

Assessing the Life Insurance Industry in Ghana

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Abstract

Insurance has a crucial role to play in every economy. In Ghana, there have been a number of disasters resulting in loss of life and property. This paper attempts to assess the life insurance industry in Ghana through a sample of 330 customers of life insurance companies operating in the Kumasi Metropolis. The study revealed that life insurance companies find it difficult to settle claim payment and subject customers to long processing period while some settlement end up in court. 70% of the customers do not received feedback after lodging complains. These insurance companies however collect their premium promptly.

Keywords: insurance, effectiveness, satisfaction, claim, premium

1. Introduction

Insurance involves pooling funds from many insured entities (known as exposures) to pay for the losses that some may incur. It offers protection against the economic impact of an untimely death, health, accidents, funeral among others. Insurance plays a crucial role in the functioning of modern economies. For example, the insurance penetration levels accounted for 4.8 % of the gross domestic product (GDP) of India in 2011 and further grew to 6 % in 2012 (Barik, 2012). The situation in Ghana is quite different as only 5 % of the population has an insurance product in the form of protection for themselves, their beneficiaries and possessions (NIC, 2011). The industry's contribution to the country's gross domestic product hovers around 1 %, as compared to South Africa 14.8 %, Namibia 7.3 %, Kenya 2.8 %, Nigeria 0.6 % and Malaysia 4.8 % (Swiss Re Sigma Report, 2012).

Ghana's insurance history dates back in the colonial era in 1924, when Royal Guardian Enterprise, currently known as Enterprise Insurance Company Limited was established. In 1955, Gold Coast Insurance Company was formed as the first indigenous private insurance company followed by State Insurance Company in 1962. By the year 2008, licensed insurance companies within the country had increased to 39, given the breakdown as 17 in the life insurance and 22 for non life insurance. Insurance companies in Ghana are in three categories namely; Life Insurance, Non-Life Insurance and Composite Insurance which is the combination of life and non-life insurance.

The players of the insurance market consist of insurance companies and policy holders (insurers). The insurance market is divided into the Life and Non-life insurance. Each market has its supply and demand. The demand side of the Life market is constituted by the policy holder who wants compensation upon death, terminal illness or critical illness, while the Non-Life market demand size is formed by the automobile and home owners' policy holders. The supply side of both markets is populated by insurers who seek to indemnify policy holders. Insurance market has tremendous effect on the national economy by creating jobs, paying taxes to government for other developmental activities and protecting the citizenry from loss of properties among others.

The 1989 insurance law, PNDC Law 229, established the National Insurance Commission (NIC) (Gadahn, 2010), as the authoritative body in charge of insurance issues in Ghana. It is mandated to ensure effective administration, supervision, regulation and control activities as enacted in the Insurance Act, 2006 (Act 724).

The commission was set up mostly to deal with the numerous complains of customers over the years concerning the type of services they received from the insurance companies. Customers are valuable assets for any organization as they are the ultimate destination of any products or services (Thapa, 2010). The success of any organization depends upon the satisfaction of the consumers since they are the end users of organizational products or services and can decide to stay or switch to other brands based on their satisfaction. The customer is the only source of the company's present profit and future growth (Gray & Byun, 2001). Due to high degree of globalization of markets and intense competition among the players in the insurance industry, more attention need to be paid towards customer satisfaction and retention if the major players do not want to lose their existing customers. The key sustainable competitive advantage in today's competitive business environments lies in delivering high-quality service that result in satisfied customers (Parasuraman, Berry & Zeithaml, 1991). Addressing customer needs had become a great differentiator, the most powerful competitive weapon which many leading service organizations possess (Rahtz, Sirgy & Kosenko, 1998).

Despite the establishment of NIC, Ghanaian insurance companies are often accused of behaving as if they are doing a favour to their customers. The insurance industry suffers most from negative image as a result of lower customer satisfaction perception (NIC, 2008). The general public has different perception on life assurance policy. Most of the time, clients complains of inability of insurance companies to pay prompt claims, sometimes

even denying them of the claims and ultimately ending up in the court of law. “At the year ending 2008, two hundred and forty-five (245) complaints were received from the public against insurance companies” (NIC, Annual Report, 2008). It is very common to hear people remarking that insurance companies are quicker in receiving premiums but slower when it comes to claims payment. Insurance companies have always been blamed for late delivery of services. It is commonplace to hear people complaining of late delivery of policy documents, renewal notices or even undue delay in responding to customers’ requests.

Considering the numerous insurance companies in Ghana and the easy access to every individual, customers are becoming intolerant and easily break up their relationship as problems arise. This has led to movement of potential customers from one company to another owing to ill-treatment. Customers in the insurance industry switch their whole business unlike those in telecommunication who partly switch to a competitor (Edvardsson, Gustafsson & Roos, 2004). Customer retention is a core concern of every organization. Due to this reasons, the satisfaction of the consumers becomes priority for any organizations including those in the insurance industry. The purpose of this study is to assess how life insurance industry in Ghana is performing. The study explores the extent to which claims assessment, premium payment, customer complain issues are affecting life insurance industry in Ghana. Our findings could enrich discussions of appropriate policy framework that could stimulate insurance sector of the economy.

The paper proceeds with the overview of insurance industry and customer expectations, methodology and data issues, reporting and discussion of empirical results and then conclusion.

2. Overview of Insurance Industry and Customer Expectations

Insurance is a pooling of risks by individuals, where part of the payment of the many is used to pay to the few who suffer losses (Sebiyam, 2005; Rejda, 1992; Gart & David, 1990; Troxel & Comick, 1983). Anderson and Brown (2005) opined that under a formal insurance arrangement, each insurance policy purchaser (policyholder) still implicitly pools his risk with all other policyholders. Insurance is designed to meet the financial well-being of an individual, company or other entity in the case of unpredicted losses. Some forms of insurance are compulsory while others are optional (Hoyoake & Weipers, 1999). Insurance operation in Ghana started far back in 1955, and the market is becoming more vibrant and continues to make progress especially between 2004 and 2009 (NIC, 2009). It has contributed immensely to the growth of the Financial Services Sector and helped propelled the economy of Ghana for the past years (All Africa Global Media, 2010). The industry has a huge potential, which has barely been scratched. Prospects in life businesses are yet to be fully tapped. Benefits that accrued from life insurance industry to the nation, organizations and individuals include the use of life insurance policies as collateral security for bank loans overdrafts, and mortgage as well as provision for retirement (NIC, 2006). Customers in this industry expect a lot from their insurers or service providers. They expect; prompt delivery of competent and efficient services paramount among which is payment of claims, knowledgeable and serviceable frontline staff that are ever prepared to give information on request and reliable feedback among others (Amartey-Vondee, 2007). Understanding customer expectations is an important and essential element in service delivery. According to Zeithaml, Bitner and Gremler (2003), customer expectation is basically a belief about the service delivery. Mainly two major types of expectation are predominant in case of life insurance purchasing scenario (Barik, 2012). These are ideal or desired service and adequate service. Of course both these service expectation varies from product to product, business to business, advisor to advisor and industry to industry (Barik, 2012). Customer satisfaction is an overall attitude towards a product or an organization that provides services or customer’s reaction towards the difference between customer’s expectation and what is received concerning the satisfaction of needs, desires or goal (Hansemark & Albinson, 2004). Good customer value can be achieved only when service quality, product quality and the value-based prices exceed the customer satisfaction. If one of these is neglected the customer satisfaction will suffer a tremendous setback. Even if price and the product are good but the service is bad, the entire image of the company product will be bad and the customer will certainly not be happy (McNeil & Crotts, 2006). According to Hoyer and MacInnis (2001) customers that are not satisfied may decide to stop patronizing a business to purchase insurance products and services, they may complain to a third party or the business organization and they may also give negative word of mouth. Customer dissatisfaction usually comes about as a result of poor business management and business practices (Broadbridge & Marshall, 1995). Ndubiasi (2005) and Pfeifer (2005) had posited that the cost of serving a loyal customer is five or six times less than the cost of acquiring a new one. This is line with the view expressed by Walsh et al. (2005) when he said that it is cheaper to look after existing customers than acquiring new ones. Service firms must therefore do something about it in order to provide good customer service; enhance customer loyalty and repeat patronage of service. Service failure as possibly perceived by customers is a major concern for the service firm because of its potential effects on the service outcome (Gustafsson, 2009). Services can only be experienced, because it is consumed at the point of purchase (Boadu, Dwomo-Fokuo, Boakye, & Frimpong 2014). According to Nyer (2000), good handlings and positive responses to customers’ complaints can increase customer loyalty to service industry. Broadbridge and Marshall (1995) posited that

consumers can resort to so many different kinds of actions in settling dissatisfaction. For instance, customers can take private or public action (Backlund & Holmgvist, 2006). Insurance providers need to be careful and provide adequate service to their various customers to avoid any misunderstanding that can end up in court for redress. This study examines how life insurance industry is performing in Ghana.

3. Materials and Methods

3.1 Area of Study

This study was conducted within Life Insurance Companies in Kumasi Metropolitan Assembly to have an in-depth understanding and appreciation of how customers assessed the performance of the industry. It is also aimed at identifying innovative measures and technology delivery channels that life Insurance Companies have deployed to ensure convenient insurance. The study was limited to Life Assurance Companies in Kumasi metropolis. Kumasi is the capital of the Ashanti region of Ghana and therefore considered appropriate because most insurance companies have branches located in it, to serve the middle belt.

3.2 Population

The target population for this study consists of all customers of life assurance industry with branches in Kumasi Metropolitan as at May, 2013.

3.3 Sampling Design, Size and Procedure

A sample size of three hundred and thirty (330) was selected from the customers of some life assurance companies operating in Kumasi Metropolitan as at May, 2013. The companies are UT life insurance, MET life insurance, Glico life insurance, Provident life insurance, Quality life insurance, Star life insurance, Phoenix insurance, Donewell insurance, SIC life insurance, Express life insurance and Enterprise life assurance.

All the eleven (11) branches of the life assurance companies in Kumasi were contacted for the study. In each branch, thirty customers were selected using purposive sampling. This method was chosen because the researchers targeted customers of the life assurance companies. This made the sample size to be three hundred and thirty (330) that is (30 customers in every branch multiply by 11 insurance firms).

The researchers employed probability technique to select sample respondents for inclusion in the sample for the study. They used random sampling techniques to select all the elements. Primary data for the study were obtained with the aid of questionnaire administered personally to the respondents. Data collected included claim assessment, assessment of premium payment, customer complaining issues, and customer switching in insurance companies. Information on general characteristics of customers were also obtained. Data gathered were analysed using descriptive statistics. The survey data were coded, verified and cleaned up, and then entered and analysed using the SPSS programme. The findings of the study were presented using appropriate tables and charts to ensure easy interpretation.

The survey distribution period of this paper lasted from May to September 2013. A total of 330 questionnaire were collected.

4. Results and Discussion

4.1 General Characteristics of the Respondents

The general characteristics of the sample are reported in Table 1. In terms of gender distribution, male respondents of the overall sample are higher than female respondents by 45.46 %. In terms of age, the result indicates that majority (76.36 %) of the respondents were within the age group of 21-50. This means that the customers are relatively young and can contribute towards effective insurance system in the economy over a longer period. In terms of educational background, the customers of life insurance companies tended to be highly educated, the majority had either a first degree or higher national diploma qualification. This means that life insurance industry has able and highly educated customers who understand the operations of the industry. This in the long run will help transfer knowledge and ideas easily among both customers and members of staff.

Claim, premium, complaining issues and switching variables are examined separately in the following section.

4.2 Claim Assessment Issues

This section of the paper presents an analysis of findings of the survey which explored how insurance companies in Ghana deal with their claims.

The respondents claimed that providing the documents posed a challenge and therefore one of the major causes of the delay. They are not made aware of the correct documents required in times of disaster. Again, they find it difficult to gather all the documents required by the insurance company. They may not able to get all the preferred certificates and documents due to delay from government offices and other state agencies. Examples of such documents include death certificate (in case of Muslims, a testimony from chief Imam), identification proof of the insured and nominee, original policy bond, postmortem report and photograph of the person at the accident place, first information report, among others. It is impossible for a country like Ghana to provide the photograph of a person at the accident site.

As indicated in Table 2, 63.64 % of respondents reported that they see claim payment by life insurance

companies as bad. This may be due to long, rigorous, cumbersome and frustrating process that customers of insurance products normally go through before they get access to their claims, according to the clients. If this assertion is not checked by National Insurance Commission, it will continue to affect customer satisfaction as well as the image of the industry. The researchers are of the view that the long process of evaluation of the documents is necessary as insurance is a high risk and as such effective measures should be put in place in minimizing this risk. However, it should not be unduly delayed since some of the settlement (money) needed are time bound example, those who insured for funeral, educational and accident policies. Customers assess the performance of their companies based on claim settlement ratio. If the claim settlement is not paid prompt, it affects their expectation. This finding is in-line with Amartey-Vondee (2007) view, which maintains that customers expect prompt payment, knowledgeable and serviceable frontline staffs that are ever prepared to assist their needs.

4.3 Assessment of Premium Payment

According to Table 3, 68.18 percent of the respondents consider the mode of payment of premium as not satisfactory. The remaining 31.82 percent see the mode of payment of premium satisfactory and nothing wrong with that. In Table 4, a majority of the customers agree to the fact that life assurance companies' premium charges are expensive. This suggests that insurance companies need to do more about their mode of payment of premium in order to attract more customers to their services/products. There must be reasonable rate of premium so that a lot of customers can patronize after fulfilling basic needs. Customers across the net anticipate low price products with same returns and other valuable distinctions. In order for life assurance products to be understood and patronized by more people especially rural folks who are supposed to be number one beneficiary of insurance products such as life, funeral policy, accidental policy, farming policy etc premium charges need to be reduced in order to attract more people to partake in insurance products.

In Table 5, 72.73 % of respondents scored the performance of the life assurance industry as above average. This means that, most of the life assurance companies are doing well in the country so far as collection of premium is concerned. This goes a long way to help government raise enough revenue through taxation from insurance companies to embark on developmental projects. The researchers are of the view that since life assurance companies collect their premium promptly, they should do well to settle their customers' on time to create good impression about their products. According to Zeithaml, Bitner & Gremler (2003), customer expectation is basically a belief about the service delivery. If they are not satisfied, the possibility of doing comparison to search for new abode for safety and security is great. The finding tend to support earlier research, notably, Hoyer and MacInnis (2001) who maintain that customers that are not satisfied may decide to stop patronizing a business to purchase insurance products and services, and they may also give negative word of mouth.

4.4 Customer Complaining Issues

Table 6 indicates that more than half of the respondents have never complained about a policy before. Even though less than half of the respondents have complained. This is very critical because the survival of any service company depends on such complaints and how they are addressed. It was observed that most customers complain about payment of low surrender values, delay in returning refund of wrongful deductions, unauthorized premium deductions, benefits promised by insurers differ from benefits on policy documents, among others.

The researchers are of the view that insurance companies should adopt efficient and prompt measures for handling of complains internally without allowing NIC to come in. This can serve as advertisement and customers will perceive the company as a better company. Again, if customers are allowed to go ahead and report complains to NIC, the likelihood of customers switching company will be high or will affect customer retention.

4.5 Feedback Issues

More than 2/3 of respondents claim they never get feedback after complaining. This may account for the reason why customers do not complain about policy (Table 7) frequently.

If customers lose interest about insurance product the negative effect will be disastrous for the system. According to the latest report from NIC (2013), ninety-five percent of Ghanaians do not have any form of insurance protection for themselves, their beneficiaries and possessions. If this trend continues, it will lower the confidence level of the few people who are already in the industry. The researchers are of the view that NIC as a regulatory body should come out with strategies to arrest the situation, so that people will gain confidence in the industry.

Customer switching in Insurance Companies

4.6 Rating of Service Providers by Customers

As observed from the Table 8, 45.45 % respondents rated the service offered by life assurance companies as satisfactory as against 54.55 percent who have dissent view about their performance and rated them poorly. This is perhaps due to the delay in payment of claims among others. And even some customers were of the view that insurance companies were giving back less to customers by way of claims. Again, this will account for the low patronage of the service. Customer dissatisfaction usually comes about as a result of poor business management

and business practices (Broadbridge & Marshall, 1995).

Insurance business should be conducted in a cordial atmosphere that is transparent, fair and cost effective manner. It is only through this that customers will continue to have good judgment as to whether they are receiving value for money, develop confidence and trust in the company as well as the industry. Regulators should not act like armchair operators but rather go to the field and monitor the activities of the insurance companies, and make sure that right things are always done.

4.7 Recommendation of Service Provider to any Potential Customer

Businesses all over the world are always in to get more customers in order to get returns on their investment to satisfy the major stakeholders. Insurance companies are no exception from this phenomenon, they are always ready to receive new customers through recommendation from existing customers. Table 9 shows the responses of customers concerning whether they are prepared to recommend their company to any potential customer or not. Nearly $\frac{2}{3}$ of the respondents accounting for 61.82 % said they will not recommend their company to any potential customer. This can lead to lower levels of customer base, affecting market shares, decreasing profitability of the company as well as government revenue through taxation. Individuals who may be subject to disaster can also be affected in terms of prompt response to their situation. Providing quality service is a means of ensuring customer satisfaction and retention, because it is widely held belief that service quality and customer retention are major drivers of profit, customer base and market share (Hoffman and Bateson, 2001). The researchers suggest that there must be frequent interaction between providers and receivers of service to identify problems faced by customers and address accordingly to head off any decision which may not be in favour of service providers.

4.8 Intention of Switching to any other Service Provider

Switching in insurance companies occurs when customers are not satisfied with their service providers or when a competitor introduce new product base on their specification. This can be classified as push and pull factors in insurance set up. With push factors dissatisfaction with service provided or service provider can lead to unwanted switching. Customers switch to another service provider due to many reasons, and it differs widely (Table 10). If there are no opportunity to voice these concerns customers tend to look elsewhere for another service provider. Under the pull factors, competitors can easily offer better products or services which can lure the customer to experience the service/product for first time. The customers need to scrutinize the services of the new provider to ensure that they know what the competition is offering. From Table 10, more than half of the respondents have expressed their intention of switching to other insurance company. Customers expectations regarding service and its delivery are high on their (customers) agenda, and need to be treated as such in order to create cordial environment towards building strong loyalty. Customers are essential resources to any business, determining future success. If customers keep on leaving, it will affect the company reputation and eventually collapse it. The effect of customer switching is enormous and represent both direct and indirect costs. The researchers suggest that operators of life insurance companies should be innovative in terms of idea generation and methods to differentiate their products to satisfy customers along the line for mutual benefits to establish among the key stakeholders all the time.

4.9 Reasons for Switching to Another Company

Switching has been a major concern to most insurance companies across the globe. It is prudent for insurance companies to conduct routine check about how customers view their services. This will help to address the issues involving the danger that customers face before making final decision to switch fully or partially to another service provider. From Table 11, the reasons for switching differ widely. Thirty-six percent of the respondents indicated that their intention to switch to another service provider is due to price of the insurance products. Insurance companies especially those in the developing world should distinguish themselves and attract those customers who do not feel bound ties to loyalty by offering them keener pricing, better service, better products that will make them feel for value for money. This in the long run will retain, attract and return move customers. But there should be a great concern to the insurance providers since soft pricing at times can cause serious destruction to their activities. For example, Singaporean Cosmic insurance in 2002 suffered from inadequate reserving. Even though the company grew rapidly in its competitive markets after introducing low pricing scheme and recorded huge patronage of its products, it later proved inadequate in the face of growing payments to policyholders, driven by court rulings on payments that were higher than anticipated.

The researchers are of the view that it is prudent for insurance companies to charge moderate price to its numerous customers. With the low price system, the companies are likely to expand their operations to attract new customers especially those who are in untapped segments. But they should at the same time be careful about how they approach the potential customers. Rigorous investigation should be conducted on the customers concerning potential risk (health problem, smoking, older person etc) that they are likely to cause. After that proper classification or categorization can be made and appropriate pricing scheme assigned to each category. This research therefore, suggests that poor pricing and poor service on the part of insurance providers can lead to customer switching to other service providers. Service providers spend a lot of money in acquiring new

customers after losing their loyal customers to their competitors. This is consistent with the previous research findings by Ndubiasi & Pfeifer (2005), Walsh et al. (2005). It is important to point out that insurance providers need to provide their customers with good services to avoid any change over.

5. Conclusion

The perception of Ghanaians toward insurance products must be of great concern to every citizen. Ninety-five percent of Ghanaians do not have any form of insurance protection for themselves, their beneficiaries and possessions due to bad perception. This has a negative implication towards nation building. Ghanaians over the years have witnessed a lot of fire outbreaks in market places, farms and other government agencies, accidents on the road and at the work places; gas explosion and house burglary among others. In all these incidents, the citizenry cry to the central government to come to the aid of the victims. This is because the casualties do not have insurance cover. There is the need to build confidence in the insurance sector and this will go a long way to help increase the patronage of insurance. This paper therefore, assessed the life insurance industry in Ghana using primary and secondary data obtained from customers, insurance companies and National Insurance Commission. The study revealed that life assurance companies find it difficult to settle claim payment and they subject customers to long processing period while some claim settlements end up in court for redress. Again a majority of the customers/policyholders agreed to the fact that the premiums charged by life assurance companies' are high. The operations of the service providers, according to a section of the customers need to be improved due to some lapses identified in the study. Approximately fifty-five percent of the customers rated the performance of life assurance industry in Ghana as unsatisfactory. In addition, 61.82 % of the customers indicated clearly that they will not recommend their service provider to any potential customer, and also more than half (½) of the respondents expressed their intention of switching to other service provider. All these give out a signal that National Insurance Commission needs to sit up in its dealings to identify the needs of customers and develop appropriate service quality strategies to meet their needs. It was clear that most of the life assurance companies are doing well in the country so far as collection of premium is concerned. The study also revealed that some (70.00 %) of customers do not receive feedback after lodging complains concerning their policies. Finally, it was evident that, customers switch to other companies for various reasons such as price, non preparedness of insurance companies to pay claims, quality of the service, and delay in processing of claims.

6. Recommendation

In the light of the findings, conclusion above and the benefits of insurance, it is recommended that the: government should play an important role in ensuring a conducive environment, capacity building, appropriate regulatory and legal framework as well as strategies to guide insurance operation in the country.

Also long processing of claim by insurance companies can be reduced through educating potential insured/customers about the documents needed for claim assessment, and this will address the negative perception people have about insurance. Even the companies can institute on-line payment of claims, where customers can fill all their documents on-line for onward processing for claim settlement to avoid unnecessary travelling. Also, insurance companies can reward their customers for loyalty through price discounts or extra value, publication of their names in national dailies, free insurance policy for a year, special dinner dance, meeting with CEO, among others.

Also, serious attention need to be paid to product differentiation, because it will help companies to distinguished their products from competitors, insurance companies should continue to design new products to suit customers' needs. Customers are always willing to pay for high price especially if product or service is of quality.

The National Insurance Commission (NIC) in collaboration with the insurance companies should develop an educational and information program on insurance policies to enhance public confidence in the insurance sector. This will go a long way to help increase the patronage of insurance products in the country and its contribution towards the economy.

NIC should develop a national league system for insurance companies and rate them bi-annually or annually according to their services to the general public. This will help the companies to play their role well as they know that the regulatory body is watching them.

The cost of disasters is enormous and therefore every citizen who lacks information must search for the relevant insurance information. Again, an assessment of available best services should be made by both new entrants and those who want to switch providers in order to select the best insurance company.

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Table 1: Sample Characteristic

Sample characteristic	Items	Frequency (N= 330)	Percent of Total
Gender	Male	240	72.73
	Female	90	27.27
Respondents age	Below 20 years	24	7.27
	21-30	72	21.82
	31-40	90	27.27
	41-50	90	27.27
	51-60	36	10.91
	61 and above	18	5.46
Education	Elementary	12	3.64
	Secondary	114	34.54
	Polytechnic	72	21.82
	University	120	36.36
	Others	12	3.64
Policy length	Below 1 year	60	18.18
	1-3 years	180	54.54
	4-6 years	45	13.64
	7 years and above	45	13.64

Source: Fieldwork, 2013

Table 2: Percentage distribution of clients perception concerning accessing claims

Variable	Number	Percent of Total
Excellent	30	9.09
Good	90	27.27
Bad	210	63.64
Total	330	100.00

Source: Fieldwork, 2013

Table 3: Is the mode of payment of premium satisfactory?

Variable	Number	Percent of Total
Yes	105	31.82
No	225	68.18
Total	330	100.00

Source: Fieldwork, 2013

Table 4: How do you rate premium charged by life assurance companies?

Variable	Number	Percent of Total
Expensive	135	40.91
Moderate	81	24.55
Low	51	15.45
Average	63	19.09
Total	330	100.00

Source: Fieldwork, 2013

Table 5: How do you rate the performance of the life assurance industry in terms of premium collection?

Variable	Number	Percent of Total
Excellent	105	31.82
Good	135	40.91
Average	75	22.73
Poor	15	4.54
Total	330	100.00

Source: Fieldwork, 2013

Table 6: Complaining about policy

Variable	Number	Percent of Total
Yes	156	47.27
No	174	52.73
Total	330	100.00

Source: Fieldwork, 2013

Table 7: Expected feedback after complaining

Variable	Number	Percent of Total
Yes	46	29.49
No	110	70.51
Total	156	100.00

Source: Fieldwork, 2013

Table 8: Rating of services providers by customers

Variable	Number	Percent of Total
Very satisfactory	70	21.21
Satisfactory	80	24.24
Poor	105	31.82
Very poor	75	22.73
Total	330	100.00

Source: Fieldwork, 2013

Table 9: Recommendation of service provider to any potential customer

Variable	Number	Percent of Total
Yes	126	38.18
No	204	61.82
Total	330	100.0

Source: Fieldwork, 2013

Table 10: Intention of switching to any other service provider

Variable	Number	Percent of Total
Yes	170	51.52
Neutral	50	15.15
No	110	33.33
Total	330	100

Source: Fieldwork, 2013

Table 11: Reasons for switching to another company

Reason for Switching	Number	Percent of Total
Price	120	36.37
Non preparedness to pay claims	90	27.27
Quality of the service	60	18.18
Long time in processing of claims	60	18.18
Total	330	100.00

Source: Fieldwork, 2013

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