

OP18**Going Up in Smoke: The Rising Prevalence of Smoking in Indonesia – Socioeconomic Factors Associated With Smoking and Development of Culture-Specific Smoking Cessation Interventions****Rafiq M**¹, Rafiq A², Liu L³, Flather E⁴¹*Department of Primary Care and Public Health, University College London, London, United Kingdom; Royal Free Hospital, London, United Kingdom;* ²*Royal Free Hospital, London, United Kingdom;*³*Queen Elizabeth Hospital, London, United Kingdom;* ⁴*Royal London Hospital, London, United Kingdom*

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Introduction: Indonesia is one of the top five tobacco-consuming countries in the world, with up to 84% of males estimated to be current smokers. Of concern, this number is on the rise, which will have important knock-on effects on the development of secondary diseases and the health of the nation. There is limited evidence on the demographics of smokers, and this is essential to effectively target and implement smoking cessation initiatives. This study aims to identify socioeconomic factors associated with smoking in Indonesia to identify high-risk groups and guide development of culture-specific stop-smoking interventions.

Methods: Data were collected on 54,913 individuals (9306 males and 45,607 females) across Indonesia as part of the World-Bank Demographic and Health Survey (DHS) 2012. Information on age, location, literacy and education, occupation, wealth and healthcare coverage was analysed using backwards-stepwise logistic regression to identify factors associated with smoking. In individuals who smoked, access to and frequency of use of different types of media was compared.

Results: In our population, 71% of males and 3% of females smoked. There has been a progressive increase in the percentage of men and women who smoke between 2003 and 2012 (p).

Conclusion: Intervention is needed at both a public health and primary care level. There is currently a lack of government tobacco control policies and general practitioners (GPs) feel inadequately trained in smoking cessation. Young males and older females in lower socioeconomic classes are at greatest risk and should be targeted for stop-smoking interventions when seen in primary care. Increased GP training and development of smoking cessation tools that include visual aids and are accessible to those with no healthcare cover are key to preventing a national epidemic.