

**EFFECT OF ADVERTISING ON CONTRACEPTIVE USAGE
AMONG THE YOUTH IN TURKANA COUNTY.**

BY

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DECLARATION

This research paper is my original work and has not been presented for an award any degree in any other university.

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This research paper has been done under my supervision and submitted with my approval as University supervisor.

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Author,

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DEDICATION

I would like to dedicate this work to the almighty God for the opportunity to do this course and the ability to finish it. He has been my source of inspiration. My Dad, Peter Kairu for being gentleman among men. My Mum, Lucy Mwaniki, for your moral and spiritual support. I am forever grateful for having wonderful loving parents like you. My sisters, Monicah Njeri, Dorcas Waithera and my brother John Kiragu. Thank you for your encouragement, you mean a whole lot to me.

ABSTRACT

Campaigns using mass media have been used for a long time to convey messages to large populations through continuous engagement via various methods for example, TV, radio, and daily papers. Tragically, these messages are typically latent. Broad communications battles are continually contending with elements, for example, continuous item advertising, high social standards, and practices driven by reliance. On prophylactic advancement endeavors, literature shows the little focus on group level social standards, populace patterns, and casual social connections and interpersonal correspondence. Family planning is key in safe motherhood and reproductive health. Northern parts in Kenya where Turkana lies have continued to record lower levels of contraceptive uptakes. The influence of promotional efforts on contraceptive usage especially in marginalized areas remains unclear. This study explores the efforts of advertising and its effect on contraceptive usage among youths in Turkana County using Kenya Demographic and Household Survey of 2014 which has information on contraceptive utilization across counties in Kenya. The study used binary probit regression model in estimation due to its robustness and capacity of addressing heterogeneity. The study tested significance at 1%, 5% and 10% levels. From the findings, advertisement was shown to have insignificant effect statistically on contraceptive use at all levels. In conclusion, utilization of advertisement actually influences the conduct, gives an efficient planning process that applies showcasing standards and methods, concentrates on need of key gathering of people fragments and convey a constructive advantage for society. However, these may not influence significantly utilization of contraceptives among youth in Kenya. The Ministry of health and county governments should explore other factors that may influence significantly uptake of contraceptives among the youth at both levels respectively.

TABLE OF CONTENTS

DECLARATION	ii
ACKNOWLEDGEMENT	iii
DEDICATION	iv
ABSTRACT	v
LIST OF ABBREVIATIONS	viii
LIST OF TABLES	ix
CHAPTER ONE: INTRODUCTION	1
1.1 Background of the Study	1
1.2 Problem Statement	7
1.3 Research Questions	8
1.4 Objectives of the study	8
1.5 Justification and Significance of the Study.....	8
CHAPTER TWO: LITERATURE REVIEW	11
2.1 Theoretical Literature Review	11
2.1.1 Social Subjective Hypothesis.....	11
2.1.2 Systems Theory.....	12
2.1.3 Social Interaction Theory.....	13
2.2 Empirical Literature Review	13
2.2.1 Advertising and Contraceptive Usage Behavior.....	13
2.2.2 Lifestyle and Contraceptive Usage Behavior	15
2.2.3 Culture and Contraceptive Usage Behavior.....	16
2.2.4 Empirical Studies	17
2.3 Overview of the Literature.....	19
CHAPTER THREE: RESEARCH METHODOLOGY	22
3.1 Introduction.....	22
3.2 Research Design	22
3.3 Analytical Framework	22
3.4 Model Specification	24
3.5 Definition, Measurement and Expected Signs of Variables	25
3.6 Data Sources	27
CHAPTER FOUR: RESULTS AND DISCUSSION	28
4.1 Introduction.....	28
4.2 Descriptive Statistics.....	28
4.3 Correlation and Normality Analysis	29
4.4 Model Estimation and Interpretation	30
4.5 Discussion of The Regression Findings.....	32

CHAPTER FIVE: SUMMARY, CONCLUSIONS AND POLICY RECOMMENDATIONS.....	34
5.1 Introduction.....	34
5.2 Summary	34
5.3 Conclusions.....	35
5.4 Policy Recommendations	35
5.5 Areas of Further Study.....	36
REFERENCES.....	37

LIST OF ABBREVIATIONS

AIDS	Acquired Immune Deficiency Syndrome
CIDP	Chronic Inflammatory Demyelinating Polyradiculoneuropathy
CPR	Contraceptive Prevalence Rate
CSM	Condom Social Marketing
HIV	Human Immunodeficiency Virus
KAIS	Kenya AIDS Indicator Survey
KDHS	Kenya Demographic Health Survey
KNBS	Kenya National Bureau of Statistics
KPHC	Kenya Population and Housing Census
MDGs	Millennium Development Goals
MOH	Ministry of Health
NURHI	Nigerian Urban Reproductive Health Initiative
PSI	Population Service International
SID	Society of International Development
STIs	Sexually Transmitted Infections
TFR	Total Fertility Rate
TV	Television
USA	United States of America

LIST OF TABLES

Table 4.1: Summary Statistics	28
Table 4.2: Correlation Matrix	29
Table 4.3: Shapiro Wilk test of normality	30
Table 4.4: Marginal Effects of the Probit Model.....	31

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Contraception is a process that interferes with the normal process of ovulation, fertilization and implantation hence preventing pregnancy. Different methods of contraceptives act at different point of the process. Birth control, another name for contraception, has been used since ancient times but the modern methods we know today, only became available in the 20th century. It's a method of population planning or population control with the aim of reducing the overall population growth rate.

Researchers have shown that high increase of population growth waters down the advantages of economic growth. Studies have shown that that if the global birth rate had dropped by 5 per 1000 in the 1980s, there would be a third less of people living in poverty by now, (Eastwood and Lipton, 2001). Poverty reduction can be hindered by rapid population increase. In sub-Saharan Africa, economic growth recently has not been able to catch up with the population growth. The number of sub-Saharan Africans between 1990 and 2001 living in extreme poverty an increased by 38 percent, (Bernstein, 2006). According to the World Bank's 2010 Global Monitoring Report, the economic crisis globally affected mostly the households in the lowest quantile; a plus of 1.2 million children of five years and below were estimated to die between 2009 and 2015 due to the crisis. Due to increased poverty, more than 350,000 students before the economic recession were projected not to complete primary education. This increases the unskilled work force which in return inhibits the economic development.

The ability of lowering poverty levels, preventing 32% of all maternal mortalities and almost 10% of child mortality can be achieved through advocacy of family planning in countries with increased birth rate. The outcome would be seen in an increase in women

empowerment, attainment of universal primary education and environmental sustainability (Cleland *et al.*, 2006). Increasing access to family planning services would lead to reduction of the population growth rate and costs reduction for meeting MDG of universal primary education. This MDG is affected by the number of children who need learning, (Moreland and Talbird, 2006).

Family planning in itself, offer numerous economic advantages at the individual, national and global levels. It will allow personal determination of the timing and number of births. It will lower the number of unwanted pregnancies, hence can reduce injury, morbidities and mortalities linked with child birth, abortions and sexually transmitted infections (STIs) inclusive of HIV/AIDS, (Hawkins *et. al.*, 1995). Ultimately it will contribute to lowering the population growth, poverty levels and demand for public goods and services. It will encourage environment preservation, (Cincotta and Engelman, 1997).

Key strides in family health indicators over the recent five years as indicated in the Kenya Demographic Health Survey (KDHS) 2014 has been noted in Kenya. The survey showed that the fertility rate (FR) decreased from 4.6 in 2008-09 to 3.9 in 2014. This is due to the increase in contraceptive use from 46% in 2008-09 to 58% in 2014. Information about at least one contraceptive method is common in Kenya. 58% of married women are using a contraceptive method, with 60% of users were accessing them from government health facilities. It was observed that a reduction in fertility saw a reduction in infant and child mortality. Under-five mortality reduced from 74 to 52/1000 and infant mortality reduced from 52 to 39/1000 in comparison to the 2008/09 survey. The demand for family planning was seen to lowest among women who are illiterate and in the lowest wealth quintile.

KDHS (2014), findings further showed that Kirinyaga County led in family planning, with each household having an average of two children. It also found that Nyeri, Kiambu

and Nairobi came in the second place with each household having an average of three children. North Eastern counties have performed dismally in using contraceptives, with areas such as Wajir recording an average of eight children per household. Women in West Pokot, Turkana and Samburu were also found to be having more than seven children.

The location of Turkana County is in North Western Kenya. To the south it is neighboured by West Pokot and Baringo County, to the south east is Samburu County and to the east is Marsabit County. It covers an area of 77,000 Km² and its Longitudes are 34° 30' and 36° 40' East and Latitudes are 10° 30' and 50° 30' North, (County Integrated Development Plan (CIDP), Turkana county, 2013).

The population of Turkana County stood at 855,399 in 2009. It was projected in 2012 and 2017 to be 1,036,586 and 1,427,797 respectively, (The Kenya Population and Housing Census (KPHC), 2009). The projections were based on a population growth rate of 6.4 percent. The assumption made was that there was constant mortality and fertility rates. The CIDP report of 2013 stated that the County has a youthful population with 60 percent being below 19 years. This is an increase of 67 percent between 2009 and 2017. The Kenya National bureau of Statistics (KNBS) and Society of International Development (SID) 2013 report, showed that the County has a child rich population, where 46% of the total population constituted of 0-14 year olds. The cause of this is high fertility rates among women as evidenced by 59% of households had more than 7 members. 82% of the residents are illiterate. It is also among the poorest counties when it comes to mean expenditure.

With this trend in increased population growth in Turkana as shown by the surveys, there is urgent need to control the population. There is need to introduce target programs. The audience behavior and the use of persuasive power of mass media is critical in realizing

socio-economic development needs to be analysed.

Advertisement is a different marketing discipline used since the early 1970s. Its efforts focuses on affecting behaviours to improve health, prevent damage, protect the surrounding, contribute to society and enhance financial satisfaction. This term was first introduced by Zaltman and Kotler in 1971. They described it as a marketing principle and technique used to advance a social cause, idea or behaviour. French (2010), described it as a way that applies fundamentals and techniques of marketing to develop, transmit and provide value with the aim of changing behaviour that will benefit the individual and community at large.

As time went by, an increase in interest in and use of society marketing concepts, tools, and practices has been seen in environmental, legal and activism activities apart from public health and occupational health. Television, radio and print advertising, which are mass broadcasting methods, motivate individuals to purchase a variety of products and services. Mass broad casting asserts influence over people's thoughts, values and conduct. Hence advertising techniques can be used to make individuals act on behalf of their own health and wellbeing. Since World War II, both federal state and local governments in the USA and non-governmental organizations have supported hundreds of public adverts to promote social instead of commercial goods, (DeJong, 1998).

The goal of promotion is for the most part to change conduct. By having the key gatherings of people acknowledge, cannot, change or forsake practices, this is accomplished. It achieves this by distinguishing and evacuating hindrances e.g. social and budgetary expenses or basic variables restraining change and doing statistical surveying in order to comprehend the current learning, mentalities, and convictions. Statistical surveying conveys to light what correspondence systems, message, and devices that will nearly resound with key fragments to influence conduct and cause change.

Donovan (2010) depicts promotion as 'the use of business display subject to the examination, planning, implementation and inspecting of programs aimed to affect the deliberate or automatic behavior of specific groups of audiences, bearing in mind the target is to enhance the wellbeing of people and the community'. In his examination in light of Zaltman and Kotler approach in the 1970s on showcasing ideas and methods to advance social destinations, effective promotion includes plans that target change in social surroundings, society, policies and laws rather than purely depending on persons to change their behaviour.

The health care sector has utilized promotion to impact change of behavior in individuals adopting healthy lifestyles. Some of the health issues that promotion has helped change the conduct of individuals are; diabetes, HIV/AIDS, mental health, nutrition, street security, water and sanitation, impacts of smoking, jungle fever and family planning (Donovan, 2010). Advertising draws upon a variety of theoretical bases to provide frameworks to make conduct and attitude change initiatives. It also tries to affect not only the individual, but also the conduct of creators of policies and key influential groups. There is a possibility of it impacting on the background factors such as poverty and food security, which influence and hinder the conduct and preferences of individuals, (McFadyen,1999).

Contraceptives promotion has been done through various channels. Mass media campaigns on radio, TV and print to promote Femi plan brand and range of products for example, dispelled, myths and misconceptions about modern family planning methods. Promotion helps provide correct knowledge about benefits of modern family planning methods, encourage men to get involved in and support their wives to take up modern family planning methods, (PRB, 2016).

Condom social marketing (CSM) became a useful tool, in mid-80's, in fighting

HIV/AIDS epidemic. Through social marketing programs, in 1996, more than 783 million, in over 50 countries, condoms were distributed. Specific communications campaigns were conducted in Malawi and Bolivia, (World Bank, 1996). Despite the high number of people infected by HIV, which totals to 35.3 million globally, there are indicators of a rise in endangering sexual behaviours in several countries. Recently studies have shown a notable rise in the number of sexual partners in countries such as: Burkina Faso, Congo, Côte d'Ivoire, Ethiopia, Gabon, Guyana, Rwanda, South Africa, Uganda, Tanzania and Zimbabwe. At the same time a decrease in use of condom in Côte d'Ivoire, Niger, Senegal and Uganda is seen. The world is experiencing persistent challenges in contraceptive use among the youth which include: poor adherence, low availability of high-quality contraceptives, youth centered contraceptive, sexual and reproductive education and health services, (UNAIDS, 2013).

Advertisement has been alluded in various literatures to be synonymous with mass media campaigns; of condoms and contraceptives, awareness campaigns, community mobilization, conduct change information and enlightenment of the community, (Saini, 2012). While advertisement mostly engages these, alone, they do not constitute advertising. Advertising strategies are set apart by principles in marketing concepts of buyer exposure and exchange. It emphasizes the angle of specific audience as the foundation for getting mutually satisfying exchanges, (Donovan, 2010).

For advertisement to be effective, the needs, desires, values and views of the specific group have to be identified and the target audience has to be involved actively in the process of conduct or attitude change, (McFadyen, 1999). In conclusion, it is through targeted advertising using effective communication that the community at large is able to learn and appreciate products and services being introduced to them. This research hence focuses on investigating the effect of advertisement on contraceptive usage by the youth

in Turkana County.

1.2 Problem Statement

There is a small but significant evidence of positive effects of advertising in health promotion. Though there being an increase in contraceptive availability in Africa, the usage is still low and has not achieved the level required to lighten dangers to sexual and regenerative wellbeing. This represents an issue and a few specialists have prescribed taking different approaches to which sexual connections impact prophylactic utilization, (Cohen & Trussell, 1996). Turkana County has seen a steady trend of an influx of people in the recent past due to the changing socio-economic landscape, occasioned by the discovery of oil wells in the area as well as influx from the neighboring country of South Sudan. This influx may upset the social fabric that has existed among the Turkana community over the period. It is feared that the influx has heightened socio-economic interaction between the people living in Turkana and these entrants, with the number of those who engage in commercial sex going up around the towns. The Turkana Community, which traditionally has been governed under the hierarchical system, with the kraal leaders having powers to regulate the community behavior, is faced with a new challenge of dealing with immigrants when it comes to sexual behavior.

Kenya AIDS Indicator Survey (KAIS) 2012, showed that unwanted pregnancies prevalence among the youth in Turkana County is in the steady increase. This is an indication of low contraceptive usage among a sexually active population, the majority of which are youth aged 15-34 years. According to Population Service International (PSI) Kenya 2013, there has been on-going social marketing activities funded by various agencies to influence the youth on the use of contraceptives within Turkana County since 2007. Studies have shown that in Turkana County, contraceptive usage among the youth is not rampant. This can be attributed to various reasons such as an inadequate supply of

contraceptives, inadequate knowledge on contraceptives, where to find them and even the price at which to purchase them, (PSI, 2013). Thus, the study findings will reveal whether or not increasing knowledge for the youth on contraceptives use through advertisement, as well as ensuring a steady supply of the commodity, may lead to increasing or decreasing the usage especially in Turkana County and other counties in similar settings. This study explores the role of advertisement on the usage of contraceptives by youth in Turkana County.

1.3 Research Questions

- i. What are the trends of contraceptive usage by youth in Turkana County?
- ii. What are the effects of advertisement on the usage of contraceptives by youth in Turkana County?
- iii. What are the appropriate policy interventions on contraceptive usage in Turkana County?

1.4 Objectives of the study

The main objective of this study is to analyze the effects of advertisement on contraceptives usage by youths in Turkana County.

The specific objectives include:

- i. To describe the trend of contraceptive usage by youth in Turkana county.
- ii. To investigate the effect of advertisement on the usage of contraceptives by youth in Turkana County.
- iii. To delineate policy interventions on contraceptive usage based on the study findings.

1.5 Justification and Significance of the Study

Advertising has over the years shown how it promotes healthy behaviors on many health

issues including the use of contraception. This intervention has been implemented in various populations and settings. This study would enhance uptake of socially marketed products and services especially among the inhabitants of Turkana County. It is also hoped that the research may lead to a rise in contraceptive use, which may boost the business on branded contraceptives in this Turkana region. Due to the fact that contraceptives prevent early pregnancies or unwanted pregnancies, the incidences may decrease hence a healthy community, which is needed for a stable market for other health products. The advertising industry can use this study as a facilitator for future studies on other locations. This study report may provide a reference for the researchers who may be seeking additional information to help them refocus their investigations. They may be able to adapt relevant methods at the time that they choose to conduct a new study.

More specifically, this study may serve as a guide for researchers, who may want to conduct further studies on advertisement in relation to the promotion of various products other than contraceptives. Findings from this study may also be used by the Government of Kenya to have a wider range of communication strategies to implement while considering various aspects (price, place, and promotion) of marketing to give priority in enhancing the uptake of contraceptives among the youths in Turkana County as well as the Country at large.

This research may give insightful information to the Ministry of Health (MOH) in prioritizing activities in their annual plans, which is used for the annual budget appropriation to the various departments especially National family planning program. More specifically, the findings may be useful in guiding the MOH when considering communication and advocacy activities. Input from this study could be used as a guideline for establishing comprehensive promotion models based on the Turkana

context.

CHAPTER TWO

LITERATURE REVIEW

The aim of this chapter is to expound on the Theoretical and Empirical literature identified with the relationship between promotion and the use of contraceptives among the youth in Turkana County.

2.1 Theoretical Literature Review

2.1.1 Social Subjective Hypothesis

Social subjective hypothesis proposes that an individual's acquisition of knowledge can be from observing and emulating others through social relations, understandings and medial impacts. Thus people do not learn new behaviors by simply stumbling upon them but rather by replication of the actions of others, (Santrock, 2008).

Social learning hypothesis framed the premise of social intellectual hypothesis. Millar and Dollard (1941) who thought of the social learning hypothesis, recognized four key considerations in adapting new conduct which are: drives, signals, reactions, and prizes. They recommended that if one somehow managed to be affected to take in a specific conduct, then that specific conduct must be watched, imitated and remunerated with an encouraging feedback.

This hypothesis is applied in different areas today. It is utilized as a part of broad communications, general wellbeing, instruction, advertising and so forth. A case of this is the utilization of celebrities to embrace and associate various items with specific gatherings in the public eye. This hypothesis can be applied to ensure the success of contraceptive campaigns to the young people in remote settings. Through identifying a peer to relate with, increased self-efficacy and duplicating proper prevention actions can

help transform the community to be more aware of the family planning methods (Miller & Katherine, 2005).

2.1.2 Systems Theory

The systems theory conceives society as a biological organism with various parts. Each part has a role (function) that somehow tends to be mechanical and orderly. Every part of the system must work for the whole system to function. Just like structural functionalism, systems theory underscores the essence of interdependence of parts, (Turner, 1991). The main functions of any social systems are pattern maintenance (the preservation as reproduction of a systems essential characteristics), adaptation (system's ability to cope with changes in the environment) goal attainment (systems have goals for survival) and integration, requiring that various parts of the system work in harmony, (Ritzer, 1983).

The key assumption of this hypothesis is that individuals rely on their close social surroundings for an acceptable natural life and thus advertisement focuses on such systems. Using this theory, marketers can understand where the elements of interaction between customers and their environment converge. Advertisers may fail to achieve their desired goals because of difficult interactions. This theory is applied in social systems, for example, families, groups and welfare service agencies.

Turkana community falls both under families, groups and welfare service agencies due to co-existence of socio-cultural, religious and contemporary lifestyle in the county. This theory, in this study, lays an essential framework in understanding the functional relationships between various marketing elements (advertising, life style, culture and price) and the functional relationship between the community living in Turkana and the forces within their immediate environment, and how they influence their buyer decision making especially of the socially marketed contraceptives.

2.1.3 Social Interaction Theory

Behrama *et. al.* (2009), defined social influence as ‘a composition of social setups reinforced or modify customs by giving examples of admirable behaviors that may be copied by others people in a community. They went further to discuss that social learning can reduce doubt related with interactions e.g. family planning through social support networks that provide new information and facilitate evaluation of that information.

Individuals make decisions not on social isolation but by interacting with others. There is a relationship between contraceptive choice and contraceptive usage behavior. This relationship is difficult to reconcile with standard individual centered explanatory frameworks. Social learning reduces uncertainty associated with interactions e.g. family planning through social networks that provide new information and facilitate evaluation of that information, (Behrama *et.al.*, 2009)

2.2 Empirical Literature Review

2.2.1 Advertising and Contraceptive Usage Behavior

Reaching out to large populations or masses overtime have been done through mass media campaigns. They have been exposed to information through frequent engagement with various channels such as: television, radio, and newspapers. This information in most cases it is usually passive. The spreading of this mass information is always challenging with other factors which include: continuous product marketing, influential social standards, and actions determined by habit or dependence (Melanie,2010). Today every person is experiencing a mass media activity all over. These activities are such as television, advertising, films, videos, billboards, magazines, movies, music, newspapers, and internet, (Latif, *et al.*, 2011).

Today, one of the significant communication link between the manufacturer and the

consumer is publicizing. For an organization to be an outstanding brand they need to put resources into their promotion exercises, for which the consumer market has been dominating through adverts, (Hussainy, et al., 2008). Promotion has the potential of influencing brand decision among buyers, (Latif, et al., 2011). In his audit, how national battles prompts to conduct change, Flay (1998) watched that broad communications all alone is successful yet when given social bolster it is more powerful contrasted with survey joined with printing however both mix are more viable contrasted with review alone. He inferred that, broad communications wellbeing advancement projects could be more viable than numerous scholastics may have thought. Hence the information important to guarantee such achievement is genuinely deficient.

Publicizing is a type of advancement. Publicizing, of all promoting instruments, is outstanding for its enduring effect on the brain of the viewers, as a result of its extensive presentation, (Katke, 2007). It serves as a strategic tool in creating brand awareness in the brain of a possible consumer to make purchasing decisions. It has the capability to affect a persons way of thinking, behavior, lifestyle, performance and generally, a group's way of life, (Latif *et. al.*, 2011).

While researching on the effect of promotion, it's key to offer awareness of the variables that influence customer conduct. Kotler (2004), categorized elements that influence consumer conduct as: psychological, personal, social and cultural.

Customer purchasing conduct is characterized as the buying behavior of individuals and family units who buy products and ventures for personal consumption, (Kotler, 2004). Publicity then again is a methodical exploitation of business exhibition of ideas and strategies to the examination, organizing, implementating, and valuation of projects, (Gordon, 2006). These projects are projected to influence the considered behavior of

target gatherings of people in a way that enhances their own welfare, (Andreasen and Bass, 1995).

There are four key components of the promotion blend called 4 Ps and are essential to advertising. They are: Product (the heap of advantages), Price (lessening the heap of advantages or costs), Place (conveying the advantages and expenses to the correct place at the perfect time) and Promotion (illuminating and convincing the expenses and advantages), (Maibach *et. al.*, 2002). Considering these components, we can say that conduct change through promotion includes components that go past education. Promotion programs intend to change ingrained behavioral choices by through influencing forces and benefits. The results is to have positive behavior and diminish negative behavior, (Maibach et al., 2002). Promotion applies behavioural theories to guide its programmatic approaches.

It is through publicizing that customers are educated or find out about the availability and the advantages of commodities or services. Its fundamental objective is to convince customers to purchase the publicized commodity or service, (Eva-Lena, *et al.*, 2006). In the meantime, it fortifies the sales representatives' individualized messages, while attracting new clients to the business and also keeping up existing clients, (Taylor, 1978). A lot of cash is spent in publicizing to keep people (markets) keen on an items or services. In order to accomplish their goals, it is vital for advertisers to understand what makes prospective customers behave the way they do. Promotion starts with building up purchasers' profiles. It entails the research of consumer's habits; their psychological and passionate processes and their physical movements, (Arens and Baughman, 1996).

2.2.2 Lifestyle and Contraceptive Usage Behavior

An individual's attitude, abilities and perception are shown in his/her lifestyle. Way of life

is a method for building a feeling of self and making social representations of images that reverberate with individual character. Not all parts of a way of life are willful. They can be dictated by different elements. Elements like encompassing social and specialized frameworks may restrain the way of life decisions accessible to the individual, (Spaagaren and Bvanvilet, 2000). Hence lifestyle can define a person's pattern of consumption, that reflects their choice and how they spend their time and money, (Solomon, 2007).

Individuals will have different lifestyles despite coming from a similar culture, social class, training foundation and occupation. An individual's way of living is incompletely affected by whether he or she is cash obliged or time compelled. Cash compelled customers have a tendency to be cost cognizant, though time obliged shoppers are inclined to multitasking. For time-obliged buyers, time is more essential than cash, and they are frequently eager to pay more for the items and administrations that will save money on their time, (Kotler, *et. al.*, 2009). According to the United Nations Population Division, there is need to improve understanding of family planning issues among journalist and to promote accurate mass media representation of family planning issues in Kenya.

2.2.3 Culture and Contraceptive Usage Behavior

Culture is one of the strongest determinants of how people communicate; not just how they say something but how they choose the tools they use to get a message across. It is assumed that no one is born with culture but rather it is indoctrinated in an individual. Culture affects individuals from birth and in adulthood. Social qualities will keep a man from accomplishing something that is regular in another culture or support conduct that is remarkable somewhere else. Subsequently, it is key to note that the promotion methodologies that are applied, should consider the way of culture, (Darly &Luethge,

2003). Where audiences are socially and linguistically diverse, advertisers need to address issues such as diverse cultural values, practices and attitudes.

Promoting to audiences with multicultural differences, segmentation of the audience is an approach that should be frequently applied. This method involves structuring the promotion program to fit the various segments of the target audience inclusive of their different languages. Therefore, cultural issues and attitudes are considered which eventually enable achievement of goals of advertising at the time, (Kotler, 2004). There is a need to consider a wider view of advertising, where the campaign seeks to influence even the cultural aspect as much as we want to change individual behaviour, (Coffman, 2002). Advertising should embrace a broader perspective that encompasses not just individual behaviour, but also the cultural and physical determinants of that behaviour (Donovan, 2005). Contraceptive-promotion efforts should be attentive to community-level social norms, population trends and informal social relationships and interpersonal communication.

2.2.4 Empirical Studies

Habibov and Zainiddinov (2017) conducted A study on the effect of TV and radio family planning messages on the probability of modern contraception utilization in post-Soviet Central Asia. The study showed that exposure to TV family planning messages increases the possibility of the audience using modern contraception methods. The chances of a woman to use modern contraceptive after seeing message on TV improved by about 11 and 8 percent. They went further to conclude that the likelihood of using modern contraception would improve by 10–7 per cent in Kyrgyzstan and Tajikistan respectively, if every woman in Kyrgyzstan and Tajikistan had a chance to watch a family planning message on TV.

Okibo *et.al.* (2015) conducted a cross-sectional study on exposure to family planning messages and modern contraceptive use among urban men in Kenya, Nigeria and Senegal. They found out that men in Kenya who were exposed to community promotional events had about four times odds of using modern contraceptive than those who were not (aOR: 3.70; 95 % CI: 1.97-6.97). In Nigeria men who were exposed to English language slogans by Nigerian Urban Reproductive Health Initiative (NURHI), there was a borderline association ($p < 0.10$) with use of modern contraception (aOR: 1.39; CI: 0.97–2.01). A positive significant was seen in Kaduna but not in Ibadan. In Senegal men who were exposed to television advertisement were positively associated with use of modern contraception (aOR: 1.40; 95 % CI: 1.03–1.89). Those who heard a religious speaker talk about family planning favourably had a positive association with modern contraceptive use (aOR: 1.72; 95 % CI: 1.25–2.38). Lastly those exposed to radio program had a borderline ($p < 0.10$) positive association with modern method use (aOR: 1.41; CI: 0.98–2.04). The study demonstrated that targeted demand generation activities can lead to improvement in men reported use of contraception. The study concluded that the association seen is similar to the results found for women only with notable differences.

The advantages of promotion could be felt at the individual or society level in comparison with commodities or services paid by the consumer. This is specifically the case with the ever-changing attitudes for the inhibition of problem behaviours, (Donovan, 2010). In another study that contrasted promoting programs in South Asia and select successful general public health programs in the USA, it was noticed that American battles will probably include immaterial ideas, for example, changes in thoughts, dispositions and ways of life. As such the 'price' or costs of change addressed were the perceived or psychological barriers, (Saini, 2012).

In view of the information from 1989 Kenya Demographic and Health Survey, both learning and endorsement of family planning is essentially satisfactory in Kenya. Among 98% of couples one or both know about no less than one modern method of contraceptive and 85% of the couples favor the utilization of family planning methods. The discoveries demonstrated that 82% of the couples talked about with their partners about family planning. 75% of husbands and 67% of wives accurately anticipated their companion's endorsement of family planning. Desire for more children, husband-wife communication, knowledge and approval of family planning and ideal family size are significantly related to the current use of family planning. Multiple logistic regression analysis indicates that husband-wife communication is highly significant with the current use of contraceptive (Lasee and Becker, 1997).

2.3 Overview of the Literature

Mass media campaign are used in today's world to convey information to a wide and diverse population. As much as the aim for advertising is to create awareness of the manufacturer product to the consumer, it is also to influence the behavior of the consumer. Despite the strong evidence of the use of the three marketing variables; pricing, lifestyle and social marketing the concern with the effective application of other advertisement components is to enhance the usage behavior. Purchasing power and time availability influences the lifestyle of an individual hence will influence the choices the consumer makes when it comes to consuming a product or a service.

Culture is a key consideration when planning to advertise to a target audience. Otherwise it may hinder its effectiveness of the promotion or the desired results may not be experienced. There are four factors that influence new behavior: drive, cue, responses and rewards, (Miller and Dollard, 1941). By considering these factors, it may help ensure

successful contraceptive campaigns among young people in remote settings, (Miller and Katherine 2005). The systems theory clearly shows that people depend on systems in their immediate environment to be satisfied with life. Therefore, advertisement of services or products should not be done in isolation with the existing systems of the target population. An understanding of how the immediate environment influences the buyers' decision on socially marketed contraceptives on the people living in Turkana county, will help in selecting the best advertising channel to reach out to the community.

Based on the social interaction theory, individuals do not just come up with new behaviors but rather through observation of others through interaction. With the modern world interaction has been enhanced via mass media. People of influence or peers whom the youth identify with can be used to impact new behavior among the youth in terms of contraceptive use.

Findings from various studies that have been conducted have shown that there is an increase or consumption of contraceptive methods after target audiences are exposed to family planning promotional programs. Promotion of health messages resulted in positive outcomes in most studies with evidence of positive change in behavior seen in the targeted population.

Unfortunately, few studies on effects of advertisement in increasing consumption of health commodities or services have been done especially for marginalized communities. Most of the studies focused on urban and peri –urban areas. Communities that live in arid and semi-arid areas and practice nomadic lifestyle, studies on how advertisement influences them in terms of consumption of goods and services is minimal. There is an unmet need in terms of contraceptive coverage in these areas and studies need to be done to help in guiding for the provision of family planning services these same areas.

This study will serve as guide for researchers who would want to conduct further studies on advertisement of various products other than contraceptives especially among nomadic communities and marginalized areas. Since health care in Kenya is devolved, this study will give insight to the County government of Turkana on establishing comprehensive family planning promotion models for its residents.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter presents overall description of the research design, analytical framework, model specification, definition and measurement of variables and finally data sources.

3.2 Research Design

This study was done in Turkana County. It will use descriptive research design. It involves data collection from a section of a population so as to know the current status of the population with regards to one or several variables, (Mugenda, 2003). This method is chosen for it enables the researcher to use descriptive statistics which involves measures of central tendency (mean, mode, median, standard deviation) and frequency distribution. It will help the researcher to figure out facts based on available information and search opinions. Ultimately, the researcher will be able to describe, analyse and interpret the relationship between the variables involved in the study.

3.3 Analytical Framework

The study considers consumer theory of demand as proposed by Pindyck and Rubinfeld (2008). The theory of consumer demand has been used as the basis for this study. According to them, individual demand curve under the theory is related to indifference curves preferences, utility and budget constraints. Similarly, the theory states that consumers allocate income among various goods and services with a concern of welfare maximization (Pindyck and Rubinfeld, 2008).

Suppose then that a household maximizes its utility function as indicated below;

$$U = g(H, C)$$

1

Where; U is the utility of the household.

C is the consumption goods.

H is the health of the youth.

This utility function is maximized by the household subject to a budget constraint and health production function, which depends on market purchased inputs. Hence, the following is the expression of the budget constraint;

$$P_k K + P_l C + P_c C = Y \quad 2$$

Where; P_k is the cost paid in order to acquire appropriate contraceptive,

P_l is the price of other market inputs.

P_c is the price of consumption goods and

Y is the household income.

The health production function (H) is given by;

$$H = g(K, L, M) \quad 3$$

Where M is the price is the price of other market inputs and K is the price of contraceptives.

Where L includes both youth predisposing and enabling factors for instance; age, marital status, accessibility, advertisement, quality, education etc.

We can use equation 1, 2 and 3 above and then develops the following langrage function below;

$$L = g(H, C) + \gamma_1 (Y - P_k K + P_l L + P_c C) + \gamma_2 (H - g(K, L, M)) \quad 4$$

When we solve equation 4 above, we generate the following reduced demand function for contraceptive use among the youth;

$$D_l = f(P_k, P_l, P_c, Y, M) \quad 5$$

Where

D_I is the demand for contraceptive services, while P_k, P_i and P_C and Y and K are as defined earlier.

3.4 Model Specification

Based on both the conceptual and analytical frameworks, we may explore the effect of advertisement on contraceptive usage by youths in Turkana County by employing binary probit regression model which lies on an interval of between 0 and 1. This is a probabilistic distribution from where we shall interpret the probability of either using or not using any contraceptive method. We may make an assumption that the error term takes a standard normal distribution. Since we cannot observe the latent variable y^* , similarly we cannot be able to estimate its variance (Green, 2008). However, there exists a linear relationship between the unobservable variable y^* and explanatory variables (X_i) represented as:

$$y^* = X_i\beta + \mu \quad 6$$

Where y^* is unobserved/latent variable, X_i is a pool of independent variables, β are parameters to be estimated and μ is the random error term. From equation 6 above we shall link unobservable variable y^* to the observed binary variable y as expressed below;

$$y = \begin{cases} 1 & \text{if } y^* > \tau \\ 0 & \text{if } y^* \leq \tau \end{cases} \quad 7$$

Where y is the probability of using contraceptive services, 1 if one utilizes ever used any contraceptive service and 0 if otherwise; τ represents the threshold beyond which one is said to have utilized contraceptive services. Since probit model makes an assumption that

the distribution is normally distributed with a mean of zero and a variance of one, we estimate the marginal effects, in order to interpret the results of the probit model. This reflects the change in the probability of experiencing an event that is usage of contraceptive services by youth in Turkana County, given a unit change in any of the explanatory variable. In specifying our model, we use a general multiple analysis to explore the effect of advertisement on usage of contraceptive services. The general model is represented as follows;

$$Y_i = \beta_0 + \beta_1 X_s + \varepsilon_i \quad 8$$

Where Y_i is dependent variable that is ever used contraceptive services as shown in the analytical framework while X_s are the explanatory variables, (advertisement and other control variables like age, education, distance, marital status among other intervening factors) and ε_i is the error term.

3.5 Definition, Measurement and Expected Signs of Variables

Table 3.1: Definition variables

Variables	Measurement	Expected sign
Dependent Variable		
Usage of contraceptive	Usage of contraceptive if yes =1, if No =0	
Explanatory variables		
Age	Age of the youth in years	We expect a positive sign
Education	No Education; 1 if (Yes), 0 if (No) Primary level, 1 if (Yes), 0 if (No)	We expect a positive sign for those who are educated. More years of schooling are associated with higher salaries and a higher value of time.

	<p>Secondary level, 1 if (Yes), 0 if (No)</p> <p>Tertiary level, 1 if (Yes), 0 if (No)</p>	
Informal/formal employment	Occupational status=1 if employed, 0 otherwise	We expect a positive sign. Employed youths are more likely to value their health and thus likely to use contraceptives as they are even provided at work place
Marital status	Marital status=1 if married, 0 if not married.	We expect a positive sign if married
Household size	Family size under one household head	We expect a positive sign from those with large family size.
Residential status	Urban=1 and 0 otherwise	We expect a positive sign if one is a resident of urban areas
Gender	Gender=1 if male headed household, 0 if female headed household	We expect a positive sign by male headed households
Advertisement	Proxied by access to information = 1 if possess either radio, TV or reads newspapers, 0 otherwise	We expect a positive sign to those youths who possess either radio, TV or reads newspapers. Frequency of listening to radio, watching a television, or reading the newspaper is expected to increase the probability of using contraceptives.

Source: Author, 2017

3.6 Data Sources

The study utilizes a family based optional cross sectional information which was sourced from Kenya Demographic Household Survey 2013/2014 (KDHS, 2014). This review is typically directed after span of five years both in districts and in Kenya. This information is relied upon to give general data including general wellbeing condition of the populace. The study gathered family unit data on the prophylactic use where the separate respondent reacts on whether they ever utilized any preventative strategy or not. Adolescent respondents likewise investigated ownership of TV, radio or read daily paper or posted signs which are utilized as an intermediary to promotion. Further, social and lingual factors are said to affect how young people react to queries about wellbeing status, use and contentment, making it difficult for how this data is handled or interpreted.

CHAPTER FOUR

RESULTS AND DISCUSSION

4.1. Introduction

This chapter provides the results of analysis regarding contraceptive uptake in Turkana County. It first presents the summary of the data through descriptive statistics and then it presents the results and discussion of the empirical findings. The binary regression model was used in estimating the influence of advertisement on contraceptive uptake in the county.

4.2. Descriptive Statistics

To describe the characteristics of the respondents, our study used means, standard deviation, minimum and maximum values. Approximately, 594 respondents were reported to be youth. The youth in this study is by the Kenyan definition of individuals aged between 18-34 years. The variables of interest include contraceptive uptake as a dependent variable and advertisement as an independent variable. As indicated in Table 4.1, out of the entire youth population surveyed, approximately 6.7 per cent were found to embrace contraceptive with a variation of 25 per cent.

On advertisement, about 9.2 per cent of the respondents were exposed to media for advertisement. The study considered youth aged between 18 and 34 years old but the findings showed that they were aged between 20 and 34 years. Similarly, about 54.2 per cent of the youths were married with 34.8 per cent were residents of urban areas.

Table 4.1: Summary Statistics

Variable	Observations	Mean	Std. Dev.	Min	Max
Contraceptive Uptake	284	0.0669014	0.2502922	0	1
Advertisement	594	0.0925926	0.290105	0	1

Age	594	28.85017	3.608979	20	34
No education	594	0.7861953	0.4103361	0	1
Primary education	594	0.1902357	0.3928178	0	1
Secondary education	594	0.0117845	0.1080059	0	1
Higher education	594	0.0117845	0.1080059	0	1
Married	594	0.5420875	0.4986454	0	1
Gender of household head (1=male)	594	0.2845118	0.4515619	0	1
Employment status	284	0.3309859	0.4713987	0	1
Place of current residence	594	0.3484848	0.4768921	0	1
Household size	594	4.986532	2.036717	1	10

Source; Author, 2017

On educational attainment, the study found that about 78.6 per cent and 19 per cent of the respondents had primary and secondary education respectively, while only 1.2 per cent had higher education level respectively. The average household size was five members whereby the household with the lowest had one member while the largest size had ten members. Table 4.1 shows other details.

4.3 Correlation and Normality Analysis

This is normally conducted so as to establish the correlational relationship existing between dependent and independent variables of the study. The direction of association between variables is indicated with the positive and negative signs in the analysis.

Based on the analysis in Table 4.2, contraceptive usage was shown to only be negatively correlated with being married and household size, while other variables including advertisement displaying a positive correlation. Other correlations are as indicated in the correlation Table 4.2.

Table 4.2: Correlation Matrix

Variables	Contraceptive Uptake	Advertisement	Age	Education	Married	Gender of household	Residence	Employment	Household size
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						head			
Contraceptive Uptake	1.0000								
Advertisement	-0.0249	1.0000							
Age	0.0662	0.0673	1.0000						
Education	0.2488	0.0047	-0.1118	1.0000					
Married	-0.1662	0.1450	0.0249	-0.1576	1.0000				
Gender of household head	0.1769	-0.0106	0.2288	-0.0304	-0.0889	1.0000			
Residence	0.1408	0.2368	0.2364	0.3078	-0.1180	0.0848	1.0000		
Employment	0.1111	-0.0919	-0.0176	0.1539	0.0360	0.0726	-0.0064	1.0000	
Household size	-0.0511	0.2427	0.4931	0.0016	0.0451	0.0939	0.3268	-0.0693	1.0000

Source: Author, 2017

Since all the correlation coefficients were less than the threshold of 0.5 hence multicollinearity is said to be absent.

Secondly, the study explored a normality test or the distribution of the residuals as shown in Table 4.3.

Table 4.3: Shapiro Wilk test of normality

Variable	Observations	W	V	z	Prob>z
Residence	244	0.57194	75.993	10.064	0.00000

Source: Author, 2017

The results show that the data used was not normally distributed as their p value was less than 5 per cent level of significance that led to rejection of the null hypothesis of normality of the residuals. To enhance better estimates, the study applied robust regressions.

4.4. Model Estimation and Interpretation

The study applied binary probit model to estimate the effect of advertisement on contraceptive uptake among the youth in Turkana County. Marginal effects were explored as shown in Table 4.4.

The results from the cross sectional study show a pseudo R square of 40.7 per cent with the significant overall p value implying that the variables considered jointly fit the model well (contraceptive uptake) in Turkana county.

Table 4.4: Marginal Effects of the Probit Model

Probit Regression (Robust)						
Number of Observations = 244						
Wald chi2(9) = 55.35						
Prob > chi2 = 0.0000						
Log pseudo likelihood = -39.5849						
Pseudo R2 = 0.4069						
Contraceptive use (Dependent)	Marginal Effects	Std. Error	t	P Value	Confidence Interval	
Advertisement	0.0041	0.0429	0.09	0.925	-0.0801	0.0882
Age	0.0177***	0.0055	3.21	0.001	0.0069	0.0286
Education levels						
Primary level		(not estimable)				
Secondary level	0.0505	0.1062	0.48	0.634	-0.1577	0.2588
Higher level	0.4979***	0.1565	3.18	0.001	0.1913	0.8045
Married	-0.1193***	0.0334	-3.57	0.000	-0.1848	-0.0539
Gender of household head	0.1146***	0.0326	3.52	0.000	0.0508	0.1784
Residence	0.0944***	0.0321	2.94	0.003	0.0314	0.1574
Employment	0.0504*	0.0280	1.80	0.072	-0.0045	0.1053

Household Size	-0.0457***	0.0118	-3.87	0.000	-0.0688	-0.0225
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***Significant at 1 per cent, ** at 5 per cent and * at 10 per cent

Based on the model results, Age, Higher level, Married, Gender of household head, Residence, Employment and Household Size were found to be statistically significant in influencing contraceptive uptake among youth in Turkana County. On the other hand, Advertisement which is the key variable and secondary level was shown to be statistically insignificant at all levels.

4.5 Discussion of The Regression Findings

Following the results from the model and variable of interest, advertisement was found to be statistically insignificant at all levels (1 per cent, 5 per cent) of significance. Despite having insignificant effect, advertisement was found to have a right sign. The positive effect implied that given advertisement, contraceptive uptake rose. Specifically, advertisement was found to increase contraceptive uptake by 0.41 percent. The findings concurred with the findings of Mahwah and Lawrence (2002) who demonstrated that broad communications social showcasing through TV, radio, web, open air and print publicizes works in changing wellbeing practices on a populace level. On the other hand, Wakefield, *et al.*, (2006) found that there was a slight connection between youth focused advertisement and behaviour of the youth. The study presumed that introduction of youth focused advertisement had no advantageous results for young people.

Other control variables that were significantly associated with contraceptive utilization include; age, higher level of education, married, gender of household head, residence, employment and household size. Age also increased significantly contraceptive uptake because of increased sexual activity. Higher education level had a positive and statistically significant effect in determining contraceptive uptake.

Youth population had the ability of understanding messages on contraceptives existing. The findings concurred with the results of Magadi and Curtis, (2003) who showed that the highly educated were the more likely to use long-term methods compared to those with no formal education who were most likely to use traditional methods. Also, being married led to a significant factor that lowers the likelihood of utilizing contraceptives since the culture encourages number of children as a sign of wealth. The study results differ with the study results of Kayongo (2013), who revealed that being married was significantly associated with condom use significantly.

The study also established the positive contribution of gender of the household head on contraceptive uptake in Turkana County where household headed by male person had high probability of using contraceptives compared to female headed household. This concurred with results of Kayongo (2013) which revealed that gender was significantly associated with condom use in Busia district. The study further found out that place of residence had an effect in contraceptive uptake among youth in Turkana County. Respondents who stay in urban areas had higher likelihood of contraceptive uptake compared to those in rural areas. The findings were contrary to the findings by Kofi, (2010) who found a negative relationship.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND POLICY RECOMMENDATIONS

5.1 Introduction

This chapter summarized the findings of the research study in relation to the stated objectives and research questions. It presented the conclusions of the study and gave recommendations emanating from the results of the study.

5.2 Summary

Advertisement is one of instruments of product promotion. It is outstanding for its enduring effect on the viewer's brain, as its presentation is much more extensive. It is a subset of the showcasing blend, in the advertising blend that is item, value, place and advancement. As a special approach, advertisement serves as a key instrument in making item mindfulness in the brain of a potential buyer to take extreme buy choice. It is through advertisement that customers are educated or find out about the presence and the advantages of items or administrations. Its fundamental objective is to convince the focused on customers to purchase the advertised item or administration.

The study established the effect of advertisement on contraceptive uptake among youth in Turkana County, Kenya. The study estimation was based on Kenya Demographic and Household survey of 2014 with the use of the binary probit regression model. The study tested significance at one per cent, five per cent and ten per cent significance levels with the dependent variable being use of contraceptive and advertisement as variable of interest with other control variables being age, education levels, married, gender of household head, residence, employment and household size.

From the findings, advertisement was shown to have insignificant effect on contraceptive use at all levels. Further, it was shown that control variables including age, higher level of education, being married, gender of household head, residence, employment and household size were found to be statistically significant in influencing contraceptive utilization among youth in Turkana County.

5.3 Conclusions

Advertisement may not actively and significantly contribute to usage of contraceptive; however other major factors need to be explored in policy determination.

5.4 Policy Recommendations

There has been a developing enthusiasm for and utilization of social promoting ideas, devices, and practices in all parts of human life. Taking everything into account, we can say that the utilization of advertisement is to impact conduct, give an efficient arranging process that applies showcasing standards and methods, concentrate on need key gathering of people fragments and convey a constructive advantage for society. However, the findings revealed insignificant effect of advertisement on contraceptive usage. Therefore, there is a need for consultative meetings to explore the more and better ways of disseminating the family planning messages to young people in Kenya.

Following the results, there is need for increased outreach educative programmes on methods and advantages of contraceptive use among youths in Turkana County to enhance knowledge. This should be a programme targeting youths in and out of schools, as well as those residing in urban areas. This should be geared towards equitability and accessibility of reproductive quality health services. Efficiency and effectiveness is key, in all service delivery at all levels.

5.5 Areas of Further Study

As indicated in the literature, considering customary comprehension, the utilization of advertisement can inspire individuals to follow up on their own wellbeing and prosperity. Based on this, this study mainly explored the effect of advertisement on contraceptive use amongst the youth in Turkana County. Cross sectional data was mainly used. Major intervening covariates were employed as well. There is a need for further studies focusing on the role of socioeconomic status or conditions on uptake of contraceptive among women in Kenya with key emphasis on regional variations. Other environmental actors also need to be considered in similar study. Comparative studies are also encouraged focusing on regional, national or counties.

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