



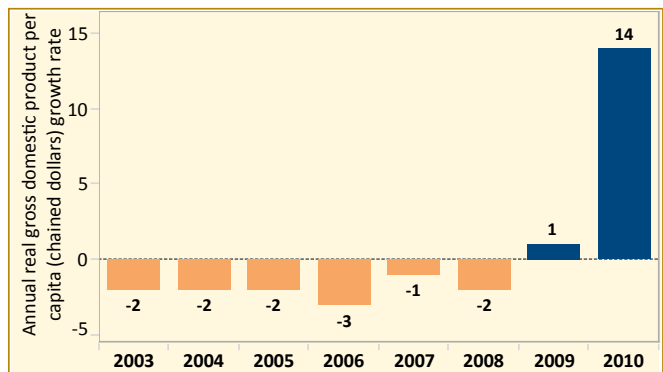
# American Samoa



## Demographic trends

	Earliest		Latest	
Population <sup>1 2</sup>	52 874	57 291	55 519	56 500
	1995	2000	2010	2013
Population growth rate (%) <sup>1 2</sup>	2	2	0	1
	1990–2000	1995	2000–2010	2013
Total fertility rate <sup>1 2</sup>	4		3	
	1995–1999		2010	
% of population aged 65+ <sup>1</sup>	4	4	3	4
	1990	1995	2000	2010
Crude net migration rate <sup>1</sup>	-11		-16	
	1990–2000		2013	

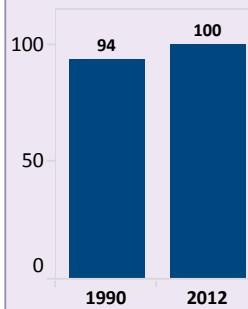
## Economic growth<sup>1</sup>



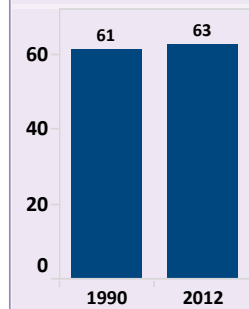
Life expectancy at birth <sup>5</sup>	72	76	Under-5 mortality rate <sup>1 5</sup>	20	10	16	15	10
	1995	2005		1998	2005	2006	2009	2011

## Environment

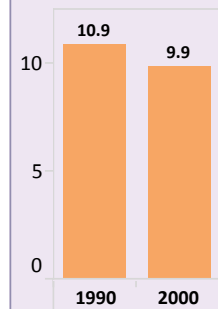
### Access to improved water source (% of total population)<sup>6</sup>



### Access to improved sanitation source (% of total population)<sup>6</sup>



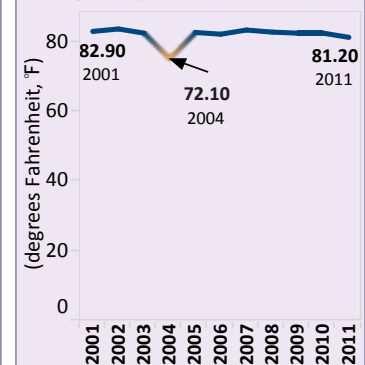
### Population living where elevation is below 5 metres (%)<sup>3</sup>



### Renewable internal freshwater resources per capita (cubic metres)

No data available

### Average temperature<sup>1</sup>

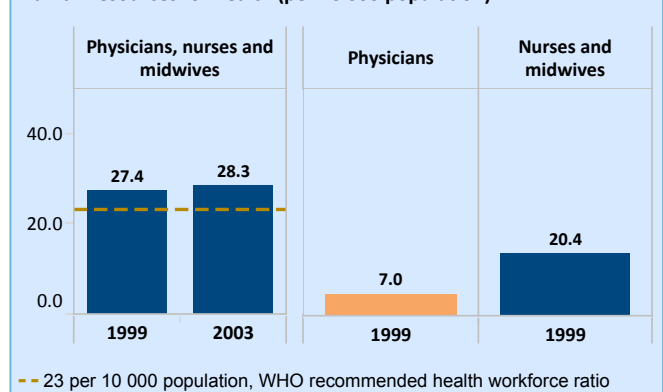


## Health system inputs

### Health-care financing<sup>1 5</sup>

	1995	1996	2003
Total health expenditure (THE): amount (in millions US\$)		25.0	32.3
THE per capita at exchange rate (US\$)		463.6	546.4
External resources on health as % of general government health expenditure (GGHE)			70.0
External resources on health as % of THE	No data	No data	No data
GGHE as % of THE	65.8	No data	No data
Out-of-pocket expenditure as % of THE	No data	No data	No data

### Human resources for health (per 10 000 population)<sup>5</sup>



## Public health laws and regulations

No data available

## Communication<sup>1</sup>

Mobile cellular subscriptions (per 100 people)	0.0	52.4	Internet users (per 100 people)	0.0
	1990	2011		1990

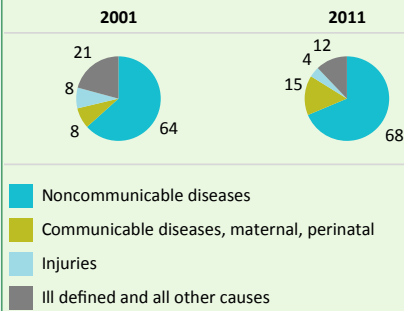


# American Samoa



## Trends in noncommunicable diseases and risk factors

### Trends in cause of deaths, 2001–2011<sup>1</sup>



### Prevalence (%) of risk factors (25–64 years): 2004<sup>7</sup>

Low physical activity (<600 metabolic equivalent minutes per week)	62.2
Current smokers (daily smokers)	29.9
High blood cholesterol ( $\geq 200$ mg/dl or $\geq 5.2$ mmol/L)	23.4
Raised fasting blood glucose ( $\geq 6.1$ mmol/l or $\geq 110$ mg/dl)	47.3
Raised blood pressure (SBP $\geq 140$ mmHg and/or DBP $\geq 90$ mmHg)	34.2

## Nutrition

Low birth weight among newborns (%) (<2500 gm) <sup>2</sup>	3 1998	3.1 2013
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Malnutrition prevalence, weight-for-age (% of children under 5 years, $\leq 2SD$ ) <sup>2</sup>	3 2014
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Obesity (BMI $\geq 30$ kg/m <sup>2</sup> ) (% , 15–64 years) <sup>10</sup>	74.6 2004
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## Trends in control of communicable diseases

### Endemic

Sexually transmitted infections (STIs), scabies, tuberculosis, hepatitis B

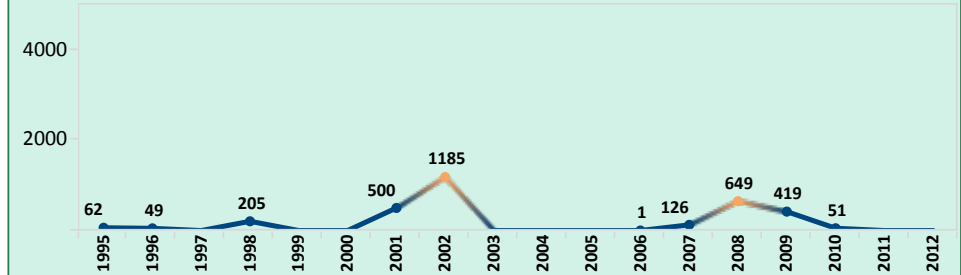
### Emerging

Dengue

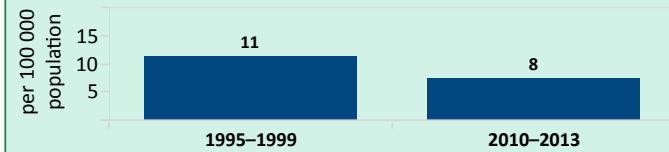
### Under elimination

Lymphatic filariasis, measles, leprosy, malaria

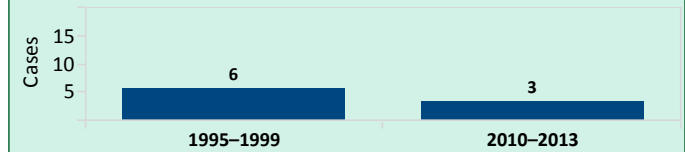
### Dengue cases (total)<sup>1</sup>



### Estimated tuberculosis incidence (all forms) (average annual)<sup>4</sup>

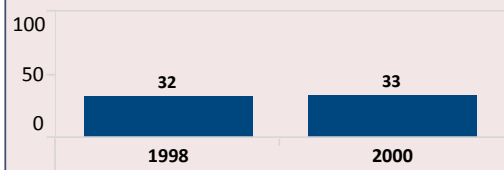


### Reported leprosy cases (average annual)<sup>4</sup>

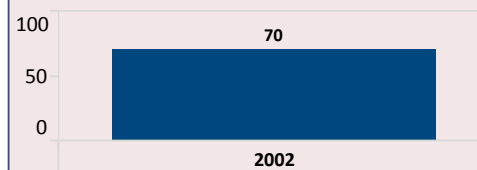


## Health services coverage

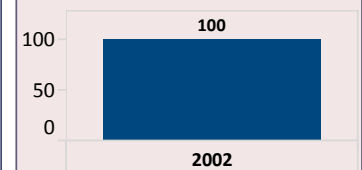
### Contraceptive prevalence rate (% , 15–49 years)<sup>5</sup>



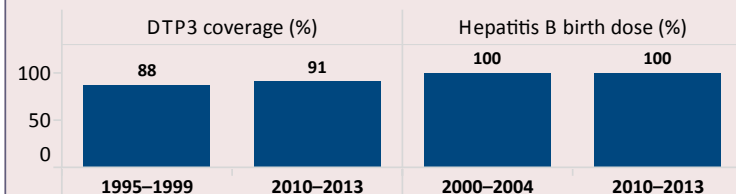
### Antenatal care coverage – at least one visit (%)<sup>2</sup>



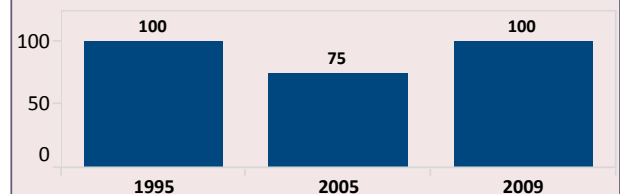
### Skilled birth attendance (%)<sup>5</sup>



### Immunization coverage (%) (average annual)<sup>5</sup>



### Tuberculosis treatment success rate (%)<sup>4</sup>



Sources: National population and household censuses, vital statistics reports, statistical year books, annual health reports and reports of national health surveys. Data are also used from regional and global databases of international agencies, which in turn compile these data from country reports based on country health facility information systems (e.g. immunization coverage), disease surveillance systems (e.g. leprosy, malaria or yaws) and/or periodic population-based surveys (e.g. Demographic and Health Survey (DHS), Multiple Indicator Cluster Survey (MICS), STEPwise approach to noncommunicable disease risk factor surveillance (STEPS)). Some data, especially from international agencies, may also be based on modelling exercise estimates using country data as inputs to assess trends by smoothing any implausible or inconsistent data.

<sup>1</sup> Population Census 1990, 2000, 2010; 1995 American Samoa Household Survey and Statistical Yearbook 2011. (<http://www.spc.int/prism/americansamoa/>, accessed on 12 February 2015).

<sup>2</sup> The Pacific Community (SPC). 2013 Population and Demographic Indicators. (<http://www.spc.int/sdd/>, accessed on 16 January 2015) and National Minimum Development Indicator Database (NMDI).

(<http://www.spc.int/nmdi/>, accessed on 16 January 2015).

<sup>3</sup> World Bank, World Development Indicators (2014). (<http://data.worldbank.org/products/wdi>, accessed on 14 January 2015).

<sup>4</sup> WHO Global Tuberculosis Programme. (<http://www.who.int/tb/data>, accessed on 6 January 2015). WHO Global Leprosy Database. ([http://www.who.int/gho/neglected\\_diseases/leprosy/en/](http://www.who.int/gho/neglected_diseases/leprosy/en/), accessed on 6 January 2016).

<sup>5</sup> WHO Country Health Information Profiles (CHIPS). (<http://hiip.wpro.who.int>, accessed on 9 January 2015).

<sup>6</sup> WHO and UNICEF Joint Monitoring Programme (JMP) for Water Supply and Sanitation. Progress on Drinking Water and Sanitation Report (2014 Update). (<http://wssinfo.org>, accessed on 11 February 2015).

<sup>7</sup> WHO STEPS country reports. (<http://www.who.int/chp/steps/reports/en/>, accessed on 7 January 2015).