

## REFERENCES

1. Death rates are calculated using resident and non resident deaths occurring in Oregon and population estimates for 1999 from Portland State University Center for Population Research. In this report rates are per 100,000 population, unless otherwise indicated.
2. Hopkins D. Weapons and Oregon Teens: What is the Risk? Center for Health Statistics, Health Division, Oregon Dept of Human Services, Portland, Oregon, 1999
3. Although some view Russian Roulette as a form of suicide, the intent classification of these deaths in this report are the same as those assigned by the Medical Examiner.
4. SIDS data are compared with a data from the Pregnancy Risk Assessment Monitoring System (PRAMS), Oregon Health Division, 1999.
5. Pregnancy Risk Assessment Monitoring System, Oregon Health Division, 1999.
6. The term "suicide" which has been used to describe a manner of death is being replaced with "intentional self harm" in the International Classification of Diseases, 10th edition. The ICD-10 classification coding was implemented in coding data from death certificates in 1999.
7. There is a lack of consistency among Medical Examiners regarding determination of the manner of death among those who harm themselves by placing a loaded firearm to their heads and pulling the trigger. This action, sometimes "played" in a group is known as Russian Roulette. Among Medical Examiners across the U.S., only one state, New Mexico has standardized its approach by classifying Russian Roulette deaths as intentional self harm/suicide.
8. Behavioral Risk Factor Survey is a random digit phone survey of adult Oregonians. Data is available at <http://www.ohd.hr.state.or.us/chs/brfsdata.htm>.
9. State Office of Services to Children and Families. The Status of Children in Oregon's Child Protection System, 1999. Oregon Department of Human Services, Salem, Oregon. Rate calculated based on 1999 Oregon population estimate of Oregon Youth aged less than 18 from Center for Population Research at Portland State University. Data collection efforts from 1997 to 1999 have improved and more information is known about the presence of disabilities, a family history of drug and alcohol abuse, and a history of domestic violence. For the comparison of multiple years, a consistent definition was applied to all categories.