

Health

United
States

1984

U.S. DEPARTMENT OF HEALTH
AND HUMAN SERVICES
Public Health Service

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U.S. DEPARTMENT OF HEALTH
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Public Health Service
National Center for Health Statistics

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Foreword

Progress is the word that best defines and describes the health status of the American people.

There are, of course, lags and aberrations. We certainly cannot rest on our laurels.

It is clear from the basic health yardsticks that the United States is moving in the right health direction: both men and women are living longer; infant mortality continues its decline. Add to that the crucial fact that more Americans are becoming health activists, changing their living habits to enhance and protect their health.

In *Health, United States, 1984*, we in the Department of Health and Human Services report to the Congress and the President both on our progress and on the health goals we strive to achieve.

"Good to excellent" is how most of us—9 out of 10—describe our health. The data that follow support that description. Our infant mortality rate in 1983 was half as high as the rate in 1970. Life expectancy in 1983 was nearly 75 years, or 4 years longer than it was in 1970.

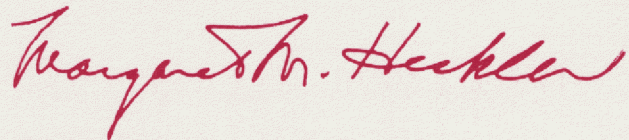
Health, United States, 1984 differs from its predecessor volumes in one important respect—for the first time we are providing detailed information on how the States compare and contrast in respect to our overall health data. National trends are important. But we believe that our progress will accelerate as each State looks at its own track record and compares that record with both the national data and its sister States' performance. For example, premature deaths from heart disease, the Nation's leading cause of death, are consistently high in certain States and consistently low in others; hospital expenses per day range from \$200 in some States to \$500 in other States; and smoking has not declined among

young women, even though we are seeing the health consequences of smoking in earlier generations as lung cancer overtakes breast cancer as leading cause of cancer deaths in older women.

Exploring the "why" of these statistics and erasing the variations involve all of us: communities, States, and the private sector. We believe that the altered format of *Health, United States, 1984* will promote study and research and, most important, will increase public involvement in the making of health policy. That involvement will pay handsome public health dividends in future years.

As 1984 draws to a close, we can be proud of the forward health strides we have taken as a Nation. This volume documents one "plus" after another. The protective arm of government will surely continue to do its part. But the pace of that progress will quicken if individual Americans take stock of their own eating and living habits—adjusting them in accordance with time-tested principles of good health: No smoking. Drinking only in moderation. A balanced nutritious diet with special accent on fresh vegetables, fruit, and fiber. Exercise. Adequate rest.

Enlistments in that health "army" are up and that is a very encouraging prelude to future health progress.



Margaret M. Heckler, Secretary
U.S. Department of Health and Human Services

Preface

Health, United States, 1984 is the ninth 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(a)(2) of the Public Health Service Act as amended. It presents statistics concerning recent trends in the health care sector and discussions of geographic variation in selected current health statistics. This report was compiled by the National Center for Health Statistics, Office of the Assistant Secretary for Health. The National Committee on Vital and Health Statistics served in a review capacity.

This report is divided into two parts. First, a chartbook with geographic variation in health statistics as the theme consists of 25 maps and accompanying text covering 13 topics of current interest in the health field. Second, 94 detailed statistical tables are organized around four major subject areas—health status and determinants, utilization of health resources, health care resources, and health care expenditures—with a guide to the detailed tables. There are also two appendixes, one that describes the data sources and a glossary. It is obviously not possible to cover all the important

health issues facing the Nation in a limited number of charts and detailed tables. Instead, an attempt is made to provide a balanced complementary set of information. The detailed tables are designed to show continuing trends in health statistics. As a result, the major criterion used in selecting the detailed tables is the availability of comparable data over a period of several years. The tables, appearing in every volume of *Health, United States*, cover the same topics to enhance the use of this publication as a standard reference source. The charts, on the other hand, are selected to illustrate geographic variation. Thus, topics of general interest and importance were chosen for which recent State data are available.

Data on health status and health care utilization for the Hispanic population are not included in the State maps in the chartbook or in the detailed trend tables. Data comparable to that presented for the white and black populations are not yet available. However, some data on health characteristics among Hispanics are currently available and discussed in the highlights. As more data on the Hispanic population accumulate, this information will be incorporated in future volumes of *Health, United States*.

Acknowledgments

Overall responsibility for planning and coordinating the content of this report rested with the Division of Analysis, National Center for Health Statistics, under the supervision of Diane M. Makuc, Joel C. Kleinman, and Jacob J. Feldman. The chartbook was prepared by Steven R. Machlin, Mitchell B. Pierre, Jr., and Barbara G. Weichert.

The detailed tables were prepared by Margaret A. Cooke, Steven R. Machlin, Rebecca A. Placek, and Barbara G. Weichert. Statistical assistance was provided by Ilene B. Gottfried, Lisa A. Lang, Mavis B. Prather, and Patricia B. Salins. Production planning and coordination were managed by Madelyn A. Lane and Rebecca A. Placek, assisted by Jeanenne M. Barry, and Jacqueline A. Smith.

Publications management and editorial review were provided by Rolfe W. Larson, Margot A. Brown, and John E. Mounts. Final production was managed by Linda L. Bean with the assistance of Annette F. Gaidurgis. Graphics were produced under the supervision of Stephen L. Sloan; the designer was Patricia A. Vaughan. Printing was coordinated by Naomi M. Forester.

Publication of this volume would not have been possible without the contributions of numerous staff members throughout the National Center for Health Statistics and several other agencies. These people gave generously of their time and knowledge, providing data from their surveys and programs; their cooperation and assistance is gratefully acknowledged.

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Highlights


Health Status and Determinants


 Life expectancy at birth for Americans reached a new high in 1983 of 74.7 years (provisional data), an increase of 27.4 years since the turn of the century. The greatest gains (21 years) occurred during the first half of the century, largely from dramatic reductions in infectious disease mortality. But substantial improvements in life expectancy have also occurred since 1970. In fact, life expectancy increased more between 1970 and 1983 (3.8 years) than it did in the 20 years prior to 1970 (2.7 years).


 Although mortality reduction among infants and children accounted for much of the increase in life expectancy in the early part of this century, most of the increase in life expectancy between 1970 and 1983 was due to decreases in mortality among the middle-aged (45-64) and elderly populations (65-84).

 In 1983, life expectancy at birth for females (78.3 years) exceeded that for males (71.0 years) by 7.3 years (provisional data). Between 1950 and 1975, life expectancy among females increased by 5.5 years compared with 3.2 years for males. However, between 1975 and 1983 life expectancy increased by 2.2 years for males and 1.7 years for females. Because of these trends, the difference in life expectancy between males and females increased between 1950 and 1975 from 5.5 to 7.8 years and subsequently declined to 7.3 years in 1983.


 In 1983, life expectancy at birth for the white population (75.2 years) was 5.6 years greater than for the black population (69.6 years) (provisional data). But that racial gap is narrowing. Between 1950 and 1970, life expectancy increased among black persons by 3.4 years compared with 2.6 years among white persons. Since 1970, the black population has experienced a rise in life expectancy of 5.5 years compared with 3.5 years for the white population. As a result, the difference in life expectancy at birth between the white and black populations has decreased from 8.4 years in 1950 to 5.6 years in 1983.


 The decline in the racial disparity in life expectancy has been especially pronounced among females. In 1950, white females could expect to live 9.5 years longer than their black counterparts. In 1983, the gap was 5.0 years. Among men, the black-white gap declined from 7.6 years in 1950 to 6.4 years in 1983.


 Americans who reached their 65th birthdays in 1983 could expect to live another 16.8 years (provisional data). Although life expectancy at birth showed greater increases in the first half of this century, life expectancy at 65 years of age has been increasing more rapidly in recent years. In the 50 years between 1900 and 1950, life expectancy at 65 increased by 2.0 years, in the next 20 years by 1.3 years, and in the 13 years between 1970 and 1983 by 1.6 years.


 In 1983, 65-year-old males could expect to live another 14.5 years compared with 18.8 years for females. Between 1950 and 1970, life expectancy at 65 years of age among males increased by 0.3 years compared with 1.4 years between 1970 and 1983. Female life expectancy at this age has been increasing


over a longer period: 2.0 years between 1950 and 1970 and 1.8 years between 1970 and 1983.


 The American infant mortality rate continues to decline, reaching 10.9 deaths per 1,000 live births in 1983. Although the mortality rates for both black and white infants have improved each year, the black infant mortality rate remains almost twice as high as for white infants.


 For both black and white infants there is substantial variation in infant mortality rates among the States. In 1979-81, the range for white infants among all States was 9.0 to 12.5, whereas the black infant mortality rate ranged from a low of 16.4 to a high of 25.9 deaths per 1,000 live births among the 27 States with black populations of 150,000 or more.


 In 1981, the overall fertility rate was 67.4 live births per 1,000 women 15-44 years of age. The fertility rate has remained at this level since the mid-1970's, and provisional data for 1982 and 1983 indicate continued stability.


 In 1980, the fertility rate for women of Hispanic origin was 95.4 live births per 1,000 women 15-44 years of age, 53 percent higher than the rate for white non-Hispanic women (62.4) and 5 percent higher than the rate for black non-Hispanic women (90.7). The fertility rate for Mexican women was 111.3, 45 percent higher than the rate for Puerto Rican women (77.0), and more than 2½ times the rate for Cuban women (41.9). These rates are for the 22 States reporting Hispanic origin.

 The proportion of now or once married women practicing some form of birth control remained essentially constant between 1973 and 1982 (67 percent of white women and 58 percent of black women 15-44 years of age). However, the use of female sterilization as a method of contraception increased substantially between 1976 and 1982 for white women 35-44 years and black women 25-44 years of age.


 The percent of babies with low birth weight among Mexican and Cuban infants is similar to that for white non-Hispanic infants. In 1981, 5.6 percent of Mexican infants and 5.8 percent of Cuban infants weighed less than 2,500 grams, compared with 5.7 percent of white non-Hispanic infants. Higher levels of low birth weight occur among Puerto Rican infants (9.0 percent) and black non-Hispanic infants (12.7 percent) in the 22 States reporting Hispanic origin.


 Between 1970 and 1983, age-adjusted death rates declined by 26 percent for heart disease, the leading cause of death, and by 48 percent for stroke.


 Death rates from heart disease for persons 45-64 years of age vary substantially by sex and race, with higher rates among men and black persons. In 1981, the rate for black males was 41 percent higher than for white males (680 per 100,000 versus 482). However, the rate for black females was more than twice as high as for white females (345 versus 159).


 In 1979-80, variation among States in heart disease death rates was approximately twofold among adults 45-64 years


of age in each race-sex group. California, Wisconsin, and Connecticut had consistently low 1979-80 heart disease death rates for white males, white females, black males, and black females 45-64 years of age. On the other hand, the southern States of Georgia, Louisiana, South Carolina, and Kentucky and Illinois had consistently high rates for all four race-sex groups.


 In 1981, age-adjusted death rates for stroke among persons 35-74 years of age were more than twice as high for black persons as for white persons, and rates were approximately 30 percent higher among males than females. The age-adjusted death rates were 129 per 100,000 for black males compared with 50 for white males, and 96 for black females compared with 39 for white females.


 Stroke mortality among the States in 1979-80 varied twofold for both white males and females and threefold for black males and females. For all four race-sex groups, the highest age-adjusted death rates for persons 35-74 years of age tend to be in southern States. Many western States have relatively low rates for the white population; rates for black persons are lowest in Massachusetts, Wisconsin, and Connecticut.


 Among women, death rates for lung cancer have been increasing while death rates for breast cancer have remained stable. As a result, in 1981 the death rate for lung cancer exceeded that for breast cancer in the group 65-74 years of age, and death rates for these two causes were about equal in the age group 55-64 years.


 In 1978-80, the age-adjusted percent of persons limited in major activities by chronic conditions was about 10 percent for Mexican, Cuban, and white non-Hispanic persons. Limitations from chronic conditions occurred more frequently among Puerto Rican (16 percent) and black non-Hispanic persons (15 percent).

 In 1965, more than half of males 20 years of age and over smoked cigarettes regularly compared with only about one-third of adult females. However, since 1965 this sex differential has decreased substantially because the proportion of male smokers has declined at a much greater rate than the proportion of female smokers. In 1983, about 35 percent of adult males were cigarette smokers, a slight decrease from 1980.


 Between 1980 and 1983, the percent of adult females who smoked cigarettes remained stable at about 30 percent. This lack of decline in recent years among women is primarily attributable to an increase in smoking among women 20-24 years of age (from 33 to 36 percent). This increase can be explained in part by the movement into this group of women who were teenagers in the 1970's, when smoking rates were increasing.

 The percent of persons who are overweight and variation in the percent overweight by race and sex have remained about the same during the 1970's. Black women are far more likely to be overweight than either white women or men of either race. In 1976-80, about 60 percent of black women 45-64 years of age were overweight compared with about 30 percent of middle-aged white women.


 Motor vehicle accident death rates for white males 15-24 years of age have been about twice as high as for young black males since the mid-1970's. In 1981, the motor vehicle accident death rate for young white males was 67.6 per 100,000 population compared with 30.8 for young black males. The overall 1981 death rate in this age group was 186.7 per 100,000 black males compared with 154.5 for white males. The major factor in this disparity was homicide deaths among young black men (78.2 per 100,000 versus 14.4).


 In 1979-80, State motor vehicle accident death rates for males 15-24 years of age had more than a twofold range among States. Three western States (Wyoming, Nevada, and New Mexico) had the highest rates for young white males, whereas most


of the States with fairly low rates are located on the east coast. For young black males, two southern States (Mississippi and South Carolina) had by far the highest rates; the lowest rates were mainly in the Northeast and east North Central States.


 In the early 1980's, workers in manufacturing industries were twice as likely to work in plants where environmental conditions were regularly monitored as in the early 1970's. The percent of employees with environmental monitoring at work varied substantially from 11 percent of employees in 1981-83 in small facilities to 85 percent in large facilities.


Utilization of Health Resources


 In 1981, 79 percent of white mothers received prenatal care in the first trimester of pregnancy compared with 62 percent of black mothers. For the first time since 1970, the percent of black mothers with early prenatal care remained stable.


 In 1981 in the 22 States reporting Hispanic origin, 80 percent of Cuban mothers began prenatal care in the first trimester of pregnancy, a level similar to the 82 percent of white non-Hispanic mothers with early prenatal care. In addition, 60 percent of Mexican mothers, 54 percent of Puerto Rican mothers, and 62 percent of black non-Hispanic mothers received early prenatal care.


 The number of doctor visits per person decreased from 4.9 in 1976 to 4.6 in 1981, with the largest decreases among the elderly and those with high incomes. During this period, the number of doctor visits by black persons, children, and people with low incomes stayed the same.


 After adjusting for differences in age distribution, Mexican persons averaged fewer visits per year to physicians in 1978-80 (4.3) than white (4.8) and black (4.8) non-Hispanic persons. Puerto Rican and Cuban persons visited physicians more frequently than non-Hispanic persons (6.1 and 5.8 visits, respectively).


 In 1978-80, the percent of children 4-16 years of age visiting a dentist in the past year varied substantially by race and ethnicity. White non-Hispanic children were most likely to visit dentists (68 percent) followed by Cuban (57 percent) and Puerto Rican children (54 percent). Fewer than half of Mexican (39 percent) and black non-Hispanic (44 percent) children visited dentists in the past year. Furthermore, almost one-third of Mexican children had never received dental care.

 In 1982, the average length of stay in short-stay hospitals in the United States was 7.6 days, with wide variation among the States. The longest average stays were in New York (9.7), Minnesota (9.4), and Massachusetts (8.9), and the shortest average stays were in Utah (5.4), Wyoming (5.5), and Washington (5.7). For many years, hospitals in the Northeast and North Central Regions have had longer average lengths of stay than in the West and South.


 In 1980, about 10 percent of the population 75 years of age and over in the United States were institutionalized in nursing homes. However, this percent varies from less than 6 percent in Florida, New Mexico, West Virginia, and Arizona to more than 15 percent in Minnesota, North Dakota, South Dakota, and Iowa.


 Lens extraction (cataract operations) among the elderly continues to increase. Between 1981 and 1982, these procedures increased by 8 percent. Moreover, 74 percent of lens extractions in 1982 were accompanied by the insertion of prosthetic lenses compared with 58 percent in 1981 and 36 percent in 1979.


 Between 1979 and 1982, the use of computerized axial tomography (CAT scan) among hospitalized persons tripled, increasing from 0.8 to 2.4 per 1,000 population.


 The use of diagnostic ultrasound among hospitalized women more than doubled between 1979 and 1982. This increase was particularly large for elderly women for whom this procedure tripled.


Health Care Resources


 In 1980, there were 165 active non-Federal patient care physicians for every 100,000 persons in the United States. However, the physician-population ratio was more than twice as large in metropolitan (191) as in nonmetropolitan areas (84). Furthermore, there is a threefold variation among State physician-population ratios for metropolitan areas and a fourfold variation among State nonmetropolitan areas.

 In 1980, the three States with the largest supply of patient care physicians in metropolitan areas were Vermont (303 per 100,000 population), New York (234), and Massachusetts (226). Those with the lowest ratios for metropolitan areas were New Hampshire (122), Nevada (138), Wyoming (139), and Indiana (139).


 New Hampshire has the largest 1980 supply of patient care physicians in nonmetropolitan areas (207 per 100,000 population), followed by Massachusetts (162) and Hawaii (149). Many southern States have relatively low supplies of physicians in nonmetropolitan areas, with Alabama (53), Louisiana (54), and Tennessee (62) having the lowest nonmetropolitan physician-population ratios.


 In 1979, there were 46 active non-Federal patient care dentists per 100,000 population in the United States. However, this ratio was 50 in metropolitan counties and 31 in nonmetropolitan counties. States with the lowest supplies of dentists are located in the south; those with larger supplies are in the north.


 Between 1970 and 1982, the number of registered nurses per 100,000 population increased by 59 percent, from 369 to 586, compared with a 35-percent increase in the physician-population ratio during this period. Substantial regional variation in the nursing supply persists in 1982, with the greatest supply found in the Northeast (764 nurses per 100,000 population) and the smallest supply in the South (466).


 The number of people employed in the health care industry grew by nearly 90 percent between 1970 and 1983, from 4.2 million to 7.9 million.


Health Care Expenditures


 In 1983, health care expenditures in the United States totaled \$355.4 billion, an average of \$1,459 per person, and comprised 10.8 percent of the gross national product.


 Between 1982 and 1983, the medical care component of the Consumer Price Index increased at nearly three times the overall inflation rate (8.7 percent versus 3.2 percent). During this period the hospital room component of the Consumer Price Index increased by 11.3 percent, a smaller increase than between 1981 and 1982 (15.7 percent).


 Hospital care expenditures continue to claim the largest share of the health care dollar, accounting for 41 percent of health care expenditures in 1983. Physician services, dentist services, and nursing home care accounted for 19 percent, 6 percent, and 8 percent, respectively.


 In 1982, adjusted expenses per inpatient day for hospital care ranged more than twofold among States. States with the highest expenses were concentrated in the West; those with lower expenses are located primarily in the South and the western portion of the North Central Region.

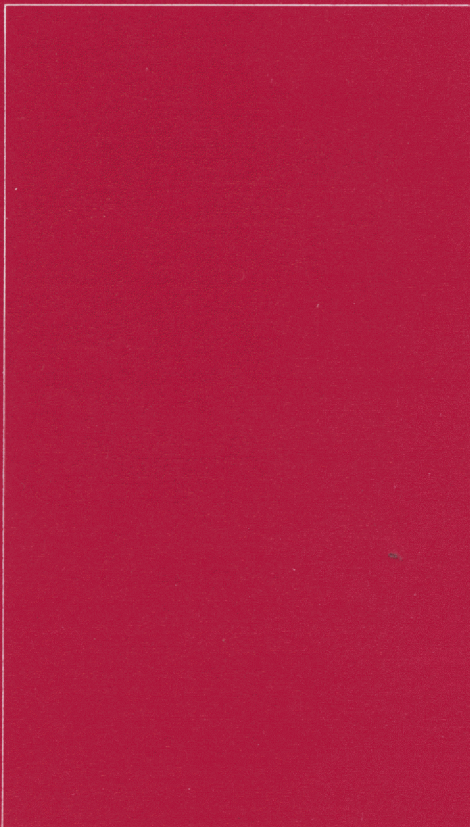
 Since the advent of the Medicare and Medicaid programs in the mid-1960's, the Federal Government's share of personal health care expenditures has increased from 10.1 percent in 1965 to 29.7 in 1983.

 In 1982, adjusted Medicare per capita reimbursements were highest in the Northeast and West and lowest in the South. California, Alaska, and Nevada had high per capita reimbursements (over \$1,900), whereas North Carolina, South Carolina, and Kentucky ranked particularly low (less than \$1,200).

 In 1983, children and adults in families receiving Aid to Families with Dependent Children comprised 69 percent of Medicaid recipients but accounted for only 26 percent of expenditures. The aged, the blind, and the disabled accounted for about 29 percent of recipients and 72 percent of expenditures.

 Variation is fivefold among States in the ratio of Medicaid recipients to persons below the poverty level. In 1982, Hawaii had the highest ratio with the number of Medicaid recipients nearly equal to the poverty population, followed by California (83 per 100), Rhode Island (77), and Michigan (72). The lowest ratios were in South Dakota (17), Idaho (18), Wyoming (20), and Texas (20).

 In 1978 and 1980, Hispanic and non-Hispanic black people under 65 years of age were much more likely than non-Hispanic white people to have no health insurance of any type. Twenty-six percent of Hispanic people, 18 percent of black people, and 9 percent of white people had no coverage. Among Hispanic groups, Mexicans had the highest proportion of uninsured (30 percent).

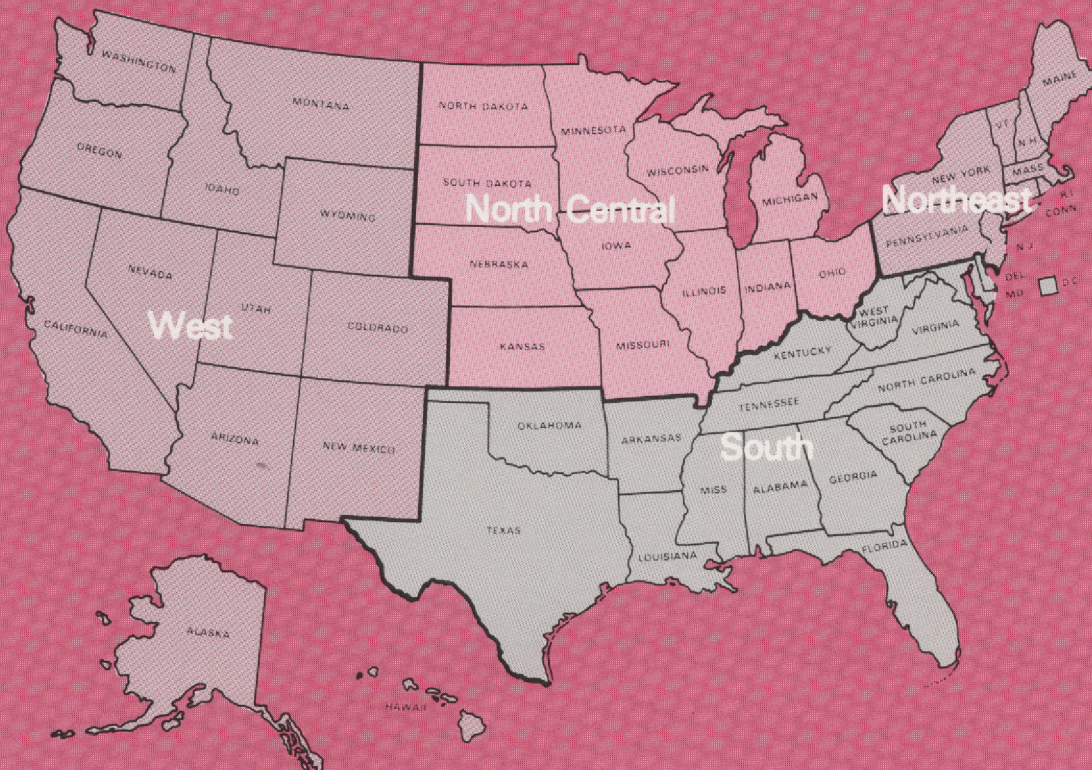


Chartbook

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Geographic regions of the United States



Introduction

The investigation of geographic differences in health statistics has important applications. For example, the study of geographic variation in disease incidence and mortality has stimulated valuable epidemiologic hypotheses about disease causation and control. In addition, geographic differences in the supply of health care professionals and in health care spending provide important information for policy analysis.

This chartbook presents a series of maps and accompanying text to describe geographic variation among the States and the District of Columbia for selected variables related to health status, health care professionals, and health care expenses. Although data for more detailed geographic areas are desirable for local health planners, this presentation gives an overview of regional and State variation in the selected variables from a national perspective. Wherever possible, factors that may be related to the observed variation are discussed.

Figures 1-16 are based on data from the National Center for Health Statistics and cover the topics of prenatal care, infant mortality, and mortality from motor vehicle accidents, breast cancer, heart disease, and stroke. For these topics, separate maps are presented for the white and black populations because overall racial differences in mortality are large, and geographic patterns may differ for the two groups. The mortality maps are generally restricted to those age groups for which premature death from the specific cause is greatest. For example, the motor vehicle accident mortality maps are restricted to young males 15-24 years of

age because of the high rates in this group. The death rates for breast cancer and stroke are age adjusted because of the broad age group (35-74 years) analyzed for these causes.

Figures 17-20, based on data from the Bureau of Health Professions, show supplies of physicians and dentists. Because health professionals tend to be more concentrated in metropolitan areas, one would expect more densely populated States to have larger supplies of physicians and dentists. Therefore, separate maps are provided for metropolitan and nonmetropolitan area data by State. The metropolitan area of each State includes all metropolitan counties in the State, and the nonmetropolitan area aggregates nonmetropolitan counties. This classification of counties is based on population enumeration and commuting patterns from the 1980 census. Data for Alaska are not shown in figures 17-20 because they are not available for that State according to metropolitan and nonmetropolitan counties. Also, in figures 18 and 20, data are unavailable for New Jersey and Washington, D.C., because they do not contain any nonmetropolitan counties.

The American Hospital Association data presented in figures 21 and 22 pertain to average length of stay and inpatient expenses for community hospitals, respectively. The Census Bureau data in figure 23 show variation in nursing home utilization. Finally, figures 24 and 25 present State Medicare and Medicaid data from the Health Care Financing Administration. Arizona is excluded from figure 25 because it does not participate in the Medicaid program.

All maps show the most recent available data (ranging from 1979 to 1982). On most of the maps, the States and the District of Columbia are divided into four groups by their relative rankings on the variable. These categories were chosen so that 20 percent of the States fall into each of the extreme categories and the remaining States are

divided among the middle groups according to the following ranks:

1-10 (10 lowest States)
11-26
27-41
42-51 (10 highest States)

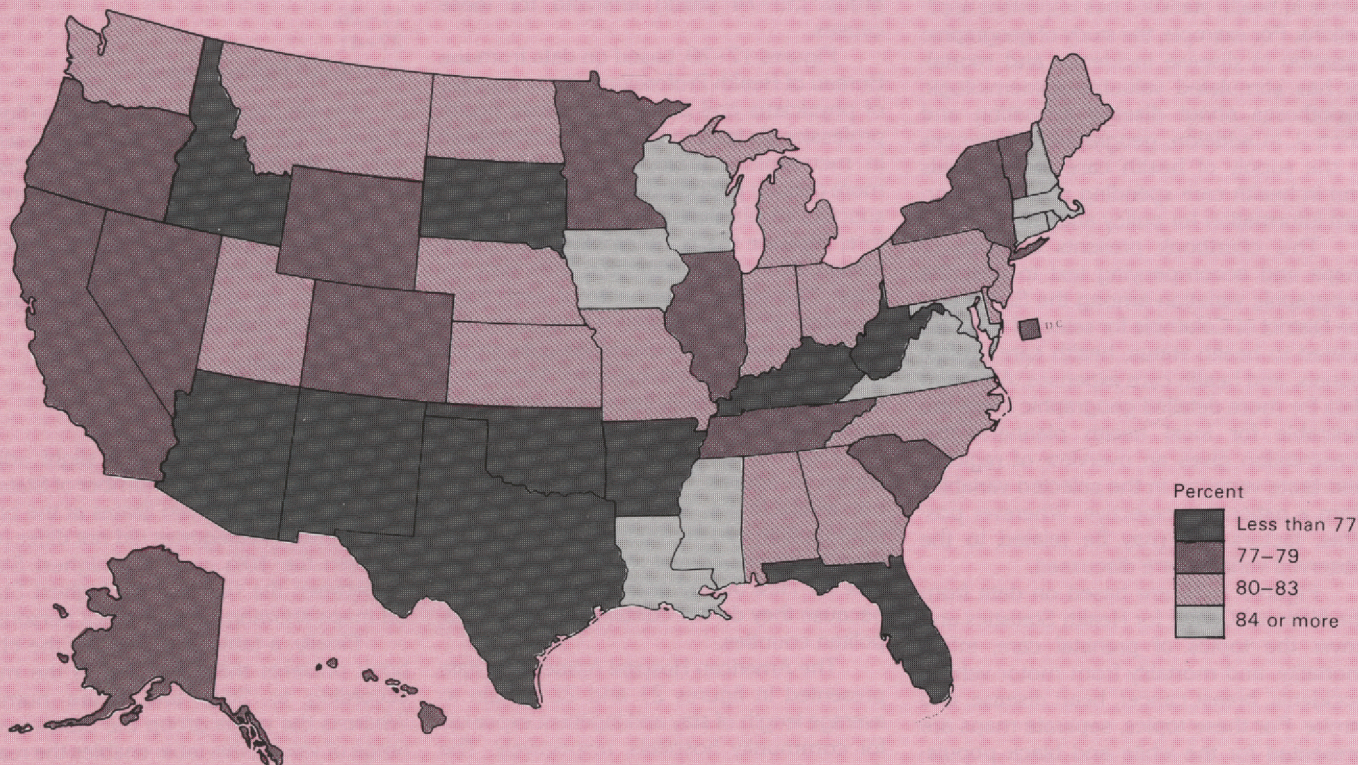
On the maps for black persons (figures 2, 4, 6, 8, 10, 12, 14, 16), data are presented only for the 27 States (including the District of Columbia) with black populations of 150,000 or more in 1980. This decision was made to eliminate States with extremely unreliable data for the black population. The 27 States are divided into three groups according to their relative rankings:

1-6 (6 lowest)
7-21
22-27 (6 highest)

It should be noted that slight adjustments were made to the number of States in each category if the two States at the break point between categories did not differ (e.g., between the 10th and 11th highest States or between the 6th and 7th highest States on maps showing data for black persons).

Finally, a table at the end of the chartbook presents the data used in the maps according to State and figure number. Whereas the maps group the States over a range of values, this table enables the reader to determine the actual data for each State.

Figure 1. Percent of white mothers beginning prenatal care in the 1st trimester of pregnancy: 1979-81



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

Prenatal Care

Prenatal care beginning early in pregnancy and continuing on a regular basis is important to the health of both mother and infant. It provides the opportunity to identify and treat medical and obstetric problems and to counsel the mother about the effects of her behaviors, such as diet, smoking, and alcohol consumption, on the fetus. Although evidence on the effectiveness of prenatal care is not conclusive, high-quality prenatal care holds the greatest promise for reducing the incidence of poor pregnancy outcome.

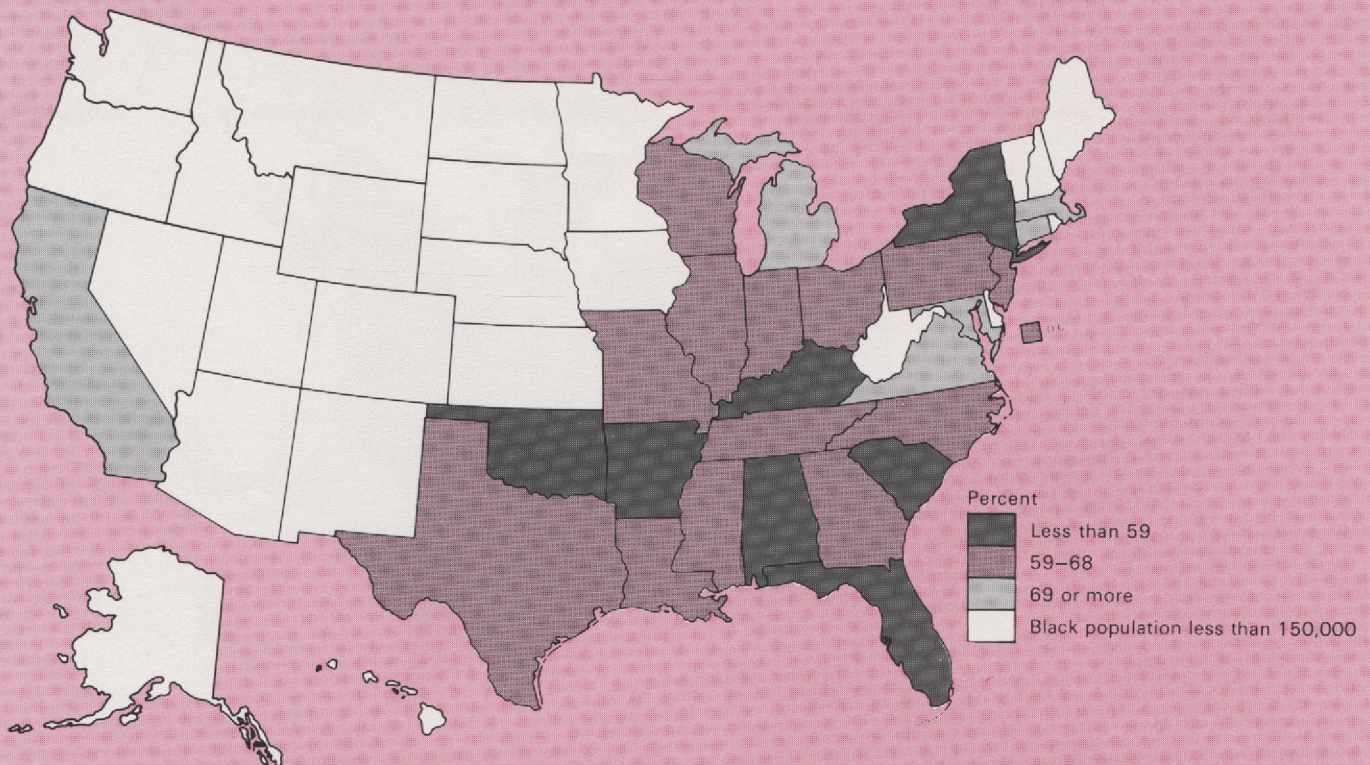
The proportion of mothers who began prenatal care during the first 3 months of pregnancy varies according to several factors. Teenage mothers, those with less than a high school education, and unmarried mothers are less likely to receive early care than other mothers. The largest difference occurs by race, with a higher percent of white mothers (79 percent) receiving early prenatal care than black mothers (62 percent) in 1979-81. The variation among States in the percent receiving first-trimester care is also substantial, ranging from 63 percent in New Mexico to 90 percent in Massachusetts for white mothers and from 49 percent in New York to 81 percent in Massachusetts for black mothers.

Nearly 90 percent of white mothers in three New England States (Massachusetts, Rhode Island, Connecticut) received early

prenatal care (figure 1). Other States with high percents are in the North Central and South Regions. Considering the relatively high proportion of teenage mothers and low educational attainment in Louisiana and Mississippi, these two States have unexpectedly high percents of mothers receiving early prenatal care. Nationally, 58 percent of white teenage mothers and 62 percent of white mothers with less than 12 years of education received early prenatal care in 1981, but in Louisiana and Mississippi the corresponding percentages were around 70 percent.

Among the States with low rates of early prenatal care for white mothers, three are clustered in the southwest—New Mexico, Arizona, and Texas. These three States each

Figure 2. Percent of black mothers beginning prenatal care in the 1st trimester of pregnancy: 1979–81



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

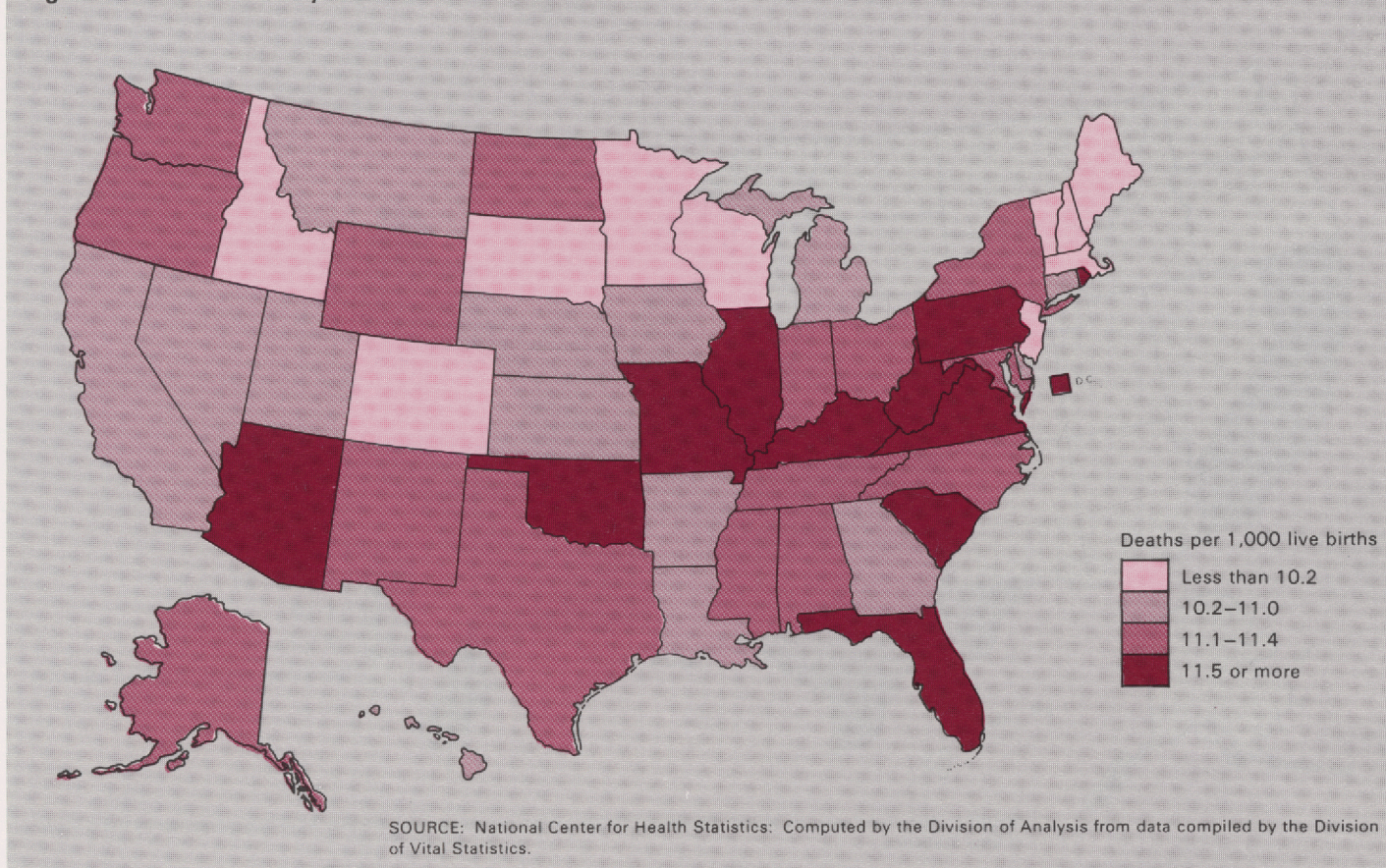
have high proportions of Hispanic births, and Hispanic mothers are much less likely to receive early prenatal care than are white non-Hispanic mothers. In 1980, only 60 percent of Hispanic mothers in the 22 States providing information on Hispanic births began prenatal care during the first trimester compared with 81 percent of white non-Hispanic mothers. This difference may be associated with the younger age distribution and lower educational attainment of Hispanic mothers. Other lower ranking States include West Virginia, Kentucky, South Dakota, and Oklahoma.

Large differentials exist by race, with black mothers receiving early prenatal care less frequently than white mothers in all States. Over 70 percent of white mothers received early prenatal care in all but 2 States. However, less than 70 percent of black mothers received early prenatal care in 23 of the 27 States (including the District of Columbia) with black populations of 150,000 or more. The rate is especially low (less than 55 percent) for black women in four southern States (Florida, Kentucky, Arkansas, Oklahoma) and New York.

Massachusetts has the highest proportion of black mothers with early prenatal care (81 percent). Other States with relatively high percents for black mothers are Connecticut (70), Virginia (73), and California (74). The latter two States and Massachusetts also reveal the smallest black-white differences in receipt of early prenatal care. California has the lowest differential (3 percent), followed by Massachusetts (11 percent) and Virginia (15 percent).

In addition, States that rank high on the proportion of white mothers receiving early prenatal care also rank relatively high for black mothers, and conversely, low ranks for white mothers correspond to low ranks for black mothers. A notable exception is California, which ranks second highest for black mothers and relatively low for white mothers. The high proportion of Hispanic births in California and the lower rates of early prenatal care for Hispanic mothers probably account for the low ranking. Other disparities appear in Pennsylvania, New Jersey, and North Carolina, with relatively high percents of white mothers receiving early prenatal care (82–83 percent) compared with very low percents for black mothers (60–62 percent).

Figure 3. Infant mortality rates for white infants: 1979-81



Infant Mortality Rates

The infant mortality rate in the United States has declined by 47 percent since the mid-1960's, from 23.6 infant deaths per 1,000 live births for 1965-67 to 12.5 for 1979-81. Infant mortality has declined each year during this period for both white infants and black infants. Despite these declines, several countries throughout the world have considerably lower infant mortality rates than the United States (in Sweden the rate is about half as large). Moreover, the long-standing gap between white and black infant mortality rates in the United States persists because the infant mortality rate has declined by about the same percentage since the mid-1960's for both races. In 1979-81, the rate for black infants was nearly twice as high as for white infants (21.0 versus 11.0).

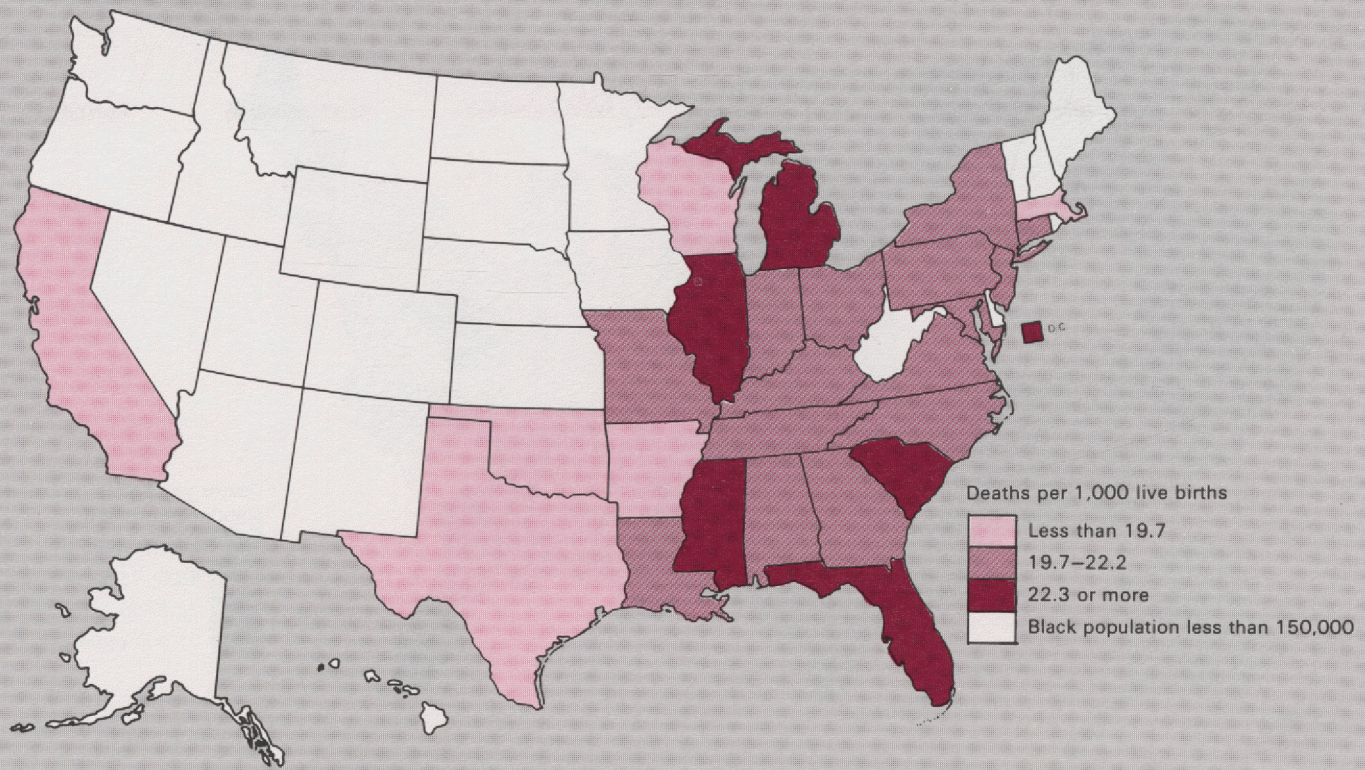
Infants weighing less than 5.5 pounds at birth face a greater risk of early death than infants of normal birth weight. A large portion of the difference in infant mortality by race can be attributed to a higher incidence of low birth weight among black infants. Relative to rates for some countries, the high infant mortality rate in the United States is attributable to a less favorable birth-weight distribution. However, during the past 15 years, improved survival of low-birth-weight infants has been a major factor in the decline in mortality for both white and black infants in the United States.

Substantial variation in infant mortality rates exists among the States for both races. In 1979-81, the black infant mortality rate ranged from 16.4 to 25.9 deaths per 1,000 live births, whereas the range for white infants was 9.0 to 12.5 (excluding the District of Columbia). White infant mortality rates are much lower than black infant mortality rates in all States with substantial black populations. Furthermore, the lowest black infant

mortality rate in any State exceeds the highest white infant mortality rate by 31 percent.

The lowest white infant mortality rates occur in States across the north (figure 3). Of these States, Vermont has the lowest rate (9.0), followed by South Dakota (9.6) and New Jersey (9.9). Conversely, States with the highest white infant mortality rates (11.5 or more) cluster in the Appalachian and midwestern industrial areas, as well as in some southern States. States with the highest white infant mortality rates are West Virginia (12.5), South Carolina (11.9), and Oklahoma (11.8). Although the rate in the District of Columbia was even higher than in West Virginia, the small number of white births makes it unreliable.

Figure 4. Infant mortality rates for black infants: 1979-81



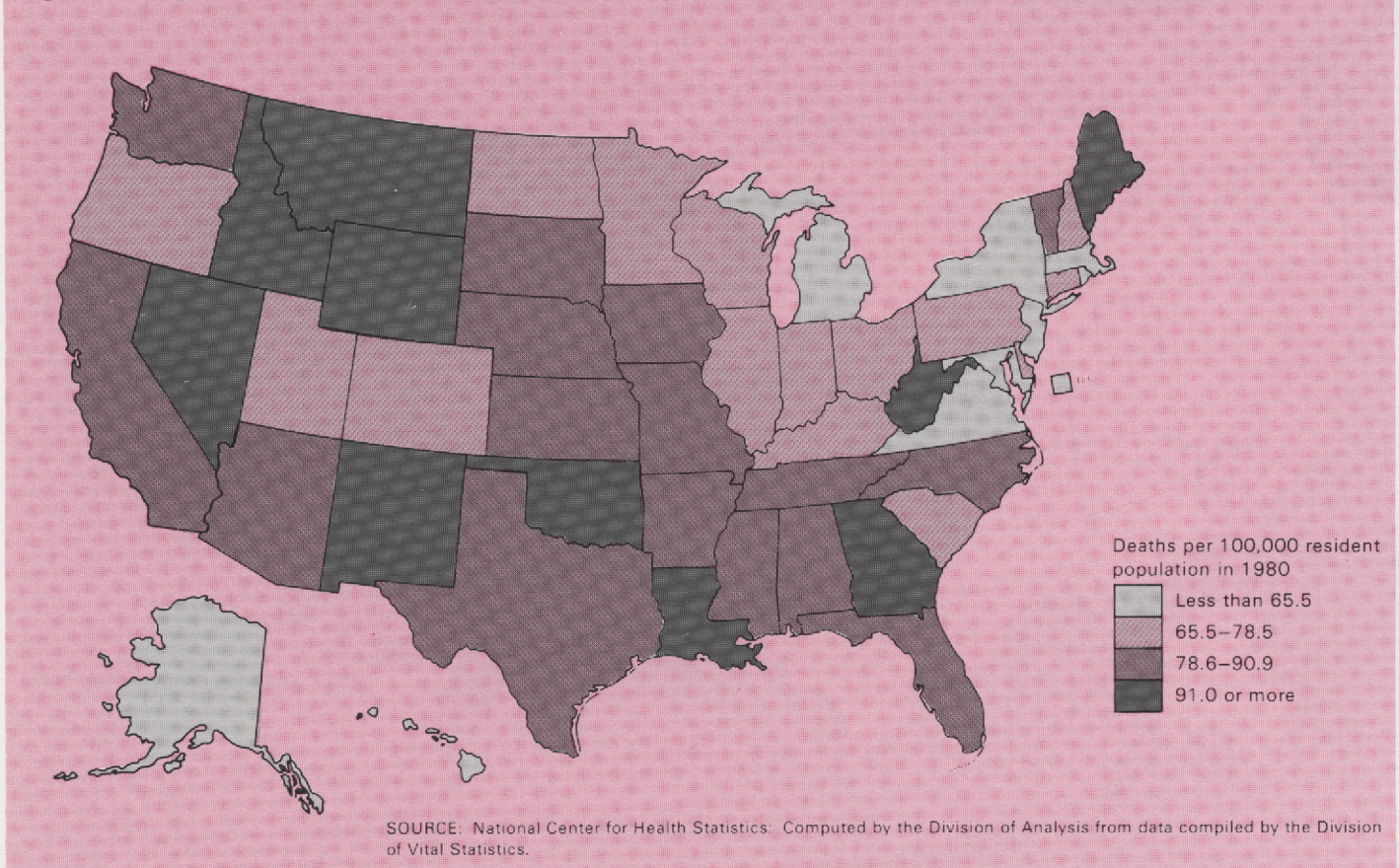
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Black infant mortality rates are high in all 27 States (including the District of Columbia) with black populations of 150,000 or more (figure 4). States with the lowest black infant mortality rates are Massachusetts (16.4), California (17.1), and Wisconsin (18.3). The two States with the highest black infant mortality rates are Illinois (25.9) and Michigan (24.0). These rates largely reflect the high black infant mortality in Chicago and Detroit. It should be noted that Washington, D.C., has a higher black infant mortality rate (26.3) than any State and also ranks

high compared with other large cities. Although Mississippi had the fourth highest black infant mortality rate (22.7) in 1979-81, it has shown substantial improvement since 1965-67 when it had the highest infant mortality rate by a substantial margin. Between 1965-67 and 1979-81, this rate decreased by 56 percent, the largest decline among the States for that period.

States tend to rank high or low on both white and black infant mortality. However, among the 27 States with black populations of 150,000 or more, New Jersey has the lowest white infant mortality rate but ranks in the middle range for black infant mortality. Also, Michigan is ninth lowest for white infants and second highest for black infants. On the other hand, Virginia and Oklahoma rank poorly for white infants but have relatively low black infant mortality rates.

Figure 5. Death rates for motor vehicle accidents among white males 15–24 years of age: 1979–80



Death Rates for Motor Vehicle Accidents

Motor vehicle accidents are the leading cause of death for young persons 15–24 years of age in the United States. In 1980, the death rate from motor vehicle accidents for persons 15–24 years of age (45 per 100,000 population) was considerably higher than for any other age group. Furthermore, motor vehicle accident mortality for young persons varies substantially by sex and race, with higher rates among the male and white population. In 1980, death rates from motor vehicle accidents in this age group were highest among white males (74 per 100,000 population), second highest for black males (35), third for white females (23), and lowest for black females (8).

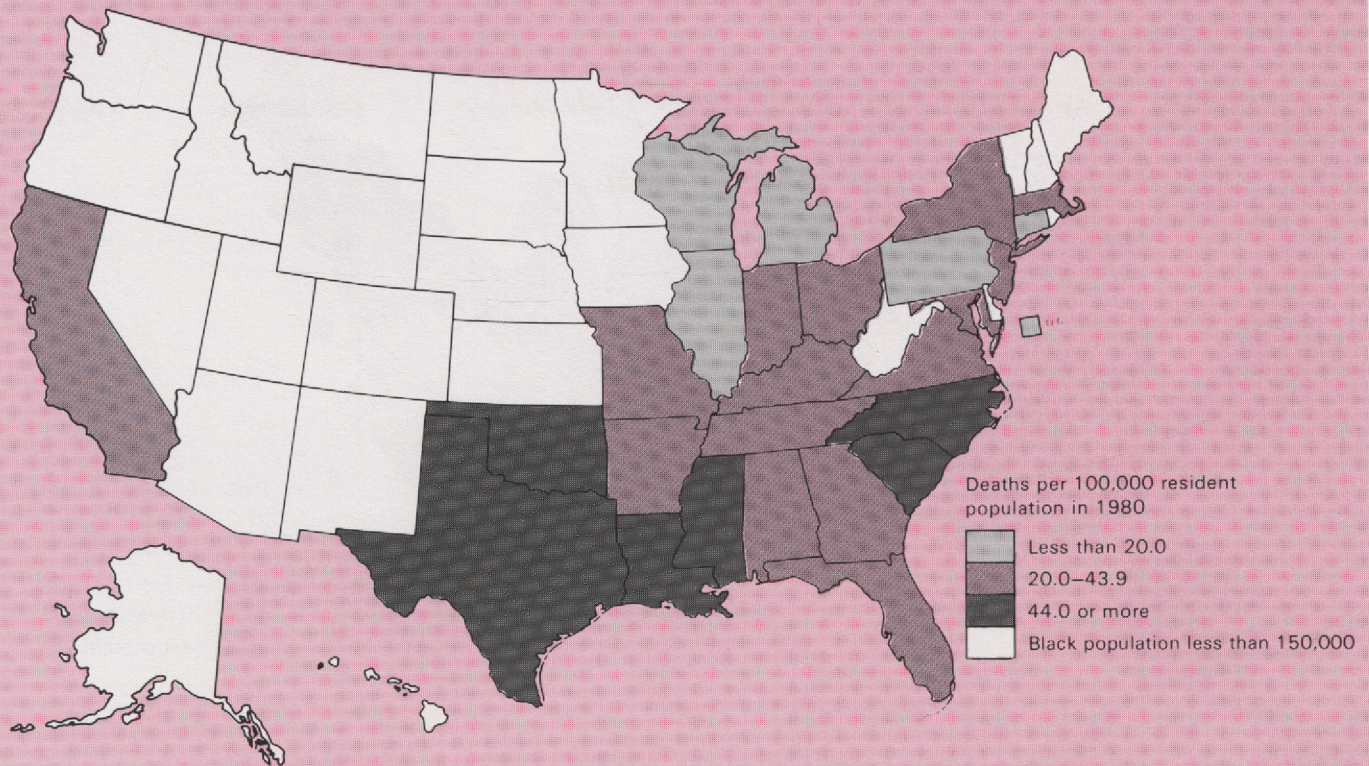
The exceptionally high motor vehicle accident death rate among male teenagers and young adults is explainable in part by a high rate of accidents involving alcohol.

Department of Transportation data show that in 1982 young males 16–24 years of age accounted for only 11 percent of all licensed drivers but for more than one-third of all alcohol-related fatalities.

Although death rates for most major causes are substantially higher for black persons, motor vehicle accident mortality rates for white males 15–24 years of age are more than twice as high as for their black counterparts in most States. Furthermore, the highest State rates for young black males are comparable to the lowest State rates for young white males. One reason for this "reverse" race differential may be that black males in this age group have less access to motor vehicles and drive less frequently.

Figure 5 shows motor vehicle accident mortality rates by State for white males 15–24 years of age. Nationally, in 1979–80 the death rate for this group was 75 per 100,000 population, with more than a twofold range among States. The 10 States with the highest rates for white males are scattered across the country, but the three with the largest rates, Wyoming (114), Nevada (109), and New Mexico (106), are located in the West. Most of the States with fairly low motor vehicle accident death rates for young white males are located on the east coast. The three States with lowest rates are Rhode Island (50), Alaska (52), and New York (53). The District of Columbia has an even lower rate, but it is unreliable because of the small white population.

Figure 6. Death rates for motor vehicle accidents among black males 15–24 years of age: 1979–80



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

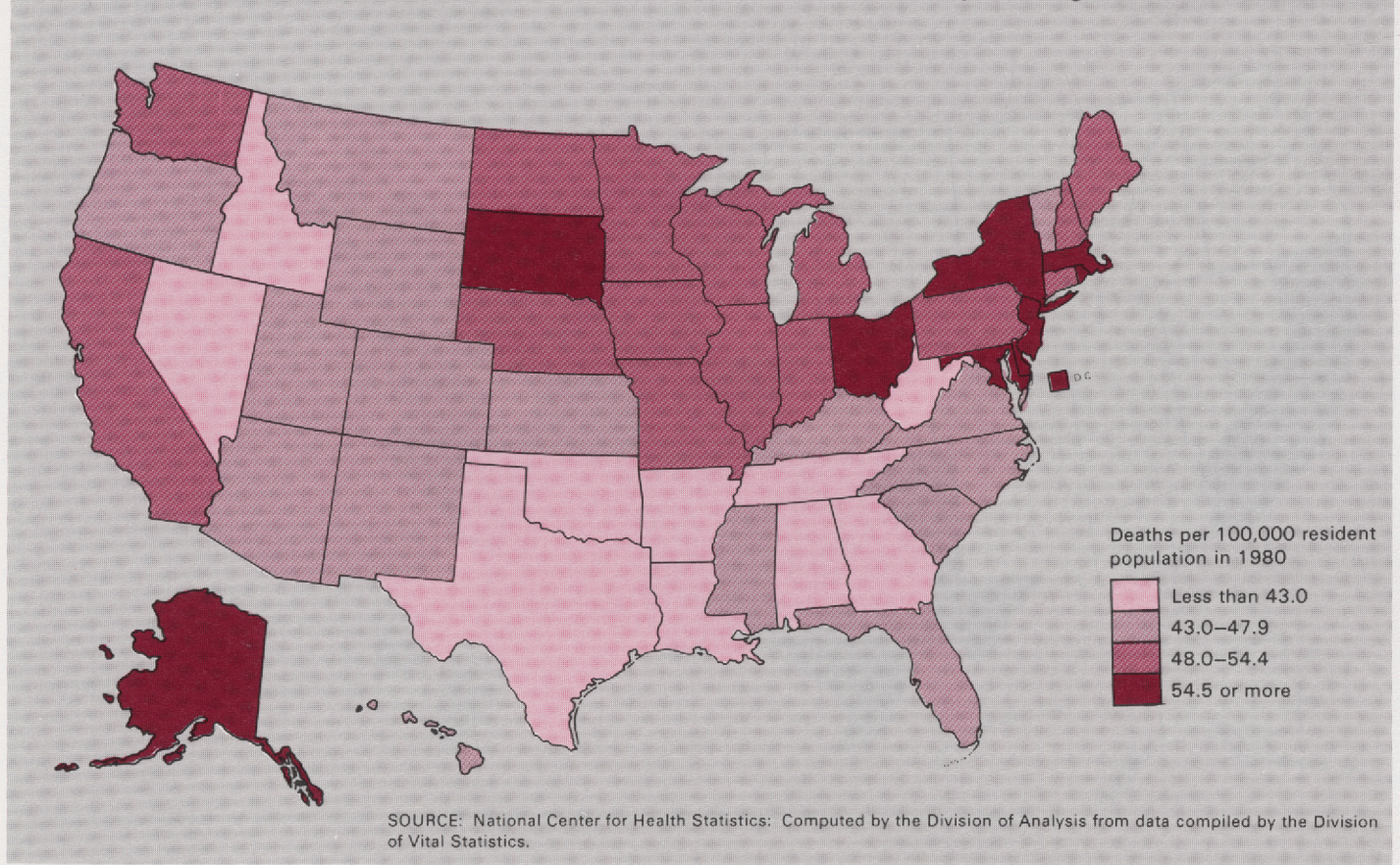
Figure 6 shows State variation in motor vehicle mortality for young black males for the 27 States (including the District of Columbia) with black populations of 150,000 or more. Nationally, the 1979–80 motor vehicle accident death rate for black males 15–24 years of age was 34 per 100,000 persons, but there is substantial variation among States. Mississippi (59) and South Carolina (57) have the highest rates while the District of Columbia (10), Connecticut (13), Wisconsin (18), and Illinois (18) have the lowest rates. However, the rates for young

black males in the District of Columbia, Connecticut, and Wisconsin are based on fewer than 10 deaths.

State variation in motor vehicle accident mortality among 15–24-year-olds probably reflects differences in factors such as the number of miles driven, the amount of highway versus city driving, the degree to which speed limits are enforced, the minimum driving and drinking ages, and the availability of alternative forms of public transportation. In addition, some States require driver's education to be licensed at the minimum age (usually 16), and a few restrict night driving for new 16-year-old drivers. For example,

the relatively low rates in New York for both races may be related to State laws restricting night driving for 16-year-olds, heavy public transportation use, and extensive city driving in which accidents are less likely to be fatal. On the other hand, the high rates for young white males in some western States may be attributable to faster driving, which increases the likelihood of a fatal accident.

Figure 7. Age-adjusted death rates for breast cancer among white females 35–74 years of age: 1979–80



Death Rates for Breast Cancer

Breast cancer is the leading cause of cancer deaths among women in the United States, and death rates from this disease have been fairly constant since 1950. Although little is known about the causes of breast cancer, certain characteristics increase the likelihood of developing this disease. For example, the incidence of breast cancer increases with age; women 65–74 years of age are more than three times as likely to develop the disease as women 35–44 years of age. An increased risk of breast cancer is also associated with first pregnancies after 30 years of age, nonterm first pregnancies

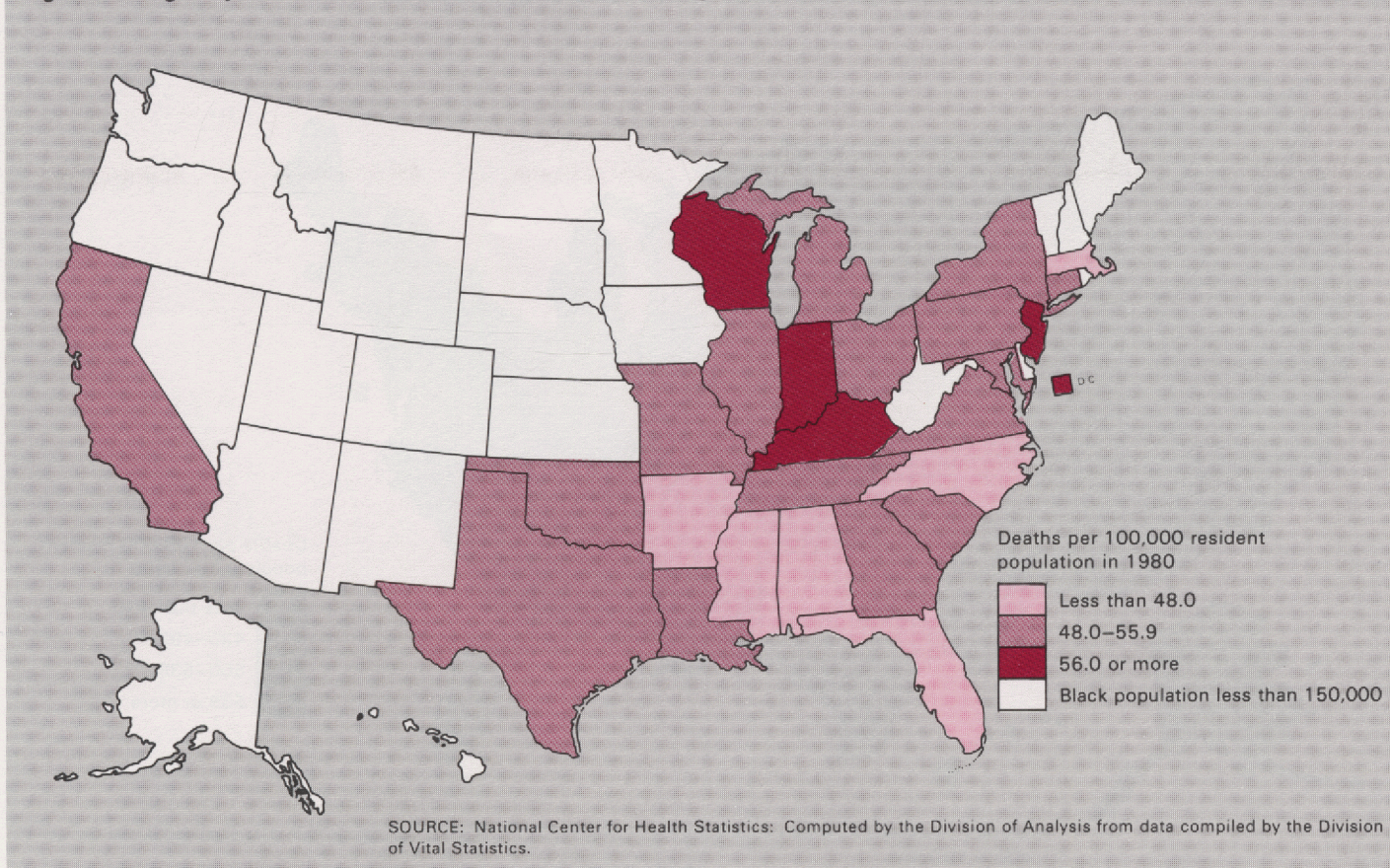
before 30, early menarche, and late menopause. In addition, women with previous benign breast disease, a family history of breast cancer, and certain types of previous cancer are at increased risk.

Women 35–74 years of age accounted for nearly 75 percent of female breast cancer deaths in 1980. Despite a higher incidence of breast cancer among white women, racial differences in breast cancer mortality are relatively small. In 1979–80, black women 35–54 years of age had slightly higher mortality rates from the disease (by 16 percent), whereas white women 55–74 years of age had higher rates (by 13 percent). Thus, age-adjusted death rates from breast cancer for women 35–74 years are about the same for white women as for black women (50 and 51 per 100,000 population). A major reason that white women do not have higher breast cancer mortality than black women despite

a higher incidence of the disease is that they are more likely to be diagnosed at an early stage when treatment is more effective. Furthermore, even when diagnosed at an early stage, the survival rate for black women is lower than that for white women.

Among white women, the highest death rate in any State is about 60 percent higher than the lowest rate. Relatively high rates occur in many northeastern States while the lowest rates are found primarily in the South (figure 7). Three States have age-adjusted death rates of 60 or more [New York (61), Alaska (60), New Jersey (60)], whereas three have rates of 40 or less [Tennessee (38), Arkansas (39), Georgia (40)].

Figure 8. Age-adjusted death rates for breast cancer among black females 35–74 years of age: 1979–80



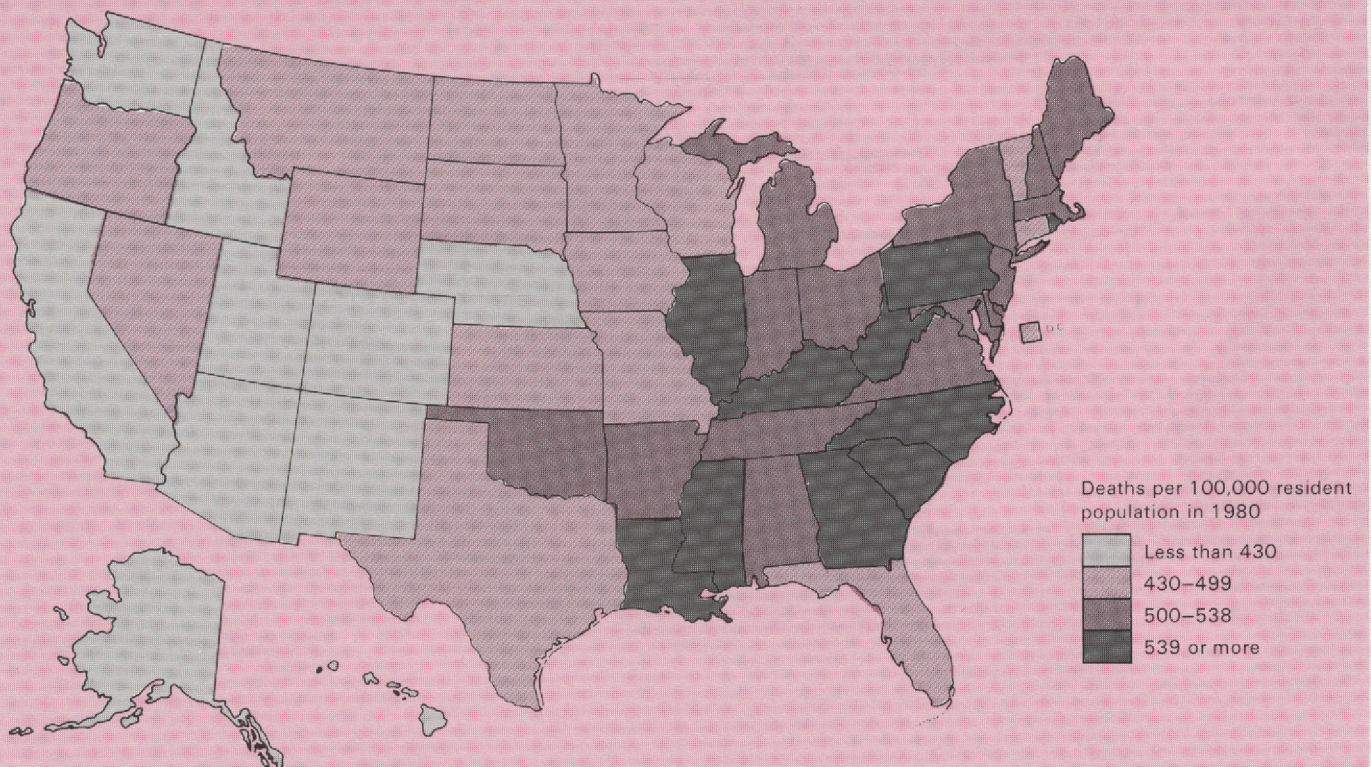
Among the 27 States (including the District of Columbia) with black populations of 150,000 or more, the highest State age-adjusted breast cancer death rate for black women is nearly twice as large as the lowest State rate. Three States, Kentucky (71), New Jersey (64), and Wisconsin (62), and the District of Columbia (63) have rates over 60 per 100,000 (figure 8). As for white women, the lowest rates occur predominantly in southern States; Mississippi (37), Arkansas (37), and Florida (42) have the three lowest rates.

Many States have relatively high or low breast cancer mortality rates for both white

and black women. However, among the States with data shown in figure 8, Tennessee had the lowest rate for white women but the 6th highest rate for black women. Similarly, Kentucky had the 8th lowest rate for white women but the highest rate for black women. On the other hand, New York had the highest State breast cancer death rate for white women, whereas 12 States had higher rates for black women.

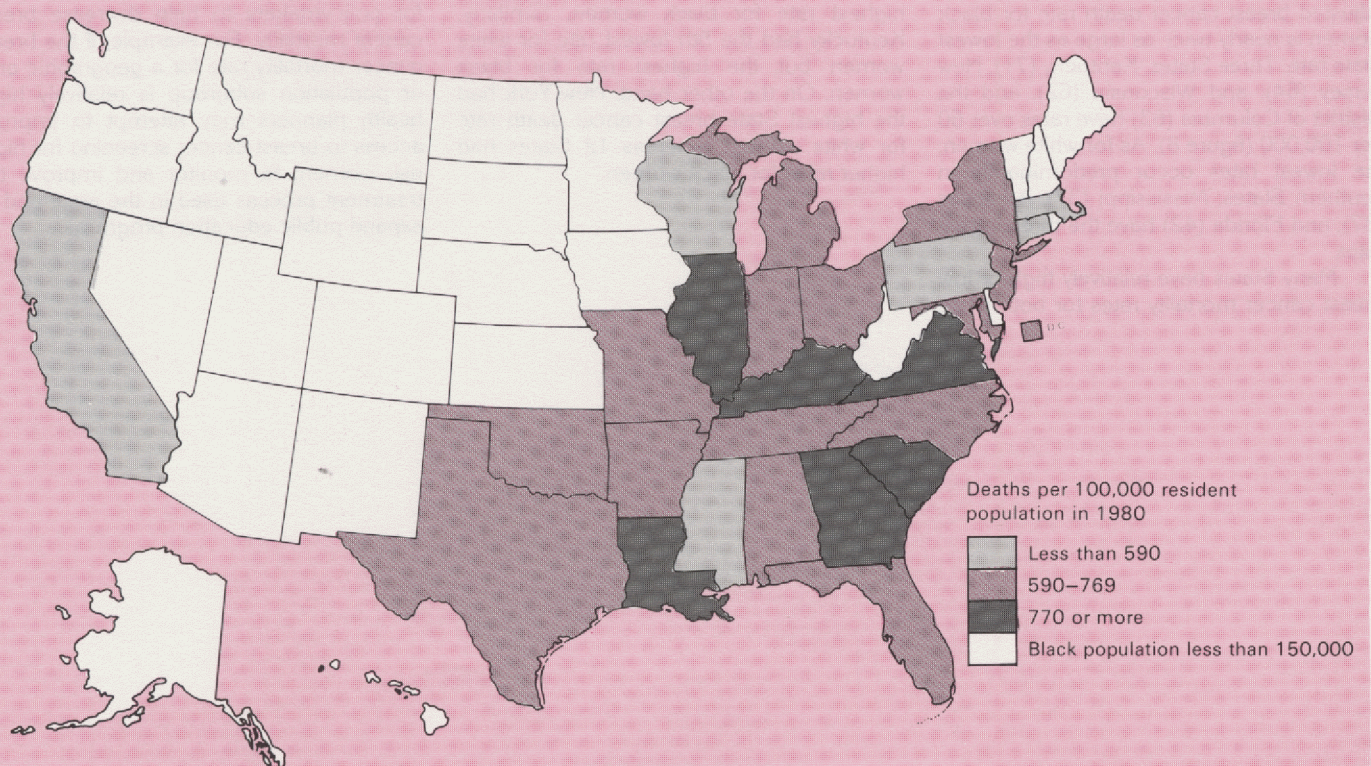
Chances for survival are good when breast cancer is detected at an early stage and treated adequately. Thus, it is possible for policymakers to help decrease breast cancer mortality. For example, if the breast cancer mortality rate for a geographic area or population subgroup is relatively high, health planners may attempt to improve access to breast cancer screening for high-risk women, to monitor and improve the treatment process used in the area, and to expand public education programs.

Figure 9. Death rates for heart disease among white males 45-64 years of age: 1979-80



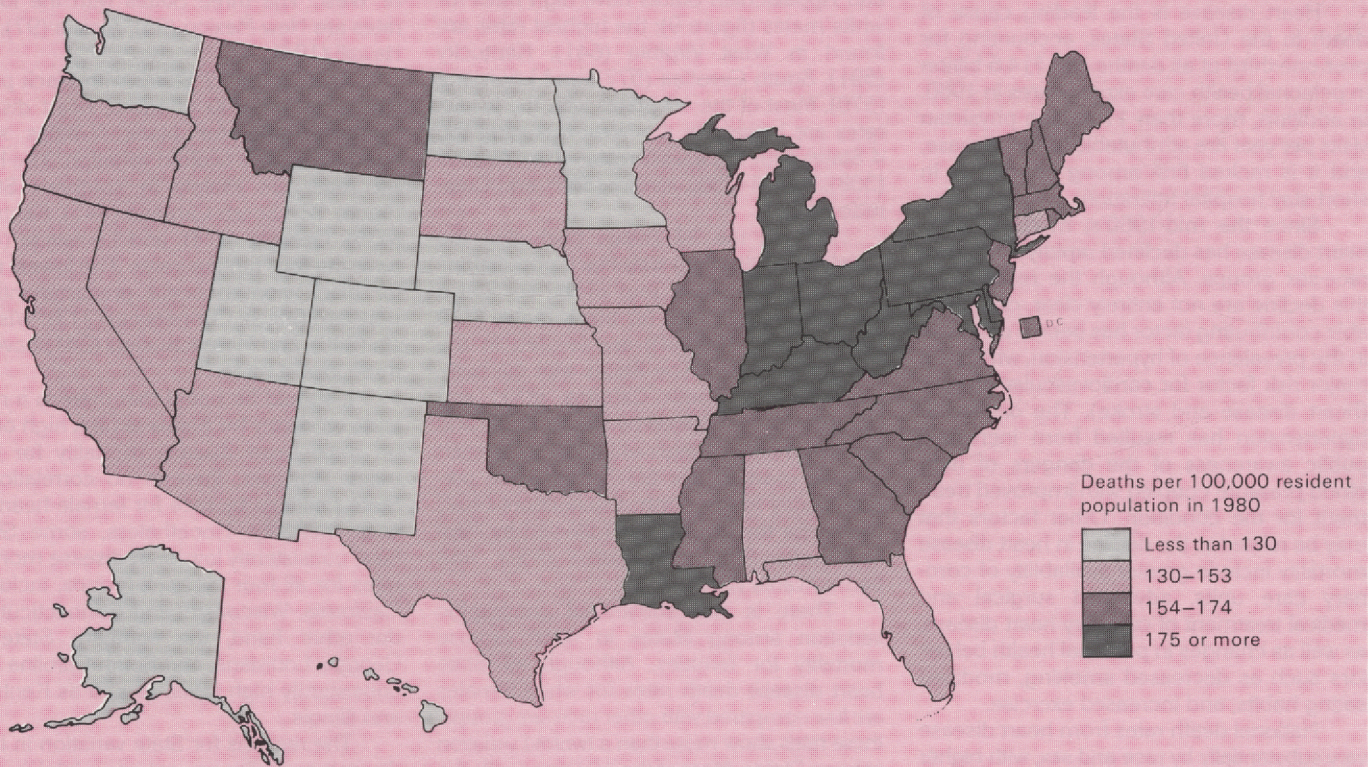
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Figure 10. Death rates for heart disease among black males 45-64 years of age: 1979-80



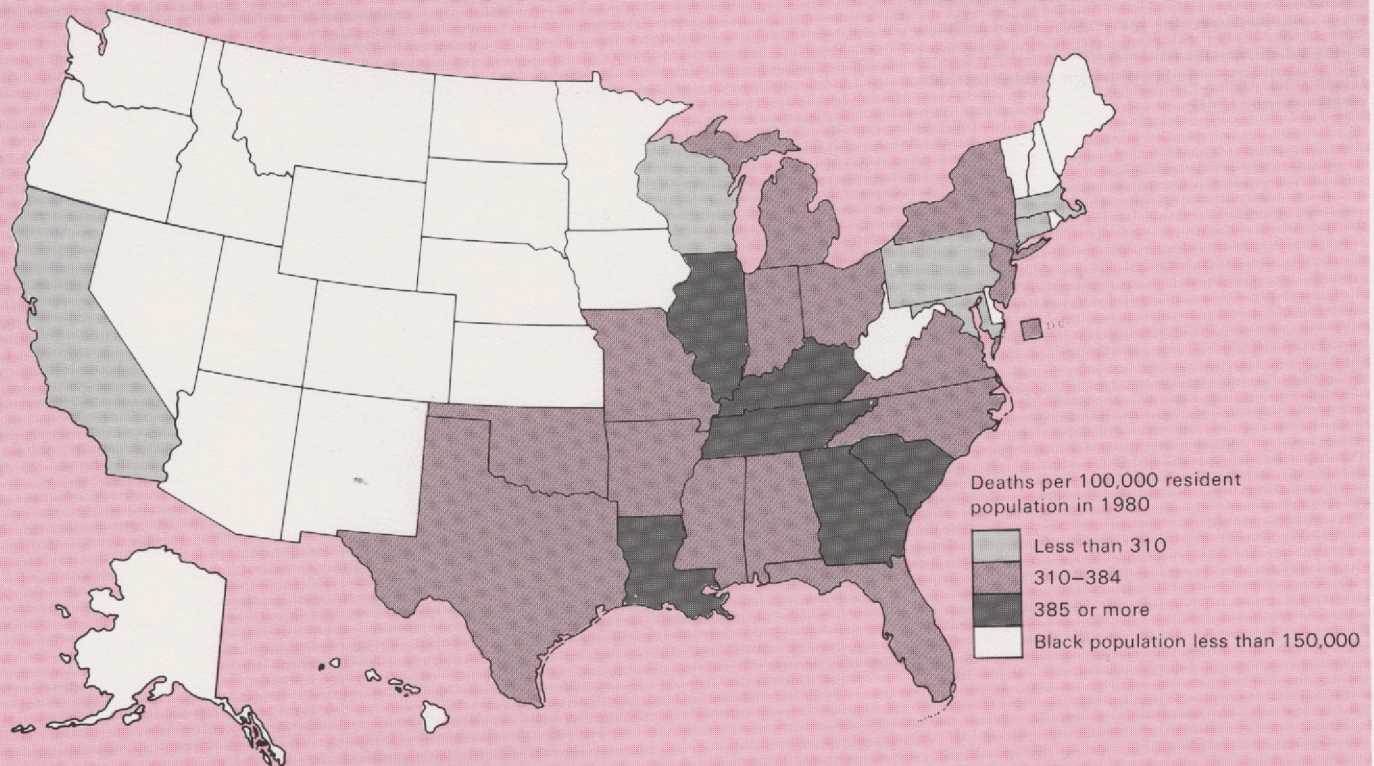
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Figure 11. Death rates for heart disease among white females 45–64 years of age: 1979–80



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

Figure 12. Death rates for heart disease among black females 45–64 years of age: 1979–80



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

Death Rates for Heart Disease

Heart disease is the leading cause of death in the United States, accounting for over one-third of all deaths and \$14.6 billion in personal health care expenditures in 1980. In addition, more than 11 million physician visits per year are attributable to this disease, and it is ranked first among conditions in short-stay hospital utilization.

Since the mid-1960's, mortality from heart disease has declined rapidly among all race-sex groups. Although the reasons for this decline are not entirely clear, one probable contributing factor has been a decrease in the prevalence of hypertension, which is a major risk factor for cardiovascular disease (heart disease and stroke). The decline in hypertension has resulted from increased public awareness of the dangers of high blood pressure coupled with improved treatment for the condition. Other factors that may be related to the decline in heart disease mortality include greater availability of coronary care units, advanced surgical and medical treatment of coronary heart disease, as well as changes in personal health behaviors such as decreased smoking, modified eating habits, and increased exercise.

National death rates from heart disease vary substantially by race and sex, with higher rates among men and black persons. In 1979-80, the death rate from heart disease for adults 45-64 years of age was highest for black males (679 per 100,000 population) and lowest for white females (159). For both sexes, black persons have higher heart disease mortality. However, the race differential was only 36 percent for males (679 versus 498), whereas the rate for black females was more than twice as large as for white females (346 versus 159).

Variation among States in heart disease death rates is approximately twofold for both white and black males. Many southeastern and Appalachian States have high rates for white males (figure 9); the highest rates are found in West Virginia (641), Kentucky (591), South Carolina (577), and Louisiana (570). Most of the 10 States with the lowest rates are located in the West including the 4 States with the lowest rates—New Mexico (308), Hawaii (356), Alaska (380), and Colorado (380).

Among the 27 States (including the District of Columbia) with black populations of 150,000 or more, four of the six States with the highest rates for black males (770 or more per 100,000) are located in the South (figure 10). The States with the highest rates are South Carolina (851) and Georgia (815) followed by Illinois (799) and Louisiana (796). States with the lowest heart disease mortality for black males are predominantly in the north; Connecticut (462) has by far the lowest rate, followed by Massachusetts (545), Wisconsin (552), and Pennsylvania (557).

There is also substantial geographic variation among States in heart disease mortality for females. Although all State heart disease death rates for white females are low compared with other race-sex groups, these rates show more than a twofold variation among States. Most of the 10 States with the highest rates (175 or more per 100,000) are located in the Northeast, Appalachia, or on the Great Lakes (figure 11). The three States with the highest rates for white females are West Virginia (232), Delaware (189), and

Kentucky (189). All of the 10 States with the lowest rates for white women (under 130 per 100,000) are located in the North Central or West. The three States with the lowest rates are New Mexico (93), Alaska (97), and Hawaii (104).

Among the 27 States with black populations of 150,000 or more, heart disease mortality rates for black females show approximately a twofold variation. The highest rates are mainly in southern States (figure 12); South Carolina (445), Kentucky (435), Georgia (414), and Louisiana (410) have the four highest rates. The lowest rates for black women occur predominantly in northern States; Connecticut (213), Wisconsin (240), and Massachusetts (241) have the three lowest rates.

It should be noted that there is a moderate tendency for States to rank high or low on male heart disease mortality for both races. However, there is no correlation of State rankings by race for female heart disease mortality. Nonetheless, some States have consistently low heart disease mortality rates for all four race-sex groups, including California, Wisconsin, and Connecticut. On the other hand, the southern States of Georgia, Louisiana, and South Carolina have consistently high rates, as well as Kentucky and Illinois.

The reasons for State variation in heart disease mortality are not completely understood. There is currently little evidence that the geographic variation in heart disease mortality is attributable to differences in distributions of risk factors such as smoking, elevated serum cholesterol, and high blood pressure. Studies are planned to better understand the reasons for these geographic patterns.

Death Rates for Stroke

Cerebrovascular disease (stroke), which accounted for \$5.1 billion in personal health care expenditures in 1980, is the third leading cause of death in the United States. Among the major causes of death, stroke has shown the largest decrease over the past 30 years, with an especially rapid rate of decline during the 1970's. Between 1970 and 1980, the overall age-adjusted death rate for this disease decreased by 38 percent (from 66 to 41 per 100,000 population). Furthermore, the percentage decline in death rates for stroke has been similar for white males, white females, black males, and black females (ranging from 37 to 43 percent).

Reasons for the dramatic decline in stroke mortality are not fully understood. Part of the decline may be attributed to better control of hypertension. Data from the National Health and Nutrition Examination Survey show that people with hypertension were more likely to be aware of their condition, use medication, and have their blood pressure under control in 1976-80 than in 1960-62. However, although hypertension is recognized as an important risk factor, it does not appear to be the only reason for the downward trend. For example, better diagnosis and improved management and rehabilitation of stroke victims may have also contributed to the decrease in mortality.

In 1979-80, the age-adjusted death rates from stroke for persons 35-74 years of age were 137 per 100,000 population for black males, 101 for black females, 53 for white males, and 41 for white females. Whereas male rates are moderately higher than female rates (36 percent higher among black and 31 percent among white people), rates for black persons are more than twice as high as for white persons for both sexes. This large race differential can be explained in part by higher blood pressure levels among the black population.

Among white males 35-74 years of age, there is approximately a twofold range in 1979-80 State cerebrovascular death rates. Most States with relatively high age-adjusted rates are in the South (figure 13). The highest rates are observed in South Carolina (72), Louisiana (69), Tennessee (68), and Georgia (67). Except for Delaware and Connecticut, States tending to have the lowest rates (less than 45 per 100,000) are located in the West. Hawaii has the lowest rate (32), followed by Idaho (40), Colorado (42), Delaware (42), and Connecticut (42).

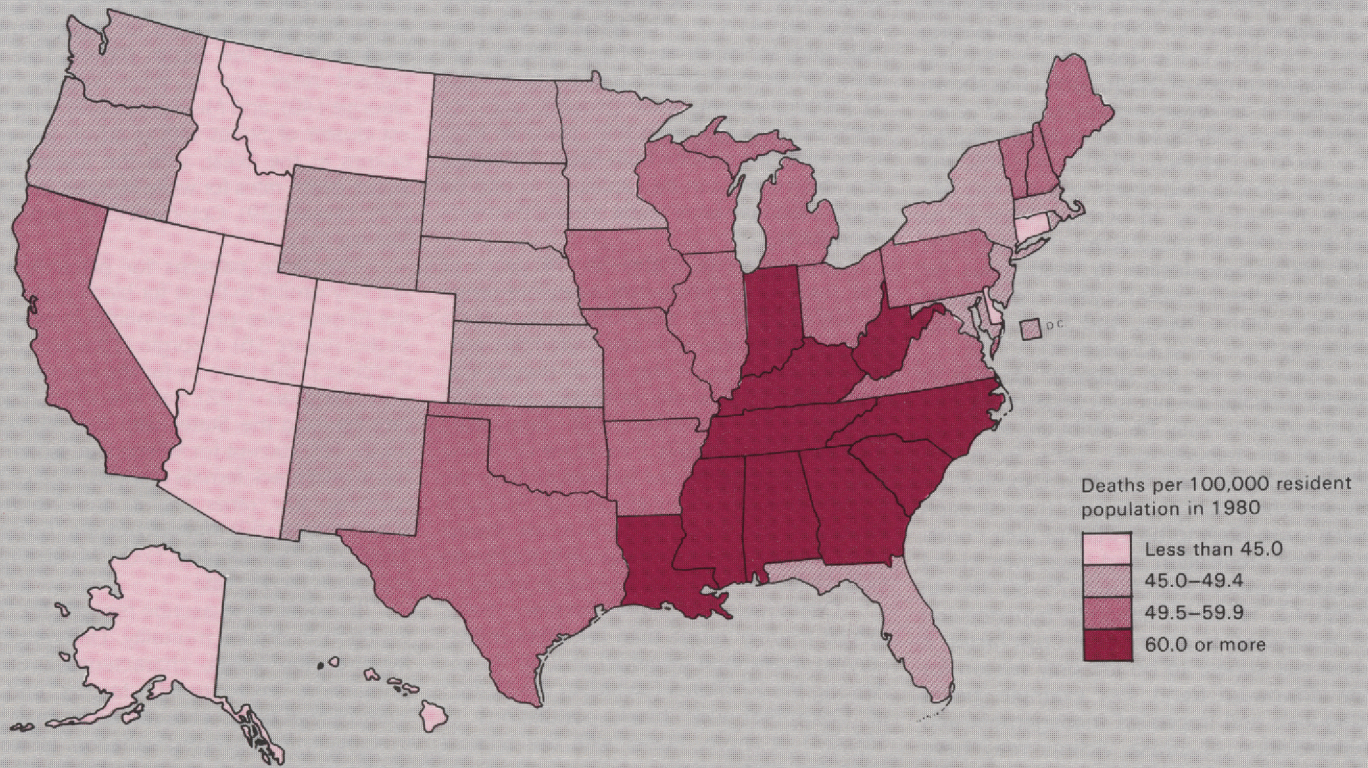
Death rates from stroke for black males exhibit a wider range than for white males, varying more than threefold among States. Among the 27 States (including the District of Columbia) with black populations of 150,000 or more, States with the highest rates for black males (170 or more per 100,000) are in the South (figure 14). South Carolina (234) and Georgia (208) have by far the highest rates followed by Tennessee (192) and North Carolina (182). The three lowest age-adjusted rates for black males are in northern States [Massachusetts (64), Wisconsin (77), Connecticut (83)].

State variation in stroke mortality is similar for females (twofold range for white versus threefold for black women). Like the observed patterns for white males, the largest stroke mortality rates for white females tend to be in the South (figure 15). The highest rates are in West Virginia (50), Georgia (49), and Mississippi (49). The largest cluster of States with relatively low rates occurs in the West, with the lowest State stroke death rates for white females in Alaska (27), Hawaii (29), Colorado (31), and North Dakota (31).

The State patterns for black females are very similar to those for black males, with the largest rates predominantly in southern States (figure 16). Georgia (153) and South Carolina (150) have by far the highest rates, and Arkansas (132) has the third highest rate (among the States with data shown in figure 16). Except for Wisconsin, which has the lowest black female rate (58), States with relatively low rates are in the Northeast [Connecticut (59), Massachusetts (66), New York (76)]. Washington, D.C. (74) also has a low black female rate.

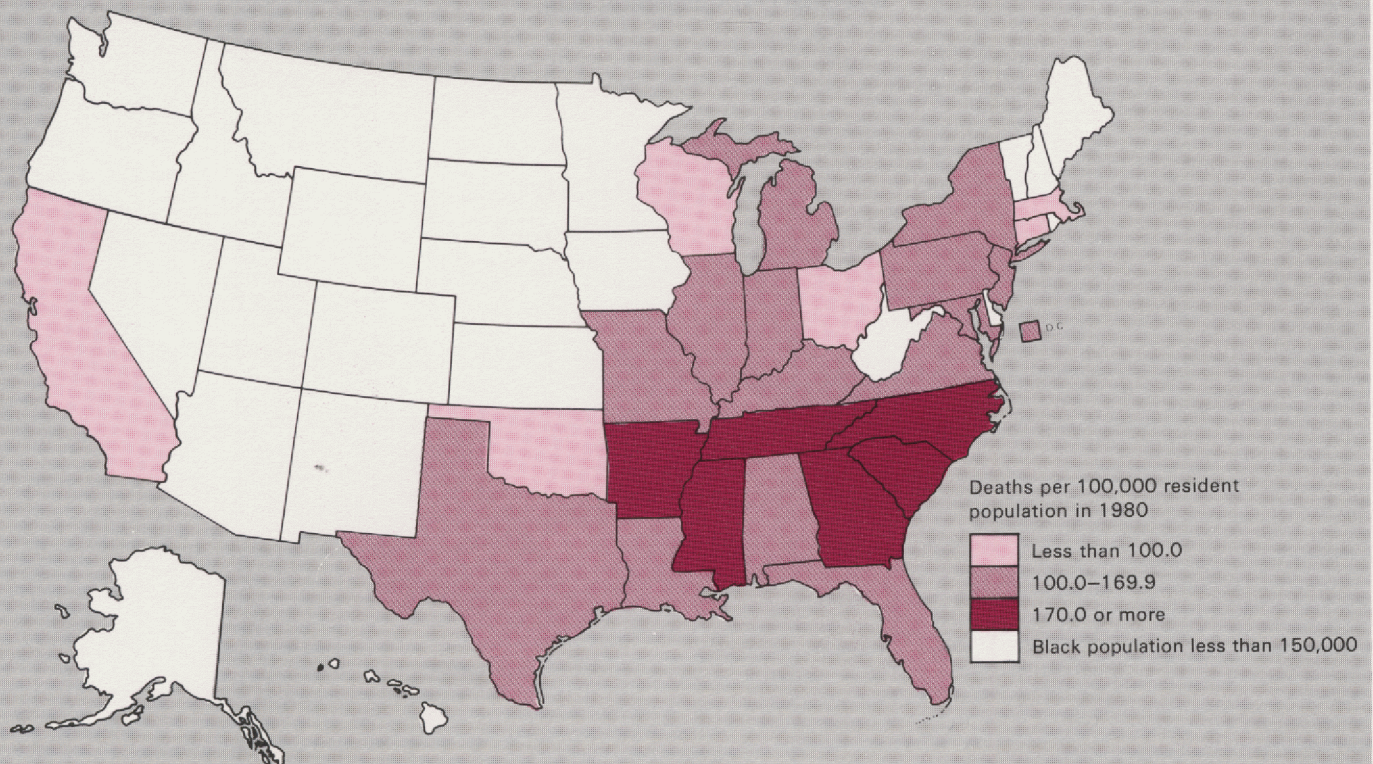
It is difficult to ascribe reasons for State variation in stroke mortality. Differences in hypertension levels, characteristics of the population, environmental factors, and the availability of health care resources may help to explain the observed variation. However, continued research is needed to clarify the relationships between these factors and geographic variation in stroke mortality.

Figure 13. Age-adjusted death rates for stroke among white males 35–74 years of age: 1979–80



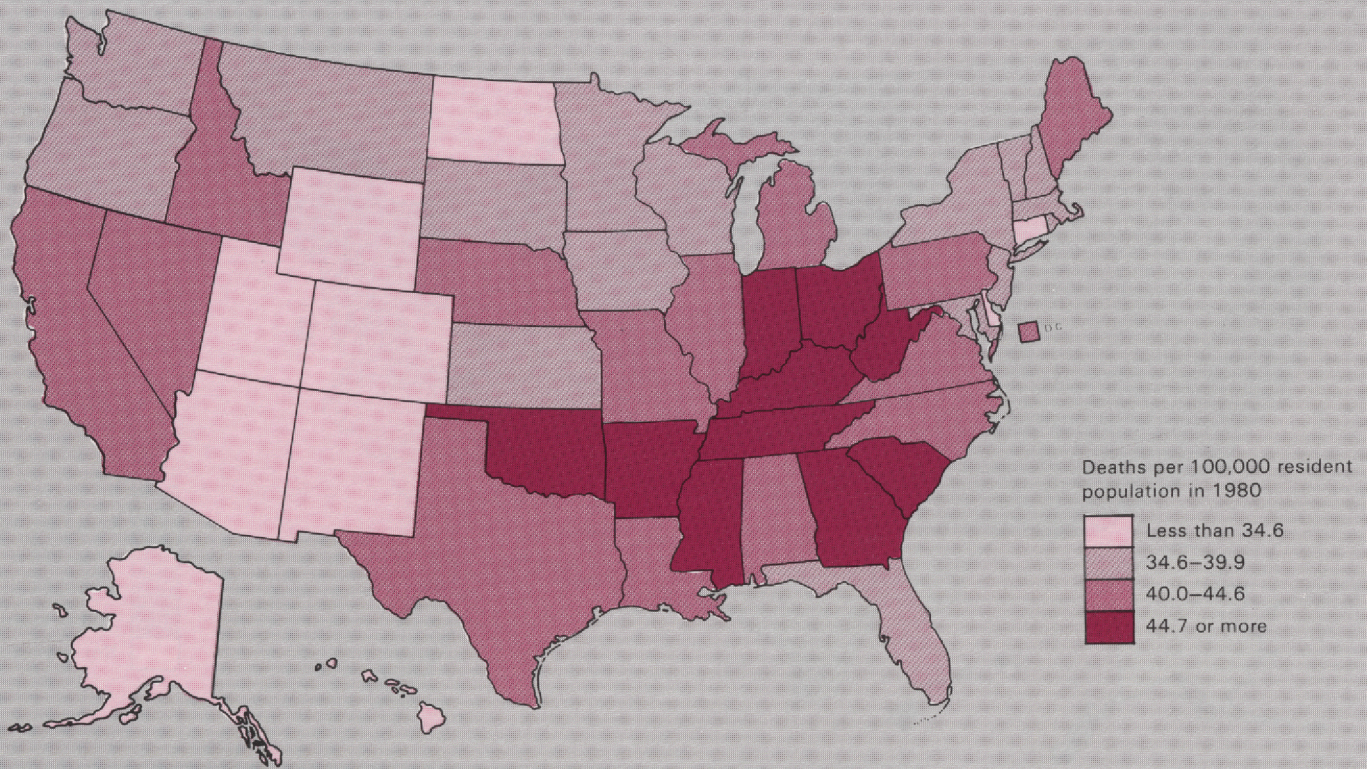
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Figure 14. Age-adjusted death rates for stroke among black males 35–74 years of age: 1979–80



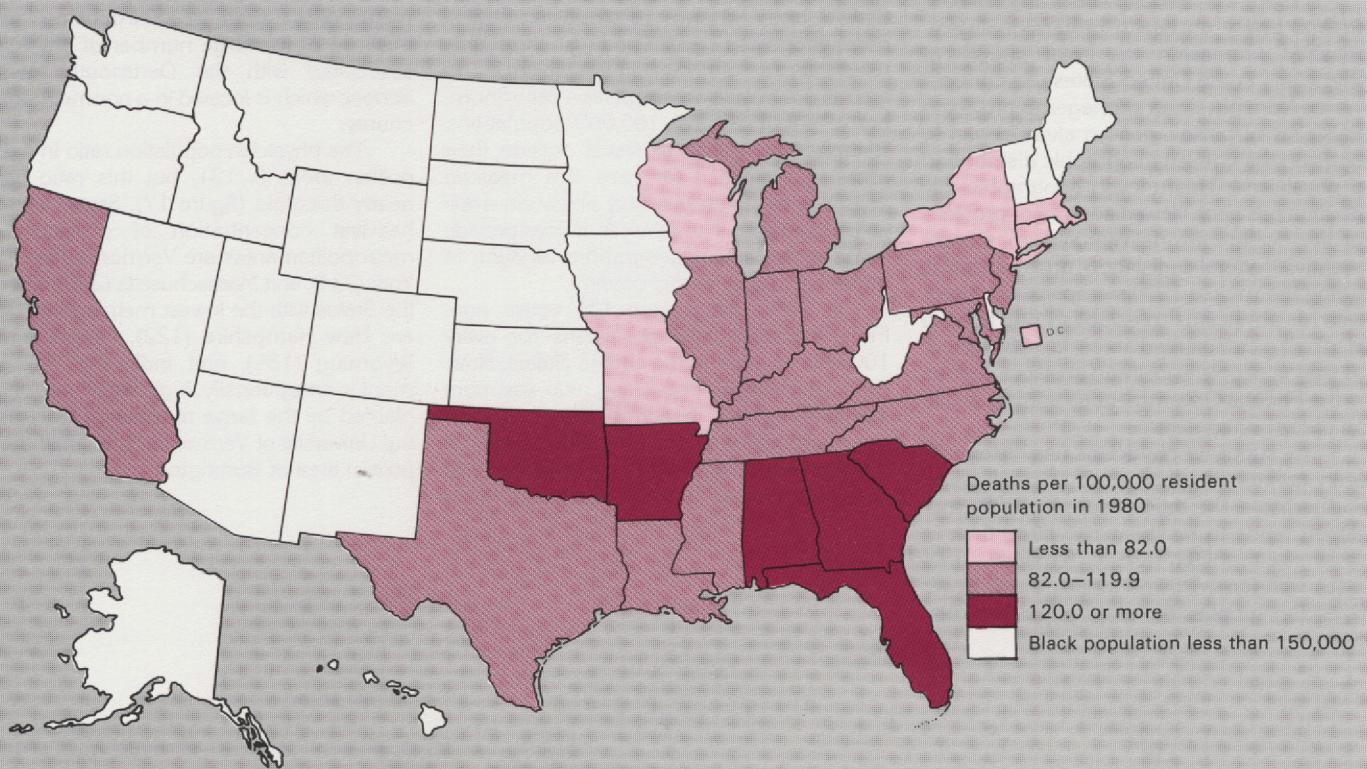
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Figure 15. Age-adjusted death rates for stroke among white females 35-74 years of age: 1979-80



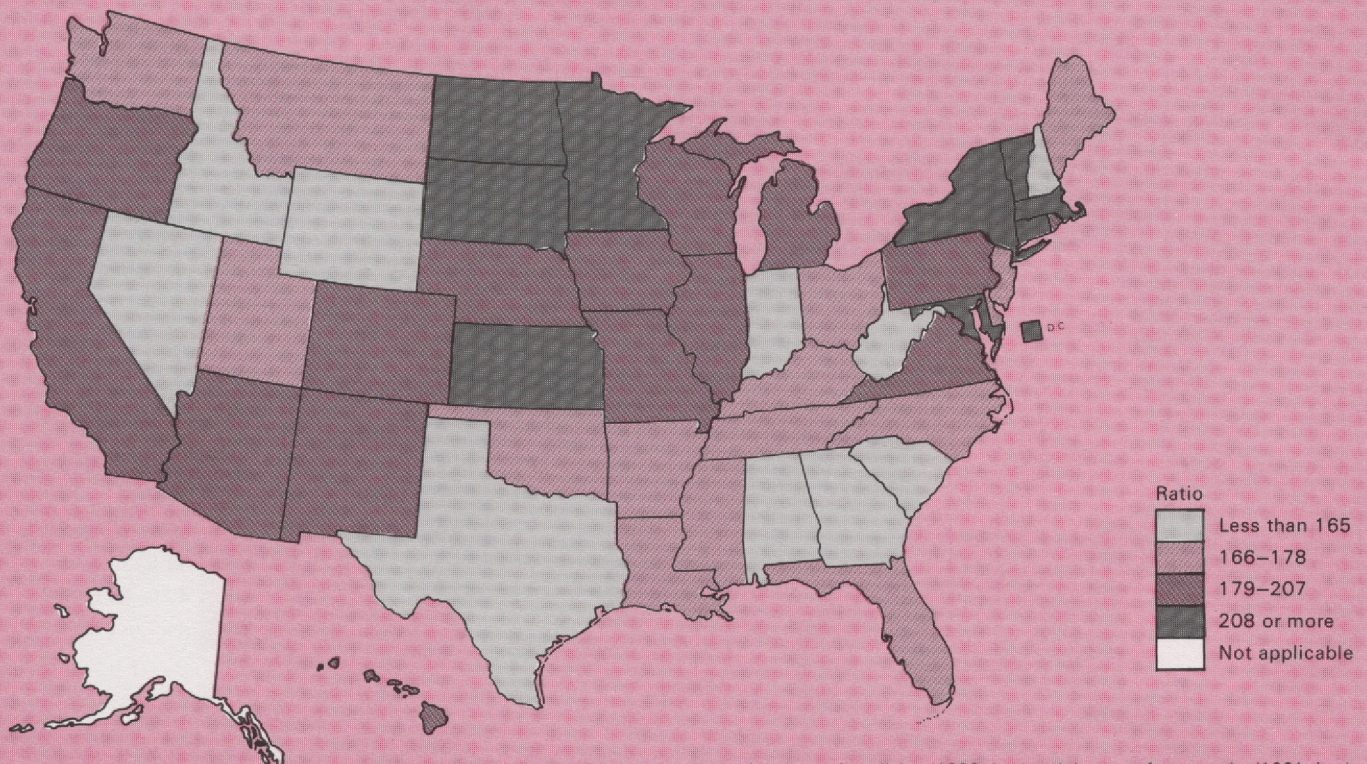
SOURCE: National Center for Health Statistics: Computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Figure 16. Age-adjusted death rates for stroke among black females 35-74 years of age: 1979-80



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

Figure 17. Patient care physicians per 100,000 resident population in metropolitan areas: 1980 and 1981



NOTE: Physicians are active non-Federal doctors of medicine (1980 data) and doctors of osteopathy (1981 data).

SOURCE: Health Resources and Services Administration: Bureau of Health Professions.

Patient Care Physicians

During the 1960's and early 1970's, Federal policy on health professionals emphasized increasing the total supply of physicians in the United States. As concern moved from physician shortages to projected physician surpluses, policymakers began to focus on the uneven geographic distribution of physicians. This uneven geographic distribution has been viewed as a major problem for the health care delivery system. Consequently, Federal legislation and programs during the middle 1970's emphasized incentives for physicians to establish practices in medically underserved areas. In 1981, about 40 million people were living in places defined by the Federal Government as primary medical care shortage areas.

The supply of physicians has historically been greater in urban than in rural areas. Furthermore, the ratio of physicians to population tends to be greater in large than in small metropolitan areas. Similarly, rural areas with larger towns tend to have larger physician supplies than less populated rural areas.

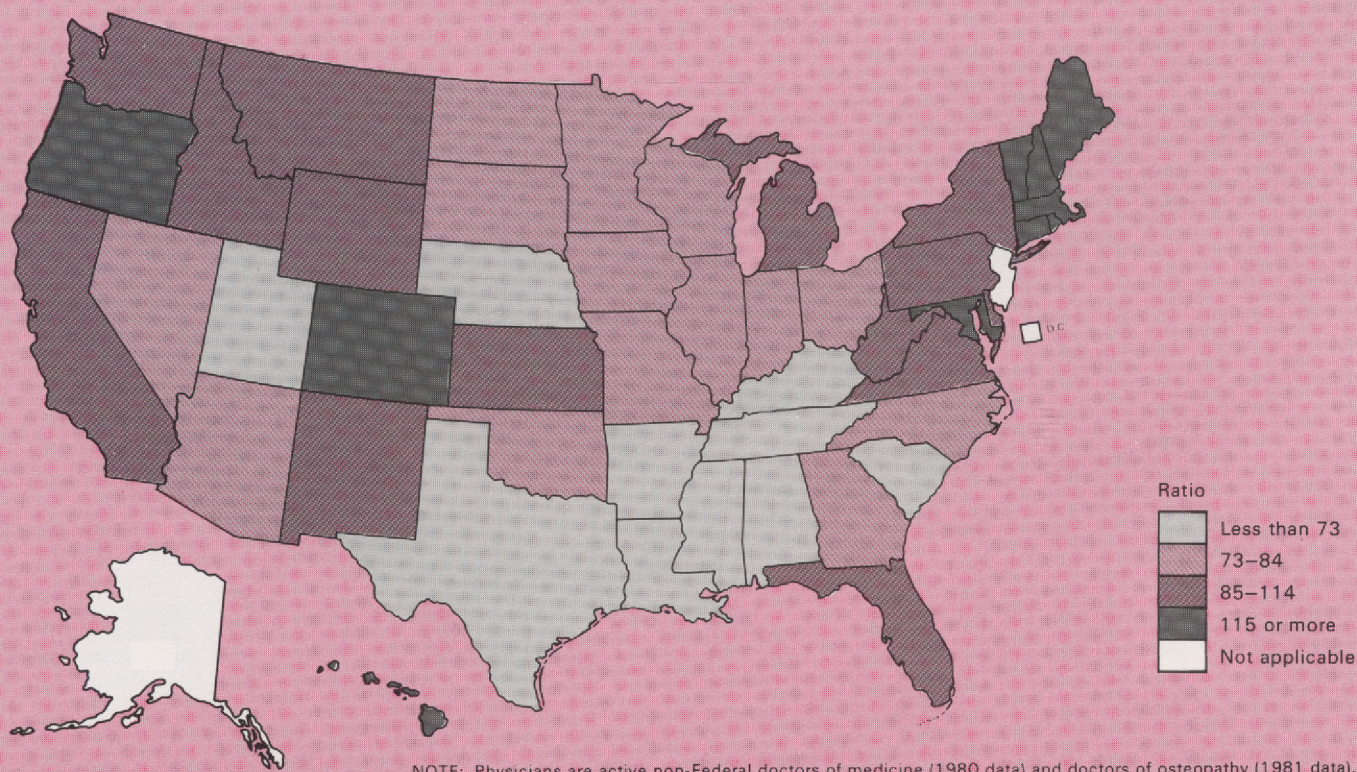
Though recent findings indicate an improvement in the distribution of physicians, physician supply still varies widely among States and among metropolitan-versus-nonmetropolitan areas. The most commonly used measure of physician availability for an area is the physician-population ratio (number of physicians per 100,000 population). Because some people travel outside their areas of residence for care, this measure does not completely reflect physician availability in an area. Nonetheless, it does provide some indication of geographic variation in physician supply in this country.

In 1980, there were 165 active non-Federal patient care physicians for every 100,000 persons in the United States. However, the physician-population ratio was more than twice as large in metropolitan (191) as in nonmetropolitan areas (84). The supply of physicians in metropolitan areas was at least twice as great as in nonmetropolitan areas

in more than half the States (figures 17 and 18). New Hampshire was the only State with a larger supply of physicians in nonmetropolitan than in metropolitan areas, because of the large number of physicians associated with the Dartmouth Medical School, which is located in a nonmetropolitan county.

The physician-population ratio in metropolitan areas is 191, but this ratio varies nearly threefold (figure 17). States with the heaviest concentration of physicians in metropolitan areas are Vermont (303), New York (234), and Massachusetts (226), whereas the States with the lowest metropolitan ratios are New Hampshire (122), Nevada (138), Wyoming (139), and Indiana (139). Vermont's exceptionally high ratio can be explained by the large number of doctors at the University of Vermont in the small metropolitan area of Burlington.

Figure 18. Patient care physicians per 100,000 resident population in nonmetropolitan areas: 1980 and 1981



NOTE: Physicians are active non-Federal doctors of medicine (1980 data) and doctors of osteopathy (1981 data).

SOURCE: Health Resources and Services Administration: Bureau of Health Professions.

It should be noted that the ratio of physicians to population in Washington, D.C. (423) is far greater than for metropolitan areas of any State. However, this ratio is not directly comparable because the District of Columbia is the central city of the Washington metropolitan area, which includes surrounding counties in Maryland and Virginia. Physicians in the District serve residents of these bordering States in addition to the city's own population.

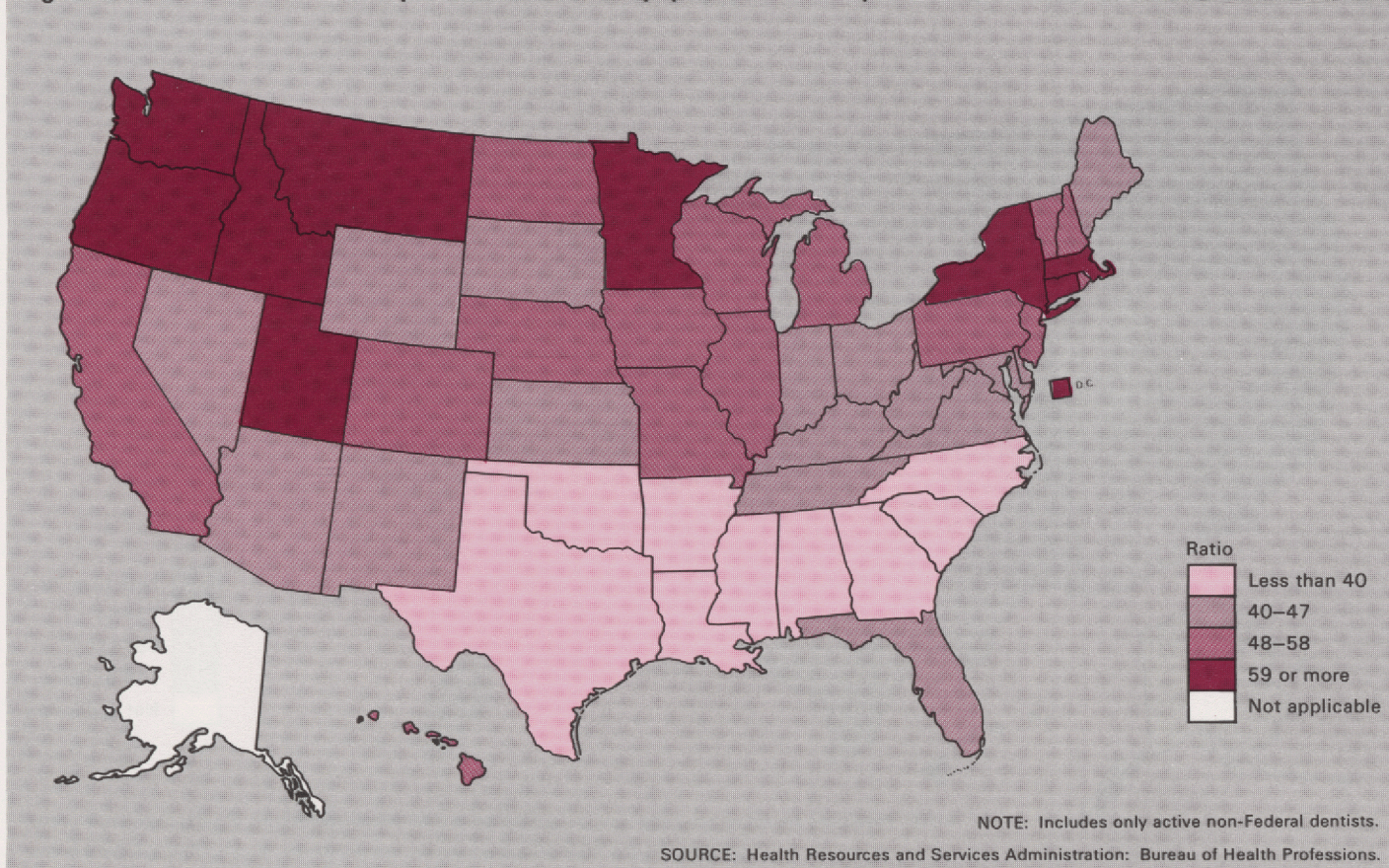
There is also much State variation in physician supply for nonmetropolitan areas (figure 18). The physician-population ratio for nonmetropolitan areas in the United States is 84 per 100,000 but varies fourfold among the States. Six of the 10 States with

ratios of 115 or more are located in New England; New Hampshire (207), Massachusetts (162), and Hawaii (149) have the highest ratios. Many southern States have small supplies of physicians in nonmetropolitan areas, with Alabama (53), Louisiana (54), and Tennessee (62) having the lowest physician-population ratios.

Most States have relatively high or low physician-population ratios for both metropolitan and nonmetropolitan areas. Several

States, however, follow a different pattern. The metropolitan areas of New Hampshire, Wyoming, and West Virginia have small supplies of physicians relative to metropolitan areas of other States but have relatively high ratios for nonmetropolitan areas. Arizona, Minnesota, and Nebraska are examples of the opposite pattern; these States have relatively high ratios for metropolitan areas but low ratios compared with other States for nonmetropolitan areas.

Figure 19. Patient care dentists per 100,000 resident population in metropolitan areas: 1979



Patient Care Dentists

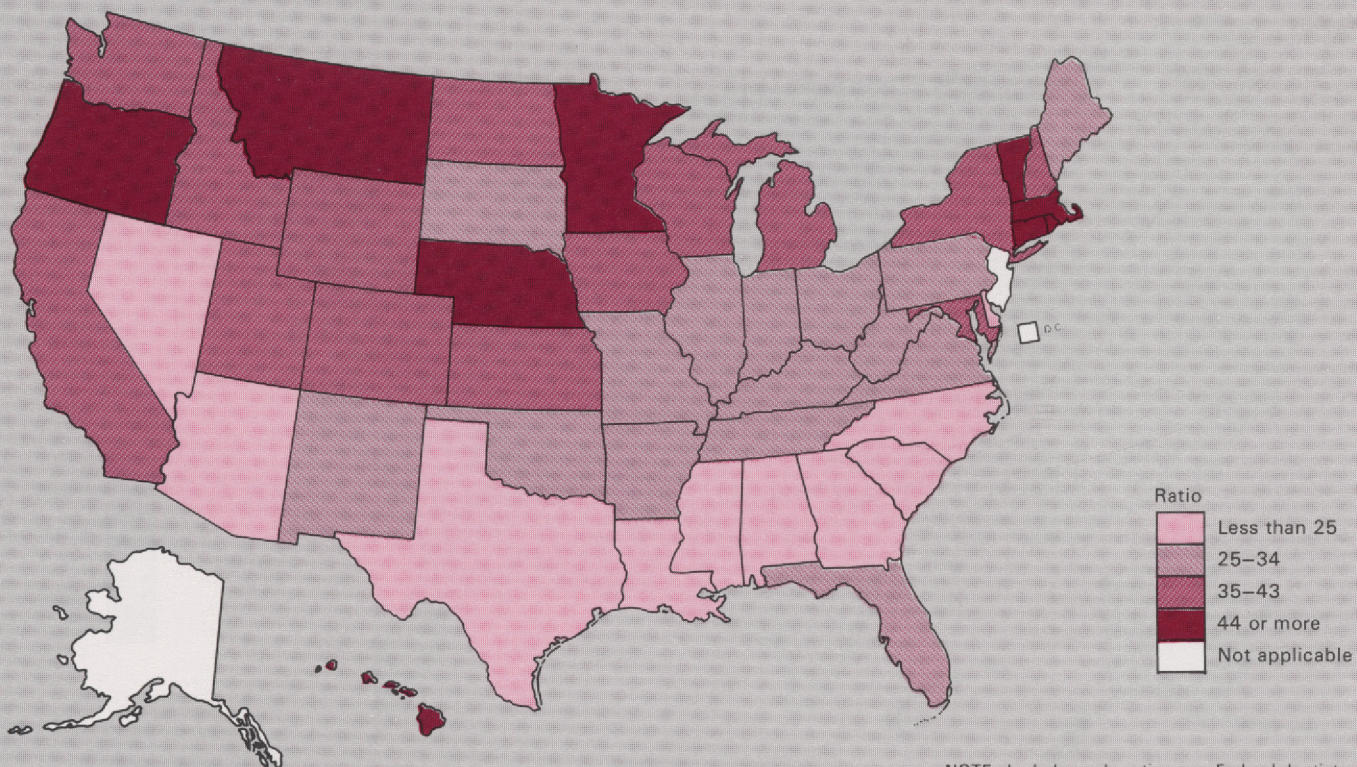
In 1981, around 20 million people lived in areas designated by the Federal Government as having a shortage of dentists. Some Federal legislation during the 1960's and 1970's aimed to ameliorate the uneven geographic distribution of dentists. Although evidence exists of less geographic variation than in previous years, in 1979 there were still large differences among areas in the supply of dentists.

The supply of dentists varies by State and tends to be greater in metropolitan areas. The extent of geographic variation in dentist

supply, however, is not as large as for physicians. The 1979 dentist-population ratio was 61 percent greater in metropolitan areas compared with a much larger 1980 differential of 127 percent for physicians. Furthermore, the metropolitan-nonmetropolitan differential for dentists was less than 50 percent in more than half the States, and in eight States the difference was less than 25 percent (figures 19 and 20). In contrast, the supply of physicians in metropolitan areas was at least twice as great as in nonmetropolitan areas in more than half the States and at least 50 percent greater in all but six States.

Nationally, in 1979 there were 46 active non-Federal patient care dentists per 100,000 population, but this ratio was 50 in metropolitan areas and 31 in nonmetropolitan areas. The States with the lowest concentration of dentists in metropolitan areas are all located in the South (figure 19); Mississippi (32), Alabama (33), South Carolina (34), and Arkansas (34) had the lowest ratios, and North Carolina, Texas, Louisiana, Oklahoma, and Georgia also had ratios of less than 40 per 100,000 population. States with the highest metropolitan ratios are scattered across the north, including New York (68), the District of Columbia (66), Oregon (65), Connecticut (65), Massachusetts (61), and Montana (61).

Figure 20. Patient care dentists per 100,000 resident population in nonmetropolitan areas: 1979



NOTE: Includes only active non-Federal dentists.

SOURCE: Health Resources and Services Administration: Bureau of Health Professions.

State variation in dentist-population ratios among nonmetropolitan areas is similar to that for metropolitan areas. Nonmetropolitan areas of many southern States tend to have the lowest ratios, whereas several northern States have the heaviest nonmetropolitan concentrations of dentists (figure 20).

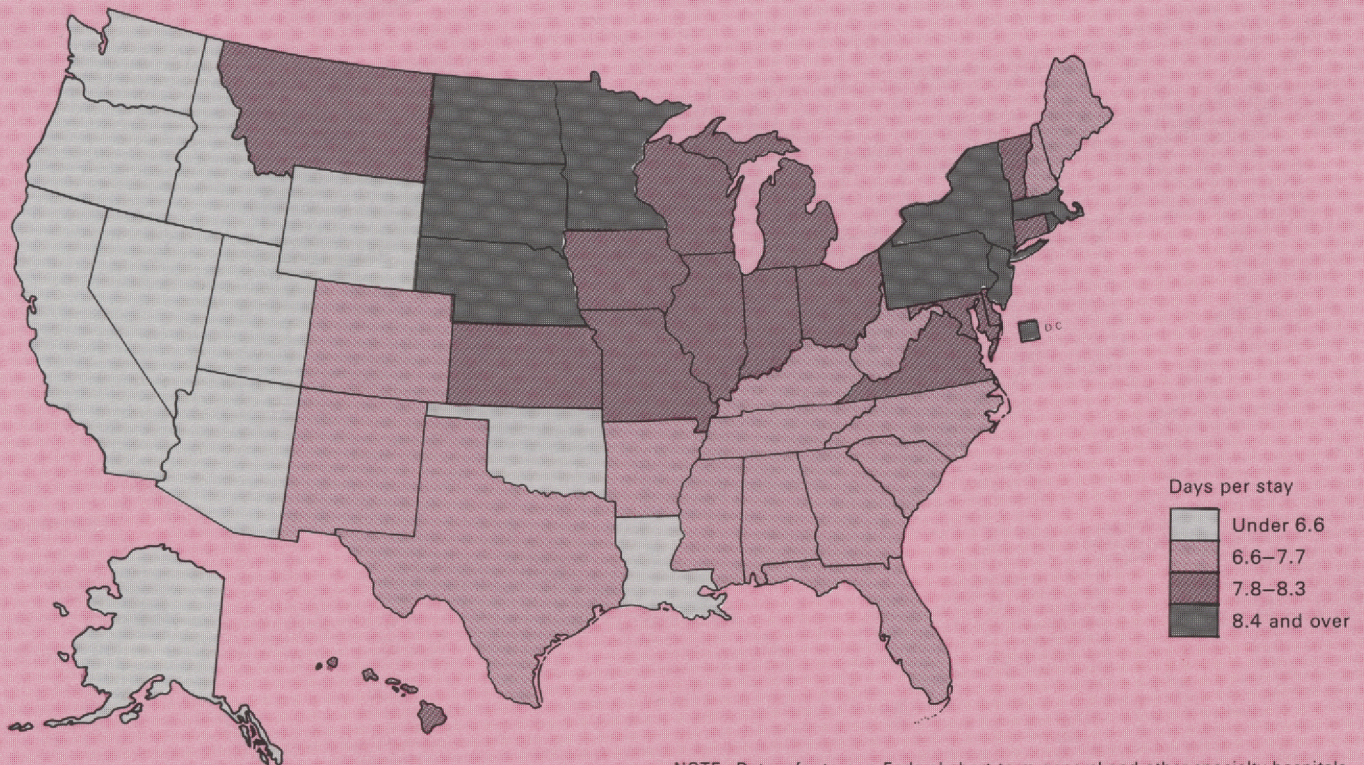
There is a strong tendency for States to have either high or low dentist-population

ratios for both metropolitan and nonmetropolitan areas. One deviation from this pattern is New York, which has the highest metropolitan dentist-population ratio but only the 19th highest nonmetropolitan ratio. Travel by residents of nonmetropolitan areas into metropolitan areas for dental care may explain part of this difference.

States with larger concentrations of dentists also tend to have greater supplies of physicians. However, there are exceptions to this pattern. For example, Idaho, Wyoming,

and Alaska are among the five lowest States in overall physician-population ratios but do not rank either high or low for dentist-population ratios. Montana also has a relatively low physician-population ratio (12th lowest) but has the 14th highest dentist-population ratio. On the other hand, Arizona has a fairly large physician-population ratio (13th highest) but has the 17th lowest dentist-population ratio.

Figure 21. Average length of stay in community hospitals: 1982



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

SOURCE: American Hospital Association.

Length of Hospital Stay

The average length of time patients remain in short-stay hospitals has decreased by nearly 1 day since the late 1960's. Some factors that may have contributed to this decline are increased use of outpatient and day-care facilities, use of home care, technological advances in surgery and treatment, utilization review, better discharge planning, and limitations placed on the length of hospitalization by third-party payers.

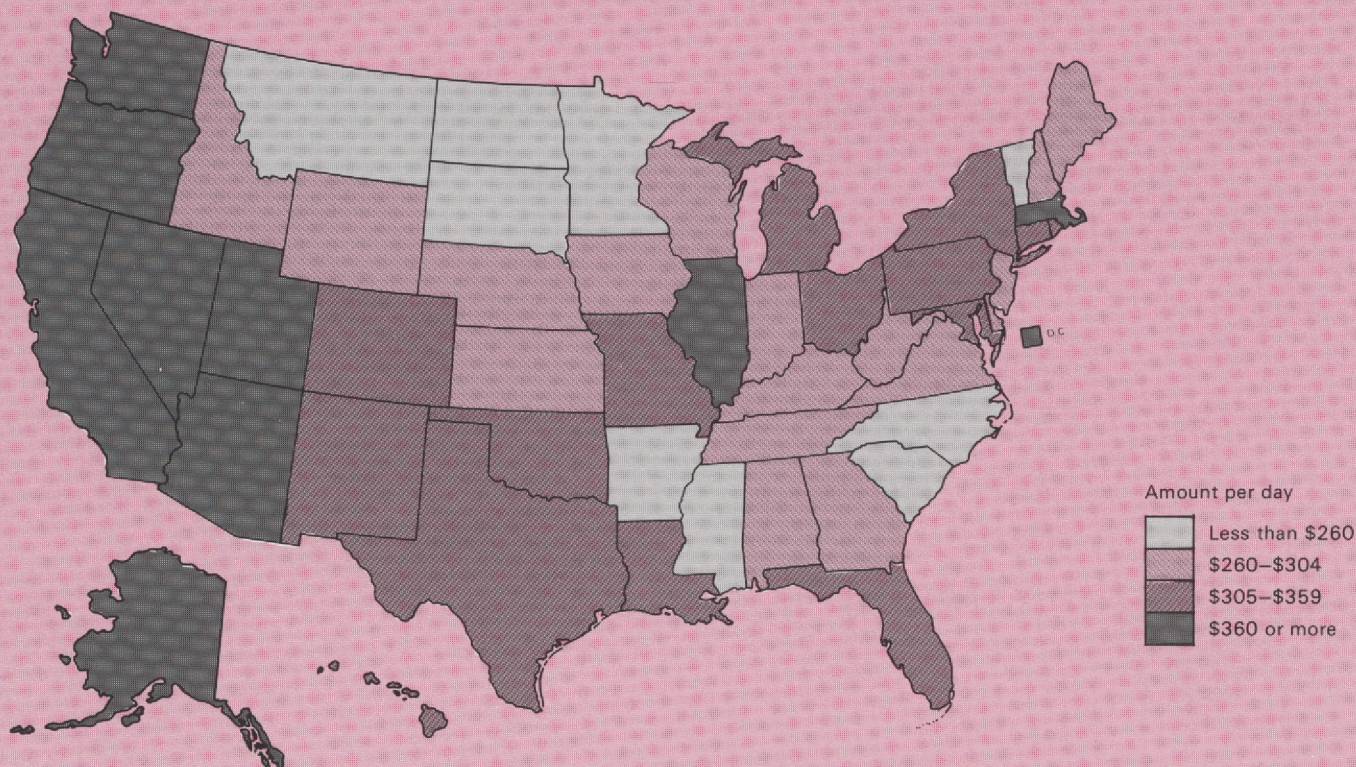
In 1982, the average length of stay in short-stay hospitals in the United States was 7.6 days, with wide variation among the States (figure 21). The longest average stays were in New York (9.7), Minnesota (9.4), and Massachusetts (8.9), whereas the shortest were

in Utah (5.4), Wyoming (5.5), and Washington (5.7). For many years, States in the Northeast and North Central Regions have had longer average lengths of stay than in the West and South. Furthermore, data from the National Hospital Discharge Survey indicate that this regional pattern holds for all age groups and most diagnostic categories.

The reasons for geographic variation in length of stay are not completely clear. The relatively short averages in many western States may be due in part to a greater preponderance of health maintenance organizations, whose members typically have shorter lengths of stay. Some other factors in State variation are differences in severity of diseases (perhaps affected by differences in climate), differences in availability of resources (e.g., hospital beds, nursing homes), and varying economic incentives for cost containment.

Beginning October 1, 1983, Congress implemented a prospective payment system based on a classification system using diagnostic-related groups to reimburse hospitals for services to Medicare patients. Unlike the previous policy, this system does not incorporate length of stay in determining reimbursement levels for Medicare patients (except for unusually long stays, which will require medical justification). This incentive may reduce the average length of stay in short-stay hospitals even more in future years.

Figure 22. Adjusted expenses per inpatient day in community hospitals: 1982



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

SOURCE: American Hospital Association.

Hospital Expenses

The cost of hospital care in the United States has been rising rapidly for almost two decades. Between 1965 and 1982, the Consumer Price Index (CPI) for hospital care increased at an average rate of 12.4 percent per year, exceeding the rate of increase for all other items in the medical care component of the CPI. Moreover, hospital care accounts for by far the largest proportion of personal health care expenditures (47 percent in 1982), and this proportion has been increasing steadily since 1965 when it accounted for 39 percent.

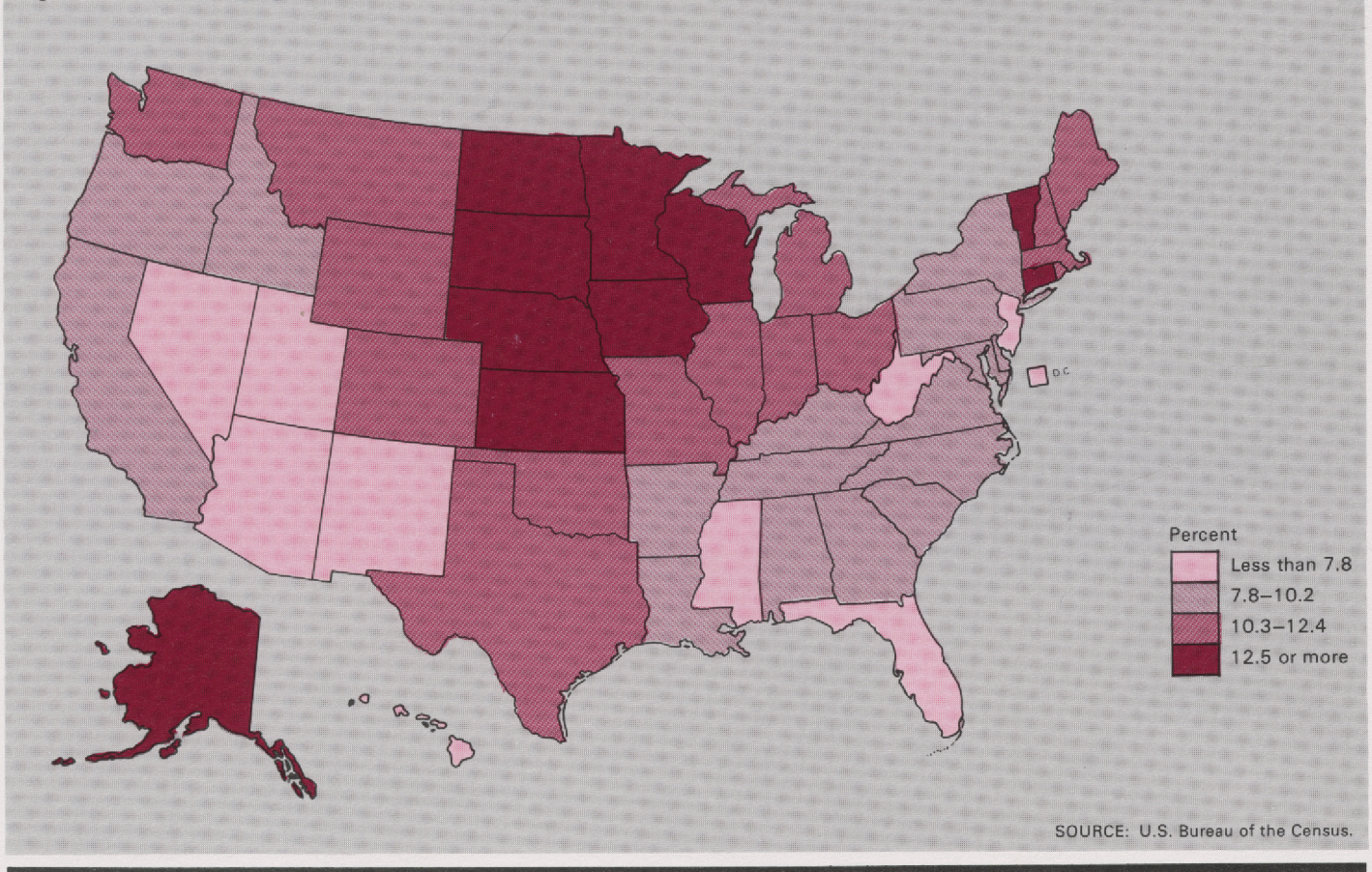
Adjusted expenses per inpatient day are derived from total hospital expenses and reflect the cost to community hospitals of providing 1 day of inpatient care. Between

1980 and 1982, these expenses increased at an average rate of 15.6 percent per year. This increase can be attributed to four major factors: price inflation (23 percent), more hospital employees (22 percent), wage increases for these employees (34 percent), and changes in both the quantity and quality of the medical technologies used by hospitals (21 percent).

In 1982, adjusted expenses per inpatient day varied among States more than twofold (figure 22). States with the highest hospital expenses were concentrated in the West. Alaska ranked highest (\$508) followed by California (\$507) and Nevada (\$494). Two other States—Massachusetts (\$370) and Illinois (\$369)—and the District of Columbia (\$459) also had relatively high hospital expenses per inpatient day. States with lower expenses are located primarily in the South and the western portion of the North Central Region. South Dakota was lowest (\$217), and Montana and Mississippi also had relatively low expenses (\$226 and \$227, respectively).

Reasons for this variation include differences among States in the financing and delivery of health care as well as cost containment efforts. General price levels also affect hospital expenses. The higher cost of living in States such as Alaska, California, and Massachusetts are reflected in the prices paid for medical supplies, food, and employee wages. In addition, large hospitals are more likely to have higher expenses than are small hospitals. The use of more sophisticated and expensive technologies in large hospitals, as well as bigger and more highly skilled staffs, contribute to this difference. Moreover, large hospitals are usually located in urban areas, and thus, the District of Columbia and States with large urban areas such as California, Massachusetts, Illinois, and Washington would be expected to have higher hospital expenses than the more rural southern and West North Central States.

Figure 23. Percent of persons 75 years of age and over institutionalized in nursing homes: 1980



Nursing Home Residents

Over the past 20 years, the number of persons in nursing homes increased substantially. One reason for this increase is that the population 85 years of age and over has grown rapidly, and this group has the highest rate of nursing home use. The proportion of the elderly in nursing homes, however, stabilized during the mid-1970's following a decade of extremely rapid growth. This growth occurred because eligibility requirements for public payments for nursing home care were liberalized in the mid-1960's, particularly under the Medicaid program. Also, in the early 1970's many elderly psychiatric patients moved to nursing homes when Federal matching funds became available under Medicaid for nursing home care but not for care in long-term psychiatric hospitals.

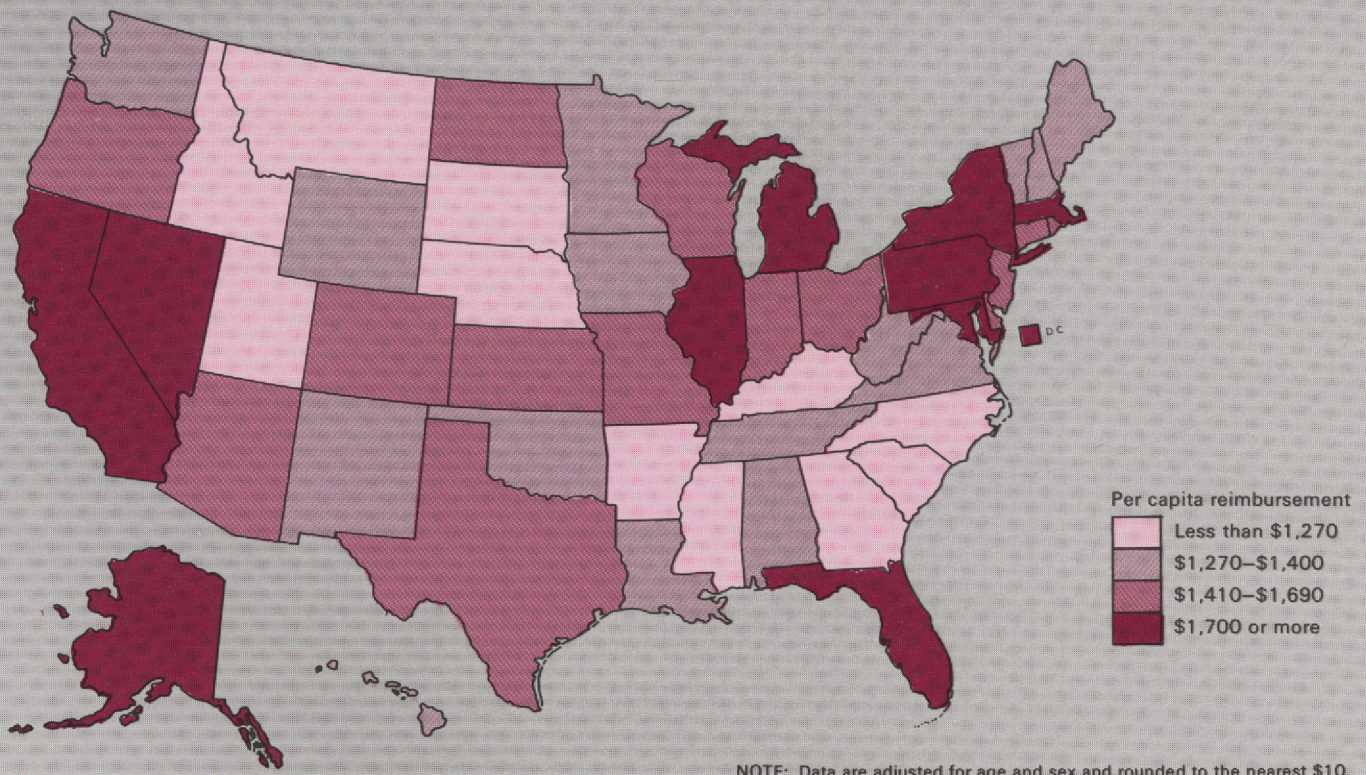
In 1980, nearly \$21 billion was spent on nursing home care, with Medicaid providing about half of the financial support for nursing home patients. Because private health insurance does not generally cover nursing home stays, out-of-pocket payments were the second largest source of payment, accounting for 43 percent of 1980 expenditures. Medicare and private health insurance combined provided only about 3 percent of support for nursing home patients.

In 1980, about 10 percent of the population 75 years of age and over in the United States were institutionalized in nursing homes. However, there is a fourfold variation among States in the proportion institutionalized. States in the north tend to have the highest rates of nursing home use (figure 23); 7 of the 10 States with 12.5 percent or more of the elderly residing in nursing homes are located in the North Central Region. Four of these States, Minnesota (16.1), North Dakota (16.0), South Dakota (15.3), and Iowa (15.1), had the largest percents institutionalized. States with high rates of nursing home use tend to have extremely cold winters, which may have an adverse impact on the health of the elderly and thereby increase the need for nursing home care. Also, these States may have high rates of use because they have small black populations, and overall the white population has a higher proportion institutionalized than the black population.

The lowest percentages of the elderly in nursing homes are located predominantly in southern and western States. In four of these States, less than 6 percent of the population 75 years of age and over live in nursing homes [Florida (4.2), New Mexico (4.7), West Virginia (4.9), and Arizona (5.4)]. The low rate for Florida is attributable to the immigration of many retired persons whose health is generally superior to the overall elderly population. This explanation may also apply to Arizona, along with the fact that Arizona has no Medicaid program (which subsidizes many nursing home residents in other States). Reasons for the low rates of nursing home institutionalization in New Mexico and West Virginia are not as clear, though it is possible that the large Hispanic population in New Mexico may have lower nursing home use than the white population.

An important public policy issue about long-term care for the elderly is whether many nursing home residents could receive comparable but less expensive care in non-institutional settings. Much attention is being given to increasing the accessibility of alternatives to nursing home care such as home health services, congregate housing, and adult day care. Some of the geographic variation in nursing home use may be related to the availability of alternative forms of care.

Figure 24. Medicare per capita reimbursements for persons 65 years of age and over: 1982



NOTE: Data are adjusted for age and sex and rounded to the nearest \$10.

SOURCE: Data computed by the National Center for Health Statistics from data provided by the Health Care Financing Administration.

Medicare Reimbursements

The Medicare program, enacted in 1965 and expanded in 1972, consists of two separate but complementary insurance programs: Hospital insurance (HI) and supplementary medical insurance (SMI). HI covers inpatient hospital and skilled nursing facility services and SMI covers physician and related services.

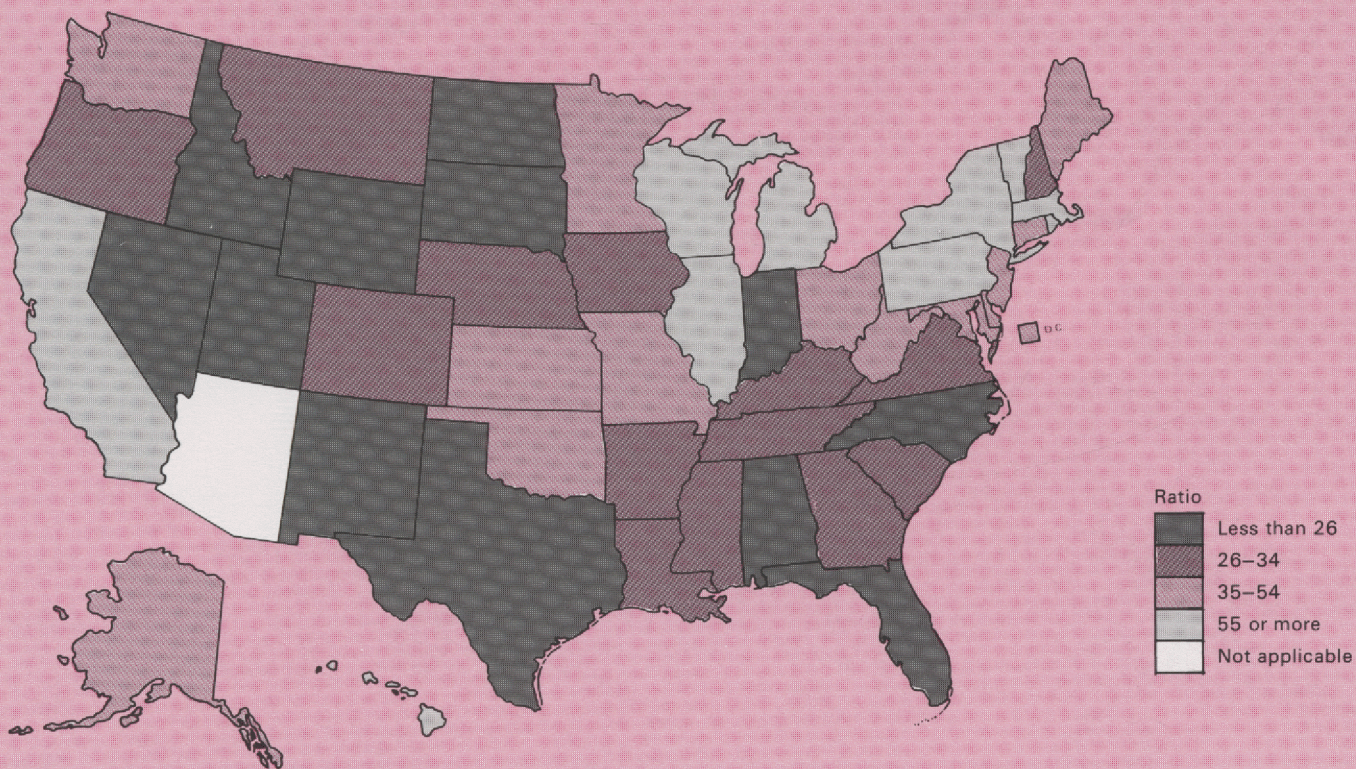
Medicare enrollment for the elderly has increased by an average of 2 percent per year since benefits were first available in 1966—from 19.1 million persons 65 years of age and over to 26.5 million in 1982. Currently, about 97 percent of the elderly population is covered by HI, SMI, or both. In addition, the growth in total reimbursements has been very rapid—from \$5.3 billion in 1968 to \$41.8 billion in 1982, an average annual rate of 15.9 percent.

Because the Medicare program is administered by the Federal Government, eligibility criteria and covered services are uniform for each State. However, differences by State in the age-sex distribution of the Medicare population can influence per capita reimbursements. Accordingly, the data in figure 24 have been adjusted to remove these effects.

Medicare per capita reimbursements are highest in the Northeast and West (\$1,712 and \$1,723, respectively, in 1982) and lowest in the South (\$1,460). New York, Pennsylvania, and Massachusetts each have per capita reimbursements in excess of \$1,700, and California, Alaska, and Nevada are even higher, over \$1,900 per capita. On the other hand, reimbursements are less than \$1,400 in all southern States except Maryland, Florida, and Texas. North Carolina, South Carolina, and Kentucky rank particularly low with per capita reimbursements of less than \$1,200.

Variation among States in Medicare per capita reimbursements results from differences in the cost and utilization of covered services. Moreover, the mix between cost and utilization also varies. For example, both California and Illinois rank relatively high in per capita Medicare reimbursements. Price rather than use is the major factor affecting reimbursements in California; however, the opposite holds for Illinois. In 1982, average daily covered hospital charges for elderly Medicare patients were \$684 in California compared with \$467 in Illinois. Conversely, hospital days per 1,000 elderly Medicare enrollees were 2,950 in California and 4,346 in Illinois.

Figure 25. Medicaid recipients per 100 persons below the poverty level: Fiscal year 1982



SOURCE: Health Care Financing Administration.

Medicaid Recipients

The Medicaid program, enacted in 1966, provides medical care for certain low-income individuals and families. Financed jointly with State and Federal funds, States participate in the program at their option. All States except Arizona currently have Medicaid programs. At a minimum, participating States must cover all persons who receive cash payments from the Aid to Families with Dependent Children (AFDC) program and, in most cases, the Supplemental Security Income (SSI) program. States have the option of extending Medicaid coverage to the medically needy and to other specified groups. Each State administers its Medicaid program within broad Federal requirements and

guidelines, which allow considerable discretion in determining eligibility criteria and benefit coverage. As a result, the characteristics of Medicaid programs have always varied considerably by State.

In 1982, there was a fivefold variation among States in the ratio of Medicaid recipients to persons below the poverty level (figure 25). Hawaii had the highest ratio with the number of Medicaid recipients nearly equal to the poverty population. California ranked second with a ratio of 83 per 100. Other States with relatively large Medicaid recipient to poverty population ratios are located primarily in the Northeast and the eastern portion of the North Central Region. States with the lowest Medicaid recipient to poverty population ratios are in the West, the western portion of the North Central Region, and the South. South Dakota had the lowest ratio (17), followed by Idaho (18) and Wyoming and Texas (20 each).

Because Medicaid is linked to AFDC and States generally determine the eligibility levels for this program, they exercise considerable control over Medicaid eligibility. Thus, States with higher income ceilings for welfare programs and those that extend eligibility to families with unemployed male heads—such as most northeastern States and California—are more likely to have larger proportions of their poverty populations covered by Medicaid. The inverse of this pattern holds for States in the West, west North Central, and South Regions. Lower income ceilings and exclusion of families with unemployed male heads result in a smaller proportion of the poverty population covered by welfare programs and Medicaid.

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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

Table 1. Resident population, according to age and race: United States, selected years 1950-82 estimates and 2000 projections

(Data are based on decennial census updated by data from multiple sources)

Race and year	Resident population	Age											
		All ages	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
Total¹	Number in thousands	Percent distribution											
1950.....	151,235	100.0	10.8		16.2	14.6	15.7	14.2	11.5	8.8	5.6	2.2	0.4
1960.....	179,979	100.0	2.3	9.0	19.9	13.4	12.6	13.4	11.4	8.7	6.1	2.6	0.5
1970.....	203,810	100.0	1.7	6.7	20.0	17.6	12.3	11.3	11.4	9.2	6.1	3.0	0.7
1980.....	227,156	100.0	1.6	5.7	15.3	18.7	16.5	11.4	10.0	9.6	6.9	3.4	1.0
1981.....	229,307	100.0	1.6	5.8	15.0	18.4	16.9	11.5	9.8	9.6	6.9	3.5	1.0
1982.....	231,786	100.0	1.6	5.9	14.7	17.9	17.0	12.1	9.7	9.5	7.0	3.6	1.1
2000 ²	267,955	100.0	1.3	5.3	14.3	13.5	13.6	16.3	13.9	8.9	6.6	4.6	1.8
White													
1950.....	135,400	100.0	10.6		15.8	14.3	15.7	14.3	11.6	9.2	5.8	2.3	0.4
1960.....	159,381	100.0	2.2	8.7	19.4	13.3	12.6	13.5	11.6	8.9	6.4	2.7	0.5
1970.....	178,551	100.0	1.7	6.4	19.4	17.4	12.3	11.4	11.7	9.5	6.4	3.2	0.7
1980.....	195,231	100.0	1.5	5.4	14.7	18.3	16.4	11.5	10.2	10.0	7.2	3.6	1.1
1981.....	196,627	100.0	1.5	5.6	14.3	18.0	16.9	11.7	10.0	10.0	7.3	3.7	1.1
1982.....	198,077	100.0	1.5	5.6	14.1	17.5	16.9	12.3	9.9	10.0	7.3	3.8	1.1
2000 ²	222,654	100.0	1.2	5.0	13.7	13.0	13.3	16.3	14.2	9.3	7.0	5.0	2.0
Black													
1950.....	15,045	100.0	12.5		19.2	16.4	15.7	14.1	10.4	6.0	4.1	1.6	
1960.....	18,960	100.0	3.0	11.5	23.3	14.4	12.7	12.2	9.9	6.8	4.3	1.6	0.4
1970.....	22,673	100.0	2.1	8.6	24.6	18.9	11.9	10.6	9.4	7.1	4.6	1.8	0.5
1980.....	26,731	100.0	2.1	7.2	19.4	21.5	16.0	10.2	8.5	7.2	5.0	2.2	0.6
1981.....	27,170	100.0	2.2	7.4	18.8	21.3	16.6	10.3	8.4	7.1	5.0	2.3	0.6
1982.....	27,652	100.0	2.1	7.6	18.3	21.0	17.0	10.7	8.3	7.1	4.9	2.3	0.6
2000 ²	35,753	100.0	1.7	6.9	18.0	15.9	14.9	16.3	11.5	6.6	4.4	2.7	1.2

¹Includes all other races not shown separately.²Projections are for the total population including Armed Forces overseas.

NOTE: Estimates are as of July 1, except for blacks in 1950 which is the census count as of April 1.

SOURCES: U.S. Bureau of the Census: 1950 Nonwhite Population by Race. Special Report P-E, No. 3B. Washington. U.S. Government Printing Office, 1951; Population estimates and projections. Current Population Reports. Series P-25, Nos. 310, 519, 917, and 949 and 952. Washington. U.S. Government Printing Office, June 1965, Apr. 1974, July 1982, and May 1984.

Table 2. Live births, crude birth rates, and birth rates by age of mother, according to race: United States, selected years 1950-81

(Data are based on the National Vital Statistics System)

Race and year	Live births	Crude birth rate ¹	Age								
			10-14 years	15-17 years	18-19 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.....	3,632,000	24.1	1.0	40.7	132.7	196.6	166.1	103.7	52.9	15.1	1.2
1955.....	4,097,000	25.0	0.9	44.5	157.9	241.6	190.2	116.0	58.6	16.1	1.0
1960.....	4,257,850	23.7	0.8	43.9	166.7	258.1	197.4	112.7	56.2	15.5	0.9
1965.....	3,760,358	19.4	0.8	36.6	124.5	195.3	161.6	94.4	46.2	12.8	0.8
1970.....	3,731,386	18.4	1.2	38.8	114.7	167.8	145.1	73.3	31.7	8.1	0.5
1975.....	3,144,198	14.6	1.3	36.1	85.0	113.0	108.2	52.3	19.5	4.6	0.3
1976.....	3,167,788	14.6	1.2	34.1	80.5	110.3	106.2	53.6	19.0	4.3	0.2
1977.....	3,326,632	15.1	1.2	33.9	80.9	112.9	111.0	56.4	19.2	4.2	0.2
1978.....	3,333,279	15.0	1.2	32.2	79.8	109.9	108.5	57.8	19.0	3.9	0.2
1979.....	3,494,398	15.6	1.2	32.3	81.3	112.8	111.4	60.3	19.5	3.9	0.2
1980.....	3,612,258	15.9	1.1	32.5	82.1	115.1	112.9	61.9	19.8	3.9	0.2
1981.....	3,629,238	15.8	1.1	32.1	81.7	111.8	112.0	61.4	20.0	3.8	0.2
White											
1950.....	3,108,000	23.0	0.4	31.3	120.5	190.4	165.1	102.6	51.4	14.5	1.0
1955.....	3,485,000	23.8	0.3	35.4	145.7	235.8	186.6	114.0	56.7	15.4	0.9
1960.....	3,600,744	22.7	0.4	35.5	154.6	252.8	194.9	109.6	54.0	14.7	0.8
1965.....	3,123,860	18.3	0.3	27.8	111.9	189.0	158.4	91.6	44.0	12.0	0.7
1970.....	3,091,264	17.4	0.5	29.2	101.5	163.4	145.9	71.9	30.0	7.5	0.4
1975.....	2,551,996	13.6	0.6	28.0	74.0	108.2	108.1	51.3	18.2	4.2	0.2
1976.....	2,567,614	13.6	0.6	26.3	70.2	105.3	105.9	52.6	17.8	3.9	0.2
1977.....	2,691,070	14.1	0.6	26.1	70.5	107.7	110.9	55.3	18.0	3.8	0.2
1978.....	2,681,116	14.0	0.6	24.9	69.4	104.1	107.9	56.6	17.7	3.5	0.2
1979.....	2,808,420	14.5	0.6	24.7	71.0	107.0	110.8	59.0	18.3	3.5	0.2
1980.....	2,898,732	14.9	0.6	25.2	72.1	109.5	112.4	60.4	18.5	3.4	0.2
1981.....	2,908,669	14.8	0.5	25.1	71.9	106.3	111.3	60.2	18.7	3.4	0.2
Black											
1960.....	602,264	31.9	4.3	---	---	295.4	218.6	137.1	73.9	21.9	1.1
1965.....	581,126	27.7	4.3	99.3	227.6	243.1	180.4	111.3	61.9	18.7	1.4
1970.....	572,362	25.3	5.2	101.4	204.9	202.7	136.3	79.6	41.9	12.5	1.0
1975.....	511,581	20.7	5.1	85.6	152.4	142.8	102.2	53.1	25.6	7.5	0.5
1976.....	514,479	20.5	4.7	80.3	142.5	140.5	101.6	53.6	24.8	6.8	0.5
1977.....	544,221	21.4	4.7	79.6	142.9	144.4	106.4	57.5	25.4	6.6	0.5
1978.....	551,540	21.3	4.4	75.0	139.7	143.8	105.4	58.3	24.3	6.1	0.4
1979.....	577,855	22.0	4.6	75.7	140.4	146.3	108.2	60.7	24.7	6.1	0.4
1980.....	589,616	22.1	4.3	73.6	138.8	146.3	109.1	62.9	24.5	5.8	0.3
1981.....	587,797	21.6	4.1	70.6	135.9	141.2	108.3	60.4	24.2	5.6	0.3

¹Live births per 1,000 population.

²Includes 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 1975-81, 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: Vital Statistics of the United States, 1981, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 3. Birth rates for women 15-44 years of age, according to live-birth order and race: United States, selected years 1950-81

(Data are based on the National Vital Statistics System)

Race and year	Total	Live-birth order				
		1	2	3	4	5 or higher
Total ¹		Live births per 1,000 women 15-44 years of age				
1950.....	106.2	33.3	32.1	18.4	9.2	13.2
1955.....	118.3	32.8	31.8	23.1	13.3	17.3
1960.....	118.0	31.1	29.2	22.8	14.6	20.3
1965.....	96.6	29.8	23.4	16.6	10.7	16.1
1970.....	87.9	34.2	24.2	13.6	7.2	8.7
1975.....	66.0	28.1	20.9	9.4	3.9	3.7
1976.....	65.0	27.5	20.8	9.5	3.8	3.4
1977.....	66.8	28.2	21.6	10.0	3.8	3.2
1978.....	65.5	27.8	21.1	9.8	3.8	2.9
1979.....	67.2	28.6	21.6	10.1	3.8	2.9
1980.....	68.4	29.5	21.8	10.3	3.9	2.9
1981.....	67.4	29.0	21.6	10.2	3.8	2.8
White						
1950.....	102.3	33.3	32.3	17.9	8.4	10.4
1955.....	113.7	32.6	32.0	22.9	12.6	13.6
1960.....	113.2	30.8	29.2	22.7	14.1	16.4
1965.....	91.4	28.9	23.0	16.2	10.2	13.1
1970.....	84.1	32.9	23.7	13.3	6.8	7.4
1975.....	62.5	26.7	20.3	8.8	3.5	3.1
1976.....	61.5	26.3	20.2	8.9	3.4	2.8
1977.....	63.2	26.9	20.9	9.4	3.4	2.7
1978.....	61.7	26.6	20.2	9.2	3.3	2.4
1979.....	63.4	27.4	20.8	9.4	3.4	2.4
1980.....	64.7	28.4	21.0	9.5	3.4	2.4
1981.....	63.9	28.1	20.9	9.4	3.3	2.3
Black						
1960.....	153.5	33.6	29.3	24.0	18.6	48.0
1965.....	133.9	35.7	26.2	19.4	14.6	38.0
1970.....	115.4	43.3	27.1	16.1	10.0	18.9
1975.....	87.9	36.9	24.2	12.6	6.3	8.0
1976.....	85.8	35.2	24.4	12.9	6.2	7.2
1977.....	88.1	35.6	25.5	13.6	6.4	6.9
1978.....	86.7	34.6	25.4	13.9	6.5	6.4
1979.....	88.3	35.3	25.8	14.4	6.6	6.2
1980.....	88.1	35.2	25.7	14.5	6.7	6.0
1981.....	85.4	33.8	25.2	14.3	6.6	5.7

¹Includes 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 1975-81, 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: *Vital Statistics of the United States, 1981*, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 4. Completed fertility rates and parity distribution for women 50-54 years of age at the beginning of selected years 1925-81, according to race and birth cohort: United States, selected birth cohorts 1871-1931

(Data are based on the National Vital Statistics System)

Race and birth cohort	Age 50-54 as of January 1	Completed fertility rate ¹	Total	Parity (number of children born alive)							
				0	1	2	3	4	5	6	7 or more
Total				Distribution of women ²							
1871-75.....	1925	3,773.5	1,000.0	207.2	112.8	124.2	110.0	93.6	75.1	66.4	210.7
1876-80.....	1930	3,531.9	1,000.0	216.8	123.2	132.0	114.0	93.0	72.0	64.5	184.5
1881-85.....	1935	3,321.6	1,000.0	217.4	134.6	142.5	119.3	95.0	72.0	57.9	161.3
1886-90.....	1940	3,136.8	1,000.0	210.4	148.5	153.2	129.7	99.5	68.0	55.4	135.3
1891-95.....	1945	2,932.6	1,000.0	192.7	172.0	177.2	139.3	97.8	61.5	48.3	111.2
1896-1900.....	1950	2,675.9	1,000.0	194.6	200.7	195.2	136.6	87.8	53.5	41.5	90.1
1901-05.....	1955	2,441.4	1,000.0	201.9	227.6	206.2	129.3	80.4	48.6	34.7	71.3
1906-10.....	1960	2,285.8	1,000.0	215.6	225.1	218.7	131.4	77.5	44.6	29.2	57.9
1911-15.....	1965	2,354.3	1,000.0	190.1	208.6	238.1	149.8	85.2	46.3	28.8	53.1
1916-20.....	1970	2,574.0	1,000.0	149.0	179.0	251.7	174.6	102.8	55.8	32.0	55.1
1921-25.....	1975	2,856.9	1,000.0	108.5	152.1	248.7	197.0	123.5	68.0	39.5	62.7
1926-30.....	1980	3,079.2	1,000.0	105.5	113.7	226.5	209.6	143.5	81.9	47.6	71.7
1927-31.....	1981	3,118.0	1,000.0	104.1	107.4	222.4	212.0	147.5	84.6	49.2	72.8
White											
1871-75.....	1925	3,663.6	1,000.0	209.7	112.1	127.9	112.9	95.5	77.2	66.7	198.0
1876-80.....	1930	3,444.4	1,000.0	218.2	121.9	136.1	116.9	94.8	74.0	64.2	173.9
1881-85.....	1935	3,253.8	1,000.0	217.6	132.2	147.9	122.4	96.0	74.2	57.8	151.9
1886-90.....	1940	3,092.9	1,000.0	209.1	144.3	160.3	132.4	100.2	70.3	54.8	128.6
1891-95.....	1945	2,890.4	1,000.0	191.7	167.5	184.6	141.4	98.0	64.2	47.8	104.8
1896-1900.....	1950	2,631.5	1,000.0	193.1	192.1	205.9	141.4	89.0	55.2	41.1	82.2
1901-05.....	1955	2,399.0	1,000.0	197.9	219.5	218.3	135.8	82.3	49.4	33.7	63.1
1906-10.....	1960	2,248.9	1,000.0	207.9	218.0	233.2	138.8	79.6	44.7	28.0	49.8
1911-15.....	1965	2,313.5	1,000.0	177.4	204.9	254.1	158.9	88.0	46.1	27.4	43.2
1916-20.....	1970	2,526.7	1,000.0	134.6	175.9	268.7	185.1	106.5	55.3	30.3	43.6
1921-25.....	1975	2,793.7	1,000.0	94.2	150.6	264.6	208.8	127.9	67.9	36.9	49.1
1926-30.....	1980	2,986.1	1,000.0	94.1	114.1	240.2	222.3	148.8	81.2	44.5	54.8
1927-31.....	1981	3,023.6	1,000.0	92.5	108.2	235.8	224.9	153.0	83.9	46.0	55.6
All other											
1871-75.....	1925	4,770.8	1,000.0	185.7	118.2	93.6	82.0	76.4	56.1	65.3	322.7
1876-80.....	1930	4,254.7	1,000.0	207.7	134.0	99.5	87.4	79.9	54.7	64.8	272.0
1881-85.....	1935	3,865.0	1,000.0	223.1	151.5	99.8	96.5	85.3	41.5	64.1	238.2
1886-90.....	1940	3,451.4	1,000.0	231.9	175.9	105.9	96.6	93.3	52.4	58.0	186.0
1891-95.....	1945	3,212.5	1,000.0	222.3	206.7	112.4	114.5	92.6	40.4	48.4	162.7
1896-1900.....	1950	2,967.7	1,000.0	227.4	255.0	114.1	97.5	74.3	38.8	42.6	150.3
1901-05.....	1955	2,706.7	1,000.0	250.4	275.9	117.8	81.0	62.3	43.0	39.1	130.5
1906-10.....	1960	2,529.1	1,000.0	287.5	266.6	114.5	73.2	60.1	43.5	35.6	119.0
1911-15.....	1965	2,641.2	1,000.0	296.1	232.4	116.3	78.3	64.1	46.1	38.9	127.8
1916-20.....	1970	2,924.2	1,000.0	266.2	202.0	120.9	91.2	72.5	57.8	44.9	144.5
1921-25.....	1975	3,315.9	1,000.0	217.7	163.5	131.7	108.2	89.0	68.7	56.4	164.8
1926-30.....	1980	3,718.9	1,000.0	187.4	110.8	130.2	121.0	106.4	85.7	69.3	189.2
1927-31.....	1981	3,756.1	1,000.0	185.7	102.5	129.1	123.0	109.1	88.1	71.4	191.0

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 1981, an average of 3,118.0 children were born alive (about 3 children per woman). About 10 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, 1980, Vol. I, Natality. Public Health Service, DHHS, Hyattsville, Md. To be published.

Table 5. Legal abortion ratios, according to selected patient characteristics: United States, 1973-81

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

Selected characteristic	Year								
	1973	1974	1975	1976	1977	1978	1979	1980	1981
	Abortions per 100 live births								
Total.....	19.6	24.2	27.2	31.2	32.4	34.7	35.8	35.9	35.8
Age									
Under 15 years.....	74.3	92.4	101.5	111.2	112.1	110.2	121.3	122.7	126.4
15-19 years.....	31.7	39.9	46.4	54.4	57.2	61.8	66.0	66.4	66.8
20-24 years.....	17.9	21.9	25.0	30.1	32.5	35.6	37.3	37.5	37.9
25-29 years.....	12.3	15.0	16.6	19.0	19.9	21.6	22.3	23.0	23.2
30-34 years.....	16.5	20.5	22.1	23.5	22.8	23.6	23.3	23.3	23.7
35-39 years.....	26.7	34.9	37.5	41.1	42.4	43.7	41.5	40.3	40.3
40 years and over.....	40.2	53.8	59.9	68.9	74.2	76.6	74.7	78.3	77.6
Race									
White.....	17.5	20.7	22.7	25.6	26.6	28.9	30.7	31.3	31.2
All other.....	28.9	39.6	46.5	55.1	57.1	58.6	56.8	54.7	54.4
Marital status									
Married.....	6.2	7.6	8.3	9.0	9.3	11.0	10.7	10.2	9.8
Unmarried.....	109.8	132.6	141.1	159.2	158.5	156.7	157.8	149.9	147.5
Number of previous live births ¹									
0.....	23.0	27.4	30.2	35.2	41.1	46.3	48.8	48.6	48.6
1.....	12.1	15.0	17.3	20.2	19.1	20.8	21.3	21.9	21.9
2.....	19.6	25.6	29.7	33.0	31.2	32.4	32.7	32.8	32.6
3.....	25.8	34.6	39.8	44.6	39.3	35.7	34.3	33.5	33.5
4 or more.....	26.4	35.3	40.8	46.7	41.5	31.6	29.1	27.3	26.6

¹For 1973-77, data indicate number of living children.SOURCES: Centers for Disease Control: Abortion Surveillance, 1973-78. Public Health Service, DHHS, Atlanta, Ga., May 1975-Nov. 1980; Abortion Surveillance, 1979-80. Public Health Service, DHHS, Atlanta, Ga., May 1983; Unpublished data.

Table 6. Legal abortions, according to selected characteristics: United States, 1973-81

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

Selected characteristic	Year								
	1973	1974	1975	1976	1977	1978	1979	1980	1981
Number of legal abortions reported in thousands									
Centers for Disease Control..	616	763	855	988	1,079	1,158	1,252	1,298	1,301
Alan Guttmacher Institute....	745	899	1,034	1,179	1,320	1,410	1,498	1,554	1,577
Percent distribution									
Total.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Period of gestation									
Under 9 weeks.....	36.1	42.6	44.6	47.0	51.2	52.2	52.1	51.7	51.2
9-10 weeks.....	29.4	28.7	28.4	28.0	27.2	26.9	27.0	26.2	26.8
11-12 weeks.....	17.9	15.4	14.9	14.4	13.1	12.3	12.5	12.2	12.1
13-15 weeks.....	6.9	5.5	5.0	4.5	3.4	4.0	4.2	5.2	5.2
16-20 weeks.....	8.0	6.5	6.1	5.1	4.3	3.7	3.4	3.9	3.7
21 weeks and over.....	1.7	1.2	1.0	0.9	0.9	0.9	0.9	0.9	1.0
Type of procedure									
Curettage.....	88.4	89.7	90.9	92.8	93.8	94.6	95.0	95.5	96.1
Intrauterine instillation.....	10.4	7.8	6.2	6.0	5.4	3.9	3.3	3.1	2.8
Hysterotomy or hysterectomy...	0.7	0.6	0.4	0.2	0.2	0.1	0.1	0.1	0.1
Other.....	0.6	1.9	2.4	0.9	0.7	1.4	1.6	1.3	1.0
Location of facility									
In State of residence.....	74.8	86.6	89.2	90.0	90.0	89.3	90.0	92.6	92.5
Out of State of residence.....	25.2	13.4	10.8	10.0	10.0	10.7	10.0	7.4	7.5
Previous induced abortions									
0.....	---	86.8	81.9	79.8	76.8	70.7	68.9	67.6	65.3
1.....	---	11.3	14.9	16.6	18.3	22.1	23.0	23.5	24.3
2.....	---	1.5	2.5	2.7	3.4	5.3	5.9	6.6	7.5
3 or more.....	---	0.4	0.7	0.9	1.5	1.8	2.1	2.3	2.9

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, 1979-80. Public Health Service, DHHS, Atlanta, Ga. May 1983; 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; Henshaw, S., Forrest, J. D., and Blaine, E.: Abortion services in the United States, 1981 and 1982. Fam. Plann. Perspect. 16(3), May-June 1984; The Alan Guttmacher Institute: Personal communication, 1983.

Table 7. Legal abortions, abortion-related deaths and death rates, and relative risk of death, according to period of gestation: United States, 1973-75, 1976-78, and 1979-81

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

Period of gestation and year	Number of legal abortions reported	Abortion-related deaths		Relative risk of death ¹
		Number	Rate per 100,000 abortions	
Total				
1973-75.....	2,234,160	79	3.5	...
1976-78.....	3,225,473	37	1.1	...
1979-81.....	3,850,287	33	0.9	...
Under 9 weeks				
1973-75.....	928,814	6	0.6	1.0
1976-78.....	1,620,840	6	0.4	1.0
1979-81.....	1,989,506	10	0.5	1.0
9-10 weeks				
1973-75.....	642,884	14	2.2	3.7
1976-78.....	882,051	7	0.8	2.0
1979-81.....	1,025,656	7	0.7	1.4
11-12 weeks				
1973-75.....	355,217	12	3.4	5.7
1976-78.....	425,744	2	0.5	1.2
1979-81.....	471,921	6	1.3	2.6
13 weeks and over				
1973-75.....	307,245	47	15.3	25.5
1976-78.....	296,838	22	7.4	18.5
1979-81.....	363,204	10	2.8	5.6

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 1967-82

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

Race and year	All ages 18-34 years	Age				
		18-19 years	20-21 years	22-24 years	25-29 years	30-34 years
Total¹		Expected births per currently married woman				
1967.....	3.1	2.7	2.9	2.9	3.0	3.3
1971.....	2.6	2.3	2.4	2.4	2.6	3.0
1975.....	2.3	2.2	2.2	2.2	2.3	2.6
1980.....	2.2	2.1	2.2	2.1	2.2	2.2
1981.....	2.2	2.2	2.2	2.2	2.2	2.2
1982.....	2.2	2.0	2.1	2.1	2.2	2.2
White						
1967.....	3.0	2.7	3.0	2.8	3.0	3.2
1971.....	2.6	2.3	2.4	2.4	2.6	2.9
1975.....	2.3	2.2	2.1	2.1	2.2	2.6
1980.....	2.2	2.1	2.2	2.1	2.1	2.2
1981.....	2.2	2.2	2.2	2.2	2.1	2.2
1982.....	2.1	1.9	2.1	2.1	2.1	2.2
Black						
1967.....	3.5	*	2.5	3.0	3.4	4.3
1971.....	3.1	*	2.4	2.8	3.1	3.7
1975.....	2.8	*	2.6	2.5	2.6	3.2
1980.....	2.4	*	2.2	2.1	2.4	2.5
1981.....	2.5	*	2.0	2.1	2.5	2.6
1982.....	2.3	*	1.9	2.1	2.3	2.4
Total¹		Percent of expected births already born				
1967.....	70.2	26.9	33.2	47.8	76.1	92.7
1971.....	69.4	25.3	32.5	46.7	74.4	93.7
1975.....	68.8	27.5	30.7	43.9	70.9	93.0
1980.....	67.0	29.5	32.9	44.9	64.7	89.7
1981.....	68.0	25.6	33.1	45.4	67.7	89.3
1982.....	66.7	21.9	33.2	42.2	64.7	88.3
White						
1967.....	68.9	24.2	30.1	46.2	75.1	92.9
1971.....	68.9	23.7	31.4	45.3	74.1	93.8
1975.....	68.2	24.9	29.4	42.3	70.5	93.2
1980.....	66.3	28.6	31.8	43.5	64.0	90.0
1981.....	67.2	24.6	31.9	43.7	67.2	89.5
1982.....	65.7	21.7	32.0	40.1	63.6	88.2
Black						
1967.....	82.8	*	65.7	67.9	87.9	92.3
1971.....	74.8	*	43.0	57.5	81.0	93.4
1975.....	76.4	*	43.3	61.0	78.2	91.8
1980.....	74.7	*	46.1	58.9	73.8	90.9
1981.....	79.0	*	52.5	64.8	77.0	92.0
1982.....	79.4	*	49.6	66.2	79.8	90.3

¹Includes all other races not shown separately.

SOURCE: U.S. Bureau of the Census: Population characteristics. Current Population Reports. Series P-20, Nos. 301, 375, 378, and 387. Washington. U.S. Government Printing Office, Nov. 1976, Oct. 1982, Apr. 1983, and Apr. 1984.

Table 9. Contraceptive status and methods of contraception for ever-married women 15-44 years of age, according to race and age: United States, 1973, 1976, and 1982

(Data are based on household interviews of samples of ever-married women in the childbearing ages)

Method of contraception and age	Race and year								
	All races			White			Black		
	1973	1976	1982	1973	1976	1982	1973	1976	1982
All methods									
Percent of ever-married women									
15-44 years.....	66.4	65.7	65.6	67.8	67.0	66.8	55.8	56.7	58.2
15-24 years.....	66.9	68.3	66.6	67.1	69.7	68.3	65.2	59.0	52.6
25-34 years.....	70.4	69.4	67.9	71.6	70.8	68.6	59.2	61.1	65.6
35-44 years.....	61.5	59.3	62.3	63.6	60.6	63.9	46.8	50.3	51.1
Female sterilization									
Percent of ever-married contracepting women									
15-44 years.....	13.6	15.3	26.6	12.5	14.8	25.0	25.4	21.8	39.8
15-24 years.....	4.3	3.8	*5.0	4.1	3.6	*4.6	6.8	*7.1	*12.0
25-34 years.....	12.1	15.8	21.7	11.4	15.6	19.7	20.3	19.1	35.6
35-44 years.....	21.7	22.7	43.2	19.2	21.6	41.9	47.2	35.1	56.6
Male sterilization ¹									
15-44 years.....	10.4	11.9	13.1	11.2	12.9	14.2	*1.2	*2.0	*2.2
15-24 years.....	2.1	*1.3	*4.0	2.3	*1.4	*4.3	*0.1	*0.4	*0.4
25-34 years.....	10.3	10.7	11.1	11.0	11.7	12.3	*2.0	*0.4	*1.7
35-44 years.....	15.8	20.9	20.1	17.2	22.8	21.5	*1.1	*5.2	*3.8
Birth control pill									
15-44 years.....	36.6	34.5	22.4	36.1	34.2	22.3	41.8	38.1	25.1
15-24 years.....	65.3	63.9	56.5	64.4	64.2	56.2	72.4	61.1	58.5
25-34 years.....	36.2	34.8	24.5	35.8	34.2	23.9	41.6	42.7	30.2
35-44 years.....	18.3	13.6	*3.4	18.2	13.1	*3.3	17.2	16.9	*5.0
Intrauterine device									
15-44 years.....	10.2	10.0	7.9	9.8	9.7	7.7	13.8	12.6	10.6
15-24 years.....	10.8	9.4	*3.6	10.7	9.3	*3.3	12.6	11.0	*8.8
25-34 years.....	13.2	11.3	10.1	12.7	11.0	9.8	18.8	13.6	14.6
35-44 years.....	5.6	8.3	7.0	5.4	8.0	7.2	8.4	12.1	*5.0
Diaphragm									
15-44 years.....	3.4	4.0	7.0	3.6	4.2	7.3	1.8	2.8	4.4
15-24 years.....	*1.5	3.3	*7.5	*1.6	3.6	*7.8	*0.3	*0.5	*4.0
25-34 years.....	3.1	4.1	9.1	3.2	4.3	9.7	*2.2	*2.3	3.5
35-44 years.....	5.0	4.5	*3.9	5.3	4.5	*3.8	*2.5	*4.8	*6.0
Condom									
15-44 years.....	12.6	9.9	12.1	13.4	10.2	12.6	4.1	6.2	5.0
15-24 years.....	7.7	7.0	12.1	8.3	7.2	12.3	*1.8	*4.6	*5.6
25-34 years.....	12.4	9.6	12.4	13.1	9.8	13.0	3.8	7.1	5.0
35-44 years.....	16.1	12.3	11.7	17.2	12.8	12.2	6.4	*6.0	*4.7

¹Refers only to currently married couples.

SOURCE: Division of Vital Statistics, National Center for Health Statistics: Data from the National Survey of Family Growth.

Table 10. Death rates for all causes, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total³	Number of deaths per 100,000 resident population							
All ages, age adjusted ⁴	841.5	760.9	714.3	577.0	585.8	568.2	556.4	549.6
All ages, crude.....	963.8	954.7	945.3	852.2	878.3	862.4	857.6	858.9
Under 1 year.....	3,299.2	2,696.4	2,142.4	1,332.9	1,288.3	1,207.3	1,143.7	1,076.8
1-4 years.....	139.4	109.1	84.5	64.2	63.9	60.2	55.5	51.7
5-14 years.....	60.1	46.6	41.3	31.5	30.6	29.4	27.8	27.3
15-24 years.....	128.1	106.3	127.7	114.8	115.4	107.1	104.7	95.8
25-34 years.....	178.7	146.4	157.4	133.0	135.5	132.1	126.9	121.6
35-44 years.....	358.7	299.4	314.5	229.8	227.9	221.3	207.9	203.3
45-54 years.....	853.9	756.0	730.0	589.7	584.0	573.5	556.4	541.9
55-64 years.....	1,911.7	1,735.1	1,658.8	1,338.0	1,346.3	1,322.1	1,292.4	1,298.8
65-74 years.....	4,067.7	3,822.1	3,582.7	2,929.0	2,994.9	2,922.3	2,904.5	2,883.4
75-84 years.....	9,331.1	8,745.2	8,004.4	6,496.6	6,692.6	6,429.9	6,350.3	6,309.7
85 years and over.....	20,196.9	19,857.5	17,539.4	14,962.4	15,980.3	15,379.7	15,228.6	15,422.3
White male								
All ages, age adjusted ⁴	963.1	917.7	893.4	738.4	745.3	724.4	709.7	701.8
All ages, crude.....	1,089.5	1,098.5	1,086.7	963.3	983.3	965.1	957.6	958.6
Under 1 year.....	3,400.5	2,694.1	2,113.2	1,276.0	1,230.3	1,182.0	1,129.2	1,078.0
1-4 years.....	135.5	104.9	83.6	64.2	66.1	60.5	55.5	54.3
5-14 years.....	67.2	52.7	48.0	36.6	35.0	34.2	32.1	31.5
15-24 years.....	152.4	143.7	170.8	167.0	167.0	154.5	148.2	137.9
25-34 years.....	185.3	163.2	176.6	166.7	171.3	167.3	156.7	155.5
35-44 years.....	380.9	332.6	343.5	257.5	257.4	252.4	237.7	236.4
45-54 years.....	984.5	932.2	882.9	711.3	698.9	686.5	671.0	649.4
55-64 years.....	2,304.4	2,225.2	2,202.6	1,734.5	1,728.5	1,692.0	1,648.6	1,636.5
65-74 years.....	4,864.9	4,848.4	4,810.1	3,991.5	4,035.7	3,926.9	3,893.2	3,849.6
75-84 years.....	10,526.3	10,299.6	10,098.8	8,624.0	8,829.8	8,565.2	8,506.5	8,482.4
85 years and over.....	22,116.3	21,750.0	20,392.6	17,924.0	19,097.3	18,454.0	18,333.3	18,797.3
White female								
All ages, age adjusted ⁴	645.0	555.0	501.7	402.5	411.1	401.4	395.1	391.5
All ages, crude.....	803.3	800.9	812.6	771.8	806.1	799.6	802.3	810.4
Under 1 year.....	2,566.8	2,007.7	1,614.6	986.7	962.5	935.4	906.2	789.6
1-4 years.....	112.2	85.2	66.1	50.4	49.3	47.7	44.3	42.0
5-14 years.....	45.1	34.7	29.9	23.2	22.9	21.6	20.2	20.9
15-24 years.....	71.5	54.9	61.6	55.2	55.5	53.2	52.3	50.1
25-34 years.....	112.8	85.0	84.1	64.7	65.4	64.7	62.8	62.4
35-44 years.....	235.8	191.1	193.3	140.9	138.2	133.6	129.7	122.3
45-54 years.....	546.4	458.8	462.9	374.5	372.7	370.9	357.6	356.2
55-64 years.....	1,293.8	1,078.9	1,014.9	862.8	876.2	869.4	860.9	867.0
65-74 years.....	3,242.8	2,779.3	2,470.7	1,997.9	2,066.6	2,032.8	2,029.0	2,018.0
75-84 years.....	8,481.5	7,696.6	6,698.7	5,258.6	5,401.7	5,176.3	5,090.1	5,067.7
85 years and over.....	19,679.5	19,477.7	16,729.5	14,027.9	14,979.6	14,438.2	14,278.0	14,390.5

See footnotes at end of table.

Table 10. Death rates for all causes, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year								
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}	
Black male									
Number of deaths per 100,000 resident population									
All ages, age adjusted ⁴	1,373.1	1,246.1	1,318.6	1,073.3	1,112.8	1,067.7	1,045.5	1,024.7	
All ages, crude.....	1,260.3	1,181.7	1,186.6	999.6	1,034.1	991.6	974.3	950.2	
Under 1 year.....	} 1,412.6	5,306.8	4,298.9	2,666.5	2,586.7	2,164.8	2,049.5	2,098.7	
1-4 years.....		208.5	150.5	108.1	110.5	105.3	97.6	71.6	
5-14 years.....		95.1	75.1	67.1	49.3	47.4	45.2	48.1	43.9
15-24 years.....		289.7	212.0	320.6	197.8	209.1	186.7	197.2	153.7
25-34 years.....		503.5	402.5	559.5	404.4	407.3	387.1	381.0	330.9
35-44 years.....		878.1	762.0	956.6	699.7	689.8	667.9	611.1	604.4
45-54 years.....		1,905.0	1,624.8	1,777.5	1,479.3	1,479.9	1,432.5	1,331.0	1,300.5
55-64 years.....		3,773.2	3,316.4	3,256.9	2,794.6	2,873.0	2,804.1	2,708.9	2,813.7
65-74 years.....		5,310.3	5,798.7	5,803.2	4,916.8	5,131.1	5,046.3	5,159.9	5,057.9
75-84 years.....	} 10,101.9	8,605.1	9,454.9	8,165.5	9,231.6	8,635.1	8,620.4	8,552.9	
85 years and over.....		14,844.8	14,415.4	14,465.4	16,098.8	15,396.4	15,732.1	15,386.0	
Black female									
All ages, age adjusted ⁴	1,106.7	916.9	814.4	605.0	631.1	599.1	570.9	571.5	
All ages, crude.....	1,002.0	905.0	829.2	695.3	733.3	707.3	680.3	687.8	
Under 1 year.....	} 1,139.3	4,162.2	3,368.8	2,208.2	2,123.7	1,823.4	1,582.5	1,581.1	
1-4 years.....		173.3	129.4	91.9	84.4	81.6	65.7	66.5	
5-14 years.....		72.8	53.8	43.8	30.8	30.5	30.0	25.6	25.7
15-24 years.....		213.1	107.5	111.9	71.8	70.5	64.0	62.0	56.8
25-34 years.....		393.3	273.2	231.0	146.0	150.0	141.1	142.2	119.0
35-44 years.....		758.1	568.5	533.0	321.2	323.9	306.1	287.3	275.9
45-54 years.....		1,576.4	1,177.0	1,043.9	759.2	768.2	723.9	705.1	664.3
55-64 years.....		3,089.4	2,510.9	1,986.2	1,502.7	1,561.0	1,527.9	1,449.2	1,530.4
65-74 years.....		4,000.2	4,064.2	3,860.9	2,914.6	3,057.4	2,929.7	2,796.7	2,934.4
75-84 years.....	} 8,347.0	6,730.0	6,691.5	5,594.4	6,212.1	5,822.3	5,578.6	5,392.9	
85 years and over.....		13,052.6	12,131.7	10,982.7	12,367.2	11,933.0	11,660.9	12,273.5	

¹Includes deaths of nonresidents of the United States.

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

SOURCES: National Center for Health Statistics: *Vital Statistics of the United States*, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. *Monthly Vital Statistics Report*. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; *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.

Table 11. Life expectancy at birth and at 65 years of age, according to race and sex: United States, selected years 1900-1983

(Data are based on the National Vital Statistics System)

Specified age and year	All races			White			Black		
	Both sexes	Male	Female	Both sexes	Male	Female	Both sexes	Male	Female
At birth									
Remaining life expectancy in years									
1900 ^{1,2}	47.3	46.3	48.3	47.6	46.6	48.7	33.0	32.5	33.5
1950 ²	68.2	65.6	71.1	69.1	66.5	72.2	60.7	58.9	62.7
1960 ²	69.7	66.6	73.1	70.6	67.4	74.1	63.2	60.7	65.9
1970	70.9	67.1	74.8	71.7	68.0	75.6	64.1	60.0	68.3
1971	71.1	67.4	75.0	72.0	68.3	75.8	64.6	60.5	68.9
1972	71.2	67.4	75.1	72.0	68.3	75.9	64.7	60.4	69.1
1973	71.4	67.6	75.3	72.2	68.5	76.1	65.0	60.9	69.3
1974	72.0	68.2	75.9	72.8	69.0	76.7	66.0	61.7	70.3
1975	72.6	68.8	76.6	73.4	69.5	77.3	66.8	62.4	71.3
1976	72.9	69.1	76.8	73.6	69.9	77.5	67.2	62.9	71.6
1977	73.3	69.5	77.2	74.0	70.2	77.9	67.7	63.4	72.0
1978	73.5	69.6	77.3	74.1	70.4	78.0	68.1	63.7	72.4
1979	73.9	70.0	77.8	74.6	70.8	78.4	68.5	64.0	72.9
1980	73.7	70.0	77.5	74.4	70.7	78.1	68.0	63.7	72.3
1981	74.2	70.4	77.9	74.8	71.1	78.5	68.7	64.4	73.0
1982 ^{2,3}	74.5	70.8	78.2	75.1	71.4	78.7	69.3	64.8	73.8
1983 ^{2,3}	74.7	71.0	78.3	75.2	71.6	78.8	69.6	65.2	73.8
At 65 years									
1900-1902 ^{1,2}	11.9	11.5	12.2	---	11.5	12.2	---	10.4	11.4
1950 ²	13.9	12.8	15.0	---	12.8	15.1	13.9	12.9	14.9
1960 ²	14.3	12.8	15.8	14.4	12.9	15.9	13.9	12.7	15.1
1970	15.2	13.1	17.0	15.2	13.1	17.1	14.2	12.5	15.7
1971	15.2	13.2	17.1	15.3	13.2	17.2	14.3	12.7	15.8
1972	15.2	13.1	17.1	15.2	13.1	17.2	14.2	12.4	15.8
1973	15.3	13.2	17.2	15.4	13.2	17.3	14.1	12.5	15.7
1974	15.6	13.4	17.5	15.7	13.5	17.7	14.5	12.7	16.2
1975	16.1	13.8	18.1	16.1	13.8	18.2	15.0	13.1	16.7
1976	16.1	13.8	18.1	16.2	13.8	18.2	15.0	13.1	16.7
1977	16.4	14.0	18.4	16.5	14.0	18.5	15.2	13.3	16.9
1978	16.4	14.1	18.4	16.5	14.1	18.5	15.3	13.3	17.1
1979	16.7	14.3	18.7	16.8	14.4	18.8	15.5	13.5	17.3
1980	16.4	14.1	18.3	16.5	14.2	18.5	14.8	12.9	16.5
1981	16.7	14.4	18.6	16.8	14.4	18.8	15.2	13.2	17.0
1982 ^{2,3}	16.8	14.4	18.8	16.8	14.5	18.8	15.4	13.1	17.4
1983 ^{2,3}	16.8	14.5	18.8	16.9	14.5	18.9	15.4	13.2	17.2

¹Death 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.

²Includes deaths of nonresidents of the United States.

³Provisional data.

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, Mortality, Part A. DHEW Pub. No. (HRA) 75-1101. Health Resources Administration. Washington. U.S. Government Printing Office, 1974; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; Unpublished data from the Division of Vital Statistics; Data computed by the Office of Research and Methodology from data compiled by the Division of Vital Statistics.

Table 12. Infant mortality rates, fetal death rates, and perinatal mortality rates, according to race: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race and year	Infant mortality rate ¹					Fetal death rate ²	Late fetal death rate ³	Perinatal mortality rate ⁴
	Total	Neonatal		Post-neonatal				
		Under 28 days	Under 7 days					
All races		Number of deaths per 1,000 live births						
1950 ⁵	29.2	20.5	17.8	8.7	18.4	14.9	32.5	
1960 ⁵	26.0	18.7	16.7	7.3	15.8	12.1	28.6	
1970	20.0	15.1	13.6	4.9	14.0	9.5	23.0	
1975	16.1	11.6	10.0	4.5	10.6	7.8	17.7	
1976	15.2	10.9	9.3	4.3	10.3	7.5	16.7	
1977	14.1	9.9	8.4	4.2	9.8	7.1	15.4	
1978	13.8	9.5	8.0	4.3	9.6	6.6	14.6	
1979	13.1	8.9	7.5	4.2	9.3	6.4	13.8	
1980	12.6	8.5	7.1	4.1	⁶ 9.1	⁶ 6.2	⁶ 13.2	
1981	11.9	8.0	6.7	3.9	8.9	5.9	12.6	
1982 ^{5,7}	11.2	7.6	---	3.6	---	---	---	
1983 ^{5,7}	10.9	7.3	---	3.6	---	---	---	
White								
1950 ⁵	26.8	19.4	17.1	7.4	16.6	13.3	30.1	
1960 ⁵	22.9	17.2	15.6	5.7	13.9	10.8	26.2	
1970	17.8	13.8	12.5	4.0	12.3	8.6	21.1	
1975	14.2	10.4	9.0	3.8	9.4	7.1	16.0	
1976	13.3	9.7	8.2	3.6	9.3	6.9	15.1	
1977	12.3	8.7	7.4	3.6	8.7	6.5	13.9	
1978	12.0	8.4	7.0	3.6	8.4	6.0	13.0	
1979	11.4	7.9	6.6	3.5	8.3	5.9	12.5	
1980	11.0	7.5	6.2	3.5	⁶ 8.1	⁶ 5.7	⁶ 11.9	
1981	10.5	7.1	5.9	3.4	8.0	5.5	11.3	
Black								
1950 ⁵	43.9	27.8	23.0	16.1	32.1	---	---	
1960 ⁵	44.3	27.8	23.7	16.5	---	---	---	
1970	32.6	22.8	20.3	9.9	23.2	---	---	
1975	26.2	18.3	15.7	7.9	16.8	11.4	26.9	
1976	25.5	17.9	15.3	7.6	16.0	10.7	25.8	
1977	23.6	16.1	13.5	7.6	15.6	10.1	23.5	
1978	23.1	15.5	13.2	7.6	15.6	9.7	22.7	
1979	21.8	14.3	12.1	7.5	14.8	9.0	21.1	
1980	21.4	14.1	11.9	7.3	⁶ 14.4	⁶ 8.9	⁶ 20.7	
1981	20.0	13.4	11.4	6.6	13.8	8.2	19.4	

¹Infant mortality rate is the number of deaths of 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.

²Fetal deaths are deaths of fetuses of 20 weeks or more gestation. The rate is the number of fetal deaths per 1,000 live births and fetal deaths.

³Late 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.

⁴Perinatal 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.

⁵Includes births and infant and late fetal deaths occurring to nonresidents of the United States.

⁶Revised figures.

⁷Provisional data. Not available separately by race.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report, Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; Data computed by the Division of Analysis from data compiled by the Division of Vital Statistics.

Table 13. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1969-71, 1974-76, and 1979-81

(Data are based on the National Vital Statistics System)

Geographic division and State	Total ¹			White			Black		
	1969-71 ²	1974-76	1979-81	1969-71 ²	1974-76	1979-81	1969-71 ²	1974-76	1979-81
Infant deaths per 1,000 live births									
United States.....	20.0	16.0	12.5	17.7	14.1	11.0	32.6	26.2	21.0
New England.....	17.8	13.8	10.7	17.1	13.2	10.2	31.3	24.6	18.7
Maine.....	19.7	13.4	9.9	19.8	13.5	10.1	*25.9	*12.6	*-
New Hampshire.....	18.6	12.9	10.0	18.7	13.0	10.1	*25.6	*15.1	*13.7
Vermont.....	17.5	13.4	9.0	17.5	13.4	9.0	*15.6	*-	*-
Massachusetts.....	17.3	13.2	10.4	16.7	12.8	10.0	30.8	20.5	16.4
Rhode Island.....	19.7	14.9	12.3	19.0	14.2	11.6	*35.4	*29.0	*23.1
Connecticut.....	17.2	14.6	11.8	15.6	13.4	10.5	31.6	28.7	21.0
Middle Atlantic.....	19.7	16.0	12.7	17.2	14.5	11.0	32.9	26.3	20.8
New York.....	19.7	16.1	12.8	17.2	13.8	11.1	32.0	25.7	20.2
New Jersey.....	19.5	15.3	12.1	16.4	13.0	9.9	33.4	25.5	20.9
Pennsylvania.....	19.9	16.3	12.8	17.9	14.6	11.5	34.8	28.5	22.2
East North Central.....	19.8	16.2	13.0	17.7	14.2	11.1	32.5	28.0	23.8
Ohio.....	18.7	15.6	12.6	17.3	14.2	11.2	30.0	25.6	21.9
Indiana.....	19.6	15.3	12.2	18.4	14.2	11.1	31.7	25.1	21.8
Illinois.....	21.7	18.2	14.6	18.5	14.8	11.7	34.9	31.2	25.9
Michigan.....	20.1	16.3	13.1	18.0	14.1	11.0	31.7	27.3	24.0
Wisconsin.....	16.7	13.3	10.5	16.0	12.9	10.0	29.6	21.1	18.3
West North Central.....	18.5	15.0	11.4	17.5	14.0	10.6	32.8	26.8	21.1
Minnesota.....	17.2	14.0	10.3	16.9	13.7	10.0	*25.1	*23.5	*23.1
Iowa.....	18.4	14.0	10.8	18.1	13.7	10.5	*34.8	*30.3	*22.8
Missouri.....	20.2	16.2	12.9	18.0	14.3	11.6	33.2	27.2	20.9
North Dakota.....	15.4	15.2	11.7	15.2	14.7	11.2	*21.6	*16.8	*12.1
South Dakota.....	19.1	17.6	11.2	17.3	15.6	9.6	*43.5	*32.7	*16.5
Nebraska.....	18.2	14.5	11.0	17.2	13.8	10.4	*37.2	*31.4	*22.5
Kansas.....	18.3	14.6	11.0	17.4	14.0	10.2	31.7	24.0	20.3
South Atlantic.....	22.0	17.7	14.4	18.0	14.5	11.5	32.8	26.0	21.6
Delaware.....	19.3	14.8	14.8	15.7	12.9	10.9	33.2	21.5	27.4
Maryland.....	19.1	16.6	13.7	15.8	14.2	11.2	30.4	23.7	20.0
District of Columbia.....	29.0	27.0	24.1	22.9	*17.2	*13.7	30.3	28.8	26.3
Virginia.....	21.1	16.9	13.5	17.9	14.2	11.7	33.0	26.4	20.0
West Virginia.....	22.3	18.0	12.9	21.9	17.7	12.5	*33.1	*26.5	*23.2
North Carolina.....	23.7	18.5	14.3	19.0	15.4	11.3	35.8	26.4	21.1
South Carolina.....	22.9	20.0	16.3	17.8	15.4	11.9	31.9	27.6	22.9
Georgia.....	22.0	17.4	14.4	17.5	13.8	10.9	31.9	24.4	20.8
Florida.....	21.6	16.7	14.2	17.8	13.4	11.5	33.7	26.8	22.4
East South Central.....	23.3	18.4	13.9	19.1	15.0	11.3	35.4	27.7	21.0
Kentucky.....	19.8	15.7	12.2	19.1	15.1	11.5	27.4	22.0	19.7
Tennessee.....	21.2	16.5	13.2	18.8	14.3	11.2	30.6	25.0	20.4
Alabama.....	24.5	20.0	14.2	19.0	15.5	11.1	36.1	28.4	19.9
Mississippi.....	29.1	22.3	16.7	19.6	15.2	11.1	39.6	30.2	22.7

See footnotes at end of table.

Table 13. Infant mortality rates, according to race, geographic division, and State: United States, average annual 1969-71, 1974-76, and 1979-81--Continued

(Data are based on the National Vital Statistics System)

Geographic division and State	Total ¹			White			Black		
	1969-71 ²	1974-76	1979-81	1969-71 ²	1974-76	1979-81	1969-71 ²	1974-76	1979-81
Infant deaths per 1,000 live births									
West South Central.....	21.4	17.1	12.7	18.9	15.1	11.1	31.9	25.6	19.8
Arkansas.....	21.1	16.9	12.7	18.2	14.6	10.5	29.8	24.1	19.3
Louisiana.....	23.7	18.3	14.5	18.7	14.1	10.9	32.2	25.0	20.6
Oklahoma.....	20.0	16.8	12.3	19.2	16.1	11.8	31.5	27.0	19.6
Texas.....	21.0	16.8	12.2	19.0	15.2	11.1	32.2	26.3	19.3
Mountain.....	19.3	14.7	11.1	18.4	14.2	10.7	30.9	22.7	19.0
Montana.....	21.3	16.1	11.3	21.0	16.1	10.8	*21.5	*16.6	*15.8
Idaho.....	17.6	13.8	10.0	17.4	13.8	10.0	*16.1	*11.9	*8.0
Wyoming.....	23.8	16.6	11.1	23.3	16.7	11.1	*71.4	*8.2	*21.2
Colorado.....	19.5	14.3	10.2	19.3	14.1	10.1	*25.5	20.6	15.4
New Mexico.....	21.8	16.9	11.7	19.9	16.3	11.3	*34.1	*29.1	*18.5
Arizona.....	19.1	15.0	12.6	17.4	13.7	11.7	*30.8	*21.3	21.3
Utah.....	14.9	12.3	10.3	14.6	12.0	10.3	*29.2	*20.8	*23.2
Nevada.....	21.9	17.2	11.5	20.4	16.2	10.5	*37.0	*27.8	*22.3
Pacific.....	17.6	13.5	10.9	16.9	13.1	10.6	27.6	21.1	16.9
Washington.....	18.7	15.1	11.2	18.0	14.9	11.1	33.3	21.4	14.9
Oregon.....	17.2	14.2	11.3	17.2	14.1	11.3	*23.1	*21.9	*15.8
California.....	17.3	13.2	10.8	16.6	12.6	10.4	27.4	21.1	17.1
Alaska.....	19.8	16.2	13.6	17.7	12.8	11.2	*30.3	*33.7	*20.3
Hawaii.....	17.9	13.0	10.0	19.3	13.5	10.4	*19.7	*13.0	*11.4

¹Includes all other races not shown separately.

²Includes births and infant deaths occurring to nonresidents of the United States.

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

Table 14. Infant mortality rates and average annual percent change: Selected countries, 1976 and 1981

(Data are based on National Vital Statistics Systems)

Country	Infant mortality rate		Average annual percent change ²
	1976	1981 ¹	
	Infant deaths per 1,000 live births		
Sweden.....	8.3	7.0	-3.3
Japan.....	9.3	7.1	-5.3
Finland.....	9.9	7.6	-6.4
Norway.....	10.5	8.1	-6.3
Netherlands.....	10.7	8.2	-5.2
Denmark.....	10.2	8.4	-4.7
Switzerland.....	10.7	8.5	-7.4
France.....	12.5	9.6	-5.1
Spain.....	17.1	10.3	-9.6
Singapore.....	11.6	10.8	-1.4
Canada.....	13.5	10.9	-6.9
Australia.....	13.8	11.0	-5.5
Belgium.....	15.3	11.7	-5.2
New Zealand.....	14.0	11.7	-3.5
United States.....	15.2	11.9	-4.8
United Kingdom.....	14.5	12.1	-4.4
German Democratic Republic.....	13.9	12.3	-2.4
Austria.....	18.2	12.6	-7.1
Federal Republic of Germany.....	17.4	12.6	-7.8
Italy.....	19.5	14.3	-7.5
Israel.....	20.1	15.1	-6.9
Jamaica.....	19.9	16.2	-9.8
Czechoslovakia.....	21.0	16.8	-4.4
Greece.....	22.5	17.9	-5.6
Cuba.....	22.9	18.5	-4.2

¹Data for Jamaica are for 1978. Data for Switzerland and Canada are for 1979. Data for Finland, Norway, Denmark, Australia, United Kingdom, Federal Republic of Germany, Italy, Israel, and Greece are for 1980. Data for all other countries refer to 1981; of these, the U.S. figure is final and all others are provisional.

²Average annual percent change is between 1976 and the most recent year data are available.

NOTE: Rankings are from lowest to highest infant mortality rates based on the latest data available for countries or geographic areas with at least 1 million population and with "complete" counts of live births and infant deaths as indicated in the United Nations Demographic Yearbook, 1981.

SOURCES: United Nations: Demographic Yearbook, 1980 and 1981. Pub. Nos. ST/ESA/STAT/SER.R/10 and ST/ESA/STAT/SER.R/11. New York. United Nations, 1980 and 1983; National Center for Health Statistics: Advance report of final mortality statistics, 1981. Monthly Vital Statistics Report. Vol. 33-No. 3. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., June 21, 1984.

Table 15. Life expectancy at birth, according to sex: Selected countries, selected periods
(Data are based on reporting by countries)

Country	Male				Country	Female			
	Period	Life expectancy in years	Period	Life expectancy in years		Period	Life expectancy in years	Period	Life expectancy in years
Japan.....	1974	71.2	1980	73.3	Norway.....	1973-74	77.8	1979-80	79.0
Sweden.....	1971-75	72.1	1980	72.8	Netherlands.....	1971-75	77.2	1979	78.9
Netherlands.....	1971-75	71.2	1979	72.4	Japan.....	1974	76.3	1980	78.8
Norway.....	1973-74	71.5	1979-80	72.3	Sweden.....	1971-75	77.7	1980	78.8
Israel.....	1975	70.3	1980	72.1	France.....	1972	76.4	1978-80	78.2
Denmark.....	1972-73	70.8	1979-80	71.2	United States.....	1975	76.6	1979	77.8
Australia.....	1965-67	67.6	1979	70.8	Australia.....	1965-67	74.2	1979	77.8
Spain.....	1970	69.7	1975	70.4	Finland.....	1974	75.4	1980	77.6
Switzerland.....	1968-73	70.3	1968-73	70.3	Canada.....	1970-72	76.4	1975-77	77.5
England and Wales.....	1970-72	68.9	1977-79	70.2	Denmark.....	1972-73	76.3	1979-80	77.3
Canada.....	1970-72	69.3	1975-77	70.2	England and Wales.....	1970-72	75.1	1977-79	76.4
Greece.....	1960-62	67.5	1970	70.1	Federal Republic of Germany...	1973-75	74.5	1978-80	76.4
France.....	1972	68.6	1978-80	70.1	Switzerland.....	1968-73	76.2	1968-73	76.2
United States.....	1975	68.8	1979	70.0	Spain.....	1970	75.0	1975	76.2
Italy.....	1970-72	69.0	1974-77	69.7	Austria.....	1975	74.9	1980	76.2
Federal Republic of Germany.....	1973-75	68.0	1978-80	69.6	Italy.....	1970-72	74.9	1974-77	75.9
Finland.....	1974	66.9	1980	69.2	Israel.....	1975	73.9	1980	75.7
New Zealand.....	1970-72	68.6	1975-77	69.0	New Zealand.....	1970-72	74.6	1975-77	75.5
Austria.....	1975	67.7	1980	69.0	Belgium.....	1968-72	74.2	1972-76	75.1
Singapore.....	1970	65.1	1980	68.9	German Democratic Republic....	1969-70	74.2	1978	74.7
German Democratic Republic.....	1969-70	68.9	1978	68.8	Poland.....	1975	74.3	1980	74.4
Ireland.....	1965-67	68.6	1970-72	68.8	Scotland.....	1971-73	73.6	1976-78	74.4
Bulgaria.....	1969-71	68.6	1974-76	68.7	Singapore.....	1970	70.0	1980	74.2
Belgium.....	1968-72	67.8	1972-76	68.6	Northern Ireland.....	1973-75	73.6	1976-78	74.1
Cuba.....	1970	68.5	1970	68.5	U.S.S.R.....	1971-72	74.0	1971-72	74.0

NOTE: Rankings are from highest to lowest life expectancy based on the latest available data for countries or geographic areas with at least 1 million population and most recent data for 1970 or later. This table is based only on data from the official life tables of the country concerned, consistent with the data presented in the United Nations Demographic Yearbook, 1981. In Health, United States, 1983 more recent estimates prepared in the Population Division of the United Nations were shown for certain countries.

SOURCES: United Nations: Demographic Yearbook, 1976 and 1981. Pub. Nos. ST/ESA/STAT/SER.R/5 and ST/ESA/STAT/SER.R/11. New York. United Nations, 1977 and 1983; Unpublished data from the Division of Vital Statistics.

Table 16. Age-adjusted death rates for selected causes of death, according to race and sex: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and cause of death	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³								
Deaths per 100,000 resident population								
All causes.....	841.5	760.9	714.3	577.0	585.8	568.2	556.4	549.6
Diseases of heart.....	307.6	286.2	253.6	199.5	202.0	195.0	191.0	188.5
Cerebrovascular diseases.....	88.8	79.7	66.3	41.6	40.8	38.1	36.2	34.3
Malignant neoplasms.....	125.4	125.8	129.9	130.8	132.8	131.6	133.4	132.3
Respiratory system.....	12.8	19.2	28.4	35.2	36.4	36.6	37.7	38.1
Digestive system.....	47.7	41.1	35.2	33.1	33.0	32.5	32.1	31.8
Breast ⁴	22.2	22.3	23.1	22.3	22.7	22.7	22.7	22.8
Pneumonia and influenza.....	26.2	28.0	22.1	11.2	12.9	12.3	11.1	11.2
Chronic liver disease and cirrhosis.....	8.5	10.5	14.7	12.0	12.2	11.4	10.4	10.4
Diabetes mellitus.....	14.3	13.6	14.1	9.8	10.1	9.8	9.2	9.8
Accidents and adverse effects.....	57.5	49.9	53.7	42.9	42.3	39.8	37.2	34.9
Motor vehicle accidents.....	23.3	22.5	27.4	23.2	22.9	21.8	19.6	18.1
Suicide.....	11.0	10.6	11.8	11.7	11.4	11.5	11.6	11.7
Homicide and legal intervention.....	5.4	5.2	9.1	10.2	10.8	10.4	9.7	8.2
White male								
All causes.....	963.1	917.7	893.4	738.4	745.3	724.4	709.7	701.8
Diseases of heart.....	381.1	375.4	347.6	276.8	277.5	268.8	---	---
Cerebrovascular diseases.....	87.0	80.3	68.8	42.9	41.9	38.9	---	---
Malignant neoplasms.....	130.9	141.6	154.3	158.7	160.5	158.3	---	---
Respiratory system.....	21.6	34.6	49.9	57.0	58.0	57.8	---	---
Digestive system.....	54.0	47.5	41.9	40.0	39.8	39.3	---	---
Pneumonia and influenza.....	27.1	31.0	26.0	14.4	16.2	15.6	---	---
Chronic liver disease and cirrhosis.....	11.6	14.4	18.8	15.6	15.7	14.8	---	---
Diabetes mellitus.....	11.3	11.6	12.7	9.3	9.5	9.3	---	---
Accidents and adverse effects.....	80.9	70.5	76.2	63.3	62.3	59.1	---	---
Motor vehicle accidents.....	35.9	34.0	40.1	35.5	34.8	33.4	---	---
Suicide.....	18.1	17.5	18.2	18.6	18.9	18.9	---	---
Homicide and legal intervention.....	3.9	3.9	7.3	9.9	10.9	10.3	---	---
White female								
All causes.....	645.0	555.0	501.7	402.5	411.1	401.4	395.1	391.5
Diseases of heart.....	223.6	197.1	167.8	131.3	134.6	129.8	---	---
Cerebrovascular diseases.....	79.7	68.7	56.2	35.9	35.2	33.1	---	---
Malignant neoplasms.....	119.4	109.5	107.6	105.7	107.7	107.2	---	---
Respiratory system.....	4.6	5.1	10.1	17.0	18.2	18.8	---	---
Digestive system.....	41.1	33.9	28.1	25.5	25.4	24.7	---	---
Breast ⁴	22.5	22.4	23.4	22.4	22.8	22.8	---	---
Pneumonia and influenza.....	18.9	19.0	15.0	7.8	9.4	9.0	---	---
Chronic liver disease and cirrhosis.....	5.8	6.6	8.7	7.0	7.0	6.7	---	---
Diabetes mellitus.....	16.4	13.7	12.8	8.3	8.7	8.4	---	---
Accidents and adverse effects.....	30.6	25.5	27.2	21.6	21.4	20.2	---	---
Motor vehicle accidents.....	10.6	11.1	14.4	12.3	12.3	11.7	---	---
Suicide.....	5.3	5.3	7.2	6.3	5.7	6.0	---	---
Homicide and legal intervention.....	1.4	1.5	2.2	2.9	3.2	3.1	---	---

See footnotes at end of table.

Table 16. Age-adjusted death rates for selected causes of death, according to race and sex: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and cause of death	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Deaths per 100,000 resident population								
All causes.....	1,373.1	1,246.1	1,318.6	1,073.3	1,112.8	1,067.7	1,045.5	1,024.7
Diseases of heart.....	415.5	381.2	375.9	314.1	327.3	316.7	---	---
Cerebrovascular diseases.....	146.2	141.2	124.2	77.9	77.5	72.7	---	---
Malignant neoplasms.....	126.1	158.5	198.0	221.8	229.9	232.0	---	---
Respiratory system.....	16.9	36.6	60.8	78.7	82.0	84.1	---	---
Digestive system.....	59.4	60.4	58.9	60.7	62.1	62.1	---	---
Pneumonia and influenza.....	63.8	70.2	53.8	24.2	28.0	26.4	---	---
Chronic liver disease and cirrhosis.....	8.8	14.8	33.1	30.3	30.6	27.3	---	---
Diabetes mellitus.....	11.5	16.2	21.2	17.0	17.7	16.8	---	---
Accidents and adverse effects.....	105.7	100.0	119.5	81.3	82.0	74.7	---	---
Motor vehicle accidents.....	39.8	38.2	50.1	33.7	32.9	30.7	---	---
Suicide.....	7.0	7.8	9.9	12.5	11.1	11.0	---	---
Homicide and legal intervention.....	51.1	44.9	82.1	70.1	71.9	69.2	---	---
Black female								
All causes.....	1,106.7	916.9	814.4	605.0	631.1	599.1	570.9	571.5
Diseases of heart.....	349.5	292.6	251.7	190.9	201.1	191.2	---	---
Cerebrovascular diseases.....	155.6	139.5	107.9	60.9	61.7	58.1	---	---
Malignant neoplasms.....	131.9	127.8	123.5	125.1	129.7	127.1	---	---
Respiratory system.....	4.1	5.5	10.9	17.4	19.5	20.1	---	---
Digestive system.....	40.2	37.5	34.1	35.0	35.4	34.5	---	---
Breast.....	19.3	21.3	21.5	22.7	23.3	23.7	---	---
Pneumonia and influenza.....	50.4	43.9	29.2	10.9	12.7	11.3	---	---
Chronic liver disease and cirrhosis.....	5.7	8.9	17.8	13.3	14.4	12.7	---	---
Diabetes mellitus.....	22.7	27.3	30.9	20.8	22.1	21.3	---	---
Accidents and adverse effects.....	38.5	35.9	35.3	23.9	25.1	21.6	---	---
Motor vehicle accidents.....	10.3	10.0	13.8	8.7	8.4	7.7	---	---
Suicide.....	1.7	1.9	2.9	2.9	2.4	2.5	---	---
Homicide and legal intervention.....	11.7	11.8	15.0	13.9	13.7	12.9	---	---

¹Includes deaths of nonresidents of the United States.

²Provisional data.

³Includes all other races not shown separately.

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. For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

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, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 17. Death rates for diseases of heart, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴ ...	307.6	286.2	253.6	199.5	202.0	195.0	191.0	188.5
All ages, crude.....	355.5	369.0	362.0	326.5	336.0	328.7	328.3	327.6
Under 1 year.....	3.5	6.6	13.1	20.2	22.8	21.3	19.5	20.5
1-4 years.....	1.3	1.3	1.7	2.1	2.6	2.5	1.2	1.4
5-14 years.....	2.1	1.3	0.8	0.8	0.9	0.9		
15-24 years.....	6.8	4.0	3.0	2.6	2.9	2.6	2.9	2.4
25-34 years.....	19.4	15.6	11.4	8.4	8.3	8.4	7.7	7.5
35-44 years.....	86.4	74.6	66.7	45.3	44.6	43.2	41.8	40.2
45-54 years.....	308.6	271.8	238.4	184.6	180.2	177.7	169.7	166.1
55-64 years.....	808.1	737.9	652.3	499.0	494.1	481.5	464.0	467.1
65-74 years.....	1,839.8	1,740.5	1,558.2	1,199.8	1,218.6	1,175.8	1,161.4	1,144.1
75-84 years.....	4,310.1	4,089.4	3,683.8	2,925.2	2,993.1	2,850.3	2,811.7	2,737.1
85 years and over.....	9,150.6	9,317.8	8,468.0	7,310.9	7,777.1	7,458.8	7,481.0	7,502.6
White male								
All ages, age adjusted ⁴	381.1	375.4	347.6	276.8	277.5	268.8	---	---
All ages, crude.....	433.0	454.6	438.3	378.2	384.0	375.8	---	---
Under 1 year.....	4.1	6.9	12.0	19.2	22.5	20.0	---	---
1-4 years.....	1.1	1.0	1.5	1.7	2.1	2.2	---	---
5-14 years.....	1.7	1.1	0.8	0.8	0.9	0.9	---	---
15-24 years.....	5.8	3.6	3.0	2.8	2.9	2.6	---	---
25-34 years.....	20.1	17.6	12.3	9.8	9.1	9.4	---	---
35-44 years.....	110.6	107.5	94.6	63.2	61.8	60.6	---	---
45-54 years.....	423.6	413.2	365.7	279.5	269.8	265.6	---	---
55-64 years.....	1,081.7	1,056.0	979.3	746.1	730.6	708.7	---	---
65-74 years.....	2,308.3	2,297.9	2,177.2	1,718.0	1,729.7	1,669.9	---	---
75-84 years.....	4,907.3	4,839.9	4,617.6	3,808.9	3,883.2	3,751.5	---	---
85 years and over.....	9,950.5	10,135.8	9,693.0	8,458.5	8,958.0	8,596.0	---	---
White female								
All ages, age adjusted ⁴	223.6	197.1	167.8	131.3	134.6	129.8	---	---
All ages, crude.....	289.4	306.5	313.8	305.1	319.2	314.6	---	---
Under 1 year.....	2.7	4.3	7.0	13.2	15.7	18.0	---	---
1-4 years.....	1.1	0.9	1.2	1.7	2.1	2.2	---	---
5-14 years.....	1.9	0.9	0.7	0.7	0.8	0.8	---	---
15-24 years.....	5.3	2.8	1.7	1.6	1.7	1.6	---	---
25-34 years.....	12.2	8.2	5.5	3.9	3.9	4.2	---	---
35-44 years.....	40.5	28.6	23.9	17.1	16.4	16.2	---	---
45-54 years.....	141.9	103.4	91.4	71.5	71.2	71.2	---	---
55-64 years.....	460.2	383.0	317.7	246.1	248.1	243.7	---	---
65-74 years.....	1,400.9	1,229.8	1,044.0	775.0	796.7	769.4	---	---
75-84 years.....	3,925.2	3,629.7	3,143.5	2,447.1	2,493.6	2,359.0	---	---
85 years and over.....	9,084.7	9,280.8	8,207.5	7,053.7	7,501.6	7,215.1	---	---

See footnotes at end of table.

Table 17. Death rates for diseases of heart, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	415.5	381.2	375.9	314.1	327.3	316.7	---	---
All ages, crude.....	348.4	330.6	330.3	290.2	301.0	289.7	---	---
Under 1 year.....	4.8	13.9	33.5	42.7	42.8	35.6	---	---
1-4 years.....	6.4	3.8	3.9	4.3	6.3	4.4	---	---
5-14 years.....	18.0	3.0	1.4	1.0	1.3	1.7	---	---
15-24 years.....	51.9	8.7	8.3	6.1	8.3	6.7	---	---
25-34 years.....	198.1	43.1	41.6	26.8	30.3	29.3	---	---
35-44 years.....	624.1	168.1	189.2	132.5	136.6	129.3	---	---
45-54 years.....	1,434.0	514.0	512.8	438.4	433.4	426.1	---	---
55-64 years.....	2,140.1	1,236.8	1,135.4	969.3	987.2	981.5	---	---
65-74 years.....	4,107.9	2,281.4	2,237.8	1,805.7	1,847.2	1,812.7	---	---
75-84 years.....	6,037.9	3,533.6	3,783.4	3,193.7	3,578.8	3,302.5	---	---
85 years and over.....		6,037.9	6,330.8	6,094.2	6,819.5	6,394.5	---	---
Black female								
All ages, age adjusted ⁴	349.5	292.6	251.7	190.9	201.1	191.2	---	---
All ages, crude.....	289.9	268.5	261.0	234.1	249.7	241.1	---	---
Under 1 year.....	3.9	12.0	31.3	37.9	43.6	29.2	---	---
1-4 years.....	8.8	2.8	4.2	4.0	4.4	4.0	---	---
5-14 years.....	19.8	3.0	1.8	1.3	1.7	1.4	---	---
15-24 years.....	52.0	10.0	6.0	4.3	4.6	4.2	---	---
25-34 years.....	185.0	35.9	24.7	15.5	15.7	13.7	---	---
35-44 years.....	526.8	125.3	99.8	61.1	61.7	56.0	---	---
45-54 years.....	1,210.7	360.7	290.9	204.1	202.4	197.8	---	---
55-64 years.....	1,659.4	952.3	710.5	513.5	530.1	517.2	---	---
65-74 years.....	3,499.3	1,680.5	1,553.2	1,158.9	1,210.3	1,152.3	---	---
75-84 years.....	5,650.0	2,926.9	2,964.1	2,461.4	2,707.2	2,509.4	---	---
85 years and over.....		5,650.0	5,669.8	5,060.6	5,796.5	5,583.9	---	---

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 18. Death rates for malignant neoplasms, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴ ...	125.4	125.8	129.9	130.8	132.8	131.6	133.4	132.3
All ages, crude.....	139.8	149.2	162.8	179.6	183.9	184.0	188.3	188.3
Under 1 year.....	8.7	7.2	4.7	3.4	3.2	2.5	2.2	2.2
1-4 years.....	11.7	10.9	7.5	4.6	4.5	4.9	3.7	4.2
5-14 years.....	6.7	6.8	6.0	4.4	4.3	4.1		
15-24 years.....	8.6	8.3	8.3	6.1	6.3	5.7	6.5	5.4
25-34 years.....	20.0	19.5	16.5	13.3	13.7	13.0	12.8	13.2
35-44 years.....	62.7	59.7	59.5	48.3	48.6	47.2	45.8	45.7
45-54 years.....	175.1	177.0	182.5	181.4	180.0	178.1	179.1	174.3
55-64 years.....	392.9	396.8	423.0	429.4	436.1	434.8	443.5	439.4
65-74 years.....	692.5	713.9	754.2	800.0	817.9	814.8	835.1	831.7
75-84 years.....	1,153.3	1,127.4	1,168.0	1,207.6	1,232.3	1,221.8	1,231.2	1,227.6
85 years and over.....	1,451.0	1,450.0	1,417.3	1,522.9	1,594.6	1,575.3	1,599.6	1,610.5
White male								
All ages, age adjusted ⁴	130.9	141.6	154.3	158.7	160.5	158.3	---	---
All ages, crude.....	147.2	166.1	185.1	204.7	208.7	207.9	---	---
Under 1 year.....	9.6	7.9	4.3	3.8	3.5	2.5	---	---
1-4 years.....	13.1	13.1	8.5	5.1	5.4	5.5	---	---
5-14 years.....	7.6	8.0	7.0	5.2	5.2	4.6	---	---
15-24 years.....	9.9	10.3	10.6	7.5	7.8	6.8	---	---
25-34 years.....	17.7	18.8	16.2	13.2	13.6	12.6	---	---
35-44 years.....	44.5	46.3	50.1	40.3	41.1	39.7	---	---
45-54 years.....	150.8	164.1	172.0	177.4	175.4	173.8	---	---
55-64 years.....	409.4	450.9	498.1	491.8	497.4	494.4	---	---
65-74 years.....	798.7	887.3	997.0	1,061.2	1,070.7	1,060.3	---	---
75-84 years.....	1,367.6	1,413.7	1,592.7	1,747.3	1,779.7	1,749.5	---	---
85 years and over.....	1,732.7	1,791.4	1,948.1	2,285.1	2,375.6	2,358.7	---	---
White female								
All ages, age adjusted ⁴	119.4	109.5	107.6	105.7	107.7	107.2	---	---
All ages, crude.....	139.9	139.8	149.4	165.1	170.3	172.0	---	---
Under 1 year.....	7.8	6.8	5.4	2.9	2.7	2.6	---	---
1-4 years.....	11.3	9.7	6.9	4.2	3.6	4.5	---	---
5-14 years.....	6.3	6.2	5.4	3.8	3.7	3.5	---	---
15-24 years.....	7.5	6.5	6.2	4.7	4.7	4.5	---	---
25-34 years.....	20.9	18.8	16.3	12.9	13.5	12.9	---	---
35-44 years.....	74.5	66.6	62.4	50.8	50.9	48.6	---	---
45-54 years.....	185.8	175.7	177.3	167.3	166.4	165.5	---	---
55-64 years.....	362.5	329.0	338.6	348.9	355.5	356.3	---	---
65-74 years.....	616.5	562.1	554.7	583.1	605.2	605.7	---	---
75-84 years.....	1,026.6	939.3	903.5	889.7	905.4	907.8	---	---
85 years and over.....	1,348.3	1,304.9	1,179.4	1,207.5	1,266.8	1,257.2	---	---

See footnotes at end of table.

Table 18. Death rates for malignant neoplasms, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							1982 ^{1,2}	1983 ^{1,2}
	1950 ¹	1960 ¹	1970	1979	1980	1981			
Black male									
Number of deaths per 100,000 resident population									
All ages, age adjusted ⁴	126.1	158.5	198.0	221.8	229.9	232.0	---	---	
All ages, crude.....	106.6	136.7	171.6	199.5	205.5	206.3	---	---	
Under 1 year.....	8.2	6.8	5.3	4.2	4.5	2.7	---	---	
1-4 years.....	7.9	7.9	7.6	4.1	5.1	4.5	---	---	
5-14 years.....	5.8	4.4	4.8	4.4	3.7	4.7	---	---	
15-24 years.....	7.9	9.7	9.4	7.1	8.1	7.0	---	---	
25-34 years.....	18.0	18.4	18.8	13.3	14.1	14.1	---	---	
35-44 years.....	55.7	72.9	81.3	76.4	73.8	75.8	---	---	
45-54 years.....	211.7	244.7	311.2	335.0	333.0	332.2	---	---	
55-64 years.....	490.8	579.7	689.2	790.8	812.5	814.8	---	---	
65-74 years.....	636.4	938.5	1,168.9	1,360.3	1,417.2	1,462.1	---	---	
75-84 years.....	853.5	1,053.3	1,624.8	1,833.2	2,029.6	2,010.5	---	---	
85 years and over.....	1,155.2	1,635.9	2,186.5	2,393.9	2,383.6	---	---		
Black female									
All ages, age adjusted ⁴	131.9	127.8	123.5	125.1	129.7	127.1	---	---	
All ages, crude.....	111.8	113.8	117.3	130.9	136.5	135.2	---	---	
Under 1 year.....	7.0	6.7	3.3	3.1	3.0	0.7	---	---	
1-4 years.....	6.9	6.9	5.7	4.5	3.9	4.5	---	---	
5-14 years.....	3.9	4.8	4.0	3.4	3.4	4.0	---	---	
15-24 years.....	8.8	6.9	6.4	5.3	5.7	4.6	---	---	
25-34 years.....	34.3	31.0	20.9	17.6	18.3	17.4	---	---	
35-44 years.....	119.8	102.4	94.6	71.9	73.5	73.7	---	---	
45-54 years.....	277.0	254.8	228.6	229.2	230.2	217.4	---	---	
55-64 years.....	484.6	442.7	404.8	431.8	450.4	446.4	---	---	
65-74 years.....	477.3	541.6	615.8	638.9	662.4	656.2	---	---	
75-84 years.....	605.3	696.3	763.3	863.1	923.9	916.2	---	---	
85 years and over.....	728.9	896.8	1,005.8	1,159.9	1,133.9	---	---		

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 19. Death rates for malignant neoplasms of respiratory system, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total³	Number of deaths per 100,000 resident population							
All ages, age adjusted ⁴	12.8	19.2	28.4	35.2	36.4	36.6	37.7	38.1
All ages, crude.....	14.1	22.2	34.2	45.9	47.9	48.5	50.3	51.6
Under 1 year.....	0.1	0.2	0.1	0.0	0.2	0.2	-	-
1-4 years.....	0.1	0.1	0.1	0.0	0.1	0.0	0.0	-
5-14 years.....	0.1	0.0	0.0	0.0	0.0	0.0	0.0	-
15-24 years.....	0.2	0.1	0.2	0.1	0.1	0.1	0.1	0.1
25-34 years.....	0.9	1.1	1.0	0.8	0.8	0.7	0.6	0.7
35-44 years.....	5.1	7.3	11.6	9.8	9.6	9.5	8.2	9.2
45-54 years.....	22.9	32.0	46.2	56.0	56.5	56.7	58.8	54.4
55-64 years.....	55.2	81.5	116.2	140.9	144.3	145.9	150.9	151.4
65-74 years.....	69.3	117.2	174.6	231.0	243.1	245.3	254.3	260.8
75-84 years.....	69.3	102.9	175.1	238.1	251.4	252.6	265.5	283.0
85 years and over.....	64.0	79.1	121.8	170.3	184.5	187.7	178.7	202.2
White male								
All ages, age adjusted ⁴	21.6	34.6	49.9	57.0	58.0	57.8	---	---
All ages, crude.....	24.1	39.6	58.3	71.5	73.4	73.7	---	---
Under 1 year.....	0.2	0.1	0.2	-	0.2	0.1	---	---
1-4 years.....	0.1	0.0	0.1	0.0	0.0	0.0	---	---
5-14 years.....	0.1	0.0	0.0	0.0	0.0	0.0	---	---
15-24 years.....	0.3	0.2	0.2	0.2	0.2	0.2	---	---
25-34 years.....	1.2	1.6	1.4	1.0	0.9	0.9	---	---
35-44 years.....	7.9	10.4	15.4	11.5	11.2	11.1	---	---
45-54 years.....	39.1	53.0	67.6	74.7	74.3	74.6	---	---
55-64 years.....	95.9	149.8	199.3	212.4	215.0	212.8	---	---
65-74 years.....	119.4	225.1	344.8	408.0	418.4	415.1	---	---
75-84 years.....	109.1	191.9	360.7	495.9	516.1	515.8	---	---
85 years and over.....	102.7	133.9	243.8	381.2	391.5	420.6	---	---
White female								
All ages, age adjusted ⁴	4.6	5.1	10.1	17.0	18.2	18.8	---	---
All ages, crude.....	5.4	6.4	13.1	24.2	26.5	27.6	---	---
Under 1 year.....	-	0.2	0.1	-	0.1	0.1	---	---
1-4 years.....	0.1	0.1	0.1	0.0	0.1	0.0	---	---
5-14 years.....	0.1	0.0	0.1	0.0	0.1	0.0	---	---
15-24 years.....	0.2	0.1	0.1	0.1	0.0	0.1	---	---
25-34 years.....	0.5	0.6	0.6	0.6	0.5	0.5	---	---
35-44 years.....	2.2	3.4	6.0	6.6	6.8	6.3	---	---
45-54 years.....	6.5	9.8	22.1	32.6	33.9	33.6	---	---
55-64 years.....	15.5	16.7	39.3	70.2	74.2	78.3	---	---
65-74 years.....	27.2	26.5	45.4	96.5	108.1	114.1	---	---
75-84 years.....	40.0	36.5	56.8	90.5	99.3	102.7	---	---
85 years and over.....	44.0	45.2	60.1	80.6	96.8	92.0	---	---

See footnotes at end of table.

Table 19. Death rates for malignant neoplasms of respiratory system, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	16.9	36.6	60.8	78.7	82.0	84.1	---	---
All ages, crude.....	14.3	31.1	51.2	68.1	70.8	71.8	---	---
Under 1 year.....	-	0.4	0.4	0.4	0.4	-	---	---
1-4 years.....	-	0.1	0.1	-	0.2	-	---	---
5-14 years.....	0.1	0.0	0.1	0.1	0.0	0.0	---	---
15-24 years.....	0.4	0.2	0.3	0.1	0.3	0.2	---	---
25-34 years.....	2.1	2.6	2.9	1.5	1.9	1.1	---	---
35-44 years.....	9.4	20.7	32.6	26.9	26.9	26.0	---	---
45-54 years.....	41.1	75.0	123.5	143.1	142.8	146.0	---	---
55-64 years.....	78.8	161.8	250.3	338.1	340.3	356.0	---	---
65-74 years.....	65.2	184.6	322.2	466.0	499.4	518.7	---	---
75-84 years.....	42.4	126.3	290.6	421.8	499.6	486.2	---	---
85 years and over.....	42.4	110.3	182.1	303.8	337.7	343.6	---	---
Black female								
All ages, age adjusted ⁴	4.1	5.5	10.9	17.4	19.5	20.1	---	---
All ages, crude.....	3.4	4.9	10.1	17.1	19.3	19.8	---	---
Under 1 year.....	-	-	-	-	0.4	-	---	---
1-4 years.....	-	0.1	0.1	-	-	-	---	---
5-14 years.....	-	0.1	-	0.0	0.0	-	---	---
15-24 years.....	0.3	-	0.1	0.2	0.1	0.1	---	---
25-34 years.....	1.2	0.8	0.5	0.6	0.8	0.6	---	---
35-44 years.....	2.7	3.4	10.5	8.8	7.9	9.7	---	---
45-54 years.....	8.8	12.8	25.3	43.5	46.4	46.4	---	---
55-64 years.....	15.3	20.7	36.4	72.4	83.8	89.1	---	---
65-74 years.....	16.4	20.7	49.3	73.6	91.7	89.6	---	---
75-84 years.....	19.2	33.1	52.6	79.2	81.1	83.5	---	---
85 years and over.....	19.2	44.7	54.0	68.3	90.5	86.6	---	---

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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)-B1. Washington. U.S. Government Printing Office, 1961 and 1972.

Table 20. Death rates for malignant neoplasm of breast for females, according to race and age:
United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³ Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	22.2	22.3	23.1	22.3	22.7	22.7	22.7	22.8
All ages, crude.....	24.7	26.1	28.4	29.8	30.6	30.9	31.5	32.0
Under 25 years.....	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.0
25-34 years.....	3.8	3.8	3.9	3.3	3.3	3.3	3.2	3.6
35-44 years.....	20.8	20.2	20.4	17.7	17.9	17.4	17.9	16.6
45-54 years.....	46.9	51.4	52.6	48.7	48.1	48.1	43.6	43.6
55-64 years.....	70.4	70.8	77.6	77.2	80.5	79.1	82.7	83.3
65-74 years.....	94.0	90.0	93.8	99.1	101.1	104.4	108.0	109.4
75-84 years.....	139.8	129.9	127.4	122.0	126.4	126.6	126.7	133.4
85 years and over.....	195.5	191.9	157.1	163.8	169.3	171.9	180.6	177.6
White								
All ages, age adjusted ⁴	22.5	22.4	23.4	22.4	22.8	22.8	---	---
All ages, crude.....	25.7	27.2	29.9	31.4	32.3	32.7	---	---
Under 25 years.....	0.1	0.0	0.0	0.0	0.0	0.0	---	---
25-34 years.....	3.7	3.6	3.7	3.0	3.0	3.1	---	---
35-44 years.....	20.8	19.7	20.2	17.3	17.3	16.8	---	---
45-54 years.....	47.1	51.2	53.0	48.3	48.1	48.2	---	---
55-64 years.....	70.9	71.8	79.3	78.3	81.3	79.9	---	---
65-74 years.....	96.3	91.6	95.9	101.5	103.7	106.6	---	---
75-84 years.....	143.6	132.8	129.6	124.6	128.4	128.8	---	---
85 years and over.....	204.2	199.7	161.9	166.8	171.7	174.0	---	---
Black								
All ages, age adjusted ⁴	19.3	21.3	21.5	22.7	23.3	23.7	---	---
All ages, crude.....	16.4	18.7	19.7	22.0	22.9	23.5	---	---
Under 25 years.....	0.1	0.2	0.1	0.0	0.0	0.1	---	---
25-34 years.....	4.9	6.1	5.9	5.1	5.3	5.2	---	---
35-44 years.....	21.0	24.8	24.4	22.6	24.1	23.7	---	---
45-54 years.....	46.5	54.4	52.0	56.8	52.7	53.1	---	---
55-64 years.....	64.3	63.2	64.7	73.1	79.9	79.4	---	---
65-74 years.....	67.0	72.3	77.3	82.5	84.3	92.0	---	---
75-84 years.....	81.0	87.5	101.8	100.3	114.1	112.6	---	---
85 years and over.....		92.1	112.1	137.5	149.9	158.0	---	---

¹Includes deaths of nonresidents of the United States.

²Provisional data--estimated number of deaths for both sexes per 100,000 female resident population.

³Includes all other races not shown separately.

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

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310 and 929. Washington. U.S. Government Printing Office, June 1965 and May 1983; 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.

Table 21. Death rates for cerebrovascular diseases, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³ Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	88.8	79.7	66.3	41.6	40.8	38.1	36.2	34.3
All ages, crude.....	104.0	108.0	101.9	75.5	75.1	71.3	69.0	66.8
Under 1 year.....	5.1	4.1	5.0	4.6	4.4	3.7	3.8	3.3
1-4 years.....	0.9	0.8	1.0	0.3	0.5	0.3	0.2	0.1
5-14 years.....	0.5	0.7	0.7	0.3	0.3	0.3		
15-24 years.....	1.6	1.8	1.6	0.9	1.0	0.9	1.0	0.7
25-34 years.....	4.2	4.7	4.5	2.6	2.6	2.6	2.3	1.9
35-44 years.....	18.7	14.7	15.6	9.1	8.5	8.4	8.0	6.3
45-54 years.....	70.4	49.2	41.6	26.4	25.2	24.9	24.3	21.4
55-64 years.....	195.3	147.3	115.8	68.1	65.2	62.9	57.4	58.8
65-74 years.....	549.7	469.2	384.1	226.9	219.5	206.3	195.4	184.3
75-84 years.....	1,499.6	1,491.3	1,254.2	793.8	788.6	715.6	679.2	652.4
85 years and over.....	2,990.1	3,680.5	3,234.6	2,264.9	2,288.9	2,126.8	2,058.1	1,985.6
White male								
All ages, age adjusted ⁴	87.0	80.3	68.8	42.9	41.9	38.9	---	---
All ages, crude.....	100.5	102.7	93.5	64.2	63.3	59.4	---	---
Under 1 year.....	5.9	4.3	4.5	3.6	3.8	3.5	---	---
1-4 years.....	1.1	0.8	1.2	0.3	0.4	0.3	---	---
5-14 years.....	0.5	0.7	0.8	0.3	0.2	0.3	---	---
15-24 years.....	1.6	1.7	1.6	0.9	1.0	0.8	---	---
25-34 years.....	3.4	3.5	3.2	2.2	2.0	2.1	---	---
35-44 years.....	13.1	11.3	11.8	6.8	6.5	6.4	---	---
45-54 years.....	53.7	40.9	35.6	22.2	21.7	20.5	---	---
55-64 years.....	182.2	139.0	119.9	68.0	64.2	61.6	---	---
65-74 years.....	569.7	501.0	420.0	249.5	240.4	225.3	---	---
75-84 years.....	1,556.3	1,564.8	1,361.6	867.0	854.8	775.6	---	---
85 years and over.....	3,127.1	3,734.8	3,317.6	2,224.5	2,236.9	2,051.4	---	---
White female								
All ages, age adjusted ⁴	79.7	68.7	56.2	35.9	35.2	33.1	---	---
All ages, crude.....	103.3	110.1	109.8	88.5	88.8	85.1	---	---
Under 1 year.....	2.9	2.6	3.2	3.3	3.3	2.3	---	---
1-4 years.....	0.6	0.5	0.6	0.3	0.4	0.3	---	---
5-14 years.....	0.4	0.6	0.6	0.3	0.3	0.3	---	---
15-24 years.....	1.2	1.4	1.1	0.7	0.7	0.8	---	---
25-34 years.....	2.9	3.4	3.4	2.0	2.0	2.0	---	---
35-44 years.....	13.6	10.1	11.5	7.0	6.7	6.7	---	---
45-54 years.....	55.0	33.8	30.5	20.1	18.7	18.8	---	---
55-64 years.....	156.9	103.0	78.1	50.6	48.7	47.7	---	---
65-74 years.....	498.1	383.3	303.2	179.2	172.8	163.6	---	---
75-84 years.....	1,471.3	1,444.7	1,176.8	739.3	730.3	665.4	---	---
85 years and over.....	3,017.9	3,795.7	3,316.1	2,335.7	2,367.8	2,206.0	---	---

See footnotes at end of table.

Table 21. Death rates for cerebrovascular diseases, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	146.2	141.2	124.2	77.9	77.5	72.7	---	---
All ages, crude.....	122.0	122.9	108.7	73.8	73.1	68.2	---	---
Under 1 year.....	2.5	8.5	12.2	12.7	11.2	9.1	---	---
1-4 years.....	0.7	1.9	*1.4	0.5	0.6	0.4	---	---
5-14 years.....	3.3	*0.9	0.8	0.3	0.5	0.3	---	---
15-24 years.....	12.0	3.7	3.0	1.4	2.1	1.5	---	---
25-34 years.....	59.3	47.4	52.7	34.4	29.2	29.2	---	---
35-44 years.....	211.9	166.1	136.2	88.8	82.1	84.2	---	---
45-54 years.....	522.8	439.9	343.4	204.0	189.8	182.3	---	---
55-64 years.....	783.6	899.2	780.0	470.9	472.8	437.0	---	---
65-74 years.....	1,504.9	1,475.2	1,442.6	963.9	1,067.6	943.9	---	---
75-84 years.....	2,700.0	2,700.0	2,315.4	1,840.4	1,873.2	1,787.3	---	---
85 years and over.....							---	---
Black female								
All ages, age adjusted ⁴	155.6	139.5	107.9	60.9	61.7	58.1	---	---
All ages, crude.....	128.3	127.7	112.1	76.8	77.9	74.4	---	---
Under 1 year.....	2.8	*6.7	9.1	9.0	6.4	6.2	---	---
1-4 years.....	0.6	*1.3	*1.4	0.4	0.5	0.3	---	---
5-14 years.....	4.2	1.0	0.8	0.4	0.3	0.4	---	---
15-24 years.....	15.9	3.4	3.0	1.5	1.7	1.6	---	---
25-34 years.....	75.0	57.4	49.1	21.6	21.6	21.0	---	---
35-44 years.....	248.9	166.2	119.4	62.1	61.9	59.9	---	---
45-54 years.....	567.7	452.0	272.5	133.9	138.7	129.8	---	---
55-64 years.....	754.4	830.5	673.4	373.8	362.2	345.1	---	---
65-74 years.....	1,496.7	1,413.1	1,337.8	865.3	918.6	828.3	---	---
75-84 years.....	2,578.9	2,578.9	2,504.8	1,881.7	1,896.3	1,832.1	---	---
85 years and over.....							---	---

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 22. Death rates for motor vehicle accidents, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	23.3	22.5	27.4	23.2	22.9	21.8	19.6	18.1
All ages, crude.....	23.1	21.3	26.9	23.8	23.5	22.4	20.2	18.7
Under 1 year.....	8.4	8.1	9.8	6.5	7.0	6.1	6.6	4.9
1-4 years.....	11.5	10.0	11.5	9.8	9.2	7.8	7.7	6.6
5-14 years.....	8.8	7.9	10.2	8.3	7.9	7.5		
15-24 years.....	34.4	38.0	47.2	45.6	44.8	41.2	36.6	35.0
25-34 years.....	24.6	24.3	30.9	28.8	29.1	28.6	25.2	22.5
35-44 years.....	20.3	19.3	24.9	21.0	20.9	20.2	17.3	15.9
45-54 years.....	22.2	21.4	25.5	18.6	18.6	17.8	15.6	14.7
55-64 years.....	29.2	25.1	27.9	18.2	17.4	17.3	15.3	13.9
65-74 years.....	38.8	31.4	32.8	20.7	19.2	19.4	18.5	17.9
75-84 years.....	52.7	41.8	43.5	28.7	28.1	27.3	27.7	26.1
85 years and over.....	45.1	37.9	36.6	24.4	27.6	25.8	31.5	29.2
White male								
All ages, age adjusted ⁴	35.9	34.0	40.1	35.5	34.8	33.4	---	---
All ages, crude.....	35.1	31.5	39.1	36.6	35.9	34.5	---	---
Under 1 year.....	9.1	8.8	9.1	7.4	7.0	6.2	---	---
1-4 years.....	13.2	11.3	12.2	9.7	9.5	8.1	---	---
5-14 years.....	12.0	10.3	12.6	10.6	9.8	9.9	---	---
15-24 years.....	58.3	62.7	75.2	75.4	73.8	67.6	---	---
25-34 years.....	39.1	38.6	47.0	46.0	46.6	46.3	---	---
35-44 years.....	30.9	28.4	35.2	30.7	30.7	29.9	---	---
45-54 years.....	31.6	29.7	34.6	26.5	26.3	25.5	---	---
55-64 years.....	41.9	34.4	39.0	25.5	23.9	24.0	---	---
65-74 years.....	59.1	45.5	46.2	29.0	25.8	26.3	---	---
75-84 years.....	86.4	66.8	69.2	46.4	43.6	43.8	---	---
85 years and over.....	79.3	61.9	72.0	48.5	57.3	54.5	---	---
White female								
All ages, age adjusted ⁴	10.6	11.1	14.4	12.3	12.3	11.7	---	---
All ages, crude.....	10.9	11.2	14.8	12.8	12.8	12.3	---	---
Under 1 year.....	7.8	7.5	10.2	6.2	7.1	6.5	---	---
1-4 years.....	10.1	8.3	9.6	8.9	7.7	6.8	---	---
5-14 years.....	5.6	5.3	6.9	6.1	5.7	5.1	---	---
15-24 years.....	12.6	15.6	22.7	22.8	23.0	21.8	---	---
25-34 years.....	9.0	9.0	12.7	12.1	12.2	12.4	---	---
35-44 years.....	8.1	8.9	12.3	10.6	10.6	9.9	---	---
45-54 years.....	10.8	11.4	14.3	9.8	10.2	9.5	---	---
55-64 years.....	15.0	15.3	16.1	10.3	10.5	10.7	---	---
65-74 years.....	20.9	19.3	22.1	13.7	13.4	13.3	---	---
75-84 years.....	25.4	23.8	28.1	18.9	19.0	18.0	---	---
85 years and over.....	22.3	22.2	18.9	14.0	15.3	14.7	---	---

See footnotes at end of table.

Table 22. Death rates for motor vehicle accidents, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							1982 ^{1,2}	1983 ^{1,2}
	1950 ¹	1960 ¹	1970	1979	1980	1981			
Black male									
Number of deaths per 100,000 resident population									
All ages, age adjusted ⁴	39.8	38.2	50.1	33.7	32.9	30.7	---	---	
All ages, crude.....	37.2	33.1	44.2	31.6	31.1	28.8	---	---	
Under 1 year.....	9.0	*6.8	10.6	3.8	7.8	6.0	---	---	
1-4 years.....		12.7	16.9	13.1	13.7	9.7	---	---	
5-14 years.....	9.7	10.4	16.1	11.2	10.5	9.3	---	---	
15-24 years.....	41.6	46.4	58.1	34.5	34.9	30.8	---	---	
25-34 years.....	57.4	51.0	70.4	46.8	44.9	42.2	---	---	
35-44 years.....	45.9	43.6	59.5	42.1	41.2	40.0	---	---	
45-54 years.....	49.9	48.1	61.4	42.6	39.1	39.0	---	---	
55-64 years.....	58.8	47.3	62.1	42.0	40.3	35.6	---	---	
65-74 years.....	48.5	46.1	54.9	41.5	41.8	42.4	---	---	
75-84 years.....	61.8	51.8	51.5	38.2	46.5	43.9	---	---	
85 years and over.....		*58.6	53.8	55.8	34.0	36.4	---	---	
Black female									
All ages, age adjusted ⁴	10.3	10.0	13.8	8.7	8.4	7.7	---	---	
All ages, crude.....	10.2	9.7	13.4	8.7	8.3	7.7	---	---	
Under 1 year.....	7.0	8.1	11.9	5.9	5.3	3.1	---	---	
1-4 years.....		8.8	12.6	9.5	9.5	8.7	---	---	
5-14 years.....	6.2	5.9	9.3	5.2	5.2	5.2	---	---	
15-24 years.....	11.5	9.9	13.4	9.3	8.0	7.7	---	---	
25-34 years.....	10.7	9.8	13.3	9.4	10.6	8.2	---	---	
35-44 years.....	11.1	11.0	16.1	8.3	8.3	7.7	---	---	
45-54 years.....	10.6	11.8	16.4	8.9	9.1	8.2	---	---	
55-64 years.....	14.0	14.0	17.1	11.2	9.3	9.3	---	---	
65-74 years.....	12.7	14.2	16.3	10.7	8.5	10.2	---	---	
75-84 years.....	17.6	8.8	14.3	13.3	11.1	11.8	---	---	
85 years and over.....		*21.1	17.5	7.7	12.3	6.3	---	---	

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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)-1C. Washington. U.S. Government Printing Office, 1961 and 1972.

Table 23. Death rates for homicide and legal intervention, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	5.4	5.2	9.1	10.2	10.8	10.4	9.7	8.2
All ages, crude.....	5.3	4.7	8.3	10.0	10.7	10.3	9.7	8.2
Under 1 year.....	4.4	4.8	4.3	5.0	5.9	6.1	2.7	4.1
1-4 years.....	0.6	0.7	1.9	2.5	2.5	2.6		
5-14 years.....	0.5	0.5	0.9	1.1	1.2	1.3	1.4	1.3
15-24 years.....	6.3	5.9	11.7	14.5	15.6	14.7	13.9	11.3
25-34 years.....	9.9	9.7	16.6	18.2	19.6	18.5	17.5	15.3
35-44 years.....	8.8	8.1	13.7	14.3	15.1	14.4	12.8	11.7
45-54 years.....	6.1	6.2	10.1	10.8	11.1	11.3	10.8	8.0
55-64 years.....	4.0	4.2	7.1	7.0	7.0	7.1	7.1	5.6
65-74 years.....	3.2	2.8	5.0	5.4	5.7	4.8	4.8	4.4
75-84 years.....	2.6	2.4	4.0	4.8	5.2	5.3	4.2	4.3
85 years and over.....	2.3	2.4	4.5	5.0	5.3	5.3	6.1	5.6
White male								
All ages, age adjusted ⁴	3.9	3.9	7.3	9.9	10.9	10.3	---	---
All ages, crude.....	3.9	3.6	6.8	9.9	10.9	10.4	---	---
Under 1 year.....	4.3	3.8	2.9	4.0	4.3	4.7	---	---
1-4 years.....	0.4	0.6	1.4	1.7	2.0	1.6	---	---
5-14 years.....	0.4	0.4	0.5	1.0	0.9	0.9	---	---
15-24 years.....	3.7	4.4	7.9	14.4	15.5	14.4	---	---
25-34 years.....	5.4	6.2	13.0	16.8	18.9	17.6	---	---
35-44 years.....	6.4	5.5	11.0	13.9	15.5	15.1	---	---
45-54 years.....	5.5	5.0	9.0	11.2	11.9	12.1	---	---
55-64 years.....	4.4	4.3	7.7	7.4	7.8	7.9	---	---
65-74 years.....	4.1	3.4	5.6	6.0	6.9	5.2	---	---
75-84 years.....	3.5	2.7	5.1	5.4	6.3	5.1	---	---
85 years and over.....	1.8	*2.7	7.0	6.0	6.4	7.9	---	---
White female								
All ages, age adjusted ⁴	1.4	1.5	2.2	2.9	3.2	3.1	---	---
All ages, crude.....	1.4	1.4	2.1	3.0	3.2	3.1	---	---
Under 1 year.....	3.9	3.5	2.9	2.8	4.3	4.9	---	---
1-4 years.....	0.6	0.5	1.2	1.7	1.5	1.8	---	---
5-14 years.....	0.4	0.3	0.5	0.7	1.0	1.0	---	---
15-24 years.....	1.3	1.5	2.7	4.3	4.7	4.3	---	---
25-34 years.....	1.9	2.0	3.4	4.0	4.3	4.3	---	---
35-44 years.....	2.2	2.2	3.2	3.6	4.1	3.6	---	---
45-54 years.....	1.6	1.9	2.2	2.9	3.0	3.2	---	---
55-64 years.....	1.3	1.5	2.0	2.1	2.1	2.2	---	---
65-74 years.....	1.1	1.1	1.7	2.6	2.5	2.1	---	---
75-84 years.....	1.2	1.2	2.5	2.9	3.3	3.6	---	---
85 years and over.....	1.9	*1.5	2.0	4.1	4.0	3.3	---	---

See footnotes at end of table.

Table 23. Death rates for homicide and legal intervention, according to race, sex, and age: United States, selected years 1950-83--Continued

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	51.1	44.9	82.1	70.1	71.9	69.2	---	---
All ages, crude.....	47.3	36.6	67.5	63.8	66.6	64.8	---	---
Under 1 year.....	1.8	10.3	14.3	16.5	18.6	11.1	---	---
1-4 years.....	1.8	*1.7	5.1	6.3	7.2	8.9	---	---
5-14 years.....	1.8	1.4	4.2	3.2	2.9	4.1	---	---
15-24 years.....	58.9	46.4	102.5	76.5	84.3	78.2	---	---
25-34 years.....	110.5	92.0	158.5	140.7	145.1	136.9	---	---
35-44 years.....	83.7	77.5	126.2	111.1	110.3	106.1	---	---
45-54 years.....	54.6	54.8	100.6	84.8	83.8	83.8	---	---
55-64 years.....	35.7	31.8	59.8	57.8	55.6	53.4	---	---
65-74 years.....	18.7	19.1	40.6	32.6	33.9	36.3	---	---
75-84 years.....	11.5	16.1	18.9	24.8	27.6	33.5	---	---
85 years and over.....		*10.3	23.1	17.3	17.0	29.1	---	---
Black female								
All ages, age adjusted ⁴	11.7	11.8	15.0	13.9	13.7	12.9	---	---
All ages, crude.....	11.5	10.4	13.2	13.5	13.5	12.7	---	---
Under 1 year.....	2.6	13.8	10.7	10.5	12.8	13.1	---	---
1-4 years.....	2.6	*1.7	6.3	7.7	6.4	5.7	---	---
5-14 years.....	1.2	1.0	2.0	2.1	2.2	2.3	---	---
15-24 years.....	16.5	11.9	17.7	18.2	18.4	16.9	---	---
25-34 years.....	26.6	24.9	25.6	23.7	25.8	23.2	---	---
35-44 years.....	17.8	20.5	25.1	18.6	17.7	16.3	---	---
45-54 years.....	8.5	12.7	17.5	14.1	12.5	11.9	---	---
55-64 years.....	3.6	6.8	8.1	10.3	8.9	11.2	---	---
65-74 years.....	3.4	*3.3	7.7	9.7	8.6	6.6	---	---
75-84 years.....	4.0	*2.5	*5.7	10.0	6.7	9.2	---	---
85 years and over.....		*2.6	11.1	5.8	8.5	4.5	---	---

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 24. Death rates for suicide, according to race, sex, and age: United States, selected years 1950-83

(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Total ³	Number of deaths per 100,000 resident population							
All ages, age adjusted ⁴	11.0	10.6	11.8	11.7	11.4	11.5	11.6	11.7
All ages, crude.....	11.4	10.6	11.6	12.1	11.9	12.0	12.2	12.4
Under 1 year.....	-	...	...	...	...	...	...	...
1-4 years.....	-	...	...	...	...	...	0.3	0.4
5-14 years.....	0.2	0.3	0.3	0.4	0.4	0.5		
15-24 years.....	4.5	5.2	8.8	12.4	12.3	12.3	12.6	11.7
25-34 years.....	9.1	10.0	14.1	16.3	16.0	16.3	15.6	16.2
35-44 years.....	14.3	14.2	16.9	15.4	15.4	15.9	16.6	15.1
45-54 years.....	20.9	20.7	20.0	16.5	15.9	16.1	16.0	16.9
55-64 years.....	27.0	23.7	21.4	16.6	15.9	16.4	16.1	17.2
65-74 years.....	29.3	23.0	20.8	17.8	16.9	16.2	16.9	17.3
75-84 years.....	31.1	27.9	21.2	20.8	19.1	18.6	19.9	25.0
85 years and over.....	28.8	26.0	20.4	17.9	19.2	17.7	17.6	22.0
White male								
All ages, age adjusted ⁴	18.1	17.5	18.2	18.6	18.9	18.9	---	---
All ages, crude.....	19.0	17.6	18.0	19.6	19.9	20.0	---	---
Under 1 year.....	-	...	...	...	...	...	---	---
1-4 years.....	-	...	...	...	...	...	---	---
5-14 years.....	0.3	0.5	0.5	0.6	0.7	0.8	---	---
15-24 years.....	6.6	8.6	13.9	20.5	21.4	21.1	---	---
25-34 years.....	13.8	14.9	19.9	25.4	25.6	26.2	---	---
35-44 years.....	22.4	21.9	23.3	22.4	23.5	24.3	---	---
45-54 years.....	34.1	33.7	29.5	24.0	24.2	23.9	---	---
55-64 years.....	45.9	40.2	35.0	26.3	25.8	26.3	---	---
65-74 years.....	53.2	42.0	38.7	33.4	32.5	30.3	---	---
75-84 years.....	61.9	55.7	45.5	48.0	45.5	43.8	---	---
85 years and over.....	61.9	61.3	50.3	50.2	52.8	53.6	---	---
White female								
All ages, age adjusted ⁴	5.3	5.3	7.2	6.3	5.7	6.0	---	---
All ages, crude.....	5.5	5.3	7.1	6.5	5.9	6.2	---	---
Under 1 year.....	-	...	...	...	...	...	---	---
1-4 years.....	-	...	...	...	...	...	---	---
5-14 years.....	0.1	*0.1	0.1	0.3	0.2	0.3	---	---
15-24 years.....	2.7	2.3	4.2	4.9	4.6	4.9	---	---
25-34 years.....	5.2	5.8	9.0	7.8	7.5	7.7	---	---
35-44 years.....	8.2	8.1	13.0	10.1	9.1	9.5	---	---
45-54 years.....	10.5	10.9	13.5	11.6	10.2	11.1	---	---
55-64 years.....	10.7	10.9	12.3	9.9	9.1	9.4	---	---
65-74 years.....	10.6	8.8	9.6	7.8	7.0	7.3	---	---
75-84 years.....	8.4	9.2	7.2	6.7	5.7	5.5	---	---
85 years and over.....	8.9	6.1	6.1	5.0	5.8	3.7	---	---

See footnotes at end of table.

Table 24. Death rates for suicide, according to race, sex, and age: United States, selected years 1950-83--Continued
(Data are based on the National Vital Statistics System)

Race, sex, and age	Year							
	1950 ¹	1960 ¹	1970	1979	1980	1981	1982 ^{1,2}	1983 ^{1,2}
Black male								
Number of deaths per 100,000 resident population								
All ages, age adjusted ⁴	7.0	7.8	9.9	12.5	11.1	11.0	---	---
All ages, crude.....	6.3	6.4	8.0	11.5	10.3	10.2	---	---
Under 1 year.....	-	...	...	...	...	...	---	---
1-4 years.....	-	...	...	...	...	...	---	---
5-14 years.....	-	*0.1	*0.1	0.2	0.3	0.2	---	---
15-24 years.....	4.9	4.1	10.5	14.0	12.3	11.1	---	---
25-34 years.....	9.3	12.4	19.2	24.9	21.8	21.8	---	---
35-44 years.....	10.4	12.8	12.6	16.9	15.6	15.5	---	---
45-54 years.....	10.4	10.8	13.8	13.8	12.0	12.3	---	---
55-64 years.....	16.5	16.2	10.6	12.8	11.7	12.5	---	---
65-74 years.....	10.0	11.3	8.7	13.5	11.1	9.7	---	---
75-84 years.....	6.2	*6.6	*8.9	10.5	10.5	18.0	---	---
85 years and over.....	6.2	*6.9	10.3	15.4	18.9	12.7	---	---
Black female								
All ages, age adjusted ⁴	1.7	1.9	2.9	2.9	2.4	2.5	---	---
All ages, crude.....	1.5	1.6	2.6	2.8	2.2	2.4	---	---
Under 1 year.....	-	...	...	...	...	...	---	---
1-4 years.....	-	...	...	...	...	...	---	---
5-14 years.....	-	*0.0	*0.2	0.1	0.1	0.1	---	---
15-24 years.....	1.8	1.3	3.8	3.3	2.3	2.4	---	---
25-34 years.....	2.6	3.0	5.7	5.4	4.1	4.6	---	---
35-44 years.....	2.0	3.0	3.7	4.1	4.6	4.2	---	---
45-54 years.....	3.5	3.1	3.7	2.9	2.8	2.5	---	---
55-64 years.....	1.1	*3.0	*2.0	3.8	2.3	2.9	---	---
65-74 years.....	1.9	*2.3	*2.9	2.6	1.7	3.0	---	---
75-84 years.....	2.4	*1.3	*1.7	2.5	1.4	1.0	---	---
85 years and over.....	2.4	-	3.2	1.0	-	1.8	---	---

¹Includes deaths of nonresidents of the United States.

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.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Annual summary of births, deaths, marriages, and divorces, United States, 1983. Monthly Vital Statistics Report. Vol. 32-No. 13. DHHS Pub. No. (PHS) 84-1120. Public Health Service. Hyattsville, Md., Sept. 21, 1984; 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, No. 310. Washington. U.S. Government Printing Office, June 1965; 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.

Table 25. Maternal mortality rates for complications of pregnancy, childbirth, and the puerperium, according to race and age: United States, selected years 1950-81

(Data are based on the National Vital Statistics System)

Race and age	Year					
	1950 ¹	1960 ¹	1970	1979	1980	1981
Total ²						
Number of deaths per 100,000 live births						
All ages, age adjusted ³	73.8	32.2	21.5	10.2	9.6	8.9
All ages, crude.....	83.3	37.1	21.5	9.6	9.2	8.5
Under 20 years.....	70.7	22.7	18.9	6.2	7.6	7.6
20-24 years.....	47.6	20.7	13.0	7.5	5.8	6.5
25-29 years.....	63.5	29.8	17.0	7.6	7.7	6.6
30-34 years.....	107.7	50.3	31.6	12.8	13.6	11.4
35-39 years.....	191.2	92.8	71.0	33.3	31.3	22.6
40 years and over ⁴	335.8	147.0	118.6	82.6	65.9	65.3
White						
All ages, age adjusted ³	53.2	22.4	14.5	6.6	7.0	6.5
All ages, crude.....	61.1	26.0	14.4	6.4	6.7	6.3
Under 20 years.....	44.9	14.8	13.9	3.3	5.9	4.3
20-24 years.....	35.7	15.3	8.4	4.5	4.3	5.3
25-29 years.....	45.0	20.3	11.2	5.8	5.5	5.1
30-34 years.....	75.9	34.3	18.8	8.7	9.4	8.7
35-39 years.....	144.0	64.1	48.6	23.8	21.2	16.2
40 years and over ⁴	286.4	110.8	97.6	42.8	53.9	42.8
Black						
All ages, age adjusted ³	---	92.1	64.2	28.2	24.0	22.1
All ages, crude.....	---	103.6	59.8	25.1	21.5	20.4
Under 20 years.....	---	54.8	31.8	13.8	12.8	16.8
20-24 years.....	---	56.9	41.0	22.3	13.4	13.0
25-29 years.....	---	92.8	63.8	20.0	21.4	17.9
30-34 years.....	---	150.6	115.6	44.0	41.9	34.2
35-39 years.....	---	280.2	193.3	88.2	91.7	65.4
40 years and over ⁴	---	369.8	240.7	183.5	119.2	167.2

¹Includes deaths of nonresidents of the United States.

²Includes all other races not shown separately.

³Age adjusted by the direct method to the 1970 distribution of live births in the United States, using 6 age groups.

⁴Rates computed by relating deaths of women 40 years and over to live births to women 40-49 years.

NOTE: For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V.

SOURCES: National Center for Health Statistics: Vital Statistics of the United States, Vol. II, Mortality, Part A, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; Vital Statistics of the United States, Vol. I, Natality, 1950-81. Public Health Service. Washington. U.S. Government Printing Office; 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, No. 499. Washington. U.S. Government Printing Office, May 1973.

Table 26. Deaths for selected occupational diseases for males, according to race and age:
United States, selected years 1970-80

(Data are based on the National Vital Statistics System)

Race, age, and cause of death	Year						
	1970	1975	1976	1977	1978	1979	1980
TOTAL							
25 years and over							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	602	591	569	608	557	559	552
Coalworkers' pneumoconiosis.....	1,155	973	869	835	840	918	977
Asbestosis.....	25	43	53	54	64	86	96
Silicosis.....	351	243	211	191	162	220	202
25-64 years							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	308	280	267	265	254	246	241
Coalworkers' pneumoconiosis.....	294	188	170	136	116	130	136
Asbestosis.....	17	22	21	23	31	29	30
Silicosis.....	90	64	43	49	50	51	49
65 years and over							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	294	311	302	343	303	313	311
Coalworkers' pneumoconiosis.....	861	785	699	699	724	788	841
Asbestosis.....	8	21	32	31	33	57	66
Silicosis.....	261	179	168	142	112	169	153
WHITE							
25 years and over							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	554	541	527	563	514	508	507
Coalworkers' pneumoconiosis.....	1,132	960	854	817	830	900	955
Asbestosis.....	21	42	46	49	60	78	86
Silicosis.....	319	215	191	162	140	188	173
25-64 years							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	278	247	247	241	232	220	216
Coalworkers' pneumoconiosis.....	289	184	166	129	115	127	131
Asbestosis.....	13	21	17	20	27	23	27
Silicosis.....	78	52	35	34	38	34	34
65 years and over							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	276	294	280	322	282	288	291
Coalworkers' pneumoconiosis.....	843	776	688	688	715	773	824
Asbestosis.....	8	21	29	29	33	55	59
Silicosis.....	241	163	156	128	102	154	139

See note at end of table.

Table 26. Deaths for selected occupational diseases for males, according to race and age:
United States, selected years 1970-80--Continued

(Data are based on the National Vital Statistics System)

Race, age, and cause of death	Year						
	1970	1975	1976	1977	1978	1979	1980
ALL OTHER							
25 years and over							
	Number of deaths						
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	48	50	42	45	43	51	45
Coalworkers' pneumoconiosis.....	23	13	15	18	10	18	22
Asbestosis.....	4	1	7	5	4	8	10
Silicosis.....	32	28	20	29	22	32	29
25-64 years							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	30	33	20	24	22	26	25
Coalworkers' pneumoconiosis.....	5	4	4	7	1	3	5
Asbestosis.....	4	1	4	3	4	6	3
Silicosis.....	12	12	8	15	12	17	15
65 years and over							
Malignant neoplasm of peritoneum and pleura (mesothelioma).....	18	17	22	21	21	25	20
Coalworkers' pneumoconiosis.....	18	9	11	11	9	15	17
Asbestosis.....	0	0	3	2	0	2	7
Silicosis.....	20	16	12	14	10	15	14

NOTE: Selection of occupational diseases based on definitions in D. Rutstein et al.: Sentinel health events (occupational): A basis for physician recognition and public health surveillance, Am. J. Public Health 73(9): 1054-1062, Sept. 1983. For data years shown, the code numbers for cause of death are based on the then current International Classification of Diseases, which are described in Appendix II, tables IV and V. Changes in number of deaths from 1978 to 1979 may be affected by changes in coding from the Eighth Revision to the Ninth Revision.

SOURCES: Data computed by the National Institute for Occupational Safety and Health from data compiled by the Division of Vital Statistics, National Center for Health Statistics.

Table 27. Infants weighing 2,500 grams or less at birth, according to race, geographic division, and State: United States, average annual 1969-71, 1974-76, and 1979-81

(Data are based on the National Vital Statistics System)

Geographic division and State	Total ¹			White			Black		
	1969-71	1974-76	1979-81 ²	1969-71	1974-76	1979-81 ²	1969-71	1974-76	1979-81 ²
Infants weighing 2,500 grams or less at birth per 100 total live births									
United States.....	7.9	7.4	6.9	6.8	6.2	5.7	13.8	13.1	12.5
New England.....	7.5	6.7	6.2	7.0	6.3	5.8	14.3	12.1	11.8
Maine.....	7.0	6.1	5.7	6.9	6.1	5.7	*7.4	*7.0	*5.0
New Hampshire.....	7.0	6.5	5.4	7.0	6.5	5.4	*9.4	*8.5	*6.2
Vermont.....	7.4	6.4	6.1	7.4	6.4	6.1	*3.1	*10.3	*9.2
Massachusetts.....	7.4	6.6	6.0	7.0	6.3	5.6	13.6	10.9	11.0
Rhode Island.....	7.6	6.7	6.3	7.0	6.4	5.8	*18.4	*12.2	*11.4
Connecticut.....	7.9	7.1	6.9	7.1	6.3	6.0	14.5	13.4	13.1
Middle Atlantic.....	8.3	7.8	7.1	7.1	6.5	5.9	14.8	13.7	12.8
New York.....	8.6	8.0	7.5	7.3	6.7	6.1	14.5	13.4	12.5
New Jersey.....	8.3	7.8	7.2	6.9	6.4	5.7	14.7	13.8	13.1
Pennsylvania.....	7.9	7.3	6.6	6.9	6.3	5.6	15.3	14.2	13.4
East North Central.....	7.6	7.2	6.8	6.6	6.0	5.5	14.1	13.5	13.3
Ohio.....	7.6	7.2	6.7	6.7	6.3	5.7	13.9	13.3	13.0
Indiana.....	7.0	6.5	6.4	6.5	5.9	5.6	12.4	11.8	12.2
Illinois.....	8.2	7.7	7.4	6.6	6.0	5.5	14.4	13.9	13.9
Michigan.....	7.9	7.4	6.9	6.6	6.2	5.7	14.5	13.6	13.2
Wisconsin.....	6.5	5.9	5.4	6.1	5.5	4.8	12.6	12.4	12.7
West North Central.....	6.7	6.3	5.7	6.2	5.7	5.2	13.6	13.3	12.4
Minnesota.....	6.2	5.5	5.2	6.1	5.4	4.9	*13.2	*12.8	*11.5
Iowa.....	6.0	5.7	5.0	5.9	5.6	4.8	*11.6	*12.0	*11.1
Missouri.....	7.7	7.3	6.7	6.6	6.1	5.6	13.6	13.7	12.7
North Dakota.....	5.9	5.3	4.8	5.8	5.1	4.7	*13.0	*11.1	*7.6
South Dakota.....	5.8	6.0	5.2	5.7	5.7	4.9	*10.1	*12.4	*13.6
Nebraska.....	6.7	6.0	5.5	6.3	5.7	5.2	*14.5	*12.1	*12.6
Kansas.....	6.9	6.4	6.1	6.4	5.9	5.6	13.7	13.0	12.1
South Atlantic.....	8.8	8.3	8.0	7.0	6.4	6.1	13.6	13.0	12.5
Delaware.....	8.2	7.8	7.7	6.4	6.2	5.6	15.0	13.4	14.5
Maryland.....	8.5	8.0	7.9	6.8	6.2	5.9	13.9	13.1	12.4
District of Columbia.....	12.9	12.7	12.9	7.8	*6.8	*6.0	13.8	13.8	14.3
Virginia.....	8.4	7.6	7.4	7.0	6.2	5.9	13.6	12.5	12.0
West Virginia.....	7.9	7.3	6.8	7.7	7.2	6.6	*13.3	*11.4	*12.4
North Carolina.....	9.0	8.5	8.0	7.1	6.6	6.1	14.0	13.1	12.3
South Carolina.....	9.5	9.0	8.8	7.3	6.4	6.1	13.5	13.1	12.7
Georgia.....	9.0	8.9	8.6	6.9	6.6	6.2	13.6	13.1	12.6
Florida.....	8.5	8.0	7.6	6.9	6.3	6.0	13.2	12.8	12.1
East South Central.....	8.6	8.1	7.8	7.1	6.5	6.2	12.8	12.4	12.2
Kentucky.....	7.9	7.2	6.9	7.4	6.7	6.4	13.2	12.2	11.9
Tennessee.....	8.4	7.9	8.0	7.0	6.5	6.4	13.9	13.1	13.3
Alabama.....	8.9	8.4	7.9	7.0	6.4	5.7	12.6	12.2	11.9
Mississippi.....	9.2	9.1	8.7	6.6	6.3	5.7	12.1	12.3	11.9

See footnotes at end of table.

Table 27. Infants weighing 2,500 grams or less at birth, according to race, geographic division, and State: United States, average annual 1969-71, 1974-76, and 1979-81--Continued

(Data are based on the National Vital Statistics System)

Geographic division and State	Total ¹			White			Black		
	1969-71	1974-76	1979-81 ²	1969-71	1974-76	1979-81 ²	1969-71	1974-76	1979-81 ²
Infants weighing 2,500 grams or less at birth per 100 total live births									
West South Central.....	8.3	7.9	7.3	6.9	6.6	6.0	13.8	13.3	12.5
Arkansas.....	8.1	8.1	7.4	6.8	6.6	5.8	12.3	12.7	12.1
Louisiana.....	9.3	9.1	8.6	6.7	6.5	6.0	13.8	13.0	12.7
Oklahoma.....	7.7	7.6	6.6	7.0	7.0	6.1	14.9	14.1	11.8
Texas.....	8.0	7.6	7.0	7.0	6.6	6.0	14.1	13.5	12.6
Mountain.....	8.1	7.2	6.6	8.0	7.0	6.4	14.3	13.3	12.2
Montana.....	7.6	6.9	5.6	7.6	6.7	5.5	*14.0	*11.0	*7.4
Idaho.....	6.7	5.8	5.2	6.7	5.8	5.2	*6.5	*4.3	*7.7
Wyoming.....	8.9	8.9	7.1	8.8	8.7	7.0	*18.0	*14.1	*14.8
Colorado.....	9.7	8.9	8.1	9.4	8.7	7.8	*15.4	14.7	13.6
New Mexico.....	9.3	8.5	7.7	9.3	8.5	7.7	*14.4	*12.5	*11.8
Arizona.....	7.3	6.5	6.1	7.0	6.3	5.9	*12.8	*11.6	11.3
Utah.....	6.5	5.4	5.3	6.4	5.4	5.3	*12.7	*16.6	*9.7
Nevada.....	9.2	7.7	6.9	8.5	7.0	6.3	*15.3	*14.0	*12.1
Pacific.....	6.8	6.2	5.8	6.2	5.5	5.1	12.4	11.5	11.1
Washington.....	6.6	5.8	5.2	6.3	5.5	4.9	12.3	10.3	10.0
Oregon.....	6.1	5.6	5.0	5.9	5.4	4.8	*14.3	*12.1	*10.5
California.....	6.8	6.2	5.9	6.2	5.6	5.2	12.4	11.6	11.2
Alaska.....	6.4	5.3	5.3	6.2	4.9	4.9	*10.1	*9.7	*6.9
Hawaii.....	8.4	7.7	7.0	7.2	5.9	5.8	*10.2	*8.0	*9.4

¹Includes all other races not shown separately.

²For 1979 and later, data are for infants weighing less than 2,500 grams at birth.

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

Table 28. Live births, according to race and selected characteristics: United States, selected years 1970-81

(Data are based on the National Vital Statistics System)

Race and selected characteristic	Year							
	1970	1975	1976	1977	1978	1979	1980	1981
TOTAL ¹								
Birth weight ²	Percent of live births							
2,500 grams or less.....	7.94	7.39	7.26	7.07	7.11	6.94	6.84	6.81
1,500 grams or less.....	1.17	1.16	1.15	1.13	1.17	1.15	1.15	1.16
Education of mother								
Less than 12 years.....	30.8	28.6	27.4	26.2	26.1	24.4	23.7	22.9
16 years or more.....	8.6	11.4	12.1	12.6	13.1	13.7	14.0	14.8
Prenatal care began								
1st trimester.....	68.0	72.4	73.5	74.1	74.9	75.9	76.3	76.3
3rd trimester or no prenatal care.....	7.9	6.0	5.7	5.6	5.4	5.1	5.1	5.2
WHITE								
Birth weight ²								
2,500 grams or less.....	6.84	6.26	6.13	5.93	5.94	5.80	5.70	5.67
1,500 grams or less.....	0.95	0.92	0.91	0.89	0.91	0.90	0.90	0.90
Education of mother								
Less than 12 years.....	27.0	25.0	23.9	22.9	23.4	21.3	20.7	19.9
16 years or more.....	9.5	12.7	13.5	14.0	14.4	15.2	15.6	16.4
Prenatal care began								
1st trimester.....	72.4	75.9	76.8	77.3	78.2	79.1	79.3	79.4
3rd trimester or no prenatal care.....	6.2	5.0	4.8	4.7	4.5	4.3	4.3	4.3
BLACK								
Birth weight ²								
2,500 grams or less.....	13.86	13.09	12.97	12.79	12.85	12.55	12.49	12.53
1,500 grams or less.....	2.40	2.37	2.40	2.38	2.43	2.37	2.44	2.47
Education of mother								
Less than 12 years.....	51.0	45.1	43.3	41.0	38.5	37.7	36.2	35.4
16 years or more.....	2.8	4.4	4.8	5.2	5.7	5.9	6.3	6.6
Prenatal care began								
1st trimester.....	44.4	55.8	57.7	59.0	60.2	61.6	62.7	62.4
3rd trimester or no prenatal care.....	16.6	10.5	9.9	9.6	9.3	8.9	8.8	9.1

¹Includes all other races not shown separately.²Because some of the birth-weight figures are less than 1 percent, all figures for this category were carried to 2 decimal places. For 1979 and later, data are for infants weighing less than 2,500 grams at birth.

NOTE: Figures for 1970 are based on a 50-percent sample; for 1975-81, 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: *Vital Statistics of the United States*, Vol. I, Natality, for data years 1970-78. Public Health Service. Washington. U.S. Government Printing Office; for 1979-81, Public Health Service. To be published.

Table 29. Vaccination status of children 1-4 years of age, according to race, standard metropolitan statistical area (SMSA) component, and type of vaccination: United States, 1970, 1976, and 1983

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

Vaccination and year	Total	Race		Inside SMSA		Outside SMSA
		White	All other	Central city	Remaining areas	
All respondents		Percent of population				
Measles:						
1970.....	57.2	60.4	41.9	55.2	61.7	54.3
1976.....	65.9	68.3	54.8	62.5	67.2	67.3
1983.....	64.9	66.8	57.2	60.4	66.3	66.7
Rubella:						
1970.....	37.2	38.3	31.8	38.3	39.2	34.3
1976.....	61.7	63.8	51.5	59.5	63.5	61.5
1983.....	64.0	66.3	54.7	59.5	65.2	66.0
DTP: ^{1,2}						
1970.....	76.1	79.7	58.8	68.9	80.7	77.1
1976.....	71.4	75.3	53.2	64.1	75.7	72.9
1983.....	65.7	70.1	47.7	55.4	69.4	69.4
Polio: ²						
1970.....	77.5	80.5	62.7	75.2	81.5	75.1
1976.....	61.6	66.2	39.9	53.8	65.3	63.9
1983.....	57.0	61.9	36.7	47.7	60.3	60.3
Mumps:						
1970.....	(3)	(3)	(3)	(3)	(3)	(3)
1976.....	48.3	50.3	38.7	45.6	50.7	47.9
1983.....	59.5	61.8	50.0	52.6	60.2	63.6
Respondents consulting vaccination records, 1983 ⁴						
Measles.....	77.3	77.2	77.8	75.5	78.7	76.8
Rubella.....	76.4	76.8	73.0	74.2	77.5	76.3
DTP ^{1,2}	86.0	87.5	74.2	81.8	88.0	86.1
Polio ²	76.5	78.5	61.0	73.5	78.6	76.0
Mumps.....	74.0	75.3	67.1	68.6	75.5	75.9

¹Diphtheria-tetanus-pertussis.

²3 doses or more.

³Mumps vaccination first reported in 1973.

⁴These data are based on 39 percent of white respondents and 20 percent of all other respondents who consulted records for some or all vaccination questions. One month prior to interview all sampled households were asked to check vaccination records such as those from a private physician, the health department, or military.

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, that is, polio and DTP.

SOURCE: Division of Immunization, Centers for Disease Control: Unpublished data from the United States Immunization Survey.

Table 30. Selected notifiable disease rates, according to disease: United States, selected years 1950-82

(Data are based on reporting by State health departments)

Disease	Year							
	1950	1960	1970	1975	1979	1980	1981	1982
	Number of cases per 100,000 population							
Chickenpox.....	(1)	(1)	(1)	78.11	102.93	96.69	100.48	94.37
Diphtheria.....	3.83	0.51	0.21	0.14	0.03	0.00	0.00	0.00
Hepatitis A.....	(1)	23.15	27.87	16.82	13.82	12.84	11.25	10.11
Hepatitis B.....	(1)	4.08	6.30	7.02	8.39	9.22	9.58	9.58
Measles (rubeola).....	211.01	245.42	23.23	11.44	6.18	5.96	1.36	0.74
Mumps.....	(1)	(1)	55.55	27.99	6.55	3.86	2.20	2.46
Pertussis (whooping cough).....	79.82	8.23	2.08	0.82	0.74	0.76	0.54	0.82
Poliomyelitis, total.....	22.02	1.77	0.02	0.00	0.02	0.00	0.00	0.00
Paralytic.....	(1)	1.40	0.02	0.00	0.01	0.00	0.00	0.00
Rubella (German measles).....	(1)	(1)	27.75	7.81	5.36	1.72	0.91	1.00
Salmonellosis, excluding typhoid fever.....	(1)	3.85	10.84	10.61	15.06	14.88	17.44	17.68
Shigellosis.....	15.45	6.94	6.79	7.78	9.15	8.41	8.66	7.83
Tuberculosis ²	80.50	30.83	18.22	15.95	12.57	12.25	11.94	11.02
Venereal diseases: ³								
Syphilis ⁴	146.02	68.78	45.46	38.00	30.68	30.38	31.98	32.88
Primary and secondary.....	16.73	9.06	10.94	12.09	11.38	12.01	13.73	14.62
Early latent.....	39.71	10.11	8.11	12.57	9.40	8.96	9.24	9.50
Late and late latent.....	76.22	45.91	25.05	12.81	9.70	9.26	8.86	8.60
Congenital.....	8.97	2.48	0.97	0.43	0.20	0.12	0.13	0.10
Gonorrhea.....	192.45	145.33	298.52	472.91	459.44	443.27	435.24	417.91
Chancroid.....	3.34	0.94	0.70	0.33	0.38	0.35	0.37	0.61
Granuloma inguinale.....	1.19	0.17	0.06	0.03	0.03	0.02	0.03	0.01
Lymphogranuloma venereum.....	0.95	0.47	0.30	0.17	0.11	0.09	0.12	0.10

¹Not reported nationally.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.

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, 1982, Morbidity and Mortality Weekly Report 31(54). Public Health Service, Atlanta, Ga., Dec. 1983; Venereal Disease Control Division, Center for Prevention Services, Centers for Disease Control: Selected data.

Table 31. Self-assessment of health and limitation of activity, according to selected characteristics: United States, 1976 and 1981

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

Selected characteristic	Self-assessment of health as fair or poor		With limitation of activity							
			Total		Limited but not in major activity		Limited in amount or kind of major activity		Unable to carry on major activity	
	1976	1981	1976	1981	1976	1981	1976	1981	1976	1981
	Percent of population									
Total ^{1,2,3}	12.1	11.8	13.9	13.7	3.5	3.3	7.0	6.8	3.4	3.6
Age										
Under 17 years.....	4.3	4.0	3.7	3.8	1.8	1.8	1.7	1.8	0.2	0.2
Under 6 years.....	4.5	4.2	2.5	2.2	---	---	2.1	1.8	0.5	0.4
6-16 years.....	4.2	3.8	4.3	4.6	2.6	2.7	1.6	1.8	0.1	0.1
17-44 years.....	8.3	8.3	8.9	8.4	3.4	3.0	4.4	4.2	1.1	1.2
45-64 years.....	22.2	22.0	24.3	23.9	5.2	4.8	13.1	12.4	5.9	6.8
65 years and over.....	31.3	30.1	45.4	45.7	6.0	6.6	21.8	21.7	17.6	17.5
Sex ¹										
Male.....	11.4	11.4	14.6	14.6	3.5	3.3	5.5	5.4	5.6	6.1
Female.....	12.8	12.1	13.3	12.9	3.5	3.4	8.2	7.9	1.6	1.6
Race ^{1,4}										
White.....	11.1	10.8	13.6	13.4	3.6	3.4	6.9	6.6	3.2	3.4
Black.....	19.9	19.7	16.9	16.7	2.8	2.7	8.5	8.1	5.5	5.9
Family income ^{1,5}										
Less than \$7,000.....	22.2	22.5	22.5	22.7	4.0	4.0	11.5	11.5	6.9	7.3
\$7,000-\$9,999.....	17.2	18.3	17.0	18.4	3.4	3.4	8.5	8.7	5.2	6.2
\$10,000-\$14,999.....	13.8	12.4	15.0	14.9	3.5	3.4	7.4	7.5	4.0	4.0
\$15,000-\$24,999.....	10.5	9.6	12.8	12.0	3.3	3.4	6.8	5.9	2.7	2.7
\$25,000 or more.....	7.3	6.5	10.4	9.8	3.5	3.1	5.0	4.7	2.0	2.0
Geographic region ¹										
Northeast.....	10.4	10.3	12.9	12.8	3.3	3.2	6.4	6.4	3.1	3.1
North Central.....	11.0	10.9	13.5	13.1	3.7	3.4	7.1	6.5	2.8	3.2
South.....	14.9	14.3	14.3	14.4	3.0	3.1	7.3	7.1	4.1	4.3
West.....	11.0	10.5	15.0	14.3	4.2	3.9	7.2	7.1	3.6	3.4
Location of residence ¹										
Within SMSA.....	11.1	11.0	13.2	13.2	3.4	3.4	6.7	6.6	3.2	3.3
Outside SMSA.....	14.2	13.5	15.3	14.6	3.7	3.3	7.7	7.2	3.9	4.1

¹Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

²Includes all other races not shown separately.

³Includes unknown family income.

⁴In 1976, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1981, race was determined by asking the household respondent.

⁵Family income categories for 1981. Adjusting for inflation, corresponding income categories in 1976 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

NOTE: Data for 1982 are not included because the effect of major questionnaire changes in the 1982 National Health Interview Survey is currently being evaluated.

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

Table 32. Disability days associated with acute conditions and incidence of acute conditions, according to age: United States, selected years 1970-81

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

Disability days, incidence of acute conditions, and age	Year ¹										
	1970	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981
Restricted-activity days Number per person											
All ages ²	8.5	9.3	9.2	9.3	9.7	9.4	9.4	9.8	9.5	9.8	9.9
Under 17 years.....	8.6	9.4	9.3	9.9	9.4	9.7	10.0	10.0	9.8	10.1	9.8
Under 6 years.....	9.8	11.3	10.8	11.0	10.9	11.2	12.2	11.7	12.1	11.7	11.1
6-16 years.....	8.0	8.5	8.6	9.3	8.7	9.0	9.1	9.3	8.7	9.4	9.1
17-44 years.....	8.0	8.8	8.9	8.9	9.4	8.8	9.1	9.5	9.4	9.9	9.9
45-64 years.....	8.7	9.3	8.6	8.2	9.8	9.1	8.6	8.8	8.2	8.7	9.2
65 years and over.....	9.8	10.9	10.8	10.7	12.1	11.6	10.1	12.1	11.6	10.7	11.4
Bed-disability days ³											
All ages ²	3.8	4.1	4.0	4.0	4.2	4.2	4.2	4.5	4.2	4.3	4.4
Under 17 years.....	4.0	4.3	4.1	4.5	4.0	4.6	4.8	5.0	4.7	4.9	4.7
Under 6 years.....	4.2	4.7	4.3	5.0	4.3	5.0	5.2	5.7	5.8	5.6	5.3
6-16 years.....	3.9	4.1	4.0	4.3	3.9	4.5	4.6	4.7	4.1	4.5	4.4
17-44 years.....	3.5	3.9	4.0	3.8	4.2	4.0	3.9	4.3	4.0	4.2	4.2
45-64 years.....	3.8	3.6	3.6	3.5	4.0	3.8	3.7	3.6	3.5	3.4	3.9
65 years and over.....	4.0	4.7	4.3	4.1	5.3	4.7	4.5	5.1	5.0	4.5	4.9
Incidence of acute conditions Number per 100 persons											
All ages ²	204.1	220.9	⁴ 199.6	⁴ 174.2	⁴ 199.1	218.4	222.6	224.2	222.4	226.2	226.6
Under 17 years.....	290.3	307.9	280.1	254.8	282.6	305.7	315.0	310.6	311.4	317.3	321.9
Under 6 years.....	346.6	366.1	343.1	303.4	346.9	381.2	388.3	381.6	397.3	383.4	396.3
6-16 years.....	263.1	280.4	250.8	232.2	253.1	271.2	282.4	278.7	271.7	285.4	284.2
17-44 years.....	193.2	215.1	196.0	170.2	194.7	215.3	216.1	222.3	221.8	224.0	221.7
45-64 years.....	132.8	144.0	124.6	98.3	123.4	136.7	142.2	143.0	131.9	139.0	135.3
65 years and over.....	103.0	109.2	98.1	75.7	91.3	105.5	102.4	111.0	115.5	111.6	116.5

¹Data are collected for each calendar year. However, they are reported for the period from July of the previous year through June of the listed year (e.g. 1981 data are for July 1980 through June 1981) so that trends in acute conditions that peak during the late fall and winter months are more clearly shown.

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

³A subset of restricted-activity days.

⁴The estimates for 1973-75 are artificially low because of modifications in the questionnaire design for the 1973 and 1974 surveys. These modifications affect the entire period for the 1974 estimate, but only half the period for the 1973 and 1975 estimates (see footnote 1).

NOTE: Data for 1982 are not included because the effect of major questionnaire changes in the 1982 National Health Interview Survey is currently being evaluated.

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

Table 33. Cigarette smoking status of persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1980, and 1983

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

Sex, race, ¹ and age	Smoking status							
	Current smoker ²				Former smoker			
	1965	1976	1980 ³	1983 ⁴	1965	1976	1980 ³	1983 ⁴
MALE								
Total ^{5,6}								
Percent of persons								
All ages, 20 years and over ⁷	52.1	41.6	37.9	34.8	20.3	29.6	30.5	31.8
20-24 years.....	59.2	45.9	39.7	37.5	9.0	12.2	12.1	10.8
25-34 years.....	60.7	48.5	43.1	38.0	14.7	18.3	20.6	20.0
35-44 years.....	58.2	47.6	42.6	40.1	20.6	27.3	27.6	29.3
45-64 years.....	51.9	41.3	40.8	35.6	24.1	37.1	36.9	39.5
65 years and over.....	28.5	23.0	17.9	20.8	28.1	44.4	47.4	49.7
White								
All ages, 20 years and over ⁷	51.3	41.0	37.1	---	21.2	30.7	31.9	---
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 years.....	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 ⁷	59.6	50.1	44.9	---	12.6	20.2	20.6	---
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	---
35-44 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 ^{5,6}								
All ages, 20 years and over ⁷	34.2	32.5	29.8	29.5	8.2	13.9	15.7	16.1
20-24 years.....	41.9	34.2	32.7	36.1	7.3	10.4	11.0	11.5
25-34 years.....	43.7	37.5	31.6	32.3	9.9	12.9	14.4	13.1
35-44 years.....	43.7	38.2	34.9	33.6	9.6	15.8	18.9	17.0
45-64 years.....	32.0	34.8	30.8	30.5	8.6	15.9	17.1	18.1
65 years and over.....	9.6	12.8	16.8	13.5	4.5	11.7	14.2	18.0
White								
All ages, 20 years and over ⁷	34.5	32.4	30.0	---	8.5	14.6	16.3	---
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.....	32.7	34.7	30.6	---	8.8	16.4	17.4	---
65 years and over.....	9.8	13.2	17.4	---	4.5	11.5	14.3	---

See footnotes at end of table.

Table 33. Cigarette smoking status of persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1980, and 1983--Continued

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

Sex, race, ¹ and age	Smoking status							
	Current smoker ²				Former smoker			
	1965	1976	1980 ³	1983 ⁴	1965	1976	1980 ³	1983 ⁴
FEMALE--Continued								
Black								
Percent of persons								
All ages, 20 years and over ⁷	32.7	34.7	30.6	---	5.9	10.2	11.8	---
20-24 years.....	44.2	34.9	32.3	---	2.5	5.0	*2.2	---
25-34 years.....	47.8	42.5	34.2	---	6.7	8.9	11.6	---
35-44 years.....	42.8	41.3	36.5	---	7.0	9.6	12.5	---
45-64 years.....	25.7	38.1	34.3	---	6.6	11.9	14.1	---
65 years and over.....	7.1	9.2	*9.4	---	4.5	13.3	14.1	---

¹In 1965 and 1976, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980 and 1983, race was determined by asking the household respondent.

²A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers.

³Final estimates. Based on data for the last 6 months of 1980.

⁴Provisional estimates based on data from the first 6 months of 1983. Computed by the Division of Epidemiology and Health Promotion.

⁵Base of percent excludes persons with unknown smoking status.

⁶Includes all other races not shown separately.

⁷Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 5 age groups.

NOTE: Data in this table should not be compared with data in Health, United States, 1981 or Health, United States, 1982. The 1980 data in the 1981 edition were preliminary estimates, and the data in the 1982 edition were final estimates but did not include age-adjusted data.

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

Table 34. Cigarettes smoked per day by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1980, and 1983

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

Sex, race, ¹ and age	Cigarettes smoked per day											
	Less than 15				15-24				25 or more			
	1965	1976	1980 ²	1983 ³	1965	1976	1980 ²	1983 ³	1965	1976	1980 ²	1983 ³
MALE												
Total ^{4,5}												
All ages, 20 years and over ⁷ ..	30.1	24.9	24.2	23.5	45.7	44.4	41.7	42.9	24.1	30.7	34.2	33.6
20-24 years.....	34.9	31.6	32.6	28.6	49.7	49.9	47.6	54.1	15.4	18.5	19.8	17.3
25-34 years.....	25.7	25.5	23.1	27.6	50.0	45.8	46.8	42.7	24.3	28.7	30.1	29.6
35-44 years.....	23.7	19.6	17.5	16.9	44.8	41.2	41.9	41.0	31.5	39.2	40.7	42.1
45-64 years.....	26.7	18.5	21.5	16.8	45.3	44.1	35.9	40.0	28.0	37.4	42.6	43.2
65 years and over.....	47.1	39.1	32.4	36.3	39.0	42.7	42.5	42.7	13.8	18.2	25.2	21.0
White												
All ages, 20 years and over ⁷	27.7	22.3	20.0	---	46.3	44.4	42.7	---	26.0	33.3	37.3	---
20-24 years.....	32.3	27.5	27.5	---	50.8	52.8	50.5	---	16.9	19.7	22.1	---
25-34 years.....	22.8	22.1	18.9	---	51.1	46.5	47.6	---	26.1	31.4	33.6	---
35-44 years.....	21.3	17.2	13.4	---	44.8	40.4	41.9	---	33.9	42.5	44.8	---
45-64 years.....	24.6	16.2	17.3	---	45.4	43.3	36.9	---	30.0	40.4	45.8	---
65 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 ⁷	49.8	43.7	48.4	---	41.6	45.6	37.9	---	8.6	10.8	13.8	---
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	15.2	---
65 years and over.....	64.9	53.0	*42.1	---	31.9	47.0	*37.4	---	*3.2	*-	*20.9	---
FEMALE												
Total ^{4,5}												
All ages, 20 years and over ⁷ ..	46.2	37.6	34.7	33.8	40.8	43.4	42.0	45.6	13.0	19.0	23.2	20.6
20-24 years.....	48.4	43.1	43.5	40.4	41.9	42.4	40.6	45.8	9.7	14.5	15.9	13.8
25-34 years.....	41.4	34.3	33.7	34.3	43.1	45.2	42.1	43.9	15.5	20.5	24.2	21.8
35-44 years.....	39.1	33.8	27.6	27.2	43.7	44.4	39.7	46.5	17.1	21.8	32.7	26.3
45-64 years.....	44.4	34.3	29.6	30.4	42.0	44.2	45.5	46.6	13.6	21.5	24.9	23.0
65 years and over.....	62.6	49.3	48.7	42.9	31.0	38.9	38.2	44.5	6.4	11.8	13.1	12.6
White												
All ages, 20 years and over ⁷	43.7	34.3	30.7	---	42.4	44.9	44.1	---	13.9	20.9	25.2	---
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 34. Cigarettes smoked per day by persons 20 years of age and over, according to sex, race, and age: United States, 1965, 1976, 1980, and 1983--Continued

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

Sex, race, ¹ and age	Cigarettes smoked per day											
	Less than 15				15-24				25 or more			
	1965	1976	1980 ²	1983 ³	1965	1976	1980 ²	1983 ³	1965	1976	1980 ²	1983 ³
FEMALE--Continued												
Black												
Percent of current smokers ⁶												
All ages, 20 years and over ⁷	70.3	64.5	61.1	---	25.0	30.0	30.4	---	4.6	5.6	8.6	---
20-24 years.....	73.4	65.7	80.0	---	22.1	31.3	*20.0	---	*4.5	*3.0	*-	---
25-34 years.....	66.2	58.8	59.9	---	25.1	33.6	22.9	---	8.7	*7.7	17.4	---
35-44 years.....	63.4	60.4	57.2	---	30.4	38.1	34.3	---	*6.2	*1.4	*8.5	---
45-64 years.....	69.4	53.2	56.1	---	26.9	36.7	33.3	---	*3.6	10.1	*10.7	---
65 years and over.....	83.2	100.0	*62.7	---	*16.8	*-	*37.3	---	*-	*-	*-	---

¹In 1965 and 1976, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1980 and 1983, race was determined by asking the household respondent.

²Final estimates. Based on data for the last 6 months of 1980.

³Provisional estimates based on data from the first 6 months of 1983. Computed by the Division of Epidemiology and Health Promotion.

⁴Base of percent excludes unknown amount smoked.

⁵Includes all other races not shown separately.

⁶A current smoker is a person who has smoked at least 100 cigarettes and who now smokes; includes occasional smokers.

⁷Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 5 age groups.

NOTE: Data in this table should not be compared with data in Health, United States, 1981 or Health, United States, 1982. The 1980 data in the 1981 edition were preliminary estimates, and the data in the 1982 edition were final estimates but did not include age-adjusted data.

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

Table 35. Use of marijuana, cigarettes, and alcohol in the past month by youths 12-17 years of age, according to age and sex: United States, selected years 1972-82

(Data are based on household interviews of a sample of the population 12 years of age and over in the coterminous United States)

Substance, age, and sex	Year					
	1972	1974	1976	1977	1979	1982
MARIJUANA						
Percent of population						
Total.....	7	12	12	17	17	12
Age						
12-13 years.....	1	2	3	4	4	2
14-15 years.....	6	12	13	16	17	8
16-17 years.....	16	20	21	30	28	23
Sex						
Male.....	9	12	14	20	19	13
Female.....	6	11	11	13	14	10
CIGARETTES						
Total.....	(1)	25	23	22	(1)	15
Age						
12-13 years.....	(1)	13	11	10	(1)	3
14-15 years.....	(1)	25	20	22	(1)	10
16-17 years.....	(1)	38	39	35	(1)	30
Sex						
Male.....	(1)	27	21	23	(1)	16
Female.....	(1)	24	26	22	(1)	13
ALCOHOL ²						
Total.....	(1)	34	32	31	37	27
Age						
12-13 years.....	(1)	19	19	13	20	10
14-15 years.....	(1)	32	31	28	36	23
16-17 years.....	(1)	51	47	52	55	45
Sex						
Male.....	(1)	39	36	37	39	27
Female.....	(1)	29	29	25	36	27

¹Data not comparable because definitions differ.

²In 1979 and 1982, private answer sheets were used for alcohol questions; in earlier years, respondents answered questions aloud.

SOURCES: National Institute on Drug Abuse: National Survey on Drug Abuse 1979, by P. M. Fishburne, H. I. Abelson, and I. Crisin. DHHS Pub. No. (ADM) 80-976. Alcohol, Drug Abuse, and Mental Health Administration. Washington. U.S. Government Printing Office; National Survey on Drug Abuse 1982, by J. D. Miller et al. DHHS Pub. No. (ADM) 83-1263. Alcohol, Drug Abuse, and Mental Health Administration. Washington. U.S. Government Printing Office, 1983; Unpublished data.

Table 36. 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 alcohol consumption	Year						
	1971	1972	1973	1974	1975	1976	1979
Total	Percent of persons						
Abstain.....	36	36	34	36	36	33	33
Light.....	34	32	29	28	31	38	34
Moderate.....	20	23	23	28	21	19	24
Heavy.....	10	10	14	11	12	10	9
Male							
Abstain.....	30	28	25	24	27	26	25
Light.....	29	29	24	24	27	33	29
Moderate.....	26	28	29	34	26	24	31
Heavy.....	15	15	22	18	20	18	14
Female							
Abstain.....	42	44	42	42	45	39	40
Light.....	40	34	35	32	35	44	38
Moderate.....	13	18	17	21	15	15	18
Heavy.....	5	4	6	5	4	3	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 37. Persons 25-74 years of age with elevated blood pressure, according to race, sex, and age:
United States, 1960-62, 1971-75, and 1976-80

(Data are based on physical examinations of a sample of the civilian noninstitutionalized population)

Sex and age	Race and period								
	Total ¹			White			Black		
	1960-62	1971-75	1976-80	1960-62	1971-75	1976-80	1960-62	1971-75	1976-80
Both sexes		Percent of population							
All ages, 25-74 years ²	17.8	18.2	14.8	16.1	16.4	13.8	32.9	33.6	24.6
25-34 years.....	4.0	5.7	5.5	3.0	4.8	5.3	10.1	*14.1	7.6
35-44 years.....	10.9	12.5	9.9	8.9	10.2	8.5	26.1	*29.1	19.6
45-54 years.....	18.6	20.1	17.8	16.4	18.1	16.5	36.5	38.3	30.7
55-64 years.....	27.8	28.6	21.7	26.5	26.4	20.2	42.9	51.5	37.6
65-74 years.....	41.3	34.2	26.6	39.1	33.1	25.5	68.8	45.0	36.5
Male									
All ages, 25-74 years ²	16.5	20.1	16.9	14.8	18.5	16.3	32.2	36.5	23.6
25-34 years.....	4.9	8.2	8.7	3.8	7.5	8.4	12.5	*16.4	11.7
35-44 years.....	13.5	16.3	11.8	11.8	14.0	10.6	26.5	*36.3	22.3
45-54 years.....	19.0	23.9	20.9	17.3	22.6	21.2	30.9	*36.7	23.0
55-64 years.....	23.4	28.0	23.7	21.5	25.2	22.3	44.6	58.6	39.2
65-74 years.....	30.4	31.8	24.9	27.4	30.8	24.5	66.0	*43.3	27.5
Female									
All ages, 25-74 years ²	18.8	16.4	12.9	17.1	14.5	11.3	33.6	31.4	25.5
25-34 years.....	3.1	*3.4	2.6	2.3	2.2	2.3	*8.6	*12.4	*4.3
35-44 years.....	8.5	9.0	8.2	6.2	*6.6	6.5	25.7	*23.8	17.6
45-54 years.....	18.3	16.6	14.9	15.5	13.9	12.1	42.0	39.7	37.3
55-64 years.....	31.9	29.2	20.0	31.0	27.6	18.3	41.1	45.6	36.4
65-74 years.....	50.0	36.0	27.9	48.6	34.9	26.3	71.0	46.3	43.4

¹Includes all other races not shown separately.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population 25-74 years of age, using 5 age groups.

NOTE: Elevated blood pressure includes readings of either systolic pressure of at least 160 mmHg or diastolic blood pressure of at least 95 mmHg or both. All blood pressures are the average of 3 measurements.

SOURCES: National Center for Health Statistics: Hypertension in adults 25-74 years of age, United States, 1971-1975, by J. Roberts and M. Rowland. *Vital and Health Statistics*. Series 11-No. 221. DHHS Pub. No. (PHS) 81-1671. Public Health Service. Washington. U.S. Government Printing Office, Apr. 1981; Blood pressure levels and hypertension in persons ages 6-74 years, United States, 1976-80, by M. Rowland and J. Roberts. *Advanced Data From Vital and Health Statistics*, No. 84. DHHS Pub. No. (PHS) 82-1250. Public Health Service. Hyattsville, Md. Oct. 8, 1982; Division of Health Examination Statistics: Unpublished data.

Table 38. Persons 25-74 years of age with elevated serum cholesterol levels, according to race, sex, and age: United States, 1960-62, 1971-74, and 1976-80

(Data are based on physical examinations of a sample of the civilian noninstitutionalized population)

Sex and age	Race and period								
	Total ¹			White			Black		
	1960-62	1971-74	1976-80	1960-62	1971-74	1976-80	1960-62	1971-74	1976-80
Both sexes		Percent of population							
All ages, 25-74 years ²	23.3	19.3	18.6	23.9	19.3	18.5	19.4	20.3	19.7
25-34 years.....	8.8	6.9	7.1	8.7	6.7	7.1	10.8	9.0	7.7
35-44 years.....	16.4	13.3	13.1	17.2	12.8	12.6	10.4	15.1	17.8
45-54 years.....	26.8	24.7	22.5	27.2	24.8	22.4	26.0	24.1	25.5
55-64 years.....	36.9	28.1	29.4	38.8	28.2	29.6	21.0	29.4	28.5
65-74 years.....	37.7	32.1	28.0	37.8	32.3	28.5	38.0	31.6	25.3
Male									
All ages, 25-74 years ²	19.8	17.6	16.8	20.6	17.4	16.8	14.2	20.0	19.4
25-34 years.....	10.4	8.2	8.3	10.8	7.8	8.4	9.0	14.0	9.3
35-44 years.....	20.2	17.2	16.1	21.7	16.5	15.4	8.4	20.7	23.6
45-54 years.....	25.6	24.5	21.1	26.4	25.0	20.8	21.1	20.4	25.3
55-64 years.....	23.4	19.6	22.5	24.6	19.4	22.8	13.7	23.0	24.2
65-74 years.....	21.6	21.0	18.9	21.5	20.7	19.1	*22.9	25.8	18.7
Female									
All ages, 25-74 years ²	26.3	20.7	19.9	26.7	20.7	20.0	24.1	20.7	20.0
25-34 years.....	7.4	5.6	6.0	6.8	5.6	5.9	12.0	5.4	6.5
35-44 years.....	12.8	9.6	10.4	12.9	9.4	9.9	12.1	10.7	13.3
45-54 years.....	28.0	24.8	23.9	28.0	24.6	23.8	31.0	27.2	25.8
55-64 years.....	49.6	35.8	35.5	51.9	36.2	35.8	29.1	34.7	32.0
65-74 years.....	51.0	40.6	35.0	51.4	41.2	35.6	*50.1	36.0	30.3

¹Includes all other races not shown separately.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population 25-74 years of age, using 5 age intervals.

NOTE: Elevated serum cholesterol includes cholesterol levels of at least 260 mg/100 ml.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 39. Overweight persons 25-74 years of age, according to race, sex, and age: United States, 1960-62, 1971-74, and 1976-80

(Data are based on physical examinations of a sample of the civilian noninstitutionalized population)

Sex and age	Race and period								
	Total ¹			White			Black		
	1960-62	1971-74	1976-80	1960-62	1971-74	1976-80	1960-62	1971-74	1976-80
Both sexes			Percent of population						
All ages, 25-74 years ²	25.4	26.7	27.0	24.2	25.7	25.9	35.1	38.0	40.0
25-34 years.....	17.7	19.9	19.3	16.4	19.1	18.8	29.8	28.4	24.3
35-44 years.....	22.6	27.3	27.0	20.6	25.6	25.5	37.5	44.3	40.4
45-54 years.....	27.9	29.2	30.6	26.8	28.1	29.1	34.8	39.6	51.2
55-64 years.....	32.3	30.4	31.1	31.4	29.5	29.9	43.2	41.4	44.3
65-74 years.....	30.7	29.2	29.3	30.9	28.5	28.4	29.4	37.0	42.7
Male									
All ages, 25-74 years ²	23.1	24.8	25.3	23.3	24.8	25.2	22.5	27.0	30.0
25-34 years.....	20.6	21.6	19.0	20.1	21.6	19.6	31.7	24.6	16.6
35-44 years.....	21.8	28.2	27.3	20.9	27.6	26.5	28.0	38.9	39.0
45-54 years.....	26.8	27.0	29.7	27.7	27.6	29.1	18.5	22.0	41.4
55-64 years.....	25.0	23.8	26.6	26.5	23.8	26.9	15.8	25.6	25.5
65-74 years.....	20.6	22.0	23.7	21.3	22.1	24.3	*11.7	21.1	25.1
Female									
All ages, 25-74 years ²	27.4	28.4	28.6	24.9	26.4	26.3	47.1	46.8	48.1
25-34 years.....	15.1	18.4	19.6	13.0	16.9	18.1	28.5	31.2	30.4
35-44 years.....	23.4	26.4	26.8	20.3	23.7	24.5	45.6	48.5	41.6
45-54 years.....	29.0	31.2	31.5	25.9	28.7	29.1	50.9	54.2	59.6
55-64 years.....	39.1	36.3	35.9	35.8	34.6	32.6	71.0	54.3	60.0
65-74 years.....	38.7	34.8	33.5	38.6	33.5	31.5	*43.8	49.2	56.0

¹Includes all other races not shown separately.

²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population 25-74 years of age, using 5 age groups.

NOTE: Overweight is defined for men as body mass index greater than or equal to 28 kilograms/meter², and for women as body mass index greater than or equal to 35 kilograms/meter^{1.5}. These cut points were used because they represent the sex specific 85th percentiles for persons 20-29 years of age in the 1976-80 National Health and Nutrition Examination Survey.

SOURCE: Division of Health Examination Statistics, National Center for Health Statistics: Unpublished data.

Table 40. Persons employed in manufacturing industries, according to size of facility and facility health and safety services: United States, 1972-74 and 1981-83

(Data are based on interviews of a sample of nonagricultural businesses)

Health and safety services available in facility	Size of facility and period							
	All facilities		Small ¹		Medium ²		Large ³	
	1972-74	1981-83	1972-74	1981-83	1972-74	1981-83	1972-74	1981-83
Occupational health and safety practices	Percent of employees							
Regularly monitor environmental conditions ⁴	21.7	48.0	2.5	11.1	12.0	43.4	55.5	85.1
Personal protective devices required in some work areas ⁵ ...	39.2	53.5	32.5	45.9	45.9	59.0	41.6	56.0
Employer provides protective devices.....	52.5	80.2	41.9	70.4	59.8	82.8	59.7	86.8
Medical facilities and practices								
Health unit at the facility.....	31.5	42.7	3.3	3.8	18.8	31.7	79.5	86.7
Access to physician or clinic...	70.7	100.0	49.0	100.0	76.3	100.0	93.5	100.0
Preemployment medical exams.....	38.5	49.4	12.8	20.0	35.0	47.0	74.9	77.9
Periodic medical exams.....	14.4	30.1	6.0	8.4	13.4	26.4	26.1	52.7
Records of employee absenteeism showing type of illness.....	14.2	4.8	4.7	8.1	10.1	3.0	30.4	3.3

¹8-99 employees.

²100-499 employees.

³500 or more employees.

⁴Monitoring environmental conditions such as presence of fumes, gases, dust, noise, vibration, radiation.

⁵Includes respirators, protective clothing, etc.

SOURCE: National Institute for Occupational Safety and Health: Unpublished data from the 1972-1974 National Occupational Hazard Survey and 1981-1983 National Occupational Exposure Survey.

Table 41. Air pollution, according to source and type of pollutant: United States, selected years 1970-82

(Data are calculated emissions estimates)

Type of pollutant and year	Source					
	All sources	Transpor- tation	Stationary fuel combustion	Industrial processes	Solid waste	Other
Particulate matter						
Emissions in 10 ⁶ metric tons per year						
1970.....	18.0	1.2	4.5	10.1	1.1	1.1
1975.....	10.3	1.4	2.6	5.0	0.6	0.7
1977.....	9.0	1.4	2.4	4.0	0.4	0.8
1978.....	8.9	1.4	2.3	4.0	0.4	0.8
1979.....	9.0	1.4	2.5	3.8	0.4	0.9
1980.....	8.6	1.4	2.5	3.2	0.4	1.1
1981.....	8.1	1.4	2.6	2.8	0.4	0.9
1982.....	7.5	1.3	2.4	2.4	0.4	1.0
Sulfur oxides						
1970.....	28.4	0.6	21.3	6.4	(1)	0.1
1975.....	25.7	0.6	20.3	4.8	(1)	(1)
1977.....	26.3	0.8	21.1	4.4	(1)	(1)
1978.....	24.6	0.8	19.6	4.2	(1)	(1)
1979.....	24.6	0.9	19.4	4.3	(1)	(1)
1980.....	23.3	0.9	18.8	3.6	(1)	(1)
1981.....	22.5	0.9	17.8	3.8	(1)	(1)
1982.....	21.4	0.9	17.4	3.1	(1)	(1)
Nitrogen oxides						
1970.....	18.1	7.6	9.1	0.7	0.4	0.3
1975.....	19.2	9.0	9.3	0.7	0.1	0.1
1977.....	21.0	9.6	10.4	0.7	0.1	0.2
1978.....	21.2	9.9	10.3	0.7	0.1	0.2
1979.....	21.3	9.8	10.5	0.7	0.1	0.2
1980.....	20.7	9.6	10.1	0.7	0.1	0.2
1981.....	20.9	9.7	10.2	0.7	0.1	0.2
1982.....	20.2	9.7	9.6	0.6	0.1	0.2
Hydrocarbons						
1970.....	25.3	10.6	0.9	8.7	1.8	3.3
1975.....	21.0	8.6	0.9	8.1	0.9	2.5
1977.....	21.9	8.3	1.1	9.0	0.8	2.7
1978.....	22.4	8.0	1.3	9.6	0.8	2.7
1979.....	21.9	7.3	1.5	9.5	0.7	2.9
1980.....	20.8	6.7	1.7	8.9	0.6	2.9
1981.....	19.4	6.4	1.9	8.0	0.6	2.5
1982.....	18.2	6.1	2.0	7.1	0.6	2.4
Carbon monoxide						
1970.....	100.2	73.7	3.9	9.0	6.4	7.2
1975.....	82.4	63.9	3.7	6.9	3.1	4.8
1977.....	83.0	63.0	4.4	7.2	2.6	5.8
1978.....	82.3	62.1	4.9	7.1	2.5	5.7
1979.....	79.5	58.0	5.6	7.1	2.3	6.5
1980.....	77.6	55.3	6.2	6.3	2.2	7.6
1981.....	75.3	54.6	6.3	5.9	2.1	6.4
1982.....	73.6	53.3	6.6	4.8	2.1	6.8

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 previous editions of Health, United States.SOURCE: Monitoring and Data Analysis Division: National Air Pollutant Emission Estimates, 1970-1982. EPA-450/4-83-024. U.S. Environmental Protection Agency. Research Triangle Park, N.C., Feb. 1984.

Table 42. Physician visits, according to source or place of care and selected patient characteristics:
United States, 1964, 1976, and 1981

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

Selected characteristic	Physician visits											
	All sources or places ¹			Doctor's office or clinic or group practice			Hospital outpatient department ²			Telephone		
	1964	1976	1981	1964	1976	1981	1964	1976	1981	1964	1976	1981
	Number per person						Percent of visits					
Total ^{3,4,5}	4.6	4.9	4.6	69.7	67.3	68.6	12.2	13.2	13.3	11.0	12.6	12.2
Age												
Under 17 years.....	3.7	4.0	4.1	62.2	64.5	64.4	13.7	13.3	13.3	18.3	17.0	16.8
Under 6 years.....	5.3	6.3	6.4	59.4	61.0	61.6	14.1	12.8	12.5	20.9	20.5	20.0
6-16 years.....	2.7	3.0	3.0	65.6	67.7	67.5	13.2	13.7	14.2	15.2	13.8	13.2
17-44 years.....	4.6	4.7	4.2	73.8	67.7	69.5	13.0	13.1	13.6	8.1	11.0	10.7
45-64 years.....	5.0	5.7	5.1	76.8	68.5	71.3	10.0	15.0	14.1	6.1	9.9	8.9
65 years and over.....	6.7	6.9	6.3	64.2	72.9	73.8	8.5	9.5	10.6	8.2	9.9	9.6
Sex ³												
Male.....	4.0	4.3	4.1	69.9	66.4	67.5	13.2	15.2	15.7	9.3	10.6	10.3
Female.....	5.1	5.4	5.1	69.5	67.8	69.3	11.4	11.9	11.7	12.2	13.9	13.4
Race ^{3,6}												
White.....	4.7	4.9	4.6	71.0	68.6	70.2	10.2	11.3	11.1	11.7	13.6	13.3
Black ⁷	3.6	4.8	4.7	56.2	56.7	57.3	32.7	27.9	27.6	4.2	5.8	5.4
Family income ^{3,8}												
Less than \$7,000.....	3.9	5.6	5.6	62.0	58.5	59.1	25.9	20.1	21.7	4.8	10.3	10.9
\$7,000-\$9,999.....	4.2	4.8	4.9	65.2	62.4	66.0	22.3	19.3	15.6	6.6	8.4	12.1
\$10,000-\$14,999.....	4.7	4.8	4.5	69.5	67.6	67.2	11.1	14.9	14.4	11.7	10.8	12.5
\$15,000-\$24,999.....	4.8	4.9	4.5	71.5	68.4	69.5	7.4	13.4	10.8	13.8	13.1	13.9
\$25,000 or more.....	5.2	4.9	4.4	72.9	70.4	73.0	6.7	8.9	10.3	12.9	14.6	12.2
Geographic region ³												
Northeast.....	4.5	4.9	4.6	67.2	62.5	65.7	10.1	15.8	14.7	11.5	13.0	12.7
North Central.....	4.4	4.7	4.5	72.2	69.5	70.2	10.6	11.4	12.2	11.7	14.3	13.5
South.....	4.3	4.7	4.5	68.9	68.1	67.4	14.0	13.3	13.1	11.0	10.9	11.9
West.....	5.5	5.4	4.8	70.9	68.7	71.6	14.3	12.7	13.8	9.5	12.7	10.4
Location of residence ³												
Within SMSA.....	4.8	5.1	4.7	68.2	65.8	67.5	12.3	13.8	13.6	12.1	13.4	12.8
Outside SMSA.....	4.1	4.5	4.4	72.9	70.9	71.0	11.9	11.8	12.7	8.8	10.8	10.8

¹Includes all other sources or places of care not shown separately.

²Includes hospital outpatient clinic or emergency room.

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

⁴Includes all other races not shown separately.

⁵Includes unknown family income.

⁶In 1964 and 1976, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1981, race was determined by asking the household respondent.

⁷1964 data are for all other races.

⁸Family income categories for 1981. 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 1976 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

NOTE: Data for 1982 are not included because the effect of major questionnaire changes in the 1982 National Health Interview Survey is currently being evaluated.

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

Table 43. Interval since last physician visit, according to selected patient characteristics: United States, 1964, 1977, and 1982

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

Selected characteristic	Interval since last physician visit								
	Less than 1 year			1 year-less than 2 years			2 years or more		
	1964	1977	1982	1964	1977	1982	1964	1977	1982
	Percent of population								
Total ^{1,2,3}	66.0	75.1	74.5	13.8	11.3	10.9	17.6	12.6	12.9
Age									
Under 17 years.....	67.0	74.8	77.0	14.8	14.0	12.0	14.7	10.0	8.8
Under 6 years.....	79.1	88.7	89.2	11.4	7.2	6.4	6.4	2.7	2.3
6-16 years.....	59.6	68.7	70.5	16.9	17.0	15.1	19.7	13.3	12.4
17-44 years.....	65.9	74.5	71.1	14.7	11.4	12.1	17.2	13.0	15.1
45-64 years.....	63.5	74.4	73.3	12.8	9.0	9.2	21.8	15.7	15.9
65 years and over.....	68.8	79.6	81.3	9.2	6.5	5.7	20.3	13.3	11.8
Sex ¹									
Male.....	62.4	71.1	70.0	14.7	12.4	11.9	19.7	15.3	16.2
Female.....	69.3	78.7	78.6	13.0	10.3	9.9	15.8	10.2	9.9
Race ^{1,4}									
White.....	67.3	75.3	74.9	13.7	11.1	10.6	17.0	12.6	12.8
Black ⁵	57.0	74.5	73.3	14.6	12.1	12.2	21.8	12.0	12.3
Family income ^{1,6}									
Less than \$7,000.....	57.5	76.2	76.1	12.9	10.1	10.1	23.3	12.8	12.1
\$7,000-\$9,999.....	61.6	72.9	73.8	14.0	11.6	11.0	20.8	14.4	13.4
\$10,000-\$14,999.....	66.3	74.5	72.7	14.3	11.3	11.5	17.6	13.4	14.4
\$15,000-\$24,999.....	69.7	75.3	73.8	13.9	11.2	11.1	15.2	12.9	13.4
\$25,000 or more.....	73.0	76.8	76.9	12.8	11.1	10.2	13.2	11.4	11.6
Geographic region ¹									
Northeast.....	67.5	75.6	77.2	14.0	11.5	9.8	17.3	12.1	11.4
North Central.....	65.9	75.2	74.4	14.0	11.1	10.9	18.4	12.9	13.0
South.....	64.0	74.3	73.0	13.6	11.9	11.8	17.9	12.7	13.3
West.....	68.4	75.9	74.1	13.5	10.2	10.4	16.2	12.8	13.7
Location of residence ¹									
Within SMSA.....	67.5	75.9	75.6	13.7	11.1	10.5	16.9	12.1	12.1
Outside SMSA.....	63.5	73.5	72.1	14.0	11.8	11.6	18.9	13.8	14.5

¹Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

²Includes all other races not shown separately.

³Includes unknown family income.

⁴In 1964 and 1977, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1982, race was determined by asking the household respondent.

⁵1964 data are for all other races.

⁶Family income categories for 1982. 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 1977 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

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

Table 44. Office visits to physicians, according to physician specialty and selected patient characteristics: United States, 1976 and 1981

(Data are based on reporting by a sample of office-based physicians)

Selected characteristic	Specialty											
	All specialties ¹		General and family practice		Internal medicine		Obstetrics and gynecology		Pediatrics		General surgery	
	1976	1981	1976	1981	1976	1981	1976	1981	1976	1981	1976	1981
	Visits per person											
Total ²	2.78	2.59	1.06	0.83	0.31	0.32	0.22	0.22	0.33	0.36	0.17	0.14
Age												
Under 15 years.....	2.11	2.10	0.62	0.52	0.03	0.03	0.02	0.01	1.06	1.16	0.06	0.04
15-44 years.....	2.59	2.26	1.01	0.75	0.22	0.19	0.44	0.45	0.05	0.05	0.16	0.14
45-64 years.....	3.36	3.10	1.41	1.11	0.60	0.64	0.13	0.12	0.01	0.01	0.26	0.23
65 years and over.....	4.33	4.34	1.84	1.48	0.96	1.04	0.07	0.06	0.01	0.01	0.31	0.27
Sex ²												
Male.....	2.34	2.19	0.90	0.71	0.28	0.28	0.01	0.00	0.34	0.36	0.16	0.13
Female.....	3.18	2.95	1.20	0.93	0.34	0.35	0.42	0.42	0.32	0.35	0.18	0.15
Race ²												
White.....	2.87	2.67	1.07	0.84	0.32	0.32	0.22	0.22	0.35	0.37	0.17	0.14
All other.....	2.19	2.12	0.95	0.79	0.24	0.32	0.19	0.17	0.23	0.33	0.15	0.15

¹Includes other specialties not shown separately.²Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

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.

Table 45. Office visits to physicians, according to selected patient characteristics: United States, 1976 and 1981

(Data are based on reporting by a sample of office-based physicians)

Selected characteristic	Office visit					
	Patient's first visit		Visit lasted 10 minutes or less ¹		Return visit scheduled	
	1976	1981	1976	1981	1976	1981
	Percent of visits					
Total ²	14.6	14.3	49.9	47.1	59.3	58.7
Age						
Under 15 years.....	13.2	13.8	58.4	55.4	49.7	49.5
15-44 years.....	18.7	17.7	50.3	47.5	60.1	58.8
45-64 years.....	11.8	11.2	41.7	39.2	65.2	65.3
65 years and over.....	7.5	8.6	40.3	37.0	72.1	72.1
Sex ²						
Male.....	16.8	15.7	49.8	46.6	56.9	56.1
Female.....	13.5	13.8	49.9	47.3	60.4	60.2
Race ²						
White.....	14.2	14.1	49.4	46.7	59.3	58.4
All other.....	17.6	15.8	54.3	49.4	59.2	61.4
Location of physician's office ²						
Within SMSA.....	15.0	14.9	47.1	45.4	61.3	60.4
Outside SMSA.....	13.4	12.8	58.1	52.1	53.9	53.6

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

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.

Table 46. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1976, and 1981

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

Selected characteristic	Interval since last dental visit														
	Dental visits			Interval since last dental visit									Never visited dentist		
	1964	1976	1981	Less than 1 year			1 year-less than 2 years			2 years or more			1964	1976	1981
Number per person															
Total ^{1,2,3}	1.6	1.6	1.7	42.0	48.7	50.0	12.8	13.0	13.3	28.1	26.4	24.8	15.6	10.8	10.9
Percent of population															
Age															
Under 17 years.....	1.4	1.5	1.6	41.6	50.1	50.0	9.1	10.8	10.8	6.3	8.3	8.0	42.6	29.9	30.4
Under 6 years.....	0.5	0.5	0.6	16.5	21.2	21.7	2.3	3.5	3.5	0.6	0.7	1.0	80.4	74.2	73.4
6-16 years.....	2.0	1.9	2.2	56.9	63.2	64.7	13.2	14.1	14.5	9.8	11.7	11.6	19.6	10.0	8.1
17-44 years.....	1.9	1.7	1.7	50.0	53.7	54.2	17.2	16.8	17.3	27.8	26.2	25.1	3.2	2.1	1.9
45-64 years.....	1.7	1.8	1.8	38.4	46.5	49.6	13.1	12.3	12.5	45.5	39.3	36.2	1.3	0.8	0.6
65 years and over.....	0.8	1.2	1.5	20.8	29.7	34.6	7.7	8.0	8.0	66.8	60.9	56.1	1.5	0.7	0.5
Sex ¹															
Male.....	1.4	1.5	1.6	40.0	46.7	47.9	13.0	13.2	13.6	28.8	27.8	26.1	16.1	11.2	11.2
Female.....	1.7	1.7	1.8	43.9	50.6	52.0	12.5	12.9	12.9	27.6	25.1	23.5	15.1	10.6	10.6
Race ^{1,4}															
White.....	1.7	1.7	1.8	44.7	51.0	52.2	12.9	12.7	12.9	27.3	25.4	23.7	13.8	9.9	10.2
Black ⁵	0.9	0.9	1.1	22.8	32.8	35.5	11.7	15.3	15.0	35.3	34.4	33.1	27.1	16.0	14.3
Family income ^{1,6}															
Less than \$7,000.....	0.9	1.1	1.1	25.8	36.1	37.0	10.7	12.8	13.5	34.6	33.6	33.3	27.0	16.7	15.5
\$7,000-\$9,999.....	0.9	1.2	1.3	29.2	36.6	37.3	12.5	14.3	14.5	34.3	33.2	32.8	22.0	15.1	14.3
\$10,000-\$14,999.....	1.4	1.3	1.4	39.1	40.6	42.3	13.7	13.0	14.0	30.0	31.6	30.0	16.1	13.9	12.9
\$15,000-\$24,999.....	1.9	1.4	1.7	49.6	46.5	50.1	13.4	14.2	14.0	24.9	27.3	24.4	11.0	11.2	10.7
\$25,000 or more.....	2.8	2.1	2.2	63.3	60.8	63.5	12.2	12.4	12.0	16.6	18.9	16.2	7.0	6.8	7.3
Geographic region ¹															
Northeast.....	2.1	1.8	2.0	47.9	54.0	55.2	12.7	12.0	12.7	25.7	24.4	22.4	12.7	8.6	8.7
North Central.....	1.6	1.6	1.7	44.0	51.0	52.2	13.0	12.8	12.7	28.8	26.0	24.6	13.0	9.6	9.6
South.....	1.2	1.3	1.5	35.0	42.6	44.7	12.0	13.3	13.3	30.0	29.5	28.1	20.8	13.5	12.7
West.....	1.8	1.8	1.7	43.3	50.0	50.3	13.8	14.2	14.7	27.5	23.9	22.0	14.5	10.7	11.8

See footnotes at end of table.

Table 46. Dental visits and interval since last visit, according to selected patient characteristics: United States, 1964, 1976, and 1981--Continued

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

Selected characteristic	Dental visits			Interval since last dental visit									Never visited dentist		
				Less than 1 year			1 year-less than 2 years			2 years or more					
	1964	1976	1981	1964	1976	1981	1964	1976	1981	1964	1976	1981	1964	1976	1981
Location of residence ¹	Number per person						Percent of population								
Within SMSA.....	1.8	1.7	1.8	44.5	51.0	52.0	13.1	13.0	13.3	26.8	24.6	23.0	14.3	10.3	10.5
Outside SMSA.....	1.2	1.3	1.4	37.8	43.7	45.9	12.1	13.0	13.0	30.5	30.3	28.5	17.9	12.1	11.6

¹Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

²Includes all other races not shown separately.

³Includes unknown family income.

⁴In 1964 and 1976, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1981, race was determined by asking the household respondent.

⁵1964 data are for all other races.

⁶Family income categories for 1981. 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 1976 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

NOTE: Data for 1982 are not available because questions on dental care were not asked in the 1982 survey.

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

Table 47. Admissions, average length of stay, and outpatient visits in short-stay hospitals, according to type of ownership: United States, selected years 1960-82

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

Type of ownership	Year								
	1960	1970	1975	1977	1978	1979	1980	1981	1982
Admissions									
	Number in thousands								
All ownerships.....	24,324	30,706	35,270	36,227	36,433	37,034	38,140	38,417	38,332
Federal.....	1,354	1,454	1,751	1,874	1,858	1,874	1,942	1,923	1,903
Non-Federal.....	22,970	29,252	33,519	34,353	34,575	35,160	36,198	36,494	36,429
Nonprofit.....	16,788	20,948	23,735	24,284	24,443	24,885	25,576	25,955	25,908
Proprietary.....	1,550	2,031	2,646	2,849	2,880	2,963	3,165	3,239	3,316
State-local government.....	4,632	6,273	7,138	7,220	7,253	7,312	7,458	7,299	7,205
Average length of stay									
	Number of days								
All ownerships.....	8.4	8.7	8.0	7.9	7.9	7.8	7.8	7.9	7.9
Federal.....	21.4	17.0	14.4	12.9	13.2	12.8	12.9	12.5	12.6
Non-Federal.....	7.6	8.2	7.7	7.6	7.6	7.6	7.6	7.6	7.6
Nonprofit.....	7.4	8.2	7.8	7.8	7.8	7.7	7.7	7.8	7.8
Proprietary.....	5.7	6.8	6.6	6.6	6.5	6.6	6.5	6.6	6.6
State-local government.....	8.8	8.7	7.6	7.4	7.4	7.4	7.4	7.6	7.5
Outpatient visits ¹									
	Number in thousands								
All ownerships.....	---	173,058	245,938	254,483	253,896	252,461	255,320	257,254	304,089
Federal.....	---	39,514	49,627	50,245	47,434	48,587	48,568	50,524	53,200
Non-Federal.....	---	133,545	196,311	204,238	206,461	203,873	206,752	206,729	250,888
Nonprofit.....	---	90,992	132,368	139,045	142,617	140,525	142,864	143,953	176,838
Proprietary.....	---	4,698	7,713	8,355	8,911	9,289	9,696	9,961	13,193
State-local government.....	---	37,854	56,230	56,838	54,933	54,060	54,192	52,816	60,857

¹Because of modifications in the collection of outpatient data for 1977 and 1982, there are discontinuities in the trends for this item.

NOTE: 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, 1976-83 Editions. Chicago, 1976-83. (Copyrights 1961, 1971, 1976-83: Used with the permission of the American Hospital Association.)

Table 48. Discharges from and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1979 and 1982

(Data are based on a sample of hospital records)

Sex, age, and first-listed diagnosis	Discharges		Days of care	
	1979	1982	1979	1982
Both sexes				
Total ^{1,2}	156.9	158.5	1,111.0	1,101.7
Females with delivery.....	14.6	15.0	54.6	53.6
Diseases of heart.....	12.8	13.8	121.2	122.0
Malignant neoplasms.....	7.3	8.0	89.5	88.0
Fracture, all sites.....	5.0	4.7	51.1	45.0
Pneumonia, all forms.....	3.5	3.7	26.5	27.8
Cerebrovascular diseases.....	3.0	3.2	36.9	38.8
Male				
All ages ^{1,2}	137.6	140.5	1,050.6	1,047.6
Diseases of heart.....	15.6	17.0	144.0	144.4
Malignant neoplasms.....	8.0	8.6	98.5	96.2
Fracture, all sites.....	5.5	5.0	48.7	41.2
Inguinal hernia.....	4.0	4.2	19.6	18.6
Pneumonia, all forms.....	4.0	4.0	30.5	31.0
Cerebrovascular diseases.....	3.2	3.5	38.6	40.4
Under 15 years ²	78.1	79.9	342.6	366.9
Acute respiratory infection.....	6.4	5.2	24.2	19.2
Chronic disease of tonsils and adenoids.....	6.0	5.1	10.1	8.7
Congenital anomalies.....	3.7	4.0	21.4	20.1
Fracture, all sites.....	3.9	3.8	21.3	19.9
Otitis media and eustachian tube disorders.....	4.0	3.7	9.1	8.7
15-44 years ²	93.4	87.4	592.8	549.9
Fracture, all sites.....	6.3	5.5	48.7	39.5
Alcohol dependence syndrome.....	3.5	3.6	34.6	38.4
Diseases of heart.....	3.0	3.1	22.2	21.7
Lacerations and open wounds.....	3.7	3.1	16.9	16.5
Psychoses.....	3.3	2.9	44.1	42.8
45-64 years ²	190.6	196.3	1,541.2	1,521.5
Diseases of heart.....	33.4	35.6	285.4	276.2
Malignant neoplasms.....	13.8	14.5	158.8	160.4
Inguinal hernia.....	6.3	7.1	33.9	32.8
Alcohol dependence syndrome.....	6.6	4.9	57.6	50.5
Diabetes.....	4.0	4.7	38.6	45.5
65 years and over ²	389.5	428.1	4,067.9	4,188.0
Diseases of heart.....	75.7	84.9	774.0	803.9
Malignant neoplasms.....	45.6	47.9	586.6	569.6
Cerebrovascular diseases.....	23.2	24.8	291.8	284.8
Hyperplasia of prostate.....	15.7	17.4	163.5	152.1
Pneumonia, all forms.....	12.8	13.7	138.5	152.4

See footnotes at end of table.

Table 48. Discharges from and days of care in non-Federal short-stay hospitals, according to sex, age, and selected first-listed diagnosis: United States, 1979 and 1982--Continued

(Data are based on a sample of hospital records)

Sex, age, and first-listed diagnosis	Discharges		Days of care	
	1979	1982	1979	1982
Female				
Number per 1,000 population				
All ages ^{1,2}	176.1	176.5	1,173.0	1,157.7
Delivery.....	28.6	29.6	107.4	105.6
Diseases of heart.....	10.4	11.1	101.9	102.9
Malignant neoplasms.....	6.9	7.6	83.9	83.2
Fracture, all sites.....	4.4	4.1	50.3	45.8
Pregnancy with abortive outcome.....	4.2	3.7	9.2	7.4
Benign neoplasms.....	4.1	3.7	25.3	22.3
Under 15 years ²	63.1	62.0	268.5	284.0
Chronic disease of tonsils and adenoids.....	6.5	5.8	12.4	10.3
Pneumonia, all forms.....	4.2	4.9	21.4	23.6
Acute respiratory infection.....	5.1	3.7	18.7	13.9
Congenital anomalies.....	2.4	2.7	12.8	17.5
Otitis media and eustachian tube disorders.....	3.0	2.5	6.5	6.3
15-44 years ²	208.2	201.0	986.4	928.4
Delivery.....	69.5	72.2	260.3	257.8
Pregnancy with abortive outcome.....	10.2	8.8	22.3	17.8
Disorders of menstruation.....	6.8	5.1	21.9	17.7
Inflammatory disease of female pelvic organs.....	5.2	4.9	27.0	24.9
Benign neoplasms.....	5.2	4.3	27.6	24.4
Persons admitted for sterilization.....	4.9	3.6	10.9	7.2
45-64 years ²	194.0	194.8	1,601.4	1,550.4
Diseases of heart.....	17.6	18.0	155.4	146.6
Malignant neoplasms.....	15.5	17.5	179.9	184.6
Benign neoplasms.....	6.9	6.3	46.3	40.5
Diabetes.....	5.7	6.1	55.8	58.7
Disorders of menstruation.....	4.0	3.5	15.4	12.3
65 years and over ²	342.5	379.1	3,767.6	3,917.6
Diseases of heart.....	61.1	69.2	661.5	702.5
Malignant neoplasms.....	28.1	29.8	390.0	376.5
Cerebrovascular diseases.....	21.3	21.9	274.3	292.3
Diabetes.....	10.6	9.9	135.0	112.4
Pneumonia, all forms.....	8.4	9.5	91.4	105.8

¹Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

²Includes discharges with first-listed diagnoses not shown in table.

NOTES: Excludes newborn infants. Rates are based on the civilian population. Diagnostic categories are based on the International Classification of Diseases, 9th Revision, Clinical Modification. For a listing of the code numbers, see Appendix II, table VI.

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

Table 49. 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, 1979 and 1982

(Data are based on a sample of hospital records)

Sex, age, and first-listed diagnosis	Discharges		Days of care		Average length of stay		
	1979	1982	1979	1982	1979	1982	
Both sexes		Number in thousands				Number of days	
Total ¹	36,747	38,593	264,173	272,627	7.2	7.1	
Females with delivery.....	3,646	3,945	13,665	14,103	3.7	3.6	
Diseases of heart.....	3,065	3,477	29,378	31,062	9.6	8.9	
Malignant neoplasms.....	1,745	1,972	21,496	21,959	12.3	11.1	
Fracture, all sites.....	1,180	1,132	12,366	11,403	10.5	10.1	
Pneumonia, all forms.....	756	824	6,021	6,605	8.0	8.0	
Cerebrovascular diseases.....	747	834	9,226	10,183	12.4	12.2	
Male							
All ages ¹	14,705	15,470	112,504	115,942	7.7	7.5	
Diseases of heart.....	1,640	1,849	15,112	15,741	9.2	8.5	
Malignant neoplasms.....	846	941	10,385	10,506	12.3	11.2	
Fracture, all sites.....	609	565	5,359	4,704	8.8	8.3	
Inguinal hernia.....	427	455	2,089	2,042	4.9	4.5	
Pneumonia, all forms.....	403	416	3,130	3,305	7.8	7.9	
Cerebrovascular diseases.....	335	388	4,060	4,451	12.1	11.5	
Under 15 years ¹	2,053	2,098	9,008	9,635	4.4	4.6	
Acute respiratory infection.....	169	137	637	505	3.8	3.7	
Chronic disease of tonsils and adenoids.....	158	135	265	227	1.7	1.7	
Congenital anomalies.....	98	106	564	527	5.7	5.0	
Fracture, all sites.....	103	101	559	522	5.4	5.2	
Otitis media and eustachian tube disorders.....	106	96	239	229	2.3	2.4	
15-44 years ¹	4,680	4,615	29,713	29,050	6.3	6.3	
Fracture, all sites.....	315	289	2,439	2,085	7.8	7.2	
Alcohol dependence syndrome.....	177	190	1,736	2,030	9.8	10.7	
Diseases of heart.....	153	166	1,112	1,148	7.3	6.9	
Lacerations and open wounds.....	184	163	847	872	4.6	5.4	
Psychoses.....	165	155	2,212	2,262	13.4	14.6	
45-64 years ¹	4,017	4,143	32,482	32,118	8.1	7.8	
Diseases of heart.....	704	751	6,015	5,831	8.5	7.8	
Malignant neoplasms.....	291	306	3,347	3,386	11.5	11.0	
Inguinal hernia.....	132	149	714	692	5.4	4.6	
Alcohol dependence syndrome.....	139	104	1,213	1,065	8.7	10.2	
Diabetes.....	85	98	813	961	9.6	9.8	
65 years and over ¹	3,955	4,614	41,302	45,138	10.4	9.8	
Diseases of heart.....	769	915	7,858	8,665	10.2	9.5	
Malignant neoplasms.....	463	516	5,955	6,139	12.9	11.9	
Cerebrovascular diseases.....	235	267	2,963	3,069	12.6	11.5	
Hyperplasia of prostate.....	159	188	1,660	1,639	10.4	8.7	
Pneumonia, all forms.....	130	148	1,407	1,643	10.8	11.1	

See footnotes at end of table.

Table 49. 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, 1979 and 1982--Continued

(Data are based on a sample of hospital records)

Sex, age, and first-listed diagnosis	Discharges		Days of care		Average length of stay	
	1979	1982	1979	1982	1979	1982
	Number in thousands				Number of days	
Female						
All ages ¹	22,042	23,123	151,669	156,685	6.9	6.8
Delivery.....	3,646	3,945	13,665	14,103	3.7	3.6
Diseases of heart.....	1,425	1,627	14,266	15,321	10.0	9.4
Malignant neoplasms.....	899	1,031	11,111	11,453	12.4	11.1
Fracture, all sites.....	571	567	7,007	6,699	12.3	11.8
Pregnancy with abortive outcome.....	536	484	1,172	987	2.2	2.0
Benign neoplasms.....	509	467	3,146	2,890	6.2	6.2
Under 15 years ¹	1,588	1,556	6,757	7,126	4.3	4.6
Chronic disease of tonsils and adenoids.....	162	145	312	260	1.9	1.8
Pneumonia, all forms.....	105	124	539	591	5.1	4.8
Acute respiratory infection.....	128	92	471	350	3.7	3.8
Congenital anomalies.....	62	69	322	438	5.2	6.4
Otitis media and eustachian tube disorders.....	75	62	165	157	2.2	2.5
15-44 years ¹	10,808	10,939	51,200	50,532	4.7	4.6
Delivery.....	3,607	3,928	13,514	14,033	3.7	3.6
Pregnancy with abortive outcome.....	528	477	1,158	969	2.2	2.0
Disorders of menstruation.....	350	276	1,138	962	3.2	3.5
Inflammatory disease of female pelvic organs...	272	265	1,403	1,354	5.2	5.1
Benign neoplasms.....	270	236	1,432	1,329	5.3	5.6
Persons admitted for sterilization.....	254	194	566	394	2.2	2.0
45-64 years ¹	4,515	4,545	37,273	36,165	8.3	8.0
Diseases of heart.....	410	419	3,617	3,419	8.8	8.2
Malignant neoplasms.....	360	409	4,188	4,305	11.6	10.5
Benign neoplasms.....	161	147	1,078	944	6.7	6.4
Diabetes.....	132	143	1,299	1,370	9.9	9.6
Disorders of menstruation.....	94	82	359	287	3.8	3.5
65 years and over ¹	5,131	6,083	56,438	62,862	11.0	10.3
Diseases of heart.....	916	1,111	9,910	11,273	10.8	10.1
Malignant neoplasms.....	421	479	5,842	6,041	13.9	12.6
Cerebrovascular diseases.....	319	351	4,109	4,690	12.9	13.4
Diabetes.....	159	159	2,022	1,803	12.8	11.4
Pneumonia, all forms.....	126	152	1,370	1,697	10.9	11.2

¹Includes discharges with first-listed diagnoses not shown in table.

NOTES: Excludes newborn infants. Diagnostic categories are based on the International Classification of Diseases, 9th Revision, Clinical Modification. For a listing of the code numbers, see Appendix II, table VI.

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

Table 50. 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 selected characteristics: United States, 1979 and 1982

(Data are based on a sample of hospital records)

Selected characteristic	Discharges				Days of care				Average length of stay			
	All patients		Patients with surgery		All patients		Patients with surgery		All patients		Patients with surgery	
	1979	1982	1979	1982	1979	1982	1979	1982	1979	1982	1979	1982
	Number per 1,000 population								Number of days			
Total ¹	156.9	158.5	64.0	65.1	1,111.0	1,101.7	471.6	479.0	7.1	7.0	7.4	7.4
Age												
Under 15 years.....	70.8	71.2	27.0	24.9	306.4	326.4	112.2	118.0	4.3	4.6	4.2	4.7
15-44 years.....	151.8	145.0	70.6	67.5	793.0	742.0	375.2	353.0	5.2	5.1	5.3	5.2
45-64 years.....	192.4	195.5	78.5	82.9	1,572.8	1,536.7	691.9	704.9	8.2	7.9	8.8	8.5
65 years and over.....	361.5	398.8	116.6	137.5	3,888.8	4,026.2	1,487.7	1,613.4	10.8	10.1	12.8	11.7
Bed size ¹												
6-99 beds.....	29.9	27.8	8.0	7.8	174.1	155.1	44.9	44.5	5.8	5.6	5.6	5.7
100-199 beds.....	27.0	27.9	10.6	10.9	174.2	178.2	68.1	69.4	6.5	6.4	6.4	6.4
200-299 beds.....	27.7	26.1	12.0	10.9	196.8	181.0	87.2	79.1	7.1	6.9	7.3	7.3
300-499 beds.....	36.9	39.1	16.4	17.2	280.2	290.1	127.7	132.2	7.6	7.4	7.8	7.7
500 beds or more.....	35.5	37.5	17.1	18.3	285.7	297.4	143.7	153.7	8.0	7.9	8.4	8.4
Ownership ¹												
State and local government..	32.9	33.9	11.3	12.3	214.7	215.6	84.7	88.5	6.5	6.4	7.5	7.2
Proprietary.....	12.5	12.7	4.5	5.0	89.2	89.6	28.7	35.0	7.1	7.1	6.4	7.0
Nonprofit.....	111.5	111.9	48.2	47.8	807.1	796.5	358.2	355.4	7.2	7.1	7.4	7.4
Geographic region ¹												
Northeast.....	33.2	32.1	14.1	13.6	275.6	258.5	116.9	109.7	8.3	8.1	8.3	8.1
North Central.....	45.6	45.0	19.3	18.9	329.7	328.4	143.0	144.9	7.2	7.3	7.4	7.7
South.....	53.0	55.4	19.6	21.0	356.6	362.3	141.6	150.1	6.7	6.5	7.2	7.1
West.....	25.0	26.0	11.1	11.6	149.1	152.6	70.1	74.3	6.0	5.9	6.3	6.4

¹Age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

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

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

Table 51. Discharges from, days of care, and average length of stay in short-stay hospitals, according to selected characteristics: United States, 1964, 1977, and 1982

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

Selected characteristic	Discharges ¹			Days of care ¹			Average length of stay ¹		
	1964	1977	1982	1964	1977	1982	1964	1977	1982
	Number per 1,000 population						Number of days		
Total ^{2,3,4}	130.6	121.9	127.4	1,062.0	1,004.7	962.4	8.1	7.4	7.0
Age									
Under 17 years.....	67.7	62.6	61.1	400.6	349.6	385.3	5.9	5.6	6.3
Under 6 years.....	91.9	98.3	85.3	651.6	543.7	559.2	7.1	5.5	6.6
6-16 years.....	53.0	46.6	48.0	247.5	263.1	290.6	4.7	5.6	6.1
17-44 years.....	162.4	110.2	114.2	1,050.8	773.5	680.0	6.5	7.0	6.0
45-64 years.....	146.4	166.0	176.3	1,560.5	1,510.5	1,490.1	10.7	9.1	8.5
65 years and over.....	190.1	274.6	299.6	2,292.9	3,042.1	2,880.4	12.1	11.1	9.6
Sex ²									
Male.....	104.0	120.4	120.7	1,012.4	1,065.7	967.5	9.7	8.0	7.1
Female.....	154.3	123.7	134.6	1,104.5	951.5	970.2	7.2	6.8	7.0
Race ^{2,5}									
White.....	133.8	121.4	125.2	1,053.4	962.9	907.0	7.9	6.9	6.5
Black.....	106.3	133.0	147.3	1,141.2	1,354.9	1,401.4	10.7	10.0	9.3
Family income ^{2,6}									
Less than \$7,000.....	126.9	158.3	178.6	1,140.0	1,540.9	1,481.0	9.0	9.2	7.9
\$7,000-\$9,999.....	146.8	137.2	162.3	1,337.8	1,149.1	1,497.4	9.1	7.4	8.9
\$10,000-\$14,999.....	135.4	141.4	139.3	1,042.3	1,160.6	959.9	7.7	7.4	6.4
\$15,000-\$24,999.....	128.0	124.0	121.0	968.6	1,051.8	906.1	7.6	7.7	6.9
\$25,000 or more.....	121.8	108.2	106.3	971.0	821.0	745.8	8.0	6.4	6.2
Geographic region ²									
Northeast.....	119.6	110.1	109.3	1,094.5	1,025.0	913.4	9.2	8.7	7.6
North Central.....	130.7	127.8	136.3	1,041.2	1,047.9	1,055.4	8.0	7.2	6.8
South.....	138.7	132.7	146.2	1,051.2	1,051.2	1,077.1	7.6	7.0	6.9
West.....	133.5	109.7	104.4	1,066.2	834.8	689.4	8.0	6.7	6.4
Location of residence ²									
Within SMSA.....	124.9	116.5	118.6	1,097.4	1,036.3	939.9	8.8	8.0	7.3
Outside SMSA.....	140.7	133.8	146.0	1,001.2	946.7	1,013.4	7.1	6.3	6.4

¹Excluding deliveries.

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

³Includes all other races not shown separately.

⁴Includes unknown family income.

⁵In 1964 and 1977, the racial classification of persons in the National Health Interview Survey was determined by interviewer observation. In 1982, race was determined by asking the household respondent.

⁶Family income categories for 1982. 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 1977 were: less than \$5,000; \$5,000-\$6,999; \$7,000-\$9,999; \$10,000-\$14,999; and \$15,000 or more.

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

Table 52. Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1979 and 1982

(Data are based on a sample of hospital records)

Sex, age, and surgical category	Operations			
	1979	1982	1979	1982
			Number in thousands	Number per 1,000 population
Both sexes				
Total ^{1,2}	23,858	25,825	101.1	104.9
Procedures to assist delivery.....	2,331	2,459	9.3	9.3
Diagnostic dilation and curettage of uterus.....	935	741	3.9	3.0
Cesarean section.....	599	730	2.4	2.8
Hysterectomy.....	639	650	2.7	2.6
Repair of inguinal hernia.....	500	549	2.2	2.4
Bilateral destruction or occlusion of fallopian tubes.....	610	602	2.4	2.3
Extraction of lens.....	418	599	1.7	2.3
With insertion of prosthetic lens (pseudophakos).....	130	418	0.5	1.6
Male				
All ages ^{1,2}	8,179	9,062	76.0	81.8
Repair of inguinal hernia.....	449	489	4.2	4.5
Prostatectomy.....	293	358	2.8	3.3
Reduction of fracture (excluding skull, nose, and jaw).....	344	340	3.1	3.0
Cardiac catheterization.....	195	309	1.9	2.9
Extraction of lens.....	169	230	1.6	2.1
With insertion of prosthetic lens (pseudophakos).....	51	158	0.5	1.4
Operations on muscles, tendons, fascia, and bursa.....	222	227	2.0	2.0
Under 15 years ²	1,092	1,058	41.5	40.3
Tonsillectomy, with or without adenoidectomy.....	152	131	5.8	5.0
Myringotomy.....	115	85	4.4	3.2
Repair of inguinal hernia.....	76	77	2.9	2.9
Reduction of fracture (excluding skull, nose, and jaw).....	65	63	2.5	2.4
Circumcision.....	45	46	1.7	1.8
Appendectomy, excluding incidental ³	43	38	1.6	1.5
15-44 years ²	2,902	2,890	57.9	54.7
Reduction of fracture (excluding skull, nose, and jaw).....	183	185	3.6	3.5
Operations on muscles, tendons, fascia, and bursa.....	123	126	2.5	2.4
Repair of inguinal hernia.....	122	124	2.4	2.3
Rhinoplasty and repair of nose.....	81	88	1.6	1.7
Appendectomy, excluding incidental ³	97	85	1.9	1.6
Excision of semilunar cartilage of knee.....	91	75	1.8	1.4
Suture of skin and subcutaneous tissue.....	89	75	1.8	1.4
Debridement of wound, infection, or burn.....	61	66	1.2	1.3
45-64 years ²	2,186	2,508	103.7	118.8
Cardiac catheterization.....	118	182	5.6	8.6
Repair of inguinal hernia.....	138	156	6.6	7.4
Prostatectomy.....	71	96	3.4	4.6
Direct heart revascularization (coronary bypass).....	63	81	3.0	3.8
Operations on muscles, tendons, fascia, and bursa.....	51	55	2.4	2.6
65 years and over ²	2,000	2,606	197.0	241.8
Prostatectomy.....	218	261	21.5	24.3
Extraction of lens.....	108	161	10.6	14.9
With insertion of prosthetic lens (pseudophakos).....	40	116	3.9	10.8
Repair of inguinal hernia.....	112	133	11.0	12.3
Pacemaker insertion, replacement, removal, and repair.....	62	74	6.1	6.9
Cardiac catheterization.....	29	63	2.9	5.9

See footnotes at end of table.

Table 52. Operations for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and surgical category: United States, 1979 and 1982--Continued

(Data are based on a sample of hospital records)

Sex, age, and surgical category	Operations			
	1979	1982	1979	1982
			Number per 1,000 population	
		Number in thousands		
Female				
All ages ^{1,2}	15,679	16,763	125.8	128.0
Procedures to assist delivery.....	2,331	2,459	18.3	18.4
Diagnostic dilation and curettage of uterus.....	935	741	7.6	5.8
Cesarean section.....	599	730	4.7	5.5
Hysterectomy.....	639	650	5.1	5.0
Bilateral destruction or occlusion of fallopian tubes.....	610	602	4.8	4.5
Repair of current obstetrical laceration.....	341	449	2.7	3.4
Under 15 years ²	772	675	30.7	26.9
Tonsillectomy, with or without adenoidectomy.....	161	137	6.4	5.5
Myringotomy.....	87	58	3.5	2.3
Reduction of fracture (excluding skull, nose, and jaw).....	29	29	1.1	1.2
Appendectomy, excluding incidental ³	36	27	1.4	1.1
Adenoidectomy without tonsillectomy.....	31	22	1.2	0.9
Resection and recession of ocular muscle.....	23	13	0.9	0.5
15-44 years ²	9,532	9,854	183.6	181.1
Procedures to assist delivery.....	2,308	2,448	44.5	45.0
Cesarean section.....	592	727	11.4	13.3
Bilateral destruction or occlusion of fallopian tubes.....	599	595	11.5	10.9
Diagnostic dilation and curettage of uterus.....	646	493	12.4	9.1
Repair of current obstetrical laceration.....	337	447	6.5	8.2
Hysterectomy.....	407	410	7.8	7.5
45-64 years ²	3,088	3,177	132.7	136.2
Diagnostic dilation and curettage of uterus.....	246	200	10.6	8.6
Hysterectomy.....	187	181	8.0	7.8
Oophorectomy and salpingo-oophorectomy.....	149	153	6.4	6.5
Cholecystectomy.....	109	114	4.7	4.9
Biopsies on the integumentary system (breast, skin, and subcutaneous tissue).....	79	78	3.4	3.3
65 years and over ²	2,286	3,056	152.6	190.5
Extraction of lens.....	198	297	13.2	18.5
With insertion of prosthetic lens (pseudophakos).....	69	221	4.6	13.8
Reduction of fracture (excluding skull, nose, and jaw).....	133	137	8.9	8.6
Cholecystectomy.....	77	86	5.1	5.3
Arthroplasty and replacement of hip.....	73	77	4.9	4.8

¹Rates are age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.

²Includes operations not listed in table.

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

NOTES: Excludes newborn infants. Rates are based on the civilian population. Surgical categories are based on the International Classification of Diseases, 9th Revision, Clinical Modification. For a listing of the code numbers, see Appendix II, table VII.

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

Table 53. Diagnostic and other nonsurgical procedures for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and procedure category: United States, 1979 and 1982

(Data are based on a sample of hospital records)

Sex, age, and procedure category	Procedures			
	1979	1982	1979	1982
	Number in thousands		Number per 1,000 population	
Both sexes				
Total ^{1,2}	5,744	8,808	25.4	36.0
Cystoscopy.....	866	811	3.7	3.3
Endoscopy of large intestine.....	485	640	2.0	2.6
Radioisotope scan.....	531	641	2.2	2.5
Computerized axial tomography (CAT scan).....	194	600	0.8	2.4
Diagnostic ultrasound.....	222	561	0.9	2.2
Endoscopy of small intestine.....	233	417	1.0	1.7
Arteriography using contrast material.....	300	385	1.3	1.6
Angiocardiology using contrast material.....	226	355	1.0	1.5
Contrast myelogram.....	290	341	1.2	1.4
Male				
All ages ^{1,2}	2,828	4,269	26.6	38.6
Cystoscopy.....	517	532	4.9	4.9
Computerized axial tomography (CAT scan).....	93	289	0.9	2.6
Radioisotope scan.....	242	284	2.3	2.5
Endoscopy of large intestine.....	215	281	2.0	2.5
Angiocardiology using contrast material.....	155	239	1.5	2.2
Arteriography using contrast material.....	167	217	1.6	2.0
Under 15 years ²	193	279	7.4	10.6
Spinal tap.....	45	58	1.7	2.2
Computerized axial tomography (CAT scan).....	9	25	0.3	0.9
Application of cast or splint.....	18	20	0.7	0.8
Cystoscopy.....	29	18	1.1	0.7
15-44 years ²	745	1,056	14.7	20.0
Arthroscopy of knee.....	67	119	1.3	2.3
Contrast myelogram.....	85	100	1.7	1.9
Computerized axial tomography (CAT scan).....	28	76	0.6	1.4
Endoscopy of large intestine.....	52	66	1.0	1.3
Cystoscopy.....	78	62	1.6	1.2
45-64 years ²	951	1,397	45.4	66.2
Cystoscopy.....	151	153	7.2	7.3
Angiocardiology using contrast material.....	103	150	4.9	7.1
Radioisotope scan.....	88	94	4.2	4.4
Arteriography using contrast material.....	75	92	3.5	4.3
Endoscopy of large intestine.....	76	83	3.6	3.9
65 years and over ²	938	1,538	93.9	142.7
Cystoscopy.....	259	298	25.5	27.7
Radioisotope scan.....	105	128	10.3	11.9
Endoscopy of large intestine.....	83	128	8.2	11.9
Computerized axial tomography (CAT scan).....	33	108	3.2	10.0
Arteriography using contrast material.....	59	89	5.8	8.2

See footnotes at end of table.

Table 53. Diagnostic and other nonsurgical procedures for inpatients discharged from non-Federal short-stay hospitals, according to sex, age, and procedure category: United States, 1979 and 1982--Continued

(Data are based on a sample of hospital records)

Sex, age, and procedure category	Procedures			
	1979	1982	1979	1982
		Number in thousands	Number per 1,000 population	
Female				
All ages ^{1,2}	2,917	4,539	23.4	34.3
Endoscopy of large intestine.....	270	359	2.1	2.6
Radioisotope scan.....	289	357	2.2	2.6
Diagnostic ultrasound.....	139	357	1.1	2.6
Computerized axial tomography (CAT scan).....	101	311	0.8	2.3
Cystoscopy.....	350	280	2.9	2.2
Laparoscopy (excluding that for ligation and division of fallopian tubes).....	203	277	1.6	2.1
Under 15 years ²	176	207	7.0	8.2
Spinal tap.....	29	40	1.2	1.6
Cystoscopy.....	43	23	1.7	0.9
Computerized axial tomography (CAT scan).....	9	19	0.4	0.7
Electroencephalogram.....	0	13	0.0	0.5
15-44 years ²	1,054	1,496	20.0	27.5
Laparoscopy (excluding that for ligation and division of fallopian tubes).....	167	256	3.6	4.7
Diagnostic ultrasound.....	63	153	1.2	2.8
Cystoscopy.....	111	86	2.1	1.6
Biliary tract x-ray.....	62	86	1.2	1.6
Endoscopy of large intestine.....	70	80	1.4	1.5
Contrast myelogram.....	67	77	1.3	1.4
45-64 years ²	874	1,286	37.6	55.1
Radioisotope scan.....	96	115	4.1	4.9
Endoscopy of large intestine.....	83	102	3.6	4.4
Diagnostic ultrasound.....	38	81	1.6	3.5
Cystoscopy.....	99	80	4.3	3.4
Computerized axial tomography (CAT scan).....	32	77	1.4	3.3
65 years and over ²	813	1,550	56.6	96.6
Endoscopy of large intestine.....	112	174	7.5	10.8
Radioisotope scan.....	127	169	8.5	10.5
Computerized axial tomography (CAT scan).....	34	141	2.3	8.8
Diagnostic ultrasound.....	35	114	2.3	7.1
Cystoscopy.....	96	90	6.4	5.6

¹Rates are age adjusted by the direct method to the 1970 civilian noninstitutionalized population, using 4 age groups.
²Includes nonsurgical procedures not shown.

NOTES: Excludes newborn infants. Rates are based on the civilian population. Procedure categories are based on the International Classification of Diseases, 9th Revision, Clinical Modification. For a listing of the code numbers, see Appendix II, table VIII.

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

Table 54. 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)

Functional status	1973-74 ¹					1977				
	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 residents									
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	56.4	53.6	48.0	42.2	47.5	61.8	53.1	45.7	41.0
Requires assistance.....	30.8	21.6	27.3	31.5	34.1	42.5	28.1	37.8	44.7	48.0
Does not use toilet room.....	21.7	22.0	19.1	20.5	23.7	10.1	10.1	9.1	9.6	11.0
Mobility										
Walks independently.....	48.6	58.2	55.4	49.6	42.2	33.9	53.6	43.2	33.2	22.5
Walks with assistance.....	20.2	11.1	15.5	20.4	24.4	28.8	15.7	21.4	30.5	35.6
Chairfast.....	26.5	24.8	24.9	25.9	28.2	32.0	25.5	30.5	31.5	35.9
Bedfast.....	4.7	5.9	4.1	4.1	5.2	5.3	5.2	5.0	4.9	6.1
Continence										
No difficulty controlling bowel or bladder.....	66.2	72.6	70.9	66.8	61.9	54.7	68.0	62.4	52.9	47.8
Difficulty controlling bowel.....	1.1	*0.8	*1.2	1.1	1.2	3.7	3.0	3.7	4.0	3.8
Difficulty controlling bladder.....	4.2	2.4	4.4	4.2	4.7	9.0	5.8	6.5	9.4	11.1
Difficulty controlling both bowel and bladder.....	28.1	23.4	23.0	27.5	31.9	25.9	16.8	20.6	26.9	30.8
Ostomy in either bowel or bladder.....	0.4	*0.8	*0.4	*0.4	*0.3	6.7	6.4	6.8	6.9	6.5

See footnote at end of table.

Table 54. 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)

Functional status	1973-74 ¹					1977				
	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
Percent distribution										
Eating										
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	70.6	62.3	53.8	45.0	67.2	81.0	75.4	67.9	57.2
Partially impaired.....	33.7	21.7	28.8	35.0	37.6	19.0	11.0	13.4	19.6	24.1
Severely impaired.....	10.0	5.0	6.3	8.9	14.0	6.6	2.2	3.3	6.1	10.4
Completely lost.....	2.8	2.7	2.6	2.3	3.5	3.0	2.2	2.6	2.6	3.8
Unknown.....	...	...	...	...	...	4.3	3.8	5.3	3.9	4.5
Hearing										
Not impaired.....	67.8	88.4	80.3	70.0	55.2	69.5	87.6	81.0	71.6	54.9
Partially impaired.....	26.1	9.2	17.0	25.5	34.8	21.7	6.6	11.4	21.2	33.1
Severely impaired.....	5.1	1.6	1.9	3.8	8.7	4.3	*0.4	1.9	3.0	8.4
Completely lost.....	1.0	*0.8	*0.8	0.7	1.4	0.7	*1.1	*0.7	*0.6	*0.7
Unknown.....	...	...	...	...	...	3.7	4.4	5.0	3.6	3.0

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 55. 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)

Year and age	Total	Sex		Race		Total	Sex		Race	
		Male	Female	White	All other		Male	Female	White	All other
Number of residents						Number per 1,000 population				
1963										
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	35,100	54,500	84,400	5,200	7.9	6.8	8.8	8.1	5.9
75-84 years.....	207,200	65,200	142,000	202,000	5,300	39.6	29.1	47.5	41.7	13.8
85 years and over.....	148,700	40,700	108,000	145,400	3,300	148.4	105.6	175.1	157.7	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	52,200	86,300	129,500	9,000	11.6	9.9	12.9	11.7	9.6
75-84 years.....	321,800	90,800	231,100	310,900	10,900	51.7	36.0	62.3	54.1	22.9
85 years and over.....	261,900	64,100	197,800	254,500	7,400	203.2	130.8	247.6	221.9	52.4
1973-74 ¹										
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	65,100	98,100	150,100	13,000	12.3	11.3	13.1	12.5	10.6
75-84 years.....	384,900	102,300	282,600	369,700	15,200	59.4	40.8	71.1	61.9	30.1
85 years and over.....	413,600	98,300	315,300	400,800	12,800	253.7	180.4	290.6	269.0	91.4
1977 ²										
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	80,200	131,200	187,500	23,800	14.5	12.7	15.9	14.2	16.8
75-84 years.....	464,700	122,100	342,600	443,200	21,500	68.0	47.4	80.6	70.6	38.6
85 years and over.....	449,900	91,700	358,200	429,100	20,800	216.4	140.0	251.5	229.0	102.0

¹Excludes residents in personal care or domiciliary care homes.

²Includes residents in domiciliary care homes.

NOTE: For data years 1963 and 1969, Hispanic origin was not designated; therefore, Hispanics may be included in either the white or all other category. For data years 1973-74 and 1977, Hispanics were included in the white category.

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; Characteristics of nursing home residents, health status, and care received: National Nursing Home Survey, United States, May-December 1977, by E. Hing. *Vital and Health Statistics*. Series 13-No. 51. DHHS Pub. No. (PHS) 81-1712. Public Health Service, Washington. U.S. Government Printing Office, April 1981.

Table 56. Additions to mental health facilities and average annual percent change, according to service setting and type of facility: United States, 1971 and 1979

(Data are based on reporting by facilities)

Type of facility	Service setting								
	Inpatient			Outpatient			Day treatment		
	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 additions		
All facilities.....	1,336,418	1,541,659	1.8	1,378,822	2,634,727	8.4	75,545	172,331	10.9
Non-Federal psychiatric hospitals...	561,923	524,154	-0.9	147,383	111,923	-3.4	18,448	13,275	-4.0
State and county hospitals.....	474,923	383,323	-2.6	129,133	81,919	-5.5	16,554	9,808	-6.3
Private hospitals.....	87,106	140,831	6.2	18,250	30,004	6.4	1,894	3,467	7.9
Veterans Administration hospitals ²	134,065	180,416	5.1	51,645	120,243	15.1	4,023	6,978	9.6
Non-Federal general hospital psychiatric units.....	519,926	551,190	1.0	282,677	224,284	-3.8	11,563	12,724	1.6
Government.....	215,158	134,213	-7.6	139,077	98,062	-5.7	4,291	3,480	-3.4
Private.....	304,768	416,977	5.4	143,600	126,222	-2.1	7,272	9,244	4.1
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	246,409	14.0	335,648	1,222,305	15.4	21,092	98,332	18.7
Freestanding psychiatric outpatient clinics.....	-	-	-	484,677	825,046	6.9	10,642	29,587	13.6
Government.....	-	-	-	273,358	324,174	2.2	7,737	15,046	8.7
Private.....	-	-	-	211,319	500,872	11.4	2,905	14,451	22.2
Other mental health facilities.....	33,350	24,037	-4.0	66,636	111,273	6.6	8,783	8,916	0.2

¹Revised data. 1979 data are not available for Veterans Administration neuropsychiatric hospitals and general hospital psychiatric services (Veterans Administration and non-Federal), 1980 data are used for federally funded community mental health centers, 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.

NOTE: Comparable data for years later than 1979 are not available because of reclassification of facility types by the National Institute of Mental Health in 1981.

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

Table 57. Inpatient and outpatient care episodes in selected mental health facilities and number per 1,000 civilian population, according to type of facility: United States, selected years 1955-81

(Data are based on reporting by facilities)

Type of facility	Year				
	1955	1965	1975	1979 ¹	1981 ²
	Number of episodes in thousands				
All facilities.....	1,675	2,637	6,435	6,360	5,863
Inpatient services.....	1,296	1,566	1,817	1,758	1,606
General hospital psychiatric service.....	266	519	566	562	562
State and county hospitals.....	819	805	599	527	499
Private hospitals ³	123	125	165	184	211
Veterans Administration psychiatric service ⁴	88	116	214	206	206
Federally funded community mental health centers ⁵	---	---	247	254	---
Other multiservice mental health facilities ⁵	---	---	26	25	128
Outpatient services ⁶	379	1,071	4,618	4,602	4,257
	Number per 1,000 civilian population				
All facilities.....	10.3	13.8	30.3	28.6	25.8
Inpatient services.....	8.0	8.2	8.5	7.7	7.1
General hospital psychiatric service.....	1.6	2.7	2.7	2.5	2.5
State and county hospitals.....	5.0	4.2	2.8	2.4	2.2
Private hospitals ³	0.8	0.7	0.8	0.8	0.9
Veterans Administration psychiatric service ⁴	0.5	0.6	1.0	0.9	0.9
Federally funded community mental health centers ⁵	---	---	1.2	1.1	---
Other multiservice mental health facilities ⁵	---	---	0.0	0.0	0.6
Outpatient services ⁶	2.3	5.6	21.9	20.6	18.7

¹Revised data. Since 1979 data are not available for Veterans Administration medical centers and clinics, non-Federal general hospital psychiatric services, and inpatient and outpatient services, or federally funded community mental health centers (CMHC's); 1980 data are used.

²Provisional data. Since 1981 data are not available for non-Federal general hospital psychiatric services; 1980 data are used.

³Includes estimates of episodes of care in residential treatment centers for emotionally disturbed children.

⁴Includes Veterans Administration medical centers and clinics.

⁵With the advent of block grants, the changes in definition of CMHC's, and the discontinuation of CMHC monitoring by the National Institute of Mental Health, facilities formerly classified as CMHC's have been reclassified as other facility types, primarily "multiservice mental health facilities, not elsewhere classified" and "freestanding psychiatric outpatient clinics."

⁶Excludes outpatient episodes of Veterans Administration hospitals and clinics.

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; Mental Health, United States, 1983, Public Health Service, Rockville, Md., 1983; Unpublished data from the Survey and Reports Branch, Division of Biometry and Epidemiology.

Table 58. Inpatient days of care in mental health facilities and average annual percent change, according to type of facility: United States, 1971, 1975, and 1979

(Data are based on reporting by facilities)

Type of facility	Year			Average annual percent change 1971-79
	1971	1975	1979 ¹	
	Number of inpatient days in thousands			
All facilities ²	153,104	104,677	84,866	-7.1
Non-Federal psychiatric hospitals.....	123,420	74,985	55,663	-9.5
State and county hospitals.....	119,200	70,584	50,589	-10.2
Private hospitals.....	4,220	4,401	5,074	2.3
Veterans Administration psychiatric services ³	14,277	11,725	10,628	-4.8
Non-Federal general hospital psychiatric units.....	6,826	8,349	8,435	3.6
Residential treatment centers for emotionally disturbed children.....	6,356	5,900	6,531	0.3
Federally funded community mental health centers.....	2,225	3,718	3,609	5.5

¹Revised data. 1979 data are not available for Veterans Administration neuropsychiatric hospitals and general hospital inpatient psychiatric units (Veterans Administration and non-Federal), 1980 data are used for federally funded community mental health centers, 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 percent of all inpatient days in each year.

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

NOTE: Comparable data for years later than 1979 are not available because of reclassification of facility types by the National Institute of Mental Health in 1981.

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

Table 59. Persons employed in the health service industry, according to place of employment:
United States, selected years 1970-83

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

Place of employment	Year							
	1970 ¹	1975	1978	1979	1980	1981	1982	1983
	Number of persons in thousands							
Total.....	4,246	5,945	6,798	6,990	7,339	7,617	7,810	7,874
Offices of physicians.....	477	618	771	775	777	811	898	888
Offices of dentists.....	222	331	366	392	415	423	415	441
Offices of chiropractors ²	19	30	33	36	40	46	53	54
Hospitals.....	2,690	3,441	3,854	3,925	4,036	4,186	4,341	4,348
Convalescent institutions.....	509	891	1,020	1,048	1,199	1,230	1,217	1,342
Other health service sites.....	330	634	754	814	872	921	886	800

¹April 1, derived from decennial census; all other data years are annual averages from the Current Population Survey.
²Data for 1978-82 are from the American Chiropractic Association; data for the preceding years and 1983 are from the U.S. Bureau of Labor Statistics.

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: Labor Force Statistics Derived from the Current Population Survey: A Databook, Vol. I. Washington. U.S. Government Printing Office, Sept. 1982; Employment and Earnings, January 1983. Vol. 31, No. I. Washington. U.S. Government Printing Office, Jan. 1984; American Chiropractic Association: Unpublished data.

Table 60. Active physicians, 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	Type of physician			Active physicians per 10,000 population
	Total	Doctors of medicine	Doctors of osteopathy	
	Number of physicians			
1950.....	219,900	209,000	10,900	14.1
1960.....	259,400	247,300	12,200	14.0
1970.....	326,500	314,200	12,300	15.6
1971.....	337,400	325,000	12,400	16.1
1972.....	348,300	335,500	12,800	16.4
1973.....	355,700	342,500	13,200	16.4
1974.....	370,000	356,400	13,600	16.9
1975.....	384,500	370,400	14,100	17.4
1976.....	399,500	385,000	14,500	17.9
1977.....	405,900	390,800	15,100	18.0
1978.....	424,000	408,300	15,700	18.6
1979.....	440,400	424,000	16,400	19.1
1980.....	457,500	440,400	17,100	19.7
1985.....	527,900	506,000	21,900	22.1
1990.....	594,600	566,900	27,800	23.8
2000.....	706,500	667,900	38,600	26.4

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, 1990, and 2000, 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: Report to the President and Congress on the Status of Health Personnel in the United States. Health Resources and Services Administration. To be published.

Table 61. Physicians, according to activity: United States, selected years 1970-82

(Data are based on reporting by physicians)

Activity	Year					
	1970	1975	1978	1980	1981	1982
	Number of physicians					
Doctors of medicine.....	328,020	388,626	432,434	462,276	479,379	495,815
Professionally active physicians.....	304,926	335,608	371,343	409,992	425,568	443,888
Non-Federal.....	278,855	309,410	352,390	393,407	407,125	425,795
Patient care.....	252,778	285,345	322,835	358,470	370,096	389,468
Office-based practice.....	187,637	211,776	237,071	269,001	284,313	295,131
General practice ¹	50,415	45,863	44,649	47,265	48,883	49,883
Internal medicine.....	22,841	28,070	33,485	40,276	43,629	45,484
Pediatrics.....	10,203	12,559	14,602	17,204	18,258	19,145
General surgery.....	17,975	19,613	20,279	22,262	22,513	23,092
Obstetrics and gynecology.....	13,732	15,469	17,325	19,306	20,640	21,421
Other specialty.....	72,471	90,202	106,731	122,688	130,390	136,106
Hospital-based practice.....	65,141	73,569	85,764	89,469	85,783	94,337
Residents ²	45,514	53,150	56,866	59,127	59,873	65,949
Full-time hospital staff.....	19,627	20,419	28,898	30,342	25,910	28,388
Other professional activity ³	26,077	24,065	29,555	34,937	37,029	36,327
Federal.....	26,071	26,198	18,953	16,585	18,443	18,093
Patient care.....	20,566	22,325	15,777	13,513	14,543	14,141
Office-based practice.....	2,819	1,841	865	679	1,375	1,517
Hospital-based practice.....	17,747	20,484	14,912	12,834	13,168	12,624
Residents ²	5,173	4,089	3,297	2,323	2,664	2,208
Full-time hospital staff.....	12,574	16,395	11,615	10,511	10,504	10,416
Other professional activity ³	5,505	3,873	3,176	3,072	3,900	3,952
Inactive physicians.....	19,533	21,360	26,698	25,609	34,833	35,485
Not classified ⁴	357	25,790	25,102	20,285	13,765	13,121
Unknown ⁵	3,204	5,868	9,291	6,390	5,213	3,321

¹Includes general practice and family practice.²Includes interns and residents, all years.³Includes medical teaching, administration, research, and other.⁴Information not available.⁵Physicians with unknown address.

NOTE: Federal and non-Federal doctors of medicine 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.); 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.); 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.); Roback, G. A. and Eiler, M. A.: Physician Characteristics and Distribution in the U.S. Chicago. American Medical Association, 1983. (Copyright 1983: Used with the permission of the American Medical Association.); Eiler, M. A.: Physician Characteristics and Distribution in the U.S., Chicago. American Medical Association, 1984. (Copyright 1984: Used with the permission of the American Medical Association.)

Table 62. Active health personnel and number per 100,000 population, according to occupation and geographic region: United States, 1970, 1980, and 1982

(Data are based on reporting by health personnel)

Year and occupation	Number of active health personnel	United States	Geographic region			
			North-east	North Central	South	West
1970		Number per 100,000 population ¹				
Physicians ²	290,862	142.7	185.0	127.5	114.8	158.2
M.D.'s ³	279,212	137.0	178.7	118.2	111.5	154.8
D.O.'s.....	11,650	5.7	6.3	9.3	3.3	3.4
Dentists ²	95,680	47.4	58.9	46.3	35.3	54.9
Optometrists.....	18,400	9.0	9.7	10.3	6.6	10.5
Pharmacists ³	112,570	55.4	60.1	57.5	50.6	52.9
Podiatrists.....	7,110	3.5	6.0	3.6	1.6	3.0
Registered nurses ⁴	750,000	368.9	491.2	367.5	281.8	355.9
Veterinarians.....	25,900	12.7	8.3	16.1	11.8	15.0
1980						
Physicians ^{2,6}	429,000	190.4	236.4	172.9	163.8	207.0
M.D.'s ^{3,5,6}	412,490	182.9	227.7	160.4	159.5	202.7
D.O.'s.....	16,510	7.5	8.7	12.5	4.3	4.3
Dentists ²	121,240	54.9	65.2	53.1	44.4	63.7
Optometrists.....	22,330	10.1	10.2	11.2	8.0	12.3
Pharmacists ³	142,780	64.7	60.8	67.7	65.0	64.6
Podiatrists.....	8,880	4.0	6.3	3.9	2.5	4.1
Registered nurses ^{4,6}	1,272,900	560.3	735.5	581.9	444.4	534.8
Veterinarians.....	36,000	16.3	10.8	19.9	16.0	18.5
1982						
Physicians ^{2,7}	437,840	192.2	241.3	175.8	165.0	207.7
M.D.'s ^{3,5,7}	419,870	184.4	231.9	162.6	160.1	202.8
D.O.'s ⁷	17,970	7.8	9.4	13.2	4.9	4.9
Dentists ²	126,810	54.9	66.8	55.2	43.9	60.5
Optometrists.....	23,300	10.0	10.1	11.3	7.9	11.9
Pharmacists ³	149,630	64.3	66.3	71.2	64.7	52.6
Podiatrists.....	---	---	---	---	---	---
Registered nurses ⁴	1,357,300	586.2	761.5	624.8	467.1	550.3
Veterinarians.....	38,810	16.7	11.4	21.0	16.0	17.9

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.

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

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

⁴Data for registered nurses are as of January 1, 1971 and 1981 for 1970 and 1980 and Dec. 31, 1982 for 1982.

⁵Data for physicians (M.D.'s) are based on Bureau of Health Professions estimates and differ from data in Table 61.

⁶Revised figures.

⁷Data are for 1981.

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; Bureau of Health Professions: Report to the President and Congress on the Status of Health Personnel in the United States. Health Resources and Services Administration. To be published; Unpublished data.

Table 63. Physicians per 10,000 civilian population, according to geographic region, primary specialty, and activity: United States, 1977 and 1982

(Data are based on reporting by physicians)

Year, specialty, and activity	United States	Geographic region			
		North-east	North Central	South	West
1977		Number of physicians per 10,000 civilian population			
Total ¹	16.4	20.4	14.4	14.3	18.5
Patient care.....	14.3	17.4	12.7	12.5	16.2
Office based.....	10.5	11.6	9.2	9.5	13.0
Primary care ²	4.1	4.5	3.8	3.7	5.0
Medical specialties ³	0.6	0.8	0.5	0.6	0.8
Surgical specialties ⁴	3.3	3.7	2.8	3.2	4.0
Hospital based.....	3.8	5.8	3.5	3.0	3.2
Other professional activities ⁵	1.3	1.8	1.0	1.0	1.4
1982					
Total ¹	19.1	24.2	16.9	16.5	20.7
Patient care.....	16.9	20.9	15.2	14.8	18.5
Office based.....	12.8	14.3	11.4	11.6	15.2
Primary care ²	5.0	5.5	4.7	4.4	5.8
Medical specialties ³	0.9	1.1	0.7	0.8	1.1
Surgical specialties ⁴	3.8	4.2	3.3	3.6	4.4
Hospital based.....	4.1	6.7	3.8	3.2	3.3
Other professional activities ⁵	1.6	2.4	1.3	1.3	1.6

¹Includes active non-Federal doctors of medicine (M.D.'s) in all other specialties not shown separately and those not classified.

²Includes general practice, internal medicine, and pediatrics.

³Includes dermatology, pediatric allergy, pediatric cardiology, gastroenterology, pulmonary diseases, allergy, and cardiovascular diseases.

⁴Includes general and neurological surgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otolaryngology, plastic surgery, colon and rectal surgery, thoracic surgery, and urology.

⁵Includes medical teaching, administration, research, and other.

SOURCES: Goodman, L. J. and Bobula, J. D.: Physician Distribution and Medical Licensure in the U.S., 1977. Chicago. American Medical Association, 1978. (Copyright 1978: Used with the permission of the American Medical Association.); Eiler, M. A.: Physician Characteristics and Distribution in the U.S. Chicago. American Medical Association, 1984. (Copyright 1984: Used with the permission of the American Medical Association.); U.S. Bureau of the Census: Current Population Reports. Series P-25, No. 944. Washington. U.S. Government Printing Office, 1984; Unpublished data.

Table 64. Graduates of health professions schools and number of schools, according to profession: United States, selected 1950-80 estimates and 1990 and 2000 projections

(Data are based on reporting by health professions schools)

Year	Profession					
	Medicine	Osteopathy	Chiropractic	Dentistry	Optometry	Pharmacy
	Number of graduates					
1950.....	5,553	373	---	2,565	961	---
1960.....	7,081	427	660	3,253	364	3,497
1970.....	8,367	432	642	3,749	445	4,758
1975.....	12,714	702	1,093	4,969	806	6,712
1978.....	14,393	963	1,544	5,324	980	7,785
1979.....	14,966	1,004	1,559	5,424	1,051	7,556
1980.....	15,135	1,033	2,049	5,256	955	7,278
1990.....	16,240	1,480	2,860	4,430	1,050	5,250
2000.....	16,080	1,460	2,950	4,290	1,050	5,120
	Number of schools					
1950.....	79	6	20	42	10	---
1960.....	86	6	12	47	10	76
1970.....	103	7	11	53	11	74
1975.....	114	9	12	59	12	73
1978.....	122	12	14	59	12	72
1979.....	125	14	14	60	13	72
1980.....	126	14	14	60	15	72
1990.....	127	15	15	60	16	72
2000.....	127	15	15	60	16	72

SOURCES: Bureau of Health Professions: Report to the President and Congress on the Status of Health Personnel in the United States. Health Resources and Services Administration. To be published; Unpublished data; American Chiropractic Association: Unpublished data.

Table 65. Short-stay hospitals, beds, and occupancy rates, according to type of ownership: United States, selected years 1960-82

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

Type of ownership	Year								
	1960	1970	1975	1977	1978	1979	1980	1981	1982
Hospitals									
	Number								
All ownerships.....	5,768	6,193	6,310	6,307	6,266	6,247	6,229	6,190	6,173
Federal.....	361	334	331	334	331	324	325	311	310
Non-Federal.....	5,407	5,859	5,979	5,973	5,935	5,923	5,904	5,879	5,863
Nonprofit.....	3,291	3,386	3,364	3,371	3,360	3,350	3,339	3,356	3,354
Proprietary.....	856	769	775	751	732	727	730	729	748
State-local government..	1,260	1,704	1,840	1,851	1,843	1,846	1,835	1,794	1,761
Beds									
All ownerships.....	735,451	935,724	1,036,025	1,059,903	1,067,566	1,073,671	1,080,164	1,093,370	1,099,892
Federal.....	96,394	87,492	89,049	86,037	87,907	85,984	88,144	86,596	84,712
Non-Federal.....	639,057	848,232	946,976	973,866	979,659	987,687	992,020	1,006,774	1,015,180
Nonprofit.....	445,753	591,937	658,948	679,501	683,856	690,278	692,929	706,331	711,917
Proprietary.....	37,029	52,739	73,495	80,322	81,046	83,338	87,033	87,743	91,096
State-local government..	156,275	203,556	214,533	214,043	214,757	214,071	212,058	212,700	212,167
Occupancy rate									
	Percent of beds occupied								
All ownerships.....	75.7	77.9	75.0	73.9	73.7	74.0	75.6	76.0	75.3
Federal.....	82.5	77.5	77.6	77.3	76.3	76.3	77.8	76.2	77.2
Non-Federal.....	74.7	78.0	74.8	73.6	73.5	73.8	75.4	75.9	75.2
Nonprofit.....	76.6	80.1	77.4	76.3	76.1	76.5	78.2	78.5	77.8
Proprietary.....	65.4	72.2	65.9	64.6	63.8	63.9	65.2	66.4	65.5
State-local government..	71.6	73.2	69.7	68.3	68.7	69.1	70.7	71.2	70.7

NOTE: 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, 1976-83 Editions. Chicago, 1976-83. (Copyrights 1961, 1971, 1976-83: Used with the permission of the American Hospital Association.)

Table 66. Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940-82

(Data are based on reporting by facilities)

Geographic division and State	Year							Period			
	1940 ¹	1950 ¹	1960 ²	1970	1975	1980	1982	1940-60 ^{1,2}	1960-70 ²	1970-80	1980-82
	Community hospital beds per 1,000 population ³							Average annual percent change			
United States.....	3.2	3.3	3.6	4.3	4.6	4.5	4.4	0.6	1.8	0.5	-1.1
New England.....	4.4	4.2	3.9	4.1	4.2	4.1	4.1	-0.6	0.5	0.0	0.0
Maine.....	3.0	3.2	3.4	4.7	4.7	4.7	4.4	0.6	3.3	0.0	-3.2
New Hampshire.....	4.2	4.2	4.4	4.0	4.2	3.9	3.6	0.2	-0.9	-0.3	-3.9
Vermont.....	3.3	4.0	4.5	4.5	4.8	4.4	4.3	1.6	-	-0.2	-1.1
Massachusetts.....	5.1	4.8	4.2	4.4	4.6	4.4	4.5	-1.0	0.5	0.0	1.1
Rhode Island.....	3.9	3.8	3.7	4.0	3.8	3.8	3.7	-0.3	0.8	-0.5	-1.3
Connecticut.....	3.7	3.6	3.4	3.4	3.5	3.5	3.5	-0.4	-	0.3	0.0
Middle Atlantic.....	3.9	3.8	4.0	4.4	4.6	4.6	4.6	0.1	1.0	0.4	0.0
New York.....	4.3	4.1	4.3	4.6	4.7	4.5	4.6	-	0.7	-0.2	1.1
New Jersey.....	3.5	3.2	3.1	3.6	4.0	4.2	4.1	-0.6	1.5	1.6	-1.2
Pennsylvania.....	3.5	3.8	4.1	4.7	4.7	4.8	4.8	0.8	1.4	0.2	0.0
East North Central....	3.2	3.2	3.6	4.4	4.7	4.7	4.8	0.6	2.0	0.7	1.1
Ohio.....	2.7	2.9	3.4	4.2	4.6	4.7	4.7	1.2	2.1	1.1	0.0
Indiana.....	2.3	2.6	3.1	4.0	4.4	4.5	4.5	1.5	2.6	1.2	0.0
Illinois.....	3.4	3.6	4.0	4.7	4.9	5.1	5.0	0.8	1.6	0.8	-1.0
Michigan.....	4.0	3.3	3.3	4.3	4.5	4.4	4.4	-1.0	2.7	0.2	0.0
Wisconsin.....	3.4	3.7	4.3	5.2	5.1	4.9	5.1	1.2	1.9	-0.6	2.0
West North Central....	3.1	3.7	4.3	5.7	5.8	5.8	5.9	1.6	2.9	0.2	0.9
Minnesota.....	3.9	4.4	4.8	6.1	6.0	5.7	5.7	1.0	2.4	-0.7	0.0
Iowa.....	2.7	3.2	3.9	5.6	6.0	5.7	5.7	1.9	3.7	0.2	0.0
Missouri.....	2.9	3.3	3.9	5.1	5.5	5.7	5.7	1.5	2.7	1.1	0.0
North Dakota.....	3.5	4.3	5.2	6.8	6.7	7.4	7.3	2.0	2.7	0.8	-0.7
South Dakota.....	2.8	4.4	4.5	5.6	5.5	5.5	6.4	2.4	2.2	-0.2	7.9
Nebraska.....	3.4	4.2	4.4	6.2	6.1	6.0	6.4	1.3	3.5	-0.3	3.3
Kansas.....	2.8	3.4	4.2	5.4	5.7	5.8	5.8	2.0	2.5	0.7	0.0
South Atlantic.....	2.5	2.8	3.3	4.0	4.3	4.5	4.4	1.4	1.9	1.2	-1.1
Delaware.....	4.4	3.9	3.7	3.7	3.5	3.6	3.5	-0.9	-	-0.3	-1.4
Maryland.....	3.9	3.6	3.3	3.1	3.2	3.6	3.6	-0.8	-0.6	1.5	0.0
District of Columbia.....	5.5	5.5	5.9	7.4	7.1	7.3	7.6	0.4	2.3	-0.1	2.0
Virginia.....	2.2	2.5	3.0	3.7	4.1	4.1	4.1	1.6	2.1	1.0	0.0
West Virginia.....	2.7	3.1	4.1	5.4	5.8	5.5	5.4	2.1	2.8	0.2	-0.9
North Carolina.....	2.2	2.6	3.4	3.8	4.0	4.2	4.1	2.2	1.1	1.0	-1.2
South Carolina.....	1.8	2.4	2.9	3.7	3.9	3.9	3.8	2.4	2.5	0.5	-1.3
Georgia.....	1.7	2.0	2.8	3.8	4.4	4.6	4.5	2.5	3.1	1.9	-1.1
Florida.....	2.8	2.9	3.1	4.4	4.9	5.1	4.7	0.5	3.6	1.5	-4.0
East South Central....	1.7	2.1	3.0	4.4	4.9	5.1	5.1	2.9	3.9	1.5	0.0
Kentucky.....	1.8	2.2	3.0	4.0	4.3	4.5	4.3	2.6	2.9	1.2	-2.2
Tennessee.....	1.9	2.3	3.4	4.7	5.4	5.5	5.6	3.0	3.3	1.6	0.9
Alabama.....	1.5	2.0	2.8	4.3	4.9	5.1	5.2	3.2	4.4	1.7	1.0
Mississippi.....	1.4	1.7	2.9	4.4	4.9	5.3	5.4	3.7	4.3	1.9	0.9

See footnotes at end of table.

Table 66. Community hospital beds per 1,000 population and average annual percent change, according to geographic division and State: United States, selected years 1940-82--Continued

(Data are based on reporting by facilities)

Geographic division and State	Year							Period			
	1940 ¹	1950 ¹	1960 ²	1970	1975	1980	1982	1940-60 ^{1,2}	1960-70 ²	1970-80	1980-82
	Community hospital beds per 1,000 population ³							Average annual percent change			
West South Central....	2.1	2.7	3.3	4.3	4.7	4.7	4.4	2.3	2.7	0.9	-3.2
Arkansas.....	1.4	1.6	2.9	4.2	4.6	5.0	5.1	3.7	3.8	1.8	1.0
Louisiana.....	3.1	3.8	3.9	4.2	4.7	4.8	4.5	1.2	0.7	1.3	-3.2
Oklahoma.....	1.9	2.5	3.2	4.5	4.6	4.6	4.4	2.6	3.5	0.2	-2.2
Texas.....	2.0	2.7	3.3	4.3	4.7	4.7	4.3	2.5	2.7	0.9	-4.3
Mountain.....	3.6	3.8	3.5	4.3	4.0	3.8	3.6	-0.1	2.1	-1.2	-2.7
Montana.....	4.9	5.3	5.1	5.8	5.2	5.9	5.6	0.2	1.3	0.2	-2.6
Idaho.....	2.6	3.4	3.2	4.0	3.9	3.7	3.6	1.0	2.3	-0.8	-1.4
Wyoming.....	3.5	3.9	4.6	5.5	4.5	3.6	3.7	1.4	1.8	-4.1	1.4
Colorado.....	3.9	4.2	3.8	4.6	4.4	4.2	3.9	-0.1	1.9	-0.9	-3.6
New Mexico.....	2.7	2.2	2.9	3.5	3.4	3.1	3.3	0.4	1.9	-1.2	3.2
Arizona.....	3.4	4.0	3.0	4.1	3.8	3.6	3.4	-0.6	3.2	-1.3	-2.8
Utah.....	3.2	2.9	2.8	3.6	3.2	3.1	2.8	-0.7	2.5	-1.5	-5.0
Nevada.....	5.0	4.4	3.9	4.2	4.3	4.2	3.7	-1.2	0.7	0.0	-6.1
Pacific.....	4.1	3.2	3.1	3.7	3.9	3.5	3.3	-1.4	1.8	-0.6	-2.9
Washington.....	3.4	3.6	3.3	3.5	3.4	3.1	3.0	-0.1	0.6	-1.2	-1.6
Oregon.....	3.5	3.1	3.5	4.0	3.9	3.5	3.5	-	1.3	-1.3	0.0
California.....	4.4	3.3	3.0	3.8	4.0	3.6	3.4	-1.9	2.4	-0.5	-2.8
Alaska.....	...	...	2.4	2.3	2.2	2.7	2.4	...	-0.4	1.6	-5.7
Hawaii.....	...	...	3.7	3.4	3.3	3.1	3.1	...	-0.8	-0.9	0.0

¹1940 and 1950 data are estimated based on published figures.

²1960 includes hospital units of institutions.

³Civilian population.

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. JAHA 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, 640, 642, 868, and 876. Washington. U.S. Government Printing Office, 1953, 1965, 1971, 1976, 1979, and 1980; Unpublished data.

Table 67. Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940-82

(Data are based on reporting by facilities)

Geographic division and State	Year						Period			
	1940 ¹	1960 ²	1970	1975	1980	1982	1940-60 ^{1,2}	1960-70 ²	1970-80	1980-82
	Percent of beds occupied						Average annual percent change			
United States.....	69.9	74.7	77.3	74.2	75.2	75.0	0.3	0.3	-0.3	-0.1
New England.....	72.5	75.2	79.7	77.6	80.1	80.7	0.2	0.6	0.1	0.4
Maine.....	72.4	73.2	73.0	71.1	74.5	72.5	0.1	-0.0	0.2	-1.4
New Hampshire.....	65.3	66.5	73.4	71.4	73.2	74.0	0.1	1.0	-0.0	0.5
Vermont.....	68.8	68.5	76.3	70.7	73.7	75.0	-0.0	1.1	-0.3	0.9
Massachusetts.....	71.8	75.8	80.3	79.1	81.7	82.5	0.3	0.6	0.2	0.5
Rhode Island.....	77.7	75.7	82.9	82.2	85.9	84.9	-0.1	0.9	0.4	-0.6
Connecticut.....	75.9	78.2	82.6	78.6	80.4	82.0	0.1	0.5	-0.3	1.0
Middle Atlantic.....	75.5	78.1	82.4	81.4	83.2	83.9	0.2	0.5	0.1	0.4
New York.....	78.9	79.4	82.9	84.2	85.9	87.3	0.0	0.4	0.4	0.8
New Jersey.....	72.4	78.4	82.5	81.1	82.8	81.8	0.4	0.5	0.0	-0.6
Pennsylvania.....	71.3	76.0	81.5	77.2	79.5	80.3	0.3	0.7	-0.2	0.5
East North Central.....	71.0	78.4	79.5	77.2	76.9	75.9	0.5	0.1	-0.3	-0.7
Ohio.....	72.1	81.3	81.8	80.6	79.2	78.8	0.6	0.1	-0.3	-0.3
Indiana.....	68.5	79.6	80.3	76.4	77.6	77.6	0.8	0.1	-0.3	0.0
Illinois.....	73.1	76.0	79.3	75.7	74.9	73.7	0.2	0.4	-0.6	-0.8
Michigan.....	71.5	80.5	80.6	78.8	78.2	77.3	0.6	0.0	-0.3	-0.6
Wisconsin.....	65.2	73.9	73.2	71.5	73.6	71.4	0.6	-0.1	0.1	-1.5
West North Central.....	65.7	71.8	73.6	70.6	71.2	70.3	0.4	0.2	-0.3	-0.6
Minnesota.....	71.0	72.3	73.9	70.7	73.7	72.0	0.1	0.2	-0.0	-1.2
Iowa.....	63.6	72.6	71.9	67.4	68.7	69.7	0.7	-0.1	-0.5	0.7
Missouri.....	68.6	75.8	79.3	75.9	75.1	72.8	0.5	0.5	-0.5	-1.5
North Dakota.....	61.9	71.3	67.1	69.1	68.6	67.4	0.7	-0.6	0.2	-0.9
South Dakota.....	59.1	66.0	66.3	63.8	60.6	67.5	0.6	0.0	-0.9	5.5
Nebraska.....	59.0	65.6	69.9	65.8	67.4	69.0	0.5	0.6	-0.4	1.2
Kansas.....	60.4	69.1	71.4	69.9	68.8	65.6	0.7	0.3	-0.4	-2.4
South Atlantic.....	66.7	74.8	77.9	73.9	75.5	75.4	0.6	0.4	-0.3	-0.1
Delaware.....	59.2	70.2	78.8	81.0	81.8	84.6	0.9	1.2	0.4	1.7
Maryland.....	74.6	73.9	79.3	79.3	84.0	82.1	-0.0	0.7	0.6	-1.1
District of Columbia.....	76.2	80.8	77.7	78.9	83.0	82.5	0.3	-0.4	0.7	-0.3
Virginia.....	70.0	78.0	81.1	77.4	77.8	77.4	0.5	0.4	-0.4	-0.3
West Virginia.....	62.1	74.5	79.3	75.3	75.6	74.6	0.9	0.6	-0.5	-0.7
North Carolina.....	64.6	73.9	78.5	77.4	77.8	77.0	0.7	0.6	-0.1	-0.5
South Carolina.....	69.1	76.9	76.4	74.2	77.0	75.6	0.5	-0.1	0.1	-0.9
Georgia.....	62.7	71.7	76.5	68.2	70.4	70.1	0.7	0.7	-0.8	-0.2
Florida.....	57.5	73.9	76.2	70.2	71.7	73.5	1.3	0.3	-0.6	1.2
East South Central.....	62.6	71.8	78.2	74.0	74.6	73.5	0.7	0.9	-0.5	-0.7
Kentucky.....	61.6	73.4	79.6	77.3	77.4	77.5	0.9	0.8	-0.3	0.1
Tennessee.....	65.5	75.9	78.2	74.4	75.9	73.0	0.7	0.3	-0.3	-1.9
Alabama.....	59.0	70.8	80.0	72.6	73.3	73.8	0.9	1.2	-0.9	0.3
Mississippi.....	63.8	62.8	73.6	71.4	70.5	69.2	-0.1	1.6	-0.4	-0.9

See footnotes at end of table.

Table 67. Occupancy rate in community hospitals and average annual percent change, according to geographic division and State: United States, selected years 1940-82--Continued

(Data are based on reporting by facilities)

Geographic division and State	Year						Period			
	1940 ¹	1960 ²	1970	1975	1980	1982	1940-60 ^{1,2}	1960-70 ²	1970-80	1980-82
	Percent of beds occupied						Average annual percent change			
West South Central.....	62.5	68.7	73.2	69.1	69.7	70.2	0.5	0.6	-0.5	0.4
Arkansas.....	55.6	70.0	74.4	70.3	69.6	67.0	1.2	0.6	-0.7	-1.9
Louisiana.....	75.0	67.9	73.6	68.8	69.7	69.1	-0.5	0.8	-0.5	-0.4
Oklahoma.....	54.5	71.0	72.5	69.3	68.1	70.1	1.3	0.2	-0.6	1.5
Texas.....	59.6	68.2	73.0	69.0	70.1	71.1	0.7	0.7	-0.4	0.7
Mountain.....	60.9	69.9	71.2	68.4	69.6	69.1	0.7	0.2	-0.2	-0.4
Montana.....	62.8	60.3	65.9	61.4	66.1	66.7	-0.2	0.9	0.0	0.5
Idaho.....	65.4	55.9	66.1	68.2	65.2	65.3	-0.8	1.7	-0.1	0.1
Wyoming.....	47.5	61.1	63.1	55.9	57.2	58.4	1.3	0.3	-1.0	1.0
Colorado.....	62.1	80.6	74.0	69.1	71.6	71.0	1.3	-0.9	-0.3	-0.4
New Mexico.....	47.8	65.1	69.8	63.6	66.2	70.3	1.6	0.7	-0.5	3.1
Arizona.....	61.2	74.2	73.3	73.5	74.2	70.1	1.0	-0.1	0.1	-2.8
Utah.....	65.8	70.0	73.7	73.6	70.0	70.7	0.3	0.5	-0.5	0.5
Nevada.....	67.9	70.7	72.7	67.2	68.8	68.6	0.2	0.3	-0.5	-0.1
Pacific.....	69.7	71.4	71.0	66.2	69.0	68.7	0.1	-0.1	-0.3	-0.2
Washington.....	67.5	63.4	69.7	67.7	71.7	70.2	-0.3	1.0	0.3	-1.1
Oregon.....	71.2	65.8	69.3	66.6	69.3	66.5	-0.4	0.5	0.0	-2.0
California.....	69.9	74.3	71.3	66.0	68.5	68.4	0.3	-0.4	-0.4	-0.1
Alaska.....	...	53.8	59.1	63.3	58.3	65.4	...	0.9	-0.1	5.9
Hawaii.....	...	61.5	75.7	68.1	74.7	80.0	...	2.1	-0.1	3.5

¹1940 data are estimated based on published figures.

²1960 includes hospital units of institutions.

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. (Copyright 1941: Used with the permission of the American Medical Association.); American Hospital Association: Hospitals. *JAHA* 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 68. 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 1960-82

(Data are based on reporting by facilities)

Geographic division and State	Year					Period		
	1960 ¹	1970	1975	1980	1982	1960-70 ¹	1970-80	1980-82
	Number of employees per 100 average daily patients					Average annual percent change		
United States.....	226	302	349	394	411	2.9	2.7	2.1
New England.....	249	351	412	456	478	3.5	2.7	2.4
Maine.....	227	289	359	409	440	2.4	3.5	3.7
New Hampshire.....	240	310	347	400	423	2.6	2.6	2.8
Vermont.....	227	318	346	348	373	3.4	0.9	3.5
Massachusetts.....	252	365	436	488	507	3.8	2.9	1.9
Rhode Island.....	270	383	433	454	468	3.6	1.7	1.5
Connecticut.....	247	347	397	440	464	3.5	2.4	2.7
Middle Atlantic.....	225	311	352	383	398	3.3	2.1	1.9
New York.....	233	336	375	396	401	3.7	1.7	0.6
New Jersey.....	225	278	308	332	361	2.1	1.8	4.3
Pennsylvania.....	214	287	340	390	412	3.0	3.1	2.8
East North Central.....	226	299	343	396	415	2.8	2.8	2.4
Ohio.....	232	302	334	392	421	2.7	2.6	3.6
Indiana.....	216	280	320	374	388	2.6	2.9	1.9
Illinois.....	226	301	357	407	425	2.9	3.1	2.2
Michigan.....	239	313	364	417	442	2.7	2.9	3.0
Wisconsin.....	199	277	315	367	361	3.4	2.9	-0.8
West North Central.....	212	273	305	357	364	2.6	2.7	1.0
Minnesota.....	220	273	296	347	325	2.2	2.4	-3.2
Iowa.....	208	258	293	349	351	2.2	3.1	0.3
Missouri.....	217	289	326	385	416	2.9	2.9	3.9
North Dakota.....	177	254	273	295	313	3.7	1.5	3.0
South Dakota.....	188	247	294	352	296	2.8	3.6	-8.3
Nebraska.....	220	276	298	326	337	2.3	1.7	1.7
Kansas.....	210	270	313	368	396	2.5	3.1	3.7
South Atlantic.....	217	295	343	379	396	3.1	2.5	2.2
Delaware.....	243	328	390	405	426	3.0	2.1	2.6
Maryland.....	237	354	391	403	422	4.1	1.3	2.3
District of Columbia.....	240	363	443	483	531	4.2	2.9	4.9
Virginia.....	193	289	323	369	366	4.1	2.5	-0.4
West Virginia.....	198	255	298	351	374	2.6	3.2	3.2
North Carolina.....	196	277	319	363	384	3.5	2.7	2.9
South Carolina.....	185	257	302	356	359	3.3	3.3	0.4
Georgia.....	233	294	364	396	408	2.4	3.0	1.5
Florida.....	245	295	346	375	400	1.9	2.4	3.3
East South Central.....	227	275	306	348	363	1.9	2.4	2.1
Kentucky.....	229	276	292	332	352	1.9	1.9	3.0
Tennessee.....	231	284	315	359	375	2.1	2.4	2.2
Alabama.....	233	266	308	357	371	1.3	3.0	1.9
Mississippi.....	207	270	300	334	341	2.7	2.1	1.0

See notes at end of table.

Table 68. 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 1960-82--Continued

(Data are based on reporting by facilities)

Geographic division and State	Year					Period		
	1960 ¹	1970	1975	1980	1982	1960-70 ¹	1970-80	1980-82
	Number of employees per 100 average daily patients					Average annual percent change		
West South Central.....	225	297	346	384	413	2.8	2.6	3.7
Arkansas.....	209	274	318	355	364	2.7	2.6	1.3
Louisiana.....	218	292	354	392	446	3.0	3.0	6.7
Oklahoma.....	218	296	359	404	446	3.1	3.2	5.1
Texas.....	232	304	346	383	405	2.7	2.3	2.8
Mountain.....	226	299	364	413	425	2.8	3.3	1.4
Montana.....	216	247	301	302	298	1.4	2.0	-0.7
Idaho.....	255	281	321	374	360	1.0	2.9	-1.9
Wyoming.....	217	251	344	445	413	1.5	5.9	-3.7
Colorado.....	221	306	373	398	411	3.3	2.7	1.6
New Mexico.....	228	314	389	430	429	3.3	3.2	-0.1
Arizona.....	222	327	381	455	479	3.9	3.4	2.6
Utah.....	243	304	388	460	480	2.3	4.2	2.2
Nevada.....	224	284	344	427	474	2.4	4.2	5.4
Pacific.....	243	327	401	467	494	3.0	3.6	2.9
Washington.....	263	313	382	428	465	1.8	3.2	4.2
Oregon.....	232	303	387	417	459	2.7	3.2	4.9
California.....	241	334	407	481	506	3.3	3.7	2.6
Alaska.....	220	301	385	454	469	3.2	4.2	1.6
Hawaii.....	226	278	357	401	399	2.1	3.7	-0.2

¹1960 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. *JAHA* 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 69. Long-term hospitals, beds, and occupancy rates, according to type of hospital and ownership:
United States, selected years 1970-82

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

Type of hospital and ownership	Year						
	1970	1975	1978	1979	1980	1981	1982
Hospitals							
	Number						
General.....	75	44	24	22	17	20	19
Federal.....	38	23	12	11	9	12	11
Non-Federal.....	37	21	12	11	8	8	8
Psychiatric.....	459	419	375	380	381	394	387
Federal.....	33	26	24	24	23	22	23
Nonprofit.....	56	45	47	46	47	52	53
Proprietary.....	39	51	54	57	57	65	65
State-local government.....	331	297	250	253	254	255	246
Tuberculosis and other respiratory diseases.....	103	34	13	11	10	10	7
All other.....	200	196	160	156	150	139	132
Federal.....	1	2	3	2	1	1	2
Nonprofit.....	110	94	73	68	66	67	63
Proprietary.....	2	9	9	10	11	10	10
State-local government.....	87	91	75	76	72	61	57
Beds							
General.....	42,569	17,329	11,465	9,710	8,253	9,925	9,657
Federal.....	31,403	14,406	9,305	8,050	7,205	8,823	8,552
Non-Federal.....	11,166	2,923	2,160	1,660	1,048	1,102	1,105
Psychiatric.....	551,847	344,257	237,234	232,344	218,400	205,003	197,765
Federal.....	41,500	27,523	23,158	22,290	20,871	19,051	19,798
Nonprofit.....	8,892	5,366	6,274	6,951	6,645	6,944	7,051
Proprietary.....	3,399	4,821	5,162	5,837	5,877	6,834	6,947
State-local government.....	498,056	306,547	202,640	197,266	185,007	172,174	163,969
Tuberculosis and other respiratory diseases.....	19,937	5,699	2,641	2,084	1,500	1,492	995
All other.....	49,152	49,268	40,763	39,702	37,911	34,472	33,962
Federal.....	357	968	1,489	1,024	357	357	626
Nonprofit.....	12,638	12,733	10,120	9,864	10,038	10,328	10,046
Proprietary.....	101	879	986	1,185	1,356	1,259	1,252
State-local government.....	36,056	34,688	28,168	27,629	26,160	22,528	22,038
Occupancy rate							
	Percent of beds occupied						
General.....	79.2	84.4	83.1	81.7	83.9	86.4	86.0
Federal.....	80.4	85.2	82.8	82.0	84.6	87.6	86.4
Non-Federal.....	75.8	80.4	84.4	80.5	79.0	77.1	82.3
Psychiatric.....	84.9	81.3	81.7	83.7	85.9	86.7	86.9
Federal.....	83.4	88.3	85.7	84.8	87.9	87.7	86.1
Nonprofit.....	85.2	84.8	93.7	86.7	87.2	88.6	86.1
Proprietary.....	78.4	74.1	75.8	76.8	76.3	80.1	79.8
State-local government.....	85.0	80.8	81.0	83.7	86.0	86.8	87.4
Tuberculosis and other respiratory diseases.....	61.9	57.6	59.8	61.9	66.4	67.0	61.1
All other.....	83.3	82.3	83.3	85.8	85.9	86.3	87.9
Federal.....	73.4	86.3	65.0	65.2	65.3	65.0	74.3
Nonprofit.....	82.8	83.3	86.4	87.7	87.3	86.6	88.7
Proprietary.....	87.1	86.0	80.8	80.8	86.5	87.8	90.7
State-local government.....	83.6	81.7	83.2	86.1	85.6	86.4	87.7

SOURCES: American Hospital Association: Hospitals. *JAHA* 45(15):463-467, Aug. 1971; *Hospital Statistics, 1976-83 Editions*. Chicago, 1976-83. (Copyrights 1971, 1976-83: Used with the permission of the American Hospital Association.)

Table 70. Nursing homes with 25 or more beds, beds, and bed rates, according to geographic division and State:
United States, 1976 and 1980

(Data are based on reporting by facilities)

Geographic division and State	Nursing homes					
	Number		Beds		Bed rate ²	
	1976 ¹	1980	1976 ¹	1980	1976 ¹	1980
United States.....	14,129	14,316	1,295,067	1,416,757	56.4	57.5
New England.....	1,213	1,182	92,189	95,841	66.0	64.8
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	65.6	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
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
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	34,343	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
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.....	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
Mississippi.....	122	145	8,410	12,106	32.5	43.9

See footnotes at end of table.

Table 70. Nursing homes with 25 or more beds, beds, and bed rates, according to geographic division and State: United States, 1976 and 1980--Continued

(Data are based on reporting by facilities)

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

¹The 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.

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

³Excluded most homes for the aged.

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

Table 71. Beds and bed rates in psychiatric facilities, according to type of facility: United States, 1972, 1976, and 1982

(Data are based on reporting by facilities)

Type of facility	Year					
	1972	1976	1982 ¹	1972	1976	1982 ¹
	Number of beds			Beds per 100,000 population		
All facilities.....	471,848	338,963	240,345	230.9	160.3	105.5
Non-Federal psychiatric hospitals.....	375,990	238,293	159,121	183.4	112.7	69.9
State and county hospitals.....	360,178	222,202	140,110	176.3	105.1	61.5
Private hospitals.....	14,412	16,091	19,011	7.1	7.6	8.4
Veterans Administration psychiatric services ²	42,305	35,913	23,748	20.7	17.0	10.4
Non-Federal general hospital psychiatric units.....	23,278	28,706	30,486	11.2	13.6	13.4
Residential treatment centers for emotionally disturbed children.....	19,348	18,029	18,479	9.5	8.5	8.1
Federally funded community mental health centers ³	10,540	17,029	---	5.2	8.0	---
Multiservice mental health facilities.....	1,787	993	8,515	0.9	0.5	3.7

¹Provisional data. Since 1982 data are not available for non-Federal general hospital psychiatric services; 1980 data are used.

²Includes Veterans Administration medical centers and clinics.

³With the advent of block grants, the changes in definition of community mental health centers (CMHC's), and the discontinuation of CMHC monitoring by National Institute of Mental Health, facilities formerly classified as CMHC's have been reclassified as other facility types, primarily "multiservice mental health facilities" and "freestanding psychiatric outpatient clinics."

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; Mental Health, United States, 1983, Public Health Service, Rockville, Md., 1983; Unpublished data from the Survey and Reports Branch, Division of Biometry and Epidemiology.

Table 72. Gross national product and national health expenditures: United States, selected years 1929-83

(Data are compiled by the Health Care Financing Administration)

Year	Gross national product in billions	National health expenditures		
		Amount in billions	Percent of gross national product	Amount per capita
1929.....	\$ 103.4	\$ 3.6	3.5	\$ 29
1935.....	72.5	2.9	4.0	23
1940.....	100.0	4.0	4.0	30
1950.....	286.5	12.7	4.4	82
1955.....	400.0	17.7	4.4	105
1960.....	506.5	26.9	5.3	146
1965.....	691.0	41.9	6.1	207
1970.....	992.7	75.0	7.6	350
1971.....	1,077.6	83.5	7.7	386
1972.....	1,185.9	93.9	7.9	429
1973.....	1,326.4	103.4	7.8	468
1974.....	1,434.2	116.3	8.1	522
1975.....	1,549.2	132.7	8.6	590
1976.....	1,718.0	150.8	8.8	665
1977.....	1,918.3	170.2	8.9	743
1978.....	2,163.9	190.0	8.8	822
1979.....	2,417.8	215.1	8.9	920
1980.....	2,631.7	248.0	9.4	1,049
1981.....	2,957.8	285.8	9.7	1,197
1982.....	3,069.2	322.3	10.5	1,337
1983.....	3,304.8	355.4	10.8	1,459

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from that appearing in earlier volumes of Health, United States.

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984.

Table 73. Average annual percent change in personal health care expenditures and percent distribution of factors affecting growth: United States, 1965-83

(Data are compiled by the Health Care Financing Administration)

Period	Average annual percent change	Factors affecting growth			
		All factors	Prices	Population	Intensity ¹
		Percent distribution			
1965-83.....	12.8	100	61	8	31
1965-66.....	10.6	100	45	12	43
1966-67.....	12.2	100	54	8	38
1967-68.....	13.1	100	44	8	48
1968-69.....	13.4	100	41	8	51
1969-70.....	14.5	100	47	8	45
1970-71.....	10.4	100	59	12	29
1971-72.....	11.6	100	38	9	53
1972-73.....	10.5	100	42	9	49
1973-74.....	14.0	100	66	6	28
1974-75.....	15.4	100	71	6	23
1975-76.....	13.4	100	67	7	26
1976-77.....	12.3	100	67	8	25
1977-78.....	12.2	100	68	9	23
1978-79.....	13.3	100	72	8	20
1979-80.....	15.6	100	73	8	19
1980-81.....	15.6	100	75	6	19
1981-82.....	12.4	100	79	8	13
1982-83.....	10.1	100	70	11	19

¹Represents changes in use and/or kinds of services and supplies.

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from that appearing in earlier volumes of Health, United States.

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

Table 74. 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	Year						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita 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
Mississippi.....	115	163	244	428	490	556	14.0

See note at end of table.

Table 74. 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						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita amount						
West South Central....	\$170	\$240	\$332	\$ 532	\$ 596	\$ 660	12.0
Arkansas.....	140	196	284	474	529	585	12.7
Louisiana.....	156	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	263	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.....	196	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

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population. U.S. estimates differ from those in table 80 because they do not include services provided in U.S. territories or possessions, services rendered by U.S. taxpayers while living abroad, and services furnished to U.S. personnel living abroad or on military vessels.

SOURCE: Bureau of Data Management and Strategy: Personal health care expenditures by State, selected years 1966-1978, by K. R. Levit. Health Care Financing Review. HCFA Pub. No. 03149. Health Care Financing Administration. Washington. U.S. Government Printing Office, Dec. 1982.

Table 75. Consumer Price Index and average annual percent change for all items and selected items:
United States, selected years 1950-83

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

Year	All items	Item					
		Medical care	Food	Apparel and upkeep	Housing	Energy	Personal care
Consumer Price Index							
1950.....	72.1	53.7	74.5	79.0	72.8	---	68.3
1955.....	80.2	64.8	81.6	84.1	82.3	---	77.9
1960.....	88.7	79.1	88.0	89.6	90.2	94.2	90.1
1965.....	94.5	89.5	94.4	93.7	94.9	96.3	95.2
1970.....	116.3	120.6	114.9	116.1	118.2	107.0	113.2
1975.....	161.2	168.6	175.4	142.3	164.5	176.6	150.7
1976.....	170.5	184.7	180.8	147.6	174.6	189.3	160.5
1977.....	181.5	202.4	192.2	154.2	186.5	207.3	170.9
1978.....	195.4	219.4	211.4	159.6	202.8	220.4	182.0
1979.....	217.4	239.7	234.5	166.6	227.6	275.9	195.8
1980.....	246.8	265.9	254.6	178.4	263.3	361.1	213.1
1981.....	272.4	294.5	274.6	186.9	293.5	410.0	232.0
1982.....	289.1	328.7	285.7	191.8	314.7	416.1	248.3
1983.....	298.4	357.3	291.7	196.5	323.1	1419.3	261.1
Average annual percent change							
1950-55.....	2.2	3.8	1.8	1.3	2.5	---	2.7
1955-60.....	2.0	4.1	1.5	1.3	1.9	---	3.0
1960-65.....	1.3	2.5	1.4	0.9	1.0	0.4	1.1
1965-70.....	4.2	6.1	4.0	4.4	4.5	2.1	3.5
1970-75.....	6.7	6.9	8.8	4.2	6.8	10.5	5.9
1975-76.....	5.8	9.5	3.1	3.7	6.1	7.2	6.5
1976-77.....	6.5	9.6	6.3	4.5	6.8	9.5	6.5
1977-78.....	7.7	8.4	10.0	3.5	8.7	6.3	6.5
1978-79.....	11.3	9.3	10.9	4.4	12.2	25.2	7.6
1979-80.....	13.5	10.9	8.6	7.1	15.7	30.9	8.8
1980-81.....	10.4	10.8	7.9	4.8	11.5	13.5	8.9
1981-82.....	6.1	11.6	4.0	2.6	7.2	1.5	7.0
1982-83.....	3.2	8.7	2.1	2.5	2.7	10.8	5.2

¹Excludes motor oil, coolant, and other products as of January 1983.

NOTE: 1967=100.

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

Table 76. Consumer Price Index for all items and medical care components: United States, selected years 1950-83

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

Item and medical care component	Year								
	1950	1960	1965	1970	1975	1980	1981	1982	1983
	Consumer Price Index								
CPI, all items.....	72.1	88.7	94.5	116.3	161.2	246.8	272.4	289.1	298.4
Less medical care.....	---	89.4	94.9	116.1	160.9	245.5	270.9	286.8	295.1
CPI, all services.....	58.7	83.5	92.2	121.6	166.6	270.3	305.7	333.3	344.9
All medical care.....	53.7	79.1	89.5	120.6	168.6	265.9	294.5	328.7	357.3
Medical care services.....	49.2	74.9	87.3	124.2	179.1	287.4	318.2	356.0	387.0
Professional services.....	---	---	---	119.7	164.5	252.0	277.9	301.5	323.0
Physician services.....	55.2	77.0	88.3	121.4	169.4	269.3	299.0	327.1	352.3
Dental services.....	63.9	82.1	92.2	119.4	161.9	240.2	263.3	283.6	302.7
Other professional services ¹	---	---	---	---	---	123.6	135.2	144.3	153.0
Other medical care services.....	---	---	---	129.7	196.9	330.1	366.9	421.9	464.4
Hospital and other medical services ¹	---	---	---	---	---	133.5	152.5	174.1	193.9
Hospital room.....	30.3	57.3	75.9	145.4	236.1	418.9	481.1	556.7	619.7
Other hospital and medical care services ¹	---	---	---	---	---	132.8	151.2	170.5	190.0
Medical care commodities.....	88.5	104.5	100.2	103.6	118.8	168.1	186.5	205.7	223.3
Prescription drugs.....	92.6	115.3	102.0	101.2	109.3	154.8	172.5	192.7	213.8
Nonprescription drugs and medical supplies ¹	---	---	---	---	---	120.9	133.6	145.8	155.2
Eyeglasses ¹	---	---	---	---	---	117.5	125.6	131.1	135.9
Internal and respiratory over-the-counter drugs.....	---	---	98.0	106.2	130.1	188.1	211.4	234.2	251.7
Nonprescription medical equipment and supplies ¹	---	---	---	---	---	118.2	129.1	141.1	149.9

¹Dec. 1977=100.

NOTE: 1967=100, except where noted.

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

Table 77. Consumer Price Index average annual percent change for all items and medical care components:
United States, selected years 1950-83

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

Item and medical care component	Period						
	1950-60	1960-65	1965-70	1970-80	1980-81	1981-82	1982-83
	Average annual percent change						
CPI, all items.....	2.1	1.3	4.2	7.8	10.2	6.1	3.2
Less medical care.....	---	1.2	4.1	7.8	10.3	5.9	2.9
CPI, all services.....	3.6	2.0	5.7	8.3	13.0	9.0	3.5
All medical care.....	4.0	2.5	6.1	8.2	10.4	11.6	8.7
Medical care services.....	4.3	3.1	7.3	8.8	10.3	11.9	8.7
Professional services.....	---	---	---	7.7	9.8	8.5	7.1
Physician services.....	3.4	2.8	6.6	8.3	10.6	9.4	7.7
Dental services.....	2.5	2.3	5.3	7.2	9.1	7.7	6.7
Other professional services ¹	---	---	---	---	8.4	6.7	6.0
Other medical care services.....	---	---	---	9.8	10.7	15.0	10.1
Hospital and other medical services ¹	---	---	---	---	14.1	14.2	11.4
Hospital room.....	6.6	5.8	13.9	11.2	14.5	15.7	11.3
Other hospital and medical care services ¹ ...	---	---	---	---	13.7	12.8	11.4
Medical care commodities.....	1.7	-0.8	0.7	5.0	11.1	10.3	8.6
Prescription drugs.....	2.2	-2.4	-0.2	4.3	11.3	11.7	10.9
Nonprescription drugs and medical supplies ¹	---	---	---	---	10.9	9.1	6.4
Eyeglasses ¹	---	---	---	---	6.5	4.4	3.7
Internal and respiratory over-the-counter drugs.....	---	---	1.6	5.9	12.8	10.8	7.5
Nonprescription medical equipment and supplies ¹	---	---	---	---	9.9	9.3	6.2

¹Dec. 1977=100.

NOTE: 1967=100, except where noted.

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

Table 78. National health expenditures, according to source of funds: United States, selected years 1929-83

(Data are compiled by the Health Care Financing Administration)

Year	All health expenditures in billions	Source of funds					
		Private			Public		
		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.....	41.9	30.9	152	73.8	11.0	54	26.2
1970.....	75.0	47.2	221	63.0	27.8	130	37.0
1971.....	83.5	51.8	239	62.1	31.7	146	37.9
1972.....	93.9	58.5	268	62.3	35.4	162	37.7
1973.....	103.4	64.0	290	61.9	39.4	178	38.1
1974.....	116.3	68.8	309	59.1	47.6	214	40.9
1975.....	132.7	76.3	340	57.5	56.4	251	42.5
1976.....	150.8	87.9	388	58.3	62.8	277	41.7
1977.....	170.2	100.1	437	58.8	70.1	306	41.2
1978.....	190.0	110.1	476	57.9	79.9	346	42.1
1979.....	215.1	124.2	531	57.7	90.9	389	42.3
1980.....	248.0	142.2	601	57.3	105.8	448	42.7
1981.....	285.8	164.2	688	57.4	121.7	510	42.6
1982.....	322.3	186.5	774	57.9	135.8	564	42.1
1983.....	355.4	206.6	848	58.1	148.8	611	41.9

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from those appearing in earlier volumes of Health, United States.

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984.

Table 79. National health expenditures average annual percent change, according to source of funds: United States, 1929-83

(Data are compiled by the Health Care Financing Administration)

Period	All health expenditures	Source of funds	
		Private	Public
Average annual percent change			
1929-83.....	8.9	8.0	11.1
1929-35.....	-3.5	-4.7	3.1
1935-40.....	6.6	5.9	5.9
1940-50.....	12.2	11.1	15.6
1950-55.....	6.9	7.5	6.2
1955-60.....	8.7	9.0	7.5
1960-65.....	9.3	8.8	10.8
1965-70.....	12.3	8.8	20.4
1970-75.....	12.1	10.1	15.2
1975-80.....	13.3	13.3	13.4
1970-71.....	11.3	9.7	14.0
1971-72.....	12.5	12.9	11.7
1972-73.....	10.1	9.4	11.3
1973-74.....	12.5	7.5	20.8
1974-75.....	14.1	10.9	18.5
1975-76.....	13.6	15.2	11.3
1976-77.....	12.9	13.9	11.6
1977-78.....	11.6	10.0	14.0
1978-79.....	13.2	12.8	13.8
1979-80.....	15.3	14.5	16.4
1980-81.....	15.2	15.5	15.0
1981-82.....	12.8	13.6	11.6
1982-83.....	10.3	10.8	9.6

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from that appearing in earlier volumes of Health, United States.

SOURCE: Data computed by the National Center for Health Statistics from data compiled by the Health Care Financing Administration.

Table 80. Personal health care expenditures and percent distribution, according to source of payment:
United States, selected years 1929-83

(Data are compiled by the Health Care Financing Administration)

Year	All personal health care expenditures in billions ¹	Per capita	All sources	Direct payment	Source of payment					
					Third-party payment					
					Total	Private health insurance	Philan- thropy and industry	Government		
								Total	Federal	State and local
Percent distribution										
1929.....	\$ 3.2	\$ 26	100.0	288.4	11.6	(3)	2.6	9.0	2.7	6.3
1935.....	2.7	21	100.0	282.4	17.6	(3)	2.8	14.7	3.4	11.3
1940.....	3.5	26	100.0	281.3	18.7	(3)	2.6	16.1	4.1	12.0
1950.....	10.9	70	100.0	65.5	34.5	9.1	2.9	22.4	10.4	12.0
1955.....	15.7	93	100.0	58.1	41.9	16.1	2.8	23.0	10.5	12.5
1960.....	23.7	129	100.0	54.9	45.1	21.0	2.3	21.8	9.3	12.5
1965.....	35.9	177	100.0	51.6	48.4	24.2	2.2	22.0	10.1	11.9
1970.....	65.4	305	100.0	40.5	59.5	23.4	1.7	34.3	22.2	12.1
1971.....	72.2	333	100.0	38.9	61.1	23.8	1.8	35.5	23.2	12.3
1972.....	80.5	368	100.0	38.0	62.0	23.6	2.5	35.8	23.5	12.3
1973.....	89.0	403	100.0	37.4	62.6	24.0	2.5	36.1	23.7	12.4
1974.....	101.5	456	100.0	35.3	64.7	24.8	1.5	38.4	25.9	12.6
1975.....	117.1	521	100.0	32.5	67.5	26.7	1.3	39.5	26.8	12.7
1976.....	132.8	586	100.0	31.6	68.4	28.3	1.4	38.7	27.2	11.5
1977.....	149.1	651	100.0	31.1	68.9	28.8	1.3	38.8	27.5	11.3
1978.....	167.4	724	100.0	30.3	69.7	29.3	1.2	39.2	27.7	11.5
1979.....	189.6	811	100.0	29.4	70.6	30.0	1.2	39.3	28.1	11.2
1980.....	219.1	927	100.0	28.5	71.5	30.7	1.2	39.6	28.5	11.0
1981.....	253.4	1,062	100.0	27.9	72.1	31.1	1.2	39.8	29.3	10.4
1982.....	284.7	1,181	100.0	27.1	72.9	31.9	1.2	39.8	29.5	10.3
1983.....	313.3	1,286	100.0	27.2	72.8	31.9	1.2	39.7	29.7	10.1

¹Includes 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).

³Figures are not separable from direct payment in these years.

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from those appearing in earlier volumes of Health, United States.

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984.

Table 81. National health expenditures and percent distribution, according to type of expenditure: United States, selected years 1950-83

(Data are compiled by the Health Care Financing Administration)

Type of expenditure	Year								
	1950	1960	1965	1970	1975	1980	1981	1982	1983
	Amount in billions								
Total.....	\$12.7	\$26.9	\$41.9	\$75.0	\$132.7	\$248.0	\$285.8	\$322.3	\$355.4
	Percent distribution								
All expenditures.....	100.0	100.0	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	95.6	95.7
Personal health care.....	86.0	88.0	85.5	87.2	88.3	88.4	88.7	88.3	88.2
Hospital care.....	30.4	33.8	33.3	37.3	39.5	40.8	41.3	41.9	41.4
Physician services.....	21.7	21.1	20.2	19.1	18.8	18.9	19.2	19.2	19.4
Dentist services.....	7.6	7.4	6.7	6.3	6.2	6.2	6.1	6.0	6.1
Nursing home care.....	1.5	2.0	4.9	6.3	7.6	8.2	8.4	8.2	8.1
Other professional services.....	3.1	3.2	2.5	2.1	2.0	2.3	2.2	2.2	2.3
Drugs and drug sundries.....	13.6	13.6	12.4	10.7	9.0	7.5	7.2	6.8	6.7
Eyeglasses and appliances.....	3.9	2.9	2.8	2.6	2.4	2.1	2.0	1.7	1.8
Other health services.....	4.2	4.0	2.7	2.8	2.8	2.4	2.4	2.4	2.4
Expenses for prepayment.....	3.6	4.1	4.2	3.8	3.0	3.7	3.7	4.1	4.4
Government public health activities...	2.9	1.5	1.9	1.9	2.4	3.1	3.0	3.1	3.2
Research and construction.....	7.6	6.4	8.4	7.2	6.3	4.8	4.6	4.4	4.3
Research.....	0.9	2.5	3.6	2.6	2.5	2.2	2.0	1.8	1.7
Construction.....	6.7	3.9	4.8	4.6	3.8	2.6	2.6	2.6	2.6

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from that appearing in earlier volumes of Health, United States.

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984.

Table 82. National health expenditures average annual percent change, according to type of expenditure: United States, selected years 1950-83

(Data are compiled by the Health Care Financing Administration)

Type of expenditure	Period						
	1950-60	1960-65	1965-70	1970-80	1980-81	1981-82	1982-83
	Average annual percent change						
All expenditures.....	7.8	9.3	12.3	12.7	15.2	12.8	10.3
Health services and supplies.....	8.0	8.8	12.6	13.0	15.5	13.0	10.4
Personal health care.....	8.1	8.7	12.8	12.9	15.6	12.4	10.1
Hospital care.....	9.0	9.0	14.9	13.7	16.4	14.4	9.1
Physician services.....	7.5	8.3	11.1	12.6	16.9	12.8	11.7
Dentist services.....	7.5	7.3	11.1	12.5	12.3	12.5	11.9
Nursing home care.....	10.9	31.5	17.8	15.8	17.2	10.9	8.8
Other professional services.....	8.1	3.7	9.1	13.4	13.5	11.5	12.9
Drugs and drug sundries.....	7.8	7.2	9.1	8.8	10.8	6.1	8.9
Eyeglasses and appliances.....	4.7	8.6	10.7	10.2	9.7	-2.1	13.3
Other health services.....	7.7	0.7	12.5	11.1	17.5	9.2	11.1
Expenses for prepayment.....	9.1	9.8	10.1	12.6	15.0	25.7	16.6
Government public health activities.....	1.4	14.5	11.8	18.4	12.0	16.3	11.8
Research and construction.....	5.9	15.5	9.0	8.2	10.4	7.9	7.4
Research.....	18.9	18.0	5.4	10.7	3.3	4.9	4.8
Construction.....	2.2	13.8	11.4	6.6	16.3	10.1	9.3

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from those appearing in earlier volumes of Health, United States.

SOURCE: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984.

Table 83. Hospital 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	Year						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita 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	121	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 note at end of table.

Table 83. Hospital 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						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita 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	289	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	113	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

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population.

SOURCE: Bureau of Data Management and Strategy: Personal health care expenditures by State, selected years 1966-1978, by K. R. Levit. Health Care Financing Review. HCFA Pub. No. 03149. Health Care Financing Administration. Washington. U.S. Government Printing Office, Dec. 1982.

Table 84. Nursing home 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	Year						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita 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.....	12	18	27	51	60	69	15.7
Indiana.....	12	20	33	58	66	76	16.6
Illinois.....	13	20	33	52	60	77	16.3
Michigan.....	13	21	35	49	57	64	14.4
Wisconsin.....	19	29	52	73	84	92	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 note at end of table.

Table 84. Nursing home 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						Average annual percent change 1966-78
	1966	1969	1972	1976	1977	1978	
	Per capita 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	15	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

NOTE: Per capita spending estimates are the expenditure level of services rendered in a geographic area per resident population.

SOURCE: Bureau of Data Management and Strategy: Personal health care expenditures by State, selected years 1966-1978, by K. R. Levit. Health Care Financing Review. HCFA Pub. No. 03149. Health Care Financing Administration. Washington. U.S. Government Printing Office, Dec. 1982.

Table 85. Hospital expenses per inpatient day, personnel and number per 100 patients, and average annual percent change: United States, 1971-82

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

Year and period	Adjusted expenses per inpatient day ¹			Labor costs as percent of total	Personnel ³	
	Total	Labor ²	Non-labor		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
1981.....	284	161	123	56.7	3,039	347
1982.....	327	185	142	56.7	3,312	376
Average annual percent change						
1971-82.....	13.3	12.0	15.2	...	4.7	3.0
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
1980-81.....	16.4	16.7	15.0	...	5.6	3.9
1981-82.....	15.1	14.9	15.5	...	9.0	8.4

¹Refers exclusively to expenses incurred for inpatient care.

²Labor expenses include employee benefits.

³Full-time equivalent personnel. Several changes were made in the personnel section of the American Hospital Association survey during this period, particularly in 1980-82. A major change added contracted personnel in 1982, possibly contributing to the large increase in that year.

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

SOURCE: American Hospital Association: Hospital Statistics, 1983 Edition. Chicago, 1983. (Copyright 1983: Used with the permission of the American Hospital Association.)

Table 86. Average annual percent change in hospital inpatient expenses per patient day and percent distribution of factors affecting growth: United States, selected years 1960-82

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

Period	Average annual percent change	Factors affecting growth				
		All factors	Wage	Price	Employees ¹	Other ²
Percent distribution						
1960-65.....	6.7	100	43	7	16	34
1965-68.....	11.2	100	35	12	18	35
1968-71.....	14.3	100	41	15	13	31
1971-74.....	10.7	100	36	28	11	25
1974-77.....	15.2	100	39	19	11	31
1977-80.....	12.2	100	43	38	9	10
1980-82.....	15.6	100	34	23	22	21

¹Several changes were made in the personnel section of the American Hospital Association survey during this period, particularly in 1980-82. A major change added contracted personnel in 1982, possibly contributing to the large increase for 1980-82.

²Nonlabor expenses such as X-rays and laboratory tests.

NOTE: For 1971-82, 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 (8.0 percent in 1982), this affects the distribution among contributing factors to hospital expenses.

SOURCES: American Hospital Association: Hospital Statistics, 1983 Edition. Chicago, 1983; Bureau of Labor Statistics, U.S. Department of Labor: Consumer Price Index. Various releases. Data computed by the Division of Analysis.

Table 87. 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)

Facility characteristic	1973-74 ¹						1977					
	All residents	Primary source of payment					All residents	Primary source of payment				
		Own income	Medi-care	Medic-aid	Public assist-ance welfare	All other sources		Own income	Medi-care	Medic-aid	Public assist-ance welfare	All other sources
	Average monthly charge ²											
All facilities.....	\$479	\$491	\$754	\$503	\$381	\$225	\$689	\$690	\$1,167	\$720	\$508	\$440
Ownership												
Proprietary.....	489	525	754	486	373	406	670	686	1,048	677	501	562
Nonprofit and government.....	456	427	*751	556	397	136	732	698	1,325	825	534	324
Certification ³												
Skilled nursing facility.....	566	585	765	567	468	290	880	866	1,136	955	575	606
Skilled nursing and intermediate facility.....	514	521	719	513	482	396	762	800	1,195	739	623	630
Intermediate facility.....	376	388	...	375	333	*389	556	567	...	563	479	*456
Not certified.....	329	377	...	...	330	*89	390	447	...	...	401	*155
Bed size												
Less than 50 beds.....	397	429	*625	431	296	*128	546	516	*869	663	394	*295
50-99 beds.....	448	484	*786	449	356	186	643	686	*1,141	634	493	468
100-199 beds.....	502	523	787	508	414	256	706	721	1,242	691	573	551
200 beds or more.....	576	506	*689	656	496	307	837	823	*1,179	925	602	370
Geographic region												
Northeast.....	651	637	*957	718	538	131	918	909	1,369	975	*511	395
North Central.....	433	449	*738	454	360	252	640	652	*1,160	639	537	524
South.....	410	452	*615	408	306	278	585	585	*1,096	619	452	342
West.....	454	487	*672	442	323	*314	653	663	*868	663	564	*499

See footnotes at end of table.

Table 87. 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)

Facility characteristic	1973-74 ¹						1977					
	All residents	Primary source of payment					All residents	Primary source of payment				
		Own income	Medi-care	Medic-aid	Public assist-ance welfare	All other sources		Own income	Medi-care	Medic-aid	Public assist-ance welfare	All other sources
	Percent distribution of residents											
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												
Proprietary.....	100.0	34.5	1.2	52.0	11.0	1.4	100	37.5	1.7	49.6	7.3	3.8
Nonprofit and government.....	100.0	41.9	0.9	38.4	12.2	6.6	100	40.4	2.7	43.8	4.4	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
Skilled nursing and intermediate facility.....	100.0	29.8	1.1	59.7	7.6	1.8	100	31.6	2.6	58.3	3.2	4.1
Intermediate facility.....	100.0	35.8	...	53.1	9.7	1.4	100	36.3	...	55.3	5.3	3.1
Not certified.....	100.0	50.6	...	...	39.3	10.2	100	64.2	...	...	19.0	16.7
Bed size												
Less than 50 beds.....	100.0	41.5	*0.6	37.1	17.5	3.4	100	49.6	*1.8	32.7	10.5	5.4
50-99 beds.....	100.0	37.8	0.9	47.9	10.9	2.5	100	39.5	*1.2	46.5	8.1	4.7
100-199 beds.....	100.0	36.3	1.3	50.8	8.8	2.8	100	38.4	2.6	50.4	4.6	4.0
200 beds or more.....	100.0	30.7	*1.3	51.6	12.3	4.1	100	28.6	2.3	55.5	4.6	9.1
Geographic region												
Northeast.....	100.0	30.6	1.4	53.2	10.5	4.5	100	34.6	3.3	53.3	3.8	5.1
North Central.....	100.0	44.4	0.8	35.6	16.1	3.0	100	44.5	1.5	42.1	6.5	5.4
South.....	100.0	31.0	1.1	55.2	10.3	2.4	100	32.2	*1.4	52.5	8.2	5.7
West.....	100.0	37.9	*1.2	54.6	4.6	1.9	100	41.3	2.5	44.7	6.7	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.

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.

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.

Table 88. 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)

Facility and resident characteristic	Year					
	1964		1973-74 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
FACILITY CHARACTERISTIC						
All facilities.....	\$186	100.0	\$479	100.0	\$689	100.0
Type of service provided						
Nursing care.....	212	67.4	495	64.8	719	85.4
Personal care with or without nursing.....	117	32.6	448	35.2	514	14.6
Ownership						
Proprietary.....	205	60.2	489	69.8	670	68.2
Nonprofit and government.....	145	39.8	456	30.2	732	31.8
Size						
Less than 50 beds.....	---	---	397	15.2	546	12.9
50-99 beds.....	---	---	448	34.1	643	30.5
100-199 beds.....	---	---	502	35.6	706	38.8
200 beds or more.....	---	---	576	15.1	837	17.9
Geographic region						
Northeast.....	213	28.6	651	22.0	918	22.4
North Central.....	171	36.6	433	34.6	640	34.5
South.....	161	18.1	410	26.0	585	27.2
West.....	204	16.7	454	17.4	653	15.9
RESIDENT CHARACTERISTIC						
All residents.....	186	100.0	479	100.0	689	100.0
Age						
Under 65 years.....	155	12.0	434	10.6	585	13.6
65-74 years.....	184	18.9	473	15.0	669	16.2
75-84 years.....	191	41.7	488	35.5	710	35.7
85 years and over.....	194	27.5	485	38.8	719	34.5
Sex						
Male.....	171	35.0	466	29.1	652	28.8
Female.....	194	65.0	484	70.9	705	71.2
Level of care received						
Intensive nursing care.....	224	31.0	510	40.6	758	43.8
Other nursing care.....	199	28.7	469	42.1	659	40.7
Personal care.....	164	26.9	435	16.4	586	14.4
No nursing or personal care.....	109	13.5	315	0.9	388	1.1

¹Includes life-care residents and no-charge residents.

²Data exclude residents of personal care homes.

SOURCE: National Center for Health Statistics: Charges for care and sources of 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 89. Medicare and Medicaid expenditures and percent distribution, according to type of service: United States, selected years 1967-83

(Data for Medicare are compiled by the Health Care Financing Administration and data for Medicaid are compiled from State and Federal Government sources)

Type of service	Year						
	1967	1970	1975	1980	1981	1982	1983 ¹
Medicare							
	Amount in billions						
All expenditures.....	\$4.5	\$7.1	\$15.6	\$35.7	\$43.5	\$51.1	\$57.4
	Percent distribution						
All services.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Hospital care.....	69.1	71.5	73.8	72.4	72.1	71.9	70.3
Physician services.....	24.7	22.8	21.6	22.1	22.4	22.3	23.3
Nursing home care.....	4.6	3.7	1.9	1.1	1.0	0.9	0.9
Other health services ²	1.6	1.9	2.8	4.3	4.5	4.9	5.5
Medicaid ³							
	Amount in billions						
All expenditures.....	\$2.9	\$5.2	\$13.5	\$25.2	\$29.0	\$31.3	\$34.0
	Percent distribution						
All services.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Hospital care.....	42.3	42.9	35.3	38.1	37.5	39.7	39.9
Physician services.....	10.9	13.3	13.9	9.7	9.6	8.9	8.7
Dentist services.....	4.4	3.2	2.7	2.0	1.9	1.5	1.4
Other professional services.....	0.9	1.4	1.8	2.2	1.9	2.1	2.3
Drugs and drug sundries.....	7.2	7.9	6.6	5.5	5.6	5.4	5.5
Nursing home care.....	31.7	27.2	35.6	38.8	38.8	37.4	36.4
Other health services ⁴	2.6	4.1	4.1	3.7	4.7	5.0	5.8

¹Preliminary estimates.

²Other services include home health agencies, home health services, eyeglasses and appliances, and other professional services.

³Expenditures from Federal, State, and local funds under Medicaid. Includes per capita payments for Part B of Medicare and excludes administrative costs.

⁴Other services include laboratory and radiological services, home health, and family planning services.

NOTE: The Health Care Financing Administration has made revisions in their health expenditure estimates. Data in this table may differ from those appearing in earlier volumes of Health, United States.

SOURCES: Bureau of Data Management and Strategy: National health expenditures, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo. Health Care Financing Review. HCFA Pub. No. 03177. Health Care Financing Administration. Washington. U.S. Government Printing Office, winter 1984; Unpublished data.

Table 90. Medicare enrollment, persons served, and reimbursements for Medicare enrollees 65 years of age and over, according to selected characteristics: United States, 1967, 1977, and 1982

(Data are compiled by the Health Care Financing Administration)

Selected characteristic	Enrollment in millions			Persons served per 1,000 enrollees			Reimbursements per person served			Reimbursements per enrollee		
	1967	1977	1982	1967	1977	1982	1967	1977	1982	1967	1977	1982
Total ¹	19.5	23.8	26.5	366	570	641	\$592	\$1,332	\$2,439	\$217	\$ 759	\$1,565
Age												
65-66 years.....	2.8	3.3	3.6	300	533	575	496	1,075	1,919	149	573	1,103
67-68 years.....	2.6	3.2	3.5	326	511	574	521	1,173	2,109	170	599	1,210
69-70 years.....	2.4	2.9	3.2	339	531	600	530	1,211	2,189	180	643	1,312
71-72 years.....	2.3	2.6	2.9	351	555	624	560	1,228	2,291	197	681	1,429
73-74 years.....	2.1	2.3	2.6	369	576	645	574	1,319	2,412	212	759	1,555
75-79 years.....	3.9	4.5	5.1	398	597	678	624	1,430	2,608	248	853	1,767
80-84 years.....	2.2	3.0	3.2	430	623	712	693	1,549	2,851	298	965	2,029
85 years and over.....	1.3	2.1	2.6	465	652	733	740	1,636	2,960	345	1,068	2,170
Sex												
Male.....	8.3	9.6	10.7	357	546	611	647	1,505	2,717	231	821	1,660
Female.....	11.3	14.2	15.9	373	586	662	554	1,223	2,267	207	717	1,501
Race ²												
White.....	17.4	21.1	23.4	375	576	648	593	1,328	2,415	222	765	1,565
Other.....	1.5	2.1	2.4	260	514	586	557	1,404	2,739	145	722	1,604
Geographic region												
Northeast.....	5.1	5.7	6.2	385	613	691	604	1,426	2,419	233	874	1,671
North Central.....	5.6	6.3	6.9	352	541	626	599	1,401	2,579	211	757	1,614
South.....	5.6	7.5	8.5	351	556	628	528	1,198	2,313	186	666	1,451
West.....	2.9	3.8	4.4	455	632	677	620	1,341	2,532	282	848	1,714

¹Includes the United States, Guam, Puerto Rico, Virgin Islands, all other areas and foreign countries.

²Excludes persons of unknown race.

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

Table 91. Percent distribution of recipients and Medicaid medical vendor payments, according to basis of eligibility: United States, selected years 1972-83

(Data are compiled by the Health Care Financing Administration)

Basis of eligibility	Year					
	1972 ¹	1975 ¹	1980	1981	1982	1983 ²
Recipients			Percent distribution			
Total.....	100.0	100.0	...	...	...	...
Aged ³	18.8	16.5	15.9	15.3	15.0	15.1
Blind and disabled.....	9.8	11.2	13.5	14.0	13.4	14.1
Adults in AFDC ⁴ families.....	17.8	20.6	22.6	23.6	24.8	25.4
Children in AFDC ⁴ families.....	44.5	43.7	43.2	43.6	44.3	43.8
Other Title XIX ⁵	9.0	8.2	6.9	6.2	6.6	6.2
Vendor payments						
Total.....	100.0	100.0	100.0	100.0	100.0	100.0
Aged ³	30.6	35.6	37.5	36.5	36.5	37.0
Blind and disabled.....	22.2	25.7	32.7	34.8	35.4	35.1
Adults in AFDC ⁴ families.....	15.3	16.8	13.9	13.8	13.9	13.9
Children in AFDC ⁴ families.....	18.1	17.9	13.4	12.9	11.8	11.8
Other Title XIX ⁵	13.9	4.0	2.6	2.0	2.3	2.2

¹Data for fiscal year ending June 30; all other data for fiscal year ending September 30.

²Preliminary estimates.

³65 years and over.

⁴Aid to Families with Dependent Children.

⁵Includes some participants in Supplemental Security Income program and other people deemed medically needy in participating States.

NOTE: Recipients in 1980-83 may be included in more than one category.

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

Table 92. Veterans' medical care expenditures and percent distribution, according to type of expenditure: United States, selected fiscal years 1965-83

(Data are compiled from Veterans Administration sources)

Type of expenditure ¹	Year									
	1965 ²	1970 ²	1975 ²	1977	1978	1979	1980	1981	1982	1983
	Amount in millions									
Total.....	\$1,150.1	\$1,688.6	\$3,328.2	\$4,376.3	\$4,809.3	\$5,159.5	\$5,981.3	\$6,378.2	\$7,155.1	\$7,816.8
	Percent distribution									
All expenditures.....	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Inpatient hospital.....	81.9	71.3	66.4	64.8	64.3	64.4	64.3	63.1	63.0	62.8
Outpatient care.....	12.0	14.0	17.8	18.8	18.9	18.5	19.1	19.5	19.4	19.5
VA nursing homes and domiciliaries.....	2.9	4.3	4.8	4.8	5.1	5.1	5.1	5.1	5.3	5.3
Community nursing homes.....	0.0	1.2	1.4	1.7	1.8	1.9	2.0	2.0	2.3	2.5
All other ³	3.2	9.1	9.6	9.8	10.0	10.1	9.6	10.3	10.0	9.9

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

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

SOURCE: Budget Office, Veterans Administration: Unpublished data.

Table 93. National funding for health research and development and average annual percent change, according to source of funds: United States, selected years 1960-83

(Data are based on multiple sources)

Year and period	All funding	Source of funds			
		Government		Industry ²	Private nonprofit organizations
		Federal	State and local ¹		
Amount in millions					
1960.....	\$ 886	\$ 448	\$ 46	\$ 253	\$139
1965.....	1,890	1,174	90	450	176
1970.....	2,847	1,667	170	795	215
1971.....	3,168	1,877	198	860	233
1972.....	3,536	2,147	228	934	227
1973.....	3,750	2,225	245	1,048	232
1974.....	4,443	2,754	254	1,183	252
1975.....	4,701	2,832	286	1,319	264
1976.....	5,107	3,059	312	1,469	267
1977.....	5,606	3,396	323	1,614	273
1978 ¹	6,264	3,811	371	1,800	282
1979 ¹	7,113	4,321	400	2,093	299
1980 ¹	7,891	4,723	422	2,433	313
1981 ¹	8,529	4,848	492	2,864	325
1982 ¹	9,247	4,970	557	3,381	339
1983 ³	10,356	5,419	583	4,000	354
Average annual percent change					
1960-83.....	11.3	11.4	11.7	12.8	4.1
1960-65.....	16.4	21.2	14.4	12.2	4.8
1965-70.....	8.5	7.3	13.6	12.1	4.1
1970-71.....	11.3	12.6	17.2	8.2	8.4
1971-72.....	11.6	14.4	15.2	8.6	-2.6
1972-73.....	6.0	3.6	7.5	12.2	2.2
1973-74.....	18.5	23.8	3.7	12.9	8.6
1974-75.....	5.8	2.8	12.6	11.5	4.8
1975-76.....	8.6	8.0	9.1	11.4	1.1
1976-77.....	9.8	11.0	3.5	9.9	2.3
1977-78.....	11.7	12.2	14.9	11.5	3.3
1978-79.....	13.6	13.4	7.8	16.3	6.0
1979-80.....	10.9	9.3	5.5	16.2	4.7
1980-81.....	8.1	2.7	16.6	17.7	3.8
1981-82.....	8.4	2.5	13.2	18.1	4.3
1982-83.....	12.0	9.0	4.7	18.3	4.4

¹Revised figures.

²Includes 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.

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

Table 94. Federal obligations for health research and development and percent distribution, according to agency: United States, selected fiscal years 1970-83

(Data are compiled from Federal Government sources)

Agency	Year								
	1970 ¹	1975 ¹	1977	1978	1979	1980	1981	1982	1983
Amount in millions									
Total.....	\$1,666.6	\$2,831.7	\$3,395.9	\$3,811.2	\$4,321.2	\$4,722.6	\$4,848.4	\$4,970.2	\$5,419.1
Percent distribution									
All Federal agencies.....	100.0	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	78.1	79.0	79.9	78.2	78.9	78.3	79.5
National Institutes of Health.....	52.4	66.4	67.1	67.7	68.3	67.4	68.7	69.1	69.9
Centers for Disease Control.....	---	1.5	1.6	1.6	1.8	1.8	1.5	1.5	1.4
Other Public Health Service.....	16.2	8.3	7.5	8.0	7.9	7.9	7.7	6.9	7.4
Other Department of Health and Human Services.....	2.0	1.3	1.9	1.8	1.8	1.1	1.0	0.7	0.7
Other agencies.....	29.4	22.4	21.9	21.0	20.2	21.8	21.1	21.7	20.5
Department of Agriculture.....	3.0	2.2	2.5	2.5	2.6	3.1	3.1	3.3	3.1
Department of Defense.....	7.5	4.1	4.4	4.3	4.3	4.5	5.0	5.6	5.9
Department of Education ².....	...	...	...	...	...	0.7	0.6	0.6	0.6
Department of Energy ³.....	...	...	...	5.1	4.4	4.5	3.9	4.0	3.1
Department of the Interior.....	0.7	0.3	0.3	0.4	0.5	0.5	0.4	0.4	0.4
Department of State ⁴	0.6	0.2	0.7	0.5	0.5	...	...	...	...
Agency for International Development ⁴.....	...	...	...	...	...	0.3	0.2	0.5	0.4
Atomic Energy Commission ³	6.3	...	...	...	...	...	...	...	...
Energy Research and Development Administration ³.....	...	5.8	5.3	...	...	...	...	...	...
Environmental Protection Agency.....	...	1.3	1.7	1.5	1.6	1.7	1.5	1.0	0.8
National Aeronautics and Space Administration.....	5.2	2.6	1.4	1.5	1.0	1.5	1.4	1.6	1.4
National Science Foundation.....	1.7	1.6	1.6	1.7	1.7	1.6	1.4	1.5	1.4
Veterans Administration.....	3.5	3.3	3.2	3.0	3.0	2.8	3.0	2.8	3.0
All other departments and agencies..	0.9	1.0	0.7	0.5	0.4	0.4	0.5	0.5	0.5

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.

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.

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

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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. However, health care personnel 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 Bureau of Data Management and Strategy, 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, population-based 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 illnesses on individuals.

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

Office of the Assistant Secretary for Health

National Center for Health Statistics

National Vital Statistics System

Through the National Vital Statistics System, 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 1983.

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, 1979*, Vol. I, DHHS Pub. No. (PHS) 84-1100 and Vol. II, Part A, DHHS Pub. No. (PHS) 84-1101, Public Health Service, Washington, U.S. Government Printing Office, 1984.

National Survey of Family Growth

Data from the National Survey of Family Growth (NSFG) are based on a five-stage area probability sample of civilian noninstitutionalized women living in the coterminous United States who are 15-44 years of age.

The counties and independent cities of the United States were combined to form a frame of primary sampling units (PSU's), and 101 PSU's were selected as the first-stage sample for Cycle I of NSFG, conducted from June 1973 to February 1974. The next three stages produced a clustered sample of 28,998 households within the 101 PSU's. At 26,028 of these households (89.8 percent), a household screener interview was completed. These screeners produced a fifth-stage sample of 10,879 women of whom 9,797 were interviewed. Never-married women (except those with offspring in the household) were not included in the sample for Cycle I.

Cycle II of NSFG was conducted from January to September 1976. The sample design was basically the same as it was in Cycle I. The sample consisted of 27,162 households in 79 PSU's. Household screener interviews were completed at 25,479 of these households (93.8 percent). Of the 10,202 women in the sample, 8,611 were interviewed. Again, never-married women (except those with offspring in the household) were not included in the sample for Cycle II.

Interviewing for Cycle III of the NSFG was conducted from August 1982 through February 1983. The sample design was similar to that in Cycle II: 31,027 households were selected in 79 PSU's. Household screener interviews were completed in 29,511 households (95.1 percent). Of the 9,964 eligible women identified, 7,969 were interviewed. The sample for Cycle III included black women and women 15-19 years of age at higher rates than other women. Women of all marital statuses were interviewed in Cycle III.

In order to produce estimates for the entire population of eligible women in the United States, data for the interviewed sample women were inflated by the reciprocal of the probability of selection at each stage of sampling and adjusted for both screener and interview nonresponse. In Cycles I and II estimates for ever-married women were poststratified to benchmark population values for 12 age-race categories based on data from the Current Population Survey of the U.S. Bureau of the Census. In Cycle III, the poststratification was done within categories of age, race, and marital status.

Quality control procedures for interviewer selection, interviewer training, field listing, and data processing were built into NSFG to minimize nonsampling error and bias. In addition, the nonresponse adjustments in the estimator were designed to minimize the effect of nonresponse bias by assigning to nonrespondents the characteristics of similar respondents. Sampling errors for NSFG were estimated by balanced half-sample replication.

Discussion of the balanced half-sample technique, summary sampling error charts, and detailed information on the NSFG sample design are available in the following reports: National Center for Health Statistics, National Survey of Family Growth, Cycle I, sample design, estimation procedures, and variance estimation, by D. K. French, *Vital and Health Statistics*, Series 2-No. 76, DHEW Pub. No. (PHS) 78-1350, Public Health Service, Washington, U.S. Government Printing Office, Jan. 1978; and National Center for Health Statistics, National Survey of Family Growth, Cycle II, sample design, estimation procedures, and variance estimation, by W. R. Grady, *Vital and Health Statistics*, Series 2-No. 87, DHHS Pub. No. (PHS) 81-1361, Public Health Service, Washington, U.S. Government Printing Office, Feb. 1981.

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. 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.

In 1982, major changes were made to the NHIS questionnaire. The impact of these changes on selected estimates is currently being evaluated.

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, 1981, by B. Bloom, *Vital and Health Statistics*, Series 10-No. 141, DHHS Pub. No. (PHS) 82-1569, Public Health Service, Washington, U.S. Government Printing Office, Oct. 1982.

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 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

Through this survey, health-related data are obtained by means of direct physical examinations, clinical and laboratory tests, 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 poststratified 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 facil-

ities. 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 1982 survey. The remaining hospitals used various other reporting periods. The response rate for the 1982 hospital survey was about 90 percent.

The nursing home and other facilities survey was conducted by NCHS in 1963, 1967, 1969, 1971, 1973, 1976, and 1978. In the 1980 survey only nursing homes were covered. Data for 38 States were collected at least partially through the Cooperative Health Statistics System. There may have been changes in data collection procedures, coverage, definitions, and concepts in preliminary data from these 38 States in 1980. The response rate for the 1980 nursing home survey was 98 percent.

Statistics derived from the hospital and nursing home and other facilities surveys were adjusted for both facility and item non-response. 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 noninstitutional 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 550 hospitals selected for the survey, 497 were within the scope of the survey, and 426 participated in the survey in 1982. Data were abstracted from about 214,000 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, 1982*, by E. J. Graves, *Vital and Health Statistics, Series 13-No. 78*, Public Health Service, Washington, U.S. Government Printing Office, in press.

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 from August 1973 through 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 resident. 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 that 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 ratio-estimating 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, 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 1981 survey, a sample of 2,846 non-Federal, office-based physicians was selected from masterfiles maintained by the American Medical Association and the American Osteopathic Association. The physician response rate for 1981 was 77.5 percent, providing data concerning a random sample of about 43,366 patient visits.

The estimation procedure used in NAMCS basically has three components: inflation by the reciprocal of the probability of selection, adjustment for nonresponse, 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, 1981 Summary, *National Ambulatory Medical Care Survey*, by L. Lawrence and T. McLemore, *Advance Data From Vital and Health Statistics, No. 88*, DHHS Pub. No. (PHS) 83-1250, Public Health Service, Hyattsville, Md., Mar. 16, 1983.

Health Resources and Services Administration

Bureau of Health Professions

Physician Supply Projections

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

The 1981 supply of active physicians (M.D.'s) was used as the starting point for the most recent projections of active physicians. The major source of data used to obtain 1981 figures was the American Medical Association (AMA) Physician Masterfile.

In the first stage of the projections, graduates from U.S. schools of allopathic (M.D.) and osteopathic (D.O.) medicine and foreign- and Canadian-trained additions were estimated on a year-by-year basis. Estimates of first-year enrollments, student attrition, other medical school-related trends, and a model of foreign and Canadian medical graduate immigration were used in deriving these annual additions. These year-by-year additions were then combined with the already existing active supply in a given year to produce a preliminary estimate of the active work force in each succeeding year. These estimates were then reduced using estimates of mortality and retirement. 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.

Centers for Disease Control

Epidemiology Program Office

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, 1982, Morbidity and Mortality Weekly Report*, 31(54), Public Health Service, DHHS, Atlanta, Ga., Dec. 1983; *CDC Surveillance Summaries*, 32(1SS-4SS), Public Health Service, DHHS, Atlanta, Ga., 1983; or write to Centers for Disease Control, Director, Division of Surveillance and Epidemiologic Studies, Epidemiology Program Office, Atlanta, Ga. 30333.

Center for Health Promotion and Education

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. Most of the central health agencies have established direct reporting systems, although a few collected data by surveying abortion facilities. Epidemiologic surveillance of abortion was initiated in eight States in 1969, and now statewide abortion data are also reported by the remaining States.

The total number of abortions reported to CDC is about 16 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, contact: Director, Division of Reproductive Health, Center for Health Promotion and Education, Centers for Disease Control, Atlanta, Ga. 30333.

Center for Preventive 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 1981 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.

In 1979, the questionnaire was modified to solicit information regarding the source of immunization responses given by the interviewee. This change was made to measure the percent of responses for which a family immunization record was the source of the information.

For more information about the survey methodology, contact: Director, Division of Immunization, Center for Preventive Services, Centers for Disease Control, Atlanta, Ga. 30333.

National Institute for Occupational Safety and Health

National Occupational Hazard Survey

The National Occupational Hazard Survey (NOHS) was conducted by the National Institute for Occupational Safety and Health (NIOSH) to obtain data on employee exposure to particular chemicals and physical agents in various industries.

A random sample of approximately 5,000 urban workplaces was selected by the U.S. Department of Labor, Bureau of Labor Statistics. Because mining and government activities are not within the coverage of the Occupational Safety and Health Act and agricultural and rural areas were beyond the logistical capacity of the survey, the sample excluded those types of facilities. Included were facilities in 66 different two-digit Standard Industrial Classifications (SIC's), located in 67 standard metropolitan statistical areas.

Field work was performed by 20 industrial hygiene surveyors who collected data from February 1972 through June 1974.

Information in Part I, elicited during a questionnaire interview of management, profiled the SIC and size of facility, along with its medical, safety, and industrial hygiene programs. Part II, the greatest part of the NOHS data, contained the recorded observations of the surveyor's management-escorted "walk-through" of all facility work areas. Part II listed, by job title, the number of employees who were potentially exposed to the same chemicals and physical agents. The surveyor recorded all materials and physical agents each employee group encountered, regardless of toxicity; hazardous nature; conditions of use; and the presence, absence, or effectiveness of any exposure control measures. For each potential exposure listed within an occupational group, the surveyor also recorded the duration, intensity, form, and the control utilized and whether it functioned.

For more information on NOHS, see: National Institute for Occupational Safety and Health, *National Occupational Hazard Survey*, Vol. I, Survey manual, DHEW Pub. No. (NIOSH) 74-127; Vol. II, Data editing and data base development, DHEW Pub. No. (NIOSH) 77-213; Vol. III, Survey analysis and supplemental tables, DHEW Pub. No. (NIOSH) 78-114.

National Occupational Exposure Survey

Beginning in 1981, NIOSH began a second national survey of worksites, patterned after the NOHS. This second survey, known

as the National Occupational Exposure Survey (NOES), collected information essentially identical to the NOHS in a sample of 4,490 facilities. It is expected that results from the NOES will be published in 1985.

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 Surveys on Drug Abuse

Data on trends in use of marijuana, cigarettes, and alcohol among youth 12-17 years of age are from the National Survey on Drug Abuse. The 1982 survey is the seventh in a series that began in 1971 under the auspices of the National Commission on Marijuana and Drug Abuse. Since 1974, the survey has been sponsored by the National Institute on Drug Abuse.

The survey covers the population 12 years of age and over living in households in the coterminous United States. Samples of youth (12-17 years) and adults (18 years and over) are independently selected.

The most recent survey (1982) is based on home personal interviews of 5,624 randomly selected Americans 12 years of age and over. The response rate in this survey was 85 percent for the youth sample (12-17 years).

For more information on the National Survey on Drug Abuse, see: National Institute on Drug Abuse, National Survey on Drug Abuse: Main findings 1982, by J. D. Miller et al., DHHS Pub. No. (ADM) 83-1263, Public Health Service, Rockville, Md., U.S. Government Printing Office, 1983.

National Institute of Mental Health

Surveys of Mental Health Facilities

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

The Inventories of Mental Health Facilities are the primary source for National Institute of Mental Health (NIMH) data included in this report. This data system is based on questionnaires mailed every other year to mental health facilities in the United States, including psychiatric hospitals, non-Federal general hospitals with psychiatric services, Veterans Administration psychiatric services, residential treatment centers for emotionally disturbed children, freestanding outpatient psychiatric clinics, and other types of multi-service or day-night facilities. Federally funded community mental health centers (CMHC's) were included separately through 1980. In 1981, with the advent of block grants, the changes in definition of CMHC's, and the discontinuation of CMHC monitoring by NIMH, facilities formerly classified as CMHC's have been reclassified as

other facility types, primarily "multiservice mental health facilities, not elsewhere classified" and "freestanding psychiatric outpatient clinics."

Other surveys conducted by the Survey and Reports Branch encompass samples of patients admitted to State, county, and private mental hospitals, outpatient psychiatric services, and Veterans Administration psychiatric services. The purpose of these surveys is to determine the sociodemographic, clinical, and treatment 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 Federal health programs are taken from administrative sources.

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 Health Care Financing 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, 1983, by R. M. Gibson, K. R. Levit, H. Lazenby, and D. R. Waldo, *Health Care Financing Review*, HCFA Pub. No. 03177, Health Care Financing Administration, Washington, U.S. Government Printing Office, winter 1984.

Medicare Statistical System

The Medicare Statistical System (MSS) is a byproduct of the administrative recordkeeping system of the Medicare program. This program tracks the eligibility of enrollees and the benefits they use, the certification status of institutional providers, and the payments made for covered services. Currently, records are maintained on about 29 million active enrollees and 20,300 participating institutional providers, and about 193 million bills for services are processed annually.

The basic data files of MSS parallel the major files of Medicare's administrative system. There is an enrollment file containing demographic data including age, sex, race, State, county, and ZIP code of residence, and eligibility information for all enrollees.

The institutional provider file contains information on hospitals, skilled nursing facilities, home health agencies, and independent laboratories certified for Medicare participation. The information in this file includes the institution's size, location, and type of control. The third major type of file contains records of services used under Part A of Medicare—hospital, skilled nursing facility, or home health agency services. The last major type of file in MSS provides information on the use of Medicare Part B services, the most important of which is use of physician services. These files include data on the physician's submitted charge, the amount Medicare allowed, Medicare reimbursements, and the number and type of services received.

For further information on MSS and its derivative files, see: Health Care Financing Administration, *Medical Data System*, by Irving Goldstein, HCFA Pub. No. 03111, Baltimore, Md., July 1981.

Medicaid Data System

The majority of Medicaid data come from a compilation of the annual and monthly Medicaid reports submitted by the State Medicaid agencies. The States obtain this information from their own Medicaid claims processing and payment operations.

The major claims processing and payment system used in the States is the Medicaid Management Information System (MMIS). The General System Design for these systems, completed and distributed in 1972, allowed for considerable variation in certain characteristics of the MMIS. However, as a consequence of the differences in coding, processing, and file structures among States, as well as the programmatic diversity inherent in Medicaid itself, in any fiscal year approximately six States do not file an annual report, and in any month approximately two States do not file a monthly report. Historically, these missing reports have been estimated by using weighted linear extrapolation methods and aggregating data from other reports.

For further information on the Medicaid data system, see: Health Care Financing Administration, *Analysis of State Medicaid Program Characteristics, 1983*, prepared by LaJolla Management Corporation, Rockville, Md., under contract number HCFA500-81-0040, Dec. 1983.

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. In the 1980 census, data were collected 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 629 sample areas with coverage in every State and the District of Columbia. In an average month during 1983, the number of housing units or living quarters eligible for the national sample was about 60,300 of which about 57,800 were interviewed households, and 2,500 were households at which the members were not available for interview. About 11,000 households were visited but were 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 official 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 all urban consumers. Prices are collected in 85 urban areas across the country. They were collected from about 18,000 tenants, 18,000 housing units for property taxes, and 24,000 establishments—grocery and department stores, hospitals, filling stations, and other types of stores and service establishments. All taxes directly associated with the purchase and use of items are in the index.

Prices of food, fuels, and a few other items were obtained every month in all 85 locations. Prices of most other commodities

and services were collected every month in the five largest areas and every other month 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 urban consumers. Local data were then combined to obtain a U.S. city average.

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 all urban consumers 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 1983*, Vol. 31, No. 1, Washington, U.S. Government Printing Office, Jan. 1984.

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, 1970-82*, EPA-450/4-83-024, Research Triangle Park, N.C., Feb. 1984, 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 underenumeration, 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 1981*, Pub. No. ST/ESA/STAT/SER.R/11, United Nations, New York, N.Y., 1983.

Alan Guttmacher Institute

Abortion Survey

The Alan Guttmacher Institute (AGI) conducts an annual survey of abortion providers. Data are collected from hospitals, non-hospital 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 20 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 Association (AHA). In 1982, questionnaires were mailed to all hospitals on AHA files. Overall, 6,431 hospitals reported data, a response rate of 89.7 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 1981 survey. The remaining hospitals used various reporting periods.

For more information on the AHA Annual Survey of Hospitals, see: American Hospital Association, *Hospital Statistics, 1983 Edition, Data from the American Hospital Association 1982 Annual Survey*, Chicago, 1983.

American Medical Association

Physician Masterfile

A masterfile of physicians has been maintained by the American Medical Association (AMA) since 1906. Today, the Physician Master-

file 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 completed in 1982, with a response rate of 90 percent. 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 may be sent a questionnaire to verify the change.

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.*, 1983 edition, Chicago, 1984.

Annual Census of Hospitals

From 1920 to 1953, the Council on Medical Education and Hospitals of the American Medical Association (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

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Appendix II

Glossary

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—Age adjustment, using the direct method, is the application of the age-specific 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 adjustment 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 death rates are age adjusted to the U.S. population enumerated in 1940. Adjustment is based on 11 age groups (table I). Maternal mortality rates for complications of pregnancy, childbirth, and the puerperium are calculated as the number of deaths per 100,000 live births. These rates are age adjusted to the live births in the United States in 1970 using the intervals for mother's age in table II.

The data from the National Health Interview Survey (NHIS), National Health Examination Survey (NHES), National Health and Nutrition Examination Survey (NHANES), National Ambulatory Medical Care Survey (NAMCS), and the National Hospital Discharge Survey (NHDS) are age adjusted to the 1970 civilian noninstitutionalized population. Most of the data from the NHIS are age adjusted using the following four age groups: under 17 years, 17–44 years, 45–64 years, and 65 years and over. The NHES and NHANES data are age adjusted using the following five age groups: 25–34 years, 35–44 years, 45–54 years, 55–64 years, and 65–74 years. For the NAMCS and NHDS the intervals used are under 15 years, 15–44 years, 45–64 years, and 65 years and over. The 1970 civilian noninstitutionalized population used to age adjust data from each survey are shown in table III.

Table I. Population and age groups used to adjust death rates to the U.S. population in 1940

Age	Number
All ages.....	1,000,000
Under 1 year.....	15,343
1–4 years.....	64,718
5–14 years.....	170,355
15–24 years.....	181,677
25–34 years.....	162,066
35–44 years.....	139,237
45–54 years.....	117,811
55–64 years.....	80,294
65–74 years.....	48,426
75–84 years.....	17,303
85 years and over.....	2,770

Table II. Numbers of live births and mother's age groups used to adjust maternal mortality rates to live births in the United States in 1970

Mother's age	Number
All ages.....	3,731,386
Under 20 years.....	656,460
20–24 years.....	1,418,874
25–29 years.....	994,904
30–34 years.....	427,806
35–39 years.....	180,244
40 years and over.....	53,098

Table III. Population and age groups used to adjust data to the U.S. civilian noninstitutionalized population in 1970: Selected surveys

Survey and age	Number in thousands
NHIS	
All ages.....	199,583
Under 17 years.....	65,644
17–44 years.....	73,289
20–24 years.....	15,378
25–34 years.....	24,430
35–44 years.....	22,614
45–64 years.....	41,537
65 years and over.....	19,113
NHES and NHANES	
All ages.....	100,804
25–34 years.....	24,430
35–44 years.....	22,614
45–54 years.....	23,070
55–64 years.....	18,467
65–74 years.....	12,223
NAMCS and NHDS	
All ages.....	199,584
Under 15 years.....	57,745
15–44 years.....	81,189
45–64 years.....	41,537
65 years and over.....	19,113

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

P_o = earlier time period

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," "all other," and "black." 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 Statistics 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 Statistics 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. 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 businesses, 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 delin-

quents; 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, 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

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 Statistics 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 Statistics 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 Statistics 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 international 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* (tables IV and V).

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 appendixes 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, 1979*, Volume II, Mortality, Part A, DHHS Pub. No. (PHS) 84–1101, Public Health Service, Washington, U.S. Government Printing Office, 1984.

Death rate—This measure divides the number of deaths in a population in a given period by the resident population at the middle

Table IV. 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	1975	1979–present

Table V. Cause-of-death codes, according to applicable revision of International Classification of Diseases

Cause of death	Code numbers			
	Sixth Revision	Seventh Revision	Eighth Revision	Ninth Revision
Diseases of heart	400–402, 410–443	400–402, 410–443	390–398, 402, 404, 410–429	390–398, 402, 404–429
Cerebrovascular diseases	330–334	330–334	430–438	430–438
Malignant neoplasms	140–205	140–205	140–209	140–208
Respiratory system	160–164	160–164	160–163	160–165
Digestive system	150–156A	150–156A	150–159	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
Complications of pregnancy, childbirth, and the puerperium	640–689	640–689	630–678	630–676
Malignant neoplasm of peritoneum and pleura	...	...	158, 163.0	158, 163
Coalworkers' pneumoconiosis	...	...	515.1	500
Asbestosis	...	...	515.2	501
Silicosis	...	...	515.0	502

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.

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 that 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 long-term 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 as follows:

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 specified 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 age-sex 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.

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.

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 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 that 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, because 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 nonsurgical. According to the World Health Organization, these hospitals 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.

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 are shown in table VI; surgical groupings and code number inclusions are shown in table VII; and diagnostic and other nonsurgical procedure groupings and code number inclusions are shown in table VIII.

Nursing care—Nursing care is the provision of any of the following services: Application of dressings or bandages; bowel and bladder retraining; catheterization; 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.

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.

Table VI. Codes for diagnostic categories from the *International Classification of Diseases, 9th Revision, Clinical Modification*

Diagnostic category	Code numbers
Females with delivery	V27
Diseases of heart	391, 398, 402-404, 410-429
Malignant neoplasms	140-208
Fracture, all sites	800-829
Cerebrovascular diseases	430-438
Pneumonia, all forms	480-486
Inguinal hernia	550
Acute respiratory infection	460-466
Chronic disease of tonsils and adenoids	474
Otitis media and eustachian tube disorders	381-382
Congenital anomalies	740-759
Alcohol dependence syndrome	303
Lacerations and open wounds	870-904
Psychoses	290-299
Diabetes	250
Hyperplasia of prostate	600
Pregnancy with abortive outcome	630-639
Benign neoplasms	210-239
Disorders of menstruation	626
Inflammatory disease of female pelvic organs	614-616
Persons admitted for sterilization	V25.2

Table VII. Codes for surgical categories from the *International Classification of Diseases, 9th Revision, Clinical Modification*

Surgical category	Code numbers
Procedures to assist delivery	72-73
Diagnostic dilation and curettage of uterus	69.09
Cesarean section	74.0-74.2, 74.4, 74.99
Hysterectomy	68.3-68.7
Bilateral destruction or occlusion of fallopian tubes	66.2-66.3
Extraction of lens	13.1-13.6
Repair of inguinal hernia	53.0-53.1
Prostatectomy	60.2-60.6
Reduction of fracture (excluding skull, nose, and jaw)	76.70, 76.78-76.79, 79.0-79.6
Cardiac catheterization	37.21-37.23
Operations on muscles, tendons, fascia, and bursa	82-83.1, 83.3-83.9
Tonsillectomy, with or without adenoidectomy	28.2-28.3
Myringotomy	20.0
Appendectomy, excluding incidental	47.0
Circumcision	64.0
Rhinoplasty and repair of nose	28.1
Excision of semilunar cartilage of knee	80.6
Debridement of wound, infection, or burn	86.22
Direct heart revascularization (coronary bypass)	36.1
Insertion of prosthetic lens (pseudophakos)	13.7
Pacemaker insertion, replacement, removal, and repair	37.7-37.8
Repair of current obstetrical laceration	75.5-75.6
Adenoidectomy without tonsillectomy	28.6
Resection and recession of ocular muscle	15.1-15.6
Oophorectomy and salpingo-oophorectomy	65.3-65.6
Cholecystectomy	51.2
Biopsies on the integumentary system (breast, skin, and subcutaneous tissue)	85.11-85.12, 86.11
Arthroplasty and replacement of hip	81.5-81.6

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*

Table VIII. Codes for diagnostic and other nonsurgical procedure categories from the *International Classification of Diseases, 9th Revision, Clinical Modification*

Procedure category	Code numbers
Cystoscopy	57.31–57.32
Radioisotope scan	92.0–92.1
Endoscopy of large intestine	45.21–45.24
Diagnostic ultrasound	88.7
Computerized axial tomography (CAT scan)	87.03, 87.41, 87.71, 88.01, 88.38
Arteriography using contrast material	88.4
Endoscopy of small intestine	45.11–45.13
Contrast myelogram	87.21
Angiocardiology using contrast material	88.5
Spinal tap	03.31
Application of cast or splint	93.51, 93.53–93.54
Arthroscopy of knee	80.26
Laparoscopy (excluding that for ligation and division of fallopian tubes)	54.21
Electroencephalogram	89.14
Biliary tract X-ray	87.5

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 Care

The definitions for psychiatric care are those used by the National Institute of Mental Health.

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 psy-

chiatric unit for the purpose of diagnosing and treating psychiatric illness.

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 (prior to 1981) 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 that 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 (prior to 1981) 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.

Personnel

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 or more a week. 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.

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.

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.

Physician specialty—A physician specialty is any specific branch of medicine in which a physician may concentrate. The specialty classification used by the Bureau of Health Professions and National Ambulatory Medical Care Survey (NAMCS) follow 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 personnel—Professional personnel include 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.

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 organiza-

tions 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., direct payment, 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.