HEALTH STATISTICS

FROM THE U. S. NATIONAL HEALTH SURVEY

preliminary report on Disability

United States

July-September 1957

Statistics on volume of bed-days, restricted-activity days, and work-loss days, and on prevalence of chronic limitations of major activity and of mobility

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The U. S. National Health Survey is a continuing program under which the Public Health Service makes studies to determine the extent of illness and disability in the population of the United States and to gather related information. It is authorized by Public Law 652, 84th Congress.

CO-OPERATION OF THE BUREAU OF THE CENSUS

Under the legislation establishing the National Health Survey, the Public Health Service is authorized to use, insofar as possible, the services or facilities of other Federal, State, or private agencies. For the national household survey the Bureau of the Census designed and selected the sample, conducted the household interviews, and processed the data in accordance with specifications established by the Public Health Service.

CONTENTS

	Page
Summary	1
Source of Data	. 1
Restricted Activity and Bed Disability	3
Work-Loss	5
Chronic Limitations of Activity and Mobility	6
Detailed Tables	9
Appendix I. Technical Notes on Methods	25 25 25 25 25 26
Appendix II. Definitions of Certain Terms Used in This Report Terms Relating to Disability Terms Relating to Conditions Terms Relating to Demographic and Personal Characteristics	28 28 29
Characteribites	30

DISABILITY

SUMMARY

During the period, July-September 1957, an estimated total of 662.8 million person-days of restricted activity due to illness or injury occurred. Expressing the data for this quarter as an annual rate, this represents an average of about 15.9 restricted-activity days per person per year. During this same period a total of 227.9 million persondays were spent in bed because of illness, which represents a rate on an annual basis of about 5.5 bed-days per person per year. The total number of days lost from work because of illness was 126.8 million person-days in the quarter, or an annualized rate of 7.9 work-loss days per employed person per year.

For all three types of disability-days, i.e., restricted-activity days, bed-days, and work-loss days, the rate increased with age. During the July-September quarter the number of restricted-activity days ranged from a low of 6.4 days per person per year for the age group under 5 to 44.4 days for persons 65 and over. Bed-days per person per year ranged from a low of 2.9 days for children under 5 to a high of 15.4 days for persons over 65. Work-loss days averaged between 6 and 9 days per person per year for workers under 65 as compared with about 17 days for persons over 65.

Females experienced more disability-days than males during the July-September quarter. Females averaged 17.5 restricted-activity days per year as compared with 14.1 restricted-activity days for males, and 6.1 bed-days per year as compared with 4.8 bed-days for males. Women missed work at the rate of 9.0 days per worker per year while men missed work at the rate of 7.4 days per worker per year.

As of August 1957, there were approximately 17 million persons, or 10 percent of the population, with some type of chronic activity limitation. Chronic activity limitation includes both long-term limitation of major activity, such as limitation in the amount or kind of housework that a housewife can perform or limitation in the amount or kind of

work in which an employed person can engage, and long-term limitation of other activities, such as limitation in the amount or kind of recreational activities that can be pursued. About 3 percent of the population had no limitation of major activity but were limited in their other activities, 5 percent of the population were limited in the amount or kind of their major activity, and 2 percent of the population were completely unable to carry on their major activity.

About 5.5 million persons, or about 3 percent of the population, had some type of chronic mobility limitation, that is a limitation in their ability to "get around," as a result of chronic conditions. Included in this 3 percent were persons who merely had trouble getting around by themselves as well as those who were unable to get around by themselves and others who were completely confined to the house.

SOURCE OF DATA

The information contained in this report was obtained from a nationwide household interview survey conducted by the U. S. National Health Survey. The survey is continuous, each week covering a random sample of the civilian population of the continental United States. Although the survey covers persons living as inmates of resident-type institutions, data for these persons are not included in the figures given in this report. The data presented here are preliminary tabulations, based on interviews obtained during the period, July 1 through September 29,1957. During this period interviews were conducted in approximately 9,000 households throughout the country and covered about 28,500 persons.

A description of the survey design, methods used in estimation, and the general qualifications of the data is presented in Appendix I. Particular attention is called to the section entitled Reliability of estimates. Since all estimates presented in this report are based on a sample of the population rather than on the entire population, they are subject to sampling errors and should not be considered exact figures. The sampling errors for most of the estimates presented are of relatively low

This report was prepared by Jane W. Bergsten, of the U. S. National Health Survey staff.

magnitude. However, where an estimated number or the numerator or denominator of a rate or percent is small, the sampling error may be high. Such estimates, therefore, must be interpreted with caution.

Definitions of certain terms used are given in Appendix II. Since some of these terms have specialized meaning in this report, it is suggested that the reader familiarize himself with these definitions.

The text and detailed tables relating to disability presented in this report contain data on the volume of restricted-activity days, bed-days, and work-loss days for the period, July, August, and September 1957, classified according to the sex, the age, and the urban-rural residence of the person, and according to broad groups of conditions which caused the days of disability. Data on the number of persons with activity and mobility limitations due to chronic conditions are also presented. In addition, estimates of the civilian noninstitutional population of the United States classified according to age, sex, and residence are included. Population estimates are included solely for use in rate computation and are not to be considered official estimates.

Although the data presented in this report refer to the period, July-September 1957 only, all rates presented have been expressed on an annual basis. This annualization of rates was done for uniformity and for ease in comparing rates for time periods of different lengths.

The data presented in this report are preliminary tabulations based on survey data for 3 months

of interviewing only. Because of the limited size of the sample covered during this period, the estimates presented here are necessarily confined to relatively broad categories. Information will be available in more detailed form and for additional variables in future reports, after a greater volume of data has been collected.

In the household-interview survey, information on personal characteristics, medical and dental care, illness, and disability was obtained for each member of the sample household. The sections of the questionnaire that relate to disability are included below.

Questions 11 through 17 were asked about each member of the sample household. (The lists of conditions that were read to the respondent as part of questions 16 and 17 are the "Check List of Chronic Conditions" and the "Check List of Impairments" which are reproduced in Appendix 11 under the definition of Chronic condition.) All conditions reported in response to questions 11 through 17 were entered in table I of the questionnaire, and the questions in table I were then asked, as indicated, for each such condition.

The estimated number of restricted-activity days and bed-days are based on responses to the questions in columns (e), (f), (g), and (h) in table 1 of the questionnaire. Responses to the questions in columns (i) and (j) of table I form the basis for estimates of work-loss days and school-loss days. However, estimates of the number of school-loss days during the quarter are not presented in this report, because in most areas school was in session for only about 2 weeks during the July-Sep-

Illness-Recall Questions

11.	We are interested in all kinds of illness, whether serious or not Were you sick at any time LAST WEEK OR THE WEEK BEFORE? (a) What, was the matter? (b) Anything else?	☐ Yes	□ No
12.	Last week or the week before did you have any accidents or injuries, either at home or away from home? (a) What were they? (b) Anything else?	☐ Yes	. No
13.	Last week or the week before did you feel my ill effects from an earlier accident or injury? (a) What were these effects? (b) Anything else?	□ Yes	□ No
14.	Last week or the week before did you take any medicine or treatment for any condition (besides which you told me about)? (a) For what conditions? (b) Anything else?	Tes Yes	□ No
15.	AT THE PRESENT TIME do you have any ailments or conditions that have continued for a long time? (If "No") Even though they don't bother you all the time? (a) What are they? (b) Anything else?	☐ Yes	□ No
16.	Has anyone in the family - you, your, etc had any of these conditions DURING THE PAST 12 MONTHS? (Read Card A, condition by condition; record any conditions mentioned in the column for the person)	Yes	□ No
17.	Does anyone in the family have any of these conditions? (Read Card B, condition by condition; record any conditions mentioned in the column for the person)	☐ Yes	□ No

Did you ever talk to a doc- tor about	What did the doctor say it was? did he use any	e use any			What part of the body was affected?	LAST WEEK OR THE WEEK BE- FORE did	
	medical terms? (If doctor not talked to - "No," in col. (c) - record respondent's description) (If ill-effects of earlier accident also fill Table A)	What was the cause of? (If cause is already entered in (d-1) circle "X" without asking the question)	(If eye trouble of any kind and 6 years old or over, ask):	(If kind of trouble already entered in col. (d-1), circle "X" without asking the question)	(If part of body can be determined from entries in cols. (d-1) through (d-4), circle "X" without asking the question)	you to cut of on you usual tivit for a much	ause to down our lac- ties as as
	For an accident or injury occurring during past 2 weeks, ask:	(If accident or injury, fill Table A)	read ordinary newspaper print with	,		Check	
	What part of the body was hurt? What kind of injury was it? Anything else?		glasses?			(Go to Col.	
`	(Also, fill Table A)			•		(k))	
(c)	. (d-1)	(d-2)	(d-3)	(d-4)	(d-5)	(e)	(f)
☐ Yes		х	☐ Yes	X	X		
□ No			□ No	i = i			

How many days, includ-		or ove	ears old r, ask: lf "Yes" in col.	DURI	NG THE	st notice PAST 3 MONTHS hat time?	To Inter- viewer:		Please look at this card and	If "1," or "2" or "3" in Col.	
ing the 2 week- ends?	in bed all or most of the day?	week before would you have been working at a job or business (going to school) except for?	(i): How many days did keep you from work (going to	Be fore	During 3 months	time?	(k) is checked or the condition is on either one of Cards A or B, continue; otherwise, STOP	* * *	read each state- ment. Then tell me which state- ment fits you best. (Show Cards C- F, as appro- priate)	card and tell me	🗐
(B)	(h)	(i)	(i)	(k)	(1)	(m) ;	(aa) ·		(1)	(S)	
Days	Days or □ None	☐ Yes	Days or None			□ Last □ Before 2 wks. □ Week before					1

tember quarter. When additional data are collected, it will be possible to make meaningful estimates of the number of school-loss days due to illness.

Estimates of the number of persons who are limited in their activity due to chronic conditions are based on responses to the question in column (r) of table l of the questionnaire, while estimates of persons who are limited in their mobility due to chronic conditions are based on responses to the question in column (s). The categories of chronic activity limitation and chronic mobility limitation from which the respondent chose are described in Appendix II under the definitions of Chronic activity limitation and Chronic mobility limitation, respectively.

RESTRICTED ACTIVITY AND BED DISABILITY

Days of restricted activity and days of bed disability are distributed according to the age and sex of the persons involved in tables 1-3, by sex

and urban-rural residence in tables 4-6, and by sex and condition causing the disability in tables 7-9.

During the period, July-September 1957, a total of 662.8 million person-days of restricted activity due to an illness or an injury occurred. On each day during this period, an average of about 7.3 million people were restricted in their customary activities, because of an illness or an injury. Expressed on an annual basis the days of restricted activity for this quarter averaged about 15.9 days per person per year.

All days when the customary daily activities were restricted for the entire day because of an illness or an injury are considered to be restricted-activity days. Because spending the day in bed or in a hospital or staying home from work or school for the day constitutes restriction of a persons' customary daily activities, these types of disability-days are, of course, included in the count of restricted-activity days.

The average number of restricted-activity days per person per year increased with age. It can be seen in table A and figure 1 that the average number of restricted-activity days starts at a

low of 6.4 days for the age group under 5, climbs steadily to an average of 21.1 days for the age group 45-64, and reaches a peak of 44.4 days for the age group over 65.

Table A. Number of days per person per year of restricted activity and bed disability by age: United States, July-September 1957

Age	Restricted- activity days	Bed- disability days
All ages	15.9	5.5
Under 5 5-14 15-24 25-44 45-64	6.4 8.5 11.7 14.2 21.1 44.4	2.9 3.5 4.3 4.6 6.4 15.4

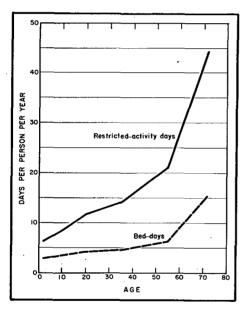


Figure 1. Number of days per person per year of restricted activity and bed disability by age.

Females averaged a greater number of days of restricted activity per year than males. Table B shows that while females averaged 17.5 restricted-activity days per person per year, males averaged 14.1 days per year.

No substantial differences occurred between the urban, rural-nonfarm, and rural-farm populations with respect to average number of restrictedactivity days (table C).

Table B. Number of days per person per year of restricted activity and bed disability by sex: United States, July-September 1957

Sex	Restricted- activity days	Bed- disability days	
Both sexes-	15.9	5.5	
Male Female	14.1 17.5	4.8 6.1	

The chief conditions causing days of restricted activity were respiratory and circulatory. This is true for males and for females. Respiratory and circulatory conditions each accounted for roughly about one fifth of the total number of restricted-activity days during the July-September quarter.

During the period, July-September 1957, the civilian noninstitutional population of the United States had a total of 227.9 million days of bed disability. This means that during this period a daily average of approximately 2.5 million persons spent all or most of the day in bed because of illness. If bed disability continued at this level throughout the year, the average for each person would be 5.5 days of bed disability per year.

A person was considered to have had a day of bed disability if he spent all or most of the day (more than half of the daylight hours) in bed because of an illness or an injury. A day spent in the hospital was considered a day of bed disability even though the person was not actually in bed.

It may be seen in table A and figure 1 that the average number of bed-disability days per person per year increased with age, starting at a low of 2.9 days per person per year for children under 5, and rising slowly to 6.4 days for persons 45-64, then increasing sharply to 15.4 days for persons

Table C. Number of days per person per year of restricted activity and bed disability by residence: United States, July-September 1957

Residence	Restricted- activity days	Bed~ disability days
All areas	15.9	5.5
UrbanRural nonfarmRural farm	15.4 16.1 17.8	5.2 5.4 6.7

over 65. The relationship between the number of bed-disability days per person per year and age is similar to the relationship found between the number of restricted-activity days per person per year and age (fig. 1).

During the July-September quarter, males averaged fewer bed-days than females. Table B shows that while males averaged 4.8 bed-days per person per year, females averaged 6.1 days per year. The difference between males and females is especially evident during the childbearing ages, 15-44 (table 3).

Table C shows that the urban, rural-nonfarm, and rural-farm populations experienced about the same average number of days of bed disability per person per year during the July-September quarter. For females, however, it appears that rural-farm women experienced more bed disability during this period than urban or rural-nonfarm women; 8.5 days as compared with 5.7 days (table 6).

The morbidity conditions that caused the greatest proportion of bed-days of disability were respiratory and circulatory; each accounted for about one fifth of the bed-days. The distribution of bed-days among the condition groups was about the same for males as for females (table 8).

The distributions of bed-days and restricted-activity days by condition group for July-September 1957 are not necessarily typical of distributions that would be obtained during other periods. Naturally, one might expect some changes in the distributions with changes in the season. In addition, the figures on acute respiratory diseases for this particular quarter may be quite atypical for the late summer season. The Asian influenza epi emic was in its early stages at this time and this might have had the effect of making the estimates in this report somewhat higher than would be expected for the July-September quarter of other years.

A further word of caution should be given regarding the interpretation of the distributions of days of disability by condition groups. Whenever, a person spent the day in bed or restricted his customary activities for a day because of several conditions, the days of disability were attributed to each such condition. Therefore, the sum of days for all condition groups will be greater than the number of person-days of disability that occurred. Because of this duplication in the count of days for persons with multiple conditions, the condition-days of disability for all or several groups of conditions cannot be added to obtain the total number of person-disability days. Such a total would be an overestimate.

It should be mentioned that, even within the categories presented here, there is some duplication. If, for example, a person's disability-day was caused by 2 separate acute respiratory conditions, the disability-day was attributed to each condition. When all acute respiratory conditions were combined into a single condition group, the day would be counted twice. However, this type of duplication

within the categories presented in this report is believed to be slight. It is likely that most of the duplication occurs between categories rather than within categories.

WORK-LOSS

Work-loss days distributed by age, sex, residence, and type of condition causing the work-loss are presented in tables 10-13. A day was counted as lost from work if the person would have been going to work at a job or business that day, but instead lost the entire work-day because of an illness or an injury.

A total of 126.8 million days were lost from work during the period, July-September 1957, because of an illness or an injury. If a 5-day work week is assumed, then on an average work-day in the quarter approximately 2 million people or about 3 percent of the employed persons missed work because of illness. If the same persons who were working during an average week in the July-September quarter continued working for a 1-year period and if work-loss continued at this rate for the entire year, then a worker would miss an average of 7.9 days from work during the year.

For simplicity, rates of work-loss are expressed as the "number of work-loss days per employed person per year." The statistic actually computed, however, was the "average number of work-loss days per employed person per week" for the July-September quarter. This rate was then annualized by multiplying by 52.

The population bases used in computing these rates was the number of persons employed during an average week in the July-September quarter. The rates presented, therefore, do not represent the average number of work-loss days per year for persons who have worked at any time during the year, since the latter population group is considerably larger than the one used. Furthermore, as has been mentioned previously, the rates, although expressed on an annual basis, refer only to the July-September quarter of 1957.

Looking at the relationship between average work-loss days and age it can be seen from table D and figure 2 that the average number of days lost from work per worker per year was relatively constant for the age groups under 65, but that it was substantially higher for the age group 65 and over. The average days lost per year varied between 6 and 9 days for those under 65 as compared with about 17 days for those 65 years and over.

The procedures used in estimating the average number of work-days lost due to illness, however, may have had the effect of making this age difference unduly large. The information on number of work-days lost was obtained by asking the question "Last week or the week before would you have been working at a job or business except for (name of condition)?." When the response was "Yes," the

Table D. Number of work-loss days per employed person per year for persons 17 years and over by sex and age: United States, July-September 1957

Age	Both sexes	Male	Female
All ages-17+	7.9	7.4	9.0
17-24	7.4 6.3 9.0 17.3	6.3 5.3 9.3 16.8	9.0 8.9 8.1 18.7

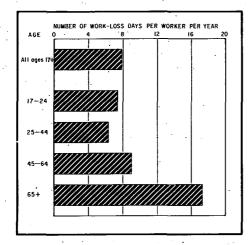


Figure 2. Number of work-loss days per employed person per year by age.

question "How many days did (name of condition) keep you from work?" was asked. Although the purpose of the questions was to obtain all workloss from the current job or business because of an illness or an injury, it is not known the extent to which people with long-term illnesses that keep them from working at all responded positively to the questions. Thus, some work-loss days may have been included for people who have permanently left the labor force because they are unable to work. If this was the case, then the estimates of rates presented here are overestimates since the population base used in computing the rates was the number of employed persons. Because the number of persons who have left the labor force because of illness is extremely small for the younger age groups, the amount of the overestimate for these groups would be slight. There are, however, a substantial number of persons in the age group over 65 who are permanently unable to work, which means that the potential bias is relatively great for this group. Because of this possible bias, the large difference between persons over 65 and those under. 65 with respect to work-loss may be exaggerated.

During the July-September quarter, females averaged a greater number of days of work-loss per person employed than males. Females missed work at the rate of 9.0 days per employed person per year as compared with 7.4 for males (table D).

There was no substantial difference in the average number of work-loss days per worker per year among the 3 place-of-residence categories—urban, rural nonfarm, and rural farm (table E).

Table E. Number of work-loss days per employed person per year for persons 17 years and over by residence: United States, July-September 1957

Residence	Number of days
All areas	7.9
UrbanRural nonfarm	8.1 7.4 7.9

Looking at work-loss days distributed by condition group, it appears that circulatory, respiratory, and digestive conditions and injuries were the leading causes. Each of these condition groups accounted for somewhere between 15 and 20 percent of the work-loss days (table 12). Both seasonal factors and the Asian influenza epidemic, which was in the beginning stage during the latter part of this period, affected this distribution.

The percent distributions of work-days lost by condition group for males and females show some differences—some of which are interesting and may be of importance from a health point of view (table 13). However, the sampling errors for the estimates are quite large and a greater volume of data must be collected before definite conclusions as to the difference in distribution of conditions causing work-loss for the 2 sex groups may be drawn.

CHRONIC LIMITATIONS OF ACTIVITY AND MOBILITY

In addition to obtaining data on the number of disability-days that occurred during the July-September quarter, the survey gathered data on the number of persons who at the time of the interview were experiencing long-term disability because of 1 or more chronic conditions. Tables 14-17, text tables F and G, and figure 3 present estimates relating to limitation of activity and mobility due to chronic conditions. For the purposes

Table F. Percent of persons by chronic limitation of activity according to age: United States, July-September 1957

Limitation of activity	All ages	Under 45	45-64	65+
All persons	100	100	100	100
With no chronic condition or activity limitation	90	96	83	58
With chronic activity limitation	10	4	17	: 42
Not limited in major activity but otherwise limitedLimited in amount or kind of major	3	. 2	S 5	9
Unable to carry on major activity	5 2	0	3	. 18 15

of this survey chronic conditions are defined as those conditions whose onset was 3 months or more prior to the week of interview or any condition listed on the "Check List of Chronic Conditions" or on the "Check List of Impairments." (These lists are reproduced in Appendix II.) Chronic conditions meeting this definition may include such ailments as "back trouble," hay fever, cysts, and flat feet, as well as such conditions as heart trouble, diabetes, and arthritis. Thus, included among the chronic conditions are both minor and serious ailments.

In this reportall persons for whom 1 or more chronic conditions were reported were classified according to the degree to which their major activity was limited. Play was considered to be the major activity of children of preschool age, going to school the major activity of school-age children, housework the major activity of housewives, and working at a job or business the major activity of all other persons.

As of August 1957, there were approximately 69.2 million persons in the Nation with 1 or more chronic conditions. This represents about 41 percent of the civilian noninstitutional population. Of this 41 percent with chronic conditions, 31 percent had no activity limitation, 3 percent were not limited in their major activity but were limited in other activities, about 5 percent were limited in the amount or kind of major activity that they could

Table G. Percent of persons by chronic limitation of mobility according to age: United States, July-September 1957

Limitation of mobility	All ages	Under 45	45 - 64	65+
All persons	100	100	100	100
With no chronic condition, activity limitation or mobility limitation	97	99	96	79 21
Has trouble getting around alone Cannot get around alone Confined to house	2 1 1	0 0 0	3 1 1	12 4 .5

pursue, and 2 percent were completely unable to carry on their major activity (table 15). Males and

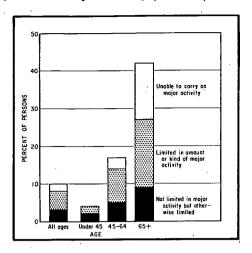


Figure 3. Percent of persons with limitation of activity due to chronic conditions according to age.

females were distributed about the same with respect to activity limitation.

As might be expected, the proportion of persons with chronic activity limitation increased with age, varying from 4 percent for the age group under 45 to 17 percent for the age group 45-64 to a high of 42 percent for the age group 65 and over (table F and fig. 3).

All persons reported to have some chronic limitation of activity were categorized according to the degree of chronic limitation of mobility, that is, according to how well they could "get around." As of August 1957, about 2 percent of the population had trouble getting around alone, 1 percent could not get around at all alone, and 1 percent were confined to the house. About the same proportions of males and females were limited in their mobility. As would be expected, the proportion of persons who were limited in their mobility to any degree increased with age, varying from approximately 1 percent for the age group under 45 to 21 percent for the age group 65 and over (table G).

DETAILED TABLES

			Page
able	1.	Number of days of restricted activity and bed disability by sex and age: United States, July-September 1957	10
	2.	Average number of persons each day with restricted activity and with bed disability by sex and age: United States, July-September 1957	. 10
	3.	Number of days per person per year of restricted activity and bed disability by sex and age: United States, July-September 1957	11
	4.	Number of days of restricted activity and bed disability by sex and residence: United States, July-September 1957	11
	5.	Average number of persons each day with restricted activity and with bed disability by sex and residence: United States, July-September 1957	12
	6.	Number of days per person per year of restricted activity and bed disability by sex and residence: United States, July-September 1957	12
	7.	Number of days of restricted activity and bed disability associated with each condition group according to sex: United States, July-September 1957	13
	8.	Percent distribution of restricted-activity days and bed-disability days associated with each condition group according to sex: United States, July-September 1957	14
	9.	Number of days per person per year of restricted activity and bed disability associated with each condition group according to sex: United States, July-September 1957	. 15
:	10.	Work-loss days for persons 17 years and over by sex and age: United States, July-September 1957	16
	11.	Work-loss days for persons 17 years and over by residence: United States, July-September 1957	16
. :	12.	Work-loss days associated with each condition group for persons 17 years and over: United States, July-September 1957	17
:	13.	Work-loss days associated with each condition group for persons 17 years and over according to sex: United States, July-September 1957	18
. :	14.	Number of persons by limitation of activity due to chronic conditions by sex and age: United States, August 1957	19
:	15.	Percent distribution of persons by limitation of activity due to chronic conditions according to sex and age: United States, August 1957	20
:	16.	Number of persons by limitation of mobility due to chronic conditions by sex and age: United States, August 1957	21
:	17.	Percent distribution of persons by limitation of mobility due to chronic conditions according to sex and age: United States, August 1957	22
:	18.	Population used in obtaining the rates shown in this publication by residence, sex. and age: United States. August 1957	23

Table 1. Number of days of restricted activity and bed disability by sex and age: United States,
July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 1!]

	Restricted-activity days			Bed-disability days		
Age	Both sexes	Male	Female	Both sexes	Male	Female
	Number of days in millions					
All ages	662.8	286.8	376.0	227.9	97.8	130.1
Under 55-14	30.6 69.8	15.8 37.3	14.9 32.4	13.7 29.0	6.5 16.1	7.2 13.0
15-24 25-44	60.5 161.7	22.4 62.3	38.1 99.4	22.4 52.7	7.7 18.9	14.7 33.8
45-64	180.3 160.0	77.0 72.0	103.3 88.0	54.5 55.5	23.2 25.4	31.3 30.1

Table 2. Average number of persons each day with restricted activity and with bed disability by sex and age: United States, July-September 1957

(See headnote on table 1)

	13ee nead	note on table					
	With re	With restricted activity			With bed disability		
Age	Both sexes	Male	Female	Both sexes	Male	Female	
		Number of persons in thousands					
All ages	7,283	3,152	4,131	2,505	1,075	1,430	
Under 55-14	337 767	173 410	163 356	151 - 319	72 177	79 142	
15-24 25-44	664 1,777	246 685	418 1,092	247 579	85 207	162 372	
45-6465+	1,981 1,758	846 791	1,135 967	599 610	255 279	344 331	

Table 3. Number of days per person per year of restricted activity and bed disability by sex and age: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11]

	Restric	Restricted-activity days			Bed-disability days		
Age	Both sexes	Male	Female	Both sexes	Male	Female	
All ages	15.9	14.1	17.5	5.5	4.8	6.1	
Under 5	6.4 8.5 11.7 14.2 21.1 44.4	6.4 8.9 9.4 11.4 18.5 43.6	6.3 8.0 13.7 16.7 23.5 45.2	2.9 3.5 4.3 4.6 6.4 15.4	2.7 3.8 3.2 3.5 5.6 15.4	3.1 3.2 5.3 5.7 7.1 15.5	

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention.

Table 4. Number of days of restricted activity and bed disability by sex and residence: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.

	Restricted-activity days			Bed-disability days		
Residence	Both sexes	Male	Female	Both sexes	Male	Female
		Num	ber of day	s in millio	ons .	•
All areas	662.8	286.8	376.0	227.9	97.8	130.1
Urban	387.2 182.8 92.8	163.1 85.5 38.1	224.1 97.3 54.7	132.0 60.8 35.1	55.8 28.1 13.9	76.2 32.8 21.2

Table 5. Average number of persons each day with restricted activity and with bed disability by sex and residence: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 11.]

	With restricted activity			With bed disability			
Residence	Both Male Female			Both sexes	Male	Female	
	Number of persons in thousands						
All areas	7,283	3,152	4,131	2,505	1,075	1,430	
Urban	4,255 2,009 1,020	1,793 940 419	2,462 1,069 601	1,451 668 386	613 308 153	837 360 233	

Table 6. Number of days per person per year of restricted activity and bed disability by sex and residence: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.

	Restricted-activity days			Bed-disability days		
Residence	Both sexes	Male	Female	Both sexes	Male	Female
All areas	15.9	14.1	17.5	5.5	4.8	6.1
UrbanRural nonfarm	15.4 16.1 17.8	13.7 15.1 14.0	16.9 17.0 22.1	5.2 5.4 6.7	4.7 5.0 5.1	5.7 5.7 8.5

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention.

Table 7. Number of days of restricted activity and bed disability associated with each condition group according to sex: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix !. Definitions of terms are given in Appendix II.]

	Restric	ted-activi	ty days	Bed-	disability	days
Condition group	Both sexes	Male	Female	Both sexes	Male	Female
		Num	ber of day	s in milli	ons	
Total person-days	662.8	286.8	376.0	227.9	47.8	130.1
Infectious and parasitic Acute	32.3 8.8	14.4 6.4	17.9 2.4	15.5 4.9	6.3 3.6	9.1 1.3
Circulatory AcuteChronic	3.9 138.7	2.2 59.9	1.6 78.8	1.0 49.3	0.0 23.6	1.0 25.7
Respiratory Acute Chronic	100.7 33.6	38.3 18.0	62.4 15.6	42.4 9.8	18.1 6.5	24.3 3.2
Digestive Acute	22.8 61.4	9.9 29.8	12.9 31.6	9.2 24.9	3.3 11.8	5.9 13.1
Genitourinary AcuteChronic	4.7 38.4	0.1 12.6	4.7 25.8	2.1 19.7	0.1 7.5	2.0 12.2
Arthritis and rheumatism ²	65.2	28.3	36.9	17.6	8.6	9.0
Injuries AcuteChronic	69.1 14.7	31.5 10.8	37.6 3.9	19.9 5.2	9.7 3.3	10.2 1.9
Impairments due to injuries ²	31.7	13.0	18.7	6.2	1.8	4.4
Other impairments ²	62.9	38.5	24.4	21.6	14.7	7.0
All other conditions AcuteChronic	48.7 164.3	15.0 75.7	33.6 88.6	13.7 48.7	4.7 19.7	9.0 29.0

^IThe sum of the condition—days is greater than the total person—days because a single restricted—activity day or bed—disability day may be associated with more than one condition.

 $^{^2}$ Chronic by definition.

 $^{^3}$ Injuries producing current illness or other effects are classified as acute or chronic according to whether the injury occurred within 3 months or prior to 3 months before the week of interview.

Table 8. Percent distribution of restricted-activity days and bed-disability days associated with each condition group according to sex: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix !. Definitions of terms are given in Appendix !!]

,	Restrict	ed-activit	y days	Bed-disability days			
Condition group	Both sexes	Male	Female	Both sexes	Male	Female	
Total person-days!	100.0	100.0	100.0	100.0	100 . 0	100.0	
Infectious and parasitic Acute	4.9 1.3	5.0 2.2	4.8 0.6	6.8	6.5 3.7	7.0 1.0	
Circulatory Acute Chronic	0.6 20.9	0.8 20.9	0.4 21.0	0.4 21.6	0.0 24.1	0.8 19.8	
Respiratory AcuteChronic	15.2 5.1	13.3 6.3	16.6 4.2	18.6 4.3	18.6 .6.7	18.6 2.5	
Digestive AcuteChronic	3.4 9.3	3.4 10.4	3.4 8.4	4.0 10.9	3.4 12.0	4.5 10.1	
Genitourinary Acute Chronic	0.7 5.8	0.0 4.4	1.2 6.9	0.9 8.7	0.1 7.7	1.5 9.4	
Arthritis and rheumatism ²	9.8	.9.9	9.8	7.7	8.8	6.9	
Injuries Acute	10.4 2.2	11.0 3.8	10.0	8.7 2.3	9.9 3.4	7.9 1.5	
Impairments due to injuries ²	4.8	4.5	5.0	- 2.7	1.8	3.4	
Other impairments ²	9.5	13.4	6.5	9.5	15.0	5.4	
All other conditions AcuteChronic	7.3 24.8	5.2 26.4	8.9 23.6	6.0 21.4	4.8 20.1	6.9 22.3	

¹The sum of the condition-days is greater than the total person-days because a single restricted- activity day or bed-disability day may be associated with more than one condition.

 $^{^2\}mathrm{Chronic}$ by definition.

³Injuries producing current illness or other effects are classified as acute or chronic according to whether the injury occurred within 3 months or prior to 3 months before the week of interview.

Table 9. Number of days per person per year of restricted activity and bed disability associated with each condition group according to sex: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix !!.

	Restric	ted-activi	ty days	Bed-disability days		
Condition group	Both sexes	Male	Female	Both sexes	Male	Female
2						
Total person-days ²	15.9	14.1	17.5	5.5	4.8	6.1
Infectious and parasitic				,		
AcuteChronic	0.8	0.7	0.8	0.4 0.1	0.3	0.4 0.1
Circulatory						
Acute	0.1 3.3	0.1 2.9	0.1 3.7	0.0 1.2	0.0 1.2	0.0
GHIOHIC	3.3	2.9	3.7	1.2	1.2	1.2
Respiratory						
AcuteChronic	2.4 0.8	1.9 0.9	2.9 0.7	1.0 0.2	0.9 0.3	1.1 0.2
Digestive	4					*. *
AcuteChronic	0.5	0.5	0.6	0.2	0.2	0.3
CHIORIC	1.5	1.5	1.5	0.6	0.6	0.6
Genitourinary						
Acute Chronic	0.1 0.9	0.0	0.2	0.0 0.5	0.0 0.4	9.1 0.6
7						
Arthritis and rheumatism ³	1.6	1.4	1.7	0.4	0.4	0.4
Injuries ⁴						
AcuteChronic	1.7	1.6	1.8	0.5	0.5	0.5
Chronic	0.4	0.5	0.2	0.1	0.2	0.1
Impairments due to injuries ³	0.8	0.6	0.9	0.1	0.1	0.2
Other impairments ³	1.5	1.9	1.1	0.5	0.7	0.3
All other conditions						grad to the
Acute Chronic	1.2 3.9	0.7	1.6 4.1	0.3 1.2	0.2	0.4
GILOUILE	3.9	3.7	4.1	1.2	1.0	1.4

 $^{^{}m I}$ Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention.

²The sum of the condition-day rates is greater than the total person-day rates because a single restricted-activity day or bed-disability day may be associated with more than one condition.

³Chronic by definition.

⁴Injuries producing current illness or other effects are classified as acute or chronic according to whether the injury occurred within 3 months or prior to 3 months before the week of interview.

Table 10. Work-loss days for persons 17 years and over by sex and age: United States, July-September 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

Sex and age	Number of work-loss days during quarter (in millions)	Number of work- loss days per employed person per year
Both sexes		
All ages-17+	126.8	7.9
17-24	17.6 46.8 48.8 13.5	7.4 6.3 9.0 17.3
<u>Male</u> All ages-17+	81.2	7.4
17-24	8.9 27.4 34.8 10.1	6.3 5.3 9.3 16.8
Female	·	
All ages-17+	45.6	9.0
17-24	8.7 19.4 14.0 3.4	9.0 8.9 8.1 18.7

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention. The figures shown in this column are 52 times the estimated number of work-loss days per employed person per week. Estimates of the number of employed persons for August 1957 were obtained from Current Population Reports, Series P-57, No. 182, September 1957.

Table 11. Work-loss days for persons 17 years and over by residence:
United States, July-September 1957

(See headnote on table 10)

Residence	Number of work-loss days during quarter (in millions)	Number of work- loss days per employed person per year!	
All areas	126.8	7.9	
Urban Rural nonfarm Rural farm	84.4 26.6 15.8	8.1 7.4 7.9	

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention. The figures shown in this column are 52 times the estimated number of work-loss days per employed person per week. Estimates of the number of employed persons for August 1957 were obtained from unpublished data for the Current Population Survey.

Table 12. Work-loss days associated with each condition group for persons 17 years and over:
United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix II.

Condition group	Number of work-loss days during quarter (in millions)	Percent distribu- tion of work-loss days during quarter			
Total person-days ²	126.8	100.0	7.9		
Infectious and parasitic Acute	6.0 1.8	4.7 1.4	0.4 0.1		
Circulatory AcuteChronic	1.2 20.6	0.9 16.3	0.1 1.3		
Respiratory AcuteChronic	16.5 7.4	13.0 5.8	1.0 0.5		
Digestive AcuteChronic	5.4 15.1	4.2 11.9	0.3 0.9		
Genitourinary Acute Chronic	0.9 6.1	0.7 4.8	0.1 0.4		
Arthritis and rheumatism 3	9.4	7.4	0.6		
Injuries 4 AcuteChronic	18.7 4.5	14.7 3.5	1.2 0.3		
Impairments due to injuries ³	6.8	5.4	0.4		
Other impairments ³	14.9	11.7	0.9		
All other conditions AcuteChronic	8.9 31.1	7.0 24.5	0.6		

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention. The figures shown in this column are 52 times the estimated number of work-loss days per employed person per week. Estimates of the number of employed persons for August 1957 were obtained from <u>Current Population Reports</u>, Series P-57, No. 182, September 1957.

 $^{^2}$ The sum of the condition-days is greater than the total person-days because a single work-loss day may be associated with more than one condition.

³Chronic by definition.

⁴Injuries producing current illness or other effects are classified as acute or chronic according to whether the injury occurred within 3 months or prior to 3 months before the week of interview.

Table:13. Work-loss days associated with each condition group for persons 17 years and over according to sex: United States, July-September 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.

Sex and condition group	Number of work-loss days during quarter (in millions)	Percent distribu- tion of work-loss days during quarter	Number of work- loss days per employed person per year	
Both sexes				
Total person-days ²	126.8	100.0	7.9	
Infectious and parasitic	7.8	6.2	0.5	
Circulatory	21.8	17.2	1.4	
Respiratory	23.9	18.8	1.5	
Digestive	20.5	16.2	1.3	
Genitourinary	7.0	5.5	0.4	
Arthritis and rheumatism	9.4	7.4	0.6	
Injuries and impairments due to				
injuries	30.0	23.6	1.9	
Other impairments	14.9	11.7	0.9	
All other conditions	40.0	31.5	2.5	
Male				
	,	l l		
Total person-days ²	81.2	100.0	7.4	
Infectious and parasitic	4.9	6.0	0.4	
Circulatory	13.7	16.9	1.3	
Respiratory	12.5	15.4	1.1	
Digestive	12.4	15.3	1.1	
Genitourinary	2.6	3.2	0.2	
Arthritis and rheumatism	6.7	8.3	0.6	
Injuries and impairments due to				
injuries	20.1	24.7	1.8	
Other impairments	13.6	16.7	1.2	
All other conditions	25.5	31.4	2.3	
<u>Female</u>		·		
Total person-days ²	45.6	100.0	9.0	
Infectious and parasitic	2.9	6.4	0.6	
Circulatory	8.1	17.7	1.6	
Respiratory	11.4	25.0	2.2	
Digestive	8.1	17.7	1.6	
Genitourinary	4.4	9.6	0.9	
Arthritis and rheumatism	2.7	5.9	0.5	
Injuries and impairments due to	_,,			
injuries	9.9	21.8	2.0	
Other impairments	1.3	2.9	0.3	

Rates for the quarterly data are expressed on an annual basis, in accordance with the usual convention. The figures shown in this column are 52 times the estimated number of work-loss days per employed person per week. Estimates of the number of employed persons for August 1957 were obtained from <u>Current Population Reports</u>, Series P-57, No. 182, September 1957.

 $^{^2}$ The sum of the condition-days is greater than the total person-days because a single work-loss day may be associated with more than one condition.

Table 14. Number of persons by limitation of activity due to chronic conditions by sex and age:
United States, August 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II]

	Age					
Limitation of activity	All ages	Under 15	15-24	25-44	45-64	65+
		Number	of perso	ns in mil	lions	<u> </u>
Both sexes		1 . '	1	. <i>.</i> . I		I
All persons	167.1	52.1	20.7	. 45.6	, 34.2	14.4
With no chronic conditions	97.9	43.3°	14.3	23.2	13.7	3.5
With 1+ chronic conditions	69.2	8.8:	6.4	22.5	20.6	10.9
Not limited in activities	52.3	8.1	5.5	18.9	14.8	4.9
Not limited in major activity but otherwise limited	5.1	0.3	0.4	1.3	1.8	1.3
major activity	8.2	0.3	0.3	1.9	3.0	2.6
Unable to carry on major activity	3.7	0.1	0.1	0.4	1.0	2.2
<u>Male</u>		· · · · ·				
All persons	81.2	26.6	9.6	21.9	16.6	6.6
With no chronic conditions	49.9	21.7	7.1	12.2	7.3	1.7
With 1+ chronic conditions	31.3	4.9	2.5	9.7	9.3	4.9
Not limited in activities	23.4	4.5	2.1	8.0	6.7	2.1
Not limited in major activity but otherwise limited Limited in amount or kind of	2.0	0.2	0.2	0.5	0.6	0.5
major activity	3.7	0.2	0.1	1.0	1.3	1.0
Unable to carry on major activity	2.3	0.1	0.0	0.2	0.6	1.3
<u>Female</u>	٠ .					
All persons	85.9	25.5	11.1	23.8	17.6	7.8
With no chronic conditions	48.0	21.7	7.2	11.0	6.3	1.8
With 1+ chronic conditions	37.9	3.9	3.9	12.8	11.3	6.0
Not limited in activities	28.8	3.6	3.4	10.9	8.1	2.8
Not limited in major activity but otherwise limited	3.1	0.1	0.3	0.7	1.2	0.8
major activity Unable to carry on major activity	4.5 1.4	0.1 0.0	0.2 0.1	1.0	1.7 0.3	1.6 0.9

Table 15. Percent distribution of persons by limitation of activity due to chronic conditions according to sex and age: United States, August 1957

Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

	Age					
Limitation of activity	All ages	Under 15	15-24	25-44	45-64	65+
Both sexes						
All persons	100.0	100.0	100.0	100.0	100.0	100.0
With no chronic conditions	58.6	83.1	69.2	50.8	39.9	24.0
With 1+ chronic conditions	41.4	16.9	30.8	49.2	60.1	76.0
Not limited in activities	31.3	15.5	26.8	41.5	43.3	33.7
Not limited in major activity but otherwise limited	3.0	0.6	2.0	2.7	5.2	9.0
activity	4.9 2.2	0.6 0.1	1.7 0.4	4.2 0.8	8.8 2.8	18.2 15.1
<u>Male</u>						
All persons	100.0	100.0	100.0	100.0	100.0	100.0
With no chronic conditions	61.5	81.6	74.1	55.7	43.9	25.6
With 1+ chronic conditions	38.5	18.4	25.9	44.3	56.1	74.4
Not limited in activities Not limited in major activity but	28.8	16.8	22.5	36.6	40.5	31.6
otherwise limited	2.4	0.8	1.6	2.3	3.6	7.3
activity Unable to carry on major activity	4.5 2.8	0.6 0.2	1.5 0.3	4.4 1.0	8.0 3.9	15.8 19.7
<u>Female</u>			,		٠	
All persons	100.0	100.0	100.0	100.0	100.0	100.0
With no chronic conditions	55.9	84.8	65.0	46.2	36.0	22.7
With 1+ chronic conditions	44.1	15.2	35.0	53.8	64.0	77.3
Not limited in activities	33.6	14.3	30.5	46.0	46.0	35.5
Not limited in major activity but otherwise limited	3.6	0.4	2.3	3.1	6.8	10.3
Unable to carry on major activity	5.3 1.6	0.5 0.1	1.8 0.5	4.1 0.6	9.4 1.8	20.2 11.3

Table 16. Number of persons by limitation of mobility due to chronic conditions by sex and age:
United States, August 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix 1. Definitions of terms are given in Appendix 1!.]

Limitation of mobility	All ages	Under 45	45-64	65+
	Number of persons in millions		ions	
Both sexes				
All persons	167.1	118.5	34.2	14.4
With no chronic conditions	97.9	80.8	13.7	3.5
With 1+ chronic conditions	69.2	37.6	20.6	10.9
Not limited in mobility Has trouble getting around alone Cannot get around alone Confined to house	63.7 3.2 1.0 1.3	36.7 0.6 0.2 0.2	19.1 0.9 0.2 0.4	8.0 1.7 0.6 0.7
Male				
All persons	81.2	58.0	16.6	6.6
With no chronic conditions	49.9	40.9	7.3	1.7
With 1+ chronic conditions	31.3	17.1	9.3	4.9
Not limited in mobility	28.9 1.5 0.3 0.6	16.5 0.3 0.1 0.1	8.7 0.4 0.1 0.2	3.7 0.8 0.1 0.3
<u>Female</u>	·		•	
All persons	85.9	60.5	17.6	7.8
With no chronic conditions	48.0	39.9	6.3	1.8
With 1+ chronic conditions	37.9	20.6	11.3	6.0
Not limited in mobility	34.8 1.7 0.7 0.7	20.1 0.3 0.1 0.1	10.4 0.5 0.2 0.2	4.3 0.9 0.5 0.4

Table 17. Percent distribution of persons by limitation of mobility due to chronic conditions according to sex and age: United States, August 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

Limitation of mobility	All ages	Under 45	45-64	65+
			,	-
Both sexes			,	
All persons	100.0	100.0	100.0	100.
With no chronic conditions	58.6	68.2	39.9	24.
With 1+ chronic conditions	41.4	31.8	60.1	76.
Not limited in mobility	38.1	31.0	55.7	55.
Has trouble getting around alone	1.9	0.5	2.7	11.
Cannot get around alone	0.6	0.1	0.6	4
Confined to house	0.8	0.2	1.1	4
		* 3		
<u>Male</u>				
All persons	100.0	100.0	100.0	100
With no chronic conditions	61.5	70.6	43.9	25.
ith 1+ chronic conditions	38.5	29.4	56.1	74
Not limited in mobility	35.6	28.5	52.0	56
Has trouble getting around alone	1.9	0.5	2.7	11
Cannot get around alone	0.3	0.1	0.3	1
Confined to house	0.8	0.3	1.1	· · 4
		•	,	
<u>Female</u>				
All persons	100.0	100.0	100.0	100
ith no chronic conditions	55.9	66.0	36.0	22
ith 1+ chronic conditions	44.1	34.0	64.0	77
Not limited in mobility	40.5	33.3	59.1	54
Has trouble getting around alone	1.9	0.5	2.8	11
Cannot get around alone	0.8	0.1	0.9	. 5
Confined to house	0.8	0.1	1.1	5.

Table 18. Population used in obtaining the rates shown in this publication by residence, sex, and age: United States, August 1957

[Data are based on household interviews during July-September 1957 and are preliminary. Data refer to the civilian noninstitutional population of continental United States. Detailed figures may not add to totals due to rounding. The survey design, general qualifications, and information on the reliability of the estimates are given in Appendix I. Definitions of terms are given in Appendix II.]

Sex and age		Residence			
	All areas	Urban	Rural nonfarm	Rural farm	
	P	opulation	in million	s	
Both sexes					
All ages	167.1	100.8	45.4	20.8	
Under 5	19.2	10.5	6.5	2.2	
5-9	18.0	10.0	5.6	2.4	
10-14	15.0	8.3	4.4	2.3	
15-19	11.2	6.6	2.8	1.8	
20-24	9.5	6.0	2.3	1.1	
25-29	10.9	6.5	3.5	0.9	
30-34	11.9	6.8	4.0	1.1	
35-44	22.8	14.1	5.9	2.8	
45-54	19.5	12.9	4.2	2.4	
55-64	14.8	9.9	2.9	1.9	
65+	14.4	9.1	3.3	2.0	
<u>Male</u>					
All ages	81.2	47.7	22.6	10.9	
Under 5	9.8	5.2	3.6	1.0	
5-9	9.2	4.9	3.0	1.3	
10-14	7.6	4.2	2.2	1.2	
15-19	5.4	3.1	1.3	1.0	
20-24	4.2	2.7	0.9	0.6	
25-29	5.2	3.0	1.7	- 0.5	
30-34	5.7	3.3	1.8	0.6	
35-44	11.0	6.5	3.1	1.3	
45-54	9.5	6.2	2.1	1.2	
55-64	7.1	4.7	1.4	1.1	
65+	6.6	4.0	1.6	1.1	
<u>Female</u>					
All ages	85.9	53.1	22.8	9.9	
Under 5	9.4	5.3	3.0	1,2	
5-9	8.8	5.1	2.6	1.1	
10-14	7.3	4.2	2.1	1.0	
15-19	5.8	3.5	1.5	0.8	
20-24	5.3	3.3	1.4	0.6	
25-29	5.7	3.5	1.8	0.4	
30-34	6.2	3.5	2.2	0.5	
35-44	11.8	7.6	2.8	1.4	
45-54	10.0	6.7	2.1	1.2	
55-64	7.6	5.2	1.6	0.9	
65+	7.8 7.8	5.1	1.8	0.9	

NOTE: The detailed data appearing in this table were derived from the sample of the National Health Survey, and are intended for computation of rates in connection with health data given in this report. They may differ from official estimates of the Bureau of the Census. For estimates of urban and rural population by age and sex for more general use, see Bureau of the Census reports on the civilian population of the United States by type of residence, in <u>Current Population</u> Reports: Series P-20.

APPENDIX I

TECHNICAL NOTES ON METHODS

Background of This Report

This Preliminary Report on Disability is one of a series of statistical reports which cover separate health-related topics prepared by the U. S. National Health Survey. The report is based on information collected in the nationwide continuing sample household interview survey which is a main aspect of the

The household interview survey uses a questionnaire which, in addition to personal and demographic characteristics, solicits information on chronic and acute conditions, accidents, medical care, dental care, and hospitalization. As interview data relating to each of these various broad subject areas is tabulated and analyzed, separate reports are to be issued covering one or more specific topics. In the interest of prompt publication, some of these reports are provisional or abbreviated. However, the continuous character of the household survey permits the collection of data for different periods of the year and the gradual accumulation of data sufficient to permit progressively more detailed classification and tabulation. For this reason preliminary reports may be superseded when a larger accumulation of data and a need for more detailed information indicate amplification. For example, the present report, based as it is on data from a single calendar quarter, does not permit the detail-in terms of tabulations involving demographic, social, economic, or health variables-which could be extracted from data accumulated for a number of quarters.

Data for Present Report

The present report is based on the consolidated sample for 13 weeks of interviewing ending September 29, 1957. In accordance with the explanation of the following section, the data yielded are treated in analysis as incidence and prevalence figures for the third cal-

endar quarter of the year.

The population covered by the sample for the household interview survey is the civilian population of the continental United States living at the time of interview. Although the sample collection covers persons living as inmates of resident-type institutions, data for these persons are not included in the figures given in these reports pending special study of the applicability of the interview-type questionnaire to these persons. The sample does not include members of the Armed Forces. United States nationals living in foreign countries, and crews of vessels. It should also be noted that the data presented do not comprise a complete count of disability-days for any specified calendar period since no adjustment has been made for persons dying during the period covered by the report.

Statistical Design of the Household-Interview Survey

General plan.—The sampling plan of the survey follows a multistage probability design which permits a continuous sampling of the civilian population of the United States. The first stage of this design consists of an area sample of 372 from among approximately 1,900 geographically defined Primary Sampling Units (PSU's) into which the continental United States has been divided. A PSU is a county, a group of contiguous counties, or a Standard Metropolitan Area.

With no loss in general understanding, the remaining stages can be telescoped and treated in this discussion as an ultimate stage. Within PSU's then, ultimate stage units called segments are defined, also geographically, in such a manner that each segment contains an expected six households in the sample, Each week a random sample of about 120 segments is drawn. In the approximately 700 households in those segments persons are interviewed concerning illnesses, injuries, chronic conditions, disability, and other factors related to health.

The household members interviewed each week are an independent representative sample of the population so that samples for successive weeks can be combined into larger samples for, say, a calendar quarter, or a year. Thus the design permits both continuous measurement of characteristics of high incidence or prevalence in the population, and through the larger consolidated samples more detailed analysis of less common characteristics and smaller categories. The continuous collection has administrative and operational advantages, as well as technical assets, since it permits field work to be handled with an experienced,

Sample size and geographic detail.—The national sample plan over a 12-month period includes approximately 115,000 persons from 36,000 households in 6,000 segments, with representation from every State. The overall sample was designed in such a fashion that from the annual sample tabulations can be provided for various geographic sections of the United States and for urban and rural sectors of the Nation.

Collection of data.—The field operations for the household survey are performed by the Bureau of the Census under general specifications established by the Public Health Service. In accordance with these specifications the Bureau of the Census designs and selects the sample, conducts the field interviewing acting as collecting agent for the Public Health Service, and edits and codes the questionnaires. Tabulations and most of the editing are handled on the Bureau of the Census electronic computers. Final tables and published reports are planned and prepared by the Public Health

Estimating methods.—Each statistic produced by the Survey—for example, the number of persons with one or more bed-days of disability in a specified period—is the result of two stages of ratio estimation. In the first of these, the ratio factor is 1950 decennial population count to estimated population for 1950 for the U. S. National Health Survey first-stage sample of PSU's. These factors are applied for 132 color-residence classes.

Later, ratios of sample-produced estimates of the population to official Bureau of the Census figures for current population in 76 age-sex-color classes are computed, and serve as second-stage factors for ratio estimating.

The effect of the ratio estimating process is to make the sample more closely representative of the population by age, sex, color, and residence, thus reducing sampling variance.

As noted, each week's sample represents the population living during that week and characteristics of that population. Consolidation of samples over a time period, say a calendar quarter, produces estimates of average characteristics of the United States population for that calendar quarter.

For prevalence statistics, such as number of persons with impairments, or number of persons classified by interval since last medical visit, figures presented for a designated calendar quarter are averages of estimates for all weeks of interviewing in that quarter.

For other types of statistics-namely those measuring the number of occurrences during a specified time period—such as number of visits to a doctor or a dentist, or number of days of disability, a similar computational procedure is used, but the statistics have a different interpretation. For many of these items, the questionnaire asks for the respondent's experience over the two calendar weeks prior to week of interview. In such instances, unless a contrary indication is given in the text, the estimate of quarterly total for the statistic is simply 6% times the average two-week estimate produced by the 13 successive samples taken during the quarter. Thus the experience of persons interviewed during the quarter-experience which actually occurred for each person in a two-calendar week interval prior to week of interview—usually is treated in analysis as though it measured the total of such experience occurring in the quarter. For most statistics, such interpretation leads to no significant bias.

In many instances, rates for a quarter are converted to an annual basis, in accordance with usual convention, in order to facilitate comparison of rates for time periods of different lengths. It must be remembered that any attempt to interpret such a converted figure as a true annual rate is subject to potential seasonal bias.

General Qualifications

Nonresponse.—Data were adjusted for nonresponse by a procedure which imputed to persons in a household not interviewed the characteristics of interviewed persons in the same segment. The total noninterview rate was 7 percent; 1 percent was refusal, and the remainder was accounted for by all other reasons, such as failure to find any household respondent after repeated trials.

The interview process.—The statistics presented in this report are based on the replies secured in interview of persons in households. Each person 18 years and over, available at the time of interview, was interviewed individually. Proxy respondents within the household were employed for children and for adults not available at the time of the interview provided the respondent was related to the person about whom information was being obtained.

There are limitations to the accuracy of diagnostic and other information collected in household interviews. For diagnostic information the household repondent, can, at best, pass on to the interviewer only the information the physician has given to the family. For conditions not medically attended, diagnostic information is often no more than a description of symptoms. However, other types of facts such as those concerning the circumstances and consequences of illness or injury and the resulting action taken or sought by the individual, can be obtained more accurately from household members than from any other source since only the persons concerned are in a position to report all of this type of information.

Rounding of numbers.—Counts in the basic tabulations are made to the nearest whole person or illness, although they are not accurate to that detail. Published aggregates are rounded to a level which seems both to be utilitarian in analysis and meaningful from the sampling point of view. Rates and totals are calculated from worksheet numbers before rounding, and therefore may not always appear to be exactly consistent with published rounded components.

Population figures.—Some of the published tables include population figures for specified categories. These figures are based on the sample of households in the U.S. National Health Survey, and are given solely for the purpose of providing denominators for rate computation, and are more appropriate for use with the accompanying measures of health characteristics than any other data that may be available. In some instances they will permit users to recombine published data into classes more suitable to their specific needs. The population figures are not official estimates, in some cases being themselves subject to considerable variability, and as such should be used only for computation of rates in connection with data given in this report. For fuller details on population estimates see Bureau of the Census reports in the P-20 Series.

Reliability of estimates.—Since the estimates are based on a sample, they will differ somewhat from the figures that would have been obtained if a complete census had been taken using the same schedules, instructions, and interviewing personnel and procedures. As in any survey, the results are also subject to measurement error.

The standard error is primarily a measure of sampling variability, that is, the variations that might occur by chance because only a sample of the population is surveyed. As calculated for this report, the standard error also reflects part of the variation which arises in the measurement process. It does not include estimates of any biases which might lie in the data. The chances are about 68 out of 100 that an estimate from the sample would differ from a complete census by less than the standard error. The chances are about 95 out of 100 that the difference would be less than twice the standard error and about 99 out of 100 that it would be less than 2½ times as large.

The illustration below is presented to give standard errors of some of the more important characteristics and an interpretation of the standard errors.

The reliability of an estimated rate or percentage, computed by using sample data for both numerator and denominator, depends upon both the size of the rate and the size of the total upon which the rate is based. Estimated rates are relatively more reliable than the corresponding absolute estimates of the numerator of the rate, particularly if the rate is high.

As more data become available, it will be possible to give general guides and rules of thumb which will permit determination of approximate sampling relia-

bility of figures in these reports.

<u>Illustration</u>.—The number of person-days of restricted activity during the quarter, July through Sep-

tember 1957, was estimated to be 662,800,000. The chances are about 68 out of 100 that the difference between the estimate and the figure which would have been obtained from a complete census is less than 25,200,000, the standard error of the estimate. An estimated 16,900,000 persons were limited in activity due to chronic conditions. The chances are about 68 out of 100 that the difference between the estimate and the figure which would have been obtained from a complete census is less than 500,000. The number of persondays lost from work during the quarter was estimated to be 126,800,000. The chances are about 68 out of 100 that the difference between the estimate and the figure which would have been obtained from a complete census is less than 10,600,000.

APPENDIX II

DEFINITIONS OF CERTAIN TERMS USED IN THIS REPORT

The following are definitions of certain terms used in this report which have a specialized meaning in the U. S. National Health Survey.

Terms Relating to Disability

Disability.-Disability is a general term used to describe any temporary or long-term reduction of a person's activity as a result of an acute or chronic condition.

Disability days are classified according to whether they are days of restricted activity, bed days, hospital days, work-loss days, or school-loss days. All hospital days are, by definition, days of bed disability; all days of bed disability are, by definition, days of restricted activity. The converse form of these statements is, of course, not true. Days lost from work and days lost from school are special terms which apply to the working and school-age populations only, but these, too, are days of restricted activity. Hence, 'days of restricted activity" is the most inclusive term used to describe disability days.

Disability of persons with chronic conditions is also described by the extent to which their major activity or their mobility is limited. The terms used in this connection are chronic limitation of activity and chronic limitation of mobility.

These terms relating to disability which are used

in this report are defined below.

Restricted-activity day. -- A day of restricted activity is a day when a person cuts down on his usual activities for the whole of that day on account of an illness or an injury. The term "usual activities" for any day means the things that the person would ordinarily do on that day. For children under school age, "usual activities" depend upon whatever the usual pattern is for the child's day which will, in turn, be affected by the age of the child, weather conditions, and so forth. For retired or elderly persons, "usual activities" might consist of almost no activity, but cutting down on even a small amount for as much as a day would constitute restricted activity. On Sundays or holidays "usual activities" are taken to be the things the person usually does on such days-going to church, playing golf, visiting friends or relatives, or staying at home and listening to the radio, reading, looking at television, and so forth.

Restricted activity does not imply complete inactivity but it does imply only the minimum of "usual activities." A special nap for an hour after lunch does not constitute cutting down on usual activities, nor does the elimination of a heavy chore, such as cleaning ashes out of the furnace or hanging out the wash. If a farmer or housewife carries on only the minimum of the day's chores, however, this is a day of restricted activity.

A day spent in bed or a day home from work or school because of illness or injury is, of course, a restricted-activity day.

Bed-disability day. -- A bed-disability day sometimes for brevity referred to as a "bed day," is a day on which a person was kept in bed either all or most of the day because of an illness or an injury. "All or most of the day" is defined as: more than half of the daylight hours. All hospital days are included as beddisability days even if the patient was not actually in bed at the hospital.

Work-loss day. - A day is counted as lost from work if the person would have been going to work at a job or business that day but instead lost the entire work day because of an illness or an injury. If the person's regular work day is less than a whole day and the entire work day was lost, it would be counted as a whole work day lost. Work-loss days are determined only for persons 17 years of age and over.

Condition-days of disability.—Condition-days of disability are days of disability (of any one of the various classes-restricted activity, bed disability, and so forth) associated with any one condition. Since any particular day of disability may be associated with more than one condition, the sum of days for all conditions adds to more than the total number of person-days of disability.

Person-days of disability.—Person-days of disability are the days of disability (of any one of the various classes-restricted activity, bed disability, and so forth) experienced by any one person. The sum of days for all persons in a group represents an unduplicated count of all days of disability for the group.

Average number disabled each day. - The average number of persons disabled each day (for example, those with restricted activity, bed disability, or work loss) is computed by dividing the "Person-days of disability" during a period by the number of calendar days in the period.

Chronic activity limitation. - Persons with chronic conditions are classified into 4 categories according to the extent to which their activities are limited at present as a result of these conditions. Since the major activities of preschool children, school-age children, housewives, and workers and other persons differ, a different set of criteria is used for each group. There is a general similarity between them, however, as will be seen in the descriptions of the 4 categories below:

1. Persons unable to carry on major activity for their group

Preschool children: inability to take part in

ordinary play with other children.

School-age children: inability to go to school at present.

Housewives: inability to do any housework at present.

Workers and all other persons:

inability to work at a job or business at present.

2. Persons limited in the amount or kind of major

activity performed

Preschool children:

limited in the amount or kind of play with other children, e.g., need special rest periods, cannot play strenuous games, cannot play for long periods at a time.

School-age children:

limited to certain types of schools or in school attendance, e.g., need special schools or special teaching, cannot go to school full time or for long periods at a time. limited in amount or kind of housework, e.g., cannot lift children, wash or iron, or do housework for

Housewives:

Workers and all other persons:

limited in amount or kind of work, e.g., need special working aids or special rest periods at work, cannot work full time or for long periods at a time, cannot do strenuous work.

long periods at a time,

3. Persons not limited in major activity but other-

wise limited

Preschool children:

not classified in this cate-

gory.

School-age children:

not limited in going to school but limited in participation in athletics and other extracurricular ac-

tivities.

Housewives:

not limited in housework but limited in other activities, such as church, clubs, hobbies, civic projects, and shopping.

Workers and all other persons:

not limited in regular work activities but limited in other activities, such as church, clubs, hobbies, civic projects, sports, and games.

4. Persons not limited in major activity

Includes persons with chronic conditions whose activities are not limited in any of the ways described above.

Chronic mobility limitation. - Persons with chronic activity limitation of some degree as a result of 1 or more chronic conditions are classified according to the extent to which their mobility is limited at present. There are 4 categories as follows:

1. Confined to the house—confined to the house all the time except in emergencies.

2. Cannot get around alone-able to go outside

but needs the help of another person in getting around outside.

3 Has trouble getting around alone—able to go outside alone but has trouble in getting around

4. Not limited in mobility—not limited in any of the ways described above.

Terms Relating to Conditions

Condition. - A morbidity condition, or simply a condition, is any entry on the questionnaire which describes a departure from a state of physical or mental wellbeing. It results from a positive response to one of a series of morbidity questions. In the coding and tabulating process conditions which are recorded on the questionnaire are selected or classified according to a number of different criteria, for example, whether they were medically attended; whether they resulted in disability; whether they were acute or chronic; or according to the type of disease, injury, impairment, or symptom, as reported in the interview. For the purposes of each report or set of tables, only those conditions recorded on the questionnaire which satisfy certain stated criteria are included. In this report primary emphasis is placed on those conditions which resulted in some form of disability. These conditions have been further classified into the following groups according to the nature of the condition as reported by the respondent.

Condition Group	ISC* Codes
Infectious and parasitic	001-138
Circulatory	330-334, 400-468
Respiratory	470-527, 783
Digestive	530-587, 784, 785
Genitourinary	590-637, 786, 789
Arthritis and rheumatism	720-727
lnjuries	N800-N999 except 871.
,	886-888.896-898
Impairments due to in-	,
juries	Residual defects result-
,	ing from injuries such
	as blindness, amputa-
	tions, paralyses, and
	other orthopedic defects
Other impairments	Residual defects re-
Onici impairments	sulting from conditions
•	other than injuries
All other conditions	All other conditions

^{*}International Statistical Classification of Diseases, Injuries, and Causes of Death.

Chronic condition.—A condition is considered to be chronic if (1) it is described by the respondent in terms of one of the 26 chronic diseases on the "Check List of Chronic Conditions" or in terms of one of the 9 types of impairments on the "Check List of Impairments," or (2) the condition is described by the respondent as having been first noticed more than 3 months before the week of interview.

Check List of Chronic Conditions

ı				
I	1.	Asthma	14.	Stomach ulcer
I	2.	Any allergy		Any other chronic stomach trouble
I	3.	Tuberculosis	16.	Kidney stones or other kidney trouble
ı	4.	Chronic bronchitis	17.	Arthritis or rheumatism
I	5.	Repeated attacks of sinus trouble	18.	Prostate trouble
I	6.	Rheumatic fever	19.	Diabetes
ı	7.	Hardening of the arteries	20.	Thyroid trouble or goiter
	8.	High blood pressure	21.	Epilepsy or convulsions of any kind
	9.	Heart trouble	22.	Mentai or nervous trouble
	10.	Stroke	23.	Repeated trouble with back or spine
	11.	Trouble with varicose veins	24.	Tumor or cancer
	12.	Hemorrhoids or piles	25.	Chronic skin trouble
		Callbladder or liver trouble	26.	Hernia or rupture

Check List of Impairments

- 1. Deafness or serious trouble with hearing.
- 2. Serious trouble with seeing, even with glasses.
- Condition present since birth, such as cleft palate or club foot.
- 4. Stammering or other trouble with speech
- 5. Missing fingers, hand, or arm
- 6. Missing toes, foot, or leg
- 7. Cerebral palsy
- S. Paralysis of any kind.
- 9. Any permanent stiffness or deformity of the foot or leg, fingers,

Acute conditions.—All conditions not classed as chronic are considered to be acute.

<u>Persons with chronic conditions</u>.—The estimated number of persons with chronic conditions is based on the number of persons who at the time of the interview were reported to have one or more chronic conditions.

Terms Relating to Demographic and Personal Characteristics

Urban and rural residence.—The definition of urban and rural areas used in the U.S. National Health

Survey is the same as that used in the 1950 Census, According to this definition, the urban population comprises all persons living in (a) places of 2,500 inhabitants or more incorporated as cities, boroughs, and villages; (b) incorporated towns of 2,500 inhabitants or more except in New England, New York, and Wisconsin, where "Towns" are simply minor civil divisions of counties; (c) the densely settled urban fringe, including both incorporated and unincorporated areas, around cities of 50,000 or more; and (d) unincorporated places of 2,500 inhabitants or more outside any urban fringe. The remaining population is classified as rural.

Farm and nonfarm residences.—The rural population may be subdivided into the rural-farm population, which comprises all rural residents living on farms, and the rural-nonfarm population, which comprises the remaining rural population.

In deciding whether the members of a household reside on a farm or ranch the statement of the household respondent that the house is on a farm or ranch is accepted with the following exception. A house occupied by persons who pay cash rent for house and yard only is not counted as a farm or ranch even if the surrounding area is farm land. This special case does not cover: (1) the living quarters of a tenant farmer who rents farm land as well as house and yard; (2) the quarters of a hired hand who receives living quarters on a farm as part of his compensation; or (3) separate living quarters inside a structure which is classified as on a farm. In all these cases the living quarters are counted as on a farm.

Employed persons.—The estimates of numbers of employed persons used in this report were obtained from <u>Current Population Reports</u>, Series P-57, No. 182, September 1957. In this publication, employed persons are defined as follows:

"Employed persons comprise those who, during the survey week, were either (a) "at work"—those who did any work for pay or profit, or worked without pay for 15 hours or more on a family farm or business; or (b) with a job but not at work—those who did not work and were not looking for work but had a job or business from which they were temporarily absent because of vacation, illness, industrial dispute, or bad weather, or because they were taking time off for various other reasons."