



2025-2029

ACTION PLAN

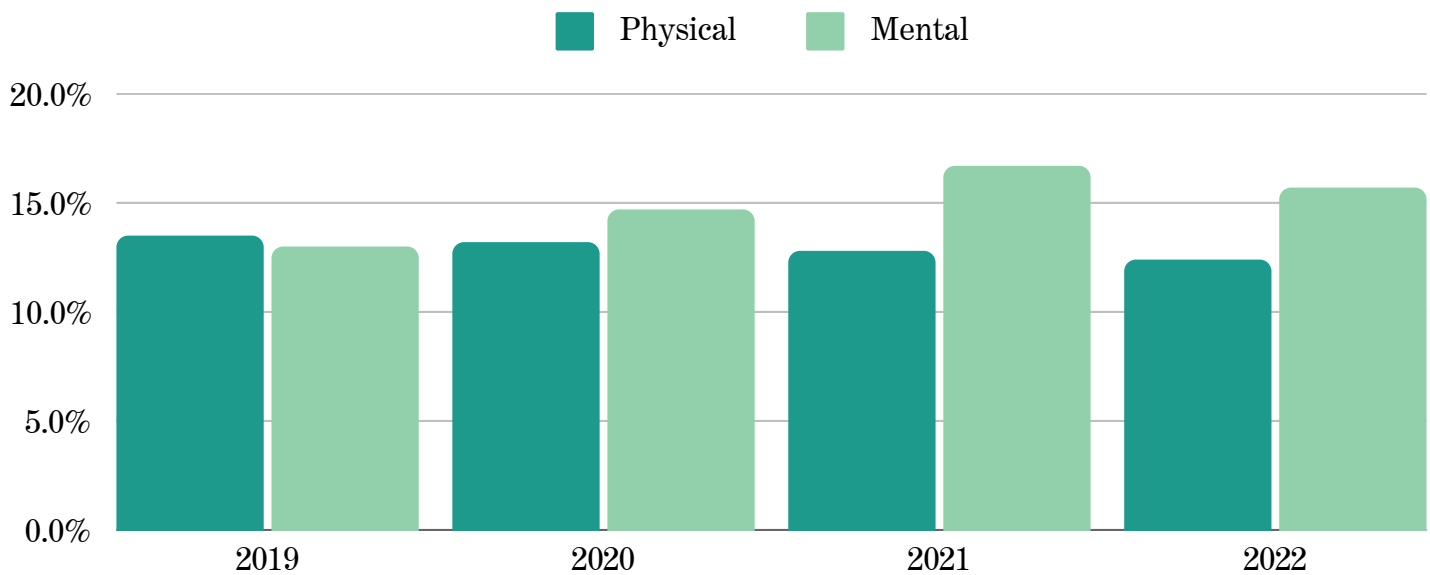
JANUARY 2025



EXPLORING OUR WHY

Our vision is a South Carolina where quality of life is a priority, and everyone has an opportunity to thrive. Driven by our purpose to unify and mobilize organizations working on healthy eating and active living efforts in South Carolina, we approach our priorities with a full understanding of how broadly the lack of opportunities to access nutritious foods and safe spaces for physical activity can influence our quality of life across our state. It is important to recognize how important healthy eating and active living are not just to prevent specific diseases but to promote overall health and well-being. In 2022, 12% of adults in South Carolina reported their physical health being “not good” for fourteen or more days in the last month, with 16% reporting the same about their mental health.

PERCENT OF ADULTS REPORTING POOR HEALTH 14+ DAYS IN THE LAST MONTH



Source: CDC, Behavioral Risk Factor Surveillance System

It is still true, however, that lack of access to nutritious foods and spaces for physical activity can significantly increase an individual’s risk for numerous chronic conditions and poor health outcomes. In 2022, 35% of adults in South Carolina had obesity, making us one of 22 states with a prevalence over 34%. Black residents were at an increased risk, with 44% having obesity. The same year, 12.9% of adults in South Carolina had diabetes, although prevalence was higher among Black residents (19.1%) and residents with a household income less than \$15,000 (19.7%).

THESE ISSUES HAVE SIGNIFICANT ECONOMIC IMPACTS...

South Carolina’s total medical care costs related to adult obesity in 2022 were

\$7 BILLION

AND TREMENDOUS IMPACTS ON OUR COMMUNITIES...

From 2019 - 2021 South Carolina lost

10,318 YEARS

of life due to premature deaths

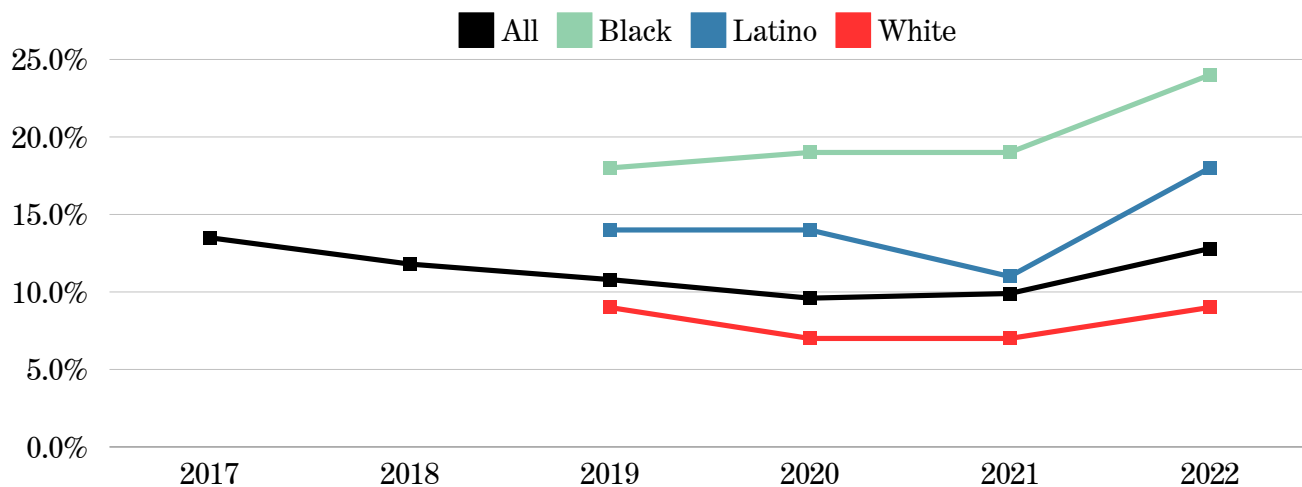


RESULTS & INDICATORS

RESULT STATEMENT 1:

ALL PEOPLE IN SOUTH CAROLINA HAVE THE OPPORTUNITY TO CONSUME NUTRITIOUS AND AFFORDABLE FOODS.

INDICATOR 1: PERCENT OF RESIDENTS EXPERIENCING FOOD INSECURITY

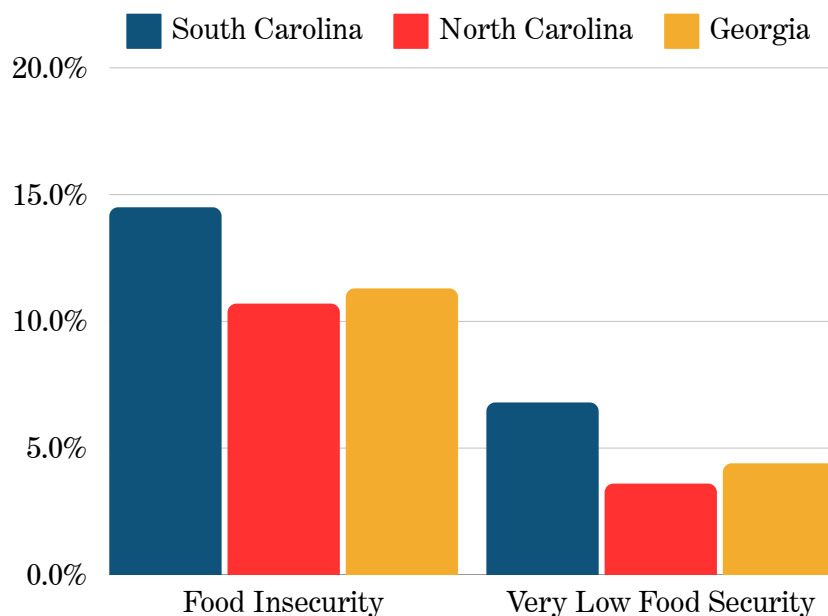


Source: Feeding America, *Map the Meal Gap*

While food insecurity has broad impacts statewide, specific populations are more impacted than others. Black and Latino residents are more likely to experience food insecurity than White residents. Rural counties are more likely to have higher rates of food insecurity than urban counties across the state. Children and older adults are also more likely to experience food insecurity. In 2022, the overall food insecurity rate was 12.8%, with 17.7% of children and 14.7% of older adults experiencing food insecurity the same year (Feeding America, 2024).

A significant gap in our understanding of this indicator is that it does not emphasize the nutritional quality of accessible food. For example, someone may have access to food, but that food may not be nutritious. A growing movement is calling for better measurement of nutrition security - routine, consistent access to nutritious foods - that would help portray a clearer picture of access to healthy foods in the future.

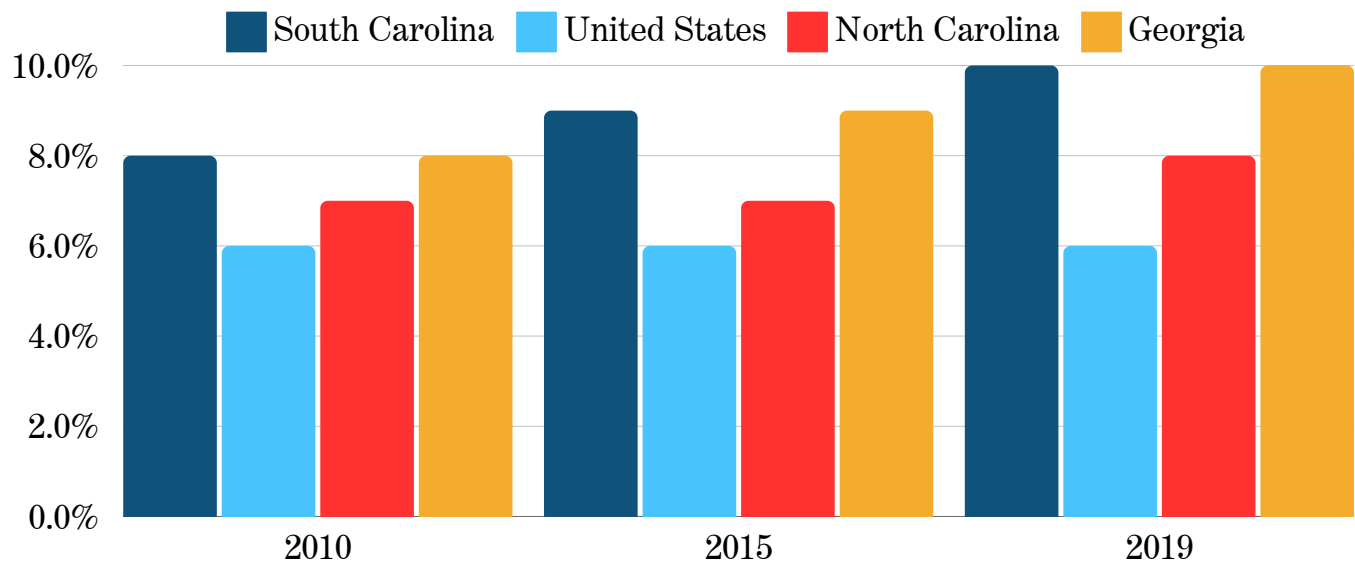
AVERAGE PERCENT OF HOUSEHOLDS EXPERIENCING FOOD INSECURITY, 2020-2022



Source: USDA ERS, *Household Food Insecurity in the US*

SOUTH CAROLINA RANKS 5TH IN OVERALL HOUSEHOLD FOOD INSECURITY AND 1ST IN VERY LOW FOOD SECURITY.

INDICATOR 2: LIMITED ACCESS TO HEALTHY FOODS: PERCENT OF LOW-INCOME RESIDENTS LIVING IN LOW-ACCESS CENSUS TRACTS



Source: USDA, *Food Environment Atlas*

This indicator calls attention to a critical intersection. Cost and geography are two of the most common factors that surface in conversation regarding barriers to accessing nutritious food. Approximately 10% of South Carolina residents are low-income and live in census tracts with limited geographic access to a grocery store. While this indicator addresses these common barriers, it does not consider other places where people access food (e.g., food banks, farmers markets, FoodShare hubs).

Geographic access to food, particularly grocery stores, is a growing concern across South Carolina. According to a Sisters of Charity of South Carolina Foundation Poverty Report, 105 grocery stores (12.9%) closed between 2016 and 2020 (Sisters of Charity Foundation of South Carolina, 2020). While these closures impacted rural and urban counties, they disproportionately affected low-income communities, worsening existing issues related to food costs, transportation, and navigating work and family commitments.

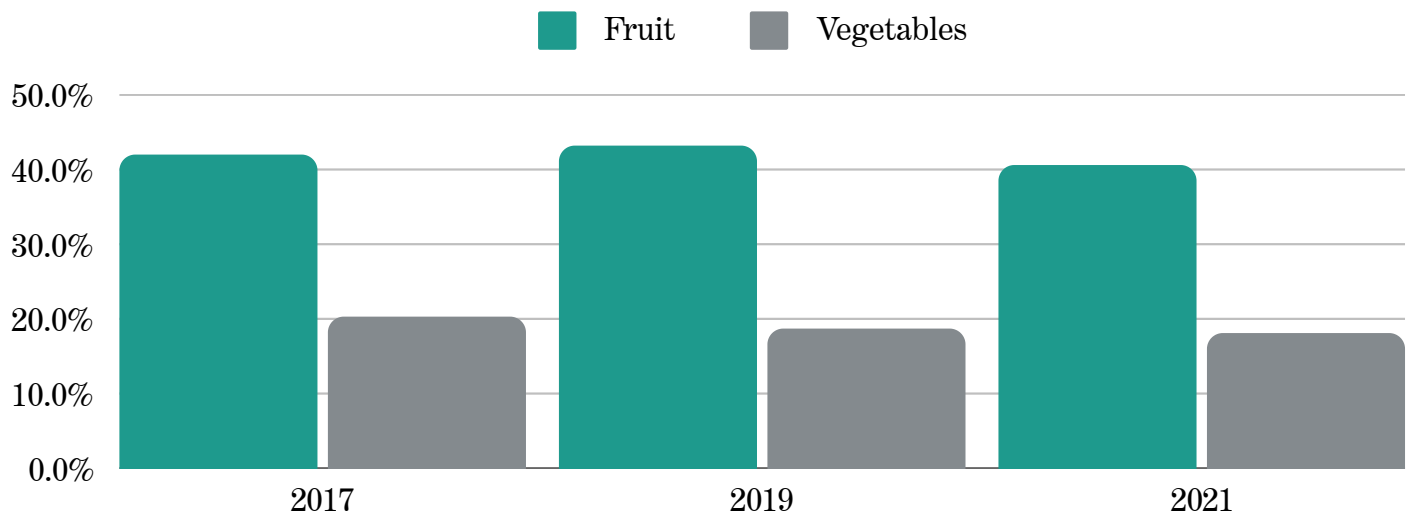
POSITIVE FACTORS

- Opportunities as an agricultural state
- Increase in school meal interest
- Coordinated efforts for seniors
- Strong nutrition education partners
- Local food policy council coordination
- Access points other than a grocery store
- Increase in Food is Medicine partnerships

NEGATIVE FACTORS

- Stigma around nutrition support programs
- Program eligibility and enrollment barriers
- Lack of transportation
- Increasing food costs and cost of living
- Cultural norms shifting away from cooking
- Grocery store closures, gaps in rural and low-income communities

INDICATOR 3: FRUIT AND VEGETABLE CONSUMPTION: PERCENT OF ADULTS EATING LESS THAN ONE SERVING OF FRUIT OR VEGETABLES PER DAY

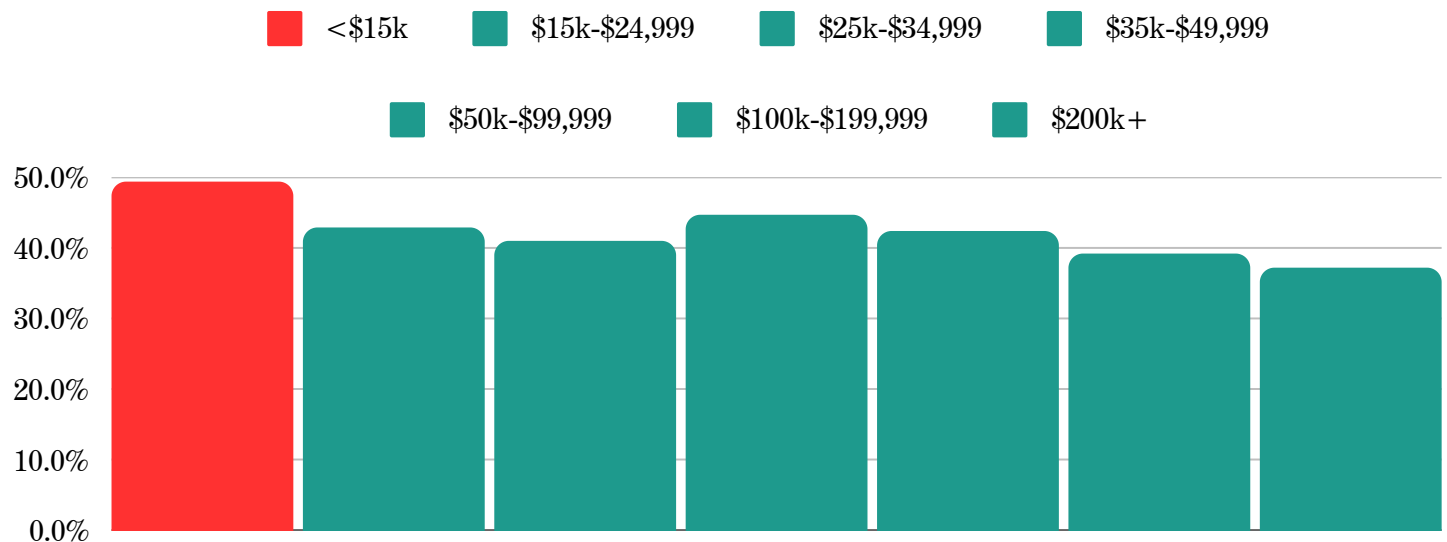


Source: CDC, Behavioral Risk Factor Surveillance System

This indicator explicitly addresses nutritional quality and dietary intake, showing that 40.6% of adults ate less than one serving of fruit per day, and 18.1% of adults ate less than one serving of vegetables per day in 2021. The current Dietary Guidelines for Americans recommend 4-5 servings of fruit and vegetables daily to promote good health and well-being. While this indicator includes individuals with limited access to fruit and vegetables, it also represents other potential barriers and influences related to choice, preferences, stress, time constraints related to work and family, and cultural norm shifts away from cooking.

Further exploration of this data shows a gap based on household income, with the lowest income bracket having the highest percentage (49.4%) of individuals eating less than one serving of fruit per day and the highest income brackets having the lowest percentage (39.2%).

PERCENT OF ADULTS EATING LESS THAN ONE SERVING OF FRUIT PER DAY BY INCOME, 2021



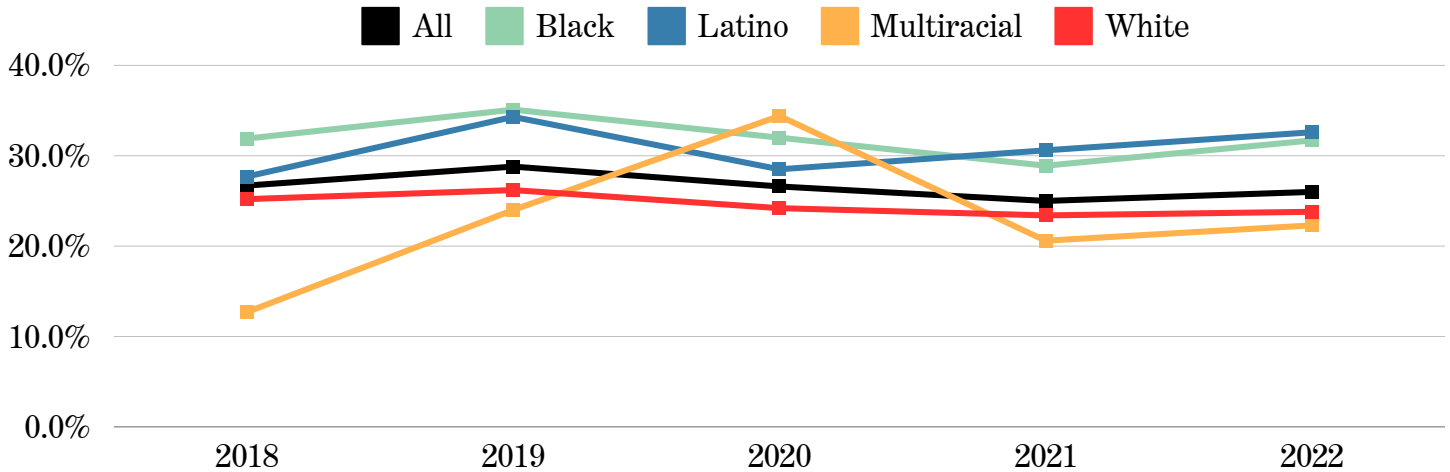
Source: CDC, Behavioral Risk Factor Surveillance System



RESULT STATEMENT 2:

ALL PEOPLE IN SOUTH CAROLINA HAVE THE OPPORTUNITY TO BE PHYSICALLY ACTIVE IN SAFE AND ACCESSIBLE PLACES.

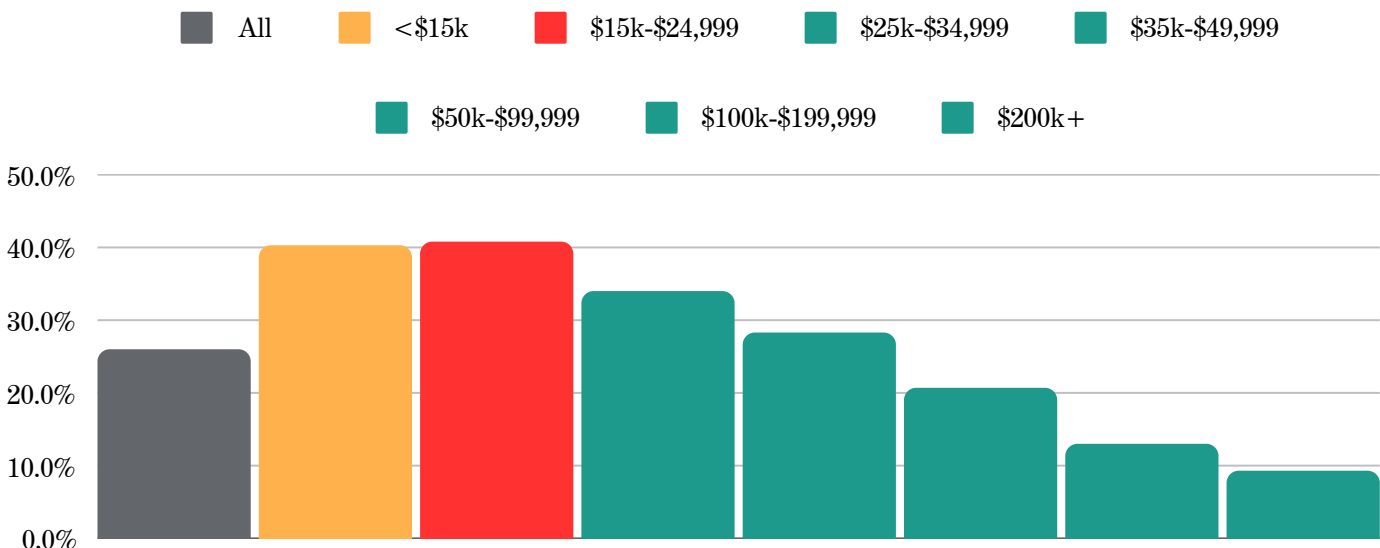
INDICATOR 1: PERCENT OF ADULTS REPORTING NO PHYSICAL ACTIVITY OUTSIDE OF WORK



Source: CDC, Behavioral Risk Factor Surveillance System

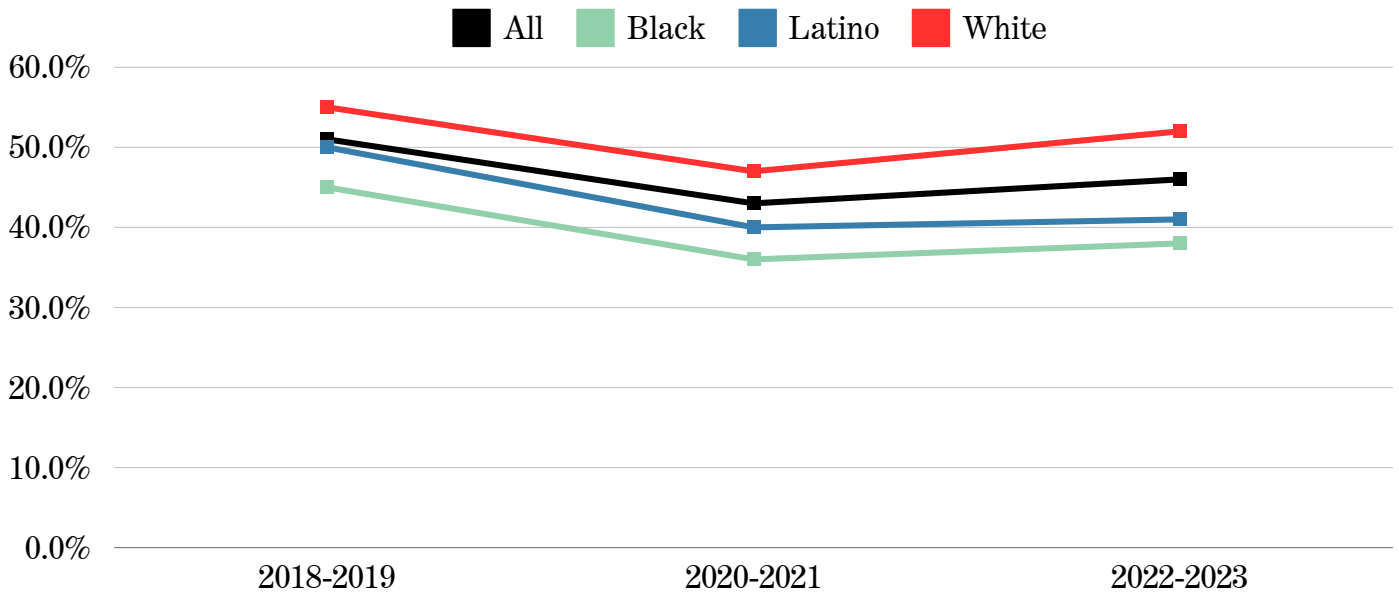
This indicator speaks directly to the heart of this issue: a steady percentage of residents are physically inactive and, therefore, at increased risk for poor health outcomes and a lower quality of life. While this data has remained relatively stable in recent years, persistent disparities remain. While the chart shows an apparent racial disparity, with non-Hispanic Black and Hispanic residents being most likely to report being physically inactive outside of work, even more drastic disparities exist based on education and income. In 2022, 43% of residents without a high school diploma reported no physical activity outside of work compared to 15.1% of college graduates. In that same year, less than 10% of the highest income bracket reported no physical activity compared to over 40% of the lowest two income brackets.

PERCENT OF ADULTS REPORTING NO PHYSICAL ACTIVITY OUTSIDE OF WORK, 2022



Source: CDC, Behavioral Risk Factor Surveillance System

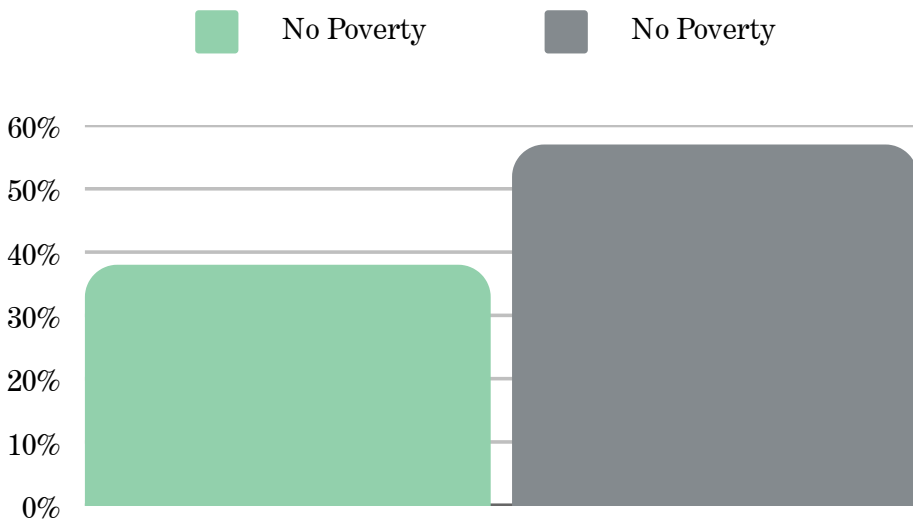
INDICATOR 2: CARDIORESPIRATORY FITNESS IN CHILDREN: PERCENT OF STUDENTS IN THE FITNESSGRAM HEALTHY FITNESS ZONE



Source: SC FitnessGram

SC FitnessGram is a statewide initiative to evaluate and improve fitness among South Carolina public school students. Fitness assessments are done with 5th, 8th, and high school students, and 2nd-grade students participate in height and weight measurements. Data from the 2022-2023 school year shows that 54% of students are not meeting minimum standards for cardiorespiratory health - a key measure of both current health and fitness and lifelong risk for chronic conditions and poor health outcomes. While this is a concerning data point overall, there are also noticeable disparities. The data above shows a consistent trend with non-Hispanic Black and Hispanic students being more likely to have lower cardiorespiratory fitness than non-Hispanic White students, with the disparity increasing over time. Boys (53%) were more likely than girls to have cardiorespiratory fitness levels in the Healthy Fitness Zone (39%). Cardiorespiratory fitness also decreased significantly between the 5th grade (52% Healthy Fitness Zone) and the 8th grade (42% Healthy Fitness Zone). As noted below, the most significant disparity in cardiorespiratory fitness among students was among children experiencing poverty.

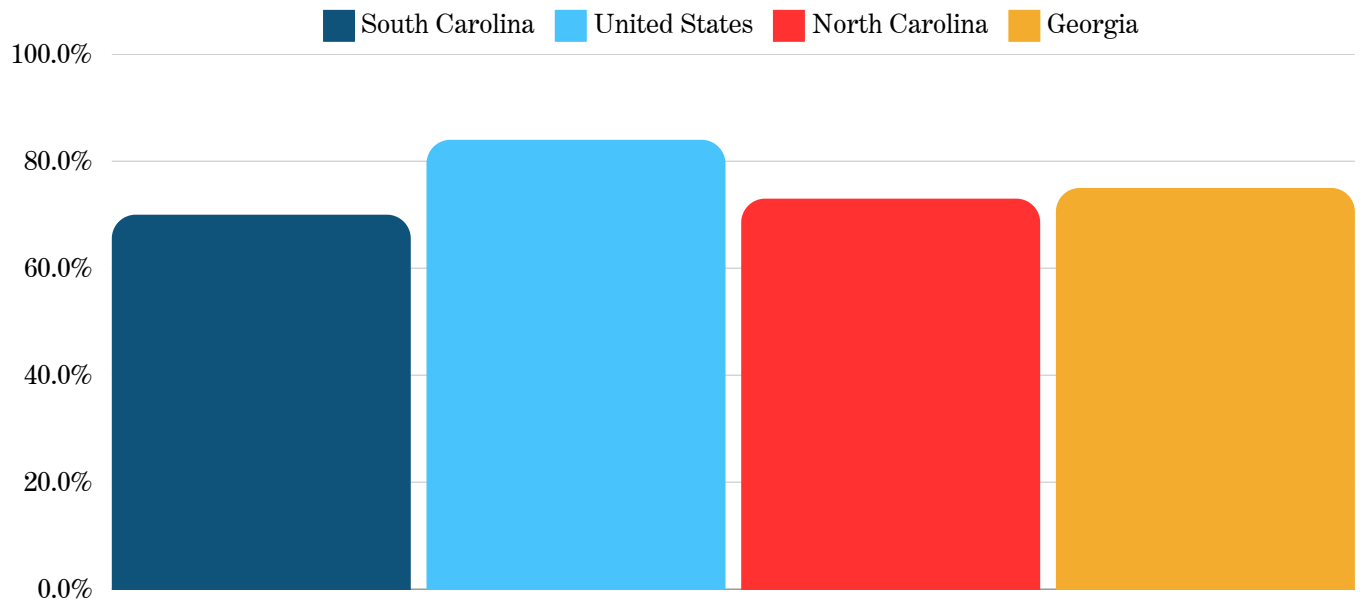
CARDIORESPIRATORY FITNESS IN CHILDREN: PERCENT OF STUDENTS IN THE FITNESSGRAM HEALTHY FITNESS ZONE BY POVERTY STATUS, 2022-2023



61% OF STUDENTS WERE AT A HEALTHY WEIGHT STATUS.

BLACK AND LATINO STUDENTS, AS WELL AS STUDENTS EXPERIENCING POVERTY, WERE LESS LIKELY TO BE AT A HEALTHY WEIGHT.

INDICATOR 3: ACCESS TO OPPORTUNITIES FOR PHYSICAL ACTIVITY: PERCENT OF RESIDENTS LIVING CLOSE TO A PARK OR RECREATION FACILITY, 2022



Source: UW Population Health Institute, County Health Rankings and Roadmaps

This indicator measures the percentage of residents living within “reasonably close” proximity of a park (within 1/2 mile) or recreational facility (within 1 mile urban, 3 miles rural). At 70%, South Carolina residents are slightly less likely than our Southeastern neighbors and significantly less likely than the national percentage to live close to one of these facilities. While this indicator helps call particular attention to the importance of safe, publicly accessible spaces dedicated to physical activity and the differences in opportunities to access these spaces routinely, it does not account for the other critical spaces in promoting physical activity. Community infrastructure like sidewalks and bike lanes are essential for recreation and active transportation opportunities. Many communities in South Carolina have school districts that have implemented open community use policies, allowing school facilities to be used for recreation. Many communities have informal spaces - street corners, church yards, parking lots, fields, neighbors’ yards - that are go-to places to be physically active and engage with your community.

POSITIVE FACTORS

- Beautiful natural resources and outdoor space
- Uptake of school open community use policies
- Fitnessgram buy-in and scale
- Grow Outdoors SC emphasis on outdoor learning environments
- Momentum around trail and park promotion
- Growing interest in better, more engaged planning related to community mobility

NEGATIVE FACTORS

- Suburban sprawl and car-centered planning resulting in lack of consistent, safe sidewalks and bike lanes
- Promotion of parks for weekend visitors instead of everyday accessibility
- Increase in screen time for all ages
- Coordination gaps between communities, public health, planners, and transportation professionals
- Not everyone feels comfortable or welcome engaging outdoors or on a trail

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2025-2029 STRATEGIC PRIORITIES



ESTABLISHING PRIORITIES

Grounded in a collective commitment to our expected results and a shared understanding of our indicators, Healthy Palmetto has selected six 2025 - 2029 Strategic Priorities.

TO ESTABLISH THESE PRIORITIES, WE ASKED:

- 1) What strategies are most likely to directly impact the issues outlined in our indicators?
- 2) Where can we leverage existing momentum and leadership in our state?
- 3) What can we feasibly advance in the next five years?
- 4) What strategies are proven to work and align with existing priorities and plans?
- 5) What strategies offer alignment opportunities between the state and local levels?
- 6) What opportunities would benefit from state-level coordination and collective support?

EMPHASIZING NATIONAL, STATE, AND LOCAL ALIGNMENT

As a state-level collaborative, Healthy Palmetto uniquely identifies opportunities for alignment between statewide and local community efforts and ensures that prioritized strategies are rooted in evidence and informed by national priorities and plans. For this planning process, we explored recommendations from the Trust for America's Health State of Obesity 2023: Better Policies for a Healthier America report and the priority pillars identified in the National Strategy on Hunger, Nutrition, and Health established through the 2022 White House Conference on Hunger, Nutrition, and Health, the first national convening of its kind in over 50 years. Starting with this foundation of vetted, evidence-based strategies allowed us to emphasize impact while allowing space for state and local adaptation. Our strategic priorities were selected based on this collective decision-making process and extensive conversations with each identified lead partner to explore their existing efforts and capacity.



PAST PRIORITIES

Through a rigorous review process, the Healthy Palmetto Leadership Council selected six priority areas on which to focus statewide efforts from 2022-2024. By elevating the collective expertise of these unique partners, Healthy Palmetto is laying the groundwork for a sustainable model that other priorities can be added to over time. This groundwork was a critical starting place for identifying opportunities for our 2025 - 2029 Strategic Priorities.

2022-2024 PRIORITIES

- 1 - IMPROVE EARLY CARE AND EDUCATION ENVIRONMENTS**
- 2 - PRIORITIZE PHYSICAL ACTIVITY IN SCHOOLS**
- 3 - PROMOTE TRAIL CONNECTIVITY**
- 4 - EXPAND AWARENESS OF WIC**
- 5 - INCREASE SENIOR ENROLLMENT IN SNAP**
- 6 - INCREASE ACCESS TO HEALTHY FOOD**

OUR COLLECTIVE IMPACT

Our [2024 Annual Report](#) outlines the demonstrated successes of priority area partners and the collective impact of our shared efforts on health and quality of life across South Carolina.

Our [website](#) also includes detailed one-pagers, video spotlights, and contact information for leaders across each priority area.



STRATEGIC PRIORITY 1: INCREASE THE REACH OF NUTRITION SUPPORTS

We support efforts to increase awareness of, accessibility to, and participation in programs that improve access to nutritious food. Programs like WIC, Senior Nutrition, and Summer Meals seek to improve accessibility to nutritious foods for individuals and families by directly addressing affordability and food costs, emphasizing healthier options, often providing connections to opportunities for nutrition education, and even incentivizing the purchase of fresh, local produce.

LEAD PARTNERS

SC Department of Public Health - Women, Infants, and Children (WIC)
SC Department on Aging - Senior Nutrition
University of South Carolina SNAP-Ed - Summer Meals

ADDITIONAL STRATEGIC PARTNERS

FoodShare South Carolina
Clemson University Cooperative Extension Service
South Carolina Department of Education
South Carolina Department of Social Services
South Carolina Farmers Market Association
South Carolina SNAP-Ed Implementing Agencies

OPPORTUNITIES FOR COORDINATION AND SUPPORT

WIC:

- 1 - Increase WIC participation among eligible pregnant women
- 2 - Increase WIC participation among eligible toddlers and young children (ages 1-5)

Senior Nutrition:

- 1 - Increase awareness and access to senior-focused nutrition resources to reduce hunger, food insecurity, and malnutrition by expanding the GetCareSC database to increase the number of federal, state, and local nutrition resources for programs and services
- 2- Use the Nourish to Flourish SC social media toolkit to raise awareness about the issues of senior malnutrition

Summer Meals:

- 1 - Support collaborative capacity-building efforts to improve the quality and reach of Summer Meals programs statewide
- 2 - Promote the importance of Summer Meals programs through shared messaging



STRATEGIC PRIORITY 2: EXPAND ACCESS TO FOOD IS MEDICINE INTERVENTIONS

Food is Medicine (FiM) programs seek to establish food and nutrition interventions within healthcare settings, emphasizing improved health outcomes and intentionally addressing food and nutrition insecurity. As healthcare organizations across South Carolina become more invested in addressing patients' health-related social needs, like food insecurity, coordinated FiM programs assist in navigating screening and referral processes, build relationships between healthcare systems and community-based food organizations, and provide intentional nutrition support to patients and their families. These approaches center on access to nutritious food as foundational to promoting good health and addressing poor outcomes across many health issues.

LEAD PARTNER

Food is Medicine South Carolina
South Carolina Food is Medicine Technical Assistance Collaborative

ADDITIONAL STRATEGIC PARTNERS

University of South Carolina SNAP-Ed
FoodShare South Carolina
Clemson Rural Health
Clemson University Cooperative Extension Service
South Carolina Hospital Association
South Carolina Office of Rural Health
South Carolina Primary Healthcare Association
South Carolina Free Clinic Association

OPPORTUNITIES FOR COORDINATION AND SUPPORT

- 1 - Increase the implementation, reach, and sustainability of FiM interventions across the state
- 2 - Support collaborative statewide Food is Medicine capacity-building efforts
- 3 - Promote Food is Medicine through professional development for healthcare and food-based organizations



STRATEGIC PRIORITY 3: PROMOTE COMMUNITY MOBILITY AND OPPORTUNITIES FOR ACTIVE TRANSPORTATION

Community mobility refers to the ability to move about a community or neighborhood independently by any mode of transportation. Promoting community mobility with an emphasis on active transportation like walking and biking and through a lens of inclusion and accessibility can promote good health, strengthen economic development, foster social connectivity, and improve access to everyday destinations. Many communities across South Carolina face persistent gaps in opportunities for community mobility, especially related to safe infrastructure for walking and biking. Many residents also experience significant barriers to consistent transportation. We support coordinated efforts that equip local communities to assess and improve community mobility. This also includes necessary efforts at the state level to build partnerships, strengthen shared understanding, and align resources across multi-sector partners.

LEAD PARTNERS

Wholespire

SC Department of Public Health - Nutrition, Physical Activity, and Obesity Prevention Section

ADDITIONAL STRATEGIC PARTNERS

Able SC

Clemson University Cooperative Extension Service

Palmetto Cycling Coalition

Regional Councils of Government

South Carolina Department of Transportation

OPPORTUNITIES FOR COORDINATION AND SUPPORT

- 1 - Increase the capacity of local communities to assess and promote community mobility and active transportation
- 2 - Align technical assistance and training processes and resources across state partners
- 3 - Improve understanding and coordination among multi-sector state and local partners
- 4 - Create and promote messaging that emphasizes the importance of community mobility and accessibility



STRATEGIC PRIORITY 4: IMPROVE EARLY CARE AND EDUCATION ENVIRONMENTS

We continue to support the efforts of Grow Outdoors South Carolina (GO SC), an initiative to transform early childhood outdoor spaces into diverse, naturalized environments that spark play and learning. Children can spend up to ten hours a day eating two meals and a snack at child care sites, making them one of our best opportunities to positively affect young children’s overall health. We also support efforts promoting nutrition and access to healthy foods within early care and education environments.

LEAD PARTNERS

SC Department of Public Health - Nutrition, Physical Activity, and Obesity Prevention Section
SC Department of Social Services - Division of Early Care and Education

ADDITIONAL STRATEGIC PARTNERS

Grow Outdoors South Carolina Advisory Board
National Wildlife Federation: Early Childhood Outdoors Initiative
North Carolina State University: Natural Learning Initiative

OPPORTUNITIES FOR COORDINATION AND SUPPORT

- 1 - Support increased participation in the Grow Outdoors South Carolina initiative
- 2 - Foster relationships with diverse partners to build awareness and shared buy-in
- 3- Create and promote messaging highlighting the importance of these efforts
- 4 - Explore potential opportunities for coordinated support related to nutrition and healthy eating in early care and education environments



STRATEGIC PRIORITY 5: PRIORITIZE PHYSICAL ACTIVITY IN SCHOOLS

We continue to support the SC FitnessGram initiative and its partners as they improve student health by enhancing physical education and creating more opportunities for physical activity before, during, and after school. Over half of SC students are not meeting minimum standards for heart and lung health, which has significant implications on not only their current well-being but their lifelong risk of serious health conditions as well. SC FitnessGram is a statewide initiative to evaluate and improve fitness among South Carolina public school students. We support efforts to sustain and grow FitnessGram across the state, provide opportunities to coordinate efforts among partners supporting school wellness activities statewide, and promote the development of dedicated school partners across the state.

LEAD PARTNERS

SC Department of Public Health - Nutrition, Physical Activity, and Obesity Prevention Section
SC Fitnessgram Advisory Council

ADDITIONAL STRATEGIC PARTNERS

Alliance for a Healthier Generation
MUSC Boeing Center for Children's Wellness
University of South Carolina Children's Physical Activity Research Group
South Carolina Alliance for Health, Physical Education, Recreation, and Dance
South Carolina Department of Education
South Carolina Governor's Council on Physical Fitness
Wholespire

OPPORTUNITIES FOR COORDINATION AND SUPPORT

- 1 - Maintain and grow statewide participation in SC FitnessGram
- 2 - Leverage data and success stories to inform action through collaborative messaging
- 3 - Increase participation in programs supporting comprehensive school physical activity
- 4 - Collaboratively advance opportunities for professional development for school partners



STRATEGIC PRIORITY 6: INCREASE ACCESS TO OUTDOOR OPPORTUNITIES FOR PHYSICAL ACTIVITY

We continue to support collaborative efforts to advance opportunities for physical activity in outdoor spaces. We promote trail connectivity, recognizing trails as a critical resource for outdoor physical activity across the state. Trails promote economic development, community connectivity, and physical activity - making multi-sector, diverse partnerships critical in advancing trail promotion. We also recognize how critical parks are in creating spaces for community engagement and physical activity within communities. We promote the statewide expansion of Kids in Parks as they create a statewide network of Track Trails, engaging kids and families in activities that get them outdoors, physically active, and connected to nature.

LEAD PARTNERS

South Carolina Recreation and Parks Association
Kids in Parks

ADDITIONAL STRATEGIC PARTNERS

Able SC
Palmetto Conservation Foundation
Palmetto Cycling Coalition
South Carolina Department of Parks, Recreation, and Tourism
SC Department of Public Health - Nutrition, Physical Activity, and Obesity Prevention Section
South Carolina Trails Coalition
Wholespire

OPPORTUNITIES FOR COORDINATION AND SUPPORT

- 1 - Align strategic opportunities for planning and shared learning across state and local partners
- 2 - Promote connectivity and accessibility to trails, parks, and open spaces across the state
- 3 - Promote the value of trails, parks, and open spaces through shared messaging and advocacy
- 4- Support the statewide implementation of Kids in Parks - Track Trails through messaging and partner coordination



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