# **South Carolina**

## Families Served Through Evidence-Based Home Visiting in 2023

Models implemented in South Carolina included Attachment and Biobehavioral Catch-Up, Early Head Start Home-Based Option, Family Connects, Family Spirit, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Maternal Infant Health Outreach Worker Program, Nurse-Family Partnership, and Parents as Teachers. Statewide, 70 local agencies operated at least one of these models.



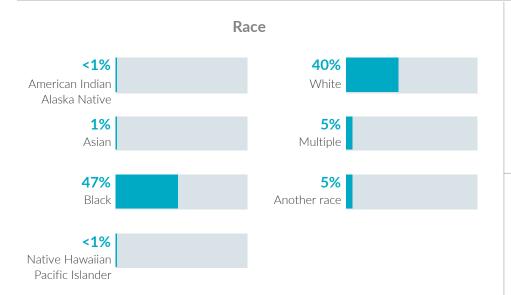
home visits provided including 14,961 virtual visits



5,389 families served

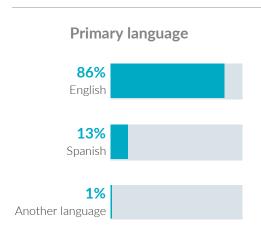


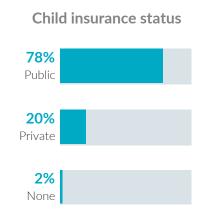
5,503 children served

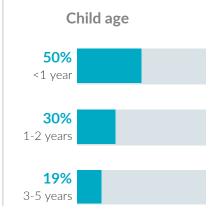












#### NHVRC STATE PROFILES

# South Carolina

#### Potential Beneficiaries in 2023

In South Carolina, there were 265,400 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 325,800 children.

# 325,800 children

could benefit from home visiting

265,400 families could benefit from home visiting

## Of the 325,800 children who could benefit-

Infants	Toddlers	Preschoolers
<1 year	1-2 years	3-5 years
51,200	112,800	161,900
16%	35%	50%

Many home visiting services are geared toward particular subpopulations. The NHVRC estimated the percentage of families who could benefit in South Carolina who met the following priority criteria:



### Of the 265,400 families who could benefit—



NHVRC State Profiles present data provided by evidence-based models, which include both MIECHV and non-MIECHV data. This State Profile includes participant data from the following evidence-based models: ABC, Family Connects, HFA, HIPPY, MIHOW, NFP, and PAT. • Missing and unknown data were not included in calculations. • Percentages may not add to 100 due to rounding. • Public insurance includes Medicaid, CHIP, and TRICARE. • Low income is defined as family income below the federal poverty threshold. • Single mothers include single, never married mothers or pregnant women. • ABC data for child insurance status were not included. Data are reported for the ABC-Infant program. • HFA data for private insurance include other forms of health insurance. • PAT data for child insurance status and primary language were not included.

The NHVRC is a partnership of James Bell Associates and the Urban Institute. Support is provided by the Heising-Simons Foundation. The views expressed here do not necessarily reflect the views of the foundation. For a detailed methodology, see the 2024 Home Visiting Yearbook.

