in Public Schools		Not Available		95.2%	95.9%
Support					
Children Leaving Foster Care to Live with a Family		93	3,356	0.6%	0.3%
Children Living in Poverty		5,646	292,835	35.1%	27.5%
Children Receiving Free and Reduced Meals		7,405	378,388	71.3%	54.7%
Children Receiving TANF		1,785	65,276	10.9%	6.0%
Children Participating in WIC		1,955	103,602	12.0%	9.5%
Children on Medicaid		11,733	566,705	71.9%	51.9%

* Values less than or equal to 5 are omitted

**2011 is the most recent year for which data on all indicators is available

Joint Citizens and Legislative Committee on Children



For more information, visit
www.sccommitteeonchildren.org

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For more information, visit
<http://childlaw.sc.edu>

Descriptions and Sources of Indicators

Safety Indicators

- **Total Child Deaths** are the number of children under the age of eighteen who died due to illness, accident, or maltreatment. Data Source: *S.C. Department of Health and Environmental Control*
- **Non-fatal Injuries Reported by Hospitals** to children include accidental and intentional injuries that do not result in death but do require a hospital or emergency room visit. Injuries vary in severity and cause. Data Source: *S.C. Office of Research and Statistics*
- **Children with Founded Maltreatments:** “Maltreatment” includes abuse, neglect, or other categories of harm to children by parents or persons acting as parents. When a report of child abuse or neglect is made to the Department of Social Services, DSS investigates. “Founded” means that the investigation indicated that abuse or neglect occurred. Data Source: *U.S. Department of Health and Human Services, Administration for Children & Families*
- **Selected Founded Maltreatment Types:** Founded maltreatment that children experience has been broken into three broad categories: physical abuse, neglect, and sexual abuse. These numbers are unduplicated. Other types of abuse are not included in this indicator. Data Source: *S.C. Department of Social Services*
- **No Maltreatment Recurrence at Six Months:** This indicator examines the recurrence of maltreatment within six months of a child being the subject of a substantiated report of abuse or neglect. Data Source: *U.S. Department of Health and Human Services, Administration for Children & Families*
- **Children in Foster Care** represents the number of children in the custodial care of the Department of Social Services who have been removed from the custody of parents or guardians and placed outside the home. This number is measured on the last day of the fiscal year of children who have entered care. These children may be in the care of foster families, group homes, or other placements. Data Source: *U.S. Department of Health and Human Services, Administration for Children & Families*

Health Indicators

- **Babies with Low Birth Weight** weigh between 1,500 and 2,499 grams (3 lbs., 4 oz. and 5 lbs., 8 oz.) at birth. Data Source: *S.C. Department of Health and Environmental Control*.
- **Babies with Very Low Birth Weight** weigh less than 1,500 grams (3 lbs., 4 oz.) at birth. Data Source: *S.C. Department of Health and Environmental Control*.
- **Children on Medicaid Dentist Visits** reflect the number of children on Medicaid ages 0-17 who have visited a dentist as recorded by Medicaid claims data. Data Source: *The Institute for Families in Society, Policy and Research Unit on Medicaid and Medicare, University of South Carolina*.
- **Children Receiving Community-based and Inpatient and Residential-based Mental Health Treatment** illustrate the number of children receiving community and inpatient and residential-based mental health treatment through the Department of Mental Health. Because children may receive services in multiple locations throughout a fiscal year, these delivery locations are not mutually exclusive. Data Source: *S.C. Department of Mental Health*.
- **Children on Medicaid with Access to Primary Care Practitioners by Rate:** Access to primary care can reduce the number of ambulatory health services, which makes treatment more timely and less costly. This indicator is based on the state health plan’s eligible population for children. Because the number of children eligible for Medicaid can fluctuate, a rate provides more useful information than a total number of children. Data Source: *The Institute for Families in Society, Policy and Research Unit on Medicaid and Medicare, University of South Carolina*.

Education Indicators

- **Children Enrolled in Public Pre-K** refer to children participating in public three and four-year-old pre-kindergarten. This group includes children attending private pre-kindergarten programs only if paid for using funds of Child Development Education Pilot Program (CDEPP). Data Source: *S.C. Department of Education and S.C. First Steps*
- **Children with Identified Special Education Needs:** Children with disabilities may be eligible for special education services and may have an individualized education program (IEP) to receive a free appropriate public education. Special education eligibility categories include autism, deaf and hard of hearing, deaf and blind, developmental delays, emotional disability, intellectual disabilities, multiple disabilities, orthopedic impairments, other health impairments, specific learning disabilities, speech and language impairment, traumatic brain injury, and visual impairments. Data Source: *S.C. Department of Education*
- **PASS Scores:** The Palmetto Assessment of State Standards (PASS) is administered to students to assess knowledge and mastery of state standards. Results are broken into three categories: *met*, *not met* and *exemplary*. This indicator reflects percent of third and eighth students scoring *Not Met* on English and Language Arts and Math. Data Source: *S.C. Department of Education*
- **High School Graduation Rate** reflects the percentage of eligible students in public schools of South Carolina who graduated on-time with their age group. Data Source: *S.C. Department of Education*

Responsibility Indicators

- **Juveniles Charged with an Offense** reflects juveniles charged with crimes and status offenses. Status offenses are those offenses which, if committed by an adult, would not be a crime. Status offenses include offenses such as truancy, underage drinking, and tobacco use. The most frequently charged status offenses in South Carolina are truancy, incorrigibility, and running away. Data Source: *S.C. Department of Juvenile Justice*
- **Types of Juvenile Offenses** include the types of delinquency charges in the family court that result in criminal offenses or status offenses. An individual juvenile may have multiple charges over the course of an annual reporting period. Data Source: *S.C. Department of Juvenile Justice*
- **Births to Teens** reflect the number of live births to teens under the age of 18. Data Source: *S.C. Department of Health and Environmental Control*
- **Attendance Rate in Public Schools** reflects the average percent attendance for children enrolled in public school settings. Data Source: *S.C. Department of Education*

Support Indicators

- **Children Leaving Foster Care to Live with a Family:** When a child leaves foster care to live with a family after an abuse or neglect case has been resolved, the case closure is a positive permanency outcome. Children may leave foster care for four positive reasons: returned to original caregiver, adoption, guardianship, or living with a relative. Data Source: *S.C. Department of Social Services*
- **Children Living in Poverty** is a Census Bureau estimate of the number of persons whose household income falls below the poverty threshold. For example in 2011, the poverty threshold for a family of two parents and two children was \$22,811. Data Source: *U.S. Census Bureau*
- **Children Receiving Free and Reduced Meals** includes the number of children receiving low-cost or free lunch and breakfast during the school day. Eligibility is based on household size and total income. Data Source: *S.C. Department of Education*
- **Children Participating in WIC** reflects the number of children participating in the Women, Infants and Children (WIC) program through Department of Health and Environmental Control county offices. WIC provides food, nutrition education, and services to low-income pregnant, postpartum, and breastfeeding women. Infants and children up to age 5 who are at nutrition risk are also served. Data Source: *S.C. Department of Health and Environmental Control*
- **Children on Medicaid** include an unduplicated number of child members of Medicaid as reported by claims data. Data Source: *The Institute for Families in Society, Policy and Research Unit on Medicaid and Medicare, University of South Carolina*