As I was preparing to pen this article, I googled “commonly used acronyms in healthcare” and in 0.98 seconds, 57 million sources appeared on my screen. No worries, this is not about a new healthcare acronym for you to remember. But, while I have your attention, do you know any ALICE people? No, not your sister, niece or distant cousin! You may not realize it but you do know plenty of ALICE – whether you know their names or not, they are all around you and you see them every day.

They are the hard workers who keep South Carolina’s growing economy humming, but who struggle from paycheck to paycheck to pay the rent, daycare and other household bills, and routinely skip the fresh lean protein cuts at the grocery store in favor of less expensive processed meats and cold cuts for their kids. We encounter ALICE people daily where we work and play, working behind cash registers, pushing the wheelchair of discharged patients, checking our tire pressure on our way to a Florida vacation, and caring for our youth and most vulnerable neighbors.

Ten years ago, the United Way launched the ALICE Project to give a voice to the growing number of households in communities, who cannot stretch their dollars far enough to cover basic necessities of life. Further, this initiative provided a framework for corporations, governments and safety net institutions to evaluate the current solutions and discover innovative approaches to create changes that improve the life of ALICE and the wider community.

The term describes a family that is **Assets Limited, Income Constrained, Employed**.

ALICE families are not “poor’ as measured by the federal guidelines. Their income is above the poverty line but not enough to afford a basic household budget of decent housing, childcare, food, transportation, and health care. The experts define this as the “ALICE threshold”.

ALICE households include women and men, young and old, of all races and ethnicities and the common thread among them is daily financial hardship.

There are 1.8 million households in South Carolina (2018) and 15% of them live below the poverty line while ALICE families make up 27% of households, which bring the percentage of families living above the ALICE threshold to 58%. In other words, 42% of the State’s households struggle to make ends meet while 58% live comfortably with no worry of affording the increase in the cost of living in the Palmetto State.

So, what does this have to do with healthcare you may ask? Simply put, the answer is plenty. In the coming editions of this column, we will look into the connection between health outcomes and the factors that affect the lives of ALICE families and the creative solutions health systems are implementing to better their lives.

Please contact me with any feedback you want to share about this topic. You can reach me at villainj@musc.edu.