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Foreword

Health, United States, 1982 is the seventh annual report on the health status of the Nation submitted by the Secretary of Health and Human Services to the President and Congress of the United States in compliance with Section 308 of the Public Health Service Act. It presents statistics concerning recent trends in the health care sector.

This report was compiled by the National Center for Health Statistics, U.S. Public Health Service. It is divided into two parts. Part A consists of 16 charts on health status and determinants organized by age from the youngest group to the oldest. Part B consists of 86 detailed statistical tables that are organized around four major subject areas—health status and determinants, utilization of health resources, health

care resources, and health care expenditures—and includes a guide to the detailed tables. There are also two appendixes that provide descriptions of the data sources and a glossary of terms.

This edition of *Health*, *United States* continues the approach used during previous years by emphasizing trends and comparisons over time. Once again, the detailed tables display age-adjusted data. This was necessary for two reasons. First, the elderly constitute a growing proportion of the U.S. population and second, several demographic subgroups of the population have different age structures. By adjusting for age, data can be compared with greater validity over time and for different groups.

Acknowledgments

Overall responsibility for planning and coordinating the content of this volume rested with the Division of Analysis, National Center for Health Statistics, under the supervision of Jacob J. Feldman, Joel C. Kleinman, and Barbara G. Weichert. The Chartbook in Part A was prepared by Lois A. Fingerhut.

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Publications management and editorial review were provided by Margot A. Kemper, Gerri A. Michael, and John E. Mounts. Final production and printing of this volume was accomplished by Linda L. Bean, Naomi M. Forester, Jarmila G. Frazier, Annette F. Gaidurgis, Nancy L. Planet, Stephen L. Sloan, and Patricia A. Vaughn.

This volume would not have been possible without the contributions of numerous staff members throughout the National Center for Health Statistics.

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Symbols

- --- Data not available
- ... Category not applicable
- Quantity zero
- 0.0 Quantity more than zero but less than 0.05
- Figure does not meet standards of reliability or precision

Highlights

Health status and determinants

- After a rapid decline from 1960 to 1976, birth rates in the United States have been gradually increasing, reaching 69 births per 1,000 women 15-44 years of age in 1980 (provisional data). This trend is partly because of postponed births; first births to women over 30 years of age have increased rapidly.
- Although completed fertility among women 50-54 years of age has been increasing since 1960 (from 2.3 to 3.1 births per woman in 1980), this trend will probably reverse in the future. For example, based on surveys of birth expectations, women 18-34 years of age in the United States reported an average of 2.2 lifetime expected births in 1979, compared with 3.1 in 1967.
- Overall, life expectancy at birth continued to increase through 1979, reaching 69.9 years for men and 77.6 years for women in 1979. However, for the total population, provisional data for 1980 show the first decrease in life expectancy since 1967. The slight decrease (from 73.8 to 73.6 years) was probably the result of the 1980 influenza epidemic and does not appear to represent a departure from the underlying upward trend.
- The infant mortality rate has continued to decline, reaching 12.5 deaths per 1,000 births in 1980 (provisional data). However, the mortality rate for black infants is still almost twice as high as for white infants.
- Death rates for cancer declined through the mid-1970's for people under 50 years of age but increased for those 50 years of age and over. The latest available data suggest that a turning point in the death rates may have occurred even among the older age groups. In particular, cancer death rates for all ages except 65-69 years of age appear to have leveled off.
- Mortality among children 1-14 years of age declined substantially between 1950 and 1979.

- Virtually all of this decline resulted from the reduction in death rates for natural causes.
- The age group 15-24 years is the only one which has shown an increase in mortality in recent years. Accidents, homicide, and suicide accounted for three-fourths of all deaths in this age group in 1979, up from half of all deaths in 1950. The leading cause of death among white youths at these ages is motor vehicle accidents, while the leading cause among black youths is homicide. A wide difference exists between white and black mortality rates for natural causes of death in this age group.
- Mortality among adults 25-44 years of age has fallen by about a third since 1950. A substantial part of this reduction is because of the decline in heart disease death rates that has occurred since 1965. Cancer mortality has also been reduced in this age group since the late 1960's.
- Among adults 45-64 years of age, mortality has declined by about one-fourth since 1950 largely because of the decline in heart disease mortality. Mortality from cancer of the respiratory system is about 2½ times as high as it was in 1950, but mortality from all other types of cancer actually fell by about 10 percent during this period. Although non-motor-vehicle accident mortality is greater than motor vehicle accident mortality for this age group, it has decreased since 1975 while motor vehicle accident mortality has increased.
- From 1950 to 1979, the age-adjusted death rate for the elderly population fell by about 25 percent and the decline for females was twice as great as that for males. About three-fourths of the overall decline in mortality was a result of the declines in heart disease and stroke mortality.
- Although cigarette smoking has declined in recent years, strong socioeconomic differences in smoking persist. For example, in 1980, 52 percent of the population 25-44 years of age with less than

- a high school education were current smokers, compared with only 31 percent of those with some college education. The prevalence of heavy alcohol consumption has not shown the same decline as is evident for cigarette smoking.
- More than 90 percent of children are immunized against the major childhood diseases by the time they enter school. However, appreciable differences exist in immunization levels among preschool children by race and residence. Furthermore, public health clinics and hospital outpatient departments appear to play a prominent role in immunization among children from low-income families. Of those in families with incomes of less that \$7,000 who did receive a polio vaccination, 60 percent use these sources, compared with 15 percent of those in families with incomes of \$25,000 or more.

Utilization of health resources

- The proportion of pregnant women beginning prenatal care in their first trimester of pregnancy gradually increased from 1970 through 1979. Although the trend increased faster among black women than among white women, the proportion receiving early care is still much lower among black women (62 percent versus 79 percent).
- The proportion of adults tested for high blood pressure increased substantially between 1974 and 1979. The increase was greatest among black adults—those at highest risk of hypertension. Recently released data indicate that this testing has had a positive effect: The proportion of adults with elevated blood pressure decreased between 1971-75 and 1976-80.
- Between 1964 and 1980, physician visits per person per year increased from 3.9 to 5.5 for lower income persons. During the same period, physician visits per person remained stable or actually declined for higher income persons, indicating a marked trend toward equality in the volume of physician visits between the two groups. However, over the same time period, little change occurred in the number of dental visits per person for lower income persons. In 1980, persons in families with incomes of less than \$7,000 had an average of 1.1 dental visits per year, compared with 2.4 visits for persons in families with incomes of \$25,000 or more.
- Hospital discharge rates continued to increase (especially among the elderly) and average length of stay continued to decrease during the 1970's. As a result, the days of care per 1,000 population have declined slightly.

- The increase in Cesarean section rates appears to have abated. The rate for 1980 (16 per 100 deliveries) was about the same as that for 1979. However, this rate represents a 57-percent increase since 1975.
- Tubal ligation among women 15-44 years of age continues to increase, but at a slower pace than in the early 1970's.
- Hysterectomy rates have declined from their high levels of the early 1970's.
- Cardiac catheterization among men 45-64 years of age continues to increase by nearly 10 percent per year.
- Rates for lens extraction (cataract removal) continued to increase among the elderly at the rate of about 5 percent per year.

Health care resources

- The number of health workers has continued to grow at a rapid pace during the 1970's. In particular, the supply of physicians grew at a slightly faster pace in the latter part of the decade. The physician-population ratio reached a record high of 20 physicians per 10,000 population in 1980.
- Among the different specialties, the number of internists and pediatricians grew most rapidly. In addition, the number of general and family practitioners showed a 2-percent annual growth in the latter part of the decade, compared with a 1-percent decrease in the early part of the decade, reflecting the increase in family practice residencies.
- The number of community hospital beds per 1,000 population has been relatively stable since 1975. In 1980, there were 4.5 beds per 1,000 population in the United States, but the range was from 2.7 in Alaska to 6.0 in Nebraska and 7.3 in the District of Columbia.
- The supply of both psychiatric and nonpsychiatric long-term hospital beds declined by 50 percent between 1970 and 1980. However, during this period, the number of beds in proprietary psychiatric hospitals and federally funded community mental health centers increased substantially, although they still account for a small share of total beds. These centers have experienced large increases in inpatient, outpatient, and day treatment episodes.

Health care expenditures

• Health care expenditures continued to increase rapidly. In 1981, health care expenditures in the United States totaled \$286.6 billion, an average

- of \$1,225 per person, and comprised 9.8 percent of the gross national product. During the past 15 years, personal health care expenditures increased sixfold. Almost three-fifths of this increase has resulted from price inflation.
- Medical care prices increased by 10.4 percent between 1980 and 1981, compared with 10.2 percent for all items. However, more recent data for the first quarter of 1982 indicate a marked decrease in the rate of price inflation for the general economy, but a continued rapid rise in medical care prices. The overall Consumer Price Index increased at an annualized rate of 1.0 percent, compared with 10.2 percent for the medical care component. Prices for hospital care continued to lead the rise in medical care (15.0 percent). Charges for physician services, dental services, and prescription drugs increased by 9.7 percent, 7.0 percent, and 8.4 percent, respectively.
- In 1978, Massachusetts led the States in per capita personal health and hospital care expenditures (\$935 and \$490, respectively). The lowest spending in 1978 for personal health care—\$521 per capita—occurred in South Carolina. Idaho had the lowest per capita hospital care expenditures (\$197).
- Minnesota led the States in nursing home expenditures (\$126 per person). Alaska, with only 2 percent of its population over 65 years of age, had the lowest per capita spending for nursing home care (\$12 per person). However, overall per capita spending for personal health care in Alaska was only 1 percent below the U.S. average.
- Florida, which has the largest proportion of aged residents in the United States, spent only 3 percent more than the national average for all personal health care. However, spending for nursing home care in Florida was 43 percent below the U.S. average.

PART A Chartbook

More women begin prenatal care early

The proportion of pregnant women beginning prenatal care in their first trimester of pregnancy gradually increased from 1970 through 1979. Although the rate of increase was greater among black women than among white women, the proportion receiving early care is still much lower among black women. The proportion of white women receiving care in the first trimester increased from 72 percent to 79 percent during the period, while the proportion of black women receiving early care increased from 44 percent to 62 percent.

Prenatal care includes a myriad of interventions that are or should be tailored to the individual woman

and her pregnancy. For example, counseling about the effects on the fetus of diet, smoking, and alcohol consumption is a crucial component of prenatal care. Because the context and quality of prenatal care are likely to vary depending on the provider as well as the patient, evidence on the effectiveness of such care in reducing adverse pregnancy outcomes is not conclusive. However, given current medical knowledge, high quality prenatal care beginning early in pregnancy holds the greatest promise for reducing racial and socioeconomic disparities in pregnancy outcome.

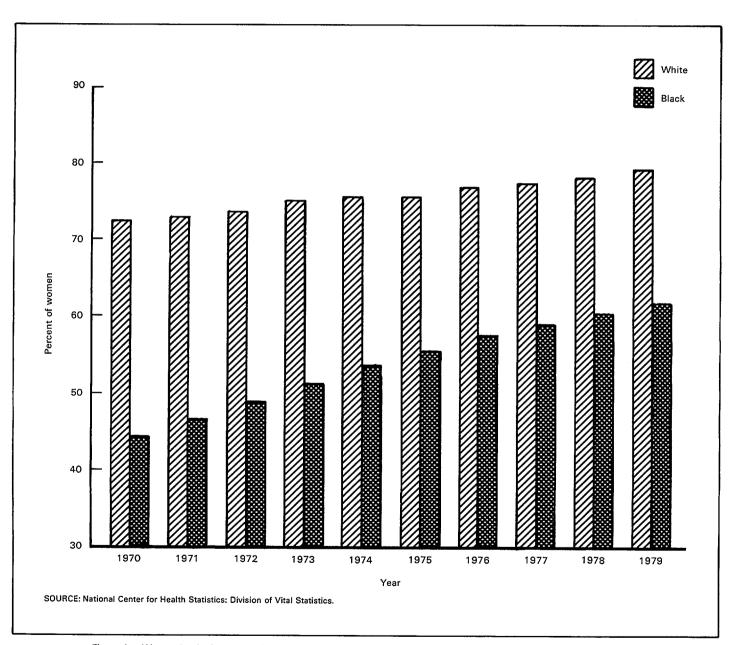


Figure 1. Women beginning prenatal care in the 1st trimester of pregnancy, according to race: United States, 1970-79

Infant mortality rates stand at record lows

Infant mortality rates for all races have been declining steadily during the past decade, following a plateau that lasted from the mid-1950's to the mid-1960's. This decline may be attributed to several factors including better nutrition, wider availability of prenatal care, advances in medical science, and improved socioeconomic conditions.

The mortality rate for black infants historically has been much higher than that for white infants. The rates for both these groups have been declining at nearly equal rates for the past 10 years. Therefore, the mortality rate for black infants (21.8 deaths per 1,000 live births) in 1979 remained almost twice as high as that for white infants (11.4 deaths per 1,000 live births).

Racial differences have generally been greater during the postneonatal period (2d through 12th month of life)—a time when environmental and socioeconomic factors are more likely to affect the infant than during the neonatal period (1st month of

life) when prenatal and intrauterine factors have their strongest effects. The decline in neonatal mortality between 1965 and 1979 has been slightly greater for white infants than for black infants (5.0 percent versus 4.3 percent per year), while the decline in postneonatal mortality has been much greater for black infants than for white infants (4.9 percent versus 3.0 percent). Nevertheless, by 1979, the black neonatal mortality rate was about 80 percent higher than the white rate, while the black postneonatal mortality rate was more than twice the white rate.

One of the major factors in the decline in neonatal mortality is the improved survival of low-birth-weight infants. Before the mid-1960's, little change in neonatal mortality among low-birth-weight infants was apparent. More recent comparisons during the late 1960's and 1970's in selected States suggest large reductions in neonatal mortality for low-birth-weight infants.

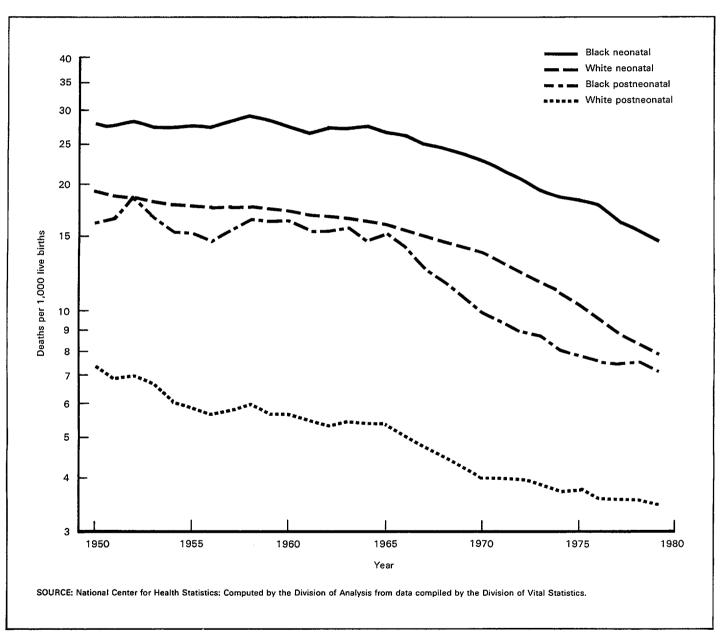


Figure 2. Neonatal and postneonatal mortality rates, according to race: United States, 1950-79

Excessive exposure to lead is widespread among young children from poor families

Excessive exposure to lead, particularly among young children, has remained a public health problem for decades. Elevated blood lead levels in young children, defined as lead levels of 30 micrograms per deciliter or more of whole blood, are of greatest concern because of the vulnerability of the developing nervous system to lead. Household paint applied before the 1940's and automobile emissions are two of the most common sources of lead found in children.

The toxic properties of lead are made worse by iron deficiency and undernutrition, both of which are more common among black children than among white children. Overall, 12 percent of black children, compared with 2 percent of white children, 6 months-

5 years of age had elevated levels of lead in their blood.

Among both white and black children, highest blood lead levels were found in children living in low-income households (less than \$6,000 annual family income) and in the inner-cities of large urban areas (1 million or more population).

The data also show a substantial decline from 1976 to 1980 in mean blood lead levels of young children in all race, sex, and income groups, averaging 40 percent overall. This decline parallels a decline in the use of lead in the production of gasoline during the same time period.

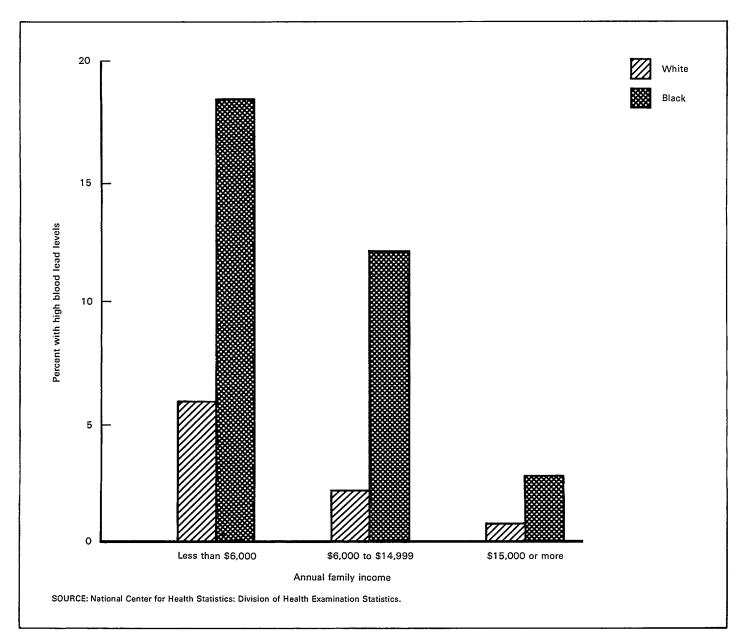


Figure 3. High blood lead levels in children 6 months-5 years of age, according to family income and race: United States, average annual 1976-80

Accidents now cause 4 out of 10 deaths of preschool children

Between 1950 and 1979, the death rate for children 1-4 years of age declined by 53 percent. Virtually all of this decline resulted from a 62-percent reduction in death rates for natural causes. In contrast, the death rate for motor vehicle accidents remained relatively stable and the rate for non-motor-vehicle accidents declined by only 32 percent. As a result, in 1979, accidents accounted for 41 percent of all deaths of children 1-4 years of age, compared with 26 percent in 1950.

In 1979, mortality from non-motor-vehicle accidents was 1.6 times higher for boys than for girls and about 1.9 times higher for black children than for white children. Since 1950, the racial difference has narrowed considerably as a result of a much greater reduction in death rates for black children. The two leading causes of these fatal accidents are fire and drowning.

Sex and race differences in motor vehicle accident

mortality are smaller. In 1979, the death rate for boys was 15 percent higher than that for girls, and the death rate for black children was 17 percent higher than that for white children.

The most dramatic mortality change in this age group is associated with influenza and pneumonia. These deaths decreased by 89 percent from 1950 to 1979, with most of the decline occurring since 1960. The declines were similar for boys and for girls, but smaller for white children than for black children. However, death rates for white children were about half of those for black children in 1979.

From 1960 through 1979, mortality from congenital anomalies and cancer also dropped notably by 36 percent and 57 percent, respectively. Decreases were observed for both sexes and races. About half of all mortality from cancer in this age group is associated with leukemia, for which treatment and survival have improved markedly.

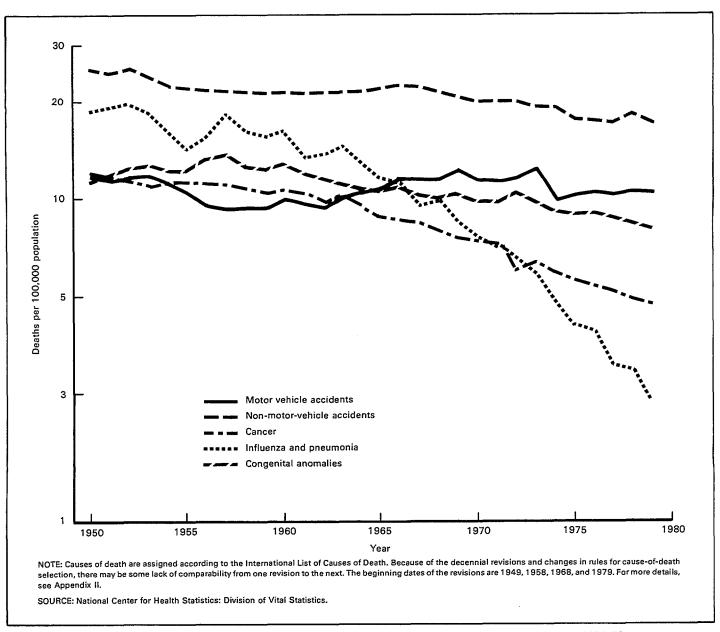


Figure 4. Death rates for children 1-4 years of age, according to leading causes of death: United States, 1950-79

Immunizations protect most children against major childhood diseases

Immunizations against communicable diseases have resulted in eradicating or markedly reducing the toll of several diseases previously responsible for substantial morbidity and mortality. Smallpox has now been eliminated worldwide. In the United States, perhaps the most noteworthy case is that of polio. When the vaccine first became available nationally in 1955, about 29,000 cases of polio were reported to the Centers for Disease Control. Just 5 years later, the number dropped to 3,000; and by 1975, only eight cases had been reported. Recent fluctuations in the number of reported cases reflect localized pockets of incomplete immunization levels in the population.

Similarly, reported measles incidence was at 385,000 in 1963 when the vaccine first became available; by 1968, the incidence fell to 22,000 cases. However, only 3 years later, it was back up to 75,000 cases. Reported incidence fell for a few more years only to jump up again by 1976 and 1977. These fluctuations may result from the difficulty in immunizing the population of children at highest risk or

changes in reporting practices. A concentrated effort is now underway to eradicate measles worldwide.

The vast majority of children are immunized against the major childhood diseases by the time they enter school. For example, data obtained by the Centers for Disease Control from the States for 1980-81 revealed immunization levels over 90 percent among kindergarten and first-grade students. However, data from the U.S. Immunization Survey suggest appreciable differences in immunization levels among preschool children by race and residence. Also, a special study conducted as part of the National Health Interview Survey in 1978 and 1979 showed that public health clinics and hospital outpatient departments play a prominent role in immunization among children from low-income families. Among children under 6 years of age who received a polio vaccination, 60 percent of those in families with income less than \$7,000 used these sources, compared with 15 percent of those in families with income of \$25,000 or more.

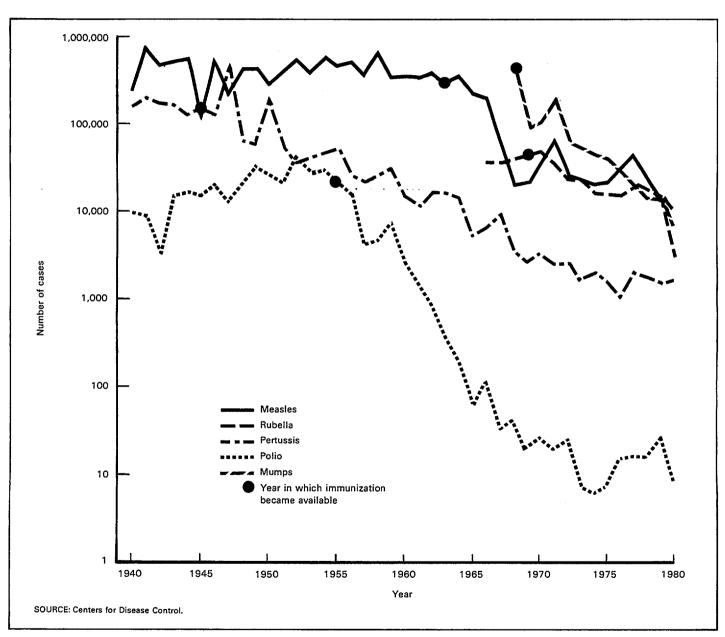


Figure 5. Reported cases of selected diseases before and after availability of immunization: United States, 1950-80

More school-age children die of accidents than of diseases

The death rate for children 5-14 years of age was cut by half between 1950 and 1979. Historically, non-motor-vehicle accidents have accounted for the highest mortality in this age group. However, reduction in death rates for these accidents and the increase in death rates for motor vehicle accidents have resulted in nearly equal numbers of deaths from these two causes since 1970. Fire and drowning are the two major causes of deaths from non-motor-vehicle accidents.

Accident mortality is much higher for boys than for girls in this age group. The sex differences are greater for non-motor-vehicle accidents than they are for motor vehicle accidents (a mortality ratio of 2.7 versus 1.8 in 1979). Large racial differences in mor-

tality for these ages are limited to non-motor-vehicle accidents where black children are more than 1.9 times as likely as white children to die from these accidents.

Since the late 1960's, mortality from natural causes has been lower than mortality from accidents and violence in this age group. Cancer, specifically leukemia, has been the leading cause of disease-related mortality since 1950. Death rates for leukemia were fairly stable from 1950 to 1970, but since then they have shown relatively large declines. Death rates for congenital anomalies are at their lowest levels now, after falling rather sharply between 1960 and 1970.

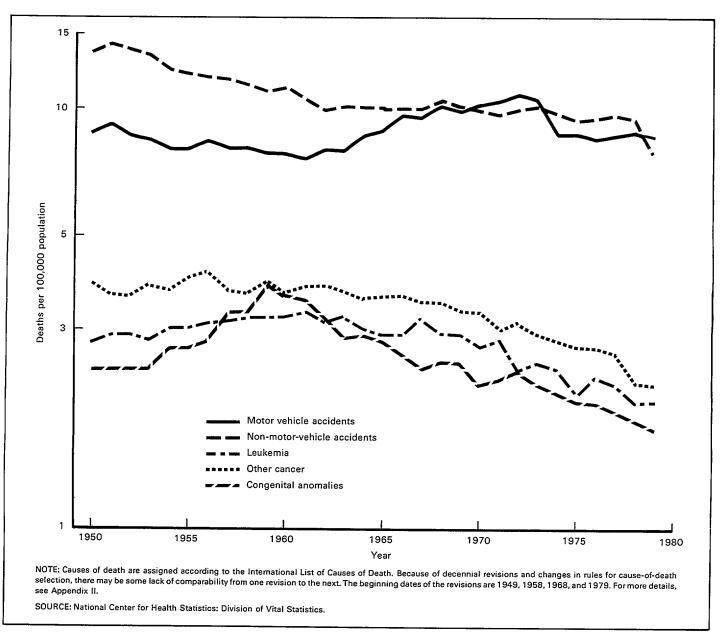


Figure 6. Death rates for children 5–14 years of age, according to selected causes of death: United States, 1950–79

Marijuana and cigarette use by high school seniors declines, but heavy drinking continues

Since 1975, national samples of high school seniors have been queried about their use of various legal and illegal drugs. The rapid increase in frequent marijuana use peaked in 1978 for boys and in 1979 for girls and has since begun to fall. High school seniors are concerned about possible adverse health effects of regular marijuana use. About half of the 1980 class believed that a great risk is associated with regular use.

Frequent use of alcohol among high school seniors has been relatively stable for boys and for girls between 1975 and 1980. However, 1980 survey results on heavy drinking (five or more drinks in a row on one or more occasions during the 2 weeks prior to interview) show a high prevalence in high school seniors, 52 percent among boys and 31 percent among girls.

The proportion of high school seniors smoking a half-pack of cigarettes or more on a daily basis began to decrease in the late 1970's. While more senior boys than girls were smoking on a daily basis in 1975, the gap was closing each year; by 1979, slightly higher proportions of girls than boys were smoking. Data from a 1979 telephone interview of a sample of all youths 17-18 years of age indicate similar patterns of higher proportions of female than male cigarette smokers. The adverse health consequences of cigarette use and increased peer pressure to quit smoking appear to be having some effects on these teenagers. However, by 1980, only 64 percent believed that smoking a pack of cigarettes a day carries a great risk to the user.

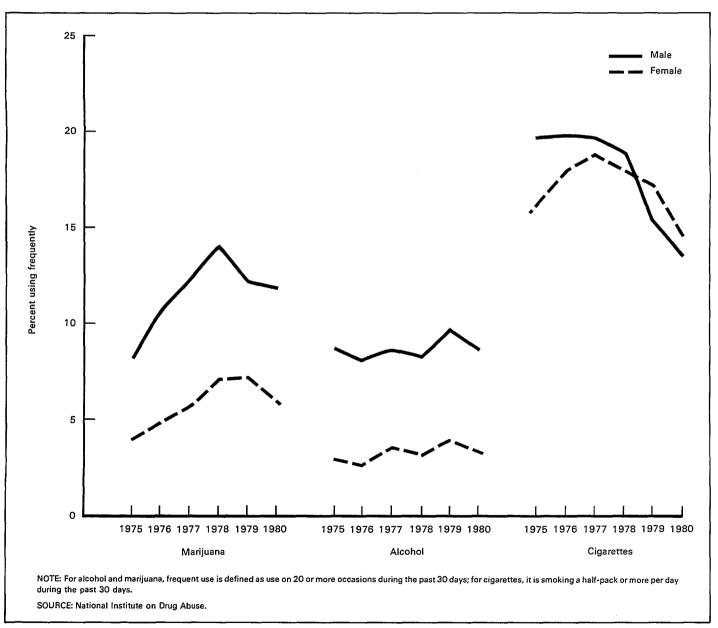


Figure 7. Frequent use of marijuana, alcohol, and cigarettes by high school seniors, according to sex: United States, 1975-80

Death rates for external causes converge for white and black young adults

Death rates among young people 15-24 years of age were only 8 percent lower in 1979 than they were in 1950. The decline was not smooth; from 1950 to 1960, the rate dropped 17 percent only to rise back up to the 1950 level by the early 1970's. Since 1976, the death rate has again been increasing. In 1979, death rates for males were three times higher than those for females and mortality among black people was 20 percent higher than among white people.

External causes of death—primarily accidents, homicide, and suicide—accounted for 80 percent of all deaths in this age group in 1979, up from 51 percent in 1950. Death rates for these causes have always been three to five time higher among males than among females. Trends in the death rate for external causes vary substantially by race. Historically, rates for young black people have been as much as 85 percent higher than those for young white people, but the death rates for external causes for both races at these ages have been converging. In 1979, the rate for black females was 4 percent higher than for white females and the rate for black males was 12 percent higher than for white males.

The leading cause of death among white males and females at these ages is motor vehicle accidents, accounting for more than 40 percent of all deaths. The death rate for motor vehicle accidents among white people 15-24 years of age is about twice as high as that among black people. Part of this difference is probably because the higher socioeconomic status among young white people results in greater access to automobiles.

For most of the 1950-79 period, trends in mortal-

ity from motor vehicle accidents among white males and females have been upward. The early to mid-1970's was a time of decline most likely associated with reduced driving and reduced speed limits. Since 1976, the death rate for motor vehicle accidents has been increasing. On the other hand, non-motor-vehicle accident mortality continued its decline but at a faster pace for black people than white people.

Homicides account for most deaths among black males and females in this age group, 39 percent and 25 percent, respectively. The homicide rate is about five times higher among black males and four times higher among black females than it is among their white counterparts. The 1960's and early 1970's witnessed a doubling of the homicide rate among black people. By the mid-1970's, the homicide rate began to decrease. The decreases in mortality from homicide and from non-motor-vehicle accidents among young black people, coupled with the rise in mortality from motor vehicle accidents among young white people, have led to the recent convergence in death rates.

Suicide, the third leading cause of death for young white people and fourth for young black people, rose dramatically for young males throughout the 1960's and 1970's. Among white males, the suicide rate was almost 2½ times higher in 1979 than in 1960. Although the suicide rate has been lower among black males than among white males, the rise in mortality from this cause has been no less dramatic. Among females, suicide has also risen substantially: Mortality was twice as high in 1979 as in 1960, and generally has been higher for white females than for black females.

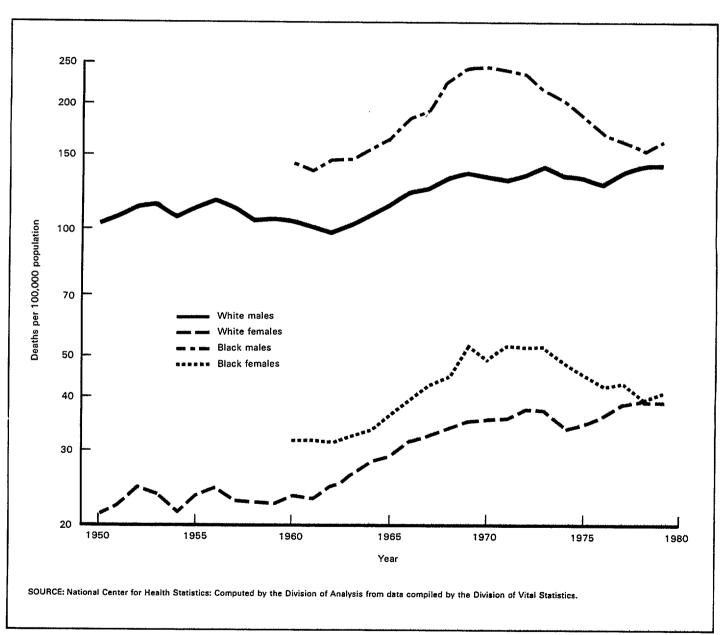


Figure 8. Death rates for external causes among persons 15-24 years of age, according to race and sex: United States, 1950-79

Natural causes account for only 1 out of 5 deaths of young adults

After a period of small declines between 1950 and 1970, death rates for natural causes have fallen rather substantially for people 15-24 years of age, about 25-30 percent for white males and females and black males and as much as 40 percent for black females.

In 1979, natural causes accounted for only 20 percent of all deaths among young people of this age group. However, the contribution of disease to the total mortality varies substantially by race and sex: 16 percent and 20 percent of deaths among white and black males, respectively, and 31 percent and 45 percent of deaths among white and black females, respectively. Death rates for natural causes have always been about twice as high among young black people as among young white people, although the race differential among females has narrowed.

In 1950, death rates were the same for white males and females, but the rates for females declined faster and have remained lower. By 1979, mortality was 52 percent higher among white males than among white females. From 1960 to 1966, death rates were higher among black females than among black males; but since then, the rates have declined much faster among black females than among black males. By 1979, mortality was 25 percent higher among black males than among black females.

Cancer is the leading natural cause of death in this age group, accounting for 26 percent of all natural deaths but only for about 5 percent of all deaths. Death rates for this cause have been declining since the late 1960's among young white people and since the early 1960's among young black people.

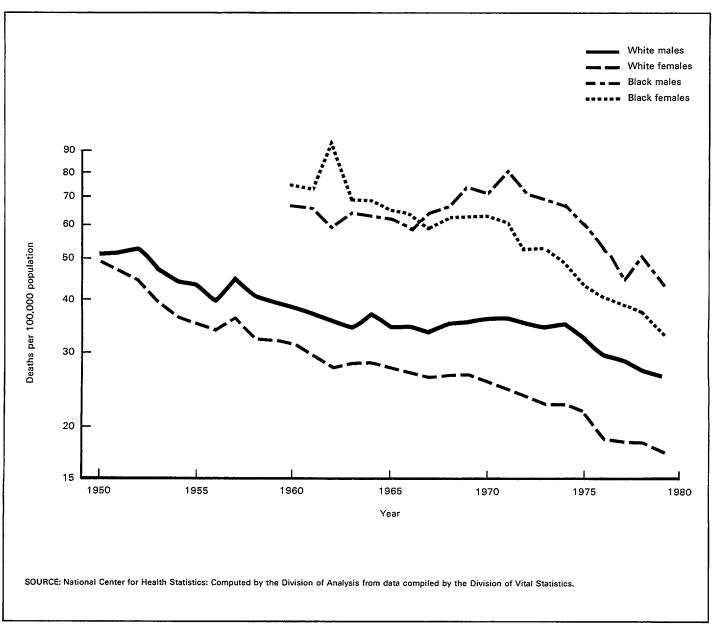


Figure 9. Death rates for natural causes among persons 15–24 years of age, according to race and sex: United States, 1950–79

Declining mortality in adults reflects reductions in heart disease and cancer deaths

Mortality among adults 25-44 years of age has decreased by about one-third since 1950. A substantial part of the reduction has resulted from the 46-percent decline in heart disease death rates since 1965. From 1950 to 1965, death rates for heart disease fell by only 15 percent. Cancer mortality has also been reduced by 31 percent since 1965. Prior to that time, the rate remained virtually unchanged. By 1979, deaths from cancer outnumbered those from heart disease by 17 percent.

Accidents are the leading cause of death in this age group. Death rates for accidents fluctuated between 1950 and 1979, reaching their highest levels in the late 1960's. This reflects primarily the pattern of motor vehicle accident mortality. After a marked decline between 1973 and 1976, the death rate for motor vehicle accidents has been increasing again. On the other hand, the death rate for non-motor-vehicle accidents has been decreasing steadily since 1973.

Suicide and homicide are the fourth and fifth leading causes of death. Both have been increasing since the mid-1950's. Homicide rates doubled and suicide rates increased by close to 60 percent between the late 1950's and 1979.

Sex differences in mortality are large at these ages. The overall death rate for men is twice that for women. Of the leading causes of death, only the death rate for cancer is lower among males than among females. This reflects the large toll taken by breast cancer (one-third of all female cancer deaths) and genital cancer (one-sixth). In fact, cancer is by far the leading cause of death among women in this age group, accounting for 2½ times as many deaths as heart disease or motor vehicle accidents, the next leading causes. Among men, motor vehicle accidents is the leading cause of death followed closely by heart disease. The next four leading causes (non-motor-vehicle accidents, cancer, homicide, and suicide) each account for roughly the same proportion of all deaths.

Race differentials in mortality are largest for this age group. Mortality among black people is about 2½ times as high as that among their white counterparts. The major cause accounting for this difference is homicide: Black men are eight times as likely and black women six times as likely as their white counterparts to be homicide victims. Homicide is the leading cause of death among black men of these ages, accounting for nearly one-fourth of all deaths in 1979. This difference persists despite the fact that homicide death rates for black people have declined since their peak in the mid-1970's while such rates have been relatively constant for white people. Heart disease death rates are also substantially higher among black people (2.2 times for men and 3.5 times for women).

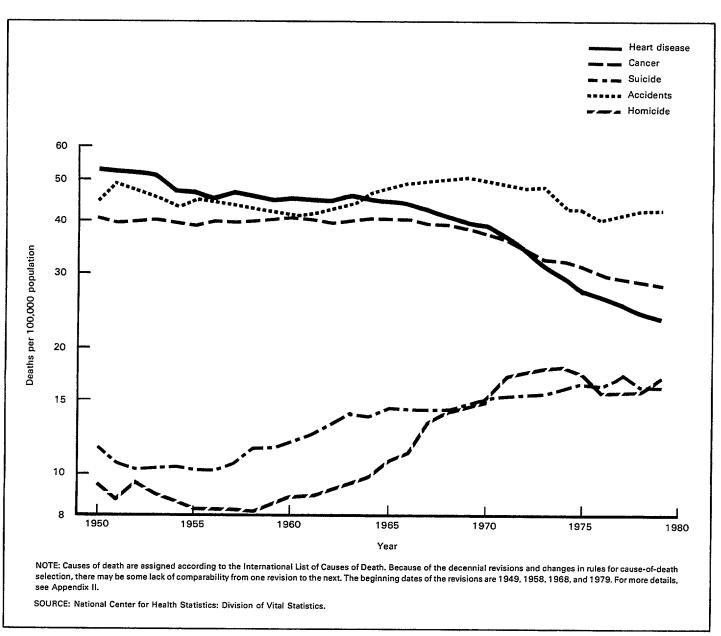


Figure 10. Death rates for persons 25-44 years of age, according to leading causes of death: United States, 1950-79

More adults are quitting smoking

Cigarette smoking is a major cause of mortality and morbidity in the United States today. It has been linked to heart disease, cancer, adverse pregnancy outcome, and several other disorders. Fortunately, increasing public awareness of the health risks associated with smoking has led to a decline in the proportion of adults who smoke.

From 1965 to 1980, the proportion of male and female cigarette smokers 25-44 years of age fell by 28 percent and 24 percent, respectively. By 1980, 43 percent of males and 33 percent of females 25-44 years of age were smokers. Furthermore, of those who had ever smoked, one-third of both males and females had quit. A greater proportion of adults are now entering this age group with no history of smoking: One-third of the men and one-half of the women have never smoked. Unfortunately, not all changes in smoking patterns have been favorable: The proportion of smokers who smoke 25 cigarettes or

more a day has increased since 1965 for both males and females. As a result, the proportion of the population who are heavy smokers remained constant for men and increased slightly for women.

The downturn in smoking has been more recent for females than for males of these ages. About half of the overall decline for females has occurred since 1976, compared with a third of the overall decline for males.

Strong socioeconomic differentials in smoking exist. For example, in 1980, 52 percent of the population 25-44 years of age who had less than a high school education were current smokers, compared with 31 percent of that age group with some college education. In the past 10 years, the prevalence of smoking among those with less than a high school education decreased by only 4 percent, compared with a 14-percent drop among those with some college education.

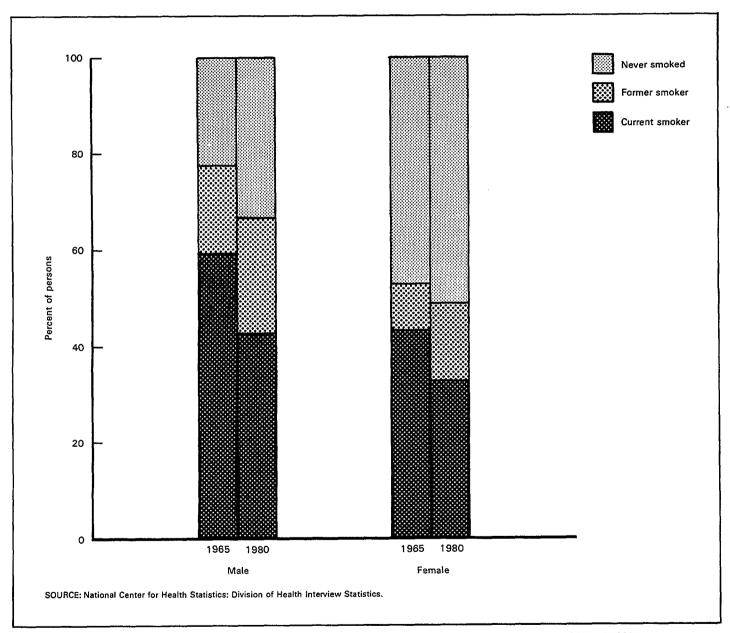


Figure 11. Cigarette smoking status of persons 25-44 years of age, according to sex: United States, 1965 and 1980

Heart disease and stroke mortality drop significantly in middle-aged adults

Among adults 45-64 years of age, mortality has declined by 27 percent since 1950. The decline in heart disease mortality was the major factor associated with the overall decrease. Cancer mortality claimed only half the number of deaths that heart disease did in 1950, but it increased during the next three decades so that, by 1979, the difference between the two leading causes of death was only 11 percent. Lung cancer mortality is responsible for the overall increase in cancer mortality. In 1979, mortality from lung cancer was 2.5 times as high as it was in 1950, while mortality from all other types of cancer actually fell by about 10 percent during this period.

Stroke, the third leading cause of death, showed the largest decline between 1950 and 1979 (62 percent). At the same time, the death rate for cirrhosis of the liver doubled by the early 1970's, but it has recently begun to decrease.

Accidents constitute the fourth leading cause of death in this age group. Deaths from non-motor-vehicle accidents have always outnumbered those from motor vehicle accidents. The difference was greatest in 1975 because of the sharp decline in motor vehicle accident mortality associated with the 55 mph speed limit. Since 1975, death rates for motor vehicle accidents have been rising slowly while

those for all other accidents have been falling. Motor vehicle accident mortality is 2½ times higher for males than for females and about 40 percent higher for black people than for white people.

The death rate for males 45-64 years of age was twice that for females of the same ages. Of the major causes of death, heart disease showed the biggest sex difference—men were three times more likely than women to die of heart disease. Mortality from cancer and stroke showed the smallest sex differences: Death rates were only 25-30 percent higher among men than they were among women. Cancer was by far the leading cause of death among females, accounting for 50 percent more deaths than heart disease. Breast cancer and, to a lesser extent, genital cancer are the two leading causes of cancer at these ages that pose a much greater risk for females than for males.

Overall, mortality at these ages is about 1.7 times higher for black people than for white people. Stroke mortality has the largest racial differences among the leading causes of death; rates for black people are three times greater than those for white people. Death rates among black people are also much higher for cirrhosis of the liver (about 70 percent), heart disease (50 percent), and cancer (40 percent).

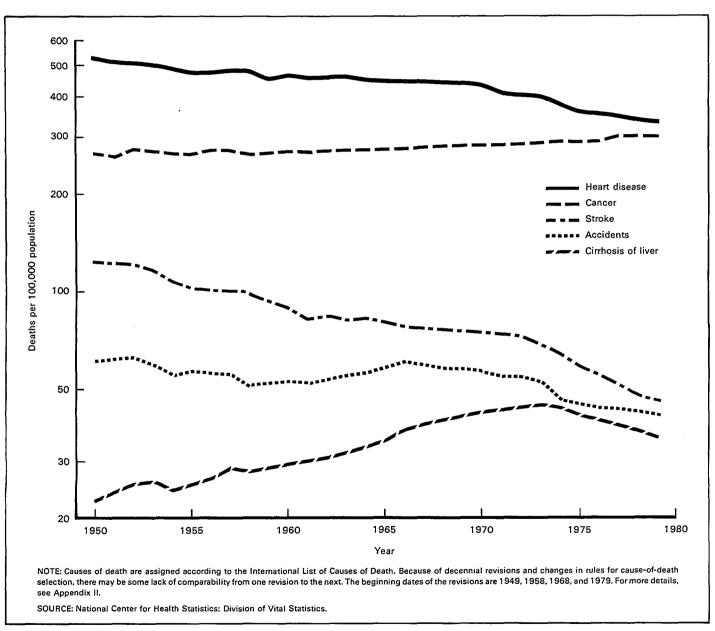


Figure 12. Death rates for persons 45-64 years of age, according to leading causes of death: United States, 1950-79

Most middle-aged adults report "good" health

Americans generally assess their own health as quite good, and few of them report major limitation of activity. For the 2-year period 1979-80, only 6 percent of adults 45-64 years of age reported that they were unable to carry out their usual activity because of chronic illness and 21 percent perceived their health as fair or poor.

No major sex differences exist in self-reporting of health status. However, because of different work-related characteristics of men and women, it is not surprising that 11 percent of males, compared with about 2 percent of females, reported being unable to carry on their usual activity because of a chronic condition.

Both self-perceived health status and limitation of activity are strongly related to certain socioeconomic characteristics. People with less than a high school education are 3½ times more likely to report fair or poor health status or activity limitation than are those with some college education. Men with less than a high school education are particularly impaired: Close to 20 percent of this group report being unable to perform their usual activity. Furthermore, black people are almost twice as likely as white people in this age group to report these problems.

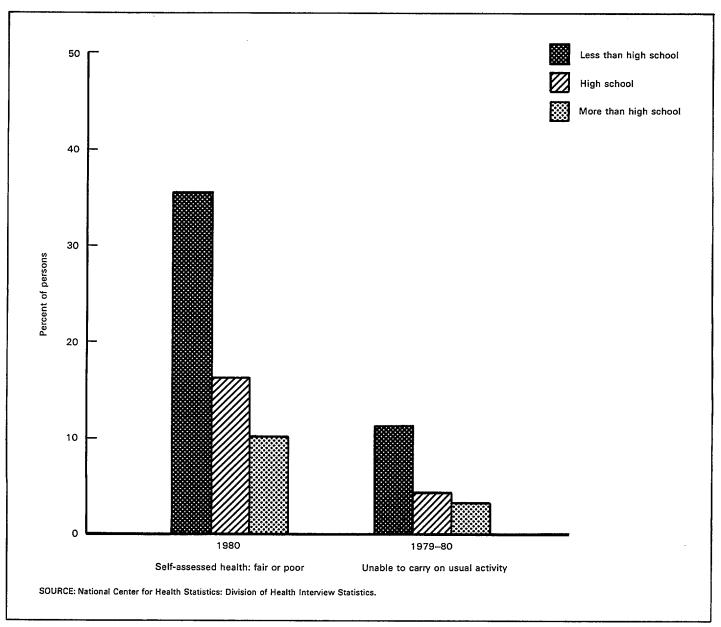


Figure 13. Selected measures of health for persons 45-64 years of age, according to educational attainment: United States, average annual 1979-80

More middle-aged adults are being tested for hypertension

Hypertension (high blood pressure) is a major risk factor for heart disease and stroke, and it affects about 1 out of 5 adult Americans. Black people, older people, and people with low incomes are all more likely than others to develop hypertension.

Clinical trials have shown that medical treatment to control elevated blood pressure can reduce mortality for individuals with mild or severe hypertension. Furthermore, favorable changes have occurred in treatment, awareness, and control of hypertension. Periodic blood pressure testing is a central component of better awareness and control.

The proportion of persons 45-64 years of age tested for hypertension increased substantially between 1974 and 1979, although the magnitude of the changes varied according to sex, race, and income.

Women were more likely than men to be tested for high blood pressure in 1974 and in 1979. However, large changes in blood pressure testing did occur among both black and white men 45-64 years of age. While white and black men were equally likely to be tested in 1974, black men were more likely to be tested in 1979. Similarly, blood pressure testing has increased more among black women than among white women in this age group. In 1979, about 85 percent of white women and 98 percent of black

women had a blood pressure test in the year preceding interview.

Recently released data from the 1976-80 National Health and Nutrition Examination Survey indicate that the increase in blood pressure testing has had a positive effect. The proportion of hypertensives unaware of their condition decreased by half between 1960-62 and 1976-80. Even more important, the proportion of hypertensives controlling their blood pressure by medication nearly doubled between the same two periods. Most of the increase in control occurred during the latter part of the 1970's. As a result, the proportion of the adult population with elevated blood pressure decreased between 1971-75 and 1976-80 after showing essentially no change between 1960-62 and 1971-75.

A number of events occurred during the 1970's that could have contributed to the changes noted. For example, mounting recognition of the importance of disease prevention has resulted in health education efforts to encourage the use of preventive services. This is particularly true for breast cancer and hypertension, both of which have received substantial publicity. The increases in blood pressure testing may be attributed in part to hypertension programs initiated during the 1970's.

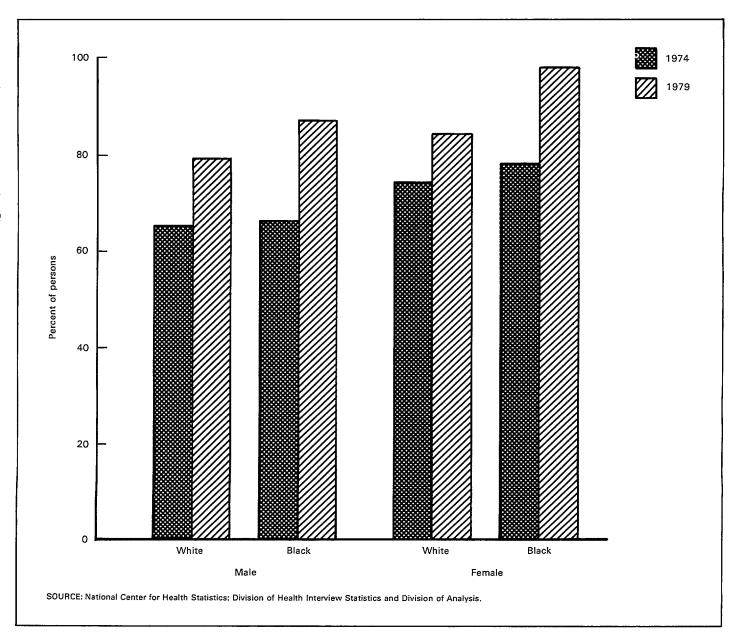


Figure 14. Persons 45-64 years of age with a blood pressure test during the past year, according to sex and race: United States, 1974 and 1979

Death rates for the elderly decline substantially

From 1950 to 1979, the death rate for the elderly population decreased by 17 percent. Since the population 85 years of age and over is growing more rapidly than that 65-84 years of age, a more accurate picture of mortality trends is provided by the age-adjusted death rate, which eliminates the distortions associated with changing age composition. The age-adjusted rate for the population 65 years of age and over fell by 27 percent, and the decline for females was twice as great as that for males.

Heart disease, cancer, and stroke accounted for 75 percent of all deaths among the elderly population in 1979 as well as in 1950. The two categories of influenza and pneumonia and diabetes mellitus accounted for an additional 5 percent.

About half of the overall decline in mortality during the period 1950-79 was a result of the decline in heart disease mortality, the leading cause of death; another quarter is associated with the fall in death rates for stroke, the third leading cause of death. Cancer, the second leading cause, is the only major cause of death to have increased (13 percent).

Cancers of the lung, colon, genital organs, and breast (among females) account for more than half of all deaths from cancer among the elderly. Recent trends among males include a slowing down of the large annual increases in lung cancer mortality and slowly increasing rates for cancers of the colon and genital organs. Among females, the most dramatic

changes have been the large annual increases in lung cancer mortality associated with prevalence of cigarette smoking, which peaked during the 1960's for women born in the years from 1901 through 1910.

Since 1968, death rates for heart disease have been declining rapidly for both males and females after a 12-year period of little change for males and small declines for females. Death rates for stroke have decreased more rapidly than rates for heart disease. Since 1968, annual decreases in the death rate for stroke have averaged 4 percent for both males and females.

Mortality differences between males and females 65 years of age and over have increased over time. In 1950, the age-adjusted rate for males was 34 percent higher than that for females; by 1979, the difference had increased to 69 percent. Of the leading causes of death in 1979, sex differences are most pronounced for cancer, especially lung cancer for which male mortality is nearly five times greater than female mortality.

The mortality experience of the elderly population in the United States compares favorably with that of the elderly in other industrialized countries. Recent rates of mortality decline in the United States are generally faster than those of other countries, with the exception of Japan.

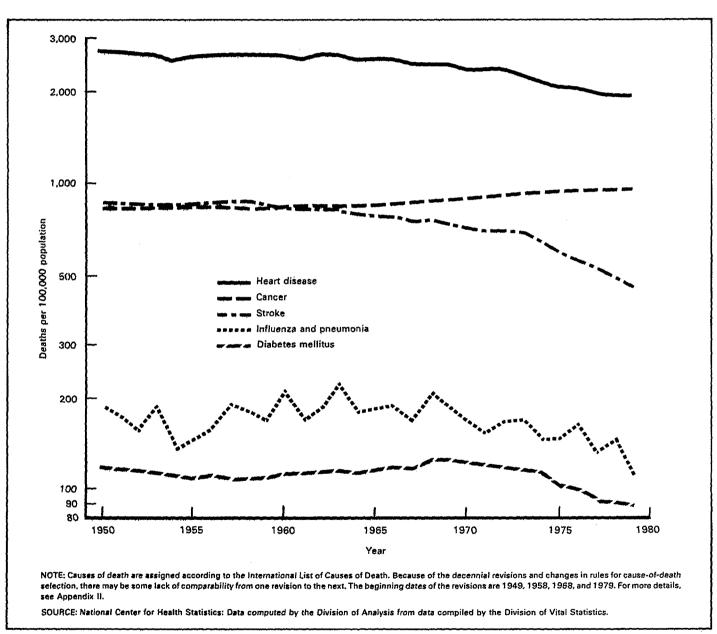


Figure 15. Age-adjusted death rates for persons 65 years of age and over, according to leading causes of death: United States, 1950-79

Heart disease creates heavy burden of illness among the elderly

The population 65 years of age and over represents about one-tenth of the American population but consumes about one-third of the health care dollar. In 1980, the elderly accounted for 17 percent of all doctor visits, 38 percent of all days in short-stay hospitals, and two-thirds of all deaths.

Heart disease, cancer, and stroke are the leading causes of death among the elderly. While these conditions account for roughly three-fourths of all deaths among the elderly, they account for far less in terms of their medical care utilization: one-fifth of doctor visits, two-fifths of hospital days, and almost half of all days spent in bed.

Heart disease leads the other conditions in each of the four indices examined, accounting for 10 percent of all doctor visits, 18 percent each of all short-stay hospital days and days spent in bed, and 45 percent of all deaths.

Arthritis and rheumatism, on the other hand, account for relatively few deaths and only 2 percent of hospital days. However, these conditions account for 16 percent of days spent in bed, nearly as much as for heart disease.

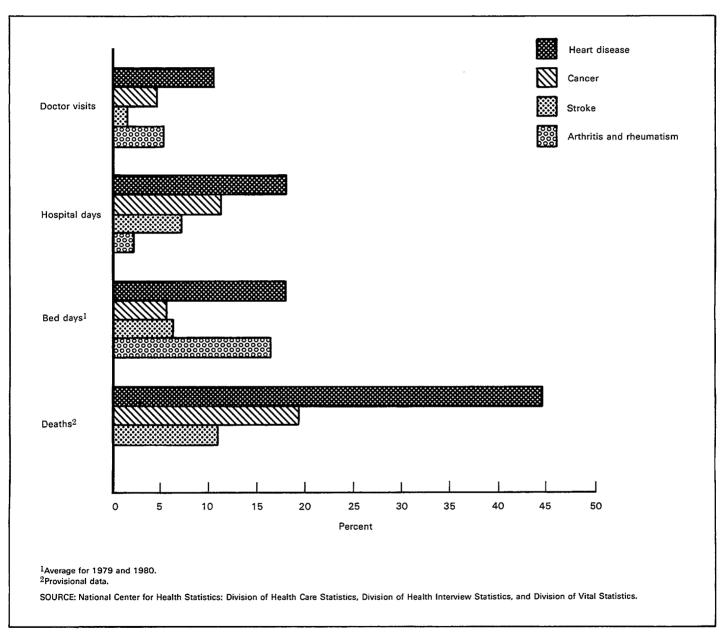


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PART B

Data on the Nation's Health

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Table 1. Live births, crude birth rates, and birth rates by age of mother, according to race: United States, selected years 1950-79

	Live births	Crude		Age									
Race and year		birth rate ^l	10-14 years	15-19 years	20-24 years	25-29 years	30-34 years	35-39 years	40-44 years	45-49 years			
Total ²			Live births per 1,000 women										
1950 1955 1960 1965	3,632,000 4,097,000 4,257,850 3,760,358	24.1 25.0 23.7 19.4	1.0 0.9 0.8 0.8	81.6 90.3 89.1 70.5	196.6 241.6 258.1 195.3	166.1 190.2 197.4 161.6	103.7 116.0 112.7 94.4	52.9 58.6 56.2 46.2	15.1 16.1 15.5 12.8	1.2 1.0 0.9 0.8			
1970	3,731,386 3,144,198 3,167,788 3,326,632 3,333,279 3,494,398	18.4 14.8 14.8 15.4 15.3 15.9	1.2 1.3 1.2 1.2 1.2	68.3 56.3 53.5 53.7 52.4 53.4	167.8 114.7 112.1 115.2 112.3 115.7	145.1 110.3 108.8 114.2 112.0 115.6	73.3 53.1 54.5 57.5 59.1 61.8	31.7 19.4 19.0 19.2 18.9 19.4	8.1 4.6 4.3 4.2 3.9 3.9	0.5 0.3 0.2 0.2 0.2 0.2			
White													
1950 1955 1960 1965	3,108,000 3,485,000 3,600,744 3,123,860	23.0 23.8 22.7 18.3	0.4 0.3 0.4 0.3	70.0 79.1 79.4 60.6	190.4 235.8 252.8 189.0	165.1 186.6 194.9 158.4	102.6 114.0 109.6 91.6	51.4 56.7 54.0 44.0	14.5 15.4 14.7 12.0	1.0 0.9 0.8 0.7			
1970	3,091,264 2,551,996 2,567,614 2,691,070 2,681,116 2,808,420	17.4 13.8 13.8 14.4 14.2 14.8	0.5 0.6 0.6 0.6 0.6	57.4 46.8 44.6 44.6 43.6 44.5	163.4 109.7 107.0 109.8 106.3 109.7	145.9 110.0 108.4 113.8 111.1 114.6	71.9 52.1 53.5 56.3 57.9 60.5	30.0 18.1 17.7 17.8 17.6 18.2	7.5 4.1 3.8 3.8 3.5 3.5	0.4 0.2 0.2 0.2 0.2 0.2			
Black													
1960 1965	602,264 581,126	31.9 27.5	4.3 4.3	156.1 144.6	295.4 243.1	218.6 180.4	137.1 111.3	73.9 61.9	21.9 18.7	1.1 1.4			
1970 1975 1976 1977 1978	572,362 511,581 514,479 544,221 551,540 577,855	25.3 20.9 20.8 21.7 21.6 22.3	5.2 5.1 4.7 4.7 4.4 4.6	147.7 113.8 107.0 107.3 103.7 104.9	202.7 145.1 143.4 147.7 147.5	136.3 105.4 105.5 111.1 110.6 114.2	79.6 54.1 54.7 58.8 59.6 62.4	41.9 25.4 24.6 25.1 24.0 24.4	12.5 7.5 6.8 6.6 6.0 6.1	1.0 0.5 0.5 0.5 0.4 0.4			

Live births per 1,000 population.

NOTE: Data are based on births adjusted for underregistration for 1950 and 1955 and on registered births for all other years. Figures for 1960, 1965, and 1970 are based on a 50-percent sample of births; for 1975-79, they are based on 100 percent of births in selected States and on a 50-percent sample of births in all other States. Beginning in 1970, births to nonresidents of the United States are excluded.

SOURCE: National Center for Health Statistics: <u>Vital Statistics of the United States, 1979</u>, Vol. 1. Public Health Service, DHHS, Hyattsville, Md. To be published.

²Includes all other races not shown separately.

Table 2. Birth rates for women 15-44 years of age, according to live-birth order and race: United States, selected years 1950-79

			Live-birth order							
Race and year	Total	1	2	3	4	5 or higher				
Total		Live b	irths per 1,000 wo	men 15-44 years of	age					
1950 1955 1960 1965	106.2 118.3 118.0 96.6	33.3 32.8 31.1 29.8	32.1 31.8 29.2 23.4	18.4 23.1 22.8 16.6	9.2 13.3 14.6 10.7	13.2 17.3 20.3 16.1				
1970	87.9 66.7 65.8 67.8 66.6 68.5	34.2 28.4 27.9 28.6 28.3 29.2	24.2 21.2 21.1 21.9 21.4 22.0	13.6 9.5 9.6 10.1 10.0 10.3	7.2 3.9 3.8 3.9 3.8 3.9	8.7 3.7 3.4 3.3 3.1 3.0				
White										
1950 1955 1960 1965	102.3 113.7 113.2 91.4	33.3 32.6 30.8 28.9	32.3 32.0 29.2 23.0	17.9 22.9 22.7 16.2	8.4 12.6 14.1 10.2	10.4 13.6 16.4 13.1				
1970 1975 1976 1977 1978	84.1 63.0 62.2 64.0 62.7 64.5	32.9 26.9 26.5 27.3 27.0 27.9	23.7 20.5 20.4 21.1 20.5 21.2	13.3 8.9 9.0 9.5 9.3 9.6	6.8 3.6 3.4 3.5 3.4	7.4 3.1 2.8 2.6 2.5 2.4				
Black		2,12								
1960 1965	153.5 133.9	33.6 35.7	29.3 26.2	24.0 19.4	18.6 14.6	48.0 38.0				
1970	115.4 89.2 87.2 89.8 88.6 90.5	43.3 37.4 35.8 36.3 35.3 36.2	27.1 24.6 24.8 26.0 25.9 26.5	16.1 12.8 13.1 13.9 14.2	10.0 6.3 6.3 6.5 6.7 6.8	18.9 8.1 7.2 7.0 6.6 6.3				

Includes all other races not shown separately.

NOTE: Data are based on births adjusted for underregistration for 1950 and 1955 and on registered births for all other years. Figures for 1960, 1965, and 1970 are based on a 50-percent sample of births; for 1975-79, they are based on 100 percent of births in selected States and on a 50-percent sample of births in all other States. Beginning in 1970, births to nonresidents of the United States are excluded.

SOURCE: National Center for Health Statistics: <u>Vital Statistics of the United States, 1979</u>, Vol. 1. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 3. Completed fertility rates and parity distribution for women 50-54 years of age at the beginning of selected years 1925-80, according to race and birth cohort: United States, selected birth cohorts 1871-1930

(Data are based on the national vital registration system)

Age Com-				Parity (number of children born alive)							
Race and birth cohort	50-54 as of January 1	pleted fer- tility rate ¹	fer- Total ility	0	1	2	3	4	5	6	7 or more
Total						Dist	ribution o	of women ²			
1871-75	1925 1930 1935 1940 1945 1950 1955 1960 1965 1970 1975 1980	3,773.5 3,531.9 3,321.6 3,136.8 2,932.6 2,675.9 2,441.4 2,285.8 2,354.3 2,574.0 2,856.9 3,079.2	1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0	207.2 216.8 217.4 210.4 192.7 194.6 201.9 215.6 190.1 149.0 108.5 105.5	112.8 123.2 134.6 148.5 172.0 200.7 227.6 225.1 208.6 179.0 152.1 113.7	124.2 132.0 142.5 153.2 177.2 195.2 206.2 218.7 238.1 251.7 248.7 226.5	110.0 114.0 119.3 129.7 139.3 136.6 129.3 131.4 149.8 174.6 197.0 209.6	93.6 93.0 95.0 99.5 97.8 87.8 80.4 77.5 85.2 102.8 123.5 143.5	75.1 72.0 72.0 68.0 61.5 53.5 48.6 44.6 46.3 55.8 68.0 81.9	66.4 64.5 57.9 55.4 48.3 41.5 34.7 29.2 28.8 32.0 39.5 47.6	210.7 184.5 161.3 135.3 111.2 90.1 71.3 57.9 53.1 55.1 62.7 71.7
White	1900	3,073.2	1,000.0	103.3	110.7	22010			3275		
1871-75	1925 1930 1935 1940 1945 1950 1955 1960 1965 1970 1975	3,663.6 3,444.4 3,253.8 3,092.9 2,890.4 2,631.5 2,399.0 2,248.9 2,313.5 2,526.7 2,793.7 2,986.1	1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0	209.7 218.2 217.6 209.1 191.7 193.1 197.9 207.9 177.4 134.6 94.2 94.1	112.1 121.9 132.2 144.3 167.5 192.1 219.5 218.0 204.9 175.9 150.6 114.1	127.9 136.1 147.9 160.3 184.6 205.9 218.3 233.2 254.1 268.7 264.6 240.2	112.9 116.9 122.4 132.4 141.4 141.4 135.8 138.8 158.9 185.1 208.8 222.3	95.5 94.8 96.0 100.2 98.0 89.0 82.3 79.6 88.0 106.5 127.9 148.8	77.2 74.0 74.2 70.3 64.2 55.2 49.4 44.7 46.1 55.3 67.9 81.2	66.7 64.2 57.8 54.8 47.8 41.1 33.7 28.0 27.4 30.3 36.9 44.5	198.0 173.9 151.9 128.6 104.8 82.2 63.1 49.8 43.2 43.6 49.1 54.8
All other 1871-75 1876-80 1881-85 1886-90 1891-95 1901-05 1906-10 1911-15 1916-20 1921-25 1926-30	1925 1930 1935 1940 1945 1950 1955 1960 1965 1970 1975	4,770.8 4,254.7 3,865.0 3,451.4 3,212.5 2,967.7 2,706.7 2,529.1 2,641.2 2,924.2 3,315.9 3,718.9	1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0 1,000.0	185.7 207.7 223.1 231.9 222.3 227.4 250.4 287.5 296.1 266.2 217.7 187.4	118.2 134.0 151.5 175.9 206.7 255.0 275.9 266.6 232.4 202.0 163.5 110.8	93.6 99.5 99.8 105.9 112.4 114.1 117.8 114.5 116.3 120.9 131.7 130.2	82.0 87.4 96.5 96.6 114.5 97.5 81.0 73.2 78.3 91.2 108.2 121.0	76.4 79.9 85.3 93.3 92.6 74.3 62.3 60.1 64.1 72.5 89.0	56.1 54.7 41.5 52.4 40.4 38.8 43.0 43.5 46.1 57.8 68.7 85.7	65.3 64.8 64.1 58.0 48.4 42.6 39.1 35.6 38.9 44.9 56.4	322.7 272.0 238.2 186.0 162.7 150.3 130.5 119.0 127.8 144.5 164.8 189.2

¹Number of children born alive to each 1,000 women who have completed their reproductive histories (women 50-54 years of age).

²Proportional distribution of each 1,000 women in the cohort by the number of children born alive to them.

NOTE: Example of use of table—For every 1,000 women 50-54 years of age in 1980, an average of 3,079.2 children were born

alive (about 3 children per woman). About 11 percent of the women in this cohort reached 50-54 years of age having had no children, about 11 percent had 1 child, and about 12 percent had 6 children or more.

SOURCES: National Center for Health Statistics: Fertility Tables for Birth Cohorts by Color, United States, 1917-73 by R. Heuser. DHEW Pub. No. (HRA) 76-1152. Health Resources Administration. Washington. U.S. Government Printing Office, Apr. 1976; Data computed from Vital Statistics of the United States, 1979, Vol. 1. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 4. Selected measures of teenage fertility, according to age and race: United States, 1968-79 (Data are based on the national vital registration system)

					I	\ge				
Race and year	10-14 years	15-17 years	18-19 years	10-14 years	15-17 years	18-19 years	15-17 years	18-19 years	15-17 years	18-19 years
Total ¹	Live births per 1,000 women			Percent of all live births			Live births to ummarried women per 1,000 ummarried women		Live births to unmarried women per 1,000 total live births	
1968	1.0 1.0 1.2 1.1 1.2 1.3 1.2 1.3 1.2	35.1 35.7 38.8 38.3 39.2 38.9 37.7 36.6 34.6 34.5 32.9 33.1	113.5 112.4 114.7 105.6 97.3 91.8 89.3 85.7 81.3 81.9 81.0 82.6	0.3 0.3 0.3 0.4 0.4 0.4 0.4 0.4 0.3	5.5 5.6 6.0 6.4 7.3 7.6 7.4 7.2 6.8 6.4 6.1	11.4 11.2 11.3 11.7 11.7 11.4 11.3 10.8 10.4 10.2	14.7 15.2 17.1 17.6 18.6 18.9 19.0 19.5 19.3 20.1	30.0 31.5 32.9 31.7 31.0 30.6 31.4 32.8 32.5 35.0 35.7	403.7 412.8 429.8 445.4 458.5 466.9 482.5 513.9 540.2 565.5 574.9 599.6	201.3 210.7 223.9 232.0 246.8 255.7 270.4 298.1 316.1 343.7 361.6 380.7
White							•			
1968	0.4 0.4 0.5 0.5 0.6 0.6 0.6 0.6	25.6 26.4 29.2 28.6 29.4 29.5 29.0 28.3 26.7 26.5 25.4	100.5 99.2 101.5 92.4 84.5 79.6 77.7 74.4 70.7 71.1 70.1	0.1 0.1 0.1 0.2 0.2 0.2 0.2 0.2 0.2	4.2 4.3 4.6 5.7 6.0 5.8 5.4 5.1 4.9 4.6	10.5 10.2 10.4 10.7 10.6 10.4 10.3 9.9 9.4 9.3 9.1	6.2 6.6 7.5 7.4 8.7 8.5 8.9 9.7 9.9 10.7	16.8 17.0 17.6 15.9 15.1 15.0 15.4 16.6 17.0 18.8 19.5 21.2	234.4 240.3 252.0 251.7 264.4 276.4 294.2 329.6 357.4 389.2 400.9 424.3	127.4 129.0 135.0 131.7 136.7 142.6 150.1 171.9 187.9 209.5 224.4 242.7
Black										
1968	4.7 4.8 5.2 5.1 5.4 5.0 5.1 4.7 4.4	98.2 96.9 101.4 99.7 99.9 96.8 91.0 86.6 81.5 81.2 76.6	206.1 202.5 204.9 193.8 181.7 169.5 162.0 156.0 146.8 147.6 145.0	1.2 1.3 1.3 1.4 1.5 1.4 1.4 1.3	13.1 13.4 14.0 15.5 15.8 15.4 14.6 13.9 13.1 12.2	16.6 16.7 16.6 16.4 17.0 17.1 17.1 16.8 16.0 15.4 15.2	72.3 77.9 80.9 82.9 81.9 79.4 77.7 74.6 74.3 70.3	129.1 136.4 136.3 129.8 123.0 124.9 126.8 121.6 125.9 124.3 128.8	720.9 759.6 796.3 810.1 825.6 848.0 874.0 897.4 904.7 909.1 928.7	482.9 521.4 560.3 590.2 603.8 638.3 676.0 709.0 746.4 764.8 788.7

Includes all other races not shown separately.

NOTE: Data are based on births adjusted for underregistration for 1950 and 1955 and on registered births for all other years. Figures for 1960, 1965, and 1970 are based on a 50-percent sample of births; for 1975-79, they are based on 100 percent of births in selected States and on a 50-percent sample of births in all other States. Beginning in 1970, births to nonresidents of the United States are excluded.

SOURCE: Division of Vital Statistics, National Center for Health Statistics: Selected data.

Table 5. Legal abortion ratios, according to selected patient characteristics: United States, 1973-79

(Data are based on reporting by State health departments and by facilities)

Selected				Year		-					
characteristic	1973	1974	1975	1976	19 7 7	1978	1979 ¹				
		Abortions per 100 live births									
Total	19.6	24.2	27.2	31.2	32.4	34.7	35.8				
Age											
Under 15 years————————————————————————————————————	74.3 31.7 17.9 12.3 16.5 26.7 40.2	92.4 39.9 21.9 15.0 20.5 34.9 53.8	101.5 46.4 25.0 16.6 22.1 37.5 59.9	111.2 54.4 30.1 19.0 23.5 41.1 68.9	112.1 57.2 32.5 19.9 22.8 42.4 74.2	110.2 61.8 35.6 21.6 23.6 43.7 76.6	121.3 66.0 37.3 22.3 23.3 41.5 74.7				
WhiteAll other	17.5 28.9	20.7 39.6	22.7 46.5	25.6 55.1	26.6 57.1	28.9 58.6	30.7 56.8				
Marital status											
Married———————————————————————————————————	6.2 109.8	7.6 132.6	.8.3 141.1	9.0 159.2	9.3 158.5	11.0 156.7	10.7 157.8				
0	23.0 12.1 19.6 25.8 26.4	27.4 15.0 25.6 34.6 35.3	30.2 17.3 29.7 39.8 41.3	35.2 20.2 33.0 44.6 46.7	41.1 19.1 31.2 39.3 41.5	46.3 20.8 32.4 35.7 31.6	48.8 21.3 32.7 34.3 29.1				

Provisional data.

SOURCE: Centers for Disease Control: Abortion Surveillance, 1973-78. Public Health Service, DHHS, Atlanta, Ga., May 1975-Nov. 1980; Unpublished data.

²For 1973-77, data indicate number of living children.

Table 6. Legal abortions, according to selected characteristics: United States, 1973-79

(Data are based on reporting by State health departments and by facilities)

Selected		Year									
characteristic	1973	1974	1975	1976	1977	1978	1979 ¹				
			Number of	legal aborti	ons reported	1					
Centers for Disease Control		763,476 898,600	854,853 1,034,200	988,267 1,179,300		1,157,776 1,409,600					
			Per	cent distrib	ution						
Total	- 100.0	100.0	100.0	100.0	100.0	100.0	100.0				
Period of gestation											
Under 9 weeks———————————————————————————————————	- 29.4 - 17.9 - 6.9 - 8.0	42.6 28.7 15.4 5.5 6.5	44.6 28.4 14.9 5.0 6.1 1.0	47.0 28.0 14.4 4.5 5.1 0.9	51.2 27.2 13.1 3.4 4.3 0.9	52.2 26.9 12.3 4.0 3.7 0.9	52.1 27.0 12.5 4.2 3.4 0.9				
Type of procedure				•••			• • • • • • • • • • • • • • • • • • • •				
Curettage——————————————————————————————————	- 10.4 - 0.7	89.7 7.8 0.6 1.9	90.9 6.2 0.4 2.4	92.8 6.0 0.2 0.9	93.8 5.4 0.2 0.7	94.6 3.9 0.1 1.4	95.0 3.3 0.1 1.6				
In State of residenceOut of State of residence		86.6 13.4	89.2 10.8	90.0 10.0	90.0 10.0	89.3 10.7	90.1 9.9				
Previous induced abortions											
0		86.8 11.3 1.5 0.4	81.9 14.9 2.5 0.7	79.8 16.6 2.7 0.9	76.8 18.3 3.4 1.5	70.7 22.1 5.3 1.8	68.9 23.0 5.9 2.1				

Provisional data.

NOTE: For a discussion of the differences in reported legal abortions between the Centers for Disease Control and the Alan Guttmacher Institute, see Appendix I. Percent distributions exclude cases for which selected characteristic was unknown and are based on abortions reported to the Centers for Disease Control.

SOURCES: Centers for Disease Control: Abortion Surveillance, 1978. Public Health Service, DHHS, Atlanta, Ga., Nov. 1980; Unpublished data; Sullivan, E., Tietze, C., and Dryfoos, J.: Legal abortions in the United States, 1975-1976. Fam. Plann. Perspect. 9(3):116-129, May-June 1977; The Alan Guttmacher Institute: Personal communication, 1982.

Table 7. Legal abortions, abortion-related deaths and death rates, and relative risk of death, according to period of gestation: United States, 1974-76 and 1977-79

(Data are based primarily on reporting by State health departments and by facilities)

Year and period	Number of	Abortio de	Relative	
of gestation	legal abortions reported	Number	Rate per 100,000 abortions	risk of death ¹
1974-76		***************************************		** *** *** *** ***********************
Total-	- 2,606,596	65	2.5	•••
Under 9 weeks	- 1,171,478	7	0.6	1.0
9-10 weeks		10	1.4	2.3
11-12 weeks		10	2.6	4.3
13-15 weeks	- 129,689	10	7.7	12.8
16-20 weeks	- 151,821	20	13.2	22.0
21 weeks and over		8	28.8	48.0
197779				
Total	- 3,489,127	42	1.2	•••
Under 9 weeks	- 1,808,655	9	0.5	1.0
9-10 weeks		8	0.8	1.6
11-12 weeks		7	1.6	3.2
13-15 weeks		3	2.2	4.4
16-20 weeks	- 131,534	14	10.6	21.2
21 weeks and over	- 30,839	1	3.2	6.4

¹Relative risk is the ratio of the death rate in the specified category to the death rate for the gestation period under 9 weeks.

SOURCE: Centers for Disease Control: Abortion Surveillance, 1978. Public Health Service, DHHS, Atlanta, Ga., Nov. 1980; Unpublished data.

Table 8. Lifetime births expected by currently married women and percent of expected births already born, according to age and race: United States, selected years 1967-79

(Data are based on reporting of birth expectations by currently married women of the civilian noninstitutionalized population)

	All ages		Age							
Race and year	18-34 years	18-19 years	20-21 years	22-24 years	25-29 years	30-34 years				
Total ¹		Expec	ted births per c	urrently married	woman					
1967	3.1 2.6 2.3 2.2	2.7 2.3 2.2 2.1	2.9 2.4 2.2 2.2	2.9 2.4 2.2 2.2	3.0 2.6 2.3 2.2	3.3 3.0 2.6 2.3				
White										
1967 1971 1975 1979	3.0 2.6 2.3 2.2	2.7 2.3 2.2 2.1	3.0 2.4 2.1 2.2	2.8 2.4 2.1 2.1	3.0 2.6 2.2 2.2	3.2 2.9 2.6 2.3				
Black										
1967 1971 1975 1979	3.5 3.1 2.8 2.5	* * *	2.5 2.4 2.6 2.5	3.0 2.8 2.5 2.4	3.4 3.1 2.6 2.6	4.3 3.7 3.2 2.6				
Total ¹		Per	cent of expected	births already b	orn					
1967 1971 1975 1979	70.2 69.4 68.8 67.4	26.9 25.3 27.5 30.1	33.2 32.5 30.7 33.4	47.8 46.7 43.9 44.0	76.1 74.4 70.9 65.8	92.7 93.7 93.0 90.2				
White										
1967 1971 1975 1979	68.9 68.9 68.2 66.9	24.2 23.7 24.9 29.7	30.1 31.4 29.4 32.3	46.2 45.3 42.3 42.8	75.1 74.1 70.5 64.9	92.9 93.8 93.2 90.5				
Black										
1967 1971 1975 1979	82.8 74.8 76.4 74.6	* * *	65.7 43.0 43.3 46.7	67.9 57.5 61.0 56.3	87.9 81.0 78.2 77.7	92.3 93.4 91.8 89.5				

¹Includes all other races not shown separately.

SOURCE: U.S. Bureau of the Census: Population characteristics. <u>Current Population Reports</u>. Series P-20, Nos. 301 and 358. Washington. U.S. Government Printing Office, Nov. 1976 and Dec. 1980.

Table 9. Death rates for all causes, according to race, sex, and age: United States, selected years 1950-80

Dana and and		Year									
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²			
Total ³		Number of deaths per 100,000 resident population									
All ages, age adjusted4 All ages, crude	841.5 963.8	760.9 954.7	739.0 944.6	714.3 945.3	638.3 888.5	606.1 883.4	588.8 869.5	594.1 892.6			
Under 1 years————————————————————————————————————	3,299.2 139.4 60.1 128.1 178.7 358.7 853.9 1,911.7 4,067.7 9,331.1 20,196.9	2,696.4 109.1 46.6 106.3 146.4 299.4 756.0 1,735.1 3,822.1 8,745.2 19,857.5	2,463.3 95.9 42.3 109.1 150.8 307.4 746.6 1,683.4 3,662.8 8,358.6 20,069.0	3,582.7 8,004.4	1,641.0 70.8 35.7 118.9 143.2 266.8 649.6 1,495.5 3,189.2 7,359.2	1,434.4 69.2 33.9 117.5 135.5 238.9 609.7 1,416.3 3,027.2 7,187.8 14,700.7	1,391.8 65.6 32.2 117.7 137.5 230.2 589.4 1,369.6 2,941.7 6,998.5 14,096.3	1,310.7 65.7 31.5 118.8 140.7 225.9 590.7 1,381.1 2,968.5 7,178.4 14,489.6			
White male All ages, age adjusted4 All ages, crude	963.1 1,089.5	917.7 1,098.5	911.1 1,087.6	893.4 1,086.7	812.7 1,015.3	773.1 999.8	751.1 982.2	757.0 1,001.9			
Under 1 year	3,400.5 135.5 67.2 152.4 185.3 380.9 984.5	2,694.1 104.9 52.7 143.7 163.2 332.6 932.2 2,225.2 4,848.4 10,299.6 21,750.0	2,409.0 91.5 48.1 148.3 167.7 336.5 912.4 2,213.5 4,826.7 10,238.2 22,733.6	2,113.2 83.6 48.0 170.8 176.6 343.5 882.9 2,202.6 4,810.1 10,098.8	1,594.4 71.3 41.5 165.9 169.1 295.8 790.2 1,954.5 4,355.8 9,608.1 18,257.9	1,359.6 71.7 39.2 168.5 166.7 268.1 733.8 1,819.2 4,135.6 9,420.5 18,100.3	1,330.1 66.1 37.6 171.3 171.9 258.6 710.1 1,754.2 4,007.6 9,148.9 17,361.2	1,253.6 68.5 35.1 173.6 178.3 260.5 716.2 1,747.2 4,018.4 9,362.6			
White female All ages, age adjusted4 All ages, crude	645.0 803.3	555.0 800.9	527.6 800.8	501.7 812.6	445.3 783.8	425.5 796.5	412.2 787.2	415.5 814.2			
Under 1 year— 1-4 years— 5-14 years— 15-24 years— 25-34 years— 35-44 years— 45-54 years— 55-64 years— 65-74 years— 75-84 years— 85 years and over—	2,566.8 112.2 45.1 71.5 112.8 235.8 546.4 1,293.8 3,242.8 8,481.5 19,679.5	2,007.7 85.2 34.7 54.9 85.0 191.1 458.8 1,078.9 2,779.3 7,696.6 19,477.7	1,801.3 74.6 31.0 55.9 85.9 194.4 467.9 1,016.5 2,580.0 7,133.6 19,353.7	1,614.6 66.1 29.9 61.6 84.1 193.3 462.9 1,014.9 2,470.7 6,698.7 16,729.5	1,222.3 57.1 25.8 56.0 73.3 164.6 414.8 944.6 2,152.8 6,034.7 14,494.1	1,069.7 53.3 25.0 58.1 69.3 145.8 393.9 914.0 2,063.8 5,810.2 14,079.0	1,028.6 51.8 23.8 56.4 66.7 139.9 376.0 889.1 2,013.8 5,645.9 13,565.2	970.9 50.9 25.6 55.1 67.6 134.5 371.7 897.9 2,042.4 5,754.6 14,043.7			

Table 9. Death rates for all causes, according to race, sex, and age: United States, selected years 1950-80--Continued

_				Yea	ar			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male	-	Numb	oer of deat	hs per 100	,000 reside	nt populat	ion	
All ages, age adjusted ⁴ All ages, crude	1,373.1 1,260.3	1,246.1 1,181.7	1,270.3 1,163.0	1,318.6 1,186.6	1,174.3 1,064.0	1,113.1 1,028.7	1,090.4 1,012.1	
Under 1 year————————————————————————————————————	<pre>} 1,412.6 95.1 289.7 503.5 878.1 1,905.0 3,773.2 5,310.3 } 10,101.9</pre>	5,306.8 208.5 75.1 212.0 402.5 762.0 1,624.8 3,316.4 5,798.7 8,605.1 14,844.8	5,039.9 182.3 69.0 228.3 446.5 852.9 1,679.4 3,305.7 5,655.8 8,981.5 15,966.7	4,298.9 150.5 67.1 320.6 559.5 956.6 1,777.5 3,256.9 5,803.2 9,454.9 14,415.4	3,253.5 114.6 57.3 250.6 501.4 795.4 1,537.9 2,977.4 5,232.2 9,338.7 12,450.9	2,957.9 112.9 54.2 204.6 413.5 712.2 1,428.2 2,920.3 4,873.3 10,261.7 11,376.9	2,829.8 106.7 49.5 203.7 428.0 698.5 1,400.0 2,817.9 4,692.2 10,392.5 10,745.7	
Black female								
All ages, age adjusted ⁴ All ages, crude	1,106.7 1,002.0	916.9 905.0	859.9 860.6	814.4 829.2	688.4 735.5	650.5 723.1	636.1 710.3	
Under 1 year	1,139.3 72.8 213.1 393.3 758.1 1,576.4 3,089.4 4,000.2 } 8,347.0	4,162.2 173.3 53.8 107.5 273.2 568.5 1,177.0 2,510.9 4,064.2 6,730.0 13,052.6	4,001.1 159.3 48.6 100.8 249.9 560.8 1,089.8 2,272.9 3,741.5 6,620.0 13,143.5	3,368.8 129.4 43.8 111.9 231.0 533.0 1,043.9 1,986.2 3,860.9 6,691.5 12,131.7	2,740.3 96.9 34.5 88.5 171.8 388.5 849.1 1,723.6 3,306.3 6,425.8 9,558.6	2,413.7 94.9 32.6 77.8 155.6 334.8 789.2 1,637.1 2,925.2 7,245.8 8,793.1	2,375.2 91.5 31.1 73.9 152.3 318.1 767.8 1,579.9 2,858.6 7,377.3 8,158.6	

Includes deaths of nonresidents of the United States.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special report P-E No. 3B. Washington. U.S. Government Printing Office, 1951; General Population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-1B and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 10. Life expectancy at birth and at 65 years of age, according to race and sex: United States, selected years 1900-1980

Specified age		Total			White			All other	I
and year	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
At birth				Remaining li	fe expectan	cy in years			
1900,2,3	47.3	46.3	48.3	47.6	46.6	48.7	33.0	32.5	33.5
1950 ³	68.2	65.6	71.1	69.1	66.5	72.2	60.8	59.1	62.9
19603	69.7	66.6	73.1	70.6	67.4	74.1	63.6	61.1	66.3
1970	70.8	67.1	74.7	71.7	68.0	75.6	65.3	61.3	69.4
1975	72.5	68.7	76.5	73.2	69.4	77.2	67.9	63.6	72.3
1977	73.2	69.3	77.1	73.8	70.0	77.7	68.8	64.6	73.1
1978	73.3	69.5	77.2	74.0	70.2	77.8	69.2	65.0	73.6
19804	73.7	69.9	77.6	74.4	70.6	78.2	69.8	65.5	74.2
	73.6				70.5	78.1		65.3	74.0
At 65 years									
1900-1902 ^{2,3}	11.9	11.5	12.2		11.5	12.2	Character plane	10.4	11.4
19503	13.9	12.8	15.0		12.8	15.1		12.5	14.5
1960 ³	14.3	12.8	15.8	14.4	12.9	15.9	13.9	12.7	15.2
1970	15.2	13.1	17.0	15.2	13.1	17.1	14.9	13.2	16.4
1975	16.0	13.7	18.0	16.0	13.7	18.1	15.7	13.7	17.5
1977	16.3	13.9	18.3	16.3	13.9	18.4	16.0	14.0	17.8
1978	16.3	14.0	18.4	16.4	14.0	18.4	16.1	14.1	18.0
1979	16.6	14.2	18.6	16.6	14.2	18.7	16.5	14.4	18.4
1980	16.4								

SOURCES: National Center for Health Statistics: Vital Statistics Rates in the United States, 1940-1960, by R. D. Grove and A. M. Hetzel. DHEW Pub. No. (PHS) 1677. Public Health Service. Washington. U.S. Government Printing Office, 1968; Vital Statistics of the United States, 1970, Vol. II, Part A. DHEW Pub. No. (HRA) 75-1101. Health Resources Administration. Washington. U.S. Government Printing Office, 1974; Final mortality statistics, 1975, 1977, and 1978. Monthly Vital Statistics Report. Vols. 25, 28, and 29, Nos. 11, 1, and 6. DHEW Pub. Nos. (HRA) 77-1120, (PHS) 79-1120, and DHHS Pub. No. (PHS) 80-1120. Health Resources Administration and Public Health Service. Washington. U.S. Government Printing Office, Feb. 11, 1977, May 11, 1979, and Sept. 17, 1980; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Unpublished data from the Division of Vital Statistics.

For 1900-1902, data for the "all other" category were for black people only. ²Death registration area only. The death registration area increased from 10 States and the District of Columbia in 1900 to the coterminous United States in 1933.

³Includes deaths of nonresidents of the United States.

⁴Provisional data.

Table 11. Infant, late fetal, and perinatal mortality rates, according to race: United States, selected years 1950-80 (Data are based on the national vital registration system)

Race and year	Total	Neon	atal			
Race and year	Total			Donk	Late fetal	Perinatal mortality
		Under 28 days	Under 7 days	Post- neonatal	mortality rate ²	rate ³
Total.		Number of deaths pe	er 1,000 live bir	ths		
19504	29.2	20.5	17.8	8.7	14.9	32.5
19604	26.0	18.7	16.7	7.3	12.1	28.6
19654	24.7	17.7	15.9	7.0	11.9	27.6
1970	20.0	15.1	13.6	4.9	9.5	23.0
1975	16.1	11.6	10.0	4.5	7.8	17.7
1978	13.8	9.5	8.0	4.3	6.6	14.6
1979	13.1	8.9	7.5	4.2	6.4	13.8
19805	12.5	8.4		4.1		-
White						
19504	26.8	19.4	17.1	7.4	13.3	30.1
19604	22.9	17.2	15.6	5.7	10.8	26.2
19654	21.5	16.1	14.6	5.4	10.5	25.0
1970	17.8	13.8	12.5	4.0	8.6	21.1
1975	14.2	10.4	9.0	3.8	7.1	16.0
1978	12.0	8.4	7.0	3.6	6.0	13.0
1979	11.4	7.9	6.6	3.5	5.9	12.5
19805					grá conscit	
All other ⁶						
19504	44.5	27.5	22.8	16.9	24.8	47.0
19604	43.2	26.9	22.9	16.4	19.2	41.6
19654	40.3	25.4	22.1	14.9	18.8	40.5
1970	30.9	21.4	19.1	9.5	13.9	32.7
1975	24.2	16.8	14.4	7.5	10.8	25.0
1978	21.1	14.0	11.9	7.0	9.1	20.9
1979	19.8	12.9	10.9	6.9	8.4	19.3
19805						
Black:						
19504	43.9	27.8	23.0	16.1		
19604	44.3	27.8	23.7	16.5		
19654	41.7	26.5	23.1	15.2	***************************************	
1970	32.6	22.8	20.3	9.9		
1975	26.2	18.3	15.7	7.9		*******
1978	23.1	15.5	13.2	7.6		
1979	21.8	14.3	12.1	7.5	9.0	21.1
19805						and stan inst

Infant mortality rate is the number of deaths to infants under 1 year of age per 1,000 live births. Neonatal deaths are deaths within 28 days of birth; postneonatal deaths are deaths that occur from 28 days to 365 days after birth. Deaths within 7 days are considered early neonatal deaths.

²Late fetal deaths are fetal deaths of 28 weeks or more gestation. The rate is the number of late fetal deaths per 1,000 live births and late fetal deaths

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

live births and late fetal deaths.

3Perinatal deaths are late fetal deaths plus infant deaths within 7 days of birth. The rate is the number of perinatal deaths per 1,000 live births and late fetal deaths.

⁴Includes births and infant and late fetal deaths occurring to nonresidents of the United States.

⁵Provisional data.

⁶Includes black infants.

Table 12. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1967-69, 1972-74, and 1977-79

Geographic		1967–69 ¹		-	1972-74		1977–79			
division and State	Total ²	White	Black	Total ²	White	Black	Total ²	White	Black	
			Inf	ant deaths	per 1,000	live birth	ns			
United States	21.7	19.1	36.1	17.6	15.7	28.2	13.6	11.9	22.8	
New England	19.6	18.9	35.0	15.4	14.8	26.2	11.5	10.8	21.2	
Maine	21.5	21.5	*27.6	16.9	17.0	*6.1	9.9	10.0	*4.0	
New Hampshire	20.0	19.9	*53.2	15.7	15.7	*32.8				
Vermont	20.2	20.2	*16.4			"32.0 *_	10.4	10.5	*7.9	
Massachusetts	19.4			14.6	14.7		10.7	10.7	*36.4	
Rhode Island		18.8	33.5	14.7	14.1	25.1	11.3	10.9	18.4	
	20.2	19.2	43.2	17.4	16.7	30.8	13.3	12.0	32.9	
Connecticut	19.0	17.6	31.8	15.7	14.4	26.9	12.4	11.0	22.8	
Middle Atlantic	21.4	18.7	36.9	17.0	14.9	27.9	13.8	11.9	22.4	
New York	21.4	18.5	36.1	17.0	14.8	27.0	14.0	12.0	22.0	
New Jersey	21.0	17.7	37.0	16.7	14.0	28.9	13.4	10.9	23.3	
Pennsylvania	21.7	19.4	38.6	17.2	15.6	29.0	13.7	12.4	22.7	
East North Central	21.3	19.2	35.6	17.9	15.8	30.4	13.8	12.1	24.2	
Ohio	20.1	18.6	32.6	17.3	15.7	28.6	13.3	12.1	21.3	
Indiana	21.6	20.2	35.8	17.8	16.6	28.5	13.4			
Illinois		19.8	37.7	19.9	16.7			12.4	22.6	
Michigan	21.3	19.1				32.3	15.6	12.6	27.0	
Wisconsin			35.0	18.0	15.3	31.1	13.7	11.8	23.9	
WISCHSIIF	18.8	17.9	34.1	14.1	13.6	22.8	11.1	10.7	18.1	
West North Central	19.6	18.4	36.9	16.6	15.7	28.0	12.6	11.7	24.4	
Minnesota	18.3	18.1	35.0	15.8	15.6	26.6	11.3	10.9	24.4	
Iowa	19.1	18.8	37.4	15.9	15.8	24.9	11.8	11.6	22.9	
Missouri	21.7	19.0	37.8	17.6	15.5	28.8	14.2	12.2	25.6	
North Dakota	18.2	18.1	*4.9	16.1	15.6	*17.7	13.0	12.4	*13.7	
South Dakota	20.9	19.5	*25.2	19.4	17.4	*45.5	13.6	12.1	*26.7	
Nebraska	18.3	17.3	35.5	16.1	15.2	32.1	12.4	11.9	22.9	
Kansas	19.1	18.0	34.9	16.3	15.8	24.4	12.4	11.7	21.2	
South Atlantic	24.1	19.4	36.4	19.2	16.0	27.7	15.5	12.3	23.3	
Delaware	21.1	16.7	39.7	17.3	12.0	20 =	24.6	11 -		
Maryland	21.0				13.9	30.5	14.6	11.5	25.2	
District of Columbia	21.0	17.7	33.1	15.6	13.7	22.1	14.5	11.6	21.8	
		20.3	29.3	26.6	21.8	27.5	25.6	11.4	28.6	
Virginia	23.0	19.2	36.3	18.6	15.9	28.4	14.7	12.5	22.5	
West Virginia	23.9	23.2	39.2	19.1	18.6	31.5	14.5	14.2	22.7	
North Carolina	26.0	20.3	39.8	21.5	18.0	30.1	15.8	12.1	24.4	
South Carolina	26.3	20.1	36.4	22.1	17.1	30.4	17.7	12.9	25.1	
Georgia	24.8	18.9	37.2	18.9	15.2	26.4	15.3	12.0	21.4	
Florida	23.5	19.0	36.9	18.2	15.3	27.3	14.8	12.1	22.6	
East South Central	26.1	20.9	39.8	20.7	17.0	30.7	15.2	12.3	22.9	
Kentucky	22.3	21.5	31.4	17.1	16.5	23.7	12.9	12.1	20.6	
Tennessee	23.2	19.9	34.0	19.5	16.9	29.4	14.6		21.7	
	23.2 26.6	19.9 20.8	34.0 38.0	19.5 21.8	16.9 17.3	29.4 30.5	14.6 15.8	12.6 12.3	21.7 22.4	

Table 12. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1967-69, 1972-74, and 1977-79--Continued

Geographic		1967-69 ¹			1972-74			1977-79	
division and State	Total ²	White	Black	Total ²	White	Black	Total ²	White	Black
		-	Inf	ant deaths	per 1,000	live birth	s		
West South Central	22.8	19.6	35.6	19.2	17.3	27.1	14.5	12.6	22.9
Arkansas	22.9	19.1	33.6	18.1	16.1	24.2	15.0	12.6	22.3
Louisiana	25.4	18.5	36.6	20.5	16.9	26.3	16.9	12.4	24.1
Oklahoma	20.4	19.4	33.1	17.6	17.2	28.4	13.4	12.6	20.6
Texas	22.3	20.0	35.5	19.2	17.6	28.4	13.9	12.6	22.3
Mountain	21.2	19.8	35.3	16.4	15.8	24.5	12.1	11.7	19.7
Montana	21.4	20.5	*44.0	19.0	18.4	*24.7	12.0	11.5	*5.4
Idaho	18.9	18.7	*24.2	16.4	16.1	*32.7	11.0	11.1	*22.6
Wyoming	24.0	23.3	*48.5	19.8	19.8	*16.5	13.4	13.5	*29.6
Colorado	21.2	20.7	34.5	16.5	16.3	22.2	11.3	11.1	17.2
New Mexico	24.2	22.0	34.4	18.9	18.0	31.5	14.0	13.1	22.2
Arizona	22.5	19.7	37.8	15.7	14.4	24.6	13.4	12.4	20.4
Utah	16.7	16.1	*42.6	12.9	12.7	*15.1	10.7	10.7	*18.8
Nevada	21.6	20.8	31.0	18.5	17.9	26.0	12.9	12.1	21.3
Pacific	19.0	18.3	29.5	15.0	14.4	23.4	11.8	11.3	18.9
Washington	19.2	18.5	34.5	16.2	15.8	25.8	12.0	11.9	17.3
Oregon	18.8	18.5	37.0	15.6	15.4	30.2	11.9	11.9	17.7
California	18.9	18.2	29.1	14.6	14.0	23.2	11.7	11.1	19.1
Alaska	23.0	16.4	*17.3	18.6	16.7	*27.5	15.2	13.8	*16.1
Hawaii	18.0	17.3	*29.4	15.3	14.2	*13.7	10.9	10.4	*13.5

 $^{^1{\}rm Includes}$ births and infant deaths occurring to nonresidents of the United States. $^2{\rm Includes}$ all other races not shown separately.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 13. Infant mortality rates and perinatal mortality ratios and average annual percent change: Selected countries, 1973 and 1978

Country	Infant mortality rate		Average annual percent	Peri mort rat	Average annual percent	
	1973	1978 ¹	change 1973-78	1973 ³	19784	change 1973-78
		eaths per ve births			ıl deaths live births	
Canada	15.5	12.4	-5.4	17.7	15.1	-5.2
	17.7	13.8	-4.9	20.7	15.2	-6.0
Austria	23.8	15.0	-8.8	24.8	15.0	-9.6
	11.5	8.9	-5.0	14.6	10.7	-7.5
	16.9	13.1	-5.0	21.3	17.1	-5.3
France German Democratic Republic German Federal Republic Ireland	15.5	10.6	-7.3	⁵ 18.8	15.8	-3.4
	15.6	13.2	-3.3	19.4	15.2	-4.8
	22.7	14.7	-8.3	23.2	13.8	-9.9
	18.0	15.6	-3.5	23.1	21.8	-2.9
Italy Netherlands Sweden	25.7	17.7	-8.9	29.6	20.8	-6.8
	11.5	9.6	-3.5	16.4	13.0	-5.6
	9.9	7.8	-4.7	14.1	9.6	-7.3
Switzerland	13.2	8.6	-8.2	15.5	10.7	-7.1
	22.8	17.2	-5.5	21.2	17.4	-3.9
	11.3	8.4	-5.8	18.0	13.0	-6.3
Australia New Zealand	16.5	12.5	-6.7	22.4	17.8	-5.6
	16.2	14.2	-3.2	19.4	14.3	-5.0

Data for Canada, Ireland, Italy, Australia, and New Zealand refer to 1977; data for Denmark and France are provisional.
Fetal deaths of 28 weeks or more gestation plus infant deaths within 7 days per 1,000 live births. For all countries, fetal deaths of unknown gestation period are included in the 28 weeks or more gestation. This is not the usual way of calculating the perinatal ratio for the United States, but it was done for the purpose of comparison.

Data for New Zealand refer to 1971; data for France, German Democratic Republic, and Italy refer to 1972.

Abata for Ireland refer to 1975; data for Canada, Denmark, England and Wales, France, German Democratic Republic, Italy, Netherlands, Australia, and New Zealand refer to 1977; data for France are provisional.

Excludes infants who have died before registration of birth.

NOTE: Countries are grouped by continent.

SOURCES: World Health Organization: World Health Statistics, 1973-76 and 1980. Vol. 1, Geneva. World Health Organization, 1976 and 1980; United Nations: Demographic Yearbook 1974. Pub. No. ST/ESA/STAT/R.3. New York. United Nations, 1975.

Table 14. Life expectancy at birth and average annual change in years, according to sex: Selected countries, 1973 and 1978

(Data are based on reporting by countries)

		Male			Female	
Country	1973 ¹	1978 ²	Average annual change in years	1973 ¹	1978 ²	Average annual change in years
		pectancy rears			pectancy years	
Canada	69.5	70.5	0.3	77.0	78.2	0.3
United States	67.6	69.5	0.4	75.3	77.2	0.4
Austria	67.4	68.4	0.2	74.7	75.7	0.2
Denmark	71.1	71.7	0.1	76.6	77.7	0.2
England and Wales	69.2	70.2	0.3	75.5	76.3	0.2
France	69.5	69.9	0.1	77.3	77.9	0.2
German Democratic Republic	68.9	68.9	_	74.2	74.5	0.1
German Federal Republic	67.8	69.2	0.3	74.4	76.0	0.3
Ireland	68.5	69.0	0.2	73.4	74.3	0.3
Italy	68.9	69.8	0.3	75.2	76.1	0.3
Netherlands	71.2	72.0	0.2	77.2	78.7	0.3
Sweden	72.1	72.5	0.1	77.7	79.0	0.3
Switzerland	71.1	72.0	0.2	77.2	78.9	0.3
Israel ³	70.2	71.6	0.3	73.2	75.1	0.4
Japan	70.9	73.2	0.5	76.3	78.6	0.5
Australia	68.3	70.0	0.4	75.3	77.0	0.4
New Zealand	69.2	69.4	0.1	74.8	75.6	0.2

¹Data for the German Democratic Republic refer to the average for the period 1969-70; data for Ireland and Italy refer to 1972.

NOTE: Countries are grouped by continent.

SOURCES: World Health Organization: World Health Statistics, 1973-76 and 1980. Vol. 1. Geneva. World Health Organization, 1976 and 1980; United Nations: Demographic Yearbook, 1974. Pub. No. ST/ESA/STAT/R/3. New York, United Nations, 1975; National Center for Health Statistics: Vital Statistics of the United States, 1973, Vol. II, Sec. 5. DHEW Pub. No. (HRA) 77-1101. Health Resources Administration. Washington. U.S. Government Printing Office, 1977; Final mortality statistics, 1978. Monthly Vital Statistics Report, Vol. 29, No. 6, Supplement. DHHS Pub. No. (PHS) 80-1120. Public Health Service. Washington. U.S. Government Printing Office, Sept. 17, 1980.

²Data for Ireland and Italy refer to 1975; data for France, German Democratic Republic, and New Zealand refer to 1976; data for Canada, England and Wales, and Australia refer to 1977.

³Jewish population only for 1973.

Table 15. Age-adjusted death rates for selected causes of death, according to race and sex: United States, selected years 1950-80

				Yea	r			
Race, sex, and cause of death	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³			Deaths per	100,000	resident p	opulation		· · · · · · · · · · · · · · · · · · ·
All causes	841.5	760.9	739.0	714.3	638.3	606.1	588.8	594.1
Diseases of heart	307.6	286.2	273.9	253.6	220.5	207.7	203.5	205.3
Cerebrovascular diseases	88.8	79.7	72.7	66.3	54.5	45.3	42.5	41.5
Malignant neonlasms	125.4	125.8	127.0	129.9	130.9	133.8	133.2	134.2
Respiratory system	12.8	19.2	23.0	28.4	32.5	35.4	35.8	36.7
Digestive system	47.7 22.2	41.1 22.3	38.3 22.8	35.2 23.1	33.6 22.8	33.4 23.1	33.8 22.8	33.4
Pneumonia and influenza	26.2	28.0	23.5	22.1	16.6	15.4	11.4	12.6
Chronic liver disease and cirrhosis-	8.5	10.5	12.1	14.7	13.8	12.5	12.2	12.6
Diabetes mellitus	14.3	13.6	13:4	14.1	11.6	10.4	10.0	10.1
Accidents and adverse effects	57.5	49.9	53.3	53.7	44.8	44.3	43.7	43.4
Motor vehicle accidents	23.3	22.5	26.5	27.4	21.3	23.4	23.7	23.7
Suicide	11.0	10.6	11.4	11.8	12.6	12.0	11.9	12.2
Homicide and legal intervention	5.4	5.2	6.2	9.1	10.5	9.6	10.4	11.4
White male								
All causes	963.1	917.7	911.1	893.4	812.7	773.1	751.1	
Diseases of heart	381.1	375.4	369.2	347.6	308.0	288.7	281.2	
Cerebrovascular diseases	87.0	80.3	74.2	68.8	57.4	46.8	43.8	
Malignant negolasms	130.9	141.6	147.8	154.3	157.2	161.2	161.1	
Posniratory system	21.6	34.6	41.5	49.9	54.6	57.4	57.8	
Digestive system————————————————————————————————————	54.0	47.5	45.1	41.9	40.2	40.0	40.7	
Pneumonia and influenza-	27.1	31.0	27.1	26.0	21.0	19.6	14.6	
Chronic liver disease and cirrhosis	11.6	14.4	15.6	18.8	17.9	16.1	15.7	
Diabetes mellitus	11.3	11.6	11.9	12.7	10.7	9.8	9.5	
Accidents and adverse effects	80.9	70.5	75.5	76.2	64.8	64.5	64.5	
Motor vehicle accidents————————————————————————————————————	35 . 9	34.0	39.4	40.1	31.7 19.8	35.2 19.2	36.2	
Suicide	18.1 3.9	17.5 3.9	17.7 4.8	18.2 7.3	9.4	9.2	18.9 10.1	
White female								
All causes	645.0	555.0	527.6	501.7	445.3	425.5	412.2	
Diseases of heart	223.6	197.1	183.9	167.8	144.2	136.4	134.8	-
Cerebrovascular diseases	79.7	68.7	61.5	56.2	46.8	39.3	36.8	
Malignant neonlasms	119.4	109.5	107.4	107.6	106.9	109.0	107.9	
Pegniratory gystem	4.6	5.1	6.8	10.1	13.8	16.8	17.3	
Digestive system	41.1	33.9	30.9	28.1	26.4	26.1	26.2	.4
Breast ⁴	22.5	22.4	22.9	23.4	23.0	23.1	22.8	
Pneumonia and influenza	18.9	19.0	15.9	15.0	11.7	10.9	8.0	
Chronic liver disease and cirrhosis	5.8	6.6	7.6	8.7	7.9	7.2	7.1	
Diabetes mellitus	16.4	13.7	12.8	12.8	10.2 22.4	9.1 22.9	8.6	
Accidents and adverse effects Motor vehicle accidents	30.6 10.6	25.5 11.1	27.6 13.6	27.2 14.4	10.9	12.6	22.0 12.6	
Suicide Suicide	5.3	5.3	6.7	7.2	7.3	6.6	6.4	
Homicide and legal intervention-	1.4	1.5	1.7	2.2	2.9	2.9	3.0	
AND TO THE PROPERTY OF THE PARTY OF THE PART	W-0-12	1.0					5.5	

Table 15. Age-adjusted death rates for selected causes of death, according to race and sex: United States, selected years 1950-80—Continued

				Ye	ar			
Race, sex, and cause of death	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male			Deaths pe	r 100,000	resident p	opulation		
All causes	1,373.1	1,246.1	1,270.3	1,318.6	1,174.3	1,113.1	1,090.4	
Diseases of heart————————————————————————————————————	415.5 146.2 126.1 16.9 59.4 63.8 8.8 11.5 105.7 39.8 7.0 51.1	381.2 141.2 158.5 36.6 60.4 70.2 14.8 16.2 100.0 38.2 7.8 44.9	384.1 138.1 174.1 44.7 62.0 54.8 23.8 17.7 108.9 45.2 9.1 54.5	375.9 124.2 198.0 60.8 58.9 53.8 33.1 21.2 119.5 50.1 9.9 82.1	328.9 96.5 214.4 72.5 60.5 35.6 33.7 18.7 92.4 35.8 11.6 80.6	321.0 83.8 223.7 79.1 58.6 33.4 30.4 17.4 84.0 35.0 12.1 65.6	319.0 79.8 224.4 78.8 61.5 24.6 29.9 17.3 82.3 34.2 12.7 71.3	
Black female								
All causes	1,106.7	916.9	859.9	814.4	688.4	650.5	636.1	
Diseases of heart— Cerebrovascular diseases— Malignant neoplasms— Respiratory system— Digestive system— Breast ⁴ — Pneumonia and influenza— Chronic liver disease and cirrhosis— Diabetes mellitus— Accidents and adverse effects— Motor vehicle accidents— Suicide— Homicide and legal intervention—	349.5 155.6 131.9 4.1 40.2 19.3 50.4 5.7 22.7 38.5 10.3 1.7	292.6 139.5 127.8 5.5 37.5 21.3 43.9 8.9 27.3 35.9 10.0 1.9	271.1 126.4 124.3 7.1 35.6 21.8 33.4 12.9 28.0 35.3 12.7 2.5 12.3	251.7 107.9 123.5 10.9 34.1 21.5 29.2 17.8 30.9 35.3 13.8 2.9 15.0	209.4 81.3 124.7 14.2 33.9 22.5 16.7 15.9 26.0 27.6 9.4 3.0 16.3	201.1 68.7 129.2 16.9 34.8 24.1 15.5 14.7 22.4 26.1 9.8 3.0 13.5	202.2 64.7 130.7 18.1 37.0 23.4 11.4 13.6 21.9 24.6 8.9 3.0 14.3	

Includes deaths of nonresidents of the United States.

²Provisional data.

⁴Female only.

NOTES: Age-adjusted rates are computed by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups. Because of decennial revisions to the International List of Causes of Death and changes in rules for cause-of-death selection, there is lack of comparability to a varying degree for some causes from one revision to the next. The beginning dates of the revisions are 1949, 1958, 1968, and 1979; and the cause-of-death titles are based on the International Classification of Diseases, Ninth Revision. For a listing of the code numbers, see Appendix II.

SOURCES: National Center for Health Statistics: Vital Statistics Rates in the United States, 1940-1960, by R. D. Grove and A. M. Hetzel. DHEW Pub. No. (PHS) 1677. Public Health Service. Washington. U.S. Government Printing Office, 1968; Unpublished data from the Division of Vital Statistics; Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; General population characteristics, United States Summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-IB and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

³Includes all other races not shown separately.

Table 16. Death rates for diseases of heart, according to race, sex, and age: United States, selected years 1950-80

B	_			Yea	er			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³		Numi	ber of deat	hs per 100	,000 reside	nt populati	ion	
All ages, age adjusted4 All ages, crude	307.6 355.5	286.2 369.0	273.9 368.0	253.6 362.0	220.5 336.2	207.7 334.2	203.5 333.1	205.3 343.0
Under 1 year————————————————————————————————————		6.6 1.3 1.3 4.0 15.6 74.6 271.8 737.9 1,740.5 4,089.4 9,317.8	9.8 1.3 0.9 3.1 14.0 72.9 261.3 699.7 1,640.7 3,911.5 9,538.4	13.1 1.7 0.8 3.0 11.4 66.7 238.4 652.3 1,558.2 3,683.8 8,468.0	20.3 1.8 0.9 2.6 8.6 53.9 205.1 564.7 1,323.7 3,280.8 7,282.0	26.3 2.2 1.1 2.6 8.3 46.8 188.3 521.8 1,230.7 3,191.6 7,084.2	21.1 2.1 0.8 2.7 8.7 45.4 184.5 510.9 1,204.9 3,151.2 6,887.7	21.8 1.4 2.6 8.6 43.4 181.9 510.8 1,210.8 3,229.7 7,134.7
White male								
All ages, age adjusted ⁴ All ages, crude	381.1 433.0	375.4 454.6	369.2 450.8	347.6 438.3	308.0 401.1	288.7 390.8	281.2 385.7	
Under 1 year————————————————————————————————————	4.1 1.7 5.8 20.1 110.6 423.6 1,081.7 2,308.3 4,907.3 9,950.5	6.9 1.0 1.1 3.6 17.6 107.5 413.2 1,056.0 2,297.9 4,839.9 10,135.8	8.9 1.1 0.7 2.7 15.3 104.3 398.9 1,033.8 2,249.0 4,792.6 10,657.3	12.0 1.5 0.8 3.0 12.3 94.6 365.7 979.3 2,177.2 4,617.6 9,693.0	19.3 1.6 0.9 2.6 9.8 76.9 317.9 853.0 1,894.6 4,237.2 8,550.3	25.0 1.7 0.9 2.7 9.4 66.5 287.7 777.1 1,772.7 4,122.4 8,444.7	20.0 1.8 0.8 2.9 10.1 63.5 279.0 754.6 1,724.9 4,040.7 8,192.9	
White female								
All ages, age adjusted ⁴	223.6 289.4	197.1 306.5	183.9 310.7	167.8 313.8	1 44.2 301.3	136.4 308.5	134.8 311.2	
Under 1 year————————————————————————————————————	141.9 460.2	4.3 0.9 0.9 2.8 8.2 28.6 103.4 383.0 1,229.8 3,629.7 9,280.8	7.4 1.0 0.6 2.2 7.1 26.4 101.2 342.0 1,128.5 3,381.1 9,333.2	7.0 1.2 0.7 1.7 5.5 23.9 91.4 317.7 1,044.0 3,143.5 8,207.5	16.0 1.4 0.7 1.7 4.2 19.8 78.1 272.3 854.9 2,763.0 7,105.3	19.3 1.9 0.8 1.6 3.8 16.7 71.3 254.2 794.9 2,658.2 6,971.6	13.7 1.7 0.7 1.7 4.0 17.0 71.8 253.6 781.2 2,627.3 6,821.0	

Table 16. Death rates for diseases of heart, according to race, sex, and age: United States, selected years 1950-80--Continued

-	Year									
Race, sex, and age	1950 ¹	1960¹	19651	1970	1975	1978	1979	1980 ²		
Black male		Numb	er of death	ns per 100,	000 resider	nt populati	on	_		
All ages, age adjusted ⁴ All ages, crude	415.5 348.4	381.2 330.6	384.1 331.7	375.9 330.3	328.9 296.1	321.0 294.1	319.0 293.8			
Under 1 year	4.8 6.4 18.0 51.9 198.1 624.1 1,434.0 2,140.1 4,107.9	13.9 3.8 3.0 8.7 43.1 168.1 514.0 1,236.8 2,281.4 3,533.6 6,037.9	21.3 3.2 1.9 8.9 43.9 187.6 524.2 1,218.9 2,185.0 3,656.7 7,113.3	33.5 3.9 1.4 8.3 41.6 189.2 512.8 1,135.4 2,237.8 3,783.4 6,330.8	37.2 3.6 1.5 6.9 33.2 148.4 435.3 984.6 1,918.2 3,617.8 5,296.2	48.3 4.1 1.6 6.6 29.4 136.9 417.3 989.8 1,744.8 3,958.5 4,726.2	45.3 4.3 1.0 6.3 28.3 132.3 414.9 977.4 1,723.2 4,064.7 4,527.1			
Black female All ages, age adjusted4 All ages, crude	349.5 289.9	292.6 268.5	271.1 263.8	251.7 261.0	209.4 235.7	201.1 237.5	202.2 239.2			
Under 1 year	3.9 8.8 19.8 52.0 185.0 526.8 1,210.7 1,659.4 3,499.3	12.0 2.8 3.0 10.0 35.9 125.3 360.7 952.3 1,680.5 2,926.9 5,650.0	17.9 3.2 2.3 7.5 30.2 117.1 321.5 852.1 1,513.7 2,968.0 6,030.4	31.3 4.2 1.8 6.0 24.7 99.8 290.9 710.5 1,553.2 2,964.1 5,669.8	34.8 2.7 1.4 4.9 14.0 69.5 217.4 592.8 1,309.3 2,703.6 4,398.0	51.7 4.8 1.7 5.0 13.6 58.0 209.4 549.3 1,136.5 3,094.9 4,044.6	40.8 3.9 1.3 4.5 16.1 60.5 206.4 539.9 1,136.6 3,245.8 3,759.3			

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for diseases of heart are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. 400-402, 410-443; for 1960 and 1965, the Seventh Revision, Nos. 400-402, 410-443; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. 390-398, 402, 404, 410-414, 420-429; for 1979 and 1980, the Ninth Revision, Nos. 390-398, 402, 404-429.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special report P-E No. 3B. Washington. U.S. Government Printing Office, 1951; General Population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-1B and PC(1)-B1. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 17. Death rates for malignant neoplasms, according to race, sex, and age: United States, selected years 1950-80

B				Yea	ar			*****
Race, sex, and age	19501	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³		Numb	per of deat	hs per 100	,000 reside	nt populati	ion	
All ages, age adjusted ⁴ All ages, crude	125.4 139.8	125.8 149.2	127.0 153.8	129.9 162.8	130.9 171.7	133.8 181.9	133.2 183.3	134.2 186.3
Under 1 year————————————————————————————————————	8.7 11.7 6.7 8.6 20.0 62.7 175.1 392.9 692.5 1,153.3 1,451.0	7.2 10.9 6.8 8.3 19.5 59.7 177.0 396.8 713.9 1,127.4 1,450.0	6.0 8.9 6.5 8.2 18.9 60.7 179.8 403.9 726.9 1,116.1 1,483.6	4.7 7.5 6.0 8.3 16.5 59.5 182.5 423.0 754.2 1,169.2 1,417.3	4.2 5.6 4.8 6.8 14.9 53.0 181.8 430.7 775.5 1,221.9 1,408.8	4.1 4.9 4.2 6.3 14.2 49.6 184.4 441.8 800.7 1,293.8 1,450.5	3.5 4.7 4.5 6.2 13.7 48.4 181.3 439.5 803.4 1,300.9 1,434.7	1.5 4.7 6.6 12.6 48.8 178.9 442.5 814.8 1,331.8 1,413.1
White male								
All ages, age adjusted ⁴ All ages, crude	130.9 147.2	141.6 166.1	147.8 173.7	154.3 185.1	157.2 194.8	161.2 206.4	161.1 208.8	
Under 1 year 1-4 years 5-14 years 15-24 years 25-34 years 35-44 years 45-54 years 55-64 years 65-74 years 75-84 years 85 years and over	9.6 13.1 7.6 9.9 17.7 44.5 150.8 409.4 798.7 1,367.6 1,732.7	7.9 13.1 8.0 10.3 18.8 46.3 164.1 450.9 887.3 1,413.7 1,791.4	6.2 10.0 7.6 10.0 18.0 49.8 169.1 469.5 941.7 1,470.0 1,958.7	4.3 8.5 7.0 10.6 16.2 50.1 172.0 498.1 997.0 1,592.7 1,948.1	4.5 6.4 5.5 8.2 15.1 44.2 175.0 489.8 1,035.1 1,732.8 2,046.6	3.7 5.7 4.8 7.6 14.0 41.8 179.2 498.7 1,060.0 1,843.2 2,213.6	4.0 5.2 5.3 7.7 13.6 40.4 177.1 497.4 1,065.4 1,853.7 2,213.3	
White female								
All ages, age adjusted4 All ages, crude	119.4 139.9	109.5 139.8	107.4 141.9	107.6 149.4	106.9 157.7	109.0 167.7	107.9 168.4	
Under 1 year————————————————————————————————————	7.8 11.3 6.3 7.5 20.9 74.5 185.8 362.5 616.5 1,026.6 1,348.3	6.8 9.7 6.2 6.5 18.8 66.6 175.7 329.0 562.1 939.3 1,304.9	6.2 9.0 6.0 6.4 18.7 65.2 176.9 324.8 550.5 888.9 1,257.5	5.4 6.9 5.4 6.2 16.3 62.4 177.3 338.6 554.7 903.5 1,179.4	4.2 5.0 4.2 5.5 14.4 56.0 171.9 351.9 559.1 914.8 1,165.9	4.7 4.6 3.7 4.9 13.8 51.1 172.7 363.9 585.8 957.7 1,178.4	3.0 4.4 3.9 4.8 13.3 50.4 167.9 359.6 587.7 955.2 1,167.7	

Table 17. Death rates for malignant neoplasms, according to race, sex, and age: United States, selected years 1950-80—Continued

Race, sex, and age		Year									
	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²			
Black male	Number of deaths per 100,000 resident population										
All ages, age adjusted ⁴ All ages, crude	126.1 106.6	158.5 136.7	174.1 149.2	198.0 171.6	214.4 188.5	223.7 200.6	224.4 202.0				
Under 1 year————————————————————————————————————	8.2 5.8 7.9 18.0 55.7 211.7 490.8 636.4 853.5	6.8 7.9 4.4 9.7 18.4 72.9 244.7 579.7 938.5 1,053.3 1,155.2	6.0 6.0 5.2 8.8 17.0 78.7 267.0 634.6 1,019.4 1,247.1		3.1 5.1 4.5 7.6 15.8 78.6 319.8 778.4 1,280.8 1,839.3 1,573.6	3.8 4.9 4.8 8.4 14.7 74.6 324.1 801.3 1,305.6 2,187.2 1,666.2	4.5 4.0 4.4 7.3 14.1 76.3 317.0 797.4 1,298.1 2,333.2 1,624.3				
Black female All ages, age adjusted4	131.9	127.8	124.3	123.5	124.7	129.2	130.7				
All ages, crude Under 1 years 1-4 years 5-14 years 15-24 years 25-34 years 35-44 years 45-54 years 55-64 years 65-74 years 75-84 years 85 years and over	7.0 3.9 8.8 34.3 119.8 277.0 484.6 477.3 605.3	6.7 6.9 4.8 6.9 31.0 102.4 254.8 442.7 541.6 696.3 728.9	3.0 5.1 4.2 7.6 30.2 98.7 238.4 428.4 547.2 671.0 934.8	3.3 5.7 4.0 6.4 20.9 94.6 228.6 404.8 615.8 763.3 896.8	123.3 2.7 5.3 4.2 5.1 17.7 77.4 229.8 428.1 618.2 903.6 733.3	3.0 3.1 3.6 4.8 18.7 77.8 225.5 447.6 630.8 1,061.8 792.3	133.8 3.4 4.5 3.4 5.5 18.3 71.3 231.8 454.0 626.6 1,138.1 747.1				

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for malignant neoplasms are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. 140-205; for 1960 and 1965, the Seventh Revision, Nos. 140-205; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. 140-209; for 1979 and 1980, the Ninth Revision, Nos. 140-208.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyatsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special report P-E No. 3B. Washington. U.S. Government Printing Office, 1951; General population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-1B and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 18. Death rates for malignant neoplasms of respiratory system, according to race, sex, and age: United States, selected years 1950-80

Race, sex, and age	Year								
	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	19802	
Total ³	Number of deaths per 100,000 resident population								
All ages, age adjusted4 All ages, crude	12.8 14.1	19.2 22.2	23.0 26.9	28.4 34.2	32.5 40.7	35.4 45.8	35.8 46.9	36.7 48.6	
Under 1 year————————————————————————————————————	0.1 0.1 0.2 0.9 5.1 22.9 55.2 69.3 69.3	0.2 0.1 0.0 0.1 1.1 7.3 32.0 81.5 117.2 102.9 79.1	0.2 0.0 0.0 0.2 1.0 9.3 38.4 93.5 142.9 129.2 97.1	0.1 0.0 0.2 1.0 11.6 46.2 116.2 174.6 175.1	0.2 0.1 0.0 0.1 0.9 11.0 52.3 131.9 205.3 212.4 142.8	0.1 0.0 0.0 0.1 0.9 10.1 56.6 142.3 227.3 246.6 158.6	0.0 0.0 0.1 0.9 9.8 56.0 144.3 232.0 256.5	0.0 0.1 0.8 9.5 55.4 146.6 244.3 270.5	
White male All ages, age adjusted4	21.6	34.6	41.5	49.9	54.6	57 . 4	57. 8		
All ages, crude————————————————————————————————————	24.1 0.2 0.1 0.3 1.2 7.9 39.1 95.9 119.4 109.1 102.7	39.6 0.1 0.0 0.2 1.6 10.4 53.0 149.8 225.1 191.9 133.9	47.5 0.3 0.0 0.3 1.4 12.9 60.7 169.7 282.5 259.2 181.5	58.3 0.2 0.1 0.0 0.2 1.4 15.4 67.6 199.3 344.8 360.7 243.8	0.2 0.1 0.0 0.2 1.3 13.4 73.0 206.3 385.2 452.0 298.2	71.7 0.1 0.0 0.0 0.1 1.1 11.7 75.0 214.4 407.5 510.7 359.3	72.9 - 0.0 0.0 0.2 1.1 11.5 74.6 214.8 409.6 526.1 369.2		
White female All ages, age adjusted ⁴ All ages, crude	4.6 5.4	5.1 6.4	6.8 8.6	10.1 13.1	13.8 18.8	16.8 23.6	17.3 24.7		
Under 1 year————————————————————————————————————	0.1 0.1 0.2 0.5 2.2 6.5 15.5 27.2 40.0 44.0	0.2 0.1 0.0 0.1 0.6 3.4 9.8 16.7 26.5 36.5	0.1 - 0.0 0.2 0.6 4.5 14.8 23.4 33.1 41.1 51.2	0.1 0.1 0.1 0.6 6.0 22.1 39.3 45.4 56.8 60.1	0.1 0.0 0.0 0.1 0.5 7.1 27.7 58.9 68.1 71.3	0.2 - 0.0 0.1 0.7 7.0 32.7 69.9 90.5 91.4 77.6	0.0 0.0 0.1 0.6 6.5 32.7 72.4 97.3 97.1 77.9		

Table 18. Death rates for malignant neoplasms of respiratory system, according to race, sex, and age: United States, selected years 1950-80--Continued

Race, sex, and age	Year								
	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²	
Black male	Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴ All ages, crude	16.9 14.3	36.6 31.1	44.7 37.6	60.8 51.2	72.5 61.8	79.1 68.7	78.8 68.9	**************************************	
Under 1 year	- 0.1 0.4 2.1 9.4 41.1 78.8 65.2	0.4 0.1 0.0 0.2 2.6 20.7 75.0 161.8 184.6 126.3 110.3	-0.1 0.1 0.4 1.8 26.1 90.4 182.7 248.1 172.6 140.0	0.4 0.1 0.3 2.9 32.6 123.5 250.3 322.2 290.6 182.1	0.4 - 0.1 1.6 30.7 136.9 313.2 404.7 370.7 220.8	- 0.2 1.6 26.8 147.6 339.7 439.5 493.6 215.4	*0.4 *0.1 *0.1 1.6 26.9 135.4 340.9 444.7 536.9 225.7		
## Black female All ages, age adjusted4————————————————————————————————————	4.1 3.4 - 0.3 1.2 2.7 8.8 15.3 16.4	5.5 4.9 - 0.1 0.1 - 0.8 3.4 12.8 20.7 20.7 20.7 33.1 44.7	7.1 6.3 - 0.1 - 0.2 0.9 6.3 17.6 26.0 28.2 24.5 30.4	10.9 10.1 - 0.1 - 0.5 10.5 25.3 36.4 49.3 52.6 54.0	14.2 13.4 - 0.1 - 0.0 0.7 9.5 33.6 55.0 63.7 65.5 53.5	16.9 16.3 - 0.1 - 0.1 1.0 8.6 41.6 68.5 70.3 92.0 50.8	18.1 17.5 - *0.0 *0.2 *0.7 8.7 44.0 76.1 72.2 104.4 50.7		

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for malignant neoplasms of respiratory system are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. 160-164; for 1960 and 1965, the Seventh Revision, Nos. 160-164; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. 160-163; for 1979 and 1980, the Ninth Revision, Nos. 160-165.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special report P-E No. 38. Washington. U.S. Government Printing Office, 1951; General population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-1B and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 19. Death rates for cerebrovascular diseases, according to race, sex, and age: United States, selected years 1950-80

_	Year								
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²	
Total ³	Number of deaths per 100,000 resident population								
All ages, age adjusted4All ages, crude	88.8 104.0	79.7 108.0	72.7 103.9	66.3 101.9	54.5 91.1	45.3 80.5	42.5 77.0	41.5 76.6	
Under 1 years	5.1 0.9 0.5 1.6 4.2	4.1 0.8 0.7 1.8 4.7	4.1 0.7 0.7 1.5 4.8	5.0 1.0 0.7 1.6 4.5	5.1 0.8 0.5 1.4 3.5	5.5 0.8 0.6 1.1 2.7	4.8 0.3 0.3 0.9 2.7	3.8 0.3 1.2 2.7	
35-44 years	18.7 70.4 195.3 549.7 1,499.6	14.7 49.2 147.3 469.2 1,491.3	15.4 45.5 127.1 415.5 1,349.0	15.6 41.6 115.8 384.1 1,254.2	11.7 32.2 91.7 303.1 1,076.3	9.8 27.4 74.1 243.6 910.2	9.1 26.4 69.7 227.9 855.2	8.6 26.1 67.8 222.4 834.7	
White male	2,990.1	3,680.5	3,717.6	3,234.6	2,654.8	2,281.6	2,133.8	2,094.0	
All ages, age adjusted ⁴ All ages, crude	87.0 100.5	80.3 102.7	74.2 96.5	68.8 93.5	57.4 81.1	46.8 68.9	43.8 65.4		
Under 1 year————————————————————————————————————	3.4 13.1 53.7 182.2	4.3 0.8 0.7 1.7 3.5 11.3 40.9 139.0 501.0 1,564.8 3,734.8	4.9 0.6 0.6 1.4 3.5 10.9 37.7 126.4 446.0 1,437.7 3,815.7	4.5 1.2 0.8 1.6 3.2 11.8 35.6 119.9 420.0 1,361.6 3,317.6	4.7 0.9 0.5 1.4 2.6 8.7 27.6 94.4 340.4 1,175.7 2,761.4	4.2 1.0 0.7 1.2 2.0 7.6 22.4 73.3 269.9 975.0 2,352.3	3.7 0.3 0.9 2.3 6.8 22.2 68.8 250.5 919.8 2,154.6		
White female All ages, age adjusted4	79.7	68.7	61.5	56.2	46.8	39.3	36.8		
All ages, crude Under 1 years 1-4 years 5-14 years 25-34 years 35-44 years 45-54 years 65-74 years 65-74 years 75-84 years 85 years and over	2.9 0.6 0.4 1.2 2.9 13.6 55.0 156.9 498.1 1,471.3	2.6 0.5 0.6 1.4 3.4 10.1 33.8 103.0 383.3 1,444.7	108.0 2.6 0.6 0.6 1.2 3.8 10.9 31.2 82.8 328.0 1,280.5	3.2 0.6 0.6 1.1 3.4 11.5 30.5 78.1 303.2 1,176.8	4.0 0.7 0.5 1.1 3.0 9.3 25.1 65.6 234.8 1,007.8	93.5 3.8 0.6 0.4 1.0 2.1 7.8 21.7 54.7 190.7 849.5	90.2 3.4 0.3 0.8 2.0 6.9 20.1 52.2 180.6 793.7		

Table 19. Death rates for cerebrovascular diseases, according to race, sex, and age: United States, selected years 1950-80--Continued

Description and are				Ye	ear			
Race, sex, and age	1950 ¹	1960¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male		Numb	er of deat	hs per 100	,000 resid	ent popula	tion	
All ages, age adjusted4All ages, crude	146.2 122.0	141.2 122.9	138.1 120.0	124.2 108.7	96.5 88.5	83.8 78.4	79.8 74.7	
Under 1 year	2.5 0.7 3.3 12.0 59.3 211.9 522.8 783.6 1,504.9	8.5 1.9 *0.9 3.7 12.8 47.4 166.1 439.9 899.2 1,475.2 2,700.0	7.5 *1.6 1.1 2.6 12.6 58.1 161.4 401.3 873.1 1,523.6 2,606.7	12.2 *1.4 0.8 3.0 14.6 52.7 136.2 343.4 780.0 1,442.6 2,315.4	9.3 *1.1 *0.7 2.6 9.7 36.9 95.2 255.9 609.9 1,305.2 1,835.8	14.6 *1.3 *0.6 1.4 8.2 32.7 87.8 213.5 497.2 1,243.1 1,509.2	13.5 *0.5 *0.3 1.4 7.7 34.3 84.0 205.7 449.4 1,226.7 1,367.1	
Black female								
All ages, age adjusted4All ages, crude	155.6 128.3	139.5 127.7	126.4 123.1	107.9 112.1	81.3 92.6	68.7 82.6	64.7 78.5	
Under 1 year	2.8 0.6 4.2 15.9 75.0 248.9 567.7 754.4 1,496.7	*6.7 *1.3 1.0 3.4 17.4 57.4 166.2 452.0 830.5 1,413.1 2,578.9	*4.9 *1.5 1.0 3.2 15.2 53.3 151.1 367.4 757.9 1,386.5 2,739.1	9.1 *1.4 0.8 3.0 14.3 49.1 119.4 272.5 673.4 1,337.8 2,504.8	*9.0 *0.8 *0.7 1.9 8.7 31.1 82.4 192.9 497.3 1,190.5 1,804.0	11.5 *0.7 *0.7 1.8 6.8 22.4 65.7 158.0 385.5 1,188.4 1,496.9	9.7 *0.4 *0.4 1.6 6.9 21.4 62.8 140.8 366.6 1,141.0	

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for cerebrovascular diseases are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. 330-334; for 1960 and 1965, the Seventh Revision, Nos. 330-334; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. 430-438; for 1979 and 1980, the Ninth Revision, Nos. 430-438.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special Report P-E, No. 3B. Washington. U.S. Government Printing Office, 1951; General population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-IB and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 20. Death rates for motor vehicle accidents, according to race, sex, and age: United States, selected years 1950-80

					Yea	ar			
Race, sex, and age	19	50 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³			Numbe	er of death	ns per 100,	,000 reside	ent populat	tion	
All ages, age adjusted4	. 2	3.3	22.5	26.5	27.4	21.3	23.4	23.7	23.7
All ages, crude	. 2	3.1	21.3	25.4	26.9	21.5	24.0	24.3	24.4
Under 1 year	. ;	8.4	8.1	8.6	9.8	8.3	8.2	6.8	7.6
1-4 years	. լ 1	1.5	10.0	10.8	11.5	10.3	10.6	10.0	8.7
5-14 years	. 1	8.8	7.9	8.9	10.2	8.7	8.8	8.5	0.7
15-24 vears	. 2	4.4	38.0	44.2	47.2	39.2	46.4	46.8	45.0
25-34 years	. 2	4.6	24.3	29.7	30.9	25.0	28.5	29.8	30.9
35-44 years	. 2	0.3	19.3	24.6	24.9	18.9	20.2	21.1	19.6
45-54 vears	. 2	2.2	21.4	25.6	25.5	17.2	18.0	18.5	21.3
55-64 vears	. 🤈	9.2	25.1	28.8	27.9	18.1	18.8	18.6	18.1
65-74 years	. ૧	8.8	31.4	34.3	32.8	22.0	21.5	20.8	21.7
75_84 Mars	. 5	2.7	41.8	46.5	43.5	32.5	31.2	30.9	33.0
85 years and over	. 4	5.1	37.9	40.0	36.6	24.2	24.0	23.0	24.8
White male									
All ages, age adjusted4	• 3	5.9	34.0	39.4	40.1	31.7	35.2	36.2	
All ages, crude		5.1	31.5	37.2	39.1	32.2	36.2	37.3	
Under 1 year	•	9.1	8.8	10.0	9.1	8.0	7.5	7.7	
1-4 years	. 1	3.2	11.3	11.4	12.2	10.9	11.0	10.0	
5-14 years	• 1	2.0	10.3	11.5	12.6	10.8	11.3	10.9	
15-24 years	- 5	8.3	62.7	71.4	75.2	64.6	75.4	77.3	
25-34 years	. 3	9.1	38.6	45.8	47.0	38.2	44.5	47.4	
35-44 years	. 3	0.9	28.4	35.3	35.2	27.7	29.7	30.8	
AE-EA WORKS	. 2	1.6	29.7	35.7	34.6	24.0	25.3	26.4	
55-64 vears	. 1	1.9	34.4	39.3	39.0	24.4	25.4	25.8	
65-74 vears	- 5	9.1	45.5	48.6	46.2	30.3	29.4	29.1	
75-84 voars	. 2	6.4	66.8	74.8	69.2	52.3	48.5	49.2	
85 years and over	. 7	9.3	61.9	74.4	72.0	48.8	52.6	46.9	
White female									
All ages, age adjusted ⁴ All ages, crude	- 1	0.6	11.1	13.6	14.4	10.9	12.6	12.6	
		0.9	11.2	13.9	14.8	11.4	13.1	13.0	
Under 1 year-	• _	7.8	7.5	7.9	10.2	8.4	8.5	6.4	
1-4 years	· 1	0.1	8.3	8.9	9.6	8.2	8.6	9.2	
5-14 years	•	5.6	5.3	6.0	6.9	6.1	6.4	6.2	
15-24 years	- 1	2.6	15.6	19.5	22.7	18.4	23.8	23.3	
25-34 years	-	9.0	9.0	11.8	12.7	10.5	12.2	12.5	
35-44 years	•	8.1	8.9	12.3	12.3	8.6	9.6	10.5	
45-54 years	. 1	8.0	11.4	14.3	14.3	8.9	9.6	9.9	
55-64 years	- 1	5.0	15.3	17.8	16.1	10.5	11.2	10.7	
65-74 years	- 2	0.9	19.3	22.7	22.1	14.4	14.9	13.8	
75-84 years————————————————————————————————————	- 2	5.4	23.8	28.2	28.1	20.9	20.4	20.3	
85 years and over	- 2	2.3	22.2	21.4	18.9	13.0	12.5	13.5	

Table 20. Death rates for motor vehicle accidents, according to race, sex, and age: United States, selected years 1950-80—Continued

Dage and and				Ye	ar			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male		Numb	er of deat	hs per 100	,000 reside	ent popula	tion	
All ages, age adjusted ⁴ All ages, crude	39.8 37.2	38.2 33.1	45.2 39.1	50.1 44.2	35.8 32.7	35.0 32.6	34.2 32.0	
Under 1 years————————————————————————————————————	9.0 9.7 41.6 57.4 45.9 49.9 58.8 48.5 61.8	*6.8 12.7 10.4 46.4 51.0 43.6 48.1 47.3 46.1 51.8 *58.6	*5.6 18.1 12.8 54.0 62.7 53.7 52.2 58.3 51.7 50.3 *53.3	10.6 16.9 16.1 58.1 70.4 59.5 61.4 62.1 54.9 51.5 53.8	*8.8 16.4 13.0 34.0 51.5 43.2 41.9 45.1 49.0 49.7 *37.7	*6.7 13.9 11.0 38.4 49.6 42.6 38.8 42.0 40.4 66.5 33.8	*4.1 13.0 11.2 35.5 49.5 42.0 40.3 42.4 39.6 48.7 41.4	
Black female All ages, age adjusted4 All ages, crude	10.3 10.2	10.0 9.7	12.7 12.1	13.8 13.4	9.4 9.2	9.8 9.7	8.9 8.9	
Under 1 years————————————————————————————————————	7.0 6.2 11.5 10.7 11.1 10.6 14.0 12.7 } 17.6	8.1 8.8 5.9 9.9 9.8 11.0 11.8 14.0 14.2 8.8 *21.1	*6.7 10.5 7.0 14.5 13.2 13.8 15.4 14.7 17.3 12.0 *13.0	11.9 12.6 9.3 13.4 13.3 16.1 16.4 17.1 16.3 14.3	*8.1 11.1 5.9 8.8 8.8 9.5 12.1 11.9 11.4 16.0 *8.1	11.1 13.2 5.7 10.9 9.5 9.4 10.7 12.9 8.7 13.1	*6.3 9.5 5.3 9.6 9.8 8.2 9.0 11.8 10.5 17.6 *5.7	

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for motor vehicle accidents are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. E810-E835; for 1960 and 1965, the Seventh Revision, Nos. E810-E835; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. E810-E823; for 1979 and 1980, the Ninth Revision, Nos. E810-E825.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special Report P-E, No. 3B. Washington. U.S. Government Printing Office, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-1B and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

 $^{^4}$ Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 21. Death rates for homicide and legal intervention, according to race, sex, and age: United States, selected years 1950-80

Page and a Page				Yea	r			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³		Numbe	er of death	s per 100,	000 reside	nt populat	ion	
All ages, age adjusted4	5.4	5.2	6.2	9.1	10.5	9.6	10.4	11.4
All ages, crude	5.3	4.7	5.5	8.3	10.0	9.4	10.2	11.3
Under 1 year-	4.4	4.8	5.6	4.3	5.8	5.0	5.2	7.6
1-4 years	0.6	0.7	1.2	1.9	2.5	2.6	2.5	
5-14 years	0.5	0.5	0.6	0.9	1.0	1.3	1.1	1.4
15-24 years	6.3	5.9	6.8	11.7	13.7	13.2	14.9	16.9
25-34 years	9.9	9.7	11.8	16.6	18.4	16.9	18.8	21.0
35-44 Vears	8.8	8.1	9.9	13.7	15.8	14.0	14.3	14.3
45-54 Vears	6.1	6.2	7.0	10.1	11.6	9.9	10.8	12.9
55-64 years	4.0	4.2	5.0	7.1	8.0	6.7	7.2	7.3
65-74 years	3.2	2.8	3.2	5.0	6.0	5.0	5.5	5.5
75-84 years	2.6	2.4	2.8	4.0	5.7	4.7	5.2	6.1
85 years and over	2.3	2.4	2.4	4.5	4.6	4.4	4.7	3.7
White male								
All ages, age adjusted4	3.9	3.9	4.8	7.3	9.4	9.2	10.1	
All ages, crude	3.9	3.6	4.4	6.8	9.1	9.2	10.1	*************
Under 1 year	4.3	3.8	5.4	2.9	5.0	3.5	4.2	
1-4 years	0.4	0.6	1.0	1.4	1.9	1.7	1.8	
5-14 years	0.4	0.4	0.5	0.5	0.8	1.0	1.0	-
15-24 years	3.7	4.4	4.9	7.9	11.2	12.4	14.8	-
25-34 years	5.4	6.2	7.8	13.0	15.6	15.3	17.4	
35-44 years	6.4	5.5	7.3	11.0	14.4	13.9	13.9	
45-54 years	5.5	5.0	6.1	9.0	11.3	10.4	11.2	
55-64 years	4.4	4.3	5.2	7.7	8.9	7.6	7.5	
65-74 years	4.1	3.4	3.5	5.6	7.1	5.5	6.0	
75-84 years	3.5	2.7	3.6	5.1	6.6	4.7	5.8	
85 years and over	1.8	*2.7	*3.0	7.0	5.6	6.4	5.8	
White female								
All ages, age adjusted4All ages, crude	1.4	1.5	1.7	2.2	2.9	2.9	3.0	
	1.4	1.4	1.6	2.1	2.9	2.9	3.0	
Under 1 year	3.9	3.5	3.7	2.9	3.5	3.6	2,9	
1-4 years	0.6	0.5	0.8	1.2	1.2	1.4	1.7	
5-14 years	0.4	0.3	0.4	0.5	0.8	0.9	0.7	
15-24 years	1.3	1.5	1.8	2.7	4.0	4.1	4.4	
25-34 years	1.9	2.0	2.5	3.4	4.1	4.0	4.2	
35-44 years	2.2	2.2	2.3	3.2	4.0	3.6	3.6	
45-54 years	1.6	1.9	2.0	2.2	3.0	3.0	2.9	
55-64 years	1.3	1.5	1.6	2.0	2.4	2.0	2.2	******
65-74 years	1.1	1.1	1.3	1.7	2.3	2.1	2.6	
75-84 years	1.2	1.2	1.3	2.5	3.8	3.4	3.1	
85 years and over	1.9	*1. 5	*1.3	2.0	3.1	3.0	4.0	

Table 21. Death rates for homicide and legal intervention, according to race, sex, and age: United States, selected years 1950-80--Continued

_				Yea	r			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male		Numbe	er of death	as per 100,	000 reside	nt populat	ion	
All ages, age adjusted ⁴ All ages, crude	51.1 47.3	44.9 36.6	54.5 43.3	82.1 67.5	80.6 69.5	65.6 58.6	71.3 64.6	
Under 1 year	1.8 58.9 110.5 83.7 54.6 35.7 18.7	10.3 *1.7 1.4 46.4 92.0 77.5 54.8 31.8 19.1 16.1 *10.3	11.9 2.7 2.2 57.1 111.4 93.5 63.7 39.2 27.3 17.8 *16.7	14.3 5.1 4.2 102.5 158.5 126.2 100.6 59.8 40.6 18.9 23.1	15.0 7.9 2.7 90.5 162.6 125.5 99.0 62.9 40.1 26.7 *22.6	13.3 8.6 3.4 72.5 134.6 104.3 73.5 50.1 32.2 26.6 *7.7	17.6 6.2 3.2 78.8 148.9 110.9 80.2 58.2 31.1 31.6 *12.9	
Black female								
All ages, age adjusted ⁴ All ages, crude	11.7 11.5	11.8 10.4	12.3 10.5	15.0 13.2	16.3 15.0	13.5 13.0	14.3 13.8	
Under 1 year	2.6 1.2 16.5 26.6 17.8 8.5 3.6 3.4	13.8 *1.7 1.0 11.9 24.9 20.5 12.7 6.8 *3.3 *2.5	12.3 2.8 1.0 12.3 25.3 22.4 13.0 6.9 *2.8 *4.0	10.7 6.3 2.0 17.7 25.6 25.1 17.5 8.1 7.7 *5.7	14.0 6.6 2.0 20.6 28.3 24.5 17.9 10.7 9.0 8.4	13.7 7.6 2.7 17.7 24.0 18.8 10.7 9.3 8.6 8.4	11.3 7.7 2.1 18.8 24.7 18.4 14.2 10.9 9.5 13.2 *4.3	

Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for homicide and legal intervention are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. E964, E980-E985; for 1960 and 1965, the Seventh Revision, Nos. E964, E980-E985; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. E960-E978; for 1979 and 1980, the Ninth Revision, Nos. E960-E978.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. Monthly Vital Statistics Report. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special Report P-E, No. 38. Washington. U.S. Government Printing Office, 1951; General population characteristics, United States summary, 1960 and 1970. U.S. Census of Population. Final reports PC(1)-IB and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 22. Death rates for suicide, according to race, sex, and age: United States, selected years 1950-80 (Data are based on the national vital registration system)

Dage gov and ago				Yea	r			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Total ³		Numbe	er of death	s per 100,	000 reside	nt populat	ion	
All ages, age adjusted4All ages, crude	11.0 11.4	10.6 10.6	11.4 11.1	11.8 11.6	12.6 12.7	12.0 12.5	11.9 12.4	12.2 12.7
Under 1 year	-	•••	•••	•••	•••	•••	•••	•••
1-4 years }		•••	•••	•••	•••	:::	: : :	0.2
15-24 years	0.2	0.3	0.3	0.3	0.5	0.4	0.4	
25-34 years	4.5 9.1	5.2 10.0	6.2 12.2	8.8	11.8	12.4	12.7	12.8
35-44 years	14.3	14.2	16.7	14.1 16.9	16.4 17.4	16.7 15.8	16.8 15.5	16.8
45-54 years	20.9	20.7	20.9	20.0	20.1	17.1	16.5	16.7 17.1
55-64 years	27.0	23.7	23.7	21.4	20.0	18.1	17.0	17.4
65-74 vears	29.3	23.0	21.2	20.8	19.7	18.8	17.9	18.8
75-84 veers	31.1	27.9	24.7	21.2	20.6	22.6	22.4	22.0
85 years and over	28.8	26.0	24.2	20.4	18.1	18.6	16.9	16.3
White male								
All ages age adjusted4	18.1	17.5	17 7	10.2	70.0	10.0	70.0	
All ages, age adjusted ⁴ All ages, crude	19.0	17.6	17.7 17.5	18.2 18.0	19.8 20.1	19.2 20.2	18.9 20.0	
	10.0	17.0	17.5	10.0	20.1	20.2	20.0	
Under 1 year	_	•••		•••	•••	•••	•••	
1-4 years	-	•••	•••	•••	•••	•••	•••	
5-14 vears	0.3	0.5	0.5	0.5	0.8	0.7	0.6	
15-24 years	6.6	8.6	9.5	13.9	19.6	20.8	21.0	
25-34 years	13.8	14.9	17.7	19.9	24.4	25.8	26.2	
35-44 years	22.4	21.9	23.5	23.3	24.5	22.5	22.5	
45-54 years	34.1	33.7	31.1	29.5	29.7	24.7	23.9	
65-74 years	45.9	40.2	39.5	35.0	32.1	29.3	26.6	
75-84 years————————————————————————————————————	53.2	42.0	38.5	38.7	36.1	35.5	33.5	
85 years and over	61.9 61.9	55.7 61.3	50.8	45.5	44.8	50.9	51.0	
os jems an over	01.9	01.3	59.0	50.3	50.3	53.1	48.7	
White female								
All ages, age adjusted4	5.3	5.3	6.7	7.2	7.3	6.6	6.4	
All ages, age adjusted ⁴ All ages, crude	5.5	5.3	6.6	7.1	7.4	6.9	6.6	
Under 1 year	_	•••	•••	•••	•••	•••	•••	
5-14 years		*0.1	*0.1	7		0.2	0.2	
15-24 years	0.1 2.7	2.3	*0.1 2.9	0.1 4.2	0.2 4.9	0.2 5.0	0.3 5.1	
25-34 years	5.2	5.8	7.6	9.0	8.9	8.5	8.0	
35-44 years	8.2	8.1	12.0	13.0	12.6	10.9	10.1	
45-54 years	10.5	10.9	13.8	13.5	13.8	12.1	11.7	
55-64 years	10.7	10.9	12.2	12.3	11.7	10.3	10.2	
65-74 years	10.6	8.8	9.8	9.6	9.5	8.4	7.9	
75-84 years	8.4	9.2	8.0	7.2	7.8	7.7	7.2	
85 years and over	8.9	6.1	6.5	6.1	4.7	5.2	4.9	

Table 22. Death rates for suicide, according to race, sex, and age: United States, selected years 1950-80--Continued (Data are based on the national vital registration system)

				Yea	r			
Race, sex, and age	1950 ¹	1960 ¹	1965 ¹	1970	1975	1978	1979	1980 ²
Black male		Numbe	er of death	s per 100,	000 reside	nt populat	ion	
All ages, age adjusted ⁴ All ages, crude	7.0 6.3	7.8 6.4	9.1 7.3	9.9 8.0	11.6 10.0	12.1 10.8	12.7 11.6	
Under 1 year————————————————————————————————————	4.9 9.3 10.4 10.4	*0.1 4.1 12.4 12.8 10.8 16.2 11.3 *6.6 *6.9	*0.2 8.1 13.4 14.4 13.0 12.8 11.4 13.4 *10.0	*0.1 10.5 19.2 12.6 13.8 10.6 8.7 *8.9	*0.1 12.9 24.3 16.0 12.1 10.8 11.2 13.6 *3.8	*0.3 13.4 24.4 16.9 13.8 10.2 11.1 14.9 *7.7	*0.2 14.4 26.3 16.9 13.0 12.9 13.4 *11.4	
Black female All ages, age adjusted4————————————————————————————————————	1.8 2.6 2.0 3.5 1.1	1.9 1.6 *0.0 1.3 3.0 3.0 3.1 *3.0 *2.3 *1.3	2.5 2.1 *0.1 *2.7 5.1 3.1 4.2 *2.0 *0.9 *2.0	2.9 2.6 *0.2 3.8 5.7 3.7 *2.0 *2.9 *1.7	3.0 2.7 *0.1 3.3 5.6 3.9 4.0 3.5 *3.0 *1.5	3.0 2.8 *0.2 2.7 5.6 4.6 4.2 3.2 *2.2 *3.3 *0.8	3.0 2.8 *0.1 3.4 5.7 4.1 2.9 4.0 *2.6 *3.3	

¹Includes deaths of nonresidents of the United States.

NOTE: For the data years shown, the code numbers for suicide are based on the then current International Classification of Diseases: for 1950, the Sixth Revision, Nos. E963, E970-E979; for 1960 and 1965, the Seventh Revision, Nos. E963, E970-E979; for 1970-78, the Eighth Revision, Adapted for Use in the United States, Nos. E950-E959; for 1979 and 1980, the Ninth Revision, Nos. E950-E959.

SOURCES: National Center for Health Statistics: <u>Vital Statistics of the United States</u>, Vol. II, 1950-79. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1980. <u>Monthly Vital Statistics Report</u>. Vol. 29-No. 13. DHHS Pub. No. (PHS) 81-1120. Public Health Service. Hyattsville, Md., Sept. 17, 1981; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics; U.S. Bureau of the Census: Population estimates and projections. <u>Current Population Reports</u>. Series P-25, Nos. 310, 519, 721, and 870. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, Apr. 1978, and Jan. 1980; 1950 Nonwhite Population by Race, Special Report P-E, No. 38. Washington. U.S. Government Printing Office, 1951; General population characteristics, United States summary, 1960 and 1970. <u>U.S. Census of Population</u>. Final reports PC(1)-1B and PC(1)-Bl. Washington. U.S. Government Printing Office, 1961 and 1972.

²Provisional data.

³Includes all races and both sexes.

⁴Age adjusted by the direct method to the total population of the United States as enumerated in 1940, using 11 age groups.

Table 23. Infants weighing 2,500 grams or less at birth, according to race, geographic division, and State:
United States, average annual 1967-69, 1972-74, and 1977-79

Geographic division		1967–69			1972-74			1977-79	
and State	Total	White	All other	Total ²	White	Black	Total ²	White	Black
		Infants we	eighing 2,5	00 grams o	r less at	birth per 1	.00 total]	ive births	
United States	8.2	7.1	13.6	7.6	6.4	13.3	7.0	5.9	12.7
New England	7.8	7.5	13.8	6.9	6.6	12.9	6.4	5.9	12,5
Maine	7.4	7.3	11.1	6.4	6.4	*6.1	5.4	5.4	*6.1
New Hampshire	7.2	7.2	8.4	6.6	6.6	10.9	5.8	5.8	*6.7
Vermont	7.8	7.9	*1.9	6.8	6.8	*7.3	6.5	6.4	*20.4
Massachusetts	7.8	7.5	13.2	7.0	6.7	12.5	6.3	6.0	11.4
Rhode Island	8.2	7.8	15.6	7.0	6.6	13.5	6.7	6.2	13.2
Connecticut	8.1	7.4	14.3	7.1	6.4	13.2	6.9	6.0	13.7
Middle Atlantic	8.6	7.3	15.1	7.9	6.6	14.0	7.4	6.1	13.2
New York	8.9	7.6	14.7	8.1	6.8	13.7	7.7	6.4	12.9
New Jersey	8.5	7.2	14.9	8.0	6.5	14.4	7.4	5.9	13.5
Pennsylvania	8.1	7.0	16.1	7.4	6.5	14.2	6.8	5.8	13.6
East North Central	7.8	6.8	14.2	7.3	6.2	13.6	6.9	5.7	13.3
Ohio	7.8	6.9	14.4	7.3	6.4	13.5	6.9	5.9	13.1
Indiana	7.4	6.8	13.4	6.7	6.1	11.8	6.5	5.8	12.2
Illinois	8.3	6.8	14.2	7.9	6.2	14.0	7.4	5.7	13.7
Michigan	7.9	6.8	14.5	7.6	6.2	14.0	7.1	5.9	13.4
Wisconsin	6.6	6.3	12.5	6.1	5.7	12.5	5.5	5.1	12.5
West North Central	6.8	6.4	12.7	6.4	5.9	13.0	5.9	5.3	12.8
Minnesota	6.4	6.3	11.0	5.7	5.5	12.5	5.2	5.0	11.1
Iowa	6.2	6.1	11.2	5.9	5.8	13.8	5.2	5.1	11.3
Missouri	7.8	6.7	13.8	7.4	6.2	13.4	6.9	5.7	13.3
North Dakota	5.9	5.9	7.0	5.6	5.5	7.1	5.2	5.0	10.2
South Dakota	6.2	6.0	8.1	6.5	6.2	18.9	5.3	5.2	12.3
Nebraska	6.6	6.2	13.5	6.2	5.9	12.2	5.6	5.3	12.3
Kansas	7.1	6.6	12.9	6.5	6.1	11.7	6.4	5.9	12.6
South Atlantic	9.3	7.4	13.9	8.5	6.6	13.3	8.1	6.1	12.6
Delaware	8.5	6.8	15.3	8.2	6.5	14.2	7.7	5.9	13.7
Maryland	8.9	7.2	14.6	7.8	6.2	12.8	7.7	5.8	12.5
District of Columbia	13.6	7.7	14.7	13.1	7.6	14.0	13.1	6.6	14.4
Virginia	8.7	7.3	13.5	7.8	6.3	12.9	7.4	5.9	11.9
West Virginia	8.2	7 . 9	13.9	7.4	7.2	13.0	6.9	6.6	12.4
								2.1	
North Carolina————————————————————————————————————	9.5	7.6	13.9	8.7	6.8	13.4	8.0	6.2	12.4
	10.0	7.7	13.6	8.9	6.5	12.8	8.9	6.1	13.0
GeorgiaFlorida	9.5 8.9	7.3 7.3	14.2 13.5	9.4 8.2	7.0 6.5	14.0 13.1	8.6 7.8	6.2 6.2	12.9 12.4
East South Central	8.8	7.3	12.9	8.3	6.6	12.8	7.9	6.3	12.2
Kentucky	8.2	7.7	13.4	7.4	6.8	12.7	7.0	6.5	12.7
Tennessee	8.8	7.2	14.6	8.1	6.7	13.4	8.0	6.6	12.9
Alabama	8.9		12.4	8.5	6.3	12.7	8.1	5.9	12.9
Mississippi		7.1							
LITPS 1921 PM	9.6	7.0	12.3	9.2	6.3	12.5	8.8	5.9	11.9

Table 23. Infants weighing 2,500 grams or less at birth, according to race, geographic division, and State: United States, average annual 1967-69, 1972-74, and 1977-79—Continued

(Data are based on the national vital registration system)

Geographic division		1967-6	9		1972-74	1		1977-79	
and State	Total	White	All other ^l	Total ²	White	Black	Total ²	White	Black
		Infants	weighing 2,5	00 grams or	less at	birth per	100 total	live births	
West South Central	8.5	7.1	13.7	8.0	6.7	13.4	7.5	6.2	12.8
Arkansas	8.6	7.2	12.5	8.0	6.5	12.5	7.6	6.0	12.3
Louisiana	9.7	6.8	14.3	9.2	6.6	13.3	8.7	6.2	12.7
Oklahoma	7.7	7.1	11.4	7.6	7.0	14.5	6.9	6.3	12.6
Texas	8.2	7.2	13.9	7.8	6.7	13.5	7.2	6.2	13.0
Mountain	8.5	8.2	10.9	7.5	7.3	14.1	6.8	6.6	13.3
Montana	7.5	7.4	8.5	7.1	7.0	16.7	5.9	5.8	12.5
Idaho	6.9	6.9	*8.4	6.1	6.1	*2.7	5.4	5.4	11.8
Wyoming	9.2	9.0	12.9	9.0	8.9	17.4	7.8	7.7	15.2
Colorado	10.2	9.9	15.4	9.2	8.9	15.5	8.2	7.9	14.7
New Mexico	9.5	9.3	10.5	8.9	8.9	13.9	8.5	8.4	14.4
Arizona	7.7	7.4	9.5	6.7	6.4	11.7	6.1	5.9	11.7
Utah	6.8	6.7	10.0	5.7	5.6	17.6	5.5	5.5	11.3
Nevada	9.3	8.6	13.2	8.6	7.6	15.3	7.3	6.6	12.9
Pacific	7.2	6.6	11.1	6.4	5.7	12.1	6.0	5.3	11.4
Washington	6.7	6.4	10.2	6.1	5.8	11.3	5.4	5.1	9.8
Oregon	6.5	6.3	10.8	5.7	5.5	13.0	5.2	5.1	11.0
California	7.3	6.6	11.6	6.5	5.7	12.2	6.1	5.4	11.5
Alaska	6.9	6.3	8.5	6.1	5.6	10.7	5.5	5.1	8.1
Hawaii	9.0	7.2	9.7	7.8	5.7	7.0	7.2	5.6	9.2

Data by birth weight for the black population not available for these years. In the Middle Atlantic, East North Central, South Atlantic, East South Central, and West South Central Divisions, more than 95 percent of the births in the "all other" racial category were black. However, in the Mountain and Pacific States, most of the births in the "all other" racial category were not black. Overall, 91 percent of the births in the "all other" racial category were black for the 3-year period. Based on more recent data, other than black infants of the "all other" racial category have a much lower low-birth-weight ratio than black infants. In fact, this other group's ratio is similar to the white ratio. Therefore, combining the black and other groups distorts the picture, making a trend difficult to interpret.

2Includes all other races not shown separately.

SOURCE: National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 24. Live births, according to race and selected characteristics: United States, selected years 1970-79

(Data are based on the national vital registration system)

Race and selected			Yea	ar		
characteristic	1970	1972	1974	1976	1978	1979
TOTAL			Percent of :	live births		
Birth weight ²						
2,500 grams or less	7.94 1.17	7.67 1.18	7.42 1.14	7.26 1.15	7.11 1.17	6.94 1,15
Education of mother						
Less than 12 years————————————————————————————————————	30.8 8.6	31.0 9.2	29.2 10.9	27.4 12.1	26.1 13.1	24.4 13.7
Prenatal care began						
1st trimester or no prenatal care	68.0 7.9	69.5 6.9	72.1 6.2	73.5 5.7	74.9 5.4	75.9 5.1
WHITE						
Birth weight ²						
2,500 grams or less	6.84 0.95	6.49 0.94	6.30 0.92	6.13 0.91	5.94 0.91	5.80 0.90
Education of mother						
Less than 12 years————————————————————————————————————	27.0 9.5	27.2 10.2	25.5 12.1	23.9 13.5	23.4 14.4	21.3 15.2
Prenatal care began						
1st trimester———————————————————————————————————	72.4 6.2	73.6 5.6	75.9 5.1	76.8 4.8	78.2 4.5	79.1 4.3
BLACK						
Birth weight ²						
2,500 grams or less	13.86 2.40	13.58 2.38	13.14 2.27	12.97 2.40	12.85 2.43	12.55 2.37
Education of mother						
Less than 12 years————————————————————————————————————	51.0 2.8	49.4 3.2	46.4 4.1	43.3 4.8	38.5 5.7	37.7 5.9
Prenatal care began						
1st trimester———————————————————————————————————	44.4 16.6	49.0 13.3	53.9 11.4	57.7 9.9	60.2 9.3	61.6 8.9

Includes all other races not shown separately.

NOTE: Figures for 1970 are based on a 50-percent sample; for 1972-79, they are based on 100 percent of births in selected States and on a 50-percent sample of births in all other States. Percents are based only on records for which characteristic is stated.

SOURCE: National Center for Health Statistics: <u>Vital Statistics of the United States</u>, Vol. 1, for data years 1970-1976, Public Health Service. Washington. U.S. Government Printing Office; for 1978 and 1979, Public Health Service. To be published.

²Since some of the birth-weight figures are less than 1 percent, all figures for this category were carried to 2 decimal places.

Table 25. Vaccination status of children 1-4 years of age, according to race and standard metropolitan statistical area (SMSA) component: United States, 1974 and 1979

Year, race, and			Vaccination		
SMSA component	Measles	Rubella	DTP 1,2	Polio ²	Mumps
1974		Pe	ercent of population	ı	
Total	64.5	59.8	73.9	63.1	39.4
Race					
WhiteAll other	66.8 53.1	61.0 53.6	76.8 59.6	66.7 45.0	41.1 31.2
SMSA component					
Central city————————————————————————————————————	62.5 52.9 66.0 68.5 61.6	61.1 55.3 63.2 62.3 55.5	69.5 57.3 74.0 77.9 73.2	60.0 51.5 63.1 68.1 60.0	37.9 28.9 41.2 43.9 35.4
1979					
Total	63.5	62.7	65.4	59.1	55.4
Race					
WhiteAll other	66.2 51.2	64.7 53.7	69.0 49.2	63.6 38.9	57.5 46.0
SMSA component					
Central city————————————————————————————————————	57.8 47.7 60.9 65.6 66.1	58.0 52.8 59.6 65.1 64.1	58.0 48.6 61.0 69.1 67.7	52.1 44.5 54.4 61.6 62.6	49.5 40.8 52.1 57.2 58.5

Diphtheria-tetanus-pertussis.

NOTE: Beginning in 1976, the category "don't know" was added to response categories. Prior to 1976, the lack of this option resulted in some forced positive answers particularly for vaccinations requiring multiple dose schedules, i.e., polio and DTP.

SOURCE: Centers for Disease Control: <u>United States Immunization Survey, 1979</u>. Public Health Service, DHHS, Atlanta, Ga. To be published.

²Three doses or more.

 $^{^3}$ Geographic areas where 20 percent or more of the population falls below the poverty level as defined by the Bureau of the Census in 1970.

Table 26. Selected notifiable disease rates, according to disease: United States, selected years 1950-80 (Data are based on reporting by State health departments)

Disease				Ye	ar			
Disease	1950	1960	1965	1970	1975	1978	1979	1980
		Num	ber of c	ases per	100,000	populat	ion	
Chickenpox————————————————————————————————————	3.83 (1) 211.01 (1)	(1) 0.51 23.15 245.42 (1)	0.08 17.49 135.33 (¹)	0.21 27.87 4.08 23.23 55.55	78.11 0.14 16.82 6.30 11.44 27.99	80.42 0.03 13.53 6.89 12.32 7.81	102.93 0.03 13.82 7.02 6.18 6.55	96.69 0.00 12.84 8.39 5.96 3.86
Pertussis (whooping cough)————————————————————————————————————	79.82 22.02 (1) (1) 15.45 80.50	8.23 1.77 1.40 (1) 3.85 6.94 30.83	3.51 0.04 0.03 (1) 8.87 5.70 25.33	2.08 0.02 0.02 27.75 10.84 6.79 18.22	0.82 0.00 0.00 7.81 10.61 7.78 15.95	0.95 0.01 0.00 8.38 13.49 8.95 13.08	0.74 0.02 0.01 5.36 15.06 9.15 12.57	0.76 0.00 0.00 1.72 14.88 8.41 12.25
Venereal diseases: ³ Syphilis ⁴ ————————————————————————————————————	146.02 16.73 39.71 76.22 8.97 192.45 3.34 1.19	68.78 9.06 10.11 45.91 2.48 145.33 0.94 0.17	58.81 12.16 9.10 35.09 1.86 169.36 0.51 0.08	45.46 10.94 8.11 25.05 0.97 298.52 0.70 0.06 0.30	38.00 12.09 12.57 12.81 0.43 472.91 0.33 0.03 0.17	30.00 10.00 9.07 10.64 0.20 468.30 0.24 0.03 0.13	30.68 11.38 9.40 9.70 0.20 459.44 0.38 0.03	30.38 12.01 8.96 9.26 0.12 443.27 0.35 0.02

Not reported nationally.

NOTE: Rates greater than 0 but less than 0.005 are shown as 0.00. The total resident population was used to calculate all rates except venereal diseases, for which the civilian resident population was used.

SOURCES: Centers for Disease Control: Reported morbidity and mortality in the United States, 1980, Morbidity and Mortality Weekly Report 29(54). Public Health Service, Atlanta, Ga., Sept. 1981; National Center for Health Statistics: Data computed by the Division of Analysis from data compiled by the Centers for Disease Control; Venereal Disease Control Division, Center for Prevention Services, Centers for Disease Control: Selected data.

²Data subsequent to 1974 are not comparable to prior years because of changes in reporting criteria that became effective in 1975. ³Newly reported civilian cases.

⁴Includes stage of syphilis not stated.

Table 27. Self-assessment of health and limitation of activity, according to selected characteristics: United States, 1975 and 1980

					With	limitati	ion of act	ivity		
Selected characteristic	of hea	sessment 1th as or poor	То	Total		ted not ajor vity	amour kind o	ed in nt or f major vity	Unable to carry on major activity	
	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980
				Pe	rcent of	populati	on			
Total 1, 2,3	12.2	12.0	13.9	13.7	3.5	3.4	7.2	6.9	3.3	3.5
Age										
Under 17 years	4.3 9.2 21.9 30.2	4.3 8.6 21.3 31.0	3.7 9.0 23.7 46.7	3.8 8.6 23.9 45.2	1.8 3.4 5.0 6.2	1.8 3.1 5.1 6.2	1.7 4.5 13.1 23.2	1.9 4.3 12.3 21.8	0.2 1.2 5.6 17.2	0.1 1.2 6.4 17.2
Sex ¹										
MaleFemale	11.5 12.9	11.5 12.5	14.6 13.4	14.7 12.9	3.5 3.4	3.4 3.3	5.6 8.4	5.5 8.0	5.5 1.5	5.8 1.5
Race 1,4										
WhiteBlack	11.2 20.9	11.0 20.1	13.6 17.2	13.4 16.8	3.6 2.7	3.5 3.0	7.0 9.2	6.8 8.1	3.1 5.4	3.2 5.8
Family income 1,5										
Less than \$7,000	23.0 17.2 13.7 10.5 6.7	22.7 16.7 13.3 8.9 6.5	22.6 17.6 14.5 12.1 10.5	22.4 17.5 14.2 11.5 10.1	4.1 3.7 3.5 3.4 3.3	3.9 3.5 3.3 3.2 3.5	11.6 9.0 7.4 6.2 5.3	11.3 8.5 7.1 5.9 4.9	6.8 4.8 3.6 2.6 1.9	7.1 5.5 3.7 2.4 1.8
Geographic region										
Northeast North Central South West	10.6 10.9 15.1 11.2	10.2 10.9 14.9 10.5	13.3 12.9 14.5 15.3	12.4 13.3 14.8 14.3	3.4 3.3 3.2 4.3	3.0 3.4 3.4 3.8	7.0 7.0 7.2 7.6	6.3 6.8 7.4 6.9	3.0 2.6 4.1 3.5	3.0 3.0 4.0 3.6
Location of residence!										
Within SMSA	11.2 14.2	11.0 14.0	13.5 14.9	13.0 15.3	3.4 3.5	3.3 3.5	6.9 7.7	6.5 7.7	3.1 3.7	3.2 4.0

Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

SCURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

²Includes all other races not shown separately.

³Includes unknown family income.

⁴In 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980, race was determined by asking the household respondent.

Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 28. Restricted-activity and bed-disability days, according to selected characteristics: United States, 1975 and 1980

Selected characteristic	Restricted-	-activity days	Bed-disab	ility đays
Selected Characteristic	1975	1980	1975	1980
		Number per per	son per year	
Total 1, 2,3	17.6	18.6	6.5	6.8
Age				
Under 17 years	11.0	11.6	4.4	5.2
17-44 years	14.4	15.1	5.6	5.6
45-64 years	24.2	26.5	8.4	8.4
65 years and over	38.4	39.2	12.9	13.8
Sex1				
Male	15.8	17.2	5.5	5.9
Female	19.2	19.9	7.4	7.7
Race 1,4				
White	17.1	18.2	6.1	6.5
Black	23.4	24.1	10.0	10.4
Family income 1,5				
Less than \$7,000	28.4	30.6	10.4	11.5
\$7,000-\$9,999	22.3	22.2	8.3	8.2
\$10,000-\$14,999	17.5	19.4	6.5	7.1
\$15,000-\$24,999	15.4	15.5	5.6	5.6
\$25,000 or more	13.0	13.4	4.9	5.0
Geographic areal				
Northeast	16.3	17.2	6.4	6.8
North Central	15.7	16.9	5.7	6.2
South	18.6	19.4	7.0	7.4
West	20.9	21.8	6.8	7.0
Location of residence				
Within SMSA-	17.8	18.7	6.8	6.9
Outside SMSA	17.1	18.5	5.8	6.7
				•••

 $^{^1}$ Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals. 2 Includes all other races not shown separately.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

³Includes unknown family income.
⁴In 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980, race was determined by asking the household respondent.

⁵Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 29. Disability days associated with acute conditions and incidence of acute conditions, according to age: United States, 1970-80 (Data are based on household interviews of a sample of the civilian noninstitutionalized population)

Disability days,						Year ^l					
incidence of acute conditions, and age	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980
Restricted-activity days		<u></u>			Numbe	er per perso	on				
All ages ²	8.5	8.6	9.3	9.2	9.3	9.7	9.4	9.4	9.8	9.5	9.8
Under 17 years	8.6	9.5	9.4	9.3	9.9	9.4	9.7	10.0	10.0	9.8	10.1
17-44 years	8.0	8.0	8.8	8.9	8.9	9.4	8.8	9.1	9.5	9.4	9.9
45-64 years	8.7	7.2	9.3	8.6	8.2	9.8	9.1	8.6	8.8	8.2	8.7
65 years and over	9.8	10.3	10.9	10.8	10.7	12.1	11.6	10.1	12.1	11.6	10.7
Bed-disability days ³											
All ages ²	3.8	3.8	4.1	4.0	4.0	4.2	4.2	4.2	4.5	4.2	4.3
Under 17 years	4.0	4.5	4.3	4.1	4.5	4.0	4.6	4.8	5.0	4.7	4.9
17-44 years	3.5	3.6	3.9	4.0	3.8	4.2	4.0	3.9	4.3	4.0	4.2
45-64 years	3.8	3.1	3.6	3.6	3.5	4.0	3.8	3.7	3.6	3.5	3.4
65 years and over	4.0	4.0	4.7	4.3	4.1	5.3	4.7	4.5	5.1	5.0	4.5
Incidence of acute conditions					Number	per 100 per	sons				
All ages ²	204.1	209.8	220.9	4199.6	4174.2	4199.1	218.4	222.6	224.2	222.4	226.2
Under 17 years	290.3	310.6	307.9	280.1	254.8	282.6	305.7	315.0	310.6	311.4	317.3
17-44 years	193.2	194.2	215.1	196.0	170.2	194.7	215.3	216.1	222.3	221.8	224.0
45-64 years	132.8	125.3	144.0	124.6	98.3	123.4	136.7	142.2	143.0	131.9	139.0
65 years and over	103.0	105.6	109.2	98.1	75.7	91.3	105.5	102.4	111.0	115.5	111.6

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

¹Fiscal year ending June 30. ²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

³A subset of restricted-activity days.

⁴The 1974 estimates are artificially low because of modifications in the questionnaire design for the 1973 and 1974 surveys. Since the data are collected on a calendar year basis, the 1973 and 1975 estimates are also partially affected.

Table 30. Cigarette smoking status of persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, and 1980

·			Smoking	status		
Sex, race, and age		Current smoker	1		Former smoker	
	1965	1976	1980 ²	1965	1976	1980 ²
MALE				_		
Total ^{3,4}			Percent o	f persons		
All ages, 20 years and over	52.4	41.9	38.3	20.5	28.9	29.3
20-24 years	59.2	45.9	39.7	9.0	12.2	12.1
25-34 years	60.7	48.5	43.1	14.7	18.3	20.6
35-44 vears	58.2	47.6	42.6	20.6	27.3	27.6
45-64 years	51.9	41.3	40.8	24.1	37.1	36.9
65 years and over	28.5	23.0	17.9	28.1	44.4	47.4
	20.5	23.0	1.7.5	20.1	33.7	47.4
White						
All ages, 20 years and over	51.5	41.2	37.4	21.4	30.0	30.9
20-24 years	58.1	45.3	39.0	9.6	13.3	12.2
25-34 years	60.1	47.7	42.0	15.5	18.9	21.9
35-44 Vears	57.3	46.8	42.4	21.5	28.9	28.8
45-64 years	51.3	40.6	40.0	25.1	38.1	38.4
65 years and over	27.7	22.8	16.6	28.7	45.6	50.1
Black						
All ages, 20 years and over	60.8	50.5	45.6	12.1	19.3	19.1
20-24 years	67.4	52.8	45.5	3.8	4.1	10.6
25-34 years	68.4	59.4	52.0	6.7	11.8	11.9
25 AA sang						
45-64 years	67.3	58.8	44.2	12.3	13.8	21.2
45-64 years	57.9	49.7	48.8	15.3	28.6	26.3
65 years and over	36.4	26.4	27.9	21.5	33.0	26.6
FEMALE						
Total ^{3, 4}						
All ages, 20 years and over	34.1	32.0	29.4	8.2	13.8	15.5
20-24 years	41.9	34.2	32.7	7.3	10.4	11.0
25-34 years	43.7	37.5	31.6	9.9	12.9	14.4
35-44 years	43.7	38.2	34.9	9.6	15.8	18.9
45-64 years	32.0	34.8	30.8	8.6	15.9	
65 years and over	9.6	12.8	16.8	4.5	11.7	17.1 14.2
White						
All ages, 20 years and over	34.2	31.8	29.5	8.5	14.4	16.0
20-24 years	41.9	34.4	33.3	8.0	11.4	12.5
25-34 years	43.4	37.1	31.6	10.3	13.7	14.7
35-44 years	43.9	38.1	35.6	9.9	17.0	20.2
45-64 years		34.7				
65 years and over	32.7		30.6	8.8	16.4	17.4
os years an over	9.8	13.2	17.4	4.5	11.5	14.3

Table 30. Cigarette smoking status of persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, and 1980--Continued

	Smoking status									
Sex, race, and age	C	urrent smoker	1	1	Former smoker					
, , <u>-</u>	1965	1976	1980 ²	1965	1976	19802				
Black			Percent of	persons						
All ages, 20 years and over	34.4	35.1	30.8	6.0	9.9	11.2				
20-24 years	44.2 47.8 42.8 25.7 7.1	34.9 42.5 41.3 38.1 9.2	32.3 34.2 36.5 34.3 9.4	2.5 6.7 7.0 6.6 4.5	5.0 8.9 9.6 11.9 13.3	2.2 11.6 12.5 14.1 14.1				

A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers. ²Based on data for the last 6 months of 1980. ³Base of percent excludes persons with unknown smoking status. ⁴Includes all other races not shown separately.

f

k

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Table 31. Cigarettes smoked per day by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, and 1980

				Cigarett	tes smoked	per day			
Sex, race, and age	I	ess than	15		15-24		2	25 or mor	e
	1965	1976	1980 ¹	1965	1976	19801	1965	1976	19801
MALE									
Total ² r ³				Percent	of current	: smokers4			
All ages, 20 years and over	28.3	24.2	23.4	46.3	44.8	42.2	25.4	31.0	34.3
20-24 years	34.9	31.6	32.6	49.7	49.9	47.6	15.4	18.5	19.8
25-34 years	25.7	25.5	23.1	50.0	45.8	46.8	24.3	28.7	30.1
35-44 years	23.7	19.6	17.5	44.8	41.2	41.9	31.5	39.2	40.7
45-64 vears	26.7	18.5	21.5	45.3	44.1	35.9	28.0	37.4	42.6
65 years and over	47.1	39.1	32.4	39.0	42.7	42.5	13.8	18.2	25.2
White									
All ages, 20 years and over	25.9	21.4	19.1	46.8	44.9	43.2	27.4	33.7	37.7
20-24 years	32.3	27.5	27.5	50.8	52.8	50 E	76.0	10.7	22.7
25-34 years	22.8	22.1	18.9	51.1		50.5	16.9	19.7	22.1
35-44 years	21.3	17.2	13.4		46.5	47.6	26.1	31.4	33.6
45-64 years	-			44.8	40.4	41.9	33.9	42.5	44.8
45-64 years65 years and over	24.6	16.2	17.3	45.4	43.3	36.9	30.0	40.4	45.8
os years and over	44.6	37.5	29.0	40.3	42.2	44.0	15.1	20.4	27.0
Black									
All ages, 20 years and over	48.1	43.8	48.5	42.6	44.8	38.9	9.3	11.5	12.5
20-24 years	52.7	56.9	58.6	41.9	34.2	34.5	*5.3	*8.9	6.9
25-34 years	47.8	46.0	42.0	41.7	43.5	47.6	10.5	10.5	10.4
35-44 years	42.5	38.5	50.1	45.5	44.8	36.4	12.0	16.7	13.7
45-64 years	46.9	35.9	50.4	43.7	50.8	34.4	9.4	13.3	
45-64 years65 years and over	64.9	53.0	42.1	31.9	47.0	37.4	*3.2	*-	15.2 20.9
	04.5	33.0	42.4	31.9	4 7.0	37.4	J.Z		20.9
FEMALE									
Total ^{2,3}									
All ages, 20 years and over	43.6	36.5	34.2	42.2	43.8	42.0	14.2	19.6	23.8
20-24 years	48.4	43.1	43.5	41.9	42.4	40.6	9.7	14.5	15.9
25-34 years	41.4	34.3	33.7	43.1	45.2	42.1	15.5	20.5	24.2
35-44 years	39.1	33.8	27.6	43.7	44.4	39.7	17.1	21.8	32.7
45-64 years	44.4	34.3	29.6	42.0	44.2	45.5	13.6	21.5	24.9
65 years and over	62.6	49.3	48.7	31.0	38.9	38.2	6.4	11.8	13.1
• • • • • • • • • • • • • • • • • • • •			2007	5	30.3	3012	0.4		1.5.1
White									
All ages, 20 years and over	41.0	33.2	30.0	43.9	45.2	44.3	15.1	21.6	25.7
20-24 years	45.3	39.3	37.3	44.4	44.3	44.0	10.4	16.4	18.7
25-34 years	37.9	30.6	28.3	45.4	46.8	45.7	16.7	22.6	26.0
35-44 years	36.2	29.5	24.1	45.3	45.4	40.5	18.4	25.1	35.5
45-64 years	42.4	32.0	25.4	43.2	45.1	47.9	14.5	23.0	26.7
65 years and over	61.5	45.7	47.6	31.8	41.7	38.4	6.8	12.6	14.0
See footnotes at end of table.									

Table 31. Cigarettes smoked per day by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, and 1980—Continued

		٠		Cigarett	es smoked	l per day			
Sex, race, and age	Less than 15			15–24			25 or more		
	1965	1976	1980 ¹	1965	1976	1980 ¹	1965	1976	1980 ¹
Black				Percent o	of current	smokers ⁴			
All ages, 20 years and over	67.7	60.0	61.6	26.4	33.8	28.4	5.9	6.1	9.9
20-24 years	73.4 66.2 63.4 69.4 83.2	65.7 58.8 60.4 53.2 100.0	80.0 59.9 57.2 56.1 62.7	22.1 25.1 30.4 26.9 *16.8	31.3 33.6 38.1 36.7	20.0 22.9 34.3 33.3 37.3	*4.5 8.7 *6.2 *3.6 *-	*3.0 *7.7 *1.4 10.1 *-	*- 17.4 8.5 10.7 *-

Based on data for the last 6 months of 1980.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

²Base of percent excludes unknown amount smoked.

³Includes all other races not shown separately.

⁴A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers.

Table 32. Teenage cigarette smoking, according to smoking status, sex, and age: United States, 1968, 1974, and 1979

(Data are based on telephone interviews of samples of the noninstitutionalized population)

		Current smoker	1	Former smoker			
Sex and age	1968	1974	1979	1968	1974	1979	
			Percent of	teenagers			
Both sexes, 12-18 years	13.5	16.1	12.1	4.5	8.5	6.9	
Male .							
12-18 years	17.0	16.3	11.1	5.9	9.2	8.1	
12-14 years	4.3 19.3 34.0	4.2 18.1 32.6	3.2 14.6 19.6	2.7 5.5 11.3	5.1 12.4 12.1	4.0 10.1 12.3	
Female							
12-18 years	10.0	15.9	13.1	3.1	7.9	5.8	
12-14 years	1.4 11.8 21.0	5.1 21.6 26.4	4.3 12.3 27.0	0.7 3.8 6.0	4.7 9.1 11.4	3.4 5.9 9.1	

¹A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers.

SOURCE: Green, D. E.: <u>Teenage Smoking</u>, <u>Immediate and Long-Term Patterns</u>. Chilton Research Services. Contract No. 400-79-0010. Prepared for the National Institute of Education. Washington. U.S. Government Printing Office, Nov. 1979.

Table 33. Alcohol consumption status of persons 18 years of age and over, according to sex: United States, selected years 1971-79

(Data are based on interviews of samples of the noninstitutionalized population)

Sex and				Year			
alcohol consumption	1971	1972	1973	1974	1975	1976	1979
Total			Perce	nt of perso	ons		
Abstain————————————————————————————————————	36 34 20 10	36 32 23 10	34 29 23 14	36 28 28 11	36 31 21 12	33 38 19 10	33 34 24 9
Male							
Abstain	30 29 26 15	28 29 28 15	25 24 29 22	24 24 34 18	27 27 26 20	26 33 24 18	25 29 31 14
Female							
Abstain————————————————————————————————————	42 40 13 5	44 34 18 4	42 35 17 6	42 32 21 5	45 35 15 4	39 44 15 3	40 38 18 4

NOTE: Alcohol consumption status is defined in ounces of absolute alcohol (ethanol) consumed per day as follows: abstain, 0; light, .01-.21; moderate, .22-.99; and heavy, 1.00 or more.

SOURCE: Clark, W. B., Midanik, L., and Knupfer, G.: Report on the 1979 National Survey. University of California. Contract No. ADM 281-77-0021. Prepared for the National Institute of Alcohol Abuse and Alcoholism. Rockville, Md., Dec. 1981.

Table 34. Air pollution, according to source and type of pollutant: United States, selected years 1970-80 (Data are calculated emissions estimates)

			Source	ce		
Type of pollutant and year	All sources	Transpor- tation	Stationary fuel combustion	Industrial processes	Solid waste	Other
Particulate matter		Emi	ssions in 10 ⁶ met	ric tons per year	•	
1970	8.6 8.5	1.2 1.3 1.4 1.4 1.4	4.1 2.0 1.7 1.6 1.6	10.1 5.5 4.9 4.3 4.4 4.3	1.1 0.6 0.4 0.4 0.4	1.1 0.7 1.0 0.8 0.8
1980 Sulfur oxides	7.8	1.4	1.4	3.7	0.4	0.9
1970	27.9 25.6 26.4 26.4 24.8 25.3 23.7	0.6 0.8 0.8 0.8 0.9	20.8 20.4 21.1 21.2 19.7 19.8 19.0	6.4 4.5 4.4 4.3 4.6 3.8	() () () () () ()	0.1 (1) (1) (1) (1) (1) (1)
Nitrogen oxides						
1970	18.5 19.6 20.9 21.3 21.5 21.5	7.5 8.9 9.3 9.4 9.7 9.6 9.1	9.5 9.8 10.5 10.8 10.7 10.8 10.6	0.8 0.7 0.8 0.8 0.8 0.8	0.4 0.1 0.1 0.1 0.1 0.1	0.3 0.1 0.2 0.2 0.2 0.2
Hydrocarbons				•••		•••
1970	27.1 22.8 23.7 23.8 24.4 23.4 21.8	12.1 10.3 10.2 9.9 9.6 8.7 7.8	0.2 0.1 0.1 0.1 0.2 0.1	9.8 9.2 10.0 10.5 11.4 11.4	1.8 0.9 0.8 0.8 0.7	3.2 2.3 2.6 2.5 2.4 2.5 2.4
Carbon monoxide						
1970	110.9 98.1 100.4 97.8 96.7 92.6 85.4	86.6 81.8 81.9 80.5 79.6 75.3 69.1	1.9 1.6 1.7 1.8 1.9 2.0	9.0 6.8 7.0 7.1 7.0 6.8 5.8	6.4 3.1 2.7 2.6 2.5 2.3 2.2	7.0 4.8 7.1 5.8 5.7 6.2 6.2

¹Emissions of less than 50,000 metric tons per year.

NOTE: Because of modifications in methodology and use of more refined emission factors, data from this table should not be compared with data in <u>Health</u>, <u>United States</u>, <u>1981</u>.

SOURCE: Monitoring and Data Analysis Division: National Air Pollutant Emission Estimates, 1940-1980. EPA-450/4-82-001. U.S. Environmental Protection Agency. Research Triangle Park, N.C., Jan. 1982.

Table 35. Physician visits, according to source or place of care and selected patient characteristics: United States, 1964, 1975, and 1980

							Physic	cian vis	sits			
Selected characteristic		l source places	-	or	or's of clinic of up pract	or	O	Hospital utpatien partmen	it	Т	'elephon	ie
	1964	1975	1980	1964	1975	1980	1964	1975	1980	1964	1975	1980
	Number	per p	erson				Percen	t of vi	sits			
Total 3, 4,5	4.6	5.0	4.7	69.7	67.1	67.1	12.2	13.2	13.1	11.0	13.1	12.8
Age												
Under 17 years	3.7 4.6 5.0 6.7	4.2 5.0 5.6 6.6	4.4 4.4 5.1 6.4	62.2 73.8 76.8 64.2	62.2 66.1 72.6 76.2	63.1 66.4 70.7 75.7	13.7 13.0 10.0 8.5	14.6 13.7 12.1 9.0	13.1 14.2 12.3 10.2	18.3 8.1 6.1 8.2	17.7 12.2 9.7 8.5	17.3 11.3 10.2 8.9
Sex ³												
Male——————Female—————	4.0 5.1	4.4 5.6	4.1 5.3	69.9 69.5	65.4 68.1	65.7 68.0	13.2 11.4	15.0 12.0	15.4 11.6	9.3 12.2	11.5 14.1	11.3 13.8
Race 3,6												
WhiteBlack ⁷	4.7 3.6	5.1 4.9	4.8 4.6	71.0 .56.2	68.1 58.5	68.4 57.0	10.2 32.7	11.9 23.5	11.3 26.2	11.7 4.2	14.0 7.0	13.8 5.5
Family income 3,8												
Less than \$7,000	3.9 4.2 4.7 4.8 5.2	5.9 5.2 5.0 4.9 5.0	5.5 4.4 4.9 4.7 4.6	62.0 65.2 69.5 71.5 72.9	60.1 64.0 64.5 68.6 70.2	58.8 61.7 66.1 70.5 70.6	25.9 22.3 11.1 7.4 6.7	19.7 17.9 16.1 12.4 8.9	20.7 16.0 14.0 10.8 9.0	4.8 6.6 11.7 13.8 12.9	10.0 9.8 12.9 13.7 15.7	9.1 13.8 13.2 12.9 14.5
Geographic region ³												
Northeast	4.5 4.4 4.3 5.5	5.3 4.7 4.6 5.9	4.7 4.7 4.6 4.9	67.2 72.2 68.9 70.9	63.4 68.4 67.7 69.1	63.0 69.4 66.8 69.2	10.1 10.6 14.0 14.3	15.5 11.7 13.1 12.7	15.7 10.7 13.2 13.0	11.5 11.7 11.0 9.5	14.0 14.7 11.2 12.9	13.6 14.9 11.3 11.4
Location of residence ³												
Within SMSAOutside SMSA	4.8 4.1	5.3 4.4	4.9 4.4	68.2 72.9	65.6 71.0	66.1 69.5	12.3 11.9	14.0 11.4	13.8 11.3	12.1 8.8	13.6 11.9	13.1 12.0

Includes all other sources or places of care not shown separately.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

²Includes hospital outpatient clinic or emergency room.

³Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

Includes all other races not shown separately.

⁵Includes unknown family income.

⁶In 1964 and 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980, race was determined by asking the household respondent.

71964 data are for all other races.

⁶Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1964 were: less than \$2,000; \$2,000-\$3,999; \$4,000-\$6,999; \$7,000-\$9,999; and \$10,000 or more; and, in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 36. Interval since last physician visit, according to selected patient characteristics: United States, 1964, 1975, and 1980

			In	terval sin	ce last ph	ysician vi	sit			
Selected characteristic	Les	s than ly	than 1 year 1 year-less than 2 years				2 years or more			
	1964	1975	1980	1964	1975	1980	1964	1975	1980	
				Perce	nt of popu	lation				
Total 1, 2, 3	66.0	75.1	75.0	13.8	11.0	10.9	17.6	13.1	13.0	
Age										
Under 17 years————————————————————————————————————	65.9	73.6 76.0 74.1 78.8	76.7 73.4 73.3 79.4	14.8 14.7 12.8 9.2	14.0 10.7 8.9 6.1	12.8 11.4 9.2 6.0	14.7 17.2 21.8 20.3	11.2 12.5 16.3 14.7	9.2 14.1 16.8 14.0	
Sex ¹										
MaleFemale	62.4 69.3	70.7 79.1	70.6 79.1	14.7 13.0	12.3 9.8	11.9 9.9	19.7 15.8	16.0 10.4	16.2 10.1	
Race 1,4										
WhiteBlack ⁵	67.3 57.0	75.7 72.0	75.4 74.0	13.7 14.6	10.8 11.8	10.7 11.7	17.0 21.8	12.7 14.7	13.0 12.4	
Family income 1,6										
Less than \$7,000———— \$7,000—\$9,999———— \$10,000—\$14,999———— \$15,000—\$24,999————— \$25,000 or more————	61.6 66.3	74.6 72.4 73.9 75.2 77.9	75.7 75.0 74.4 75.3 76.9	12.9 14.0 14.3 13.9 12.8	10.2 11.7 11.6 11.1 10.4	10.6 10.7 10.7 10.6 10.9	23.3 20.8 17.6 15.2 13.2	14.1 14.9 13.8 13.1 11.2	12.6 13.4 14.1 13.3 11.6	
Geographic region ¹										
Northeast————————————————————————————————————	67.5 65.9 64.0 68.4	76.3 75.3 73.7 75.6	76.6 75.6 74.0 74.3	14.0 14.0 13.6 13.5	11.0 10.6 11.7 10.1	10.8 10.7 11.1 11.0	17.3 18.4 17.9 16.2	12.0 13.3 13.6 13.0	11.8 12.8 13.8 13.4	

75.8

73.5

67.5

63.5

76.0

73.0

Within SMSA-

Outside SMSA-

13.7

14.0

10.6

11.8

10.8

11.2

16.9

18.9

12.5

14.4

12.4

14.5

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

²Includes all other races not shown separately. ³Includes unknown family income.

⁴In 1964 and 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980, race was determined by asking the household respondent.

⁵1964 data are for all other races.

Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1964 were: less than \$2,000; \$2,000-\$3,999; \$4,000-\$6,999; \$7,000-\$9,999; and \$10,000 or more; and, in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 37. Office visits to physicians, according to physician specialty and selected patient characteristics: United States, 1975 and 1980 (Data are based on reporting by a sample of office-based physicians)

						Speci	alty			•		
Selected characteristic	A specia	ll lties ^l		al and practice		ernal .cine		ics and cology	Pedia	atrics	-	eral gery
	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980
						Visits pe	r person				•	
Total ²	2.69	2.63	1.11	0.86	0.28	0.30	0.22	0.23	0.25	0.37	0.19	0.13
Age												
Under 15 years 15-44 years 45-64 years 65 years and over	1.89 2.52 3.43 4.26	2.21 2.36 2.99 4.22	0.65 1.03 1.52 1.94	0.54 0.81 1.08 1.56	0.04 0.20 0.56 0.82	0.03 0.20 0.58 0.95	0.02 0.44 0.13 0.05	0.01 0.48 0.12 0.06	0.83 0.03 0.00 0.00	1.20 0.04 0.00 0.00	0.05 0.19 0.33 0.34	0.05 0.12 0.20 0.22
Sex ²												
MaleFemale	2.25 3.14	2.25 2.98	0.95 1.25	0.73 0.98	0.25 0.32	0.28 0.33	0.00 0.42	0.00 0.44	0.26 0.25	0.39 0.34	0.16 0.22	0.12 0.13
WhiteAll other	2.76 2.25	2.73 2.03	1.12 1.05	0.89 0.70	0.29 0.23	0.31 0.24	0.22 0.23	0.23 0.23	0.27 0.17	0.39 0.25	0.20 0.13	0.13 0.08

NOTE: Rates are based on the civilian noninstitutionalized population, excluding Alaska and Hawaii.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Ambulatory Medical Care Survey.

¹Includes other specialties not shown separately.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

³A change in the coding procedure for racial categories in 1980 may be partially responsible for the drop in office visits for the all other racial group.

Table 38. Office visits to physicians, according to selected characteristics: United States, 1975 and 1980 (Data are based on reporting by a sample of office-based physicians)

			Office	visit		
Selected characteristic	fi	ent's rst sit	last min	sit ed 10 utes .ess ¹	vi	urn sit duled
	1975	1980	1975	1980	1975	1980
			Percent o	f visits		
Total ² ——————	15.6	15.3	50.9	47.3	56.4	58.0
Age						
Under 15 years————————————————————————————————————	15.8 19.0 11.8 8.4	14.6 18.7 12.7 8.6	61.4 50.3 42.5 40.2	57.5 46.9 38.9 36.7	45.2 57.3 64.1 70.0	48.8 58.2 64.5 71.3
Sex ²						
MaleFemale	17.5 14.7	17.3 14.4	50.8 50.8	46.4 47.7	52.5 58.6	55.9 58.9
Race ²						
WhiteAll other	15.2 18.6	14.8 18.9	50.3 55.9	47.3 48.0	56.4 56.4	57.8 60.1
Location of physician's office ²						
Within SMSA	15.7 15.4	15.5 14.6	48.1 58.6	44.9 55.1	59.4 48.2	60.0 51.6

NOTE: Rates are based on the civilian noninstitutionalized population, excluding Alaska and Hawaii.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Ambulatory Medical Care Survey.

 $^{^{1}}$ Time spent in face-to-face contact between physician and patient. 2 Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

Table 39. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1975, and 1980

						Inte	erval sin	ce last	đental v	isit				Never	_
Selected characteristic		Dental visits]	Less than l year	n		year-les an 2 yea			2 years or more			visited dentist	
	1964	1975	1980	1964	1975	1980	1964	1975	1980	1964	1975	1980	1964	1975	1980
	Numb	er per p	erson					Per	cent of	populati	on				•
Total 1, 2, 3	1.6	1.6	1.7	42.0	50.3	49.8	12.8	10.8	13.3	28.1	26.9	25.2	15.6	10.9	10.7
Age															
Under 17 years 17-44 years 45-64 years 65 years and over	1.4 1.9 1.7 0.8	1.6 1.7 1.8 1.2	1.7 1.7 1.8 1.4	41.6 50.0 38.4 20.8	51.4 55.8 48.1 30.3	50.1 54.3 49.4 32.8	9.1 17.2 13.1 7.7	9.6 13.8 9.6 6.4	10.8 17.3 12.6 8.1	6.3 27.8 45.5 66.8	8.1 27.1 40.3 61.6	8.2 25.4 36.5 57.8	42.6 3.2 1.3 1.5	30.0 2.1 0.7 0.8	30.1 1.8 0.6 0.6
Sex ¹															
MaleFemale	1.4 1.7	1.5 1.7	1.5 1.9	40.0 43.9	48.1 52.4	47.7 51.9	13.0 12.5	11.1 10.6	13.5 13.1	28.8 27.6	28.4 25.6	26.6 23.7	16.1 15.1	11.2 10.5	11.0 10.5
Race 1, 4															
WhiteBlack ⁵	1.7 0.9	1.7 1.0	1.8 1.0	44.7 22.8	52.6 34.9	52.2 33.8	12.9 11.7	10.6 13.0	12.8 16.5	27.3 35.3	26.0 34.1	24.1 33.3	13.8 27.1	9.8 16.6	10.0 14.8
Family income 1,6															
Less than \$7,000 \$7,000-\$9,999 \$10,000-\$14,999 \$15,000-\$24,999 \$25,000 or more	0.9 0.9 1.4 1.9 2.8	1.1 1.2 1.4 1.6 2.2	1.1 1.2 1.4 1.7 2.4	25.8 29.2 39.1 49.6 63.3	37.6 38.3 42.5 49.5 64.2	36.7 38.8 41.6 52.2 64.7	10.7 12.5 13.7 13.4 12.2	10.0 11.6 11.7 11.0 10.4	14.7 14.1 14.4 13.1 12.0	34.6 34.3 30.0 24.9 16.6	34.6 33.8 31.6 27.5 18.3	33.2 32.4 29.6 23.8 16.1	27.0 22.0 16.1 11.0 7.0	16.9 15.5 13.2 11.3 6.2	14.6 14.1 13.8 10.2 6.5
Geographic region															
Northeast North Central South	2.1 1.6 1.2 1.8	1.9 1.7 1.3 1.8	2.0 1.6 1.4 1.9	47.9 44.0 35.0 43.3	54.6 52.8 44.5 51.7	54.7 51.7 44.4 51.2	12.7 13.0 12.0 13.8	10.9 10.4 11.2 10.9	12.9 13.1 13.2 14.1	25.7 28.8 30.0 27.5	24.5 26.7 29.6 25.4	22.8 24.6 28.5 22.7	12.7 13.0 20.8 14.5	8.9 9.3 13.6 10.8	8.9 9.7 12.7 10.8

Table 39. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1975, and 1980—Continued

						Inte	rval sin	ce last	dental v	isit				Never	
Selected characteristic		Dental visits		ī	Less than 1 year	1		year-les an 2 yea			2 years or more			visited dentist	
	1964	1975	1980	1964	1975	1980	1964	1975	1980	1964	1975	1980	1964	1975	1980
Location of residence	Numbe	er per p	erson					Per	cent of	populati	on				
Within SMSAOutside SMSA	1.8 1.2	1.8 1.3	1.8 1.4	44.5 37.8	52.7 45.1	51.9 45.5	13.1 12.1	10.8 10.9	13.4 13.2	26.8 30.5	25.2 30.6	23.3 29.1	14.3 17.9	10.2 12.3	10.5

Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

²Includes all other races not shown separately.

³Includes unknown family income.

⁴In 1964 and 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980, race was determined by asking the household respondent.

⁵¹⁹⁶⁴ data are for all other races.

Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1964 were: less than \$2,000; \$2,000-\$3,999; \$4,000-\$6,999; \$7,000-\$9,999; and \$10,000 or more; and, in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 40. Admissions, average length of stay, and outpatient visits in short-stay hospitals, according to type of ownership: United States, selected years 1960-80

(Data are based on reporting by a census of hospitals)

Type of				Yea	ar ,			
ownership	1960	1970	1975	1976	1977	1978	1979	1980
Admissions				Number in	thousands			
All ownerships	24,324	30,706	35,270	35,901	36,227	36,433	37,034	38,140
Federal	1,354 22,970 16,788 1,550 4,632	1,454 29,252 20,948 2,031 6,273	1,751 33,519 23,735 2,646 7,138	1,832 34,068 24,098 2,734 7,237	1,874 34,353 24,284 2,849 7,220	2,880	1,874 35,160 24,885 2,963 7,312	1,942 36,198 25,576 3,165 7,458
Average length of stay				Number o	of days			
All ownerships	8.4	8.7	8.0	8.0	7.9	7.9	7.8	7.8
Federal	21.4 7.6 7.4 5.7 8.8	17.0 8.2 8.2 6.8 8.7	14.4 7.7 7.8 6.6 7.6	13.2 7.7 7.9 6.6 7.5	12.9 7.6 7.8 6.6 7.4			12.9 7.6 7.7 6.5 7.4
Outpatient visits				Number in	thousands			
All ownerships	****	173,058	245,938	261,278	254,483	253,896	252,461	255,320
Federal		39,514 133,545 90,992 4,698 37,854	49,627 196,311 132,368 7,713 56,230	53,553 207,725 141,781 8,048 57,896	50,245 204,238 139,045 8,355 56,838	47,434 206,461 142,617 8,911 54,933	48,587 203,873 140,525 9,289 54,060	48,568 206,752 142,864 9,696 54,192

Excludes psychiatric and tuberculosis and other respiratory disease hospitals.

SOURCES: American Hospital Association: Hospitals. JAHA 35(15):396-401 and 45(15):463-467, Aug. 1961 and Aug. 1971; Hospital Statistics, 1976-81 Editions. Chicago, 1976-81. (Copyrights 1961, 1971, 1976-81: Used with the permission of the American Hospital Association).

Table 41. Discharges from and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1975 and 1980

	Disc	harges	Days o	of care
Sex, age, and first-listed diagnosis	1975	1980	1975	1980
Both sexes		Number per 1	,000 population	
Total2	158.8	161.9	1,217.9	1,163.0
Diseases of heart	12.0	13.2	128.1	123.8
Malignant neoplasms	7.2	7.9	95.5	93.6
Fracture	- 5.4	5.0	60.3	52.9
Neuroses and nonpsychotic disorders	5.2	4.9	47.6	50.4
Pneumonia	3.5	3.6	31.5	28.5
Male				
All ages ¹	132.9	138.1	1,086.5	1,043.5
Diseases of heart	13.5	14.9	141.7	134.9
Malignant neoplasms	. 6.9	7.9	92.7	94.0
Practure	. 50	5.2	56.6	46.6
Inquinal hernia	4.5	4.3	25.1	19.6
Pneumonia	3.8	4.0	32.7	31.5
Under 15 years ²	78.6	78.9	364.8	342.3
Pneumonia	· 5 . 0	5.2	29.7	25.3
Fracture	4.2	3.7	28.0	22.8
Congenital anomalies	3.8	4.0	22.8	22.3
Inquinal hernia	. 3.2	3.0	9.5	6.9
Bronchitis. emphysema. asthma	3.1	4.0	15.9	16.3
Intercranial injury	2.7	1.9	7.8	7.0
15-44 years ²		92.7	633.9	588.7
Fracture	6.6	6.4	59.8	51.1
Neuroses and nonpsychotic disorders	6.4	7.0	53.5	67.9
Lacerations	3.6	3.5	19.8	18.3
Sprains and strains————————————————————————————————————	3.0	3.3	19.9	18.7
Diseases of heart	2.8	2.9	24.1	21.1
Intercranial injury		2.0	16.1	11.5
45-64 years ²		196.9	1,699.9	1,602.5
Diseases of heart	30.8	33.3	312.6	283.2
Malignant neoplasms	12.5	14.5	165.4	168.7
Neuroses and nonpsychotic disorders-	10.0	9.1	80.6	95.6
Inguinal hernia	7.8	7.0	46.7	36.8
Fracture	4.9	4.1	50.5	36.9
Ulcer	5.0	3.1	48.6	27.2
65 years and over ²	386.9	427.4	4,379.0	4,404.7
Diseases of heart	72.6	79.8	813.7	795.8
Malignant neoplasms	42.8	48.2	600.8	611.8
Cerebrovascular diseases	21.1	25.4	278.5	312.6
Hyperplasia of prostate		18.8	207.6	183.3
Pneumonia	13.1	15.6	155.8	172.4

Table 41. Discharges from and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1975 and 1980—Continued

	Disc	narges	Days o	of care
Sex, age, and first-listed diagnosis	1975	1980	1975	1980
Female		Number per 1	,000 population	
All ages ¹	184.0	185.3	1,346.3	1,281.0
Delivery	27.4	29.2	109.1	110.3
Diseases of heart	10.2	11.7	111.5	114.3
Malignant neoplasms	7.5	7.9	98.8	94.0
Practure	5.1	4.8	63.4	58.2
Benign neoplasms	5.3	3.3	31.8	20.1
Under 15 years2	64.1	64.3	289.7	289.4
Pneumonia	3.9	3.6	26.0	17.7
Fracture	2.6	2.4	15.7	12.5
Congenital anomalies	2.4	3.2	14.6	19.5
Bronchitis, emphysema, asthma	2.1	2.5	8.7	9.6
Eye diseases and conditions	1.3	1.2	3.0	2.7
15-44 years ²	214.6	207.4	1,122.1	988.7
Delivery	66.3	70.9	263.7	265.2
Disorders of menstruation	8.2	6.6	32.0	22.4
Benign neoplasms	6.8	3.9	36.8	21.2
Neuroses and nonpsychotic disorders	7.0	5.8	68.0	58.4
Malignant neoplasms	2.9	2.1	26.8	19.2
Cholelithiasis (gallstones)	3.2	2.6	27.2	19.6
45-64 years ²	200.5	195.1	1,793.6	1,611.0
Diseases of heart	15.7	17.3	160.2	146.8
Malignant neoplasms	15.8	16.7	204.2	192.1
Benign neoplasms	8.9	5.6	59.6	37.7
Disorders of menstruation	7.8	3.8	30.3	12.9
Neuroses and nonpsychotic disorders	6.2	5.5	59.3	51.7
65 years and over ²	339.9	389.7	4,016.4	4,273.9
Diseases of heart	59.1	67.6	687.0	726.4
Malignant neoplasms	27.4	30.6	409.0	412.9
Fracture	20.6	20.6	349.5	331.3
Cerebrovascular diseases	19.6	23.1	273.5	307.6
Eye diseases and conditions	14.6	17.5	80.3	71.9
Rheumatoid arthritis and osteoarthritis				

 $^{^1}$ Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals. 2 Includes all diagnoses.

NOTES: Rates are based on the civilian noninstitutionalized population. Diagnostic categories are based on the International Classification of Diseases, 9th Revision, Clinical Modification for 1980 and the Eighth Revision International Classification of Diseases, Adapted for Use in the United States for 1975. For a listing of the code numbers, see Appendix II.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 42. Discharges from, days of care, and average length of stay in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1975 and 1980

Sex, age, and first-listed diagnosis	Disch	narges	Days o	of care	Average of s	
	1975	1980	1975	1980	1975	1980
Both sexes		Number i	n thousands		Number	of days
All ages1	34,043	37,832	262,388	274,508	7.7	7.3
Diseases of heart—	2,535	3,125	27,199	29,540	10.7	9.5
Malignant neoplasms	1,556	1,837	20,612	22,084	13.2	12.0
Fracture	1,155	1,173	13,026	12,651	11.3	10.8
Neuroses and nonpsychotic disorders	1,130	1,174	10,334	11,962	9.1	10.2
Pneumonia	715	782	6,621	6,497	9.3	8.3
Male						
All ages1	13,519	15,145	111,414	116,267	8.2	7.7
Diseases of heart-	1,385	1,655	14,529	15.038	10.5	9.1
Malignant neoplasms	713	879	9,521	10,542	13.4	12.0
Fracture	592	587	5,855	5,306	9.9	9.0
Inguinal hernia	454	458	2,555	2,150	5.6	4.7
Pneumonia	370	415	3,254	3,393	8.8	8.2
Under 15 years	2,143	2,063	9,954	8,950	4.6	4.3
Pneumonia	136	136	810	660	5.9	4.9
Fracture	115	97	76 5	595	6.6	6.2
Congenital anomalies	104	106	621	582	6.0	5.5
Inguinal hernia	87	77	259	181	3.0	2.3
Bronchitis, emphysema, asthma	85	105	433	426	5.1	4.0
Intercranial injury	72	49	212	182	2.9	3.7
15-44 years ¹	4,107	4,687	28,058	29,748	6.8	6.3
Fracture	290	324	2,647	2,582	9.1	8.0
Neuroses and nonpsychotic disorders	282	355	2,370	3,433	8.4	9.7
Lacerations	159	178	877	924	5.5	5.2
Sprains and strains	131	166	879	946	6.7	5.7
Diseases of heart	121	145	1,043	1,068	8.6	7.4
Intercranial injury	119	99	714	583	6.0	5.9
45-64 years ¹	3,870	4,127	34,937	33,589	9.0	8.1
Diseases of heart	623	699	6,332	5,936	10.2	8.5
Malignant neoplasms	257	304	3,399	3,535	13.2	11.6
Neuroses and nonpsychotic disorders	206	192	1,657	2,003	8.0	10.4
Inguinal hernia	161	146	960	771	6.0	5.3
Fracture	101	86	1,037	774	10.3	9.0
Ulcer	102	66	999	570	9.8	8.6
65 years and over ¹	3,399	4,268	38,465	43,981	11.3	10.3
Diseases of heart	628	797	7,075	7,947	11.3	10.0
Malignant neoplasms	376	482	5,277	6,109	14.0	12.7
Cerebrovascular diseases	185	253	2,446	3,121	13.2	12.3
Hyperplasia of prostate	156	188	1,824	1,831	11.7	9.7
Pneumonia	115	156	1,368	1,721	11.9	11.0
			*	=		

Table 42. Discharges from, days of care, and average length of stay in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1975 and 1980—Continued

Sex, age, and first-listed diagnosis	Disch	arges	Days c	f care	Average of s	_
	1975	1980	1975	1980	1975	1980
Female		Number i	in thousands		Number	of days
All ages ¹	20,523	22,686	150,974	158,241	7.4	7.0
Diseases of heart	1,150	1,470	12,670	14,503	11.0	9.9
Malignant neoplasms	843	959	11,091	11,542	13.2	12.0
Fracture	563	586	7,171	7,345	12.7	12.5
Delivery	3,135	3,762	12,485	14,158	4.0	3.8
Benign neoplasms	594	396	3,542	2,446	6.0	6.2
Under 15 years 1	1,682	1,609	7,600	7,241	4.5	4.5
Pneumonia	103	91	683	443	6.6	4.9
Fracture	67	60	411	312	6.1	5.2
Congenital anomalies	64	80	384	487	6.0	6.1
Bronchitis, emphysema, asthma	54	63	228	240	4.2	3.8
Eye diseases and conditions	35	31	78	68	2.3	2.2
15-44 years ¹	10,064	10,949	52,629	52,204	5.2	4.8
Delivery	3,110	3,741	12,371	14,000	4.0	3.7
Disorders of menstruation	386	348	1,501	1,181	3.9	3.4
Benign neoplasms	321	204	1,725	1,117	5.4	5.5
Neuroses and nonpsychotic disorders	331	308	3,190	3,082	9.7	10.0
Malignant neoplasms	135	110	1,259	1,015	9.4	9.2
Cholelithiasis (gallstones)	151	138	1,276	1,033	8.5	7.5
45-64 years ¹	4,522	4,533	40,456	37,420	8.9	8.3
Diseases of heart	342	402	3,479	3,409	10.2	8.5
Malignant neoplasms	357	389	4,607	4,462	12.9	11.5
Benign neoplasms	202	130	1,345	875	6.7	6.8
Disorders of menstruation	176	89	683	299	3.9	3.4
Neuroses and nonpsychotic disorders	141	128	1,338	1,200	9.5	9.4
65 years and over1	4,256	5,596	50,289	61,377	11.8	11.0
Diseases of heart	722	971	8,407	10,432	11.6	10.7
Malignant neoplasms	343	440	5,121	5,930	14.9	13.5
Fracture	258	296	4,377	4,757	17.0	16.1
Cerebrovascular diseases	245	331	3,425	4,418	14.0	13.3
Eye diseases and conditions	182	251	1,005	1,033	5.5	4.1
Rheumatoid arthritis and osteoarthritis	99	116	1,474	1,542	14.9	13.2

¹Includes all diagnoses.

NOTE: Diagnostic categories are based on the <u>International Classification of Diseases</u>, 9th <u>Revision, Clinical Modification</u> for 1980 and the <u>Eighth Revision International Classification of Diseases</u>, Adapted for Use in the <u>United States</u> for 1975. For a listing of the code numbers, see Appendix II.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

Table 43. Discharges from, days of care, and average length of stay in non-Federal short-stay hospitals for all patients and for patients with surgery, according to bed size of hospital and age of patient: United States, 1975 and 1980

		Disch	arges			Days o	of care		Ave	erage le	ngth of s	tay
Bed size of hospital and age of patient	A. pati			ents surgery		ll ents		ents surgery		ll ents	Patie with s	-
	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980
All sizes			Ŋ	Number per	1,000 popu	lation				Number	of days	
All ages 1,2	158.8	161.9	66.3	65.9	1,217.9	1,163.0	517.4	492.1	6.6	6.1	6.8	6.4
Under 15 years	71.5 155.4 194.7 359.3	71.8 151.3 196.0 405.2	31.6 71.9 83.0 110.9	27.0 70.4 80.9 131.4	328.0 885.1 1,748.9 4,165.9	316.4 793.1 1,607.0 4,327.5	130.5 425.2 783.1 1,500.1	113.0 375.7 714.5 1,648.7	4.6 5.7 9.0 11.6	4.4 5.2 8.2 10.7	4.1 5.9 9.4 13.5	4.2 5.3 8.8 12.6
6-99 beds												
All ages 1,2	31.2	32.2	9.1	8.8	195.6	191.4	56.0	51.3	5.2	5.0	5.5	5.3
Under 15 years	13.0 28.6 36.7 85.4	15.2 27.8 37.3 90.8	4.6 10.5 10.5 14.1	4.6 9.8 9.4 15.6	47.6 129.2 249.1 808.4	56.5 123.5 245.7 769.3	14.9 50.4 76.2 160.2	17.1 43.7 62.6 162.7	3.7 4.5 6.8 9.5	3.7 4.4 6.6 8.5	3.2 4.8 7.3 11.4	3.7 4.5 6.7 10.4
100-199 beds												
All ages 1,2	26.3	28.4	10.1	11.3	188.6	188.5	69.0	75.0	6.1	5.5	6.0	5.6
Under 15 years	12.3 25.2 30.6 63.8	12.8 26.5 32.6 74.9	5.1 11.2 11.4 17.7	4.5 12.3 12.9 23.7	49.9 129.5 258.0 708.0	48.9 124.7 246.0 755.9	17.5 58.6 93.1 216.8	15.5 56.8 100.3 276.7	4.1 5.1 8.4 11.1	3.8 4.7 7.5 10.1	3.5 5.2 8.1 12.2	3.5 4.6 7.8 11.7

Table 43. Discharges from, days of care, and average length of stay in non-Federal short-stay hospitals for all patients and for patients with surgery, according to bed size of hospital and age of patient: United States, 1975 and 1980--Continued

		Disch	arges			Days o	f care		Ave	erage le	ngth of s	tay
Bed size of hospital and age of patient	Al pati		Pati with s			ll ents	Patie with su			ll ents	Patie with s	
	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980	1975	1980
200-299 beds			N	umber per	1,000 popu	lation				Number	of days	
All ages 1,2	24.6	28.5	10.8	12.1	185.4	204.2	82.8	87.9	6.5	6.0	6.7	6.1
Under 15 years	12.1 24.5 28.4 54.9	13.0 26.6 34.2 71.2	5.7 11.8 12.6 18.3	5.2 12.8 14.7 24.7	54.0 131.5 246.5 678.7	55.4 136.4 276.2 785.3	21.9 67.1 115.1 263.1	19.1 66.3 122.7 311.9	4.4 5.4 8.7 12.4	4.2 5.1 8.1 11.0	3.8 5.7 9.1 14.4	3.7 5.2 8.4 12.6
300-499 beds												
All ages 1,2	42.5	37.1	19.7	16.6	347.6	287.0	158.9	131.3	7.1	6.4	7.0	6.5
Under 15 years	19.1 41.7 55.0 89.9	15.7 34.5 46.8 92.0	9.3 20.5 26.4 33.1	6.3 16.9 21.7 35.6	91.8 254.0 531.1 1,119.6	69.0 191.1 402.0 1,103.3	38.7 125.1 253.2 460.6	24.7 94.0 195.0 473.7	4.8 6.1 9.7 12.5	4.4 5.5 8.6 12.0	4.2 6.1 9.6 13.9	3.9 5.5 9.0 13.3
500 beds or more												
All ages 1,2	34.1	35.6	16.6	17.1	300.6	291.9	150.7	146.6	7.9	7.3	8.1	7.6
Under 15 years	14.9 35.4 43.9 65.3	15.0 35.8 45.0 76.3	7.0 18.0 22.1 27.7	6.4 18.5 22.3 31.7	84.8 240.8 464.2 851.2	86.6 217.4 436.9 913.7	37.5 124.0 245.6 399.4	36.7 114.8 234.0 423.7	5.7 6.8 10.6 13.0	5.8 6.1 9.7 12.0	5.4 6.9 11.1 14.4	5.7 6.2 10.5 13.3

¹Includes age not stated.

NOTES: Excludes newborn infants. Rates are based on the civilian noninstitutionalized population.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

Table 44. Discharges from, days of care, and average length of stay in short-stay hospitals, according to selected characteristics: United States, 1975 and 1980

Colorbal channel wintin	Disch	arges ¹	Days o	f care ¹	Average length of stay 1		
Selected characteristic	1975	1980	1975	1980	1975	1980	
		Number per	1,000 population		Number	of days	
Total 2,3,4	124.4	120.0	1,046.8	958.4	7.5	7.1	
Age							
Under 17 years————————————————————————————————————	69.3 112.7 174.6 249.8	62.0 105.2 165.7 276.8	385.8 762.0 1,691.9 3,007.3	324.6 713.0 1,558.7 2,771.6	5.6 6.8 9.7 12.0	5.2 6.8 9.4 10.0	
Male————————————————————————————————————	117.2 131.4	119.4 121.0	1,051.5 1,045.1	1,043.8 882.2	7.9 7.2	7.9 6.5	
Race ^{2,5}							
WhiteBlack	124.5 129.3	119.9 130.4	1,016.3 1,359.3	921.0 1,365.7	7.2 9.8	6.9 9.2	
Family income ^{2,6}							
Less than \$7,000	161.2 147.4 129.3 122.9 106.5	157.5 141.6 120.4 111.2 102.4	1,674.6 1,222.0 1,092.1 1,010.2 808.3	1,457.8 1,270.4 959.6 782.9 714.1	9.6 7.6 7.7 7.0 6.6	8.4 8.2 6.9 6.5 6.0	
Geographic area ²							
Northeast	110.8 127.7 136.5 116.7	105.2 126.4 139.2 95.9	1,128.4 1,086.8 1,077.2 819.8	918.0 978.1 1,118.0 701.1	9.2 7.5 7.0 6.2	7.8 7.0 7.1 6.4	
Location of residence 2							
Within SMSAOutside SMSA	119.0 136.3	110.0 141.0	1,043.3 1,057.1	910.7 1,058.3	7.8 6.8	7.5 6.7	

Excluding deliveries.

SOURCE: Division of Health Interview Statistics, National Center for Health Statistics: Data from the National Health Interview Survey.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals.

Thoughts all other races not show separately.

Includes all other races not shown separately.

Includes unknown family income.

In 1975, the racial classification of persons in the National Health Interview Survey was determined by interviewer

observation. In 1980, race was determined by asking the household respondent.

Family income categories for 1980. Adjusting for inflation, corresponding income categories in 1975 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

Table 45. Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1975 and 1980

(Data are based on a sample of hospital records)

		Operat	ions	
Sex, age, and surgical category	1975	1980	1975	1980
Both sexes ¹		er in sands		er 1,000 ation
Total ²	20,040	22,348	93.5	95.3
Biopsy Dilation and curettage of uterus	1,107 1,070	1,351 959	5.1 4.9	5.7 4.0
Hysterectomy	725	649	3.3	2.7
Tonsillectomy with or without adenoidectomy————————————————————————————————————	685 549	464 537	3.5 2.7	2.4 2.4
Male				
All ages 1,2	7,379	8,505	74.2	79.4
Repair of inguinal hernia	484	484	4.9	4.5
Tonsillectomy, with or without adenoidectomy	297	175	3.0	1.9
Biopsy	353 266	548 323	3.6 2.8	5.2 3.2
Under 15 years ²	1,250	1,068	45.8	40.8
Tonsillectomy, with or without adenoidectomy	233	138	8.5	5.3
Myringotomy	112	115	4.1	4.4
Repair of inguinal hernia————————————————————————————————————	96 62	86 35	3.5 2.3	3.3 1.3
Appendectomy 3	54	43	2.0	1.6
15-44 years ²	2,521	2,900	57.0	57.4
Repair of inguinal hernia	115	127	2.6	2.5
Excision of semilunar cartilage of knee joint	86	94	1.9	1.9
Appendectomy ³	86	85	1.9	1.7
Suture of skin or mucous membrane Biopsy Biopsy	83 70	81 92	1.9 1.6	1.6 1.8
45-64 years ²	2,041	2,313	99.3	110.4
Repair of inguinal hernia	168	152	8.2	7.2
Biopsy	129	190	6.3	9.1
Cardiac catheterization	74 77	129	3.6 3.7	6.2 4.0
Excision of lesion of skin and subcutaneous tissue	60	83 62	2.9	3.0
65 years and over ²	1,567	2,224	178.4	222.7
Prostatectomy	187	251	21.3	25.1
Biopsy	139	239	15.8	24.0
Repair of inguinal hernia	105	119	12.0	11.9
Extraction of lens	86 46	124 57	9.8 5.3	12.4 5.7
recar excision and destinction of feston of braddel	40	51	J.J	5.1

See footnotes at end of table.

Table 45. Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1975 and 1980—Continued

(Data are based on a sample of hospital records)

	Operations							
Sex, age, and surgical category	1975	1980	1975	1980				
Female		er in sands	-	er 1,000 ation				
All ages 1,2	12,661	13,842	112.0	110.9				
Dilation and curettage of uterus————————————————————————————————————	1,070 725 328	959 649 619	9.4 6.4 2.8	7.6 5.2 4.8				
Biopsy	755	803	6.6	6.4				
Under 15 years ²	917	764	35.0	30.5				
Tonsillectomy, with or without adenoidectomy————————————————————————————————————	238 89 47	156 87 34	9.1 3.4 1.8	6.2 3.5 1.4				
Dilation of urethra————————————————————————————————————	40 37	21 21	1.5 1.4	0.9 0.9				
Adenoidectomy without tonsillectomy————————————————————————————————————	34	31	1.3	1.2				
15-44 years ²	6,736	7,487	143.6	141.8				
Dilation and curettage of uterus————————————————————————————————————	717 435 325	661 402 614	15.3 9.3 6.9	12.5 7.6 11.6				
Ligation and division of fallopian tubes, bilateral	362	632	7.7	12.0				
Biopsy	304 253	279 286	6.5 5.4	5.3 5.4				
45-64 years ²	3,276	3,111	145.2	133.9				
Biopsy————————————————————————————————————	279 304 249 187	275 241 203 162	12.4 13.5 11.0 8.3	11.8 10.4 8.8 7.0				
Cholecystectomy————————————————————————————————————	118	107	5.2	4.6				
65 years and over ²	1,732	2,480	138.3	172.7				
Biopsy————————————————————————————————————	157 151 108 70 44	235 211 90 83 48	12.5 12.1 5.1 5.6 3.5	16.4 14.7 6.3 5.8 3.3				
Dilation and curettage of uterus	45	55 55	3.6	3.8				

Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age intervals. Includes operations not listed in table.

NOTES: Excludes newborn infants. Rates are based on the civilian noninstitutionalized population. Surgical categories are based on the <u>International Classification</u> of <u>Diseases</u>, 9th Revision, <u>Clinical Modification</u> for 1980 and the <u>Eighth</u> Revision International Classification of <u>Diseases</u>, <u>Adapted for Use in the United States</u> for 1975. For a listing of the code numbers, see <u>Appendix II</u>.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Hospital Discharge Survey.

³Limited to estimated number of appendectomies, excluding those performed incidental to other abdominal surgery.

Table 46. Nursing home residents, according to selected functional status and age: United States, 1973-74 and 1977

(Data are based on a sample of nursing homes)

		.1	L973-74 ¹	-				1977	<u> </u>		
Functional status	All ages	Under 65 years	65-74 years	75-84 years	85 years and over	All ages	Under 65 years	65-74 years	75-84 years	85 years and over	
					Number of	cesidents					
All residents	1,075,800	114,300	163,100	384,900	413,600	1,303,100	177,100	211,400	464,700	449,900	
		Percent distribution									
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Dressing											
Independent	29.3	34.8	34.4	30.2	25.0	30.6	44.8	38.8	27.5	24.2	
Requires assistance, includes those who do not dress	70.8	65.2	65.6	69.9	75.1	69.4	55.2	61.2	72.5	75.8	
Using toilet room											
Independent	47.5 30.8 21.7	56.4 21.6 22.0	53.6 27.3 19.1	48.0 31.5 20.5	42.2 34.1 23.7	47.5 42.5 10.1	61.8 28.1 10.1	53.1 37.8 9.1	45.7 44.7 9.6	41.0 48.0 11.0	
Mobility											
Walks independently————————————————————————————————————	48.6 20.2 26.5 4.7	58.2 11.1 24.8 5.9	55.4 15.5 24.9 4.1	49.6 20.4 25.9 4.1	42.2 24.4 28.2 5.2	33.9 28.8 32.0 5.3	53.6 15.7 25.5 5.2	43.2 21.4 30.5 5.0	33.2 30.5 31.5 4.9	22.5 35.6 35.9 6.1	
Continence											
No difficulty controlling bowel or bladder Difficulty controlling bowel Difficulty controlling bladder Difficulty controlling both bowel and	66.2 1.1 4.2	72.6 *0.8 2.4	70.9 *1.2 4.4	66.8 1.1 4.2	61.9 1.2 4.7	54.7 3.7 9.0	68.0 3.0 5.8	62.4 3.7 6.5	52.9 4.0 9.4	47.8 3.8 11.1	
bladderOstomy in either bowel or bladder	28.1 0.4	23.4 *0.8	23.0 *0.4	27.5 *0.4	31.9 *0.3	25.9 6.7	16.8 6.4	20.6 6.8	26.9 6.9	30.8 6.5	

See footnotes at end of table.

Table 46. Nursing home residents, according to selected functional status and age: United States, 1973-74 and 1977--Continued (Data are based on a sample of nursing homes)

	1973-741				1977					
Functional status	All ages	Under 65 years	65-74 years	75-84 years	85 years and over	All ages	Under 65 years	65-74 years	75-84 years	85 years and over
Eating	Percent distribution									
Independent	65.2	67.0	68.1	66.0	62.8	67.4	73.8	72.9	66.2	63.5
Requires assistance, includes those who are tube or intravenously fed	34.8	33.0	31.9	34.0	37.2	32.6	26.2	27.1	33.8	36.5
Vision										
Not impaired————————————————————————————————————	53.5 33.7 10.0 2.8	70.6 21.7 5.0 2.7	62.3 28.8 6.3 2.6	53.8 35.0 8.9 2.3	45.0 37.6 14.0 3.5	67.2 19.0 6.6 3.0 4.3	81.0 11.0 2.2 2.2 3.8	75.4 13.4 3.3 2.6 5.3	67.9 19.6 6.1 2.6 3.9	57.2 24.1 10.4 3.8 4.5
Hearing										
Not impaired————————————————————————————————————	67.8 26.1 5.1 1.0	88.4 9.2 1.6 *0.8	80.3 17.0 1.9 *0.8	70.0 25.5 3.8 0.7	55.2 34.8 8.7 1.4	69.5 21.7 4.3 0.7 3.7	87.6 6.6 *0.4 *1.1 4.4	81.0 11.4 1.9 *0.7 5.0	71.6 21.2 3.0 *0.6 3.6	54.9 33.1 8.4 *0.7

¹Excludes residents in personal care or domiciliary care homes.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Unpublished data from the National Nursing Home Survey.

Table 47. Nursing home and personal care home residents 65 years of age and over and number per 1,000 population, according to sex and race:
United States, 1963, 1969, 1973-74, and 1977

(Data are based on a sample of nursing homes)

		s	ex	Rac	9		s	ex	Ra	ıce
Year and age	Total	Male	Female	White ¹	All other	Total	Male	Female	White ¹	All other
1963			Number of	residents			Nun	mber per 1,0	00 populati	on
65 years and over	445,600	141,000	304,500	431,700	13,800	25.4	18.1	31.1	26.6	10.3
65-74 years	89,600 207,200 148,700	35,100 65,200 40,700	54,500 142,000 108,000	84,400 202,000 145,400	5,200 5,300 3,300	7.9 39.6 148.4	6.8 29.1 105.6	6.8 47.5 175.1	8.1 41.7 157.7	5.9 13.8 41.8
1969										
65 years and over	722,200	207,100	515,200	695,000	27,300	37.1	25.0	46.1	38.8	17.6
65-74 years	138,500 321,800 261,900	52,200 90,800 64,100	86,300 231,100 197,800	129,500 310,900 254,500	9,000 10,900 7,400	11.6 51.7 203.2	9.9 36.0 130.8	12.9 62.3 247.6	11.7 54.1 221.9	9.6 22.9 52.4
1973-74 ²										
65 years and over	961,500	265,700	695,800	920,600	40,900	45.1	30.2	55.5	47.3	21.9
65-74 years	163,100 384,900 413,600	65,100 102,300 98,300	98,100 282,600 315,300	150,100 369,700 400,800	13,000 15,200 12,800	12.3 59.4 253.7	11.3 40.8 180.4	13.1 71.1 290.6	12.5 61.9 269.0	10.6 30.1 91.4
19773										
65 years and over	1,126,000	294,000	832,000	1,059,900	66,100	47.9	30.7	59.7	49.7	30.4
65-74 years	211,400 464,700 449,900	80,200 122,100 91,700	131,200 342,600 358,200	187,500 443,200 429,100	23,800 21,500 20,800	14.5 68.0 216.4	12.7 47.4 140.0	15.9 80.6 251.5	14.2 70.6 229.0	16.8 38.6 102.0

Includes Hispanics.

SOURCES: National Center for Health Statistics: Characteristics of residents in institutions for the aged and chronically ill, United States, April-June 1963, by G. S. Wunderlich. Vital and Health Statistics. Series 12-No. 2. DHEW Pub. No. (PHS) 1000. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1965; Measures of chronic illness among residents of nursing and personal care homes, United States, by D. K. Ingram. Vital and Health Statistics. Series 12-No. 24. DHEW Pub. No. (HRA) 74-1709. Health Resources Administration. Washington. U.S. Government Printing Office, Mar. 1974; Unpublished data from the National Nursing Home Survey.

²Excludes residents in personal care homes.

³Includes residents in domiciliary care homes.

Table 48. Additions to mental health facilities and average annual percent change, according to service setting and type of facility:
United States, 1971 and 1979

	Service setting										
	•	Inpatient		C	utpatient		Day treatment				
Type of facility	1971	1979 ¹	Average annual percent change 1971-79	1971	1979 ¹	Average annual percent change 1971-79	1971	1979 ¹	Average annual percent change 1971-79		
	Number of	additions		Number of	additions		Number of	addition	s		
All facilities	1,336,312	1,589,026	2,2	1,378,822	2,399,932	7.2	75,545	187,404	12.0		
Non-Federal psychiatric hospitals State and county hospitals Private hospitals	561,923 474,923 87,000	527,612 383,323 144,289	-2.6	147,383 129,133 18,250	111,923 81,919 30,004	-5.5	18,448 16,554 1,894	13,275 9,808 3,467	-4.0 -6.3 7.9		
Veterans Administration hospitals ²	134,065	183,461	5.4	51,645	120,940	15.2	4,023	6,978	9.6		
Non-Federal general hospital psychiatric units Government	519,926 215,158 304,768	552,437 135,460 416,977	-7.4	282,677 139,077 143,600	230,412 107,186 123,226	-4.2	11,563 4,291 7,272	12,724 3,480 9,244	-3.4		
Residential treatment centers for emotionally disturbed children	11,148	15,453	4.2	10,156	19,653	8.6	994	2,519	12.3		
Federally-funded community mental health centers	75,900	286,026	20.9	335,648	980,685	16.6	21,092	113,405	27.2		
Freestanding psychiatric outpatient clinics Government	- - -	- - -	- -	484,677 273,358 211,319	825,046 324,174 500,872	2.2	10,642 7,737 2,905	29,587 15,046 14,541	8.7		
Other mental health facilities	33,350	24,037	-4.0	66,636	111,273	6.6	8,783	8,916	0.2		

Provisional data. 1979 data are not yet available for Veterans Administration neuropsychiatric hospitals, general hospital psychiatric services (Veterans Administration and non-Federal) and federally funded community mental health centers (CMHC's); 1978 data are used for CMHC's, and 1977 data are used for Veterans Administration psychiatric services and non-Federal general hospital psychiatric services.

²Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric modalities.

SOURCE: National Institute of Mental Health: Unpublished data from the Division of Biometry and Epidemiology.

Table 49. Inpatient and outpatient care episodes in selected mental health facilities and number per 1,000 population, according to type of facility: United States, selected years 1955-79

Type of facility	Year									
Type of facility	1955	1965	1975	1977	1979 ¹	1955	1965	1975	1977	1979 ¹
]	Number of	episodes i	n thousands	3		Number	per 1,000	population	
All facilities	1,675	2,637	6,409	6,393	6,404	10.3	13.8	30.3	29.6	28.6
Inpatient services	1,296	1,566	1,791	1,817	1,802	8.0	8.2	8.5	8.4	8.1
General hospital psychiatric service————————————————————————————————————	266 819 123 88	519 805 125 116	566 599 165 214 247	572 574 184 218	529 1°	1.6 5.0 0.8 0.5	2.7 4.2 0.7 0.6	2.7 2.8 0.8 1.0	2.7 2.7 0.9 1.0	2.4 0.8
Outpatient services4	379	1,071	4,618	4,576	4,602	2.3	5.6	21.9	21.2	20.6
Federally-funded community mental health centersOther mental health facilities	 379	1,071	1,585 3,033	1,742 2,835	1,950 2,653	2.3	 5.6	7.5 14.4	8.1 13.1	8.7 11.9

¹Provisional data. 1979 data are not yet available for Veterans Administration neuropsychiatric hospital inpatient units, general hospital inpatient psychiatric units (Veterans Administration and non-Federal), and federally funded community mental health centers (CMHC's) inpatient and outpatient services; 1978 data are used for CMHC's, and 1977 data are used for Veterans Administration psychiatric inpatient settings and for separate psychiatric inpatient services of non-Federal general hospitals.

SOURCE: National Institute of Mental Health: Trends in patient care episodes in mental health facilities, 1955-1977. Statistical Note 154. Public Health Service, Rockville, Md., Sept. 1980; Unpublished data from the Division of Biometry and Epidemiology.

²Includes estimates of episodes of care in residential treatment centers for emotionally disturbed children.

³Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric inpatient settings.

⁴Excludes partial care episodes and outpatient episodes of Veterans Administration hospitals and clinics.

Table 50. Inpatient days of care in mental health facilities and average annual percent change, according to type of facility: United States, 1971, 1975, and 1979

		Average annual		
Type of facility	1971	1975	1979 ¹	percent change 1971-79
	Numb	er of inpatient of in thousands	lays	
All facilities ²	153,104	104,907	83,491	-7.3
Non-Federal psychiatric hospitals————————————————————————————————————	123,420 119,200 4,220 14,277 6,826	74,985 70,584 4,401 11,725 8,349	55,184 50,110 5,074 10,628 7,085	-9.6 -10.3 2.3 -4.8 0.6
children————————————————————————————————————	6,356 2,225	5,900 3,948	6,531 4,063	0.3 7.8

¹⁹⁷⁹ data are not yet available for Veterans Administration neuropsychiatric hospitals, general hospital inpatient psychiatric units (Veterans Administration and non-Federal), and federally funded community mental health centers (CMHC's); 1978 data are used for CMHC's, and 1977 data are used for Veterans Administration psychiatric services and non-Federal general hospital psychiatric inpatient units.

²Excludes inpatient days for multiservice mental health facilities not elsewhere classified which represent less than 1

SOURCE: National Institute of Mental Health: Unpublished data from the Division of Biometry and Epidemiology.

percent of all inpatient days in each year.

Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric inpatient settings.

Table 51. Persons employed in the health service industry, according to place of employment: United States, selected years 1970-81

(Data are based on household interviews of a sample of the civilian noninstitutionalized population)

	Year								
Place of employment	1970 ¹	1975	1977	1978	1979	1980	1981		
			Number of	persons in	thousands				
Total	4,246	5,865	6,330	6,706	6,885	7,226	7,507		
Offices of physicians	477	607	677	753	755	756	789		
Offices of dentists	222	327	321	360	385	407	415		
Offices of chiropractors ²	19	30	31	33	36	40	46		
Hospitals	2,690	3,394	3,645	3,781	3,843	3,947	4,095		
Convalescent institutions	509	884	949	1,009	1,035	1,185	1,216		
Offices of other health practitioners	42	60	75	83	. 84	['] 85	82		
Other health service sites	288	563	632	687	747	806	864		

NOTE: Totals exclude persons in health-related occupations who are working in nonhealth industries, as classified by the U.S. Bureau of the Census, such as pharmacists employed in drugstores, school nurses, and nurses working in private households.

SOURCES: U.S. Bureau of the Census: 1970 Census of Population, occupation by industry. Subject Reports. Final Report PC(2)-7C. Washington. U.S. Government Printing Office, Oct. 1972; U.S. Bureau of Labor Statistics: Employment and Earnings, March 1977, January 1979, January 1980, January 1981, and January 1982. Vol. 24, No. 3, Vol. 26, No. 1, Vol. 27, No. 1, Vol. 28, No. 1, and Vol. 29, No. 1. Sovernment Printing Office, Mar. 1977, Jan. 1979, 1980, Jan. 1981, and Jan. 1982; Unpublished data; American Chiropractic Association: Unpublished data.

¹April 1, derived from decennial census; all other data years are July 1 estimates.
²Data for 1977-81 are from the American Chiropractic Association; data for the preceding years are from the U.S. Bureau of Labor Statistics.

Table 52. Active physicians (M.D.'s and D.O.'s), according to type of physician, and number per 10,000 population: United States and outlying U.S. areas, selected 1950-80 estimates and 1985, 1990, and 2000 projections

(Data are based on reporting by physicians and medical schools)

		•		
Year	Total.	Doctors of medicine (M.D.)	Doctors of osteopathy (D.O.)	Active physicians per 10,000 population
		Number of physicians		
1950————————————————————————————————————	219,900 251,900 326,500 337,400 348,300 355,700 370,000 384,500 399,500 405,900 424,000 440,400 457,500	209,000 239,700 314,200 325,000 335,500 342,500 356,400 370,400 385,000 390,800 408,300 424,000 440,400	10,900 12,200 12,300 12,400 12,800 13,200 13,600 14,100 14,500 15,100 15,700 16,400 17,100	14.1 13.6 15.6 16.1 16.4 16.9 17.4 17.9 18.0 18.6 19.1
1985	523,900 591,200 704,700	502,000 563,300 665,700	21,900 27,900 39,000	22.5 24.3 27.1

NOTES: The population for selected years 1950-80 includes residents in the 50 States, District of Columbia, and civilians in Puerto Rico and other U.S. outlying areas; U.S. citizens in foreign countries; and the Armed Forces in the United States and abroad. For 1985 and 1990, the Series II projections of the total population from the U.S. Bureau of the Census are used. Estimation and projection methods used are from the Bureau of Health Professions. The numbers of M.D.'s differ from American Medical Association figures because a variant proportion of the physicians not classified by activity status and whose addresses are unknown is allocated into the totals.

SOURCES: Bureau of Health Professions: Third Report to the President and Congress on the Status of Health Professions Personnel in the United States. DHHS Pub. No. (HRA) 82-2. Health Resources Administration. Hyattsville, Md., Jan. 1982; Unpublished data.

Table 53. Physicians (M.D.'s), according to activity: United States, selected years 1970-80 (Data are based on reporting by physicians)

		Year									
Activity	1970	1975	1977	1978	1979	1980					
			Number of p	hysicians							
Doctors of medicine	328,020	388,626	416,645	432,434	449,327	462,276					
Professionally active physicians	304,926	335,608	359,515	371,343	389,157	409,992					
Non-Federal		309,410	340,603	352,390	371,788	393,407					
Patient care		285,345	312,872	322,835	338,328	358,470					
Office-based practice	187,637	211,776	229,208	237,071	246,946	269,001					
General practice1		45,863	44,548	44,649	46,220	47,265					
Internal medicine	22,841	28,070	31,474	33,485	34,944	40,276					
Pediatrics		12,559	14,025	14,602	15,412	17,204					
General surgery	17,975	19,613	20,648	20,279	21,150	22,262					
Obstetrics and gynecology	13,732	15,469	17,111	17,325	18,128	19,306					
Other specialty	72 ,4 71	90,202	101,402	106,731	111,092	122,688					
Hospital-based practice Residents ²	65,141	73,569	83,664	85,764	91,382	89,469					
Residents ²	45,514	53,150	58,517	56,866	60,964	59,127					
Full-time hospital staff		20,419	25,147	28,898	30,418	30,342					
Other professional activity3	26,077	24,065	27,731	29,555	33,460	34,937					
Federal		26,198	18,912	18,953	17,369	16,585					
Patient care	20,566	22,325	15,774	15,777	14,257	13,513					
Office-based practice	2,819	1,841	902	865	608	679					
Hospital-based practice	17,747	20,484	14,872	14,912	13,649	12,834					
Residents ²	- 5,173	4,089	3,527	3,297	2,793	2,323					
Full-time hospital staff	12,574	16,395	11,345	11,615	10,856	10,511					
Other professional activity3		3,873	3,138	3,176	3,112	3,072					
Inactive physicians		21,360	28,231	26,698	28,151	25,609					
Not classified4		25,790	17,953	25,102	23,059	20,285					
Unknown ⁵	3,204	5,868	10,946	9,291	8,960	6,390					

Includes general practice and family practice.

NOTE: Federal and non-Federal doctors of medicine (M.D.'s) in the 50 States and the District of Columbia are included.

SOURCES: Haug, J. N., Roback, G. A., and Martin, B. C.: Distribution of Physicians in the United States, 1970. Chicago. American Medical Association, 1971. (Copyright 1971: Used with the permission of the American Medical Association.); Goodman, L. J., and Mason, H. R.: Physician Distribution and Medical Licensure in the U.S., 1975. Chicago. American Medical Association, 1976. (Copyright 1976: Used with the permission of the American Medical Association.); Goodman, L. J.: Physician Distribution and Medical Licensure in the U.S., 1976. Chicago. American Medical Association, 1977. (Copyright 1977: Used with the permission of the American Medical Association.); Department of Statistical Analysis: Physician Distribution and Medical Licensure in the U.S., 1978. Chicago. American Medical Association, 1980. (Copyright 1980: Used with the permission of the American Medical Association.); Wunderman, L. E.: Physician Distribution and Medical Licensure in the U.S., 1979. Chicago. American Medical Association, 1981. (Copyright 1981: Used with the permission of the American Medical Association.); Bidese, C. M., and Danais, D. G.: Physician Characteristics and Distribution in the U.S. Chicago. American Medical Association, 1982. (Copyright 1982: Used with the permission of the American Medical Association.)

²Includes interns and residents, all years.

³Includes medical teaching, administration, research, and other.

⁴Information not available.

⁵Physicians with unknown address.

Table 54. Active health personnel and number per 100,000 population, according to occupation and geographic region:
United States, 1970 and 1980

(Data are based on reporting by health personnel)

	Number of	• • •	**	Geographic	region	
Year and occupation	active health personnel	United States	North- east	North Central	South	West
1970		Numb	er per 100,00	0 population 1		
Physicians ² M.D.'s ³ D.O.'s Dentists ² Optometrists Pharmacists ³ Podiatrists Registered nurses ⁴ Veterinarians	290,862 279,212 11,650 95,680 18,400 112,570 7,110 750,000 25,900	142.7 137.0 5.7 47.4 9.0 55.4 3.5 368.9 12.7	185.0 178.7 6.3 58.9 9.7 60.1 6.0 491.2 8.3	127.5 118.2 9.3 46.3 10.3 57.5 3.6 367.5	114.8 111.5 3.3 35.3 6.6 50.6 1.6 281.8 11.8	158.2 154.8 3.4 54.9 10.5 52.9 3.0 355.9
Physicians ² ————————————————————————————————————	422,310 405,800 16,510 121,240 22,330 142,780 8,880 1,164,000 36,000	191.4 183.9 7.5 54.9 10.1 64.7 4.0 520.1 16.3	233.6 224.9 8.7 65.2 10.2 60.8 6.3 620.3 10.8	175.0 162.5 12.5 53.1 11.2 67.7 3.9 547.4 19.9	163.7 159.4 4.3 44.4 8.0 65.0 2.5 423.8 16.0	212.3 208.0 4.3 63.7 12.3 64.6 4.1 529.7 18.5

¹Ratios for physicians (M.D.'s and D.O.'s) and dentists are based on civilian population; ratios for all other health occupations are based on resident population.

SOURCE: Division of Health Professions Analysis, Bureau of Health Professions: Supply and Characteristics of Selected Health Personnel. DHHS Pub. No. (HRA) 81-20. Health Resources Administration. Hyattsville, Md., June 1981.

²Excludes physicians (M.D.'s and D.O.'s) in Federal service; excludes dentists in military service.

³Excludes physicians (M.D.'s) and pharmacists in United States Possessions.

⁴Data for registerd nurses are as of January 1 for 1971 and 1981. ⁵Number for physicians (M.D.'s) is adjusted for 1980.

Table 55. Active non-Federal physicians (M.D.'s) per 10,000 civilian population, according to geographic region, primary specialty, and activity: United States, 1975 and 1980

(Data are based on reporting by physicians)

			Geographic region					
Year, specialty, and activity	United States	North- east	North Central	South	West			
1975	Numbe	r of physician	s per 10,000 ci	vilian popula	ation			
Total ¹	15.9	20.2	13.8	13.3	17.8			
Patient care	13.5	16.9	11.8	11.4	15.4			
Office based	10.0	11.4	8.7	8.8	12.5			
Transfer Indiana	3.5	5.6	3.1	2.6	2.9			
Other professional activities ²	1.1	1.7	0.9	0.9	1.2			
Primary care ³	5.7	7.0	5.2	4.7	6.3			
Patient care	= 3	<i>e</i> =	4.9	4.5	6.0			
Office based	5.3	6.5			5.0			
Office based	4.1	4.5	3.8	3.6				
Hospital based	1.2	1.9	1.1	0.9	1.0			
Other professional activities ²	0.3	0.5	0.3	0.3	0.3			
Other medical specialties4	0.8	1.1	0.6	0.7	1.0			
Patient care	0.7	1.0	0.5	0.6	0.9			
Office hased-	0.6	0.8	0.5	0.5	0.8			
Hospital hased	0.1	0.1	0.1	0.1	0.1			
Hospital basedOther professional activities2	0.1	0.1	0.1	0.1	0.1			
Surgical specialties ⁵	4.2	5.1	3.6	3.8	4.6			
Patient care	4.1	4.9	3.5	3.7	4.5			
Office based	3.2	3.5	2.7	3.0	3.8			
Mocnital hased	0.9	1.4	0.9	0.8	0.7			
Other professional activities2	0.1	0.2	0.1	0.1	0.1			
1980								
Total	18.8	23.0	16.2	16.7	21.1			
Patient care	16,3	19.3	14.2	14.5	18.6			
Office based	12,2	13.5	10.5	11.2	14.9			
Hospital based	4.1	5.8	3.7	3.3	3.7			
Other professional activities ²	1.6	2.3	1.2	1.4	1.6			
Primary care ³	6.9	8.2	6.2	6.1	7.7			
-								
Patient care	6.4	7.4	5.8	5.6	7.2			
Office based	4.8	5.2	4.3	4.3	5.7			
Hospital based	1.6	2.2	1.5	1.3	1.5			
Other professional activities ²	0.5	0.8	0.4	0.5	0.5			
Other medical specialties4	1,1	1.5	0.9	1.0	1.3			
Patient care	0.9	1.2	0.7	0.8	1.1			
Office based	0.8	1.0	0.6	0.7	1.0			
Hospital based	0.1	0.2	0.1	0.1	0.1			
Other professional activities ²	0.2	0.3	0.2	0.2	0.2			

See footnotes at end of table.

Table 55. Active non-Federal physicians (M.D.'s) per 10,000 civilian population, according to geographic region, primary specialty, and activity: United States, 1975 and 1980-Continued

(Data are based on reporting by physicians)

			Geographic region					
Year, specialty, and activity	United States	North- east	North Central	South	West			
	Numbe	r of physician	s per 10,000 ci	vilian popula	ation			
Surgical specialties ⁵	4.8	5.6	4.1	4.6	5.3			
Patient care————————————————————————————————————	4.7 3.7 1.0 0.2	5.4 4.0 1.3 0.2	4.0 3.1 0.9 0.1	4.5 3.6 0.9 0.2	5.1 4.3 0.8 0.2			

Includes active non-Federal doctors of medicine (M.D.'s) in all other specialties not shown separately and those not classified.

2Includes medical teaching, administration, research, and other professional activities.

3Includes general practice, internal medicine, and pediatrics.

4 Andrew Medical Control of the Co

SOURCES: Goodman, L. J., and Mason, H. R.: <u>Physician Distribution and Medical Licensure in the U.S., 1975</u>. Chicago. American Medical Association, 1976. (Copyright 1976: Used with the permission of the American Medical Association.); Bidese, C. M., and Danais, D. G.: Physician Characteristics and Distribution in the U.S. Chicago. American Medical Association, 1982. (Copyright 1982: Used with the permission of the American Medical Association.); U.S. Bureau of the Census: Population estimates and projections. Current Population Reports. Series P-25, No. 727. Washington. U.S. Government Printing Office, July 1978 and unpublished data.

⁴Includes dermatology, pediatric allergy, pediatric cardiology, gastroenterology, pulmonary diseases, allergy, and

cardiovascular diseases.

⁵Includes general and neurological surgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otolaryngology, plastic surgery, colon and rectal surgery, thoracic surgery, and urology.

Table 56. Graduates of health professions schools and number of schools, according to profession: United States, selected 1950-79 estimates and 1980, 1990, and 2000 projections

(Data are based on reporting by health professions schools)

			Profession		
Year	Medicine	Osteopathy	Dentistry	Optometry	Pharmacy
		Nu	mber of graduates		
1950	5,553 7,081 8,367 12,714 14,393 14,966	373 427 432 702 963 1,004	2,565 3,253 3,749 4,969 5,324 5,424	961 364 445 806 980 1,051	3,497 4,758 6,712 7,785 6,856
1980	15,346 16,695 16,523	1,029 1,502 1,486	5,216 5,270 5,120 fumber of schools	1,077 1,077 1,077	7,070 5,240 5,110
1950	79 86 103 114 122 125	6 6 7 9 12 14	42 47 53 59 59 60	10 10 11 12 12 13	76 74 73 72 72
1980	124 126 126	14 14 14	60 60 60	15 15 15	72 72 72

SOURCES: Bureau of Health Manpower: A Report to the President and Congress on the Status of Health Professions Personnel in the United States. DHEW Pub. No. (HRA) 78-93. Health Resources Administration. Hyattsville, Md., Aug. 1978; Unpublished data from the Division of Health Professions Analysis, Bureau of Health Professions.

Table 57. Short-stay hospitals, beds, and occupancy rates, according to type of ownership: United States, selected years 1960-80

(Data are based on reporting by a census of hospitals)

Type of	Year									
ownership	1960	1970	1975	1976	1977	1978	1979	1980		
Hospitals			·	N	umber					
All ownerships	5,768	6,193	6,310	6,288	6,307	6,266	6,247	6,229		
Federal Non-Federal Nonprofit Proprietary State-local government	361 5,407 3,291 856 1,260	334 5,859 3,386 769 1,704	331 5,979 3,364 775 1,840	332 5,956 3,368 752 1,836	334 5,973 3,371 751 1,851	331 5,935 3,360 732 1,843	324 5,923 3,350 727 1,846	5,904 3,339 730		
All ownerships	735,451	935.724	1,036,025	1.047.912	1.059.903	1,067,566	1.073.671	1.080.164		
Federal	96,394 639,057 445,753	87,492 848,232 591,937 52,739 203,556	89,049 946,976 658,948 73,495 214,533	86,737 961,175 670,939 76,416 213,820	86,037 973,866 679,501 80,322 214,043	87,907 979,659 683,856 81,046	85,984 987,687 690,278 83,338	88,144 992,020 692,929 87,033		
Occupancy rate				Percent of	beds occupi	ed				
All ownerships	7 5.7	77.9	75.0	74.5	73.9	73.7	74.0	75.6		
Federal	82.5 74.7 76.6 65.4 71.6	77.5 78.0 80.1 72.2 73.2	77.6 74.8 77.4 65.9 69.7	76.4 74.4 77.1 64.8 69.2	77.3 73.6 76.3 64.6 68.3	76.3 73.5 76.1 63.8 68.7	76.3 73.8 76.5 63.9 69.1	77.8 75.4 78.2 65.2 70.7		

¹ Excludes psychiatric and tuberculosis and other respiratory disease hospitals.

SOURCES: American Hospital Association: Hospitals. JAHA 35(15):396-401 and 45(15):463-467, Aug. 1961 and Aug. 1971; Hospital Statistics, 1976-81 Editions. Chicago, 1976-81. (Copyrights 1961, 1971, 1976-81: Used with the permission of the American Hospital Association).

Table 58. Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940-80

Geographic division				Year					Perio	xd	,
and State	1940 ¹	1950 ¹	1960 ²	1970	1975	1979	1980	1940-60 ^{1,2}	1960-70 ²	1970-75	1975–80
	Com	munity h	ospital b	oeds per	1,000 p	opulati	on ³	Average	annual p	ercent c	hange
United States	3.2	3.3	3.6	4.3	4.6	4.5	4.5	0.6	1.8	1.4	-0.4
New England	4.4	4.2	3.9	4.1	4.2	4.1	4.1	-0.6	0.5	0.5	-0.5
Maine	3.0	3.2	3.4	4.7	4.7	4.7	4.7	0.6	3.3	_	_
New Hampshire	4.2	4.2	4.4	4.0	4.2	3.9	3.9	0.2	-0.9	1.0	-1.5
Vermont	3.3	4.0	4.5	4.5	4.8	4.5	4.4	1.6	_	1.3	-1.7
Massachusetts	5.1	4.8	4.2	4.4	4.6	4.4	4.4	-1.0	0.5	0.9	-0.9
Rhode Island	3.9	3.8	3.7	4.0	3.8	3.7	3.8	-0.3	0.8	-1.0	_
Connecticut	3.7	3.6	3.4	3.4	3.5	3.5	3.5	-0.4	_	0.6	_
Middle Atlantic	3.9	3.8	4.0	4.4	4.6	4.6	4.6	0.1	1.0	0.9	-
New York	4.3	4.1	4.3	4.6	4.7	4.6	4.5	-	0.7	0.4	-0.9
New Jersey	3.5	3.2	3.1	3.6	4.0	4.1	4.2	-0.6	1.5	2.1	1.0
Pennsylvania	3.5	3.8	4.1	4.7	4.7	4.8	4.8	0.8	1.4	-	0.4
East North Central	3.2	3.2	3.6	4.4	4.7	4.7	4.7	0.6	2.0	1.3	-
Ohio	2.7	2.9	3.4	4.2	4.6	4.7	4.7	1.2	2.1	1.8	0.4
Indiana							4.5	1.5	2.6	1.9	0.5
Illinois	2.3	2.6	3.1	4.0	4.4	4.4					
Michigan	3.4	3.6	4.0	4.7	4.9	5.0	5.1	0.8	1.6	0.8	0.8
	4.0	3.3	3.3	4.3 5.2	4.5	4.4	4.4	-1.0 1.2	2.7 1.9	0.9 -0.4	-0.4 -0.8
Wisconsin	3.4	3.7	4.3	3.2	5.1	4.9	4.9	1.2	1.9	-0.4	-0.0
West North Central	3.1	3.7	4.3	5.7	5.8	5.9	5.8	1.6	2.9	0.3	-
Minnesota	3.9	4.4	4.8	6.1	6.0	5.8	5.7	1.0	2.4	-0.3	-1.0
Iowa	2.7	3.2	3.9	5.6	6.0	5.7	5.7	1.9	3.7	1.4	-1.0
Missouri	2.9	3.3	3.9	5.1	5.5	5.7	5.7	1.5	2.7	1.5	0.7
North Dakota	3.5	4.3	5.2	6.8	6.7	7.2	7.4	2.0	2.7	-0.3	2.0
South Dakota	2.8	4.4	4.5	5.6	5.5	5.4	5.5	2.4	2.2	-0.4	_
Nebraska	3.4	4.2	4.4	6.2	6.1	6.2	6.0	1.3	3.5	-0.3	-0.3
Kansas	2.8	3.4	4.2	5.4	5.7	5.8	5.8	2.0	2.5	1.1	0.3
South Atlantic	2.5	2.8	3.3	4.0	4.3	4.5	4.5	1.4	1.9	1.5	0.9
500011102011020			•••								
Delaware	4.4	3.9	3.7	3.7	3.5	3.6	3.6	-0.9	_	-1.1	0.6
Maryland	3.9	3.6	3.3	3.1	3.2	3.5	3.6	-0.8	-0.6	0.6	2.4
District of Columbia	5.5	5.5	5.9	7.4	7.1	7.1	7.3	0.4	2.3	-0.8	0.6
Virginia	2.2	2.5	3.0	3.7	4.1	4.1	4.1	1.6	2.1	2.1	_
West Virginia	2.7	3.1	4.1	5.4	5.8	5.5	5.5	2.1	2.8	1.4	-1.1
North Carolina	2.2	2.6	3.4	3.8	4.0	4.2	4.2	2.2	1.1	1.0	1.0
South Carolina	1.8	2.4	2.9	3.7	3.9	3.8	3.9	2.4	2.5	1.1	_
Georgia	1.7	2.0	2.8	3.8	4.4	4.6	4.6	2.5	3.1	3.0	0.9
Florida	2.8	2.9	3.1	4.4	4.9	5.2	5.1	0.5	3.6	2.2	0.8
East South Central	1.7	2.1	3.0	4.4	4.9	5.1	5.1	2.9	3.9	2.2	0.8
Kentucky	1.8	2.2	3.0	4.0	4.3	4.4	4.5	2.6	2.9	1.5	0.9
Tennessee	1.9	2.3	3.4	4.7	5.4	5.6	5.5	3.0	3.3	2.8	0.4
Alabama	1.5	2.0	2.8	4.3	4.9	5.1	5.1	3.2	4.4	2.6	0.8
Mississippi	1.4	1.7	2.9	4.4	4.9	5.2	5.3	3.7	4.3	2.2	1.6
LITOUTORIPHIT	1.4	⊥•/	4.9	4.4	4.7	5.4	5.3	3.1	4.3	4.4	Τ.υ

See footnotes at end of table.

Table 58. Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940-80--Continued

Geographic division				Year				Period			
and State	1940¹	1950 ¹	1960 ²	1970	1975	1979	1980	1940-60 ^{1,2}	1960-70 ²	1970-75	1975-80
	Com	munity h	ospital b	eds per	1,000 p	opulati	on ³	Average	annual p	ercent c	hange
West South Central	2.1	2.7	3.3	4.3	4.7	4.7	4.7	2.3	2.7	1.8	-
Arkansas	1.4	1.6	2.9	4.2	4.6	4.9	5.0	3.7	3.8	1.8	1.7
Louisiana	3.1	3.8	3.9	4.2	4.7	4.8	4.8	1.2	0.7	2.3	0.4
Oklahoma	1.9	2.5	3.2	4.5	4.6	4.6	4.6	2.6	3.5	0.4	_
Texas	2.0	2.7	3.3	4.3	4.7	4.7	4.7	2.5	2.7	1.8	-
Mountain	3.6	3.8	3.5	4.3	4.0	3.9	3.8	-0.1	2.1	-1.4	-1.0
ontana	4.9	5.3	5.1	5.8	5.2	5.8	5.9	0.2	1.3	-2.2	2.6
Idaho	2.6	3.4	3.2	4.0	3.9	3.7	3.7	1.0	2.3	-0.5	-1.0
Wyoming	3.5	3.9	4.6	5.5	4.5	3.7	3.6	1.4	1.8	-3.9	-4.4
Colorado	3.9	4.2	3.8	4.6	4.4	4.3	4.2	-0.1	1.9	-0.9	-0.9
New Mexico	2.7	2.2	2.9	3.5	3.4	3.2	3.1	0.4	1.9	-0.6	-1.8
Arizona	3.4	4.0	3.0	4.1	3.8	3.7	3.6	-0.6	3.2	-1.5	-1.1
Jtah	3.2	2.9	2.8	3.6	3.2	3.0	3.1	-0.7	2.5	-2.3	-0.6
Vevađa	5.0	4.4	3.9	4.2	4.3	4.3	4.2	-1.2	0.7	0.5	-0.5
Pacific	4.1	3.2	3.1	3.7	3.9	3.6	3.5	-1.4	1.8	1.1	-2.1
Washington	3.4	3.6	3.3	3.5	3.4	3.1	3.1	-0.1	0.6	-0.6	-1.8
Oregon	3.5	3.1	3.5	4.0	3.9	3.6	3.5	_	1.3	-0.5	-2.1
California	4.4	3.3	3.0	3.8	4.0	3.7	3.6	-1.9	2.4	1.0	-2.1
Alaska	•••	•••	2.4	2.3	2.2	2.5	2.7		-0.4	-0.9	4.2
Hawaii	•••		3.7	3.4	3.3	3.1	3.1	•••	-0.8	-0.6	-1.2

¹⁹⁴⁰ and 1950 data are estimated based on published figures.

NOTE: Community hospitals include all non-Federal short-stay hospitals classified by the American Hospital Association according to one of the following services: general medical and surgical; obstetrics and gynecology; eye, ear, nose, and throat; rehabilitation; orthopedic; other specialty; children's general; children's eye, ear, nose, and throat; children's rehabilitation; children's orthopedic; and children's other specialty.

SOURCES: American Medical Association: Hospital service in the United States. JAMA 116(11): 1055-1144, 1941, and 146(2): 109-184, 1951. (Copyright 1941 and 1951: Used with the permission of the American Medical Association.); American Hospital Association: Hospitals. JAMA 35(15): 383-430, Aug. 1, 1961. (Copyright 1961: Used with the permission of the American Hospital Association.); Division of Health Care Statistics, National Center for Health Statistics: Data from the National Master Facility Inventory; U.S. Bureau of the Census: Current Population Reports. Series P-25, Nos. 72, 304, 460, 642, 868, and 876. Washington. U.S. Government Printing Office, 1953, 1965, 1971, 1976, 1979, and 1980; Unpublished data.

²1960 includes hospital units of institutions.

³Civilian population.

Table 59. Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940-80

Geographic division			Ye	ar				Perio	od	
and State	1940¹	1960 ²	1970	1975	1979	1980	1940-60 1,2	1960-70 ²	1970-75	1975–80
		Per	cent of b	eds occup	ied		Averag	e annual p	percent c	hange
United States	69.9	74.7	77.3	74.2	73.6	75.2	0.3	0.3	-0.8	0.3
New England	72.5	75.2	79.7	77.6	79.1	80.1	0.2	0.6	-0.5	0.6
Maine	72.4	73.2	73.0	71.1	74.2	74.5	0.1	-0.0	-0.5	0.9
New Hampshire	65.3	66.5	73.4	71.4	71.2	73.2	0.1	1.0	-0.6	0.5
Vermont	68.8	68.5	76.3	70.7	72.3	73.7	-0.0	1.1	-1.5	0.8
Massachusetts	71.8	75.8	80.3	79.1	80.8	81.7	0.3	0.6	-0.3	0.6
Rhode Island	77.7	75.7	82.9	82.2	84.3	85.9	-0.1	0.9	-0.2	0.9
Connecticut	75.9	78.2	82.6	78.6	79.7	80.4	0.1	0.5	-1.0	0.5
	75.5	78.1	82.4	81.4	82.0	83.2	0.2	0.5	-0.2	0.4
Middle Atlantic										
New York	78.9	79.4	82.9	84.2	85.5	85.9	0.0	0.4	0.3	0.4
New Jersey	72.4	78.4	82.5	81.1	81.4	82.8	0.4	0.5	-0.3	0.4
Pennsylvania	71.3	76.0	81.5	77.2	77.4	79.5	0.3	0.7	-1.1	0.6
East North Central	71.0	78.4	79.5	77.2	75.7	76.9	0.5	0.1	-0.6	-0.1
Ohio	72.1	81.3	81.8	80.6	77.4	79.2	0.6	0.1	-0.3	-0.3
Indiana	68.5	79.6	80.3	76.4	76.7	77.6	0.8	0.1	-1.0	0.3
Illinois	73.1	76.0	79.3	75.7	74.6	74.9	0.2	0.4	-0.9	-0.2
						78.2	0.6	0.0	-0.5	-0.2
Michigan	71.5 65.2	80.5 73.9	80.6 73.2	78.8 71.5	77.1 71.5	73.6	0.6	-0.1	-0.5 -0.5	0.6
West North Central	65.7	71.8	73.6	70.6	69.2	71.2	0.4	0.2	-0.8	0.2
Minnesota	71.0	72.3	73.9	70.7	71.1	73.7	0.1	0.2	-0.9	0.8
Iowa	63.6	72.6	71.9	67.4	66.7	68.7	0.7	-0.1	-1.3	0.4
Missouri	68.6	75.8	79.3	75.9	73.4	75.1	0.5	0.5	-0.9	-0.2
North Dakota	61.9	71.3	67.1	69.1	65.9	68.6	0.7	-0.6	0.6	-0.1
South Dakota	59.1	66.0	66.3	63.8	58.0	60.6	0.6	0.0	-0.8	-1.0
					65.0	67.4	0.5	0.6	-1.2	0.5
Nebraska	59.0	65.6	69.9	65.8			0.7	0.3	-0.4	-0.3
Kansas	60.4	69.1	71.4	69.9	67.8	68.8	0.7	0.3	-0.4	-0.5
South Atlantic	66.7	74.8	77.9	73.9	73.4	75.5	0.6	0.4	-1.0	0.4
Delaware	59.2	70.2	78.8	81.0	81.7	81.8	0.9	1.2	0.6	0.2
Maryland	74.6	73.9	79.3	79.3	80.9	84.0	-0.0	0.7	_	1.2
District of Columbia	76.2	80.8	77.7	78.9	78.5	83.0	0.3	-0.4	0.3	1.0
Virginia	70.0	78.0	81.1	77.4	75.9	77.8	0.5	0.4	-0.9	0.1
	62.1	74.5	79.3	75.3	74.9	75.6	0.9	0.6	-1.0	0.1
West Virginia										
North Carolina	64.6	73.9	78.5	77.4	75.8	77.8	0.7	0.6	-0.3	0.1
South Carolina	69.1	76.9	76.4	74.2	75.3	77.0	0.5	-0.1	-0.6	0.7
Georgia	62.7	71.7	76.5	68.2	68.4	70.4	0.7	0.7	-2.3	0.6
Florida	57.5	73.9	76.2	70.2	69.4	71.7	1.3	0.3	-1.6	0.4
East South Central	62.6	71.8	78.2	74.0	73.8	74.6	0.7	0.9	-1.1	0.2
Kentucky	61.6	73.4	79.6	77.3	76.7	77.4	0.9	0.8	-0.6	0.0
Tennessee	65.5	75.9	78.2	74.4	74.1	75.9	0.7	0.3	-1.0	0.4
Alabama	59.0	70.8	80.0	72.6	72.8	73.3	0.9	1.2	-1.9	0.2
Mississippi	63.8	62.8	73.6	71.4	71.5	70.5	-0.1	1.6	-0.6	-0.3
										

See footnotes at end of table.

Table 59. Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940-80--Continued

Geographic division			Ye	ear			Period			
and State	1940 ¹	1960 ²	1970	1975	1979	1980	1940-60 1,2	1960-70 ²	1970-75	1975-80
		Per	cent of b	eds occup	ied		Averag	e annual p	ercent c	hange
West South Central	62.5	68.7	73.2	69.1	67.6	69.7	0.5	0.6	-1.1	0.2
Arkansas	55.6	70.0	74.4	70.3	68.6	69.6	1.2	0.6	-1.1	-0.2
Louisiana	75.0	67.9	73.6	68.8	68.4	69.7	-0.5	0.8	-1.3	0.3
Oklahoma	54.5	71.0	72.5	69.3	66.7	68.1	1.3	0.2	-0.9	-0.3
Texas	59.6	68.2	73.0	69.0	67.4	70.1	0.7	0.7	-1.1	0.3
Mountain	60.9	69.9	71.2	68.4	66.7	69.6	0.7	0.2	-0.8	0.3
Montana	62.8	60.3	65.9	61.4	62.5	66.1	-0.2	0.9	-1.4	1.5
Idaho	65.4	55.9	66.1	68.2	65.0	65.2	-0.8	1.7	0.6	-0.9
Wyoming	47.5	61.1	63.1	55.9	54.2	57.2	1.3	0.3	-2.4	0.5
Colorado	62.1	80.6	74.0	69.1	66.0	71.6	1.3	-0.9	-1.4	0.7
New Mexico	47.8	65.1	69.8	63.6	64.3	66.2	1.6	0.7	-1.8	0.8
Arizona	61.2	74.2	73.3	73.5	73.6	74.2	1.0	-0.1	0.1	0.2
Utah	65.8	70.0	73.7	73.6	69.4	70.0	0.3	0.5	-0.0	-1.0
Nevada	67.9	70.7	72.7	67.2	63.9	68.8	0.2	0.3	-1.6	0.5
Pacific	69.7	71.4	71.0	66.2	66.5	69.0	0.1	-0.1	-1.4	0.8
Washington	67.5	63.4	69.7	67.7	68.4	71.7	-0.3	1.0	-0.6	1.2
Oregon	71.2	65.8	69.3	66.6	65.8	69.3	-0.4	0.5	-0.8	0.8
California	69.9	74.3	71.3	66.0	66.1	68.5	0.3	-0.4	-0.6 -1.5	0.7
Alaska	•••	53.8	59.1	63.3	59.7	58.3	•••	0.9	1.4	-1.6
Hawaii	•••	61.5	75.7	68.1	75.2	74.7	•••	2.1	-2.1	1.9

¹⁹⁴⁰ data are estimated based on published figures.

NOTE: Community hospitals include all non-Federal short-stay hospitals classified by the American Hospital Association according to one of the following services: general medical and surgical; obstetrics and gynecology; eye, ear, nose, and throat; rehabilitation; orthopedic; other specialty; children's general; children's eye, ear, nose, and throat; children's rehabilitation; children's orthopedic; and children's other specialty.

SOURCES: American Medical Association: Hospital service in the United States. <u>JAMA</u> 116(11): 1055-1144, 1941. (Copyright 1941: Used with the permission of the American Medical Association.); American Hospital Association: Hospitals. <u>JAHA</u> 35(15): 383-430, Aug. 1, 1961. (Copyright 1961: Used with the permission of the American Hospital Association.); Division of Health Care Statistics, National Center for Health Statistics: Data from the National Master Facility Inventory.

²1960 includes hospital units of institutions.

Table 60. Full-time equivalent employees per 100 average daily patients in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1960-80

Geographic division			Year			Period			
and State	1960 ¹	1970	1975	1979	1980	1960-70 ¹	1970-75	1975–80	
	Number	of employees	per 100 a	average đaily	patients	Average a	nnual perce	nt change	
United States	226	302	349	388	394	2.9	2.9	2.5	
New England	249	351	412	441	456	3.5	3.3	2.1	
Maine	227	289	359	404	409	2.4	4.4	2.6	
New Hampshire	240	310	347	399	400	2.6	2.3	2.9	
Vermont	227	318	346	364	348	3.4	1.7	0.1	
Massachusetts	252	365	436	458	488	3.8	3.6	2.3	
Rhode Island	270	383	433	461	454	3.6	2.5	1.0	
Connecticut	247	347	397	434	440	3.5	2.7	2.1	
Middle Atlantic	225	311	352	377	383	3.3	2.5	1.7	
New York	233	336	375	387	396	3.7	2.2	1.1	
New Jersey	225	278	308	333	332	2.1	2.1	1.5	
Pennsylvania	214	287	340	387	390	3.0	3.4	2.8	
East North Central	226	299	343	392	396	2.8	2.8	2.9	
Ohio	232	302	334	387	392	2.7	2.0	3.3	
Indiana	216	280	320	363	374	2.6	2.7	3.2	
Illinois	226	301	357	408	407	2.9	3.5	2.7	
Michigan	239	313	364	412	417	2.7	3.1	2.8	
Wisconsin	199	277	315	358	367	3.4	2.6	3.1	
West North Central	212	273	305	346	357	2.6	2.2	3.2	
Minnesota	220	273	296	328	347	2.2	1.6	3.2	
Iowa	208	258	293	346	349	2.2	2.6	3.6	
Missouri	217	289	326	370	385	2.9	2.4	3.4	
North Dakota	177	254	273	298	295	3.7	1.5	1.6	
South Dakota	188	247	294	339	352	2.8	3.5	3.7	
Nebraska	220	276	298	328	326	2.3	1.5	1.8	
Kansas	210	270	313	358	368	2.5	3.0	3.3	
South Atlantic	217	295	343	376	379	3.1	3.1	2.0	
Delaware	243	328	390	403	405	3.0	3.5	0.8	
Maryland	237	354	391	400	403	4.1	2.0	0.6	
District of Columbia	240	363	443	493	483	4.2	4.1	1.7	
Virginia	193	289	323	360	369	4.1	2.2	2.7	
West Virginia	198	255	298	339	351	2.6	3.2	3.3	
North Carolina	196	233 277	319	359	363	3.5	2.9	2.6	
South Carolina	185	257	302	352	356	3.3	3.3	3.3	
Georgia	233	294	364	397	396	2.4	3.3 4.4	1.7	
Florida	233 245	294 295	364 346	397 376	396 375	1.9	3.2	1.6	
East South Central	227	275	306	336	348	1.9	2.2	2.6	
Kentucky	229	276	202	224	າາາ	1.0	י ו	2.5	
Tennessee		276	292	324	332	1.9	1.1	2.6	
Tennessee	231	284	315	343	359	2.1	2.1	2.6	
	233	266	308	343	357	1.3	3.0	3.0	
Mississippi	207	270	300	328	334	2.7	2.1	2.2	

See footnote at end of table.

Table 60. Full-time equivalent employees per 100 average daily patients in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1960-80--Continued

		Year		Period			
1960 ¹	1970	1975	1979	1980	1960-70	1970-75	1975-80
Number o	of employees	per 100 ave	rage đaily p	patients	Average a	nnual perce	nt change
225	297	346	379	384	2.8	3.1	2.1
209	274	318	349	355	2.7	3.0	2.2
218	292	354	393				2.1
					- • -		2.4
232	304	346	376	383	2.7	2.6	2.1
226	299	364	410	413	2.8	4.0	2.6
216	247	301	300	302	1.4	4.0	0.1
255	281	321	364	374			3.1
217	251	344					5.3
221	306						1.3
228							2.0
							3.6
							3.5
224	284	344	431	427	2.4	3.9	4.4
243	327	401	468	467	3.0	4.2	3.1
263	313	382	433	428	1.8	4.1	2.3
							1.5
							3.4
							3.4
							2.4
	Number of 225 - 209 - 218 - 218 - 218 - 232 - 226 - 216 - 255 - 217 - 221 - 228 - 222 - 243 - 224 - 243 - 224 - 243 - 243 - 263 - 232 - 241 - 220	Number of employees - 225	1960 1 1970 1975 Number of employees per 100 ave 225 297 346 209 274 318 218 292 354 218 296 359 232 304 346 226 299 364 2216 247 301 2255 281 321 217 251 344 221 306 373 228 314 389 222 327 381 221 304 388 224 284 344 243 327 401 263 313 382 224 384 241 334 407 220 301 385	1960 1 1970 1975 1979 Number of employees per 100 average daily per 225 297 346 379 209 274 318 349 218 292 354 393 218 296 359 401 232 304 346 376 226 299 364 410 216 247 301 300 225 281 321 364 217 251 344 434 221 306 373 417 228 314 389 442 221 307 381 426 222 327 381 426 224 384 344 431 224 284 344 431 224 284 344 431 224 387 401 468 263 313 382 433 224 387 433 224 384 344 477 480 226 397 480 227 381 228 314 389 442 224 384 344 431	Number of employees per 100 average daily patients - 225	1960	1960

¹⁹⁶⁰ includes hospital units of institutions, but excludes students, interns, and residents.

NOTE: Community hospitals include all non-Federal short-stay hospitals classified by the American Hospital Association according to one of the following services: general medical and surgical; obstetrics and gynecology; eye, ear, nose, and throat; rehabilitation; orthopedic; other specialty; children's general; children's eye, ear, nose, and throat; children's rehabilitation; children's orthopedic; and children's other specialty.

SOURCES: American Hospital Association: Hospitals. <u>JAHA</u> 35(15): 383-430, Aug. 1, 1961. (Copyright 1961: Used with the permission of the American Hospital Association.); Division of Health Care Statistics, National Center for Health Statistics: Data from the National Master Facility Inventory.

Table 61. Long-term hospitals, beds, and occupancy rates, according to type of hospital and ownership: United States, selected years 1970-80

(Data are based on reporting by a census of hospitals)

Type of hospital				Year			
and ownership	1970	1975	1976	1977	1978	1979	1980
Hospitals				Number			
General	75	44	37	36	24	22	17
FederalNon-Federal	38 37	23 21	21 16	15 21	12 12	11 11	9
Psychiatric	459	419	394	393	375	380	381
Federal	33	26	25	24	24	24	23
Nonprofit Proprietary	56	45	43	47	47	46	47
State-local government	39 331	51 297	50 276	51 271	54 250	57 253	57 254
Tuberculosis and other							
respiratory diseases	103	34	19	17	13	11	10
All other	200	196	183	171	160	156	150
Federal	1	2	2	3	3	2	1
Nonprofit	110	94	84	78	73	68	66
ProprietaryState-local government	2 87	9	9	9	9	10	11
•	87	91	88	81	75	76	72
Beds							
General	42,569	17,329	18,664	15,166	11,465	9,710	8,253
Federal	31,403	14,406	16,146	11,869	9,305	8,050	7,205
Non-Federal	11,166	2,923	2,518	3,297	2,160	1,660	1,048
Psychiatric	551,847	344,257	301,374	270,701	237,234	232,344	218,400
Federal	41,500	27,523	25,069	23,725	23,158	22,290	20,871
NonprofitProprietary	8,892	5,366	5,291	6,229	6,274	6,951	6,645
State-local government	3,399 498,056	4,821 306,547	4,725 266,289	4,667 236,080	5,162 202,640	5,837 197,266	5,877 185,007
Tuberculosis and other							
respiratory diseases	19,937	5,699	3,447	3,146	2,641	2,084	1,500
All other	49,152	49,268	47,469	43,372	40,763	39,702	37,911
Federal	357	968	1,022	1,550	1,489	1,024	357
Nonprofit Proprietary	12,638	12,733	11,807	10,714	10,120	9,864	10,038
State-local government	101 36,056	879 34 , 688	1,023 33,617	1,008 30,100	986 28,168	1,185 27,629	1,356 26,160
Occupancy rate			Percent	t of beds occ	upied		·
General	79.2	84.4	83.8	82.5	83.1	81.7	83.9
Federal	80.4	85.2	83.8	83.1	82.8	82.0	84.6
Non-Federal	75.8	80.4	84.0	80.1	84.4	80.5	79.0
Psychiatric	84.9	81.3	80.1	81.6	81.7	83.7	85.9
Federal	83.4	88.3	86.2	86.4	85.7	84.8	87.9
Nonprofit Proprietary	85.2	84.8	83.5	77.4	93.7	86.7	87.2
State-local government	78.4 85.0	74.1 80.8	74.6 79.5	76.6 81.3	75.8 81.0	76.8 83.7	76.3 86.0
Je 1 2012	0310	00.0	73.3	02.5	01.0	05.7	00.0
Tuberculosis and other respiratory diseases	61.9	57.6	57.8	59.9	59.8	61.9	66.4
All otherFederal	83.3	82.3	82.5	84.4	83.3	85.8	85.9
Nonprofit	73.4 82.8	86.3 83.3	77.9 83.1	76.5	65.0	65.2	65.3
Proprietary	87 . 1	86.0	83.1 78.6	86.3 78.7	86.4 80.8	87.7 80.8	87.3 86.5
State-local government	83.6	81.7	82.6	84.3	83.2	86.1	85.6

SOURCES: American Hospital Association: Hospitals. JAHA 45(15):463-467, Aug. 1971; Hospital Statistics, 1976-81 Editions. Chicago, 1976-81. (Copyrights 1971, 1976-81: Used with the permission of the American Hospital Association).

Table 62. Nursing homes, beds, and bed rate, according to geographic division and State: United States, 1976 and 1980

New England				Nursing :	homes		
United States		Nun	ber	Ве	eds	Bed 1	rate ²
New England		1976 ¹	1980	1976 ¹	1980	1976 ¹	1980
Maine 121 139 7,027 8,586 54,9 63,6 New Hampshire 68 70 5,633 6,225 61,9 63,5 Vermont 53 55 3,477 3,603 65,26 64,3 Massachusetts 645 620 47,169 51,335 69.5 72,2 Rhode Island 85 93 6,766 8,360 88.3 86.0 Comecticut 241 3205 22,117 317,732 66.8 349.8 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47,3 New York 708 669 97,489 101,007 47,3 47,8 New Jersey 313 320 31,147 34,763 39.5 41,2 Permsylvania 546 530 59,799 74,693 41,8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Indiana	United States	14,129	14,316	1,295,067	1,416,757	56.4	57.5
New Bampshire 68 70 5,633 6,225 61.9 63.5 63. Massachusetts 645 620 47,169 51,335 69.5 72.2 Massachusetts 645 620 47,169 51,335 69.5 72.2 Massachusetts 7241 3205 22,117 317,732 66.8 349.8 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 47.8 New York 708 669 97,489 101,007 47.3 47.8 New Jork 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indiana 7420 421 35,799 43,832 65.9 56.9 59. Illinois 808 729 84,433 84,598 71.8 69.3 Wickingan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 48,771 48,196 93.1 66.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 33,177 40,249 85.4 85.6 Indiana 440 431 31,785 32,931 86.1 86.7 West North Central 408 509 32,539 41,027 53.3 64.6 Missouri 408 509 32,539 13,699 93.4 88.8 78.2 Minnesota 318 1 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.4 88.6 South Dakota 17 15 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 268 223 23,816 23,868 54.1 49.4 Maryland 276 334 20,903 28,225 40.8 49.4 South Carolina 77 79 4,685 65.9 66.9 North Carolina 77 79 4,685 65.9 South Atlantic 102 131 8,311 11,12 34.8 1,49.4 Maryland 77 1,570 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,223 2,415 40.8 49.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,223 2,415 40.8 49.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,223 2,415 40.8 49.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,223 2,415 40.8 49.4 Maryland 77 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 2,386 23,396 23,386 24.5	New England	1,213	1,182	92,189	95,841	66.0	64.8
Vermont	Maine	121	139	7,027	8,586	54.9	63.6
Vermont 53 55 3,477 3,603 65.6 64.3 Massachusetts 645 620 47,169 51,335 69.5 72.2 Rhode Island 85 93 6,766 8,360 58.3 68.0 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 47.8 New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Ohio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Michigan 505 495 54,442 59,686 65.3 67.3 Michigan <	New Hampshire	68	70	5,633		61.9	63.5
Massachusetts 645 620 47,169 51,335 69.5 72.2 Rhode Island 85 93 6,766 8,360 58.3 69.0 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 47.8 New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Ohio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 34,999 71.8 69.3 Michigan 505 495 54,422 59,686 65.3 67.3 West North Central							
Rhode Island 85 93 6,766 8,360 58.3 68.10 Connecticut 241 3205 22,117 317,732 66.8 349.8 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 47.8 New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,598 71.8 69.3 Michigan 505 495 54,442 39,686 65.3 67.3 West North Centr				-			
Connecticut 241 3205 22,117 317,732 66.8 349.8 Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indian 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,998 71.8 69.3 Michigan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 54,742 59,686 65.3 67.3 Wisconsin 40 2,086 156,992 171,532 75.7 79.3	Phodo Tolland				•		_
Middle Atlantic 1,567 1,519 187,435 210,463 44.1 47.3 New York 708 669 97,489 101,007 47.3 47.8 New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 11 Incis 808 729 84,343 84,998 71.8 69.3 Miscouri 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Icwa 404	Connecticut						
New York 708 669 97,489 101,007 47.3 47.8 New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,598 71.8 69.3 Michigan 505 495 54,442 59,686 65.3 67.3 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Mimscota 385 377 38,177 40,249 85.4 85.6 Iowa 408 509 32,539 41,027 53.3 64.6 North Dakota	Connecticut	241	2205	22,11/	°17,732	66.8	49.8
New Jersey 313 320 31,147 34,763 39.5 41.2 Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chic 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,598 71.8 69.3 Michigan 505 495 54,442 59,686 65.3 67.3 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.7 86.7 North Dakota 81 81 6,357 6,253 84.8 78.2 North Dakota 81 81 6,357 6,253 84.8 78.2 Nebra	Middle Atlantic	1,567	1,519	187,435	210,463	44.1	47.3
New Jersey———————————————————————————————————		708	669	97.489	101.007	47.3	47.8
Pennsylvania 546 530 58,799 74,693 41.8 50.1 East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indian 420 421 35,799 43,832 65.9 76.9 Michigan 420 421 35,799 43,832 65.9 76.9 Michigan 505 495 54,442 59,686 65.3 67.3 Misconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota	New Jersey				•		
East North Central 2,899 2,871 284,035 310,149 68.2 70.9 Chio 750 831 60,680 73,837 55.7 64.7 Indian 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,598 71.8 69.3 Michigan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 404 431 31,785 32,931 86.1 86.4 Morth Dakota 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 21	Pennsylvania						
Ohio 750 831 60,680 73,837 55.7 64.7 Indiana 420 421 35,799 43,832 65.9 76.9 Illinois 808 729 84,343 84,998 71.8 69.3 Michigan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210				•	,		
Indiana	East North Central	2,899	2,871	284,035	310,149	68.2	70.9
Indiana	Ohio	750	831	60,680	73.837	55.7	64.7
Illinois 808 729 84,343 84,598 71.8 69,3 Michigan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 Morth Dakota 81 81 6,557 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,669 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware<	Indiana						
Michigan 505 495 54,442 59,686 65.3 67.3 Wisconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 81 6,357 6,253 84.8 78.2 South Dakota 210 223 18,399 18,069 93.4 86.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3	Tllimis			•			
Wisconsin 416 395 48,771 48,196 93.1 86.7 West North Central 1,964 2,086 156,992 171,532 75.7 79.3 Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia	Mighigan						
Minnesota 385 377 38,177 40,249 85.4 85.6 Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 61,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia							86.7
Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina	West North Central	1,964	2,086	156,992	171,532	75.7	79.3
Iowa 440 431 31,785 32,931 86.1 86.4 Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina	Minnesota	385	377	38.177	40.249	85.4	85.6
Missouri 408 509 32,539 41,027 53.3 64.6 North Dakota 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 Virginia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 Georgia 3					•		
North Dakota 81 81 81 6,357 6,253 84.8 78.2 South Dakota 117 117 117 8,047 8,479 93.6 94.2 93.4 88.6 94.2 18,069 93.4 88.6 88.6 88.6 824,524 75.0 81.5 81.5 88.6 824,524 75.0 81.5 81.5 88.6 83.3 84.8 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.4 38.3 38.3 38.4 38.3 38.3 38.4 38.3 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.3 38.4 38.3 38.3 38.3 38.6 35.3 39.2 39.6							
South Dakota 117 117 8,047 8,479 93.6 94.2 Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida<							
Nebraska 210 223 18,399 18,069 93.4 88.6 Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South	North Dakota						
Kansas 323 348 21,688 24,524 75.0 81.5 South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 K							
South Atlantic 1,475 1,631 142,383 158,888 38.4 38.3 Delaware 22 24 2,123 2,415 40.8 42.4 Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392	Nebraska		223	18,399	18,069	93.4	88.6
Delaware———————————————————————————————————	Kansas	323	348	21,688	24,524	75.0	81.5
Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	South Atlantic	1,475	1,631	142,383	158,888	38.4	38.3
Maryland 165 170 18,559 19,874 53.0 52.3 District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	Delaware	22	24	2,123	2,415	40.8	42.4
District of Columbia 17 15 2,742 2,578 38.6 35.3 Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	Maryland	165	170		•	53.0	52.3
Virginia 208 223 23,816 23,868 54.1 49.4 West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4							
West Virginia 73 79 4,858 5,881 22.6 26.0 North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4			-				
North Carolina 276 354 20,903 28,225 40.8 49.4 South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	Virginia						
South Carolina 102 131 8,311 11,132 34.8 41.4 Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	West virginia						
Georgia 304 297 28,732 29,575 64.9 60.6 Florida 308 338 32,339 35,340 23.3 22.0 East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	NOITH Carolina						
Florida	South Carolina						
East South Central 856 859 66,994 78,684 45.5 49.7 Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	Georgia	304		28 , 732	29,575	64.9	60.6
Kentucky 267 277 19,929 24,847 53.3 63.2 Tennessee 258 228 19,448 21,339 42.9 43.4 Alabama 209 209 19,207 20,392 49.6 48.4	Florida	308	338	32,339	35,340	23.3	22.0
Tennessee	East South Central	856	859	66,994	78,684	45.5	49.7
Tennessee		267	277	19,929	24,847	53.3	63.2
Alabama	Tennessee	258					43.4
	Mississippi	122	145	8,410	12,106	32.5	43.9

See footnotes at end of table.

Table 62. Nursing homes, beds, and bed rate, according to geographic division and State: United States, 1976 and 1980—Continued

	Nursing homes								
Geographic division and State	Numl	ber	Bed	ls	Bed :	rate ²			
	1976 ¹	1980	1976 ¹	1980	1976 ¹	1980			
West South Central	1,742	1,720	157,347	164,596	72.6	70.3			
Arkansas	208 200 341 993	195 199 340 986	19,322 18,969 25,990 93,066	18,935 21,553 26,318 97,790	69.5 53.4 76.2 78.0	63.1 56.9 72.5 75.1			
Mountain	493	511	41,874	45,509	47.4	44.9			
Montana Idaho Wyoming Colorado New Mexico Arizona Utah Nevada	69 53 22 173 30 67 63	68 51 19 159 33 95 68	4,725 4,215 1,753 17,833 2,489 5,832 3,707 1,320	5,319 4,213 1,742 16,575 2,572 8,591 4,729 1,768	61.4 52.0 51.6 81.8 26.5 24.6 39.0 28.1	64.1 46.3 48.4 69.4 23.6 29.7 44.6 29.0			
Pacific	1,920	1,937	165,818	181,095	58.5	58.3			
Washington	318 202 1,369 8 23	374 178 1,356 9 20	29,415 15,758 118,144 738 1,763	34,562 16,960 126,719 1,029 1,825	78.4 59.0 55.7 82.0 29.4	83.3 57.7 54.7 102.9 26.1			

The 1980 National Master Facility Inventory (NMFI) excluded certain types of nursing homes that the 1976 NMFI included (nursing home units of hospitals, nursing homes for the blind, etc.). To make the data comparable, these types of homes and their beds were subtracted from the 1976 figures.

SOURCE: Division of Health Care Statistics, National Center for Health Statistics: Data from the National Master Facility Inventory.

²Number of beds per 1,000 population 65 years of age and over.

³Excluded most homes for the aged.

Table 63. Beds and bed rates in psychiatric facilities, according to type of facility: United States, 1972, 1976, and 1980

	Year							
Type of facility	1972	1976	1980 ¹	1972	1976	1980 ¹		
	Ni	mber of bed	s	Beds per	100,000 p	opulation		
All facilities ²	471,800	331,134	273,825	225.7	156.0	123.2		
Non-Federal psychiatric hospitals————————————————————————————————————	375,990 361,578 14,412 42,545 23,308	238,293 222,202 16,091 35,913 28,706	174,028 156,396 17,632 33,796 29,384	179.8 172.9 6.9 20.3 11.2	112.3 104.7 7.6 16.9 13.5	77.5 69.7 7.8 15.7 13.6		
disturbed children——————————————Federally-funded community mental health centers———	19,348 10,609	18,029 10,193	20,197 16,420	9.3 5.1	8.5 4.8	9.0 7.4		

Provisional data. 1980 data are not yet available for Veterans Administration neuropsychiatric hospitals, general hospital inpatient psychiatric units (Veterans Administration and non-Federal), and federally funded community mental health centers (CMHC's); 1979 data are used for CMHC's, and 1978 data are used for Veterans Administration psychiatric services and non-Federal general hospital psychiatric inpatient units.

²Excludes total inpatient days for multiservice mental health facilities not elsewhere classified which represent less than 1 percent of all inpatient days in each year.

 3 Includes Veterans Administration neuropsychiatric hospitals and Veterans Administration general hospitals with separate psychiatric inpatient settings.

SOURCE: National Institute of Mental Health: State and regional distribution of psychiatric beds in 1972. Statistical Note 98. Public Health Service, Rockville, Md., Nov. 1973; State and regional distribution of psychiatric beds in 1976. Statistical Note 144. Public Health Service, Rockville, Md., Feb. 1978; State and regional distribution of psychiatric beds in 1978. Statistical Note 155. Public Health Service, Rockville, Md., Jan. 1981.

Table 64. Gross national product and national health expenditures: United States, selected years 1929-81 (Data are compiled by the Health Care Financing Administration)

	Gross	Nati	National health expenditures					
Year	national product in billions	Amount in billions	Percent of gross national product	Amount per capita				
1929	\$ 103.4	\$ 3.6	3.5	\$ 29				
	72.2	2.9	4.0	23				
	100.0	4.0	4.0	30				
	286.5	12.7	4.4	82				
	400.0	17.7	4.4	105				
1960	506.5	26.9	5.3	146				
	691.0	41.7	6.0	211				
1970	992.7	74.7	7.5	358				
	1,077.6	83.3	7.7	394				
	1,185.9	93.5	7.9	438				
	1,326.4	103.2	7.8	478				
	1,434.2	116.4	8.1	535				
1975	1,549.2	132.7	8.6	604				
	1,718.0	149.7	8.7	674				
	1,918.0	169.2	8.8	755				
	2,156.1	189.3	8.8	836				
	2,413.9	215.0	8.9	938				
1980	2,626.1	249.0	9.5	1,075				
	2,925.5	286.6	9.8	1,225				

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 65. Personal health care expenditures, average annual percent change, and percent distribution of factors affecting growth: United States, 1965-81

(Data are compiled by the Health Care Financing Administration)

	Personal	Average		Factors affecting growth				
Year	health care expenditures in billions	annual percent change ¹	All factors	Prices	Population	Intensity ²		
				Percent	distribution			
1965-81	•••	13.1	100	59	9	32		
1966	\$ 39.6	10.6	100	46	11	43		
	44.4	12.2	100	54	9	37		
	50.2	13.1	100	43	8	49		
	56.9	13.4	100	41	8	51		
1970	65.1	14.5	100	48	8	44		
	72.0	10.5	100	58	12	30		
1972 1973	80.2 88.7 101.0	11.5 10.6 13.9	100 100 100	40 41 66	10 10 7	50 49 27		
1975	116.8	15.6	100	70	7	23		
	131.8	12.9	100	69	8	23		
	148.7	12.8	100	64	8	28		
1979	166.7	12.1	100	69	9	22		
	188.9	13.3	100	72	8	20		
1980	219.4	16.1	100	72	7	21		
	255.0	16.2	100	72	6	22		

SOURCE: Bureau of Data Management and Strategy, Health Care Financing Administration: Unpublished data.

 $^{^{\}rm l}{\rm Refers}$ to 1-year periods unless otherwise noted. $^{\rm l}{\rm Represents}$ changes in use and/or kinds of services and supplies.

Table 66. Personal health care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78

(Data are compiled by the Health Care Financing Administration)

Geographic division and State			<u> </u>	Year	···		Average annual percent
	1966	1969	1972	1976	1977	1978	change 1966-78
			Per cap	ita amount			
United States	\$200	\$280	\$380	\$ 601	\$ 672	\$ 745	11.6
New England	234	329	438	681	757	838	11.2
Maine	171	240	328	539	603	662	11.9
New Hampshire	189	246	326	502	544	605	10.2
Vermont	193	270	349	531	573	630	10.3
Massachusetts	254	362	485	755	842	935	11.5
Rhode Island	231	314	408	666	735	822	11.2
Connecticut	237	331	436	671	749	827	11.0
Middle Atlantic	225	316	416	657	722	794	11.1
New York	254	360	470	738	793	858	10.7
New Jersey	193	265	355	576	644	699	11.3
Pennsylvania	200	278	370	585	663	756	11.7
East North Central	203	278	380	604	678	758	11.6
Ohio	194	263	360	589	659	738	11.8
Indiana	180	249	336	536	607	671	11.6
Illinois	219	299	405	627	702	792	11.3
Michigan	212	289	394	630	713	802	11.7
Wisconsin	196	275	384	607	675	742	11.7
West North Central	200	272	368	594	671	753	11.7
Minnesota	217	289	386	606	674	738	10.7
Iowa	196	264	351	556	639	724	11.5
Missouri	198	274	365	611	696	790	12.2
North Dakota	193	269	367	624	711	788	12.4
South Dakota	178	238	328	516	587	667	11.6
Nebraska	194	267	371	590	653	737	11.8
Kansas	191	265	376	601	679	766	12.3
South Atlantic	169	242	342	550	617	682	12.3
Delaware	210	289	380	592	655	722	10.8
Maryland	189	271	386	602	663	744	12.1
District of Columbia	435	672	945	1,352	1,526	1,695	12.0
Virginia	150	211	299	494	562	628	12.7
West Virginia	160	226	316	502	555	611	11.8
North Carolina	144	204	282	458	514	576	12.2
South Carolina	123	180	247	421	474	521	12.8
Georgia	151	219	324	512	582	645	12.8
Florida	186	266	376	627	701	766	12.5
East South Central	148	210	294	483	548	610	12.5
Kentucky	155	218	287	440	490	542	11.0
Tennessee	165	231	323	531	608	675	12.4
Alabama	145	210	302	503	570	633	13.1
Alabama	T.423	Z.LU					

See footnotes at end of table.

Table 66. Personal health care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78—Continued

(Data are compiled by the Health Care Financing Administration)

Geographic division and State	Year								
	1966	1969	1972	1976	1977	1978	change 1966–78		
			Per cap	ita amount					
West South Central	\$170	\$240	\$332	\$ 532	\$ 596	\$ 660	12.0		
Arkansas	140	196	284	474	529	585	12.7		
Louisiana	1.56	224	321	508	573	641	12.5		
Oklahoma	183	263	350	536	599	664	11.3		
Texas	176	247	339	549	613	678	11.9		
Mountain	190	260	346	539	596	658	10.9		
Montana	173	233	324	503	580	645	11.6		
Idaho	153	209	292	451	512	554	11.3		
Wyoming	197	26 3	329	450	505	551	8.9		
Colorado	236	313	395	602	659	725	9.8		
New Mexico	156	213	281	457	505	567	11.3		
Arizona	192	271	375	582	630	698 ·	11.4		
Utah	161	215	286	455	503	556	10.9		
Nevada	196	280	390	657	746	828	12.8		
Pacific	234	327	443	687	776	858	11.5		
Washington	218	294	389	575	648	710	10.4		
Oregon	1.96	272	363	584	663	728	11.6		
California	241	339	465	723	816	904	11.6		
Alaska	226	283	335	587	669	735	10.3		
Hawaii	210	300	394	595	676	744	11.1		

SOURCE: Bureau of Data Management and Strategy, Health Care Financing Administration: Unpublished data.

Table 67. Consumer Price Index (1967=100) and average annual percent change for all items and selected items:

United States, selected years 1950-81

(Data are based on reporting by samples of providers and other retail outlets)

		Item							
Year	All items	Medical care	Food	Apparel and upkeep	Housing	Energy	Personal care		
			Con	sumer Price Ind	ex				
1950	72.1 80.2 88.7 94.5 116.3 161.2 170.5 181.5 195.3 217.7 247.0 272.3	53.7 64.8 79.1 89.5 120.6 168.6 184.7 202.4 219.4 240.1 267.2 295.1	74.5 81.6 88.0 94.4 114.9 175.4 180.8 192.2 211.2 234.7 255.3 274.9	79.0 84.1 89.6 93.7 116.1 142.3 147.6 154.2 159.5 166.4 177.4 186.6	72.8 82.3 90.2 94.9 118.9 166.8 177.2 189.6 202.6 227.5 263.2 293.2	94.2 96.3 107.0 176.6 189.3 207.3 220.3 277.7 364.8 413.4	68.3 77.9 90.1 95.2 113.2 150.7 160.5 170.9 182.0 195.5 212.7 229.8		
1950-55	2.2 2.0 1.3 4.2 6.7 5.8 6.5 7.6 11.5 13.5	3.8 4.1 2.5 6.1 6.9 9.5 9.6 8.4 9.4 11.3	1.8 1.5 1.4 4.0 8.8 3.1 6.3 9.9 11.1 8.8 7.7	1.3 1.3 0.9 4.4 4.2 3.7 4.5 3.4 4.3 6.6 5.2	2.5 1.9 1.0 4.6 7.0 6.2 7.0 6.9 12.3 15.7	0.4 2.1 10.5 7.2 9.5 6.3 26.1 31.4	2.7 3.0 1.1 3.5 5.9 6.5 6.5 7.4 8.8 8.0		

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: Consumer Price Index. Various releases.

Table 68. Consumer Price Index (1967=100) for all items and medical care components: United States, selected years 1950-81

(Data are based on reporting by samples of providers and other retail outlets)

Item and				Yea	r			
medical care component	1950	1955	1960	1965	1970	1975	1980	1981
				Consumer Pr	ice Index			
CPI, all items	72.1	80.2	88.7	94.5	116.3	161.2	247.0	272.3
Less medical care			89.4	94.9	116.1	160.9	245.6	270.8
CPI, all services	58.7	70.9	83.5	92.2	121.6	166.6	270.9	306.2
All medical care	53.7	64.8	79.1	89.5	120.6	168.6	267.2	295.1
Medical care services Professional services	49.2	60.4	7 4. 9	87.3	124.2 119.7	179.1 164.5	288.9 255.0	318.6 280.1
Physician services————————————————————————————————————	55.2 63.9	65.4 73.0	77.0 82.1	88.3 92.2	121.4 119.4	169.4 161.9	274.3 242.3	303.5 264.4
Other professional services Other medical care services					129.7	196.9	122.3 330.4	132.6 365.9
Hospital and other medical services Hospital room	30.3	42.3	 57 . 3	75 . 9	145.4	236.1	132.7 416.3	151.4 476.8
Other hospital and medical care services —	******						132.1	150.2
Medical care commodities Prescription drugs	88.5 92.6	94.7 101.6	104.5 115.3	100.2 102.0	103.6 101.2	118.8 109.3	168.7 155.8	187.4 173.4
Nonprescription drugs and medical supplies ————————————————————————————————————							121.3 116.9	134.5 124.5
Internal and respiratory over-the-counter drugs				98.0	106.2	130.1	188.8	212.9
Nonprescription medical equipment and supplies							118.9	130.7

¹Dec. 1977=100.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: Consumer Price Index. Various releases.

(Data are based on reporting by samples of providers and other retail outlets)

Item and		Period								
medical care component	1950-55	1955–60	1960-65	1965–70	1970-75	1975–80	1980-81			
			Average	annual percen	t change					
CPI, all items	2.2	2.0	1.3	4.2	6.7	8.9	10.2			
Less medical care			1.2	4.1	6.7	8.8	10.3			
CPI, all services	3.8	3.3	2.0	5.7	6.5	10.2	13.0			
All medical care	3.8	4.1	2.5	6.1	6.9	9.6	10.4			
Medical care services Professional services		4.4	3.1	7.3	7.6 6.6	10.0 9.2	10.3 9.8			
Physician services————————————————————————————————————		3.3 2.4	2.8 2.3	6.6 5.3	6.9 6.3	10.1 8.4	10.6 9.1			
services1Other medical care services					8.7	10.9	8.4 10.7			
Hospital and other medical services Hospital room		6.3	5.8	13.9	10.2	12.0	14.1 14.5			
Other hospital and medical care services	NO-00-00						13.7			
Medical care commodities		2.0 2.6	-0.8 -2.4	0.7 -0.2	2.8 1.6	7.3 7.3	11.1 11.3			
Nonprescription drugs and medical supplies							10.9 6.5			
Internal and respiratory over-the-counter drugs	and the said			1.6	4.1	7.7	12.8			
Nonprescription medical equipment and supplies							9.9			

¹Dec. 1977≈100.

SOURCE: Bureau of Labor Statistics, U.S. Department of Labor: Consumer Price Index. Various releases.

Table 70. National health expenditures, according to source of funds: United States, selected years 1929-81

(Data are compiled by the Health Care Financing Administration)

		Source of funds							
Year	All health expenditures		Private			Public			
	in billions	Amount in billions	Amount per capita	Percent of total	Amount in billions	Amount per capita	Percent of total		
1929	\$ 3.6	\$ 3.2	\$ 25	86.4	\$ 0.5	\$ 4	13.6		
1935	2.9	2.4	18	80.8	0.6	4	19.2		
1940	4.0	3.2	24	79.7	0.8	6	20.3		
1950	12.7	9.2	60	72.8	3.4	22	27.2		
1955	17.7	13.2	78	74.3	4.6	27	25.7		
1960	26.9	20.3	110	75.3	6.6	36	24.7		
1965	41.7	30.9	156	74.1	10.8	55	25.9		
1970	74.7	46.9	225	62.8	27.8	133	37.2		
1971	83.3	51.6	244	62.0	31.7	150	38.0		
1972	93.5	58.1	272	62 . l	35.4	166	37.9		
1973	103.2	63.9	296	61.9	39.3	182	38.1		
1974	116.4	69.3	318	59.5	47.1	216	40.5		
1975	132.7	76.5	348	57.7	56.2	255	42.3		
1976	149.7	86.7	391	57.9	62.9	284	42.1		
1977	169.2	99.1	442	58.6	70.1	313	41.4		
1978	189.3	109.8	485	58.0	79.5	351	42.0		
1979	215.0	124.4	543	57.9	90.6	395	42.1		
1980	249.0	143.6	620	57.7	105.4	455	42.3		
1981	286.6	164.1	701	57.3	122.5	524	42.7		

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 71. National health expenditures average annual percent change, according to source of funds: United States, 1929-81

(Data are compiled by the Health Care Financing Administration)

Period	All health	Source of	Source of funds				
relicu	expenditures	Private	Public				
	Average annual percent change						
1929-81	8.8	7.9	11.2				
1929-35	-3.5 6.6 12.2 6.9	-4.7 5.9 11.1 7.5	3.1 5.9 15.6 6.2				
1955-60	8.7	9.0	7.5				
1965-70	9.2 12.4 12.2 13.2	8.8 8.7 10.3 13.3	10.4 20.8 15.1 13.1				
1970-71	11.5 12.2 10.4 12.8 14.0	10.0 12.6 10.0 8.5 10.4	14.0 11.7 11.0 19.8 19.3				
1975-76	12.8 13.0 11.9 13.6 15.8	13.3 14.3 10.8 13.3 15.4	11.9 11.4 13.4 14.0 16.3				
1980-81	15.1	14.3	16.2				

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 72. Personal health care expenditures and percent distribution, according to source of payment: United States, selected years 1929-81

(Data are compiled by the Health Care Financing Administration)

			Source of payment								
	All personal				Third-party payment						
Year	health care expendi-	All sources	Direct payment		Private	Philan-		Government			
	tures in billions ¹			Total	health insurance	thropy and industry	Total	Federal	State and local		
					Percent dist	ibution					
1929———————————————————————————————————	\$ 3.2 2.7 3.5 10.9 15.7 23.7 35.8 65.1 72.0 80.2 88.7 101.0 116.8 131.8 148.7 166.7	100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0 100.0	288.4 282.4 281.3 65.5 58.1 54.9 51.7 39.9 38.6 38.6 38.6 36.1 33.4 32.6 32.8	11.6 17.6 18.7 34.5 41.9 45.1 48.3 60.1 61.4 61.4 63.9 66.6 67.4 67.2	9.1 16.1 21.1 24.5 24.0 24.1 23.8 23.8 24.2 25.8 26.9 26.9	2.6 2.8 2.6 2.9 2.8 2.3 2.2 1.6 1.7 1.6 1.5 1.4 1.4 1.4	9.0 14.7 16.1 22.4 23.0 21.8 21.6 34.5 35.6 36.0 36.1 38.2 39.5 39.1 38.9 39.2	2.7 3.4 4.1 10.4 10.5 9.3 10.1 22.3 23.3 23.6 23.8 25.5 26.9 27.6 27.8	6.3 11.3 12.0 12.5 12.5 11.4 12.2 12.3 12.4 12.4 12.7 12.6 11.7		
1979 1980 1981	188.9 219.4 255.0	100.0 100.0 100.0	32.7 32.9 32.1	67.3 67.1 67.9	26.6 26.0 26.2	1.4 1.4 1.4	39.3 39.7 40.4	28.2 28.6 29.3	11.1		

Includes all expenditures for health services and supplies other than expenses for prepayment and administration, and government public health activities. ²Includes any insurance benefits and expenses for prepayment (insurance premiums less insurance benefits).

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 73. National health expenditures and percent distribution, according to type of expenditure: United States, selected years 1950-81

(Data are compiled by the Health Care Financing Administration)

Type of expenditure				Year			
Type of expenditure	1950	1960	1965	1970	1975	1980	1981
			Amo	ount in bil	lions		
Total	\$12.7	\$26.9	\$41.7	\$74.7	\$132.7	\$249.0	\$286.6
			Pero	cent distri	bution		
All expenditures	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Health services and supplies	92.4	93.6	91.6	92.8	93.7	95.2	95.4
Hospital care————————————————————————————————————	30.4 21.7 7.6 1.5 3.1 13.6 3.9 3.6 2.9 4.2	33.8 21.1 7.4 2.0 3.2 13.6 2.9 4.1 1.5 4.1	33.3 20.3 6.7 5.0 2.5 12.4 2.8 3.9 2.0 2.7	37.2 19.2 6.4 6.3 2.1 10.7 2.6 3.6 1.9 2.8	39.3 18.8 6.2 7.6 2.0 9.0 2.4 3.3 2.4 2.8	40.3 18.8 6.2 8.3 2.2 7.8 2.0 4.3 2.8 2.4	41.2 19.1 6.0 8.4 2.2 7.5 2.0 3.9 2.5
Research	0.9	2.5	3.6	2.6	2.5	2.1	2.0
Construction	6.7	3.9	4.8	4.6	3.8	2.6	2.6

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 74. National health expenditures average annual percent change, according to type of expenditure: United States, selected years 1950-81

(Data are compiled by the Health Care Financing Administration)

mana of annuality			Per	iœī		
Type of expenditure	1950-80	1950-60	1960-65	1965–70	1970-75	1975–81
		1	Average annual	percent change	9	
All expenditures	10.4	7.8	9.2	12.4	12.2	13.7
Health services and supplies	10.5	8.0	8.7	12.7	12.4	14.0
Hospital care————————————————————————————————————	11.4 10.0 9.7 16.7	9.0 7.5 7.5 10.9	8.8 8.3 7.0 33.2	14.9 11.0 10.9 17.5	13.4 11.7 11.8 16.5	14.6 14.1 13.3 15.7
Other professional services Drugs and drug sundries Eyeglasses and appliances Expenses for prepayment Government public health activities	9.1 8.4 8.0 10.6 10.2	8.1 7.8 4.7 9.1 1.4	2.1 7.0 8.4 7.8 14.9	9.9 9.0 9.6 11.0 11.8	10.2 8.3 11.0 10.3 18.0	16.2 10.3 10.1 16.8 14.7
Other health services————————————————————————————————————	8.3 8.5	7.7 5.9	15.5	13.8 9.1	12.4 9.2	11.7 7.7
Research	14.2 7.0	18.9 2.2	16.5 14.9	5.9 11.2	10.5 8.4	9.5 6.6

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982.

Table 75. Hospital care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78

Geographic division and State			2	/ear			Average annual percent
	1966	1969	1972	1976	1977	1978	change 1966–78
			Per cap	ita amount			
United States	\$ 79	\$118	\$165	\$272	\$ 305	\$ 337	12.8
New England	100	150	205	328	370	403	12.3
Maine	73	106	137	241	275	296	12.3
New Hampshire	73	97	130	208	234	255	11.0
Vermont	85	125	160	238	254	271	10.2
Massachusetts	115	176	244	392	447	490	12.9
Rhode Island	100	147	195	321	355	390	12.0
Connecticut	90	132	184	290	321	351	12.0
Middle Atlantic	93	143	199	322	351	382	12.5
New York	109	170	234	369	394	416	11.8
New Jersey	70	102	144	249	276	294	12.7
Pennsylvania	81	126	177	295	334	386	13.9
East North Central	80	116	166	281	315	352	13.1
Ohio	73	107	153	268	298	334	13.5
Indiana	63	94	133	231	262	289	13.5
Illinois	89	131	193	317	359	402	13.4
Michigan	89	122	168	290	325	368	12.6
Wisconsin	76	116	161	263	287	314	12.6
West North Central	79	116	156	267	305	342	13.1
Minnesota	88	121	166	266	302	324	11.4
Iowa	68	102	137	232	273	307	13.4
Missouri	80	122	162	297	339	391	14.1
North Dakota	82	120	155	280	327	354	13.0
South Dakota	75	99	132	235	260	295	12.1
Nebraska	74	114	156	255	282	324	13.0
Kansas	75	115	159	261	301	340	13.4
South Atlantic	67	101	151	249	281	310	13.6
Delaware	91	130	173	285	313	342	11.7
Maryland	84	120	184	282	315	355	12.8
District of Columbia	189	326	554	899	1,007	1,115	16.0
Virginia	63	91	132	221	250	281	13.3
West Virginia	70	106	152	258	289	318	13.5
North Carolina	57	84	120	198	224	249	13.1
South Carolina	51	78	105	184	208	226	13.3
Georgia	56	86	135	224	254	283	14.4
Florida	66	102	151	263	301	326	14.3
East South Central	60	91	131	223	255	285	13.9
Kentucky	60	90	12 1	199	219	242	12.4
Tennessee	67	102	148	249	289	320	13.9
Alabama	60	91	134	234	272	305	14.5
Mississippi	48	72	110	194	222	252	14.9

See footnotes at end of table.

Table 75. Hospital care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78--Continued

Geographic division and State			Y	ear			Average annual percent
	1966	1969	1972	1976	1977	1978	change 1966–78
			Per cap	ita amount			
West South Central	\$ 65	\$ 96	\$136	\$226	\$ 257	\$ 286	13.1
Arkansas	55	76	113	194	218	240	13.0
Louisiana	62	93	144	234	264	299	14.0
Oklahoma	62	100	132	221	254	283	13.5
Texas	68	100	138	230	262	291	12.8
Mountain	75	108 .	145	231	257	283	11.7
Montana	67	94	122	190	232	256	11.9
Idaho	50	75	103	159	183	197	12.1
Wyoming	84	115	123	185	204	225	8.5
Colorado	99	135	172	270	28 9	310	10.0
New Mexico	68	94	121	222	247	280	12.5
Arizona	77	117	168	255	284	317	12.5
Utah	58	81	1.1.3	185	210	226	12.0
Nevada	68	107	152	272	304	348	14.7
Pacific	84	122	169	275	311	346	12.5
Washington	71	101	133	213	239	260	11.4
Oregon	66	96	126	215	245	268	12.4
California	87	128	181	294	332	371	12.8
Alaska	145	164	165	274	318	367	8.0
Hawaii	79	114	148	219	249	278	11.1

SOURCE: Bureau of Data Management and Strategy, Health Care Financing Administration: Unpublished data.

Table 76. Nursing home care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78

Geographic division and State				Year			Average annual percent
and State	1966	1969	1972	1976	1977	1978	change 1966-78
			Per cap	oita amount			
United States	\$12	\$19	\$31	\$52	\$60	\$ 68	15.6
New England	20	28	47	86	97	110	15.4
Maine	15	23	40	70	81	97	17.0
New Hampshire	16	20	35	43	46	59	11.8
Vermont	19	27	39	76	83	97	14.4
Massachusetts	22	32	52	95	106	117	14.8
Rhode Island	15	21	33	80	99	121	18.9
Connecticut	19	29	49	90	103	115	16.4
Middle Atlantic	11	18	28	66	74	82	17.9
New York	12	19	31	87	92	101	19.5
New Jersey	10	15	24	45	51	56	15.8
Pennsylvania	12	18	28	48	60	71	16.2
East North Central	13	20	34	54	63	74	15.5
Ohio	10	7.0	27	51	60	69	15.7
Indiana	12 12	18 20	33	51 58	66	76	16.6
Illinois						76 77	16.3
	13	20	33	52	60		
Michigan	13 19	21 29	35 52	49 73	57 84	64 92	14.4 14.2
WISCONSTIT	13	29	52	73	04	32	14.2
West North Central	18	28	43	70	83	95	15.0
Minnesota	22	33	55	94	112	126	15.6
Iowa	22	36	51	81	97	112	14.4
Missouri	12	19	29	48	57	66	15.3
North Dakota	19	33	47	60	71	82	13.1
South Dakota	18	30	49	69	81	97	14.8
Nebraska	17	27	42	68	77	86	14.6
Kansas	18	26	41	66	78	92	14.6
South Atlantic	8	12	21	33	39	44	15.7
Delaware	8	12	20	42	52	60	18.8
Maryland	9	17	24	46	51	56	16.2
District of Columbia	6	10	16	23	31	27	13.1
Virginia	6	9	16	31	38	44	17.9
West Virginia	3	5	12	20	20	25	18.1
North Carolina	7	11	16	29	36	44	17.3
South Carolina	6	9	16	28	34	42	17.8
Georgia	8	13	28	37	46	52	17.2
Florida	11	15	25	33	36	39	11.2
East South Central	7	11	19	35	40	48	17.7
Kentucky	9	14	23	40	45	54	16.0
Tennessee	6	10	16	29	34	40	17.8
Alabama	8	14	22	41	44	50	16.7
Mississippi	4	7	15	29	36	49	23.4

See footnotes at end of table.

Table 76. Nursing home care per capita expenditures and average annual percent change, according to geographic division and State: United States, selected years 1966-78—Continued

Geographic division and State			2	Zear			Average annual percent
	1966	1969	1972	1976	1977	1978	change 1966–78
			Per cap	ita amount			
West South Central	\$12	\$19	\$31	\$49	\$55	\$ 62	15.0
Arkansas	13	21	34	56	64	74	15.4
Louisiana	8	13	22	39	45	51	16.7
Oklahoma	19	31.	46	59	67	74	11.9
Texas	11	18	30	49	54	61	15.6
Mountain	10	15	23	35	40	47	13.7
Montana	12	17	32	41	50	59	14.3
Idaho	12	17	25	46	52	58	14.1
Wyoming	6	12	23	24	28	30	13.6
Colorado	15	21	33	54	62	71	14.0
New Mexico	5	9	1.5	17	20	23	13.0
Arizona	8	13	17	22	25	28	10.8
Utah	9	12	17	30	36	48	15.6
Nevada	7	10	20	29	37	45	17.4
Pacific	13	20	35	49	57	64	14.2
Washington	16	21	43	61	69	78	14.2
Oregon	17	24	37	58	69	77	13.6
California	13	21	34	47	55	63	14.3
Alaska	1	2	9	19	16	12	20.4
Hawaii	6	10	18	28	32	31	14.8

SOURCE: Bureau of Data Management and Strategy, Health Care Financing Administration: Unpublished data.

Table 77. Hospital expenses per inpatient day, personnel and number per 100 patients, and average annual percent change: United States, 1971-80

(Data are based on reporting by a census of hospitals)

	Adjusted (expenses per inpat	ient dayl	Labor costs	Person	nel ³
Year and period	Total	Labor ²	Non- labor	as percent of total	Number in thousands	Number per 100 patients
1971	83	53	30	63.6	1,999	272
1972	95	59	35	62.6	2,056	278
1973	102	63	39	61.8	2,149	280
1974	113	69	44	60.7	2,289	289
1975	133	79	54	59.4	2,399	298
1976	152	88	64	57.9	2,483	304
1977	173	100	74	57.5	2,581	315
1978	194	111	83	57.2	2,662	323
1979	216	123	93	57.0	2,762	328
1980	244	138	107	56.4	2,879	334
		Z ^a	werage annual p	ercent change		
1971-80	12.7	11.2	15.0	•••	4.1	2.3
1971-72	13.4	11.6	16.6	•••	2.9	2.2
1972-73	7.6	6.1	10.0	•••	4.5	0.7
1973-74	11.2	9.4	14.2	•••	6.5	3.2
1974-75	17.6	14.9	21.7	•••	4.8	3.1
1975-76	14.4	11.5	18.6	•••	3.5	2.0
1976-77	13.8	13.1	14.7	•••	3.9	3.6
1977-78	11.9	11.2	12.7	***	3.1	2.5
1978-79	11.3	10.9	11.8		3.8	1.5
1979-80	13.3	12.0	15.0	•••	4.2	1.8

 $^{^1\}mathrm{Refers}$ exclusively to expenses incurred for inpatient care. $^2\mathrm{Labor}$ expenses include employee benefits. $^3\mathrm{Full-time}$ equivalent personnel.

NOTE: Data refer to non-Federal short-term general and other specialty hospitals.

SOURCE: American Hospital Association: Hospital Statistics, 1981 Edition. Chicago, 1981. (Copyright 1981: Used with the permission of the American Hospital Association.)

Table 78. Average annual percent increases in hospital inpatient expenses per patient day, according to contributing factors: United States, selected years 1960-80

(Data are based on a number of government and private sources)

			Perio	3		
Contributing factor	1960-65 ¹	1965–68	1968–71	1971-74	1974-77	1977-80
		Av	verage annual per	rcent increase		
Total	6.7	11.2	14.3	10.7	15.2	12.2
			Percent of tot	al increase		
Wage rates	43	35	41.	36	39	43
Prices of hospital purchases	7	12	15	28	19	38
Hospital employees	16	18	13	11	11	9
Other expenses2	34	35	31	25	31	10

¹Statistics calculated on a per-patient-day basis; statistics for all other periods are calculated on a per-adjusted-patient-day basis. The latter includes an approximation of equivalent services to outpatients.

²Nonlabor expenses such as X-rays, laboratory tests, etc.

NOTE: For 1971-80, employee benefits are included as part of the wage component of total hospital expenses. Previously, they were included in the service component. As these benefits amount to a sizable portion of total hospital expenses (7.7 percent in 1980), this impacts on the distribution among contributing factors to hospital expenses.

SOURCES: American Hospital Association: Hospital Statistics, 1981 Edition. Chicago, 1981; Bureau of Labor Statistics, U.S. Department of Labor: Consumer Price Index. Various releases.

See footnotes at end of table.

Table 79. Nursing home average monthly charges and percent distribution of residents, according to primary source of payments and selected facility characteristics: United States, 1973-74 and 1977

(Data are based on a sample of nursing homes)

1973-74 ^l									197	77		
			Primary	source of	payment				Primary	source of	payment	
Facility characteristic	All residents	Own income	Medi- care	Medi- caid	Public assis- tance welfare	All other sources	All residents	Own income	Medi- care	Medi- caid	Public assis- tance welfare	All other sources
		Average monthly charge ²										
All facilities	- \$479	\$491	\$754	\$503	\$381	\$225	\$689	\$690	\$1,167	\$720	\$508	\$440
Ownership												
ProprietaryNonprofit and government		525 427	754 *751	486 556	373 397	406 136	670 732	686 698	1,048 1,325	677 825	501 534	562 324
Certification ³	430	*27	731	330	391	130	732	090	1,323	023	224	324
Skilled nursing facility	- 566	585	765	567	468	290	880	866	1,136	955	575	606
intermediate facility Intermediate facility	- 514 - 376	521 388	719	513 375	482 333	396 *389	762 556	800	1,195	739	623	630
Not certified		377	•••	375	333	*89	556 390	567 447	•••	563 •••	479 401	*456 *155
Bed size												
Less than 50 beds		429 484	*625	431	296	*128	546	516	*869	663	394	*295
100-199 beds	- 502	523	*786 787	449 508	356 414	186 256	643 706	686 721	*1,141 1,242	634 691	493 573	468 551
200 beds or more	- 576	506	*689	656	496	307	837	823	*1,179	925	602	370
Geographic region												
North Central		637 449	*957 *738	718 454	538 360	131 252	918 640	909 652	1,369 *1,160	975 639	*511 537	395 524
South		452 487	*615 *672	408 442	306 323	278 *314	585 653	585 663	*1,096 *868	619 663	452 564	342 *499

Table 79. Nursing home average monthly charges and percent distribution of residents, according to primary source of payments and selected facility characteristics: United States, 1973-74 and 1977--Continued

(Data are based on a sample of nursing homes)

	-		1973-	·74 ¹			1977					
Florities.			Primary	source of	payment				Primary	source o	f payment	
Facility characteristic	All residents	Own income	Medi- care	Medi- caid	Public assis- tance welfare	All other sources	All residents	Own income	Medi- care	Medi- caid	Public assis- tance welfare	All other sources
					Percent	t distrib	ution of re	sidents				
All facilities	100.0	36.7	1.1	47.9	11.4	3.0	100	38.4	2.0	47.8	6.4	5.3
Ownership												
ProprietaryNonprofit and government		34.5 41.9	1.2 0.9	52.0 38.4	11.0 12.2	1.4 6.6	100 100	37.5 40.4	1.7 2.7	49.6 43.8	7.3 4.4	3.8 8.6
$Certification^3$												
Skilled nursing facility	100.0	36.9	2.0	53.6	5.3	2.2	100	41.5	4.6	41.4	7.7	4.8
intermediate facility Intermediate facility		29.8 35.8	1.1	59.7	7.6	1.8	100	31.6	2.6	58.3	3.2	4.1
Not certified		50.6	•••	53.1	9.7 39.3	1.4 10.2	100 100	36.3 64.2	•••	55.3	5.3 19.0	3.1 16.7
Bed size												
Less than 50 beds	100.0	41.5 37.8 36.3	*0.6 0.9 1.3	37.1 47.9 50.8	17.5 10.9 8.8	3.4 2.5 2.8	100 100 100	49.6 39.5 38.4	*1.8 *1.2 2.6	32.7 46.5	10.5 8.1	5.4 4.7
200 beds or more	200.0	30.7	*1.3	51.6	12.3	4.1	100	28.6	2.3	50.4 55.5	4.6 4.6	4.0 9.1
Geographic region												
Northeast North Central South West	100.0	30.6 44.4 31.0 37.9	1.4 0.8 1.1 *1.2	53.2 35.6 55.2 54.6	10.5 16.1 10.3 4.6	4.5 3.0 2.4 1.9	100 100 100 100	34.6 44.5 32.2 41.3	3.3 1.5 *1.4 2.5	53.3 42.1 52.5 44.7	3.8 6.5 8.2 6.7	5.1 5.4 5.7 4.8

¹Excludes residents in personal care or domiciliary care homes. Excludes residents who did not live in the nursing home for at least 1 month.
²Includes life-care residents and no-charge residents.

SOURCES: National Center for Health Statistics: Charges for care and sources of payment for residents in nursing homes, United States, National Nursing Home Survey, August 1973-April 1974, by E. Hing. Vital and Health Statistics. Series 13-No. 32. DHEW Pub. No. (PHS) 78-1783. Public Health Service. Washington. U.S. Government Printing Office, Nov. 1977; The National Nursing Home Survey, 1977 summary for the United States, by J. F. VanNostrand, A. Zappolo, and E. Hing, et al. Vital and Health Statistics. Series 13-No. 43. DHEW Pub. No. (PHS) 79-1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979.

³Medicare extended care facilities and Medicaid skilled nursing homes from the 1973-74 survey were considered to be equivalent to Medicare or Medicaid skilled nursing facilities in 1977 for the purposes of this comparison.

Table 80. Monthly charge for care in nursing homes and percent distribution of residents, according to selected facility and resident characteristics: United States, 1964, 1973-74, and 1977

(Data are based on reporting by a sample of nursing homes)

			Year							
	1964	19)73-74 ²		1977					
Average total monthly charge ¹	Percent distribution of residents	Average total monthly charge ¹	Percent distribution of residents	Average total monthly charge ¹	Percent distribution of residents					
\$186	100.0	\$479	100.0	\$689	100.0					
	67.4 32.6	495 448	64.8 35.2	719 514	85.4 14.6					
205 145	60.2 39.8	489 456	69.8 30.2	670 732	68.2 31.8					
		397 448 502 576	15.2 34.1 35.6	546 643 706 837	12.9 30.5 38.8 17.9					
		3,0	2002	007	1,.,					
171 161	28.6 36.6 18.1 16.7	651 433 410 454	22.0 34.6 26.0 17.4	918 640 585 653	22.4 34.5 27.2 15.9					
- 186	100.0	479	100.0	689	100.0					
184 191	12.0 18.9 41.7 27.5	434 473 488 485	10.6 15.0 35.5 38.8	585 669 710 719	13.6 16.2 35.7 34.5					
171 194	35.0 65.0	466 484	29.1 70.9	652 705	28.8 71.2					
199 164	31.0 28.7 26.9	510 469 435	40.6 42.1 16.4	758 659 586 388	43.8 40.7 14.4 1.1					
	Average total monthly charge! \$186 212 117 205 145 145 155 184 191 194 171 194 224 199	total monthly charge residents \$186	Average total distribution of monthly charge residents charge total monthly charge residents charge	Average total monthly charge residents charge total monthly charge residents charge total monthly charge residents charge residents \$186	Average total distribution monthly of residents when the charge total monthly of residents when the charge total monthly charge total m					

 $^{^{1}{\}rm Includes}$ life-care residents and no-charge residents. $^{2}{\rm Data}$ exclude residents of personal care homes.

SOURCE: National Center for Health Statistics: Charges for care and sources for payment for residents in nursing homes, United States, National Nursing Home Survey, Aug. 1973-Apr. 1974, by E. Hing. Vital and Health Statistics. Series 13-No. 32. DHEW Pub. No. (PHS) 78-1783. Public Health Service. Washington. U.S. Government Printing Office. Nov. 1977; Unpublished data from the 1977 National Nursing Home Survey.

Table 81. Personal health care per capita expenditures, according to age, source of payment, and type of expenditure: United States, selected years 1965-78

	A	ll ages		Und	ler 19 ye	ears	19	9-64 year	s	65	65 years and over		
Year and type of expenditure		ource of	payment		ource of	payment		Source o	f payment		Source o	of payment	
	Per — capita amount	Pri- vate	Public	Per — capita amount	Pri- vate	Public	Per capita amount	Pri- vate	Public	Per capita amount	Pri- vate	Public	
1965	:	Percent	of total		Percent	of total		Percent	of total		Percen	t of total	
All expenditures	\$188.43	78.9	21.1	\$ 83.02	84.5	15.5	\$215.58	80.8	19.2	\$ 472.3	70.1	29.9	
Hospital care	70.46	61.3	38.7	22.51	64.2	35.8	87.24	64.6	35.4	175.5	2 50.9	49.1	
Physician services	42.85	93.1	6.9	22.27	97.7	2.3	49.21	91.6	8.4	92.5			
Dentist services	14.20	98.3	1.7	10.04	97.5	2.5	17.85	99.0	1.0	11.3	-	5.6	
Other professional services	5.22	96.4	3.6	1.76	95.5	4.5	6.41	96.4	3.6	12.9		3.3	
Drugs and drug sundries	29.18	96.6	3.4	18.17	98.9	1.1	31.60	98.0	2.0	61.3			
Eyeglasses and appliances	9.44	98.3	1.6	3.98	98.7	1.3	12.78	98.2	1.8	13.6			
Nursing home care	10.48	65.6	34.4				2.42	70.0	30.0	97.1			
Other health services	6.60	32.9	67.1	4.29	12.4	87.6	8.07	45.5	54.5	7.9			
1970													
All expenditures	315.37	65.9	34.1	137.68	76.1	23.9	337.27	75.4	24.6	853.8	38.8	61.2	
Hospital care	133.39	47.6	52.4	45.72	58.2	41.8	153.21	60.2	39.8	348.7	4 11.4	88.6	
Physician services	68.81	78.5	21.5	36.39	89.6	10.4	75.90	89.0	11.0	149.8			
Dentist services	22.80	95.3	4.7	15.80	93.5	6.5	27.88	96.2	3.8	20.4			
Other professional services	7.70	86.1	13.9	2.43	78.6	21.4	9.05	92.6	7.4	19.2			
Drugs and drug sundries	40.34	94.2	5.8	25.03	96.4	3.6	42.42	95.6	4.4	85.6			
Eyeglasses and appliances	10.07	94.9	5.1	4.11	96.1	3.9	13.16	96.9	3.1	15.0			
Nursing home care	22.44	51.2	48.8	.81	JU-1	100.0	4.18	29.7	70.3	204.8			
Other health services	9.90	28.8	71.2	7.39	10.3	89.7	11.48	39.9	60.1	10.0			
1976			. — . —					5512				*	
All expenditures	602.45	60.9	39.1	232.34	71.1	28.9	624.31	71.1	28.9	1,623.8	35 . 5	64.5	
Hospital care	272.69	45.2	54.8	83.92	54.4	45.6	300.75	58.5	41.5	702.8	30 11.2	88.8	
Physician services	126.11	74.5	25.5	59.55	82.9	17.1	135.52	84.7	15.3	280.3			
Dentist services	46.19	95.2	4.8	30.94	90.4	9.6	55.40	96.7	3.3	43.6			
Other professional services	14.60	79.5	20.5	4.40	63.1	36.9	16.66	89.7	10.3	34.9			
Drugs and drug sundries	58.40	91.1	8.9	34.62	93.6	6.4	61.10	93.0	7.0	111.0			
Eyeglasses and appliances	14.60	91.9	8.1	5.83	95.4	4.6	18.40	95.5	4.5	21.1			
Nursing home care	52.22	44.6	55.4	.77	20.4	100.0	16.04	20.6	79.4	404.9			
Other health services	17.64	25.7	74.3	12.32	10.7	89.3	20.43	34.1	65.9	18.9			
CONTRACTOR OCTATORS	11.04	20.1	14.0	14.74	TO . 1	د وون	~U•43	74 ° T	03.3	TO * 2	, 0.9	23 • T	

Table 81. Personal health care per capita expenditures, according to age, source of payment, and type of expenditure: United States, selected years 1965-78--Continued

	All ages		Under 19 years		19-64 years Source of payment			65 years and over Source of payment				
Year and type of expenditure	Source of payment			Source of payment								
	Per — capita amount	Pri- vate	Public	Per — capita amount	Pri- vate	Public	Per capita amount	Pri- vate	Public	Per - capita amount	Pri- vate	Public
1977		Percent of total Percent of total		Percent of total				Percent of tot				
All expenditures	\$674.46	61.0	39.0	\$258.77	71.5	28.5	\$690.76	71.2	28.8	\$1,821.14	36.1	63.9
Hospital care————————————————————————————————————	307.13 141.29 52.69 16.73 62.45 15.62 60.44 18.11	45.6 74.1 95.7 77.3 91.3 91.4 45.5 27.1	54.4 25.9 4.3 22.7 8.7 8.6 54.5 72.9	92.84 67.61 35.33 4.98 37.19 6.22 .86 13.72	54.6 84.4 91.4 48.9 94.2 95.2 3.3 10.6	45.4 15.6 8.6 51.1 5.8 4.8 96.7 89.4	334.95 148.66 62.85 18.99 65.02 19.57 19.36 21.36	59.2 84.5 96.9 88.5 93.0 95.4 20.2 35.1	40.8 15.5 3.1 11.5 7.0 4.6 79.8 64.9	794.72 320.59 49.96 39.53 123.69 22.50 456.18 13.96	12.0 41.8 96.1 59.0 84.2 69.9 51.5	88.0 58.2 3.9 41.0 15.8 30.1 48.5 90.0
All expenditures	752.98	61.3	38.7	286.07	71.3	28.7	763.96	71.4	28.6	2,026.19	36.9	63.2
Hospital care————————————————————————————————————	340.93 158.08 59.64 19.17 67.70 17.40 70.64 19.43	46.2 73.2 95.9 77.3 91.4 90.8 46.9 27.1	53.8 26.8 4.1 22.7 8.6 9.2 53.1 72.9	101.76 75.06 40.01 5.73 40.63 6.92 1.00 14.97	54.2 84.0 91.6 48.5 93.9 95.4 1.5 10.9	45.8 16.0 8.4 51.5 6.1 4.6 98.5 89.1	369.98 163.56 70.75 21.58 70.02 21.62 23.67 22.77	59.9 84.3 97.1 89.0 93.1 95.2 19.6 35.0	40.1 15.7 2.9 11.0 6.9 4.8 80.4 65.0	868.86 365.70 56.76 44.74 132.61 24.83 518.14 14.53	12.5 40.6 96.7 57.9 84.4 66.9 53.8 9.9	87.5 59.4 3.3 42.1 15.6 33.2 46.2 90.1

SOURCE: Office of Research, Demonstrations, and Statistics: Age differences in health care spending, 1978, by C. R. Fisher. Health Care Financing Review. HCFA Pub. No. 03045. Health Care Financing Administration. Washington. U.S. Government Printing Office, Spring 1980.

Table 82. Medicare expenditures and percent distribution, according to type of service: United States, selected years 1967-81

•	Year									
Type of service	1967	1970	1975	1979	1980	1981				
			Amount in	billions						
Total	\$ 4.5	\$ 7.1	\$ 15.6	\$ 29.3	\$ 35.7	\$ 43.5				
			Percent di	stribution						
All services	100.0	100.0	100.0	100.0	100.0	100.0				
Hospital care————————————————————————————————————	69.0 24.7 4.6 1.7	71.8 22.5 4.2 1.4	74.8 21.3 1.9 1.9	72.1 22.1 1.4 4.4	72.6 21.8 1.1 4.5	72.5 22.2 0.9 4.4				

Preliminary estimates.

SOURCES: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982; Unpublished data.

Other services include home health agencies, home health services, eyeglasses and appliances, and other professional services.

Table 83. Medicaid expenditures¹ and percent distribution, according to type of service: United States, selected years 1967-81

(Data are compiled from State and Federal Government sources)

	Year									
Type of service	1967	1970	1975	1979	1980	19812				
			Amount i	n billions						
Total	\$ 2.9	\$ 5.2	\$ 13.5	\$ 21.8	\$ 25.5	\$ 29.7				
			Percent d	listribution						
All services	100.0	100.0	100.0	100.0	100.0	100.0				
Hospital care	42.3	42.9	34.6	37.3	36.7	35.9				
Physician services	10.9	13.3	14.0	10.1	9.8	9.4				
Dentist services	4.4	3.2	2.9	1.8	2.0	2.0				
Other professional services	0.9	1.4	1.5	2.3	2.0	1.0				
Drugs and drug sundries	7.2	7.9	6.6	5.5	5.5	5.7				
Nursing home care	31.7	27.2	36.0	39.6	39.8	40.3				
Other health services ³	2.6	4.1	4.4	3.2	4.3	5.7				

 $^{^{1}}$ Expenditures from Federal, State, and local funds under Medicaid. Includes per capita payments for Part B of Medicare and excludes administrative costs.

SOURCES: Bureau of Data Management and Strategy: National health expenditures, 1981, by R. M. Gibson. <u>Health Care Financing Review</u>. HCFA Pub. No. 03146. Health Care Financing Administration. Washington. U.S. Government Printing Office, Sept. 1982; Unpublished data.

²Preliminary estimates.

³Other services include laboratory and radiological services, home health, and family planning services.

Table 84. Veterans' medical care expenditures and percent distribution, according to type of expenditure: United States, selected fiscal years

(Data are compiled from Veterans Administration sources)

There of annuality					Year				
Type of expenditure	1965	1970	1975	1976	19 77 ²	1978 ²	1979 ²	1980 ²	1981 ²
				Amou	nt in millio	าร			· · · · · · · · · · · · · · · · · · ·
Total	\$1,150.1	\$1,688.6	\$3,328.2	\$3,838.8	\$4,376.3	\$4,809.3	\$5,159.5	\$5,981.3	\$6,378.2
				Perce	ent distribut	ion			
All expenditures	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
npatient hospital	81.9	71.3	66.4	65.6	64.8	64.3	64.4	64.3	63.1
utpatient care	12.0	14.0	17.8	18.5	18.8	18.9	18.5	19.1	19.5
A nursing homes and domiciliaries	2.0	4.2	4.0	4.0	4.0				
	2.9	4.3	4.8	4.8	4.8	5.1	5.1	5.1	5.1
ommunity nursing homes	0.0	1.2	1.4	1.5	1.7	1.8	1.9	2.0	2.0
ll others ³	3.2	9.1	9.6	9.7	9.8	10.0	10.1	9.6	10.3

SOURCE: Budget Office, Veterans Administration: Unpublished data.

¹Medical care expenditures exclude construction, medical administration, and miscellaneous operating expenses.

²Data for fiscal year ending September 30; all other data for fiscal year ending June 30.

³Includes miscellaneous benefits and services, contract hospitals, education and training, subsidies to State veterans' hospitals, nursing homes, and domiciliaries, and the Civilian Health and Medical Program of the Veterans Administration.

Table 85. National funding for health research and development and average annual percent change, according to source of funds: United States, selected years 1960-81

(Data are based on multiple sources)

			Source of funds						
Year and period	All funding	Govern	nment		Private				
		Federal	State and local	Industry?	nonprofit organizations				
		Ar	mount in millio	ons					
1960————————————————————————————————————	\$ 884 2,785 2,846 3,168 3,536 3,750 4,443 4,701 5,107 5,621 6,279 7,128 7,942 8,598	\$ 448 1,674 1,667 1,877 2,147 2,225 2,754 2,832 3,059 3,396 3,811 4,321 4,723 4,898	\$ 44 144 169 198 228 245 254 286 312 338 386 415 473 507	\$ 253 754 795 860 934 1,048 1,183 1,319 1,469 1,614 1,800 2,093 2,433 2,864	\$139 213 215 233 227 232 252 264 267 273 282 299 313 329				
1960-80	11.6 13.6 9.9 11.3 11.6 6.0 18.5 5.8 8.6 10.1 11.7 13.5 11.4 8.1	12.5 15.8 9.9 12.6 14.4 3.6 23.8 2.8 8.0 11.2 12.2 13.4 9.3 3.7	12.4 14.1 11.2 17.2 15.2 7.5 3.7 12.6 9.1 8.3 14.2 7.5 14.0 7.2	11.9 12.9 10.5 8.2 8.6 12.2 12.9 11.5 11.4 9.9 11.5 16.3 16.2	4.3 4.9 3.5 8.4 -2.6 2.2 8.6 4.8 1.1 2.3 3.3 6.0 4.7 5.1				

Revised figures.

SOURCE: Office of Program Planning and Evaluation, National Institutes of Health, Public Health Service: Selected data.

Includes expenditures for drug research. These expenditures are included in the "drugs and sundries" component of the Health Care Financing Administration's National Health Expenditure Series, not under "research."

3Estimates.

Table 86. Federal obligations for health research and development and percent distribution, according to agency: United States, selected fiscal years 1970-81

(Data are compiled from Federal Government sources)

Year								
Agency	1970 ¹	1975 ¹	1976 ¹	1977	1978	1979	1980	1981
				Amount in	millions			
Total	\$1,666.6	\$2,831.7	\$3,058.7	\$3,395.9	\$3,811.2	\$4,321.2	\$4,722.6	\$4,897.8
				Percent di	stribution	ì		
All Federal agencies	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Department of Health and Human								
Services	70.6	77.6	77.9	78.1	79.0	79.9	78.2	79.1
National Institutes of Health-	52.4	66.4	67.4	67.1	67.7	68.3	67.4	68.1
Other Public Health Service	16.2	9.8	9.4	9.1	9.6	9.7	9.7	10.0
Other Department of Health and								
Human Services	2.0	1.3	1.1	1.9	1.8	1.8	1.1	1.0
Other agencies	29.4	22.4	22.1	21.9	21.0	20.2	21.8	20.9
Department of Agriculture	3.0	2.2	2.0	2.5	2.5	2.6	3.1	3.0
Department of Defense	7.5	4.1	3.9	4.4	4.3	4.3	4.5	5.0
Department of Education ²	•••	•••	•••	•••	•••	•••	0.7	0.6
Department of Energy ³	•••	•••	• • •	• • •	5.1	4.4	4.5	4.0
Department of the Interior-	0.7	0.3	0.4	0.3	0.4	0.5	0.5	0.4
Department of State4	0.6	0.2	0.3	0.7	0.5	0.5	•••	•••
Agency for International								
Development ⁴	•••	•••	• • •	•••	• • •	• • •	0.3	0.3
Atomic Energy Commission ³	6.3	• • •	• • •	• • •	•••	• • •	• • •	•••
Energy Research and Development								
Administration3	•••	5.8	5.5	5.3	• • •	•••	•••	•••
Environmental Protection Agency	•••	1.3	2.1	1.7	1.5	1.6	1.7	1.5
National Aeronautics and Space								
Administration	5.2	2.6	2.4	1.4	1.5	1.0	1.5	1.4
National Science Foundation-	1.7	1.6	1.7	1.6	1.7	1.7	1.6	1.4
Veterans Administration	3.5	3.3	3.2	3.2	3.0	3.0	2.8	2.9
All other departments and agencies-	0.9	1.0	0.7	0.7	0.5	0.4	0.4	0.4

¹Data for fiscal year ending June 30; all other data for fiscal year ending September 30. ²Formerly a part of the Department of Health, Education, and Welfare.

SOURCE: Office of Program Planning and Evaluation, National Institutes of Health, Public Health Service: Selected data.

³Data for the Atomic Energy Commission, Energy Research and Development Administration, and Department of Energy form a continuous series.

⁴Data for the Department of State and Agency for International Development form a continuous series.

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Appendix I: Sources and limitations of data

Introduction

This report consolidates the most current data on the health of the population of the United States, the availability and use of health resources, and health care expenditures. The information was obtained from the data files and/or published reports of many governmental and nongovernmental agencies and organizations. In each case, the sponsoring agency or organization collected data using its own methods and procedures. Therefore, the data in this report vary considerably with respect to source, method of collection, definitions, and reference period.

Generally, the data presented in the detailed tables are from the ongoing data collection systems of the National Center for Health Statistics (NCHS). However, health care manpower data come primarily from the Bureau of Health Professions, Health Resources and Services Administration, and the American Medical Association. National health expenditures data were compiled by the Office of Research, Demonstrations, and Statistics, Health Care Financing Administration.

Although a detailed description and comprehensive evaluation of each data source is beyond the scope of this appendix, users should be aware of the general strengths and weaknesses of the different data collection systems. For example, populationbased surveys obtain socioeconomic data, data on family characteristics, and information on the impact of an illness, such as days lost from work or limitation of activity. They are limited by the amount of information a respondent remembers or is willing to report. Detailed medical information, such as precise diagnoses or the types of operations performed, may not be known and so will not be reported. Conversely, health care providers, such as physicians and hospitals, usually have good diagnostic information but little or no information about the socioeconomic characteristics of individuals or the impact of an illness on the individual.

The population covered by different data collection systems may not be the same, and understanding the differences is critical to interpreting the data. Data on vital statistics and national expenditures cover the entire population. Most data on morbidity and utilization of health resources cover only the civilian noninstitutionalized population. Thus, statistics are not included for military personnel, who are usually young; for institutionalized people, who may be any age; or for nursing home residents, who are usually old.

All data collection systems are subject to error, and records may be incomplete or contain inaccurate information. People may not remember essential information, a question may not mean the same thing to different respondents, and some institutions or individuals may not respond at all. The sponsoring agencies do the best they can, but it is not always possible to measure the magnitude of these errors or their impact on the data. Where possible, the tables have notes describing the universe and the method of data collection to enable the user to place his or her own evaluation on the data. In many instances, data do not add to totals because of rounding.

Statistics based on samples have sampling errors in addition to errors mentioned above. A sampling error is a measure of the variability introduced because only a sample of the universe was taken. The fact that a sample has an additional source of error does not mean that sample data are less reliable than full-count data. Frequently, the money saved by taking only a sample is spent on reducing other forms of error through more pretesting of survey forms, better quality control, and other measures.

The descriptive summaries that follow provide a general overview of study design, methods of data collection, and reliability and validity of the data. More complete and detailed discussions are found in the publications referenced at the end of each summary. The data set or source is listed under the agency or organization that sponsored the data collection.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Health Service

National Center for Health Statistics

National Vital Statistics System

The vital statistics system of the National Center for Health Statistics (NCHS) collects and publishes data on births, deaths, marriages, and divorces in the United States. Fetal deaths are classified and tabulated separately from other deaths. The Division of Vital Statistics obtains information on births and deaths from the registration offices of all States, New York City, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam. Geographic coverage for births and deaths has been complete since 1933.

Until 1972, microfilm copies of all death certificates and a 50-percent sample of birth certificates were received from all registration areas and processed by NCHS. Beginning in 1972, some States began sending their data to NCHS through the Cooperative Health Statistics System (CHSS). States that participated in the CHSS program processed 100 percent of their death and birth records and sent the entire data file to NCHS on computer tape. Currently, the data are sent to NCHS through the Vital Statistics Cooperative Program (VSCP), following the same procedures as the CHSS. The number of participating States has grown from 6 in 1972 to 44 in 1981.

The standard certificates of birth, death, and fetal death recommended by NCHS are modified in each registration area to serve the area's needs. However, most certificates conform closely in content and arrangement to the standard certificate, and all certificates contain a minimum data set specified by NCHS.

In most areas, practically all births and deaths are registered. The most recent test of the completeness of birth registration, conducted on a sample of births from 1964 to 1968, showed that 99.3 percent of all births in the United States during that period were registered. No comparable information is available for deaths, but it is generally believed that death registration in the United States is at least as complete as birth registration.

For more information, see: National Center for Health Statistics, *Vital Statistics of the United States*, 1978, Vol. I, DHHS Pub. No. (PHS) 82-1100 and Vol. II, Part A, DHHS Pub. No. (PHS) 82-1101, Public Health Service, Washington, U.S. Government Printing Office, 1982.

National Health Interview Survey

The National Health Interview Survey (NHIS) is a continuing nationwide sample survey in which data are collected through personal household interviews. Information is obtained on personal and demographic characteristics, illnesses, injuries, impairments, chronic conditions, utilization of health resources, and other health topics. The household questionnaire is reviewed each year, with supplemental topics being added or deleted. For most topics, data are collected over an entire calendar year. The universe for NHIS is the civilian noninstitutionalized population of the United States. Members of the Armed Forces, U.S. nationals living in foreign countries, and persons who died during the reference period are excluded.

The survey is based on a multistage, probability cluster sample of 376 primary sampling units selected from approximately 1,900 geographically defined units in the first stage, and 12,000 segments containing about 42,000 eligible occupied households in the final stage. The usual NHIS sample is about 111,000 persons in 41,000 interviewed households in a year. However, the fourth quarter of the 1980 survey had a sample reduction of 4 weeks of interviewing because of budgetary restrictions. During the 48 weeks in 1980, the sample was about 103,000 persons interviewed in approximately 39,000 households. Comparability with previous annual estimates is not affected by the reduced sample because the weighting procedure employed by NHIS adjusts for the missing weeks. The response rate is ordinarily about 96 percent of the eligible households. National estimates are based on a four-stage estimation procedure involving inflation by the reciprocal of the probability of selection, a nonresponse adjustment, ratio adjustment, and poststratification.

For more detailed information on NHIS design, limitations of data, and sampling errors of the estimates, see: National Center for Health Statistics, Current estimates from the National Health Interview Survey, United States, 1980, by S. S. Jack, *Vital and Health Statistics*, Series 10-No. 139, DHHS Pub. No. (PHS) 82-1567, Public Health Service, Washington, U.S. Government Printing Office, Dec. 1981.

National Health Examination Survey

The National Health Examination Survey (NHES) is a continuing nationwide sample survey conducted by the National Center for Health Statistics in which data for determining the health status of the population are collected through direct standardized physical examinations, clinical and laboratory tests, and measurements. The content of the NHES program is revised periodically and selected components are added or deleted to meet the current needs for health data of this type.

For the first program or cycle of the National Health Examination Survey (NHES I), 1960-62, data were collected on the total prevalence of certain chronic diseases as well as the distributions of various physical and physiological measures, including blood pressure and serum cholesterol levels. For that program, a highly stratified, multistage probability sample of 7,710 adults, of whom 86.5 percent were examined, was selected to represent the 111 million civilian noninstitutionalized adults 18-79 years of age in the United States at that time. The sample areas consisted of 42 primary sampling units (PSU's) from the 1,900 geographic units.

In 1971, a nutrition surveillance component was added and the survey name was changed to the National Health and Nutrition Examination Survey.

For further information on NHES I, see: National Center for Health Statistics, Cycle I of the National Health Examination Survey, sample and response, United States, 1960-62, T. Gordon and H. W. Miller, Vital and Health Statistics, PHS Pub. No. 1000-Series 11-No. 1, Public Health Service, Washington, U.S. Government Printing Office, Apr. 1964.

National Health and Nutrition Examination Survey

This survey collects health-related data that can be obtained only by direct physical examinations, clinical and laboratory test, and related measurement procedures. In the first National Health and Nutrition Examination Survey (NHANES-I), conducted from 1971 through 1974, a major purpose was to measure and monitor indicators of the nutritional status of the American people through dietary intake data, biochemical tests, physical measurements, and clinical assessments for evidence of nutritional deficiency. Detailed examinations were given by dentists, ophthalmologists, and dermatologists with an assessment of need for treatment. In addition, data were obtained for a subsample of adults on overall health care needs and behavior, and more detailed examination data were collected on cardiovascular, respiratory, arthritic, and hearing conditions.

The NHANES-I target population was the civilian noninstitutionalized population 1-74 years of age residing in the coterminous United States, except for people residing on any of the reservation lands set aside for the use of American Indians. The sample design was a multistage, stratified probability sample of clusters of persons in land-based segments. The sample areas consisted of 65 primary sampling units (PSU's) selected from the 1,900 PSU's in the coterminous United States. A subsample of persons 25-74 years of age was selected to receive the more detailed health examination. Groups at high risk of malnutrition were oversampled at known rates throughout the process.

Household interviews were completed for more than 96 percent of the 28,043 persons selected for the NHANES-I sample, and about 75 percent (20,749) were examined.

For NHANES-II, conducted from 1976 through 1980, the nutrition component remained nearly identical to that fielded for NHANES-I. In the medical area, primary emphasis was placed on diabetes, kidney and liver functions, allergy, and speech pathology.

The NHANES-II target population was the civilian noninstitutionalized population 6 months-74 years of age residing in the United States, including Alaska and Hawaii. NHANES-II utilized a multistage probability design that involved selection of PSU's, segments (clusters of households) within PSU's, households, eligible persons, and finally sample persons. The sample design provided for oversampling among those persons 6 months-5 years of age, those 60-74 years of age, and those living in poverty areas.

A sample of 27,801 persons was selected for NHANES-II. Of this sample, 20,322 (73.1 percent) were examined.

The estimation procedure used to produce national statistics for NHANES-I and NHANES-II involved inflation by the reciprocal of the probability of selection, adjustment for nonresponse, and post-stratified ratio adjustment to population totals. Sampling errors also were estimated to measure the reliability of the statistics.

For more information on NHANES-I, see: National Center for Health Statistics, Plan and operation of the National Health and Nutrition Examination Survey, United States, 1971-1973, by H. W. Miller, Vital and Health Statistics, Series 1-Nos. 10a and 10b, DHEW Pub. No. (HSM) 73-1310, Health Services and Mental Health Administration, Washington, U.S. Government Printing Office, Feb. 1973; and National Center for Health Statistics, Plan and operation of the NHANES-I Augmentation Survey of adults 25-74 years, United States, 1974-1975, by A. Engel, R. S. Murphy, K. Maurer, and E. Collins, Vital and Health Statistics, Series 1-No. 14, DHEW Pub. No. (PHS) 78-1314, Public Health Service, Washington, U.S. Government Printing Office, June 1978.

For more information on NHANES-II, see: National Center for Health Statistics, Plan and operation of the second National Health and Nutrition Examination Survey, 1976-80, by A. McDowell, A. Engel, J. T. Massey, and K. Maurer, Vital and Health Statistics, Series 1-No. 15, DHHS Pub. No. (PHS) 81-1317, Public Health Service, Washington, U.S. Government Printing Office, July 1981.

National Master Facility Inventory

The National Master Facility Inventory (NMFI) is a comprehensive file of inpatient health facilities in the United States. The three broad categories of facilities in NMFI are hospitals, nursing and related care homes, and other custodial or remedial care facilities. To be included in NMFI, hospitals must have at least six inpatient beds, and nursing and related care homes must have at least three inpatient beds.

NMFI is kept current by the periodic addition of names and addresses obtained from State licensing agencies for all newly established inpatient facilities. In addition, annual surveys of hospitals and periodic surveys of nursing homes and other facilities are conducted to update name and location, type of business, number of beds, and number of residents or patients in the facilities.

From 1968 through 1975, the hospital survey was conducted in conjunction with the American Hospital Association (AHA) Annual Survey of Hospitals. AHA performed the data collection for its member hospitals, while the National Center for Health Statistics (NCHS) collected the data for the approximately 400 non-AHA registered hospitals. Since 1976, however, all of the data collection has been performed by AHA.

Hospitals are requested to report data for the full year ending September 30. More than half of the responding hospitals used this reporting period for the 1980 survey. The remaining hospitals used various other reporting periods.

The nursing home and other facilities survey was conducted by NCHS in 1963, 1967, 1969, 1971, 1973, 1976, and 1978. In 1978, data for 26 States were collected at least partially through the Cooperative Health Statistics System (CHSS). There may have been changes in data collection procedures, coverage, definitions, and concepts in preliminary data from these 26 States in 1978.

The response rate for the 1980 hospital survey was about 90 percent. Low response rates and other reporting difficulties with the 1978 nursing home and other facilities survey prevented the use of 1978 nursing home data for California, New York, North Carolina, and the District of Columbia; 1976 data have been substituted for these four areas. Also because of low response rates, the 1978 data on other facilities did not meet NCHS standards of reliability and precision and are not available.

Statistics derived from the hospital and nursing home and other facilities surveys were adjusted for both facility and item nonresponse. Missing items on the questionnaire were imputed, when possible, by using information reported by the same facility in a previous survey. When data were not available from a previous census for a responding facility, the data were imputed by using data from similar responding facilities. Similar facilities are defined as those with the same types of business, ownership, service, and approximately the same bed size.

For more detailed information on NMFI, see: National Center for Health Statistics, Design and methodology of the 1967 Master Facility Inventory Survey, by G. G. Hollis, *Vital and Health Statistics*, PHS Pub. No. 1000-Series 1-No. 9, Public Health Service, Washington, U.S. Government Printing Office, Jan. 1971.

National Hospital Discharge Survey

The National Hospital Discharge Survey (NHDS) is a continuing nationwide sample survey of short-stay hospitals in the United States. The scope of NHDS encompasses patients discharged from non-institutional hospitals, exclusive of military and Veterans Administration hospitals, located in the 50 States and the District of Columbia. Only hospitals having six or more beds for patient use and those in which the average length of stay for all patients is less than 30 days are included in the survey. Although all discharges of patients from these hospitals are within the scope of the survey, discharges of newborn infants from all hospitals are excluded from this report as well as discharges of all patients from Federal hospitals.

The sample was selected from a frame of about 7,500 short-stay hospitals listed in the National Master Facility Inventory. A two-stage stratified sample design was used, and hospitals were stratified according to bed size and geographic region. The largest hospitals were selected with certainty in the sample, and the probability of selection of a hospital decreased as the bed size of the hospital decreased. Within each sample hospital, a systematic random sample of discharges was selected from the daily listing sheet. The within-hospital sampling ratio for selecting discharges varied inversely with the probability of selection of the hospital, so that the overall probability of selecting a discharge was approximately the same in each bed-size class.

Survey hospitals used an abstract form to transcribe data from the face sheet of hospital records. Forms were completed either by hospital staff or representatives of the National Center for Health Statistics.

The basic unit of estimation for NHDS was the sample patient abstract. The estimation procedure involved inflation by the reciprocal of the probability of selection, adjustment for nonresponding hospitals and missing abstracts, and ratio adjustments to fixed totals. Of the 544 hospitals selected for the survey, 492 were within the scope of the survey, and 420 participated in the survey in 1980. Data were abstracted from about 224,000 medical records.

For more detailed information on the design of NHDS and the magnitude of sampling errors associated with NHDS estimates, see: National Center for Health Statistics, Utilization of short-stay hospitals, annual summary for the United States, 1980, by B. J. Haupt, *Vital and Health Statistics*, Series 13-No. 64, DHHS Pub. No. (PHS) 82-1725, Public Health Service, Washington, U.S. Government Printing Office, Mar. 1982.

National Nursing Home Survey

Two sample surveys were conducted by the National Center for Health Statistics to obtain information on nursing homes, their expenditures, residents, staff, and, in the most recent survey, discharged patients. The first survey was conducted between August 1973 and April 1974. The most recent National Nursing Home Survey (NNHS) was conducted from May through December 1977.

Data on facilities were collected by personal interviews with administrators; facility accountants completed questionnaires on expenditures. Resident data were collected by a nurse familiar with the care provided to the resident. The nurse relied on the medical record and personal knowledge of the residents. Employees completed a self-administered questionnaire. Discharge data, collected only in the most recent NNHS, were based on information recorded in the medical record.

For the initial survey conducted in 1973-74, the universe included only those nursing homes that provided some level of nursing care. Thus, homes providing only personal or domiciliary care were excluded. The sample of 2,118 homes was selected from the 17,685 homes that provided some level of nursing care and were listed in the 1971 National Master Facility Inventory (NMFI) or those which opened for business in 1972. Data were obtained from about 20,600 staff and 19,000 residents. Response rates were 97 percent for facilities, 88 percent for expenditures, 98 percent for residents, and 82 percent for staff.

The scope of the 1977 NNHS encompassed all types of nursing homes, including personal care and domiciliary care homes. The sample of about 1,700 facilities was selected from 23,105 nursing homes in the sampling frame, which consisted of all homes listed in the 1973 NMFI and those opening for business between 1973 and December 1976. Data were obtained from about 13,600 staff, 7,000 residents, and 5,100 discharged residents. Response rates were 95 percent for facilities, 85 percent for expenses, 81 percent for staff, 99 percent for residents, and 97 percent for discharges.

Statistics from NNHS were derived by a ratioestimating procedure. Statistics were adjusted for failure of a home to respond, failure to fill out one of the questionnaires, and failure to complete an item on a questionnaire.

For more information on the 1973-74 NNHS, see: National Center for Health Statistics, Selected operating and financial characteristics of nursing homes, United States, 1973-74 National Nursing Home Survey, by M. R. Meiners, Vital and Health Statistics, Series 13-No. 22, DHEW Pub. No. (HRA) 76-1773, Health Resources Administration, Washington, U.S. Government Printing Office, Dec. 1975. For more information on the 1977 NNHS, see: National Center for Health Statistics, The National Nursing Home Survey, 1977 summary for the United States, by J. F. Van Nostrand, A. Zappolo, and E. Hing, et al., Vital and Health Statistics, Series 13-No. 43, DHHS Pub. No. (PHS) 79-1794, Public Health Service, Washington, U.S. Government Printing Office, July 1979.

National Ambulatory Medical Care Survey

The National Ambulatory Medical Care Survey (NAMCS) is a continuing national probability sample of ambulatory medical encounters. The scope of the survey covers physician-patient encounters in the offices of nonfederally employed physicians classified by the American Medical Association or American Osteopathic Association as "office-based, patient care" physicians. Excluded are visits to hospital-based physicians, visits to specialists in anesthesiology, pathology, and radiology, and visits to physicians who are principally engaged in teaching, research, or administration. Telephone contacts and nonoffice visits are also excluded.

A multistage probability design is employed. The first-stage sample consists of 87 primary sampling units (PSU's) selected from about 1,900 such units into which the United States has been divided. In each sample PSU, a sample of practicing physicians is selected. The final stage involves selection within a randomly assigned 7-day reporting period, and the selection of samples of patient visits during that period.

For the 1980 survey, a sample of 2,959 non-Federal, office-based physicians was selected from master files maintained by the American Medical Association and the American Osteopathic Association. The physician response rate for 1980 was 77.2 percent, providing data concerning a random sample of about 46,081 patient visits.

The estimation procedure used in NAMCS basically has three components: inflation by the reciprocal of the probability of selection, adjustment for non-response, and ratio adjustment to fixed totals.

For more detailed information on the design of NAMCS and the magnitude of sampling errors associated with NAMCS estimates, see: National Center for Health Statistics, 1977 summary, National Ambulatory Medical Care Survey, by T. Ezzati and T. McLemore, Advance Data From Vital and Health Statistics, No. 48, DHEW Pub. No. (PHS) 79-1250, Public Health Service, Hyattsville, Md., Apr. 13, 1979.

HEALTH RESOURCES AND SERVICES ADMINISTRATION

Bureau of Health Professions

Medical Specialist Supply Projections

In an ongoing effort, the Division of Manpower Analysis, Bureau of Health Professions (formerly the Bureau of Health Manpower), evaluates both the current and future supply of health manpower in the various occupations.

The 1974 supply of active physicians (M.D.'s) by specialty was used as the starting point for the projections of active physicians published in 1980. The major source of data used to obtain 1974 figures was the American Medical Association (AMA) Physician Masterfile.

The projections were derived essentially from two distinct estimation matrices. The first matrix produced a "basic" projection of year-by-year future M.D. graduates and separations from the active workforce by country of medical education. Estimates of first-year enrollments, student attrition, other medical school-related trends, and a model of foreign and Canadian medical graduate immigration were used. The second matrix distributed the future graduates and separations by specialty, disaggregated by country of medical education. Projections of firstyear residency trends were used, and deaths and retirements of active practitioners were distributed among the specialties proportionate to the supply in each specialty as of 1974. Mortality and retirement losses were computed by 5-year age cohorts on an annual basis, using age distributions and mortality and retirement rates from AMA data.

For more information, see: Bureau of Health Professions, Third Report to the President and Congress on the Status of Health Professions Personnel in the United States, DHHS Pub. No. (HRA) 82-2, Health Resources Administration, Hyattsville, Md., 1982.

Health Manpower Shortage Areas

Designation of Health Manpower Shortage Areas is an ongoing activity of the Division of Health Professions Analysis, Bureau of Health Professions.

Shortage areas are designated for seven professional categories in connection with three Federal programs: the National Health Service Corps and the

Loan Repayment and Scholarship programs. The designations are also used to determine funding priorities for other programs.

Areas may be considered for shortage area designation by submitting an application with supporting documentation to the Bureau of Health Professions. Criteria for designation are defined in Department of Health and Human Services regulations. Interim final regulations were published in the Federal Register on Jan. 10, 1978. Final regulations are currently being developed.

For more information, write: Distribution Studies Branch, Division of Health Professions Analysis, Bureau of Health Professions, Health Resources and Services Administration, 3700 East-West Highway, Hyattsville, Md. 20782.

CENTERS FOR DISEASE CONTROL

Bureau of Epidemiology

National Morbidity Reporting System

This is a system for collecting demographic, clinical, and laboratory data primarily from State and territorial health agencies to provide national surveillance for conditions such as rabies, aseptic meningitis, diphtheria, tetanus, encephalitis, foodborne outbreaks, and others. Completeness of reporting varies greatly, since not all cases receive medical care and not all treated conditions are reported. Although State laws and regulations mandate disease reporting, reporting to the Centers for Disease Control (CDC) by States and territories is voluntary.

Estimates of underreporting have been made for two diseases—measles and viral hepatitis. Prior to the institution of the Measles Elimination Program in 1978, it was generally accepted that about 10-15 percent of all cases of measles that occurred in the United States were reported to CDC. However, uncommon and serious conditions such as rabies are nearly always reported to CDC.

Depending on the disease, data are collected weekly or monthly and are analyzed to detect epidemiologic trends or to locate cases requiring control efforts. Data are published weekly and summarized annually.

For more information, see: Centers for Disease Control, Reported morbidity and mortality in the United States, 1980, Morbidity and Mortality Weekly Report, 29(54), Sept. 1981, or write to Centers for Disease Control, Chief, Consolidated Surveillance and Communications Activity, Bureau of Epidemiology, Atlanta, Ga. 30333.

Abortion Surveillance

The Centers for Disease Control (CDC) acquires abortion service statistics by State of occurrence

from two sources—central health agencies and hospitals and facilities. Since the initiation of epidemiologic surveillance of abortion in 8 States in 1969, the number of States from which statewide abortion data are reported increased to 48 in 1978. Most of the 45 central health agencies have established direct reporting systems, although a few collected data by surveying abortion facilities. Inquiries by CDC to hospitals and facilities provided information for four States that did not collect statewide abortion data.

The total number of abortions reported to CDC is about 18 percent less than the total estimated independently by the Alan Guttmacher Institute, the research and development division of the Planned Parenthood Federation of America, Inc.

For more information, see: Centers for Disease Control, Abortion Surveillance, 1978, Public Health Service, DHHS, Atlanta, Ga., Nov. 1980, or write to Centers for Disease Control, Director, Family Planning Evaluation Division, Center for Health Promotion and Education, Atlanta, Ga. 30333.

Bureau of State Services

U.S. Immunization Survey

This system is the result of a contractual agreement between the Centers for Disease Control and the U.S. Bureau of the Census. Estimates from the Immunization Survey are based on data obtained during the third week of each September for a subsample of households interviewed for the Current Population Survey, which is described separately in this appendix.

The reporting system contains demographic variables and vaccine history along with disease history when relevant to vaccine history. The system is used to estimate the immunization level of the Nation's child population against the vaccine preventable diseases; from time to time, immunization level data on the adult population are collected.

The scope of the U.S. Immunization Survey covers the 50 States and the District of Columbia. In the 1979 sample, approximately 45,000 household units were included in the survey sample. Six thousand sample units were found to be vacant or otherwise not to be interviewed. Of the approximately 39,000 occupied households eligible for interview, about 1,500 were not interviewed because the occupants either were not at home after repeated calls or were unavailable for some other reason.

The estimating procedure that was used involves the inflation of weighted sample results to independent estimates of the civilian noninstitutionalized population of the United States by age and race.

For more information, see: Centers for Disease Control, *United States Immunization Survey*, 1979, Public Health Service, DHHS, Atlanta, Ga., To be published.

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

National Institute on Alcohol Abuse and Alcoholism

National Surveys of Drinking

Data on trends in alcohol consumption were drawn from national surveys funded by the National Institute on Alcohol Abuse and Alcoholism and the National Institute of Drug Abuse. The 1979 survey was based on self-reported consumption and was designed to represent adults 18 years of age and over living in households in the coterminous United States. A total of 1,772 interviews were conducted, representing a response rate of 66 percent.

For more information, write: Laboratory for Epidemiology and Population Studies, National Institute on Alcohol Abuse and Alcoholism, 5600 Fishers Lane, Rockville, Md. 20857.

National Institute of Mental Health

Surveys of Mental Health Facilities

The Survey and Reports Branch of the Division of Biometry and Epidemiology conducts several surveys of mental health facilities. Some of the data in this report are derived from more than one of these surveys. The response rate to most of the items on these surveys is relatively high (90 percent or better) as is the rate for data presented in this report. However, for some survey items, the response rate may be somewhat lower.

The Inventories of Mental Health Facilities are the primary source for National Institute of Mental Health data used in this report. This data system is based on questionnaires mailed by January of each year to mental health facilities in the United States, including psychiatric hospitals, non-Federal general hospitals with psychiatric services, residential treatment centers for emotionally disturbed children, federally funded community mental health centers, freestanding outpatient psychiatric clinics, and other types of multiservice or day-night facilities.

Other surveys conducted by the Survey and Reports Branch encompass sample surveys of patients coming under care in State, county, and private mental hospitals, outpatient psychiatric services, and general hospital inpatient psychiatric units. The purpose of these surveys is to determine the characteristics of patients served by these facilities.

For more information, write: Survey and Reports Branch, Division of Biometry and Epidemiology, National Institute of Mental Health, 5600 Fishers Lane, Rockville, Md. 20857.

Health Care Financing Administration

BUREAU OF DATA MANAGEMENT AND STRATEGY

Estimates of National Health Expenditures

Estimates of public and private expenditures for health are compiled annually by type of expenditure and source of funds. The data for several Federal health programs are taken from the Office of Management and Budget's special analysis of health programs, while data for the remaining Federal health programs are supplied directly by the various agencies.

Estimates for non-Federal expenditures come from an array of sources. American Hospital Association data on hospital finances, increased slightly to allow for osteopathic hospitals, are the primary source for estimates relating to hospital care. Estimated expenditures for the services of dentists and physicians in private practice are based on the gross income from self-employed practice reported to the Internal Revenue Service. The salaries of dentists and physicians on the staffs of hospitals and hospital outpatient facilities are considered a component of hospital care. Expenditures for the education and training of medical personnel are considered to be expenditures for education, and where they can be separated, they are excluded from health expenditures. Expenditures for drugs, drug sundries, eyeglasses, and appliances exclude those provided to inpatients and are estimated principally from the report of personal consumption expenditures in the U.S. Department of Commerce's national income accounts in the Survey of Current Business. Nursing home care expenditures by both public and private sources are based on data from the National Nursing Home Survey conducted by the National Center for Health Statistics. Data on the financial expenditures of health insurance organizations come from special Social Security Administration analyses of private health insurers. Expenditures for construction represent "value put in place" for hospitals, nursing homes, medical clinics, and medical research facilities but not for private office buildings providing office space for private practitioners.

For more specific information on items included and excluded and on general methodology used, see: National health expenditures, 1981, by R. M. Gibson, *Health Care Financing Review*, HCFA Pub. No. 03146, Health Care Financing Administration, Washington, U.S. Government Printing Office, Sept. 1982.

DEPARTMENT OF COMMERCE

Bureau of the Census

U.S. Census of Population

The census of population has been taken in the United States every 10 years since 1790. The 1980 census collected data on sex, race, age, and marital status from 100 percent of the enumerated population. More detailed information such as income, education, housing, occupation, and industry were collected from a 20-percent sample. The 20-percent sample was dichotomized by size of place of residence with 50 percent of households in places of less than 2,500 population and 1 out of 6 households in places of 2,500 or more population receiving the more detailed questionnaire.

For more information on the 1980 census, see: U.S. Bureau of the Census, 1980 Census of Population and Housing, Users Guide, Part A Text, PHC 80-R1-A.

Current Population Survey

The Current Population Survey (CPS) is a household sample survey of the civilian noninstitutionalized population conducted monthly by the U.S. Bureau of the Census to provide estimates of employment, unemployment, and other characteristics of the general labor force, the population as a whole, and various other subgroups of the population.

A list of housing units from the 1970 census, supplemented by newly constructed units and households known to be missed in the 1970 census, provides the sampling frame in most areas for the present CPS. In some rural locations, current household listings of selected land areas serve as the frame.

The present CPS sample is located in 461 areas comprising 923 counties and independent cities with coverage in every State and the District of Columbia. In an average month during 1975, the number of housing units or living quarters designated for the national sample was about 58,000, of which about 3,000 were found to be nonexistent, demolished, or no longer used as living quarters. Of the remaining 55,000 units assigned for interview, about 45,000 were interviewed households, 2,000 were households at which the members were not available for interview, and 8,000 were found to be vacant, occupied by persons with usual residence elsewhere, or otherwise not eligible for interview.

The estimation procedure used involves inflation by the reciprocal of the probability of selection, adjustment for nonresponse, and ratio adjustment.

For more information, see: U.S. Bureau of the Census, *The Current Population Survey, Design and Methodology*, Technical Paper 40, Washington, U.S. Government Printing Office, Jan. 1978.

Population Estimates and Projections

National estimates are derived by use of decennial census data as benchmarks and of data available from various agencies as follows: births and deaths (Public Health Service); immigrants (Immigration and Naturalization Service); the Armed Forces (Department of Defense); net movement between Puerto Rico and the U.S. mainland (Puerto Rico Planning Board); and Federal employees abroad (Civil Service Commission and Department of Defense). State estimates are based on similar data and also on a variety of data series, including school statistics from State departments of education and parochial school systems.

National population projections indicate the approximate future level and characteristics of the population under given assumptions as to future fertility, mortality, and net immigration. The method used to develop the projections involved preparation of projections of each of the components of population change—births, deaths, and net immigration—and the combination of these with July 1 estimates of the current population. Projections for States and metropolitan areas incorporate further assumptions about population redistribution through interarea migration.

Current estimates and projections are generally consistent with offical decennial census figures and do not reflect the amount of estimated decennial census underenumeration.

For more information, see: U.S. Bureau of the Census, Projections of the population of the United States, 1977 to 2050, *Current Population Reports*, Series P-25, No. 704, Washington, U.S. Government Printing Office, 1977.

DEPARTMENT OF LABOR

Bureau of Labor Statistics

Consumer Price Index

The Consumer Price Index (CPI) is a monthly measure of price change for a fixed "market basket" of goods and services. It is revised periodically to take into account changes in what Americans buy and in the way they live. The latest revision included (1) a new CPI for all urban consumers, (2) a revision of the CPI for urban wage earners and clerical workers, and (3) a modification of some categories within the medical care component. The new indexes were introduced with the release of January 1978 data.

In this report, all CPI data shown are for urban wage earners and clerical workers. Prices for 400 items were obtained in urban portions of 39 major

statistical areas and 17 smaller cities that were chosen to represent all urban places in the United States. They were collected from about 18,000 establishments—grocery and department stores, hospitals, filling stations, and other types of stores and service establishments.

Prices of food, fuels, and a few other items were obtained every month in all 56 locations. Prices of most other commodities and services were collected every month in the five largest areas and every 3 months in other areas. Prices of most goods and services were obtained by personal visits of the Bureau's trained representatives. Mail questionnaires were used to obtain local transit fares, public utility rates, newspaper prices, fuel prices, and certain other items.

In calculating the index, price changes for the various items in each location were averaged together with weights that represent their importance in the spending of all wage earners and clerical workers. Local data were then combined to obtain a U.S. city average. Separate indexes were also published for 23 areas.

The index measures price changes from a designated reference date—1967—which equals 100. An increase of 22 percent, for example, is shown as 122. This change can also be expressed in dollars as follows: The price of a base period "market basket" of goods and services bought by urban wage earners and clerical workers has risen from \$10 in 1967 to \$12.20.

For more information, see: Bureau of Labor Statistics, Consumer Price Index, Concepts and Content Over the Years, BLS Report 517, Washington, U.S. Government Printing Office, May 1978.

Employment and Earnings

The Division of Industry Employment Statistics and the Division of Employment and Unemployment Analysis of the Bureau of Labor Statistics (BLS) publish data on employment and earnings. The data are collected by the Bureau of the Census, State Employment Security Agencies, and State Departments of Labor in cooperation with BLS.

The major data source is the Current Population Survey (CPS), a household interview survey conducted monthly by the Bureau of the Census to collect labor force data for BLS. CPS is described separately in this appendix. Data based on establishment records are also compiled each month from mail questionnaires by BLS, in cooperation with State agencies.

For more information, see: U.S. Department of Labor, Bureau of Labor Statistics, *Employment and Earnings, January 1982*, Vol. 29, No. 1, Washington, U.S. Government Printing Office, Jan. 1982.

ENVIRONMENTAL PROTECTION AGENCY

National Aerometric Surveillance Network

The Environmental Protection Agency (EPA), through extensive monitoring of activities conducted by Federal, State, and local air pollution control agencies, collects data on the five pollutants for which National Ambient Air Quality Standards have been set. These pollution control agencies submit data quarterly to EPA's National Aerometric Data Bank (NADB). There are about 3,400 total stations reporting. Data from some short-term or sporadic monitoring for such purposes as special studies and complaint investigations are usually not included in NADB because the data are not extensive enough to provide equitable comparisons with routine data from permanent monitoring sites.

For more information, see: Environmental Protection Agency, National Air Pollutant Emission Estimates, 1940-80, EPA-450/4-82-001, Research Triangle Park, N.C., Jan. 1982, or write to Office of Air Quality Planning and Standards, Environmental Protection Agency, Research Triangle Park, N.C. 27711.

UNITED NATIONS

Demographic Yearbook

The Statistical Office of the United Nations prepares the *Demographic Yearbook*, a comprehensive collection of international demographic statistics.

Questionnaires are sent annually and monthly to more than 220 national statistical services and other appropriate government offices. Data forwarded on these questionnaires are supplemented, to the extent possible, by data taken from official national publications and by correspondence with the national statistical services. To insure comparability, rates, ratios, and percentages have been calculated in the Statistical Office of the United Nations.

Lack of international comparability between estimates arises from differences in concepts, definitions, and time of data collection. The comparability of population data is affected by several factors, including (1) the definitions of the total population, (2) the definitions used to classify the population into its urban and rural components, (3) difficulties relating to age reporting, (4) the extent of over- or under-enumeration, and (5) the quality of population estimates. The completeness and accuracy of vital statistics data also vary from one country to another. Differences in statistical definitions of vital events may also influence comparability.

For more information, see: United Nations, Demographic Yearbook 1978, Pub. No. ST/ESA/

STAT/SER.R/7, United Nations, New York, N.Y., 1979.

World Health Organization

World Health Statistics Annual

The World Health Organization (WHO) is one of the specialized agencies of the United Nations. WHO publishes the World Health Statistics Annual each year. This publication is the result of a joint effort by the national health and statistical administrations of many countries, the Statistical Office of the United Nations, and the World Health Organization. It is published in three volumes: Volume I - Vital Statistics and Causes of Death; Volume II - Infectious Diseases, Cases and Deaths; Volume III - Health Personnel and Hospital Establishments.

Data in the World Health Statistics Annual are provided by national administrators in answer to questionnaires, or they are obtained from annual national publications. Some of the data are reprinted from the Demographic Yearbook.

In many cases, complete comparability of data between countries is not possible. Differences in the definition of a hospital may occur. The level of general education and professional training of health personnel may vary from country to country. Completeness of coverage also varies. Noncomparability of diagnositic coding of data can also occur.

For more information, see: World Health Organization, World Health Statistics Annual, 1980, Vols. I, II, III, Geneva, Switzerland, World Health Organization, 1980.

ALAN GUTTMACHER INSTITUTE

Abortion Survey

The Alan Guttmacher Institute (AGI) conducts an annual survey of abortion providers. Data are collected from hospitals, nonhospital clinics, and physicians identified as providers of abortion services. A survey universe of 3,092 hospitals, nonhospital clinics, and individual physicians was compiled. To assess the completeness of the provider and abortion counts, supplemental surveys were conducted of a sample of obstetrician-gynecologists and a sample of hospitals (not in original universe) that were identified as providing abortion services through the American Hospital Association survey.

The number of abortions estimated by AGI is about 22 percent more than the number reported to the Centers for Disease Control.

For more information, write to: The Alan Guttmacher Institute, 515 Madison Avenue, New York, N.Y. 10022.

AMERICAN HOSPITAL ASSOCIATION

Annual Survey of Hospitals

Data from this survey are based on questionnaires that are sent to all hospitals in the United States and its associated areas accepted for registration by the American Hospital Assocation (AHA). In 1980, questionnaires were mailed to all hospitals on AHA files. Overall, 6,420 hospitals reported data, a response rate of 89.2 percent. For nonreporting hospitals and for the survey questionnaires of reporting hospitals on which some information was missing, estimates were made for all data except those on bassinets and facilities. The estimates of the missing data were based on data furnished by reporting hospitals that were similar in terms of bed-size category, type of control, major type of service provided, and type of stay in the hospitals for which data were not reported.

Hospitals are requested to report data for the full year ending September 30. More than half of the responding hospitals used this reporting period in the 1980 survey. The remaining hospitals used various reporting periods.

For more information on the AHA Annual Survey of Hospitals, see: American Hospital Association, Hospital Statistics, 1981 Edition, Data from the American Hospital Association 1980 Annual Survey, Chicago, 1981.

AMERICAN MEDICAL ASSOCIATION

Physician Masterfile

A masterfile of physicians has been maintained by the American Medical Association (AMA) since 1906. Today, the Physician Masterfile contains data on almost every physician in the United States, both members and nonmembers of AMA, and on those graduates of American medical schools temporarily practicing overseas. The file also includes graduates of foreign medical schools who are in the United States.

A file is initiated on each individual upon entry into medical school or, in the case of foreign graduates, upon entry into the United States. A census of physicians is conducted every 3 years to update the file information on professional activities, specialization, and present employment status. The last census from which data are available was conducted in 1977. Between censuses, AMA keeps the file current by continuous checks of professional publications and State licensure notices for changes in any physician's activities. When a change is noted, the physician is sent another copy of the questionnaire. In 1976, approximately 3,600 of these questionnaires were mailed per week. The general response rate to the questionnaires is about 87 percent.

For more information on the AMA Physician Masterfile, see: Division of Survey and Data Resources, American Medical Association, *Physician Characteristics and Distribution in the U.S.*, 1981 edition, Chicago, 1982.

Annual Census of Hospitals

From 1920 to 1953, the Council on Medical Education and Hospitals of the American Medical Assocation (AMA) conducted annual censuses of all hospitals registered by AMA.

In each annual census, questionnaires were sent to hospitals asking for the number of beds, bassinets, births, patients admitted, average census of patients, lists of staff doctors and interns, and other information of importance at the particular time. Response rates were always nearly 100 percent.

The community hospital data from 1940 and 1950 presented in this report were calculated using published figures from the AMA Annual Census of Hospitals. Although the hospital classification scheme used by AMA in published reports is not strictly comparable with the definition of community hospitals, methods were employed to achieve the greatest comparability possible.

For more information on the AMA Annual Census of Hospitals, see: American Medical Association, Hospital Service in the United States, *Journal of the American Medical Association*, 11(116):1055-1144, 1940.

APPENDIX II: Glossary of Terms

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Appendix II: Glossary of terms

General terms

Social and demographic terms

Age.—Age is reported as age at last birthday, i.e., age in completed years, often calculated by subtracting date of birth from the reference date, with the reference date being the date of the examination, interview, or other contact with an individual.

Age adjustment of death rates.—Age adjustment, using the direct method, is the application of the age-specific death rates in a population of interest to a standardized age distribution in order to eliminate the differences in observed rates that result from age differences in population composition. This is usually done when comparing two or more populations at one point in time, or one population at two or more points in time.

In this report, the mortality rates are age adjusted to the U.S. population enumerated in 1940. Adjustment is based on 11 age intervals as follows: under 1 year, 1-4 years, 5-14 years, 15-24 years, 25-34 years, 35-44 years, 45-54 years, 55-64 years, 65-74 years, 75-84 years, and 85 years and over. The data from the National Health Interview Survey, National Ambulatory Medical Care Survey, and the National Hospital Discharge Survey are age adjusted to the 1970 civilian noninstitutionalized population. In these cases, adjustment is based on four age intervals. For the National Health Interview Survey, those intervals are: under 17 years, 17-44 years, 45-64 years, and 65 years and over. For the National Ambulatory Medical Care Survey and National Hospital Discharge Survey, they are: under 15 years, 15-44 years, 45-64 years, and 65 years and over.

Average annual rate of change (percent change).— In this report, average annual rates of change or growth rates are calculated as follows:

$$\left(\sqrt[N]{\frac{P_n}{P_0}}-1\right)\times 100$$

where P_n = later time period

Po = earlier time period

and N = number of years in interval

This geometric rate of change assumes that a variable increases or decreases at the same rate during each year between the two time periods.

Race.—Beginning in 1976, the Federal Government's data systems classified individuals into the following racial groups: American Indian or Alaskan Native, Asian or Pacific Islander, black, and white. In this report, three racial categories are generally used: "white," "black," and "all other." The "all other" category includes all races other than white.

Depending on the data source, the classification by race may be based on self-classification or on observation by an interviewer or other persons filling out the questionnaire. In the national vital registration system, newborn infants are assigned the race of their parents. If the parents are of different races and one is white, the child is assigned the other parent's race. If either parent is Hawaiian, the child is classified as Hawaiian. In all other cases, the child is assigned the father's race. Prior to 1964, the national vital registration system classified all births for which race was unknown as "white." The National Health Interview Survey assigns children whose parents are of different races to the race of the father.

Family income.—For purposes of the National Health Interview Survey and National Health and Nutrition Examination Survey, all people within a household related to each other by blood, marriage, or adoption constitute a family. Each member of a family is classified according to the total income of the family of which he is a member. Unrelated individuals are classified according to their own income. Family income, then, is the total income received by the members of a family (or by an unrelated individual) in the 12 months prior to interview, including wages, salaries, rents from property, interest, dividends, profits, and fees from their own business, pensions, and help from relatives.

Marital status.—The population is classified through self-reporting into the categories married and unmarried. Married includes all married people including those separated from their spouses. Unmarried includes those who are single (never married), divorced, or widowed. The Abortion Surveillance

reports of the Centers for Disease Control classify separated people as unmarried for all States except Rhode Island.

Population.—The U.S. Bureau of the Census collects and publishes data on several different types of population in the United States. Various statistical systems then use the appropriate population in calculating rates.

Total population is the population of the United States, including all members of the Armed Forces living in foreign countries, Puerto Rico, Guam, and the U.S. Virgin Islands. Other Americans abroad (e.g., civilian Federal employees and dependents of members of the Armed Forces or other Federal employees) are not included.

Resident population is the population living in the United States. This includes members of the Armed Forces stationed in the United States and their families as well as foreigners working or studying here; it excludes foreign military, naval, and diplomatic personnel and their families located here and residing in embassies or similar quarters as well as Americans living abroad. The resident population is often the denominator when calculating birth and death rates and incidence of disease.

Civilian population is the resident population excluding members of the Armed Forces. Families of members of the Armed Forces are included, however.

Civilian noninstitutionalized population is the civilian population not residing in institutions. Institutions include correctional institutions, detention homes, and training schools for juvenile delinquents; homes for the aged and dependent (e.g., nursing homes and convalescent homes); homes for dependent and neglected children; homes and schools for the mentally or physically handicapped; homes for unwed mothers; psychiatric, tuberculosis, and chronic disease hospitals and residential treatment centers. This population is the denominator in rates calculated for the National Center for Health Statistics' National Health Interview Survey, National Health and Nutrition Examination Survey, National Hospital Discharge Survey, and National Ambulatory Medical Care Survey.

Geographic terms

Division and region.—The 50 States and the District of Columbia are grouped for statistical purposes by the U.S. Bureau of the Census into nine divisions within four regions. The groupings are as follows:

NORTHEAST

New England
Maine, New Hampshire, Vermont.

Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut

Middle Atlantic New York, New Jersey, Pennsylvania

NORTH CENTRAL

East North Central Michigan, Wisconsin, Ohio, Indiana, Illinois

West North Central
Minnesota, Iowa, Missouri, North Dakota,
South Dakota, Nebraska, Kansas

SOUTH

South Atlantic

Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida

East South Central Kentucky, Tennessee, Alabama, Mississippi

West South Central Arkansas, Louisiana, Oklahoma, Texas

WEST

Mountain

Montana, Idaho, Wyoming, Colorado, New Mexico, Arizona, Utah, Nevada

Pacific

Washington, Oregon, California, Alaska, Hawaii

Level of urbanization.—Counties are classified in a Department of Agriculture system. Metropolitan counties are classified according to the size of the metropolitan area of which they are a part. Non-metropolitan counties are classified by their number of urban residents and proximity to a metropolitan area. The county classifications are as follows:

Within SMSA refers to metropolitan counties. (See "Standard Metropolitan Statistical Areas.")

Large SMSA refers to a county within an SMSA of at least 1 million population.

Core refers to counties containing the primary central city of an SMSA.

Fringe refers to suburban counties of an SMSA. Medium SMSA refers to a county within an SMSA of 250,000 to 999,999 population. Other SMSA refers to a county within an SMSA of less than 250,000 population.

Outside SMSA refers to nonmetropolitan counties.

Adjacent to SMSA refers to a county contiguous to an SMSA.

Urbanized refers to a county contiguous to an SMSA and having an aggregate urban population of at least 20,000.

Less urbanized refers to a county contiguous to an SMSA and having an aggregate urban population of 2,500 to 19,999.

Thinly populated refers to a county contiguous to an SMSA and having no urban population.

Not adjacent to SMSA refers to a county not contiguous to an SMSA.

Urbanized refers to a county not contiguous to an SMSA and having an aggregate urban population of at least 20,000.

Less urbanized refers to a county not contiguous to an SMSA and having an aggregate urban population of 2,500 to 19,999.

Thinly populated refers to a county not contiguous to an SMSA and having no urban population.

Metropolitan.—Any county within a standard metropolitan statistical area is metropolitan. Other counties are nonmetropolitan.

Registration area.—The United States has separate registration areas for birth, death, marriage, and divorce statistics, which collect data annually from States whose registration data are at least 90-percent complete.

The death registration area was established in 1900 with 10 States and the District of Columbia, while the birth registration area was established in 1915, also with 10 States and the District of Columbia. Both areas have covered the entire United States since 1933. Currently, Puerto Rico, the U.S. Virgin Islands, and Guam are also included, although in statistical tabulations they are not part of the "United States" total.

Reporting area.—In the national vital registration system, reporting requirements on birth certificates vary according to State. Thus, different numbers of States report various characteristics. For example, in 1979, births to unmarried women are reported on the birth certificate only in 39 States and the District of Columbia, and the month during which prenatal care began is reported in 44 States and the District of Columbia.

Standard metropolitan statistical area (SMSA).— This is a concept developed for use in statistical reporting and analysis. Except in the New England States, an SMSA is a county or a group of contiguous counties containing at least one city of 50,000 inhabitants or more or "twin cities" with a combined population of at least 50,000. In addition, contiguous counties are included in an SMSA if they are essentially metropolitan in character (based on criteria of labor force characteristics and population density) and are socially and economically integrated with the central city or cities.

In New England, towns and cities rather than counties are the geographic components of the SMSA. Since National Center for Health Statistics (NCHS) data are not coded to identify all towns, NCHS uses the metropolitan State economic area (MSEA), which is made up of county units, for reporting data in New England.

Health status and determinants

Fertility

Abortion.—The Centers for Disease Control's surveillance program counts legal abortions only. What constitutes a legal abortion varies, depending on a State's regulations about when one may be performed.

Birth rate.—This measure divides the number of live births in a population in a given period by the resident population at the middle of that period. The rate may be restricted to births to women of specific age, race, marital status, or geographic location, or it may be related to the entire population.

Gestation.—For both the national vital registration system and the Centers for Disease Control's Abortion Surveillance, the period of gestation is defined as beginning with the first day of the last normal menstrual period and ending with the day of birth.

Live birth.—In the World Health Organization's definition, also adopted by the United Nations and the National Center for Health Statistics, a live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy, which, after such separation, breathes or shows any other evidence of life such as heartbeat, umbilical cord pulsation, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached. Each product of such a birth is considered live born.

Live-birth order.—In the national vital registration system, this item from the birth certificate indicates the number of live births a woman has had, counting the birth being recorded.

Mortality

Cause of death.—For the purpose of national mortality statistics, every death is attributed to one underlying condition, based on information reported on the death certificate and utilizing the inter-

national rules for selecting the underlying cause of death from the reported conditions. For data years 1979-80, the *International Classification of Diseases*, *Ninth Revision* is used for coding. Earlier data used the then current revision of the *International Classification of Diseases* (table I).

Table 1. Revision of the *International Classification of Diseases*, according to year of conference by which adopted and years in use in United States

Revision of the International Classification of Diseases	Year of conference by which adopted	Years in use in United States		
First	1900	1900-1909		
Second	1909	1910-1920		
Third	1920	1921-1929		
Fourth	1929	1930-1938		
Fifth	1938	1939-1948		
Sixth	1948	1949-1957		
Seventh	1955	1958-1967		
Eighth	1965	1968-1978		
Ninth		1979-present		

Use of successive revisions for classification of diseases may introduce discontinuities in the comparability of cause-of-death statistics over time. For further discussion, see the technical appendices of the annual volumes of *Vital Statistics of the United States, Volume II, Mortality*, produced by the National Center for Health Statistics. The most recent published volume is: *Vital Statistics of the United States, 1977, Volume II, Mortality, Part A, DHHS Pub. No. (PHS) 81-1101, Public Health Service, Washington, U.S. Government Printing Office, 1981.*

Death rate.—This measure divides the number of deaths in a population in a given period by the resident population at the middle of that period. It may be restricted to deaths in specific age, race, sex, or geographic groups, or it may be related to the entire population.

Infant mortality.—Infant mortality is the death of live-born children who have not reached their first birthday and is usually expressed as a rate (i.e., the number of infant deaths during a year per 1,000 live births reported in the year).

International Classification of Diseases, Ninth Revision.—The International Classification of Diseases (ICD) classifies mortality information for statistical purposes. ICD was first used in 1900 and has been revised about every 10 years since then. The Ninth Revision, published in 1977, is used to code U.S. mortality data beginning with data for 1979. The clinical modification of the Ninth Revision is used to code U.S. morbidity data.

Both are arranged in 17 main chapters. Most of the diseases are arranged according to their principal anatomical site, with special chapters for infective and parasitic diseases; neoplasms; endocrine, metabolic, and nutritional diseases; mental diseases; complications of pregnancy and childbirth; certain diseases peculiar to the perinatal period; and ill-defined conditions. In addition, two supplemental classifications are provided: the classification of factors influencing health status and contact with health service and the classification of external causes of injury and poisoning.

The ICD codes used in this volume for cause of death are indicated on each detailed mortality table. Cause-of-death codes for table 15, Part B, are shown in table II.

Neonatal mortality.—The neonatal mortality rate is the number of deaths under 28 days of age per 1,000 live births.

Postneonatal mortality.—The postneonatal mortality rate is the number of deaths that occur from 28 days to 365 days after birth per 1,000 live births.

Fetal death.—The fetal death rate is the number of fetal deaths with stated or presumed gestation of 20 weeks or more per 1,000 total births (i.e., live births plus fetal deaths).

Life expectancy.—Life expectancy is the average number of years of life remaining to a person at a particular age and is based on a given set of age-specific death rates, generally the mortality conditions existing in the period mentioned. Life expectancy may be determined by race, sex, or other characteristics using age-specific death rates for the population with that characteristic.

Determinants and measures of health

Condition.—A health condition is a departure from a state of physical or mental well-being. Conditions, except impairments, are coded according to the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM).

Based on duration, there are two categories of conditions, acute and chronic. In the National Health Interview Survey, an acute condition is a condition which has lasted less than 3 months and has involved either a physician visit (medical attention) or restricted activity, and a chronic condition is any condition lasting 3 months or more or is one of certain conditions classified as chronic regardless of their time of onset. The National Nursing Home Survey uses a specific list of conditions classified as chronic, also disregarding time of onset.

Disability.—Disability is any temporary or longterm reduction of a person's activity as a result of an acute or chronic condition. It is often measured in terms of the number of days that a person's activity has been reduced.

Disability day.—The National Health Interview Survey identifies several types of days on which a person's usual activity is reduced because of illness or injury (reported for the 2-week period preceding the week of the interview). These short-term disability days are not mutually exclusive categories but are defined on the following page.

Table II. Cause-of-death codes for categories in Part B table 15, according to applicable revision of International Classification of Diseases

	International Classification of Diseases							
Cause of death	Sixth Revision	Seventh Revision	Eighth Revision	Ninth Revision				
	Code numbers							
Diseases of heart	400-402, 410-443	400-402, 410-443	390-398, 402, 404, 410-414, 420-429	390-398, 402, 404-429				
Cerebrovascular diseases	330-334	330-334	430-438	430-438				
Malignant neoplasms	140-205 160-164 150-156A, 157-159	140-205 160-164 150-156A, 157-159	140-209 160-163 150-159	140-208 160-165 150-159				
Breast,	170	170	174	174-175				
Pneumonia and influenza	480-483, 490-493	480-483, 490-493	470-474, 480-486	480-487				
Tuberculosis	001-019	001-019	010-019	010-018				
Chronic liver disease and cirrhosis	581	581	571	571				
Diabetes mellitus	260	260	250	250				
All accidents and adverse effects	E800-E962	E800-E962	E800-E949	E800-E949				
Motor vehicle accidents	E810-E835	E810-E835	E810-E823	E810-E825				
Suicide	E963, E970-E979	E963, E970-E979	E950-E959	E950-E959				
Homicide and legal intervention	E964, E980-E985	E964, E980-E985	E960-E978	E960-E978				

A restricted-activity day is any day on which a person cuts down on his or her usual activities for all or most of that day because of an illness or an injury. Restricted-activity days are unduplicated counts of bed-disability, work-loss, and school-loss days as well as other days during which a person cuts down on his or her usual activities.

A bed-disability day is a day on which a person stays in bed for more than half of the daylight hours (or normal waking hours) because of a specific illness or injury. All hospital days are bed-disability days. Bed-disability days may also be work-loss or school-loss days.

A work-loss day is a day on which a person did not work at his or her job or business for at least half of his or her normal workday because of a specific illness or injury. The number of work-loss days is determined only for currently employed persons.

A school-loss day is a day on which a child did not attend school for at least half of his or her normal schoolday because of a specific illness or injury. School-loss days are determined only for children 6-16 years of age. Former smoker.—Any person who has smoked at least 100 cigarettes during his or her entire life but who reports smoking no cigarettes at the present time is a former smoker.

Incidence.—Incidence is the number of cases of disease having their onset during a prescribed period of time and is often expressed as a rate (e.g., the incidence of measles per 1,000 children 5-15 years of age during a year). Incidence is a measure of morbidity or other events that occur within a specific period of time.

Limitation of activity.—Each person identified by the National Health Interview Survey as having a chronic condition is classified according to the extent to which his or her activities are limited because of the condition as follows:

- Persons unable to carry on major activity.
- Persons limited in the amount or kind of major activity performed.
- Persons not limited in major activity but otherwise limited.
- Persons not limited in activity.

Major activity (or usual activity).—This is the principal activity of a person or of his or her agesex group. For 1-5 years of age, it refers to ordinary

play with other children; for 6-16 years of age, it refers to school attendance; for 17 years of age and over, it usually refers to a job, housework, or school attendance.

Notifiable disease.—A notifiable disease is one that health providers are required, usually by law, to report to Federal, State, or local public health officials when diagnosed. Notifiable diseases are those of public interest by reason of their contagiousness, severity, or frequency.

Particulate matter.—Particulate matter is defined as particles of solid or liquid matter in the air, including both nontoxic materials (soot, dust, and dirt) and toxic materials (lead, asbestos, suspended sulfates and nitrates, etc.).

Pollutant.—A pollutant is any substance that renders the atmosphere or water foul or noxious to health.

Prevalence.—Prevalence is the number of cases of a disease, infected persons, or persons with some other attribute present during a particular interval of time. It is often expressed as a rate (e.g., the prevalence of diabetes per 1,000 persons during a year).

Self-assessment of health.—In the National Health Interview Survey, the respondents are asked to evaluate the health of everyone in their household compared with other people of the same age.

Utilization and resources

Ambulatory care

Dental visit.—The National Health Interview Survey counts visits to a dentist's office for treatment or advice, including services by a technician or hygienist acting under the dentist's supervision, as dental visits. Services provided to hospital inpatients are not included.

Disposition of visit.—As used by the National Ambulatory Medical Care Survey, this term describes the variety of followup procedures that a physician may plan for the patient, ranging from no followup to specific return contacts to referral to other providers of care.

International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM).—The ICD-9-CM is based on and is completely compatible with the International Classification of Diseases, Ninth Revision. While the Ninth Revision is used to code mortality data ("Mortality" section), ICD-9-CM is used to code morbidity data.

Diagnostic groupings and code number inclusions for tables 41, 42, and 45 are shown in table III; surgical groupings and code number inclusions for these tables are shown in table IV.

Table III. Codes for diagnostic categories in Part B tables 41, 42, and 45, according to applicable revision of International Classification of Diseases

et a set a se	International Classification of Diseases			
Diagnostic category	Eighth Revision	9th Revision, Clinical Modification 390-398, 402.1, 402.9, 404.1, 404.9, 410-414, 420-429		
Diseases of heart	390-398, 402, 404, 410-414, 420-429			
Malignant neoplasms	140-209	140-208, 230-234, 289.8		
Fracture	800-829	800-829, 905.0-905.5		
Neuroses and nonpsychotic disorders	300-309	300-316		
Pneumonia	480-486	480-486		
Congenital anomalies	740-759	740-759		
nguinal hernia	550, 552	550		
Bronchitis, emphysema, asthma	490-493	490-493		
ntercranial injury	850-854	850-854		
Lacerations	870-907	870-904, 904.02, 906.0		
Sprains and strains	840-848	840-848, 905.7		
Jicer	531-534	531-534		
Cerebrovascular diseases	430-438	430-438		
Hyperplasia of prostate	600	600		
Eye diseases and conditions	360-379	360-379		
Delivery	650-662	V27		
Disorders of menstruation	626	625.3, 626, 627.1		
Benign neoplams	210-228	210-229		
Cholelithiasis (gallstones)	574	574		
Rheumatoid arthritis and osteoarthritis	712, 713	714, 715, 720.0, 721		

Table IV. Codes for surgical categories in Part B tables 41, 42, and 45, according to applicable revision of *International Classification of Diseases*

Surgical category	Eight Revision	9th Revision, Clinical Modification
Biopsy	A1-A2	01.11-01.15; 03.32;
		04.11-04.12; 05.11;
		06.11-06.13; 07.11-
		07.17; 08.11; 09.11- 09.12; 10.21; 11.22;
		12.22; 15.01; 16.23;
		18.12; 20.32; 21.22;
		22.11; 24.11-24.12;
		25.01-25.02; 26.11;
		27.21-27.24; 28.11;
		29.12;31.43-31.44;
		33.24-33.27; 34.23- 34.27; 37.24-37.25;
		38.21; 40.11; 41.31-
		41.33; 42.24; 44.14-
		44.15; 45.14-45.15;
		45.25-45.27; 48.24-
		48.26; 49.22-49.23;
		50.11-50.12; 51.12-
		51.13; 52.11-52.12;
		54.22-54.23; 55.23-
		55.24; 56.32-56.33; 57.33-57.34; 58.23-
		58.24; 59.21; 60.11-
		60.15; 61.11; 62.11-
		62.12; 63.01; 64.11;
		65.11-65.12;66.11;
		67.11-67.12; 68.13-
		68.14; 70.23-70.24;
		71.11; 76.11; 77.40-
		77.49; 80.30-80.39; 83.21; 85.11-85.12;
		86.11
Dilation and curettage		00.11
of uterus	70.3-74.7	69.01, 69.09
Hysterectomy	69.1-69.5	68.3, 68.7
Tonsillectomy with or with-		
out adenoidectomy	21.1-21.2	28.2-28.3
Repair of inguinal hernia		53.0-53.1
Myringotomy	17,0	20.0
ture without fixation	82.0	79.0
Appendectomy		47.0
Excision of semilunar carti-		
lage of knee joint	86.5	80.6
Suture of skin or mucous		
membrane	92.5	86.5
Cardiac catheterization		37.2
Prostatectomy Excision of lesion of skin and	58.1-58.3	60.2-60.6
subcutaneous tissue	92.1-92.2	86.3-86.4
Extraction of lens	14.4-14.6	13.1-13.6
Local excision and destruction	1-1.7	10.1-10.0
of lesion of bladder	56.1-56.2	57.49-57.50
Dilation of urethra	57.5	58.6
Adenoidectomy without		
tonsillectomy	21.3	28.6
Cesarean section	77.0-77.9	74.0-74.2, 74.4, 74.9
Ligation and division of fallo-	oc -	00 0 00 0
pian tubes, bilateral	68.5	66.2, 66.3
Oophorectomy, salpingo-	67 2 67 5	6E 2 CE C
oophorectomy	67.2-67.5 43.5	65.3-65.6 51.2
OHOGOYSICOLOHITY	43.5	51.2

Office.—In the National Health Interview Survey, an office refers to the office of any physician in private practice, including physicians connected

with prepaid group practices. In the National Ambulatory Medical Care Survey, an office is any location for a physician's ambulatory practice other than hospitals, nursing homes, other extended care facilities, patients' homes, and industrial clinics. However, private offices in hospitals are included.

Physician visit.—The National Health Interview Survey counts as a physician visit a visit in person or by telephone to a doctor of medicine or doctor of osteopathy for the purpose of examination, diagnosis, treatment, or advice. The service may be provided directly by the physician or by a nurse or other person acting under the physician's supervision. Contacts involving services provided on a mass basis are not included nor are contacts for hospital inpatients.

Physician visits are generally classified by the type of place of visit. In the National Health Interview Survey, this includes the office, hospital outpatient clinic or emergency room, telephone (advice given by a physician in a telephone call), company or industrial clinic (units at a place of business that provide treatment through a physician or trained nurse), home (any place in which a person was staying at the time a physician was called there), as well as other places.

In the National Ambulatory Medical Care Survey, an office visit is any direct personal exchange between an ambulatory patient and a physician or members of his or her staff for the purposes of seeking care and rendering health services.

Principal diagnosis.—In the National Ambulatory Medical Care Survey, this is the physician's diagnosis of the patient's most important problem or complaint as evaluated at the time of the visit.

Seriousness of problem.—In the National Ambulatory Medical Care Survey, the physician indicates for each patient visit the seriousness of the problem, condition, or symptom which the patient says caused the visit. Seriousness refers to the physician's clinical judgment as to the extent the patient would be impaired if no care were given. It is expressed as very serious, serious, slightly serious, or not serious.

Inpatient care

Average daily census or average daily patients.— This refers to the average number of inpatients receiving care each day during a reporting period, excluding newborns.

Average length of stay.—In the National Hospital Discharge Survey, the average length of stay is the total number of patient days accumulated at the time of discharge, counting the date of admission but not the date of discharge by patients discharged during a reporting period, divided by the number of patients discharged.

As measured in the National Nursing Home Survey, length of stay for residents is the time from their

admission until the reporting time, while the *length* of stay for discharges is the time between the date of admission and the date of discharge.

Bed.—Any bed that is set up and staffed for use for inpatients is counted as a bed in a facility. In the National Master Facility Inventory, the count is of beds at the end of the reporting period; for the American Hospital Association, it is of the average number of beds during the entire period. The World Health Organization defines a hospital bed as one regularly maintained and staffed for the accommodation and full-time care of a succession of inpatients and situated in a part of the hospital where continuous medical care for inpatients is provided.

Day.—According to the American Hospital Association and National Master Facility Inventory, days or *inpatient days* are the number of adult and pediatric days of care rendered during a reporting period. Days of care for newborns are excluded.

In the National Health Interview Survey, hospital days during the year refer to the total number of hospital days occurring in the 12-month period prior to the interview week. A hospital day is a night spent in the hospital for persons admitted as inpatients to a hospital.

In the National Hospital Discharge Survey, days of care refer to the total number of patient days accumulated by patients at the time of discharge from non-Federal short-stay hospitals during a reporting period. All days from and including the date of admission to, but not including the date of discharge, are counted. A patient is a person who is formally admitted to the inpatient service of the hospital for observation, care, diagnosis, or treatment.

Discharge.—The National Health Interview Survey defines a hospital discharge as the completion of any continuous period of stay of 1 night or more in a hospital as an inpatient, excepting the period of stay of a well newborn infant.

According to the National Hospital Discharge Survey, American Hospital Association, and National Master Facility Inventory, this is the formal release of an inpatient by a hospital, i.e., the termination of a period of hospitalization (including stays of 0 nights) by death or by disposition to a place of residence, nursing home, or another hospital. In this report, newborn infants are excluded.

In the National Nursing Home Survey, this is the formal release of a resident by a nursing home.

First-listed diagnosis.—In the National Hospital Discharge Survey, this is the diagnosis listed first on the face sheet of the medical record.

Hospital.—According to the American Hospital Association (AHA) and National Master Facility Inventory (NMFI), hospitals are institutions licensed as hospitals whose primary function is to provide diagnostic and therapeutic patient services for medical conditions and which have at least six beds,

an organized physician staff, and continuous nursing services under the supervision of registered nurses. AHA data differ slightly from those of NMFI, since data from NMFI reflect osteopathic hospitals as well as hospitals not registered with AHA. Non-AHA hospitals comprise 5-10 percent of all hospitals in the country. The World Health Organization considers an establishment a hospital if it is permanently staffed by at least one physician, can offer inpatient accommodation, and can provide active medical and nursing care.

Hospitals may be classified by type of service, ownership, and length of stay.

General hospitals provide both diagnostic and treatment services for patients with a variety of medical conditions, both surgical and non-surgical. According to the World Health Organization, these are hospitals that provide medical and nursing care for more than one category of medical discipline (e.g., general medicine, specialized medicine, general surgery, specialized surgery, and obstetrics); excluded are hospitals, usually ones in rural areas, that provide a more limited range of care.

Psychiatric hospitals are ones whose major type of service is psychiatric care. See "Psychiatric Care" section.

Specialty hospitals, such as psychiatric, tuberculosis, chronic disease, rehabilitation, maternity, and alcoholic or narcotic, provide a particular type of service to the majority of their patients.

Federal hospitals are operated by the Federal Government.

Non-Federal government hospitals are operated by State or local governments.

Voluntary nonprofit hospitals are operated by a church or other nonprofit organization.

Proprietary hospitals are operated for profit by individuals, partnerships, or corporations.

Short-stay hospitals in the National Hospital Discharge Survey are those in which the average length of stay is less than 30 days. The American Hospital Association and National Master Facility Inventory define short-term hospitals as hospitals in which more than half the patients are admitted to units with an average length of stay of less than 30 days and long-term hospitals as ones in which more than half the patients are admitted to units with an average length of stay of 30 days or more. The National Health Interview Survey defines short-stay hospitals as any hospital or hospital department in which the type of service provided is general; maternity; eye, ear, nose, and throat; children's; or osteopathic.

Nursing care.—Nursing care is the provision of any of the following services: application of dressings or bandages; bowel and bladder retraining; catherization; enema; full bed bath; hypodermic, intramuscular, or intravenous injection; irrigation; nasal feeding; oxygen therapy; and temperature-pulse-respiration or blood pressure measurement.

Nursing home.—No uniform definition is possible because the minimum standards and regulations for nursing homes vary among the States. However, the National Master Facility Inventory includes in its count only facilities licensed by the States in which they are located. The homes are then classified according to the level of care they provide, as follows:

Nursing care homes must employ one or more full-time registered or licensed practical nurses and must provide nursing care to at least half the residents.

Personal care homes with nursing have some but fewer than half the residents receiving nursing care. In addition, such homes must employ one or more registered or licensed practical nurses or must provide administration of medications and treatments in accordance with physicians' orders, supervision of self-administered medications, or three or more personal services.

Personal care homes without nursing have no residents receiving nursing care. These homes provide administration of medications and treatments in accordance with physicians' orders, supervision of self-administered medications, or three or more personal services.

Domiciliary care homes primarily provide domiciliary care but also provide one or two personal services.

In the 1977 National Nursing Home Survey, all four categories of homes were included. In the 1973-74 survey, only nursing homes providing some level of nursing care were classified as nursing homes.

Skilled nursing facilities provide the most intensive nursing care available outside of a hospital. Facilities certified by Medicare provide posthospital care to eligible Medicare enrollees. Facilities certified by Medicaid as skilled nursing facilities provide skilled nursing services on a daily basis to individuals eligible for Medicaid benefits.

Intermediate care facilities are certified by the Medicaid program to provide health-related services on a regular basis to Medicaid eligibles who do not require hospital or skilled nursing facility care but do require institutional care above the level of room and board.

Occupancy rate.—The National Master Facility Inventory and American Hospital Association define hospital occupancy rate as the average daily census divided by the number of hospital beds during a reporting period. The occupancy rate for other facilities is calculated as the number of residents reported at the time of the interview divided by the number of beds reported.

Outpatient visit.—According to the American Hospital Association, these are visits by patients not lodged in the hospital for medical, dental, or other services. See "Ambulatory Care" section.

Primary diagnosis.—In the National Nursing Home Survey, this is the primary condition at the last examination as extracted from the resident's medical record.

Resident.—In the National Nursing Home Survey, a resident is a person who has been formally admitted to but not discharged from an establishment.

Psychiatric care¹

Addition.—An individual is classified as an addition to a psychiatric facility by being a new admission, a readmission, or a return from leave to either an inpatient or an outpatient psychiatric facility.

Mental disorder.—A mental disorder is any of several disorders listed in Chapter V of the International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM).

Mental health facility.—A mental health facility is an administratively distinct public or private agency or institution whose primary concern is the provision of direct mental health services to the mentally ill or emotionally disturbed. Facilities include public and private psychiatric hospitals, psychiatric units of general hospitals, residential treatment centers for emotionally disturbed children, federally funded community mental health centers, freestanding outpatient psychiatric clinics, multiservice mental health facilities, and halfway houses.

Psychiatric hospitals are hospitals primarily concerned with providing inpatient care and treatment for the mentally ill. Psychiatric inpatient units of Veterans Administration general hospitals and Veterans Administration neuropsychiatric hospitals are often combined into the category Veterans Administration psychiatric hospitals because of their similarity in size, operation, and length of stay. Other psychiatric hospitals include State and county mental hospitals and private mental hospitals.

General hospitals providing psychiatric services are hospitals that knowingly and routinely admit patients to a separate psychiatric unit for the purpose of diagnosing and treating psychiatric illness.

¹The definitions for psychiatric care are those used by the National Institute of Mental Health.

Residential treatment centers for emotionally disturbed children are residential institutions primarily serving emotionally disturbed children and providing treatment services, usually under the supervision of a psychiatrist.

Federally funded community mental health centers are legal entities through which comprehensive mental health services are provided to a delineated catchment area. This mental health delivery system may be implemented by a single facility (with or without subunits) or by a group of affiliated facilities which make available at least the following essential mental health services: inpatient, day treatment, outpatient, emergency care, and community consultation and education.

Freestanding outpatient psychiatric clinics are administratively distinct facilities, the primary purpose of which is to provide nonresidential mental health service and where a psychiatrist assumes medical responsibility for all patients and/or directs the mental health program.

Service mode.—Service mode and treatment modality refer generally to the kinds of mental health service available: inpatient care, outpatient care, day treatment, etc.

Inpatient care is the provision of mental health treatment to people requiring 24-hour supervision.

Outpatient care is the provision of mental health treatment on an outpatient basis and does not involve any overnight stay in an inpatient facility.

Day treatment is the provision of a planned therapeutic program during most or all of the day for people needing broader programs than are possible through outpatient visits but who do not require full-time hospitalization.

Manpower

Full-time equivalent employee (FTE).—The American Hospital Association and National Master Facility Inventory use an estimate of full-time equivalent employees that counts two part-time employees as one full-time employee, a full-time employee being someone working 35 hours a week or more. The National Nursing Home Survey uses an estimate of full-time employees that counts 35 hours of part-time employees' work per week as equivalent to one full-time employee.

Group practice.—Group practice is the application of services by three physicians or more who are formally organized to provide medical care, consultation,

diagnosis, and/or treatment through the joint use of equipment and personnel and with the income from medical practice distributed in accordance with methods previously determined by members of the group.

Nurse practitioner (NP).—These are specially trained nurses who perform acts of diagnosis, treatment, or prescription which traditionally have been within the exclusive province of the physician. Nurse practitioners function under the supervision of physicians for these medical tasks but not for their nursing practice.

Physician.—Physicians are licensed doctors of medicine or osteopathy classified by the American Medical Association and others through self-reporting, as follows:

Active physicians or professionally active physicians are ones currently practicing, regardless of the number of hours worked per week.

Federal physicians are employed by the Federal Government; non-Federal or civilian physicians are not.

Fee-for-service group practice physicians have most of their contact with patients in a group practice and none of the care they provide in this practice is on a prepaid basis. Rather, remuneration for the treatment of patients is made by a fee per unit of service provided.

Licensed physicians are authorized to practice in a State. Every State (and the District of Columbia) requires that physicians and dentists be licensed there in order to practice in that State.

Office-based physicians are physicians who spend the plurality of their time working in practices based in private offices; hospital-based physicians spend the plurality of their time as salaried physicians in hospitals.

Prepaid group practice physicians have most of their contact with patients in a group practice and all or part of the care they provide in this practice is on a prepaid basis. That is, remuneration for the treatment of some patients is made by a predetermined fee which is not related to the amount of care provided to an individual patient.

Private practice physicians are independent of any external policy control and are self-employed or salaried by a partnership. See also "Professional manpower."

Physician assistant (PA).—These are individuals with appropriate medical training who are authorized to perform medical services under the supervision of a licensed physician. The extent to which these medical services may be delegated to the PA by the physician varies from State to State.

Physician specialty.—A physician specialty is any specific branch of medicine that a physician may concentrate in. The specialty classification used by the Bureau of Health Professions and National Ambulatory Medical Care Survey (NAMCS) follows these American Medical Association categories:

Primary care specialties include general practice (or family practice), internal medicine, and pediatrics.

Medical specialties include, along with internal medicine and pediatrics, the areas of allergy, cardiovascular disease, dermatology, gastroenterology, pediatric allergy and cardiology, and pulmonary diseases.

Surgical specialties include general surgery, neurological surgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otolaryngology, plastic surgery, colon and rectal surgery, thoracic surgery, and urology. Other specialties covered by NAMCS are geriatrics, neurology, preventive medicine, psychiatry, and public health. Other specialties covered by the Bureau of Health Professions are aerospace medicine, anesthesiology, child psychiatry, neurology, occupational medicine, pathology, physical medicine and rehabilitation, psychiatry, public health, and radiology.

Place of employment.—The classification of people employed in the health service industry by place of employment is a U.S. Bureau of the Census adaptation of the U.S. Office of Management and Budget's Standard Industrial Classification Manual, 1967, which classified people according to health service industry codes 801-809.

Professional manpower.—Professional manpower includes chiropractors, dentists, dental hygienists, licensed practical nurses, pharmacists, physical therapists, physicians, podiatrists, and registered nurses as well as other occupations not covered in this report.

In the United States, counts of these professionals include only those licensed in the State where they practice, with licensure usually requiring the completion of an appropriate degree or certificate program for that profession. In international counts prepared by the World Health Organization, only those professionals active in their profession are counted.

Professionals may be classified according to specialty, place of practice, or other criteria. See "Physician."

Health expenditures

Consumer Price Index (CPI).—The CPI is prepared by the U.S. Bureau of Labor Statistics. It is a measure of the changes in average prices of the goods and services purchased by urban wage earners and by clerical workers and their families. The medical care component of the CPI shows trends in medical care prices based on specific indicators of hospital, medical, dental, and drug prices.

A recent revision of the CPI has been in use since January 1978, and changes are noted where applicable in this report.

Economic Stabilization Program (ESP).—This Federal program was established to control wages and prices. On August 15, 1971, all wages and prices were frozen for a period of 90 days, and a system of wage and price controls, administered through a cost-of-living council, was implemented. Controls continued, with periodic changes in the flexibility and intensity with which they were enforced, until their legislative authority expired in April 1974.

Gross national product (GNP).—This is the most comprehensive measure of a nation's total output of goods and services. In the United States, the GNP represents the dollar value in current prices of all goods and services produced for sale plus the estimated value of certain imputed outputs (i.e., goods and services that are neither bought nor sold). The GNP is the sum of: (1) consumption expenditures by both individuals and nonprofit organizations plus certain imputed values; (2) business investment in equipment, inventories, and new construction; (3) Federal, State, and local government purchases of goods and services; and (4) the sale of goods and services abroad minus purchases from abroad.

Medicaid.—This program is federally aided but State operated and administered. It provides medical benefits for certain low-income persons in need of medical care. The program, authorized in 1965 by Title XIX of the Social Security Act, categorically covers participants in the Aid to Families with Dependent Children program as well as some participants in the Supplemental Security Income program and other people deemed medically needy in a participating State. States also determine the benefits covered, rates of payment for providers, and methods of administering the program.

Medicare.—This is a nationwide health insurance program providing health insurance protection to people 65 years of age and over, people eligible for social security disability payments for more than 2 years, and people with end-stage renal disease, regardless of income. The program was enacted July 30, 1965, as Title XVIII, Health Insurance for the Aged, of the Social Security Act, and became effective on July 1, 1966. It consists of two separate but coordinated programs: hospital insurance (Part A) and supplementary medical insurance (Part B).

National health expenditures.—This measure estimates the amount spent for all health services and supplies and health-related research and construction activities consumed in the United States

during a specified time period. Detailed estimates are available by source of expenditure (e.g., consumer out-of-pocket, private health insurance, and government programs) and by type of expenditure (e.g., hospitals, physicians, and drugs). Data are compiled from a variety of sources that collect data from the providers of care.

Health services and supplies expenditures are outlays for goods and services relating directly to patient care plus expenses for administering health insurance programs and for government public health activities. This category is equivalent to total national health expenditures minus expenditures for research and construction.

Private expenditures are outlays for services provided or paid for by nongovernmental

sources—consumers, insurance companies, private industry, and philanthropic organizations.

Public expenditures are outlays for services provided or paid for by Federal, State, and local government agencies or expenditures required by governmental action (such as workmen's compensation insurance payments).

Personal health care expenditures.—These are outlays for goods and services relating directly to patient care. The expenditures in this category are total national health expenditures minus expenditures for research and construction, expenses for administering health insurance programs, and government public health activities.

GUIDE TO TABLES

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