

ISSN : 2277-677X

# **International Journal of Social Sciences & Interdisciplinary Research**

**Vision : Let us Research**

**Vol.4 No. 1  
Jan. - Mar. 2014**



**INDIANRESEARCHJOURNALS.COM**



INTERNATIONAL JOURNAL OF SOCIAL SCIENCES  
& INTERDISCIPLINARY RESEARCH

Vol.4 No. 1, Jan. - Mar. 2015, ISSN 2277-677X

**C O N T E N T S**

PERCEPTION OF EMPLOYEES TOWARDS THE REWARD SYSTEM - A CASE STUDY IN SOFTWARE COMPANY IN BANGALORE Dr. Vishal Samartha, Mr.Lokesh, Mr.Karthik Kudroli, Mrs.Sushma Nair	1
PERSONALITY TRAITS IN HEALTH INSURANCE C.K. Sunitha, , Dr. M. Edwin Gnanadhas	8
CONSUMERS' BEHAVIOURS AND ATTITUDES TOWARD HEALTH DRINKS IN FMCG SECTOR- AN EMPIRICAL STUDY OF LUDHIANA DISTRICT Dr. Rajesh Kumar	14
OPTIMIZED RECONFIGURABLE NETWORK TOPOLOGY IN NOC M.Lordwin Cecil Prabhaker, M.Vinoth Kumar	19
TEACHER ATTITUDES ON ACTIVITY BASED LEARNING (ABL): A BRIEF REVIEW Dr. V. Anitha Devi, Dr. Velmurugan G	27
SECONDARY EDUCATION CURRICULUM ON ENVIRONMENT AND ITS IMPACT ON STUDENT Snigdha Panda, Tilottama Senapati	33
A STUDY ON THE COMPARATIVE ANALYSIS OF FACTORS EFFECTING ATTENTIVE SPAN OF RURAL AND URBAN STUDENTS OF BIRBHUM DISTRICT, WEST BENGAL Dr. Surajit Let	39
A STUDY OF THE RELATIONSHIP BETWEEN FUND SIZE AND PERFORMANCE OF SELECTED EQUITY ORIENTED MUTUAL FUND SCHEMES IN INDIA Leena Roy Mallick	50
A STUDY ON CONSUMERS PREFERENCE AND ATTITUDE TOWARDS ONLINE SHOPPING S. Yasmin, Dr. P. Ananda Murugan	57
HUMAN RIGHTS AND SCIOAL JUSTICE: LOCAL GOVERNANCE Dr. Chandrashekar.E	65

## PERSONALITY TRAITS IN HEALTH INSURANCE

\* C.K. Sunitha\*\* Dr. M. Edwin Gnanadhas

\* Assistant Professor in Commerce (S.F), Holy Cross College (Autonomous) Nagercoil 629 004.

\*\* Ph.D. Associate Professor in Commerce, Scott Christian College (Autonomous) Nagercoil 629 003.

### ABSTRACT

The health insurance taken by the respondents may be closely associated with the socio-economic of the respondents and their personality. It may be related to their personal and family profile. Even though, there are so many profile variables, the present study confine to only level of education, gender, marital status, age, occupation, personal income, nature of family, family size, number of educated per family, number of earning members per family, and family income. The personality traits of the respondents covers the sociability, media exposure, innovativeness, scientific orientation, risk orientation and environmental awareness. Since the background of the respondents may be related to their level of awareness and perception on service quality of health insurance. Nine hundred and eighty eight respondents in kanyakumari district who are having health insurance policy were met and datas are collected from them.

Key Words: Personality, Traits, Insured, Not insured

### INTRODUCTION

Improvement in health status is vital for the enhancement of human capabilities. Illness is an important source of deterioration to human health. Of all the risks facing poor households, health risks pose the greatest threat to their lives and livelihoods. A health shock adds health expenditures to the burden of the poor. Even a minor health shock can cause a major impact on poor persons' ability to work and curtail their earning capacity. Moreover, given the strong link between health and income at low income levels, a health shock usually affects the poor the most. Non-availability of necessary finances is a major obstacle in the health care attainments of people in many developing countries, including India. With the continuing resource constraints of the government and competing sectoral demands, the allocation needed in the health sector may not increase to adequate level in the near future. Nonetheless, the present trend of cut in government subsidies as a part of the 'new economic reforms' is likely to put more pressure on this sector. It is in this context that many countries are looking forward to the alternatives to the tax based resource mobilization for health care financing. Health Insurance (HI) has emerged as part of the reform drive in

many countries, both as a way of augmenting financial resources available for care, and as a means of better linking health demand to the provision of services.

HI is becoming a major policy preoccupation as it can provide risk management that respects the complexity of the risks and is one of the best financial tools to prevent a situation whereby people with income above the poverty line would fall under it. Promoting HI is a rational and powerful response as it serves the insured well even when the insurance is a very humble local micro health scheme as evidenced from some of the micro schemes' increasing access to health care. HI mechanism is getting more popularity even in developing countries backed up by the evidence from the successful experience of the developed countries where HI system is an integral part of the health care system. Notwithstanding the view that HI is a viable solution HI is nearly nonexistent among poor communities in rural India. The HI coverage (i.e. the number of people covered by HI) in India, in some form or the other, i.e. whether in public or private sphere, is abysmally low and is only around 3 per cent of the total Indian Population. At the same time, interest in taking

provide a lot of exposure and knowledge on the availability of health insurance services. The levels of sociability are confined to less than 2.00, 2.00 to 3.00, 3.01 to 4.00 and above 4.00.

#### Media Exposure of the Respondents

The media exposure of the respondents indicates the level of exposure to the various media among the respondents. The level of exposure to media is highly essential to understand the current environment especially in the insurance industry. The level of media exposure among the respondents is measured with the help of some relevant statements. The levels of media exposure are confined to less than 2.00, 2.00 to 3.00, 3.01 to 4.00, and above 4.00. The distribution of respondents based on their levels of media exposure

#### Innovativeness among the Respondents

The innovativeness of the respondents represents the level of awareness and adoption of the innovative ideas among the respondents. Since it is one of the important personality traits of the respondents, it is included in the present study. The levels of innovativeness among the respondents have been measured with the help of some related statements which are measured at five point scale. The mean score of the statements indicates the level of innovativeness among the respondents. These levels are confined to less than 2.00, 2.00 to 3.00, 3.01 to 4.00 and above 4.00.

#### Risk Orientation among the Respondents

It represents the level of risk taken by respondents in the day-to-day and future life; and also their opinion on taking risks. The level of risk orientation among the respondents has been computed with the help of some statements. The levels of risk orientation among them are confined to less than 2.00; 2.00 to 3.00; 3.01 to 4.00 and above 4.00.

The highest levels of risk orientation among the respondents are 2.00 to 3.00 and 3.01 to 4.00 which constitutes 41.19 and 32.19 per cent to the total respectively.

## REVIEW OF LITERATURE

1. Premium per person may be related to age, gender, family size, region, occupation, length of contract period, individual or group contract period, sum insured, health status at the time of enrolment and health habits such as smoking, drinking, exercising (Abel - Smith 1992).
2. When markets cannot charge premium that accurately reflect the individuals risk of uncovered services, low risks are not able to purchase comprehensive coverage in such market (Rothschild, M and Stieglitz 1976).
3. Hasanbanu and Nagajyothi (2007) argued that there is a significant relationship between educational qualification, gender, occupational income of respondents and their level of investment. There is no significant relationship between marital status, family type, family size and level of investment, while taking policies.
4. There are two types of premium rate restriction Community rating (by class) and a ban on certain rating factors or rate banding (by class) enforce welfare - enhancing pool of low and high risk individuals. Dahl by (1981) has pointed out that this conclusion is valid only if Nash equilibrium does not exist in the competitive insurance market.

#### Statement of the Problem

Numerous people were health insurance policy holders. It is important to analyse the association between the socio-economic profile of the respondents and the personality traits of the respondents influence their level of awareness, extent of health insurance coverage, the expectation and perception on the service quality health insurance.

#### Scope of the Study

The present study is confined to the health insurance policy holders in Kanyakumari District. This study approach gives importance to the profile of the

respondents and their personality traits regarding health insurance.

**Objective of the Study**

The objective of the study is to reveal the profile of the sample respondents along with their personality traits.

**Area of the Study**

The area of operation is in Kanyakumari District. Information is collected from health insurance policy holders in Kanyakumari District.

**Sample Design**

The research design chosen for this study is descriptive. The population of the study indicates the local number of population in Kanyakumari District.

**Methodology**

This study is carried out on the basis of both primary as well as secondary sources.

**Framework of Analysis**

The collected data were analysed with the help of T. test and One way Analysis of variance (ANOVA)

**t-test**

The 't' test is one of parametric tests to analyse the significant difference among the two group of samples. It is applied when the criterion variable is in interval scale. The 't' statistics are calculated by

$$t = \frac{\bar{X}_1 - \bar{X}_2}{\frac{(n_1 - 1)\sigma_{s1}^2 + (n_2 - 1)\sigma_{s2}^2}{n_1 + n_2 - 2} \times \sqrt{\frac{1}{n_1} + \frac{1}{n_2}}}$$

which is compared with the degree of freedom of (n1 + n2 - 2).

Whereas t = 't' statistics

- $\bar{X}_1$  = mean of the first group of sample
- $\bar{X}_2$  = mean of the second group of sample
- $n_1$  = number of samples in the first group
- $n_2$  = number of samples in the second group

- $\sigma^2 S_1$  = variance in the first sample
- $\sigma^2 S_2$  = variance in the second sample

**One way Analysis of Variance (ANOVA)**

The one way analysis of variance is applied when the criterion variable is in interval scale and the number of group of samples included for the study is more than two. The 'F' statistics is calculated by

$$F = \frac{Trss/df}{Ess/df} = \frac{\text{Greater variance}}{\text{Small variance}}$$

Compared with the F(K-1;N-k) degree of freedom  
Whereas F = 'F' statistics

- N = Number of sample size
- K = Number of groups included
- Trss/df = Variance between groups and
- Ess/df = Variance within groups.

**LIMITATIONS OF THE STUDY**

The limitations of the study are

- Only the health insurance policy holders are included for the study.
- The study is restricted to Kanyakumari District Only.

**RESULTS AND DISCUSSION**

The personality traits of the respondents have been measured with the help of the mean scores of all the six components of personality traits among the respondents. The 't' test has been administered to examine the significant difference among the insured and non-insured respondents regarding the existence of their personality traits. In addition, the overall score on personality trait among the respondents has been computed. The results are given in the following table.

Of the insured respondents, risk orientation and innovativeness are the major personality traits since their mean scores are 3.8344 and 3.7383 respectively. Among the non-insured, these are media exposure and scientific orientation since their mean scores are 3.2198 and 3.1319 respectively. Regarding the possession of personality traits, the significant difference among the insured and not insured respondents are seen in the case

## PERSONALITY TRAITS AMONG THE RESPONDENTS

Sl.No.	Component of personality traits	Mean score among respondents in		't' statistics
		Insured	Non Insured	
1.	Sociability	3.2546	2.4468	2.2788*
2.	Media exposure	3.7013	3.2198	2.3044*
3.	Innovativeness	3.7383	3.0546	2.7548*
4.	Scientific orientation	3.3008	3.1319	0.4667
5.	Risk orientation	3.8344	3.0671	2.8103*
6.	Environmental awareness	2.9688	2.7512	0.4591
	Overall	3.4797	2.9452	2.1782*

\*Significant at five per cent level.

of sociability, media exposure, innovativeness and risk orientation since their respondents 't' statistics are significant at five per cent level.

#### Association between the Profile of Respondents and their Personality Traits

The association between the profile of the respondents and their personality have been examined with the help of One-way Analysis of Variance. The included profile variables are nativity, age, gender, level of education, occupation, marital status, personal income per month, nature of family, family size, number of educated population, number of earning members per family,

family income per month nativity, level of education head of the household and health risk among respondents. The results are shown in the following table.

The significantly associating profile variables with personality of the respondents are age, level of education, occupation, spouses level of education, personal income per month, family size, number of educated population, number of earning members per family, family income per month level of education of the head and health risk among the respondents. Since their 'F' statistics are significant at five per cent level.

#### ASSOCIATION BETWEEN PROFILE OF RESPONDENTS AND THEIR PERSONALITY SCORES

Sl.No.	Profile variables	'F' statistics	Table value of 'F' at five per cent	Result
1.	Level of education	2.9083	2.21	Significant
2.	Gender	2.0514	3.84	Insignificant
3.	Marital status	2.1782	2.60	Significant
4.	Age	3.0441	2.37	Significant
5.	Occupation	2.6673	2.21	Insignificant
6.	Personal income per month	2.8944	2.37	Significant
7.	Nature of family	3.4542	3.84	Insignificant
8.	Family size	2.1143	2.37	Significant
9.	Number of educated population	2.9094	2.60	Significant
10.	Number of earning members per family	3.6673	3.00	Significant
11.	Family income	2.9011	2.37	Significant
12.	Nativity	3.1179	3.84	Insignificant
13.	Level of education of head	2.7974	2.37	Significant
14.	Health risk	2.9969	2.60	Significant

**POLICY IMPLICATIONS**

Health insurance companies are advised to focus on various promotional schemes to create more awareness and customer satisfaction in order to generate loyalty on health insurance.

**CONCLUSION**

The significantly influencing factors to have health insurance policies among the respondents are their level of education, health risks faced in life and the age.

**REFERENCE**

1. Abel-Smith, B., (1992), "Health Insurance in developing Countries: Lessons from Experience", Health Policy and Planning, 7(3), pp.215-226.
2. Dahlby, B.G., (1981)", Adverse selection and Pareto Improvement through compulsory Insurance", Public choice, 37. Pp. 547 - 558.
3. Hasanbanu S and Nagajyothi R.S. (2007), "A study of Insurance perspective in uttamapalayam Taluk," Indian Journal of Marketing, May, pp 10 - 16.
4. Rothschild, Michael and Joseph Stieglitz (1976). Equilibrium in competitive Insurance Markets: An essay on the Economics of Imperfect Information, Quarterly Journal of Economics, 90, pp - 629 - 649.

Sl.No	Factor	Mean	Std. Dev.
1	Level of education	2.88	1.02
2	Gender	2.84	1.01
3	Marital status	2.80	1.00
4	Age	2.77	1.00
5	Occupation	2.71	1.00
6	Personal income per month	2.69	1.00
7	Number of family	2.64	1.00
8	Family size	2.57	1.00
9	Number of dependant	2.50	1.00
10	Number of earning members per family	2.00	1.00
11	Family income	2.37	1.00
12	Health	2.59	1.00
13	Health	2.47	1.00
14	Health risk	2.00	1.00

