



# 2010 Wake County Community Assessment



Opportunities  
& Challenges



Executive Summary

WAKE COUNTY  
North Carolina

# Acknowledgements

**Project Sponsor,** Ramon Rojano, Director, Wake County Human Services

**Co-Project Managers,** Petra Hager, Lechelle Wardell, Wake County Human Services

## Co-Chairs of the Wake County Community Assessment Steering Committee

Lindy Brown, Wake County Commissioner; Doug Vinsel, President, Duke Raleigh Hospital

## Steering Committee Members

Laura Aiken  
Advocates for Health in Action Coalition

Albert Fisher  
Community Partnerships, Inc.

Ramon Rojano  
Wake County Human Services

Folami Bandele  
Healthy Wake Coalition

Julie Garza  
Radio Station La Ley

Cecilia Saloni  
El Pueblo

Bill Bingham  
Interfaith Alliance

Gail Holden  
GOLD Coalition

Harvey Schmitt  
Raleigh Chamber of Commerce

Leigh Brady  
State Employees Credit Union

Sig Hutchinson  
Sig Hutchinson & Associates

Stephen Scott  
Wake Technical Community College

Sandy Briscar  
Peace College

Howard Johnson  
President, Cary Chamber of Commerce

Robert Seligson  
North Carolina Medical Society

Kevin Cain  
John Rex Endowment

Vivian Jones  
Mayor, Town of Wake Forest

Phyllis Stephens  
Wake County Sheriff's Office

Frank Cope  
Wake County Community Services

Anna Karame  
Hispanic Chamber of Commerce

Jay Strickland  
Chair of Board of Directors, Garner  
Chamber of Commerce

David Cottengim  
Gold Coalition

Jacqueline Kehinde  
Choices for Children

David Strong  
President, Rex Healthcare

Anna Cunningham  
Consumer & Family Advisory Committee

Matthew Livingston  
Town Manager, Town of Rolesville

Dianne Suber  
President, St. Augustine's College

Jose Cusicanqui  
Que Pasa

Lenwood Long  
Chair, Northern Regional Center

Mary Lou Todd  
Town Manager, Town of Garner

Pamela Dowdy  
Wake County Smart Start

Robert Matheny  
Mayor, Town of Zebulon

Rob Turner  
Holly Hill Hospital

Joe Durham  
Wake County Deputy Manager

Brent Myers  
Wake County Public Safety

Penella Washington  
Wake Health Services

Frank Eagles  
Mayor Town of Rolesville

Drew Moritz  
Raleigh Chamber of Commerce

Dr. Susan Weaver  
WakeMed Hospital

Frank Edwards  
Consumer & Family Advisory Committee

Sharon Peterson  
Wake County Community Services

Lucille Webb  
Strengthening the Black Family, Inc.

Manfred Emmrich  
Employment Security Commission

Regina Petteway  
Wake County Human Services

John Whitson  
Town Manager, Town of Morrisville

Tommy Esqueda  
Wake County Environmental Services

Barry Porter  
Triangle Area Chapter - American  
Red Cross

Mark Williams  
Town Manager, Town of Wake Forest

Jan Faulkner  
Mayor, Town of Morrisville

Ronnie Williams  
Mayor, Town of Garner

## Community Assessment Core Team

Petra Hager, Lechelle Wardell, Gladys Bonilla, Ida Dawson, Sonya Reid, Sharon Peterson, Darryl Blevins, CJ Harper, Kate Shirah, Nathaniel Goetz, Wil Glenn, Anna Purdy, Edie Alfano-Sobsey, Carla Piedrahita, Brian Gunter

## Subcommittee Co-Chairs

**Behavioral & Social Health** Dr. Donald Rosenblitt, Lucy Daniels Center

**Economic Health** Annemarie Maiorano, Wake County Housing and Community Revitalization;  
Jenny Mizelle, Town of Holly Springs

**Environmental Health** Andre Pierce, Wake County Environmental Services

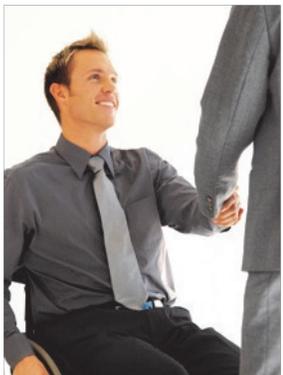
**Lifelong Learning** Samuel Strickland, Wake Technical Community College

**Physical Health** Kevin Cain, John Rex Endowment

**Primary Data Collection** Karen Morant, Sonya Reid, Wake County Human Services

**Safety** Shenekia Weeks, Wake Gang Prevention Partnership

**Secondary Data Collection** Caroline Harper, Wake County Human Services; Nathaniel Goetz, Triangle United Way



**December 1, 2010**

Wake County Citizens,

Wake County is consistently ranked as one of the top places in the United States, and we like to boast that it is a great place to live, work, play and raise a family.

As our County continues to evolve and grow we must make sure that we take the necessary steps to ensure that the needs of all our citizens are being monitored and evaluated. We realize that when it comes to public health, the community itself is the patient and the health of the community must be assessed by focusing on key areas such as behavioral and social health, economic health, environmental health, lifelong learning, physical health and safety.

Every four years, Wake County conducts a comprehensive community examination through a state-developed process known as the Community Health Assessment (CHA). This document is the result of a collaborative effort that involved a community steering committee, Wake County Human Services and input from a broad group of Wake County citizens. While this report provides a snapshot of the community's overall health, it also meets requirements for state accreditation of local health departments and the state consolidated contract with local health departments.

The data in these pages results from community surveys and focus groups attended by Wake County residents, and data gathered from dozens of sources, including the State Center for Health Statistics, Centers for Disease Control and Prevention, and Wake County databases. The County will use the findings from the CHA to develop a collaborative community Action Plan that will address identified priority issues.

Through the Action Plan we will work together as a community to develop a plan for a healthier, safer community, while having a better idea of where we need to focus our resources over the next four years.

This report is another example of government partnering with citizens as we prepare and plan for a better tomorrow. We hope you find this document informative, as we continue to find the best ways to invest in our most precious commodity – our people.

Sincerely,



*Lindy Marshall Brown*

Lindy Brown



*Doug Vinsel*

Doug Vinsel

Co-Chairs of the Wake County Community Assessment Steering Committee

## A Closer Look: Methodology

A community assessment is a process that helps to identify factors affecting our County, determine resources needed to address these factors and develop a plan of action to address community needs. The 2010 assessment process included citizen surveys, focus groups, workgroups and community meetings which will culminate in a strategic planning process to generate a four-year action plan for the County. Over the past year and a half, a Steering Committee – composed of more than 50 members representing faith-based organizations, hospitals, local governments, schools, media, non-profit organizations and businesses – worked to direct the activities of the assessment process and provide input on issues of interest. The committee was chaired by Wake County Commissioner Lindy Brown and the President of Duke Raleigh Hospital, Doug Vinsel.

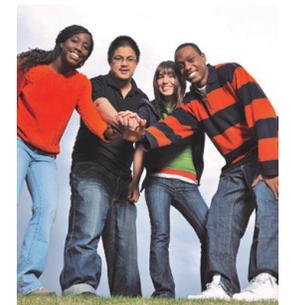
A core team, comprised of Wake County staff and community partners, was formed to ensure that the assessment was completed, to provide staff for the collection of data and to engage community partners. Work groups composed of experts from the community gathered and reviewed data and produced chapters of the Community Assessment report covering six areas:

1. Behavioral and Social Health
2. Economic Health
3. Environmental Health
4. Lifelong Learning
5. Physical Health
6. Safety

Information used by the work groups came from secondary data, community surveys and community focus groups. From August 2009 – February 2010, the North Carolina Institute for Public Health, in collaboration with Wake County staff, completed 1,349 random surveys across the County. Additionally, 34 focus groups, including five in Spanish, were completed from April – July 2010, reaching 292 residents. Secondary data was collected, reviewed and interpreted from dozens of sources, including 2000 Census, the Centers for Disease Control and Prevention, the State Center for Health Statistics, the North Carolina Behavioral Risk Factor Surveillance Survey and Wake County Databases, (Census data for 2010 was not available at the time of this report).

The Community Assessment presented by the six work groups builds the foundation for: the creation of the “Wake County Community Assessment Action Plan,” initiated by hundreds of community partners during three Community Prioritizing Meetings, held on November 4, 9 and 15, 2010 and one Business Community meeting, held November 23, 2010; ongoing discussions for planning and the development of strategies to be implemented by and for community stakeholders – in collaboration or on their own – including business, government, hospital, nonprofit, education and faith-based organizations; providing benchmark information for measuring our community’s success and progress in seizing opportunities and meeting our challenges.

The many hours volunteered by the Steering Committee, workgroups and Core Team, as well as the input provided by thousands of Wake County residents, have assured that this Assessment presents an accurate picture of issues needing attention and provides a solid basis for the Action Plan for our community for the next four years.



## Zone Priorities for Action

On November 4, 9 and 15, over 250 community stakeholders, including business, nonprofit, government, education, hospital, faith-based and citizen representatives came together to evaluate the most critical needs to be addressed across the county and to establish these needs as priorities for action. Because the needs of Wake County communities vary greatly across the county, specific priorities were established based on geographic location. **Some of the priorities for action include:**

### Eastern Wake County

1. Lack of Health Insurance
2. Unemployment

### Southern Wake County

1. Unemployment
2. Overweight and Obesity

### North Raleigh

1. Overweight and Obesity
2. Poverty

### Northern Wake County

1. Overweight and Obesity
2. Lack of Health Insurance

### Western Wake County

1. Overweight and Obesity
2. Lack of Affordable Childcare

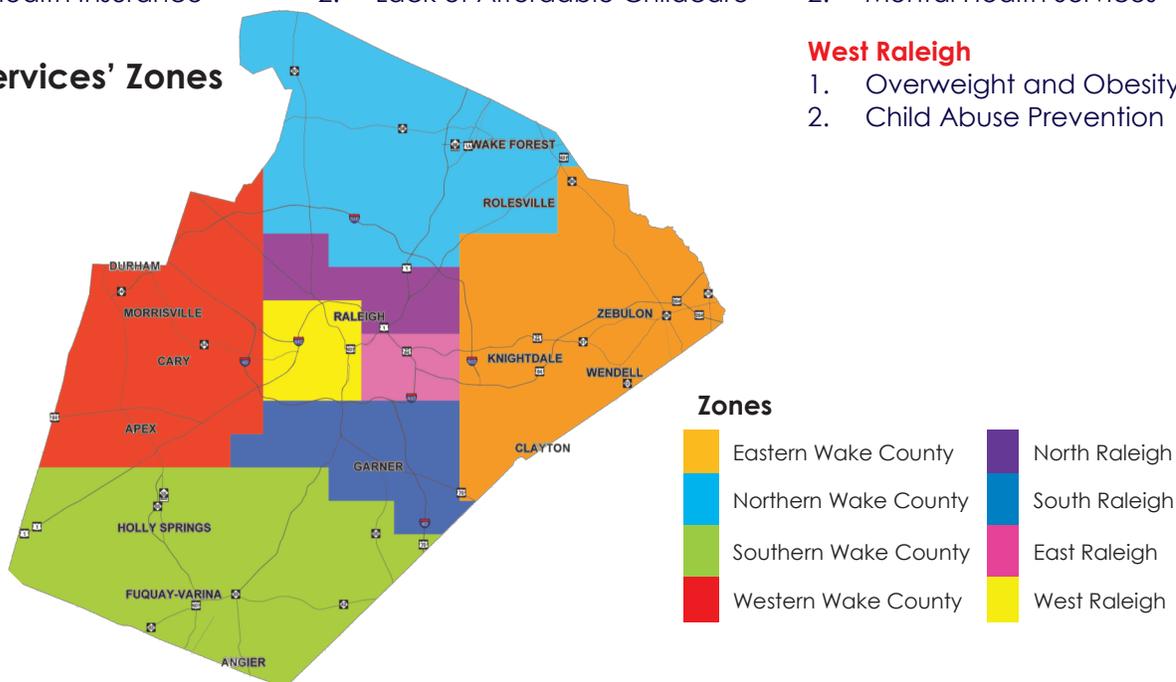
### South and East Raleigh

1. Lack of Health Insurance
2. Mental Health Services

### West Raleigh

1. Overweight and Obesity
2. Child Abuse Prevention

## Human Services' Zones



## County Priorities for Action

After priorities were established in each of the eight zones, county wide priorities for action were determined based on the number of zones in which an issue was selected and the importance each zone placed on the issue.

### Overall County priorities for action were:

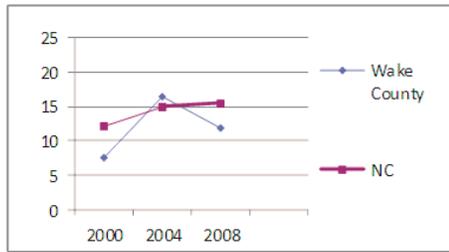
1. Overweight and Obesity
2. Lack of Health Insurance
3. Unemployment

Below you will find selected data related to each of the County priorities for action.

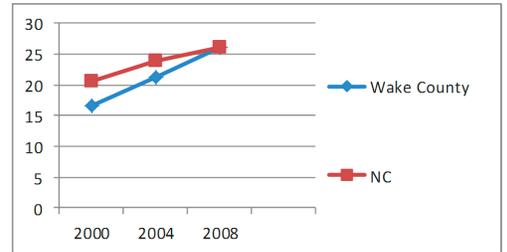
### Overweight and Obesity

- Obesity/overweight was ranked # 1 as the most important health issue in the 2010 Wake County Community Assessment Survey [Source: Schwantes, T. et al, 2010]
- Lack of exercise was ranked # 5 among the most important risky behaviors observed to be of major concern. [Source: Schwantes, T. et al, 2010]
- After a period of increase, the percentage of Wake County children ages 2 - 4 who are obese has leveled off and begun to decrease among children receiving services at Wake County Human Services. However, the percentage of older Wake County children ages 5 - 11 years (receiving Wake County Human Services) who are obese has continued to rise.

**Percentage of children ages 2-4 who are obese**  
(NC Statewide and County Trends in Key Health Indicators)



**Percentage of children ages 5-11 who are obese**  
(NC Statewide and County Trends in Key Health Indicators)



**Lack of Health Insurance**

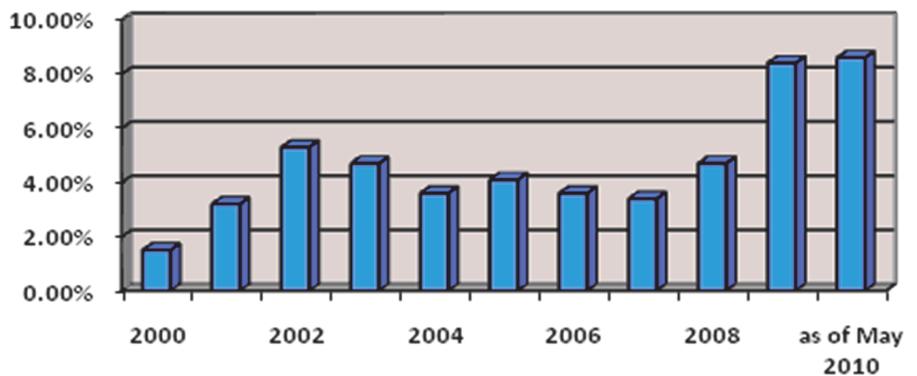
- About 18% of Wake County's adults under age 65 lack health insurance. [Source: NC Institute of Medicine Health Access Study Group, 2009]
- Uninsured adults are less likely to seek care for chronic conditions, 4.5% times more likely to have diabetes, 30% more likely to have high blood pressure, and 25% more likely to die prematurely than adults with health insurance. [Source: Blue Cross Blue Shield, Faces of North Carolina's Uninsured, 2007]

**Unemployment and Employment**

- Unemployment rates rise significantly due to national recession. In 2007 the average unemployment rate in Wake County was 3.4% representing just over 15,000 people. The rate is now 9.2% representing over 41,500 unemployed workers. [Source: Employment Security Commission]
- Recent accolades (Forbes, Manpower, US Bureau of Labor Statistics, etc.) continue to showcase Wake County in global markets and are effective marketing tools to lure new jobs and investment to the community. (Source: Forbes, <http://www.forbes.com/finance/lists/1/2004/LIR.jhtml> passListId=1&passYear=2004&passListType=Misc&uniqueId=2799&dataType=Misc)

**Avg. Unemployment rate Wake County**

[Source: 2010 County Health Data Book, NC State Center for Health Statistics <http://www.schs.state.nc.us/SCHS/data/databook/>]



**The next pages contain demographic data for Wake County followed by highlights from the each of the six areas of the 2010 community Assessment:**

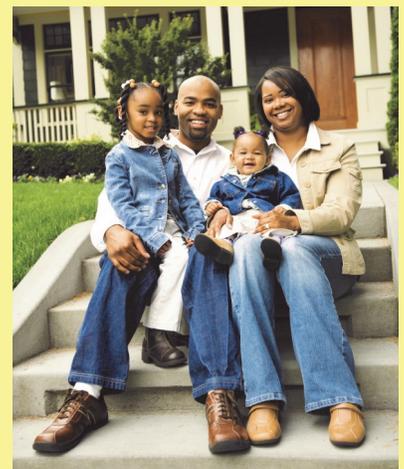
1. Behavioral and Social Health
2. Economic Health
3. Environmental Health
4. Lifelong Learning
5. Physical Health
6. Safety

## Wake County: A Great Place to Live

Wake County consists of 12 municipalities and includes Raleigh, the County seat and state capital. A unique mix of urban and rural small towns distinguishes Wake County from other counties and provides something for every lifestyle. The County has a population of almost 900,000 residents, ranging from over 400,000 in the City of Raleigh to over 3,000 in the Town of Rolesville. Wake County's population grew 3<sup>rd</sup> fastest among the nation's 100 most populous counties from July 2000 – July 2009. Five of the County's 12 municipalities were among the state's nine fastest growing cities and towns. Wake County's public school system's enrollment ranks 18<sup>th</sup> nationally. The number of students enrolled in colleges exceeded 78,000 in 2009.

Wake County is consistently ranked as one of the best places in the United States in which to live, work and raise a family. Over the past four years the area has been recognized as:

- #1 Healthiest County in NC (Wake County) University of Wisconsin Population Health Institute January 2010
- #1 Quality of Life (Raleigh, NC) Portfolio.com/bizjournals, May 2010
- #3 Best City for Small Businesses (Raleigh, NC) American City Business Journal July 2010
- #5 Strongest Job Market (Raleigh-Cary, NC) Manpower, July 2010
- #3 Most Innovative City (Raleigh, NC) Forbes, May 2010
- #8 Best Place to Live (Raleigh, NC) RelocateAmerica.com, April 2010
- #3 Best Place for Business and Careers (Raleigh, NC) Forbes.com, April 2010
- #3 Market for Young Adults (Raleigh, NC) Portfolio.com/bizjournals March 2010
- #4 Best Place to Retire and Row (Raleigh, NC) The Rower's Almanac March 2010
- #1 Healthiest Housing Market (Raleigh-Cary, NC) Hanley Wood Market Intelligence February 2010
- #1 America's Smartest Cities (Raleigh-Durham, NC) The Daily Beast, October 2009
- #1 Best Place to Live in the U.S. (Raleigh, NC) msnbc.com, June 2008
- #2 Best City for Bargain House-Hunters (Raleigh, NC) Forbes.com, February 2008
- 5-Star** Public Education Metro (Raleigh-Cary, NC) Expansion Management December 2007



While life is good for the majority of our residents, it is our responsibility to address the areas where others are struggling. In this document you will see that in some of our Wake County communities, our families and neighbors are facing numerous challenges, including rising unemployment rates, obesity in adults and children, an increasing wait list for mental health services, a shortage of affordable childcare and rapid growth. These are areas where our combined efforts as individuals, organizations, businesses and communities can make a difference. It is our goal to continue to maintain and improve the quality of life for all residents in our County.

## Wake County is Still Growing!

Between April 2000 and July 2009, 20% of all new population growth in North Carolina occurred in Wake County. According to the State Demographer, the 2010 population projection is nearly 920,000. This compares with a 2000 Census count of 627,846.

The county has added 80 newcomers, on average, each day since April 1, 2000, according to the U.S. Census Bureau's population estimates.

Wake County has seen its population per square mile increase from approximately 755 in 2000 to 1,075 in 2009, maintaining its position as the state's second densest county in North Carolina.

With this population growth in the past nine years has come an increase in diversity:

- ] Hispanics/Latinos living in the county increased by 133%.
- ] Asians living in the county increased by 96%.
- ] Blacks/African-Americans living in the county increased by 45%.
- ] Non-Hispanic/Whites living in the county increased by 30%.

Over the past nine years, all ethnic/racial groups in Wake County have experienced a growth in total births. The largest increase has been in Hispanic births, doubling in five years from 1,146 births in 2000 to 2,216 births in 2005. In 2009 Hispanic women residing in Wake County gave birth to 2,250 babies. With a projected annual growth rate of 3%, Wake County is projected to have 1,000,000 residents in 2013.



# Behavioral & Social Health



## Birth to Age 5

- Mental health was identified as the second most important health issue facing our community in the 2010 Community Assessment Survey. Approximately 35% of respondents were parents of young children, birth to age 4 years. Over 59% of those responding reported that Wake County is a good place to raise children. However, only 46% said that there is enough support and help for individuals and families during times of stress and need.

## School Age/ Adolescent Mental Health

- Fostering positive youth development, especially for adolescents with extra needs, requires a system that can identify potential problems early and address them effectively. Youth who have behavioral health issues need extra support.

This table shows the prevalence of specific disorders compared with the most frequent disorders diagnosed among Wake County children and adolescents in publicly funded mental health and substance abuse services.

Disorder	National Estimated Prevalence	Most Frequent Diagnoses among Wake County Youth in Mental Health Services
Anxiety disorders	13%	8% Anxiety disorders
Mood disorders	6.2%	9% Major Depressive disorders
Disruptive (behavior) disorders	10.3%	31% Conduct disorder 21% Adjustment Disorder (w/ conduct) 19% Attention Deficit Disorder
Any disorder	20.9%	

## Child Developmental Disabilities

- The NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services' 3<sup>rd</sup> quarter report for FY09-10 indicates that 5,893 children (ages 3-17) with a developmental disability living in Wake County are in need of services. The Local Management Entity (LME) currently serves 829 children, which is 14% of the population in need. The target to be served is 19%.
- There have been 159 children referred for Developmental Disabilities services from January 2010 through October 2010. Almost 40% (60) of the children referred have a diagnosis of autism. These often present with extremely challenging clinical and safety issues requiring programmatic and treatment structures that are not readily found in community settings. (Wake County Local Management Entity, 2010)

## Child Welfare

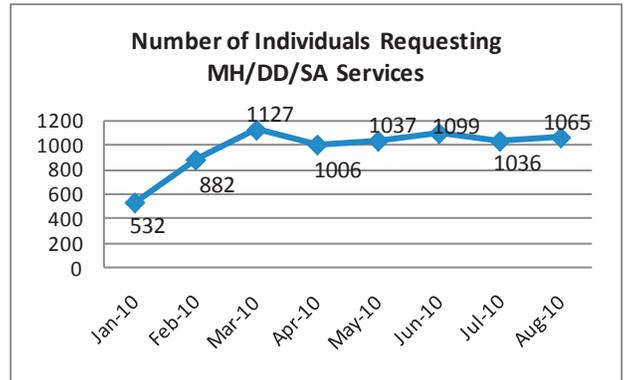
- The number of reports of Child Abuse and Neglect increased 8% from FY 09 to FY 10, although the number of cases where children were found to be abused or neglected remained at the same level in FY10 as in FY 09. (WCHS Child Welfare)
- On average, 21 children are placed in foster care in Wake County each month, with children of color more likely to enter care. There was a 12% increase in the number of children who entered care in FY 10 compared to FY 09. However, the average number of children in foster care at any time during the month is relatively stable, as children who exit from foster care each month is approximately the same as those who enter. (WCHS Child Welfare)

**“Mental health is a difficult area, funds have been cut, there are more problems than we realize.”**

Quote from 2010 Community Assessment Focus Group Participant

**Adult Substance Abuse**

- While prevalence rates range from one out of 10 to one out of 13, it can be estimated that over 75,000 people in Wake County have a substance use disorder.
- Wake County's Local Management Entity's Access Center saw an increase in the number of adults requesting assistance for mental health and substance use issues from January through August 2010, and a subsequent upward trend in demand for community-based services.



(Wake Local Management Entity, 2010)

**Senior Adults**

- One in four older adults, or 41,000 individuals age 55 and older in Wake County, has a significant mental disorder. Among the most common mental health problems in older persons are depression, anxiety disorders, Alzheimer's disease/dementia and substance abuse. (**Alzheimer's Disease Facts and Figures**, 2010:4-16)
- Alzheimer's disease affects approximately 13% of individuals aged 65 and older or 9,600 adults in Wake County. It has recently surpassed diabetes and become the 6th leading cause of death among American adults. (**Alzheimer's Disease Facts and Figures**, 2010:4-16)

**Adult Developmental Disabilities**

- The NC Division of Mental Health, Developmental Disabilities and Substance Abuse Services' 3rd quarter report from FY09-10 indicates that 5,430 adults (ages 18 and above) with a developmental disability and living in Wake County in need of services. The LME currently serves 1,369 adults, which is 25% of the population in need,. The target to be served is 33%.

Adult Developmental Disabilities Services Wait List	
Service	Number Of Adults
Non-Medicaid Case Management	122
Periodic Services*	16
Community Alternatives Program Funding for Persons with Mental Retardation/Developmental Disabilities (CAP MR/DD)	270
Residential Services	112
Vocational Services	273

Wait list data for periodic services began in Fall '09. Prior to this time, the Local Management Entity (LME) was able to fund all requests. Cuts to state funding, population increases, and no new CAP slots for the prior two years resulted in the need to add adults to the wait list.

**Adult Mental Health**

- Wake County has seen an increase in the number of adults presenting with mental health issues since February 2009, and a subsequent upward trend in demand for community-based mental health services. Simultaneously, State funding for fiscal year 09-10 was decreased. Inadequate funding for community-based services and increased demand have the unintended consequence of increasing inpatient psychiatric admissions, hospital emergency department utilization and crisis services utilization.

# Economic Health

**Unemployment was selected as the 3rd ranked community priority for the County. Selected unemployment data can be found on page 4 of this document.**

## Job Readiness

- The breadth of occupations impacted by the recession is wide and includes jobs in highly skilled, technical fields. More skilled job applicants are often viewed as more desirable than the “typical” Human Services client, thus making it more difficult for persons with lower skills and employment barriers to compete.
- Wake County is fortunate to have a strong complement of institutions, organizations, partnerships and services that offer workforce development activities (including job readiness, education, training and job assistance) for both youth and adults in Wake County.

## Access to Child Care

- Demand exceeds supply for child care subsidies (monetary assistance based on economic need).
- The waiting list for child care subsidies reached approximately 4,000 children by October 2010. Approximately 140 children per month are being added to the waiting list. At this rate, it is expected that about 5,000 children will be on the waiting list by June, 2011. [Source: Wake County Human Services (WCHS) Child Care Subsidy Office]
- The lack of access to affordable child care is a significant impediment to employment. Fifty-four percent (54%) of families that received child care subsidies report they missed less time from work and 73% of families who have worked more than two years reported that receiving child care subsidies assisted them in keeping their jobs. [Source: WCHS Child Care Subsidy Annual Report 2006, Client Survey]



## Basic Needs

- In the 2010 Community Assessment Survey respondents indicated the following as the top three most important community issues: unemployment, homelessness and a lack of affordable housing. [Source: 2010 Wake County Community Health Assessment]
- The depth of this economic recession has swelled the ranks of Wake County families living below the poverty level. In 2000 Wake County had a poverty rate of 4.9% representing 31,059 individuals; by 2008, the rate had risen to 9.2% representing 82,831 individuals. [Sources: 2000 US Census Bureau Fact Finder: Census 2000 Wake County; 2008 US Census Bureau: State and County Quick Facts]

## Housing

- High unemployment coupled with a slow, but continual rise in the cost of homeownership and rental units has made it difficult for lower income families to access affordable housing.
- According to analysis of U.S. Census income data, 31,664 families earn incomes that may cause them to struggle with market rate rents. In Wake County, there are a total of 10,440 subsidized units thus there is a rental gap of 21,224 affordable units. [Source: Wake County 2010 Five Year Consolidated Plan]

**“There’s less work now and all the bills are going up; electricity, water, phone...and there’s less work.”**

Quote from 2010 Community Assessment Focus Group Participant

**Homelessness**

- Over the course of a year, at least 3,500 persons are homeless in Wake County. [Source: Carolina Homeless Information Network, 2009]
- Many homeless persons find themselves in that situation because they are priced out of the housing market. Sixty percent of the residents at the South Wilmington Street Center work, most often in low-paying service jobs that provide no benefits.



**Triangle Region Point-in-Time Homeless Count**

	Durham	Orange	Wake	Triangle Total
Total 2007	539	224	1,043	1,806
Total 2008	590	195	1,144	1,929
Total 2009	535	156	1,152	1,843
Total 2010	675	181	1,180	2,036

Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Families with Children (Family Households)	77	30	0	107
Number of Persons in Families with Children	200	135	0	335
Number of Single Individuals and Persons in Households without Children	442	280	121	843
Total Persons	644	415	121	1,180

[Source: Raleigh/Wake County Partnership to End and Prevent Homelessness, January 30, 2010]

**Transportation**

- Many rural areas in Wake County are experiencing high growth in population, particularly driven by the supply of moderately priced housing. However these areas do not have adequate access to reliable, flexible and affordable public transportation.

# Environmental Health

## Open Space

- More than 45% of Wake County's land area has been developed.
- Focus group participants in the 2010 Community Health Assessment indicated development, and its impact on open space, as the second highest concern across the county. [Source: 2010 Wake County Community Health Assessment]

## Public Health Issues

- Asthma is a leading chronic disease that affects children and is the most common long-term disease of children. Between 2006 and 2008, Wake County hospital discharges for ages 0-14 with a primary diagnosis of asthma increased by 61%. [Source: State Center For Health Statistics <http://www.schs.state.nc.us/SCHS/data/databook/CD18%20Asthma%20hospitalizations%20by%20county.html>]
- According to the 2010 Wake County Risk Factor Survey of retail food establishments, the two biggest risk factors are: 1) improper holding/ time and temperature, and 2) poor personal hygiene. [Source: Wake County Environmental Services 2010 Wake County Risk Factor Survey]



## Air Quality

The two main air quality issues in North Carolina are ground-level ozone, the main ingredient in smog, and particle pollution. [Source: NC Department of Environment and Natural Resources Division of Air Quality 2010]

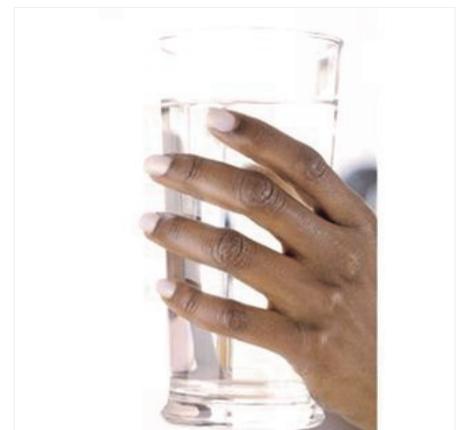
- Groups especially at risk of suffering from poor air quality include children, those with asthma or respiratory disease, and anyone frequently active outdoors.
- In 2006, an estimated 12% of Wake County residents had been told by a healthcare professional that they had asthma at some point in their lives. [Source: Wake County Asthma Coalition, 2009]

## Solid Waste

- Respondents of the 2010 Community Assessment survey identified roadside litter as one of the top five environmental issues facing their community. [Source: 2010 Wake County Community Health Assessment Survey]
- Solid Waste disposal in Wake County is provided through a consortium of local governments, including all of the municipalities (except Holly Springs) and Wake County government.

## Water Quality

- Survey respondents in the 2010 Community Assessment identified "Safe and Clean Drinking Water" as one of the top five major environmental concerns. This issue was identified in seven of the eight Wake County Zones. [Source: 2010 Community Health Assessment Survey]
- From 2006 to 2008, the number of miles of impaired streams in Wake County increased from 89 miles to 188 miles (recorded on the State of North Carolina's 303d list). [Source: <http://www.dlr.enr.state.nc.us/SCC/2009February18Meeting/Action%20Item%20A%20Local%20Program%20Contracts/Wake%20County.pdf>]



**“I am very concerned how we treat our environment, especially throwing trash and all this stuff all over the road.”**

Quote from 2010 Community Assessment Focus Group Participant



**Pests**

- Bed bug infestation is an emerging public health issue. According to the Centers for Disease Control and Prevention, the United States is "experiencing an alarming resurgence in the population of bed bugs." Bed bugs are not known to transmit disease. However, some individuals may experience an allergic reaction to bites from bed bugs, and in some instances the allergic reaction may require medical attention. [Source: [http://www.cdc.gov/nceh/ehs/Publications/Bed\\_Bugs\\_CDC-EPA\\_Statement.htm](http://www.cdc.gov/nceh/ehs/Publications/Bed_Bugs_CDC-EPA_Statement.htm)].
- In accordance with State rules, Wake County Government is required to investigate bed bug complaints received from the public for regulated facilities in the County such as hotels, motels, hospitals, residential care facilities, and nursing homes. During fiscal year 2010, the Environmental Services Department received 17 complaints about bed bugs for regulated facilities. When bed bugs are confirmed in a regulated facility, Wake County Government requires the owner/operator of the facility to implement measures to eliminate the pests from the facility. There is currently no State law or local ordinance that requires Wake County Government to investigate bed bug complaints received from the public for single-family or multi-family residences, or other non-regulated public or private facilities. When Wake County Government receives bed bug complaint calls for single-family residences, multi-family residences, or other non-regulated facilities, the callers are referred to contact private pest management companies. Wake County Government is currently working with public and private organizations to develop education and outreach materials related to bed bugs.

**Zoonotic Diseases**

- Compared to data on mosquito borne illness reports, Wake County reports more tick borne illness than mosquito related illness.

	2005	2006	2007	2008	2009
Total Tick borne Disease Reports (Ehrlichiosis, Rocky Mountain Spotted Fever, Lyme Disease)	128	104	93	72	323
Total Mosquito borne Disease Reports (Malaria and Encephalitis, including West Nile Virus)	8	9	6	7	4
Confirmed, probable, and suspect cases					

[Source: North Carolina Electronic Disease Surveillance System 2010]

# Lifelong Learning

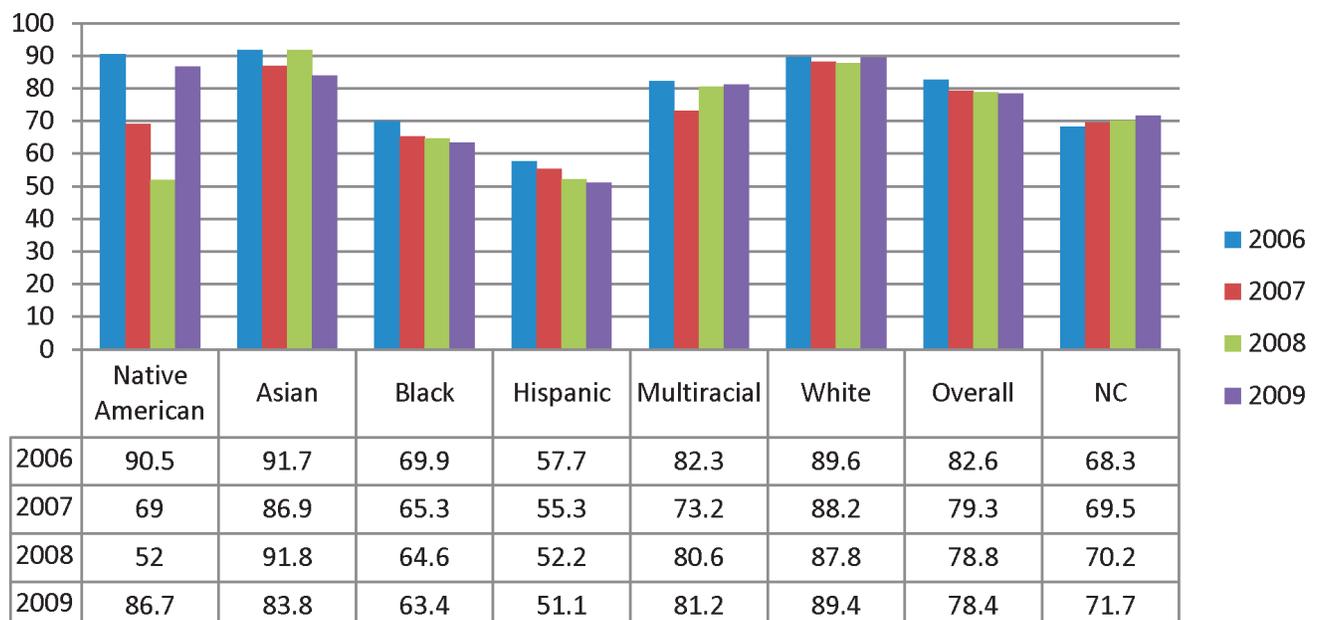
## Early Childhood Education

- The cost of child care in Wake County for an infant in a five-star facility could exceed \$1,000 a month and \$800 for an older child. (Subsidy Market Rate 5-Star Center \$972 infant and \$845 for 2 year old). These costs put high-quality care out of reach for many families. Even in lower quality facilities, the expense of child care exceeds the means of families struggling to meet their basic needs. [Source: North Carolina Division of Child Development]
- As of May 2010, the number of children from birth to 5 years old who benefited from child care subsidy (monetary assistance based on economic need) exceeded 4,700 (an increase of 27% from slightly over 3,700 in July of 2009). Anywhere from 500 to 5,000 children have been on the child care subsidy waiting list at different points in time throughout fiscal year 2009-2010. [Source: NC Division of Child Development; Wake County Human Services Child Care Subsidy]

## Public Education

- Wake County Public School System (WCPSS) is the largest school district in North Carolina and the 18<sup>th</sup> largest in the nation. In the last 10 years, student population has grown by more than 43%, from 97,522 in 2001 to almost 140,000 in 2010. Thus, the challenge to educators in WCPSS has grown significantly over the past 10 years.
- In 2010, 74% of elementary school students were reading at or above grade level; 75% of middle school students were reading at or above grade level; and 81.3% of high school students passed the End of Course (EOC) exams in English 1.
- In 2010, 85% of elementary school students were working at or above grade level in mathematics, as were 83% of middle school students. The percentage of high school students who passed the EOC the first time without retesting are Algebra at 79.6 %, Algebra II at 83.6% and Geometry at 81.6%.
- Overall, Wake County Public Schools' four year graduation rate (2006-09) was 78.2% and the five year graduation rate (2006-10) was 81.5%. WCPSS graduated students at a higher rate than the State.
- When looking at graduation rates by ethnic groups, the rates for Black and Hispanic students are declining, while the rates for white students are holding steady.

### WCPSS Graduation Rates by Ethnic Groups, 2006-09



## **“I think what youth need most of all to be successful is education.”**

Quote from 2010 Community Assessment Focus Group Participant

- Dropout rates are slowly declining in WCPSS, however the suspension rates are increasing and rank the highest in the State. [Source: Wake County Public School System]
- During the 2007-08 school year WCPSS handed out more long-term suspensions than the entire State: 1,103. [Source: Wake County Public School System]
- WCPSS students account for 9.2% of the students in North Carolina but received 21.1% of all long-term suspensions in the state. [Source: Wake County Public School System]

### **Higher Education**

- Wake County's in-state undergraduate degree credit headcount enrollment grew from 18,358 in 1998 to 29,384 in 2008 among North Carolina Colleges and Universities. [Source: <http://nces.ed.gov/collegenavigator>]
- The number of curriculum students enrolled at Wake Technical Community College (WTCC) in 2007 was 16,899; the number enrolled in 2010 was 22,193, a 31% increase. The percentage of enrollment growth from 1999 to 2009 was 58%. [Source: <http://ieandresearch.waketech.edu>]
- Resident students at North Carolina State University (NCSSU) in 2010 paid \$6,393 and nonresident students paid \$18,928 in tuition and fees, an increase of 25% and 9% over a four year period. [Source: <http://nces.ed.gov/collegenavigator>]

### **Community Enrichment and Education**

- The book collection size for Wake County Public Libraries is 1.6 million, the largest in the state.
- Annual book circulation is 12 million volumes per year; nearly half of the book circulation involves materials for children. Annual circulation and children's materials circulation are the highest in NC.
- Wake County Public Libraries have the highest number of computers, and computer use, of any public library in the state. There are over 600 computers for public use and they are utilized 1.2 million times per year. They are busy an average of 60% of the hours open.
- In collaboration with the Wake County Public School System, North Carolina Cooperative Extension-Wake County Center, a section within Wake County Human Services, targeted youth development for children 5-19 years old who were at risk for academic failure, adolescent pregnancy, substance abuse, or violence/delinquency. Families that were economically disadvantaged, underserved, or receiving services from other Human Services units were also targeted.
- More than 5,500 youth and approximately 1,100 volunteers contributed service hours to 4-H youth, families and programs.



# Physical Health

**Overweight and Obesity and Lack of Health Insurance were selected as the top two ranked community priorities for the County respectively. Selected data on these priorities can be found on pages 3 and 4 of this document.**

## Infant Health

- Higher rates of infant mortality and low birth weight persist for African American babies as compared to white babies.



Perinatal Mortality	2004-2008 Wake County	2004-2008 NC comparison
Fetal death rate/1000 deliveries	Total 6.3 White 4.3 Minority 11.5	Total 6.7 White 5.0 Minority 11.2
Neonatal (<28 days) death rate/1000 live births	Total 4.9 White 3.4 Minority 8.8	Total 5.7 White 4.1 Minority 9.9
Post neonatal (28 days-1 year) death rates/1000 live births	Total 1.9 White 1.4 Minority 3.1	Total 2.7 White 2.1 Minority 4.5

[Source: 2010 County Health Data Book, NC State Center for Health Statistics <http://www.schs.state.nc.us/SCHS/data/databook/>]

## Child and Adult Health

- After a steady period of decline from 2000 through 2006, rates of asthma-related hospitalizations in children ages birth to 14 are rising. [Source: NC County Health Data Book]. This might be a reflection of our low ranking (98th of 100 NC counties) in physical environment factors. [Source: County Health Rankings. <http://www.countyhealthrankings.org/north-carolina/wake>]
- In 2008, approximately 2,000 Wake County children visited emergency departments due to asthma and 834 Wake County children were hospitalized with asthma. [Source: Thompson Reuters NC Hospital Database].



## Adult Chronic Conditions

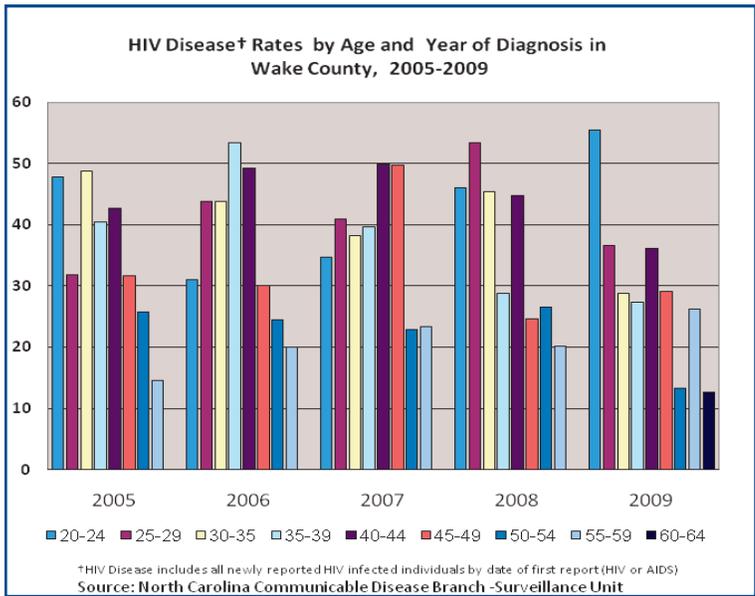
- Cancer is the leading cause of death in Wake County. There were 992 deaths due to cancer in Wake County in 2007. [Source: Cancer Profiles Wake August 2009 Central Cancer Registry]

### 2003-07 Cancer Incidence per 100,000 population Age-adjusted to the 2000 US Census (2010 NC Cancer Registry)

	Colon/Rectum		Lung/Bronchus		Female Breast		Prostate		All Cancers	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
NC	21,000	47.4	33,559	75.8	36,562	149.6	30,578	153.8	216,944	487.0
Wake	1,208	42.8	1,671	62.2	2,896	165.4	2,300	174.0	14,414	480.4

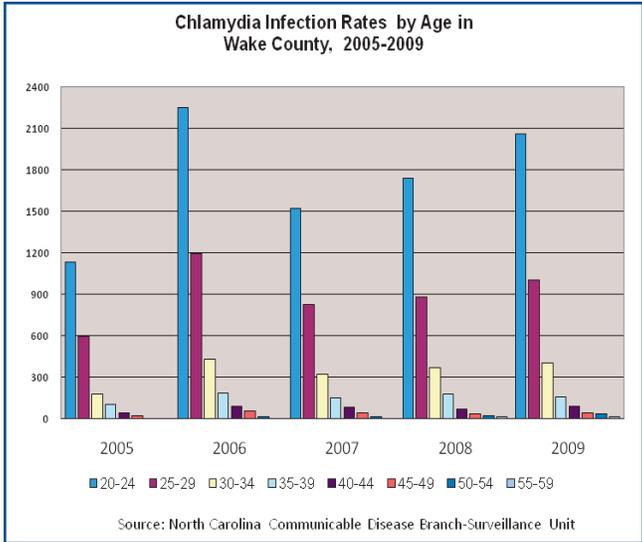
**“I wish there was a way that we could all be motivated to better our health.”**

Quote from 2010 Community Assessment Focus Group Participant



- As of December 2008, Wake County had the second highest number of HIV cases of all 100 counties in North Carolina, with a total of 3,412 people living with HIV.

- Chlamydia remains the most commonly reported disease in Wake County. In 2009, the rate of chlamydia infection was 392.1 per 100,000, up by 61.6% from 2005.



**Senior Adult Health**

- Senior service needs are increasing as demonstrated by an 80% increase in the number of people on the Meals on Wheels waiting list from fiscal year 2000-08 (197) to fiscal year 2008-09 (354). [Source: Wake County Aging Plan 2010]
- There is no help available to purchase health insurance for older, uninsured Wake County residents who are not yet Medicare-eligible and do not qualify for Medicaid. These individuals must either pay for private coverage or go without. If they become ill, they could face financial disaster and place strain on public health resources. Clinics in Wake County provide free or sliding-scale healthcare, but demand is great and availability is limited. [Source: Wake County Aging Plan, 2005]

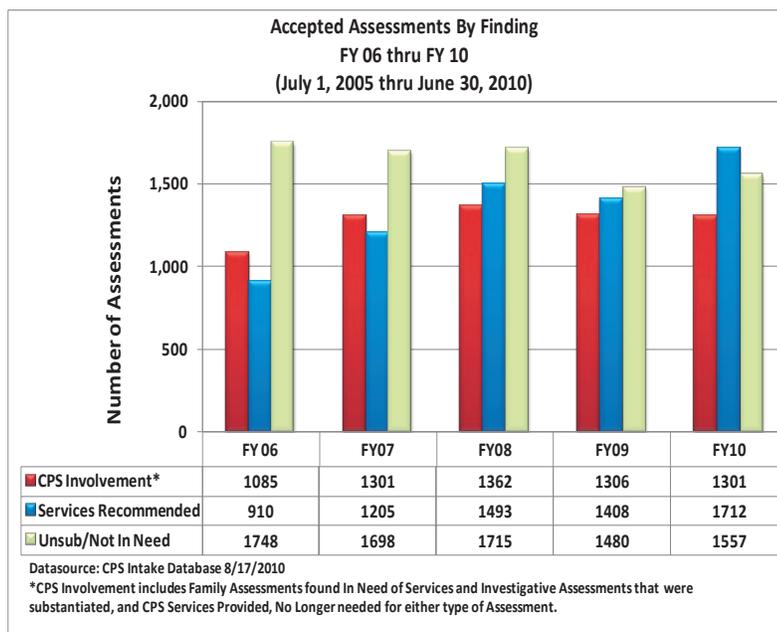
**Dental Health**

- The National Institute of Dental and Craniofacial Research (NIDCR) reports that in adults and seniors with teeth remaining, 92% have had dental caries and 23% have untreated dental decay [Source: NIDCR. <http://www.nidcr.nih.gov/DataStatistics/FindDataByTopic>]
- Responses from the 2010 Wake County Community Assessment survey indicate that 14.9% of individuals needing dental care in the previous year could not get the service for various reasons. The percentage was highest (35.5%) in the South zone. [Source: 2010 Community Health Assessment Survey]

# Safety

## Child Safety

- The number of assessments accepted for further review for Child Protective Services (CPS) resulting in a family having some involvement with CPS has declined slightly in the last two fiscal years. The number of families who were recommended for services by CPS has increased since fiscal year 2006. [Source: Wake County Human Services Child Welfare, FY 10 End of Year Report Demand for Services WCHS Child Welfare CPS Intake Database 08/17/2010]



## Wake County Crime

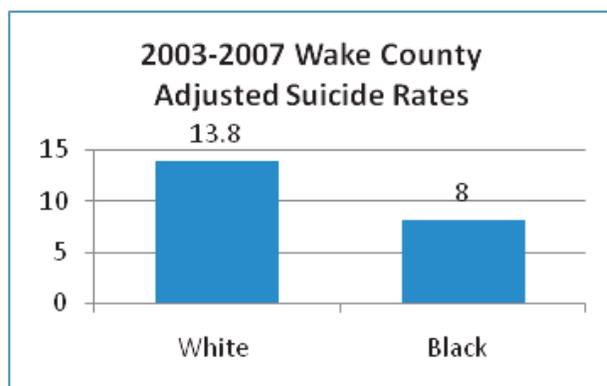
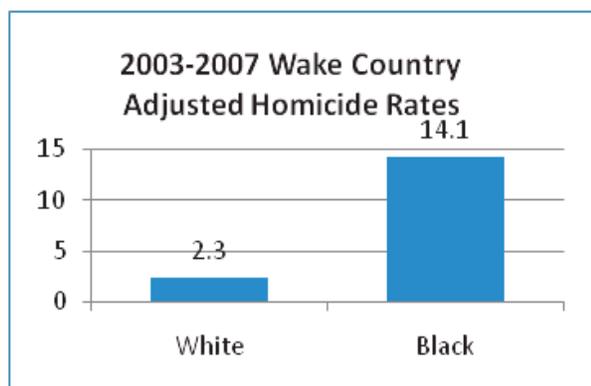
- Between the 2006 and 2010 Community Health Assessments, the number of drug offenses has declined by 43% and the number of driving while intoxicated (DWI) charges is up 52%. [Source: 2010 Wake County Sheriff's Office Internal Report]

## Domestic Violence

- Overall demand for InterAct's services since moving to the Family Safety and Empowerment Center in February 2009 has increased more than 100%.
- InterAct provided services to almost 3,000 victims of domestic violence from 2008 to 2009. This represents a 44% increase over the previous year according to the N.C. Council for Women Domestic Violence Commission. This was the second highest number of any county in North Carolina. [Source: InterAct 2007-2008 and 2009-2010 Annual Services Report]

## Intentional & Unintentional Injuries

- Unintentional injuries (those caused by accident) were the fifth leading cause of death and accounted for 40,959 (62%) of emergency department (ED) visits in Wake County in 2008. Intentional injuries, such as assault and self-inflicted injuries, represented 4% of all ED visits in Wake County in 2008. [Source: Wake County State of the County Report 2009]
- Disparities exist by race in Wake County homicide and suicide rates per 100,000.

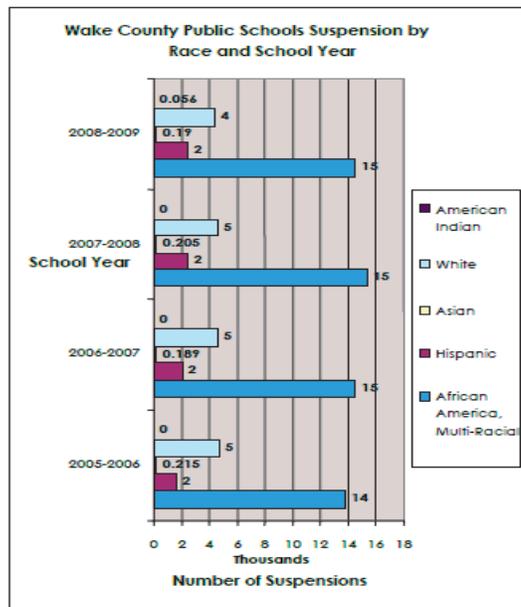


[Source: Wake County State of the County Report 2009]

**“I always want to have a safe neighborhood.”**

Quote from 2010 Community Assessment Focus Group Participant

## Juvenile Crime



- In North Carolina a student can decide to drop out of school at the age of 16. Short-term and long-term suspension has been linked to dropout rates and delinquency. [Source: NC DJJDP and the Center for Prevention of School Violence.]

[Source: <http://www.ncpublicschools.org/docs/research/discipline/reports/consolidated/2008-09/consolidated-report.pdf> Retrieved August 01, 2010]

- From 2004-2009, 57% of the youth committed to youth detention centers were age 15.
- From 2006-2009, on average 85% of the youth committed to youth detention centers were Black. [Source: County Databook, NC Department of Juvenile Justice and Delinquency Prevention. [http://www.juvjus.state.nc.us/statistics/databook.html 2004, 2005, 2006, 2007, 2008, 2009]

## Gangs

- Since 2005, the Raleigh Police Department (RPD) has extensively monitored gang membership in Raleigh, validating over 3,000 members.
- In 2009, RPD began tracking and analyzing crimes associated with gang members, documenting 1,417 known gang-related incidents for the year. City-wide gang activity is centered on robbery, assault, burglary, vandalism and drug activity. [Source: The Raleigh Police Department's Response To Gang Activity: 2009 Public Report]
- Wake County Department of Juvenile Justice reports that in FY 08-09, 26% of youth assessed at intake were identified as gang members or having some gang association. In comparison, 25% of those assessed in FY 07-08 were identified in this way; 21% of those assessed in FY 06-07 were identified in this way and 14% in FY 05-06. [Source: 2009-2010 Wake Juvenile Crime Prevention Council (JCPC) Annual Report]



## Disaster Response and Preparedness

- Wake County faces several hazards, including but not limited to: severe weather (tornados, tropical storms, hurricanes, winter weather, and drought), infrastructure vulnerability (water, fuel shortage, internet interruption, and voice interruption), terrorism, pandemics, hazardous materials incidents, transportation accidents, fires and dam failures. Wake County recognizes that an integrated and coordinated approach is required in preventing, preparing for, responding to and recovering from these hazards.

# Get Involved!

The Community Assessment and priority-setting process represents only the first doors we have unlocked as we move toward creating a community that will make all our lives better. Now we must address the concerns and issues we have prioritized with solutions. We must continue to combine the many strengths and resources we have in Wake County and agree to focus our efforts on the identified priorities.

## Here is how you can help:

1. Pick an area or issue in the Community Assessment that interests you and let us know how you want to help. You may want to volunteer your time and expertise to help determine a plan of action, link us to other communities and organizations that are interested in the issue, or help us find the resources to address the issue.
2. Tell your family, neighbors, co-workers, faith groups, community organizations and business associates about the Community Assessment. Encourage them to read the information and get involved.
3. Stay involved and informed. Check the [wakegov.com](http://wakegov.com) website regularly for updates on the progress of the Community Assessment action planning process and the State of the County Health Report.

To volunteer, make suggestions or request more information, please contact us at 919-250-4516. This can be an effective effort only if our community lives it, supports it and participates in it. Please find the areas that resonate with you, and be a partner in bringing solutions to problems and building on successes for the benefit of all Wake County.



# WAKE COUNTY

North Carolina

**[www.wakegov.com](http://www.wakegov.com)**

Hard copies of the full Community Assessment and Executive Summary are available for review at all County libraries or can be downloaded at our website.

For more information call (919) 250-4516