Fairfield Behavioral Health Services

imagine the difference

Improving the quality of life for all youth, adults, families, and communities impacted by substance use.

This **Fairfield County Data Profile/Needs Assessment** was compiled from various data sources for Fairfield Behavioral Health Services to prepare its FY27 County Strategic Plan

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ALCOHOL

2023 SC County-Level Profiles on Substance Use-Related Indicators Rank 1 - 46 = worst to best by OSUS:

In 2024, the profile data report changed from using rankings to *prevalence of misuse and its public health impact* resulting in a 96.8% increase in *DUI Crashes* from FY23 (31%) to FY24 (61%); and a 138.5% increase in *DUI Arrests* from FY23 (26) to FY24 (62). Fairfield's ranking across the state for DUI Crashes improved from **18th** in 2022 to **22nd** in 2023 while the alcohol-related hospitalizations improved slightly but still at the worst end of the spectrum from **1st** in 2022 to **3rd** in 2023. Although Fairfield improved on the overall Alcohol Domain Rank since 2020, it was still on the worst end of the spectrum from **1st** in 2022 to **5th** in 2023. Further and significant improvement was made on the new *Social Factor* data point for *DUI Arrests* with Fairfield ranking **15th** in the State in 2022 and **41st** in 2023. **See Table 1.**

Table 1 Fairfield County ALCOHOL Ranking

	DUI Crashes	Alcohol-Related Hospitalizations	Overall Alcohol Domain	*Social Factor DUI Arrests*
2020	30th	2nd	10th	--
2021	6th	3rd	1st	--
2022	18th	1st	1st	15th *(new reporting)*
2023	22nd	3rd	5th	41st
Alcohol Domain Rank: ***alcohol-related hospitalizations, DUI Crashes, Binge Drinking*, Heavy Drinking**** ****Missing rank because the county rates were based on small sample sizes and, therefore, are not reliable.***				
In 2024, the profile data report changed from using rankings to *prevalence of misuse and its public health impact* resulting in a **96.8% increase** in *DUI Crashes* from FY23 (31%) to FY24 (61%); and a **138.5% increase** in DUI Arrests from FY23 (26) to FY24 (62).				

2024 County Health Ranking and Roadmaps: The 2024 report shows that *excessive drinking* increased in Fairfield from 13% in 2024 to **17%** in 2025 versus 20% for the State in 2025. Similarly, *Fairfield's alcohol-impaired driving deaths* increased from 37% in 2024 to **41%** in 2025 versus 34% for the State in 2025.

2022 & 2024 Communities that Care (CTC) Survey: Comparing the 2022 and 2024 CTC survey data, we know that alcohol use continues to be reported *highest* substance used among 7th – 12th graders **21%** and **19.5%** respectively. Comparably, there was a slight negative change in the *peer disapproval* measure for alcohol use for 7th – 12th graders from **97.7%** in 2022 to **81.5%** in 2024. **See Table 2 and Chart 2.**

Communities That Care (CTC) Survey - Fairfield County						
	2016 9th – 12th grade	**2018** 9th – 12th grade	**2020** 9th – 12th grade	**2022** 7th -12th grade	**2024** 7th-12th grade	**Desired Outcome**
	FCSD (398)	*FCSD (398)*	*FCSD (421)*	*FCSD, MSTI, & RWA (847)*	*FCSD, MSTI, & RWA (772)*	
ALCOHOL	55.6% (228) 9th – 12th grades reported they never used alcohol	62.1% (231)	70.5% (275)	78.7%	80.5% (392)	👍
	49.5% (203) 9th – 12th grades reported that it was "*very easy or sort of easy*" to obtain alcohol	42.5% (143)	41.3% (155)	36.5%	31.6% (158)	👎
	71% (291) 9th – 12th grades reported binge drinking use as a "*moderate or great risk*"	77.7% (270)	76.1% (294)	79.4%	84.5% (415)	👍
	9th – 12th grades reported wrong or very wrong "parental disapproval" alcohol use	86.3% (297)	88.5% (332)	92.7%	95.2% (483)	👍
	9th – 12th grades reported wrong or very wrong "peer disapproval" alcohol use	72.3% (249)	70.7% (267)	97.7%	81.5% (510)	👍

Table 2 Communities that Care Survey Alcohol

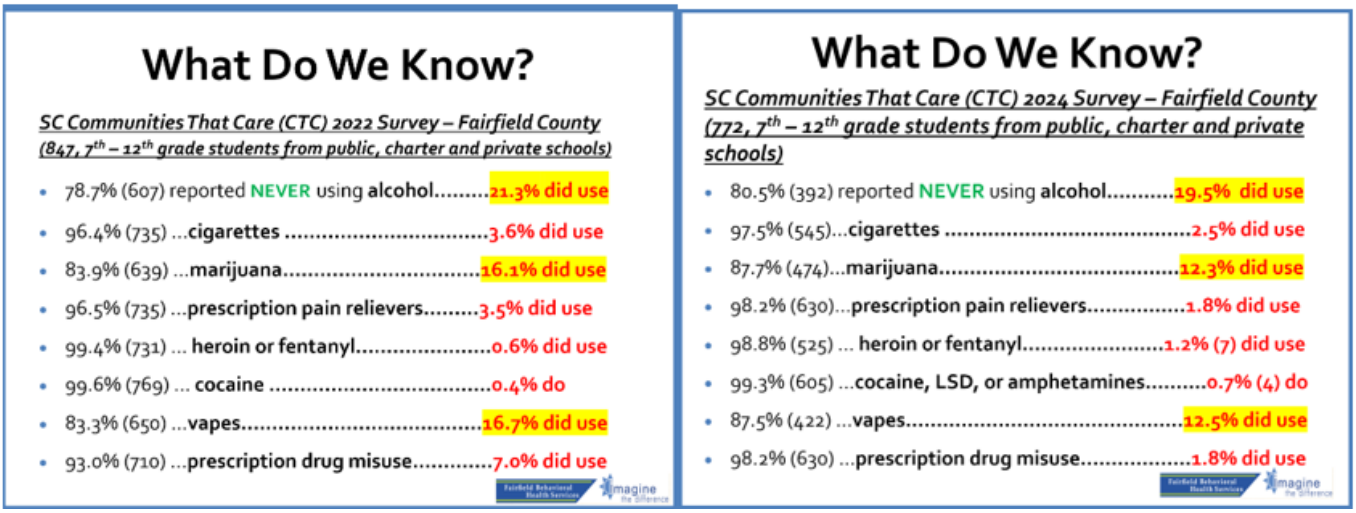

Chart 2 Communities that Care Survey -What Do We Know?

FY25 End of Year Report by OSUS and Pacific Institute for Research and Evaluation (PIRE): *FBHS' Life Skills Training program for 3rd – 9th:* Notably, students reported *significant increases* in the use of alcohol. Male students reported *significant increases* in the use of alcohol. in the use of alcohol.

Needs assessment summary and unmet service needs and critical gaps from your data analysis: Priority populations, *alcohol-related car crashes, individuals with substance use disorders involved in the criminal or juvenile justice systems, and underage alcohol use and the consequences of use* will be addressed in FY27. Especially, considering Fairfield's significant 96.8% increase in DUI Crashes and 138.5% increase in DUI Arrests from FY23 to FY24. *The 2024 rates for Excessive drinking (13%)* and *alcohol-impaired driving deaths (37%)* decreased from 2023 with Fairfield's *alcohol-impaired driving deaths* (37%) being higher than the State (33%) and the national (27%) rates. Prioritizing underage drinking continues to be necessary seeing high rates for CTC Survey measures such as *age of first alcohol use, easy to obtain, perception of risks for binge drinking, parental disapproval of alcohol use, and peer disapproval of alcohol use*, as well as alcohol use being reported to be the #1 on the CTC survey from 2022 to 2024. Therefore, if funding is available, FBHS plans to engage in alcohol specific marketing strategies, starting with data listed under this priority, using messages on the benefits for MAT AUD, ADSAP, Life Skills and Prime For Life, in addition to offering community education and distributing literature that defines alcohol, its effects on the body/brain, diagnosis for AUD, and consequences while ensuring that these efforts are responsive to local and community context. In FY27, FBHS will work to increase admissions for MAT AUD, ADSAP PRI and participation in evidenced-based prevention programs such as Life Skills Training and Alcohol Education Program (AEP) *with incentives and contingency management*. Combining all these efforts will increase FBHS' ability to improve client access, engagement, retention and efficacy, as well as strengthen partnerships

Qualitative Data ***– Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions.*** Fairfield Behavioral Health Services (FBHS) hosted a Staff Administrative Work Session on Wednesday, March 11, 2025, to gain more input in the FY27 Strategic Plan. Staff were given the identified problems by the substances/other factors to answer the question, ***"What do you propose we do about it?"*** Each department was asked to brainstorm possible solutions focusing on their own department and area of expertise only. Each department reported by substances/other factors as we came to consensus on practical solutions that could be implemented in FY27 which are described in the needs assessment summaries as qualitative data.

- The PSS, Director of Treatment Services, and/or the Executive Director will acquire a designated staff contact at the local MUSC freestanding Emergency Room (ER).
- PSS will work to obtain designated day(s) and time(s) to be onsite at the only ER to offer services and direct referrals to FBHS.
- Treatment team will coordinate an additional Alcoholics Anonymous (AA) group in Fairfield to engage clients and others.
- Treatment team will develop a list of youth and adult clients who may be willing to share their recovery story with others.
- One staff from each department will coordinate *hosting or participation in* events like *school open houses, church family days, RX Take Back events, prom etc.* to increase awareness of services for priority populations, participation in ADSAP and MAT for naltrexone.
- Treatment team will work to coordinate at least 1 sober event during Alcohol Awareness Month or National Recovery Month.

- One staff from each department will coordinate *hosting* **2 Town Hall Meetings, 1 Parent & Teacher 101 workshop, and an Open Conversation** event for youth and parents to *be educated about our services, dangers of substance use, trends, emotional behavioral warning signs of addiction, the difference between support and enabling, setting boundaries, etc*.
- The Treatment team will organize at least *one (1), 4-session cycle* of an **Adolescent Peer Support Group** for the summer using Motivational Interviewing.
- Administration team will work with prevention to display and distribute youth friendly tips on alcohol as people enter the lobby.
- Administration team will display and distribute fliers on the **Ignition Interlock Device and ADSAP** to increase awareness and admissions.
- FBHS will look for ways to increase *awareness of the dangers of alcohol use, MAT and recovery services, adolescent/adult testimonials via commercial and radio ads.*
- FBHS will set aside Healthy Outcome Plan (HOP) funds to provide incentives and emergency resources for clients to engage in and strengthen retention of treatment/recovery services.

NICOTINE

2023 SC County-Level Profile on Substance Use-Related Indicators Rank 1 - 46 = worst to best by OSUS:

Fairfield's ranking across the state for *Nicotine-Related Hospitalizations* got significantly worst from **13th** 2022 to **5th** in 2023, increasing by 39.75%. *Although* Fairfield's rank for the *Overall Nicotine Domain* remains at the lower worst end in the State, it saw some noticeable improvements from **#3** in the State in 2021 to **8th** in in the State in 2022. **See Table 3.**

Table 3 Fairfield County NICOTINE Ranking

	County Authority Client Smoking Status	Nicotine-Related Hospitalizations	Nicotine Domain
2020	8th	15th	6th
2021	7th	10th	3rd
2022	--	13th	8th
2023		5th ***(39.75% increase from prior year)***	---
Nicotine Domain Rank: ***County Authority Client Smoking Status, Nicotine-Related Hospitalizations, Current Cigarette Smoker*, and Current Smokeless Tobacco**** ****Missing rank because the county rates were based on small sample sizes and, therefore, are not reliable.***			
In 2024, the profile data report changed from using rankings to *patterns of nicotine consumption and potential health risks.* As a result, there was not enough data to make any comparisons.			

South Carolina County Profiles: County-Level Indicators published by OSUS 1/30/26

According to the County-Level Indicator data for Fairfield, *Current E-Cigarette Use Among Adults* ***increased by 36.9%*** from **6.50%** in 2023 to **8.90%** in 2024.

County Health Ranking and Roadmaps: The 2024 and 2025 reports show the *Adult Smoking* rate remains the same for Fairfield with **22%** and is still higher than the State in 2025 at 16% and Nation at 13%.

2022 & 2024 Communities that Care (CTC) Survey: Fairfield County 7th – 12th graders continued to report positive trends for tobacco use on five notable measures on the CTC survey from 2018 – 2024. **See Table 4.** While recent data show *significant decreases* in cigarette use for 7th – 12th graders from 2022 to 2024, vape use has ranked the *2nd highest* substance uses among the students with **16.7%** in 2022 and **12.5%** in 2024. **See Chart 2.**

Communities That Care (CTC) Survey - Fairfield County						
	2016 9th – 12th grade	2018 9th – 12th grade	2020 9th – 12th grade	2022 7th -12th grade	2024 7th-12th grade	Desired Outcome
	FCSD (398)	*FCSD (398)*	*FCSD (421)*	*FCSD, MSTI, & RWA (847)*	*FCSD, MSTI, & RWA (772)*	
TOBACCO	81.5% (334) 9th – 12th grades reported they never used cigarettes	85.5% (317)	92.8% (355)	96.4%	97.5% (545)	👍
	43.4% (178) 9th – 12th grades reported that it was "*very easy or sort of easy*" to obtain cigarettes	41.2% (137)	33.4% (122)	29.7%	23.7% (116)	👎
	76.6% (314) 9th – 12th grades reported cigarette use as a "*moderate risk or great risk*"	80.5% (283)	87.9% (338)	85.6%	88.3% (408)	👍
	reported wrong or very wrong "parental disapproval" cigarette use	88.3% (302)	93.3% (349)	96.7%	96.9% (467)	👍
	reported wrong or very wrong "peer disapproval" cigarette use	78.6% (271)	83.8% (316)	86.5%	87.1% (489)	👍

Table 4 Communities that Care Survey Tobacco

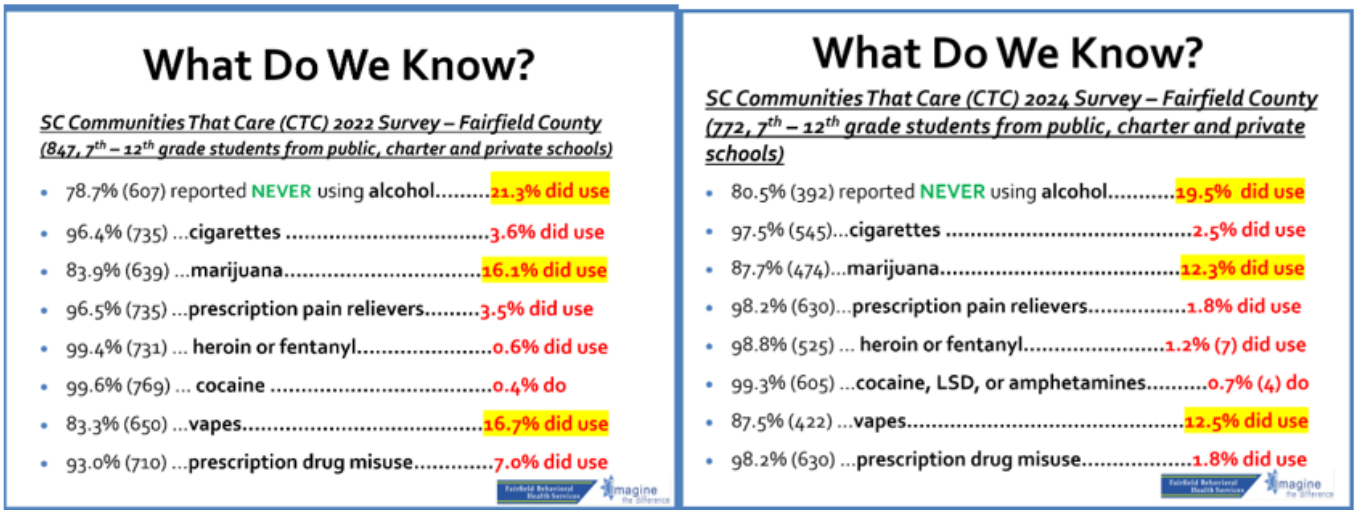

Chart 2 Communities that Care Survey -What Do We Know?

Needs assessment summary and unmet service needs and critical gaps from your data analysis: In FY27, FBHS will address priority populations to include *individuals with tuberculosis* and *other communicable diseases and reduce youth tobacco use (including smokeless tobacco use and vaping).* Given the high rates of Nicotine use and poor rankings for *Nicotine-Related Hospitalizations (5th) and Overall Nicotine Domain (8th),* Nicotine Replacement Therapies (NRT) is a necessary service to be funded for ALL clients. Further

supported by Fairfield's 2024 (22%) higher rate than the State/Nation (16%/15%) for *Adult Smoking* and the increase in *Current E-Cigarette Use Among Adults.* Reducing youth tobacco use including cigarettes and vaping is vital in view of seeing a negative trend for the *easy to obtain* measure from 2018 to 2024, the unfavorable responses from youth for the vape measures compared to the tobacco measures, and that vape use was reported to be 2nd highest use in the CTC survey from 2022 to 2024. FBHS prevention and treatment staff will continue providing evidenced based services/models *(Tobacco Education Program, Life Skills, MI, CBT, etc.)*, marketing strategies, coalition building, tobacco-free activities/events, tobacco/product education, environmental strategies. In FY27, with the help of OSUS and other funders, FBHS will continue its current efforts and strategies previously mentioned but will also research and deploy other data-driven strategies aimed at cultivating a healthier Fairfield by reducing the damaging and unfavorable nicotine rates. Combining all these efforts *with incentives and contingency management* will increase FBHS' ability to improve client access, engagement, retention, and efficacy from all *7 zip codes in Fairfield County*.

Qualitative Data – ***Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions***

- Treatment team will increase promotion of the Quit Line through the Department of Public Health.
- One staff from each department will coordinate a Vape Give Back Day in the schools with the School Resource Officers while researching the cost of a Vape Drop Box and incentives for school and youth participation.
- Treatment team will identify youth who are in recovery from using vapes or other substances to share messages titled ***"Messages that Matter to You"*** to be share in at least one peer lead discussions or marketing opportunities while promoting quit challenges, rewards and incentives if funding allows.
- Prevention team will update their PowerPoints with the latest information for vape products, explaining Nic Sick and why something happens to the body because of vaping.
- Prevention team will purchase more nicotine and vape products for demonstrations at presentations if funding allows.
- FBHS will look for ways to increase *awareness of the dangers of vaping and adolescent/adult testimonials via commercial and radio ads.*
- Administration team will place the QUIT Line information in all client intake packets.
- FBHS will set aside Healthy Outcome Plan (HOP) funds to provide incentives and emergency resources for clients to Quit smoking.

OPIOIDS

2023 SC County-Level Profile on Substance Use-Related Indicators Rank 1 - 46 = worst to best by OSUS:

In 2024, the profile data report changed from using rankings to *providing insight into the opioid crisis and response efforts* resulting in a 40.1% increase in opioid-involved overdose deaths from FY23 (19.7%) to FY24 (27.6%). Fairfield ranked **1st** and worst county in the state for *EMS Naloxone Administrations* for the last four (4) years. There was no change in ranking since 2022 for *Opioid Prescriptions Dispensed* at **42nd** and o*verall Opioid Domain* at **23rd** for 2023. However, the *Opioid-Involved Overdose Deaths* got slightly worst from **39th** in 2022 to **36th** in 2023 by 47.18%. Considerable improvement was made with *Opioid-Related Hospitalizations* from **6th** in 2022 to **13th** in 2023 though still on the worst end of the spectrum. **See Table 5.**

Table 5 Fairfield County OPIOID Ranking

	EMS Naloxone Administrations	Opioid Prescriptions Dispensed	Opioid-Involved Overdose Deaths	Opioid Hospitalizations	Opioid Domain
2020	1st	22nd	30th	21st	16th
2021	1st	43rd	10th	15th	10th
2022	1st	42nd	39th	6th	23rd
2023	1st	42nd	36th ***(47.18% increase than prior year)***	13th	23rd
In 2024, the profile data report changed from using rankings to *providing insight into the opioid crisis and response efforts* resulting in a **40.1% increase** in opioid-involved overdose deaths from FY23 (19.7%) to FY24 (27.6%).					

Just Plain Killers website: Fairfield County has seen steady increase from 2019-2023 in *EMS Naloxone Administrations* from **75 to 119 (59% increase),** though a **27% decrease of 162-119** from 2022 to 2023. The *Drug Overdose Deaths* has increased from 2019 – 2023 by **167% (5)** and by **100% (4)** from 2022 – 2023. Moreover, the number of *Deaths Involving Fentanyl* also increased from 2019 – 2023 by **400% (4)** and by **67% (2)** from 2022 – 2023. **See Table 6.**

Table 6 Just Plain Killers Website Data

	2019	2020	2021	2022	2023
EMS Naloxone Administrations	75	108	169	162	119
Drug Overdose Deaths	3	10	3	4	8
Deaths Involving Prescription Drugs	3	8	3	4	5

Deaths Involving Opioids	2	8	3	4	5
Deaths Involving Fentanyl	1	6	3	3	5

(FY25 End of Year Report by OSUS and Pacific Institute for Research and Evaluation (PIRE)
Life Skills Training program for 3rd – 8th: Notably, students reported *significant increases* in the use of CBD. *Life Skills Training program 9th - 12th:* ***Students*** reported *increased use* of prescription pain pills at post-testing.

Fairfield Opioid Response Team (Calendar Years; created in 2021):
NOTE: *Final reports from SCDHEC may reveal additional numbers unknowingly to the Team based on cases of residents that may have occurred outside of Fairfield.*

Using Overdose Detection Mapping Application Program (ODMAP), Fairfield County EMS, and the Coroner Office, the Fairfield Opioid Response Team has charted **30** *Opioid Overdose Reversals with Naloxone* in 2025, a **7% (2) decrease** from 2024 but a **66% (56) decrease** since the Team's inception and collective community response from 2021-2025. **See Chart 3.**

The Fairfield Opioid Response Team also report the following:

- **2** *Opioid Deaths* in 2025, a **60% (3) decrease** from 2024 and the same percentage decrease since the Team's inception and collective community response from 2021-2025; **See Chart 3.**
- Black males and females experienced slightly more *Opioid Overdose Reversals* in 2025 than white males and females with **16 (54%):13 (44%)** respectively; comparably, more blacks were impacted in 2025 compared to more whites being impacted in 2024; **See Chart 4.**
- Adults 65+ experienced the most *Opioid Overdose Reversals* in 2025 with **12 (40%)**; **See Chart 5.**

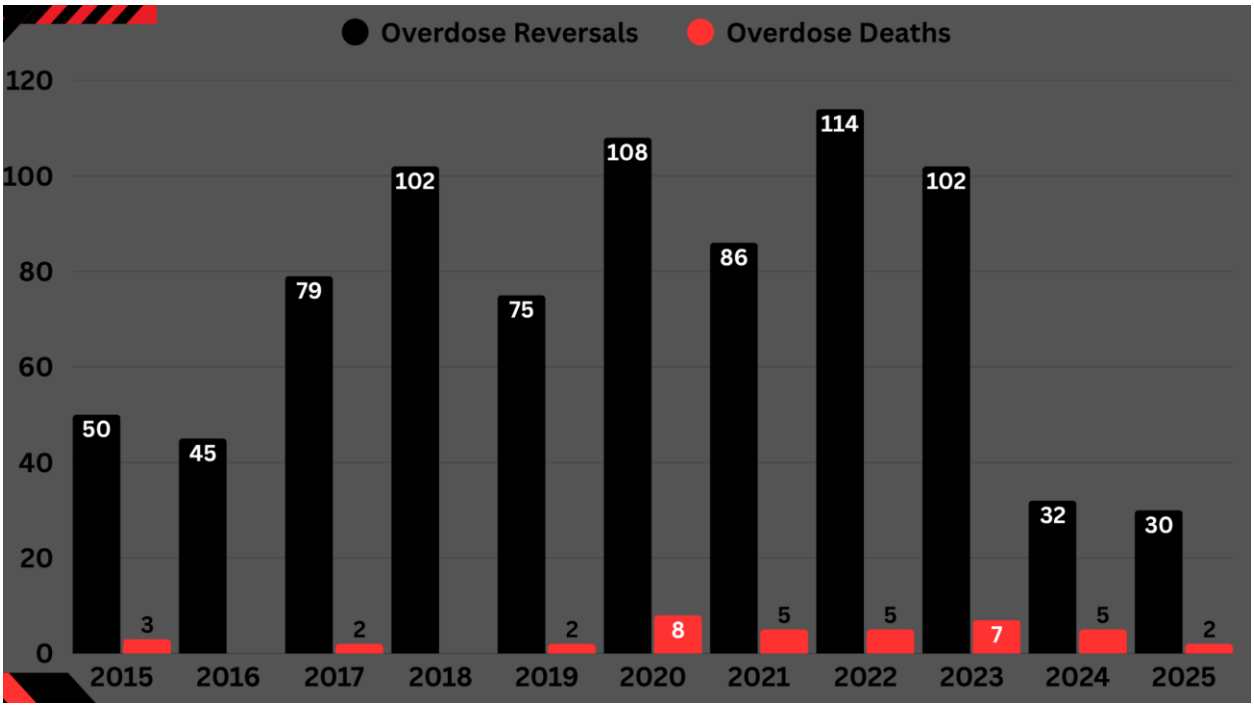

Chart 3 Opioid Overdoses Reversals & Deaths

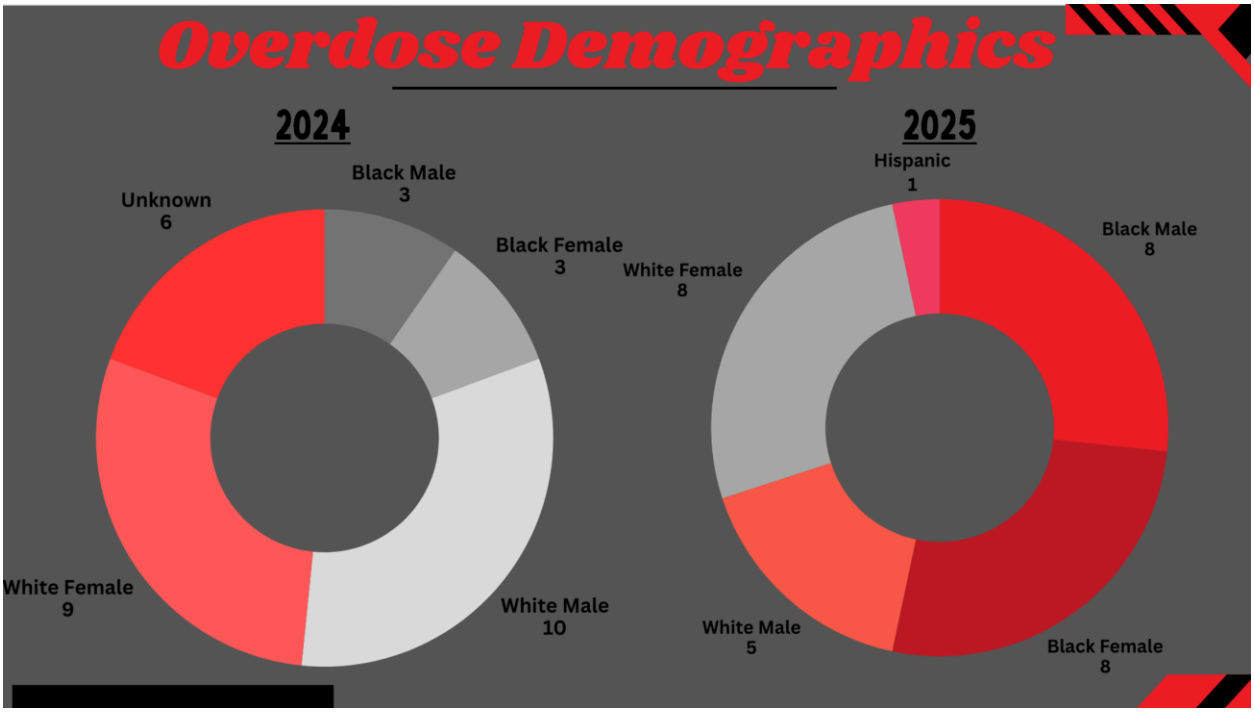

Chart 4 Overdoses Gender & Race

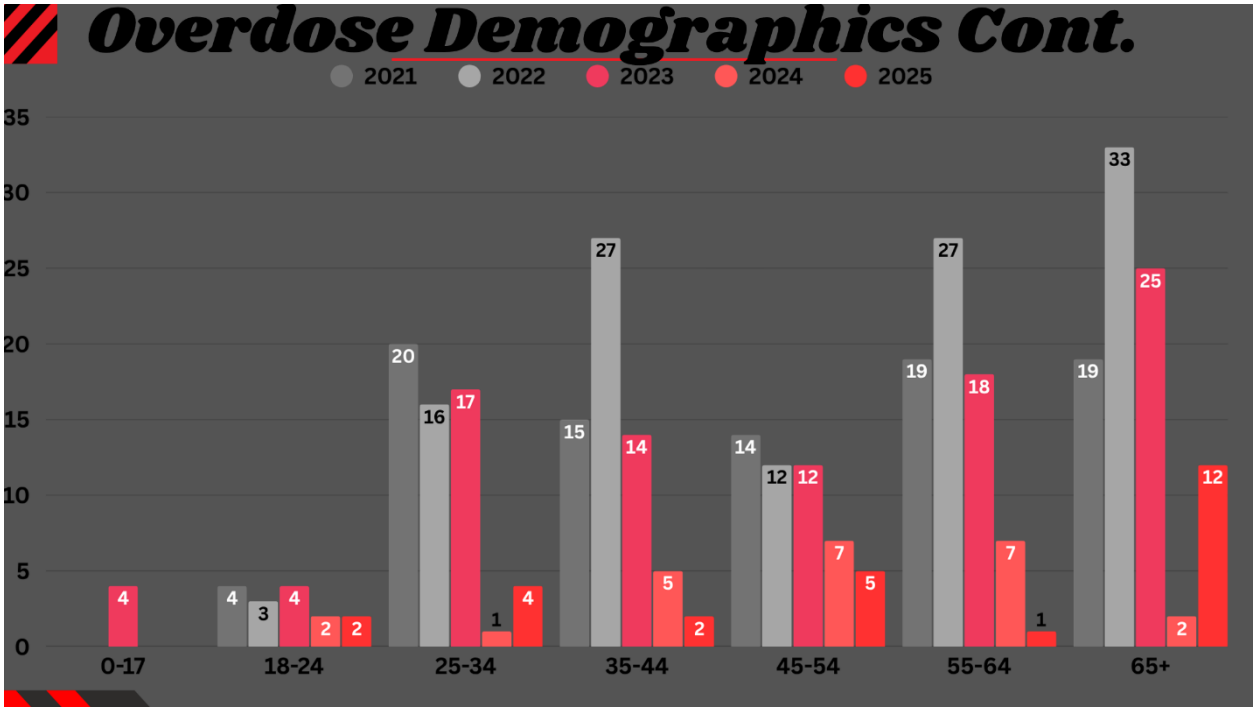

Chart 5 Overdoses by Age

In 2025, the Fairfield Opioid Response Team also identified the hot spot areas for *opioid overdoses* to be in the same top three areas of the county since 2021: Winnsboro with **18 (60%)** overdoses, Ridgeway with **7 (24%)** and Great Falls with **2 (7%)**. **See Chart 6.** Surprisingly, the opioid overdose deaths occurred outside of the hot spot areas in 2025 in Blair and Jenkinsville. **See Chart 7.**

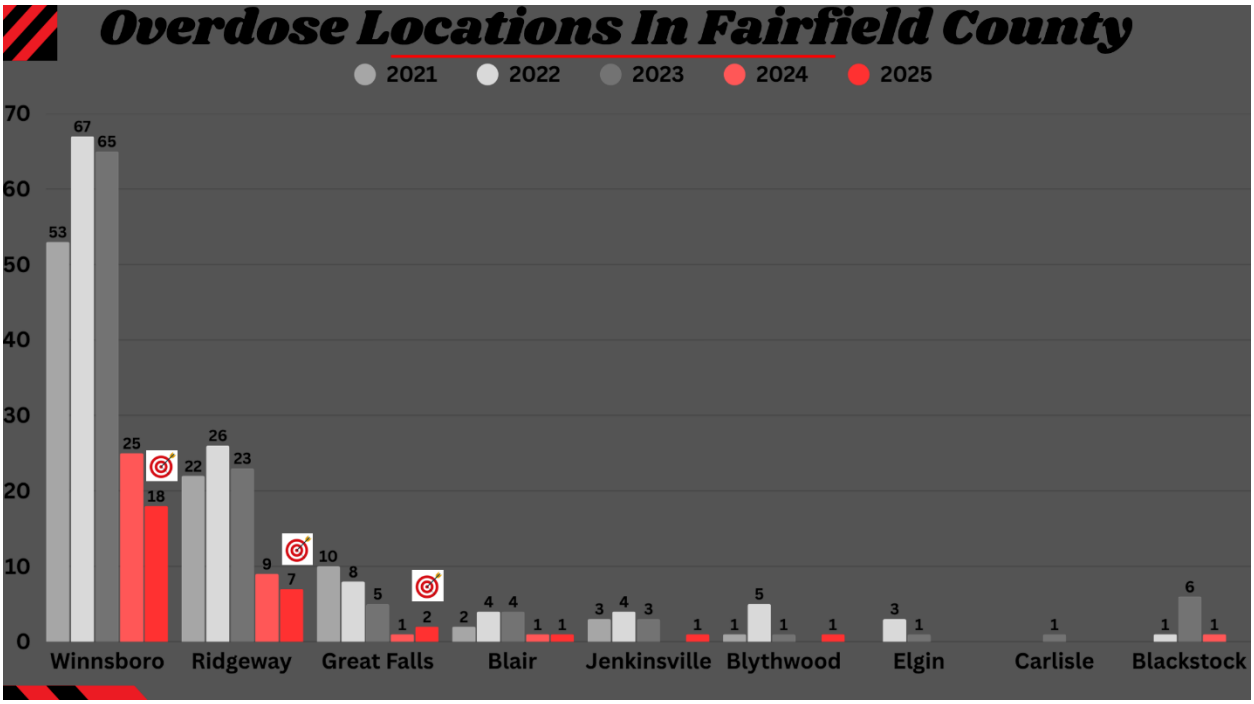

Chart 6 Opioid Overdose by Location in Fairfield County – Hot Spots

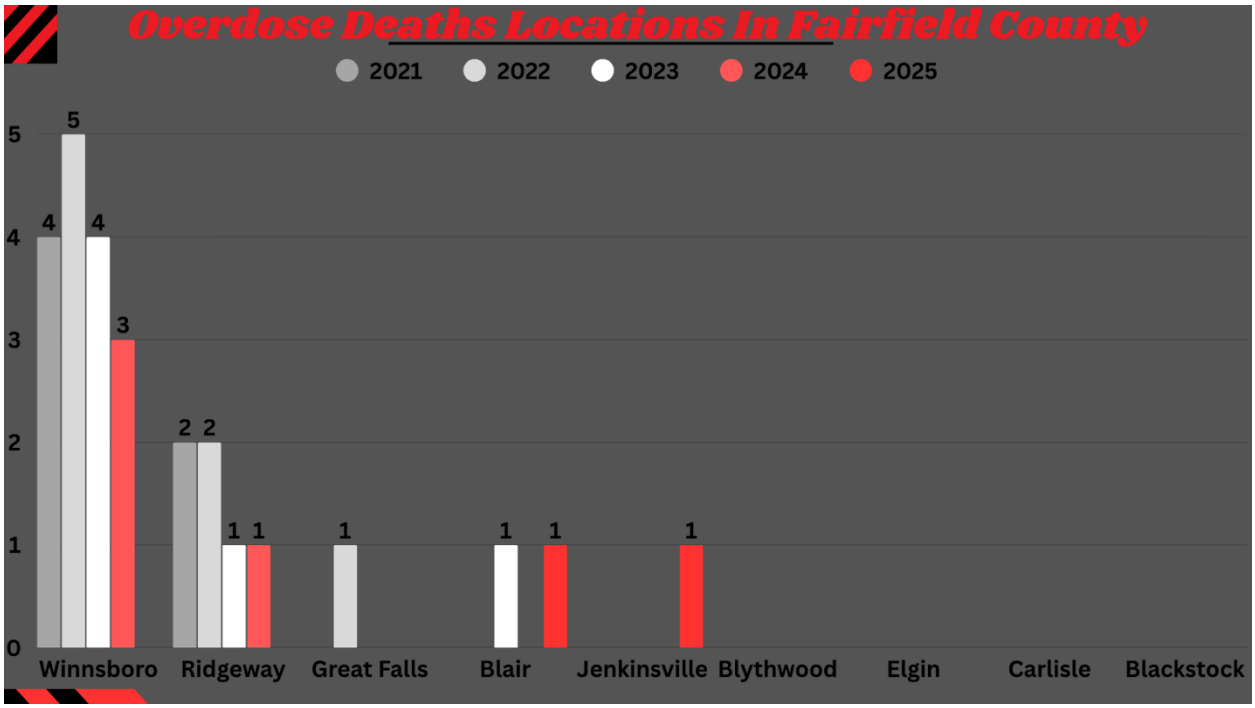

Chart 7 Opioid Overdose Deaths by Location in Fairfield County

Needs assessment summary and unmet service needs and critical gaps from your data analysis: Although many improvements continue to be made, producing positive outcomes, there are still negative factors that remain to warrant FBHS' need to prioritize *service delivery to uninsured populations, IV drug users, women who are pregnant, primary substance abuse prevention,* and *to prevent and reduce substance misuse and substance use disorder.* It is painfully evident considering that Fairfield County ranked #1 or worst county in the state for the *highest EMS Naloxone Administrations* for four consecutive years from 2020-2023 and saw a significant 40.1% increase in opioid-involved deaths from FY23 to FY24. Prioritizing *primary substance abuse prevention* and *preventing/reducing substance misuse and substance use disorder* continues to be necessary considering the increase in *Drug Overdose Deaths* from 2019 – 2023 by **167% (5)** and by **100% (4)** from 2022 – 2023 as well as an increase in the number of *Deaths Involving Fentanyl* from 2019 – 2023 by **400% (4)** and by **67% (2)** from 2022 – 2023. According to the Fairfield Opioid Response Team's reporting, the hot spot areas for *opioid overdoses* continue to be in the same top three areas of the county since 2021 though surprisingly, the opioid overdose deaths occurred outside of the hot spot areas in 2025. Furthermore, this data supports the need for the Fairfield Opioid Response Team to continue and expand its efforts *to maintain or increase prevention/treatment/recovery personnel, provide training, support credentialing upgrades, market services, and implement comprehensive programs and services with incentives and contingency management.* Then, FBHS will be able to *increase* client admission/retention in Medication Assisted Treatment (MAT); referrals from first responders and other partner organizations; participation in Life Skills Training; client engagement through treatment-support services (PSS & SC THRIVE); Opioid Education and Narcan Distribution (OEND); participation in drug court; coalition building; and the work of the Fairfield COPE Program and other deflection programs. Combining all these efforts *with incentives and contingency management* will increase FBHS' ability to improve client access and engagement, retention, and efficacy of clients from *all*

7 zip codes in Fairfield County.

Qualitative Data – ***Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions.***

- Despite not being able to have funding under the Overdose Prevention Grant with OSUS, one staff member from each department aims to host at least three pop up events in the designated hot spot areas for overdoses and deaths to distribute Narcan, education materials, and fentanyl/xylazine test strips.
- Staff will be more intentional about explaining how to use Narcan, and fentanyl/xylazine test strips in events that have already been mentioned under the alcohol and nicotine sections such as ***Town Hall Meetings, Parent & Teacher 101 workshop, Open Conversation event, school open houses, church family days, RX Take Backs, sober event, Adolescent Peer Support summer group, etc.***.
- The PSS will follow up with participants who were unable to be contacted during the COPE runs for opioid overdose survivors to provide support and referral to treatment.
- FBHS will set aside Healthy Outcome Plan (HOP) funds to provide incentives and emergency resources for clients to engage and strengthen retention of treatment/recovery services.
- The Prevention team will remind the Fairfield Opioid Response Team first responders to use the referral cards that were created for them; FBHS will provide drawing for 3 free lunches for people referred to FBHS treatment services who bring in the referral cards with the first responders name on it.
- FBHS will look for ways to increase *awareness of the dangers of opioid/stimulant use, positive impact of the Fairfield Opioid Response Team, the importance use of Narcan, and fentanyl/xylazine test strips, MAT and recovery services via commercial and radio ads.* ***Perhaps with the use of SCORF funding.***

COCAINE AND OTHER STIMULANT

2022 & 2024 Communities that Care (CTC) Survey for 7th – 12th grades:

For the second time, CTC 2024 was conducted in March 2024 for all schools in Fairfield County to include public *(1 middle and 1 high school)*, private *(1)* and charter *(1)*. The 7th – 12th graders reported the following: **See Table 7.**

- **7.8% (39/477)** 7th – 12th graders reported that it was *"Very easy or Sort of easy"* in obtaining *other illicit drugs like cocaine, LSD, or amphetamines,* with higher percentages for students in grades 8th **(8.5%, 8/941)**, 10th **(10.7%,8/75)**, and 12th **(11.6%, 11/95)**.
- *Self-disapproval of other illicit drugs like cocaine, LSD, or amphetamines:* **3.3% (17/503)** 7th – 12th graders reported that it was *"Not wrong at all OR A little bit wrong"* to use *other illicit drugs like cocaine, LSD, or amphetamines,* while there where higher percentages for students in grades 10th **(4.8%)**, 11th **(5.7%)**, and 12th **(4.1%)**;

Communities That Care (CTC) Survey - Fairfield County						
	2016 9th – 12th grade	2018 9th – 12th grade	2020 9th – 12th grade	2022 7th -12th grade	2024 7th-12th grade	Desired Outcome
	FCSD (398)	*FCSD (398)*	*FCSD (421)*	*FCSD, MSTI, & RWA (847)*	*FCSD, MSTI, & RWA (772)*	
STIMULANTS ***cocaine, LSD, or amphetamines***	***reported they never using cocaine, LSD, or amphetamines***			99.6%	99.3% (605)	

Table 7 Communities that Care Survey Stimulants

South Carolina County Profiles: County-Level Indicators published by OSUS 1/30/26

According to the County-Level Indicator data for Fairfield, *Suspected Overdose Involving Methamphetamine* ***increased by 144.4%*** from **4.08%** in 2024 to **9.97%** in 2025. Also, *Viral Hepatitis C Rates Among People Who Inject Drugs (PWID)* ***increased by 65.9%*** from **0.44%** in 2022 to **0.73%** in 2023.

Needs assessment summary and unmet service needs and critical gaps from your data analysis: FBHS will continue to move the needle towards less usage by focusing on *individuals with cocaine use disorders involved in the criminal or juvenile justice systems and primary substance abuse prevention.* Primary substance use prevention and treatment services are necessary to delay the onset of cocaine and other stimulant use/disorders despite CTC surveys showing *overall* small percentages of youth access and approval of use, but higher rates of *access* by grade level with higher percentages for students in grades 8th, 10th and 12th, higher percentages of *approval of use* for students in 10th -12th grades, as well as increases in *Suspected Overdose Involving Methamphetamine and Viral Hepatitis C Rates PWID*. To pursue more positive outcomes, FBHS must secure OSUS and other funding to *maintain or increase prevention/treatment/recovery personnel, provide training, support credentialing upgrades, market services, and implement comprehensive programs and services reaching all 7 zip codes in Fairfield County.* Subsequently, FBHS will be able to *increase* client admission/engagement/retention/efficacy in substance use treatment; referrals from first responders and other partner organizations; drug court participation; client engagement through treatment-support services (PSS & SC THRIVE); participation in Life Skills Training; and

coalition building. Combining all these efforts *with incentives and contingency management* will increase FBHS' ability to improve client access, engagement, retention, and efficacy.

Qualitative Data ***– Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions.***

- Staff will be more intentional about explaining how to use Narcan, and fentanyl/xylazine test strips in events that have already been mentioned under the alcohol, nicotine, and opioid sections such as ***Town Hall Meetings, Parent & Teacher 101 workshop, Open Conversation event, school open houses, church family days, RX Take Backs, sober event, etc.***.

FBHS will look for ways to increase *awareness of the dangers of cocaine and other stimulant use and adolescent/adult testimonials via commercial and radio ads.*

MARIJUANA

2022 & 2024 Communities that Care (CTC) Survey for 7th – 12th grades:

For the second time, CTC 2024 was conducted in March 2024 for all schools in Fairfield County to include public *(1 middle and 1 high school)*, private *(1)* and charter *(1)*. While the recent CTC data show a *decrease* in marijuana use for 7th – 12th graders from 2022 to 2024, marijuana use continued to be the *3rd highest* substance used among the students with **16.1%** in 2022 and **12.35%** in 2024. **See Chart 2 and Table 8.**

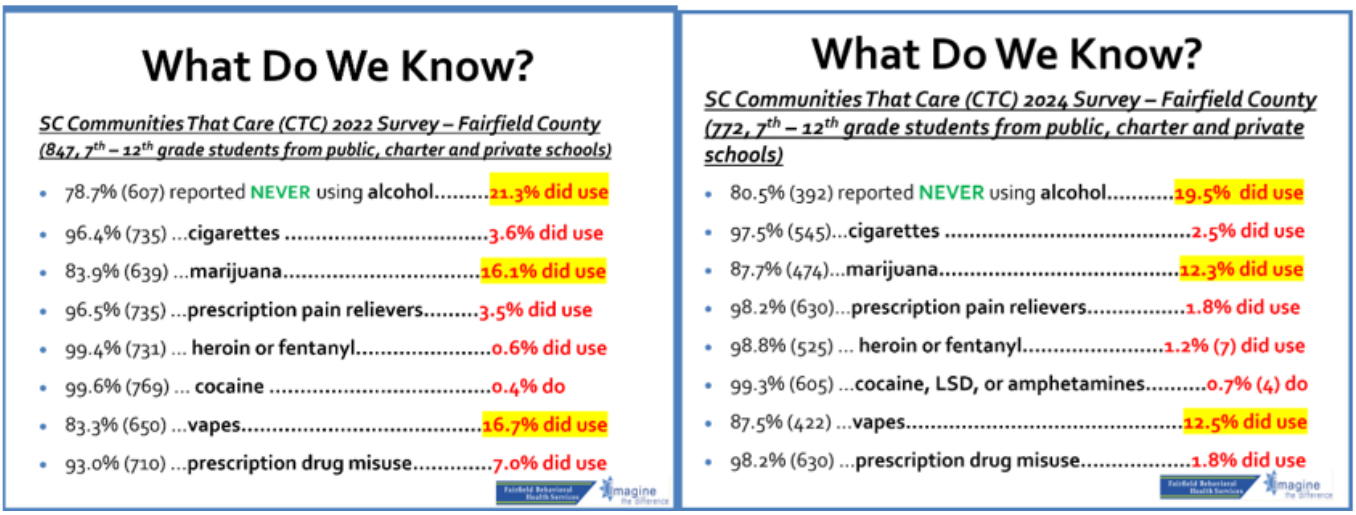

Chart 2 Communities that Care Survey -What Do We Know?

Communities That Care (CTC) Survey - Fairfield County						
	2016 9th – 12th grade	**2018** 9th – 12th grade	**2020** 9th – 12th grade	**2022** 7th -12th grade	**2024** 7th-12th grade	**Desired Outcome**
	FCSD (398)	*FCSD (398)*	*FCSD (421)*	*FCSD, MSTI, & RWA (847)*	*FCSD, MSTI, & RWA (772)*	
MARIJUANA	83.6% (343) 9th – 12th grades reported they never using marijuana	70.9% (256)	77.5% (288)	83.9%	87.7% (474)	👍
	52.2% (214) 9th – 12th grades reported that it was *"very easy or sort of easy"* to get marijuana	45.8% (155)	50.8% (187)	36.0%	24% (114)	👎
	56.1% (230) 9th – 12th grades reported marijuana use as a *"moderate risk or great risk"*	53.9% (191)	49.4% (190)	60.0%	71.9% (352)	👍
	reported wrong or very wrong "parental disapproval" marijuana use	85.3% (292)	81.4% (307)	88.4%	91.6% (429)	👍
	reported wrong or very wrong "peer disapproval" marijuana use	57.7% (205)	51.6% (200)	61.8%	73.5% (481)	👍

Table 8 Communities that Care Survey Marijuana

(FY25 End of Year Report by OSUS and Pacific Institute for Research and Evaluation (PIRE)

Life Skills Training program (3rd – 8th): Notably, students reported *significant increases* in the use of marijuana. *Life Skills Training program 9th - 12th:* Students reported *increased use* of marijuana. African American students reported a *significant increase* in the use of marijuana.

Needs assessment summary and unmet service needs and critical gaps from your data analysis: In FY27, FBHS will address priority populations to include *individuals with marijuana use disorders involved in the criminal or juvenile justice systems and primary substance abuse prevention* given that marijuana use was reported to be 3rd highest substance used according to the CTC survey from 2022 to 2024. Consequently, FBHS will work to move the needle towards achieving more 7th – 12th graders reporting *favorable* responses for *use, access, risk, and parent/peer disapproval* for marijuana. In order to pursue more positive outcomes, FBHS must secure OSUS and other funding to *maintain or increase prevention/treatment/recovery personnel, provide training, support credentialing upgrades, market services, and implement comprehensive programs and services reaching all 7 zip codes in Fairfield County.* Subsequently, FBHS will be able to *increase* client admission/retention in marijuana use treatment; referrals from schools and partner organizations; client engagement through treatment-support services (PSS & SC THRIVE); participation in Life Skills Training; and coalition building.

Qualitative Data – *Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions.*

- Staff will be more intentional about helping parents and other adults to identify vape products during events that have already been mentioned under the alcohol, nicotine, opioid, and stimulant sections such as **Vape Give Back Day, *Town Hall Meetings, Parent & Teacher 101 workshop, Open Conversation event, school open houses, church family days, RX Take Backs, sober event, etc.***.
- Prevention team will purchase more vape products for demonstrations at presentations and Vape Drop Box(es) for schools if funding allows.
- FBHS will look for ways to increase *awareness of the dangers of vaping and adolescent/adult testimonials via commercial and radio ads.*

OTHER FACTORS TO CONSIDER

In addition to the direct substance use measures, there are numerous factors that indirectly affect and can lead to substance use/misuse, as well as negatively impact service delivery. *Below are a limited number of these factors.*

Children's Trust of South Carolina County Profile Data - *Child Well-Being Data Profile Rank 1 - 46 = best to worst*

According to ***Child Well-Being Data Profile***, Fairfield**'s** ranking improved from 37th (2022) to 28th (2025) worst county for overall child well-being which puts the children at risk for negative outcomes. According to the 2025 report, Fairfield worsened in the following areas *Children 0-17 in households with incomes below the poverty level,* **37th** with **33.1%** compared to the State's 18.8%; *Cumulative percent of children failing grades 1, 2, or 3,* **34th** with **2.6%** compared to the State's 1.1%; *Children experiencing food insecurity,* **36th** with **28.2%** compared to the State's 17.7%; and *Families where householder lacks a high school diploma*, **41st** with **14.6%** compared to the State's 8%;

Adverse Childhood Experiences (ACEs) Data Profile: Fairfield ranked **24th** for abuse *(emotional-29.1%, physical-11.6% and sexual-13.1%).*

The Impact of Childhood Abuse and Neglect: An estimated **57.6%** (9,251) of Fairfield's adult population reported having one of more ACE and an estimated **1222 *(14%)*** adults reported four or more ACEs.

County Health Rankings

According to the 2024 & 2025 County Health Rankings, Fairfield County's health outcomes (how long people live on average) and health factors (how well people live) *"fared worse than the average county in SC for Health Outcomes and worse than the average county in the nation."* Comparably, Fairfield had **800 or 5%** more premature deaths in 2025 (17,400) than 2024 (16,600), compared to **300 or 2%** more premature deaths for the State in 2025 (10,500) than 2024 (10,300).

Specifically for 2025, Fairfield's doctor to patient ratio ranks worse than the State respectively **2560:1 and 1480;1** for *primary care physicians*; **780;1 and 420;1** for *mental health providers*; and **4080;1 and 1660;1** for *dentist*.

2023 SC County-Level Profile on Substance Use-Related Indicators Rank 1 - 46 = worst to best by OSUS:

This section captures the most recent data on the *Social Determinants of Substance Use*. Fairfield's ranking across the state for *Child Maltreatment Investigations* got significantly better from **2nd** in 2019 to **29th** in 2023 though slightly worse from **33rd** in 2022 to **29th** in 2023 by **4.64%**. Other indicators that fared slightly worse include *Children in Poverty* from **17th** in 2021 to 13th in 2023; *Unemployment Rate* from **8th** in 2022 to **7th** in 2023; and *Drug Law Violations* from **25th** in 2022 to **23rd** in 2023. Significant improvements were made for *High School Graduation Rate* from 7th in 2022 to 23rd in 2023. **See Table 9.**

Table 9 Fairfield County SOCIAL Ranking

	Child Maltreatment	Children in Poverty	High School Graduation Rate	Unemployment Rate	Social Domain	Drug Law Violations
2019	2nd	29th	2nd	45th	--	--
2021	39th	17th	12th	10th	21st	--
2022	33rd	--	7th	8th	11th	25th
2023	29th	13th	23rd	7th	12th	23rd

South Carolina County Profiles: County-Level Indicators published by OSUS 1/30/26
According to the County-Level Indicator data for Fairfield, *Child Maltreatment Investigations* ***increased by 8.2%*** from **4.08%** in 2024 to **9.97%** in 2025; *Children in Poverty* ***increased by 8.6%*** from **0.30%** in 2024 to **0.33%** in 2025; and *Viral Hepatitis C Rates Among PWID* ***increased by 65.9%*** from **0.44%** in 2022 to **0.73%** in 2023.

US Census
The US Census shows that the population estimates for Fairfield have declined from 2010 to 2024, resulting 15% (3587) over 14 years. **See Table 10.**

	Population Estimate	Difference from Prior Period
4/1/2010	23,956	
4/1/2020	20,948	15% (3008) decrease
7/1/2022	20,450	3% (498) decrease
7/1/2023	20,422	1% (28) decrease
7/1/2024	20,369	1% (53) decrease
7/1/2025	N/A	
	Total Difference	15% (3534) decrease

Table 10 Fairfield's Population Estimates per US Census

FY25 FBHS CQI Report based on Numbers Served:
FBHS served a total of **232** treatment clients in FY25, **24%** (72) less than FY24 (304).

FBHS Client Admissions
In FY25, FBHS' Treatment department experienced unprecedented turnover that contributed to a **28% (64) decrease** in admissions from prior year. However, *as of 12/31/25*, FBHS has had **109** admissions, which is *67% of prior year admissions and* **47%** *of is FY26 goal of 235 admissions*.

Admissions by Priority Populations per OSUS Grants Management Systems (GMS)/Block Grant
FBHS did not meet any of its treatment block grant Admission Priority Population goals for FY25. However, *as of 12/31/25, FBHS is on target to meet ALL its Admission Priority Population goals.*

FBHS FY25 OSUS Contract Objectives: Disappointingly but understandable, considering the frequent turnover we experienced in the treatment department, only **12.23%** of clients received a *clinical service within 6 calendar days*, *37.77 percentage points less than* the State goal of 50%.

FY25 Ages Served: 0 (0%) Under 5; 3 (12%) 5-12; 17 (7%) 13-17; **37 (16%) 18-29**; **165 (71%) 30-64**; and 10 (4%) over 64. ***Decrease in the number of clients served compared to prior year for all ages.***

FY25: Gender: **82 (35%)** females and **148 (64%)** males were served. Although there were less people served than prior year, the same percentage of males and females were served.

FY25: Race: Consistently, FBHS served more Black/African Americans with **161 (69%) Black/AA, 67 (29%) White, 1 (1%) Hispanic, and 1 (1%) Asian.**

FY25 Client Satisfaction (INTAKE- NEW!): **99%** of **131** clients reported overall satisfaction at intake.

FY25 Client Satisfaction (MIDWAY with Trauma Informed Care): 20 total surveys for the year, 8 less than prior year with an overall satisfaction rate of **100%**.

- ✓ **100%** of clients report that FBHS provides Trauma Informed Care (TIC) environment or that FBHS is TIC friendly. **100%** would recommend someone for our services. How would you rate the services at FBHS? **67%** Excellent; **33%** Above Average.
- ✓ *I would recommend services for my brother; Ms. Rabb is a very good counselor.*

FY25 Client Satisfaction (DISCHARGE): **100%** of **24** clients reported overall satisfaction; 9 *fewer clients completed discharge satisfaction surveys than the prior year (28% decrease).*

Qualitative Data *What did you like/enjoy most about FBHS?*

- ✓ *The groups were helpful, and Ms. Odom is a great person.*
- ✓ *The services; The staff at the check in; The people that I encountered when I was in service; They were very polite and helpful, and they even said that if any treatment is needed do not hesitate; The staff.*
- ✓ *Being in groups led by Ms. Allen, she connects with each person on levels and emotions to actually get to know us and help us through our problems and issues.*
- ✓ *Friendly and courteous staff.*
- ✓ *The group was engaging. I learned a lot about addiction.*
- ✓ *I enjoyed the group conversations and the friendly and helpful people at the front desk.*
- ✓ *I finished. They were able to work around school hours.*
- ✓ *Everyone was kind and put everything in a different perspective to where you see things in different ways.*
- ✓ *They were kind.*
- ✓ *The groups. Staff and the recovery process.*

FY25 Staff Satisfaction FY25 results revealed that **83% (10 employees)** of the survey questions received a Satisfaction Rating compared to 94*% in FY24*.

Qualitative Data

Partner Referrals

- ✓ *I think Fairfield Forward and other nonprofits should have a link on their websites that allows an individual to request an appointment online. For example: Behavioral Health Resources To make an appointment for assistance with X, Y, and Z click here to learn more: Link.* ***[FBHS has had a referral link on its website since 2022 as well as a hyperlink on the paper referral form but made changes to it on 2/27/26; FBHS will redistribute the revised referral form and remind the partner and community about the link on the website. FBHS Management Staff also decided to create a referral card to be distributed to all school teachers and staff to encourage parents to contact our office when they need our services.]***
- ✓ *The Assistant Superintendent of Operations and Student Services at Fairfield County School District has asked us to assist them in organizing an educational sessions for parents* ***[FBHS Management Staff have to discussed an idea for a Parent 101 Workshop to be held on a Saturday morning that we will pitch to the Assistant Superintendent to be held in April or early May and again in August or September 2026; Potential topics to include Vaping, Drug Trends, Social Emotional Learning/Behavioral, and Parenting].***

Needs assessment summary and unmet service needs and critical gaps from your data analysis: Clearly there are some undesirable statistics within the other factors that compound *the issues that clients/potential clients face; that are recognized determinants for substance use;* and *that create unfair opportunities* for Fairfield County residents. Thus, it is imperative that FBHS secure adequate funding and resources beyond population-based or substance-specific funding to appropriately address ALL substance use for ALL people in need of prevention, treatment, and recovery in Fairfield County. FBHS' strong collaborations and partnerships will target efforts within its continuum of services to address several priority populations in FY27 to include *primary substance abuse prevention, as well as general admissions and admissions for ALL treatment block grant priority populations.* FBHS believes that these priority populations are vital due to the less than desirable rankings on the *Social Determinants of Substance Use* for *Children 0-17 in households with incomes below the poverty level,* **37th**; *Cumulative percent of children failing grades 1, 2, or 3,* **34th**; *Children experiencing food insecurity,* **36th** and *Families where householder lacks a high school diploma*, **41st** . Additional justification for increased efforts towards improvements within the priority populations is evident with the *ACEs Data Profiles* showing that Fairfield ranked **24th**; an estimated **57.6%** of Fairfield's adult population reported having one of more ACE; and an estimated **14%** adults reported four or more ACEs, as well as the increased rates for *Child Maltreatment Investigations, Children in Poverty* and *Viral Hepatitis C Rates Among PWID.* That said, because Fairfield is one of the smallest populated counties in the state that has gotten even smaller from 2010 to 2024 according to the 2025 US Census population estimates, FBHS is automatically short sided with less funding. Funding, that is often reserved as base funding without any add-ons like any or adequate funding to address workforce recruitment/retention issues, professional development, marketing, supplies, equipment, etc. Especially, when FBHS is mandated to provide treatment services regardless of a person's ability to pay for those services. FBHS must secure sufficient OSUS and other funding. Funding that is not restricted to a particular substance or substance use disorder such as we did in FY26 with the General Assembly appropriated funds, to better *maintain or increase*

prevention/treatment/recovery personnel, provide training, support credentialing upgrades, market services, and provide comprehensive programs/services for residents across all 7 zip codes in Fairfield County. Additional funding will also help us to address the suggested improvements that staff, partners and the community provided o us as reported in our qualitative data. Furthermore, FBHS will pursue positive outcomes including *the number of clients who receive a clinical service within 6 calendar days* and ensure that services are made available to everyone in need of our services, especially those who may be adversely affected or facing greater challenges in accessing our services. Subsequently, *with incentives and contingency management*, FBHS will be able to *increase* client admission/retention in substance use treatment; *increase* referrals from schools/partner/community organizations; and ***increase*** client engagement/efficacy through treatment-support services (PSS & SC THRIVE).

Qualitative Data – ***Input from the FBHS Administrative Work Session Solutions to Address the above-mentioned problems in FY27 to increase awareness and admissions.***

- One of three counselors will obtain certification in the **Trauma Recovery and Empowerment Model (TREM)** in FY27.
- The certified Counselor will start a TREM group in FY27.
- One of three counselors will be more intentional about using **Adverse Childhood Experiences (ACEs)** for a new parenting group that started in FY26 and with youth and adults who show signs or report trauma experiences during assessments or counseling sessions.
- Clinical staff will distribute midway surveys every 4-5 weeks.
- Administration and Treatment staff will be more intentional about indicating on the client charts in the memo section whether they have completed the midway surveys**.**
- Administration and Clinical Staff will work together to schedule 15 minutes for clients to complete their treatment plan and 45 minutes for clients to receive an individual counseling service to meet the ***clinical service within 6 days*** objective starting in FY26.
- Administration and Clinical Staff will work together to ensure more clients will be successfully discharged to complete the discharge survey. Administration will have the clients complete the survey upon arrival for their final session.

Fundraising

- Need to encourage and support FBHS Board of Directors to discuss the Real Deal Fundraising Workbook by Jessica Cloud and to develop a plan for fundraising.
- Need to ask the board of directors and staff to participate in the annual United Way Annual Giving and Midlands Gives programs.
- Need to develop a pool of funds to provide emergency assistance to clients such as food and temporary housing.
- Need to ask the board of directors to encourage others to utilize our services, i.e. for prevention and treatment services for adolescents, schools, businesses.
- Need to fundraise for the following: *Recovery Picnic Gazebo, marketing success stories, more client emergency assistance funds, etc.*