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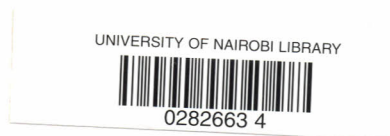
SERVICE IN THE INSURANCE INDUSTRY IN KENYA: THE

CASE OF NAIROBI PROVINCE

By

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A MANAGEMENT PROJECT SUBMITTED IN PARTIAL
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DECLARATION

This project is my own original work and has not been presented for a degree in any other University.

Signed----*Mairao*---------- Date--29/12/2003

Julia Muthoni Maina

This research project has been submitted for examination with my approval as a University Supervisor.

Signed----*Kibera*---------- Date----29/12/2003

Prof. Francis N. Kibera, phD
Supervisor

DEDICATION

I dedicate this project to my dear husband James Munyori for his undiminishing support and understanding which saw me through to the end.

ACKNOWLEDGEMENT

This project has been accomplished with the encouragement, support and contribution from a number of people who I am deeply indebted. First, I would like to give my special thanks to Prof. Francis Kibera, my supervisor, who gave me insightful guidance to enable me complete the project. I also wish to thank Mrs.Margaret Ombok, Prof. Peter K'obonyo and Miss Catherine Ngahu all from the Faculty of Commerce who made valuable contributions towards this project.

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I will forever be indebted to members of entire family for their support, encouragement, moral support and prayers. Special thanks to my parents who have been my major source of inspiration in all my endeavors.

Sincere thanks to all those respondents policy holders who agreed to take part in the research project and gave their time to provide information for the study.

To God, I say thank you! His grace has been sufficient for me.

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ABSTRACT

The decline of economic conditions in Kenya in the recent past has lead to compromise in enforcement of standards both in the private and public sectors. For example, law enforcement has declined, private developers of housing estates have tried to reduce costs but cutting corners during construction, public health education and support has declined considerably. This decline in standards has lead to people being exposed to increased risks of fire (from lack of enforcement of building standards), crime (from inadequate law enforcement) and diseases (from declining healthcare), among other risks.

These trends have resulted in an increased number of people taking out insurance to cover themselves against possible occurrence of risks. However, people turning to insurance companies have frequently expressed disappointment regarding their perceived levels of service by insurance companies.

This study was therefore conducted with the objective of finding out the factors that determine the perceived quality of service in the insurance industry in Kenya.

The focus of the study was all those individuals who have insurance policies in Nairobi. The study had three main objectives:

1. to identify the factors that customers consider important when judging quality of service in the insurance industry.

2. to assess the product knowledge level of various stakeholder groups.

3. to establish the extent to which customers are satisfied with quality of service in the insurance industry.

A sample of 150 was selected in three sectors. These were customers employed in the public sector, those employed by private firms and the self employed. The researcher managed to get 100 of them giving 67% response rate. The results showed that the factors considered most important by customers in judging quality of service are:

- company efficiency

- fast action on complaints

- prompt service

- understanding of customers' needs.

From the findings, it can be concluded that most customer respondents have a good knowledge of the type of insurance covers available but do not have as much knowledge on the names of companies offering these or the detailed features of the insurance covers. This research only focused on the underwriters; hence a similar study should be carried out to find out the quality of service offered by insurance brokers and insurance agents. It also focused on the insurance users in one region; further research can be done in other regions of the country to see whether the same results would prevail.

CHAPTER ONE

INTRODUCTION

1.1 Background

Payne (1993) asserts that Europe is becoming a predominantly service-based economy. According to him explosive yet erratic growth in this area coupled with decline in traditional manufacturing, means that whether measured by income or numbers employed, more than 60% of most economies of the western world are now in the services sector. Intense competition, encouraged by deregulation in financial and professional markets as well as the application of new technology has fuelled growth.

Similarly in Kenya, service marketing has increased in importance over the last decade with the advent of competition. Ten years ago competition was far less for firms in the service business. However, competitiveness has escalated at an alarming rate in most areas of the service sector mainly because of market liberalization and adoption of economic reforms. Competition has intensified so much that marketers in the service industry now focus more on quality customer service which is not easily copied by competititors.

The insurance industry is probably one of the most underdeveloped industries in Africa and particularly in East Africa. At present we have forty-three insurance companies, over 180 brokerage firms and thousands of Agents. Kenya's annual GDP stands at

Sh.650 billion. A properly functioning economy should have an annual premium of 5%-6 % of that GDP, yet the average annual premium range between 19-25 billion which is just 2.8-3.2 %. This suggests that something has to be done in Africa for people to see the benefits of insurance. (Kogi 2002). However, over the last ten years the industry has shown tremendous growth with gross premiums moving considerably from kshs. 6.55 billion in 1991 to K shs. 21 billion in 2000.

Mergers, acquisitions and liquidations have also been experienced. The industry may yet see more of these as it goes through various transitions and continues to find a balanced and stable path.

The insurance industry provides a range of services. It is common within the industry to split services into life and non-life type. Life services are essentially concerned with elements of protection and savings built around life insurance, including term and endowment insurance, life assurance and pension products. Long-term insurance includes an element of saving for the customer. Non-life insurance (general) covers accident, motor, household insurance on the personal side, and marine, aviation and many types of business insurance on the firm side (Dorfman, 1982).

Initially people in the third world countries, Kenya included had negative attitudes toward and beliefs about insurance. They believed that buying a life insurance policy is like writing your Will. Today, many people have changed their attitudes as they have become more educated and enlightened. The insurance companies have also changed

their selling approach. They have modified the old products to fit into the customers' needs and expectations. For example, Madison Insurance Company has modified some of its products like life insurance product into a savings scheme, which they call 'Madison 2000 plus'.

Customer service, which is defined as task-oriented activities, other than proactive selling, that involves interactions with customers in person, by telecommunications or by mail (Lovelock, 1994) is also of increasing concern as customers' awareness and sophistication grows. In search for new business, existing clients can easily be overlooked.

However, as competition continues to intensify, companies have developed cross-selling strategies which attempt to sell more products to existing clients. Effective cross selling relies on building up long-term relationships with clients, and stresses the importance of service quality (Zeithaml, 2000).

A few insurance companies are beginning to train staff in servicing, and to deal with customer queries in a positive way so as to try and open up new sales possibilities through customer satisfaction and referrals.

1.2 Problem statement

Insurance is one of the formal ways of managing risk. Other ways include investing in stocks, purchasing plots and land capital gain and saving in banks and co-operative organisations.

In the recent past popularity is growing in the insurance industry because people have become more aware of its benefits. People's lives have also become more sophisticated where many are planning for their retirement and finances for their families. Today risks are higher than a decade ago as crime rate and epidemics like HIV/ AIDS have made people to think about their future.

Kogi (2000) notes that it is generally true that most insurance companies have not been very focused on customer needs and requirements in the design of the various products and services. Most of the products in the markets are the traditional insurance products, some which have outlived their usefulness. Companies need to come up with new innovative and relevant products and services.

It is evident that insurance companies have the potential of a rich customer information in the proposal form but the customers do not bother to read this information. It is therefore the role of the underwriters to ensure that customers understand the information given to them.

Although it is known that the insurance companies help their customers to reduce risk, little is known on whether the same customers get satisfied with the quality of service offered. Not all the companies give services according to the customers' expectations (Zeithml, 2000). Hence the primary purpose of the proposed research was to identify and assess the relative importance of the factors that determine perceived quality of customer service in the insurance industry in Kenya.

1.3 Research objectives

The objectives of the study were:

1. to assess the product knowledge level of various stakeholder groups.

2. to identify the factors that customers consider important when judging quality of service in the insurance industry.

3. to establish the extent to which customers are satisfied with quality of service in the insurance industry.

1.4 Importance of the study

This study is expected to benefit the following groups:

1. Insurance Companies.

   The study will assist the insurance companies in defining their customer service and in understanding the factors which customers consider important

2. Other marketing Practitioners

   The study will help other marketing practitioners as it will enhance their understanding of the quality of service and apply the knowledge in their organisation.

3. Enhancing knowledge base for scholars

   The study was of great help to students taking marketing as there was additional local knowledge in the literature. It will also offer a basis for further research in the sector.

4. Customers

The study will enhance customers' awareness and knowledge of the quality of service provided by the insurance providers.

1.5 Structure of the study

The project is made up of five chapters as illustrated below:

Chapter 1 contains the introduction which gives the background information of the study, statement of the problem, research objectives and importance of the study.

Chapter 2 reviews the literature (both conceptual and empirical) pertaining to this study. Covered here are nature of service marketing and its unique characteristics, customer service and customer perception, risk management and how to reduce the risk , insurance and its role and benefits to the society.

Chapter 3 describes the study's research methodology covering research design, population, sample, sampling procedure, methods of collecting data, research instrument used and methods of data analysis.

Chapter 4 covers data analysis, interpretation, and presentation of the findings.

Chapter 5: Includes a summary and recommendations of the study indicating also the limitations and area for further research.

CHAPTER TWO

LITERATURE REVIEW

This section analysis the secondary sources of data related to the research problem being investigated. The various topics discussed are; marketing of services, customer service quality, customer perceptions, service quality model, risk management and historical development of insurance companies.

2.1 Marketing of services

A major trend in the third world is the development of the service industry. The service sector has increased dramatically in importance over the last decade both internationally and in Kenya. As a result of the competition firms in the service industry such as banks, building societies, insurance companies, airlines, retailers and telecommunication companies need new approaches to address the challenge since the service products themselves are hardly distinguishable. The strategy to gain competitive advantage is to be customer oriented.

Kotler (2000) defines a service as any act or performance that one party can offer to another that is essentially intangible.

A company's offer to the marketplace often includes some services. The service component can be a minor or a major part of the total offer. Kotler (2000) has identified five categories. The first one is pure tangible good for example buying a kilo of sugar, secondly tangible good accompanied by a service for instance buying a car, thirdly hybrid where the offer consists of equal parts of goods and services such as in a

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restaurant, the fourth category involves a major service accompanied by minor goods for instance airline services and finally pure service with no tangible product like a hair-cut or a massage. For an activity to qualify as a service it must have the characteristic of being intangible, inseparable, variable, perishable and is incapable of possession or ownership.

Characteristics of Services

When designing marketing programs, every company must consider four unique service characteristics.

Service Intangibility

Services cannot be seen, tasted, felt, heard or cannot be seen before the purchase. Lack of tangibility in services therefore means that buyers cannot pre-evaluate them. For example, in the insurance industry when a person is covered by any of the insurers, the insured cannot for sure know the kind of service he would get. Kotler (2000) states that the work of the service provider is to make the service more tangible by associating it with tangible products.

Service Inseparability

Services cannot be separated from their providers. If a service employee provides the service, then the employee is a part of the service because the customer is also present as the service is produced. Provider-customer interaction is a special feature of service

marketing. Customers do not just go for cheap prices but for quality service; hence they are ready to pay a premium price. The service organisations can only train their employees to build up client's confidence. Stanton (1984) argues that as an exception to the inseparability feature, the service may be sold by a person who is representing the creator seller. For instance, a travel agent, insurance seller, or rental agent represent and help promote the service that was sold by the institution producing it.

Service variability

Variability of services refers to the fact that the quality of service is never really the same as it depends not only on who provides the service but also when where and how the service is provided. Unlike tangible products which are manufactured in the same way, services are produced differently to different customers (Kotler and Amstrong, 1989). In essence, therefore, the quality of the service product is typically highly dependent on the quality of the personnel conducting the transaction. The challenge to the service provider is to as much as possible create uniformity. Some companies have done this by ensuring systematic and rational procedures.

Service perishability

Services cannot be stored for later sale or use. They are consumed as they are produced. One cannot inventory them and once consumed they leave nothing with the consumer except memories. The challenge here is to match supply capacity with demand.

2.2 Customer service quality

Kimonye (1998) defines service quality as the degree of a match between expectations and the actual service provided by the service giver. The higher the fit the higher the level of customer satisfaction. Kibera (1999) defines it as the conformance of services to customer specifications and expectations. Only the customer can judge the quality of service. Service quality therefore can be viewed in levels depending on how well the service quality meets the expectations of customers. Customer expectations are served by their experiences, word of mouth and service form of advertising. Quality control is generally more difficult in service setting since production is often decentralized and subject to many influences.

Customer satisfaction and customer retention are always at risk. Therefore Managers must be vigilant if they are to maintain sufficient high quality in order to maintain customer loyalty (Rust, 1996).

2.3 Customer perceptions

Perception is the process by which a customer selects, organizes and interprets into a meaningful and coherent picture of the world around him.

Customers perceive services in terms of the quality of the service and how satisfied they are overall with their experiences. Zeithamil and Bither (2000) defines satisfaction as the consumers' fulfillment response. It is a judgement that a product or service feature, or the product or service itself, provides a pleasurable level of consumption related fulfillment.

Failure to meet the customers expectations is assumed to result in dissatisfaction with the product or service. Hence the customer may switch to a competitor.

Customer expectations are formed by their experiences, word of mouth and the service from advertising. Quality control is generally just more difficult in service settings since production is often decentralized and subject to many influences (Boone and Kurtz, 1992). According to Kibera (1999), customers use basically similar criteria to determine service regardless of the type of service. These are: reliability which is being consistent in performance, responsiveness depicted by willingness of employees to provide service, competence showed by knowledge and skill of operational support personnel, credibility which is trustworthiness, communication, courtesy depicted by friendly reception by employees, access, security, empathy demonstrated by providing individualized attention and tangibles accompanying the service such as equipment used.

One of the major ways to differentiate a service firm is to deliver consistently higher-quality service than competitors. The key is to meet or exceed the target customers' service quality expectations. The customers choose providers on the bases and, after receiving the service, compare the perceived service with the expected service (Kotler, 1997). A quality model has been developed by Parasuraman and his colleagues (Payne, 1993) which helps identify the gaps both the perceived service quality and customers receive and what they expect. The model which identifies five gaps, is depicted in figure 1.

2.4 Service quality model
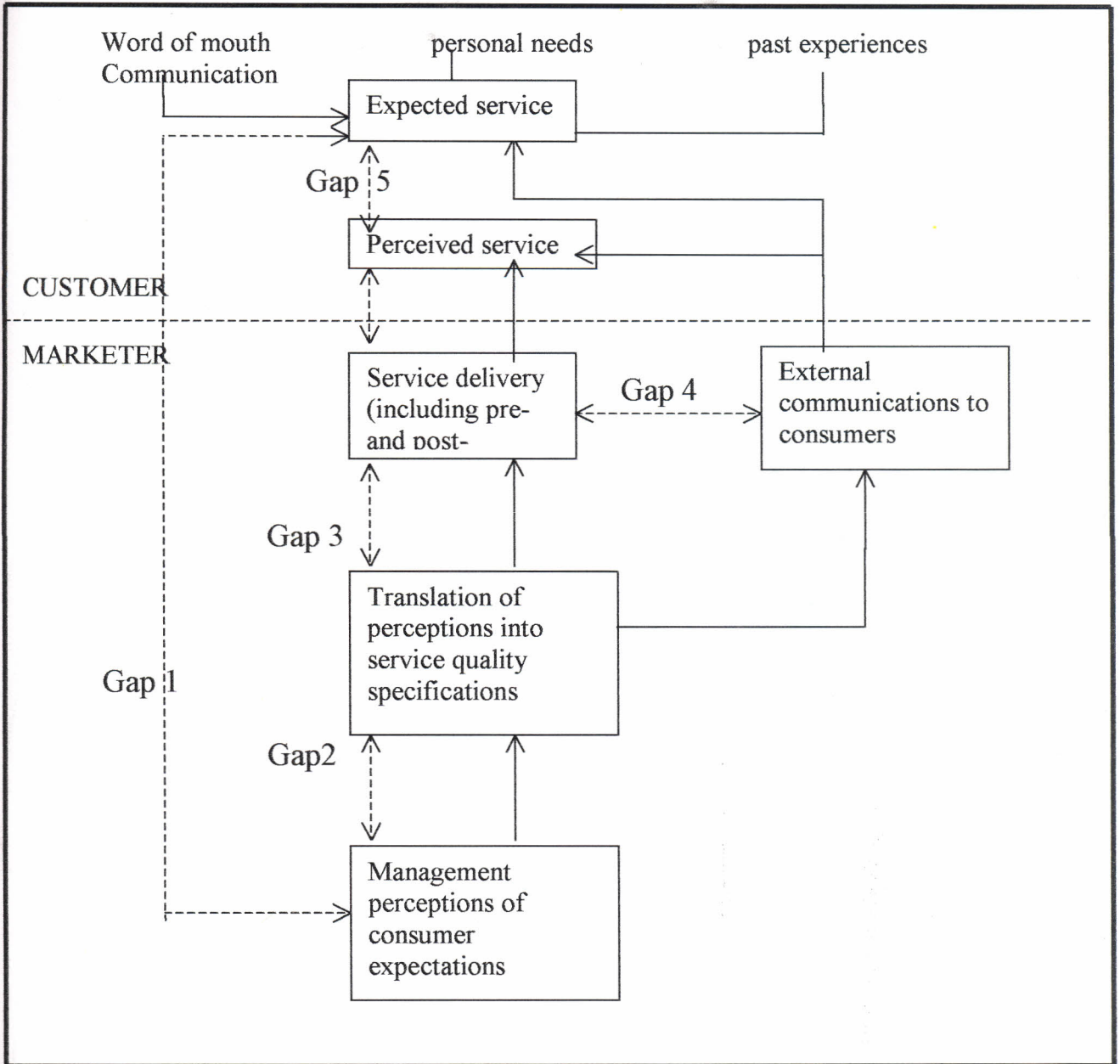
Figure 1: Source: A. parasuraman , V.A. Zeithaml and L.L. Berry "A conceptional model of services quality and its implications for future research". <u>Journal of marketing</u>, vol. 49, Autumn 1985.

Gap 1

This identifies the cliff between consumer expectations and management perceptions of consumer expectations. If management does not receive feedback about poor service quality then it is believed that it is meeting customer expectations.

Gap 2

The gap shows the difference between the management perception of consumers' expectations and service quality specification. Managers will set specifications for service quality based on what they believe the consumer requires. Specifications and requirements are not necessary identical.

Gap 3

It is the difference between service quality specification and the service actually delivered. This is where the delivery of service relies heavily on people such as clerical staff and administrators.

Gap 4

The gap illustrates the difference between service delivery intention and what is communicated about the service to customers. It establishes an expectation within the customer, which may not be met as a result of inadequate communication by the service provider.

Gap 5

Finally, gap five shows the difference between the actual performance and the customers perception of the service. For example a guest in a hotel may receive an

excellent service throughout his stay apart from poor checking out facilities. This last experience may damage his entire perception of the whole service. Hence the study empirically studied the gaps.

1.5 Risk Management

According to Chartered Institute of Insurance Journal (1995) Risk is the uncertainty of loss. It is a situation where there is uncertainty about an outcome. Risk management is the identification, analysis and economic control of those risks, which can threaten the assets, or earning capacity of an enterprise.

There are several ways of categorizing risk, the first being Financial versus non-financial. Financial risk is one where the outcome can be measured in monetary terms such as material damage to property, theft and lost business profit. On the other hand, non-financial risks are not measurable in monetary terms and include choosing the car to buy. Another classification of risk is pure versus speculative risks. Pure risk involves a total loss, for example by fire at a factory. The speculative risk is where there is the chance of gain, like investing in stocks. Yet another categorization is fundamental versus particular risks. Fundamental risks are those which arise from causes outside the control of any one individual or even a group of individuals. It is suffered by a large number of people such as in case floods. Particular risks are much more personal both in their cause and effect, and include theft or a motor accident.

Risk Control

According to Chartered Institute of Insurance Journal (1995) risk can be controlled to some extent usually through financial and physical controls. Physical control can be done through pre-risk reduction and post-loss risk control. It is possible to take steps before any event has occurred. This is pre-risk reduction for instance weaving a car seat belt. On the other hand, post-loss reduction of risk is that the effects of the loss are anticipated and steps are taken to ensure that they are kept to a minimum such as the use of automatic fire sprinkler systems.

Financial Risk Control, has also two ways, through risk retention and risk transfer. In some situations, it may be wise to retain the risk rather than to seek another form of protection such as insurance risk transfer. An organization can transfer the financial effect of the risk to some other party.

Insurance is a risk transfer mechanism by which an organization can exchange its uncertainty for certainty. Insurance offers the opportunity to exchange this uncertainty loss for a certain loss: the insurance premium. The Insurance Company agrees to meet any losses, which fall within the terms of the policy. This is a risk transfer mechanism, which is of immense value not only to industry, but also to individuals (Channel, 1980).

2.6 Historical Development of Insurance In Kenya

The following data shows a chronological establishment of insurance companies in Kenya since 1905 (Mwaura, 2001).

Table 1: Chronological establishment of the earliest Insurance Companies

Name of Underwriter	Year established
Old Mutual	1905
Phoenix	1912
Pioneer	1928
Jubilee	1937
Pan Africa	1964
Kenya National Assurance	1970

The insurance market today is served by about 42 insurance underwriters 186 insurance brokerage firms, and over 3000 agents. The market is still developing and the projected industrialization of the country's economy in the early years of 21st Century should place it on a competitive level with markets in the developed countries (Mwaura, 2001)

The role of insurance in the society

Insurance is one of many trades which benefit the society in a variety of ways. It creates a common pool where the money is put together, transfers risk, and the premium is based on the hazard and the value insured.

Other than the three benefits, insurance reduces negative anxiety, substitutes government security programme, promotes financial stability of families and organizations, facilitates trade and commerce, mobilizes savings, allows risks to be managed more efficiently, and encourages loss mitigation.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Research Design

The study used descriptive research design since a lot is known about the subject. According to Kinnear and Taylor (1988) descriptive research is any research aimed at characterizing marketing phenomena and identifying association among selected variables. The problem focuses on describing those factors that determine quality of customer service. Several other studies pertaining to customer service and service quality have successfully used this type of research design (Masinde, 1986; Ndegwa, 1996; Ngatia, 2000; and Mukiri, 2001).

3.2 Population of the study

Insurance users: These comprise all the people who hold insurance policies in Nairobi.

3.3 The Samples

A total of 150 policy-holders was selected for the study. Stratified random sampling was used. The strata comprised fifty self employed customers, fifty customers employed by private sector and fifty employed in the public sector. Within each stratum judgmental (purposeful) sampling process was used to select the respondents.

3.4 Data collection

The researcher reviewed the relevant secondary data and collected pertinent primary data. The latter was collected using partly structured questionnaire.

The questionnaire contained dichotomous, multiple choice, and likert–type questions/ statements. Questionnaires were dropped and picked up later.

3.5 Data Analysis

Descriptive statistics was used to give summary results of respondent's answers to the questions posed in the questionnaire. Correlation and regression analysis was used to more rigorously analyse the data. The results were then pictorially presented by use of pie charts and graphs.

CHAPTER FOUR

DATA ANALYSIS AND DISCUSSION

Introduction

To address the objectives of this study, this section presents an analysis on the factors considered important by insurance users and how the different companies perform with regard to those factors. The researcher also looked at how satisfied the insurance users are with their users.

4.1 Sample Demographics and Behavioral Patterns

A sample of 150 was suggested for the study but only 67 % of the sample was obtained. This is depicted in table 2 below.

Table 2: The sample structure

Type of Respondents	Anticipated Sample size	Actual Sample.
Self employed customers	50	42
Customers employed by Private Sector	50	31
Customers employed in the public sector	50	27
Total	150	100

The demographic characteristics of the sample respondents are discussed in terms of race, age, gender, education, employment and income.

The sample comprised Africans and Asians, with the former constituting 93% of the sample and the latter a mere 7%.

Seventy per cent of the respondents were males and thirty percent were females. Over three quarters (78%) of the sample respondents were married, 14% were single, and 4% were divorced. The age distribution of the sample is contained in table 3.

Table 3: Respondents' age distribution.

Age	Frequency	%
21-30	15	15
31-40	41	41
41-50	27	27
51-60	16	16
Over 60	1	1
Total	100	100%

As shown in table 3, over half of the respondents (56%) were below forty years and 17% were above fifty years.

In terms of educational levels 47% of the respondents were university graduates, 40% were college graduates, and 11% were secondary school graduates. The study revealed that 42% of the respondents were self-employed while 58% were employed either by the government or by private companies. The income distribution of the sample is presented in table 4.

Table 4: Respondents' Gross Monthly Incomes in Kenya Shillings

Income(KSh.)	Frequency	Percentage
Under 10,000	6	6
10,001-20,000	23	23
20,001-30,000	20	20
30,001-40,000	15	15
40,001-50,000	11	11
50,001-60,000	7	7
60,001-70,000	4	4
70,001-80,000	5	5
80,001-90,000	2	2
90,001-100,000	1	1
Over 100,000	5	5
Total	**99**	**100 %**

According to table 4 the respondents' incomes range between Ksh10,000 and Ksh30,000, with just a few with above Ksh50,000 and below Ksh10,000. This suggests that the sample respondents can afford to pay insurance premiums. The sample respondents have insured with the following firms. (table 5)

Table 5: Types of Insurance Policies Purchased by the Sample Respondents.

Type of policy	Frequency	Percentage
Life insurance	37	39.4
Motor Vehicles	28	28.7
Education	15	16.0
Theft and fire	3	3.2
Medical	5	5.3
Personal accident	4	4.3
Investment/Business	2	2
Total	**94**	**100%**

The results in Table 5 show that most of the sample respondents have life insurance policies (39.4% of the respondents), followed by motor (28.7% of the respondents) and education (16% of the respondents).

As shown in table 6, the above policies have been purchased from different insurance firms.

Table 6: The most popular insurance firms.

Insurance Companies	Frequency	Percentage
Alico	23	23
Pan Africa	10	10.4
Jubilee	10	10.4
British American	7	7.3
Blueshield	7	7.3
United	7	7.3
Madison	6	6.3
Gateway	5	5.2
Lion of Kenya	3	3.1
Occidental	2	2.1
Kenindia	2	2.1
Fidelity	2	2.1
Liberty	2	2.1
Concorde	2	2.1
Cannon	1	1
ICEA	1	1
Pioneer	1	1
Mercantile	1	1
Old Mutual	1	1
Standard Assurance	1	1
First Assurance	1	1
African Merchant	1	1
Total	**96**	**100%**

Table 6 reveals that about one quarter of the respondents are insured by Alico (23%) followed by Pan Africa and Jubilee each with10.4%.

When the respondents were asked whether they would advise someone to insure with their insurer, 82% answered in the affirmative, 8% said no and 10% gave no response. Those who said "yes" gave the following reasons:

Table 7: Reasons for advising someone to have an insurance policy with the respondents' Insurer.

Reason	No. of mentions	%
Benefits	20	22.2
Good service	15	16.7
Efficiency	9	10
Honouring claims	9	10
Security	4	4.44
Stability	4	4.44
Reliability	4	4.44
Good communication	3	3.33
Cheap premium	6	6.66
High credibility	3	3.33
Caring	2	2.22
Fast in responding	3	3.33
Type of products	2	2.22
Variety of products	2	2.22
Prominence	1	1.11
Effectiveness	1	1.11
Mandatory	1	1.11
Satisfied	1	1.11
Total	**90**	**100%**

Table 7 shows that the major reasons for advising someone to insure with the respondents' insurance companies as "benefits" (22.2%), "good service" (16.7%), and "efficiency" and honouring claims each with 10%. Those who said "no" that they couldn't advise others to insure with their insurer gave the reasons contained in table 8 below:

Table 8: Reasons for not advising others to insure with the respondents' insurer

Reasons	No. of mentions	%
Poor compensation	1	10
Forced by Agents	1	10
Switching cost is high	3	30
Slow in paying claims	2	20
Not good investment	1	10
Poor service	2	20
Total	**10**	**100 %**

The researcher was also interested in investigating how many of the respondents had switched companies, since this would give an indication of customer loyalty. From the study results 27.8% of the respondents had switched companies while 72.2 % had not (table 9).

Table 9: Frequency of switching from one insurance company to another.

From	To	Frequency
Pan African	British American	1
Alico	Pan African	1
Alico	British American	1
Alico	Gateway	1
Alico	Lion of Kenya	1
Gateway	Fidelity	1
Blue shield	Alico	1
Blue shield	Gateway	1
Blue shield	Jubilee	1
Jubilee	British American	2
Jubilee	Alico	1
cannon	African merchant	1
Madison	United	1
Pioneer	British American	1
United	Occidental	1
United	Gateway	1
United	Madison	1
United	Liberty	1
United	Lion of Kenya	1

From table 9, it is clear that most of sample respondents moved from United Insurance Company to various companies and only one of them moved to it. The respondents also gave reasons why they switched companies (table 10)

Table 10 Reasons for switching.

Reasons	No. of mentions	%
Not satisfied	3	12
Expensive	3	12
Change of policy	3	12
Poor service	5	20
Poor settling of claims	3	12
Poor product package	2	8
Inefficiency	1	4
Slow in processing	1	4
Advised	1	4
Agent decided	1	4
Failure to keep promises	1	4
To impress Agent	1	4
Total	**25**	**100%**

Table 10 shows that the respondent customers consider **quality service** to be the principal factor in making the choice of company to insure with; most of the respondents who switched left their old insurers because of poor service (20% of all mentions). Other significant reasons for switching were lack of satisfaction, cost of policy, customer's need to change their type of policy and poor settling of claims. All of these attracted 12% of the mentions each. The least significant reasons for switching were desire to impress the agent, failure of the insurance company to keep promises, decision by the agent, advice given to the respondent, slow processing of claims and general inefficiency. These attracted 4% of mentions each.

4.2 Customer Respondents' Product Knowledge and Behaviour Patterns.

Attitudes come before behaviour and affect the way the person will act. They are composed of three parts namely **knowledge** (what the individual knows or believes about the topic) **feeling** (how the person feels about the topic and how it is valued) and **action** (likelihood that the individual will take action based on the attitude). This study focused mostly on **knowledge**. Thus the sample respondents were asked about their knowledge regarding insurance. Unaided recall questions were asked and they scored as shown in tables 11, 12 and 13.

Table 11 shows how the sample customers scored on knowledge about insurance companies in Kenya. The question posed was to name ten insurance companies the respondents are aware of. The scores were given out of ten points; hence each correct answer carried one point.

Table 11: Respondent's level of knowledge about Insurance Companies.

Awareness scores	Frequency	%
0-2	3	3.1
3-5	45	45.9
6-8	26	26.5
9-10	24	24.5
Total	98	100%

Table 11 shows that 46% of the respondents mentioned three to five insurance companies and 51% could list at least six companies after adding 26.5% and 24.5%. This shows that customers of insurance companies have good knowledge about the existence of various insurance companies.

The researcher also assessed the respondents' knowledge on different types of insurance. In this case the sample respondents were asked to name at least six insurance products they are aware of. Each correct answer carried one point. Therefore the scores were out of six. The relevant results are summarized in table 12.

Table 12: Respondents' knowledge of types of Insurance products.

Knowledge scores	Frequencies	%
1-2	1	1
3-4	28	28
5-6	71	71
Total	100	100%

Table 12 reveals that 71% of the respondents were able to mention at least five types of insurance while 99% of the sample could state at least three types of insurance covers. The results indicate that insurance users have good knowledge of insurance products available in the Kenyan market. In addition, when the respondents were asked to name various features of insurance products, they were able to do so, as revealed by table 13. The question posed was to name at least four features of insurance products. The scores were out of four points

where each correct answer carried one point. Table 13 shows the pertinent results.

Table 13: Knowledge on insurance features

Awareness Scores	Frequencies	%
0	38	38.8
1	15	15.3
2	20	20.4
3	13	13.3
4	12	12.2
Total	**98**	**100%**

Table 13 shows that insurance users are not very knowledgeable when it comes to awareness of features of insurance covers. However 45% of the respondents could state at least two features out of four.

From these findings it can be concluded that most customer respondents have a good knowledge of the type of insurance covers available but do not have as much knowledge on the names of companies offering these.

4.3 Important Factors When Judging Quality of Service in The Insurance Industry.

Quality of service is defined as the conformance of services to customer specifications and expectations (Kibera, 1999). Only the customer can judge the quality of service. Service quality therefore can be viewed in levels depending on how well the service quality meets the expectations of customers. As elaborated in section 2.3 of the literature review, customers use basically similar

criteria to determine service regardless of the type of service. These are: reliability, responsiveness, competence, credibility, communication, courtesy, access, security, and empathy. On a scale of 1 to 5, customers were asked to state the factors they considered important in judging the quality of service in the insurance industry. The details of this scale were as follows:

5= Very important,   4=Important,   3= Neutral ,   2= Not important and 1= Not very important

On this scale, the summary results of the factors considered important when judging the quality of service in the insurance industry are presented in Table 14.

Table14: Factors considered important by customers when judging quality of service in the insurance industry.

Variables	Frequencies	Mean Scores for What customers Consider important
Company Efficiency	96	4.78
Fast action on complaints	100	4.73
Prompt service	100	4.71
Understanding of customers' needs	100	4.66
Consistency on performance	100	4.64
Friendly customer service	99	4.56
Well trained employees	99	4.55
Quality of customer information	100	4.53
Courteous employees	98	4.53
Service availability	99	4.49
Free access to customer service	88	4.47
Attractive insurance premium	99	4.47
Company image	100	4.44
Employee discretion in solving customer problems	100	4.38
Communicating at least once a year	99	4.24
Confidentiality	97	3.75

Table 14 reveals that the factors considered most important are "company efficiency" (mean score of 4.78), followed by "fast action on complaints" (mean score of 4.73) and "prompt service" (mean score of 4.71). On the other hand, the factors considered relatively unimportant are "confidentiality" (mean score of 3.75), "communicating at least once a year " (mean score of 4.24) and "employee discretion in solving customer problems" (mean score of 4.38.)

Addition information on the factors considered important by the respondents is presented in table 15.

Table 15: Sample Respondents' Ratings of Quality Service.

Variables/ Factors	Frequencies	Not very important	Not important	Neutral	Important	Very important	Total (%)
Company Efficiency	96	-	-	2.1	17.7	80.2	100
Fast action on complaints	100	1	-	4.0	15.0	80.0	100
Prompt service	100	2	-	3.0	15.0	80.0	100
Understanding of customers' needs	100	2	-	2.0	22.0	74.0	100
Consistency on performance	100	-	-	7.0	22.0	71.0	100
Friendly customer service	99	1	-	8.1	24.2	66.7	100
Well trained employees	99	1	-	9.1	23.3	66.7	100
Quality of customer information	100	1	1	7.0	26.0	65.0	100
Courteous employees	98	-	1	7.1	29.6	62.2	100
Service availability	99	1	1	7.1	29.3	61.6	100
Free access to customer service	88	-	1	10.1	29.3	59.6	100
Attractive insurance premium	99	1	-	8.1	32.3	58.6	100
Company image	100	-	2	12.0	26.0	60.0	100
Employee discretion in solving customer problems	100	-	1	10.0	39.0	50.0	100
Communicating at least once a year	99	1	3	9.1	44.4	42.4	100
Confidentiality	97	4	12	25.0	23.0	36.0	100

From the table 15 it is clear that most of the factors were considered to be either "somewhat important" or "very important". The factors that scored very highly were "company efficiency" followed by "fast action on claims" and "prompt service". On the other hand those considered not very important were "confidentiality" and "communicating once a year"

4.4 Perceived performance of the insurance companies along factors considered   important by respondents.

Perception is the process by which a customer selects, organizes and interprets into a meaningful and coherent picture of the world around him. Customers perceive services in terms of quality of service and how satisfied they are overall with their experiences. Hence customer respondents were asked to rate performance of their insurers on a scale of 1 to 5. The scoring on this scale was

5= Excellent,   4= Good,   3= Fair,   2= Poor and   1= Very poor.

The relevant results are contained in table 16.

Table 16. Perceived performance

Variables	Frequencies	Mean scores of how companies perform	Mean scores of what customers consider important
Courteous employees	99	4.44	4.53
Well trained employees	97	4.07	4.55
Quality of policy document	99	4.01	-
Confidentiality	91	4.00	3.75
Attractive insurance premium	100	3.94	4.47
Company image	100	3.93	4.44
Service availability	96	3.84	4.49
Friendly customer service	100	3.82	4.56
Accuracy	81	3.81	-
Employee discretion in solving customer problems	85	3.78	4.38
Understanding customer needs	100	3.77	4.66
Company's efficiency	100	3.76	4.78
Consistency on performance	92	3.62	4.64
Free access to customer service	88	3.61	4.47
Quality of customer information	100	3.60	4.53
Fast action on complaints	95	3.58	4.73
Prompt service	97	3.43	4.71
Communicating at least once a year	100	3.14	4.24

Table 16 reveals the factors that have performed well. They are "courteous employees" (mean score of 4.44), "well-trained employees" (mean score of 4.07) and "quality of policy document" (mean score of 4.01). Others are confidentiality and attractive premium pricing. The factors considered important as depicted in table 14 are company efficiency, fast action on complaints, prompt service and fast settling of claims.

On the other hand, factors that performed poorly are the ones customers considered important in judging quality of service. These are : communicating at

least once a year, prompt service, and fast action on complaints. This information has been illustrated further in table 17.

Table 17: Companies' perceived performance.

Variables	Frequencies	Very poor	Poor	Fair	Good	Excellent	Total (%)
Courteous employees	99	-	4.0	9.1	63.6	22.2	100
Well trained employees	97	1.0	2.1	16.5	49.5	30.9	100
Quality of policy document	99	3.0	1.0	17.2	49.5	29.3	100
Confidentiality	91	-	1.1	20.9	54.9	23.1	100
Attractive insurance premium	100	-	3.0	19.0	59.0	19.0	100
Company image	100	2.0	2.0	13.0	67.0	16.0	100
Service availability	96	-	4.2	27.1	49.0	19.8	100
Friendly customer service	100	3.0	5.0	17.0	57.0	18.0	100
Accuracy	81	2.5	1.2	29.6	45.7	21.0	100
Employee discretion in solving customer problems	85	2.4	3.5	24.7	52.9	16.5	100
Understanding customer needs	100	4.0	3.0	25.0	48.0	20.0	100
Company's efficiency	100	2.0	4.0	28.0	48.0	18.0	100
Consistency on performance	92	1.1	4.3	38.0	44.6	12.0	100
Free access to customer service	88	1.1	5.7	38.6	39.8	14.8	100
Quality of customer information	100	4.0	10.0	26.0	42.0	18.0	100
Fast action on complaints	95	4.2	7.4	33.7	35.8	18.9	100
Prompt service	97	4.1	13.4	32.0	36.1	14.4	100
Communicating at least once a year	100	10.0	27.0	24.0	17.0	22.0	100

From table 17 it is clear that the sample respondents had different views on perceived performance. Some of the factors that were highly rated were well trained employees with a score of (30.9%), quality of policy document (29.3%), and confidentiality (23.1%). However, the factors that performed very poorly were "fast action on complaints" with a score of (4.2%), "prompt service (4.1%)" quality of customer information and understanding customers needs each with a score of (4%).

4.5 The extent to which customer respondents are satisfied with quality of service in the insurance industry.

Zeithamil and Bither (2000) defines satisfaction as the consumers' fulfillment response. It is a matter of judgement that a product or service feature, or the product or service itself, provides a pleasurable level of consumption related fulfillment. Customer respondents were asked to rate how satisfied they were with their insurers. Using a scale of 5= Very satisfied, 4=satisfied, 3=indifferent 2=dissatisfied and 1=very dissatisfied.

The relevant results can be depicted in table 18.

Table 18: Customer Satisfaction

Variables	Frequencies	Mean on: customer satisfaction
Company image	100	4.02
Name of the organization	96	4.01
Confidentiality	97	4.00
Quality of policy document	95	3.96
Accuracy in computation	77	3.95
Present insurance cover	97	3.93
Attractive insurance premium	100	3.93
Company's efficiency	100	3.91
Company employees	96	3.90
Customer service	100	3.77
Handling of complaints	94	3.61
Consistency on performance	87	3.61
Benefits offered at maturity	66	3.53
Understanding customer needs	88	3.49
Information given to you	100	3.27
Fast settling of claims	91	3.23

The results on customer satisfaction as depicted in table 18, show, that the insurance features that customers are satisfied with are "**company image**" (mean score of 4.02),

"**name of the organization**" (mean score of 4.01) and **confidentiality** (mean score of 4.00). On the other hand, the features the customers are dissatisfied with are "fast settling of claims" (mean score of 3.23), "information given" (mean score of 3.27) and "understanding customers' needs" (mean score of 3.49).

Table 19: Customer satisfaction with quality of service.

Variables	Frequencies	Very dissatisfied	Dissatisfied	Indifferent	Satisfied	Very satisfied	Total (%)
Company image	100	3.0	2.0	9.0	62.0	24.0	100
Name of the organization	96	1.0	5.2	14.6	50.0	29.2	100
Confidentiality	97	-	2.1	13.4	67.0	17.5	100
Quality of policy document	95	4.2	2.1	20.0	41.1	32.6	100
Accuracy in computation	77	2.6	2.6	15.6	55.8	23.4	100
Present insurance cover	97	4.1	-	8.2	74.2	13.4	100
Attractive insurance premium	100	3.0	3.0	9.0	68.0	17.0	100
Company's efficiency	100	3.0	2.0	13.0	65.0	17.0	100
Company employees	96	1.0	2.1	15.6	68.8	12.5	100
Customer service	100	4.0	5.0	17.0	58.0	16.0	100
Handling of complaints	94	4.3	10.6	20.2	50.0	14.9	100
Consistency on performance	87	1.1	5.7	41.4	34.5	17.2	100
Benefits offered at maturity	66	3.0	12.1	25.8	47.0	12.1	100
Understanding customer needs	88	3.4	4.5	44.3	35.2	12.5	100
Information given to you	100	6.0	25.0	18.0	38.0	13.0	100
Fast settling of claims	91	5.5	22.0	33.0	23.1	16.5	100

It can be seen from this section that there is a good match between the perceived performance of insurance companies and the level of customer satisfaction. In other

words, customers registered high levels of satisfaction on the same factors that they perceived the companies to be performing well.

Also from the results, there is a clear mismatch between factors sample respondents considered important and what companies excelled in. This needs to be addressed by the companies. By closing up this mismatch, companies would ensure that they focused their energies on factors that would be highly appreciated by their customers. This would, in turn give the insurance companies better business.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMEDATIONS

5.1 Summary and managerial implications.

From the analysis of the findings and the discussions thereof, several conclusions can be made on the nature of and factors that customers consider important when judging quality of service, their product knowledge and how satisfied the customers are. Te three objectives were achieved. First, the factors that customers consider important when judging quality of service in the insurance industry were empirically identified. These factors were company efficiency (mean score of 4.78), followed by fast action on complaints (mean score of 4.73) and prompt service (mean score 4.71). On the other hand, the factors considered unimportant are confidentiality with a mean score of 3.75, followed by communicating at least once a year with a mean of 4.24 and employee discretion in solving customer problems (mean score 4.38). The study's results show that most of the factors were generally considered to be important which is crucial information to insurers. Second, the assessment of product knowledge of customers, showed that insurance customers have very good knowledge about insurance companies where 50% of the respondents could list at least five companies. They also have very good knowledge on types of insurance covers where 71% of them were able to mention 5-6 insurance

covers. However the same customers were not as well informed on features of insurance covers. Bonuses, premiums, maturity date and benefits among others. Only some 35% of the respondents mentioned at least two features and 38.8% did not mention any features. Generally the customer respondents displayed fair levels of knowledge of insurance services. From the above results companies should strive to update their customers on their policies e-mail through appropriate communication channels.

With respect to objective three, the study results showed that the areas in which customers were satisfied are company image with a mean score of 4.02, name of the organization 4.01 and confidentiality 4.00. On the other hand, the product features the customers are dissatisfied with were: fast settling of claims with a mean score of 3.23, information given (mean score of 3.27) and understanding customers' needs (mean score of 3.49). From this analysis, it can be concluded that the areas customers are dissatisfied with are the ones they consider to be very important when it comes to judging of quality of service. Managers of insurance firms should therefore note that customers are interested with fast action on complaints.

5.2 Recommendations

The results given here above, show clearly that the most important factor for customers is the rate of responsiveness where they need prompt service and quick settling of claims. Hence the insurance companies should develop a service strategy that addresses these issues if they don't have one and those who already have should improve and focus on the needs of their customers. This will minimize switching to and from various companies, and increase business for insurance companies.

The results clearly show service delivery is one of the important factors which also make customers switch companies. Therefore insurance companies should improve service delivery.

5.3 Directions for further research

The insurance industry consists of underwriters, Insurance Brokers and Agents. This research only focused on the underwriters; hence a similar study should be carried out to find out the quality of service offered by insurance brokers and insurance agents. The study also focused on the insurance users in one region; further research can be done in other regions of the country to see whether the same results would prevail.

The researcher encountered some limitations of the study. These were methodological, research design, sampling and resource constraints.

As survey study research design was used, future research could be based on case study to ensure that the research is done to a greater depth..

Some biasness cannot be ruled out as some respondents were left with the questionnaires to be picked later. Future research could be done with more resources to ensure that questionnaires are filled on the spot, so that respondents can be given guidance if necessary. However the study can serve as a useful source of information insurance companies who wish to improve their quality of service.

APPENDIX 1:

LETTER OF INTRODUCTION

Julia Muthoni Maina
University of Nairobi
Faculty of Commerce
Department of Business Administration
P.O Box 30197
Nairobi

TO WHOM IT MAY CONCERN

Dear Respondent,

REF: REQUEST FOR RESEARCH ASSISTANCE

I am a postgraduate student at the University of Nairobi. In partial fulfillment of the requirements for the award of the degree in Master of Business Administration, I am currently conducting a study entitled **FACTORS THAT DETERMINE PERCEIVED QUALITY OF CUSTOMER SERVICE IN THE INSURANCE INDUSTRY IN KENYA"**

I wish to collect data using the questionnaire method. I shall therefore be grateful if you kindly complete the relevant questionnaire for me. Please rest assured that this information is purely for the purpose of my MBA project work and I pledge to you that it shall be treated with strictest confidence.

Thank you for your anticipated cooperation.

Yours Faithfully,   Prof Francis N Kibera,PhD,

Julia Maina (MBA Candidate)   MBA Project Supervisor

APPENDIX 2

QUESTIONNAIRE

Section 1   Basic Information

Q1. Do you currently hold any insurance policy?

                YES (   ) (proceed to Q 2)

                NO (   ) (Terminate the interview)

Q2. If YES which one? (ones) ....

                                    ....

                                    ....

Q3. Specify the company (ies) that has insured you   _____

Q4. Would you advise someone to insure with your insurer? YES (   ) NO (   )

        Give reason(s) for your response---

Q5.What attracted you to the Company (ies) cited in (Q 2)

Q6. Have you ever switched companies to which you are insured?

                1. YES (   ) 2. NO (   )

        If YES give the reasons why, and to which company you switched to.

        (a) Reasons---

        (b) Company switched to: ---

        (c) Company switched from: --

Q7. Name **at least (10)** Insurance Companies that you are aware of in Kenya.

        1.   6.
        2.   7.
        3.   8.
        4.   9.
        5.   10

Q8. Name **at least six (6)** types of Insurance cover services that are offered by
insurance Companies in Kenya.

        1.   4.
        2.   5.
        3.   6.

Q9. List **at least four (4)** characteristics/ features of the Insurance cover that you are
aware of.

        1.   3.
        2.   4.

Q10. Please indicate on the rating scale below the extent to which the following
characteristics/ features are **important** to you in evaluating the insurance
insurance Company you mentioned in question **(2)**.

5= Very important   4=Important   3= Neutral   2= Not important   1= Not very important

		5	4	3	2	1
1.	Prompt service	( )	( )	( )	( )	( )
2.	Company's efficiency	( )	( )	( )	( )	( )
3.	Consitency of performance	( )	( )	( )	( )	( )
4.	Friendly customer service	( )	( )	( )	( )	( )
5.	Fast action on complaints	( )	( )	( )	( )	( )

6. Courteous employees   ( )   ( )   ( )   ( )   ( )

7. Well trained employees   ( )   ( )   ( )   ( )   ( )

8. Service Availability   ( )   ( )   ( )   ( )   ( )

9. Free access to customer service ( )   ( )   ( )   ( )   ( )

10. Quality of Customer Information   ( )   ( )   ( )   ( )   ( )

11. Understanding of Customers' needs ( )   ( )   ( )   ( )   ( )

12. Confidentiality   ( )   ( )   ( )   ( )   ( )

13. Company's Image   ( )   ( )   ( )   ( )   ( )

14. Employee discretion in solving

    Customer problems   ( )   ( )   ( )   ( )   ( )

15. Communicating at least once a year ( ) ( )   ( )   ( )   ( )

16. Attractive insurance premium   ( )   ( )   ( )   ( )   ( )

17. Fast settling of claims   ( )   ( )   ( )   ( )   ( )

18. Other (specify)--------------------- ( )   ( )   ( )   ( )   ( )

19. Other (specify) ------------------- ( )   ( )   ( )   ( )   ( )

20. Other (specify) ------------------- ( )   ( )   ( )   ( )   ( )

Q11. Please indicate the extent to which your insurer (insurance company) **has performed** along the following characteristics/ features.

5= Excellent   4= Good   3= Fair   2= Poor   1= Very poor

	5	4	3	2	1
1. Customer information	( )	( )	( )	( )	( )
2. Communicating at least once a year	( )	( )	( )	( )	( )
3. Fast action on complaints	( )	( )	( )	( )	( )
4. Attractive premium pricing	( )	( )	( )	( )	( )
5. Quality of the Policy document	( )	( )	( )	( )	( )
6. Understanding customer needs	( )	( )	( )	( )	( )
7. Company's efficiency	( )	( )	( )	( )	( )
8. Consistency of performance	( )	( )	( )	( )	( )
9. Friendly customer service	( )	( )	( )	( )	( )
10. Company's Image	( )	( )	( )	( )	( )
11. Courteous employees	( )	( )	( )	( )	( )
12. Well trained employees	( )	( )	( )	( )	( )
13. Service Availability	( )	( )	( )	( )	( )
14. Free access to customer service	( )	( )	( )	( )	( )

15. Confidentiality   ( )   ( )   ( )   ( )   ( )

16. Accuracy   ( )   ( )   ( )   ( )   ( )

16. Employee discretion in solving

    Customer problems   ( )   ( )   ( )   ( )   ( )

17. Prompt service   ( )   ( )   ( )   ( )   ( )

18. Other (specify)------------------------ ( )   ( )   ( )   ( )   ( )

19. Other (specify) ------------------------ ( )   ( )   ( )   ( )   ( )

20. Other (specify) ------------------------ ( )   ( )   ( )   ( )   ( )

Q12. How **satisfied** would you say you have been with your Insurer regarding the

     following characteristics/ features? Please tick as appropriate.

       5= Very satisfied   4=satisfied   3=indifferent   2=dissatisfied

       1=very dissatisfied

	5	4	3	2	1
1. Customer service	( )	( )	( )	( )	( )
2. Information given to you	( )	( )	( )	( )	( )
3. Company's employees	( )	( )	( )	( )	( )
4. Confidentiality	( )	( )	( )	( )	( )
5. Efficiency	( )	( )	( )	( )	( )
6. Handling of complaints	( )	( )	( )	( )	( )
7. Company's image.	( )	( )	( )	( )	( )

8.Insurance Premium   ( ) (   ) ( ) (   ) ( )

9. Present insurance cover   ( ) (   ) ( ) (   ) ( )

10. Benefits offered at maturity (if its life) ( ) (   ) ( ) (   ) ( )

11.Understanding customer's needs   ( ) (   ) ( ) (   ) ( )

12. Fast settling of claims   ( ) (   ) ( ) (   ) ( )

13. Quality of the policy document   ( ) (   ) ( ) (   ) ( )

14.Consistency of performance   ( ) (   ) ( ) (   ) ( )

15. Name of the Organization   ( ) (   ) ( ) (   ) ( )

16. Accuracy in computations   ( ) (   ) ( ) (   ) ( )

17. Other (specify)------------------------ ( ) (   )   ( ) (   ) ( )

18.Other (specify) ------------------------ ( ) (   )   ( ) (   ) ( )

19. Other (specify) ------------------------ ( ) (   )   ( ) (   ) ( )

Section 2   Bio-data

Q1.Please Indicate your gender: Male (   )   Female (   )

Q2. Which is your race? Asian (   ) African (   ) European (   ) Other (specify)

Q3. Please tick the age bracket into which you fall.

Below 21	( )
21-30 years	( )
31-40 //	( )
41-50 //	( )
51-60 //	( )
Over 60 //	( )

Q4. What is your marital status ?   Single   ( )   Married   ( ) Divorced   ( )

Other (specify) ————————

Q5. Please indicate your highest completed educational level

Primary   ( )
Secondary   ( )
College   ( )
University   ( )
Other (specify)   ————————————

Q6. Are you employed or self employed ?   Employed ( )   Self employed ( )

Q7. Please indicate your occupation?   ————————————

Q8. What is your approximate gross income (from all sources) per month in Kenya Shillings?

Ksh.
Under 10,000   ( )
10,000-20,000   ( )
20,001-30,000   ( )
30,001-40,000   ( )
40,001-50,000   ( )
50,001-60,000   ( )
60,001-70,000   ( )
70,001-80,000   ( )
70,001-80,000   ( )
80,001-90,000   ( )
90,001-100,000   ( )
over 100,000   ( )

Thank you very much for your cooperation.

REFERENCES

Beri, G.C. (2002). **Marketing Research**, 3rd edition. Mc Graw-hill

Channel, J. (1980). **Life Insurance**, New Jersey: Prentice hall.

Christopher M .(1998). **The Customer Service Planner**, published on behalf of chartered
    institute of marketing.

Cooper & Lybrand. **International Insurance Industry Guide**, 3rd Edition. Lloyd's of
    London Press.

Dinsdale, Mcmurdie. (1971). **Elements of Insurance**, 4th edition. Pitman publishers.
    London .

Dorfman, M.S. (1982). **Introduction to Insurance**, New jersey: Prentice hall.

Ennew, C; Watkin,T; Wright, M.(1998). **Marketing Finanacial Services**, 2nd edition.
    Butterworth Heinemann Publishers.

Lovelock, C.H (1996). **Services Marketing**. Prentice –Hall International

Hummed and Sarit R. (1988). " Integrated customer service and retailing strategy".
    International Journal of retailing, Vol. No 3

Kimonye, M.(1998). "The key to customer satisfaction**". Marketing review, a Journal of
    marketing students associaton University of Nairobi**, Vol, no 10.

Kibera, F.N. (1999). "Quality Customer Service". Unpublished Paper, Department of Business Administration, University of Nairobi.

Kibera, F.N.& Waruingi, B.C. (1998).**Fundamentals of Marketing: An African Perspective**, Kenya Literature Bureau, Nairobi.

Kinnear, T.C; Taylor, R. (1988). **Marketing Research**, 3rd edition. MacGraw-Hill book Co.

Kotler, p.(2000). **Marketing Management**,10th edition

Kotler,p. and Amstrong. (1989). **Basic Marketing**. 9th edition.

Luck, R. **Marketing Research**, 7th edition. Prentice hall

Maina, P.M. (2001). "Perceived service quality. The case of mobile phone services in Kenya". Unpublished MBA research project, University of Nairobi, Nairobi, Kenya.

Mirie, S.W. (1987). "Marketing of insurance services". Unpublished MBA research project, University of Nairobi, Nairobi, Kenya.

Muriithi, N. (1996). "Analysis of customer service offered by commercial banks in Kenya". Unpublished MBA research project, University of Nairobi, Nairobi, Kenya.

Mwaura, C. N. (2001). **General Principles of Insurance Practice** by Chartered Insurance Practitioner. Nairobi.

Payne, A. (1993). **Services marketing**, Prentice hall.

Rust, R.T; Zattorik. A.J; Keiningham, T.L. (1996). **Service Marketing**. Harper Collins college publishers.

Stanton, W.J; Etzel, M. J; Bruce, J.W. (1991). Fundamentals of Marketing, 9th edition. McGraw-Hill, Newyork

Walker, D. (1994). **Customer first. A strategy for quality service,** Gower publishers.

Zeithaml, A.Z; Bitner M.J. (2000). **Service marketing, Integrating customer focus across the firm**, 2nd edition. McGraw –hill company.