**Household & Family Unit**

Algorithm:

1. calculate total smoothed population by age (population by age group);

2. male/female population by age group in each mesh block available?

YES: assign gender according to male/female by age group;

NO: estimate male/female by age group according to mesh block population and sex

ratio by age group;

3. matching couples by minimizing age difference to build family units according to marital status by age;

4. allocate children into family units according to number of children ever born by age of mother & live birth by age of mother and live-birth order;

5. allocate family units into household according to zero-truncated Poisson distribution;

**Labor Force Participation**

Based on urban labor force participation rate of Samoa 2012.

using (W) Samoa seems to make sense. There would be some differences in American Samoa because of the military influence and the reliance on US welfare and social security (retirement) system. American Samoa has strong policy on ancestral land rights and not much on agriculture, whereas I imagine more people in Samoa are subsistence farmers/fishers? In Samoa there seems to be more availability of private land purchase or lease, support for business development, and the tourist industry is huge. But in general, there are still probably more similarities than differences.

On the question of gender difference in infection, workforce participation may be contributing, but you see higher prevalence in males in many countries where most people of both genders are subsistence farmers without formal jobs (e.g. PNG) . Apart from exposure, some people think there is a hormonal component or other reason for difference in gender susceptibility.

In 2010, 411 of 807 respondents reported a job, of which 289 respondents reported a job village different from residential village. The overall commuting ratio is 289/411 = 70.3%.