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A STUDY ON THE INVESTORS AWARENESS TOWARDS HEALTH INSURANCE POLICY IN TAMILNADU

DR. P. RAMAN PROFESSOR PANIMALAR ENGINEERING COLLEGE CHENNAI

ABSTRACT

The topic of the study is about insurance awareness among general public in Tamil Nadu, the aim of the study is to find out investors perception towards insurance and their understanding on health insurance benefits, to study the insurers' knowledge about insurance coverage and others benefits and to evaluate the socio-economic profile of the insured and uninsured population by parameters such as Age group, Educational qualification, household income, occupation, etc. A primary survey of households was undertaken for four districts, covering both rural and urban areas, in Chennai, Vellore, Dharmapurai and Salem. The researcher used simple random sampling for conducting the survey. The sample size of the study undertaken by the researcher was 150 insurance investors. The data were collected from various investors through questionnaires. The descriptive method of research has undertaken for the study. The collected data had been analyzed by applying statistical tools such as factor analysis, discriminate analysis, Correlation, ANOVA, weighted average etc. The paper provides an insight of investor's belief and perception with respect to insurance. Findings, suggestions, and conclusion are given based on the values observed from the study.

KEYWORDS

insurance habit, awareness about health insurance, information flow and consumer behavior.

1. INTRODUCTION

nsurance occupies an important place in the complex modern world since risk, which can be insured, has increased enormously in every pace of life. This has led to growth in the insurance business and evolution of various types of insurance covers. The insurance sector acts as a mobiliser of savings and a financial intermediary and is also a promoter of investment activities. It can play a significant role in the economic development of a country, while economic development itself can facilitate the growth of the insurance sector.

2. OBJECTIVES OF THE STUDY

PRIMARY OBJECTIVE

1. To study the awareness on health insurance with particular reference to Tamil Nadu.

SECONDARY OBJECTIVES

- To study and analyse awareness levels of the insured and uninsured population with regard to health insurance.
- 2. To study the perception towards insurance and their view on health insurance benefits over investment in insurance.
- 3. To analyse the insurers' knowledge about insurance coverage and others factors.
- To evaluate the socio-economic profile of the insured and uninsured population by socio-economic parameters such as age group, educational qualification, household income, occupation, etc.

3. SCOPE AND NEED FOR THE STUDY

The growing need for financial education for the families to take better decision and to increase their economic security has been widely recognized. It is felt that well informed and well educated customers can create economic ripples. They make better financial decisions for themselves and their families, increasing their economic security and well being. Secured families are more involved in their communities as home owners and voters. They are more involved as parents with their children's schools and teachers, enabling better educational and economic outcomes for their children. They contribute to vital, thriving communities, further fostering community economic development. Thus, being financially literate is not only important to the individual household and family, it is also important to communities and societies. (Hogarth, Jeanne M., 2006). Insurance companies can address the problem of financial illiteracy of consumers by educating them.

4. REVIEW OF LITERATURE

Gweneth Norris, John Innes, (2002). This is an in-depth case study using a grounded theory approach to explore managers' views of ABC as part of the control system in an insurance company. Relevant issues are allowed to emerge from the data rather than imposing a theoretical framework upon them. Hypotheses are derived rather than confirmed. Issues emerging from this case study include: the relevance of ABC to managers, increased cost awareness coupled with the problem of taking qualitative factors into account, and the existence of different perceptions of managers within the same department. One hypothesis is how an understanding of ABC can affect job satisfaction by influencing the impact of ABC on managers' actions. In this case study process and non-process managers had different levels of understanding and use of ABC information. A second hypothesis is that how managers view ABC information depends on whether they adopt a personal or an organisational perspective. Keywords: Control systems, Cost awareness, Perception of management

Zuriah Abdul Rahman, NorzaidiMohdDaud, (2010), The purpose of this paper is to investigate first, the consumer buying behaviour and claims pattern of medical and health insurance (MHI)/medical and health tactful (MHT) policies and second, to determine whether moral hazard exists among policyholders at the time of application for the product and during claiming for compensation. The study was conducted on respondents from the insurance industry in Malaysia. It was found that most claims were rejected due to the discovery of some irregularities by the managed care organizations (MCO) while the Islamic insurer's claims experience, was otherwise. During the buying behaviour stage of MHT, there are fewer tendencies to withhold information but during the claiming stage, due to the generous level of compensation and their awareness of the coverage available naturally influence them to submit excessive claims. To a certain extent moral hazard is present when claims are made for longer disability durations than necessary, and having high average claims per person even for shorter duration disabilities. Keywords: Selection, Moral hazards, Malaysia, Medical insurance, Health insurance, Consumer behaviour.

Mohamed, Issam A.W. and Osman, Kamal M (2011) The current paper analyzes the role of health insurance in mitigating poverty severity in Sudan the case study of National Fund for Health Insurance-Khartoum State. It is highlighting the role of health insurance in lifting the cost-burden of medical treatment on poor families. The principle target is to introduce problems that negatively affect individuals and the range health insurance covers in the society. Moreover, the paper shall analyze the necessary and basic needs of poor families related to covering risk of illness. That includes health services that health insurance system provides. Field surveys were conducted for real data from selected population in Khartoum State and were analyzed, graphically and with cross-tabulation. The primary observed findings are that there is lack of database in relation to poor families in the state. However, health centers were available overall parts of the state and localities. That is an indicative of more awareness that reduces the cost of transportation for the poor. Based on the findings, it is recommended that it is necessary to promote health services of high quality with less cost. Wealthy people should be motivated to pay. Moreover, it is vital to set up a mechanism to improve living circumstances of the poor categories.

Banne, Ashok S and Bhola, Sarang Shankarin 2012, Life insurance penetration in India which is the major indicator of growth of insurance in the country was just 3.17% compared to Japan 9.2%, Taiwan 15.0% S. Korea 6.9%. (IRDA Annual Report 2012-13, p121-122) One of the important reasons for low penetration was/is

unawareness of the Indian people about need of insurance in their life. It is true that with the establishment of IRDA and with the entry of private sector insurance companies, life insurance market is witnessing introduction of innovative, need based and customer friendly products. However, still majority of the Indian population is either uninsured or under-insured. Yet, buying a life insurance policy is not a subject of preference on the 'agenda' of most of the Indian people. Those who take out an insurance policy give priority for tax exemption and saving rather than risk cover. This paper is an attempt to study the awareness about need of life insurance among the customers of LIC. This research revealed that the customers are aware about need of life insurance in their life and the Individual Agents of LIC are the major source of information for the policyholders. Keywords: awareness, insurance penetration, risk cover, innovative, individual agent.

Vellakkal, Sukumar, (2012). Adverse Selection and Private Health Insurance Coverage in India - A Rational Behaviour Model of Insurance Agents under Asymmetric Information. In the backdrop of the low level of health insurance coverage in India, this study examines the determinants of the scaling-up process of health insurance by analyzing the rational behavior of an insurance agent facing a trade-off between selling 'health insurance' and 'other forms of insurance' subject to his limited time and efforts, and the implications of such behavior on adverse selection and equity. The paper presents various pre-conditions affecting the rational behavior of insurance agents and also discusses two new concepts - 'insurance habit' and 'asymmetric information on health insurance schemes'. Further, the study examines various strategies followed by insurance agents for maximizing their net incomes. The theoretical proposition is empirically validated by applying a binary Probity model and the primary data collected by the author is used in this context. The study concludes that given the existing incentive systems in the Indian insurance market for promoting various forms of insurance, the low level of insurance awareness among the general public, coupled with the dominant role of insurance agents in the market results in a situation of: Low level of health insurance coverage, no adverse selection and inequity in health insurance coverage. Keywords: health insurance, insurance agent, asymmetric information, adverse selection, insurance habit

Since inception the Indian life insurance industry passed through many hurdles and hindrances in order to attain the present status. However, the income earning capacity, eagerness and awareness of the general public are the key determinants of the growth of any insurance industry. In the Indian context, the insurance habits among the general public during the independence decade was rare but there was a remarkable improvement in the Indian insurance industry soon after the economic reform era (1991) due to healthy competition from many national as well as international private insurance players. In this paper attempt has been made to analyse the overall performance of Life Insurance Industry of India between pre- and post-economic reform era. To measure the current status, volume of competitions and challenges faced by the Life Insurance Corporation of India and to measure the effectiveness of investment strategy of LIC over the period 1980 to 2009. Data were analysed by using T test and ANOVA. The study reveals that there is a tremendous growth in the performance of Indian Life Insurance industry and LIC due to the policy of LPG. Insurance industry also improved a lot due to the emergence of Private sector and opening up for foreign players. Further there is also a huge change in the investment pattern of LIC. There is an increasing trend toward the investment in Stock market by LIC from 60% to 93% from 1980 to 2009 due to the effective regulation of SEBI and increasing transparency of stock market. Keywords: Performance, Investment Strategy.

Ravi, Shamika and Bergkvist, Sofi (2013) our analysis shows that it is premature to dismiss the health insurance initiatives based on the existing analysis because these schemes perform better with time. This could be due to supply side factors such as improved implementation or demand side factors such as awareness of the scheme and financial literacy amongst users. To test this, we run the analysis by varying the definition of treatment group to only include districts that have schemes running for (a) at least a year and (b) longer than 2 years. The outcomes that we analyze are impoverishment, catastrophic healthcare expenditure and poverty gap change. Keywords: Publicly Financed Health Insurance, India

Claartje L. terhoeven, Joost W.M. Verhoeven, (2013), the effects of corporate social responsibility (CSR) communication on external stakeholders' perceptions and behaviors have been studied extensively; however, researchers have largely overlooked the effects of CSR communication on internal stakeholders. This study seeks to propose that, by enhancing employee awareness of the organization's CSR activities (aimed at society, the government, customers, and employees), organizational communication can increase affective commitment. Data were collected at a Dutch healthcare insurance company, using a web-based questionnaire (n=301). The proposed model was tested with structural equation modelling (SEM) using Amos. The bootstrapping results showed a positive association between information flow and affective commitment, with a mediating effect for CSR aimed at employees and customers. CSR projects aimed at the government and society at large did not mediate the relationship between information flow and affective commitment. The impact of CSR towards employees and customers can be explained by social exchange theory. When employees feel that their organization values their well-being and that of their customers, they reciprocate what they receive from the organisation by committing themselves to the organisation. As such, this study provides an important argument for the implementation of CSR activities: it increases the emotional attachment of employees towards their organisation. Keywords: Corporate social responsibility, Affective commitment, Information flow, Organizational communication, Affective psychology, Social responsibility, Corporate communications.

Shah, Vrushali Bhushan and Bhola, Sarang Shankar (2013) The study aims at finding perception of sample investors about insurance as an investment avenue. Study is based on primary data collected from 1289 sample investors from urban as well as rural area from Satara; collected with the help of stratified sampling on the basis of Socio-economic Classes. It was revealed that there is ample awareness as well as preference towards insurance as investment. Life and Health Insurance is an important objective for investment. Regression Analysis unveils the existence of demographic factors and objectives for investment in choice of insurance as investment. Since the calculated value of R square does not explain enough variance, there is a scope to state that there exist other factors which may be psychographic or behavioural which influence decision making about insurance as Investment Avenue. Keywords: Life Insurance, Demographics, Regression Analysis, Socio-economic Classes.

5. RESEARCH METHODOLOGY

The methodology of the study is descriptive research. It depends mainly on the primary data. The survey was conducted through questionnaire. The questionnaire was checked for reliability and validity. The questionnaire comprises both optional type and statement of likert's scale. The responses of these sections are obtained from the investors in the 5-point scale, which ranges as follows.5- Strongly agree 4- agree, 3 –neutral 2-Disagree 1- strongly disagree and 3-point scale with 3 – High 2-Moderate and 1-low.

The researcher used simple random sampling for conducting the survey. The sample size of the study undertaken by the researcher was 150 insurance investors. A primary survey of households was undertaken in four districts, covering both rural and urban areas, in Chennai, Vellore, Dharmapurai and Salem. Other areas were left out due to operational difficulties.

TOOLS USED FOR ANALYSIS

The primary data collected from the insurance investors are analysed by using the following statistical tools. Factor analysis, discriminate analysis, correlation, ANOVA, chi-square test, and weighted average.

6. LIMITATIONS OF THE STUDY

The research of the study has some limitations.

- 1. The study was based on a sample survey of only 150 respondents. Hence the results obtained cannot be generalized for the total universe.
- 2. Shortage of time was another limiting factor for conducting the survey in the other geographical area.
- 3. False response or biased answers given by the respondents may affect the quality of the results obtained.
- 4. Lack of interest disposed by a few respondents leading to unauthentic response.

7. DATA ANALYSIS AND INTERPRETATION

TABLE 1: DEMOGRAPHIC PROFILE

Gender	No of respondents	Percentage
Male	80	53
Female	70	47
Total	150	100
Marital status		
Married	100	67
Unmarried	50	33
Total	150	100
Age Group (in Years)		
Less than 25	20	13
25-30	25	17
31-35	30	20
36-40	35	23
Above 40	40	27
Total	150	100
Education qualification		
School level	25	17
Under graduation	35	23
Post graduation	55	37
Others	35	23
Total	150	100
Occupation		
Business	10	7
Salaried	50	33
Professional	25	17
Retired	20	13
Home maker	25	17
Agriculture farmers and others	20	13
Total	150	100
Household income (Rs. pm)		
Less than 10,000	15	10
10,000-20,000	35	23
20,001-30,000	40	27
30,001-40,000	35	23
Above 40,000	25	17
Total	150	100
Family size		
2	45	30
3	70	47
Above 3	35	23
Total	150	100
Area of living		
Rural	55	37
Urban	95	63
Total	150	100

From the above analysis about investors perception towards health insurance and the result of frequency distribution analysis are presented below. It is observed that 53% of the respondents are male and 47% are female. The high proportion of the respondents taken for the study was married (67%). With respect to the age group of respondents most of the respondents belong to the age group over 40 years. From the study with respect to occupation, the most of the investors belong to salaried class and whose qualifications were post graduates. In the study high percentage of the insured household's monthly income was observed to be between Rs. 20,001 to 30,000. Nevertheless, in both insured and uninsured households, a higher proportion of the respondents were in the urban category, with family size of 3 members.

TABLE 2: OPINION TOWARDS INSURANCE INVESTMENT DECISIONS

Attributes	No of respondents	Percentage
Radio	10	7
TV	25	17
Newspaper and magazine	15	10
Internet	28	19
Relatives and friends	32	21
Banners & hoardings	20	13
Agent	14	9
others	6	04
Total	150	100

From the study, it is inferred that friends, relatives & neighbors are the primary source of information for the households followed by Internet. Other major sources of information are television, banners & hoardings, news paper and magazines, agents, radio and others.

TABLE 3: TYPES OF INSURANCE TAKEN

Opinion	No of respondents	Percentage
No Insurance	25	17
Life Insurance	15	10
General insurance	10	7
Health insurance	50	33
Motor Insurance	20	13
Accident Insurance	23	15
Others	7	05
Total	150	100

From the analysis it is found that 33% of the insured respondents with health insurance followed by 17% were not insured and 15% of the respondents with accident and motor insurance, life insurance, general insurance and others.

TABLE 4: PERCEPTION TOWARDS THE CONCEPT OF INSURANCE

Opinion	High	Moderate	Low
Prevent certain events	55	60	35
Prevent damage to assets from certain events	40	60	50
Compensate for losses	50	65	35
Rebuild the asset lost due to certain events	35	40	75
Capital appreciation	65	55	30
Compensate for loss of life	65	50	35
Others	45	45	60

Applying weighted average method

Ranks	First	Second	Third
Weights	3	2	1

Weighted average rank

Factors		Rank			Average	Rank
Factors	1	2	3	Total	Average	Kalik
Prevent certain events	165	120	35	320	53.3	Ш
Prevent damage to assets from certain events	120	120	50	290	48.3	V
Compensate for losses	150	130	35	315	52.5	IV
Rebuild the asset lost due to certain events	105	80	75	260	43.3	VII
Capital appreciation	195	110	30	335	55.8	1
Compensate for loss of life	195	100	35	330	55.0	П
Others	135	90	60	285	47.5	VI

From the analysis about the perception towards the benefits of an insurance policy as ranked high, moderate and low, It is found that a high proportion of insured think that investment in insurance can get capital appreciation, insurance can compensate for loss of life, insurance can prevent certain unforeseen events and compensate losses, insurance can prevent damage to assets from them, the other factors were rebuilt the asset loss due to certain events respectively.

TABLE 5: PURPOSE BEHIND INVESTMENT IN INSURANCE

Opinion	No of respondents	Percentage
Savings tool	35	23
Protection tool	75	50
Both	25	17
None	15	10
Total	150	100

From the study it is found that the majority of the investors opinion towards the purpose behind the insurance considered as a protection tool 50%, followed by 23 % of insurer as savings tool. Other purpose behind investment in insurance is both savings as well as protection tool and 10% opine that the purpose is none.

TABLE 6: PERCEPTION TOWARDS THE BENEFITS OF HEALTH INSURANCE

Purpose	High	Moderate	Low
Protection against critical illness	68	46	36
Protection against all illness	55	60	35
Only OPD	50	40	60
Only hospitalization	60	55	45
Cash less facility	75	45	30
Tax benefits	55	65	30
Other benefits	45	65	40

Applying weighted average method

Ranks	First	Second	Third
Weights	3	2	1

Weighted average method

Factors	Rank		Total	Augraga	Rank	
ractors	1	2	3	TOLAI	Average	Kalik
Protection against critical illness	204	92	36	332	55.33	III
Protection against all illness	165	120	35	320	53.33	V
Only OPD	150	80	60	290	48.33	VII
Only hospitalization	180	110	45	335	55.83	П
Cash less facility	225	90	30	345	57.50	1
Tax benefits	165	130	30	325	54.16	IV
Other benefits	135	130	40	305	50.83	VI

From the analysis about the perception towards the benefits of health insurance, this has been ranked viz., high, moderate and low, it if found that a high ratio of insured think that health insurance can provide cash less facility in the event of hospitalization, health insurance will bear the cost of only hospitalization, protection against critical illness, Tax benefits, protection against all illness and other benefit such as OPD respectively.

TABLE 7: BASIC PURPOSE BEHIND INSURANCE

Purpose	No of respondents	Percentage
For savings	15	10
Tax benefits	25	17
For covering risk of life	20	13
For security to my family	30	20
Usefulness in emergency	35	24
All the above	20	13
None of the above	5	03
Total	150	100

From the study, it is found that most of investors' purposes behind insurance is useful in case of emergency (24%) followed by security to the family (20%). Other purpose is to gain tax benefit at 17%, for life cover and all other benefits including savings. Only meager at 3% opine that none of the above.

TABLE 8: AWARENESS OF INSURANCE POLICY

Purpose	No of respondents	Percentage
Security Purpose	10	7
Bulk return in future	25	17
Daughter's marriage	20	13
Children's Education	25	17
Good Return on Savings	20	13
Risk Cover and	35	23
Others	15	10
Total	150	100

From the analysis about the awareness level of insurance policy, it is found that a high percentage (23%) of the insured think that insurance can prevent certain unforeseen events (risk) and to get good returns in future and children education (17%). 13% of the insured think that to get good returns on savings and daughters marriage (13%) and only 7% opine that insurance is just for security purpose.

TABLE 9: FACTORS INFLUENCING THE INSURANCE DECISIONS

TABLE 5. TACTORS IN LOCITORING THE INSORDANCE DECISIONS						
Factors	No of respondents	Percentage				
Voluntary	20	13				
Advice of friends / Neighbor / Relatives	35	23				
Advice of agents	25	17				
Through Employer	25	17				
Advertisement	10	7				
Recruitment of the financier and	20	13				
Other Sources	15	10				
Total	150	100				

From the study, it is inferred that friends, relatives & neighbors are the primary source of information for the households followed by investment advisors and through employers. Other major influencing factors were 13% of the insurer on their own decisions and recruitment of financiers. Only 7% of the respondents are influenced by advertisement.

TABLE 10: RESPONDENTS' OPINION ABOUT INVESTMENT ADVISORS TRUSTWORTHINESS USING WEIGHTED AVERAGE METHOD

Attributes	No of respondents	Weights	Weighted average
Strongly agree	50	5	250
Agree	35	4	140
Neutral	30	3	90
Disagree	20	2	40
Strongly disagree	15	1	15
Total	150		535

Weighted moving average

Form the above table it is inferred that the respondents agree in their opinion regarding the trustworthiness of the investment advisors.

^{= 535/150}

^{= 3.565 = 4 (}approx.)

TABLE 11: COMPARATIVE ANALYSIS OF THE INVESTORS KNOWLEDGE ABOUT INSURANCE AND THEIR DWELLING REGION CROSS TABULATION

		Region				
Awareness		Rural	Urban	Total		
Security Purpose	Count	4	6	10		
security rulpose	Expected Count	4.9	5.1	10.0		
Bulk return in future	Count	15	10	25		
buik return in luture	Expected Count	12.3	12.7	25.0		
Daughter's marriage	Count	12	8	20		
Daugitter's marriage	Expected Count	9.9	10.1	20.0		
Children's Education	Count	10	15	25		
Children's Education	Expected Count	12.3	12.7	25.0		
Cood Boturn on Sovings	Count	7	13	20		
Good Return on Savings	Expected Count	9.9	10.1	20.0		
Risk Cover	Count	20	15	35		
RISK COVER	Expected Count	17.3	17.7	35.0		
Others	Count	6	9	15		
Others	Expected Count	7.4	7.6	15.0		
Tatal	Count	74	76	150		
Total	Expected Count	74.0	76.0	150.0		
Note: Chi-square value: 6.28; df: 6; Level of sig. 5%; Table value: 12.59						

From the above analysis, it is found that the chi-square value 6.28, p-value 0.00 are statistically insignificant at 5% level, this indicates that there is no association between the level of awareness towards investment in insurance with different region. Thus it can be seen that the dwelling region does not hamper the process of investment decision. Therefore, dwelling region of the investors (rural or urban) is immaterial of the investors' knowledge.

ANOVA

 H_0 = There is no significant relationship between the investment objectives and the investors level of satisfaction.

 H_1 = There is a significant relationship between the investment objectives and the investors level of satisfaction.

TABLE 12: COMPARATIVE ANALYSIS OF INSURERS' OPINION TOWARDS INVESTMENT OBJECTIVES AND THEIR LEVEL OF SATISFACTION

Descriptive Statistics								
Frequency	N	Mean	Std. Deviation	Std. Error	Lower Bound	Upper Bound	Min.	Max.
Safety	150	58.33	18.696	1.527	55.32	61.35	25	75
Security	150	51.33	8.082	.660	50.03	52.64	40	60
Liquidity	150	63.00	17.551	1.433	60.17	65.83	15	75
Marketability	150	66.33	23.528	1.921	62.54	70.13	15	85
Tax benefits	150	54.00	12.040	.983	52.06	55.94	30	60
Returns	150	58.33	18.696	1.527	55.32	61.35	25	75
Others factors	150	53.00	11.914	.973	51.08	54.92	35	65
Total	1050	57.76	17.246	.532	56.72	58.81	15	85

ANOVA								
Frequency	Sum of Squares	df	Mean Square	F	Sig.			
Between Groups	26957.143	6	4492.857	16.440	.000			
Within Groups	285033.333	1043	273.282					
Total	311990.476	1049						

From the above table, it is seen that the insurers opinion towards investment objectives (F=16.44) differ significantly with respect to the level of satisfaction. It is inferred that there is a relation between the investment objective and their level of satisfaction towards investment in insurance.

8. SUMMARY OF FINDINGS

From the analysis about investors awareness about health insurance and the result of frequency distribution, it is found that majority of (53%) of the respondents are male and married (67%) whose monthly household income is between Rs. 20,001-30,000. With respect to the age group of respondents most of the respondents belong to the age group over 40 years and they were qualified with post graduates. A higher proportion of the respondents belong to the urban category; whose family size is 3.

From the study, it is found that friends, relatives & neighbors are the primary source of information for the households followed by Internet. From the analysis about the perception towards the concept of insurance policy has been ranked high, moderate and low. It if found that a high proportion of insured think that investment in insurance can get capital appreciation and insurance can compensate for loss of life. From the study it is found that the majority of the insurer's opinion towards the purpose behind the insurance considered as a protection tool 50%, followed by 23 % of insurer as savings tool.

From the analysis about the perception towards the benefits of health insurance, this has been ranked viz., high, moderate and low, it is found that a high proportion of insured think that health insurance can provide cash less facility in the event of hospitalization, health insurance will bear the cost of only hospitalization, protection against critical illness, Tax benefits, protection against all illness and other benefit such as OPD respectively.

From the study it is found that most of investors' purposes behind insurance is useful in case of emergency (24%) followed by security to the family (20%). Other purpose is to gain tax benefit at 17%, for life cover.

From the analysis about the awareness level of insurance policy, it if found that a high percentage (23%) of the insured think that insurance can prevent certain unforeseen events (risk) and to get good returns in future. Friends, relatives & neighbors are the primary source of information for the households followed by investment advisors and through employers.

From the above analysis, it is found that the chi-square value 6.28, p-value 0.00 are statistically insignificant at 5% level, this indicates that there is no association between the level of awareness towards investment in insurance with different region. Thus it can be seen that the dwelling region does not hamper the process of investment decision. Therefore, dwelling region of the investors (rural or urban) is immaterial of the investors' knowledge.

From the above table, it is found that the insurers opinion towards investment objectives (F=16.44) differ significantly with respect to the level of satisfaction. It is inferred that there is a relation between the investment objective and their level of satisfaction towards investment in insurance.

9. SUGGESTIONS

The findings of the survey show that 37 per cent of the insured households feel that they perceive benefits of insurance as 'risk coverage'. Nearly one-third of the households indicated that they are willing to go in for insurance if it is customized to their needs. However, during any crisis, households are forced to take stock of their ability to handle longer-term social protection.

The study has noted that improving health insurance awareness requires both structuring and enhancing the penetration of an appropriate awareness creation campaign with a regional and spatial focus.

This suggests that public policy should address health insurance awareness needs of the people who need insurance the most, namely those who do not have other social security covers.

10. CONCLUSION

The study focused on awareness parameters such as life insurance, health insurance and general insurance, as well as the socio-economic characteristics of insured and uninsured households as defined in this study. The study also examined insurance awareness with regard to rights and duties and the grievance and dispute resolution mechanism. An analysis based on socio-economic parameters enables an understanding of the categories of people which are insured and aware of insurance. If not insured, the impact of financial loss can be disastrous for the economically poor people. Thus, the government needs to create appropriate awareness and take necessary steps to protect the poor households. Also, poor people cannot access improved health and educational facilities and this makes them more vulnerable.

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