2024

Influence of service quality on customer satisfaction in general insurance companies in Kenya.

Pherry, Emily Awuor
Strathmore Business School
Strathmore University

INFLUENCE OF SERVICE QUALITY ON CUSTOMER SATISFACTION IN GENERAL INSURANCE COMPANIES IN KENYA

BY

EMILY AWUOR PHERRY

MCOM -149566

A RESEARCH THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE REQUIREMENT FOR THE DEGREE OF MASTER OF COMMERCE AT STRATHMORE UNIVERSITY BUSINESS SCHOOL, STRATHMORE UNIVERSITY, NAIROBI KENYA.

MAY 2024
DECLARATION

Student's declaration

I declare that this thesis is my original work and has not been submitted for examination in any other University. To the best of my knowledge and belief this thesis does not contain materials previously published or written by another person except where due reference is made in the thesis itself.

Student's Name: Emily Awuor Pherry

Date: 24 May 2024

Signature: 

Approval

Dr. Lucy Kuthea Nguti,

Strathmore University Business School, Strathmore University.

Date: 24th May 2024

Signature: 

ABSTRACT

Several studies have been done to demostrate how service quality is connected to customer satisfaction in different sectors. There are however few studies aimed at examinining the nexus between service quality and customer satisfaction in general insurance. Previous studies in the insurance industry in East Africa have shown that service delivery is not at its best and that customer satisfaction remains a challenge. Negative reputation, mistrust and ethical malpractices are notable challenges in the Kenya insurance industry. This study investigated the influence service quality on customer satisfaction in the general insurance sector using SERVQUAL model. The study was anchored on the Expectancy Disconfirmation Paradigm and Dissonance Theory as a supporting theory. The study philosophy was positivism which adopts a deductive and objective approach to research. A quantitative method with descriptive cross-sectional research design was adopted. A survey was conducted on a sample of 375 general insurance policyholders. Convenience sampling technique was used to reach informants. Structured questionnaires were used in collection of primary data. The instrument was checked for validity and reliability. Reliability of the instrument was tested using Cronbach's Alpha. Statistical Package for Social Sciences (SPSS) version 20 was applied to analyze primary data. Descriptive analysis involved the use of means, percentages and standard deviations while deductive statistics incorporated Pearson correlation and multiple regression analyses. The findings established that Tangibility, Reliability, Responsiveness, Assurance and Empathy had positive and remarkable influence on customer satisfaction in general insurance companies in Kenya. Policymakers can consider the findings when developing policies that promote insurance inclusivity, education, and consumer protection. Regulatory bodies will be informed by the findings when enforcing market conduct supervision to safeguard consumer interests. Insurance practitioners can leverage on the identified service gaps to formulate necessary strategies to enhance service delivery. This research contributes to the existing theories on service quality and customer satisfaction and bridges the literature gap in general insurance studies.

Keywords: **SERVQUAL, Customer Satisfaction, Service Quality, General insurance.**

ACKNOWLEDGEMENT

To the Almighty God, I am forever grateful to you.

To Strathmore Business School, Strathmore University lecturers, I sincerely acknowledge your dedication and support that made my dream come true, and particularly my supervisor, Dr. Lucy Kuthea Nguti, thank you for providing valuable guidance.

To my MCOM family, you provided great intellectual and social support, what great minds at Strathmore Business School!

DEDICATION

This thesis is dedicated to my wonderful family who cheered me on when the going got tough, your love, support and faith in me kept me focused. May the Almighty God favour you.

TABLE OF CONTENTS

LIST OF FIGURES

LIST OF TABLES

ABBREVIATIONS

AKI	Association of Kenya Insurers
CS	Customer Satisfaction
EDP	Expectancy Disconfirmation Paradigm
EPSI	European Performance Satisfaction Index
GDP	Gross Domestic Product
IRA	Insurance Regulatory Authority
KSH	Kenyan Shilling
KPMG	Klynveld Peat Marwick Goerdeler
NACOSTI	National Commission for Science, Technology and Innovation
PWOM	Positive Word of Mouth
RATER	Reliability Assurance Tangibility Empathy Responsiveness
SQ	Service Quality
SERVQUAL	Service Quality Model
SERVPERF	Service Performance
USD	United States of America, Dollar

CHAPTER ONE
INTRODUCTION

1.1 Background of the Study

Customer satisfaction is an important concept in business. According to Deloitte (2023) customers are more demanding than before and business owners must strive to attract and keep their customers to remain successful. Research has shown that it costs much less to keep existing customers than to gain new ones (Pierce, 2023). It costs between five (5) to twenty-five times more to attract new customers, 86% customers are ready to pay more for better experience and 80% will shift due to one bad experience (Cleave, 2015). Customer satisfaction is the first step to retaining customers and attaining good public reputation (Ghotbabadi et al., 2015). Service quality lays the foundation for and drives customer satisfaction (Nguyen et al., 2018; Oliver, 1993).

Insurance business, being a services industry, customer satisfaction is critical because services are intangible and evaluating service quality is more intricate than for products. Customer satisfaction within the insurance business therefore partly depends on how customers evaluate services performance by companies (Nguyen et al., 2018). According to Mishra and Mishra (2011), the primary role of insurance is to provide protection, certainty and risk sharing. Additionally, insurance promotes savings and ensure business continuity by paying claims (Mishra & Mishra 2011). The financial stability for individuals and corporations are therefore guaranteed through insurance (Thoyts, 2010). It is never certain when a loss will occur, how often it will occur and the magnitude of loss whenever it occurs. Insurance is a promise that provides a cushion against financial uncertainty. Policyholders are the customers, who in exchange for protection against loss arising from insured events will pay a price, known as premiums (Kagan, 2023).

Customer satisfaction in the insurance business remains a global problem and a consequence of poor service design and delivery (Tsoukatos et al., 2004). Insurance penetration which is the percentage of total insurance premiums to Gross Domestic Product (GDP) (Ramanathan et al., 2018), is generally low globally. According to Atlas Magazine (2022), global insurance penetration was at seven-point four percent (7.4%)

in the year 2021, with North America at 11.4%, Asia Pacific at five-point three percent (5.3%), Europe at five percent (5%), other continents were below five percent (5%). In Africa, South Africa had a penetration of 12.2%, and Namibia at seven-point one percent (7.1%) in 2021, while other countries' penetration was below five percent (5%), (Atlas Magazine, 2022). In East Africa, a survey by Deloitte (2023) showed that Uganda's insurance penetration was zero-point eight percent (0.8%), Tanzania, zero-point six percent (0.6%) and Kenya at two-point two (2.2%).

In Kenya, insurance is concentrated in the urban centers, Nairobi County alone accounts for 80% of the total General premiums (IRA, 2022). A Survey by Klynveld Peat Marwick Goerdeler (KPMG) showed that insurance companies in East Africa have no confidence in their customer services, customer care is below average and key challenge was in satisfying customers (Reader et al., 2016). These studies point at the need to effectively address customer satisfaction problem.

1.1.1 Service Quality

Services possess distinctive characteristics from products. These characteristics include intangibility, heterogeneity, inseparability and perishability (Lovelock & Wirtz, 2012) which make evaluating Service Quality (SQ) more complex than product quality (Gronroos, 1988). Factors such as staff training, experience and attitude also affect overall SQ (Khudhar et al., 2020). This study however probed the nexus between SQ and customer satisfaction.

SQ is the outcome of attending to the expectations and demands of customers through service delivery (Gronroos, 1984; Osman & Sentosa, 2013). This means that customers judge SQ based on their expectations. Perceived SQ also refers to the comparison between customers' perceptions and expectations (Parasuraman, Zeithaml, & Berry, 1988). According to service quality literature, SQ refers to what the providers are expected to bring to the table (Parasuraman et al., 1988). Consequently, customers perceive service to be of high quality the offering match or surpass what they anticipated. Similarly, Zeithaml et al. (1990) defined SQ as how well customers think that their needs should be addressed by the service provider. This is to say that SQ is the overall opinion about excellence of service (Zeithaml et al., 1990) or judgment that

relates to how superior a service is, in relation to other services (Parasuraman et al., 1988).

Whereas Parasuraman et al. (1985) propose the use of expectations and perceived performance in evaluating SQ, Cronin and Taylor (1992) suggested that SQ should be evaluated using customer's perception only. This means that SQ refers to how customers perceive actual service delivery/performance. Cronin and Taylor (1992) concluded that perceptions are better predictors of SQ than expectations, hence the use of perceived performance only, to measure SQ (Burbock, 2014; Ghotbabadi et al., 2015). SQ relates to the difference between perceived performance and the ideal amount of a feature (Teas, 1993), meaning that SQ should be measured against the best standards. It is therefore evident that scholars have not agreed on a standard way of measuring SQ. It is still not settled whether the difference approach or overall perception of performance is superior.

Service Tangibility relates to the outward appearance of personnel, office, the physical facility, and equipment used in service delivery (Parasuraman et al., 1988) which form part of the customer experience. Physical facilities can include convenient location, ample parking, and attractive interior (Tsoukatos et al., 2004). In the insurance business tangibility includes physical appearance of staff which includes their grooming and demeanor, ambiance of office spaces among others. Though insurance is considered an intangible service, a good atmosphere that is clean, comfortable, safe and secure can enhance satisfaction (Wang et al., 2020).

Services are considered Reliable when provides strive to fulfil promises (Liang, 2008; Pakurar et al., 2019). Reliability includes financial stability of the company, service of high quality, consistent customer-focus and easy to understand insurance policies, competitive pricing, use of internet to transact business and payment of claims without hasstle (Tsoukatos et al., 2004). Intangibility of insurance service makes trust a fundamental concept in insurance (Guiso, 2021). Insurers expect customers to act in good faith and make genuine claims. The customers on the other hand expect that insurers will be sincere and pay claims promptly and adequately. In insurance, reliability is mainly assessed at the claim payment stage by the insurer's ability to settle

the claim without hassle, timely and adequately. Dependability of insurance staff to honor commitments to customers and accuracy of records contribute to reliability (Parasuraman et al., 1988) in insurance. Customers expect providers to deliver service with precision in the first instance.

Responsiveness is giving customers timelines for activities and giving them undivided attention (Parasuraman et al., 1988). This means quick response to customer queries, calls and complaints rather than being too busy to help (Yarimoglu, 2014). A company that responds to customer communications promptly is generally considered as offering quality service. Responsiveness involves provision of solutions to problems by designing products/services to respond to those problems seamlessly and with effective customer communications (Tsoukatos et al., 2004). Training of insurance staff builds capacity in addressing customers' requirements.

Assurance relates to keeping customers informed, listening to them regardless of their ethnic background, education level, age or nationality (Pakurar et al., 2019). This means that customers' circumstances should not be seen as hinderance during service delivery. Assurance also refers to service providers capability in creating a sense of trust and belief in their client (Liang, 2008). Assurance is critical because customers may at times feel that their judgement regarding certain decisions may be inadequate and need to depend on the service provider. Assurance also refers to service scenarios when customers are assured of the best attention and are engaged past the point of sales. Staff often give accurate representation of products and services when they have skills and knowledge to competently perform their duties (Tsoukatos et al., 2004). Insurers are generally considered to possess more information about insurance compared to customers therefore staff should act in the best interest of their customers.

Empathy means conveying a feeling to customers that make them feel unique and special (Pakurar et al., 2019), or giving personalized care and attention to customers (Liang, 2008). It involves stepping into the shoes of the customer and finding the most appropriate solutions to their needs which may at times go beyond the normal practice. Moreover, in relation to employees, empathy refers to demonstration of trustworthiness, integrity, openness to receive complaints and criticisms, commitment to ethical

behavior, use reliable, efficient distribution channels, effective differentiation of product/services from competitors (Tsoukatos et al., 2004). Insurance is at times associated with adversity and customers expect insurers to show compassion at the time of claims settlement rather than being treated as an advesary.

Measuring SQ therefore depends on the adopted definition (Seth & Deshmukh, 2005; Torres, 2014; Wattoo & Iqbal, 2022). This study therefore assessed SQ by investigating how Reliability, Assurance, Tangibility, Empathy and Responsiveness (RATER) affected gratification in the General insurance companies in Kenya. Parasuraman et al. (1988) observed that customers tend evaluate services using RATER no matter the business. Overall customer attitudes of service performance were adopted to measure SQ (Kant et al., 2017; Cronin & Taylor, 1992), in General insurance companies in Kenya. This is because recent studies have emphasized that attitude as a measure of SQ suffice and are more useful than the difference method (Burbock, 2014; Ghotbabadi et al., 2015). Moreover, the Gap model, further discussed under literature review has been criticized for it is cumbersome to operationalize and is not effectiveness across cultures (Kant et al., 2017).

1.1.2 Customer Satisfaction

Customers' expectations are ever changing due to increased competition globally. It is therefore important for business owners to understand how to sway expectations and keep clients satisfied. Scholars have defined gratification differently, there is no globally unifying definition. According to Oliver (1993), CS refers to the degree to which the needs and expectations of customers are met in service delivery. Oliver observed that CS summarizes a psychological process that follows a consumption experience (Oliver, 1993). Customers expect prompt and accurate services from staff (Gachau, 2016). Customers usually want services to be delivered without long waiting time, they want services delivered the right way, the first time at a fair price and conveniently. Satisfied customers tend to re-purchase services, invite other customers and share their good experience with others (Wang et al., 2020). Lovelock and Wirtz (2012) observed that customers will be satisfied as long as perceived performance meet certain threshold. This means that customers expect services to be above the minimum

threshold to be satisfied. Whenever service performance is below the threshold, customers will be dissatisfaction and when performance is above the threshold, customers will be satisfied or delighted. Dissatisfied customers may suffer in silence, complain or at best, switch provider (Lovelock & Wirtz, 2012).

According to Turkson (2012), CS is defined as the degree to which the wants and problems of a customer are addressed in a service delivery. This definition focuses on satisfying wants and problem solving. It emphasizes a company's responsiveness to customer needs. An example would be how complaints and enquiries are addressed. It therefore follows that without accurate identification of customers' preferences and formulating appropriate strategies to address them, insurers cannot satisfy their customers.

CS also relates to the preparedness of customers to make subsequent purchase from the same provider (Liang, 2008; Wang et al., 2020). Customers often remain with a service provider and re-purchase their offerings when they are satisfied. Consequently, a company that does not view satisfaction from the customers' perspective will be unable to meet their needs hence dissatisfaction, customer exodus and consequently poor business performance.

CS also relates to the feeling of pleasure or disappointment which follows when someone compares the service expectations against the perceived service performance (Kotler & Keller, 2016). A customer will experience pleasure or satisfaction when a product lives up to its expectations while they will be disappointed when the service falls short of their expectations (Kotler & Keller, 2016). Nonetheless, pleasure may not translate to satisfaction especially if perceived performance falls short of expectations. An example would be an overdue payment to a customer following hard and length claims process. According to Elkhani and Bakri (2012), CS is not a destination but the starting point to winning the trust of customers.

Measuring the level of CS relative to competition is critical for creating competitive advantage in any business. Scholars have different approaches for measuring the level of CS. Oliver (1977) proposed the Expectation Disconfirmation Paradigm (EDP) in

measuring CS. EDP posits that CS is the disparity between what customers anticipate and what they experience. Elkhani and Bakri (2012) observed that EDP separates service performance into two stages, pre-purchase, and post-sale stages. Whereas expectations relate to pre-purchase stage, perceived performance relates to post-sale. Disconfirmation is realized whenever there is variance between expectations and perceived performance (Elkhani & Bakri, 2012). Consequently, the comparison of the pre-consumption and post consumption experiences will lead to satisfaction or dissatisfaction. Therefore, when expectations match perceived performance, there is confirmation. However, whenever the experience is worse than what customers anticipated, the result is a negative disconfirmation (dissatisfaction). Meanwhile, a positive disconfirmation is achieved when perceived service performance surpasses expectations (Elkhani & Bakri, 2012). The EDP has however been criticized as inadequate in giving a comprehensive view of CS because it does not consider other factors such timing, experience, and brand which also impact customer expectations (Nguyen et al., 2018).

The number of complaints is also useful in measuring satisfaction levels (Kotler & Keller, 2016). Consequently, promptness in resolution of complaints is likely to enhance CS. Complaints alone will, however, not give an accurate measure of CS because not all dissatisfied customers complain. Past studies have confirmed that above 90% of disgruntled clients will not complain, they will simply move to competitors and continue to voice their dissatisfaction to other potential customers (Kotler & Keller, 2016). Other factors such as perceived value, brand image, personal circumstances also influence CS (Janahi & Al Mubarak, 2017; Nguyen et al., 2018).

According to Anderson and Fornell (2000), the American Customer Satisfaction Index (ACSI) adopts variables such as perceived quality, perceived value and customer expectations as antecedents to CS. Perceived quality relates to the overall service performance or experience, while value assesses the service quality in comparison to the price paid (Anderson & Fornell, 2000). Ngo (2015) further suggested that, to assess CS, both antecedents and consequences should be incorporated into the measuring scale. Antecedents include pre-purchase and interactive quality such as expectations,

perceived performance or service quality and perceived value (Ngo, 2015). Consequences, on the other hand, refer to post purchase behavior such as loyalty and complaints (Anderson & Fornell, 2000). Loyalty was assessed using variables such as re-use intentions, inviting of others to make purchases and spreading good cheer about a service provider (Wang et al., 2020). Customer Satisfaction Index (CSI) is an accredited way to computing cs determining the level of CS, it is comparatively powerful irrespective of the nature of business (Ngo, 2015).

Customer Satisfaction Score (CSAT) is another key performance metric used to measure CS. According to Rahaman (2023), CSAT is useful in measuring CS with specific interactions or services on a 5-factor scale. CSAT allows different components of the customer journey to be picked out for evaluation at in the short-term to point out the key areas of improvement. A 5-factor scale of Very satisfied, Satisfied, Neutral, Unsatified and Very unsatisfied, where 5=Very satisfied and 1=Very unsatisfied. CSAT the outcome of comparing total of satisfied and very satisfied scores with total response expressed as a percentage (Rahaman, 2023).

Net Promote Score (NPS) on the other hand measures the probability of customers to recommend a product or service to other customers on a 10-factor scale (Rahaman, 2023). According to Rahaman (2023), promoters are informants that score between 9-10, between 7-8 are passives while 6 and below are detractors. It is preferred for long-term assessment of customer experience in order to acertain their willlingness to promote a brand by verbalizing positive experience and loyalty. NPS is computed by subtracting the percentage of promoters from that of detractors (Rahaman, 2023).

CS is therefore multi-faceted and measuring it depends on the adopted definition. CSI is most preferred and common measure of CS, because it has been validated, it is standardized and has comparative power across businesses (Ngo, 2015). This study adopted CSI in determining the overall CS in General insurance in Kenya.

1.2 Problem Statement

According to Tsoukatos et al. (2004), gratification in insurance is a global problem and a consequence of poor service design and delivery. Insurance uptake is quite low as

reflected by the low Insurance penetration. According to Atlas Magazine (2022), global insurance penetration was at seven-point four percent (7.4%) in the year 2021. In Africa, apart from South Africa with a penetration of 12.2%, and Namibia at seven-point one percent (7.1%) in 2021, other countries' penetration was below five percent (5%), (Atlas Magazine 2022).

Several studies have established a linear connection beween service quality and gratification in sectors such as hospitality, banking, education and health. However, few studies focus on general insurance sector. There are diverse findings with some researchers finding positive and remarkable association between the variables while others have concluded that there is no association between some of the variables. Scholars seem to agree that Service Quality impacts business performance, gratification, retention and loyalty (Al-Tit, 2015; Arokiasamy & Huam, 2014; Awlachew, 2015; Motum & Kinyua, 2022; Wattoo & Iqbal, 2022). However, the correlation, that is strength and direction, between the variables is yet to be established and require further investigations (Dabholkar et al., 2000; Srivastava & Rai, 2014).

Global studies such as one carried out by Arokiasamy and Huam (2014) examined the association between service quality and gratification in the Malaysian auto industry. It established that Reliability, Responsiveness, Tangibility. Assurance and Empathy (SERVQUAL dimensions) had a positive impact on gratification. Responsiveness followed by reliability were established as having strong control on gratification. The current study was however based in the general insurance sector in Kenya, it incorporated a wider scope and population, thus more geralizable.

Ramamoorthy et al. (2018), in a study on service quality and its effects on customers' post purchase behaviour and gratification in the Indian life insurance sector established that not all SERVQUAL dimensions influenced gratification. Only reliability and responsiveness had notable and positive effect on gratification. Assurance, Empathy and Tangibilty did not have any significant sway over gratification. The current study focussed on general insurance sector in Kenya. The method of data analysis was also different from Ramamoorthy's.

Al-Tit (2015), in a study on effects of Service and Food Quality on gratification and Customer Retention in Jordan restaurants concluded that all SERVQUAL dimensions postively swayed gratification. Tangibility had the strongest control. Different varibles were however adopted for this current study, which was based in the insurance sector in Kenya.

In the contrary, Fida et al. (2020), investigated how of service quality controls customer loyalty and gratification in four (4) Islamic banks in Oman. He established that only empathy and responsiveness positively impacted gratification. The influence of Reliability, Assurance, Tangibility on gratification was found to be insignificant. This current study was in the insurance sector in Kenya, with a wider population hence more generalizable.

There are however few regional studies on this topic. Awlachew (2015), examined the effect of service quality on gratification in selected insurance companies in Ethiopia. He established that all SERVQUAL dimensions positively and remarkable determined gratification with Assurance having the strongest influence. The current study was based in Kenya wih a wider a population hence more generalizable.

Locally, a study by Chege (2021), examined the effects of service reliability on gratification in the insurance industry in Kenya. It confirmed that reliability had a direct positive and substantial hold on gratification. This study was different because it employed multiple independent variables.

A study by Gachau (2016), on gratification and internal service quality confirmed a positive impact of internal Service Quality on gratification. This study was different in terms of independent variables used and the population, which was policyholders.

The inconsistencies in findings, contextual, conceptual and population gaps therefore justified the current study.

1.3 Objective of the Study

1.3.1 General Research Objective

The general research objective of the study was to establish the influence of Service Quality on Customer Satisfaction in general insurance companies in Kenya.

1.3.2 Specific Research Objectives

i. To determine the influence of Tangibility on Customer Satisfaction in general insurance companies in Kenya.
ii. To establish the influence of Reliability on Customer Satisfaction in general insurance companies in Kenya.
iii. To determine the influence of Responsiveness on Customer Satisfaction in general insurance companies in Kenya.
iv. To determine the influence of Assurance on Customer Satisfaction in general insurance companies in Kenya.
v. To establish the influence of Empathy on Customer Satisfaction in general insurance companies in Kenya.

1.4 Research Questions

i. What is the influence of Tangibility on Customer Satisfaction in general insurance companies in Kenya?
ii. What is the influence of Reliability on Customer Satisfaction in general insurance companies in Kenya?
iii. What is the influence of Responsiveness on Customer Satisfaction in general insurance companies in Kenya?
iv. What is the influence of Assurance on Customer Satisfaction in general insurance companies in Kenya?
v. What is the influence of between Empathy on Customer Satisfaction in general insurance companies in Kenya?

1.5 Significance of the Study

1.5.1 Government agencies

The Government is interested in promoting growth and development within the insurance sector by increasing insurance penetration. Government agencies can

therefore use the research findings to develop policies that promote insurance inclusivity, education, consumer protection and access to information. Regulators can rely on the findings to enforce market conduct supervision within the sector by formulating guidelines for insurance best practice and for consumer protection.

1.5.2 Insurance companies

It is evident that a deliberate attention to quality in service delivery can foster positive customer experiences and hence a boost to the reputation of the industry. This finding of this study will benefit insurance managers who are keen to gain competitive advantages over their competitors. Managers can use the information to formulate and implement winning strategies. Delivering high-quality services is known to boost Customer gratification, retention and loyalty, which translates to growth in market share and growth.

1.5.3 Researchers and academia

This study contributes to the existing literature gap on Service Quality and Customer gratification studies in general insurance and specifically. It therefore addressed the existing literature gap. The study also lays a foundation for further research, opening avenues for more in-depth studies, comparative analyses, and benchmarking.

1.6 Scope of the Study

This study adopted a quantitative method with descriptive cross-sectional research design. Primary data was collected using structured questionnaires and analysis was done using SPSS software version 20. The study adopted SERVQUAL model and investigated service quality along the dimensions of Tangibility, Reliability, Responsiveness, Assurance and Empathy. Customer Satisfaction was examined against variables such as perceived service quality, perceived value, PWOM and re-purchase intentions. The study was carried out between December 2023 and March 2024. primary data.

CHAPTER TWO
LITERATURE REVIEW

2.1 Introduction

This chapter gives an overview of the general insurance sector in Kenya, detailed theoretical and empirical literature review, the research gaps that gave reason for the present study. The last section outlines the conceptual framework and operationalization of variables.

2.2 General Insurance Companies in Kenya

Insurance business is conducted under the Insurance Act, CAP. 487 of the Laws of Kenya. Insurance Regulatory Authority (IRA) is mandated to regulate and promote development in the insurance sector. Insurance business is broadly grouped into Life and General categories. The focus of this study was the General category which are short-term contracts usually renewable annually. The general insurance premium was estimated at ksh.165.74 billion in 2022 (IRA, 2022). General insurance business includes medical, motor vehicle, theft, marine, money, engineering, aviation, workmen's compensation, personal accident, fire, domestic and travel insurances (IRA, 2022).

In Kenya, insurance business is concentrated in the urban centers, with Nairobi County accounting for over 80% of the total General premiums (IRA, 2022). General business is facing a myriad of challenges which depicts a problem in satisfaction (Motum & Kinyua, 2022), insurance penetration is very low at two-point three percent (2.3%) (IRA, 2022). Customers endure poor customer service, non-supportive culture, limited distribution avenues, delayed claims settlement and unfair pricing (Barasa, 2016). Other challenges include low financial literacy, negative attitude, unhealthy competition, unethical business practices, insurance fraud and reputational risk, low adoption of information technology and lack of innovation (Motum & Kinyua, 2022; The National Treasury & Planning, 2021). Association of Kenyan Insurers (AKI) observed a need to create insurance awareness in the sector (AKI, 2022). Poor management practices have led to the collapse of some General insurance companies with loss of millions of customers' funds (IRA, 2022). The challenges experienced during the Covid19

pandemic set the stage for digital transformation (Arici et al., 2022). Transition to cloud platform is the most outstanding technology initiative by insurers in the last ten years (AKI, 2022). Banks, being cognizant of the enormous potential for growth in the insurance business, have started venturing into the insurance business. The current challenges in the insurance have prompted the Kenyan government to re-think strategies aimed at causing paradigm shift in the business. The government is at an advanced stage in the development of the National Insurance Policy to address the present challenges, promote inclusive insurance and promote development in the sector (The National Treasury & Planning, 2021).

According to IRA's 2022 - 2023 industry report, complaints by consumers have been on the rise, a total of 1,878 complaints were reported to IRA. Out of the complaints, 81% were raised by general insurance policyholders. The reported complaints were associated with delays in claims settlement, delays in claims administration, unfair rejection of claims, unsatisfactory settlements, and disputes on premium. In 2022, the insurance fraud rose by 21% from 124 to 150 reported cases. Motor insurance fraud and fraud by agents each contributed 33% of the total fraud (IRA, 2022). AKI (2021), observed that customers, employees, service providers and intermediaries all contribute to the industry fraud.

Transformational change is therefore necessary for the insurance business to ensure growth and sustainability (Motum & Kinyua, 2022). Insurers need greater levels of innovation coupled with provision of innovative services (Deloitte, 2023). It is therefore imperative that Customer gratification through effective service delivery should be management priority to ensure business sustainability (Motum & Kinyua, 2022).

2.3 Theoretical review

The main theory that anchored the study was the Expectancy Disconfirmation Paradigm (EDP) and while Dissonance Theory was supportive.

2.3.1 Expectancy Disconfirmation Paradigm

The paradigm was proposed by Oliver (1997, 1980) as a framework for measuring Customer gratification (Yüksel & Yüksel, 2008). The paradigm posits that customers usually have expectations about a product/service prior to purchase. These expectations

provide the basis for evaluating product or service performance. The result of the comparison can either be a confirmation or disconfirmation. Confirmation occurs whenever there is match between expectations and performance, while disconfirmation occurs whenever there is a variance. Customers experience negative disconfirmation whenever performance is below expectations. On the other hand, customers experience positive disconfirmation, whenever performance exceed expectations (Oliver, 1993; Yüksel & Yüksel, 2008). Consequently, whenever there is negative disconfirmation, the customers are dissatisfied, whereas they are satisfied when there is positive disconfirmation (Oliver, 1993).

According to Meryer and Westerbarkey (1996), measuring dis/confirmation can be done using either the direct (subjective) or inferred approach (subtractive). The direct approach requires the use of summary judgmental scales such as better than, expected or worse than expected. The inferred approach on the other hand involves getting the difference between expectations and perceived performance (Parasuraman et al., 1988). This entails obtaining different scores from customers on their expectations and their attitudes about performance and getting the difference between the two scores (Yüksel & Yüksel, 2008). Some scholars have recommended the direct approch as richer than the difference approach, because it incorporates the underlying complex processes that goes on in the customers mind (Oliver, 1980; Tse & Snaith 1988). Cronin and Taylor (1994) posited that SQ is a function of perception of service performance (SERVPERF) but not a disparity between expectations and perceived performance. Moreover, Burbock (2014) and Ghotbabadi et al. (2015) also recommended overall perception of performance measure for Service Quality over the initial subtractive approach.

Most critics of the EDP focused on the use of expectations as a variable for measuring gratification. According to Yüksel et al. (2008), the use of expectations imposed limitation in scenarios where there are no expectations. This could arise due to new service thus no expectations. Secondly, customers' interpret expectations differently, meaning that using expectations as a standard for measuring gratification will yield inconsistent outcomes. Thirdly, when the expectations are lowered due to previous bad experience, meeting such expectations may not equate satisfaction but tolerance. In the

contrary, customers sometimes raise their expectations in the presence of feasible alternatives. In such scenario, failing to meet the expectations will not translate to dissatisfaction, but would simply mean that customers expect firms to improve their service offerings to enhance value to them. Lastly, it is debatable whether expectations should be considered before or after service experience (Yüksel & Yüksel, 2001). It would therefore be necessary to define 'which expectations' for results of the subtractive approach to be consistent.

Other models associated with the EDP include GAP model, SERVQUAL and SERVPERF models. SERVQUAL model has been widely accepted as a tool for assessing Service Quality in difference sectors including but not limited to banking, hospitality, tourism, health, and education (Arici et al., 2022). SERVQUAL was an improvement from the GAP model which outlined deviations in service delivery as gaps. GAP 1: defined as the variation between management perceptions and customers' expectations. GAP 2: defined as the disparity between management perceptions of customers' expectations and Service Quality specifications. GAP 3: defined as the discrepancy between Service Quality specifications and actual service delivered. GAP 4: defined as the difference between service delivered and communication to customer. GAP 5: defined as a function of the initial four gaps or the contrast between customer expectations and perceived service (Parasuraman et al., 1985). The gaps were summarized as knowledge, policy, delivery, communications, service quality perception gaps respectively (Ghotbabadi et al., 2015). The Gap model has however been criticized for its difficulty in operationalization and effectiveness across cultures (Kant et al., 2017) because customer attitudes vary across regions and cultures. According to Carman (1990), the Gap model lacks theoretical and empirical backing.

Initially, SERVQUAL consisted of ten service dimensions namely, tangibility, reliability, responsiveness, assurance, empathy, competence, courtesy, security, credibility and understanding of the customers. Parasuraman et al. (1988) later consolidated the ten dimensions into five (5) main dimensions which are reliability, assurance, tangibility, empathy and responsiveness (RATER). Some scholars, however, opine that initial dimensions were more realistic and ought to be retained (Arici et al.,

2022). Researchers have further recommended a modification of SERVQUAL to accommodate unique service dimensions for different businesses (Arici et al., 2022; Dabholkar et al., 1996).

EDP postulates that both expectations and post purchase experiences are critical in shaping satisfactions. Customers have expectations which are either met, not met or exceeded after every purchase experience. Therefore, depending on the post purchase experience, customer may be satisfied or dissatisfied. EDP gives insight into post purchase behavior drawn from customer experiences. Satisfied customers are likely to re-purchase and invite other to share their experience (Wang et al., 2020). Companies must therefore understand customers' expectations and strive to leave a positive mark in the customer's mind to gain competitive advantage. Satisfied customers remain loyal (Nguyen et al. 2018) despite the existence of complementary services or products. Previous studies have confirmed that customer loyalty leads to cost savings since it costs less to retain existing customers (Pierce, 2023).

EDP underpins this study because it explains the relevance of expectations in any service delivery. Companies can influence both expectations and post purchase experiences in their favor. The reverse is equally true, mismanaging customer expectations can lead unfavorable experience followed by customer exodus and high business costs. Consequently, a customer who receives positive disconfirmation are satisfied and are likely to have repeat purchase, stay with the same company and introduce their friends. Recent studies show that CSI which is a function of expectations and perceptions (Ngo, 2015) is a measure of business performance (Rajendran, 2019).

2.3.2 Dissonance Theory

The theory founded by Leon Festinger (1957) posits that individuals expects to receive above average services and when they receive services below that which they expect, then they recognize a disparity, known as dissonance (Cardozo, 1965). This dissonance arises from varying individual cognitions such as belief, opinions, knowledge, environments (Vaidis & Bran, 2020). According to Vaidis and Bran (2020), the disparity of experiences causes a person to seek an acceptable state by trying to reduce the dissonance. Consequently, when a customer expects high value service but receive

low value service, s/he can change the perception score (Yi, 1990) by adjusting it to indicate that the service received was of high value, but in real sense, the customer is trying to reduce the dissonance. An example is when the price of a product is higher than expected, the customer will try to reduce dissonance by assuming that the value of product is high.

Oliver (1997) challenged the dissonance theory arguing that customers are not usually under any pressure to resolve the difference between expectations and product performance. Moreover, the magnitude and direction of the comparison is all that matters while expectations only act as baseline (Oliver, 1997). Additionally, Yi (1990), challenged the theory on the basis that, if it were true, then companies would strive to raise customer expectations far above actual product performance/quality to obtain high rating from customers, this is not realistic. Furthermore, (Woodruff & Jenkins, 1983), concluded that there is a tolerance level within which customers will be willing to accept a range of performance/quality and consider it as the norm, hence no dissonance. However, when perceived service performance is below the acceptable zone, it is perceived as different from the norm. Consequenly, services below the acceptable zone will cause dissatifaction (Woodruff & Jenkins, 1983). On the other hand service that fall within the the acceptance zone will cause contentment despite when compared to the best service.

The theory offers insight into customer behavour when faced with disparity in service delivery. It suggest that customers can at times endure sub-optimal service standards due to lack of better alternatives. This is risky because such customers will exit as soon as better services are available elsewhere. Many clients are not price sensitive as long as service is reliabli (Pierce, 2023). It is therefore the role of management influence quality standards using the ideal standards to ensure continual improvement.

2.4 Empirical Review

There are diverse findings with some researchers finding positive and significant relationship between the variables while others have concluded that there is insignificant relationship between some variables. The relationship between SQ on CS

is therefore not clear and could either be positive or negative (Dabholkar et al., 2000; Srivastava & Rai, 2014).

2.4.1 Service Quality and Customer Satisfaction

Gronroos (1984) posited that quality in service has three facets than can be used to measure SQ namely technical quality, functional quality, and image. The technical quality is the result of the interface with the service firm while functional quality relates to the dealings with the service giver as service is delivered. Technical quality therefore provides the solution to customer need while functional quality establishes emotional connection with the customer or the moment of truth (Grönroos, 1984). In insurance, technical quality may mean adequacy of payment, policy limitations and scope of coverage. Image on the other hand refers to how the firm is viewed in the sight to the customer; image is broader and encapsulates technical and functional quality, traditions, price, word of mouth and public relations (Lovelock & Wirtz, 2012). Gronroos' three facets model has however been criticized for lacking explanation on how to measure technical and functional quality (Ghotbabadi et al., 2015).

Dabholkar, Thorpe and Rentz (1996) developed the Retail Service Quality Scale (RSQS), a hierarchical model for measuring Service Quality. The model uses the dimensions, physical aspects, reliability, personal interactions, problem solving and company policy to measure SQ. The scale was considered best for businesses that sell both goods and services (Dabholkar et al., 1996). Insurance is largely considered as service business, therefore the RSQS was considered inappropriate.

Under the GAP model championed by Parasuraman et al. (1985), SQ was defined as the discrepancy between customer expectations and the perceived service performance, known as the Gap. This model posits that SQ can be improved by positively addressing the gaps thereby meeting customers' expectations (Parasuraman et al., 1985). The Gap model has however received a number of criticisms arising from the use of expectations to measure SQ. Latest studies also recommend overall customer perception measure for Service Quality over the gap model (Burbock, 2014; Ghotbabadi et al., 2015; Lovelock & Wirtz, 2012). In connection with the gap model, Parasuraman et al. (1988) later suggested a service quality assessment scale known as SERVQUAL, with five (5)

dimensions and 22-items scale, for evaluating SQ. Though the five (5) dimensions which were Reliability, Assurance, Tangibility, Empathy and Responsiveness, (RATER) were considered restrictive, researchers validated the 22-items scale (Cronin & Taylor, 1994). According to Parasuraman et al. (1988), customers tend to use the five dimensions to assess SQ.

Literature on Customer Satisfaction suggests different constructs for measuring CS. In Europe, European Performance Satisfaction Index (EPSI), with constructs such as image, customer expectations, perceived service quality and perceived value have been adopted to assess overall CS, fulfilled expectations and for comparative analysis in service delivery (Hallencreutz & Parmler, 2021). In USA, American Customer Satisfaction Index (ACSI) adopts constructs such as perceived quality, perceived value and customer expectations as antecedents to CS. Where perceived quality relates to the overall service performance or experience, while value assesses the service quality in relation to the price paid by customers (Anderson & Fornell, 2000). Ngo (2015) further suggested a combination of both antecedents and consequences in measuring CS. Where antecedents were defined as pre-purchase and interactive quality such as expectations, perceived performance/service quality and perceived value (Ngo, 2015). Consequences, on the other hand, refer to post purchase behavior such as loyalty and complaints (Anderson & Fornell, 2000). Loyalty was evaluated by actors such as re-purchase intentions, introducing of others to one's provider and spreading PWOM (Wang et al., 2020). CSI is an accredited way to computing customer satisfaction which is comparatively powerful irrespective of the nature of business (Ngo, 2015).

Perceived service quality has been described as a form of attitude related to but not equivalent to satisfaction (Bolton & Drew, 1991; Parasuraman et al., 1988). However in customer satisfaction literature, perceived service quality relate to dynamic processes or activities (Gummesson, 2007), provision of solutions to customer problems (Grönroos, 2001) and beneficial outcomes to customers. Vargo and Lusch (2004) suggested that service is the main function of business. Perceived SQ therefore involves the combination of competences through processes and actions for the benefit of another entity (customer) and itself (Vargo & Lusch, 2004). In the lens of the customer,

perceived SQ is therefore a combination of value proposition and value actualization (Gummesson, 2007; Vargo & Lusch, 2004).

Perceived value refers to the total of gains minus the costs to the customer (Kotler & Keller, 2016). On the part of Zeithaml (1988) perceived value is individualistic or personal and is equivalent to an emotional pay-off. Secondly, it involves a trade-off between 'gives' and 'gets' components. Furthermore, perceived value includes both intrinsic and extrinsic components, monetary and non-monetary components. The 'gives' components include all sacrifices made by customer which include price paid, time, effort and energy. The 'gets' components include all benefits that customers receive, both monetary and non-monetary (Zeithaml, 1988). Consequently, where 'gets' surpass the 'gives', a customer will perceive high value.

Repurchase intentions concern customers confidence in future performance of product/service (Zhang, et al., 2011). Several studies have shown a positive relationship between CS and re-use or re-purchase intentions (Nilsson & Wall, 2017; Wang et al., 2020; Zhang, et al., 2011). It therefore follows that high repurchase intention is a pointer to high satisfaction while low repurchase intentions indicate low satisfaction.

Positive word of mouth (PWOM) refers to all communications between customers and people in their social and professional networks (Andeson, Fornell, & Rust, 1997). It includes communicating face to face, or via email, phone call, social media chats and blogs with family, friends, colleagues and relatives. Research has shown that provision of core service alone does not stimulate PWOM (Gremler et al., 2001). This means that a deliberate effort must be made to give customers something positive to talk about. According to Gremler et al. (2001) fostering interpersonal relationship between staff and customers stimulates PWOM.

2.4.2 Tangibility and Customer Satisfaction

Tangibility refers to facets of service delivery such as physical facilities, equipment and appearance of personnel (Parasuraman et al., 1988; Tsoukatos et al., 2004). In insurance, tangibility can relate to having modern offices, equipment and neatness of employees (Stafford et al., 1998). Neatness of agents, brokers, and front office staff

including grooming is important since insurance sales in Kenya is driven by intermediaries. According to Dabholkar et al. (1996) tangibility also includes convenience of the physical facilities.

In a study by Panda and Das (2014), on the role of tangibility in SQ and its association with external Customer gratification in hospitals and hospitality businesss in India. The findings established that tangibility had control over CS in hospitals and hotels. This current study was different since it was based in the general insurance sector in Kenya. Furthermore, in the current study, correlation and regression was employed in data analysis, while in Panda and Das (2014), Structural Equation Modelling (SEM) was used for data analysis. The study variables are also different in the two studies, hence a conceptual gap.

Tangibility was also found to have the strongest influence on CS in a study by Al-Tit (2015), on effects of Service Quality and food quality on CS and Customer retention in Jordan restaurants. The study established that cleanliness of facility and of personnel is fundamental in service industry. The context of the current study was the insurance business in Kenya. The in dependent and dependent variables adopted were different hence a conceptual gap. The current study addressed population gap by encompassing a wider population, that is all policyholders of the general insurance companies in Kenya.

Ramamoorthy et al. (2018) invesigated the SQ and its effects on customers' post purchase behaviours and CS in India insurance business.The findings showed that tangibility did not have any notable effects on CS. The current study was based in the general insurance companies in Kenya, hence it addressed contextual and conceptual gaps.

In a different study by Stafford et al. (1998), on four (4) auto companies' casualty claims processs in USA, showed that tangibility had an negative relationship with CS in one company, meaning that Tangibility had negligible effect in enhancing SQ (Stafford et al., 1998). The current study was different in since it was based in Kenya and included other General insurance classes in addition to auto.

Tangibility is a significant service dimension because it helps to reduce the risks associated with intangibility (Rust et al., 1996). Therefore, based on the identified gaps there is a need for more research on the influence of tangibility on CS which was addressed by the current study.

2.4.3 Reliability and Customer Satisfaction

Reliability means striving to fulfil promises and paying attention to results (Dabholkar 1996; Omar et al., 2015; Pakurar et al., 2019). It includes accurate service delivery, being truthful with service offerings, maintaining dependable websites and correct records (Omar et al., 2015). According to Parasuraman et al. (1988) reliability refers to the ability to deliver services dependably and accurately to customers.

Omar et al. (2015), undertook a study to acertain the association btween reliability of SQ and CS, a case of Libyan e-commerce customers. Reliability was found to have a strong effect on CS. This meant that e-commerce customers valued user-friendly platforms, easy to use digital payments, internet speed and security. The current study addressed the contextual gap since it was based in the general insurance companies in Kenya. The two countries have diverse economic and cultural differences which impact on customers' behaviors differently. The current study adopted multiple independent variables hence bridging the conceptual gap in Omar's study.

In another study by Stafford et al. (1998), which aimed at identifying the determinants of SQ and gratification in four (4) auto companies' casualty claims department in USA. The research confirmed that reliability and customer gratification had a strong association. This study aimed at establishing the influence of SQ on CS hence a conceptual gap.The current study included additional general insurance classes other than auto, the population was the General insurance policyholders, which made this study more generalizable hence it addressed a population gap. The cultural, economic and market practices in USA and Kenya are so different likely to impact on the findings, the current study therefore addressed the contextual gap and also brought in an element of recency.

Similarly, in a research by Ramamoorthy et al. (2018) on SQ and its effects on customers' post purchase behaviours and gratification in the Indian life insurance

business. It showed that Reliability had a strong nexus with CS after responsiveness. This study was based in the general insurance sector in Kenya hence a contextual gap. The two countries, Kenya and India have cultural and economic differences which impact on customers' behaviors. The study also used a Structural Equation Modelling (SEM) for data analysis while this study employed correlation and regression.

A different conclusion was reached by Fida et al. (2020), in a study that examined the connection between of SQ on customer loyalty and Customer gratification in Islamic banks in Oman. The researcher concluded that Reliability remotely impacted on CS. This study was based in the general insurance companies in Kenya. The current study had a wider population by targeting all general insurance policyholders, hence more generalizable.

Insurance services being largely intangible, reliability is the characteristic that would keeps customers coming back. The current study therefore assessed the influence of Reliability on CS in General insurance companies in Kenya.

2.4.4 Responsiveness and Customer Satisfaction

Responsiveness refers to promptness in service delivery (Stafford et al., 1998). It also refers to a willingness to help customers (Parasuraman et al.,1988). In insurance, it can relate to how long it takes to return customer calls, respond to queries and complaints. According to Tsoukatos et al. (2004), being responsive means identifying the needs of customers and designing products to meet those needs seamlessly with unhindered flow of communications. Pakurar et al. (2019), equates responsiveness with promotion of services.

A study by Ramamoorthy et al. (2018) on Service Quality and its effects on customers' post purchase behaviour and gratification, an empirical study of the Indian life insurance business found that responsiveness had the strongest influence on CS. The current study was based on the general insurance sector in Kenya hence a contextual gap. The two countries have diverse cultural differences which impact on customer behavior. This study was also different in terms of the adopted variables and was specific to general insurance , hence a conceptual gap.

Another research by Akdere et al. (2018), to examine patients' perceptions of Service Quality in Turkish hospitals, all the SERVQUAL dimensions were substantially related to service quality with Assurance being the most significant followed by responsivenes. The current study was based in the insurance sector in Kenya hence a contextual gap. The two countries have diverse cultural differences which impact on customer behavior. Customer priorities in the insurance and health sector are different, hence the justification for the current study. Furthermore, this study was also different in terms of population. While the later study examined whether service dimensions were related to SQ in one hospital in Turkey, this study focused on ascertaining the association between SQ and CS in General insurance companies in Kenya. The current study therefore addressed population gap.

However, in another study by Stafford et al. (1998), on identifying determinants of SQ and gratification in four (4) large motor vehicle companies' claims department in USA. Responsiveness did not have any influence on CS for the four (4) companies. The curent study encompassed other General insurance classes in addition to auto hence more generalizable. There is is also a difference in culture and practice between USA and Kenya. The study by Stafford et al. (1998) is an old study, therefore a need to have more current results. Apart from the study by Stafford et al. (1998), several studies have found responsiveness to be a causal factor for SQ (Al-Tit, 2015; Arokiasamy & Huam, 2014; Parasuraman et al., 1988; Ramamoorthy et al., 2018). The current study therefore investigated the influence of Responsiveness on CS in General insurance in Kenya.

Arokiasamy and Huam (2014), in assessing the association between SQ and CS in the Malaysian automative sector, established that responsiveness had the strongest causal relationship with CS. This study was different in context and population. The current research included other non-motor classes of insurance, hence a population gap. Additionally, the current study was based in Kenyan with different social-cultural and econonic factors, hence a contextual gap.

2.4.5 Assurance and Customer Satisfaction

Assurance relates to keeping customers informed, listening to them regardless of their ethnic background, education level, age or nationality (Pakurar et al., 2019). According

to Parasuraman et al. (1988), assurance relates to the ability to inspire trust and confidence by being knowledgeable and courteous to customers (Stafford et al., 1998). Assurance is a key factor in insurance since the role of insurance is to give hope that a claim will be paid as and when it arises.

In a study by Awlachew (2015) to discover the effects of Service Quality on Customer gratification in Ethiopia, the findings revealed that Assurance, had the strongest effect on CS. The current study was based in the insurance sector in Kenya, hence a contextual gap. The two countries differ in both economic and cultural aspects. While the Ethiopian insurance industry was in its infancy (Awlachew, 2015), compared to Kenya which is mature market with an established regulatory framework. This study was also different from Awlachew's in terms of population, the latter study sampled three (3) insurance companies, while the current study population was all General insurance policyholders in Kenya, making it more generalizable.

Similarly, Al-Tit (2015), in a study on effects of Service and Food Quality on Customer gratification and Customer Retention in Jordan restaurants. The findings revealed that assurance had a positive influence on CS. This study was different in context as it was based in the General insurance companies in Kenya. There exists economic and cultural diversity in the two countries and the insurance and hospitality businesss, this justifies the current study. The predicters in this study were also different, hence a conceptual gap.

In a different study by Macharia (2014), on the relationship between Service Quality and Customer gratification in the retail banking business in Kenya. Assurance was ranked third after responsiveness and reliability on its influence on CS. The current study was different because customers, not employees, were the informants, hence a population gap. There is also a contextual gap because this study was based in the insurance sector in Kenya.

The element of trust and confidence is fundamental in insurance because the promise to pay is in the future and is not guaranteed if policy terms are restrictive. This study therefore probed the influence Assurance on CS in the general insurance companies in Kenya.

2.4.6 Empathy and Customer Satisfaction

Empathy means conveying a feeling that makes people see themselves as unique and special (Pakurar et al., 2019) or giving personalized care and attention (Liang, 2008; Parasuraman et al., 1988).

In a study by Bahadur et al. (2018), in China's telecommunication business which assessed the effects of staff empathy on CS and loyalty. It was established that staff empathy has a positive effect on CS and loyalty. The current study was different in context, concepts used and in data analysis technique. The current study was on general insurance companies in Kenya which exhibits difference in economic and cultural factors. The present study adopted multiple independent variables in addition to empathy. Whereas Bahadur et al. (2018) adopted SEM for data analysis, this study employed correlation and regression statistics for data analysis, hence a conceptual gap.

Similarly, a study by Fida et al. (2020), a study on the effects of SQ on customer loyalty and CS in Islamic banks in Oman, Empathy was found to have the strongest influence on CS. The current study was different since it was based in insurance sector in Kenya with different variables.

In the contrary, the study by Ramamoorthy et al. (2018), a study on Service Quality and its effects on customers post purchase behaviour and gratification in India insurance business showed that Empathy had no influence on CS. Al-Tit's (2015) study on effects of Service Quality and Food Quality on Customer gratification and retention, also found empathy to have the least sway on CS. Additionally, a study by Stafford et al. (1998), to identify the causal factors of SQ and gratification in the motor vehicle claims depatrment, empathy was found to impact Customer gratification in only one (1) out of four (4) companies.

Ye et al. (2017) while assessing the long-term effects of empathy and responsiveness on business profits in the USA confirmed that empathy was important and relegating it to save costs negatively affected long-term business performance. The role of empathy in insurance is crucial particularly during loss, sickness or death. Insurance employees can show empathy by demonstrating trustworthiness and integrity, being open and

transparent, taking complaints positively with commitment to ethical behavior (Tsoukatos et al., 2004).

Locally, literature review identified more knowledge gaps that the current study addressed. In a study by Mutinda (2020), on the effects of SQ on Customer gratification in Hotels within Nairobi County, established that empathy had the strongest effect on CS. Mutinda's study was based on Hospitality industry, while this study was based in the General insurance sector. The study population entailed the entire General insurance sector, while Mutinda's was confined to Nairobi County, hence a population gap.

A study conducted by Gachau J. (2016), to establish the level of internal and external customer gratification and insurance service delivery quality in Kenya. Gachau concluded that internal CS influenced SQ, which in turn positively influences overall CS in the insurance business. This research was different from Gachau's in terms of data analysis technique and variables used hence a conceptual gap. This study employed multiple regression for data analysis. There was also a population gap because the current study focused on general insurance only.

Macharia (2014), examined the relationship between SQ and CS within retail banking business in Kenya. The findings showed a positive relationship between SQ attributes of timeliness, price, reliability, and CS. The current study was different in terms of context, this study was in the General insurance business. Different variables were adopted for the current study; therefore, it addressed a conceptual gap. The current study used quantitative methods to analyzed data while the former used both qualitative and quantitative data analysis techniques.

A study by Chege (2021) focused on investigating how reliability was associated with CS in the insurance sector in Kenya. It affirmed that reliability had a strong association with CS. This research adopted multiple independent variables thus addressing the conceptual gap in Chege's study. In the current study, focus was on the General insurance policyholders hence a population gap.

A case study conducted by Gichuru (2011) to ascertain the level of CS in Jubilee Insurance. Gichuru's study adopted different independent variables while this study

adopted the SERVQUAL model. It established that SQ and employee responsiveness had the highest effect on CS. This study therefore addressed the conceptual gap and population gap making it more generalizable.

The conflicting outcomes therefore justified the need for further research on the influence of SQ on CS. Table 2.1 illustrate the summary of the identified knowledge gaps.

Table 2.1: Summary of Knowledge Gaps

Author	Focus of Study	Methodology	Findings	Research Gaps	Focus of current Study
Arokiasamy A. R and Huam H. T. (2014).	SQ and CS in five Malaysian auto insurance industry.	-Descriptive research design. -Descriptive and deductive statistics.	-All SERVQUAL dimensions had positive and significant influence on CS. -Responsiveness followed by reliability had strongest influence on CS.	-Limited to only auto class of insurance, hence population gap. -Conceptual gap, used single item for the dependent variable.	-This study included more insurance classes in addition to auto, making it more generalizable. -Multiple items for the dependent variable was adopted, thus more reliable.
Al- Tit A. Ahmad (2015).	Effects of SQ and food quality on CS and retention in selected Jordan restaurants.	-Descriptive research design. -Descriptive and deductive statistics.	All SERVQUAL dimensions had positive and remarkable influence on CS. -Tangibles had the strongest impact on CS.	-Population gap (selected restaurants) - Conceptual gap, variables used were different	-The study had a wider scope and hence more generalizable. -This study used different items for the dependent variable
Wattoo, M. U. and Iqbal, S. M. (2022).	Nexus between SQ, CS, complaints, and loyalty in online shopping in Pakistan.	-Descriptive Design. -Structural equation modelling (SEM) used in analysis.	Reliability, Responsiveness, Trust, Personalization and Web Design were causal factors for SQ in e-commerce.	-Different objectives -Conceptual gap, variables and -Methodological gap, data analysis technique- SEM.	-The objective was to establish the association between SQ on CS. -Correlation and multiple regression were adopted for data analysis.
Ramamoorthy et al. (2018).	SQ and its effects on customers' post purchase behaviors and CS: a study in	-Descriptive research design. -SEM used to analyze data.	Only Reliability & Responsiveness were found to have positive influence on CS	-Contextual- Life which have distinct features. -Conceptual, variables were different.	-Influence of SQ on CS in General Insurance in Kenya. -Pearson and multiple regression used in data analysis for this study

	the Indian life insurance business.			-Method of data analysis- SEM.	
Ye et al. (2017).	Effect of Empathy & Responsiveness on CS & business profits: in a healthcare in USA.	Descriptive-longitudinal	-Responsiveness & Empathy had positive influence on CS and profitability. -Relegating Empathy can result in temporary cost savings ignored for long it compromises business profits,	-Research design was different. -Conceptual gap, different SQ variables.	-The study adopted descriptive cross-sectional design. -Assessed all SERVQUAL dimensions of SQ
Akdere et al. (2020).	Patient attitudes about SQ in Turkish hospitals: using SERVPERF model.	-Descriptive research design. -Binary logistic Regression Analysis.	-All the SERVPERF dimensions (similar to SERVQUAL) influence perceptions of SQ. -Assurance ranked highest determinant and empathy, lowest.	-Contextual gap, is health sector. - Methodological gap, Binary logistic regression in data analysis.	-Focus was general insurance in Kenya. -Pearson and multiple regression were used in data analysis.
Sreedharan V, R. and Saha, R. (2021).	Framework for SQ, choice overload, customer involvement and gratification in India.	-Exploratory. - SEM for data analysis	Experience does not have notable effect on SQ.	- Contextual, India - Methodological gap, SEM in data analysis.	-Focus was general insurance in Kenya. -Study was anchored on EDP
Osman, Z. and Sentosa, I. (2013).	Mediating effects of CS on SQ and loyalty relationship in Malaysian rural tourism.	-Causal -Partial Least Square (PLS) procedure in data analysis.	CS has a mediating effect between service quality and Loyalty.	-Contextual gap, tourism. -Data analysis was PLS	-Focus was general insurance in Kenya. - Pearson and multiple regression were used in data analysis.

Nguyen et al. (2018).	Determinants of CS and loyalty in Vietnamese life-insurance.	-Causal study -Path Analysis technique.	-SQ had strong impact on CS and perceived value. -Price did not have a noteworthy impact on both SQ & CS -Image strongly impacted CS but slightly impacted perceived value.	-Contextual gap. -A different approach for data analysis. -Conceptual gap, study used different independent variables.	-Focus was general insurance in Kenya. - Pearson and multiple regression were used in data analysis. -This study adopted SERVQUAL model.
Janahi M. A & Al Mubarak, M. M. S. (2017).	The impact of customer SQ on CS in five main Islamic banks in Bahrain.	Descriptive research design.	All SERVQUAL dimensions had positive and significant influence on CS.	- Context is different - Population gap (5 Banks).	-Focus was general insurance in Kenya. -Wider population hence more generalizable.
Fida et al. (2020).	Impact of SQ on customer loyalty and CS in four banks in Oman.	Descriptive research design.	-Only Empathy & Responsiveness had significant influence on CS. -Assurance, reliability and tangibility are secondary.	- Population gap, thus not generalizable -Conceptual gap, variables were different. -Correlation between respective SQ dimensions and CS was not established.	-Focus was general insurance in Kenya. -The study had a wider population hence more generalizable. - Pearson correlation
Awlachew, A. (2015).	Effect of SQ on CS in selected insurance companies in Addis Ababa, Ethiopia.	Descriptive research design.	All SERVQUAL dimensions had positive and significant influence on CS.	-Contextual gap. -Population gap, study not generalizable.	- Focus was general insurance in Kenya -This study had a wider scope (general insurance business) hence more generalizable.

			-Assurance had the strongest influence on CS.		
Gichuru P. W. (2011).	A case study on the level of CS in Jubilee Insurance Company.	Descriptive research design.	-Service quality and employee performance had the highest influence on CS.	-Population gap. -The independent variables were different. - Methodological gap, descriptive statistics adopted for data analysis.	-This study had a wider scope hence more generalizable. - Pearson and multiple regression were used in data analysis.
Mutinda M. J (2020).	The effect of SQ on CS in hospitality sector, Nairobi-Kenya.	Descriptive research design.	All SERVQUAL service dimensions had positive influence on CS Empathy had the strongest influence on CS.	-Contextual gap study based in hospitality industry. -Population gap-geographical scope, Nairobi.	-Focus was general insurance sector. -The current study population was policyholders of the general insurance companies in Kenya hence more generalizable.
Motum, A. L. and Kinyua, G. (2022).	Influence of Agililty on CS in General Insurance Companies in Kenya.	Descriptive research design.	Moderate positive relationship exists between information agility and CS	-Conceptual gap, independent variables were different. -Population gap, informants were employees.	-This research adopted SERVQUAL dimensions. -Population in this study was policyholders not insurance employees.
Chege N. C. (2021).	Influence of Reliability on CS in insurance sector in Kenya	Descriptive research design.	Reliability had significant positive correlation with CS	-Limited in scope. It focused only one SQ-(Reliability) Population gap, it targeted insurance employees.	-This study assessed all SERVQUAL dimensions. -Policyholders were the target.

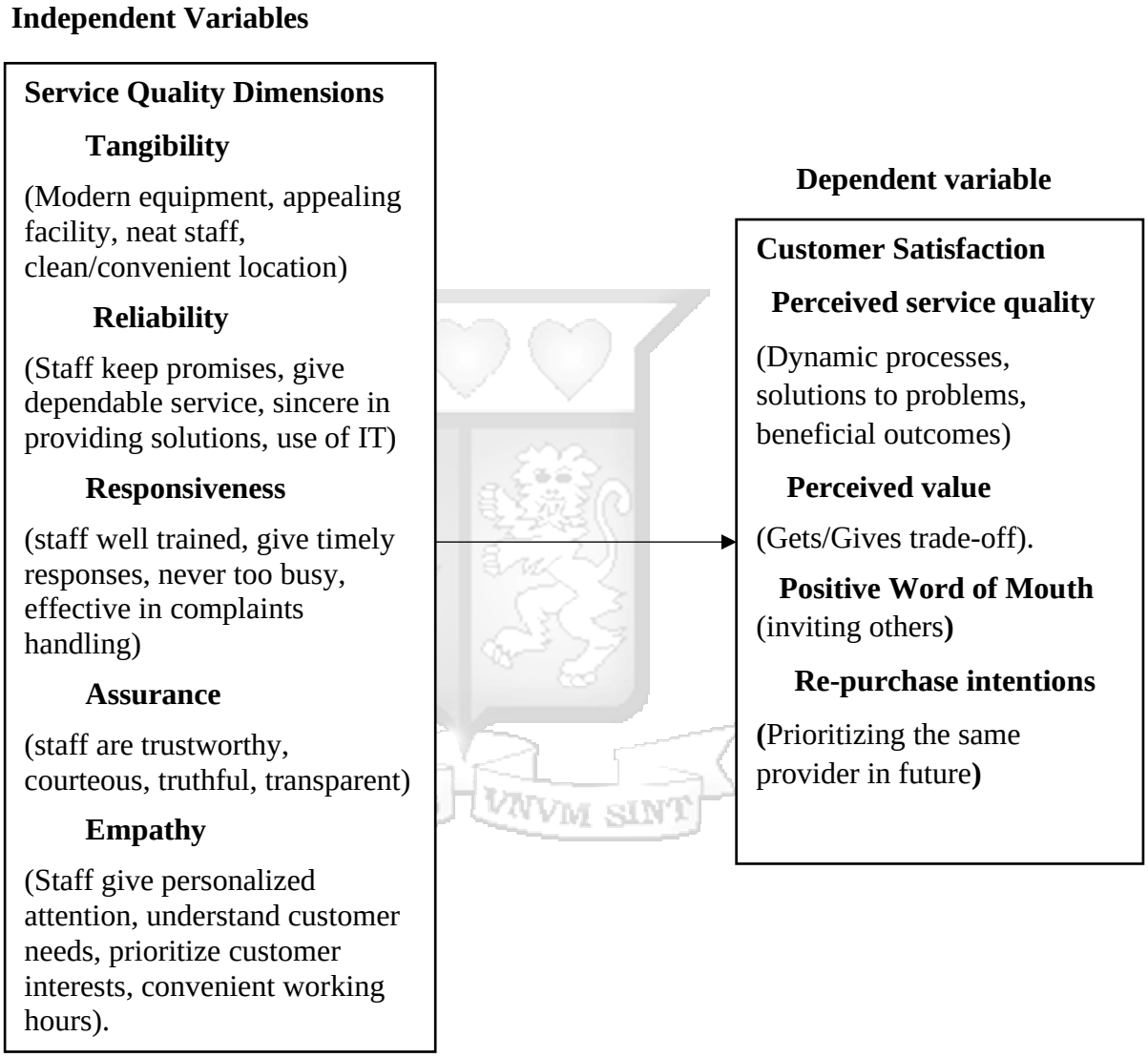
Mwinyi Khatib Omar (2019).	A case study of the Kenyan standard gauge railway; influence of SQ on CS:	Descriptive research design.	-All SERVQUAL dimensions had positively and significant influence on CS. Reliability followed by Responsiveness had the greatest influence.	-Contextual gap -Limited in terms of generalization, hence a population gap.	-Focus was on General Insurance in Kenya. -Wider population hence more generalizable.
Macharia, (2014).	The relationship between SQ and CS within retail banking business in Kenya.	Descriptive research design.	-There was a positive relation between the attributes of timeliness, price, reliability, & CS	-Contextual gap, banking sector. -Conceptual gap: The independent variables were different.	-Focus was general insurance. -This study adopted SERVQUAL model.
Gachau J. (2016).	Level of internal and external CS and insurance service delivery quality in insurance in Kenya.	Descriptive research design.	Internal customer gratification influence SQ and consequently external CS.	-Conceptual gap, different variables. - Methodological gap, Descriptive statistics used in data analysis. -Population gap, employees were part of informants.	- This study adopted SERVQUAL model - Pearson and multiple regression were used in data analysis. -Policyholders were the informants in this study.

Source: Author (2024)

2.5 Conceptual Framework

The conceptual framework is based on theoretical underpinning and models adopted from service quality and customer satisfaction literature.

Figure 2.1: Conceptual Framework



Source: Author (2024)

2.6 Operationalization of Concepts

This section elaborates the researcher's definition of variables and how the variable were measured in the context of General insurance.

Table 2.2: Operationalization of Concepts

Variables	Indicators	Measure	Supporting Literature
Service Quality			
Tangibility	• Use of modern equipment. • Appealing Facility • Well dressed and neat staff. • Clean & convenient location	5-point Likert scale.	Parasuraman et al. (1988). Dabholkar et al.. (1996).
Reliability	• Services give at the time promised. • Staff are sincerely interested in resolving problems. • Services performed right the first time/ dependability. • Insurers use IT.	5-point Likert scale.	Omar et al.(2015) Wattoo, &Iqbal (2022). Chege (2021)
Responsiveness	• Staff well trained • Employees are realistic and give timely responses. • Staff are never too busy. • Effective complaint handling process.	5-point Likert scale.	Parasuraman et al. (1988). Tsoukatos et al. (2004). Yarimoglu (2014). Motum & Kinyua, (2022).
Assurance	• Trust in insurance staff. • Courteous employees. • Superior product/ service. • Truthful representations of products/services. • Transparency in communication.	5-point Likert scale.	Yarimoglu (2014). Tsoukatos et al. (2004). Ramamoorthy et al. (2018)
Empathy	• Individualized attention to customers. • Customer needs well understood. • Staff have got customer's best interest at heart. • Operating hours are convenient for all.	5-point Likert scale.	Yarimoglu (2014). Bahadur et al., (2018). Akdere et al., (2020). Ye, et al., (2017).
Customer Satisfaction			
Perceived service quality	• Processes are dynamic. • Provide solutions to problems/give beneficial outcomes	5-point Likert scale.	Kotler & Keller (2016).

			Oliver R. , 1997 (1980).
Repurchase Intentions	• Customers prioritize the insurer. • Intention to purchase a different policy with the same insurer or renew policy with same insurer.	5-point Likert scale.	Wattoo & Iqbal (2022). Ngo (2015). Wang et al. (2015).
Positive Word of Mouth (WOM)	• High likelihood of referring relatives/ friends to the insurer. • Customers talk positively about the insurer.	5-point Likert scale.	Ngo (2015). Wang et al. (2015).
Perceived value	• Gains are more than costs. • Value for money	5-point Likert scale.	Ngo (2015). Wang et al. (2015).

Source: Author (2024).

2.7 Chapter Summary

The chapter reviewed the theories that anchor the current study. Relevant knowledge gaps were summarized in Table 2.1. A conceptual framework showing a graphical relationship between independent variables namely: tangibility, reliability, responsiveness, assurance and empathy and dependent variable (customer satisfaction) is shown in Figure 2.1. Finally, operationalization of variables was summarized as per Table 2.2

CHAPTER THREE
RESEARCH METHODOLOGY

3.1 Introduction

The chapter outlines the study philosophy, design, the population and study sample, data collection techniques and instrument. Validity and reliability tests are explained together with data analysis procedure and presentation. The ethical considerations that guided the researcher are explained at the end.

3.2 Research Philosophy

This study adopted positivism research philosophy. According to Park et al. (2020) research philosophy provides the principles and assumptions that guide scientific discoveries. A positivist researcher is guided by three principles which are; the social world exists externally and is viewed objectively, research is value-free and a positivist researcher is independent and takes the role of an objective analyst (Blumberg et al. 2014). Positivism suggests that knowledge should be objective and free from biases stemming from researcher's values (Bryman, 2008). The social world is therefore understood by collection of objective facts (Blumberg et al., 2014). This means that there must be objectivity in data collection, analysis and interpretations. Positivism takes the stance of phenomenalism which suggests that only knowledge that can be proved scientifically can be warranted as knowledge (Bryman, 2008). Positivism research philosophy it is commonly associated with experimental and descriptive studies (Blackwell, 2019). In this study, the goal was to understand the level of service quality and customer satisfaction 'as is' in the General insurance business. Data was collected, analyzed and interpreted scientifically and objectively; the study philosophy was positivist.

3.3 Research Design

Research design refers to a framework of methods and techniques that the researcher chooses to sharpen the research method to suit a given subject matter (Bhat, 2023). This study took a quantitative research approach and specifically a descriptive cross-sectional research design. Descriptive research design determines and reports things as they are, it also attempts to describe behaviors, values, attitudes and characteristics

(Mugenda & Mugenda, 2003). Descriptive research helps in developing a deep understanding of the research problem, it is less time consuming and provide basis for future studies (My Research Topics, 2021). Cross-sectional study involves analyzing information about a population at a specific point in time (Simkus, 2023). This type of study therefore allows a researcher to examine distinctive characteristics of a population at once. Descriptive cross-sectional design was therefore adopted to give a snapshot of how service quality and gratification in the General insurance sector for purposes of generalization. This research design was also preferred due to time constraint for academic thesis. Previous studies that have used this research design include Motum and Kinyua (2022) and Mutinda (2020).

3.4 Population of Study

Population refers to a group of individuals or organizations with typical characteristics that are identifiable for a study (Creswell, 2013). Population of study also refers to the entire group from a sample is drawn for the purpose of drawing a conclusion (Bhandari, 2020). It is therefore the entire group of individuals from which a sample is drawn. The study population were the policyholders of General insurance companies in Kenya. The industry regulator estimated general insurance policies totaled to 2,568,516 at the end of 2022 financial year (IRA, 2022). This means that the number of policyholders did not exceed this number because some policyholders own more than one policy which was confirmed by the primary data collected. Industry report showed that Nairobi county accounts for 80% of general insurance premiums (IRA, 2022). This means that only 20% premiums of general premiums is distributed across the other 46 counties in Kenya.

3.5 Sample Size

Study sample relates to a group of individuals selected from a target population, from which the researcher would wish to make a generalization (Creswell, 2013). According to Yin (2014), sampling refers to the procedure of selecting a representative of the total population in order to procure a miniature cross section. This means that the sample chosen should mirror the larger population in terms of the attributes being investigated. This study used sampling formular by Yamane (1967) to determine the sample.

The formular is as follow: $n = \frac{N}{1+ N (e)^2}$

Where n is the sample size; N is the population = 2,568,516 and e is level of significance at 5%. The sample (n) was therefore calculated to be 400 informants.

3.6 Sampling Technique

Research technique refers to the procedure for selecting units from a population (Haute, 2021). Convenience sampling is a non-probability sampling technique where informants are selected based on ease of reach and proximity to researcher (Kothari, 2010). According to Etikan et al. (2016), convenience sampling is used due to ease of accessibility, geographical proximity, availability of informants at a certain time or based on willingness of informants. This method is also useful where there is high density of informants (Etikan et al., 2016). In this study, convenience sampling was preferred because 80% of general insurance policyholders are domiciled in Nairobi County alone (IRA, 2022). Due to time and resource constraints in academic research, convenience sampling was preferred because it is fast and inexpensive way to reaching informants (Kothari, 2010).

3.7 Data Collection Method

In this study, the researcher used structured questionnaires to collect primary data. A questionnaire according to Mugenda and Mugenda (2003) is a list of questions prepared to fit a certain inquiry. A structured questionnaire consists of standardized closed ended questions that are worded in a certain way, asked in a sequence and informant picks his responses from a set of pre-determined answers (Cleave, 2023). Cleave (2023) observed that structured questionnaires are best for large sample sizes because they are easy and quick to administer. They also provide top level snapshot of the views of informants (Cleave, 2023). Pre-determined answers also enhance the response rate since they are easy to complete and take less time. Given the large sample of 400 informants, structured questionnaires were considered most suitable for data collection in this study.

A study by proposed alternative data collection technique where there is no sampling frame (Reichel, 2017). In this study, digital and physical questionnaires were used for collecting primary data depending on the informants' preferrences. Informannts were

reached by research assistants, trained by researcher. Informants were reached in public spaces specifically Upper Hill, Westlands, Donholm and Central Business District (CBD) within Nairobi County. These areas represent four (4) sub-counties of Westlands, Kibra, Embakasi and Kamkunji respectively. Selection was for convenience and due to time and financial contraints. Some informants preferred digital questionnares and voluntarily shared their phone number on which digital questionnaire was shared via Whatsapp phone application. The phone numbers were noted for follow-up on response. The consent form was sent together with questionnares. By agreeing to fill and return the questionnares confirmed consent to participate in the study. For physical questionnares, the research assistants introduced themselves to potential informants and explained the purpose of the research. Where a potential informant agreed to participate in the study, s/he signed a consent form which explained the objective of the study and the ethical considetations. A letter of introduction from Strathmore University and Ethical Clearance from both Strathmore and NACOSTI was shared with informants. Only the informants who gave their consent and were General insurance policyholders were requested to complete the quetionnaires. The researcher, with the help of research assistants distributed and waited as informants filled the questionnaires and collected them. This method was preferred because it enhances the response rate since it would be difficult to follow up on a informant after parting ways.

The questionnaires were divided into four sections, section A collected demographic data, section B collected information about SQ and CS, section C collected data on the most important service dimension while section D was on overall CS. The five (5) service dimensions namely Reliability, Responsiveness, Assurance, Tangibility and Empathy were examined along the 22 service statements (Parasuraman et al., 1988). A 5-five-point Likert scale where; 1= strongly disagree, 2=disagree, 3= neither agree nor disagree, 4= agree, 5= strongly agree was used to collect responses from policyholders.

3.8 Research Quality

Denison (2023) described quality research to possess qualities such as thorough, accurate, original and relevant. The quality of the research instrument is commonly

checked by validity and reliability tests. It follows that when data is accurate, and reliable, the results will also be fit for use.

3.8.1 Validity Test

Validity refers to the extent to which an instrument measures what it asserts to measure (Robson, 2011). According to Mugenda and Mugenda (2003), a research instrument is considered valid only if it asks the right questions and if the right answers are provided. Face validity refers to the extent to which an instrument linguistically and analytically looks like what is supposed to be measured (Taherdoost, 2016). Therefore, face validity exists so long as the instrument appears relevant, unambiguous, reasonable and clear (Oluwatayo, 2012). Content validity refers to the extent to which the questions on the instrument and the scores from the questions represent all possible questions that could be asked about a construct (Mohajan, 2017). It is the extent to which items on a measurement instrument are relevant and representative of the construct being measured (Taherdoost, 2016). Construct validity is considered an overacting measure which is achieved when other validity tests are achieved (Bhandari, 2023). In this study, the instrument was checked for face and content validity tests by first sharing the instrument insurance practitioners who gave feedback for improvement. The instrument was afterwards discussed with research supervisors and their feedback was used to improve the instrument.

3.8.2 Reliability Test

Reliability relates to the internal consistency of a measure or the extent to which all items on a scale measure the same construct (Heale & Twycross, 2015). It also refers to the extent to which an instrument will produce consistent results or data after repeated trials (Mugenda,2008). One method of testing an instrument for reliability is checking for its stability through test-retest method which involves administering different sections of the questionnaire to confirm stability (Heale & Twycross, 2015). In social sciences test-retest may however not confirm reliability due to intricacies of human psychology (Taber, 2018). This means that similar controls in subsequent tests may not guarantee reliability since people respond differently in different circumstances.

Cronbach's Alpha (α) is the most common standard used to check for stability a questionnaire , where α ranges from zero (0) to one (1). Acceptable reliability is where α score is 0.7 and above (Heale & Twycross, 2015). On the part of Mohajan (2017), α ranging between 0.5 to 0.7 is considered acceptable. Taber (2018) however posited the Cronbach's alpha score alone may not be sufficient to dismiss an instrument as unreliable or accept an instrument to be reliable. According to Taber (2018), high alpha score may be contributed by more items in the instrument some of which may be redundant items. According to Nunnally (1978), the recommended Cronbach's alpha score is between 0.7 and 0.8 for basic research. Therefore, in this study, α score of 0.7 and above was deemed acceptable. The results of reliability test are summarized in Table 3.1 below.

Table 3.1:Reliability Analysis

Scale	Cronbach's Alpha	Number of Items	Comments
Tangibility	0.807729	4	Accepted
Reliability	0.809741	4	Accepted
Responsiveness	0.842475	4	Accepted
Assurance	0.879636	5	Accepted
Empathy	0.820336	4	Accepted
Customer satisfaction	0.851978	5	Accepted

Source: Primary data (2024)

The findings showed that all dimensions attained Cronbach's alpha value above 0.8, which was above the recommended threshold of 0.7 (Heale & Twycross, 2015; Nunnally, 1978) and indicative of a good internal consistency between variables. These findings suggested that the questionnaire captured the intended variables with commendable internal consistency. Moreover, the results provided confidence in the reliability of the questionnaire for measuring service quality and customer gratification in the General insurance business.

3.9 Data Analysis and Presentation

The primary data was collected using structured questionnaires, this was preferrable due to the large sample size (Cleave, 2023). The responses received were verified for completeness, consistency and only responses that met this threshold were adopted for data analysis, outliers were eliminated. The responses were thereafter codified by assigning numerical numbers to each before proceeding to data analysis. SPSS version 20 software was used in data analysis. Descriptive statistics such as mean, standard deviation and percentages were used to analyze primary data and to establish patterns. Pearson correlation and multiple regression was also used to analysis the connection between variables.

Pearson correlation analysis was used to establish the relationship between the dependent and independent variables. Pearson correlation coefficient (R), is used to measure the strength (direction & magnitude) of relationship or association between two variables (Obilor & Amadi, 2018), in this study it was the relationship between SQ and CS. R vary between -1 and +1, whereas -1 denotes perfect negative correlation, 0 denote no correlation and +1 denotes perfect positive correlation. Correlation results were interpreted as follows. Where R was lower than ± 0.4 it signified low correlation, range between ±0.4 to ±0.6 signified moderate correlation and above ±0.6 signified high correlation (Obilor & Amadi, 2018). Obilor and Amadi (2018) outlined four important assumptions under Pearson Correlation analysis namely, variables must be measured using an interval or ratio scale. This study adopted interval scale (Likert scale). Secondly, the variables were presumed to have a linear relationship, thirdly, there should be no significant outliers. Finally, data should be approximately normally distributed (Obilor & Amadi, 2018). A histogram shown by Figure 4.1 confirmed normal distribution and no significant outliers.

Multiple regression analysis at five percent (5%) significance level was adopted to analyze the influence of the independent variables on the dependent variable. The multiple regression equation was as follow:

$Y= \beta_0 + \beta_1X_1 +\beta_2X_2 +\beta_3X_3 +\beta_4X_4 +\beta_5X_5 + \varepsilon$

Where Y is the dependent variable; an average score of the sub-dependent variables was computed to arrive at a combined score (Brogi et al., 2022). β0 is the regression constant (coefficient of intercept); β1, β2, β3, β4, β5 are coefficients of the independent variables namely Tangibility, Reliability, Responsiveness, Assurance and Empathy respectively; X1, X2, X3, X4, X5 represent the independent variables namely Tangibility, Reliability, Responsiveness, Assurance and Empathy, respectively. ε represents the error term.

Statistical assumptions under multiple regression such as normal distribution, linearity, independence and heteroscedasticity (Osborne & Waters, 2019) were tested and confirmed non-violation. The tests for were done using SPSS, inferential statistics (Breda University of Applied Science, 2018). Data presentation for this study was done using tables, graphs, charts for ease of interpretation. The result of this study will be disseminated on websites such as Association of Kenya Insurers (AKI), Insurance Regulatory Authority (IRA) and Strathmore University. Both IRA and AKI websites are readily accessible to insurance practitioners and members of public seeking for insurance information. The findings will be shared with insurance managers, government agencies during stakeholder forums. Results will be published in international journals to inform further studies and bridge literature gap on SQ and CS in the insurance sector.

3.10 Ethical Considerations

Ethical considerations were incorporated into the research. The researcher first sought Ethical clearance from Strathmore University Institutional Scientific and Ethical Review Committee (SU-ISERC) which was granted. Clearance from the National Commission for Science, Technology and Innovation (NACOSTI) was obtained prior to commencement of the study. The researcher duly informed the informants of the objective of the study and sought their informed consent prior to engagements. The researcher requested informants to sign a consent form to ascertain that nobody is coerced to participate in the study. The researcher reassured informants of confidentiality of their personal data and that the information would only be used for the intended study. The researcher included a note on the questionnaire to encourage

informants to answer the questions honestly and truthfully without fear of intimidation. Inclusion of names will be optional for purposes of anonymity. The research findings have been reported as truthfully as possible without attempting to conceal the truth.

3.11 Chapter Summary

The chapter outlined the research methodology for the study. The study design was descriptive cross-sectional study on General insurance companies in Kenya. A sample size of 400 informants was ascertained using formular by Yamane (1967). Primary data was collected using structured questionnaires. Convenience sampling technique was employed to reach informants with the help of trained research assistants. SPSS version 20 program was used in analyzing data, specifically descriptive and deductive statistics. Ethical considerations were adhered for the duration of the study.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1 Introduction

This chapter focuses on data analysis, presentation, interpretation, and discussion of findings from the survey. The chapter begins by providing demographic information about the informants. Analysis of data was accomplished by employing SPSS version 20. The research employed both descriptives statistics such as percentages, means and standard deviation to interpret study's results. Correlation and multiple regression was used to examine the association between variables. Presentation of finding was done using tables, charts and graphs. Interpretations of findings were guided by the specific objectives of the study.

4.2 Response Rate

A total of 400 informants were contacted but 25 questionnaires were eliminated due to incompleteness thus leaving 375 questionnaires for final analysis. The response rate was therefore 94% as illustrated in Table 4.1.

Table 4.1: Response Rate

Questionnaires	**Frequency**	**Percentage**
Fully completed	375	94
Incomplete	25	6
Total	**400**	**100**

Source: Primary data (2024)

A response rate above 70% is generally considered excellent (Mugenda & Mugenda, 2003). This implies that the sample fairly mirrored the population thus making the study generalizable.

4.3 Demographic Information

Demographic information included the informants' gender, age, education level, employment status, types of insurance held and the frequency of dealing with insurance.

4.3.1 Gender of Informants

The researcher requested for information relating to the gender of informants to highlight any biases in responses. Out of the total of 375 questionnaires that were properly completed for further data analysis, 69.1% informants were male while 30.7% were female. Table 4.2 illustrates the findings.

Table 4.2: Gender of informants

Gender	Frequency	Percent
Male	259	69.1%
Female	115	30.7%
Total	374	99.7%
Missing	1	0.3%
Total	**375**	**100%**

Source: Primary data (2024)

This distribution reflects a higher involvement of males in the study compared to females. Participation was voluntary, these finding indicates that males were either more willing than females to participate or males were more readily available in public spaces than females. There was therefore gender representation in the study.

4.3.2 Age of Informants

Information about age group of informants was collected and summarized in Table 4.3 below. The age distribution of the participants reveals that 8.5% were below 25 years old, 63.2% were between 26-40 years old, 26.1% were between 41-60 years old, while 1.6% were above 60 years old. There was therefore fair representation across age groups.

Table 4.3: Age of Informant

Age bracket	Frequency	Percent
Below 25 years	32	8.5%
Between 26-40 years	237	63.2%
Between 41-60 years	98	26.1%
Above 60 years	6	1.6%
Missing	2	0.5%
Total	**375**	**100%**

Source: Primary Data (2024)

Majority (63%) informants were within the age bracket of 26-40 which is reflective of the youthful Kenyan Population. Informants within 40-60 age bracket comprised 26%, a substantial number to ignore. These two age brackets constitute the working class who can afford insurance and should be prioritized without ignoring the age other brackets.

4.3.3 Education Level

This study looked out for the education background of informants which was summarized in Table 4.4 below.

Table 4.4: Education level

Education Level	Frequency	Percent
Postgraduate	104	27.7%
Undergraduate	135	36.0%
Diploma	58	15.5%
Certificate	54	14.4%
Below Secondary Education	21	5.6%
Total	372	99.2%
Missing	3	0.8%
Total	**375**	**100%**

Source: Primary Data (2024)

The findings showed that five-point six percent (5.6%) informants had below Secondary Education, 14.4% had Certificates, 15.5% were Diplomas holders, 36.0% were

Undergraduates, and 27.7% had Postgraduate degrees. These findings highlight a diverse educational background among the informants, with a notable proportion having undergraduate qualifications. The findings show that insurance is appreciated by all and particularly the educated in society.

4.3.4 Employment Status

The study sought to establish the occupation of informants which was summarized in Table 4.5.

Table 4.5: Employment status

Category	Frequency	Percent
Employed	198	52.8%
Self-employment	150	40.0%
Student	14	3.7%
Unemployed	12	3.2%
Total	374	99.7%
Missing	1	0.3%
Total	**375**	**100.0%**

Source: Primary Data (2024)

The findings showed that majority (52.8%) of informants were employed, 40.0% were self-employed, three-point seven percent (3.7%) were students while three-point two percent (3.2%) were unemployed. The findings were reflective of insurance affordability.

4.3.5 Types of Insurance policies held by Informants.

The survey collected responses regarding the types of insurance policies held per informant for all informants. The findings demonstrate priorities in choice of insurance by informants. Table 4.6 illustrates the findings.

Table 4.6: Type of policies held by informants.

Policy	Responses	
	Number	**Percent of Cases**
Motor vehicle	223	59.5%
Medical	215	57.3%
Travel	66	17.6%
Work related Injuries	49	13.1%
Agriculture	44	11.7%
Fire and Flood	27	7.2%
Money	26	6.9%
Construction	22	5.9%
Legal liability	22	5.9%
Theft	20	5.3%
Marine	5	1.3%
Total	**721**	**191.7%**

Source: Primary Data (2024)

Informants who reported to have motor vehicle insurance were 59.5% followed closely by medical insurance at 57.3% and travel insurance at 17.6%. Other commonly held policies included work-injuries insurance at 13.1%, agriculture at 11.7%, while fire and flood insurance were at 7.2.0%. Money insurance accounted for six-point nine percent (6.9%), both construction and legal liability policies were held by five-point nine percent (5.9%) of informants. Less frequently reported policies included theft at five-point three percent (5.3%), and marine insurance at one point three percent (1.3%). Overall, the survey received 721 responses, meaning that some informants had multiple insurance policies. Motor policy was most popular because it is a statutory requirement in the Kenyan laws. Medical and work injury insurances were common among informants because they are essential in safeguard lives from sickness and injuries. Travel insurance covers the inconveniences during travel caused by sickness and loss of baggage and documents.

4.3.6 Frequency of using Insurance Services

This research investigated the frequency of interactions between customers and insurance services providers, Table 4.7 shows the findings.

Table 4.7: Frequency of using insurance.

Category	Frequency	Percent
Daily	90	24.0%
Weekly	11	2.9%
Monthly	115	30.8%
Annually	138	36.8%
Quarterly	21	5.6%
Total	**375**	**100%**

Source: Primary Data (2024)

The study found that 36.5% interacted with insurance annually, 30.7% interacted with them monthly, 24.0% daily, and five-point six percent (5.6%) on quarterly basis while two-point nine percent (2.9%) on weekly basis. These results indicated that informants mostly interact with insurance on an annual basis. This reflects the nature of General insurance policies which are renewable annually. At the end of year, a customer could make a choice on renewing the policy with same insurer or quitting, depending on customer's perception of service quality among other variables.

4.4 Descriptive Statistics

This study evaluated the extent to which policyholders agreed or disagreed with the service quality statements and overall satisfaction. Responses were recorded using a 5-point Likert scale where; 1= strongly disagree, 2=disagree, 3= neither agree nor disagree, 4= agree, 5= strongly agree. Mean (M) values of 1.0-1.49 were interpreted as strongly disagree, 1.5- 2.49 as disagree, 2.5-3.49 neither agree nor disagree, 3.5 to 4.49 as agree and 4.5-5 as strongly agree. With reference to EDP (Oliver, 1980), disagree and strongly disagree denoted negative disconfirmation, agree denoted confirmation while strongly agree denoted positive disconfirmation. A standard deviation (SD) less than two (2) was considered as low variability hence similarity in opinions, while SD value greater that two (2) was considered as high variability, thus divergent opinions.

4.4.1 Influence of Tangibility on Customer Satisfaction

The informants were asked the extent to which they agreed or disagreed with statements regarding tangibility of insurance services. This dimension encompassed service components such as the use of modern technology, attractiveness of office spaces, the appearance of staff members, convenience of office locations. The findings were as shown in Table 4.8.

Table 4.8: Influence of Tangibility on Customer Satisfaction

Tangibility	Mean	Standard deviation
My insurer uses modern technology in service delivery	4.15	0.894
My insurer(s) have appealing offices	3.92	0.890
Staff are well dressed and neat	4.07	0.868
Insurers premises are in convenient locations	3.91	1.02
Overall score	**4.01**	**0.92**

Source: Primary Data (2024)

The results were as follows; use modern technology in service delivery (M=4.15, SD=0.894); attractiveness office spaces (M=3.92; SD=0.890), staff were well dressed and neat (M=4.07, SD=0.868) and offices were in convenient locations (M=3.91, SD=1.02). All the tangibility responses had means between 3.91 to 4.15 with an overall mean of 4.01. The use of modern technology had the highest mean which convenient office locations was ranked least. Standard deviations for all responses were below two (2), which signified low variability in responses. This means that informants had similar opinions as most were satisfied with tangibles. The overall mean was 4.01 denoting 'agree', meaning that expectations matched perceptions hence a confirmation. Informants therefore agreed that insurers utilized modern technology in service delivery, had attractive office spaces, staff were well dressed and neat and offices were in convenient locations.

4.4.2 Influence of Reliability on Customer Satisfaction

The informants were asked the extent to which they agreed or disagreed that insurers; provide services at the time they promised, were genuinely interested in resolving concerns raised, performed services right the first time and used reliable means in communicating with the customer. The findings were shown in Table 4.9.

Table 4.9: Influence of Reliability on Customer Satisfaction

Reliability	Mean	Standard Deviation
My insurer provides services at the time they promise.	3.69	1.077
Insurance staff are genuinely interested in resolving concerns raised with them	3.55	1.043
Insurance staff perform services right the first time	3.59	1.127
My insurer uses reliable means in communication	3.97	1.036
Overall score	**3.7**	**1.071**

Source: Primary Data (2024)

Findings in each aspect was as follows; providing services at the time they promised (M=3.69, SD=1.077), genuinely interested in resolving concerns raised (M=3.55, SD=1.043), performed service right the first time (M=3.59, SD=1.127) and used reliable means in communicating with the customer (M=3.97, SD=1.036). The overall mean value was 3.7, which showed a match between service expectation and customers' expectations. The use of reliable means in communication was ranked highest indicating of use of modern technology in communication. Genuineness to resolve concerns was rated lowest implying lack of sincerity to resolved concerns raised. Standard deviations for all responses were less than two (2) which signified low variability. This shows that there was consensus among informants. In summary, informants agreed that insurance services were dependable/reliable. This was interpreted as a tie between expectations and perceptions.

4.4.3 Influence of Responsiveness on Customer Satisfaction

The study investigated whether staff were well trained, gave timely responses to queries, if staff were too busy to help and if there was an effective complaint handling procedure. Table 4.10 presents the findings.

Table 4.10: Influence of Responsiveness on Service Quality

Responsiveness	**Mean**	**Standard Deviation**
Insurance staff are well trained to handle my queries	3.91	0.970
Insurance staff give timely response to my queries	3.70	1.042
Insurance staff are never too busy to help me	3.52	1.142
My insurers have effective complaints handling process	3.47	1.113
Overall score	**3.65**	**1.069**

Source: Primary Data (2024)

Findings were as follows on; well-trained staff (M=3.91, SD=0.970), timely responses to queries (M=3.70, SD=1.042), staff not too busy to help (M=3.52, SD=1.142) and effective complaints handling (M=3.47, SD=1.113). The overall mean was 3.65 denoting agreed with responsiveness statements. Customer expectations were neither exceeded nor underserved. Insurers were scored highest for having well trained staff. Informant were however indifferent on how insurers managed complaints which was scored least thus indicative of a service gap. The standard deviations for all responses were less than two (2) which signified low variability. This means there was limited spread in opinions. Overall, informants agreed that insurers were responsive to customers queries, concerns and complaints. Therefore, perception about responsiveness matched customer expectations but did not exceed.

4.4.4 Influence of Assurance on Customer Satisfaction

Assurance dimension assessed customers' perceptions with respect to, trust in insurance staff, consistency of staff courtesy, confidence in service quality, transparency in product representation and transparency in communication. Table 4:11 illustrates the findings.

Table 4.11: Influence of Assurance on Customer Satisfaction

Assurance	Mean	Standard Deviation
I trust insurance staff	3.59	1.045
Staff are consistently courteous	3.72	0.967
I am assured of the best service quality	3.57	1.057
Staff give true representation of products they sell	3.45	1.160
Staff are transparent in their communication to me	3.58	1.178
Overall score	**3.58**	**1.081**

Source: Primary Data (2024)

The findings were as follows; trust in insurance staff, (M=3.59, SD=1.045) the consistency of staff courtesy (M=3.72, SD=0.967), confidence in service quality (M=3.57, SD=1.057), truthful product representation (M=3.45, SD=1.160), and transparency in communication (M=3.58, SD=1.178). The overall mean value was 3.58 meaning that informant agreed with assurance statements. Perceptions about service assurance did however not exceed the expectations. Consistency in being courteous was rated highest while staff giving true representation of products sold was raked least, pointing to a service gap, which depicts a service gap. The standard deviations for all responses below two (2) which signified low spread in responses or that informants had similar opinions. In summary, informants agreed with service assurance by offered by insurers, perceptions and expectations were therefore at equilibrium.

4.4.5 Influence of Empathy on Customer Satisfaction

The study queried whether insurance providers were empathetic. Service aspects such as showing care to customers, understanding customer needs, having customers best interest at heart and the convenience of service hours were evaluated. The findings were summarized in Table 4:12.

Table 4.12: Influence of Empathy on Customer Satisfaction

Empathy	Mean	Standard Deviation
Staff are caring/empathetic towards me	3.53	1.081
Staff clearly understand my needs	3.56	1.070
Staff have my best interest at heart	3.31	1.140
Insurance operating hours are convenient for me	3.94	0.951
Overall score	**3.59**	**1.062**

Source: Primary Data (2024)

In terms of staff being caring/empathetic responses were, (M=3.53, SD=1.081), understanding of informants' needs (M=3.56, SD=1.070), staff having informants' best interests at heart (M=3.31, SD=1.140), convenient operating hours (M=3.94, SD=0.951). The overall mean was 3.59 meaning that informant agreed that insurers were empathetic. Perceptions about service empathy matched the expectations. Convenient operating hours was the highest rated item while the least was whether insurers had customers' best interest at heart, informants were indifferent. The standard deviations for all responses were below two (2) which signified low variability. This means there was consensus in responses. The findings therefore showed that informants agreed that insurers showed empathy towards them, which was interpreted as match between expectations and perceptions.

4.4.6 Importance of Service Quality

The study examined the weights or relative importance of each service dimensions the results were as shown by Table 4.13.

Table 4.13: Importance of Service Quality

Service Quality	Mean	Standard deviation
Tangibility	4.37	0.910
Reliability	4.72	0.676
Responsiveness	4.70	0.622
Assurance	4.68	0.693
Empathy	4.51	0.820

Source: Primary Data (2024)

In summary; Tangibility (M = 4.37, SD=0.91), Reliability (M = 4.72, SD = 0.676), Responsiveness (M = 4.70, SD = 0.622), Assurance (M = 4.68, SD = 0.693) and Empathy (M = 4.51, SD = 0.820). Reliability, Responsiveness, Assurance and Empathy had means scores above 4.5 meaning informants strongly agreed that they were very important in-service delivery. Reliability was perceived as the most crucial service dimension, followed closely by Responsiveness, third was Assurance and fourth was Empathy. Tangibility was also rated highly (M=4.73) but to a lesser extent compared to the other service dimensions. The findings suggest that general insurance policyholders value all the service dimensions. Therefore, insurers should consistently align service performance with customer expectations.

4.4.7 Overall Customer Satisfaction with Service Quality

The research probed informants' overall satisfaction level based on customer satisfaction indicators such as the consistency of services in exceeding expectations, renewing policies with the same insurer, purchasing a different policy with the same insurer, likelihood of referring a friend/relative to the current insurer and on the

perceived value of benefits when compared to the price paid. Table 4:14 shows the findings.

Table 4.14: Customer satisfaction

Customer Satisfaction	Mean	Standard Deviation
Insurance Services consistently exceed my expectations	3.23	1.106
I consider renewing my policy with same insurer	3.85	0.967
I consider purchasing a different policy with the same insurer / I have purchased a different policy with the same insurer	3.41	1.191
I am likely to refer a friend/relative to my insurer	3.85	1.003
The benefits I have received from my insurance are more than the price I have paid	3.18	1.254
Overall customer satisfaction	**3.50**	**1.10**

Source: Primary Data (2024)

The findings were as follows; consistency of insurance services exceeding expectations (M=3.23, SD=1.106), renewing policies with the same insurer (M=3.85, SD=0.967), purchasing a different policy with the same insurer or having already (M=3.41, SD=1.191), likelihood of referring a friend/relative to the insurer (M=3.85, SD=1.003) and regarding the perceived value of benefits received exceeded the price paid (M=3.18, SD=1.254). The findings revealed that informants were indifferent on consistency of insurance services in exceeding expectations, purchasing a different policy with the same insurer or having already purchased and if the perceived value of benefits received compared to the price paid for insurance services. Informants had the least score on whether benefits exceeded price they paid for insurance and on consistency of insurance services exceeding CS. Informants however agreed that they would consider renewing policies with the same insurer and were likely to refer a friend/relative to their insurer.

Overall CS was rated (M=3.50, SD=1.1). Policyholders therefore agreed that they were satisfied with general insurance services. This means that expectations matched customer perceptions, hence a confirmation. The SD for customer gratification was less than two (2), this signified low variability, meaning that informants had similar opinions. Overall CSI was computed as a ratio of the number of informants who agreed and strongly agreed to be satisfied to the total number of informants presented in percentage form. CSI was therefore 59.9% in the general insurance sector in Kenya which is just above the average. This means that General insurers need to develop new strategies that will enhance their customers' gratification and retention.

4.5 Inferential Statistics

Correlation and multiple regression analyses were adopted to investigate the association between service quality and CS in the general insurance companies in Kenya.

4.5.1 Correlation Analysis

Person correlation coefficient (r) was used to evaluate the linear relationship between service quality and CS. Where r is lower than ± 0.4 signifies low correlation, range between ±0.4 to ±0.6 signifies moderate/modest correlation and above ±0.6 signifies high/strong correlation (Obilor & Amadi, 2018). The assumptions as outlined by Obilor and Amadi (2018) for correlation analysis were checked before making conclusions. These included the use of interval scale in this study, presumed linear relationship between variables, no significant outliers and normal distribution of data. The results were as shown in Table 4.15.

Table 4.15: Correlation Analysis

		Tangibility	Reliability	Responsiveness	Assurance	Empathy	Customer satisfaction
Tangibility	Pearson Correlation	1					
	Sig. (2-tailed)						
	N	375					
Reliability	Pearson Correlation	.578**	1				
	Sig. (2-tailed)	.000					
	N	375	375				
Responsiveness	Pearson Correlation	.545**	.739**	1			
	Sig. (2-tailed)	.000	.000				
	N	375	375	375			
Assurance	Pearson Correlation	.509**	.633**	.679**	1		
	Sig. (2-tailed)	.000	.000	.000			
	N	375	375	375	375		
Empathy	Pearson Correlation	.539**	.601**	.635**	.699**	1	
	Sig. (2-tailed)	.000	.000	.000	.000		
	N	375	375	375	375	375	
Customer satisfaction	Pearson Correlation	.408**	.538**	.526**	.604**	.612**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	375	375	375	375	375	375

**. Correlation is significant at the 0.01 level (2-tailed).

Source: Primary Data (2024)

The survey established that there was a modest positive correlation between Tangibility and CS (R = 0.408, p=0.000, sig. at 0.01) in the general insurance companies in Kenya. There was a modest positive correlation between Reliability and CS (R = 0.538, p=0.000, sig. at 0.01) in the general insurance companies in Kenya.

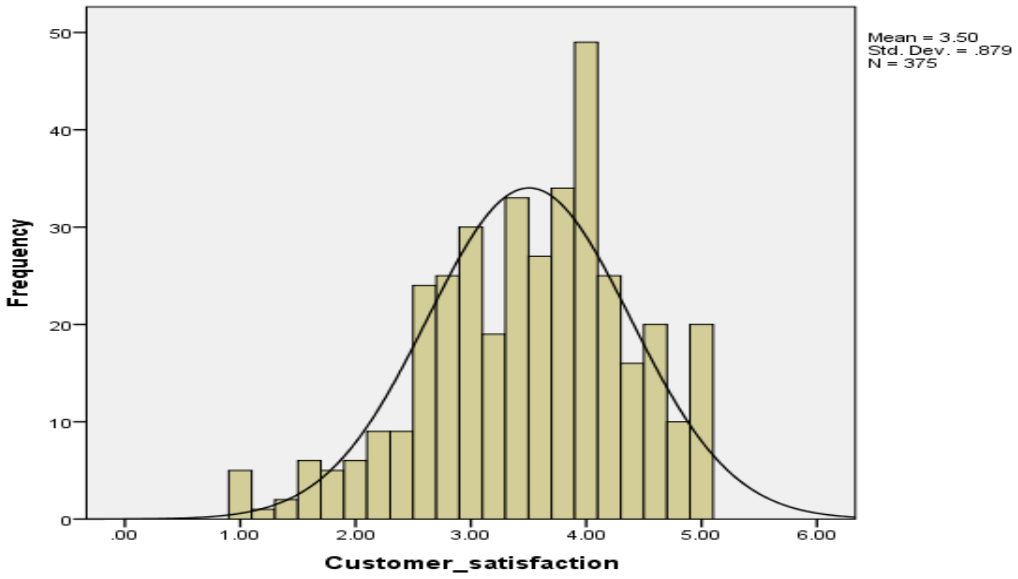
There was a moderate positive correlation between Responsiveness and CS (R = 0.526, p=0.000, sig. at 0.01) in the general insurance companies in Kenya.

There was a high positive correlation between Assurance and CS (R=0.60, p=0.000, sig. at 0.01) in the general insurance companies in Kenya.

There was a high positive correlation between Empathy and CS (R= 0.612, p=0.000, sig. at 0.01) in the general insurance companies in Kenya.

Therefore, the correlation results revealed a statistically remarkable relationship between Tangibility, Reliability, Responsiveness, Assurance and Empathy and CS at 0.01 significance level. These findings showed the importance of all the dimensions in influencing CS in the General insurance sector. Figure 4.1 below shows the outcome of normal distribution test with no significant outliers.

Figure 4.1: Normal Distribution Data



Source: Primary Data (2024)

4.5.2 Regression Analysis

Model summary, ANOVA and Beta coefficients displayed the regression outputs.

Model summary shows the degree of variation in the dependent variable that is explainable by alterations in the independent variables (TIBCO Software Company, 2024). In other words, Model summary assesses how suitable the model is to the data.

Analysis of Variance (ANOVA) is used for assessing the significance of a model in explaining variations in the dependent variable (Conduct and Interprete One Way ANOVA, 2024)

Beta coefficients or standardized coefficients help in interpretation of the relative importance of each independent variable in predicting the dependent variable when all

other variables are held at constant (Conduct and Interprete One Way ANOVA, 2024). The coefficients enable a comparison of the strength of the relationships between the predictor variables and the outcome variable on a standardized scale.

4.5.2.1 Influence of Tangibility on Customer Satisfaction

The findings on the influence of Tangibility aspects such as use of modern technology, attractiveness of office spaces, neatness of staff/well-dressed, and convenient office locations on CS in General Insurance Companies in Kenya is illustrated in Tables 4.16, 4.18 and 4.18.

Correlation between Tangibility and CS was established as illustrated in Table 4.16. R=0.408, donating a moderate positive correlation between the variables.

Table 4.16: Model Summary: Influence of Tangibility on Customer Satisfaction

Model Summary				
Model	**R**	**R Square**	**Adjusted R Square**	**Std. Error of the Estimate**
1	.408[a]	.166	.164	.80395
a. Predictors: (Constant), Tangibility of service				

Source: Primary Data (2024)

The coefficient of determination (R^2) value was 0.166, suggesting that approximately 16.6% of the variance in CS can be explained by the tangibility. The adjusted R^2 is 0.164, which adjusts for the number of predictors in the model. The standard error of the estimate is 0.80395, representing the average distance that the observed values fall from the regression line.

Table 4.17:ANOVA: Influence of Tangibility on Customer Satisfaction

ANOVA[a]						
Model		**Sum of Squares**	**df**	**Mean Square**	**F**	**Sig.**
1	Regression	48.098	1	48.098	74.416	.000[b]
	Residual	241.085	373	.646		
	Total	289.182	374			
a. Dependent Variable: Customer satisfaction						
b. Predictors: (Constant), Tangibility						

Source: Primary Data (2024)

The findings on Table 4:17 showed that the regression model was statistically significant ($F = 74.416$, $p < 0.001$), indicating that the predictors jointly contribute to the prediction of CS.

Table 4.18: Beta Coefficients for Tangibility

Beta Coefficients[a]					
	Unstandardized Coefficients		**Standardized Coefficients**		
Model	**Beta**	**Std. Error**	**Beta**	**t**	**Sig.**
(Constant)	1.540	.231		6.655	.000
Tangibility	.489	.057	.408	8.626	.000
a. Dependent Variable: Customer satisfaction					

Source: Primary Data (2024)

The findings presented in Table 4.18, shows intercept term of 1.540 representing the estimated value of CS when the tangibility of service is zero. The coefficient for tangibility is 0.489, indicating that for every one-unit increase in tangibility, CS is expected to increase by 0.489 units while other factors remain unchanged. The standardized coefficient (Beta) for tangibility was 0.408, suggesting that tangibility had a moderate effect on CS when other variables are held constant.

These findings therefore determined that Tangibility had a modest positive and remarkable influence of CS in general insurance companies in Kenya.

4.5.2.2 Influence of Reliability on Customer Satisfaction

Regression analysis investigated reliability indicators such as keeping promises, genuine interest in resolving concerns raised, services performed right the first time and reliability in the means of communication. The results were as summarized in Table 4.19, 4.20 and 4.21.

Table 4.19: Model Summary: Influence of Reliability on Customer Satisfaction

Model Summary				
Model	**R**	**R Square**	**Adjusted R Square**	**Std. Error of the Estimate**
1	.538[a]	.290	.288	.74207
a. Predictors: (Constant), Reliability of service				

Source: Primary Data (2024)

The findings in Table 4.19 established a modest positive correlation between reliability and CS (R=0.538). R^2 = 0.290, implied that approximately 29% of the variance in CS was explained by the reliability. The adjusted R^2 was 0.288, that accounts for the number of predictors in the model. Notably the value is very close to R-Squared, suggesting the model was suitable for the data. The standard error of the estimate was 0.742 indicating an average difference between the predicted and actual CS values.

ANOVA results indicated in table 4.20 established the F-statistic was 152.151 (significant at p=0.000). This highlights the overall relevance of the model since p was less than 0.05 (sig.) The study therefore concluded that there was a statistically remarkable connection between reliability and CS.

Table 4.20: ANOVA: Influence of Reliability on Customer Satisfaction

ANOVA[a]						
Model		**Sum of Squares**	**df**	**Mean Square**	**F**	**Sig.**
	Regression	83.784	1	83.784	152.151	.000[b]
	Residual	205.398	373	.551		
	Total	289.182	374			
a. Dependent Variable: Customer satisfaction						
b. Predictors: (Constant), Reliability						

Source: Primary Data (2024)

Table 4.21 provides the regression coefficients for reliability on CS. The model constant was at 1.445 representing the average predicted CS score when the value of Reliability is zero. The model presents Unstandardized Coefficient (Beta) of 0.557 which signified the average change in CS for a one-unit increase in Reliability (holding other factors constant). The t-statistic was 12.335 (p=0.000) confirmed the relevance of the relationship between Reliability and CS.

Table 4.21: Beta Coefficient for Reliability

Beta Coefficients[a]					
Model	**Unstandardized Coefficients**		**Standardized Coefficients**	**t**	**Sig.**
	B	**Std. Error**	**Beta**		
(Constant)	1.445	.171		8.433	.000
Reliability	.557	.045	.538	12.335	.000
a. Dependent Variable: Customer satisfaction					

Source: Primary Data (2024)

The regression results therefore established that Reliability had a modest positive and noteworthy influence on CS in general insurance companies in Kenya.

4.5.2.3 Influence of Responsiveness on Customer Satisfaction

The analysis how staff training, timely responses to queries, staff availability/not too busy and effective complaint handling procedure influenced CS. The results were summarized in Tables 4.22, 4.23 and 4.24.

According to the Model Summary shown in table 4.22, the correlation coefficient (R) was established at 0.526, indicating a modest positive correlation between responsiveness and CS. The R^2 = 0.277, implied that 27.7% of the variance in CS was attributed to the Responsiveness. The standard error of the estimate was 0.74859, representing the average spread from the regression line.

Table 4.22:Model Summary:Influence of Responsiveness on customer satisfaction

Model Summary				
Model	**R**	**R Square**	**Adjusted R Square**	**Std. Error of the Estimate**
	.526[a]	.277	.275	.74859
a. Predictors: (Constant), Responsiveness				

Source: Primary Data (2024)

ANOVA Table 4.23, the regression model established a statistically significant relationship between Responsiveness and CS, ($F = 143.035$, $p < 0.001$) which was less than 0.05 (significance) indicating that the predictors jointly contribute to the prediction of CS.

Table 4.23: ANOVA: Influence of responsiveness on Customer Satisfaction

ANOVA[a]					
Model	**Sum of Squares**	**df**	**Mean Square**	**F**	**Sig.**
Regression	80.156	1	80.156	143.035	.000[b]
Residual	209.027	373	.560		
Total	289.182	374			
a. Dependent Variable: Customer satisfaction					
b. Predictors: (Constant), Responsiveness					

Source: Primary Data (2024)

Table 4.24 illustrates the beta coefficients for Responsiveness. The intercept term is 1.585 which represents the estimated value of CS when the responsiveness of service is zero. The coefficient for responsiveness is 0.526, indicating that 0.526 units increase in CS would be attributed to one-unit increase in responsiveness. The standardized coefficient (Beta) for responsiveness is 0.526, suggesting that responsiveness has a moderate effect on CS after controlling for other variables.

Table 4.24: Beta Coefficients for Responsiveness

Beta Coefficients[a]						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		Beta	Std. Error	Beta		
1	(Constant)	1.585	.165		9.599	.000
	Responsiveness	.526	.044	.526	11.960	.000
a. Dependent Variable: Customer satisfaction						

Source: Primary Data (2024)

The current study therefore determined that Responsiveness had a modest positive and notable influence on CS in general insurance companies in Kenya.

4.5.2.4 Influence of Assurance on Customer Satisfaction

The results of regression between assurance predictors such as trust in insurance staff, consistency of staff courtesy, confidence in service quality, transparency in product representation and transparency in communication on CS, were summarized in Table 4.25, 4.26 and 4.27.

The model summary presented in Table 4.25 established a correlation coefficient (R) of 0.604, which denotes a high positive correlation between Assurance and CS. The coefficient of determination (R^2) is 0.365, established that approximately 36.5% of the variance in CS was explained by the Assurance. The adjusted R^2 was 0.364, adjusted for the number of predictors in the model. The standard error of the estimate was 0.70149, representing the dispersion from the regression line.

Table 4.25: Model Summary: Influence of Assurance on Customer Service

Model Summary				
Model	**R**	**R Square**	**Adjusted R Square**	**Std. Error of the Estimate**
1	.604[a]	.365	.364	.70149
a. Predictors: (Constant), Assurance				

Source: Primary Data (2024)

ANOVA as illustrated by Table 4.26 shows that the regression model is very relevant ($F = 214.670$, $p < 0.001$) which is less than 0.05(sig).

Table 4.26:ANOVA: Influence of Assurance on Customer Satisfaction

ANOVA[a]						
Model		**Sum of Squares**	**df**	**Mean Square**	**F**	**Sig.**
1	Regression	105.636	1	105.636	214.670	.000[b]
	Residual	183.547	373	.492		
	Total	289.182	374			
a. Dependent Variable: Customer satisfaction						
b. Predictors: (Constant), Assurance						

Source: Primary Data (2024)

This means that the predictors jointly contribute to the prediction of Customer Satisfaction. In other words, Assurance is a notable predictor of customer satisfaction. The high F-value and low p-value indicate that the model fits the data well. It was therefore stablished that Assurance was strongly influences on Customer Satisfaction in General insurance Companies in Kenya.

The result in Table 4.27 illustrates the Beta coefficient for Assurance. The intercept term is 1.366 which represents the value of Customer Satisfaction when the Assurance was at zero. The coefficient for assurance was 0.597, indicating that for every one-unit increase in Assurance, CS was expected to increase by 0.597 units. The standardized coefficient (Beta) for assurance is 0.604, suggesting that assurance of customer services had a strong effect on Customer Satisfaction after controlling for other variables.

Table 4.27:Beta Coefficients for Assurance

Beta Coefficients[a]						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		Beta	Std. Error	Beta		
1	(Constant)	1.366	.150		9.088	.000
	Assurance	.597	.041	.604	14.652	.000
a. Dependent Variable: Customer satisfaction						

Source: Primary Data (2024)

The findings therefore established that Assurances had a strong positive and remarkable influence on CS in General Insurance Companies in Kenya.

4.5.2.5 Influence of Empathy on Customer Satisfaction

Regression analysis on the influence of Empathy on CS were summarized by Tables 4.28, 4.29 and 4.30 below. Indicators of Empathy included, showing care to customers, understanding customer needs, having customers best interest at heart and convenient hours of service. Table 4.28 established the correlation coefficient (R) of 0.612, indicating a strong positive correlation between Empathy and CS. The (R^2) was 0.375, suggesting that approximately 37.5% of the variance in CS was attributed to Empathy. The standard error of the estimate was 0.69610, representing the diffusion from the regression line. The model suggested that Empathy undoubtedly influenced CS as evidenced by high R value (above 0.6) and the statistically notable R-square value.

Table 4.28: Model Summary: Influence of Empathy on Customer Satisfaction

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.612[a]	.375	.373	.69610
a. Predictors: (Constant), Empathy				

Source: Primary Data (2024)

The ANOVA Table 4.29 showed that the regression model was statistically noteworthy ($F = 223.792$, $p < 0.001$) at 0.05 significance indicating that the predictors jointly contributed to the prediction of CS. The high F-value and low p-value signify that the model suits the data well, hence Empathy had a strong influence on CS.

Table 4.29:ANOVA: Influence of Empathy on Customer Satisfaction

ANOVA[a]						
Model		**Sum of Squares**	**df**	**Mean Square**	**F**	**Sig.**
1	Regression	108.441	1	108.441	223.792	.000[b]
	Residual	180.741	373	.485		
	Total	289.182	374			
a. Dependent Variable: Customer satisfaction						
b. Predictors: (Constant), Empathy						

Source: Primary Data (2024)

The beta coefficients illustrated by Table 4.30, showed the model intercept term at 1.251 representing the value of CS when the empathy score is zero. The beta coefficient for Empathy was 0.629, meaning CS would increase by 0.629 units for one unit variation in Empathy while controlling other predictors.

Table 4.30: Beta coefficients for Empathy

Bata Coefficients[a]						
Model		**Unstandardized Coefficients**		**Standardized Coefficients**	**t**	**Sig.**
		Beta	**Std. Error**	**Beta**		
1	(Constant)	1.251	.155		8.082	.000
	Empathy	.629	.042	.612	14.960	.000
a. Dependent Variable: Customer satisfaction						

Source: Primary Data (2024)

The standardized beta coefficient for empathy is 0.612, suggesting that Empathy has a strong influence on CS. The t-value for empathy is 14.960, indicating that the coefficient for Empathy was noteworthy ($p < 0.001$) at 0.05 significance level.

These regression results therefore established that Empathy had a strong positive and remarkable influence on CS in General Insurance Companies in Kenya.

4.5.2.6 Multiple Regression Model Summary

The regression model adopted five percent (5%) significance level as recommended for social studies (Arokiasamy & Addullah, 2013). The model summary in Table 4: 31 which explained how the variation in CS was jointly explained by varying Tangibility, Reliability, Responsiveness, Assurance and Empathy, while controlling other factors.

Table 4.31: Multiple Regression Model Summary

Model Summary				
Model	**R**	**R Square**	**Adjusted R Square**	**Std. Error of the Estimate**
1	.691[a]	.478	.471	.63959
a. Predictors: (Constant), Empathy, Tangibility, Reliability, Responsiveness, Assurance				

Source: Primary Data (2024)

The results showed R=0.691 which denoted a strong positive association between the predictor and the outcome variables. R Square value of 0.478 which indicates that Empathy, Tangibility, Reliability, Assurance, and Responsiveness collectively explained 47.8% of the variance in CS. The Adjusted R (0.471) and R Square are closely related indicating that the variance in CS is accurately predicted by the model, given the number of predictors and sample size. The outcomes of this ANOVA were summarized in Table 4.32.

Table 4.32: ANOVA- Multiple Regression

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	138.232	5	27.646	67.582	.000[b]
	Residual	150.950	369	.409		
	Total	289.182	374			
a. Dependent Variable: Customer satisfaction						
b. Predictors: (Constant), Empathy, Tangibility, Reliability, Responsiveness, Assurance						

Source: Primary Data (2024)

ANOVA results showed that the predictor variables had p-value (sig.) of 0.00 which indicated that model was suitable, which meant that the regression model was a notable predictor of the dependent variable, CS. This is supported by a high F-statistic of 67.582, which surpasses the F-critical value (2.214), from distribution table at 0.05 significance level. A statistically notable variance therefore existed between the group means. The regression results therefore confirmed that Tangibility, Reliability, Responsiveness, Assurance, and Empathy collectively had a strong positive and remarkable influence CS in the General insurance companies in Kenya.

4.5.2.7 Beta Coefficients and Collinearity

The Beta coefficient of the independent variable in the current study were illustrated by Table 4.33 below.

The regression model was as follows; $\mathbf{Y= \beta_0 + \beta_1X_1 +\beta_2X_2 +\beta_3X_3 +\beta_4X_4 +\beta_5X_5 + \varepsilon}$

where **Y** was the dependent variable

where **β0** was the regression constant or the intercept,

where **β1, β2, β3, β4, β5** were coefficients for Tangibility, Reliability, Responsiveness, Assurance and Empathy respectively.

where **X1, X2, X3, X4, X5** represented the Tangibility, Reliability, Responsiveness, Assurance and Empathy respectively.

ε represented the error term.

Table 4.33: Multiple Regression Beta coefficients

Beta Coefficients							
Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
(Constant)	.427	.181		2.357	.019		
Tangibility	.128	.039	.132	3.243	.001	.852	1.173
Reliability	.120	.057	.116	2.098	.037	.465	2.152
Responsiveness	.119	.055	.126	2.169	.031	.418	2.390
Assurance	.207	.058	.209	3.553	.000	.407	2.455
Empathy	.285	.058	.278	4.908	.000	.443	2.260
a. Dependent Variable: Customer satisfaction							

Source: Primary Data (2024)

The regression model was fitted as follows.

$Y= 0.427 + 0.128X_1+0.120X_2+0.119X_3+0.207X_4+0.285X_5 + e.$

The interpretation drawn from the model was that when Tangibility, Reliability, Responsiveness, Assurance and Empathy were at a zero constant, customer satisfaction would be at a constant value equal to 0.427 (intercept). Each beta coefficient represents the change in CS associated with a one standard deviation increase in the predictor variable, holding all other variables constant. The findings established that Tangibility, Reliability, Responsiveness, Assurance, and Empathy had statistically notable p-values which were less than selected significance level of 0.05 (Sig. < 0.05). This meant that all the independent variables positively and remarkably influenced on CS. This can be interpreted that increasing any predictor variable would cause an increase in the dependent variable while decreasing any predictor variable would trigger a decline in the dependent variable. The beta coefficients signified the relative weights of each predictor variable. The beta values were Tangibility =0.128; Reliability = 0.120; Responsiveness = 0.119; Assurance = 0.207 & Empathy = 0.285. In this regard, empathy had the highest β= 0.285, indicating that to increase Empathy by one unit, would enhance CS by 0.285 units when all other variables are controlled at zero.

Assurance, Tangibility, Reliability, and Responsiveness also had moderate beta coefficients suggesting that they are undoubtedly predictors of CS. Each beta coefficient represents the change in the CS that is associated with a one standard deviation increase in the predictor variable, holding all other variables constant.

Multicollinearity test whether the independent variables are correlated, this was denoted by the “Tolerance" and "VIF" values on Table 4.19 above. According to Hair et al. (2010), tolerance measures how much the variance of an independent variable is inflated due to its correlation with other independent variables in the model. The general understanding is that Variance Inflation Factor (VIF) should not be above ten while tolerance should be greater than zero-point-one (0.10), (Hair et al., 2010). In this study, all VIF values were less than ten while tolerance value were above 0.1 for all variables. Homoscedasticity test was carried out using scatter diagram (Hair et al., 2010), there was no breach.

4.6 Chapter Summary

The chapter summarized the study findings. Findings included the response rate, the reliability test results, and demographics information, correlation and multiple regression. Data was analyzed and the results were summarized as averages, standard deviation and percentages. Correlation and multiple regression models were adopted in examining the association between variables. Data was summarized and presented using tables and graphs for ease of interpretation and discussions.

CHAPTER FIVE

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter provided the summary of findings, discussions, conclusions, and recommendations drawn from the study in relation to the research objectives. The chapter also compared the current study findings with finding from other studies. Study recommendations and limitations were shown at the end.

5.2 Summary of Findings

This study examined the influence Service Quality on CS in general insurance companies in Kenya. Both descriptive and deductive statistics were used in analysis of primary data. Majority of informants were males compared to females; therefore, the study was representative in terms of gender. Employment status showed that insurance service was consumed more by the employed and the self-employed due to steady incomes. Most informants were in the age bracket of 26-40 years which reflects the working population in Kenya. The education level of informant revealed that insurance is bought by all but majorly by the elite in society who appreciate it. Motor insurance followed by medical insurance were the most popular class. In Kenya, motor insurance is mandatory while medical insurance is fundamental in safeguarding lives hence the customer preference. The study also showed that majority of informants preferred to deal with insurance on annual basis since general insurance policies are renewed annually.

5.3 Discussions

The section entails the current study findings with reference to the specific study objectives, theory and other empirical studies.

5.3.1 Influence of Tangibility on Customer Satisfaction

Tangibles plays a role in enhancing satisfaction by magnifying the visual qualities of otherwise intangible insurance promises (Wang et al., 2020). Insurance companies can also incorporate more tangibility components such as a good atmosphere that is secure (Wang et al., 2020), ample parking (Tsoukatos et al., 2004), to enhance CS in the General insurance. In the current study, informants ‘strongly agreed’ that Tangibility

was important. This meant that general insurance companies use modern technology in service delivery, have attractive office spaces, staff were neat and well-dressed, and offices are in convenient locations. According to EDP, Oliver (1980), a score of 'agree' signified a match between customer expectations and perceived service performance hence a confirmation or satisfaction. There is therefore an opportunity for line manager to manage customer expectation and adopt strategies for enhanced customer experience. Correlation results established a moderate and positive relationship between Tangibility and CS in general insurance companies in Kenya. Regression analysis equally established a modest and statistically remarkable relationship between Tangibility and CS. Beta coefficients for Tangibility ($\beta = 0.489$) signified that improving Tangibility by one digit could lead to positive and notable improvement in CS by 0.489 units while controlling other variables. The results were confirmed by multiple regression analysis that established beta coefficient for Tangibility at 0.012.

Several studies have established positive relationship between Tangibility and Customers Relationship. However, a few studies find contradiction results. Stafford, et al. (1998), in a study in Automotive industry in USA showed an inverse relationship betwee the variable. Ramamoorthy et al.(2018) discredited Tangibility as a preditor of CS. The results of this study align with the finding in a study conducted by Panda and Das (2014), on the how tangibility affects Service Quality and external CS. The was study population was bases on hospitals and hotel business in India. It established that Tangibility and CS had a positive linear relationship. The current findings also resonate with the findings of a study by Al-Tit (2015), on the association that Service Quality and food quality had on CS and retention in Jordanian restaurants. Al-Tit's study highlighted that tangibility, particularly the cleanliness of facilities and personnel, played a fundamental role in the service industry. This study findings disagreed with findings of Ramamoorthy et al. (2018), a study about quality of service and its connection with customer behavior and CS in Indian insurance sector. Ramamoorthy et al. (2018) determined that tangibility did not have any influence on CS.

5.3.2 Influence of Reliability on Customer Satisfaction

When companies render reliable services, it is a boost to customer confidence, loyalty, continued interactions and willingness to make recommendations (Suki, 2013). The current study established the informants' perception about Reliability of services had an overall mean score of 3.7 denoting 'agree' which was second after Tangibility. This suggests policyholders 'agreed' that insurance services were reliable. With reference to EDP by Oliver (1980), customer expectations were equal to their perception hence a confirmation or satisfaction. Informants 'strongly agreed' that Reliability was the most important of all the dimensions suggesting that insurers need to continual improvement to enhance reliability of services. Customers specifically agreed that insurers delivered services as promised, performed services right at first instance and used reliable means in communicating. Customers however scored genuineness in resolving concerns least amongst the other statements.

Customers expect insurers to deliver services that exceed their expectations to achieve positive disconfirmation. Timeliness in claims settlement, consistency in delivering high quality service and accuracy to keep agreements made to customers are key in achieving reliability (Suki, 2013). Genuineness in resolving concerns was noted as a service gap in the current study. Insurers therefore need to be sincere in resolving customer concerns. Factors such as inordinate delays in claims settlement, giving misleading information to customers and breaking agreements among other malpractice will lower CS in the general insurance companies in Kenya.

The correlation results established a moderate positive and relationship between the Reliability and CS in the general insurance companies in Kenya. Regression analysis established that Reliability had statistically notable influence on CS in the general insurance companies in Kenya. Beta coefficient for Reliability ($\beta = 0.557$) implied that improving reliability of services by a unit would lead to increase in CS by 0.557 units (other variable being constant) within the general insurance companies in Kenya. Multiple regression similarly confirmed that Reliability had a positive influence on CS ($\beta = 0.120$) in general insurance companies in Kenya.

Majority of empirical studies have confirmed a positive and strong relationship between Reliability and CS (Al-Tit, 2015; Parasuraman et al., 1988; Ramamoorthy et al., 2018; Stafford et al., 1998). This study findings align with the findings of Omar et al. (2015), on the influence of service quality on CS among Libyan e-commerce customers, which noted that reliability had a strong positive influence on CS. Furthermore, the current study findings correspond with those of Ramamoorthy et al. (2018) who found a positive relationship between Reliability and CS in a study on service quality and its effects on customers' post purchase behavior and CS in Indian insurance sector. Additionally, Arokiasamy and Huam (2014), in examining the nexus between service quality and CS in the Malaysian automotive insurance industry, found a postive and linear connection between Reliability and CS. The current results contradict the findings by Fida et al. (2020) a study to determine the impression of service quality on customer loyalty and CS in four (4) Islamic banks in the Sultanate of Oman showed that Reliability had no notable influence on CS.

5.3.3 Influence of Responsiveness on Customer Satisfaction

In this study, Responsiveness was based on factors such as insurers; having well trained staff, giving timely responses to queries, staff not being too busy to help and effective complaints management. Informants 'strongly agreed' that Responsiveness was very important which suggests that customers have high expectations on it. The overall perceptions of informants on responsiveness of services had a mean score of 3.65 implying 'agree' on Likert Scale. This was the third most important dimension after Tangibility and Reliability. Therefore, policyholders 'agreed' that insurers were responsive to customer needs. In other words, there was a match between perceptions and expectations implying confirmation or satisfaction (Oliver, 1980). Policyholders specifically agreed that insurers had well trained staff, gave timely responses to queries, neither were staff too busy to help. However, there was a service delivery gap on effectiveness in complaints management which is critical in service delivery (Turkson, 2012).

The results of correlation test established that a positive and modest correlation exits between Responsiveness and CS in the general insurance companies in Kenya. A statistically noteworthy relationship was determined between variables with beta

coefficient for Responsiveness at 0.526 from regression investigation. This meant that one unit variance in Responsiveness would increase CS by 0.526 units (other variables held at constant). The beta coefficient of multiple regression was 0.119 which also affirmed that Responsiveness positively and significantly predicted CS. Responsiveness was therefore determined to have a moderate, positive and remarkable influence on CS in the general insurance companies in Kenya. Majority of studies do confirm that Responsiveness influences CS (Arokiasamy & Huam, 2014; Fida et al., 2020; Ramamoorthy et al., 2018; Ye et al.,2017). This study results agreed with the findings of a study on patients' perceptions of Service Quality in Turkish hospitals by Akdere et al. (2018), which established that responsiveness had the strongest connection with service quality. Moreover, this study aligns with the findings of a study by Al-Tit (2015) on nexus between Service and Food Quality on CS and Customer retention in Jordan restaurants, where responsiveness was identified as a strong influencer of CS. The current finding however disagrees with the finding by Stafford et al. (1998), who sought to know the drivers of Service Quality and CS in four (4) motor vehicle companies' claims department in USA. Stafford et al. (1988) ruled that responsiveness did not cause any change in service quality.

The findings suggest that policyholders therefore expect insurers to enhance responsiveness to achieve higher level of CS or a positive disconfirmation (Oliver, 1980). Insurers risk losing customers to competitors with superior offerings. The study identified ineffectiveness complaints management as a major service delivery gap. Therefore, insurers need to implement effective complaints management system to enhance service quality. Insurers should take complaints positively because it is a means to getting feedback on service quality. Timely claims payments, effective customer care and proper guidance to customers also relate to responsiveness (Mpaata et al., 2016), these should not be overlooked. Satisfaction will consequently be low whenever customers are made to wait for too long for services because staff are either too busy to help, when staff are not available when and where they are needed, or when staff have limited capacity to address concerns raised. Insurers should be cautious because if services fall within an acceptable tolerance zone, customers will lower their expectations to remain satisfied (Woodruff & Jenkins, 1983).

5.3.4 Influence of Assurance on Customer Satisfaction

Assurance was assessed along customers' perceptions such as trust in insurance staff, consistency in courtesy, confidence in service quality, truthfulness in product representation and transparency in communication. Informants 'strongly agreed' that Assurance was a very important dimension of service delivery which indicates that customers' expectations were high on it. Assurance enhances service delivery and increase CS (Suki, 2013). Informants' overall perception about Assurance of service was rated 3.5 meaning that general insurance policyholders 'agreed' with assurance statements. Therefore, there was confirmation or satisfaction with Assurance dimension (Oliver, 1980).

Policyholders specifically agreed that they trusted insurance staff, staff were consistently courteous, policyholders had confidence in service quality and staff were transparent in their communication. However, policyholders were indifferent about staff giving true representation of products sold. This means that insurers need to enhance customers understand by truthfully disclosing all the product features and limitations. Therefore, Insurers therefore need to strive for exceed customer expectations to achieve a positive disconfirmation and satisfaction. Customers prefer dealing with service providers who create meaningful long-term relationships with them rather than those interested in just closing a sale. Use of up-to-date communication channels is another assurance component that insurers need consider in enhancing CS.

A strong positive correlation was established between Assurance and CS in the general insurance companies in Kenya. Regression analysis confirmed a statistically remarkable relationship between independent and dependent variables with beta coefficient of 0.597. The results meant that varying Assurance by one digit while controlling the other predicters at constant could raise CS by 0.597 units. Multiple regression had a lower beta coefficient ($\beta = 0.207$) yet it also established a positive and noteworthy influence of Assurance over CS. This study therefore determined that Assurance as a strong, positive and significant influencer of CS in the general insurance companies in Kenya.

The current findings corroborate previous findings by Awlachew (2015), which aimed at establishing any association between Service Quality and CS in Ethiopia. Awlachew (2015), found that Assurance beared a strong positive influence on CS in insurance. Similarly, Al-Tit (2015) and Akdere et al. (2018), both confirmed a positive relationship between assurance and CS. The result of this study disagrees with finding by Ramamoorthy et al. (2018), a study on SQ and its effects on customers' post purchase behaviour and CS in Indian insurance business. Ramamoorthy et al. (2018) concluded that Assurance did not have any effect on CS. The two studies however differ on the methods used in data analysis. Another study by Fida et al. (2020) equally concluded that Assurance had negligible influence on CS.

5.3.5 Influence of Empathy on Customer Satisfaction

According to Suki (2013), Empathy refers to how companies care and provide personalized attention to their customers to make them develop a sense of belonging. In this study, empathy was examined against aspects such as caring staff, understanding of customer needs, staff having customers' best interest at heart and convenient operating hours. Informants 'strongly agreed' that Empathy was very important. Policyholders' overall perceptions about Empathy had an overall mean score of 3.505 which represented agree score on Likert scale. This indicated that general insurance policyholders 'agreed' that insurers were empathetic. This translated to a confirmation or satisfaction with reference to EDP as posited by Oliver (1980). There was consensus that staff were caring, staff understood customer needs, and operating hours were convenient. Policyholders were however indifferent on the aspect of insurers having their best interest at heart.

Insurer should therefore strive to attain positive disconfirmation by surpassing customer expectations. Insurers should genuinely care and avoid taking advantage of customers. Customer expect to be shown compassion at the time of claims settlement rather than being treated as an advesary. Customers mostly come into contact with insurance at inception of the contract or at the claims stage, meaning that customer can hold a policy for several years without making a claim. Whenever customers feel valued, they are likely to remain with the same company and transact more business (Suki, 2013). Additionally, Tsoukatos et al. (2004), observed that Empathy is important in the

insurance industry, especially during tough times like loss, illness, or bereavement. In such instances, insurance professionals can exhibit empathy through actions such as upholding trust and integrity, fostering transparent communication and responding to complaints with empathy while upholding ethical standards. Incorporating empathy in service delivery may seem to be time consuming but eventually pay-off in terms of enhanced CS (Ye et al., 2017).

Person's correlation analysis established a strong and positive correlation between empathy and CS in the general insurance sector. Regression analysis on the variables confirmed a significant relationship with beta coefficient of 0.629. This implied that one unit increase in Empathy would increase CS by 0.629, when other variables are constant. In addition, multiple regression established beta coefficient at 0.285. The current study therefore established a strong positive and remarkable relationship between Empathy and CS in general insurance companies in Kenya.

Several empirical studies have established a positive relationship between Empathy and CS (Akdere et al., 2018; Arokiasamy & Huam, 2014; Awlachew, 2015; Parasuraman et al., 1988). The current study findings also determined a positive connection between Empathy and CS. The findings resonate with findings of a study by Bahadur et al. (2018) in China's telecommunication industry that confirmed a positive relationship between empathy and CS and loyalty. Similarly, a study by Fida et al. (2020), on the effects of Service Quality on customer loyalty and CS in Islamic banks in the Sultanate of Oman, concluded that empathy had the greatest effect on CS after responsiveness. This study findings contradict findings by Ramamoorthy et al. (2018), on service quality and its influence on customers' post purchase behaviour and CS in the Indian life insurance business which found no correlation between Empathy and CS.

5.4 Conclusions

The general research objective for the research was to establish the influence of Service Quality on CS in the general insurance companies in Kenya.

As much as policyholders 'agreed' with the quality of services offered, they did not feel 'strongly agree' with insurance services, meaning that level of service quality in general

insurance companies is not at its best. Multiple regression established that the independent variables collectively explained 47.8% variation in CS in the general insurance companies in Kenya. The Overall CS index was at 59.9%. This is slightly above average; insurers must therefore enhance the quality of service to attain higher level of CS. According to Morvan (2017), customers at times adjust their expectations to reduce the dissonance. This implies that customer may confirm satisfaction due to lack of better options. Customers have a tolerance level within which they accept a range of service performance as satisfactory (Lovelock & Wirtz 2012; Woodruff & Jenkins 1983). This means that customers will defect to competitors as soon as they encounter better services, above the acceptable threshold. Elkhani and Bakri (2012) observed that customer satisfaction is the starting point in winning customer trust and creating lasting relationship.

5.4.1 Influence of Tangibility on Customer Satisfaction

The first specific objective of the study was to determine the influence of Tangibility on CS in the general insurance companies in Kenya. Descriptive data analysis determined the overall customer perception on tangibility as 'agree'. This implied that policyholders' expectations were met hence a confirmation or satisfaction. It was however noted that none of the informants 'strongly agreed' with the tangibility statements. This implied that insurers did not exceed customer needs.

Pearson correlation analysis established a moderate positively relationship between Tangibility and CS within the general insurance companies in Kenya. The results of regression analysis established that Tangibility had a positive and noteworthy influence of CS in the general insurance companies in Kenya. This study therefore determined that Tangibility had a modest, positive and remarkable influence on CS in the general insurance companies in Kenya. Enhancing Tangibility would therefore lead to improvement in CS level within the general insurance companies in Kenya.

5.4.2 Influence of Reliability on Customer Satisfaction

The second specific objective of the study was to establish the influence of Reliability on CS in the general insurance companies in Kenya. Descriptive data analysis established the overall customer perception of on Reliability as 'agree'. It was however

noted that none of the informants 'strongly agreed' with the reliability statements. This meant that policyholders' perceptions matched their expectations, hence a confirmation or satisfaction.

Correlation analysis confirmed a moderate and positive correlation between Reliability and CS in the general insurance companies in Kenya. Regression results confirmed a positive and substantial relationship between the variables. This study therefore established a moderate, positive and substantial relationship between Reliability and CS in the general insurance companies in Kenya. This means that enhancing Reliability will increase CS levels among customers in the general insurance companies in Kenya.

5.4.3 Influence of Responsiveness on Customer Satisfaction

The third study specific objective was to determine the influence of Responsiveness on CS in the general insurance companies in Kenya. Descriptive statistics determined the overall customer perceptions on responsiveness as 'agree' meaning that general insurers were responsive to customers. There was however no 'strongly agree' response. Policyholders' expectations were therefore confirmed, as they were basically satisfied.

The results of results of correlation investigation concluded that a modest and positive relationship exists between Responsiveness and CS. Regression results presented positive and substantial effect of Responsiveness over CS in general insurance companies in Kenya. Overall results established that Responsiveness had a moderate positive and considerable influence on CS in the general insurance companies in Kenya. Therefore, enhancing responsiveness can significantly contribute to increase in CS within the general insurance companies in Kenya.

5.4.4 Influence of Assurance on Customer Satisfaction

The fourth specific objective was to determine the influence of Assurance on CS in general insurance companies in Kenya. Descriptive statistics established that general insurance policyholders 'agree' with statements on service assurance. Notably, none of the informants 'strongly agreed' to the assurance statements denoting confirmation or matching of expectations and perceptions (Oliver, 1980).

Pearson correlation examination established a strong positive association between Assurance and CS had a strong positive. Regression results presented a positive and

extensive influence on Assurance over CS. This study therefore established that Assurance had a strong positive and substantial influence on CS in general insurance companies in Kenya. This means that increasing assurance will therefore translate to improvement in CS level.

5.4.5 Influence of Empathy on Customer Satisfaction

The fifth specific objective of the study was to establish the influence of Empathy on CS in general insurance companies in Kenya. Descriptive statistics established the overall policyholders' perceptions on Empathy as 'agree'. General insurance policyholders therefore agreed that insurers were empathetic during their interactions. None of the informants answered 'Strongly agree' to the statements meaning that expectation matched the perception about service performance hence confirmation or satisfaction.

Pearson correlation results ruled that Empathy had a strong and positive influence of CS in general insurance companies. Regression analysis established a strong positive and remarkable influence of Empathy over CS in general insurance companies in Kenya. This study therefore determined that Empathy had a strong positive and remarkable influence on CS in general insurance companies. This implies that increasing Empathy will improve CS in general insurance companies in Kenya.

5.5 Recommendations for Policymakers and Practitioners

In this section, the researcher made recommendations based on current study findings and empirical studies to provide insights that will inform strategic decisions on policy and practice within the general insurance sector.

5.5.1 Insurance Practitioners

As much as policyholders 'agreed' with the quality of services offered, they did not feel 'strongly agree' with insurance services, meaning that level of service quality in general insurance companies is not at its best. The Overall CS index was at 59.9%. This is slightly above average; insurers must therefore enhance the quality of service to attain higher level of CS. According to Morvan (2017), customers at times adjust their expectations to reduce the dissonance. This implies customer may agree to be satisfied due to lack of better options. Customers have a tolerance level within which they accept

a range of service performance as satisfactory (Lovelock & Wirtz 2012; Woodruff & Jenkins 1983). This means that customers will defect to competitors as soon as they encounter better services, above the acceptable threshold.

Insurers need to adopt the latest technology to enhance service delivery to customers. Online service delivery is gaining ground worldwide to replace the brick-and-mortar offices. It is important to have neat and clean staff and office spaces to support face to face marketing, otherwise for digital marketing, tangibility is not a priority. An atmosphere of chaos and confrontation with customers is likely to have a negative effect on satisfaction. Insurers must therefore be genuinely interested in addressing customer concerns to make service more reliable. Complaints management emerged as a key concern, insurers can improve on this by formulating and implementing effective complaints management systems. This study confirmed that policyholders feel that insurers misrepresent product information. This means that insurers need to make customers understand insurance products by truthfully disclosing all the product features and limitations. Insurers can consider several strategies such as improving staff technical capacity, trainings on effective communication, fostering transparency and ethical behaviour in all operations, building trust and emotional connections with customer, and adapting to ever-changing customer priorities. Delivering high-quality services is known to boost CS, retention and loyalty, which translates to increased market share and growth (Nguyen, Nguyen, Nguyen , & Phan, 2018).

5.5.2 Policymakers and Regulators

Policymakers can use the research findings to develop policies that promote insurance inclusivity, awareness, access to information and consumer protection. Regulatory bodies will find the findings informative in enforcing market conduct supervision of insurers and in the protection of consumer interests. This can be done through providing guidelines for insurance best practice.

5.5.3 Academia

This research has contributed literature on the influence service quality on CS in general insurance companies in Kenya, it therefore addressed the existing literature gap. This study further supports the application of EDP in examining perceptions about service

quality and expectations in the insurance sector. The study has provided a foundation for further research, opening avenues for more in-depth studies, comparative analyses, and benchmarking.

5.6 Suggestions for Further Studies

The general research objective was to establish the influence of Service Quality on CS in general insurance companies in Kenya. Further research may consider a qualitative approach that could delve into understanding specific aspects of service quality that customers prioritize in the General insurance. Focus groups or in-depth interviews could then be used to uncover more customer preferences and expectations regarding the service quality.

Customer Satisfaction is a multi-faceted construct that can be predicted by several factors beyond service quality, such as price competitiveness, product features, and brand reputation. Future research could analyse the interplay between service quality and these other factors to gain a more comprehensive understanding of CS drivers.

A similar study can be replicated in other sectors to bridge literature gaps for example a similar study with focus in the public sector to identify service delivery gaps and make recommendations to enhance service delivery to the public.

5.7 Limitations of the Study

The current study was confined to five service dimensions postulated under SERVQUAL model. Future studies can examine different predictor variables to highlight further gaps in service quality in insurance business.

The study employed structured questionnaires to amass primary data. Inclusion of open-ended questions could further enrich the findings by allowing informant room to give extra information that would be useful in improving service quality.

It was not possible to obtain customer contacts directly from insurers due to data protection restrictions posed by Data Protection Act, 2018. Convenience sampling techniques was therefore considered most suitable in reaching informants. Despite of the limitations encountered the overall study objective was not adversely affected.

5.8 Chapter Summary

In this chapter, the researcher summarized the findings of the study whose objective was to assess the influence of service quality on CS in general insurance companies in Kenya. Based on the findings, this study concluded that Tangibility, Reliability, Responsiveness, Assurance and Empathy had remarkable and positive influence on CS. The study made recommendations based on the study findings and proposed areas for future research. Limitations encountered were highlighted.

REFERENCES

Akdere, M., Top, M., & Tekingunduz, S. (2018). Examining patient perceptions of service quality in Turkish. *Top Quality Management and Business Excellence*, 342- 352.

Allan, M. (2016). The Relationship between Service Quality and Customer Satisfaction and Retention in Ghana's Luxury Hotels. *IUP Journal of Marketing Management*, 60.

Al-Tit, A. (2015). The Effect of Service and Food Quality on Customer Satisfaction and Hence Customer Retention. *Asian Social Science*, 129-139.

(2005). *American Customer Satisfaction Index.*

Anderson, E. W., & Fornell, C. (2000). Foundations of the American customer satisfaction index. Total quality management. *Total Quality Management*, 869-882.

Andeson, E. W., Fornell, C., & Rust, R. T. (1997). Customer satisfaction, productivity, and profitability: Differences between goods and services. *Marketing science*, 16(2), 129-145.

Arici, E. H., Koseoglu, A. M., & Altinay, L. (2022, April 20). *Service Research: Past, Present and Future Reseach Agenda*. Retrieved from Emerald Insight: DOI 10.1108/SJME-09-2021-0177

Arokiasamy, A. R., & Addullah, A. G. (2013). Service quality and customer satisfaction in the cellular telecommunication service provider in Malaysia. Researchers World, 4(2), 1. *Researchers World*, 4(2), 1.

Arokiasamy, A. R., & Huam, H. T. (2014). Assessing the relationship between service quality and customer satisfaction in the Malaysian automotive insurance industry. *Middle-East Journal of Scientific Research*, 1023-1030.

Association of Kenya Insurers. (2021, March). Retrieved from Information Paper on Insurance Fraud:

https://akinsure.com/content/uploads/documents/Information_Paper_on_Insurance_Fraud.pdf?t=1253

Association of Kenya Insurers. (2022). Insurance Intermediaries, their function in growth. *The Insurer, Jounal of the Association of Kenya Insurers*.

Atlas Magazine. (2022, December). *Global Insurance Penetration rate*. Retrieved from Atlas Magazine, Insurance News aroung the world.

Avkiran, N. K. (1994). Developing an instrument to measure customer service quality in branch banking. International journal of bank marketing. *nternational journal of bank marketing*, 10-18.

Awlachew, A. (2015, January). *Study of the effect of service quality on customer satisfaction in selected insurance companies in Addis Ababa*. Retrieved from University of Addis Ababa.

Bahadur, W., Aziz, S., & Zulfiqar, S. (2018, July 10). *Effect of employee empathy on customer satisfaction and loyalty during employee–customer interactions: The mediating role of customer affective commitment and perceived service quality.* Retrieved from Cogent Business Management: https://www.tandfonline.com/loi/oabm20

Bajaj, S., Garg, R., & Sethi, M. (2016, November 16). Total Quality Management: A Critical Literature Review using Pareto Analysis. *International Journal of Productivity & Performance Management*, 128-154. Retrieved from Emerald: 10.

Bala, N., Sandhu, H. S., & Nagpal, N. (2011). Measuring Life Insurance Service Quality: An Empirical Assessment of. *International Business Research*, 176.

Barasa, K. (2016, April). *To identify a framework for adoption by insurance industry for enhancing insurance penetration. Nairobi: Strathmore Business School*. Retrieved from Strathmore University: https://su-plus.strathmore.edu/handle/11071/2474

Bearden, W. O., Ingram, T. N., & LAForge, R. W. (2007). *Marketing. Principles and Perspective.* New York: McGraw Hill Inc.

Bhandari, P. (2020, May 14). *Population vs Sample, Definition, Differences and Examples*. Retrieved from Scribbr: https://www.scribbr.com/methodology/population-vs-sample/

Bhandari, P. (2023, June 22). *Construct Validity | Definition, Types, & Examples*. Retrieved from Scibbr: https://www.scribbr.com/methodology/construct-validity/

Bhat, A. (2023). *Research Design: What it is, Elements and Types*. Retrieved from QuestionPro: https://www.questionpro.com/blog/research-design/

Blackwell, G. R. (2019, July 23). *Introduction to Positivism, Interpretivism and Critical Theory.* Retrieved from Researchgate: 10.7748/nr.2018.e1466

Blumberg, B., Cooper, D., & Schindler, P. (2014). *EBOOK: Business research methods. 4th Edition.* UK: McGraw Hill.

Bolton, R. N., & Drew, J. H. (1991). A longitudinal analysis of the impact of service changes on customer attitudes. *A Journal of Marketing*, 1-9.

Brady , M., & Cronin, J. J. (2001). Some new thoughts on conceptualizing perceived service quality: a hierarchical approach. *Journal OF marketing*, 34-49.

Breda University of Applied Science. (2018). *Correlation and regression Analysis: Testing the Normality Assumption.* Retrieved from Studeersnel: https://www.studeersnel.nl/nl/document/breda-university-of-applied-sciences/research-methods/correlation-and-regression-analysis/5636437

Brogi, M., Lagasio, V., & Porretta, P. (2022). Be good to be wise: Environmental, Social, and Governance awareness as a potential credit risk mitigation factor. . *Journal of International Financial Management & Accounting.*, 33(3), 522-547.

Bryman, A. (2008). *Social Research Methods.* London, UK: Oxford University Press.

Burbock, B. (2014). Prospect Theory and Servqual. *Management*, pp. 155-168. Retrieved from Ebscohost.

Cardozo, R. (1965). An experimental Study of consumer effort, expectattions and satisfaction. *Journal of Marketing Research*, 2, 244-249.

Carman, J. M. (1990). Consumer perception of service quality. An assessment of SERVQUAL dimensions. *Journal of retailing*, 66(1) 33-55.

Chang, T., Lee, C., & Chang, C. (2014). Does Insurance Activity Promote Economic Growth? Further evidence based on bootstrap panel Granger causality test. *European Journal of Finance*, 1187-1210.

Chege, N. C. (2021). Examining the influence of service reliability on customer satisfaction in the insurance industry in Kenya. *International Journal of Research in Business and Social Science*, 259-265.

Cleave, P. (2015, January 25). *6 Way to Measuring Customer Satisfaction*. Retrieved from Smart Survey: https://www.smartsurvey.co.uk/blog/6-ways-to-measure-customer-satisfaction

Cleave, P. (2023, March 23). *Structured or Semi Structured Questionnaires?* Retrieved from Smart Survey: https://www.smartsurvey.co.uk/blog/structured-or-semi-structured-questionnaire

Conduct and Interprete One Way ANOVA. (2024, May 23). Retrieved from Statistic Solutions: https://www.statisticssolutions.com/free-resources/directory-of-statistical-analyses/one-way-anova/

Contruct Validity. (n.d.). Retrieved from Wikipedia: https://en.wikipedia.org/wiki/Construct_validity

Correlational Research. (n.d.). Retrieved from Washington State University: https://opentext.wsu.edu/carriecuttler/chapter/correlational-research/

Creswell, J. W. (2013). *Research Design, Qualitative, Quantitative and Mixed Method Approaches.* London: 4th Edition, SAGE Publications Inc.

Cronin, J. J., & Taylor, A. S. (1994). Servperf vs Servqual: Reconciling Performance-Based and Perception minus Expectation Measurement of Service Quality. *Journal of Marketing*, pp 125-131.

Cronin, J., & Taylor, S. (1992). Measuring Service Quality. A Reexamination & Extension. *Journal of Marketing*, 55-68.

Dabholkar, P. A., Shepherd, C. D., & Thorpe, D. I. (2000). A comprehensive framework for service quality: an investigation of critical conceptual and measurement issues through a longitudinal study. *JoURNAL of Retailing*, 139-173.

Dabholkar, P. A., Thorpe, D. I., & Rentz, J. O. (1996). A measure of service quality for retail stores: scale development and validation. Journal of the Academy of marketing Science. *Journal of the Academy of marketing Science, 24, 3-16.*, 24, 3-16.

Deloitte. (2023). *Insurance Outlook, Charting the Path to the future of Insurance.* Nairobi.

Denison, G. (2023, April 11). *What is Quality Research. A guide to identifying the key features and achieving success*. Retrieved from Prolific: https://www.prolific.co/blog/what-is-quality-research-a-guide-to-identifying-the-key-features-and-achieving-success

Eklof, J., Hellstrom, K., Malova, A., Parmler, J., & Podkorytova, O. (2017, October). *Customer perception measures driving financial performance: theoretical and empirical work for a large decentralized banking group.* Retrieved from Stochholm School of Economic Working Paper Series on Business Administration : No. 2016:1

Elkhani, N., & Bakri, A. (2012). Review of EDT model in B2C e-commerce. *Journal of Information Systems Research and Innovation*, 95-102.

Etikan, I., Musa, S. A., & Alkassim, R. S. (2016). Comparison of Convenience Sampling and Purposive SamplingEtikan, I., Musa, S. A., & Comparison of convenience sampling and purposive sampling. *American journal of theoretical and applied statistics*, 5(1), 1-4.

Fida, B. A., Ahmed, U., Al-Balushi, Y., & D.Sing. (2020). *Impact of service quality on customer loyalty and customer satisfaction in Islamic banks in the Sultanate of Oman.* Retrieved from Sage Open: 10(2), 2158244020919517.

Fornell, C., Johnson, D. M., & Braynt, E. B. (1996). The American customer satisfaction index: nature, purpose, and findings. *Journal of Marketing*, 7-18.

Gachau, J. (2016). *Customer Stisfaction and Insurance Service Delivery*. Retrieved from University of Nairobi Repository: http://hdl.handle.net/11295/99402

Ghazali, D. (2008). Kesahan dan Kebolehpercayaan Dalam Kajian Kuantitatif dan Kualitatif. Jurnal Institut Perguruan. *Jurnal Institut Perguruan Islam*.

Ghotbabadi, A. R., Feiz , S., & Baharun, R. (2015). Service Quality Measurements: A review. *International Journal of Academic Research in Business and Social Sciences*, 5(2), 267-286.

Ghotbabadi, A. R., Feiz, S., & Baharun, R. (2015). Service quality measurements: A review. *International Journal of Academic Research in business and social sciences*, 5(2), 267-286.

Gichuru, P. W. (2011, October). *Customer Satisfaction Survey "A Case of The Jubilee Insurance Company of Kenya Limited".* Retrieved from University of Nairobi Repository.

Gijsenberg, M. J., Van, H. J., & Verhoef, P. C. (2015). Loses Loom longer than Gains: Modeling the Effects of Service Crisis on Perceived Quality Over Time. *Journal Of Marketing Research*, 642-656.

Gremler , D. D., Gwinner, K. P., & Brown, S. W. (2001). Generating positive word-of-mouth communication through customer-employee relationships. *International Journal of Service Industry Management.*, 12(1), 44-59.

Grönroos, C. (1984). A service quality model and its marketing implications. . *European Journal of marketing, 18(4), 36-44.*, 18(4), 36-44.

Gronroos, C. (1988). Service Quality: The Six Criteria of Good Perceived Quality. *Review of Business, vol. 9.*

Grönroos, C. (2001). The Perceived Service Quality Concept-A Mistake? *An International Journal*, 11(3), 150-152.

Guiso, L. (2021, December 6). *The Geneva Papers: Special Issue on Trust In Insurance, Summary*. Retrieved from The Geneva Association: https://www.genevaassociation.org/news/articles-interest/geneva-papers-special-issue-trust-insurance-summary

Gummesson, E. (2007). Exit services marketing-enter service marketing. *Journal of customer behaviour*, 6(2), 113-141.

Hair, J. F., Anderson, R. E., Rabin, B. J., & Black, W. C. (2010). *Multivariate data analysis: A global perspective (Vol. 7).* New Jersey: Pearson.

Hallencreutz, J., & Parmler, J. (2021). Important drivers for customer satisfaction–from product focus to image and service quality. *Total quality management & business excellence*, 501-510.

Haute, E. v. (2021, January). *Sampling Techniques. Sample Types and Sample Size*. Retrieved from ResearchGate: http://dx.doi.org/10.1093/hepl/9780198850298.003.0057

Heale, R., & Twycross, A. (2015). Validity and reliability in quantitative studies. Evidence-based nursing. *Evidence-based nursing*, 18(3), 66-67. Retrieved from Evidence Based Nursing: 10.1136/eb-2015-102129

Hernández, J. J. (2022, February 7). *Insurance: a springboard for the prosperity of humanity since the dawn of time*. Retrieved from MAPFREE: https://www.mapfre.com/en/insights/insurance/insurance-as-an-asset-protector/

IAIS. (2022). *Global Insurace Market Report.* Basel, Switzerland.

ICICI Prudential Life Insurance. (n.d.). *Importance of Insurance.* Retrieved from ICICI Prudential Life Insurance: https://www.iciciprulife.com/insurance/insurance-importance.html

Insurance Regulatoty Authority. (2022). *Insurance Industry Annual Report.* NAIROBI.

IRA. (2020). *Insurance Industry Annual Report.* NAIROBI.

Janahi, M. A., & Al Mubarak, M. M. (2017). The impact of Service Quality on Customer Satisfacton in Islamic Banks. *Journal of Islamic Marketing*, 595-604. Retrieved from Emerald Insigt: https://doi.org/10.1108/JIMA-07-2015-0049

Kagan, J. (2023, April 20). *Insurance: Definition, how it works and main types of policies.* Retrieved from Investopedia.

Kant, R., Jaiswal, D., & Mishra, S. (2017). *The Investigation of Service Quality Dimensions, Customer Satisfaction and Corporate Image in India Public Sector Banks. An Application of SEM.* Retrieved from Sage Publications: DOI: 10.1177/0972262916681256

Kant, R., Jaiwal, D., & Mishra, S. (2017). The investigation of service quality dimensions, customer satisfaction and corporate image in Indian public sector banks: An application of Structural Equation Model (SEM). *Vision*, 21(1), 76-85.

Khudhar , H. Y., Jusoh, D. A., F, A. A., Mardani, A., & Nor, K. M. (2020). A review and bibliometric analysis of service quality and customer satisfaction by using Scopus database. *International Journal of Management*, 459-470.

Kiana, M. W. (2010, October). *Challenges in Management of General Insurance*. Retrieved from University of Nairobi Repository.

Kothari, C. R. (2010). *Research Methodology: Methods and Techniques.* New Delhi: New Age International Publishers.

Kotler, P., & Keller, K. L. (2016). *Marketing Management.* Pearson.

Leonidou, L. C., Leonidou, C. N., Fotiadis, T. A., Zeriti, & Athina. (2012). *Resources and capabilities as drivers of hotel environmental marketing strategy:*. Retrieved from University of Leeds: http://eprints.whiterose.ac.uk/85916/

Liang, D. (2008). The Determining Factors of Customer Loyalty for Luxury Hotels in US. *The Journal of International Management Studies*, 167- 175.

Lovelock, C. (1994). *Product Plus.* New York: McGraw Hill.

Lovelock, C., & Wirtz, J. (2012). *Services Marketing People, Technology and Strategy.* New Jersey: Prentice Hall.

Macharia, S. W. (2014, November). *Relationship between Service Quality and Customer Satisfaction in Retail Banking in Kenya*. Retrieved from University of Nairobi Repository.

Mattson, J. (1992). A Service Quality Model based on ideal value Standard. *International Journal of Service Industry Management*, 18-33.

Meryer, A., & Westerbarkey, P. (1996). Measuring & Managing Hotel Guest Satisfaction. Service Quality in Hospitality Organizations. pp.185-203.

Middleton, F. (2023, June 22). *Reliability vs Validity in Research, Difference, Types and Examples*. Retrieved from Scibbr: https://www.scribbr.com/methodology/reliability-vs-validity/

Mishra, M. N., & Mishra, S. B. (2011). *Insurance Principles and Practice.* New Delhi: S. Chand & Company.

Mohajan, H. (2017, October 1). *Two criteria for good measurements in research: Validity and reliability.* . Retrieved from Annals of Spiru Haret University: https://mpra.ub.uni-muenchen.de/83458/

Morvan, C. &. (2017). *An analysis of Leon Festinger's a theory of cognitive dissonance.* . Macat Library.

Motum, A. L., & Kinyua, G. (2022). Customer Satisfaction in Non-Life Insurance Companies in Kenya. Does Information Agility Matter? *International Journal of Managerial Studies and Research*, pp 34-47.

Mpaata, E., Basemera, M., & Rulangaranga, D. M. (2016). Insurance company responsiveness and business success continuity in Uganda. *European Journal of Business and Management Vol.8, No.9*.

Mugenda, A. G. (2008). *Social Science Research: Theory and Principles.* Nairobi: Acts Press.

Mugenda, O. M., & Mugenda, A. G. (2003). *Research methods: Quantitative & qualitative apporaches (Vol. 2, No. 2).* Nairobi: Acts Press.

Mutinda, M. J. (2020, July). *The effect of service quality on customer satisfaction among hotels in Nairobi County , Kenya*. Retrieved from Strathmore University Library: https://su-plus.strathmore.edu/handle/11071/10183

My Research Topics. (2021, August 17). *Descriptive Research Design-Overview*. Retrieved from My Research Topics: https://www.myresearchtopics.com/guide/descriptive-research/

National Health Insurance Fund (Kenya). (2023, June 22). Retrieved from Wikipedia: https://en.wikipedia.org/wiki/National_Health_Insurance_Fund_(Kenya)#:~:text=The%20National%20Health%20Insurance%20Fund,insurance%20for%20all%20Kenyan%20citizens.

Ngo, V. (2015). Measuring customer satisfaction: a literature review. . *In Proceedings of the 7th International Scientific Conference Finance and Performance of Firms in Science, Education and Practice (Vol. 7, pp. 1637-1654).* (pp. Vol. 7, pp. 1637-1654). Researchgate.

Nguyen, H. T., Nguyen, H., Nguyen , N. D., & Phan, A. C. (2018, April 11). Determinants of Customer Satisfaction and Loyalty in Vietnamese life-insurance setting. *MDPI*, 1-16. Retrieved from Vietnam National University, School of Busiesss Administration: https://doi.org/10.3390/su10041151

Nilsson, J., & Wall, O. (2017). *Online customer experience, satisfaction and repurchase intention for online clothing retailing.* Retrieved from University of Gothenburg, School of Business, Economics and Law.

Nunnally, J. C. (1978). *Psychometric theory (2nd ed.).* . New York : McGraw-Hill.

Obilor, E. I., & Amadi, E. C. (2018). Test for Significance of Pearson Correlation Coefficient (r). *International Journal of Innovative Mathematics, Statistics & Energy Policies*, 6(1):11-23,.

Oliver, R. L. (1980). A Cognitive Model of the Antecedents of Satisfaction Decisions. *Journal of Marketing Research*, 46-49.

Oliver, R. L. (1993). Cognitive, Affective and Attribute Bases of Satisfaction Response. *Journal of Consumer Research*, 418-430.

Oliver, R. L. (1997). *Satisfaction a Behavioral Perspective of the Consumer.* New York: McGraw-Hill Companies.

Oluwatayo, J. A. (2012). Validity and reliability issues in educational research. Journal of educational and social research. *Journal of educational and social research*, 2(2), 391-400.

Omar, H. F., Saadan, K., & K.B. Seman. (2015). Determining the influence of the reliability of service quality on customer satisfaction: The case of Libyan E-commerce customers. . *International journal of learning and development.*, 5(1), 86-89.

Osborne, J. W., & Waters, E. (2019, November). *Scholarworks*. Retrieved from Four assumptions of multiple regression that researchers should always test. Practical assessment, research, and evaluation, 8(1), 2.: https://doi.org/10.7275/r222-hv23

Osman, Z., & Sentosa, I. (2013). Mediating Effect of Customer Satisfaction on Service Quality and Customer Loyalty Relationship in Malaysian Rural. *International Journal of Economic Business & Management Studies*, 25-37.

Pakurar, M., Haddad, H., Nagy, J., Popp, J., & Ola. (2019). The service quality dimensions that affect customer satisfaction in the Jordanian banking sector. *Sustainability*, 11(4), 1113.

Panda, T., & Das, S. (2014). Panda, T. K., & Das, S. (2014). The role of tangibility in service quality and its impact on external customer satisfaction: A comparative study of hospital and hospitality sectors. . *IUP Journal of Marketing Management, 13(4).*, 13(4).

Parasuraman , A., Zeithaml , V. A., & Berry, L. L. (1988). Servqual. A multi item scale for measuring Consumer Perceptions of Service Quality. *A journal of Retailing*, 12-40.

Parasuraman, A., Zeithaml, V. A., & Berry, L. L. (1985). A conceptial Model of Service Quality and its Implications for Future Research. *Journal of Marketing*, 41-50.

Park , s. Y., Konge, L., & Artino, R. A. (2020). The Positivism Paradigm of Research. *Journal of the Association of American Medical College*, 95(5). Retrieved from Health Sciences Reseach Commons. Academic Medicines: http://dx.doi.org/10.1097/ACM.0000000000003093

Pierce, K. (2023, April 14). *Recention Marketing Vs. Acquisition Marketing; Why its Cheaper to Keep Existing Customers*. Retrieved from Revenue Marketing Alliance: www.revenuemarketingalliance.com

Policyholders Compensation Fund. (n.d.). Retrieved from Policyholders Compensation Fund: https://www.pcf.go.ke/

Prakash, G. (2018). Undestanding Service Quality: Insights from Literature . *Journal of Advances in Management Science*, 64-90.

Prakoso, A. F., Nurul, R., Wulandari, A., Trisnawasti, N., Fitrayati, D., Rachmawati, L., & Andrisansyah, E. H. (2017). Reliability, Responsiveness, Assurance, Empathy, And Tangible:. *International Journal of Business and Management Invention*, 68-78.

QuestionPro. (n.d.). *CSAT VS NPS*. Retrieved from QuestionPro: https://www.questionpro.com/cx/csat/nps-vs-csat.html

Rahaman , S. (2023, November 28). *CSAT vs NPS: What's the difference?* Retrieved from Fullview: www.fullview.io was first indexed by Google in May 2017

Rajendran, R. P. (2019). Evolution of customer satisfaction index as a performance metric: a comprehensive review. . *Journal of Xi'an University of Architecture & Technology.*, 11(12), 536-550.

Ramamoorthy, R., Gunasekaran, A., Roy, M., Rai, B. K., & Senthilkumar, S. (2018). Service quality and its impact on customers' behavioural intentions and satisfaction: an empirical study of the Indian life insurance sector. Total Quality Management & B. *Total Quality Management & Business Excellence, 29(7-8), 834-847.*, 29(7-8), 834-847.

Ramanathan, A., Vimala, B., & Alamelu, K. (2018). Insurance Penetration and Insurance Density in India - An Analysis. *International Journal of Research and Analytical Reviews*.

Reader, G., Jackson, A., & Norman, J. (2016, December 6). *The Next Generation Customer – KPMG Kenya Insurance Survey*. Retrieved from The Digital Insurer: https://www.the-digital-insurer.com/library/the-next-generation-customer-kpmg-kenya-insurance-survey-report/

Reichel, D. &. (2017). Surveying immigrants without sampling frames–evaluating the success of alternative field methods. Comparative migration studies. *Springer*, 5, 1-22.

Robson, C. (2011). *Real World Research: A Resource for Users of Social Research Methods in Applied Settings, (2nd Ed.).* Sussex, A.: A. John Wiley and Sons Ltd.

Rust, R., Zahorik, A., & Keiningham, T. (1996). *Service Marketing* . New York: HarperCollins College .

Seth, N., & Deshmukh, S. G. (2005). Service Quality Models. A Review. *International Journal Of Quality and Reliability Mnagement*, 913- 945.

Sharma, G. (2017). Pros and cons of different sampling techniques. . *International journal of applied research*, 3(7), 749-752.

Simkus, J. (2023, June 26). *Cross- sectional study: Definition, Design & Examples*. Retrieved from Simply Psychology: https://www.simplypsychology.org/what-is-a-cross-sectional-study.html

Sreedharan, V. R., & Saha, R. (2021). An integrated framework for service quality, choice overload, customer involvement and satisfaction: Evidence from India's non-life insurance sector. *Management Decisions*, 801-828.

Srivastava, M., & Rai, A. K. (2014, March 8). *An investigation into service quality–customer loyalty relationship: the moderating influences.Decisions.* Retrieved from Indian Institute of Management: 10.1007/s40622-014-0025-5

Stafford, M. R., Stafford, T. F., & Wells, B. P. (1998). Royne Stafford, M., Stafford, T. F., & Wells, B. P. (1998). Determinants of service quality and satisfaction in the auto casualty claims process. *Journal of Services Marketing*, pp426-440.

Suki, N. M. (2013). Suki, N. M. (2013). Customer Satisfaction with Service Delivery in the Life Insurance Industry: An Empirical Study. *Jurnal Pengurusan*, 38.

Sweeney, J., Soutar, G., & Johnson, L. E. (1997). Retail Servics Quality and Perceived Value. *Journal of Retailing and Consumer Service*, 39-48.

Taber, K. S. (2018). The use of Cronbach's alpha when developing and reporting research instruments in science education. Research in science education. *Springer*, 48, 1273-1296. Retrieved from Springer.

Taherdoost, H. (2016). Validity and Reliability of the Research Instrument; How to test the Validation of Research Questionnaire/ Survey in a Research. *International Journal of Academic Research in Management*, Vol. 5, No. 3, pp: 28-36.

Teas. (1993). Expectations, Performance Evaluations and Consumer Perception of Quality. *Journal of Marketing*, 18-34.

The National Treasury & Planning. (2021, March). Draft National Insurance Policy. NAIROBI, KENYA.

Thoyts, R. (2010). *Insurance Theory & Practice.* Routledge.

TIBCO Software Company. (2024, May 23). *Use of Model Summary*. Retrieved from TIBCO Product Documentation: https://docs.tibco.com/pub/spotfire/7.0.0/doc/html/prd/prd_using_a_model_su

mmary.htm#:~:text=For%20parametric%20models%20(Linear%20Regression,model%20of%20the%20same%20type.

Torres, E. N. (2014). Deconstructing Service Quality and Customer Satisfaction. *Journal of Hospitality & Marketing*, 652-677.

Tse, D. K., & Snaith, T. (1988). Models of Customer Satisfaction Formation: An Extension. *Journal of Marketing Research*, 25, 204-212.

Tsoukatos, E., Marwa, S., & Rand, K. G. (2004). Quality Improvement in the Greek and Kenyan Insurance Industries. Lancaster, United Kingdom.

Turkson, E. (2012, June). *Quality Assurance in the Hospitality Industry: A Case Study of Capital View Hotel, Koforidua*. Retrieved from Kwame Nkuruma University of Science and Technology. Institute of Distance Learning: https://ir.knust.edu.gh/handle/123456789/4845

Vaidis, C. D., & Bran, A. (2020, October 28). *Cognitive Dissonance Theory.* Retrieved from Oxford Bibliographies: DOI: 10.1093/OBO/9780199828340-0156

Vargo, S. L., & Lusch, R. F. (2004). Evolving to a new dominant logic for marketing. *Journal of Marketing*, 68(1), 1-17.

Wang, Y., Zhang, Z., Zhu, M., & Wang, H. (2020). The impact of service quality and customer satisfaction on reuse intention in urban rail transit in Tianjin, China. . *Sage Open*, 10(1), 2158244019898803.

Wattoo, M. U., & Iqbal, S. M. (2022, April- June). *Unhiding nexus between service quality, customer satisfaction, complaints, and loyalty in online shopping environment in Pakistan. Sage Open, 12(2), 21582440221097920.* Retrieved from Sage: DOI 10.1177/21582440221097920

Woodruff, R. B., & Jenkins, R. L. (1983). Modeling Consumer Satisfaction Processes using Experince -Based Norms. *Journal of Marketing Research*, 20, 296-304.

Yamane, T. (1967). *Statistics. An Introductory Analysis, 2nd Edition.* New York: Harper & Row.

Yarimoglu, E. K. (2014). A review on dimensions of service quality models. *Journal of marketing management, 2(2), 79-93.*, 2(2), 79-93.

Ye, J., Dong, B., & Lee, J. (2017). The long-term impact of service empathy and responsiveness on customer satisfaction and profitability: a longitudinal investigation in a healthcare context. Marketing Letters, 28, 551-564. *Marketing Letters, 28, 551-564.*, 28, 551-564. Retrieved from Springer.

Yi, Y. (1990). A critical review of consumer satisfaction. Review of marketing,. In *Review of Marketing* (pp. 4(1), 68-123.). Michigan: University of Michiga. Retrieved from University of Michigan.

Yin, R. K. (2014). Case Study Research Design and Methods. Canadian Journal of Program Evaluation. *Canadian Journal of Program Evaluation,*, 1-5.

Yüksel, A., & Yüksel, F. (2001). The Expetancy- Disconfirmation; A critic. *Journal of Hospitality and Tourism*, DOI: 10.1177/109634800102500201.

Yüksel, A., & Yüksel, F. (2008). Consumer satisfaction theories: a critical review. *Tourist satisfaction and complaining behavior: Measurement and management issues in the tourism and hospitality industry*, 65-88.

Zeithaml, V. A. (1988). Consumer perceptions of price, quality, and value: a means-end model and synthesis of evidence. . *Journal of marketing*, 52(3), 2-22.

Zeithaml, V. A., Parasuraman, A., & Berry, L. L. (1990). *Delivering Quality Service: Balancing Customer Perceptions and Expectations.* New York: The Free Press.

Zhang, Y., Fang, Y., Wei, K. K., Ramsey, E., McCole, P., & Chen, H. (2011). Repurchase Intentions in B2C ecommerce- A relationship Quality Perspective. *Information and Management*, 48 (6)192-200.

Zhu, F., Wymer, W., & Chen, I. (2002). IT-based services and service quality in consumer banking. *International Journal of Services Industry Management*.

APPENDICES

Appendix I: Letter of Introduction from Strathmore Business School

Ole Sangale Rd, Madaraka Estate,
P.O Box 59857 00200, Nairobi, Kenya.
Cell: +254 703 414/6/7, Twitter: @SBSKenya
Email: info@sbs.ac.ke or vist www.sbs.strathmore.edu

Strathmore UNIVERSITY
BUSINESS SCHOOL

23rd October 2023

To Whom It May Concern,

RE: FACILITATION OF RESEARCH – EMILY AWUOR

This is to introduce Emily Awuor Onyango who is a Master of Commerce (MCOM) Student at Strathmore University Business School, admission number MCOM/149566. As part of our MCOM Program, Emily is expected to do applied research and undertake a project. This is in partial fulfilment of the requirements of the MCOM course. To this effect, Emily would like to request appropriate data from your organization.

Emily is undertaking a research paper on "**Influence of Service Quality on CS in The general insurance companies in Kenya.**" The information obtained shall be treated confidentially and shall be used for academic purposes only.

Our MCOM Program seeks to establish links with industry, and one of these ways is by directing our research to areas that would be of direct use to industry. We would be glad to share our findings with you after the research, and we trust that you will find them of great interest and of practical value to your organization.

We appreciate your support and shall be willing to provide any further information if required.

Yours sincerely,

Njoki Kiagiri

Manager – Graduate Programmes

Strathmore University Business School.

Appendix II: Questionnaire

Serial number:

This questionnaire will assist the researcher with data collection in relation to a study titled the **'Influence of Service Quality on CS in the general insurance companies in Kenya'**.

The information collected by this questionnaire is meant for research only and will be treated with utmost confidentiality. Disclosing your identity is optional in this questionnaire.

Please sign the attached information and consent form if you agree to participate in the research. To allow for an accurate assessment, it is important that all information requested in the questionnaire is provided as completely and accurately as possible.

PART A: Demographics

1.Kindly mark the box that indicates your gender.

i. Male [ ]
ii. Female [ ]

2. Kindly indicate your age by marking the appropriate category.

i. Below 25 years [ ]
ii. Between 26 – 40 years [ ]
iii. Between 41- 60 years [ ]
iv. Above 60 years [ ]

3.What is the highest-level education?

i. Below secondary education [ ]
ii. Certificate [ ]
iii. Diploma [ ]

iv. Undergraduate [ ]

v. Postgraduate [ ]

4. Which of the following categories best describes what you do for a living?

i. Student [ ]

ii. Employed [ ]

iii. Self Employed [ ]

iv. Unemployed [ ]

5.How many times have you interacted with insurance services

i. Once [ ]

ii. 1-2 [ ]

iii. 3-5 [ ]

iv. Above 5 [ ]

6. What was the type of insurance services you sought, please tick all that apply.

i. Travel [ ]

ii. Construction [ ]

iii. Fire and flood [ ]

iv. Legal Liability [ ]

v. Marine [ ]

vi. Motor Vehicle [ ]

vii. Work related Injuries [ ]

viii. Theft [ ]

ix. Medical [ ]

x. Money [ ]

xi. Agriculture [ ]

Part B: Service Quality and CS

This section seeks your opinion regarding quality of service offered by insurance companies. Please tick the section that best describes your opinion where: 1= strongly disagree, 5= strongly agree.

i)

Tangibility	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Insurers use modern technology in service delivery.					
Insurers have appealing offices.					
Staff are well dressed and neat					
Insurers' premises are in convenient locations.					

ii)

Reliability	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Insurers provide services at the time they promise.					
Insurance staff are genuinely interested in resolving concerns raised with them.					
Insurance staff perform services right the first time.					
Insurers use reliable means in communicating to me.					

iii)

Responsiveness	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Insurance staff are well trained to handle my queries.					
Insurance staff give timely responses to my queries.					
Insurance staff are never too busy to help me.					
My insurers have effective complaints handling process.					

iv)

Assurance	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
As a customer, I trust insurance staff.					
Insurance staff are consistently courteous.					
As a customer, I am assured of the best service quality.					
Insurance staff give true representations of products they sell.					
Insurance staff are transparent in their communication to me.					

v)

Empathy	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Insurance staff are caring/empathetic towards me.					
Insurance staff clearly understand my needs.					
Insurance staff have my best interest at heart.					
Insurers operating hours are convenient for me					

Part C: Service Quality Dimensions

This section seeks to find out which service dimensions above is most important and least important to you. Please tick the section that best suits your opinion where: 1=least important, 5=most important.

Score / **Service Dimension**	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Use of modern technology, appealing offices, well dressed & neat staff, convenient location.					
Keeping promises, genuineness in resolving concerns, get things right the first time, sincere in providing solutions, use reliable means in communication.					
Staff are well trained, never too busy, give timely responses, handle complaints well.					
Staff are trustworthy, courteous, give quality					

service, give true representation of products, transparent in communications.					
Staff are caring, understand my needs, have my best interest at heart, convenient office hours.					

Part D: Overall CS

This section seeks to find out your overall level of Satisfaction with insurance service where 1=Strongly Disagree, and 5=Strongly Agree.

CS	**1=Strongly disagree**	**2= Disagree**	**3=Neither Agree nor disagree**	**4= Agree**	**5=Strongly Agree**
Insurance services consistently exceed my expectations.					
I consider renewing my policy with the same insurer/I have renewed my policy with my current insurer.					
I consider purchasing a different policy with the same insurer/I have purchased a different policy with the same insurer.					
I am likely to refer friend/relative to my insurer.					
The benefits I have received from my insurance are more than the price I have paid.					

Date:

Appendix III: Information/Consent Form

Section 1: Information about the Researcher

Investigator: Emily Awuor Pherry
Institutional Affiliation: Strathmore Business School

Section 2: Information About the Study

2.1: What is the Study Objective?

The objective of this study will be to establish the influence of Service Quality on CS in the general insurance companies in Kenya.

2.2: Do I have to take part?

No. Taking part in this study is entirely optional; and the decision rests with you. If you decide to take part, you will be asked to complete a questionnaire to get information on your opinion on the level of service quality and customer satisfaction within the General insurance business. If you are not able to answer all the questions successfully the first time, you will be requested to seek further clarification from the researcher or the independent sources, if necessary, after which you may be asked to answer the questions a second time.

You are free to decline to take part in the study at any time without giving any reasons.

2.3: Who is eligible to take part in this study?

All those with General insurance policies are invited to participate.

2.4: Who is not eligible to take part in this study.

Life insurance policyholders.

2.5: What will taking part in this study involve me?

You will be approached by the researcher and or a research assistant appointed by the researcher and requested to take part in the study. If you are satisfied that you fully understand the goals behind the study, you will be asked to sign the information/consent form (last part of this form) and then taken through a questionnaire to be completed.

2.6: Are there any risks or dangers in taking part in this study?

There are no risks in taking part in this study. All the information you provide will be treated as confidential and will not be used in any way except in this study,

without your express permission.

2.7: Are there any benefits associated with taking part in this study?

The information from this study will be beneficial to insurers and policymakers since the findings will guide possible strategies that can be adopted to improve service quality, CS and policy formulation in the insurance business.

2.8: What will happen to me if I refuse to take part in this study?

Participation in this study is entirely voluntary. Even if you decide to take part at first but later change your mind, you are free to withdraw at any time without explanation.

2.9: Who will have access to my information during this research?

All research records will be stored in a secure locked desk. The information may be transcribed into our database, it this will be sufficiently encrypted, and password protected. Only the people closely concerned with this research will have access to your information. Otherwise, all your information will be kept confidential.

2.10: Who can I contact in case I have further questions?

You can contact Emily Awuor Pherry at Insurance Regulatory Authority or email emily.pherry@strathmore.edu or 0720736025.
You can also contact my Supervisor Dr. Strathmore Business school, Nairobi or via email KNguti@strathmore.edu

If you want to ask someone independent anything about this research, please contact The Secretary- Strathmore University Institutional Ethics Review Board P.O BOX 59857-00200 Nairobi or email ethicsreview@strathmore.edu Tel number +254 703 034 375.

I…… have had the study explained to me. I have understood all that I have read and have had explained to me and had my questions answered satisfactorily. I understand that I can change my mind at any stage.

Please tick all the boxes that apply to you.

Participation in the Research Study

☐ I agreed to take part in this study.

☐ I don't agree to take part in this study.

☐ I agree to have my completed questionnaire stored for future data analysis.

☐ I don't agree to have my completed questionnaire stored for future data analysis.

Participant's signature Date …../…./…..
DD/MM/YEAR

Participant's name (Optional). Time: ……/……
Hr/Min

I certify that I have followed the SOP for this study and have explained the study information to the study participant named above and that s/he has understood the nature and the purpose of the study and consents to the participation in the study. S/he has been given an opportunity to ask questions which have been answered satisfactorily.

Investigator's signature: Date …../…./…..
DD/MM/YEAR

Investigator's name: Time: ……

Emily Awuor Pherry

Appendix IV: List of General Insurance Companies

1.	AAR Insurance Kenya
2.	African Merchant Assurance
3.	AIG Insurance company
4.	APA Insurance company
5.	Britam General Insurance
6.	Cannon General Insurance (K) Limited
7.	CIC General Insurance company
8.	Corporate Insurance company
9.	Directline Assurance company
10.	Fidelity Shield Insurance
11.	First Assurance company
12.	GA Insurance company
13.	Geminia Insurance company
14.	Healthier (K) Micro Insurance Ltd
15.	Heritage Insurance company
16.	ICEA Lion General Insurance
17.	Intra-Africa Assurance
18.	Invesco Assurance company
19.	Jubilee General Insurance
20.	Jubilee Health Insurance
21.	Kenindia Assurance company
22.	Kenya Orient Insurance
23.	Madison General Insurance company
24.	Mayfair Insurance company
25.	MUA Insurance company
26.	Occidental Insurance company
27.	Old Mutual General Insurance
28.	Pacis Insurance company
29.	Pioneer General Insurance company
30.	Resolution Insurance company
31.	Sanlam Insurance company
32.	Star Discovery Insurance
33.	Takaful Insurance of Africa
34.	Tausi Assurance company
35.	The Kenyan Alliance Insurance
36.	The Monarch Insurance
37.	Trident Insurance company
38.	Xplico Insurance Company

Source: IRA (2022)

Appendix V: Ethics Approval Letter

Strathmore UNIVERSITY

20th November 2023

Mrs Pherry Emily Awuor,
emily.pherry@strathmore.edu

Dear Mrs Pherry,

RE: Influence of Service Quality on Customer Satisfaction in the Non-Life Insurance Sector in Kenya

This is to inform you that SU-ISERC has reviewed and **approved** your above **SU-masters** research proposal. Your application reference number is **SU-ISERC1904/23.** The approval period is from **20th November 2023 to 19th November 2024.**

This approval is subject to compliance with the following requirements:

i. Only approved documents including (informed consents, study instruments, MTA) will be used.
ii. All changes including (amendments, deviations, and violations) are submitted for review and approval by SU-ISERC.
iii. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to SU-ISERC within 72 hours of notification.
iv. Any changes anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to SU-ISERC within 72 hours.
v. Clearance for the export of biological specimens must be obtained from relevant institutions.
vi. Submission of a request for renewal of approval at least 60 days prior to the expiry of the approval period. Attach a comprehensive progress report to support the renewal.
vii. Submission of an executive summary report within 90 days of completion of the study to SU-ISERC.

Before commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology, and Innovation (NACOSTI) https://research-portal.nacosti.go.ke/ and obtain other clearances needed.

Yours sincerely,

Mr Ambrose Rachier,
Chairperson; SU-ISERC

STRATHMORE UNIVERSITY INSTITUTIONAL SCIENTIFIC AND ETHICAL REVIEW COMMITTEE
(SU-ISERC)
20-Nov-2023
Email:ethicsreview@strathmore.edu
P.O BOX 59857-00200
NAIROBI-KENYA

Appendix VI: NACOSTI Research License

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **326114**

Date of Issue: **12/December/2023**

RESEARCH LICENSE

This is to Certify that Ms.. EMILY PHERRY of Strathmore University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Nairobi on the topic: INFLUENCE OF SERVICE QUALITY ON CUSTOMER SATISFACTION IN THE NON-LIFE INSURANCE SECTOR IN KENYA for the period ending : 12/December/2024.

License No: **NACOSTI/P/23/31773**

326114

Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions

THE SCIENCE, TECHNOLOGY AND INNOVATION ACT, 2013 (Rev. 2014)
Legal Notice No. 108: The Science, Technology and Innovation (Research Licensing) Regulations, 2014

The National Commission for Science, Technology and Innovation, hereafter referred to as the Commission, was the established under the Science, Technology and Innovation Act 2013 (Revised 2014) herein after referred to as the Act. The objective of the Commission shall be to regulate and assure quality in the science, technology and innovation sector and advise the Government in matters related thereto.

CONDITIONS OF THE RESEARCH LICENSE

1. The License is granted subject to provisions of the Constitution of Kenya, the Science, Technology and Innovation Act, and other relevant laws, policies and regulations. Accordingly, the licensee shall adhere to such procedures, standards, code of ethics and guidelines as may be prescribed by regulations made under the Act, or prescribed by provisions of International treaties of which Kenya is a signatory to
2. The research and its related activities as well as outcomes shall be beneficial to the country and shall not in any way;
    i. Endanger national security
    ii. Adversely affect the lives of Kenyans
    iii. Be in contravention of Kenya's international obligations including Biological Weapons Convention (BWC), Comprehensive Nuclear-Test-Ban Treaty Organization (CTBTO), Chemical, Biological, Radiological and Nuclear (CBRN).
    iv. Result in exploitation of intellectual property rights of communities in Kenya
    v. Adversely affect the environment
    vi. Adversely affect the rights of communities
    vii. Endanger public safety and national cohesion
    viii. Plagiarize someone else's work
3. The License is valid for the proposed research, location and specified period.
4. The license any rights thereunder are non-transferable
5. The Commission reserves the right to cancel the research at any time during the research period if in the opinion of the Commission the research is not implemented in conformity with the provisions of the Act or any other written law.
6. The Licensee shall inform the relevant County Director of Education, County Commissioner and County Governor before commencement of the research.
7. Excavation, filming, movement, and collection of specimens are subject to further necessary clearance from relevant Government Agencies.
8. The License does not give authority to transfer research materials.
9. The Commission may monitor and evaluate the licensed research project for the purpose of assessing and evaluating compliance with the conditions of the License.
10. The Licensee shall submit one hard copy, and upload a soft copy of their final report (thesis) onto a platform designated by the Commission within one year of completion of the research.
11. The Commission reserves the right to modify the conditions of the License including cancellation without prior notice.
12. Research, findings and information regarding research systems shall be stored or disseminated, utilized or applied in such a manner as may be prescribed by the Commission from time to time.
13. The Licensee shall disclose to the Commission, the relevant Institutional Scientific and Ethical Review Committee, and the relevant national agencies any inventions and discoveries that are of National strategic importance.
14. The Commission shall have powers to acquire from any person the right in, or to, any scientific innovation, invention or patent of strategic importance to the country.
15. Relevant Institutional Scientific and Ethical Review Committee shall monitor and evaluate the research periodically, and make a report of its findings to the Commission for necessary action.

National Commission for Science, Technology and
Innovation(NACOSTI),
Off Waiyaki Way, Upper Kabete,
P. O. Box 30623 - 00100 Nairobi, KENYA
Telephone: 020 4007000, 0713788787, 0735404245
E-mail: dg@nacosti.go.ke
Website: www.nacosti.go.ke