## PHYSICAL CONDITION AND MEDICAL CARE OF 1,000,000 RECIPIENTS OF OLD-AGE ASSISTANCE\*

THE RECENT report of the Interdepartmental Committee to Coordinate Health and Welfare Activities, which was submitted by the President to the Congress, has focused Nation-wide attention both on the serious unmet needs for medical service prevailing in this country and on the necessity for developing a national health program. Corroborative evidence of the lack of adequate medical care for needy aged persons appears to be supplied by data reported to the Social Security Board by State agencies administering approved plans for old-age assistance. The data include information on the physical condition and medical care of 1,056,000 persons accepted for old-age assistance, in 50 States 2 in 1937-38 and in 41 States in selected periods of 1936-37,3 at the time their eligibility was investigated.

The individuals are classified on the records according to whether at the time of investigation they (1) were able to care for themselves, (2) required considerable care from others although not bedridden, or (3) were bedridden. The records show further the numbers in each group who were reported to be receiving medical care and the types of medical care received. Types of care include treatment by individual physicians, care in clinics and hospitals, and care from other types of practitioner such as an osteopath or a chiropractor. For the purpose of these studies, a person was considered to be under an individual physician's care only if he received treatment at home or at the physician's office.

The information here presented is based for the most part on the statement of the applicant and the observation of the worker in the public-assistance agency who conducted the investigation rather than on a medical diagnosis; the data concerning types of medical care usually represent the applicant's unverified statement.

## Physical Condition

A person was considered bedridden if he was confined to his bed because of chronic illness or infirmity, but not if he was ill or incapacitated temporarily. Persons listed as requiring considerable care from others were those so feeble or incapacitated by chronic illness as to need assistance in dressing, eating, and moving about the

Table 1.—Old-age assistance: Physical condition of recipients accepted during selected periods of the fiscal year 1936-37 and during the fiscal year 1937-38, in all States 1 with plans approved by the Social Security Board

	Recipients accepted						
Physical condition	1936-37	1937-38					
	Total	Total	Maio	Female			
	Number						
TotalAble to care for selfNot bedridden but requiring considerable careBedridden	1 470,527	585,877	306, 214	279, 663			
	395, 630	487, 336	260, 724	226, 612			
	63, 447 11, 137	82, 918 15, 563	38, 980 6, 474	43, 938 9, 089			
	Percent						
Total	100.0	100.0	100.0	100.0			
Able to care for self. Not bedridden but requiring considerable care. Bedridden	84, 1	83. 2	85. 2	81. 0			
	13. 5 2. 4	14. 2 2. 6	12. 7 2. 1	15. 7 3. 3			

See footnote 3, page 21; in 1937-38, 50 States were administering programs.
 Includes 313 recipients whose physical condition was unknown; these cases were omitted in computing percentages.
 Includes 60 recipients (30 maie, 24 founde) whose physical condition was unknown; these cases were omitted in computing percentages.

home. Those not requiring such assistance were deemed to be able to care for themselves. Bedridden persons may be readily identified, but the line of demarcation between those needing considerable care and those able to care for themselves is not so clean-cut. Judgments inevitably differ as to what constitutes considerable care and what constitutes incidental attention. Moreover, among the persons reported as able to care for themselves are many with serious disabilities who need considerable care but do not receive it because there is no one to give it. Despite the fact that the classification is not entirely objective, the per-

<sup>\*</sup>Prepared in the Social Data Section, Division of Public Assistance Research, Bureau of Research and Statistics.

<sup>&</sup>lt;sup>1</sup> II. Doc. 120, 76th Cong., 1st Sess.

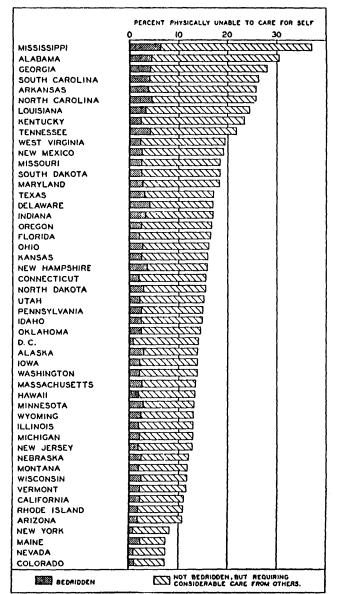
<sup>&</sup>lt;sup>1</sup>The term "State" is used in this article to include the District of Columbia and the Territories of Alaska and Hawaii.

<sup>&</sup>lt;sup>1</sup> In 1936-37, 43 States were administering old-age assistance programs under plans approved by the Social Security Board, but only 41 States reported information on this subject. For the period covered in different States see Second Annual Report of the Social Security Board, 1937, p. 142.

centage distributions according to physical condition are remarkably consistent for the 2 years.

Of the 1,056,000 persons added to the old-age assistance rolls in 1936-37 and 1937-38, as shown in table 1, about 883,000, or slightly more than four-fifths, were reported at the time of investigation to be able to care for themselves. This group probably includes a small number of persons suffering from acute illness and confined to bed at the time of investigation. About 146,000 persons,

Chart I.—Old-age assistance: Physical condition of recipients accepted during the fiscal year 1937-38 in each State with a plan approved by the Social Security Board



or 14 percent of the recipients, were said to need considerable care but were not bedridden. Only 27,000 old persons, or 2.5 percent, were bedridden. This relatively small percentage may be explained in part by the fact that the Social Security Act does not permit Federal participation in grants to persons in public institutions, and also that the plans of a number of States do not permit grants to residents of private institutions. There are many bedridden aged persons in such institutions who do not come within the scope of the oldage assistance program. The 1937-38 data which are more detailed than the 1936-37 figures. show somewhat higher percentages of women than of men in the group who were bedridden, as well as among those who required care.

An analysis of the 1937-38 data, by States, is shown in table 2 and chart I. These data would seem to indicate larger percentages in the southern States of recipients physically unable to care for themselves. The highest percentages of persons requiring considerable care were found in Mississippi, Alabama, Georgia, South Carolina, Louisiana, and Kentucky, and highest percentages of bedridden persons were reported for Mississippi, North Carolina, Alabama, Georgia, Tennessee, Delaware, and South Carolina. From the available information it is impossible to draw conclusions as to what these larger percentages in the southern States indicate. It may be that there is a higher incidence of illness among the general population in these States or that larger proportions of the recipients accepted for old-age assistance are drawn from the physically handicapped.

## Medical Care as Reported

An applicant was said to be under medical care or supervision if he was actually receiving treatment at the time of investigation or considered himself still to be under the care of a physician, clinic, or practitioner other than a doctor of medicine. No objective criteria were established and applied uniformly in all States to determine how long a person might still be considered under medical care without actually receiving such care. Unquestionably individual workers preparing the social histories of applicants had different concepts of what constitutes being under care. It is highly probable also that many old persons stated that they were under care of a physician, other practitioner, or clinic, when considerable time had

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elapsed since they had received any medical attention. Furthermore, there are situations in which the applicant might consider it to his advantage not to report the receipt of free clinic care.

The deficiency of medical care for aged persons in the lowest income brackets is indicated by the fact that in 1936-37 and 1937-38 only 220,000, or about 21 percent of the 1,030,000 persons for whom the information was given, were reported to be receiving medical care or supervision. This percentage is significant when considered in relation to the high incidence of disability and chronic disease among the aged and also to the findings of the Technical Committee on Medical Care that persons in the lower income classes of the population generally receive less medical care than those in more favorable economic circumstances.

Of the old persons accepted for assistance in 1936-37 and in 1937-38, about 189,000, or 18 percent, were reported to be under the care of individual physicians; 23,000, or 2 percent, were receiving clinic care; approximately 3,600, or less than 0.5 percent, were in hospitals; and about 4,500, or roughly 0.5 percent, were under the care of practitioners other than doctors of medicine. (See table 3.) Approximately 810,000 persons, or 79 percent, were reported to be receiving no medical attention. There is no way of evaluating the quality or adequacy of the medical care received.

As would be expected, larger proportions of the recipients who were bedridden or required care from others than of those able to care for themselves were reported as receiving medical care. In 1937-38, as is indicated in table 3 and chart II, about 78 percent of the bedridden and 48 percent of those requiring assistance in dressing, eating, and moving about were reported to be receiving some medical care or supervision, as contrasted with only 15 percent of those able to care for themselves. It seems highly probable that many of the persons in this latter group were also in need of medical care, since many aged persons have chronic ailments which should be given at least periodic attention.

Of the recipients who were bedridden, 70 percent were reported to be under the care of an individual physician, 4 percent in hospitals, 2 percent under the care of clinics, and 2 percent receiving care from other practitioners. Of the group of aged

persons requiring considerable care from others, 43 percent were reported to be under the care of an individual physician, 1 percent were in hospitals, 3 percent were receiving care in clinics, and 1 per-

Table 2.—Old-age assistance: Physical condition of recipients accepted during the fiscal year 1937–38, in each State with a plan approved by the Social Security Board

		Percent of recipients with speci- fied physical condition					
Region and State	Total reciplents accepted	Able to care for solf	Not bed- ridden but requiring consider- able care	Bed- ridden			
Total	1 585, 877	83. 2	14. 2	2. 6			
Region I:							
Connecticut	2, 797 10, 356	84. 5 92. 7	13. 6 5. 1	1.9			
Massachusetts.	19, 550	80. 6	10.0	2, 2 2, 5			
Massachusetts New Hampshire	987	84.1	12.3 (	8.6			
Rinode Island	2, 588	89.2	9.1 j	1.7			
Vermont	2, 052	88, 6	9.3	2, 1			
New YorkRegion III;	23, 423	91.8	7. 5	. 7			
Region III:			ا مما				
Delaware	147 6, 928	83. 0 87. 2	12.9 11.1	4. l 1. 7			
New Jersey Pennsylvania	20, 266	85. 1	12. 6	2. 4			
Region IV:			ا ـ ـ ـ ا	_			
District of Columbia Maryland	987 4, 952	85. 9 81. 7	13. 3 15. 6	. 8 2. 7			
North Carolina	33,000	74.3	21, 2	4. 5			
West Virginia	4, 498	80. 5	17.3	2. 2			
Region V: Kentucky	5,757	76.6	21, 1	2. 3			
Michigan	41, 323	87. 1	10.9	2, 0			
Onio	19, 020	83.8	13. 5	2.7			
Rogion VI:	25, 133	87. 1	,,,,	1.8			
111(1)18118	9, 166	83.0	11. 1 13. 7 9. 3	3.8			
Wisconsin	9, 166 9, 209	88.4	9.3	2. 3			
Region VII:	6, 470	69.6	25.9	4. 5			
Florida	21,082	83.4	14.6	2.0			
Cicorgia	36,700	72.0	23.7	4, 8			
Mississippi South Carolina	1,092	62.9	30.8	6.8			
Tomosseo	24, 415 24, 647	73. 7 78. 2	22. 2 17. 6	4. 1 4. 2			
Region VIII:	·	ļ					
Iowa	14, 316 8, 855	86.2	11.7	2, 1			
Minnesota Nebraska	3, 510	86.9 88.1	10.3 9.6	2. 8 2. 3			
North Dakota	1, 486	} 84. <i>5</i>	12.7	2.8			
South Dakota	8, 988	81. 5	16.0	2. 5			
Rogion IX: Arkansas	6, 966	74.3	21.0	3, 8			
Kansas	21,516	84. 1	13. 5	2. 4			
Kansas Missouri Oklahoma	29,012	81. 5	16. 1	2. 4			
Region X:	7, 432	85. 5	12. 1	2.4			
Louisiana	8, 479	75. 5	21. 2	8. 3			
NOW MIGNICO	1,002	80.9	16, 6	2, 5			
Texas	16, 934	82. 9	14.0	3. 1			
Arizona	6, 510	80.3	9.1	1. 6			
Colorado	11.833	92.8	6.2	1.0			
Idaho	1,516	85. 2 88. 3	12. 5 9. 9	2, 3 1, 8			
Iltah	3, 216 7, 585	84.8	13, 1	2. 1			
Wyoming	531	87.0	10.7	2. 8			
Kegion XII: California	47, 954	89.0	8,9	2, 1			
Novada	2, 145 7, 160	92.7	6.5	. 8			
Oregon	7, 100	83. 2	14.3	2, 5			
Washington Territories:	9, 858	86. 2	11.7	2. 1			
Alaska	554	86. 1	11.0	2, 9			
Hawaii	945	86,7	11. 5	1, 8			

<sup>&</sup>lt;sup>1</sup> Includes 60 recipients whose physical condition was unknown (Tennessee 1, Missouri 27, New Mexico 4, Texas 20, and Hawaii 8); these cases were emitted in computing percentages.

H. Doc. 120, op. cit., p. 52,

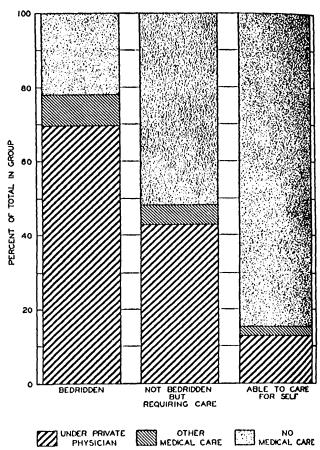
cent were under care of practitioners other than doctors of medicine.

Of the small group of persons in hospitals at the time of investigation, it is probable that some were receiving temporary medical or surgical treatment, since few States, if any, accept persons for old-age assistance if they require prolonged hospital care. The small number of persons attending clinics may be explained not only by the dearth of clinical facilities existing in many States, particularly outside the large cities, but also by the difficulties encountered by aged persons in getting to clinics. Accessibility of services for the individual must be given special consideration if the

Table 3.—Old-age assistance: Medical care or supervision and physical condition of recipients accepted during selected periods of the fiscal year 1936-37 and during the fiscal year 1937-38, in all States 1 with plans approved by the Social Security Board

	Recipients accepted							
Medical care or super- vision		1937-38						
	1936-37 Total	Totai	Able to care for self	Not bed- ridden but requiring consider- able care	Bed- ridden			
	Number							
Total	470, 527	3 585, 877	487, 336	82, 918	15, 563			
None	355, 684 95, 822	454, 681 124, 336	408, 978 72, 962	42, 267 39, 375	3, 416 11, 987			
physician	82, 448 1, 549 10, 171	106, 163 2, 039 13, 293	60, 522 639 10, 253	34, 918 758 2, 722	10, 717 639 317			
type of practitioner or agency	1, 654	2, 841	1, 548	977	314			
	Percent							
Total.	100.0	100.0	100. 0	100. 0	100.0			
None	78. 8 21. 2	78. 5 21. 5	84. 9 15. 1	51. 8 48. 2	22. 2 77. 8			
Under Individual2 physician In hospital In clipic Under care of other	18. 3 . 3 2. 2	18. 3 . 4 2. 3	12. 6 . 1 2. 1	42.8 .0 3.3	69. 6 4. 1 2. 1			
type of practitioner or agency	,~~. <b>4</b>	.5	.3	1. 2	2. 0			

Chart II .- Old-age assistance: Medical care or supervision, according to physical condition, of recipients accepted during the fiscal year 1937-38 in all States with plans approved by the Social Security Board



medical needs of the aged are to be adequately met.

The percentage of persons in each State recoiving medical care or supervision in 1937-38. according to physical condition, is shown in table Oregon had the highest proportion of such recipients, 36 percent. Other States reporting relatively large percentages of such recipients were Mississippi, Connecticut, and New Hampshire. States in which medical care was being supplied to less than 15 percent of the recipients were Alaska, New Mexico, Arizona, West Virginia, Tennessee, Colorado, Montana, and Oklahoma.

Although in 1937-38 only 15 percent of all persons classified as able to care for themselves were reported to be receiving medical care or supervision, 20 percent or more were receiving some medical attention in each of the New England States except Massachusetts and also in Oregon,

<sup>&</sup>lt;sup>1</sup> See footnote 3, page 21; in 1937-38, 50 States were administering programs.

<sup>1</sup> Includes 19,021 recipients (15,994 able to care for self, 2,590 not bedridden but requiring considerable care from others, 272 bedridden, and 165 whose physical condition was unknown) for whom information concerning medical care was unknown; these cases were omitted in computing percentages.

<sup>1</sup> Includes 6,870 recipients (5,396 able to care for self, 1,276 not bedridden but requiring considerable care from others, 160 bedridden, and 28 whose physical condition was unknown) for whom information concerning medical care was unknown; also includes 60 recipients (20 with no medical care or supervision, 6 under individual physician, 3 in hospital, 1 in clinic, 2 under care of other type of practitioner or agency, and 28 with medical care or supervision unknown) for whom information concerning physical condition was unknown. Those cases were omitted in computing percentages. These cases were omitted in computing percentages.

New York, the District of Columbia, Mississippi, Ohio, New Jersey, and Indiana. States in which medical care or supervision was being provided for 60 percent or more of the old persons who required considerable care from others are Massachusetts, Vermont, New York, New Jersey, Ohio, Oregon, New Hampshire, Connecticut, Michigan, and Idaho.

Table 4.—Old-age assistance: Medical care or supervision, according to physical condition, of recipients accepted during the fiscal year 1937-38, in each State with a plan approved by the Social Security Board

	All recipients		Able to care for self		Not bedridden but requiring considerable care		Bedridden	
Region and State	Number	Percent having some medi- cal care or supervi- sion	Number	Percent having some modi- cal care or supervi- sion	Number	Percent having some medi- cal care or supervi- sion	Number	Percent having some medi- cal care or supervi- sion
Total	1 585, 877	21. 5	1 487, 336	15. 1	1 82, 918	48. 2	15, 563	77.8
Region I: Connecticut. Maine. Massachusetts. New Hampshire. Rhode Island. Vermont. Region II:	2, 797 10, 356 19, 550 987 2, 588 2, 052	30. 5 23. 1 26. 8 30. 5 29. 0 26. 7	2, 363 9, 602 16, 938 830 2, 309 1, 819	24. 1 21. 1 19. 5 23. 6 25. 0 20. 8	381 531 2, 127 121 234 191	62. 2 41. 6 70. 9 62. 8 58. 5 69. 3	4 53 223 485 4 36 4 45 4 42	62.8
New York Region III: Delaware. New Jersey Pennsylvania.	23, 423 147 6, 928 20, 266	28.0 16.3 27.1 10.9	21, 503 122 6, 042 17, 254	24. 5 8. 2 20. 9 12. 1	1,757 19 767 2,534	66. 5 66. 4 59. 7	163 4 6 119 478	76. 1 89. 9 88. 6
Region IV: District of Columbia	987 4, 952 33, 060 4, 498	25. 5 25. 5 23. 3 12. 5	848 4,047 24,565 3,619	22. 9 18. 3 12. 8 8. 0	131 770 7,012 780	39. 7 52. 9 47. 7 27. 2	135 1,483 1,99	84. 4 81. 8
Region V:  Kentucky Michigan Ohio Region VI:	5, 757 41, 323 19, 020	19. 4 23. 1 20. 0	4, 408 36, 002 15, 938	10. 7 17. 0 21. 2	1, 215 4, 506 2, 503	45. 3 60. 6 65. 6	134 815 519	66. 9 84. 9 88. 9
Illinois Indiana Wisconsin Region VII:	25, 133 9, 166 9, 209	21. 6 27. 9 18. 2	21, 882 7, 604 8, 140	16.0 20.4 12.4	2, 802 1, 257 855	56. 6 59. 0 56. 2	449 305 214	79. 7 87. 6 89. 8
Alabama Florida Georgia Mississippi Bouth Carolina Tennessee Region VIII:	6, 470 21, 082 36, 700 1, 992 24, 415 24, 647	22. 7 17. 6 20. 5 33. 5 15. 7 12. 7	4, 501 17, 587 26, 422 1, 252 17, 993 19, 271	15. 0 12. 8 12. 5 21. 5 8. 9 6. 9	1, 674 3, 068 8, 696 614 5, 425 4, 351	35. 2 39. 9 35. 7 49. 3 28. 4 27. 1	295 427 1, 582 126 997 1, 024	68. 8 67. 9 70. 7 75. 4 69. 2 62. 2
Iowa Minnesota Minnesota Nebraska North Dakota South Dakota South Dakota Region IX:	14, 316 8, 855 3, 510 1, 486 8, 988	21. 4 17. 8 10. 1 10. 4 27. 1	12, 336 7, 693 3, 090 1, 256 7, 331	15. 5 11. 7 13. 4 13. 4 19. 9	1, 681 911 338 188 1, 435	53. 8 51. 7 57. 1 48. 4 56. 1	299 251 82 42 222	81. 6 81. 0 78. 8
Arkansas Kansas Missouri Oklahoma Region X:	6, 966 21, 516 29, 012 7, 432	16. 8 23. 8 24. 1 14. 8	5, 176 18, 080 23, 620 6, 354	9. 9 17. 2 16. 3 8. 9	1, 525 2, 904 4, 664 902	33. 1 53. 2 54. 3 44. 1	205 523 701 176	59. 9 85. 0 84. 8 75. 7
Louisiana New Mexico Texas Region XI:	8, 479 1, 002 16, 934	27. 7 9. 9 23. 1	6, 399 807 14, 030	19.3 7.2 15.6	1, 796 166 2, 362	49. 8 16. 3 54. 7	284 25 522	76. 4 81. 9
Arizona Colorado Idaho Idaho Montana Utah Wyoming Region XII:	6, 540 11, 833 1, 540 3, 216 7, 585 531	10. 5 14. 1 20. 6 14. 8 18. 1 23. 7	5, 836 10, 976 1, 317 2, 841 6, 435 462	7. 3 10. 4 12. 9 10. 2 11. 1 18. 2	597 738 194 319 993	32. 2 57. 3 60. 3 44. 6 53. 3	107 119 4 35 56 157	61. 0 79. 8 83. 3
California. Nevada. Oregon. Washington. Territories:	47, 954 2, 145 7, 169 9, 858	17, 1 15, 1 35, 6 25, 6	42, 681 1, 988 5, 968 8, 501	12. 3 13. 1 28. 8 19. 8	4, 282 139 1, 025 1, 152	51. 6 30. 4 65. 3 57. 7	991 4 18 176 205	79. 0 91. 4 84. 4
Alaska. Hawaii	554 945	6.3 20.1	477 812	3. 8 14. 0	4 61 108	54.8	10 17	

<sup>&</sup>lt;sup>1</sup> Includes 60 recipients whose physical condition was unknown. Total also includes 6,860 recipients for whom type of medical care or supervision was unknown. These cases were omitted in computing percentages.

<sup>1</sup> Includes 5,336 recipients for whom type of medical care or supervision was unknown; these cases were omitted in computing percentages.

Includes 1,276 recipients for whom type of medical care or supervision was unknown; these cases were omitted in computing percentages.
 Includes 166 recipients for whom type of medical care or supervision was unknown; these cases were omitted in computing percentages.
 Number too small for significant percentage distribution.

In all States, as is shown in chart III and table 5, the great majority of persons receiving medical service were under the care of individual physicians who treated them in their offices or in the home. These physicians may have been paid from public or private funds or by the aged person himself, or may have given service without recompense. In the 50 States, 85 percent of all those under medical supervision had individual physicians. In Vermont, Mississippi, South Dakota, and Maine, over 95 percent were under the care of individual physicians.

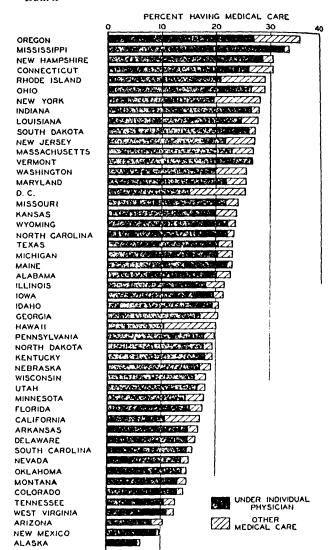
Exceptionally large percentages of the recipients receiving medical attention were attending clinics or out-patient departments of hospitals in Hawaii, the District of Columbia, New York, California, Rhode Island, Oregon, Washington, and New Jersey. The percentages of recipients for whom public or private hospital care was being provided were highest in California, Nevada, Montana, and Arizona. Treatment by "other practitioners" was relatively more common in West Virginia, Wyoming, California, Montana, New Hampshire, Illinois, and Idaho, than in the other States.

## Medical Care While Receiving Assistance

Comparatively little is known concerning the medical care received by recipients of old-age assistance after they are approved for assistance. Under the provisions of the Social Security Act the Federal Government can participate only in payments made directly to recipients. It is impossible to determine the extent to which recipients may provide medical care for themselves out of the small cash grants which they receive. Some States include an allowance for medical care in the individual budget from which the amount of the grant to the recipient is computed. The Social Security Board has recently approved the setting up in State public-assistance agencies of pooled funds for providing medical care to recipients of old-age assistance. Under this plan an allowance for medical care may be made in the budget of the individual recipient and this allowance turned over by him voluntarily to the pooled fund. From this fund the cost of medical care received by recipients of old-age assistance may be met.

The Federal Government has not been able to participate in payments made directly to physicians and hospitals for the care of recipients of old-age assistance, but some payments for such services were made during the fiscal year ending June 30, 1938, from State old-age assistance funds in Alabama, New Hampshire, New York, and Wisconsin. Although only a few States provide for hospitalization and other medical care from

Chart III.—Old-age assistance: Medical care of recipients accepted during the fiscal year 1937–38 in each State with a plan approved by the Social Security Board



State old-age assistance funds, at least 12 States provide hospitalization and other medical care from general relief funds.<sup>5</sup> Free medical and hospital care in some States is provided by agencies other than the relief agencies.

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<sup>\*</sup> Social Security Bulletin, Vol. 1, No. 12 (December 1938), p. 41.

The provision of more adequate medical care to recipients of old-age assistance, either through the device of the pooled fund or by other means yet to be developed, is one of the major problems toward which administrators of old-age assis-

tance programs are now directing attention. The next Bulletin article dealing with the social characteristics of the recipients of oldage assistance will discuss their age, race, and nativity.

Table 5.—Old-age assistance: Type of medical care or supervision of recipients accepted during the fiscal year 1937–38, in each State with a plan approved by the Social Security Board

Region and State			Recipients having some medical care or supervision					
	Total recipi- ents accepted			Percent having specified type				
			Number	Under indi- vidual physi- cian	In elinic	In hospital	Under care of other type of practitioner or agency	
Total	1 585, 877	454, 681	124, 336	85. 4	10.7	1.6	2.8	
Region 1: Connecticut. Maine Massachusetts New Hampshire Rhode Island Vermont Region II:	2, 797 10, 356 10, 550 987 2, 588 2, 052	1, 943 7, 968 14, 213 685 1, 839 1, 482	854 2, 388 5, 207 301 749 541	85. 2 96. 0 85. 3 93. 7 72. 1 99. 1	10. 2 1. 6 9. 0 . 3 24. 4	2. 1 . 4 3. 2 1. 7 2. 4 . 5	2. 8 2. 0 2. 8 4. 8 1. 1	
New York Region III:	23, 423	10, 826	6, 548	00. ō	27. 2	1.6	1.7	
Delaware New Jersey Pennsylvania. Region IV:	147 6,928 20,266	123 5, 049 15, 651	1 24 1, 879 3, 885	80. 6 80. 9	15. 8 7. 4	. 9 1. 3	2. 7 1. 4	
District of Columbia Maryland North Carolina West Virginia. Region V:	987 4, 952 33, 960 4, 498	735 3, 680 24, 456 3, 935	252 1, 259 7, 433 563	59. 1 86. 0 94. 7 89. 7	38. 1 11. 4 2. 4 1. 2	1.6 2.0 .6 .4	1. 2 . 6 2. 8 8. 7	
Region V. Kentucky. Michigan. Ohio. Region VI:	5, 757 41, 323 19, 020	4, 103 30, 855 13, 301	1, 082 9, 288 5, 434	92. 7 87. 6 91. 1	5. 2 10. 3 5. 1	. 8 . 6 1. 7	1. 8 1. 8 2. 1	
Illinols. Indiana Wisconsin Region VII:	25, 133 9, 166 9, 209	19, 666 6, 607 <b>7,</b> 530	5, 436 2, 559 1, 678	83. 7 94. 8 88. 6	10. 7 1. 5 7. 5	1, 4 2, 0	4. 2 1. 7 8. 9	
Alabatua Florida Georgia Mississippi South Carolina Tennesseo Region VIII:	6, 470 21, 082 36, 700 1, 992 24, 415 24, 647	4, 047 17, 305 28, 060 1, 304 20, 461 21, 091	1, 452 3, 703 7, 445 656 3, 806 3, 074	80. 1 86. 4 83. 7 97. 6 93. 8 83. 1	8. 1 10. 3 14. 4 . 2 3. 7 13. 5	.6 1.4 .3 .1 .7	2. 2 1. 9 1. 6 2. 1 1. 8 2. 4	
lowa Minnesota Nobraska North Dakota South Dakota Region 1X:	14, 316 8, 855 3, 510 1, 486 8, 988	11, 242 7, 197 2, 817 1, 187 6, 523	3, 064 1, 557 666 245 2, 421	91. 9 81. 4 89. 5 91. 9 96. 0	6.0 11.4 4.8 1.1	1. 0 3. 0 2. 4 3. 5 . 6	1. 1 3. 6 8. 3 8. 8	
Arkansas. Kansas Missouri Oklahoma. Region X:	6, 966 21, 516 29, 012 7, 432	5,700 16,185 21,702 6,270	1, 168 6, 043 6, 884 1, 088	88. 7 84. 1 90. 7 93. 9	7, 4 13, 3 7, 3 2, 9	.4 .7 .6 .6	3. <i>t</i> 1. 0 1. 4 2. 6	
Louisiana New Mexico	8, 470 1, 002	6, 100 898	2,339 1 08	89.0	8. 6	1, 4	1.0	
Texas . Region X1: Arizona .	16, 934	12, 999 5, 851	3, 923 680	88.7	8, 1	1. 3	1.0	
Colorado. Idaho. Montana. Utah. Wyoming.	11, 833 1, 546 3, 216 7, 585 531	0, 831 10, 075 1, 208 2, 723 6, 131 405	1, 647 314 471 1, 353 126	70. 5 92. 3 94. 3 88. 7 91. 9 93. 6	13, 7 4, 0 1, 5 4, 1	4.6 2.2 1.6 5.3 1.0	2. 2 1. 8 4. 1 4. 8 3. 0 5. 6	
Region XII:  California  Novada  Oregon  Washington  Ferritories:	47, 954 2, 145 7, 169 9, 858	39, 351 1, 803 4, 548 7, 336	8, 134 322 2, 513 2, 522	62. 2 90. 4 75. 5 78. 0	25, 0 , 3 22, 0 18, 1	7. 8 0. 8 . 8 1. 7	5. C 2. & 1. 7 2. 2	
Alaska Alaska Hawaii	554 915	518 713	* 35 178	52.3	39. 9	3. 9	8.0	

 $<sup>^{-1}</sup>$  Includes 0.860 recipients for whom medical care or supervision was unknown; these cases were omitted in computing percentages.

<sup>\*</sup> Number too small for significant percentage distribution.