

# ANNUAL UPDATE 2025



South Carolina  
**DEPARTMENT  
ON AGING**

2023 to 2028

## South Carolina Statewide Plan to Address Alzheimer's Disease & Related Dementias (ADRD)



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# Introduction

South Carolina is one of the most rapidly aging states in the nation, with its older adult population, those aged 65 and older, experiencing significant growth driven by retiree migration and the aging baby boomer generation.<sup>1</sup> According to a report released by the US Census Bureau, between 2020 and 2023, “metro” areas in South Carolina, such as Myrtle Beach, saw a 23.1% increase in residents aged 65 and older, surpassing national trends and elevating the state’s median age in key regions by 3.1 years from 2020 to 2024.<sup>1</sup> Recent census data also suggests that by 2027, there will be more older adult residents than children, aged 0-17, for the first time; a significant milestone that highlights the need to plan for aging communities.<sup>2</sup>



This population change also means more people in South Carolina may be affected by dementia, as age remains the primary risk factor for these conditions.<sup>3</sup> According to the South Carolina Alzheimer's Disease Registry, the oldest and most comprehensive database of its kind in the nation, as of 2022, there are 125,538 individuals diagnosed with ADRD in the state.<sup>4</sup> This number does not account for the individuals who are exhibiting the signs of symptoms of dementia but have not received a diagnosis.

South Carolina’s growing aging population and the expected rise in Alzheimer's disease and related dementias (ADRD) cases in the future highlight the importance of comprehensive support services for individuals and families affected by dementia. With 224,000 unpaid family caregivers in South Carolina providing 369 million hours of care each year to those living with dementia, the strain on families is significant, often leading to declining caregiver health, including higher rates of depression and chronic conditions.<sup>3</sup> Additionally, rural areas face greater access challenges, emphasizing the need to expand community programs, respite care, and educational initiatives to support family caregivers and reduce the risk of institutionalization.

Addressing this growing crisis demands enhancements in the healthcare workforce and a concerted effort to advance research. In 2021, only 71 geriatricians were available to meet the demand in SC, with a projected need for a 214.3% increase by 2050.<sup>3</sup> Additionally, a 33.9% rise in home health aides is necessary by 2032.<sup>3</sup> High rates of hospital readmissions and emergency department visits among those diagnosed with dementia indicate significant gaps in specialized care. Expanding research initiatives is crucial for developing targeted interventions to address this growing need.

The 2023-2028 Statewide Plan to Address Alzheimer's Disease and Related Dementia provides a clear roadmap for these efforts. It emphasizes the importance of working together in a coordinated way to improve the quality of life for individuals with dementia and their caregivers. By focusing on healthcare, education, support, and research, South Carolina is taking important steps toward a future where we can better face the challenges of Alzheimer's and related dementias with effective and compassionate solutions.

[1] U.S. Census Bureau. (2025). An Aging Nation: U.S. Median Age Surpassed 39 in 2024. Retrieved from <https://www.census.gov/library/stories/2025/06/metro-areas-median-age.html>

[2] South Carolina Revenue and Fiscal Affairs Office. (n.d.). South Carolina Population Projections Through 2035 by Five-Year Age Groups [Data file]. Retrieved from [https://rfa.sc.gov/data-research/population-demographics/census-state-data-center/population-projections/SC%20population%20projections%20through%202035\\_five-year%20age%20groups.xls](https://rfa.sc.gov/data-research/population-demographics/census-state-data-center/population-projections/SC%20population%20projections%20through%202035_five-year%20age%20groups.xls)

[3] Alzheimer’s Association. 2025 Alzheimer’s Disease Facts and Figures. Alzheimer’s Dementia 2025; 21(5).

[4] University of South Carolina. (2025). 2024 Annual Report South Carolina Alzheimer’s Disease Registry. Retrieved from: <https://osa-sc.org>.

This annual report on the progress of the 2023-2028 South Carolina Plan to Address Alzheimer’s Disease and Related Dementia provides an overview of the initiatives and achievements over the last year and outlines future priorities to enhance support and care for all South Carolinians impacted by ADRD.

## Mission

To catalyze statewide collaboration to promote a comprehensive approach to risk reduction, early detection, and diagnosis, high-quality dementia services, and a coordinated and equitable continuum of care across South Carolina for Alzheimer’s disease and related dementias.

## Vision

All people in South Carolina have the opportunity to live the highest quality of life throughout their lifecourse.

## State Plan Values

Dignity is the core of what we do.

We respect and support the health and wellbeing of the whole person throughout their life, regardless of diagnosis or progression of disease.

Integrity is foundation to all our work.

In order to ensure our efforts to address ADRD do no harm and maintain the highest or ethical standards, we are committed to continually learning, protecting vulnerable populations, and reducing barriers to education and resources.

Intentionality guides our approaches and practices.

We engage in our work with intentionality, recognizing that systemic inequities exist and significantly impact access to information about risk reduction, early detection, and barriers to quality care and support.

Community is essential to our success.

We build trust and collaborate with a wide range of partners, including researchers, providers, and local organizations, to ensure that all community members have access to the education, services, care, and resources they need to achieve the highest quality of life possible.

Information is critical to the development of data-driven programs, policies, and procedures.

We must be transparent with our partners and share information freely. Equitable access to information is key to risk reduction and other health promotion efforts. Information from stakeholders, statistics, research, and current data allow us to align with best practices, develop culturally relevant programming for caregivers, care partners, health care systems, and persons diagnosed with and at risk for ADRD.

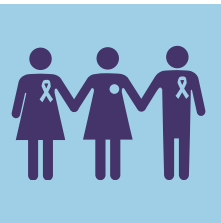
# Strategic Priorities

The statewide plan outlines five strategic priorities, each with its own corresponding goals and actionable tasks:



## Priority 1: Education - Healthcare Providers and Community

Goal 1: Improve knowledge, understanding, and awareness of ADRD by educating and empowering all South Carolinians, including every person engaged in the continuum of care.



## Priority 2: Advocacy & Policy Making

Goal 2: Support policy and advocacy efforts that improve the health and well-being of all people in South Carolina.



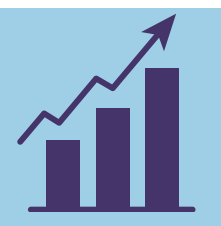
## Priority 3: Access & Connection to Care

Goal 3: Improve the quality of ADRD care and ensure all people in South Carolina are able to access the resources, healthcare, and support they need for reducing the risk and all other issues related to ADRD.



## Priority 4: Caregiver Support

Goal 4: Improve, expand, and develop multidimensional support and health promotion programs for professional and family caregivers and care partners.



## Priority 5: Data & Resources

Goal 5: Improve access to, coordination, and use of ADRD data and resources statewide.

# Strategic Plan Progress

In Fiscal Year 2025, South Carolina aimed to continue advancing the Statewide Plan to Address Alzheimer’s Disease and Related Dementia, thanks to the dedicated efforts led by the Alzheimer’s Resource Coordination Center (ARCC) Advisory Council, which serves as the representative coalition for the Statewide Plan. The Council worked to increase the ARCC’s representation by filling vacant seats and strengthening partnerships with stakeholder organizations. Throughout the year, the Advisory Council held four full meetings, as well as two sessions of the ARCC subcommittees. These meetings provided valuable opportunities to review progress, share updates, and brainstorm strategies to achieve the goals of the Statewide Plan.



The South Carolina Department of Public Health (DPH), with support from funding from the Centers for Disease Control and Prevention’s (CDC) Building Our Largest Dementia (BOLD) Infrastructure Grant, helped lead the implementation process. Working closely with the South Carolina Department on Aging, the Alzheimer’s Association, and ARCC Advisory Council members, DPH coordinated efforts to turn the State Plan goals into actionable items.

In March 2025, the ARCC invited four families, including individuals diagnosed with Alzheimer’s disease and their care partners, to share their experiences of receiving a diagnosis and the subsequent care they received. They identified several challenges:

- Long waits, potentially six to nine months, to secure appointments with a specialist for a formal diagnosis or follow-up care
- Limited care planning and inadequate connections to community resources following diagnosis
- Insufficient education about the disease and its expected progression

In June 2025, the Advisory Council discussed how to better organize the objectives within the Statewide Plan, noting that many activities and goals overlapped across different focus areas. It was agreed that simplifying these efforts would make them more efficient, reduce redundancy, and increase their overall impact.

The following pages detail strategic plan activities completed in FY25, organized by priority area and goal.

# FY 2025 Strategic Plan Activities



## Priority 1: Education - Healthcare Providers and Community

Goal 1: Improve knowledge, understanding, and awareness of ADRD by educating and empowering all South Carolinians, including every person engaged in the continuum of care.

- The South Carolina Department on Aging's Dementia Care Specialist (DCS) Program developed the SC Department on Aging Dementia Toolkit, which aims to help individuals and families affected by dementia navigate the dementia journey by providing valuable information and resources. The toolkit is accessible online at the SC Department on Aging website, with physical copies also available. The program also established the SC Department on Aging Dementia Seminar Series, a quarterly webinar where expert speakers share helpful information for families impacted by dementia. In FY2025, the seminars covered topics on recent advances in research and science in dementia care, as well as person-centered approaches to understanding and managing behavioral and psychological symptoms in dementia, reaching 293 participants. Additionally, 1,422 individuals attended Dementia 101, and 944 attended Dementia 201.
- DPH partnered with the SC Area Agency on Aging Association and the SC Association of Council on Aging Directors to identify activities in senior center activity calendars that promote brain health. Over 800 activities were identified, and DPH has mapped out activities to create a guide and toolkit for Senior Centers to utilize statewide.
- Over 8,000 cadets in the South Carolina Criminal Justice Academy received dementia-specific de-escalation training developed by the Alzheimer's Association, SC Chapter.
- In May 2025, the Lourie Center in Columbia, SC, hosted a seminar on dementia/brain health, attended by 35 participants.
- SC Department of Social Services offers dementia training for Adult Protective Services staff members. Since its implementation in 2022, 23 trainings have been held for 228 staff members.



## Priority 2: Advocacy & Policy Making

Goal 2: Support policy and advocacy efforts that improve the health and well-being of all people in South Carolina.

- The 2025 priority area for the SC Chapter of AARP was to increase the reimbursement for the Geriatric Physician Loan Forgiveness Program from \$35,000 to \$50,000. This would be the first increase in reimbursement since the program began in 2005.
- On March 5, 2025, advocates with the Alzheimer's Association participated in Alzheimer's Advocacy Day at the SC State House, where they spoke with state legislators about two key issues: an increase in the Geriatric Loan Forgiveness Program reimbursement and funding for assistance launching a public health communication campaign focused on brain health in six counties with a high prevalence of Alzheimer's disease.
- Four families impacted by Alzheimer's disease and related dementia, including care partners and individuals diagnosed with ADRD, spoke at the March 2025 ARCC Advisory Council Meeting, providing the Council with information on the challenges they faced pre- and post-diagnosis. They also discussed services and assistance that have helped navigate the dementia journey, as well as gaps in services.
- The Alzheimer's Association sat on a panel for the SC Chapter of the American College of Healthcare Executives and shared information about dementia training and resources.



### Priority 3: Access & Connection to Care

Goal 3: Improve the quality of ADRD care and ensure all people in South Carolina are able to access the resources, healthcare, and support they need for reducing the risk and all other issues related to ADRD.

- The SC Department on Aging’s Dementia Care Specialist Program received state funding in FY25 to hire nine additional Dementia Care Specialists to help meet the needs of individuals and families throughout the state of South Carolina. Throughout FY25, the SCDOA successfully secured placements in county-level libraries and other local offices in six of the ten regions. Three Dementia Care Specialists, in addition to the one already in place in the Central Midlands region, were hired in the Catwaba, Lower Savannah, and Pee Dee Regions. All nine positions are expected to be filled by December 31, 2025.
- In January 2025, DPH completed an ADRD prevalence and population health analysis to identify 17 target counties for the Take Brain Health to Heart (TBHTH) campaign. TBHTH aims to provide education on ways that healthy choices and lifestyle changes made today may help lower the risk of cognitive decline as we age. Target populations include individuals aged 65 and older, non-Hispanic Black individuals, and females.
- USC Brain Health Network has expanded its service locations, partnering with local healthcare systems in Sumter, Winnsboro, Seneca, Columbia, and Darlington.
- The Charleston VA has implemented a Rapid Access Memory Evaluation program to conduct abbreviated neuropsychological testing on veterans who identified as having cognitive changes or concerns. The veterans are first assessed by their primary care physicians before being referred to a specialist for formal evaluation and diagnosis. Discussion has been had about expanding the program to the Columbia VA, pending funding availability.
- The SC Alzheimer’s Network (SCAN), out of MUSC, began seeing patients. SCAN offers eConsults for primary care providers to provide recommendations on how to best treat patients who may be presenting with cognitive changes. If it is determined that patients require a more specialized evaluation than can be offered by PCPs, the patient may be referred to be seen by SCAN providers either virtually or at their in-person Memory Treatment Clinic in Charleston, SC.



### Priority 4: Caregiver Support

Goal 4: Improve, expand, and develop multidimensional support and health promotion programs for professional and family caregivers and care partners.

- The SC Department on Aging, in partnership with the ARCC and the SC Respite Coalition, developed and distributed the Family Caregiver Respite Care and Dementia Services Community Needs Assessment. The assessment is scheduled to close in November 2025, and a report with results will be made available in FY26.
- In June 2025, LeadingAge South Carolina hosted a symposium for direct care workers on dementia. Attendees were provided with education on the skills necessary to effectively care for an individual living with dementia, and lessen incidents of resistance and stress of both the caregiver and care receiver.
- Coastal Carolina University has partnered with DPH to place student interns at local senior centers. Interns will implement ADRD risk reduction strategies and caregiver resources and education.
- In FY25, the ARCC awarded 10 grants to community organizations across the state that provided respite, education, and innovative services to individuals and families impacted by dementia across 14 counties.
- In FY 2025, Cognitive Connection Ministry hosted six workshops across the state with faith-based groups providing education on ADRD and how churches and faith-based communities can support persons living with dementia and their families through dementia-friendly services, memory cafes, respite programs, and other needed services.



## Priority 5: Data & Resources

Goal 5: Improve access to, coordination, and use of ADRD data and resources statewide.

- The South Carolina Alzheimer’s Disease and Related Dementia County-Level Factsheets were distributed to 170 state legislators.
- Clemson University, the Medical University of South Carolina, and the University of South Carolina continue to partner to seek national designation as an NIH Alzheimer’s Disease Research Center (ADRC). While working on the application, the South Carolina ADRC has continued to develop the program, fostering community partnerships and creating initiatives such as its Dementia Seminar Series and the annual SC ARDC Symposium.
- Data from the SC Alzheimer’s Disease Registry has been utilized for research purposes. In FY 25, the registry published several papers in partnership with the ADRC, including one focusing on the longevity within the SC Alzheimer’s Disease Registry. They are also in the process of publishing additional papers, including two that focus on the veteran population and mortality and incidence rates across the state. The 2024 Annual Report, released in March 2025, presented information from 2022 on the incidence and prevalence of ADRD in the state.

# Upcoming Initiatives

In the upcoming year, the implementation of the South Carolina Statewide Plan to Address Alzheimer’s Disease and Related Dementia will continue, building on current activities and introducing new initiatives. The ARCC Advisory Council will continue to grow its list of stakeholders and partnerships. Some of the future strategic activities for this strategic plan include:

## **Improve Access to Care**

Improve post-diagnosis access to care and systems of referral to affordable legal services for families, care partners, and persons diagnosed with Alzheimer’s disease or another cause of dementia.

## **Dementia Training for EMS**

The Alzheimer’s Association will meet with SC EMS and the SC Fire Association to develop and propose a localized Alzheimer’s and Related Dementia training program.

## **Involvement of Persons Living with Dementia and their Care Partners**

The Alzheimer’s Resource Coordination Center, its advisory council, and subcommittees will work to include the voices of persons living with dementia and their care partners more actively in the activities of the Statewide Plan.

## **Education on Mild Cognitive Impairment (MCI) and Cognitive Impairment**

Efforts will be made to provide more education on MCI and cognitive impairment

## **Advocate for Increased Professional Education**

Efforts will be made to increase education on Alzheimer’s disease and related dementia for both current and rising healthcare providers.

## **No Wrong Door System**

Work to consolidate resources for caregivers and persons living with dementia into a “No Wrong Door” system.

# Acknowledgements

Thank you to the dedicated individuals and agencies who played an integral role in helping to implement the goals and tasks of the South Carolina statewide Plan to Address Alzheimer’s Disease and Related Dementia.

## **Members & Support Staff of The South Carolina Department on Aging’s Alzheimer’s Resource Coordination Center, Advisory Council, and Subcommittees, and members of the SC BOLD Implementation Team:**

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*\*Denotes former representative/no longer active on ARCC*