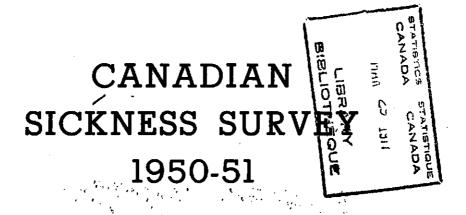
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SPECIAL COMPILATION: No. 5

VOLUME OF SICKNESS

(NATIONAL ESTIMATES)

Prepared jointly

oy

Canada

THE DOMINION BUREAU OF STATISTICS

and

THE DEPARTMENT OF NATIONAL HEALTH AND WELFARE

OTTAWA, CANADA APRIL, 1954

9005-518

Price 25 cents

ACKNOWLEDGEMENT

The Canadian Sickness Survey, the first nationwide study of illness in the general population of Canada, was carried out during a twelve-month period commencing in the autumn of 1950.

The Survey was initiated by the Department of National Health and Welfare and carried out by the ten provincial health departments with federal funds made available to the provinces through the National Health Program.

The planning and organization of the Survey was a joint undertaking of the Dominion Bureau of Statistics and the Department of National Health and Welfare in consultation with the provinces. Every provincial health department co-operated fully in gathering the extensive body of information which makes these publications possible.

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INTRODUCTION

The object of the Canadian Sickness Survey was to obtain estimates of the incidence and prevalence of illness and accidents of all kinds, the amount of medical, nursing and other health care received, and the volume of family expenditures for the various types of health services. The present bulletin is one of a series intended to provide a means of releasing interim information on the more important of these results, pending the preparation of a comprehensive publication containing more detailed information together with a fuller description of the methods used.

The survey method consisted of personal visits by trained lay enumerators to a sample of approximately 10,000 households distributed throughout each of the 10 provinces in metropolitan, small urban and rural areas. Less than 5 per cent of these households refused to participate in the survey. Of the remaining households over 80 per cent of the individuals involved remained in the sample throughout the survey period. All information, including particulars of income, housing and environment was obtained by direct interview of a household informant, usually the housewife. While the starting dates for the survey varied somewhat in different provinces, in most cases a total of 14 monthly visits was made to each household in the sample. On the first visit the enumerator introduced the survey and left a special calendar designed to help the informant keep a detailed day-to-day record of current sickness and expenditures for each member of the household. During each of the succeeding twelve months the enumerator interviewed the informant and recorded the sickness experienced by each person since the previous visit. The final visit was made to review the information recorded throughout the whole survey period. Uniformity of practice in the ten provinces was maintained by frequent consultation among the agencies involved, by uniform instructions to the enumerators and by the use of three standard record forms -a Household Record, an Individual Sickness Record and an Expenditures Form. Auxiliary schedules, also standardized, were used to record permanent physical disabilities and also health services which were desired but not obtained.

The sample was designed to obtain estimates within a sampling error of 20 per cent for events occuring at least once among every 50 persons in the population during the year. Indications are that for a large proportion of the estimates the error will be substantially smaller. Area sampling was used for the survey. As a first stage the following six domains (regions) of study were established consisting of four single provinces and two groups of three provinces each:

- 1. Newfoundland
- 2. Maritime (includes Prince Edward Island, Nova Scotia and New Brunswick)
- 3. Quebec
- 4. Ontario
- 5. Prairie (includes Manitoba, Saskatchewan and Alberta)
- 6. British Columbia

Within each domain of study three types of area were considered—metropolitan, urban and rural. Within these areas multi-stage sampling was adopted. In metropolitan centres, all of which were included in the sample, and in some of the sampled urban areas, the first stage of sampling was the block, the second stage being the household. In other urban areas systematic sampling from a list of households was used. Rural areas were divided into primary sampling units and grouped into strata. Within each stratum one primary sampling unit was selected and multistage sampling applied. The first stage was the selection of clusters or segments within the primary sampling unit while the second stage was the selection of households within the chosen clusters.

In designing the sample extensive use was made of population, social and economic data obtained from 1941 Census material. Similarly the results of the 1951 Census, which was taken at about midpoint of the survey period, provided the necessary distributions concerning persons and families for the calculation of national and provincial figures. The basic survey units for data on illness were the individual persons, while the units for expenditures on health services included families, as defined in the Census, together with certain single persons whether living alone or with other families as roomers or relatives.

VOLUME OF SICKNESS

This bulletin continues the series of preliminary publications of the results of the Canadian Sickness Survey. Previous publications regarding family expenditures for various items of health care and service are listed on the back cover. Subsequent reports will deal with special aspects of illness and the type and amount of care received by the population.

This bulletin deals with estimates of the amount and duration of ill health in the population. Two

measures of ill health have been used: disability, including bedrest or care, which involves modification of the person's normal activity; and complaints, a broader term, involving both minor and serious conditions. Complaints do not necessarily cause any disruption of normal activity, but are sufficiently pronounced to be recognized as variations from the individual's concept of his "normal good health". They represent a less accurate measure than the concept of disability, since the latter can be defined in terms of days away from usual activity.

Variations in the accuracy and uniformity of the data were expected, depending upon a number of factors. Some informants reported minor discomforts while others did not. On the other hand, it may be expected that most informants reported days in bed at home or hospital with reasonable accuracy and uniformity in all areas. In addition there were broad differences between enumerators in their previous understanding of and training in the problem of ill health. Hence, the amount of medical orientation of enumerators differed from one area to another.

Estimates are based on the number of persons reporting one or more complaint periods, the number of periods reported during the survey year and their duration. Considering periods, rather than illnesses,

made it possible to avoid a duplicate count of days where two or more illnesses contributed to a single period.

Estimates of the number of persons reporting one or more disability periods, and of those reporting one or more periods in bed (either at home or at hospital), as well as the number and duration of such periods are also presented. These terms are defined in relation to the general concept of complaint period.

Confinements, and the days involved, were included as complaint, disability and bed periods and days. For the normal care of newborn in hospital, bed days only were included; if complications existed, then disability and complaint periods and days were counted in addition to bed days.

THE DEFINITION OF PERIODS OF ILL HEALTH

Complaint period:

A complaint period is a series of days, ranging from a single day to a period covering the entire survey year, throughout which time a person was reported as continuously experiencing a disturbance in his state of health, and was at no time free of symptoms. The disturbance may have been due to a single illness throughout the period or to several illnesses which overlapped or were suffered concurrently-

first illness begins			first illness ends	
,	second illness begins			second illness ends
	one CO	MPLAINT I	PERIOD	·

It includes all days from the day the disturbance began until the day it ended, regardless of whether the person continued to perform his usual activity or was disabled and discontinued his usual activity-

complaint period begins			:	complain period ends
at usual	activityawa	y from acti	iv ity resu	ned activity
	one CO	MPLAINT	PERIOD	

It also includes all days the person was laid up in bed at home or in hospital-

complaint period begins	•		complain period ends
	in bed at hospital	in bed at home	
L	one COMPLA	INT PERIOD	

It should be mentioned that complaint periods separated by only a single complaint free day were counted as separate periods, with the exception of recurring illnesses¹, where seven complaint free days must have elapsed before a new period was counted.

In general, complaint periods are those periods during which the person was at no time free of symptoms. The fact that a complaint may have its origin in a single illness or in multiple illnesses, some or all of which may have contributed to the general disturbance in the individual's state of health, is disregarded. The diagnosis of these conditions, which are considered as separate illnesses or diagnostic entities, is also disregarded. Complaints resulting from a single condition, for example a headache, and of a single day's duration are included, as well as those, such as diabetes, lasting throughout the survey year. Each of these is considered as a single complaint period although the year long period may have included several conditions other than diabetes.

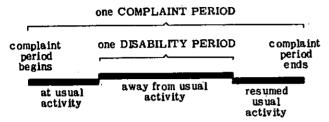
Disability period:

A disability period is a series of from one to 365 consecutive days throughout which time a person was reported as continuously away from his usual activity or occupation.

If he was gainfully employed, time included would refer to days during which he was unable to carry out his normal working activities due to ill health, whether or not such days were working days, i.e. weekends and holidays are included for the gainfully occupied. For persons not gainfully employed, all days were included during which they were unable to participate in their usual activities, for example, going to school or keeping house. For retired persons disability might merely mean an inability to pursue usual daytime activities such as caring for the garden or going for a walk.

 [&]quot;Recurring illness" refers to conditions which manifest themselves in intermittent attacks, such as heart condition, arthritis, asthma, etc.

A disability period includes all days from the day the person discontinued his usual activity until the day such activities were resumed, regardless of whether the person was up and around at home or laid up in bed at home or in hospital. For example-



The concept of disability period is not to be confused with work absenteeism, since the latter refers only to the gainfully occupied and comprises only days lost from gainful employment.

A person can experience more than one disability period during a single complaint period -

one COMPLAINT PERIOD First Second complaint complaint DISABILITY DISABILITY period period PERIOD PERIOD. ends hegins away again away from resumed resumed at usual usual again activity usual activity activity

Again, as in the case of complaint periods, disability periods separated by only one day during which usual activities were resumed were counted as separate disability periods, with the exception of recurring illnesses 1.

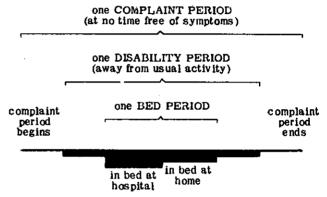
Bed periods:

A bed period is a series of from one to 365 full days throughout which time a person was reported to be in bed either at home or in hospital. It is, therefore, that portion of a disability period when the person is not up and around. Whenever days in bed at home and days in bed at hospital occurred during one complaint period it was assumed that these days were consecutive, and such cases are therefore

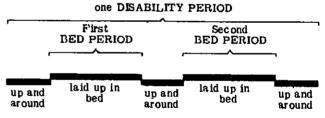
counted as one bed period. Bed periods include the day the person went to bed but exclude the day he got up. Such days also include the hospital days of the newborn.

The concept of what constitutes a full day in bed at home is much more difficult with regard to elderly persons than for other groups in the population. This should be borne in mind when considering the data in the tables.

The following chart illustrates how bed periods relate to disability and complaint periods.



A person can experience more than one bed period during a single disability period-



It will be seen from these charts that the three types of periods are not mutually exclusive; that is, bed periods must be part of disability periods and these, in turn, must be part of complaint periods. However, complaint periods may or may not include disability periods.

To illustrate the use of these concepts, three case histories have been taken from survey records and the method of calculating periods applied to the information reported. These illustrations will be found in Appendix A of this bulletin.

GENERAL REMARKS

Population:

The estimated number of persons in Canada, whether or not they reported sickness experience, excluding military camps, institutions, Indian reserves and remote areas, was 13,730,000. This constitutes the universe from which the sample was drawn and for which estimates were prepared.

Averages:

Included in the tables are the average number of periods per person, of days per person and of days per period. These were calculated for all ages taken together and for the age groups listed below. Averages for persons were based on total population figures and are not given separately for persons reporting complaints or disabilities.

^{1.} See page 6 for definition of recurring illness.

Derivation of averages is indicated in the tables by reference to their source. For example, in Table 1 page 13 the average number of complaint periods per person is derived by dividing the total number of complaint periods by the total number of persons in the population.

Averages are based on data which include periods of a year's duration as well as those lasting a single day and, obviously, do not represent continuous days of ill health. A distribution of persons by the duration of their periods will determine the influence of these extreme values on the averages shown.

The data are distributed by sex and the following age groups:

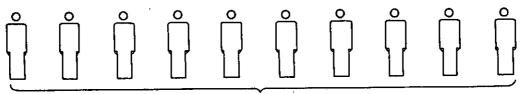
Under 15 15-24 25-44 45-64 65 and over In the tables, population figures and those for persons and periods, were rounded to the nearest ten thousand while the figures for number of days were rounded to the nearest hundred thousand. For convenience in relating these figures to each other they are shown in millions with the appropriate number of decimal places. All percentages and averages were rounded to one decimal place.

The estimates were calculated from tabulations of the data obtained for individual persons who were not absent from the sample for more than thirty days throughout the survey year. They are provisional in the sense of being subject to minor adjustments arising from further analysis of the sample material and from study and comparison of more detailed tabulations.

As it is the purpose of these bulletins to release certain basic data as soon as possible and to leave more detailed tabulations and interpretation to a more comprehensive report later on, the pattern of previous releases has been followed here and no attempt been made at this stage to analyse the data.

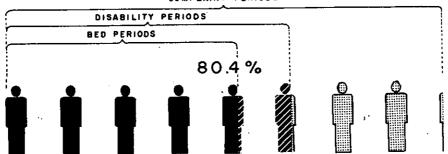
PERSONS REPORTING COMPLAINT, DISABILITY AND BED PERIODS

EACH EXPRESSED AS A PERCENTAGE OF THE ESTIMATED TOTAL POPULATION



100% (ESTIMATED TOTAL POPULATION)
OF THESE

COMPLAINT PERIODS



reported one or more complaint periods ranging from minor discomforts to severe disabling illness involving bed rest or care at some time during the survey year

58.5%

reported one or more disability periods, that is, they discontinued their usual activity at some time during the complaint period(s)

47.9%

reported one or more bed periods, that is, they were laid up in bed (home or hospital) at sometime during the complaint period(s)

SUMMARY

General Findings

Number of Persons:

It is estimated that during the twelve month period of the survey, 58.5 per cent of the total population, or roughly 3 out of 5 people, were disabled at one time or another.

About half of the population, 47.9 per cent, were laid up in bed one or more times during the year; this may have been at home or the hospital. Subsequent reports will show separate figures.

Altogether, about 4 out of 5 persons, 80.4 per cent, had some complaint during the year. These complaints ranged from very minor discomforts to major disabling illnesses, involving bed-rest or hospitalization. These findings are illustrated in Chart 1 on the preceding page.

Chart 2 indicates that about three quarters of all persons with complaints were required to stay away from their usual activity. Of these disabled persons, about 4 out of 5 went to bed.

Number of periods:

Chart 3 shows that one half of all complaint periods caused no interruption of normal activity. However, of the fifteen million disability periods, 73.1 per cent gave rise to bed care.

On the average, each person in the population had about one disability period (1.1), regardless of duration, during the year. For bed care, it is estimated that there was an average of 0.8 bed periods per person in the population.

Days:

An average of 11.9 disability days per person was estimated. This includes the days a person was kept away from work, school, housework or his other usual activity. Bed days amounted to an average of 5.6 per person, including the hospital stay of newborns. This is illustrated in Chart 4.

Comparing disability and bed days, it should be mentioned, of course, that some conditions may keep a person inactive for long periods but not necessarily involve a full day's bed rest. Also, any one period of illness may involve bed care followed by a period of recuperation at home.

Complaint days per person, averaging 51.4 days a year, are affected not only by conditions of short duration and long term illnesses, but as well, by all the very minor upsets and ailments reported for different age-sex groups in the population.

Age-Sex differences:

Any examination of the age-sex differences in the tables presented here must take into account that the concept of a disturbance of health may very well differ not only between two individuals of the same

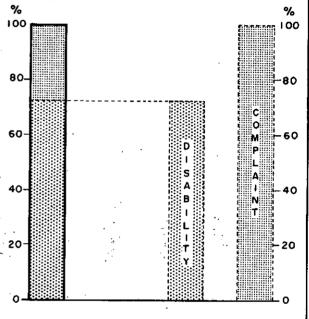
CHART-2

PERSONS REPORTING PERIODS

AT SOME TIME DURING THE SURVEY YEAR

PERSONS REPORTING DISABILITY PERIODS

EXPRESSED AS A PERCENTAGE OF THOSE REPORTING COMPLAINT PERIODS



PERSONS REPORTING BED PERIODS

EXPRESSED AS A PERCENTAGE OF THOSE REPORTING DISABILITY PERIODS

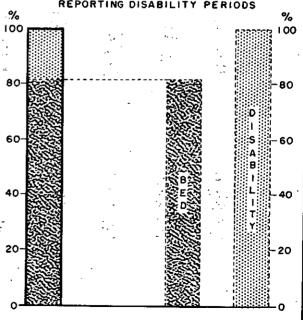
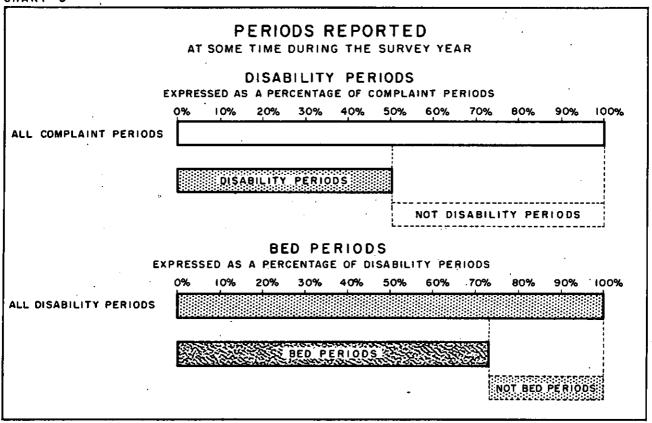
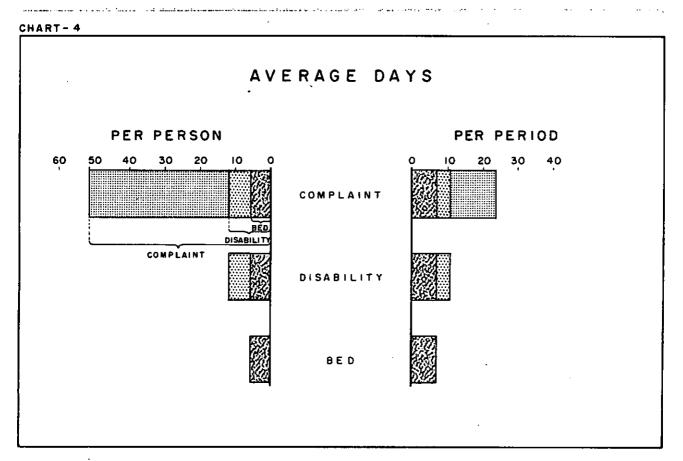


CHART-3





age-sex group, but also between such broad groups as children, adults or retired persons. These differences will be reflected in the information reported for these groups.

Some special mention should also be made concerning the influence on reporting of the understanding of the term "usual activity", as applied to the housewife or retired person. The distinction, here, between "at normal activity" or away from it, is more difficult than for those occupied outside the home, as previously mentioned. Similarly, conditions which are peculiar to women will, of course, affect their experience. For example, confinements are included in the figures shown, and this will appreciably affect the data on females of child bearing age.

In general, the data on age-sex groups show that females reported a higher percentage of their numbers with periods of ill health of any type. Of women of all ages, 60.7 per cent reported disabling periods as against 56.2 per cent for all men. The differences is wider in terms of bed periods -51.9 per cent of all women reported some full day bed care in the year, as compared to only 44.1 per cent of all men. These

٠. و١

differences are also reflected in the higher average number of such periods per female as against male, as shown in Table 1.

From Tables 4 and 6, it will be observed that male-female differences are largely accounted for by the experience of young adult females and young adult women of child bearing ages.

Viewing the experience of the various age groups, children under 15 years showed a higher proportion of their numbers experiencing disability, bed care or complaint periods than any other age group. Since they also had a high number of periods per person, the accumulated total of the days involved resulted in a high average number of days per person for this younger age group. In fact, no appreciable differences were found in the percentage reporting disability, bed care or complaint periods among the various adult age groups.

Turning to the older age groups, it will be noted from Table 2, that the age group 65 years and over, while representing only 7.6 per cent of the population, accounted for about double this proportion in terms of disability, bed and complaint days. It will also be noted that the average number of days per period increases steadily with age.

TABLE 1. Estimated number of persons, periods and days, by type of period and sex

		Persons reporting periods		Periods		Days		
				-		,	Average number ¹	
Type of period	Population (a)	Number (b)	Per cent (b as % of a) (c)	Reported (Average number per person (in population) (d divided by a) (e)	Reported (f)	Per person (in population) (f divided by a) (g)	Per period (f divided by d) (h)
1 1tn	Both sexes							
Disability ² Bed ³	13,730,000	8,030,000 6,580,000 11,040,000	58. 5 47. 9 80. 4	15, 180, 000 11, 100, 000 29, 800, 000	1. I 0. 8 2. 2	163.500.000 76.800.000 705.400.000	11.9 5.6 51.4	10.8 6.9 23.7
					Male		···	
Disability ² Bed ³ Complaint ⁴	7.010.000	3,940,000 3,090,000 5,450,000	56. 2 44. 1 77. 7	7,340,000 5,070,000 14,080,000	1.0 0.7 2.0	84,800,000 35,300,000 313,000,000	12.1 5.0 44.6	11. 6 7. 0 22. 2
				1	Female		,	
Disability ²	6,720,000	4,080,000 3,490,000 5,590,000	51.9	7,850,000 6,030,000 15,720,000	0.9	78,700,000 41,500,000 392,400,000	11. 7 6. 2 58. 4	10. 0 6. 9 25. 0

TABLE 2. Estimated per cent of persons, periods and days, by type of period and age

		Persons:		Periods		Days		
	Percentage distribution	per c reporting		٠.	Average		Average n	umber 1
Type of period	of population	Of all ages	In each age group	Per cent reported	number per person (in population)	Per cent reported	Per person (in population)	Per period
olsabliity ² : All ages	100.0	100.0	58. 5	100.0	1- 1	100-0	11.9	10.
Under 15	30.8 14.9 29.2 17.4 7.6	36. 6 13. 8 27. 3 15. 2 7. 1	69. 5 54. 1 54. 6 51. 0 54. 3	42. 6 12. 4 25. 0 13. 8 6. 4	1.5 0.9 0.9 0.9 0.9	27. 0 10. 5 22. 9 22. 3 17. 2	10. 4 8. 4 9. 3 15. 3 26. 8	6. 9. 9. 17. 28.
Bed ³ :	100.0	100.0	47.9	100.0	0. в	100.0	5.6	6.
All ages Under 15	30.8 14.9 29.2 17.4 7.6	36. 5 13. 4 27. 8 15. 0 7. 3	56.7 42.9 45.6 41.4 45.7	41. 4 12. 1 25. 8 13. 7	1.1 0.7 0.7 0.6 0.7	29. 2 10. 3 24. 9 19. 3 16. 4	5.3 3.8 4.8 6.2 12.0	4. 5. 6. 9. 16.
Complaint4:		100.0	80.4	100.0	2.2	100.0	51.4	23
All ages	30. 8 14. 9 29. 2 17. 4	100.0 33.4 13.5 29.0 16.6	87. 2 72. 7 79. 8 76. 6 79. 0	40. 1 11. 9 28. 0 14. 1 5. 9	2.8 1.7 2.1 1.7	21.0 9.3 30.5 24.1 15.2	34.9 32.1 53.6 70.9	12 18 25 40 60

Regarding the effect of extreme values, see page 6.
 Included also in complaint periods.
 Home or hospital. Included also in disability periods.
 Includes also disability periods.

Regarding the effect of extreme values, see page 6.
 Included also in complaint periods.
 Home or hospital. Included also in disability periods.
 Includes also disability periods.

CHART-5

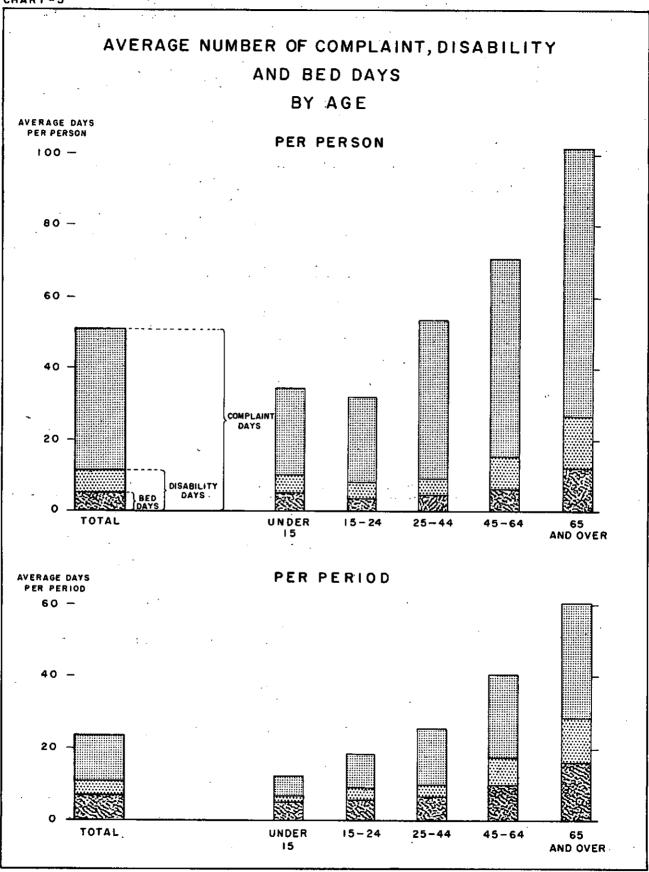


TABLE 3. Disability Periods and Days; 1 Estimated distribution of persons, periods and days, by age and sex

Age group	Population (a)	Persons reporting periods (b)	Periods reported (c)	Days reported (d)		
	Number (millions)					
	Both sexes					
uli ages	13. 73	8. 03	15. 18	163. :		
Jnder 15	4. 23	2.94	6- 46	44.		
5-24	2.05	1-11	1.88	17.		
5-44	4.01 2.39	2. 19 1. 22	3. 79 2. 09	37. 36.		
5 and over	1.05	0.57	0. 97	28.		
	•	Male	B			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
ul ages	7.01	3.94	7. 34	84.		
Inder 15	2. 21	1.53	3. 41	23. 9		
5-24	1. 01 2. 04	0.49	0.80	7.		
5-64	1. 23	1.02 0.62	1. 66 1. 00	18. 1 20. 1		
5 and over	0. 53	0. 28	0. 47	14.		
		Fema	ile			
ll ages	6. 72	4.08	7.85	78.		
nder 15	2 02					
5-24	2.02 1.04	1.41 0.62	3.05 1.08	20.		
5-64	1.97	1.17	2.13	19.		
5 and over	1. 17 0. 52	0.60 0.29	1.08 0.51	16. 4 13. 4		
·		Per ce	ent .	,		
<u> </u>		Both se	TPR			
<u> </u>						
il ages	100.0	100.0	100.0	100.		
7nder 15	30.8 14.9	36.6 13.8	42.6	27. (
5-44	29. 2	27. 3	12.4 25.0	10. : 22. :		
5-64	17. 4 7. 6	15. 2 7. 1	13.8 6.4	22. 17.		
		Male				
<u></u>	Т	.				
ll ages	100.0	100.0	100.0	100.0		
nder 15	91 =					
5-24	31.5 14.4	38. 8 12. 4	46.5 10.9	28. 2 9. 3		
5-64	29. 1	25. 9	22.6	21. 6		
and over	17. 5 7. 6	15. 7 7. 1	13. 6 6. 4	23.6 17.3		
	Female					
Ī		T				
ll ages	100.0	100.0	100.0	100.0		
nder 15	30. 1	34.6	38.9	25.		
5-24	15. 5	15, 2	13.8	11.		
5-64	29.3 17.4	28. 7 14. 7	27. 1 13. 8	24. 4 20. 1		
and over	7.7	7.1	6- 5	17.		

^{1.} Includes bed periods and days.

and the same of th

CHART-6

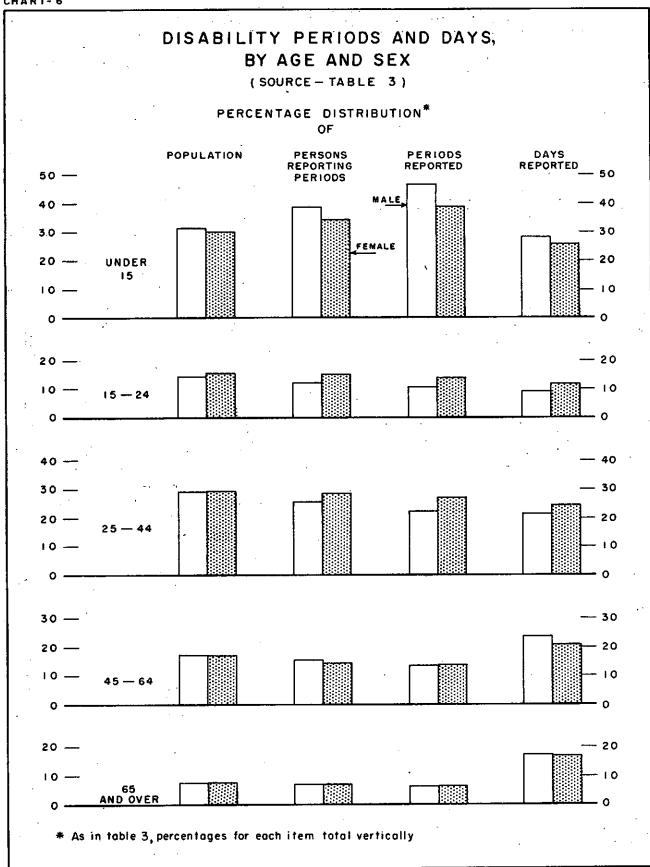
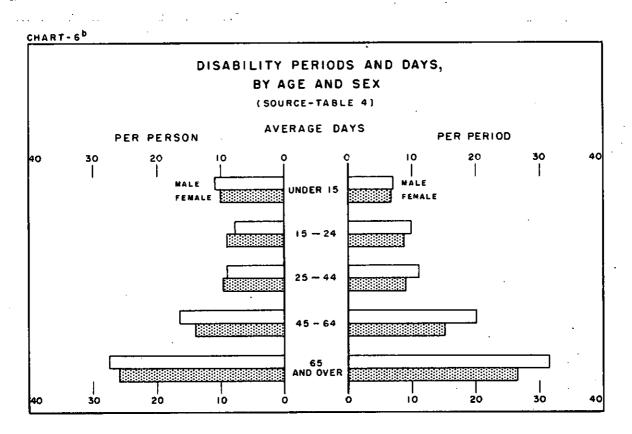


TABLE 4. Disability Periods and Days: 1
Estimated per cent of persons, average number of periods per person, days per person and days per period, by age and sex

	Persons:	Periods:	Days	
Age group	Per cent ² in each age group reporting periods	Average ³ number per person (in population)	Average ⁴ number per person (in population)	Average ⁵ number per period
		Both	sexes	
All ages	58. 5 69. 5 54. 1 54. 6 51. 0 54. 3	1. 1 1. 5 0. 9 0. 9 0. 9 0. 9	11. 9 10. 4 8. 4 9. 3 15. 3 26. 8	10.8 6.8 9.2 9.9 17.5 28.9
		M	ale	
All ages	56- 2 69- 2 48- 5 50- 0 50- 4 52- 8	1.0 1.5 0.8 0.8 0.8	12. 1 10. 8 7. 7 9. 0 16. 4 27. 6	11.6 7.0 9.8 11.0 20.1 31.5
	Female			
Ali ages	60. 7 69. 8 59. 6 59. 4 51. 3 55. 8	1. 2 1. 5 1. 0 1. 1 0. 9 1. 0	9. 1 9. 7	10.0 6.7 8.7 9.0 15.1 26.4



Includes bed periods and days.
 Derived from Table 3: b as per cent of a.
 Derived from Table 3: c divided by a.
 Derived from Table 3: d divided by a.
 Derived from Table 3: d divided by c.

TABLE 5. Bed Periods and Days: 1 Estimated distribution of persons, periods and days, by age and sex

Age group	Population (8)	Persons reporting periods (b)	Periods reported (c)	Days reported (d)	
	Number (millions)				
	-	Both s	exes		
All ages	13. 73	6.58	11. 10	76. 1	
Under 15	4. 23 2. 05 4. 01 2. 39 1. 05	2. 40 0. 88 1. 83 0. 99 0. 48	4. 60 1. 34 2. 86 1. 52 0. 78	22. 7. 9 19. 14. 1	
	I	Ma	le		
All ages	7.01 2.21 1.01 2.04 1.23	3. 09 1. 24 0. 36 0. 79 0. 47	5. 07 2. 37 0. 52 1. 15 0. 67	35. 3 12. 2 2. 9 7. 9 6. 8	
65 and over	0.53	. 0.22 Fem	0. 36	Š. 4	
All ages	6.72 2.02 1.04 1.97 1.17 0.52	3. 49 1. 16 0. 53 1. 03 0. 52 0. 25	6.03 2.23 0.82 1.72 0.84 0.42	41-5 10-2 5-0 11-2 8-0 7-2	
		Per c	ent		
	•	Both s	exes		
All ages	100. 0 30. 8 14. 9 29. 2 17. 4 7. 6	100.0 36.5 13.4 27.8 15.0 7.3	100.0 41.4 12.1 25.8 13.7 7.0	100-0 29-2 10-3 24-9 19-3 16-4	
	· · · · · · · · · · · · · · · · · · ·	Mai	le		
All ages Under 15	100.0 31.5 14.4 29. I 17.5 7.6	100.0 40.1 11.7 25.6 15.2 7.1	100.0 46.7 10.3 22.7 13.2 7.1	100.0 34.6 8.2 22.4 19.3 15.3	
	Female				
All ages	100. 0 30. 1 15. 5 29. 3 17. 4 7. 7	100.0 33.2 15.2 29.5 14.9 7.2	100.0 37.0 13.6 28.5 13.9 7.0	100.0 24.6 12.0 27.0 . 19.3 17.3	

^{1.} Home or hospital.

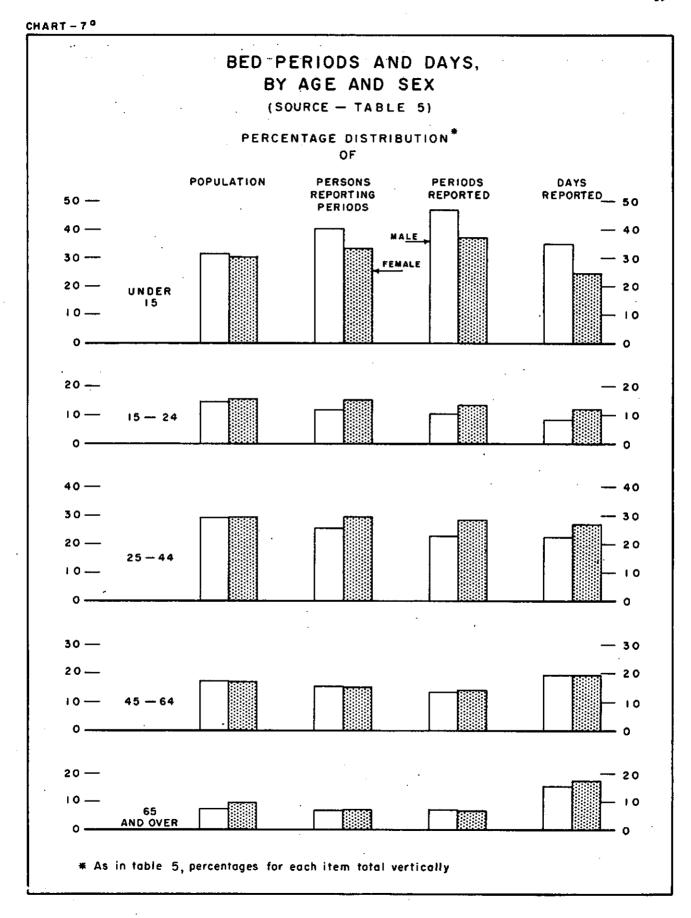
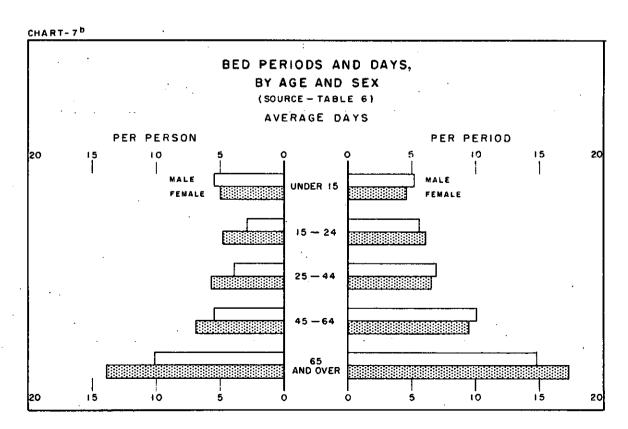


TABLE 6. Bed Periods and Days: 1
Estimated per cent of persons, average number of periods per person, days per person and days per period, by age and sex

	Persons:	Periods;	Days	
Age group	Per cent ² in each age group reporting periods	Average 3 number per person (in population)	Average ⁴ number per person (in population)	Average ⁵ number per period
		Both	sexes	
All ages	47.9 56.7 42.9 45.6 41.4 45.7	0.8 1.1 0.7 0.7 0.6 0.7	5.6 5.3 3.8 4.8 6.2 12.0	6.9 4.9 5.9 6.7 9.8 16.1
		M	ale	
All ages	44. 1 56. 1 35. 6 38. 7 38. 2 41. 5	0.6 0.5	5.0 5.5 2.9 3.9 5.5	7.0 5.2 5.6 6.9 10.1 14.8
		Fe	male	·
All ages	51. 9 57. 4 51. 0 52. 3 44. 4 48. 1	1. 1 0. 8 0. 9 0. 7	5.0 4.8 5.7 6.9	6.9 4.6 6.1 6.5 9.5 17.3



Home or hospital.
 Derived from Table 5 : b as per cent of a.
 Derived from Table 5 : c divided by a.
 Derived from Table 5 : d divided by a.
 Derived from Table 5 : d divided by c.

TABLE 7. Complaint Periods and Days: 1 Estimated distribution of persons, periods and days, by age and sex

Age group	Population . (a)	Persons reporting periods (b)	Periods reported (C)	Days reported . (d)	
	Number (millions)				
		Both s	exes		
41 ages	13. 73	11-04	29.80	705. 4	
Jnder 15	4. 23 2. 05 4. 01 2. 39 1. 05	- 3.69 1.49 3.20 1.83 0.83	11.96 3.55 8.33 4.19 1.76	147. 8 65. 8 215. 1 169. 8 106. 9	
		Ma	le		
All ages	7.01 2.21 1.01 2.04 1.23 0.53	5. 45 1. 92 0. 70 1. 52 0. 90 0. 41	14.08 6.23 1.51 3.58 1.93 0.82	313. 0 75. 0 28. 0 86. 5 74. 8 48. 7	
		Fem			
11 ages	6.72 2.02 1.04 1.97 1.17 0.52	5- 59 1. 77 0. 80 1. 67 0. 93 0. 42	15. 72 5. 73 2. 04 4. 75 2. 25 0. 94	392- 4 72- 8 37- 8 128- 6 94- 9 58- 3	
	Per cent				
•		Both s	iexes	**	
All ages	100.0 30.8 14.9 29.2 17.4 7.6	100.0 33.4 13.5 29.0 16.6 7.5	100.0 40.1 11.9 28.0 14.1 5.9	100.0 21.0 9.3 30.5 24.1 15.2	
		Ma	le		
All ages	100.0 31.5 14.4 29.1 17.5 7.6	100.0 35.2 12.8 27.9 16.5 7.5	100.0 44.2 10.7 25.4 13.7 5.8	100.0 24.0 8.9 27.6 23.9 15.6	
	Female			+	
All ages	100.0 30.1 15.5 29.3 17.4 7.7	100.0 31.7 14.3 29.9 16.6 7.5	100. 0 36. 5 13. 0 30. 2 14. 3 6. 0	100.0 18.6 9.6 • 32.8 24.2 14.9	

^{1.} Includes disability periods and days.

CHART -8ª

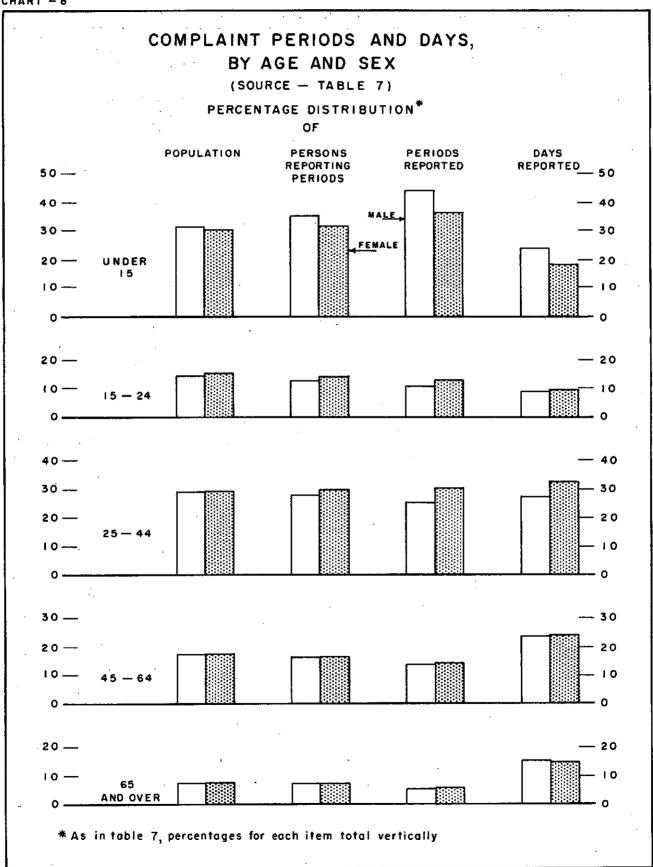
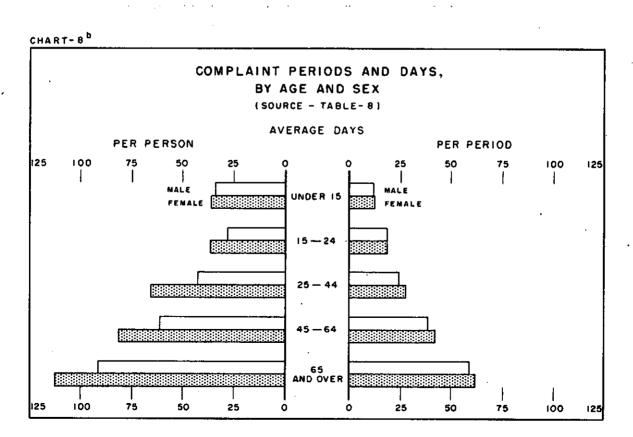


TABLE 8. Complaint Periods and Days: 1
Estimated per cent of persons, average number of periods per person, days per person and days per period, by age and sex

	Persons:	Periods:	Days	
Age group	Per cent ² in each age group reporting periods	Average ³ number per person (in population)	Average ⁴ number per person (in population)	Average ⁵ number per period
		Both	sexes	
All ages	80. 4 87. 2 72. 7 79. 8 76. 6 79. 0	2-2 2-8 1-7 2-1 1-7 1-7	51. 4 34. 9 32. 1 53. 6 70. 9 101. 9	23. 7 12. 4 18. 5 25. 8 40. 6 60. 8
	-	Ma	ule	-
All ages	77. 7 86. 9 69. 3 74. 5 73. 2 77. 4	2.0 2.8 1.5 1.8 1.6	44-6 33-9 27-8 42-5 60-9 91-5	22- 2 12-0 18-5 24-1 38-7 59-1
		Fer	nale	
All ages	83. 2 87. 6 76. 9 84. 8 79. 5 80. 8	2.3 2.8 2.0 2.4 1.9	58- 4 36- 0 36- 4 65- 2 81- 4 112- 5	25.0 12.7 18.5 27.1 42.1 61.9

- Includes disability periods and days.
 Derived from Table 7: b as per cent of a.
 Derived from Table 7: c divided by a.
 Derived from Table 7: d divided by a.
 Derived from Table 7: d divided by c.



COMPLAINT, DEABLITY AND BED PERIODS APPENDIX A

Application of these concepts to three case histories

The purpose of this chart is to illustrate the method of calculating periods used in this bulletin. It also shows illnesses, or diagnostic entities, which overlap or concur in their duration as components of complaint periods, as well as the wide variation in the type and duration of periods.

Three actual cases taken from Individual Stekness Records are presented. A short description of each case is given, the definitions of periods and days, shown

30 BAAA.	TYPE OF				1950	00					6	- S		• ;	
	PERIOD	70.00 05.00 05.00		SEPT.	oct.	NOV.	DEC.	JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.
	┪	Europa													."
	Q C	CASE A		,							3 E		,		
Case A, tenale, reported nou Linessess during ure survey year. These linesses, which occurred shigh. were, an abcessed tooth (i) in November, a sore				i	-	LUNESS TUNESS		FLUNESS			ILLANESS #3.4	ILLNESS.			
throat (2) in January, "flu" and severe cold (3) in April, and, an infection of the uterus (4) in Max. Note of these illnesses overlapped or coounted in			;			C		-						• • •	
their duration and, therefore, each comprised one complaint period. Since A was away from her usual	COMPLAINT	4	ò			_		-		•	_				
activity throughout each of these periods, four albability periods of identical duration were also reconded and all complaint days were also deability days.	DISABILITY	4	37			Z		(ZZZ		• •	ZZ			- "	· · · .
Five complaintdays were reported for the abcessed tooth, three for the sore threat, five for "flu", of which two were bed days at home, and 24 for infection of the uterus, of which 4 were bed days at home and 4 at hospital.		∾ .	<u>o</u>	•										•	
	·	CASEB			I.			Ī							
Case B, male, reported 7 illnesses during the sur-					LUNESS			TLLNESS	ILLNESS:	*	11.14E98	١	LLNESS		ILLNESS
wey year. The first, which occurred singly in October, was a head cold of 5 complaint days duration. A small growth (2) on the index fluger of his right hand			970		<u></u>		•				<u> </u>	ILLNESS	,		
appeared in Jamary and remained until the end of the survey year, a total of 243 complaint days. He	COMPLAINT	N.	249		⊐		_								
reported a cold (3) in January, 'Tu'' (4) in February, ottis media (5) in March, another cold (6) in April	DISABILITY	N	12												
and a head coid (7) in August, Each or irrese un- manda assa occurred within the 243-day complaint period, Four bed days (none) were reported for "flu" and a	. 0	8	-2					,							•
total of 8 (4 bome and 4 hospital) for offits media. These accounted for a total of 12 disability days and 12 bed days.							•			,				·	
	<u>.</u>	CASEC						\parallel							
Case C, male, reported a seven heart condition (1) which began in 1949, was troubling him the day the survey started and confinued to do so throughout									TARESS TARESS	9					ILL NESS
the survey year, in Pebruary he reported suffering from oneumonia (2), which lasted for 10 days and,			•							-					
in August, from anaemia (3), which lasted until the end of the survey.	COMPLAINT	-	365												
For the heart condition, one complaint period of 365 days duration was recorded. Since C was away	DISABILITY	-	365												
from his usual activity throughout the survey year one disability period of 385 days was also recorded. Doth of these periods cover the other illnesses which	850	-	\$										•		
occurred during the survey year. One bed period (hospital) of 34 days for the heart condition was recorded and covers the 10 days during which he had nonements.															

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