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# Preface

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## “What’s past is prologue ... ”

Sometimes the best way to determine what direction to take is to look at where we are and back at where we have been. This is as true in matters of public health as it is in navigation. Vital events — births, deaths, marriage, divorce — chart the course Oregonians take throughout their lives. In today’s complex society, using this information for careful policy and resource planning is more important than it has ever been.

Each year, the Oregon Health Authority’s Center for Health Statistics publishes the Oregon Vital Statistics Annual Report, an analytical look at the health of Oregon as measured by the health of its citizens. By this means, policy makers and health professionals have a source of important knowledge that can be used to form the basis for action and benchmarks for assessing progress.

## Structure of the report

To improve ease of use and timeliness, the Vital Statistics Annual Report is issued in two volumes.

- **Volume 1** presents data on births, abortions and teen pregnancy.
- **Volume 2** presents data on deaths (all ages) and perinatal deaths.

The only marriage, divorce, domestic partnership and dissolution of domestic partnership data in the report are statewide occurrences and rates. Information by county and by month of occurrence — as well as a variety of year-to-date preliminary data on deaths, births, abortions and teen pregnancy — is available at the Center for Health Statistics (CHS) website:

*<http://public.health.oregon.gov/BirthDeathCertificates/VitalStatistics>*.

Additional data are available in the form of simple cross-tabulations. For information on availability or to request the data, call the Center for Health Statistics as listed on the previous credits page.

The more significant demographic and public health issues are discussed in the narrative sections that open each chapter. These narratives are accompanied by charts, graphs and sidebar tables. Readers can research their own areas of interest by using the tables following the chapter narratives.

### **A cooperative effort**

The presentation of data in this report is the final stage of a long, ongoing process that begins with the prompt, accurate recording of vital events. This registration system ensures that the information is collected, kept secure and made available to individuals and their families when needed for documentation. Tabulations and analyses of the data by the Oregon Center for Health Statistics provide useful information about the health and social changes occurring in Oregon.

Vital statistics has been called “the eyes and ears of public health,” and is, in fact, the only organized system of health records covering the entire population. The collection of data is a highly cooperative effort that depends on the participation of a great many people throughout the state.

### **The providers of services**

Those who provide the services associated with vital events are the first participants in the collection system.

The birth attendant completes both the legal document and the confidential statistical section of the birth certificate. For deaths, the funeral director or person who first assumes responsibility for the body files the death or fetal death certificate. A physician completes the medical portion of these death certificates, except in cases of found bodies and those deaths due to external or “non-natural” causes, which are certified by medical examiners. Hospital medical records personnel help to ensure that all certificates are complete and accurate.

These service providers then file the completed certificates using a Web-based system that simultaneously transmits the records to the county and state registrar.

Abortions are treated differently. The providers of induced abortions file the completed statistical data (which contain no identifying information) directly with the state registrar.

**County officials**

County registrars play an important role by further assuring the completeness and accuracy of death registrations. They check the certificates against other sources of information to make certain no events are missed. County registrars also follow up on any incomplete items before sending the certificates to the state registrar at the Center for Health Statistics.

**Center for Health Statistics**

At the state level, the staff of the center perform additional checks for completeness and accuracy. A field representative makes contact with providers and county registrars. Clerical staff send correspondence seeking additional information on such matters as causes of death, birthweight and tobacco use. Microfilmmers store certificates so that certified copies can be made. Coders and data entry personnel turn the collected information into computerized data, which are then retrieved by programmers, analyzed by researchers, and made available for demographic and public health needs.

**Other states**

This report does not overlook events relating to Oregon residents that occurred in another state. The Centers for Health Statistics in each U.S. state and Canadian province have agreed to forward copies of birth, death and fetal death records to the state where the person usually resided. A cooperative agreement also exists for reports on induced termination of pregnancy; however, some states collect no resident information on these reports and, therefore, cannot participate in the exchange.

Among all these participants, it is clear there is no single recorder. The many hundreds of people throughout Oregon who record the major life events of our citizens have all played important roles in preparing this report. It could not have been achieved without them.