

REPORT ON THE RESULTS OF A CENSUS OF THE POPULATION OF THE DOMINION OF NEW ZEALAND TAKEN FOR THE NIGHT OF THE 15th OCTOBER, 1916.

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INFIRMITY, BY AGE AND SEX.

BLINDNESS.

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FEEBLE-MINDEDNESS.

At census-takings prior to 1911 information was required as to “sickness” and “accident” as well as infirmity. In 1911 and 1916, however, details were collected of the following types of infirmity alone:—

1. Deaf-mutism—*i.e.*, existence of deafness and dumbness in conjunction.

2. Blindness.

3. Feeble-mindedness.

In addition the returns supplied by mental-hospital authorities gave particulars of lunacy.

Of the total population, 6,359 persons, or 5.78 per 1,000, were suffering from one or other of the above infirmities, of whom 206 were deaf-mutes, 566 blind, 4,275 lunatics, and 1,312 feeble-minded. In 1911 there were 5,301 persons returned as infirm, being 5.26 per 1,000. The figures for the respective classes of infirmity were in that year 301, 482, 3,741, and 777. It will be apparent that deaf-mutes alone show a decrease, the direct and indirect effects of the war being doubtless at the bottom of the general increase during the quinquennium. A point that should be borne in mind in connection with the statistics of infirmity is that there was no definite question to be answered in this respect, the instruction merely being that if a person were a deaf-mute, blind, or feeble-minded, this fact should be entered in a column provided. It is possible that in a number of cases the information might have been omitted, inadvertently or otherwise, on this account.

INFIRMITY, BY AGE AND SEX.

The following table shows the proportion of infirm per 10,000 of population by age-groups and sexes:—

Age, in Years.	Males.				Females.				Both Sexes.			
	Deaf and Dumb.	Blind.	Lunatic	Feeble-Minded.	Deaf and Dumb.	Blind.	Lunatic	Feeble-Minded.	Deaf and Dumb.	Blind.	Lunatic	Feeble-Minded.
Under 5	0.15	0.59	..	2.23	0.93	..	0.31	1.85	0.53	0.30	0.15	2.05
5 and under 10	1.12	1.12	0.64	9.79	1.16	1.32	0.83	7.44	1.14	1.22	0.73	8.63
10 and under 15	1.62	1.08	2.34	15.67	0.56	2.23	2.23	11.18	1.09	1.65	2.29	13.46
15 and under 20	1.78	2.66	6.00	26.44	1.51	1.72	5.60	15.96	1.64	2.19	5.80	21.11
20 and under 25	3.94	3.62	25.64	27.93	2.14	1.50	15.18	11.55	2.85	2.33	19.31	18.01
25 and under 30	4.50	4.00	36.48	19.74	2.47	1.23	21.83	10.30	3.39	2.48	28.46	14.56
30 and under 35	2.82	3.46	53.50	12.78	1.69	1.27	28.89	9.28	2.24	2.35	41.04	11.01
35 and under 40	3.03	3.90	65.68	10.84	1.80	2.26	44.01	9.70	2.43	3.10	55.06	10.28
40 and under 45	2.18	2.72	81.61	11.97	0.89	2.07	56.10	8.27	1.56	2.41	69.13	10.19
45 and under 50	2.42	3.94	88.81	9.09	2.16	2.52	76.77	6.49	2.30	3.29	83.32	7.90
50 and under 55	2.91	5.00	93.64	9.57	2.85	2.37	96.76	9.96	2.88	3.77	95.11	9.75
55 and under 60	2.14	14.43	124.02	7.48	3.20	10.23	115.79	7.04	2.62	12.52	120.27	7.28
60 and under 65	1.86	11.17	125.35	11.17	1.59	13.52	114.50	12.72	1.74	12.20	120.60	11.85
65 and under 70	0.89	11.60	141.02	16.96	2.09	20.85	103.21	12.51	1.44	15.87	123.58	14.91
70 and under 75	1.20	43.27	126.22	16.83	5.84	29.18	96.28	30.63	3.30	36.90	112.69	23.07
75 and under 80	..	56.32	152.40	21.53	2.22	88.69	128.61	37.69	0.95	70.16	142.22	28.44
80 and under 85	6.92	134.90	117.61	55.34	..	125.82	135.88	60.39	4.10	131.20	125.05	57.40
85 and under 90	..	218.57	142.08	120.22	..	294.11	14006	98.04	..	251.69	141.19	110.50
90 and over	..	578.03	115.62	57.80	..	301.51	430.11	53.76	26.88
Totals, 1916	2.10	5.87	45.51	13.81	1.64	4.42	32.21	10.04	1.87	5.15	38.89	11.93
Totals, 1911	2.90	5.25	41.26	7.95	3.08	4.26	32.44	7.43	2.98	4.78	37.10	7.70

One of the most marked features of the table is the general increase of infirmity with age, a result which naturally would be expected. The very low percentages at the earliest quinquennial groups may be accounted for partly by a natural tendency on the part of parents to hope for eventual recovery where evidence of infirmity has actually emerged, and also partly by the fact that the existence of infirmity is not always apparent in the earliest years of infancy. In all cases except deaf-mutism the increase in infirmity with age is marked. The comparatively even frequency distribution over age-groups of this particular form of infirmity suggests that it is for the most part at least congenital, whilst the other forms are, on the other hand, with the possible exception of feeble-mindedness, for the most part acquired.

Infirmity is considerably higher amongst males than amongst females, especially as age advances. This is doubtless due to the fact that the more strenuous occupations of males are normally such as to render them much more liable to acquired as opposed to congenital infirmity. That this is the explanation is borne out by the very low percentage of infirm males at the earliest age-group, being somewhat smaller, in fact, than that for females at the same group. What is more remarkable, however, is that the excess of males is more or less evenly distributed over the different classified heads of infirmity.

DEAF-MUTISM.

The following table shows the progressive changes in the proportion per 10,000 of population suffering from this infirmity:—

Census.	Males.	Females.
1874	2.05	1.71
1878	2.25	2.18
1881	2.23	2.45

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Census.	Males.	Females.
1886	2.37	2.22
1891	2.80	2.49
1896	2.99	2.71
1901	3.28	2.51
1906	3.29	2.73
1911	2.89	3.08
1916	2.10	1.64

This form of infirmity would appear to have reached a maximum in the first decennium of the present century, and to be now on the decrease. Of 206 persons suffering from this infirmity 160, or 78 percent-, were born in New Zealand.

There appears to be no definite age-group at which this infirmity is at a maximum. The total number of cases is fortunately so small that few inferences of any validity may be drawn. Provided, however, that the proportion of children born deaf is fairly constant, that the death-rate is not appreciably higher for them than for the rest of the community, and that migration is for them at a minimum, the above general results are ones that might be expected from a class of infirmity whose origin is congenital.

The following table shows the occupations (past or present) of all deaf-mutes whose occupations were specified in the 1916 census returns:—

Occupations.	Males.	Females.
Hospital assistant	..	1
Draughtsman	2	..
Boardinghouse assistant	..	2
Domestic servant	..	3
Groom	1	..
Gardener	3	..
Caretaker in Education Department	1	..
Hairdresser	1	..
Laundryman	1	..
Labourer in coal-yard	1	..
General storekeeper	1	..
Printer's machinist	1	..
Picture-framer	1	..
Coachbuilder	1	..
Saddler	2	..
Cabinetmaker	1	..
Sawmill worker	3	..
Tailor	5	..
Tailoress	..	1
Dressmaker	..	2
Bootmaker	2	..
Assistant in biscuit-factory	1	..
Confectionery-maker	1	..
Tanner	1	..
Fencer	2	..
Ironworker	1	..
Carpenter	4	..
Builder's labourer	2	..
General labourer	4	..
Farmer	2	..
Farm labourer	9	..
Assistant fruitgrower	1	..
Gardener	2	..
Sheep-farmer	2	..
Cook on sheep-station	1	..
Assistant on sheep-farm	3	..
Dairy-farmer	7	..
Assistant on dairy farm	5	..
Wool-classer	1	..
Quarryman	1	..
Pensioner	..	1
Independent means	1	1
Domestic duties	2	49
Scholar	..	1
Child unable to read or write	15	15
Dependent	8	8
Hospital patient	2	..
In receipt of charitable aid	1	3

Occupations.	Males.	Females.
Inmate of special school	1	..
Inmate of reformatory	..	2
Occupation not stated	10	1
Totals	116	90

BLINDNESS.

The following table shows the progressive changes in the proportion per 10,000 of population afflicted with this infirmity:—

Census.	Males.	Females.	Total.
1874	2.45	2.18	2.34
1878	2.42	2.73	2.56
1881	2.93	2.68	2.82
1886	3.65	2.70	3.22
1891	4.91	3.74	4.37
1896	5.69	4.01	4.90
1901	7.32	4.26	5.87
1906	6.11	3.98	5.11
1911	5.25	4.26	4.78
1916	5.87	4.42	5.15

From the foregoing it will be seen that this infirmity reached a maximum in 1901, and that since 1911 the proportion has again risen. The fact that this rise is much more marked in the case of males than in that of females suggests that the asperities of war have had some effect on the figures. This is partly borne out by the following table showing the figures for age-groups corresponding roughly to military age:—

Age last Birthday.	Number of the blind			
	census, 1911.		census, 1916.	
	Males.	Females.	Males.	Females.
20.24	9	6	11	7
25.29	14	5	16	6
30.34	9	10	16	6
35.39	8	8	18	10
40.44	12	7	10	7

Direct effects of war cannot, however, be the sole cause, for there has been a marked increase at ages 80 and over, as follows:—

Census	Males	Females
1911	30	30
1916	71	53

Of 566 persons suffering from this infirmity only 194, or 35 percent., were born in New Zealand. Most persons shown as blind who were born abroad have no doubt acquired their infirmity after settling in New Zealand. Deaf-mutism is apparently, however, usually congenital, being rarely acquired, and is moreover an infirmity which proves a formidable obstacle to travel. Hence the difference in the proportions of New-Zealand-born in the two cases.

The following figures are appended as showing the occupations (past or present) of all persons afflicted with blindness for whom an occupation was specified:—

Occupations.	Males	Females
Member of Legislative Council	1	..
Masseur	1	2
Teacher in Institute for Blind	1	3
Sculptor	1	..
Organist	1	..
Street musician	10	..
Boardinghouse-keeper	2	..
Capitalist	4	2
Insurance agent	1	..
House-proprietor	3	..
Dairyman	1	..
Grocer	1	..
Tea-merchant	1	..
Tobacconist	1	..
Horsebreaker	1	..
Storekeeper	1	..
Hawker	1	..
Master mariner	2	..
Piano-tuner	14	..
Basketmaker	11	..
Boxmaker	1	..
Knitting machinist	1	1

Occupations.	Males	Females
Bootmaker	2	..
Matmaker	4	..
Baker	1	..
Brickmaker	1	..
Engineer in foundry	1	..
Ironmoulder	2	..
Electric linesman	1	..
Carpenter	2	..
Painter	1	..
Public Works labourer	1	..
General labourer	3	..
Agricultural farmer	8	..
Market-gardener	1	..
Fruitgrower	1	..
Sheep-farmer	7	..
Shepherd	1	..
Poultry-farmer	1	..
Dairy-farmer	14	2
Alluvial-gold miner	1	..
Pensioner	18	5
Annuitant	3	5
Of independent means	29	6
Domestic duties	..	86
Scholar	16	18
University student	1	..
Child unable to read or write	7	7
Dependent	30	33
Invalid	1	..
Hospital patient	10	3
In receipt of charitable aid	30	18
Inmate of Institute for Blind	26	12
Prisoner	1	..
Inmate of reformatory	..	1
Occupation not stated	38	38
Totals	324	242

LUNACY.

As regards this form of infirmity it was assumed that all cases of lunacy were confined in mental hospitals. Accordingly no direct question was asked in the census schedule as to lunacy, but particulars were specially obtained at the date of census from mental hospitals. In this way errors arising from reluctance to record, or from misplaced humour, were largely if not wholly eliminated.

The following table is of interest as manifesting the remarkable increase in this form of infirmity:—

Census	Per 10,000 of Population		
	Males.	Females.	Total.
1874	23.28	15.48	19.93
1878	25.07	15.54	20.85
1881	27.30	17.43	22.86
1886	31.03	21.18	26.50
1891	31.28	23.92	27.82
1896	35.70	26.02	31.13
1901	39.23	29.19	34.47
1906	39.64	30.63	35.40
1911	41.27	32.44	37.10
1916	45.51	32.21	38.89

Between 1911 and 1916 there was a slight fall in the proportion of female lunacy, but it was far otherwise with males. Here again war anxieties, &c. possibly operated as a contributing factor, but the following table seems to suggest that the direct effects of the war have not been marked:—

Numbers of the Insane.

Age-groups.	Census, 1911.		Census, 1916	
	Males.	Females.	Males.	Females.
20.24	77	73	78	71
25.29	149	106	146	106
30.34	217	142	247	137

Age-groups.	Census, 1911.		Census, 1916	
	Males.	Females.	Males.	Females.
35.39	226	156	303	195
40.44	259	166	300	190

Of 4,275 persons thus afflicted, 1,912, or 45 percent., were New-Zealand-born, which proportion is just below that borne by the New-Zealand-born population to the total population.

FEEBLE-MINDEDNESS.

Where feeble-mindedness begins and full possession of one's faculties ends is difficult to define, and for this reason figures as to this form of infirmity are of value only as an index, and it has not been considered worth while carrying an investigation into these results very far.

It is worth noting, however, that of 1,312 persons so set down, 1,003, or 77 percent., were born in New Zealand. The high percentage as compared with lunacy is probably accounted for by the fact that feeble-mindedness (as suggested by the first table in this section of the Report) is probably more often congenital than lunacy. Few persons with a tendency to feeble-mindedness will migrate; whereas many persons set down in the census as being lunatics had migrated to New Zealand before the affection developed.

Both the 1911 and 1916 census-takings point to two maxima for this class of infirmity, one about age 15 and one at advanced age. Feeble-mindedness is no doubt a phenomenon which, even though congenital, does not always manifest itself at the earliest ages; moreover, with advancing years in many cases the mental faculties decay. In these two facts the explanation of the two maxima probably lies.
