

# AMERICAN SAMOA STATISTICS NEWS



## **BREAKING NEWS: A New Mid-Year Population Estimate for American Samoa in 2022, Released by the Department of Commerce Statistics & Analysis Division.**

**The 2022 local population as of July 1, 2022, is estimated at 51,269. The estimate is slightly lower by 292 persons than the 2021 estimate, mainly because of the continued net outmigration and much lower fertility. The single most fundamental population count of people by single age and sex from the 2020 census is still not available. Therefore, the estimate is again based on the 2020 total count with the 2010 census age/sex single age proportionate distributions.**

**Two years after the 2020 enumeration, the US Bureau of the Census has not released the local population's demographic, social, and economic characteristics and details. The latest release date announcement by the federal agency for the 2020 data is October 2022.**

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Despite the shortcomings with the federal release of census data products, local and federal programs that are population-based and dependent on current people counts continued to rely on estimates for grant applications and fulfillment of funding requirements. The 2020 updates of age and sex distributions were critically needed for the COVID-19 pandemic monitoring and mass vaccination distribution efforts to assess the infected population and recovery efforts.

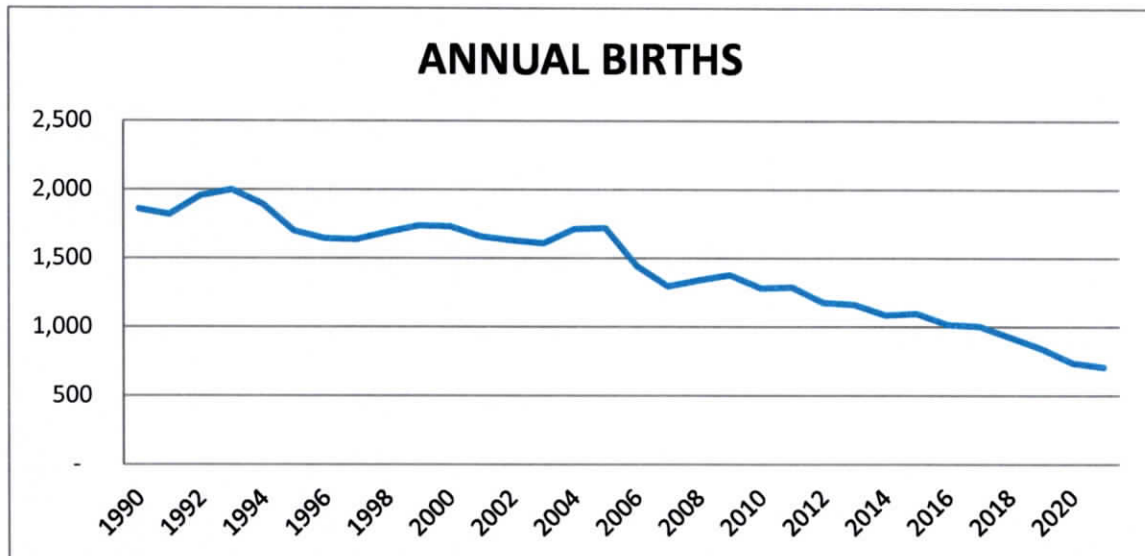
### **IMPACT OF LOW FERTILITY**

There were only 713 mid-year births and 360 deaths resulting in the natural growth of only 353 persons. American Samoa is showing very low fertility that warrants immediate attention to policy assessment and population impact implications. Population control efforts aim to reduce the birth rate and bring it down to the replacement level of two births per woman: a Total Fertility Rate (TFR) of 2.1 per woman of childbearing age. At this rate, a population would continually renew itself without growing. However, when the birth rate continued to fall and eventually below the 2.1 TFR, it triggered an immediate concern about whether we had reached or bypassed our fertility replacement level. A continued fertility decline will significantly impact all levels of community living: health, education, economic, social, and environment. Sometimes the impacts will be positive, but most likely, the long-term will be negative. In 2010, the TFR was recorded at 3.2 children per woman of childbearing age 15 – 44; by 2020, the TFR went down to 2.0 children. The TFR remained at 2.0 in 2021.

The problem with low fertility is that it reduces population size not at all ages but only among the young. Low fertility produces an age structure that creates momentum for future population decline, a situation that must be stopped at some point if the population is to be demographically sustainable. Also, populations with low fertility can fall in size at an extremely rapid rate. The more prolonged low fertility is maintained, the harder it becomes to reverse population decline. This is the current trend and a grave concern with the population momentum.



To assess population policy and recommendations for improving birth rates, we need to respond to the immediate impacts of low fertility, namely our shrinking labor forces. It is happening already as demands for foreign workers are high. More guest workers are needed to meet cannery labor shortages as well as the construction industry, retail and wholesale, service industry, and increased demands for skilled and technical occupations. Can low fertility be reversed? We need to know why fertility has fallen to such low levels to answer this. There could be many reasons, but some general statements can be made that warrant further studies. The change in economic systems – from a subsistence economy to a cash economy- but recent trends, significant improvements in women's economic participation, and higher academic achievements are the most relevant reasons.



### **MORE PEOPLE ARE MOVING OUT OF AMERICAN SAMOA**

There were 7,804 mid-year arrivals and 8,449 departures resulting in a net travel of -645. To understand the concept of international migration and the rules of permanent residency regarding American Samoans, one must be aware of the unique relationships between the territory and the United States regarding travel entry. American Samoans travel freely and could live anywhere in the United States. Most of them have been away from land and families for many years, but they still hold and claim rights here as their place of birth or parental/ancestral place of birth. For this reason, tracking long-term movements of residents and the international classification of long-term migration is difficult to apply to American Samoans. No matter how long they live outside the territory, they are always counted as permanent residents when they arrive in American Samoa.

In 2018, the new Arrival/Departure card was implemented to capture travel statistics, including citizenship, reasons for travel, residency, tourism, and basic demographic characteristics. The project was never fully realized due to administrative challenges and program prioritizations. Data quality from the card system is inferior. There are a lot of missing and incomplete forms. Many are still not compliant with this travel requirement, and at the same time, frontline government agencies are not checking and verifying the documents before acceptance. The Department of Commerce (DOC) Statistics and Analysis Division has not received any more Arrival/Departure cards from the appropriate frontline government agencies. The DOC Statistics and Analysis Division is now relying on the Immigration Office and the Talofa Pass extractions to obtain travel data for population updates.

The 2022 mid-year population estimate by five-year age groups and sex are provided below.

<b>2022 POPULATION 5-YEAR AGE GROUPS</b>			
<b>Age Groups</b>	<b>Total</b>	<b>Male</b>	<b>Female</b>
0 - 4	4,950	2,673	2,277
5 - 9	5,638	2,814	2,825
10 - 14	5,856	3,142	2,714
15 - 19	5,347	2,671	2,676
20 - 24	3,656	1,761	1,895
25 - 29	3,168	1,466	1,702
30 - 34	2,697	1,274	1,423
35 - 39	3,242	1,554	1,688
40 - 44	3,035	1,386	1,649
45 - 49	3,276	1,568	1,708
50 - 54	2,923	1,322	1,600
55 - 59	2,527	1,236	1,290
60 - 64	1,895	980	915
65 - 69	1,290	621	669
70 - 74	808	375	434
75 - 79	471	187	284
80 - 84	262	91	171
85+	227	87	140
<b>Total</b>	<b>51,269</b>	<b>25,209</b>	<b>26,060</b>

Cohort components of the estimate are provided here for various government programs seeking baseline data for funding and program evaluations, including health, education, labor markets, and old age programs. Single age by sex is available upon request to the DOC Statistics Division.

<b>Age Component</b>	<b>Total</b>	<b>Male</b>	<b>Female</b>
0 year old	791	398	393
1 and 2 years	2,088	1,162	926
3 to 5 years	3,169	1,643	1,526
6 to 13 years	9,177	4,709	4,468
14 to 18 years	5,727	2,949	2,778
19 to 24 years	4,496	2,200	2,296
25 to 64 years	22,763	10,787	11,975
65 and over	3,059	1,361	1,698
<b>Total</b>	<b>51,269</b>	<b>25,209</b>	<b>26,060</b>
15 to 19 years	5,347	2,671	2,676
16 to 65 years	30,894	14,700	16,193
15 to 44 years	21,146	10,113	11,033
16 years and over	33,620	15,938	17,682

For more information, contact the DOC Statistics and Analysis Division at 684-633-0120 or email at [americansamoastatistics@doc.as.gov](mailto:americansamoastatistics@doc.as.gov).

Director's Approval: 

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