

North Carolina County Data Profile:

Wake County



Presented by:

Community & Clinical
CONNECTIONS
for Prevention & Health
Branch NORTH CAROLINA
DIVISION OF PUBLIC HEALTH

Prepared by:

UNCHealthySolutions
enhancing public health capacity and strategy

unhealthysolutions.web.unc.edu

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This county data profile was created to ensure local partners in Wake County have information that can be helpful for program planning or when participating in planning activities conducted by other organizations.

The information in this data profile is grouped into several topics:

- A) Demographics..... p. 3
- B) Health Status..... p. 5
- C) Determinants of Health..... p. 6
- D) Health Behaviors..... p. 9
- E) Local Capacity for Change..... p. 10

Each topic begins with a description and suggestions for how to use the information. Indicators listed within each topic are specifically relevant to the PAN Project. Proposals can include additional data or information, especially if the data demonstrate local need or capacity for response.

Each indicator includes a definition and a source for the information. The county data are presented and compared to averages for the state of North Carolina. For most indicators, bar charts are included to provide a quick visual comparison between the county and state.

To identify indicators where the county data are notably different from the state average (i.e., more than one standard deviation from the state mean, median, or mode), we provide a letter in the margin to the left of the county bar chart (**B = county is better** than the state average; **W = county is worse** than the state average).

- B** Better than average
- W** Worse than average

A. Demographics

Governments, private organizations, community groups, and researchers use demographics to describe a population’s characteristics. Key items include the land area; the number and sizes of municipalities; the population size; distributions by age, race, and sex; income and education levels; and key businesses and industries. **HOW TO USE THIS INFORMATION:** when identifying priority populations for assessment, service-delivery, or funding, and when identifying inequities that need attention.

1. Population

Wake County	1,150,722	Number of residents. Source: NC Office of State Budget and Management (OSBM) (2021)
County average in NC	52,071 ^a	

2. Area (square miles)

Wake County	835	Square miles of land. Source: NC Office of State Budget and Management (OSBM) (2020)
County average in NC	460 ^a	

3. Number of municipalities

Wake County	15	Number of municipalities. Source: NC Office of State Budget and Management (OSBM) (2021)
County average in NC	6 ^a	

4. Number of large cities

Wake County	3 (Cary, Durham, Raleigh)	Number of municipalities listed in the CDC 500 Cities Project, which provided health-related data about the 500 largest cities in the United States. Source: CDC (2019)


5. Average annual wage

B 	Wake County	\$65,045	Average annual full-time salary. Source: NC Office of State Budget and Management (OSBM) (2020)
	County average in NC	\$40,271 ^a	

6. Level of economic well-being (1 is most distressed, 3 is least)

B 	Wake County	3	Economic tier designation by NC Department of Commerce. Source: NC Department of Commerce (2023)
	County average in NC	2 ^a	

7. Percentage of families with children under age 5 living in poverty

	Wake County	9%	Growing up in poverty is an adverse childhood experience that can negatively influence health outcomes for the rest of a person's life. Source: US Census Bureau, American Community Survey (2020)
	County average in NC	16% ^a	

8. Race/ethnicity

Wake County		County average in NC
57%	White	60%
18%	Black/African American	20%
11%	Hispanic/Latino	11%
9%	Asian	3%
<1%	American Indian/ Alaska Native	<1%
<1%	Native Hawaiian/ Pacific Islander	<1%
<1%	Other Races	<1%
4%	Multiple Races	4%

a Race and ethnicity of county residents.

Source: US Census Bureau (2020)

9. Sex

Wake County		County average in NC
51%	Female	51%
49%	Male	49%

a Sex of county residents.

Source: US Census Bureau, American Community Survey (2020)

10. Level of education

Wake County		County average in NC
7%	Less than high school graduate	12%
16%	High school graduate/equivalent	26%
27%	Some college or associate's degree	33%
50%	Bachelor's degree or higher	29%

a Level of education attained by adults (18 years and older).

Source: US Census Bureau, American Community Survey (2020)



11. Primary language

Wake County		County average in NC
83%	English	88%
8%	Spanish	8%
4%	Other Indo-European languages	2%
4%	Asian and Pacific Island languages	2%
2%	Other languages	<1%

a Primary language spoken at home.

Source: US Census Bureau, American Community Survey (2020)

12. People with limited English proficiency

	Wake County	6%
	County average in NC	4%

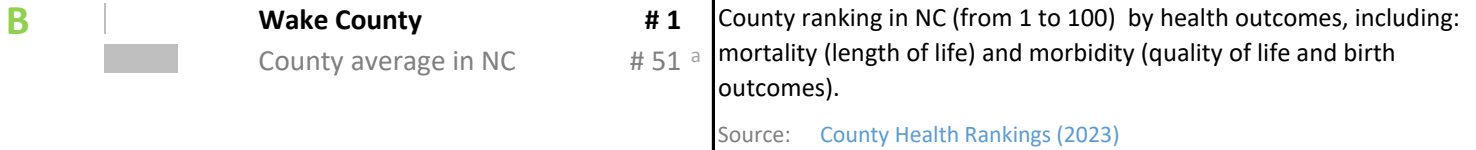
a Percentage of residents (5 years and older) who speak English "less than very well."

Source: US Census Bureau, American Community Survey (2020)

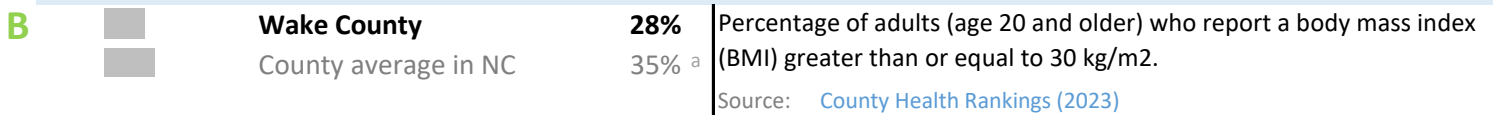
B. Health Status

The health status of a population might include information about causes of death (mortality) or chronic disease or injury (morbidity), and the impact each can have on the general quality of life experienced in a community. Some indicators of health status are “indexes,” which combine multiple items together. **HOW TO USE THIS INFORMATION:** when describing the health needs of a community to decision-makers or funders so they understand why intervention is needed.

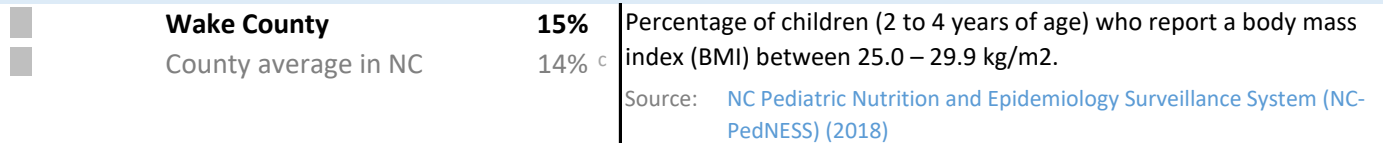
1. County ranking in NC by health outcomes (1 is best, 100 is worst)



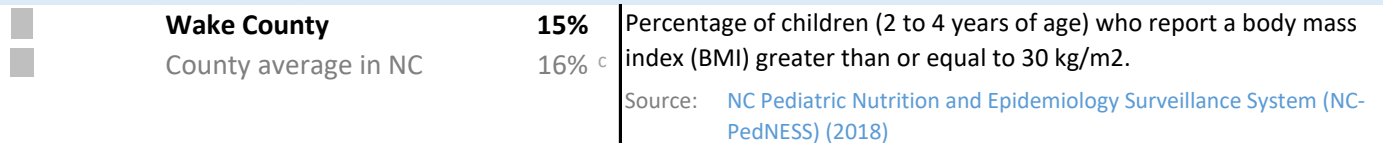
2. Percentage of adults who are obese



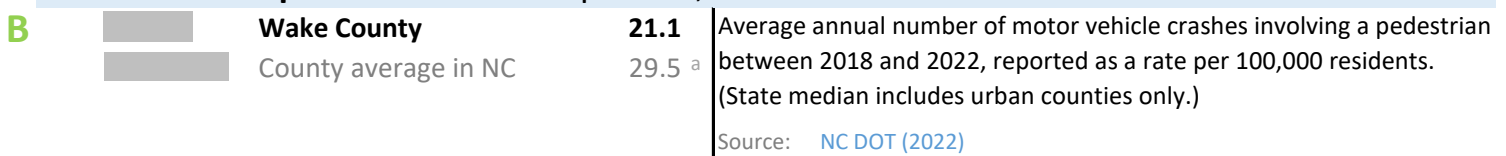
3. Percentage of 2-4 year olds who are overweight



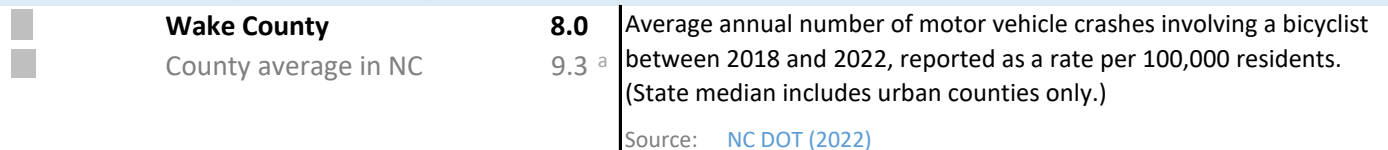
4. Percentage of 2-4 year olds who are obese



5. Number of pedestrian crashes per 100,000 residents



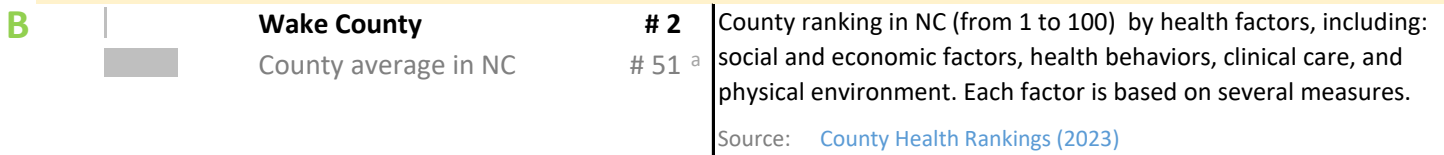
6. Number of bicycle crashes per 100,000 residents



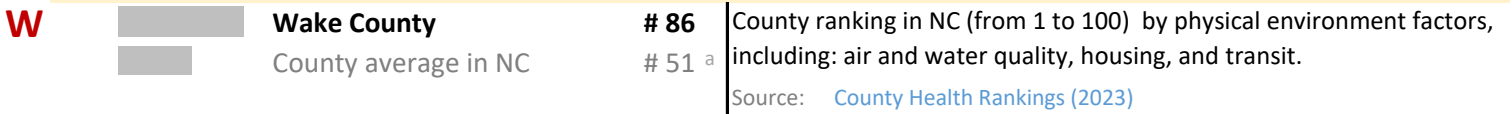
C. Determinants of Health

The health of a population is an outcome or result of many things, including the natural and human-created environments in which people live, work, learn, play, and pray, from the micro environment inside a building to the macro environment of an entire city. These environments, and the way people and organizations conduct their activities in these environments, are governed by policies such as laws and regulations. Some of these environments and policies are a part of larger systems (e.g., education, transportation, health care, and the local economy), which structure the world around us and influence our choices. For that reason, environments, policies, and systems are called “determinants” of health. **HOW TO USE THIS INFORMATION:** when identifying to stakeholders and funders the underlying structural causes of health outcomes or health inequities which will need improvement in order to support healthy living.

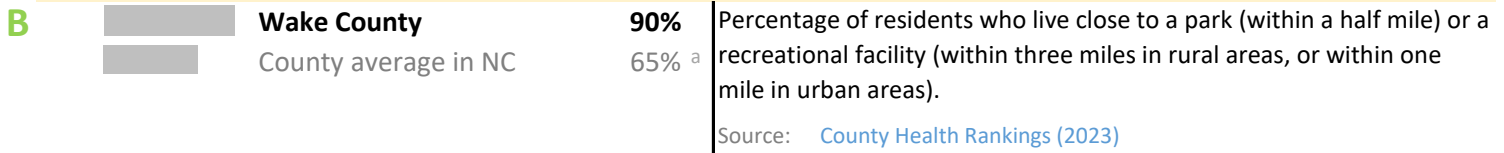
1. County ranking in NC by **health factors** (1 is best, 100 is worst)



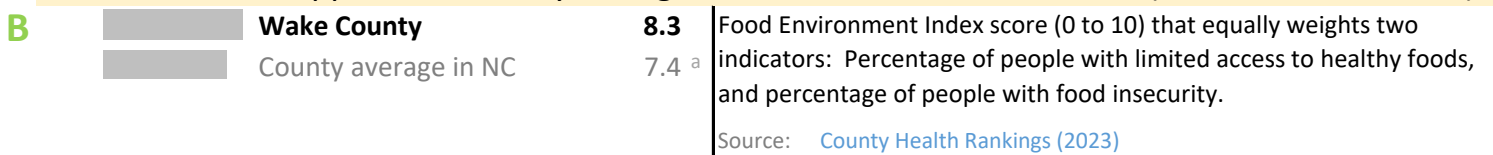
2. County ranking in NC by **physical environment** (1 is best, 100 is worst)



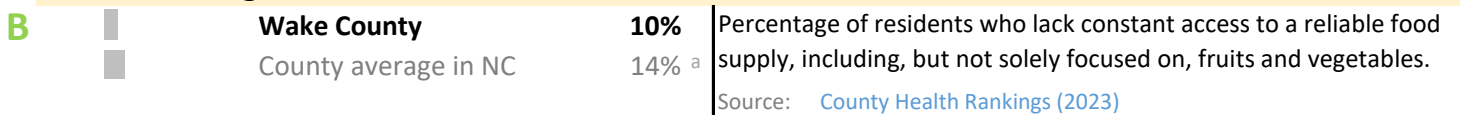
3. Percentage of residents who live close to a **park or recreational facility**



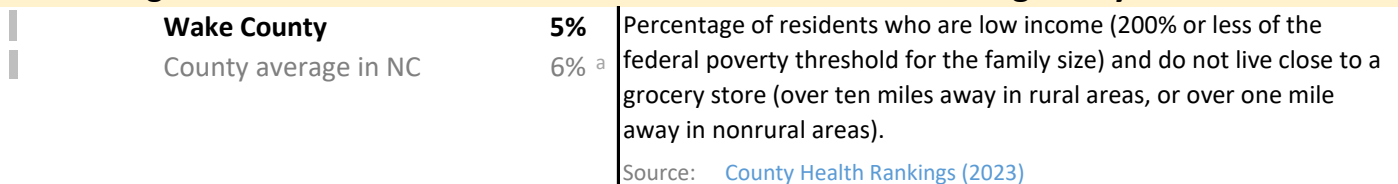
4. Amount of support for healthy eating in the local **food environment** (0 is worst, 10 is best)



5. Percentage of residents who **lack access to reliable food sources**



6. Percentage of low income residents who have **limited access to a grocery store**



7. Number of facilities that serve food per 1000 residents

	Wake County	0.2	(n=248)
	County average in NC	2.5 ^a	(n=175)
Types of facilities in county	Restaurants (including Drink Stand)	0.2	(n=188)
	Food Stands	0.04	(n=42)
	Mobile Food Units	0.006	(n=7)
	Institutional Food Service	0.001	(n=1)
	Limited Food Service	0	
	Educational Food Service	0.005	(n=6)
	Pushcarts	0.003	(n=3)
	Commissary for Pushcarts & Mobile Food Units	0	
	Elderly Nutrition Sites (catered)	0.001	(n=1)
	Elderly Nutrition Sites (food prepared on premises)	0	

Number of facilities where food is served per 1000 residents (and total number of facilities).
 (Note: for more information about names of food service establishments, contact the county health department, environmental health services/inspections section.)

Source: [NC DPH, Environmental Health Section \(2023\)](#)

8. Number of subsidized childcare facilities per 1000 families with small children living in poverty

	Wake County	12.8	(n=322)
	County average in NC	7.5 ^a	(n=23)

Number of subsidized childcare facilities per 1000 families below the poverty line with children under age 5 (and total number of subsidized facilities).
 Childcare facilities allow parents to pursue education, employment, and other opportunities, but many parents cannot afford childcare unless it is subsidized by public, non-profit, or private sectors.

Source: [US Census; NC DHHS Division of Child Development and Early Education \(2023\)](#)

9. Number of resources that support breastfeeding per 1000 residents

	Wake County	0.0	(n=28)
	County average in NC	0.1 ^a	(n=3)
Types of resources in county	WIC	0.001	(n=1)
	Hospitals	0.003	(n=4)
	Peer Support Groups	0.007	(n=8)
	Other groups/practices	0.003	(n=3)
	BF Research/Grant Programs	0.002	(n=2)
	Lactation services		
	Clinic based	0.003	(n=4)
	Private practice	0.002	(n=2)
	Clinicians performing frenotomy	0.002	(n=2)
	Online BF support groups	0.001	(n=1)
	Non-WIC HD	0	
	Community Birth Centers	0.001	(n=1)
	IBCLC Training/Mentoring	0	

Number of resources that provide support for breastfeeding per 1000 residents (and total number of resources).

Source: [North Carolina Breastfeeding Coalition \(2018\)](#)

10. Workers with no vehicle in household

	Wake County	1.7%	Percentage of workers (age 16 and older) with no vehicle available. Source: US Census Bureau, American Community Survey (2020)
	County average in NC	2.2% ^c	

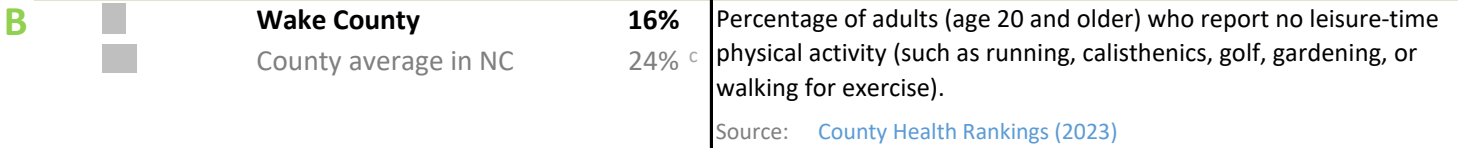
11. Households with severe housing problems

	Wake County	12.0%	Percentage of households with overcrowding, high housing costs, lack of kitchen facilities, or lack of plumbing facilities. Source: County Health Rankings (2023)
	County average in NC	14.4% ^c	

D. Health Behaviors

A population’s behaviors provide information about how people respond to their physical environment and other structural determinants in their community settings. Without health-supporting structures, it is difficult for a community to adopt healthy behaviors. **HOW TO USE THIS INFORMATION:** when describing the lifestyle of a community and providing the rationale for structural improvements.

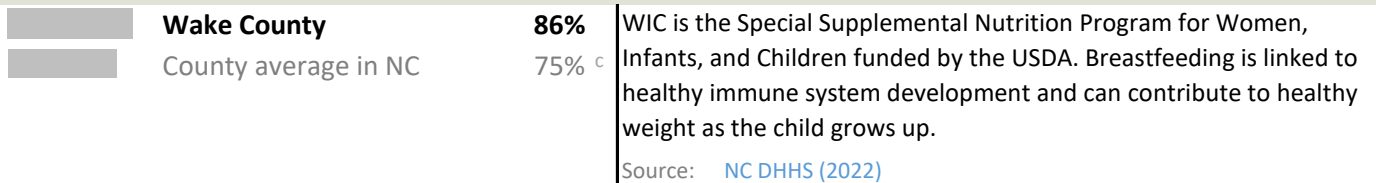
1. Percentage of adults who are **physically inactive**



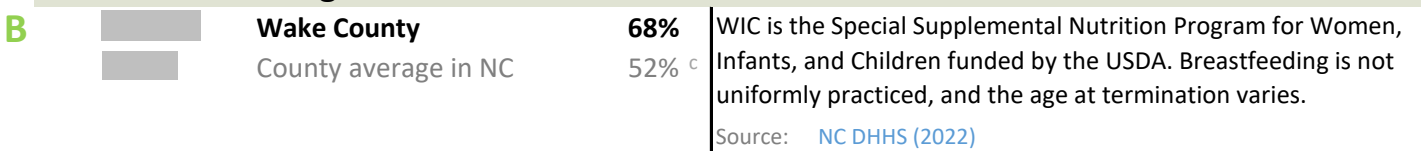
2. Percent change in **pedestrian and bicycle activity** in monitored locations

Monitoring locations	25	Percentage increase or decrease in the number of people observed walking and bicycling in certain locations in North Carolina (2018-2022). Walking and bicycling are healthy behaviors, and research has helped fund ongoing monitoring of such activities. Source: Institute for Transportation Research (ITRE) (2022)
Pedestrian change	-44.4%	
Bike use change	+11.2%	

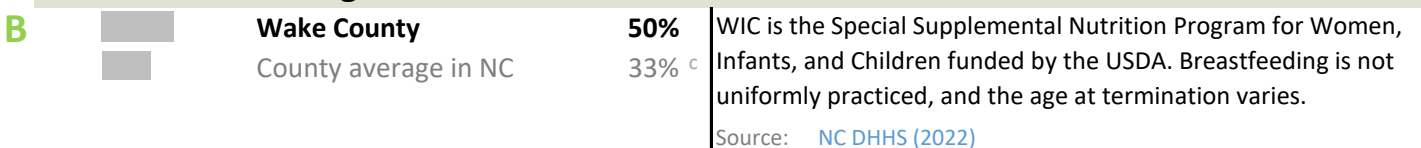
3. Percentage of women in the local WIC program who **initiate breastfeeding**



4. Percentage of women in the local WIC program who breastfeed their infants up to **six weeks of age**



5. Percentage of women in the local WIC program who breastfeed their infants up to **six months of age**



E. Local Capacity for Change

A community’s capacity for change is founded on the people with knowledge about a community’s needs and the strengths to address them. The information they have gathered through assessments, the ideas they have explored or piloted, and their relationship networks are all capacity-enhancing items. **HOW TO USE THIS INFORMATION:** when informing decision-makers, funders, and other stakeholders about the local knowledge, skills, and talents that could contribute to intervention and health improvement efforts.

1. Which **Healthy Communities Strategies** were selected for implementation by the local (or regional) health department?

Active Transportation	no
Breastfeeding Friendly Designations/Awards	no
Healthy Food Access in Community Venues	yes
Suicide Prevention	no
Syringe Exchange Programs	no
Tobacco-Free Policies	yes

The Healthy Communities Program provides funds to local health departments that work with community partners to address chronic disease and injury risk factors through policy changes and environmental supports. Health departments choose which strategies to implement from the Healthy Communities Program.

Source: [NC DHHS \(2021\)](#)

2. Location of **Department of Social Services (DSS) office**

Raleigh

The Division of Social Services provides guidance and technical assistance to agencies that directly address issues of poverty, family violence, and exploitation.

Source: [NC DHHS \(2023\)](#)

3. Number of **YMCA locations**

Wake County **11**

The YMCA is a long-standing institution in the United States that has facilities and programming in many local communities.

Source: [NC Alliance of YMCAs \(2023\)](#)


4. Number of **YMCA camps**

Wake County **1**

The YMCA is a long-standing institution in the United States that has outdoor and activity camps in many local communities.

Source: [NC Alliance of YMCAs \(2023\)](#)


5. Number of **community and technical colleges**

B  **Wake County** **3**
County average in NC **1** ^a

Community colleges, technical colleges, and other institutions authorized to award Associate degrees or 2-year certificates.

Source: [National Center for Education Statistics \(2023\)](#)

6. Number of **historically Black colleges and universities (HBCUs)**

B  **Wake County** **2**
County average in NC **0** ^a

Historically Black colleges and universities (HBCUs) are institutions that were established prior to 1964 with the principal mission of educating Black Americans.

Source: [National Center for Education Statistics \(2023\)](#)

7. Number of Federally Qualified Health Centers (FQHCs) per 100,000 residents

	Wake County	1 (n=13)	Health centers receive federal grant funding to improve the health of underserved populations, including individuals and families experiencing homelessness, migratory and seasonal agricultural workers, and residents of public housing.
	County average in NC	6 (n=4) ^a	
Source: NC DHHS; US DHHS Health Resources & Services Administration (HRSA) (2023)			

8. Number of food pantries

B	Wake County	34	Number of food banks, soup kitchens, and food pantries in the county.
	County average in NC	3 ^a	
Source: Food-banks.org (2023)			

9. Number of Food Councils

	Wake County	1	Local food councils are community-based coalitions, often organized by county, that facilitate collaboration to improve health, food access, and local food economies.
Source: NC Food Councils Network (2023)			

10. Number of grocery stores participating in Produce Rx

B	Wake County	14	The Produce Rx program allows healthcare providers to prescribe fruit and vegetables to patients diagnosed with pre-diabetes, diabetes, or hypertension. Patients are given monthly funds to purchase fresh fruits and vegetables at participating grocery stores.
	County average in NC	0 ^a	
Source: DC Greens (2023)			

11. Number and locations of Women, Infants and Children (WIC) program offices

Number of WIC program offices:	7	WIC is the Special Supplemental Nutrition Program for Women, Infants, and Children funded by the USDA. WIC provides nutritious foods, breastfeeding promotion and support, nutrition education, and health care referrals for women and children.
Locations:	Cary, Durham, Fuquay-Varina, Raleigh, Wake Forest, Zebulon	
Source: WicPrograms.org (2023)		

12. Does the county have a Children's Developmental Services Agency (CDSA)?

Yes	Local Children's Developmental Services Agencies (CDSAs) help families, caregivers, and professionals serve children with special needs through the NC Division of Public Health's Infant Toddler Program.
Source: NC DHHS (2023)	



13. Does the county have a Child Care Resource and Referral (CCRR) Agency?

Yes	The Child Care Resource & Referral (CCR&R) Council provides a set of services that facilitate access to early care, education, and child care options for families; improve the quality of those options; and provide objective information for planning and policy development.
Source: NC Child Care Resource & Referral Council (CCR&R) (2023)	



14. Does the county have a Shape NC Center?

Yes | The *Shape NC: Healthy Starts for Young Children* initiative assists communities and child care centers in developing environments, practices, and policies that promote healthy eating and active learning among pre-kindergarten children.
Source: [Smart Start \(2021\)](#)



15. Number of children enrolled in early child care (per 100 children <13)

	Wake County	13	Average number of children enrolled in child care for every 100 children under age 13 in the county. Source: NC DHHS (2022)
	County average in NC	13 ^a	

16. Number of NC Child Care Health Consultants (CCHCs)

B  **Wake County** **8** | Child Care Health Consultants (CCHCs) are health professionals who work with child care staff to promote healthy and safe environments for young children.
 County average in NC 1 ^a
Source: [NC Child Care Health and Safety Resource Center \(2023\)](#)

17. Number of Head Start Centers

B  **Wake County** **9** | Head Start programs support children’s growth and development through services including early learning, health, and family well-being.
 County average in NC 3 ^a | Head Start and Early Head Start programs provide services to children in every U.S. state and territory, in farmworker camps, and in tribal communities.
Types of centers in county

Head Start	1
Early Head Start	3
HS & EHS	5
Migrant & Seasonal	0
American Indian & Alaska Native	0

Source: [US DHHS, Head Start Early Childhood Learning & Knowledge Center \(2023\)](#)

18. Area served by the local Smart Start partnership

County | Each Smart Start partnership is an independent, nonprofit organization. Local partnerships use independent data to assess child-well being and offer programs and services, depending on local needs. Partnerships can be county or multi-county. See the link below to find the local Smart Start partnership.
Source: [Smart Start \(2023\)](#)