

REALD Questions added to OVERS

The introduction of REALD (Race, Ethnicity, Language, and Disability) data collection on January 1, 2022, adds new demographic questions to the Parent Worksheet and the paper Certificate of Live Birth. It will also add new fields and pages to the Oregon Vital Events Registration System (OVERS).

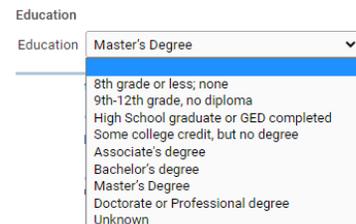
The collection of REALD demographic data is important because certain groups of people experience health inequities. This results in avoidable differences in health outcomes. To fully address and eliminate those differences in health outcomes, we need more detailed data collection to accurately identify health inequities among different populations.

The new page and field names are listed below along with information about the fields and what should be entered into OVERS.

Mother Demographics Page

The **Mother Demographics** page changed from the Mother Attributes page. This page records demographic information related to the newborn’s mother. The information is used in reporting at the State and Federal level and can be instrumental in obtaining funding for various programs.

Education: Make a selection from the drop-down list. This section did not change.



Education

Education Master's Degree

- 8th grade or less; none
- 9th-12th grade, no diploma
- High School graduate or GED completed
- Some college credit, but no degree
- Associate's degree
- Bachelor's degree
- Master's Degree
- Doctorate or Professional degree
- Unknown

Race and Ethnicity:

The answers to these questions are self-reported by the mother and are not assumptions made by the birth information specialist or other hospital staff.

The **How do you identify your race, ethnicity, tribal affiliation, country of origin, or ancestry?** field will have a textbox to enter the mother’s response. Check **Did not answer** if the mother left this field blank.

Mother Race and Ethnicity

How do you identify your race, ethnicity, tribal affiliation, country of origin or ancestry?

Did not answer

Which of the following describes your racial or ethnic identity? Please check ALL that apply. Each race or ethnic identity category will have multiple checkboxes that can be selected. Select all checkboxes that the mother checked on the parent worksheet. Scroll down the page in OVERS to show all categories.

The categories are:

- Hispanic and Latino/a/x
- Native Hawaiian and Pacific Islander
- White
- American Indian and Alaska Native
- Black and African American
- Middle Eastern/North African
- Asian

Which of the following describes your racial or ethnic identity? Please check ALL that apply:

<p><input type="checkbox"/> Central American</p> <p><input type="checkbox"/> Mexican</p> <p><input type="checkbox"/> South American</p> <p><input type="checkbox"/> Cuban</p> <p><input type="checkbox"/> Puerto Rican</p> <p><input type="checkbox"/> Other Hispanic or Latino/a/x (Specify)</p>	<p><input type="checkbox"/> Middle Eastern</p> <p><input type="checkbox"/> North African</p>
<p><input type="checkbox"/> CHamoru (Chamorro)</p> <p><input type="checkbox"/> Marshallese</p> <p><input type="checkbox"/> Communities of the Micronesian Region</p> <p><input type="checkbox"/> Native Hawaiian</p> <p><input type="checkbox"/> Samoan</p> <p><input type="checkbox"/> Other Pacific Islander (Specify)</p>	<p><input type="checkbox"/> Asian Indian</p> <p><input type="checkbox"/> Cambodian</p> <p><input type="checkbox"/> Chinese</p> <p><input type="checkbox"/> Communities of Myanmar</p> <p><input type="checkbox"/> Filipino/a</p> <p><input type="checkbox"/> Hmong</p> <p><input type="checkbox"/> Japanese</p> <p><input type="checkbox"/> Korean</p> <p><input type="checkbox"/> Laotian</p> <p><input type="checkbox"/> South Asian</p> <p><input type="checkbox"/> Vietnamese</p> <p><input type="checkbox"/> Other Asian (Specify)</p>
<p><input type="checkbox"/> Eastern European</p> <p><input type="checkbox"/> Slavic</p> <p><input type="checkbox"/> Western European</p> <p><input type="checkbox"/> Other White (Specify)</p>	
<p><input type="checkbox"/> American Indian</p> <p><input type="checkbox"/> Alaska Native</p> <p><input type="checkbox"/> Canadian – Inuit, Metis, or First Nation</p> <p><input type="checkbox"/> Indigenous Mexican, Central American or South American</p> <p><input type="checkbox"/> Specify Tribes:</p>	
<p><input type="checkbox"/> African American</p> <p><input type="checkbox"/> Afro-Caribbean</p> <p><input type="checkbox"/> Ethiopian</p> <p><input type="checkbox"/> Somali</p> <p><input type="checkbox"/> Other African (Black) (Specify)</p> <p><input type="checkbox"/> Other Black (Specify)</p>	

In each category there are racial and ethnic identities to select from. There is also an **Other (Specify)** option where the mother can write in an identity that is not listed for that specific racial or ethnic identity. When **Other (Specify)** is selected in OVERS, a text box will appear where the information provided on the Parent Worksheet can be entered.

Native Hawaiian and Pacific Islander

CHamoru (Chamorro)

Marshallese

Communities of the Micronesian Region

Native Hawaiian

Samoan

Other Pacific Islander (Specify)

Tongan

White

Eastern European

Slavic

Western European

Other White (Specify)

Not Specified

If the mother selected **Other (Specify)**, but didn't write anything on the Parent Worksheet in this field, then enter "Not Specified" in the text field.

In the American Indian or Alaska Native category there are four options: American Indian; Alaska Native; Canadian – Inuit, Metis, or First Nation; and Indigenous Mexican, Central American or South American.

If any of these options are selected, then you must also select **Specify Tribes**. When **Specify Tribes** is selected two drop-down boxes will appear that have a list of tribes to choose from. If the tribe(s) does not appear in the drop-down list, type in the tribe name that was written on the Parent Worksheet. This field is a combo box which means information can be typed in if the drop-down options don't have what was written on the Parent Worksheet.

American Indian or Alaska Native
 American Indian
 Alaska Native
 Canadian – Inuit, Metis, or First Nation
 Indigenous Mexican, Central American or South American
 Specify Tribes:

If American Indian; Alaska Native; Canadian – Inuit; Metis, or First Nation; and/or Indigenous Mexican, Central American or South American was selected, but no tribe was listed on the Parent Worksheet, enter “Not Specified” in the first Specify Tribes drop-down box.

Not listed, please specify – If none of the race or ethnic identities apply, then the mother can write in a racial or ethnic identity. Click in the check box and enter what was written on the Parent Worksheet for this field.

Not listed, please specify:

Opt Out Options – Select the option from the drop-down list. They are:

- Don't know
- Don't want to answer
- Did not answer

Opt Out Options

Don't know

Don't want to answer

Did not answer

Select **Did not answer** if the mother did not choose any racial or ethnic identity selections.

Leave a comment on the record if six or more racial or ethnic identity checkboxes are selected. The comment should state “Racial/Ethnic identities correct as shown”.

Primary Racial or Ethnic Identity

Some people have more than one racial or ethnic identity, but they consider themselves to have **one** primary racial or ethnic identity. The next question on this page in OVERS addresses that.

The question is “If you checked **more than one** category above, is there **one** you think of as your **primary** racial or ethnic identity?” The options available for this question are:

Yes

I do not have just one primary racial or ethnic identity.

No. I Identify as Biracial or Multiracial.

N/A. I only checked one category above.

Don't know

Don't want to answer

Did not answer

- Yes – The Parent Worksheet instructs the mother to circle her primary racial or ethnic identity from the options in the previous section.
- I do not have just one primary racial or ethnic identity.
- No. I Identify as Biracial or Multiracial.
- N/A. I only checked one category above.
- Don't know
- Don't want to answer
- Did not answer – use if the mother did not have a response to the primary racial or ethnic identity question.

If **Yes** is selected, then a drop-down will open with a list of racial or ethnic identities from the previous section. Select the one that was circled on the Parent Worksheet.

If you checked more than one category above, is there one you think as your primary racial or ethnic identity?

Yes

Please choose your primary racial or ethnic identity above from the following dropdown list

- Central American
- Asian Indian

If the drop-down list of racial or ethnic identities does not list all that were selected above, then you may have to refresh the drop-down list by clicking on the blank space at the top of the Primary Racial or Ethnic Identity drop-down box and then selecting **Yes** again.

Yes

I do not have just one primary racial or ethnic identity. No. I identify as Biracial or Multiracial.

Note: Do not assume racial and ethnic identity; preferred signed, written and spoken language; or functional limitations. These items are to be self-reported by the parent. If the answer was left blank, you must select "Did not answer."

Mother Language:

What language or languages do you use at home?

Make a selection from the drop-down lists or type in the language(s) if the language isn't listed. If the **only** answer is English, sign language, or American Sign Language, then the remaining language questions **do not** need to be answered and you can proceed to the **Mother Disability** page. If the parent answers English AND American Sign Language, or Sign Language the remaining three language questions do not need to be answered.

Mother Language

What language or languages do you use at home?

Did not answer

The selections for **Don't want to answer** or **Don't know** can be found at the bottom of the language drop-down list. Choose **Did not answer** if the mother did not provide an answer on the Parent Worksheet.

The language drop-down list has English listed first and then the top five languages in Oregon. The remaining languages are listed in alphabetical order.

If any language or languages other than or in addition to English, sign language or American sign language are spoken at home, then proceed to the next language questions. For example, if the parent spoke both English and Spanish at home then the remaining languages would need to be answered.

What language would you prefer to use when communicating (in person, phone, virtually) with someone outside the home about important matters such as medical, legal, or health information? – Make a selection from the drop-down list or type in the language if the language isn't listed. The selections for **Don't want to answer** or **Don't know** can be found at the bottom of the language drop-down list. Choose **Did not answer** if the mother did not make a selection.

What language would you prefer to use to read important written information such as medical, legal, or health information?

What language would you prefer to use when communicating (in person, phone, virtually) with someone outside the home about important matters such as medical, legal, or health information?

Did not answer

What language would you prefer to use to read important written information such as medical, legal, or health information?

Did not answer

– Make a selection from the drop-down list or type in the language if the language isn’t listed. The selections for **Don’t want to answer** or **Don’t know** can be found at the bottom of the language drop-down list.

Choose **Did not answer** if the mother did not make a selection.

How well do you speak English? The options for this question are:

- Very Well
- Well
- Not Well
- Not at all
- Don’t know
- Don’t want to answer

How well do you speak English?

Very Well
Well
Not Well
Not at all
Don’t know
Don’t want to answer
Did not answer

Choose **Did not answer** if the mother did not make a selection.

Mother Disability/Functional Limitations Page

The **Mother Disability** page is used to gather information about any functional limitations the mother may have. We ask these questions to help ensure access and equity in services, processes and outcomes. The information can improve client/patient services and reduce inequities.

In OVERS, the page will show as Disability, but on the Parent Worksheet it is listed as Functional Limitations. The **Mother Disability** page has a list of questions that cover functional limitations that the mother may have.

The answers to these questions are self-reported by the mother and are not assumptions made by the birth information specialist or other hospital staff.

The questions on this page are:

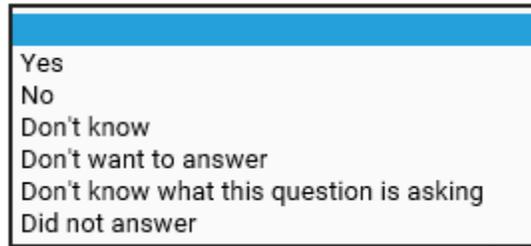
- Are you **deaf** or have **serious difficulty hearing**?
- Are you **blind** or have **serious difficulty seeing**, even when wearing glasses?
- Do you have **serious difficulty walking or climbing stairs**?
- Because of a physical, mental, or emotional condition, do you have **serious difficulty concentrating, remembering, or making decisions**?
- Do you have **difficulty dressing or bathing**?
- Do you have **serious difficulty learning how to do things most people your age can learn**?
- Using your **usual (customary) language**, do you have **serious difficulty communicating** (for example understanding or being understood by others)? – This question has the additional response option of **Don’t know what this question is asking**.

The following two questions are only answered if the mother is age 15 and older. They will be disabled/grayed out if the mother is under age 15.

- Because of a **physical, mental, or emotional condition**, do you have **difficulty doing errands alone** such as visiting a doctor’s office or shopping?
- Do you have **serious difficulty** with the following: **mood, intense feelings, controlling your behavior, or experiencing delusions or hallucinations?** This question has the additional response option of **Don’t know what this question is asking**.

The functional limitations questions will have the following options in a drop-down list:

- Yes
- No
- Don’t know
- Don’t want to answer
- Don’t know what this question is asking – only valid for 2 of the questions on this page.
- Did not answer



If **Yes** is selected, then the textbox **If yes, at what age did this condition begin?** will display. Enter the age at which the condition began. Enter “0” if the condition was present at birth or began from birth to age 1. Enter 999 for unknown or if the parent left this field blank.

Mother Disability

Are you deaf or have serious difficulty hearing? Yes

If yes, at what age did this condition begin?

Are you blind or have serious difficulty seeing, even when wearing glasses? No

Do you have serious difficulty walking or climbing stairs? No

Because of physical, mental or emotional condition, do you have serious difficulty concentrating, remembering or making decisions? Did not answer

Do you have difficulty dressing or bathing? Don't want to answer

Do you have serious difficulty learning how to do things most people your age can learn? No

Using your usual (customary) language, do you have serious difficulty communicating (for example understanding or being understood by others)? Don't know what this question is asking

Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? No

Do you have serious difficulty with the following: mood, intense feelings, controlling your behavior, or experiencing delusions or hallucinations? No

The **Father/2nd Parent Demographics** and the **Father/2nd Parent Disability** pages have the same fields and information required as the **Mother Demographics** and **Mother Disability** pages. The full OVERS guide for Birth Information Specialists can be found at:

https://www.oregon.gov/oha/PH/BIRTHDEATHCERTIFICATES/REGISTERVITALRECORDS/OVERS/Documents/Complete_BirthFacilityUserGuide.pdf