

# South Carolina Residents Speak on Prevention Research

The South Carolina Prevention Research Survey was commissioned by Research!America as part of a multi-year effort to build greater national support for prevention research. Results indicate more than two thirds of South Carolina residents believe the United States spends too little on prevention research. Additional responses indicate there is an overwhelming belief in South Carolina that prevention research is important and is a high priority for it's citizens, particularly as it affects the state's health, education and economy. Research!America has been gauging public opinion on people's attitudes towards medical, health and prevention research since 1992.

## PUBLIC UNDERSTANDING OF PREVENTION

Prevention, as viewed by South Carolina residents, is a multi-faceted concept, encompassing a large range of behaviors. However, some behaviors are viewed as more strongly associated with prevention than others. For example, *avoiding risky behaviors* such as having safe sex (77%), wearing a seat belt (73%), and not smoking (69%) are viewed as the main components of prevention. Receiving *preventive medical care* such as vaccinations (75%), preventive screenings like mammograms or screenings for colon or prostate cancer (65%), and regular physical checkups (63%); *community safety* through youth safety (63%), and safe work practices (62%); and a *healthy lifestyle* through avoiding excessive drinking (67%) are also viewed as important aspects of prevention.

Aspects more moderately associated with prevention include crime-free communities (57%), and protection from bioterrorism (54%) but also lifestyle choices such as eating a healthy diet (55%), exercising (53%), and weight control (53%).

Mental health screening is significantly less associated with prevention than all other aspects. Only about one in three South Carolina residents strongly associate screening for anxiety and depression with prevention (Figure 1).

## Understanding of Prevention

How much do you associate each of the following with prevention?  
% Saying "Associate Very Strongly"

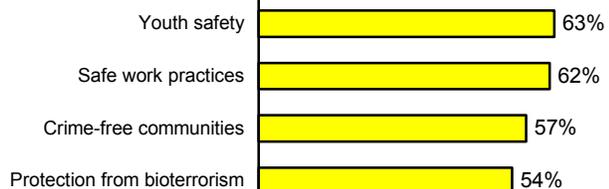
### Avoiding Risky Behaviors



### Preventive Medical care



### Community Safety



### Healthy Lifestyle

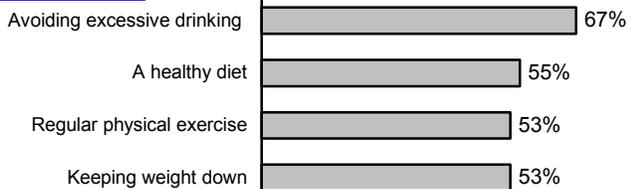


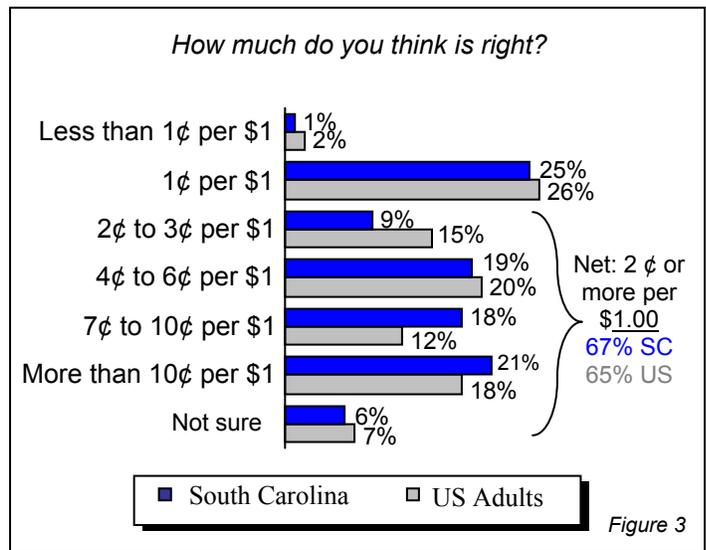
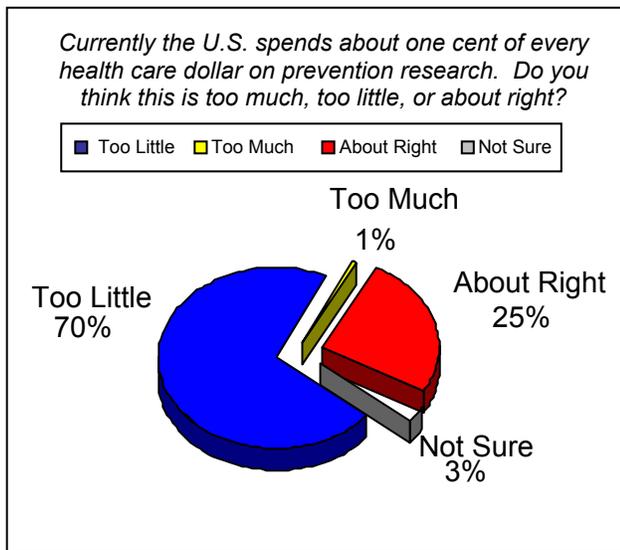
Figure 1

Compared to adults nationwide, South Carolina residents have a somewhat different comprehensive understanding of health prevention. Specifically, South Carolina residents are less likely than adults nationwide to associate prevention with receiving vaccinations (75% SC vs. 79% US), with preventative screenings (65% SC vs. 71% US), and with youth safety (63% SC vs. 71% US). However, South Carolina adults are more likely than adults nationwide to associate not smoking (69% SC vs. 65% US), regular physical checkups (63% SC vs. 58% US), avoiding excessive drinking (67% SC vs. 57% US), and weight control (53% SC vs. 47% US) with health prevention.

**SUPPORT FOR INCREASED FUNDING FOR PREVENTION RESEARCH**

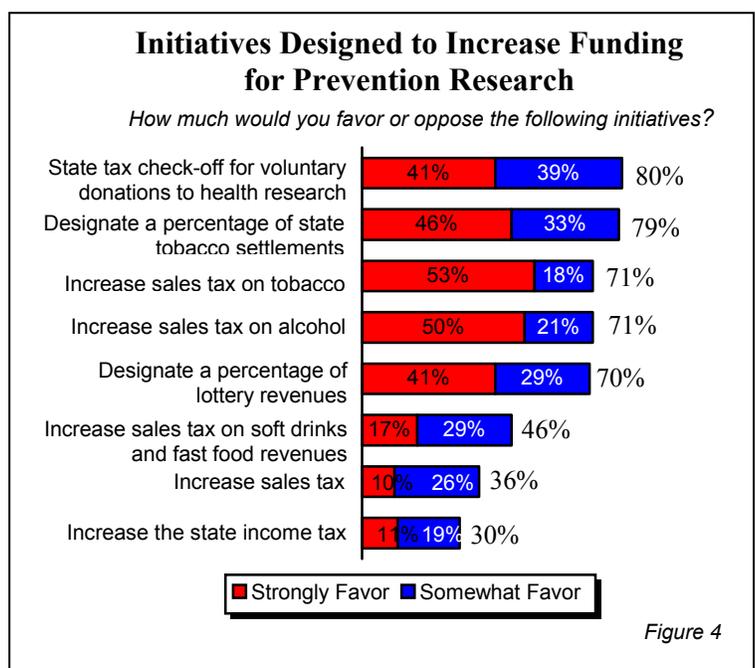
Seven in ten South Carolina residents think U.S. spending on disease prevention research is insufficient. Like the U.S. population overall, the majority of South Carolinians say that it should be at least doubled, meaning the U.S. should spend two cents or more per dollar (Figures 2 and 3).

**U.S. Funding for Disease Prevention Research**



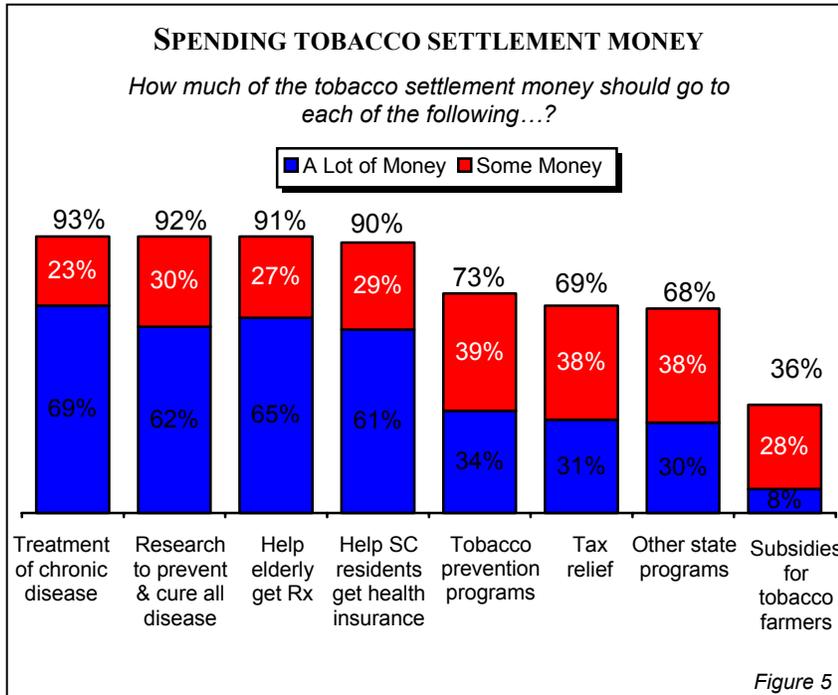
**INITIATIVE TO INCREASE FUNDING FOR PREVENTION RESEARCH**

When presented with a range of initiatives to increase funding for prevention research, the majority of South Carolina residents are in favor of creating a state tax check-off for voluntary donations to health research (80%) and designating a percent of state tobacco settlement funds (79%). Strong support is also indicated for increasing the sales tax on tobacco (71%), alcohol (71%), and designating a higher percentage of lottery sales revenues (70%). In contrast, South Carolina residents are less likely to favor increasing the sales taxes on soft drinks and fast food (46%), and raising the state sales (36%) and income taxes (30%) as ways to increase funding for prevention research



## TOBACCO SETTLEMENT MONEY

Nearly all South Carolina residents think the state tobacco settlement money should be spent on the treatment of chronic disease (93%) and research to find cures for and to prevent all diseases (92%). Helping the elderly get prescriptions (91%) and helping all South Carolina residents get health insurance (90%) are also likely to resonate with a majority of South Carolina residents. Tobacco prevention



programs (73%), tax relief (69%), and other state programs and services such as prisons and support for public schools (68%), are less popular as priorities for spending the tobacco settlement money. Far fewer (36%) support spending some of the state tobacco settlement money on money on subsidies for tobacco farmers (Figure 5).

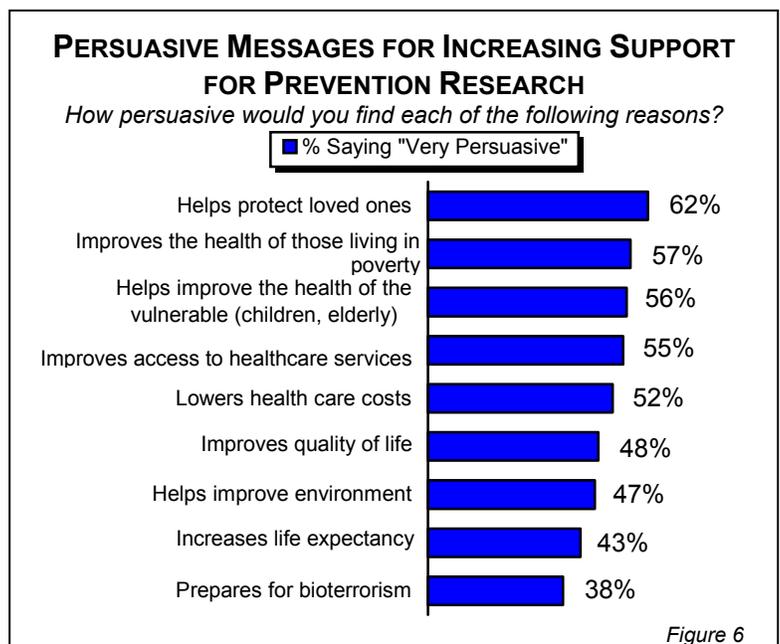
## PERSUASIVE MESSAGES FOR INCREASING SUPPORT FOR PREVENTION RESEARCH

Messages and arguments that are very persuasive in increasing public support for prevention research in South Carolina need to emphasize

that research will help improve the health and well-being of families and loved ones (62%), help improve access to he health care services (57%), and provide health - related benefits to vulnerable populations such as children and the elderly (56%). Improving quality of life (55%) and lowering health care costs (52%) are also likely to resonate with a majority of South Carolina residents. In contrast, messages emphasizing improving the health of the impoverished (48%), improving community environment (47%), and increasing life expectancy (43%) are likely to resonate with fewer than half of South Carolina residents.

Surprisingly, in light of the war and terror attacks, people are least likely to be swayed by arguments about preparing the community to respond to bio-terrorism (38%, see Figure 6).

Compared to adults nationwide, South Carolina residents are more likely to be receptive to messages about improving access to health care services (57% SC vs. 40% US) and messages about lowering health care costs (52% SC vs. 47% US).



### FOCUS OF PREVENTION RESEARCH

How much of a priority for South Carolina should disease and injury prevention research focused on each of these issues be?

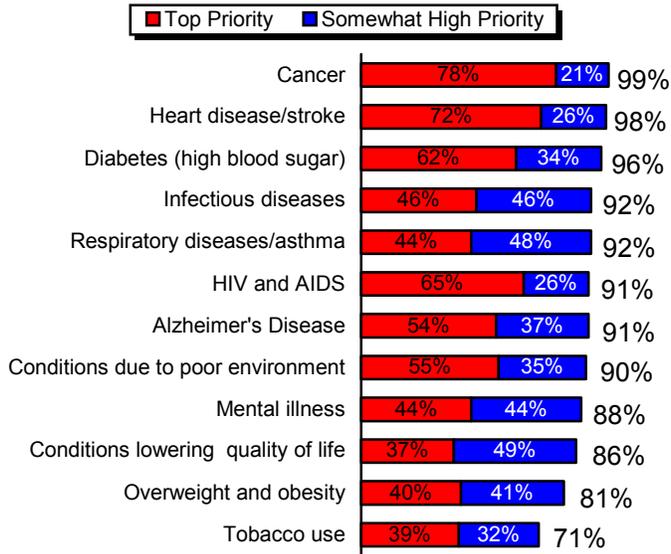


Figure 7

### FOCUS OF PREVENTION RESEARCH

Almost all South Carolina adults believe that disease prevention research focused on cancer (99%) should be a *somewhat high priority* in the state, with more than three in four (78%) believing it should be a *top priority*. Majorities also believe that heart disease and stroke (72%), HIV and AIDS (65%), diabetes (62%), conditions due to poor environment (55%), and Alzheimer's disease (54%) should be *top priorities* for prevention research. While fewer believe infectious diseases (46%), asthma (44%), mental illness (44%), obesity (40%), conditions lowering the quality of life (37%), and tobacco use (39%) should be *top priorities*, significant majorities believe these health issues should be a *somewhat high priority* in South Carolina (Figure 7).

### DISPARITIES IN HEALTH

Nearly all South Carolinians (95%) believe that it is at least somewhat important to conduct medical or health research to understand and eliminate differences in disease and mortality based on income and ethnicity. More than seven in ten (72%) believe that it is very important (Figure 8).

### DISPARITIES IN HEALTH

How important do you feel it is to conduct medical or health research to understand and eliminate differences in health among people with lower incomes and among minorities?

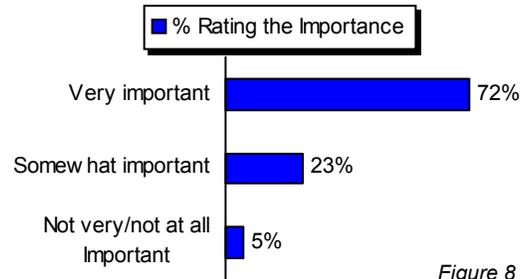


Figure 8

### VOTING IN SUPPORT OF PREVENTION RESEARCH

As with adults in the U.S. as a whole, a large majority of South Carolina residents report that they would be more likely to vote for elected officials who support increased funding for creating more jobs (93%), education (92%), research to cure and prevent disease (90%), and health services and health education programs (89%). Other issues that are slightly less likely to influence South Carolina voters are homeland security (81%), protecting the environment (80%), and public safety (77%). Only about six in ten (59%), but still a majority would be likely to vote for a candidate who advocates increased funding for correctional facilities (Figure 9).

### LIKELIHOOD TO VOTE FOR A CANDIDATE

Would you be more or less likely to vote for a candidate for public office who supported increased funding for...?

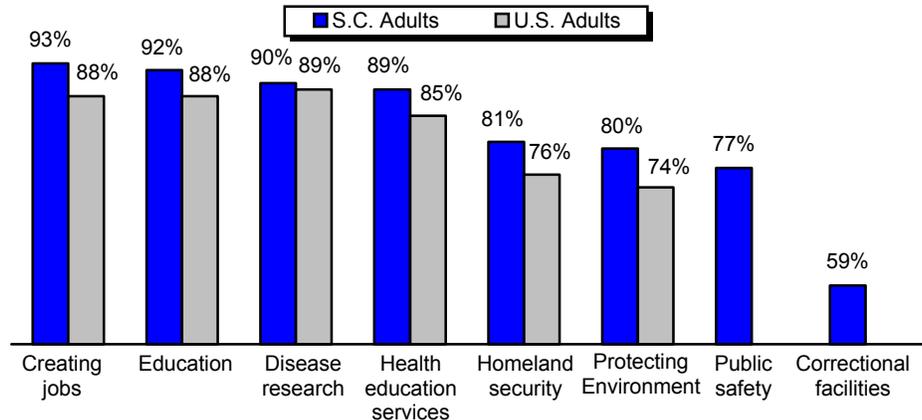


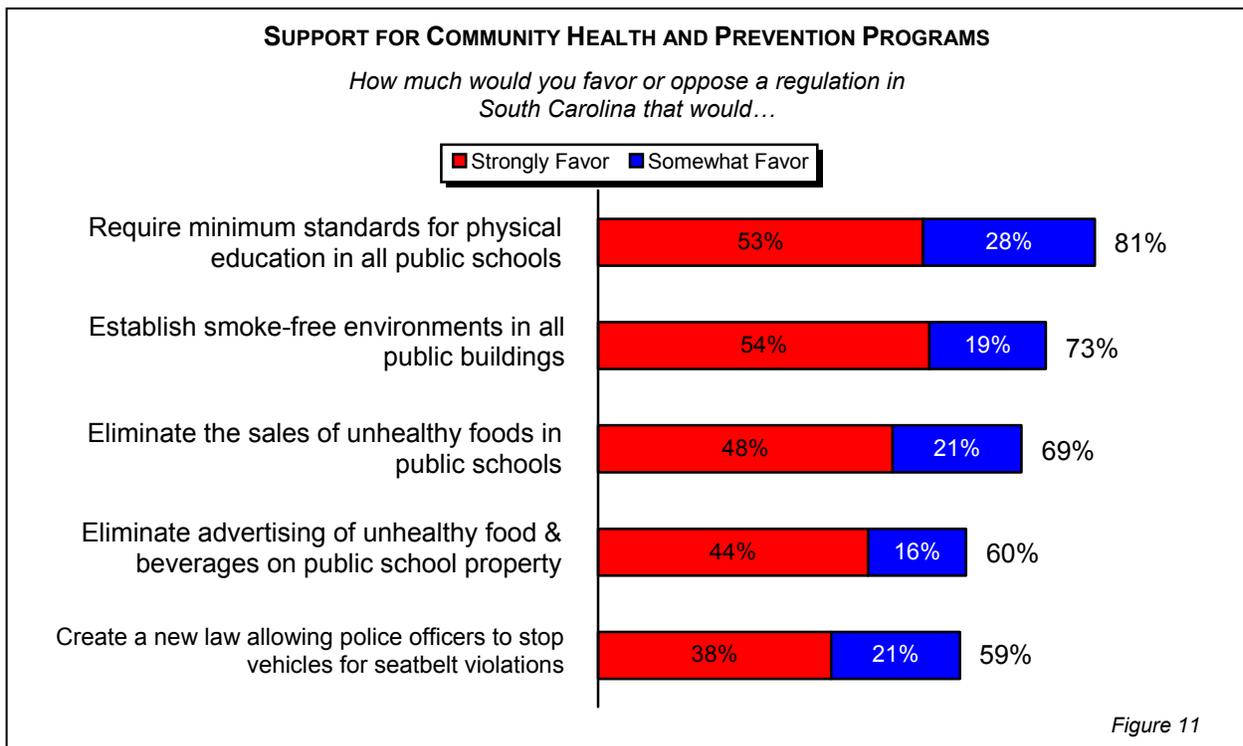
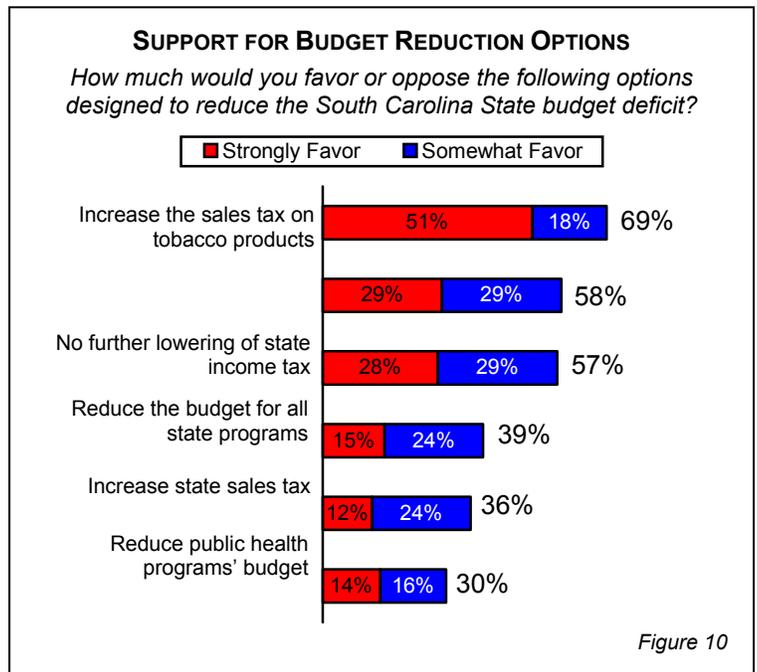
Figure 9

### SUPPORT FOR BUDGET REDUCTION OPTIONS

Almost seven out of ten South Carolina residents at least somewhat favor an increase in the sales tax on tobacco products to reduce the state’s budget problems (69%). Somewhat fewer, but still a majority would be willing to increase the state’s corporate tax (58%), and forgo any further reduction in the state’s income tax (57%). More than one third believes that a reduction in the budget for all state programs (39%) or an increase of the sales tax (36%) would be a good way to fight state’s budget woes. The least popular option to solve the state’s fiscal problems presented to South Carolina residents was a reduction of the budget for public health programs (30%). Fewer than one in three would favor such a cut (Figure 10).

### SUPPORT FOR COMMUNITY PROGRAMS

In South Carolina there is broad support for a range of statewide regulations that target quality of life issues and healthy communities. When presented with a range of regulations, majorities of South Carolinians *strongly favor* establishing smoke-free environments in all public buildings (54%) and establishing minimum requirements for physical education (53%). Many residents *strongly favor* eliminating the sale of unhealthy foods in public schools (48%), eliminating the advertising of unhealthy foods and beverages on public school property (44%), and creating new seat belt legislation (38%). Large majorities of South Carolina residents at least somewhat favor all presented state regulations (Figure 11).



## **METHODOLOGY**

The South Carolina Prevention Research Survey was commissioned for Research!America and is the 11<sup>th</sup> in a series of state surveys conducted for its Prevention Research Initiative, a multi-year effort to build greater national support for disease prevention and public health research. The South Carolina survey was conducted with 801 adults age 18 and older, between June 9<sup>th</sup> and July 16<sup>th</sup>, 2003. Support for this survey was provided by a grant from the Robert Wood Johnson Foundation.

### ***Telephone Sample***

Harris Interactive conducted a 15-minute telephone survey with a representative sample of 801 adults aged 18 years and older. The survey was conducted from the Harris Interactive telephone center between June 9<sup>th</sup> and July 16<sup>th</sup>, 2003. The study relied upon a stratified sampling process to produce representative samples of persons in telephone households in South Carolina. Households were selected through computerized random digit dialing (RDD) generated by Survey Sampling, Inc. assuring that the number of households assigned to each exchange in the “community” was based on the proportion of households in that exchange. Harris Interactive sample makes use of random-digit selection procedures to assure sample representation of persons in households with telephone numbers “listed” in telephone directories, as well as persons in households with telephone numbers that are “unlisted”<sup>1</sup>. The sample design also ensured proper representation of households in different geographic regions of the state and in cities, suburbs and rural areas.

### ***Weighting the Data***

The survey data were weighted by age, sex, race/ethnicity, education, income, Metropolitan Statistical Area (MSA), household size and the number of telephone lines in the household to reflect the demographic composition of the South Carolina population using the *March 2002 Current Population Survey* from the U.S. Census Bureau. Due to rounding, the percentage totals might not always equal the shown net values.

### ***Reliability of Survey Percentages***

In theory, with a probability sample of this size, one can say with 95 percent certainty that the results have a statistical precision of plus or minus 4 percentage points of what they would be if the entire adult population had been polled with complete accuracy.

### ***National Benchmarks***

National benchmark data were collected as part of the Harris Poll, September 2001 (n=1,021) and August 2002 (n=1,011). Additional benchmark data comes from Research!America Survey of the Public conducted by Harris Interactive, December 2000 (N=1,053).

For more information on this or other surveys commissioned by Research!America:  
[www.researchamerica.org](http://www.researchamerica.org)  
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[info@researchamerica.org](mailto:info@researchamerica.org)

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<sup>1</sup> Some households are “unlisted” as the result of a request for an unlisted phone number by the telephone subscriber. Other households are “unlisted” in the published directory because the telephone number was assigned after the publication date of the directory. Samples that are restricted to directory listed numbers only may contain serious sample biases because of the exclusion of various types of unlisted households.