

Marshall Islands Rapid Youth Survey 2022





**REPUBLIC OF THE MARSHALL ISLANDS
OFFICE OF THE MINISTER
MINISTRY OF HEALTH & HUMAN SERVICES**

P.O. Box 16 ~ Majuro ~ Marshall Islands ~ 96960
Telephone No. (692) 625-5327 Ext: 2392/2388 Email: okisino@rmihealth.org



Iakwe!

The Ministry of Health & Human Services (MoHHS) and the Government of the Republic of the Marshall Islands (RMI), we would like to express gratitude and thanks to Pacific Island Health Officers Association (PIHOA) for their continued financial support and technical assistance. We would also like to thank RMI Public School System and all private high schools on Majuro and Ebeye for their cooperation and support for the completion of the 2022 Rapid Youth Survey. Special recognition is extended to the Marshall Islands Epidemiology and Prevention Initiatives, Inc. (MIEPI) for spearheading the Rapid Youth Survey.

The Rapid Youth Survey is a component of the RMI Non-Communicable Disease surveillance plan to monitor trends of non-communicable disease risk factors as well as to gauge sexual health behaviors of RMI youth. Data on mental health and distance learning support for students during a pandemic were included in the 2022 survey instrument to capture additional needs of RMI high school students. This report should be reviewed and used to guide and strengthen public health program and policy-making in the RMI as an avenue to protect our young population.

Ilo kautiej,

Francyne Wase-Jacklick
Secretary
Ministry of Health & Human Services

Hon. Ota Kisino
Minister
Ministry of Health & Human Services

Table of Contents

Summary	4
Background	5
Methodology	7
Sample Characteristics (N=2621)	8
Smoking.....	9
Tobacco Chewing	10
Betel Nut Chewing	11
E-Cigarettes (Vaping)	12
Marijuana (Cannabis)	13
Alcohol Use	14
Overweight/Obesity	15
Reproductive Health	16
Distance Learning.....	17
Sleep.....	18
Mental Health.....	19
Discussion.....	21
Recommenation.....	23
Acknowledgement.....	24
Annex.....	25

Summary

The aim of this report is to present current prevalence of certain risk factors for developing non-communicable disease (NCD), sexually transmitted infections, and teenage pregnancy among high school youth in the Republic of the Marshall Islands (RMI). These data can be used to better understand the burden of these risk factors, monitor trends, and determine who is at greatest risk for poor health in order to improve health among RMI youth through the development of targeted evidence-based interventions. The table below compares selected comparable indicators in the RMI to Federated States of Micronesia (FSM), Guam, Commonwealth of the Northern Mariana Islands (CNMI), and the United States (US). Green shading represents the location with the “best” prevalence, followed by orange shading, and red shading.

	RMI	FSM ²	Guam ¹	CNMI ¹	US ¹
Substance Use	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)	% (95% CI)
Smoking (within past 30 days)	19.8 (18.2 -21.2)	28.9 (27.5-30.3)	13.2 (10.5-16.6)	6.9 (6.0-8.0)	3.8 (3.3-4.4)
Tobacco chewing (within past 30 days)	19.5 (18.00 -20.93)	31.7 (30.3-33.1)	13.5 (10.6-16.9)	9.0 (7.9-10.1)	2.5 (2.0-3.0)
Alcohol use (within past 30 days)	22.4 (20.7-23.8)	30.7 (29.3-32.1)	18.2 (15.1-21.8)	26.0 (24.3-27.8)	22.7 (21.1-24.4)
E-cigarette use (within past 30 days)	25.5 (23.8-27.0)	--	35.2 (30.0-40.8)	26.4 (24.7-28.2)	18.0 (16.3-19.8)
Marijuana (within past 30 days)	13.8 (12.5-15.0)	--	25.9 (22.2-30.0)	22.9 (21.3-24.5)	15.8 (14.1-17.6)
Sexual Health					
Ever had sexual intercourse	52.1 (47.1-57.5)	42.8 (40.6-45.0)	33.6 (29.4-38.1)	28.5 (26.7-30.3)	30.0 (27.9-32.1)
Did not use condom at last intercourse (among sexually active youth)	76.8 (74.5-78.9)	78.0 (75.2-80.8)	64.9 (56.6-72.4)	61.9 (57.1-66.6)	48.2 (45.7-50.6)
Did not use any method to prevent pregnancy at last intercourse (among sexually active youth)	45.6 (43.7-48.5)	47.7 (44.3-51.1)	33.0 (25.3-41.7)	25.0 (20.7-29.8)	13.7 (12.1-15.5)
Overweight/obesity					
Had obesity (>=95 th percentile)	8.2 (7.2-9.3)	14.9 (13.8-16.0)	23.0 (19.8-26.5)	23.4 (21.7-25.1)	16.3 (15.1-17.7)
Were overweight (>=85 th and <95 th percentile)	16.0 (14.7-17.4)	20.5 (19.2-21.8)	19.3 (16.8-22.1)	19.2 (17.7-20.8)	16.0 (15.2-16.8)

¹Guam (2019), CNMI (2021), and US (2021) data from the CDC Youth Risk Behavior Surveillance System YRBSS; overweight/obesity in Guam, CNMI and US are based on self-report of height and weight.²FSM data is from the 2017 Rapid HS Surveys conducted on Pohnpei, Chuuk, Kosrae and Yap.

Background

Geography

The Republic of the Marshall Islands (RMI) is located in the central northern Pacific, approximately 2,000 miles southwest of Hawaii and 1,300 miles southeast of Guam. Geographically, it is part of the larger group of island countries in Micronesia in the Northern Pacific region. The RMI is made up of a vast archipelago of 29 coral atolls and 5 single coral islands.



The two main urban centers (Majuro and Ebeye-Kwajalein atoll) have paved roads and with piped water and a sewer system. While the majority of the RMI population is concentrated on the two main urban centers, it is important to note that a great portion is dispersed around the many islands/atolls. This makes the provision of comprehensive health services to the entire population a challenge.

Population Demographics

The population of the RMI is 42,418 persons (2021 Census), which has considerably decreased by 10,740 people since the last census in 2011. Majuro and Kwajalein (largely Ebeye) currently accounting for more than three-quarters of the country's population (Table 1). The significant decrease of the population in the country is primarily caused by the out migration of the Marshallese to the United States and elsewhere. Furthermore, the average annual growth rate in the outer atolls and islands was -3.7%, depicting a high rural to urban migration, with overseas destinations assuming greater importance as well.

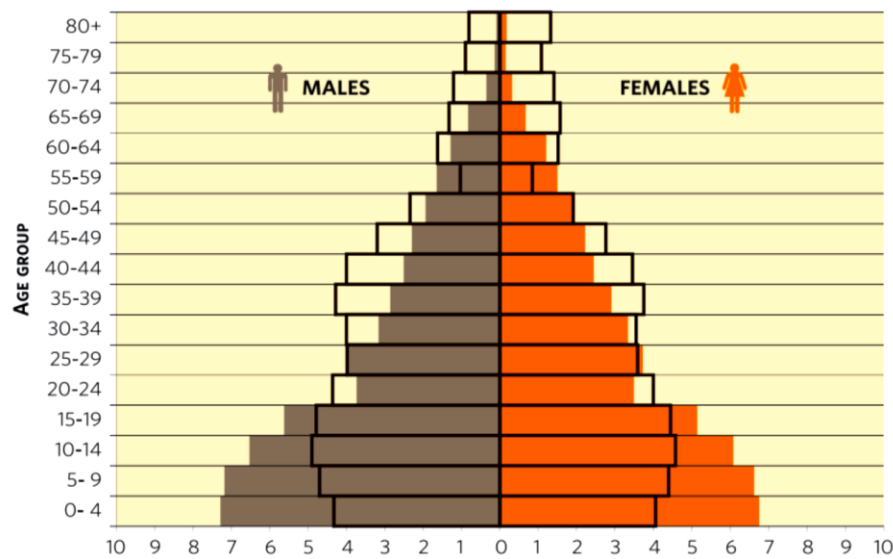
Table 1. RMI Population Size, Growth Rate and Density for Majuro, Kwajalein and Outer islands

Atoll /Island	Population					Average Annual Growth Rate 1980- 1988- 1999-				Land area sq./ miles	Population Density			
	1980	1989	1999	2011	2021	1988	1999	2011	2021		1988	1999	2011	2021
TOTAL (RMI)	30,873	43,380	50,840	53,158	42,418	4.2	1.5	0.4	-2.2	70.1	619	726	759	605
Majuro	11,791	19,664	23,676	27,797	23,156	6.3	1.8	1.4	-1.8	3.8	5,244	6,314	7,413	6,094
Kwajalein	6,624	9,311	10,902	11,408	9,789	4.2	1.5	0.4	-1.5	6.3	1,471	1,722	1,802	1,554
Other outer atolls & islands*	12,458	14,405	16,262	13,953	9,473	2	1	-1	-3.7	55.3	395	419	337	171

*the remaining 32 outer atolls and islands and EPPSO-classified as 'Rural RMI' Source: RMI Census on Population and Housing 2021, EPPSO

RMI has one of the youngest population in the Pacific, evidenced here in Figure 1. Social problems such substance abuse, teen pregnancies, sexually transmitted infections remain a problem.

Figure 1. Population in RMI by age and sex: 2015 (shaded area) and 2050 (outlined)



Source: United Nations Fund for Population Activities, 2014

Methodology

The RMI Rapid Youth Survey is an adaptation of the Rapid Survey used in the Federated States of Micronesia (FSM), an instrument developed by the Pacific Island Health Officers Association (see Annex for copy of the survey). This instrument contains core youth NCD indicators (30-day use of tobacco smoking, betel nut [with and without tobacco], cannabis, e-cigarettes, alcohol, and illicit drugs, overweight/obesity calculated from measured height and weight, and reproductive health indicators. This 2022 report also includes additional data on sleep, mental health, and access to distance learning during the COVID-19 pandemic.

The RMI Rapid High School Youth Survey was conducted in all high schools (both public and private) in the Marshall Islands. All students in grades 9-12 present on the survey day were eligible to participate in the survey. Marshall Islands Epidemiology and Prevention Initiatives (MIEPI) conducted this survey at each school between March 2022 – May 2022.

Preceding to data collection, MIEPI conducted training on the survey administration as well as training on physical measurements of height and weight. MIEPI staff first recorded demographic information of each student in Section 1 of the paper survey form, then took height and weight of the student and also recorded these in Section 1. Section 2 of the paper survey form was then completed by students confidentially and turned in anonymously. Afterwards, MIEPI staff entered the paper surveys into a Microsoft Excel database and required double entry of data encoders. Once all data was entered, MIEPI cleaned and conducted analysis on SPSS.

Data on substance use, reproductive health behaviors, sleep, mental health, and access to electronic devices and internet at home are all based on self-report. Measured height and weight were used to calculate Body Mass Index (BMI). CDC BMI percentiles were used to determine BMI categories for students 17 years old and younger. Adult BMI calculations were used for students 18 and older. Students were classified as underweight, healthy, overweight, or obese.

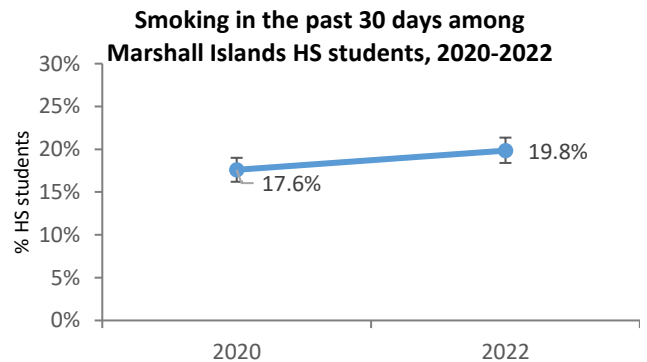
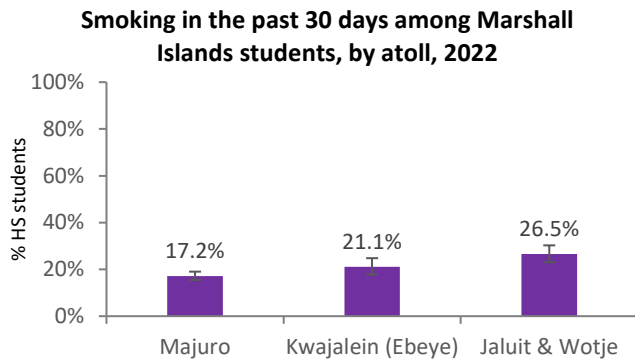
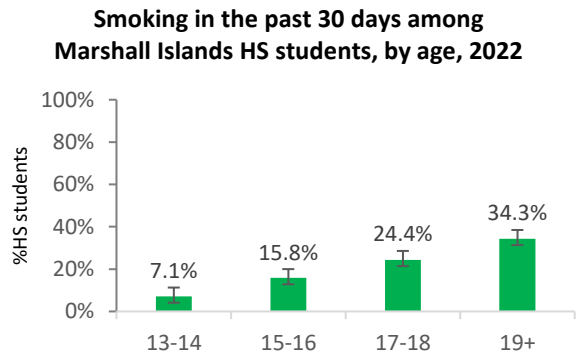
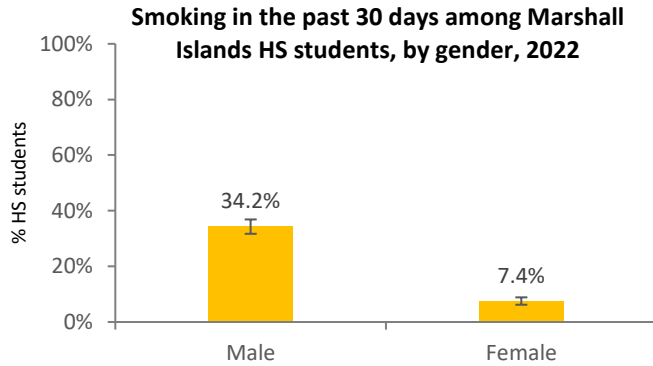
Sample Characteristics (N=2811)

Demographic Characteristics	N	%	
Gender*			
Male	1307	46.5%	
Female	1503	53.5%	
Age			
≤12	2	0.1%	
13-14	230	8.2%	
15-16	1280	45.5%	
17-18	1091	38.8%	
19+	204	7.3%	
Unknown	4	0.1%	
Grade			
Pre 9	149	5.3%	
9	889	31.6%	
10	679	24.2%	
11	600	21.3%	
12	494	17.6%	
School			
Marshall Islands High School	932	33.2%	MAJURO
Laura High School	213	7.6%	
Life Skills Academy	87	3.1%	
Marshall Islands Christian School	90	3.2%	
Majuro Cooperative School	83	3.0%	
Majuro Seventh Day Adventist	65	2.3%	
Assumption High School	110	3.9%	
Majuro Baptist Christian Academy	68	2.4%	
Rita Christian High School	59	2.1%	
Kwajalein High School	249	8.9%	KWAJALEIN
Father Leonard Hacker	48	1.7%	
Gem School	25	0.9%	
Ebeye Seventh Day Adventist	84	3.0%	
Jabro Private School	28	1.0%	
Calvary High School	91	3.2%	
Jaluit High School	409	14.5%	OI
Northern Island High School (Wotje)	170	6.0%	
Total	2811	100%	

*one student missing data on gender

Smoking

19.8% of high school students in the RMI are current smokers (smoked in the past 30 days).

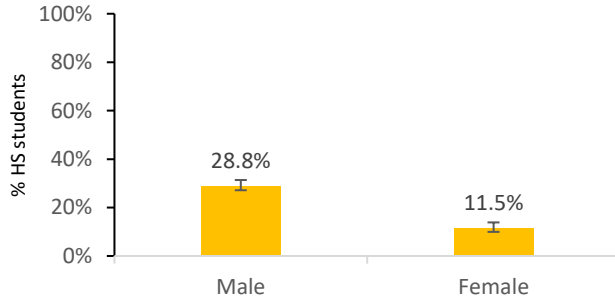


The smoking prevalence rate for RMI high school students is 19.8%. Male students continue to have a much higher smoking prevalence than female students (34.2% vs. 7.4%). Expectedly with age, the smoking prevalence rate increases as observed here from 7.1% for the 13-14 age bracket to 34.3% for the 19+ age bracket. Smoking prevalence in the outer islands remain higher among outer islands students compared with Majuro and Ebeye students.

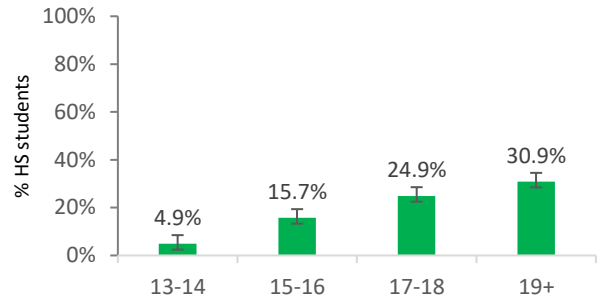
Tobacco Chewing

19.5 % of high school students in the RMI are current tobacco chewers (chewed tobacco in the past 30 days). This includes chewing tobacco with or without betel nut.

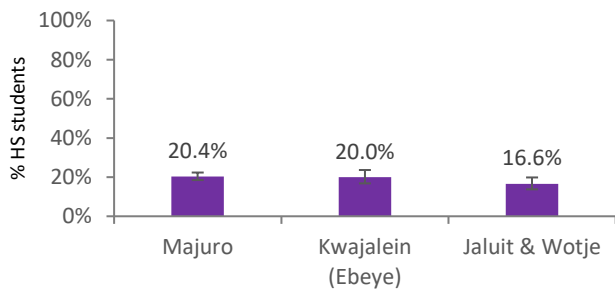
Tobacco chewing in the past 30 days among Marshall Island HS students, by gender, 2022



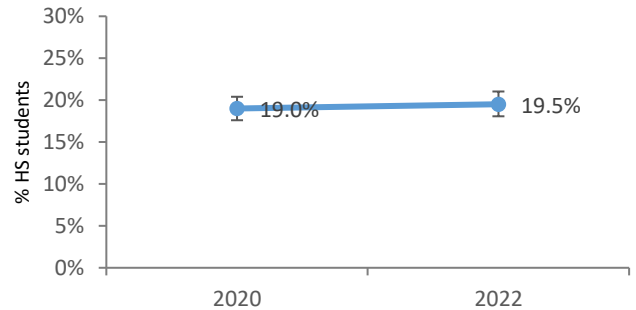
Tobacco chewing in the past 30 days among Marshall Islands HS students, by age, 2022



Tobacco chewing in the past 30 days among Marshall Islands HS students, by atoll, 2022



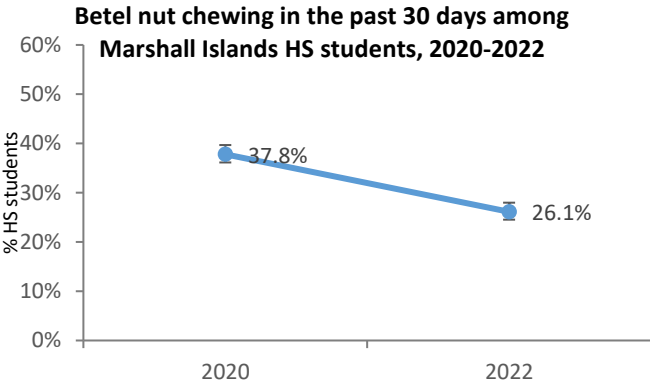
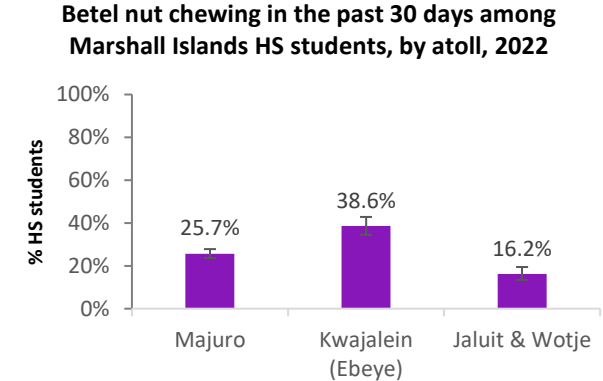
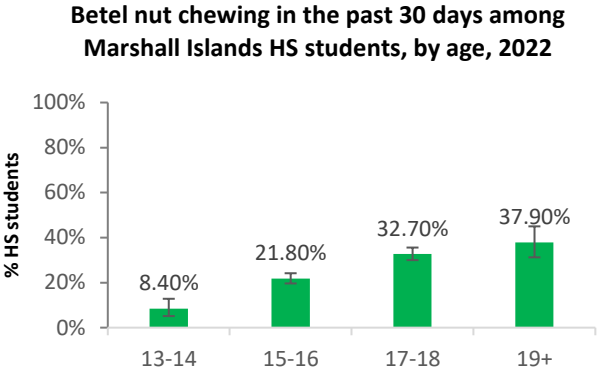
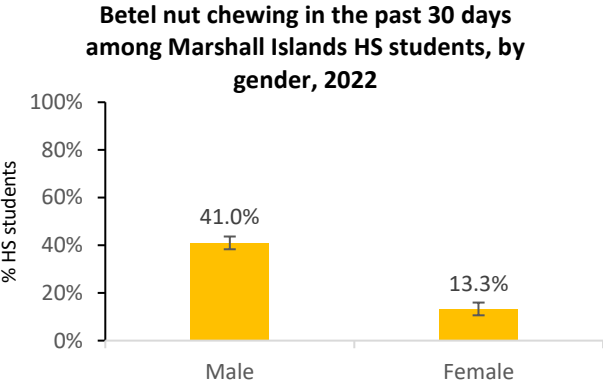
Tobacco chewing in the past 30 days among Marshall Islands HS students, 2020-2022



19.5% of RMI high school students reporting using Tobacco. Male students have a higher tobacco chewing prevalence than female students (28.8% vs. 11.5%). With age, the tobacco chewing prevalence increases from 4.8% for the 13-14 age group to 24.98% for the 17 and 18 age group. Tobacco chewing prevalence among high school students in the outer islands decreased from 20.7% in 2020 to 16.6% in 2022 while Ebeye rates increased from 16.3% in 2020 to 20.7% in 2023.

Betel Nut Chewing

26.1 % of high school students in the RMI are current betel nut chewers (chewed betel nut in the past 30 days).

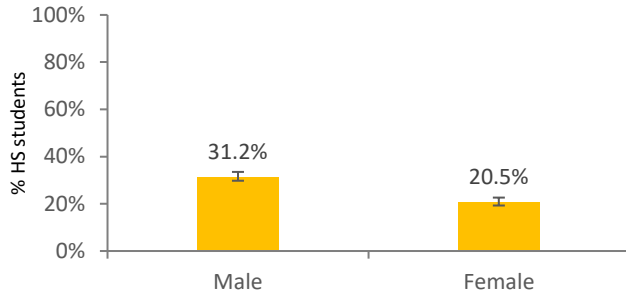


The betel nut chewing prevalence among RMI high school students dropped by 11.7% since reported in 2020. Male students have a higher betel nut chewing prevalence than female students (41.97% vs. 13.26%). Betel nut chewing prevalence increases with age from 8.41 % for the 13-14 age group to 32.72% for the 17-18 age group. Kwajalein (Ebeye) students continue to have a higher prevalence of chewing betel nut compared with Majuro and outer island students (Jaluit & Wotje).

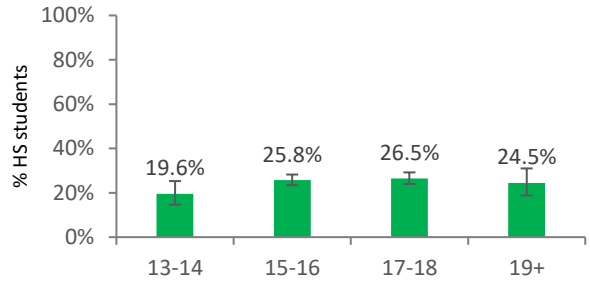
E-Cigarettes (Vaping)

25.5% of high school students in the RMI are current e-cigarettes smokers. (Used e-cigarettes in the past 30 days).

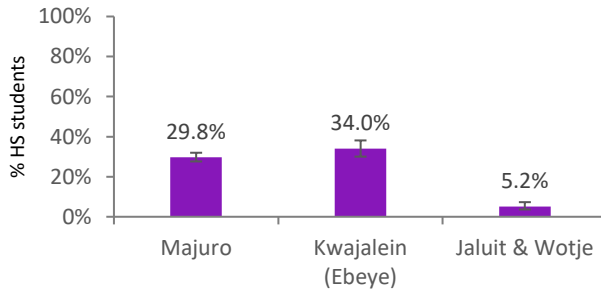
E-cigarette use in the past 30 days among Marshall Islands HS students, by gender, 2022



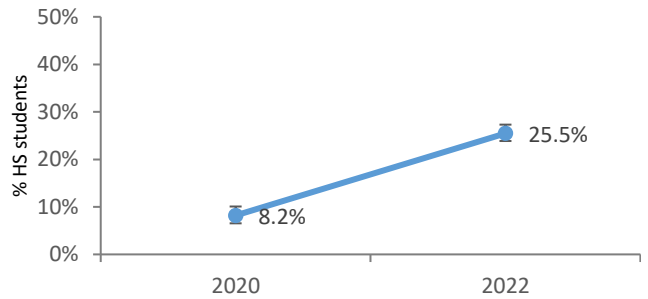
E-cigarette use in the past 30 days among Marshall Islands HS students, by age, 2022



E-cigarette use in the past 30 days among Marshall Islands HS students, by atoll, 2022



E-cigarette use in the past 30 days among Marshall Islands HS students, 2020-2022

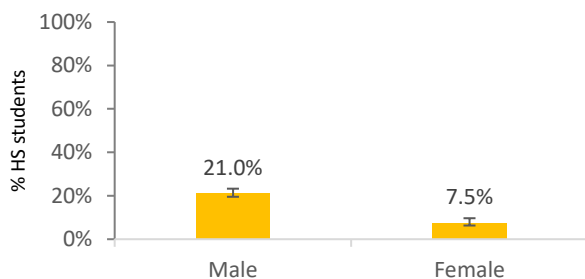


E-Cigarette use has significantly increased by 17% since last reported in 2020. E-cigarette use among males jumped nearly 19% since 2020 and about 17% for females. As expected, E-cigarette prevalence increases with age from 19.57% for the 13-14 age group to 24.51% for the 19+ age group. The prevalence of e-cigarette dramatically increased by almost 30% in Ebeye and about 20% in Majuro. E-Cigarette use in the outer islands (Jaluit & Wotje) remained basically the same from 5.0% in 2020 to 5.20% in 2022.

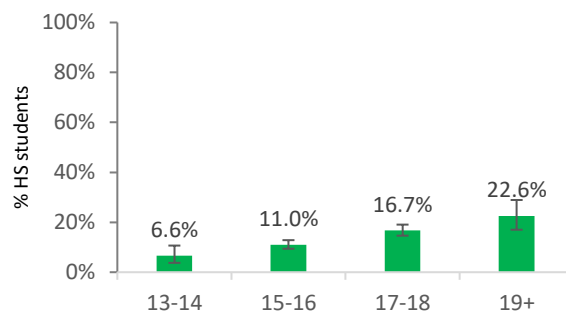
Drug Use

13.8 % of high school students in the RMI are current Marijuana users. The prevalence of meth or cocaine use remain significantly low at 1.0%.

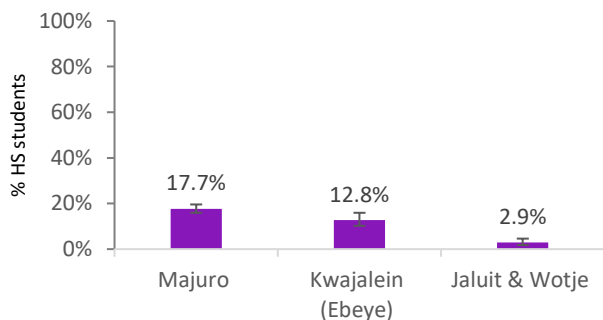
Marijuana use in the past 30 days among Marshall Islands HS students, by gender, 2022



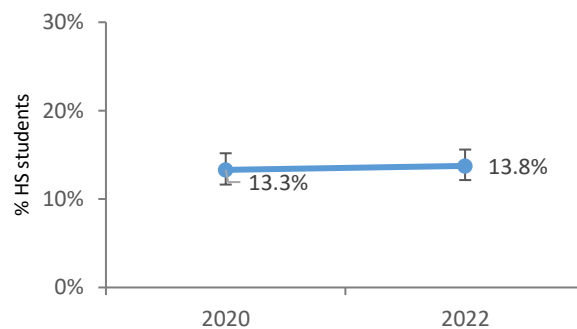
Marijuana use in the past 30 days among Marshall Islands HS students, by age, 2022



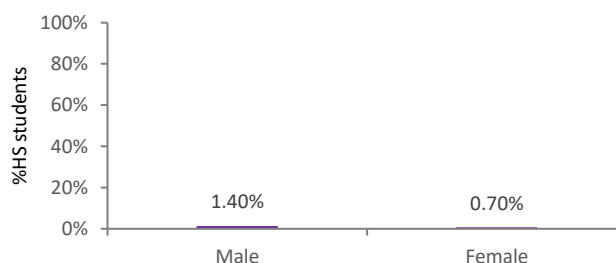
Marijuana use in the past 30 days among Marshall Islands HS students, by atoll, 2022



Marijuana use in the past 30 days among Marshall Islands HS students, 2020-2022



Meth or cocaine use in the past 30 days among Marshall Islands HS students, by gender, 2022

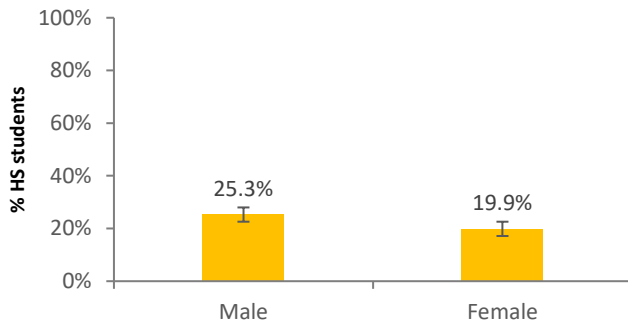


Male students continue to have a higher prevalence of marijuana use in comparison to female students (21.0% vs. 7.5%). Marijuana prevalence increases with age from 6.6% for the 13-14 age group to 22.6% for the 19+ age group. The prevalence of Marijuana use is highest among Majuro students at 17.7%.

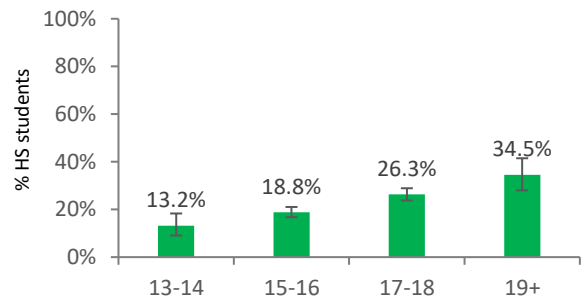
Alcohol Use

22.4% of high school students in the RMI used alcohol in the past 30 days.

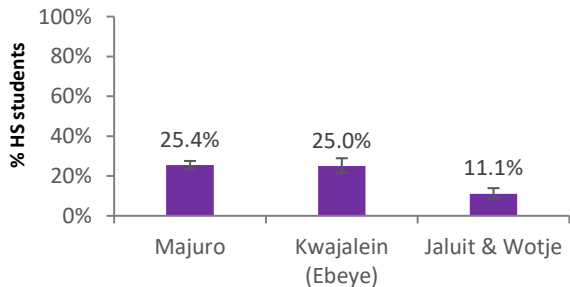
Alcohol use in the past 30 days among Marshall Islands HS students, by gender, 2022



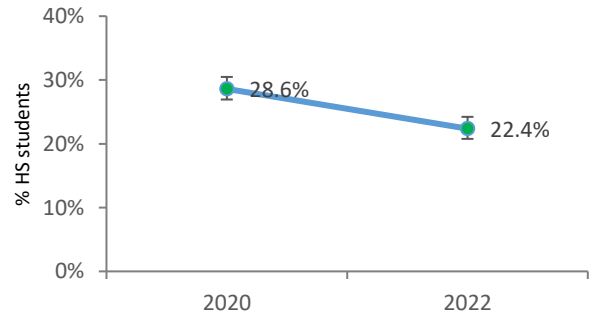
Alcohol use in the past 30 days among Marshall Islands HS students, by age, 2022



Alcohol use in the past 30 days among Marshall Islands HS students, by school, 2022



Alcohol use in the past 30 days among Marshall Islands HS students, 2020-2022

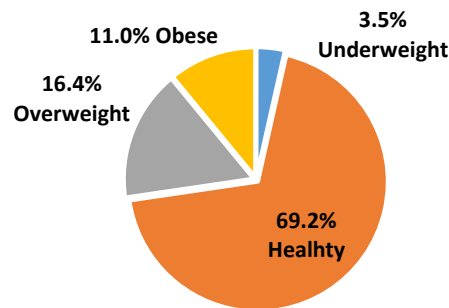


The prevalence of alcohol use is higher among male students (25.3%) compared to female students (19.9%). As with other substances, prevalence increases with age from 13.20% for the 13-14 age group to 34.5% for the 19+ age group. Alcohol use among high school students in Wotje and Jaluit significantly dropped from 31.7% in 2020 to 11.07% in 2022. Prevalence of alcohol use among high school students in Kwajalein has also decreased by 10% since last reported in 2020 while the prevalence of alcohol use among high school students in Majuro has remained almost the same from 25.1% in 2020 to 25.4% in 2022.

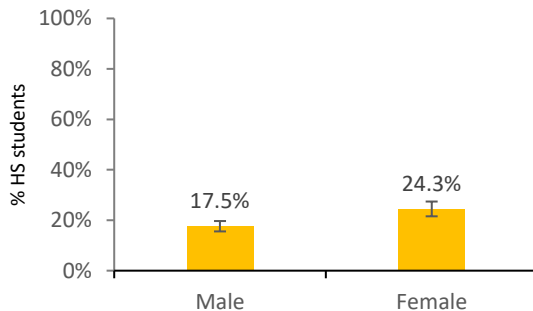
Overweight/Obesity

More than a quarter (**27.4%**) of high school students in the RMI are overweight/obese. Prevalence of overweight/obesity is higher among female students (24.3%) compared to male students (17.5%). Overweight/obesity is highest among the 13-14 age group. Majuro high school students have the highest overweight/obesity prevalence (37.8%)

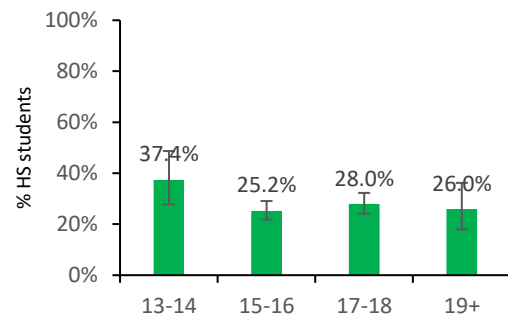
Body Mass Index (BMI) Categories of RMI HS students, 2022



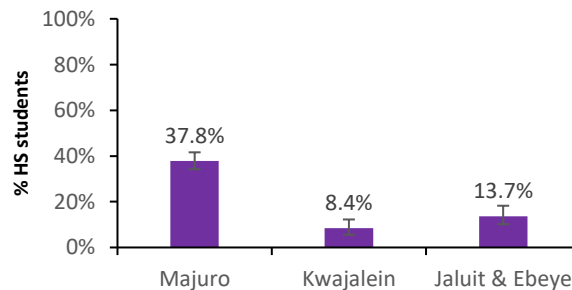
RMI HS student overweight/obesity, by gender, 2022



RMI HS students overweight/obesity, by age, 2022



RMI HS students overweight/obese, by atoll 2022



Reproductive Health

Reproductive Health Factors	N	%
Ever had sexual intercourse*		
Yes	1454	52.1%
No	1337	47.9%
Age at first sexual intercourse (among sexually active)		
11 years or younger	63	4.4%
12 years	69	4.8%
13 years	98	6.8%
14 years	215	15.0%
15 years	316	22.0%
16 years	364	25.4%
17 years or older	309	21.5%
Number of sexual partners (among sexually active)		
1 person	520	36.9%
2 people	273	19.3%
3 people	182	12.9%
4 people	123	8.7%
5 people	98	6.9%
6 or more people	215	15.2%
Condom use during last intercourse (among sexually active)		
Yes	321	23.2%
No	1060	76.8%
Method used to prevent pregnancy during last intercourse (among sexually active)		
No method used	615	45.6%
Birth control pills	48	3.6%
Condoms	251	18.6%
IUD or implant	67	5.0%
Shot, patch, or birth control ring	28	2.1%
Withdrawal or some other method	106	7.9%
Not sure	235	17.4%

* 20 students missing data on ever had sexual intercourse

* 40 students missing data on age of first sexual intercourse

* 63 students missing data on number of sexual partners

* 96 students missing data on condom use

*124 students missing data on method to prevent pregnancy

52.1% of high school students in the RMI reported to have had intercourse with 16.0% reporting first sexual intercourse at age 13 or younger.

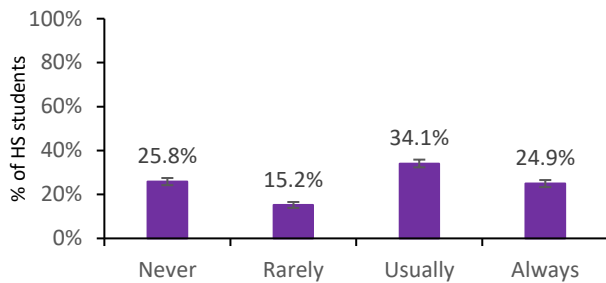
More than half (63%) of the students engaged in sexual intercourse reported having 2 or more partners in their lifetime, with 76.8% reporting not using condom at last intercourse.

45.6% of the students engaged in sexual intercourse reported using no method to prevent pregnancy at last intercourse .

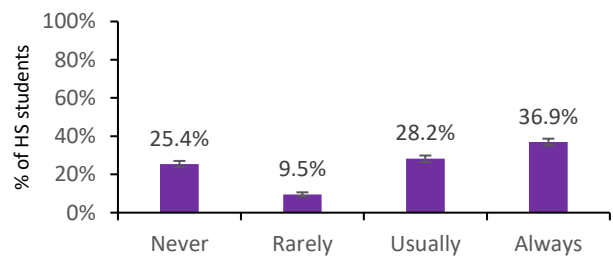
Distance/Hybrid learning support during interrupted learning

About 40% of high school students reported to NEVER or RARELY having access to a computer/tablet and internet connection at home.

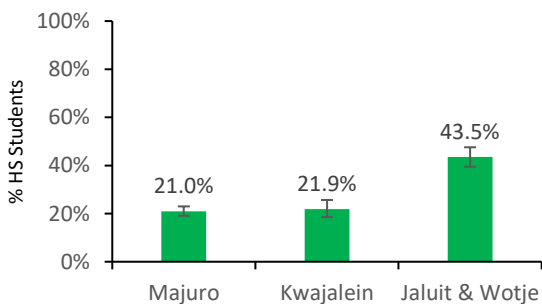
Access to a comuter or a tablet at home when needing it for school, 2022



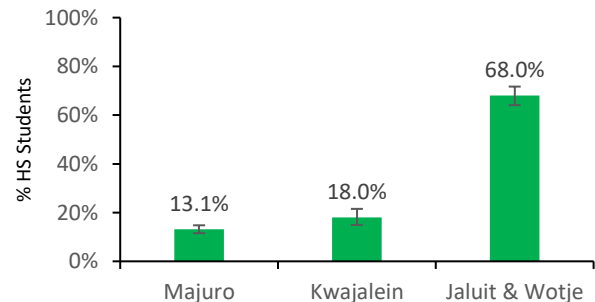
Access to a wi-Fi/Internet at home whe needing it for school, 2022



Never or rarely have access to computer or tablet at home, by atoll, 2022



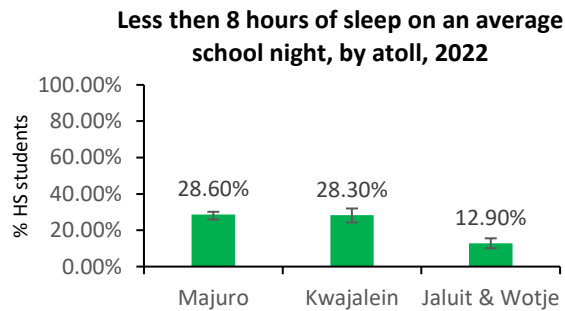
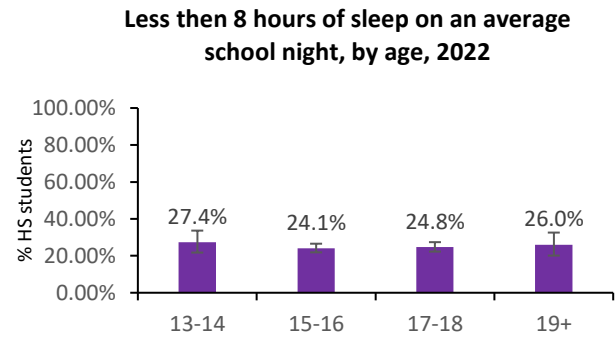
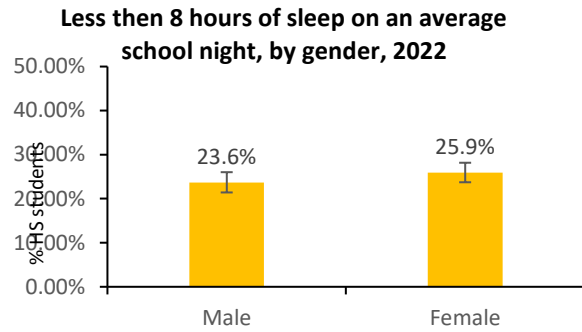
Never or rarely hae access to Wi-Fi/Internet at home, by atoll, 2022



More than half of high school students in Jaluit and Wotje reporting they NEVER or RARELY have access to computer/tablet and internet connection at home

Sleep

Almost three quarters (74.8%) of RMI high school students get more than 8 hours of sleep on an average school night.

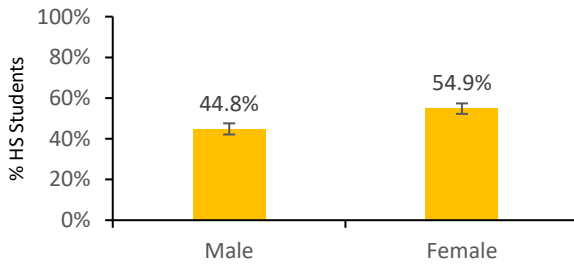


Jaluit and Wotje high school students are getting the most hours compared with Majuro and Kwajalein high school students.

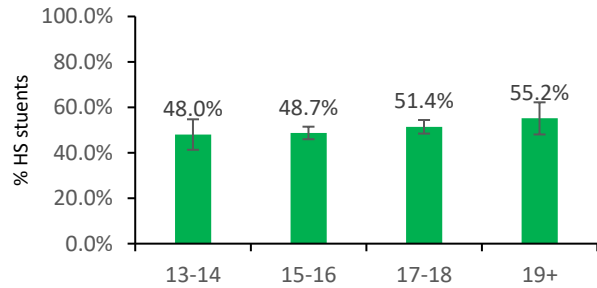
Depression

50.2% of high students reported feeling sad and hopeless almost every day for two or more weeks during the past 12 months.

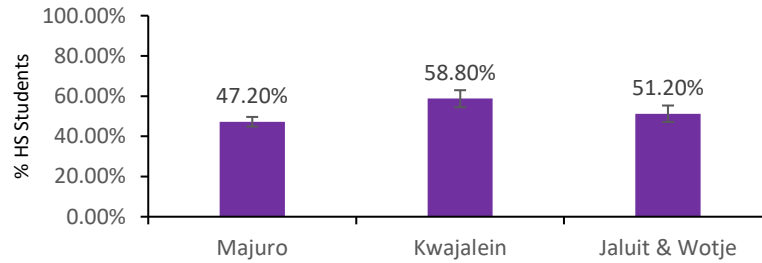
Feeling sad or hopeless almost everyday for two or more weeks during the past 12 months, by gender, 2022



Feeling sad or hopeless almost everyday for two or more weeks during the past 12 months, by age, 2022



Feeling sad or hopeless almost everyday for two or more weeks during the past 12 months, by atoll, 2022

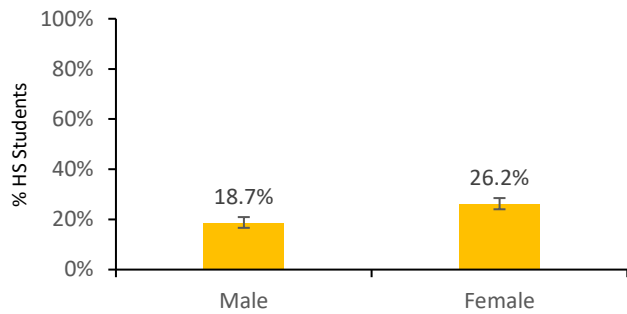


Almost 60% of Kwajalein high school students reported feeling sad and depressed every day for two or more weeks during the past 12 months.

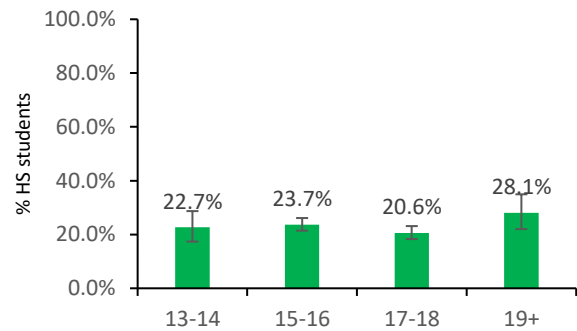
Attempted Suicide

22.8% of RMI High school students seriously considered attempting suicide in the past 12 months.

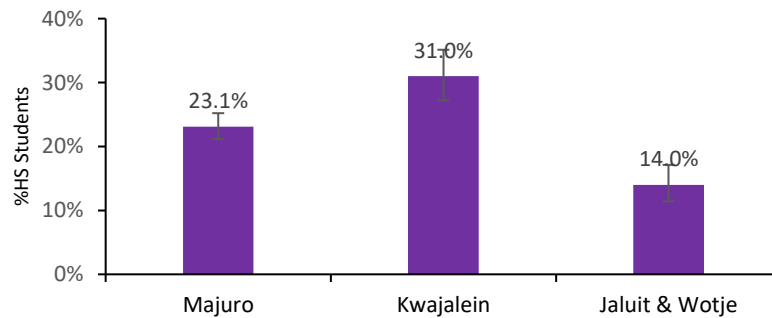
Past 12 months seriously considered attempted suicide, by gender, 2022



Past 12 months seriously considered attempting suicide, by age, 2022



Past 12 months seriously considered attempted suicide, by atoll, 2022



More Kwajalein high school students seriously at attempting suicide during the past 12 months at 31%, followed with Majuro high students at 23%.

Discussion

This 2022 Rapid Report is a high school-based survey intended to be updated every two years. This report has the most recent data on NCD risk factors, sexual health, mental health, sleep and data on access to electronic devices and internet for distance learning.

The smoking prevalence rate slightly increased from 17.6% to 19.8% in the last two years. The 2.2% increase could be associated with the 7% increase in sample size. Another factor to consider is the halt in vendor trainings and Synar¹ inspections. Tobacco prevention efforts have been minimal to nonexistent in the last two years. Smoking prevalence among outer islands high school students remain higher in comparison with Majuro and Kwajalein high school students. However, rates in the outer island have decreased by 4.6% since last reported in the 2020 RMI Rapid report. Smokeless tobacco (dip) and Marijuana prevalence rates hasn't changed much. 19.0% to 19.50% for smokeless tobacco and 13.30% to 13.80% for Marijuana.

Betel nut use on the other hand had significantly decreased by 11%. Betel nut could not be imported from the Federated States of Micronesia (FSM) due to the Marshall Islands border closure from March 2020 to October 2022 in response to the covid-19 pandemic. Data collection for this report was conducted between March 2022 and May 2022, five months before the borders reopened. As anticipated, E-Cigarette prevalence jumped from 8.2% to 25.50%. E-Cigarette is more readily available today than it was back in 2020. Alcohol prevalence decreased by 6% (28.60%-22.40%). The increase in kava use could be the reason for the slight decrease in alcohol use among high school students.

Body mass index data from the 2020 report served as baseline for RMI high school students. The findings from this 2022 data collection indicated an increase of 7.52% in overweight/obesity rate among RMI high school students. Females continue to have a higher rate of overweight/obesity at 24.28% compared to males at 17.52%. This report indicates co-existence of the double burden of overweight/obesity (27.32%) and underweight (3.5%).

¹ The Synar program requires annual random, unannounced inspections of tobacco vendors to assess their compliance with the RMI law.

Furthermore, prevalence of youth reporting having had sexual intercourse increased from 50.9% to 60.40%. Over three quarters (76.80%) of sexually active youth reported not using condom at last intercourse and 45.6% reported not using any method to prevent pregnancy at last intercourse.

During the planning stage to initiate data collection in the high schools, the RMI Public School Systems as well as private school throughout sought to gauge students access to computer/tablets and internet connection at home should there be community transmission of covid-19. Unfortunately, the data on this was not released to the schools in time before Covid-19 community transmission occurred in early August when data encoding was still in progress. The baseline data on student's access to computers/tablets and internet connection at home revealed that about 40% of RMI high school students '*Never*' or '*rarely*' have access.

This report also includes baseline data on sleep and mental health. Almost three quarters (74.80%) of high school students reported getting 8 or more hours of sleep on an average school night. Student were also asked if they ever felt sad or hopeless for two more weeks in the last 12 months and 50.2% said yes. Among those students who said yes to depression in the last 12 months, 22.8% said they seriously considered committing suicide in the last 12 months prior to taking the survey for this report.

Recommendation

The RMI Rapid Youth Survey collects much needed data from RMI high school youth. It is highly recommended that **this survey continues to be conducted on a regular, biannual basis.**

The data presented in this report should be disseminated to a wide audience of stakeholders to include school administration, parent-teacher groups, and other community groups. Additionally, atoll-specific reports are available for these stakeholders with a breakdown of risk factors by school. These data can hopefully encourage local efforts to reduce NCD risk factors, risky sexual behaviors, and prevent suicidal thoughts among RMI youth.

RMI National policies regarding these topics should be reviewed and updated to include emerging trends. There is clearly a need to strengthen existing laws surrounding tobacco, alcohol, and stimulants particularly policies that impact youths and schools. Since 2020, there has been an upsurge in e-cigarette use among high school students. This alarming increase hopefully will capture the attention of the RMI government as it did with the Palauan government. In March 2023, the Republic of Palau introduced a total ban on the import, advertising, sale, and use of e-cigarettes.

Furthermore, secondary institutions should consider integrating a mandatory Physical Education and Health Education curriculum, with a focus in nutrition, reproductive health and mental wellness. Over a quarter (27.32%) of high school students fall under the overweight/obese category.

Findings from this report can be a powerful asset to motivate higher level change, especially regarding tobacco, alcohol, and unhealthy food legislation that potential to greatly reduce risk factor prevalence among youth in the RMI. **Without high-impact action, these risk factors will continue to** increase among youth, and carry on into adulthood, resulting in high adult risk factor and disease prevalence that greatly contribute to morbidity and mortality in RMI and burden the healthcare system. **Programs around substance use, nutrition, physical activity, reproductive and mental health should be strategically evaluated.**

Acknowledgements

- **Marshall Islands Epidemiology & Prevention Initiatives Inc.(MIEPI)**
 - Maybelline Ipil, MPH, Project Manager
 - Molly Murphy, Sr. Data Analyst
 - Joie Heine, Admin/Finance Officer
 - Manney Compass, Data Associate
- **Pacific Islands Health Officers Association (PIHOA)**
 - Dr. Haley Cash
- **College of the Marshall Islands/Public Health Internship Program (CMI)**
 - Bablon Samson
 - Erisen Rilometo
 - Gina Anutak
 - Isaac Leon
 - Karen Anjel
 - Lelean Koyoma
 - Lucky Laik
 - Marsha Kilma
 - Marynuia Lenja
 - Sign Helson
 - Winep Jorlang
- **Ebeye Community Volunteer**
 - Gery Lanwi
 - Julia Helson
- **Public School Systems**
 - Kanchi Hosia, Commissioner
 - Junior Paul, Assistant Commissioner
 - Newton Langidrik, Director of Information Systems Office
- **Public Secondary School Principals**
 - Baldwin Robert, Jaluit High School
 - Ricky Raymond, Kwajalein Atoll High School
 - Barbara Ned, Marshall Islands High School
 - Salazer Bilimon, Northern Island High School
 - Jayann Taala, Life Skills Academy
- **Kwajalein Private Secondary School Principals**
 - Jope Bainivalu Jr., Ebeye Calvary School
 - Noble Ned, Gem Christian School
 - Raian Villacruel, Ebeye Seventh Day Adventist
 - Kiorong Sam, Jabo Private School
 - Jessica Caleb, Father Leonard Hacker High School
- **Majuro Private Secondary School Principals**
 - Vicky Capelle-Langidrik, Assumption School
 - Enoch Migiro, Delap Seventh day Adventist
 - Pastor Lang, Majuro Baptist Christian Academy
 - Kenneth Fernando, Majuro Coop School
 - Rev. Josen Teico, Marshall Islands Christian High School
 - Joy Enos-Obet, Rita Christian School

Annex

RMI RAPID SURVEY - ENGLISH

Student will first be interviewed and measured by trained NCD Survey Staff to complete questions 1-9 in the box. Then, students will complete questions independently, and then submit forms into a designated box. **No names are to be collected.**

Section 1 : To be completed by NCD Survey Staff

1) Date (M/D/Y):	_____ / _____ / _____
2) Name of school:	_____
3) Grade:	9 10 11 12 (circle one)
4) Section:	_____
5) Gender:	Male Female (circle one)
6) Age:	_____ years
7) Residence:	_____
8) BMI:	Height: _____ inches Weight: _____ pounds
9) Staff initial:	_____

Section 2 : Substance Use

- | | | | |
|---|-----|----|--------------|
| 10) During the past 30 days , did you chew <u>at least one betel nut</u> ? (with or without tobacco) | Yes | No | (circle one) |
| 11) During the past 30 days , did you chew any tobacco? | Yes | No | (circle one) |
| 12) During the past 30 days , did you smoke any tobacco? | Yes | No | (circle one) |
| 13) During the past 30 days , did you use e-cigarettes? | Yes | No | (circle one) |
| 14) During the past 30 days , did you use marijuana ? | Yes | No | (circle one) |
| 15) During the past 30 days , did you use ice/meth/deka/battu? | Yes | No | (circle one) |
| 16) During the past 30 days , did you have at least one drink of alcohol? | Yes | No | (circle one) |

Section 3 : Reproductive Health

- 17) Have you ever had sexual intercourse? Yes No (circle one)
-
- 18) How old were you when you had sexual intercourse for the first time? (circle one)
- a. I have never had sexual intercourse
 - b. 11 years old or younger
 - c. 12 years olds
 - d. 13 years old
 - e. 14 years old
 - f. 15 years old
 - g. 16 years old
 - h. 17 years old or older
-
- 19) During your life, with how many people have you had sexual intercourse? (circle one)

- a. I have never had sexual intercourse
- b. 1 person
- c. 2 people
- d. 3 people
- e. 4 people
- f. 5 people
- g. 6 or more people

20) The last time you had sexual intercourse, did you or your partner use a condom?
(circle one)

- a. I have never had sexual intercourse
- b. Yes
- c. No

21) The last time you had sexual intercourse, what one method did you or your partner use to prevent pregnancy? (circle one)

- a. I have never had sexual intercourse
- b. No method was used to prevent pregnancy
- c. Birth control pills (like microgynon or microlut pills)
- d. Condoms
- e. An IUD (such as 380A -last up to 5 years) or implant (such as Jadelle-last up to 5 years)
- f. A shot (such as Depo-Provera -last up to 3 months)
- g. Withdrawal or some other method (such as emergency pills)
- h. Not sure

Section 4 : COVID-19 Pandemic

22) How often do you have access to a computer or tablet AT HOME when you need it for school? (circle one)

- a. Never
- b. Rarely
- c. Usually
- d. Always

23) How often do you have access to Wi-Fi/Internet AT HOME when you need it for school?
(circle one)

- a. Never
- b. Rarely
- c. Usually
- d. Always

Section 5 : Mental Health

24) On an average school night, how many hours of sleep do you get? (circle one)

- a. 4 or less hours
 - b. 5 hours
 - c. 6 hours
 - d. 7 hours
 - e. 8 hours
 - f. 9 hours
 - g. 10 or more hours
-

25) During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? (circle one)

- a Yes
 - b No
-

26) During the past 12 months, did you ever seriously consider attempting suicide? (circle one)

- a. Yes
- b. No