REACHING YOUNG PEOPLE 2016 SMS4
ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH
AND REDUCE SMOKING

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IN INDONESIA

INTRODUCTION

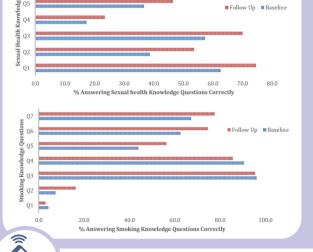
is an ideal setting to pilot an integrated short people's access to sexual reproductive health

Lazuardi L5, Lim M12, Helard M12, Prabandari Y4

Table 1. Comparison of Sexual Health and Smoking Knowledge Scores between baseline and follow among matched participants

n=197	Baseline		Follow Up		
					Paired t-test (p-value)
Sexual Health Knowledge score	2.71	1.64	3.40	2.90	<0.01
Smoking Knowledge score	3.83	1.18	4.10	1.30	0.01

Figure 1. Proportion of knowledge questions answered correctly, baseline vs. follow up



METHODS

intervention. Youth received a total of 12 SMS: 6 related to SRH



SMS

RESULTS

Of the 555 baseline participants, 235 (42%) completed a follow-up survey of which 197 (84%) were matched to a baseline survey. Median age of participants at baseline was 19 years and 63% were female. A small proportion reported ever having sex (11%), with a median age of first sex 18 years (14-23). Almost a third of the sample (29%) reported ever

having smoked cigarettes, higher among males (61%) compared to females (10%). Matched analysis showed significantly increases in mean knowledge scores from baseline to follow up for both SRH (p-value < 0.01) and smoking (pvalue 0.01). Young people reported either learning something (95%), finding the SMS informative and a useful reminder (95%) and

interesting or entertaining (61%).



CONCLUSION

There is great potential for SMS-based and other mHealth interventions to reach youth in Indonesia with health promotion messages and provide credible information about SRH and harms related to smoking, particularly to dispel common myths. There is also a clear place for scale up of SMS and other health promotion interventions targeting young people, with the potential to explore additional topics around healthy life style, nutrition and physical activity, as supported by young people in this study



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