

Childhood Disability Beneficiaries, 1957-64: Characteristics and Geographic Distribution

by PHOEBE H. GOFF*

HUNDREDS OF THOUSANDS of physically and mentally handicapped young people reach adulthood each year and will continue for the rest of their lives to be unable to participate fully in activities around them and to be dependent on others for social, emotional, and psychological as well as financial support. Many would now have a better chance for independent living had they as children been provided preventive health care and services for treatment of disability-causing illness. Many with unpreventable or unprevented abnormalities may even now be helped to reach a level of personal adjustment and rehabilitation that could lessen or remove their dependence on others for economic support.

As with those who become disabled later in life, one problem in providing preventive care and rehabilitative treatment to children both before and after they reach adulthood is logistic—to bring together existing services and those who need them, to mobilize resources to make essential additional services available and accessible to all. A task force on economic growth and security¹ suggests that this mobilization “is seriously handicapped by the lack of basic information about the nation’s disabled people, who they are, what their disabilities are, where they live, who could profit most from given kinds of programs, etc. Efforts to develop more data on America’s disabled should be fully supported.”

When Congress amended the Social Security Act in 1954 to provide benefits for severely disabled workers and for adults who had been disabled in childhood, the Social Security Administration became one additional means of identifying the “who, the what, and the where” of the disabled.

From 1955 through 1965 more than 4 million persons applied for benefits because of disability. Of these, 2.4 million were able to qualify on the basis of severity of disability and amount of

employment covered under the social security program. Among the 4 million were 270,000 adults with childhood disabilities who applied for dependents’ benefits as disabled sons and daughters of insured workers who had retired, died, or were themselves disabled. This report relates to the 225,000 in the latter group who met the qualifications. About 198,000 of these disabled persons were receiving monthly benefits in December 1965 that amounted to more than \$10 million.² For them, the natural sequelae of disability—medical, economic, and social problems—are compounded by the fact that most of them have parents who are of advanced age or dead, and 4-5 percent have at least one parent who is too disabled to work or otherwise take care of his own needs. All were disabled before they reached maturity (before age 18 as required in the law), and most were disabled from birth or early childhood. They have thus had little or no experience with the activities normally associated with providing for one’s own day-to-day personal needs. Their infirmities have extended for considerably longer periods of time than those of adults who receive social insurance benefits as disabled workers.³

Persons with disabilities since childhood must meet the same criteria on severity of the disability as do workers who receive disability benefits. Before the 1965 amendments, both groups had to be unable to engage in substantial gainful employment because of a severe impairment that was expected to continue over a long and indefinite period or to result in death. Beginning September 1965, however, disabled adult children, as well as workers, may also qualify for benefits

² In December 1964, more than \$2 million was paid to 14,505 families headed by a widowed mother or former wife (divorced) who had at least one disabled child aged 18 or older in her care.

³ For a discussion of disabled-worker beneficiaries, see *Insured and Disabled Workers Under the Social Security Disability Program, Characteristics and Benefit Payments, 1957-63* (Research Report No. 11), Office of Research and Statistics, Social Security Administration.

* Office of Research and Statistics.

¹ Chamber of Commerce of the United States, *Poverty: The Sick, Disabled and Aged*, November 1965.

if their disabilities have lasted for 12 consecutive months or if they are expected to last for at least 12 months.

Since eligibility for a benefit is limited by the relationship of the parent to the social insurance system, the disabled-child beneficiary group should not be interpreted as representative of persons in the general population of the United States who are aged 18 or over and have similar disabilities. There are many disabled during childhood in families where the parent has not retired or died or become disabled enough to qualify for disability benefits. Social security program data does make it possible to know the minimum range of the dimensions of the group that has managed to survive into adulthood despite severe perinatal and childhood abnormalities. Some insight into the complexities of their handicaps is also provided, and certain questions are raised about their health and their social and economic needs for fruitful examination and planning.

In the main this article discusses the geographic distribution and the personal and medical characteristics of the 205,000 adults who qualified as disabled children under the social security program during 1957-64—the first 8 years of the program—and the 34,000 who were unable to qualify through 1963.

WHERE ARE THE DISABLED?

Disability, whether the result of trauma or disease, carries with it both a personal and a community need for a wide variety of services specially planned to identify and help those so afflicted make the best possible improvement and adjustment in their situation. The availability and use of resources—for casefinding, medical and psychiatric treatment, and rehabilitation; for training and employment of those who could possibly work at some level; and for financial support and protective care—are essential determinants of the levels at which the disabled will function.

Whether the disabled live in cities or towns, on farms, or in other rural areas, in what part of the country they reside and in which State or other political subdivision—all are important considera-

tions in arriving at the answers to questions on the level of resources needed and their availability, use, and accessibility. Since health care and treatment facilities tend to be clustered around population centers, the more distant the disabled are from these centers or the greater the inconvenience of travel to them, the less likely are they to be used.

It is likely, for example, that some handicapped persons on farms in Alabama, in the depressed areas of Kentucky or West Virginia, in rural Michigan, or in New York City or Los Angeles have similar disabilities. What accommodation they make may depend, however, not only on their personal reaction to the disablement or their motivation toward independence but also on as elementary a consideration as where they live.

The extent to which there is community recognition of their needs and available financial and professional resources to meet these needs makes for considerable variation in the effect of the disability on the individual and on his family and community.

There are few areas in the continental United States—rural or urban,⁴ city or town—from which applications for childhood disability benefits have not come. At the end of 1963, only 11 counties in the Nation had no disabled-child beneficiaries.

Most of these beneficiaries (114,339 or 63 percent) lived in the 819 urban counties; the others (65,152) were distributed throughout the remaining 2,258 nonurban counties; 13 percent lived in counties where at least 75 percent of the general

⁴ For the purpose of this discussion, a county was defined as urban if at least half its population resided in "urbanized areas and in places of 2,500 inhabitants or more outside urbanized areas." The Bureau of the Census, in the 1960 Census, defines the urban population as comprising "all persons living in (a) places of 2,500 inhabitants or more incorporated as cities, boroughs, villages, and towns (except towns in New England, New York, and Wisconsin); (b) the densely settled urban fringe, whether incorporated or unincorporated, of urbanized areas; (c) towns in New England and townships in New Jersey and Pennsylvania which contain no incorporated municipalities as subdivisions and have either 25,000 inhabitants or more of a population of 2,500 to 25,000 and a density of 1,500 persons or more per square mile; (d) counties in States other than the New England States, New Jersey, and Pennsylvania that have no incorporated municipalities within their boundaries and have a density of 1,500 persons or more per square mile; and (e) unincorporated places of 2,500 inhabitants or more . . . the population not classified as urban constitutes the rural population."

TABLE 1.—Number and percentage distribution of disabled-child beneficiaries in current-payment status, December 31, 1964, by urban-rural county residence¹ and State

State	Disabled-child beneficiaries							
	Total		Urban		Rural		In counties 75 percent or more rural	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total U.S.	179,491	100.0	114,557	63.8	64,934	36.2	25,286	14.1
Ala.	4,059	100.0	2,391	58.9	1,668	41.1	876	21.6
Alaska	63	100.0	39	61.9	24	38.1	13	20.6
Ariz.	826	100.0	663	80.3	163	19.7	3	.4
Ark.	2,121	100.0	597	28.1	1,524	71.9	502	23.7
Calif.	9,351	100.0	7,863	84.1	1,488	15.9	91	1.0
Colo.	1,076	100.0	806	74.9	270	25.1	92	8.6
Conn.	2,687	100.0	2,497	92.9	190	7.1	0	0
Del.	454	100.0	234	51.5	220	48.5	220	48.5
D. C.	424	100.0	424	100.0	0	0	0	0
Fla.	3,933	100.0	2,956	75.2	977	24.8	210	5.3
Ga.	4,004	100.0	1,818	45.4	2,186	54.6	868	21.7
Hawaii	582	100.0	399	68.6	183	31.4	4	.7
Idaho	629	100.0	358	56.9	271	43.1	84	13.4
Ill.	9,380	100.0	7,556	80.6	1,824	19.4	488	5.2
Ind.	5,211	100.0	2,979	57.2	2,232	42.8	811	15.6
Iowa	2,973	100.0	1,264	42.5	1,709	57.5	579	19.5
Kans.	2,152	100.0	1,393	64.7	759	35.3	334	15.5
Ky.	4,927	100.0	1,409	28.6	3,518	71.4	1,165	23.6
La.	3,054	100.0	1,777	58.2	1,277	41.8	446	14.6
Maine	1,207	100.0	756	62.6	451	37.4	161	13.3
Md.	2,311	100.0	1,638	70.9	673	29.1	280	12.1
Mass.	5,283	100.0	5,182	98.1	101	1.9	56	1.1
Mich.	7,734	100.0	4,972	64.3	2,762	35.7	1,236	16.0
Minn.	3,581	100.0	1,952	54.5	1,629	45.5	727	20.3
Miss.	2,481	100.0	741	29.9	1,740	70.1	1,061	42.8
Mo.	4,505	100.0	2,366	52.5	2,139	47.5	939	20.8
Mont.	604	100.0	328	54.3	276	45.7	212	35.1
Nebr.	1,645	100.0	713	43.3	932	56.7	408	24.8
Nev.	114	100.0	96	84.2	18	15.8	13	11.4
N. H.	680	100.0	473	69.6	207	30.4	16	2.4
N. J.	5,734	100.0	5,483	95.6	251	4.4	44	.8
N. Mex.	599	100.0	445	74.3	154	25.7	77	12.9
N. Y.	16,735	100.0	13,387	80.0	3,348	20.0	345	2.1
N. C.	6,607	100.0	1,710	25.9	4,897	74.1	2,521	38.2
N. Dak.	810	100.0	275	34.0	535	66.0	306	37.8
Ohio	9,491	100.0	6,456	68.0	3,035	32.0	520	5.5
Okla.	2,405	100.0	1,544	64.2	861	35.8	418	17.4
Oreg.	1,413	100.0	1,012	71.6	401	28.4	71	5.0
Pa.	14,534	100.0	10,268	70.6	4,266	29.4	1,423	9.8
R. I.	899	100.0	807	89.8	92	10.2	0	0
S. C.	2,884	100.0	835	29.0	2,049	71.0	775	26.9
S. Dak.	795	100.0	339	42.6	456	57.4	336	42.3
Tenn.	4,346	100.0	1,534	35.3	2,812	64.7	1,323	30.4
Tex.	7,906	100.0	5,629	71.2	2,277	28.8	640	8.1
Utah	729	100.0	608	83.4	121	16.6	57	7.8
Vt.	492	100.0	138	28.0	354	72.0	76	15.4
Va.	4,686	100.0	2,070	44.2	2,616	55.8	2,133	45.5
Wash.	2,236	100.0	1,910	85.4	326	14.6	106	4.7
W. Va.	3,448	100.0	770	22.3	2,678	77.7	1,587	46.0
Wis.	4,474	100.0	2,586	57.8	1,888	42.2	603	13.5
Wyo.	217	100.0	111	51.2	106	48.8	30	13.8

¹ For the purpose of this report, a county qualified as urban if at least one-half its population resided in urbanized areas and in places of 2,500 inhabitants or more outside urbanized areas. U.S. Census of Population, 1960.

population was rural (table 1). This ratio of 2 urban beneficiaries to 1 rural beneficiary did not obtain in all States. Childhood disability beneficiaries in rural counties far outnumbered those in urban counties in 13 midwestern and Southern States and in Vermont. The combined ratio for these areas was 1 urban beneficiary to 2 rural.⁵

⁵ Arkansas, Georgia, Iowa, Kentucky, Mississippi, Nebraska, North Carolina, North Dakota, South Carolina, Tennessee, Vermont, Virginia, and West Virginia.

TABLE 2.—Childhood disability beneficiaries: Number per 1,000 persons aged 18 and over in the United States, December 31, 1964, by State

State	Number	State	Number
Total	1.51	Missouri	1.55
Alabama	1.95	Montana	1.42
Alaska	.44	Nebraska	1.77
Arizona	.90	Nevada	.43
Arkansas	1.74	New Hampshire	1.61
California	.81	New Jersey	1.31
Colorado	.90	New Mexico	1.06
Connecticut	1.48	New York	1.40
Delaware	1.49	North Carolina	2.21
District of Columbia	.80	North Dakota	2.07
Florida	1.07	Ohio	1.49
Georgia	1.53	Oklahoma	1.51
Hawaii	1.35	Oregon	1.17
		Pennsylvania	1.93
Idaho	1.52	Rhode Island	1.54
Illinois	1.39	South Carolina	1.93
Indiana	1.72	South Dakota	1.87
Iowa	1.70	Tennessee	1.81
Kansas	1.52	Texas	1.24
Kentucky	2.50	Utah	1.33
Louisiana	1.49	Vermont	1.98
Maine	1.94	Virginia	1.71
Maryland	1.08	Washington	1.19
Massachusetts	1.52	West Virginia	3.00
Michigan	1.55	Wisconsin	1.75
Minnesota	1.66	Wyoming	1.05
Mississippi	1.84		

There are wide and apparently unpatterned differences among the individual States, as well as between urban and rural populations, in the prevalence of beneficiaries who were disabled in childhood. On December 31, 1964, 1.5 persons per 1,000 aged 18 and over in the United States⁶ were receiving a childhood disability benefit (table 2). Prevalence rates in the individual States, however, ranged from 0.43 and 0.44 per 1,000 in Nevada and Alaska to 2.5 and 3.0 in Kentucky and West Virginia.

On the basis of the most recent data from the Bureau of the Census on the distribution of urban and rural population in counties of individual States, the prevalence rate for childhood disability beneficiaries in the United States as a whole was 0.87 per 1,000 for the urban population and 1.35 per 1,000 for the rural population (table 3). All but 12 States showed a higher rate for the rural population. More information than is at hand would be needed to explain these interstate and urban-rural differences in prevalence rates. Many factors could contribute to these differences, including the characteristics of the residents and their relationship to the social insurance program, the prevailing nature, pattern, and particularly the availability of medical

⁶ Based on *Estimates of the Population of States, by Age, Color, and Sex: July 1, 1964*; Series P-25, No. 293, Bureau of the Census.

TABLE 3.—Childhood disability beneficiaries: Number per 1,000 persons in urban and rural population, December 31, 1964, by State

State	Total	Urban	Rural	State	Total	Urban	Rural
Total	1.0	.87	1.35	Missouri	1.0	.82	1.48
Alabama	1.2	1.13	1.44	Montana	.9	.79	1.06
Alaska	.3	.37	.19	Nebraska	1.2	.84	1.63
Arizona	.6	.64	.61	Nevada	.4	.40	.37
Arkansas	1.2	.96	1.30	New Hampshire	1.1	1.30	.84
California	.6	.53	1.29	New Jersey	.9	.94	.92
Colorado	.6	.56	.83	New Mexico	.6	.57	.84
Connecticut	1.1	1.08	.84	New York	1.0	.91	1.60
Delaware	1.0	.76	1.58	North Carolina	1.5	1.14	1.60
District of Columbia	.5	.55	0	North Dakota	1.3	.97	1.52
Florida	.8	.73	1.07	Ohio	1.0	.84	1.45
Georgia	1.0	.86	1.18	Oklahoma	1.0	.92	1.31
Hawaii	.9	.79	1.38	Oregon	.8	.81	.75
Idaho	.9	.99	.88	Pennsylvania	1.3	1.16	1.70
Illinois	.9	.87	1.29	Rhode Island	1.0	1.00	1.55
Indiana	1.1	.94	1.47	South Carolina	1.2	1.03	1.29
Iowa	1.1	.84	1.34	South Dakota	1.2	1.03	1.29
Kansas	1.0	.90	1.19	Tennessee	1.2	.90	1.50
Kentucky	1.6	1.12	1.97	Texas	.8	.71	1.30
Louisiana	.9	.82	1.15	Utah	.8	.81	.83
Maine	1.2	1.29	1.17	Vermont	1.3	1.17	1.29
Maryland	.7	.73	.75	Virginia	1.2	2.96	.80
Massachusetts	1.0	1.03	.77	Washington	.8	.80	.67
Michigan	1.0	.81	1.58	West Virginia	1.9	1.25	2.14
Minnesota	1.0	.95	1.18	Wisconsin	1.1	.95	1.51
Mississippi	1.1	.99	1.21	Wyoming	.7	.45	1.21

and preventive health care services both at present and when the abnormality began; population trends—that is, the extent of in-and-out migration among young healthy residents; and the location of residential, custodial, and long-term treatment institutions, especially those for the mentally ill or retarded. The presence in a community of a large mental hospital could influence the prevalence rate in the community, but the extent to which this happens cannot be estimated. West Virginia had the largest proportion of its childhood disability beneficiaries residing in rural counties (78 percent) and the highest overall and rural prevalence rate of all States (2.14). With three-fourths of its psychiatric hospitals and institutions for the mentally retarded population also in rural counties, this State had the lowest proportion of disability applicants in such institutions (8 percent).

FAMILY CLASSIFICATION

The 183,522 persons who received benefits as disabled dependents in December 1964 were adult sons and daughters either of deceased workers (50 percent), of workers who retired because of age (46 percent), or of workers who themselves received a social insurance benefit because of severe disability (4 percent). Over the years, the proportion of childhood disability beneficiaries

who had survived the insured parent has increased. It was 39 percent in 1959, 45.3 percent in 1962, and 47.5 percent in 1963. More than one-half (58 percent) of those with a deceased insured parent were either the sole survivor or the only person in the immediate family who qualified for a dependent's benefit on the wage record of a deceased worker. About two-fifths were in families headed by widows, the majority of whom were aged 62 or older. About 12 percent of these disabled persons had brothers and sisters who received benefits because they were either under age 18 and dependent or aged 18 and over and disabled.

When intrastate differences in the distribution of these persons by status of the parent wage earner are examined, considerable variation becomes apparent. In Connecticut, a highly industrialized State, for example, and in the District of Columbia, where most employment is Government employment and, in general, not covered under the social security program, 56 percent and 59 percent, respectively, of the beneficiaries were children of a deceased wage earner parent, proportions considerably above the national average of 50 percent. Conversely, in Arkansas, Iowa, Minnesota, Mississippi, and New Mexico, the proportion of these beneficiaries who were children of deceased wage earners was substantially under the national average—41.1, 43.5, 42.6, 41.7, and 41.2 percent, respectively. Equally significant

are the differences in the proportion of persons with childhood disabilities who qualified on the wage record of a disabled parent, which ranged from less than 2 percent in Alaska and Nevada to 8 percent in Kentucky and 9.5 percent in West Virginia (table 4).

The States with a higher proportion of beneficiaries living in rural counties were found also to have a higher proportion with a living entitled parent, retired or disabled. The insured

parents of beneficiaries in urban population centers were more likely to be dead.

MOBILITY STATUS

Although they were severely disabled and needed a substantial amount of personal care, most beneficiaries were managing in some way without institutional confinement when their applications were filed. About 1 in 10 was so limited in ability to get around that he was confined to the home. Most were able to get about outside the home either alone (26 percent) or with the help of another person or of a device of some kind (36 percent). Twenty-six percent were in institutions, primarily for the treatment of tuberculosis or chronic disease or because of mental disorders. Information on how many of these beneficiaries or how many additional beneficiaries are now institutionalized is not available.⁷ There is nothing to suggest however, that fewer of them are so confined than earlier; in fact, it is a fair assumption that the proportion has increased, particularly among those who came on the rolls in the first years of the program.

When beneficiaries residing in the individual States are compared with respect to the levels of their mobility when they applied for benefits, many differences are apparent, particularly in the proportion institutionalized or ambulatory outside the home. Except perhaps for the bedbound, chairbound, and institutionalized, the other gradations of "ambulatoryness" are so subjective and likely to change from day to day that it appears unwise to form other than general opinions about the ability to move about independently. With these reservations, differences in State patterns of mobility for disabled-child beneficiaries seem significant and suggest areas for future study. In Massachusetts, for example, where 5,628 disabled persons qualified for benefits between 1957 and 1963, 2,613 or 46.5 percent were in institutions, 45.8 percent were ambulatory, and only 7.5 percent were confined to the home. In West Virginia, only 7.9 percent were in insti-

TABLE 4.—Number of disabled-child beneficiaries in current-payment status, December 31, 1964, and percentage distribution by family classification, by State

State	Total		Disabled children of—		
	Number	Per cent	Deceased workers	Retired workers	Disabled workers
Total number.....	183,522	-----	91,844	83,812	7,866
Total percent.....	-----	100.0	50.0	45.7	4.3
New England:					
Maine.....	1,208	100.0	54.4	41.9	3.7
New Hampshire.....	680	100.0	55.7	41.2	3.1
Vermont.....	493	100.0	51.7	43.0	5.3
Massachusetts.....	5,286	100.0	57.0	40.1	2.9
Rhode Island.....	899	100.0	56.4	40.4	3.2
Connecticut.....	2,689	100.0	56.2	41.4	2.5
Middle Atlantic:					
New York.....	16,739	100.0	53.7	43.0	3.3
New Jersey.....	5,737	100.0	56.3	40.9	2.8
Pennsylvania.....	14,539	100.0	56.0	40.2	3.8
East North Central:					
Ohio.....	9,493	100.0	53.9	41.6	4.4
Indiana.....	5,211	100.0	50.4	45.9	3.6
Illinois.....	9,382	100.0	54.6	42.3	3.1
Michigan.....	7,737	100.0	52.6	43.4	4.0
Wisconsin.....	4,475	100.0	48.1	48.9	3.0
West North Central:					
Minnesota.....	3,581	100.0	42.6	54.7	2.7
Iowa.....	2,973	100.0	43.5	54.0	2.6
Missouri.....	4,505	100.0	44.5	51.8	3.7
North Dakota.....	810	100.0	37.4	60.6	2.0
South Dakota.....	795	100.0	39.4	58.4	2.3
Nebraska.....	1,645	100.0	45.1	52.3	2.6
Kansas.....	2,152	100.0	45.5	51.4	3.1
South Atlantic:					
Delaware.....	455	100.0	53.8	43.1	3.1
Maryland.....	2,312	100.0	55.5	41.6	2.9
District of Columbia.....	425	100.0	59.1	38.1	2.8
Virginia.....	4,686	100.0	48.7	45.4	5.8
West Virginia.....	3,448	100.0	47.7	42.9	9.5
North Carolina.....	6,607	100.0	47.7	47.4	4.8
South Carolina.....	2,884	100.0	50.9	41.9	7.2
Georgia.....	4,005	100.0	49.0	43.8	7.2
Florida.....	3,932	100.0	46.1	48.2	5.6
East South Central:					
Kentucky.....	4,926	100.0	42.0	50.1	7.9
Tennessee.....	4,346	100.0	43.9	50.4	5.7
Alabama.....	4,059	100.0	47.2	46.9	6.0
Mississippi.....	2,481	100.0	41.7	52.6	5.6
West South Central:					
Arkansas.....	2,121	100.0	41.1	53.0	5.9
Louisiana.....	3,054	100.0	49.9	43.5	6.6
Oklahoma.....	2,406	100.0	45.6	49.2	5.3
Texas.....	7,907	100.0	47.3	48.6	4.1
Mountain:					
Montana.....	604	100.0	49.0	46.9	4.1
Idaho.....	629	100.0	47.7	49.1	3.2
Wyoming.....	217	100.0	51.2	45.6	3.2
Colorado.....	1,076	100.0	48.9	45.8	5.3
New Mexico.....	599	100.0	41.2	54.9	3.8
Arizona.....	826	100.0	48.1	47.0	5.0
Utah.....	729	100.0	47.9	48.9	3.2
Nevada.....	114	100.0	54.4	43.9	1.8
Pacific:					
Washington.....	2,237	100.0	52.6	43.5	3.9
Oregon.....	1,414	100.0	50.8	44.9	4.2
California.....	9,353	100.0	52.1	43.4	4.6
Alaska.....	63	100.0	68.3	30.2	1.6
Hawaii.....	582	100.0	48.6	48.8	2.6
U.S. possessions and foreign countries.....	841	100.0	54.5	44.2	1.3

⁷ Among the 183,522 disabled child beneficiaries in current-payment status on December 31, 1964, 20,000 had an institution as a "representative payee." This number excludes persons in an institution who did not have a representative payee and persons in an institution for whom another person—parent or relative—was the payee.

tutions, 81.5 percent were ambulatory, and the number confined to their homes (10.5 percent) approximated the national average of 10.6 percent (table 5).

Information presently available for study is not conclusive, but there appears to be a positive relationship between whether the parent of a disabled child beneficiary is dead and whether or not that beneficiary is in an institution. In 32 States the proportion of applicants who were institutionalized when they applied for benefits exceeded the proportion who applied in the Nation

as a whole (26.2 percent). In 23 States the proportion of beneficiaries in current-payment status on December 31, 1964, who were entitled on the wage record of a deceased parent was greater than for the United States (50 percent). Twenty of these latter were among the 31 States that comprised the first group.

DIAGNOSES

The abnormalities that were severe enough to qualify these applicants for benefits were typical

TABLE 5.—Childhood disability allowances: Number of children found disabled in 1957-63, and percentage distribution by mobility status at time of application, by State

State	Total		Institutionalized	Hospitalized	Confined to home				Ambulatory outside home		
	Number	Percent			Total	Bed-bound	Chair-bound	House-bound	Total	With help	By self
Total number	187,810		49,232	431	19,825	6,756	7,776	5,293	118,322	49,497	68,825
Total percent		100.0	26.2	.2	10.6	3.6	4.1	2.8	63.0	26.4	36.6
Alabama	4,120	100.0	15.8	.2	10.5	4.2	4.1	2.3	73.5	31.5	42.0
Alaska	56	100.0	53.6		3.6		1.8	1.8	42.9	3.6	39.3
Arizona	758	100.0	24.3	.4	10.8	5.2	3.7	2.0	64.5	26.0	38.4
Arkansas	2,200	100.0	11.0	.2	10.5	3.8	3.4	3.3	78.2	30.2	48.0
California	9,085	100.0	36.0	.3	6.4	2.6	2.5	1.4	57.3	22.9	34.4
Colorado	1,113	100.0	33.2	.2	8.6	3.1	3.1	2.3	58.0	19.9	38.0
Connecticut	2,822	100.0	49.4	.1	6.8	1.6	3.3	2.0	43.7	20.2	23.4
Delaware	472	100.0	39.6	1.3	7.6	2.5	3.2	1.9	51.5	22.2	29.2
District of Columbia	361	100.0	36.1	.8	11.1	4.7	6.1	.3	51.9	23.9	28.1
Florida	3,501	100.0	20.6	.4	9.5	3.5	3.7	2.2	69.5	31.5	38.0
Georgia	4,089	100.0	11.9	.1	12.2	4.1	4.5	3.4	75.7	33.0	42.7
Hawaii	609	100.0	39.1		4.3	1.3	1.6	1.3	56.6	24.5	32.1
Idaho	641	100.0	34.7	1.2	7.0	4.4	1.6	1.1	57.0	16.2	40.8
Illinois	9,938	100.0	36.4	.2	8.2	2.7	3.2	2.3	55.2	23.2	32.0
Indiana	5,433	100.0	31.2	.2	7.8	2.7	3.2	1.9	60.9	22.2	38.0
Iowa	3,067	100.0	31.6	.2	9.3	4.0	3.1	2.2	58.8	18.1	40.8
Kansas	2,230	100.0	30.2	.2	8.8	4.5	2.7	1.6	60.9	17.1	43.8
Kentucky	5,065	100.0	14.6	.2	10.7	3.3	4.1	3.4	74.5	33.3	41.2
Louisiana	3,043	100.0	12.4	.3	11.3	4.8	4.1	2.4	76.0	33.4	46.4
Maine	1,290	100.0	35.6	.3	8.3	3.6	2.6	2.1	55.8	23.5	32.3
Maryland	2,373	100.0	30.3	.2	8.5	2.9	3.0	2.5	61.0	26.2	34.8
Massachusetts	5,628	100.0	46.5	.2	7.5	2.5	3.0	2.1	45.8	20.4	25.5
Michigan	7,902	100.0	39.8	.3	7.4	2.5	3.0	1.8	52.6	20.0	32.5
Minnesota	3,599	100.0	37.9	.1	7.4	2.9	2.5	2.0	54.6	15.7	38.9
Mississippi	2,561	100.0	9.8	.3	10.6	3.6	3.4	3.6	79.3	33.1	46.2
Missouri	4,653	100.0	27.0	.1	9.8	4.4	3.5	1.8	63.1	25.0	38.1
Montana	657	100.0	37.1	.6	4.0	1.8	1.4	1.8	58.3	15.7	42.6
Nebraska	1,658	100.0	37.9	.1	6.8	2.8	2.7	1.2	55.2	15.4	39.8
Nevada	104	100.0	32.0		11.7	6.8	2.9	1.9	56.3	18.4	37.9
New Hampshire	692	100.0	38.6		9.1	3.2	4.3	1.6	52.3	17.9	34.4
New Jersey	5,879	100.0	40.0	.3	8.1	3.0	3.0	2.2	51.6	23.8	27.8
New Mexico	586	100.0	19.9		10.2	3.7	3.4	3.1	69.8	25.7	44.1
New York	18,081	100.0	45.9	.3	6.9	2.2	2.9	1.8	46.9	19.6	27.3
North Carolina	6,757	100.0	15.9	.3	10.0	2.8	4.1	3.0	73.8	29.5	44.3
North Dakota	849	100.0	30.0	.9	6.8	2.5	3.2	1.2	62.2	13.0	49.2
Ohio	9,698	100.0	28.8	.2	9.3	3.4	3.7	2.2	61.6	25.4	36.3
Oklahoma	2,453	100.0	21.2	.1	9.2	4.0	2.7	2.5	69.5	21.7	47.9
Oregon	1,388	100.0	32.1	.4	9.1	3.7	3.3	2.0	58.5	18.5	39.9
Pennsylvania	15,275	100.0	36.1	.2	8.0	2.7	3.4	2.3	55.7	23.5	32.2
Puerto Rico	2,999	100.0	3.4	.1	20.9	3.2	9.5	8.2	75.6	52.8	22.8
Rhode Island	949	100.0	28.3	.1	13.1	5.4	3.8	3.9	58.5	25.7	32.8
South Carolina	2,865	100.0	20.4	.2	10.5	3.7	4.3	2.4	68.9	28.3	40.6
South Dakota	789	100.0	23.0	.4	8.4	4.2	3.2	1.0	68.2	17.0	51.3
Tennessee	4,394	100.0	11.9	.3	12.1	3.6	4.6	3.9	75.6	33.3	42.3
Texas	7,868	100.0	22.5	.2	10.4	4.0	3.3	3.1	66.8	25.4	41.5
Utah	730	100.0	35.8	.1	7.1	2.9	3.4	.8	57.0	12.6	44.4
Vermont	510	100.0	32.6		8.1	1.2	6.1	.8	59.3	18.5	40.9
Virgin Islands	5	100.0	25.0		25.0		25.0		50.0		50.0
Virginia	4,751	100.0	21.8	.4	8.3	2.6	3.2	2.3	69.6	26.1	43.4
Washington	2,285	100.0	44.0	.3	7.0	2.6	3.1	1.2	48.8	15.2	33.6
West Virginia	3,607	100.0	7.9	.1	10.5	3.6	4.1	2.9	81.5	37.8	43.7
Wisconsin	4,611	100.0	33.2	.4	8.7	2.9	3.6	2.1	57.8	20.9	36.9
Wyoming	235	100.0	54.0		7.7	3.0	2.1	2.6	38.3	10.2	28.1
U.S. possessions and foreign countries	526	100.0	5.3	.4	24.2	8.2	10.1	5.9	70.1	45.0	25.1

of the mental, emotional, and physical disorders that 20 or more years ago severely crippled babies and young children and usually lasted throughout their lives: These are conditions that do not necessarily end in early death but often extend into the upper reaches of adulthood.

In each year since 1957, about 9 out of 10 of the applicants who qualified for benefits had severe psychological and neurological conditions (table 6). The proportion with primary diagnoses in the group with mental, psychoneurotic, and

personality disorders increased from 47.4 percent in 1957 to 65.7 percent in 1963, while the proportion with diseases of the nervous system and sense organs declined from 38.8 to 24.5 percent.

Within and between these broad classifications, there has also been considerable change in the proportions with specific conditions. Those, for example, with a primary diagnosis of mental deficiency made up 45 percent of the total in 1957 and 52 percent in 1963, and the proportion with cerebral spastic infantile paralysis declined

TABLE 6.—Childhood disability allowances: Number and percentage distribution of children found disabled in 1957-63 by diagnostic group and primary diagnosis

Diagnostic group and primary diagnosis	1957		1958		1959		1960		1961		1962		1963	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Total	36,267	100.0	21,273	100.0	34,718	100.0	22,352	100.0	23,233	100.0	27,569	100.0	22,398	100.0
Infective and parasitic diseases	1,542	4.3	772	3.6	1,127	3.2	771	3.4	659	2.8	738	2.7	556	2.5
Late effects of acute poliomyelitis	906	2.5	419	2.0	546	1.6	457	2.0	443	1.9	499	1.8	349	1.6
Late effects of acute infectious encephalitis	359	1.0	192	.9	282	.8	136	.6	73	.3	66	.2	60	.3
Congenital syphilis	108	.3	86	.4	177	.5	68	.3	55	.2	42	.2	42	.2
Other	169	.4	75	.4	122	.4	110	.5	88	.4	131	.5	105	.5
Neoplasms	85	.2	61	.3	99	.3	90	.4	86	.4	101	.4	89	.4
Allergic, endocrine system, metabolic, and nutritional diseases	974	2.7	442	2.1	567	1.6	291	1.3	195	.8	257	.9	184	.8
Myxedema and cretinism	748	2.1	342	1.6	354	1.0	179	.8	115	.5	123	.4	81	.4
Other	226	.6	100	.5	213	.6	112	.5	80	.3	134	.5	103	.5
Diseases of the blood and blood-forming organs	32	.1	19	.1	45	.1	33	.1	44	.2	57	.2	49	.2
Mental, psychoneurotic, and personality disorders	17,174	47.4	11,219	52.7	19,945	57.4	12,870	57.6	14,364	61.8	17,622	63.9	14,710	65.7
Mental deficiency	16,332	45.0	10,310	48.5	17,774	51.2	11,065	49.5	12,323	53.0	14,731	53.4	11,705	52.3
Schizophrenic disorders (dementia praecox)	562	1.5	556	2.6	1,430	4.1	1,388	6.2	1,173	5.0	1,235	4.5	1,562	7.0
Mental deterioration and certain other psychoses of unspecified etiology	(1)	(1)	227	1.1	396	1.1	206	.9	624	2.7	1,069	3.9	810	3.6
Other	280	.8	126	.6	345	1.0	211	.9	244	1.1	587	2.1	633	2.8
Diseases of the nervous system and sense organs	14,072	38.8	7,550	35.5	11,215	32.3	7,105	31.8	6,738	29.0	7,166	26.0	5,493	24.5
Cerebral spastic infantile paralysis with mental deficiency	5,338	14.7	3,045	14.3	4,130	11.9	2,245	10.0	1,865	8.0	1,216	4.4	953	4.3
Cerebral spastic infantile paralysis	3,041	8.4	1,087	5.1	1,172	3.4	799	3.6	1,075	4.6	1,581	5.7	1,247	5.6
Epilepsy with mental deficiency	2,394	6.6	1,774	8.3	3,333	9.6	2,312	10.3	1,969	8.5	1,792	6.5	1,290	5.8
Late effects of intracranial abscess or pyogenic infection	1,087	3.0	487	2.3	787	2.3	383	1.7	296	1.3	280	1.0	249	1.1
Epilepsy	881	2.4	451	2.1	656	1.9	559	2.5	531	2.3	739	2.7	600	2.7
Other	1,331	3.7	706	3.3	1,137	3.3	806	3.6	1,002	4.3	1,558	5.7	1,154	5.2
Diseases of the circulatory system	128	.4	94	.4	103	.3	92	.4	90	.4	153	.6	111	.5
Rheumatic heart disease of mitral valve	64	.2	71	.3	68	.2	47	.2	44	.2	36	.1	21	.1
Other	64	.2	23	.1	35	.1	45	.2	46	.2	117	.4	90	.4
Diseases of the respiratory system	37	.1	29	.1	49	.1	44	.2	30	.1	72	.3	43	.2
Diseases of the digestive system	11	(2)	5	(2)	16	(2)	15	.1	9	(2)	23	.1	24	.1
Diseases of the genito-urinary system	12	(2)	5	(2)	14	(2)	6	(2)	10	(2)	19	.1	14	.1
Diseases of the skin and cellular tissue	12	(2)	11	.1	9	(2)	7	(2)	14	.1	22	.1	25	.1
Diseases of the bones and organs of movement	895	2.5	425	2.0	540	1.6	361	1.6	399	1.7	554	2.0	332	1.5
Muscular dystrophy and other diseases of muscle, tendon, and fascia	358	1.0	170	.8	202	.6	157	.7	163	.7	226	.8	152	.7
Rheumatoid arthritis and allied conditions	321	.9	149	.7	170	.5	90	.4	112	.5	121	.4	85	.4
Other	216	.6	106	.5	168	.5	114	.5	124	.5	207	.8	95	.4
Congenital malformations	1,291	3.6	640	3.0	986	2.8	664	3.0	592	2.5	764	2.8	590	2.6
Congenital hydrocephalus	384	1.1	129	.6	247	.7	133	.6	115	.5	60	.2	44	.2
Congenital cataract and other congenital malformations of nervous system and sense organs	323	.9	191	.9	317	.9	212	.9	202	.9	294	1.1	245	1.1
Congenital malformations of bone and joint	216	.6	98	.4	104	.3	89	.4	65	.3	102	.4	75	.3
Spina bifida and meningocele	179	.5	(1)	(1)	(1)	(1)	(1)	(1)	66	.3	72	.3	47	.2
Congenital malformations of circulatory system	(1)	(1)	86	.4	121	.3	88	.4	84	.4	142	.5	112	.5
Other	189	.5	136	.7	197	.6	142	.7	60	.3	94	.3	67	.3
Other	2	(2)	1	(2)	3	(2)	3	(2)	3	(2)	21	.1	178	.8

¹ Number and percentage for diagnosis not specified in individual year are included in "other" category of the diagnostic group.

² Less than 0.05 percent.

from 15 percent in 1957 to 4 percent in 1963. For the cerebral palsied who were not mentally deficient, the decline was from 32 to 10 percent. Persons with schizophrenic disorders (dementia praecox) as a primary cause of disability increased as a proportion from 1.5 percent in 1957 to 7 percent in 1963.

The degree of importance that should be assigned to these measures of increase or decrease can only be conjectured since the differences may be the result of one or several factors: refinement of diagnostic techniques over the years, improvement in disease classification, or in increased recognition of the fact that psychoneurological and personality disorders may accompany mental retardation and, in fact, may be the primary cause of disability in persons previously classified as "mentally deficient."

The 20,000 beneficiaries with primary diagnoses outside the two major disease groups are no less important and their disabilities no less disabling. Their problems are of serious import to themselves, their families, and their communities, where their need for services, often protective, is constant and the cost of services, when available, often prohibitive. For many of them the fact that they are alive today is, no doubt, the result of advances in medical knowledge and therapy. In years past they might not have lived long enough to be included, as an adult, in a social insurance program.⁸ In order of their numerical significance were persons handicapped as a result of poliomyelitis (3,619), infectious encephalitis (1,168), and congenital syphilis (578); the endocrine diseases, myxoedema and cretinism, which have mental deficiency as a sequel (1,942); muscular dystrophy and similar diseases (1,428); rheumatoid arthritis and allied conditions (1,048); and a miscellany of congenital malformations (5,527).⁹

AGE AND SEX

Since the beneficiary's age when he comes on the rolls depends on events in addition to the

⁸ Disabled children who have not reached adulthood may be beneficiaries as minor dependents of retired or disabled beneficiaries or of deceased workers.

⁹ Congenital hydrocephalus, congenital cataract and other congenital malformations of nervous system and sense organs; congenital malformations of bone and joint, spina bifida and meningocele; congenital malformations of circulatory system, and other.

attainment of the required age—the death of an insured parent or the entitlement of a parent to disability or retirement benefits—many qualified at ages considerably older than 18. Those who qualified in 1964 upon the retirement of a parent were older by about 8 years than were the sons and daughters of disabled or deceased workers, as the following tabulation shows.

Family classification	Median age of disabled children with benefits—	
	Awarded in 1964	In current-payment status, December 1964
Total.....	28.8	36.5
Children of:		
Retired workers.....	32.5	37.8
Deceased workers.....	24.7	36.0
Disabled workers.....	23.7	26.4

Those newly awarded benefits ranged in age from 18 to 65 and over. About half were over age 30 and 1 in 10 was aged 45 or older.

In each year since 1957 new entrants to the rolls were slightly younger than the ones who became beneficiaries the year before. At the same time, those receiving benefits at the end of each year were, as a group, a little older by a few months than in the preceding year—their median ages were 34.5 and 36.5 in 1964. In general, the women were older by about 2 years. The tabulation that follows gives the median age for men and women whose application for disability benefits was allowed in each of the years 1957–64.

Year	Median ages, 1957–64 ¹			
	With disability allowed			With benefit in current-payment status at end of year
	Total	Male	Female	
1957.....	34.1	33.0	35.1	34.5
1958.....	33.7	32.6	34.7	35.3
1959.....	32.4	30.2	35.0	35.7
1960.....	29.2	27.2	31.8	36.0
1961.....	31.1	29.8	32.5	36.1
1962.....	30.2	29.2	31.4	36.2
1963.....	29.2	28.4	30.3	36.3
1964.....				36.5

¹ For 1957, 1958, and 1959 allowances, age on birthday in year of application; for 1960 and 1961 allowances, age in year of allowance.

More than one-fourth (26.6 percent) of those who were awarded benefits in 1964 were aged 18–19, a fact that emphasizes the role played by the OASDHI program in helping to identify in early adulthood these specially disabled people,

TABLE 7.—Age distribution of childhood disability beneficiaries in current-payment status at end of year, 1957-64

Age ¹	1957	1958	1959	1960	1961	1962	1963	1964
Total number	28,869	47,025	82,453	104,054	124,221	147,264	166,642	183,522
Total percent	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
18-19	6.6	5.4	4.6	4.5	4.4	4.6	4.7	4.6
20-24	13.8	13.7	12.9	12.5	12.8	13.1	13.3	13.4
25-29	14.5	13.7	13.7	13.2	13.2	13.2	13.2	13.0
30-34	16.4	16.3	16.3	16.2	15.8	15.2	15.6	14.2
35-39	18.6	17.9	18.1	17.5	17.0	16.7	16.4	15.8
40-44	15.5	16.3	16.2	16.4	16.3	16.1	15.5	15.5
45-49	9.0	10.0	10.5	11.1	11.1	11.0	11.5	11.6
50-54	3.8	4.6	5.1	5.5	5.8	6.1	6.4	6.9
55-59	1.4	1.7	1.9	2.2	2.5	2.7	3.0	3.3
60-64	.3	.4	.5	.7	.8	.9	1.1	1.2
65 and over	.1	.1	.1	.2	.2	.3	.3	.4
Median age	34.5	35.3	35.7	36.0	36.1	36.2	36.3	36.5

¹ Age on birthday in specified year.

as well as the role it could possibly play in identifying severely handicapped children before they reach age 18. An estimated 4,000-5,000 of the 5,415 persons aged 18 or 19 who were awarded childhood disability benefits in 1964 had received benefits before age 18 as dependents. They had not, of course, been previously identified in beneficiary records as "disabled" dependents. To what extent might earlier identification have led to reduction of the disabilities of some of these people who became severely handicapped at early ages?

The proportion aged 60 and over among those receiving benefits at the end of each year has grown from 0.4 percent in 1957 to 1.6 percent in 1964 (table 7), and their number has risen from 122 to 3,037. Of the latter, 793 were aged 65 and over. Unlike disabled-worker beneficiaries who are transferred from the rolls of the disabled to the rolls of the retired when they reach age 65, there is no upper limit to the age at which an adult with a childhood disability receives his benefit.

CHANGES IN BENEFIT STATUS

Only 10 percent of those awarded benefits in the 8 years 1957-64 had been removed from the benefit rolls by December 31, 1964. Six percent had died and about 1 percent had experienced such improvement in their physical and mental condition that they no longer met the disability requirements for benefits. About 2 percent married and thus became ineligible.

CHILDHOOD DISABILITY DENIALS

About 1 in 6 applicants for childhood disability benefits did not qualify, most often because they were not as disabled as required in the law or had not been disabled before they reached age 18 (table 8).

TABLE 8.—Number and percentage distribution of children found not disabled in 1957-63, by reason for denial and age

Reason for denial	Number	Percentage distribution by age ¹				
		Total	18-24	25-34	35-44	45 and over
Total	35,682	100.0	39.4	22.4	23.7	14.5
Failed to meet medical standards for disability	22,622	100.0	51.1	20.5	18.3	10.1
Met medical standards for disability but able to engage in substantial gainful activity	394	100.0	24.1	30.7	35.5	9.6
Failed to furnish sufficient evidence	3,944	100.0	37.4	23.4	23.9	15.3
Not disabled before age 18	8,381	100.0	9.8	26.5	37.4	26.3
Other	341	100.0	29.9	24.6	28.2	17.3

¹ For 1957, 1958, and 1959 denials, age on birthday in year of application; for 1960 and 1961 denials, age in year of denial.

Medical and psychological evidence developed during the course of determining eligibility established the fact that most of the 36,000 persons who failed to qualify had long-lasting chronic conditions and abnormalities and that most of these dated from childhood (table 9). Like those who qualified, the majority had conditions falling into two diagnostic groups—mental, psychoneurotic, and personality disorders (39 percent) and diseases of the nervous system and sense organs (21 percent). The remainder was

TABLE 9.—Number and percentage distribution of children found not disabled in 1957-63, by diagnostic group

Diagnostic group	Number	Percent
Total	34,167	100.0
Infective and parasitic diseases	2,235	6.5
Neoplasms	215	.6
Allergic, endocrine system, metabolic, and nutritional diseases	1,259	3.7
Diseases of the blood and blood forming organs	186	.5
Mental, psychoneurotic, and personality disorders	13,298	38.9
Diseases of the nervous system and sense organs	7,268	21.3
Diseases of the circulatory system	1,461	4.3
Diseases of the respiratory system	720	2.1
Diseases of the digestive system	252	.7
Diseases of the genito-urinary system	261	.8
Diseases of the skin and cellular tissue	176	.5
Diseases of the bones and organs of movement	2,008	5.9
Congenital malformations	1,543	4.5
Symptoms, senility, and ill-defined conditions	213	.6
Accidents, poisonings, and violence	105	.3
Diagnosis not established	2,967	8.7

¹ Does not include 1,515 persons who failed to qualify for benefits in 1963 because they were not disabled before age 18 (1,335), were able to engage in substantial gainful activity although they met medical standards for disability (90), and for other reasons (90).

TABLE 10.—Number and percentage distribution of children allowed and denied a period of disability, 1957-64, by age

Year of allowance or denial	Number	Percentage distribution by age				
		Total	18-24	25-34	35-44	45 and over
1957:						
Allowances	36,267	100.0	21.4	31.5	33.7	13.5
Denials	4,873	100.0	28.7	23.5	31.6	16.2
1958:						
Allowances	21,273	100.0	23.8	30.4	32.1	13.6
Denials	5,544	100.0	31.0	24.3	29.1	15.7
1959:						
Allowances	34,718	100.0	20.3	30.9	33.1	15.6
Denials	5,745	100.0	33.0	22.8	26.3	17.9
1960:						
Allowances	22,352	100.0	27.9	29.2	29.2	13.7
Denials	4,405	100.0	40.0	23.4	21.7	15.0
1961:						
Allowances	23,233	100.0	32.4	29.4	27.3	10.9
Denials	4,395	100.0	45.2	22.4	19.4	12.9
1962:						
Allowances	27,569	100.0	35.1	29.0	26.1	9.8
Denials	4,965	100.0	48.7	20.9	19.5	10.8
1963:						
Allowances	22,398	100.0	38.4	27.4	23.5	10.6
Denials	5,755	100.0	50.0	19.6	17.5	12.8

dispersed throughout the other major disease groups.

Although for most of these applicants their conditions were not as severe as among the beneficiaries, it is a realistic assumption that many were handicapped enough to be limited in the degree to which they could go about the activities of daily living. Except for a few, they had not worked. Nevertheless, the group was younger and the conditions were less severe than for the beneficiaries. In most years since 1957, as with applicants who qualified for benefits, the proportion with denials who were under age 35 has grown larger but at a more accelerated pace than for beneficiaries (table 10).

This group can be expected, therefore, to have in it a sizable proportion of members with some potential for rehabilitation, vocational and

TABLE 11.—Childhood disability denials, 1957-63, by State

State	Denials	State	Denials
Total	1 34,167	Nebraska	306
Alabama	960	Nevada	19
Alaska	31	New Hampshire	107
Arizona	132	New Jersey	855
Arkansas	371	New Mexico	207
California	2,044	New York	2,558
Colorado	244	North Carolina	1,200
Connecticut	447	North Dakota	132
Delaware	97	Ohio	2,044
District of Columbia	66	Oklahoma	279
Florida	757	Oregon	142
Georgia	717	Pennsylvania	2,497
Hawaii	168	Puerto Rico	513
Idaho	102	Rhode Island	132
Illinois	1,505	South Carolina	549
Indiana	783	South Dakota	97
Iowa	615	Tennessee	1,058
Kansas	518	Texas	1,607
Kentucky	1,134	Utah	97
Louisiana	722	Vermont	41
Maine	71	Virgin Islands	0
Maryland	442	Virginia	960
Massachusetts	855	Washington	417
Michigan	1,296	West Virginia	1,053
Minnesota	518	Wisconsin	646
Mississippi	549	Wyoming	18
Missouri	1,088	U.S. possessions and foreign countries	335
Montana	66		

¹ Does not include 1,515 persons who failed to qualify for benefits in 1963 because they were not disabled before age 18 (1,335), were able to engage in substantial gainful activity although they met medical standards for disability (90), and for other reasons (90).

otherwise. The extent to which this potential can be exploited and directed toward a higher level of self-sufficiency than now obtains will depend on the circumstances of the individual applicant's environment as well as on the nature of his physical or mental abnormality. These applicants were distributed throughout the United States, with every State represented, in personal circumstances at least made no easier because of the financial and social demands resulting from long-term chronic conditions (table 11). In addition, they had varying exposures to supportive and therapeutic resources, education, training, and job opportunities.