

HISTORY

Chamorros are the original inhabitants of the Marianas Islands. Today, the islands are politically separated into two U.S.-associated territories: Guam and the Commonwealth of the Northern Mariana Islands (CNMI). Both territories are populated by various ethnic groups, with no one ethnicity having a majority. This ethnic diversity came about through centuries of migration that continues today. In addition, the history of Spanish colonization in Guam has led to much ethnic and cultural mixing. Residents born in Guam or CNMI are U.S. citizens.

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DEMOGRAPHICS

Census 2000 counted 58,240 "Guamanians or Chamorros" in the entire United States.¹ The category may include individuals who identify as being from Guam but who are not Chamorro.

Guamanian or Chamorro

Guam and CNMI have experienced explosive population growth in the past several decades. In 1990, Guam's population was 133,152 of whom 43% were estimated to be Chamorro.² The Census 2000 population count was 154,304, a 16% increase from 1990. Chamorros are 42% of the population.³ CNMI had 43,345 inhabitants in 1990. The Census 2000 population count was 69,221, a 60% increase from 1990. Chamorros account for 28% of the population.⁴ The total U.S. population grew by 13% from 1990 to 2000.¹

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There is also a sizable "Guamanian or Chamorro" population in California (20,918) and Washington (5823) according to Census 2000.

HEALTH STATUS

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It is difficult to characterize the health status of Chamorros. As noted above, the use of "Chamorro or Guamanian" as the official U.S. category means that rates will be calculated using an inaccurate denominator. Chamorros are also aggregated with other ethnic groups. For example, studies of Guam and CNMI sometimes do not differentiate between the various ethnicities that are being studied. Similarly, Chamorros in the U.S. mainland are often lumped in with other Pacific Islanders, Native Hawaiians and/or Asian Americans. Small sample sizes make it difficult to generalize research findings. Finally, in some cases, data are just not available. For these reasons, the data contained in the brief provide only a rough estimate of Chamorro health status.

Like most of the Pacific Islands, the population of Guam and CNMI is concentrated in increasingly crowded urban areas. This trend toward urbanization has strained an already vulnerable health care infrastructure.⁵

The latest vital statistics available for Guam show the birth rate at 26.4 births per 1000 population.⁶ This birth rate is significantly higher than the U.S. rate of 14.5 births per 1000 population.⁷ The age-adjusted death rate for Guam is 480.1 per 100,000, slightly higher than the overall U.S. rate of 471.7 deaths per 100,000.⁸ The median age of Chamorros on Guam is 22.5 years.⁵ This is much younger than the U.S. median of 35.3 years.¹ Life expectancy for the Chamorros on Guam is 69.1 years.² This is lower than the U.S. life expectancy for 76.7 years.⁸

CHRONIC DISEASES

Cardiovascular disease

Cardiovascular disease is the leading cause of morbidity and mortality in the Chamorro population in California and Guam. Data from the California Department of Health Services showed 243.8 deaths per 100,000 due to coronary heart disease in 1990.⁹ In Guam the rate was 119.5 deaths per 100,000 in 1998.⁸

In Guam, Chamorros have a higher prevalence of hypertension than Filipinos. Hypertensive Chamorro men and women are from lower socioeconomic status levels than their Filipino counterparts. Hypertensive men and women of both ethnic groups appear equally likely to be overweight and to suffer diabetes.¹⁰

Cancer

Cancer is the second leading cause of death on Guam. Incidence on Guam is high and increasing. Chamorros appear to have significantly higher rates of cancer than other ethnic groups on Guam. From 1989-1991, 61% of cancer deaths occurred in the Chamorro and Pacific Islander populations of Guam. Among Chamorros, the leading site was lung cancer (37%) followed by oral cavity, breast, cervix, and colorectal cancers.¹¹ Chamorro men on Guam appear to have high rates of cancer of the buccal cavity, nasopharyngeal cancer and liver cancer.¹²

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In CNMI, a review of data revealed that the incidence of cervical cancer was nine times higher for Chamorro females (69.1 per 100,000) than for U.S. Whites (7.5 per 100,000).¹³

Breast cancer is the most common cancer in Pacific Islander women. Data from the California Cancer Registry from 1988-96 show that 24% of new cancer cases for Guamanian women were breast cancer. Regular breast cancer screenings need to be promoted among this population.¹⁴

Diabetes

Diabetes prevalence for Chamorros is increasing. Diabetes is the third leading cause of death for Chamorros in Guam.⁵ The death rate in 1998 was 29.1 deaths per 100,000 population, more than twice the U.S. rate of 13.6.⁸

Diseases of the Central Nervous System

Since the 1950s, a remarkable concentration of cases of neurodegenerative diseases has been recognized among Chamorro natives of Guam. The diseases are called amyotrophic lateral sclerosis and Parkinson-dementia complex (ALS/PDC); however, they are locally known as bodig or lytigo. Despite intense investigations over the last four decades, the cause of these invariably fatal diseases is still unknown. Over the same time period, the incidence of ALS has decreased dramatically, the incidence of PDC has decreased, but to a lesser degree, and age at onset has shifted to a later age by about ten years.¹⁵

INFECTIOUS DISEASES

Tuberculosis

In Guam, the tuberculosis incidence rate is seven times higher than the U.S. rate.⁵ Chamorros make up 28% of Guam's TB patients.²

HIV/AIDS

Guam's annual AIDS case rate for July 1999 to June 2000 was 11.8 per 100,000 population. As of March 2000, there were 42 residents living with HIV and 25 residents living with AIDS.¹⁶ It is not known what percentage of these is Chamorro. While these numbers may seem small, even small numbers of HIV infections are likely to result in significant demand for treatment and supportive health services.¹⁷

MATERNAL AND CHILD HEALTH

The percentage of mothers in Guam receiving prenatal care in the first trimester of pregnancy was 62% in 1998, much lower than the U.S. average of 83%.¹⁸

Infant mortality for Chamorros on Guam is 15.2 per 1000 live births, compared to the U.S. national average of 7.9 per 1000 live births. In 1994, 57% of the infant deaths in Guam were those born to Chamorro teen mothers.⁵

In California, infant mortality for Chamorros is 18.1 per 1000; however, this figure is not considered reliable due to the small population size. Also in California, the percent of low birth weight Chamorro infants was 8% compared to 5% for Samoans.⁹ The national rate for Native Hawaiians and other Pacific Islanders is 6.5%, approximately the same as Whites and Latinos, and lower than Asians (7%).¹⁹

HEALTH BEHAVIORS

In a study of junior and senior high school students in CNMI (aged 10-24), Chamorros had the highest proportions of several risk behaviors. Half were sexually active, of which 86% had never or seldom used contraception. In the same study, Chamorro students reported use of hard drugs and Chamorros had the highest rates of smoking.²⁰

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Methamphetamine, called meth, crystal, or speed, is reportedly a popular substance. However, there are no studies documenting the prevalence of methamphetamine users.

Unintentional injuries are the fifth leading cause of death among Chamorros in Guam.⁵

RESOURCES

The following agencies are able to provide additional information regarding the Chamorro community:

Guam Communications Network
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Tel: (562) 989-5690
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¹⁸ National Center for Health Statistics. Births: Preliminary data for 1999. *National Vital Statistics Reports*; 2001; 49(13).

¹⁹ Healthy People 2010. 2nd ed. Washington, DC: U.S. Department of Health and Human Services; 2000.

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