

Navigating Life Insurance: A Comprehensive Study on Experiences of Policyholders

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Abstract— Life insurance companies are essential for safeguarding against life risks and promoting savings and investment. They offer a variety of policies that provide financial protection to individuals and their families. The Insurance Regulatory and Development Authority of India (IRDAI) oversees the industry, ensuring consumer protection and fair practices. This regulatory body also enhances awareness about policy details, premium payments, claims, and grievance redressal. The objective is to assess the awareness of policyholders before purchasing insurance and to examine their experiences after the purchase. Data have been gathered using a structured questionnaire administered to 100 life insurance policyholders in Ballari district, selected through non-probability convenience sampling. Data analysis is done through SPSS, applying frequency distributions and chi-square tests to evaluate statistically significant differences between demographic factors and variables like policy awareness, claim settlement experiences, and grievance redressal experiences. The study shows that most of the respondents are young, male, married, educated and moderate income. They prefer public sector and aware about the types of policies and their contract terms. Respondents select companies mainly for good returns and company reputation. Family welfare and tax benefits are the main reasons for buying insurance. Most of the respondents intimated the maturity claim settlements followed by death and others. Among accepted claims, more than half are fully settled and non-accepted claims are filed to grievance, most of the complaints are handled by the company's grievance officer or the IRDA. Majority of complaints are solved. Statistical analysis shows no significant differences between demographic factors and the awareness and experiences of the respondents. The chi-square analysis reveals a significant difference between awareness and claim settlement experiences. However, understanding policy terms and exclusions helps to make the process smoother and increases satisfaction. Improving

awareness among policyholders can reduce issues and build trust in the life insurance industry.

Index Terms— Life Insurance Policyholders, Claim Settlement, Grievance Redressal, Pre-purchase Awareness, and Post-purchase Experiences.

I. INTRODUCTION

Insurance is an essential financial tool that protects individuals, families, and businesses from unexpected risks such as accidents, illness, or death. Transferring the financial responsibility to an insurance company helps to ensure people are financially secure during difficult times. Life insurance is precious among different types of insurance because it provides financial security to the family or dependents of the person covered in case of an untimely death. Besides offering risk coverage, life insurance is a savings and investment option, providing maturity benefits, tax savings, and long-term financial support.

In India, a significant challenge is the need for more understanding of life insurance. Many people, both literate and illiterate, need to realize its importance. Healthy individuals often say they do not need insurance, while wealthy people think their financial status offers enough protection. People with low incomes believe they cannot afford it, and the youth think they are too young to require life insurance. Even older people feel it is too late to benefit from it. These beliefs highlight the widespread lack of awareness about how life insurance can offer financial security for everyone, regardless of age, health, or Income.

The Insurance Regulatory and Development Authority of India (IRDAI) is critical in regulating the insurance

sector and ensuring transparency. It also protects consumer interests by raising awareness about life insurance, available products, and consumers' rights. IRDAI has launched several awareness campaigns to educate people and encourage the adoption of life insurance, aiming to reduce the knowledge gap.

Before buying a life insurance policy, consumers must know important factors like Coverage, premium costs, duration, and exclusions. Making an informed decision ensures the policy aligns with individual financial needs and goals. After purchasing a policy, it is equally essential for policyholders to stay in touch with the insurance provider to monitor the policy, update personal details, and keep premiums paid. Satisfied customers often recommend their insurer to others, building the company's reputation. However, dissatisfied customers may leave negative reviews, which can harm the company image in a digital world where feedback spreads quickly.

"Navigating Life Insurance: A Comprehensive Study on Experiences of Policyholders" focuses on two key areas. First, it examines how informed consumers are before purchasing life insurance. Second, it looks at their experiences after buying the policy, including their awareness and challenges. The study also explores reasons for selecting particular policies, experiences with claim settlements, challenges in policy renewal, problems in claims settlement, and how grievances are addressed. By analyzing these factors, the study aims to provide insights into India's current life insurance landscape and suggest ways to improve the policyholder experience.

A questionnaire for this study includes demographic information, awareness of life insurance, reasons for choosing specific companies, challenges with claim settlement, and issues with grievance redressal. The findings will offer valuable insights into consumer experiences and help insurance companies and regulatory bodies like IRDAI improve their services to better meet consumer needs.

II. REVIEW OF LITERATURE

BANNE, A. S., & BHOLA, S. S. (2014) examined life insurance awareness in the Kolhapur district of Maharashtra, focusing on where customers obtain their information and the factors influencing their understanding. The study found that most people

consider life insurance necessary but focus more on tax benefits and savings than risk protection. LIC agents are the primary source of information, especially for rural respondents, while urban respondents use a mix of agents, television, and newspapers. The study suggested simplifying policy terms, improving advertisement clarity, educating rural populations about the advantages of life insurance, enhancing agent training, and launching a TV channel to spread awareness. The study concluded that, although people recognize the importance of life insurance, there is a need for greater understanding and awareness of its full benefits.

MURUGESH, V. (2015) investigated the preferences and satisfaction of policyholders with LIC policies, aiming to evaluate the awareness of LIC products, identify factors influencing preferences, and analyze customer satisfaction levels. The study was conducted considering 200 life insurance policyholders in Coimbatore. Findings show that most policyholders are aware of LIC offerings and express general satisfaction, with risk coverage being the most important factor in policy selection, followed by savings and family protection. The study found no significant correlation between educational background and sources of awareness regarding LIC policies. While LIC remains an essential player in the market, ongoing improvements are necessary to enhance customer satisfaction and address competition.

RAJPUROHIT, R. C. S., & NAWAL, R. (2016) analyzed the grievance redressal approach in the Indian life insurance market, focusing on measuring the correlation between the volume of sales and the number of grievances filed. The study identified a significant positive correlation between the number of policies sold and grievances received, indicating that customer grievances also tend to rise as more policies are sold. The study concludes with the importance of efficient redressal systems for customer satisfaction. Hence, insurance companies should improve their processes and be more transparent in resolving customer issues to maintain customer satisfaction and loyalty.

RAO, R. K., ET AL. (2017) explored the troubles faced by the policyholder in claim settlement in LIC.

The primary objectives of the study were to identify the problems faced by policyholders in claim settlement with LIC and to examine the claim management practices of the insurance company. The study revealed several areas of concern for policyholders in claim settlement, including operational efficiency, on-time completion of claim settlement, and staff efficiency. The article concludes by emphasizing the importance of settling claims promptly to fulfill the purpose of insurance and regain the trust of policyholders. It underscores the insurer's responsibility to deliver timely and efficient service to policyholders, ensuring the fulfillment of their obligations.

HARISH, M., & MENAKA, B. (2018) examined the satisfaction of policyholders with the services provided by LIC in Mavelikara City. The study found that policyholders were generally satisfied with LIC's services, and there was a significant link between demographic variables and satisfaction levels. In conclusion, while LIC enjoys high customer satisfaction in Mavelikara, further service quality and product variety improvements could strengthen customer loyalty.

NAGALAKSHMI, N., & MATHIRAJ, S. P. (2019) examined grievance redressal practices in private and public life insurance companies, factors influencing policyholder choices, and the role of the IRDA in addressing complaints. The hypotheses are rejected, indicating significant differences in factors influencing policy-taking, variations between life insurance companies and their policies, the effectiveness of complaint redressal practices, and the functions of consumer dispute redressal agencies. The study concluded that effective handling of complaints and transparent processes are essential for building long-term relationships with policyholders. Hence, there is a need for continuous improvement in grievance-handling practices to enhance consumer confidence in the insurance industry.

KUMAR, V., & SINGH, N. (2019) explored the experiences of life insurance policyholders after their purchase, aiming to identify factors that influence post-purchase satisfaction and compare experiences between public and private sector customers. The findings indicate that most respondents trust their

insurance companies and are generally satisfied, with significant differences in experiences noted between public and private sector policyholders. The study recommends enhancing agent professionalism, improving customer service, and ensuring policy transparency. Ultimately, it highlights the importance of understanding post-purchase experiences to build customer trust and loyalty in the competitive life insurance market.

MANDARAWALA, M. S. (2021) analyzed the awareness of life insurance and the understanding of premium valuation among individuals in Gujarat. The findings indicate that while most respondents know about life insurance, many need to gain knowledge about human life value (HLV) and mortality charges. The study concluded that enhancing public awareness is vital, as many people perceive life insurance merely as an investment, neglecting its importance as essential financial protection for their families.

JOSHI, S. P. ET AL. (2023) examined the factors that influence the satisfaction of life insurance customers after purchasing policies in Nepal. It aimed to assess how agent behavior, customer service, and trust in the insurance company impact post-purchase satisfaction. The results revealed that agent behavior, customer service, and company trust all significantly influence satisfaction, with company trust and image being the most critical factors. The study recommends that insurance companies enhance customer service, agent professionalism, and transparency to boost satisfaction. Overall, the research highlights the importance of understanding customer experiences to improve loyalty and competitiveness in the insurance industry.

III. STATEMENT OF THE PROBLEM

Despite existing studies on life insurance awareness and customer satisfaction, there remains a lack of integrated research that combines pre-purchase awareness and post-purchase experiences, including claim settlement and grievance redressal, in a single framework. Many previous studies are focused on either awareness or satisfaction or are restricted to specific companies. Additionally, there is limited evidence on how policy awareness directly influences claim and grievance experiences. This study addresses

that gap by examining both pre- and post-purchase phases among policyholders in the Ballari district and analyzing how awareness impacts claim settlement and grievance outcomes using statistical methods.

grievance redressal experiences of the respondents.

IV. OBJECTIVES

1. To study the pre-purchase awareness level of policyholders of life insurance.
2. To examine the post-purchase experiences of life insurance policyholders.

HYPOTHESIS OF THE STUDY

1. Ho1: No significant statistical difference between demographic factors and awareness of life insurance policies among the respondents.
2. Ho2: No significant statistical difference between demographic factors and the claim settlement experiences of the respondents.
3. Ho3: No significant statistical difference between demographic factors and the grievance redressal experiences of the respondents.
4. Ho4: No significant statistical difference between awareness of life insurance policies and the claim settlement experiences of the respondents.
5. Ho5: No significant statistical difference between awareness of life insurance policies and the

V. RESEARCH METHODOLOGY

This study adopts a descriptive research design to examine the awareness and experiences of life insurance policyholders. The research involved both primary and secondary data collection. Primary data is gathered using a structured questionnaire administered on 100 life insurance policyholders in the Ballari district, selected through non-probability convenience sampling. Secondary data is sourced from websites, journals, and annual reports. Data analysis is conducted in SPSS, applying frequency distributions and chi-square tests to evaluate statistically significant differences between demographic factors and variables like policy awareness, claim settlement, and grievance redressal experiences.

VI. ANALYSIS OF DATA

The researcher has analyzed the demographic factors, awareness, and policy choices that shape policyholder experiences with life insurance. This study examines how these elements influence consumer decisions and experiences, particularly regarding claim settlements and the grievance redressal process.

TABLE-1: DEMOGRAPHIC PROFILE OF THE LIFE INSURANCE POLICYHOLDERS

Profile	Category	Respondents (Number & Percentage)
Age	20-40 Years	57
	40-60 Years	26
	60 Years and above	17
	Total	100
Gender	Male	69
	Female	31
	Total	100
Marital Status	Married	62
	Unmarried	38
	Total	100
Family Type	Nuclear	55
	Joint	45
	Total	100
Educational Qualification	Illiterate	10
	SSLC	19
	PUC	12

	Bachelor Degree	24
	PG Degree	34
	Others	1
	Total	100
Occupation	Self Employed	34
	Employed	45
	Un employed	21
	Total	100
Annual Income (₹)	Up to 5,00,000	62
	5,00,000 to 10,00,000	19
	10,00,000 to 15,00,000	13
	15,00,000 to 20,00,000	5
	Above to 20,00,000	1
	Total	100

SOURCE: Field Survey

Table 1 gives an overview of the background of respondents. In terms of age 57% are between 20 and 40 years, 69% are male, 62% are married, 55% live in nuclear families and 58% of respondents are well educated and hold a degree. In terms of occupation, 45% are employed. Finally, 62% earn up to ₹5 00,000

per year, making it the highest group in terms of income. The data indicates a relatively young, educated, and employed sample with moderate income. This sample set with good representation of different demographic parameters, may provide better input for the study.

TABLE-2: LIFE INSURANCE-RELATED DETAILS OF THE RESPONDENTS

Variables	Category	Respondents (Number & Percentage)
Preferred type of insurance company	Public	50
	Private	18
	Both	32
	Total	100
Policy purchased	Term Insurance Policy	20
	Whole Life Insurance Policy	22
	Endowment policy	21
	Unit Linked Insurance Policy	14
	Money Back Policy	13
	Retirement Insurance Policy	5
	Children's policy	5
	Total	100
Sum assured (₹)	Below 1,00,000	21
	1,00,000-5,00,000	30
	5,00,000-10,00,000	20
	10,00,000 -15,00,000	12
	15,00,000-20,00,000	8
	20,00,000-25,00,000	5
	25,00,000 and above	4
	Total	100
Annual Premium (₹)	Below 10,000	26
	10,000-20,000	32

	20,000-40,000	25
	40,000 -50,000	11
	50,000 and above	6
	Total	100
Duration of the policy	5-10 years	7
	10-15 years	22
	15-20 years	33
	20-25years	12
	25-30 years	2
	Above 30 years	1
	Lifetime	23
	Total	100

SOURCE: Field Survey

Table 2 provides respondents' preferences and characteristics of life insurance policies; the table shows that most people prefer public insurance companies (50%) and whole life insurance policies (22%). The highest sum assured is up to 10,00,000

(71%), and the majority pay an annual premium of up to 40,000 (83%). The most common policy term is 15-20 years (33%). Most people choose public companies, whole life policies, and medium-term coverage with a reasonable premium and sum assured.

TABLE-3: LEVEL OF AWARENESS ON DIFFERENT FACTORS

Sl. No.	Particular	Number & Percentage					Total
		5	4	3	2	1	
1	Type of policies offered	29	22	18	14	17	100
2	Insurance is a Contract	24	22	19	19	16	100
3	Free-look period	14	22	26	23	15	100
4	Coverage of the policy	14	28	17	23	18	100
5	Exclusions of the policy	14	26	20	23	17	100
6	The grace period allowed for renewal	19	21	25	23	12	100
7	The policy lapses/ Policy Termination	22	26	20	16	16	100
8	Claim service	20	18	22	27	13	100
9	Insurance regulation system in India	16	23	25	23	13	100
10	Grievance Redressal Mechanism	10	25	25	26	14	100

NOTE: 5: FULLY AWARE, 4: AWARE, 3: NEUTRAL, 2: NOT AWARE, 1: FULLY NOT AWARE

SOURCE: Field Survey.

The above table 3 displays policyholders' awareness of the different aspects of a life insurance policy before purchasing it. Most policyholders are fully aware of the types of insurance policies available (29%) and insurance is a contract (24%). Many are aware of the policy's Coverage (28%), exclusions and policy lapses or termination (26%). Some have a moderate awareness of the free-look period (26%), the grace period for renewal and the insurance regulatory system in India (25%). However, awareness of claim services

(27%) and the grievance redressal mechanism (26%) are not aware. At the same time, policyholders aware of the policy offered and their contract terms and conditions. In contrast, they are unaware of consumer protection areas such as claim services and the grievance redressal system. This indicates a need for better awareness programs by insurers and regulators to help policyholders understand their rights and the support available to them in case of issues or disputes.

TABLE-4: FACTORS CONSIDERED WHILE TAKING AN INSURANCE POLICY

S. No.	Factors	Number &Percentage					Total
		5	4	3	2	1	
1	Type of policy	26	25	14	18	17	100
2	Premium	24	31	16	20	9	100
3	Rider benefits	23	22	16	28	11	100
4	Term of the policy	21	27	20	21	11	100
5	Sum Assured	24	28	18	16	14	100
6	Claim Settlement Ratio	20	20	23	23	14	100

NOTE: 5: VERY IMPORTANT, 4: IMPORTANT, 3: NEUTRAL, 2: SOMEWHAT IMPORTANT, 1: NOT IMPORTANT

SOURCE: Field Survey

Table 4 presents that respondents consider several factors with different levels of importance when selecting an insurance policy. The type of policy offered is seen as very important by 26% of respondents. Key financial aspects such as the Premium, sum assured, and policy term are considered important by 31%, 28%, and 27%, respectively. Rider

benefits are viewed as less important by 28%, indicating they are not a top priority. The claim settlement ratio shows mixed responses, with 23% rating it as neutral, suggesting limited awareness or understanding of its importance. Overall, the financial factors are highly considered, and there is a need to improve policyholder awareness about additional features and the insurer's claim performance.

TABLE-5: REASONS FOR SELECTING THE PARTICULAR INSURANCE COMPANY

Sl. No.	Reasons	Number &Percentage					Total
		5	4	3	2	1	
1	Company image	26	16	17	23	18	100
2	Net Worth (Capital base) of the company	23	19	21	20	17	100
3	Branch network	21	21	22	17	19	100
4	Return at the maturity /claim	24	32	11	21	12	100
5	Quick claim settlement practice	25	25	14	19	17	100

NOTE: 5: VERY IMPORTANT, 4: IMPORTANT, 3: NEUTRAL, 2: SOMEWHAT IMPORTANT, 1: NOT IMPORTANT

SOURCE: Field Survey

The above Table 5 presents the reasons given by respondents for selecting a particular insurance company. The most important reason is return at maturity or claim, with 32 percent, followed by company image with 26 percent, claim settlement practice with 25 percent, company net worth with 23

percent, and finally branch network with 22 percent, showing some importance. Respondents give more importance to financial return and company reputation while choosing an insurance company. Claim settlement, capital strength, and branch network receive less importance, as digital services reduce the need for physical access.

TABLE-6: OBJECTIVES FOR CONSIDERING THE POLICY

Sl. No	Objectives	Number &Percentage					Total
		5	4	3	2	1	
1	Family welfare	26	26	12	16	20	100
2	Security	32	20	18	15	15	100

3	Long-term plans and dreams	23	28	17	17	15	100
4	Tax benefits	26	19	22	18	15	100
5	Risk coverage	25	23	18	19	15	100
6	Income replacement	22	25	20	17	16	100

NOTE: 5: VERY IMPORTANT, 4: IMPORTANT, 3: NEUTRAL, 2: SOMEWHAT IMPORTANT, 1: NOT IMPORTANT

SOURCE: Field Survey

Table 6 presents the main objectives of policyholders when selecting an insurance plan. Security is viewed as the most important objective, with 32 percent rating it as very important. This is followed by family welfare and tax benefits at 26 percent, and risk coverage at 25 percent, indicating that respondents focus on

protection and support for their families. Long-term plans and dreams 28 percent and income replacement 25 percent are also considered important. Overall, respondents primarily choose insurance plans for security and risk protection while also keeping future financial goals and tax savings in mind.

TABLE-7: CHALLENGES FACED IN RENEWING POLICIES

Sl. No.	Challenges	Number & Percentage					Total
		5	4	3	2	1	
1	No intimation from the company	13	13	33	22	19	100
2	Technological barriers	10	18	35	23	14	100
3	Lapse in Coverage (forgetting to renew the policy on time)	12	16	36	21	15	100

NOTE: 5: Strongly Agree, 4: Agree, 3: Neither Agree nor Disagree, 2: Disagree, 1: Strongly Disagree

SOURCE: Field Survey

The table 7 presents the challenges the policyholders face while renewing their insurance policies. Many respondents 33% neither agree nor disagree on non-receipts of intimation from the company, while 22% disagree on this challenge. Technological barriers are the concern to some, but 35% remain neutral and 23%

disagree. Forgetting to renew the policy on time is also a common issue, with 36% of the respondents being neutral. Overall, challenges exist, and most policyholders face them occasionally or moderately. Better communication, user-friendly digital platforms, and timely reminders are needed to reduce renewal-related issues.

TABLE-8: CLAIM SETTLEMENT EXPERIENCES

Variables	Category	Number	Percentage
Type of claim filed	Maturity Claim	52	52
	Death Claim	33	33
	Others	15	15
	Total	100	100
Acceptance of Claim	Accepted	82	82
	Not- Accepted	18	18
	Total	100	100
Settlement of claim	Fully- settled	47	57.33
	Partly- settled	35	46.68
	Total	82	100

SOURCE: Field Survey

The above table 8 provides an overview of life insurance claim settlements experiences. Out of 100 claims filed, most of the respondents intimated the maturity claims 52%, followed by death claims 33%

and other types 15%. This shows that many people received their money back at the end of the policy term, while others filed claims due to death or other reasons. Among all filed claims, 82% were accepted

by the insurance company, showing a good approval rate. However, 18 claims were not accepted, possibly because of missing documents or failure to meet policy conditions, pending verifications or outstanding for the following year. Of the accepted claims, 47 (57.33%) were fully paid, while 35 (46.68%) were only partly paid, indicating that some policyholders received only a part of the expected amount, likely due

to incomplete documents, non-disclosure of information. The claim settlement rate in this study is 82% which is lesser than national average claim settlement of 96% as reported by IRDAI in 2023–24. The reasons behind such gap are limited sample size, concentrated study with specific region and specific issues in claim settlement of individual policies.

TABLE-9: ISSUES IN THE SETTLEMENT OF CLAIMS

S. No.	Problems	Number & Percentage					Total
		5	4	3	2	1	
1	Difficulty in understanding the claim process	15	22	22	23	18	100
2	Delays in processing	16	30	23	22	9	100
3	Lack of communication	12	33	19	23	13	100
4	Low-settlement offers	10	33	22	19	16	100
5	Unclear policy terms	11	31	22	22	14	100
6	Documentation requirements	15	29	22	22	12	100
7	Non-responsive insurance company	10	37	16	18	19	100
8	Denial without explanation	7	41	24	14	14	100
9	Non-Disclosure of information	6	37	20	18	19	100

NOTE: 5: Strongly Agree, 4: Agree, 3: Neither Agree nor Disagree, 2: Disagree, 1: Strongly Disagree

SOURCE: Field Survey

Table 9 outlines several issues related to the settlement of life insurance claims. Respondents widely agree on several claim settlement issues, with many finding the process difficult to understand and experiencing delays. Poor communication and low settlement offers are common frustrations, alongside challenges with unclear policy terms and extensive documentation

requirements. Lastly, unexplained claim denials, non-responsiveness from insurers, and non-disclosure of information are troubles for the respondent. The situation highlights a need for greater transparency. These issues emphasise the need for clearer communication, faster processing, and fairer settlement practices.

TABLE-10: GRIEVANCE REDRESSAL EXPERIENCES

Variables	Category	Number	Percentage
A complaint is filed with	Grievance Redressal Officer, Insurance Company	20	37.73
	IRDA (Bima Bharosa/ Integrated Grievance Management System (IGMS))	15	28.30
	Insurance Ombudsman	10	18.87
	Consumer Forum	8	15.10
	Total	53	100
Grievance addressed	Solved	43	81.13
	Unsolved	10	18.87
	Total	53	100
Claim settlement of grievance	Fully- settled	14	32.56
	Partly- settled	29	67.44
	Total	43	100

SOURCE: Field Survey

The table 10 shows how respondents deal with grievances after their insurance claim is denied/non-acceptance (18) /partially paid (35). Out of 53 policyholders, most of the respondents approached the insurance company’s grievance officer (38%), followed by IRDA’s online system (28%), the Insurance Ombudsman (19%), and the Consumer Forum (15%). After raising the grievance, 43

complaints were solved (81%), while 10 remained unsolved (19%). Among the 43 solved cases, only 14 policyholders (33%) got the full settlement and 29 (67%) received part of the claim. This shows that although grievances are addressed, full justice in terms of claim value is often not achieved, pointing to a need for stronger and more transparent resolution mechanisms.

TABLE-11: GRIEVANCE REDRESSAL ISSUES

Sl. No.	Issues	Respondents (Frequency &Percentage)					Total
		5	4	3	2	1	
1	The redressal process is time-consuming	5	30	9	7	3	54
2	Delayed response	4	31	9	7	3	54
3	Lack of response	3	32	9	9	1	54
4	Repeated requests for the same information	2	32	11	8	1	54
5	Unhappy with the outcome or solution to the complaint	1	32	10	7	4	54

NOTE: 5: Strongly Agree, 4: Agree, 3: Neither Agree nor Disagree, 2: Disagree, 1: Strongly Disagree

SOURCE: Field Survey

Table 11 shows the common problems faced by respondents while using the grievance redressal process. Many respondents agree that the main issues are no proper response from the insurance company, being asked to give the same information again and again and not being happy with the final solution to their complaint 32 percent. Also, 31 percent say there is a delay in getting replies, and 30 percent feel the process takes too much time. These show that the grievance redressal system needs better speed, communication, and handling of complaints.

TABLE-12: RELIABILITY TEST

Reliability Statistics	
Cronbach's Alpha	N of Items
.972	31

Table 12 shows reliability statistics. The Cronbach's alpha of 0.972 for the 31 survey items indicates high internal consistency. Cronbach's alpha measures how well a set of items in a questionnaire are related. A score of 0.7 or higher is generally acceptable for reliability. This means respondents likely understood and answered the questions similarly, making the survey a dependable tool for measuring the intended concepts and ensuring confidence in the results.

THE FOLLOWING VARIABLES ARE CONSIDERED FOR THE RELIABILITY TEST HAVE BEEN PRESENTED

TABLE-13: RELIABILITY TEST (N OF ITEMS)

Sl.No.	Variables	code
	Awareness information before taking a Life insurance policy	A
1	Various insurance policies offered by Insurance companies	A1
2	The terms and conditions of the policy	A2
3	Insurance is a Contract	A3
4	Free-look period	A4
5	Coverage of the policy	A5
6	Exclusions of the policy	A6
7	The grace period allowed for renewal	A7

8	The policy lapses/ Policy Termination	A8
9	Claim service	A9
10	Insurance regulation system in India	A10
11	Grievance Redressal Mechanism	A11
Factors considered while taking an insurance policy		B
12	Policy offered	B1
13	Premium	B2
14	Rider Benefits	B3
15	Term of the policy	B4
16	Sum Assured	B5
17	Claim Settlement Ratio	B6
Problems/ Issues in the settlement of claims		C
18	Difficulty in understanding the claim process	C1
19	Delays in processing	C2
20	Lack of communication	C3
21	Low-settlement offers	C4
22	Unclear policy terms	C5
23	Documentation requirements	C6
24	Non-responsive insurance company	C7
25	Denial without explanation	C8
26	Non-Disclosure of information	C9
Grievance Redressal issues		D
27	The redressal process is time-consuming	D1
28	Delayed response	D2
29	Lack of response	D3
30	Repeated requests for the same information	D4
31	Unhappy with the outcome or solution to the complaint	D5

TABLE-14: THE RESULT OF CHI-SQUARE WITH RESPECT TO DEMOGRAPHIC FACTORS AND AWARENESS OF LIFE INSURANCE POLICIES

Sl.No.	Demographic Factors	Chi-Square Value	P-Value	Results of Null Hypothesis (Sign. Level at 0.05)
1	Age	97.252	.869	Accepted
2	Gender	47.756	.133	Accepted
3	Marital Status	33.821	.663	Accepted
4	Family Type	44.478	.218	Accepted
5	Educational Qualification	276.556	.000	Rejected
6	Occupation	83.635	.257	Accepted
7	Annual Income Level	156.160	.965	Accepted

SOURCE: Field Survey

The Chi-Square test results in Table 14 show that all the demographic factors except the educational qualification do not have a significant statistical difference on awareness of life insurance policies since their p-values are higher than the 0.05 significance level, leading to the acceptance of the null

hypothesis for these factors. However, education shows a significant difference, with a p-value below 0.05, resulting in rejecting the null hypothesis. This indicates that occupation-specific ways are to be identified to improve clarity on the different aspects of insurance.

TABLE-15: THE RESULT OF CHI-SQUARE WITH RESPECT TO DEMOGRAPHIC FACTORS AND CLAIM SETTLEMENT EXPERIENCES

Sl.No.	Demographic Factors	Chi-Square Value	P-Value	Results of Null Hypothesis (Sign. Level at 0.05)
1	Age	80.262	.759	Accepted
2	Gender	30.145	.458	Accepted
3	Marital Status	41.360	.081	Accepted
4	Family Type	29.242	.505	Accepted
5	Educational Qualification	161.686	.243	Accepted
5	Occupation	67.150	.245	Accepted
6	Annual Income Level	105.848	.998	Accepted

SOURCE: Field Survey

Table 15 shows the relationship between various demographic factors and claim settlement experiences of respondents. Based on the Chi-Square test results, the p-values for all the factors are higher than 0.05. This means that there is no significant statistical difference between these demographic factors and the claim settlement experiences of the respondents. The data suggests that none of these factors significantly influence how policyholder experience problems

during the claim settlement process. Therefore, the null hypothesis is accepted for all demographic factors. While the statistical analysis does not show a significant difference based on demographics, there may still be a relationship between demographic factors and claim settlement experiences. In statistical terms, just because a factor does not have a strong enough influence to reject the null hypothesis, it doesn't mean there is no relationship at all.

TABLE-16: THE RESULT OF CHI-SQUARE RESULT WITH RESPECT TO DEMOGRAPHIC FACTORS AND GRIEVANCE REDRESSAL EXPERIENCES

Sl.No.	Demographic Factors	Chi-Square Value	P-Value	Results of Null Hypothesis (Sign. Level at 0.05)
1	Age	32.086	.364	Accepted
2	Gender	7.932	.636	Accepted
3	Marital Status	8.310	.599	Accepted
4	Family Type	5.279	.872	Accepted
5	Educational Qualification	45.147	.266	Accepted
5	Occupation	17.876	.596	Accepted
6	Annual Income Level	35.851	.934	Accepted

SOURCE: Field Survey

Table 16 presents the relationship between various demographic factors and the grievance redressal experiences of the respondents. The results show that all p-values are greater than 0.05, indicating no significant statistical difference between demographic factors and the grievance redressal experiences of the

respondents. The null hypothesis is accepted in all cases. This means respondents from different backgrounds have similar experiences. Demographic factors do not play a major role in shaping grievance outcomes. The grievance process appears consistent across all groups.

TABLE-17: LIST OF VARIABLES ON THE AWARENESS OF LIFE INSURANCE POLICIES AND CLAIM SETTLEMENT EXPERIENCE

Independent Variable		Dependent Variable	
Code	Awareness information before taking a Life insurance policy	Code	Issues in the settlement of claims
A1	Various insurance policies offered by Insurance companies	C1	Difficulty in understanding the claim process
A2	The terms and conditions of the policy	C2	Delays in processing
A3	Insurance is a Contract	C3	Lack of communication
A4	Free-look period	C4	Low-settlement offers
A5	Coverage of the policy	C5	Unclear policy terms
A6	Exclusions of the policy	C6	Documentation requirements
A7	The grace period allowed for renewal	C7	Non-responsive insurance company
A8	The policy lapses/ Policy Termination	C8	Denial without explanation
A9	Claim service	C9	Non-Disclosure of information
A10	Insurance regulation system in India		
A11	Grievance Redressal Mechanism		

TABLE-18: THE RESULT OF P-VALUE OF THE CHI-SQUARE WITH RESPECT TO THE AWARENESS ON LIFE INSURANCE POLICIES AND THE CLAIM SETTLEMENT EXPERIENCE

Awareness	Problems/ Issues in the settlement of claims								
	C1 Difficulty in understanding the claim process	C2 Delays in processing	C3 Lack of communication	C4 Low-settlement offers	C5 Unclear policy terms	C6 Documentation requirements	C7 Non-responsive insurance company	C8 Denial without explanation	C9 Non-Disclosure of information
A1 Various insurance policies offered by Insurance companies	0*	0.003*	0.006*	0.02*	0.02*	0.047*	0.02*	0.066	0*
A2 The terms and conditions of the policy	0*	0.001*	0.027*	0.16	0.008*	0.004*	0.005*	0.147	0.04*
A3 Insurance is a Contract	0*	0.004*	0.029*	0.01*	0.006*	0.066	0.033*	0.066	0.003*
A4 Free-look period	0.053	0.02*	0.101	0.147	0.05*	0.139	0.107	0.136	0.141

A5 Coverage of the policy	0.043*	0.013*	0.018*	0.152	0.038*	0.028*	0.013*	0.32	0.007*
A6 Exclusions of the policy	0.215	0.083	0.182	0.131	0.055	0.282	0.471	0.359	0.181
A7 The grace period allowed for renewal	0.001*	0.013*	0.001*	0.111	0.007*	0.074	0.203	0.071	0.064
A8 The policy lapses/ Policy Termination	0.079	0.02*	0.015*	0.003*	0.013*	0.01*	0.035*	0.27	0.035*
A9 Claim service	0*	0.006*	0.001*	0.059	0.002*	0.056	0.224	0.298	0.038*
A10 Insurance regulation system in India	0.006*	0.004*	0.0067	0.052	0.004*	0.026*	0.028*	0.246	0.12
A11 Grievance Redressal Mechanism	0.004*	0.002*	0.006*	0.043*	0.001*	0.043*	0.006*	0.08*	0.003*

Table 18 presents the chi-square result of the awareness of life insurance policies and the claim settlement experiences of the respondents. A star symbol (*) indicates $P < 0.05$, means the null hypothesis is rejected, showing a significant difference between knowledge of specific policy information and experiences during claims. If the P-value is > 0.05 , accepting the null hypothesis shows no significant difference between awareness and claim related issues. The analysis shows that awareness of the

grievance redressal mechanism has a positive and significant relationship with better claim experiences. In contrast, awareness of the exclusions in the policy shows no significant relationship with claim experiences. Overall, the analysis suggests that when respondents have better knowledge about insurance terms, claim processes, and support systems, they face fewer problems. So, improving awareness can help policyholders have a smoother and better claim settlement experience.

TABLE-19: LIST OF VARIABLES ON THE AWARENESS OF LIFE INSURANCE POLICIES AND THE GRIEVANCE REDRESSAL EXPERIENCE

Independent Variable		Dependent Variable	
Code	Awareness information before taking a life insurance policy	Code	Grievance redressal issues

A1	Various insurance policies offered by Insurance companies	D1	The redressal process is time-consuming
A2	The terms and conditions of the policy	D2	Delayed response
A3	Insurance is a Contract	D3	Lack of response
A4	Free-look period	D4	Repeated requests for the same information
A5	Coverage of the policy	D5	Unhappy with the outcome or solution to the complaint
A6	Exclusions of the policy		
A7	The grace period allowed for renewal		
A8	The policy lapses/ Policy Termination		
A9	Claim service		
A10	Insurance regulation system in India		
A11	Grievance Redressal Mechanism		

TABLE-20: THE RESULT OF P-VALUE OF THE CHI-SQUARE WITH RESPECT TO THE AWARENESS OF LIFE INSURANCE POLICIES AND THE GRIEVANCE REDRESSAL EXPERIENCE

Awareness	Grievance Redressal Issues				
	D1 The redressal process is time-consuming	D2 Delayed response	D3 Lack of response	D4 Repeated requests for the same information	D5 Unhappy with the outcome or solution to the complaint
A1 Various insurance policies offered by Insurance companies	0.26	0.046*	0.127	0.087	0.167
A2 The terms and conditions of the policy	0.147	0.028*	0.128	0.043*	0.029*
A3 Insurance is a Contract	0*	0.025*	0.05*	0.038*	0.121
A4 Free-look period	0.151	0.24	0.541	0.442	0.035*
A5 Coverage of the policy	0.13	0.076	0.127	0.168	0.444
A6 Exclusions of the policy	0.03*	0.028*	0.059	0.012*	0.22
A7 The grace period allowed for renewal	0.062	0.097	0.193	0.525	0.062
A8 The policy lapses/ Policy Termination	0.197	0.116	0.128	0.187	0.5*
A9 Claim service	0.309	0.298	0.488	0.298	0.258
A10 Insurance regulation system in India	0.479	0.294	0.561	0.318	0.401
A11 Grievance Redressal Mechanism	0.177	0.161	0.167	0.148	0.184

Table 20 shows the chi-square result of the awareness of respondents before buying life insurance policies and their grievance redressal experiences. A star symbol (*) indicates $P < 0.05$, means the null hypothesis is rejected, showing a significant difference between knowledge of the policy information and experiences during grievance redressal. If the P-value is > 0.05 , accepting the null hypothesis shows no significant difference between awareness and grievance redressal issues.

Statistical analysis shows positive significant relationship are awareness of policies offered (p-values for delayed response is 0.046), policy terms and conditions (p-values for delayed response is 0.028, repeated requests are 0.043, and dissatisfaction with outcomes is 0.029), understanding of insurance as a contract (p-values for delayed response is 0.025, lack of response is 0.05, and repeated requests is 0.038), free-look period (p-values for dissatisfaction with outcomes is 0.035), and policy exclusions (p-values for redressal process being time-consuming is 0.03, delayed response is 0.028, and repeated requests is 0.012).

In contrast, variables such as the grace period for renewal, policy lapses, claim services, insurance regulation system, and the grievance redressal mechanism do not significantly influence grievance outcomes, with p-values above 0.05 across most grievance-related issues. This indicates that while certain types of policy awareness, such as exclusions and understanding policy terms, help mitigate grievance redressal issues, some areas, like the grace period or regulatory understanding, may not directly impact the resolution experience.

VII. CONCLUSION

The Insurance Regulatory and Development Authority of India (IRDAI) and life insurance companies have implemented various awareness initiatives to educate policyholders about their rights and the claims process. However, many policyholders still need comprehensive awareness regarding these critical aspects. To address these gaps, life insurance companies have established internal grievance redressal systems that allow policyholders to file complaints directly, improving communication in claim processing. Introducing the insurance ombudsman provides an effective route for resolving

disputes, ensuring fairness in claim settlements. Additionally, the consumer forum addresses grievances and protects policyholders' rights, offering another support layer. IRDAI mandates strict consumer protection norms, emphasizing transparency in policy terms and timely settlements. Many insurers have also embraced digital solutions, offering online claim tracking and faster verification methods to facilitate prompt payouts. To further enhance consumer understanding, insurers, and IRDAI conduct awareness campaigns that inform policyholders about grievance procedures and the benefits of their policies. These measures aim to empower policyholders and ensure a smoother experience throughout the life insurance journey.

The study reveals that the majorities of respondents prefer public insurance companies and have purchased endowment, term, or whole life policies. The sum assured ranges between ₹1,00,000-₹5,00,000, with annual premiums mostly between ₹10,000-₹20,000, and policy durations of 15-20 years or lifetime.

Most of the respondents are aware about the types of policies and their contract terms, but they are less aware of consumer protection areas like claim services and grievance redressal. When selecting life insurance, the most important factors include Premium, sum assured, and the type of policy offered, while rider benefits and claim settlement ratios receive less emphasis. Respondents select companies mainly for good returns at maturity, quick claim settlement, and company reputation. Security, family welfare, and tax benefits are the main reasons for buying insurance.

They face moderate problems when renewing policies. Many respondents experience issues during claim settlement, such as unexplained claim denials, lack of response from insurers, unclear policy terms, and missing information. Majority of the claims are filed for maturity settlements followed by death and others settlements. Most of the claims are accepted by the life

insurance company. Among accepted claims, more than half are fully settled rest are partially settled showing some problems in the settlement process. After claim denial, respondents' complaints are handled by the company's grievance officer or the IRDA. Fewer complaints go to the Ombudsman or Consumer Forum. Majority complaints are solved.

Respondents agree that the grievance redressal process takes a long time, with frequent delays, repeated requests for information, and dissatisfaction with the results. Despite these issues, data indicates a generally positive experience regarding claim acceptance and settlement.

Statistical analysis shows no significant differences between demographic factors and respondents' awareness, claim settlement experiences, or grievance redressal experiences. Although these factors do not demonstrate strong enough influence to reject the null hypothesis, there may still be significant differences between demographics and these experiences.

The chi-square analysis reveals a significant difference between awareness of life insurance policies and the experiences of respondents in claim settlements whereas no significant difference is found between awareness of life insurance policies and the experiences of respondents in grievance redressal. Knowledge of specific policy details, such as terms and condition, is critical in enhancing claim experiences. At the same time, higher awareness is linked to fewer issues like delays and poor communication. Conversely, certain factors, like the grace period for renewals and regulatory understanding, do not significantly impact grievance outcomes. Increasing awareness is critical to improving experiences during the claims process and grievance redressal.

REFERENCES

- [1] Banne, A. S., & Bhola, S. S. (2014). Awareness of Life Insurance among Sample Customers. *Indian Streams Research Journal*, 4(7), 1-12.
- [2] Harish, M., & Menaka, B. (2018). Customer Satisfaction Towards the Services of Life Insurance Corporation of India - A Study with Reference to Mavelikara City – Alappuzha District. *International Journal of Economics, Commerce and Research*, 14(2), 192-197.
- [3] Joshi, S. P. et al. (2023). Post-Purchase Satisfaction on Life Insurance Policies: Evidence from Nepal. *Journal of System and Management Sciences*, 13(5), 17-30.
- [4] Kumar, V., & Singh, N. (2019). Post-Purchase Experience of Consumers in Life Insurance Policies: An Empirical Study. *Skyline Business Journal*, 14(2), 81-91.
- [5] Mandarawala, M. S. (2021). Study on Awareness of Life Insurance and Valuation of Insurance Premium in India. *International Journal of Research Publication and Reviews*, 2(7), 587-593.
- [6] Murugesh, V. (2015). The Policyholders' Preference and Satisfaction towards Life Insurance Corporation of India's Policies. *International Journal of Business and Management Invention*, 4(8), 9-14.
- [7] Naga Lakshmi, N., & Mathiraj, S. P. (2019). Complaint redressal practices in public and private insurance companies. *International Journal of Innovative Technology and Exploring Engineering (IJITEE)*, 8(12), 369-374.
- [8] Rajpurohit, R. C. S., & Nawal, R. (2016). Grievance redressal mechanism in Indian life insurance industry: An exploratory study on quantifying relationships. *Pacific Business Review International*, January, 8(7), 101-112.
- [9] Rao, R. K., et al. (2017). Troubles Faced by the Policyholder in Claim Settlement in LIC. *Asian Journal of Science and Technology*, September, 8(9), 5638-5640.

WEBSITES

1. <https://www.irdai.gov.in>
2. <https://policyholder.gov.in/>