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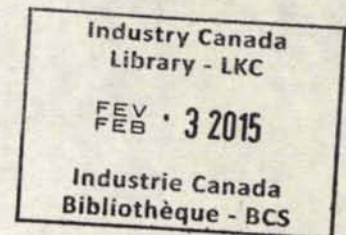
**CONSUMER SATISFACTION AND COMPLAINING
BEHAVIOUR IN CANADA: THE CASE OF FINANCIAL
SERVICES AND INSURANCE**

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CONSUMER SATISFACTION AND COMPLAINING BEHAVIOR
IN CANADA: THE CASE OF FINANCIAL SERVICES
AND INSURANCE

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INTRODUCTION

The design and implementation of "effective" consumer protection programs depends on the availability of the kinds of information which provide a basis for diagnosing dissatisfaction with products and services and assigning priorities for corrective action. In recent years, political support for the consumer movement has grown rapidly and policy makers have assigned a relatively high priority to the development of programs designed to protect the consumer interest. To exercise their mandate, policy makers urgently require reliable data on the frequency of consumer dissatisfaction across a comprehensive set of products and services, on sources of dissatisfaction, and on consumers' responses to dissatisfactory consumption experiences. Despite the obvious need for extensive coverage, only a handful of studies from the literature on consumer satisfaction, dissatisfaction and complaining behavior have reported results for an exhaustive set of products and services. The Bloomington study¹ is representative of this stream of research and some findings from that project have already been reported: analysis of satisfaction scale results for services (Day and Bodur, 1977); complaining behavior for services (Day and Bodur, 1978); analysis of satisfaction scale results for durables (Ash, 1978); and complaining behavior for durables (Day and Ash, 1979). This paper reports a portion of the results of a national survey of consumer satisfaction, dissatisfaction (CS/D) and complaining behavior (CB) conducted for the Consumer Research and Evaluation Branch, Consumer and Corporate Affairs Canada. The research instruments employed in this study were similar in scope to those designed and utilized by Professor Ralph Day in the Bloomington study mentioned above. In the current study, approximately 225 categories were employed and were meant to be inclusive of the full spectrum of products and services. This paper presents some analysis of the satisfaction/dissatisfaction and complaining behavior data from "Financial Services and Insurance" section of the Services and Intangible Products questionnaire.

¹ Survey research project conducted by Professor Ralph L. Day which produced data from a probability sample of Bloomington, Indiana residents during the fall of 1976.

Public policy makers are becoming increasingly aware of the limitations of conventional complaint data as a measure of consumer dissatisfaction within a population and as a means of prioritizing problem categories of products and services in order to guide policy interventions. The issue appears to have surfaced as the result of several articles which have challenged the adequacy of volunteered complaint information as a basis for assessing consumer dissatisfaction (Day and Landon, 1975, 1976, and 1977; Day and Bodur, 1977; Warland et al., 1975). The suggestion is that complaint letters may be misleading since they tend not to be representative either of the types of problems confronting consumers or of all types of people experiencing consumer problems. For example, complaint letters suffer from "big ticket" bias since they tend to focus on unsatisfactory consumption experiences with products that are unusually important to the consumer. Volunteered complaints thus tend to underrepresent dissatisfactions with lower cost items or those which play a relatively modest role in the consumer's daily life (Day and Bodur, 1977). There is some evidence, as well, that writers of complaint letters or those who take some action to resolve their dissatisfaction are atypical of the entire population since they tend to be younger, better educated, more affluent, and more active politically than non-complainers (Stokes, 1974; Warland et al., 1975).

OBJECTIVES

Consistent with the need for better information about consumer satisfaction, dissatisfaction and complaining behavior, the primary objective of the current research is to increase understanding of the types of problems confronting consumers and of the kinds of people experiencing consumer problems. In this study, the emphasis is on the post-purchase **evaluation** of financial services and insurance, on the identification of recurring reasons for dissatisfaction with these services and on alternative courses of action available to the dissatisfied consumer. This paper has several specific objectives:

- (1) To report levels of satisfaction and dissatisfaction with financial services and insurance which have been acquired or used during the recall period;



firm hired to gather the data. Representatives of both Consumer and Corporate Affairs Canada and the University of Western Ontario, participated in these sessions. Although the questionnaires employed in this research were quite similar to those utilized in the Bloomington study, a number of modifications have been incorporated into the latest versions. Among the more significant changes are the following additions:

- (1) a measure of economic loss arising from an unsatisfactory experience;
- (2) a probe related to physical injury occurring as a result of product use;
- (3) a measure of satisfaction with the way a complaint is handled (i.e. final satisfaction).

A five-stage stratified probability sampling plan was employed to gather the data. Although the exact true response rate cannot be completed with the modified probability sample drawn for this study, results have shown that the data compare very favorably with Statistics Canada census information. Usable questionnaires were furnished by 3,123 adult Canadians, both males and females, eighteen years of age and over, divided as follows:

Non-durables	1,041
Durables	1,030
Services	1,052

The results reported here were obtained from data covering sixteen categories of financial services and insurance.

The initial task required respondents to indicate whether or not they had acquired or used any items from the category during the two year recall period. Those who had indicated that they had used the service were asked to provide a rating of the relative importance of the category and of the relative extent of satisfaction or dissatisfaction with items contained in the category. Examples of the types of responses available to respondents for each item have been provided elsewhere (Day and Bodur, 1977; Ash, 1978). Subjects then indicated whether or not they had been "highly dissatisfied" with any one of the 16 service categories during the past two years and, if so, stated the frequency

of dissatisfaction and named the one service which was "the most unsatisfactory of all". The remaining questions in the section provided additional data on this single most unsatisfactory service. First, subjects were asked to complete a set of questions identifying their reasons for dissatisfaction. Next, respondents were asked whether or not financial loss or physical injury resulted from their unsatisfactory experience. Then, those reporting dissatisfaction were asked to indicate what steps were taken, if any, to resolve their dissatisfaction. In line with the conceptual framework developed by Day and Landon (1977), the action options were divided into two groups, personal actions and direct or public actions. Respondents who reported taking direct action(s) were asked to indicate how satisfied they were with the way their complaint was handled. Subjects who reported taking no action when dissatisfied were questioned as to their reason for not doing so.

RESULTS

To demonstrate the kind of information elicited by the services questionnaire and its potential for use as a focal point for organizing consumer protection programs, several types of results are presented. First, the category-by-category responses indicating purchase, relative importance and satisfaction/dissatisfaction for the financial services and insurance section of the services questionnaire are summarized and briefly discussed. Next, mean satisfaction/dissatisfaction scores for respondents are presented and analyzed. Reported instances of dissatisfaction across the sixteen categories contained in the section will then be summarized. This will be followed by an analysis of the results covering reasons for dissatisfaction with financial services and insurance. Finally, complaining behavior responses of dissatisfied consumers will be tabulated and summarized including data on the levels of satisfaction with the complaint handling process and on reasons why no action was taken following dissatisfactory consumption experiences.

Service Category Responses

Table 1 summarizes responses denoting use, relative importance and level of satisfaction/dissatisfaction for each of the sixteen categories

included in the financial services and insurance section. The percentage of subjects utilizing each service within the past two years is first listed, followed by the percentage of subjects rating the item as highly important. Next, the frequency of users checking each of the four satisfaction/dissatisfaction scale responses is reported. The final columns in Table 1 summarize the percentage of satisfied and dissatisfied subjects for each service category.

The type of information presented in Table 1 is not available either from volunteered complaint data or from studies which ask consumers to recall a single unsatisfactory experience. The problem of "big ticket" bias has been identified with both of these approaches and the suggestion is that recurring causes of dissatisfaction with less important items may not be brought to the attention of business leaders, consumer interest groups or policy makers. Day and Bodur (1977) already have shown that results of the type reported in Table 1 cover positive as well as negative aspects of consumers' reactions to services, and are less likely to be subject to "big ticket" bias because of the opportunity provided by the instrument to report more than one single unsatisfactory experience.

Information on the rate of use of services permits the numbers of consumers expressing dissatisfaction with the category to be considered in relation to the total number of respondents reporting usage of the category within the recall period. For example, only 12.6% of respondents reported using consumer loan or finance companies during the past two years, yet 18.6% of these subjects expressed dissatisfaction, the highest percentage among the sixteen service categories. Consumer loan or finance companies are not identified as a serious problem on conventional complaint lists because the absolute numbers of users of this service is relatively small. Although the number of users is itself of significance to consumer protection agencies, the consumer loan or finance company example highlights the weaknesses of setting policy priorities on the basis of volunteered complaint data.

Three of the five service categories indicating the highest percentage of dissatisfied users in Table 1 appeared in the corresponding table reported by Day and Bodur (1977). These categories were consumer loan or finance companies, stockbrokers, and chartered banks. Whereas automobile insurance and government workmens' compensation figured prominently in

TABLE 1 (SIII)

REGION: NATIONAL

CONSUMER SATISFACTION/DISSATISFACTION STUDY: SERVICES

PURCHASE; IMPORTANCE RATING; SATISFACTION/DISSATISFACTION RATING

SECTION FINANCIAL SERVICES AND INSURANCE (FSI) III

CATEGORY	PURCHASE % of Respondents* having Purchased	IMPORTANCE RATING % of Purchasers rating Important	Rank by Importance Rating	SATISFACTION/DISSATISFACTION RATING % OF PURCHASERS				TOTAL SATISFACTION/DISSATISFACTION % OF PURCHASERS			
				SATISFIED		DISSATISFIED		SATISFIED		DISSATISFIED	
				Quite	Somewhat	Somewhat	Quite	Total	Rank	Total	Rank
1. Chartered Banks	74.1	86.9	3	61.5	28.2	7.5	2.8	89.7	12	10.3	5
2. Trust Companies	20.7	71.0	13	53.2	38.1	4.6	4.1	91.3	11	8.7	6
3. Credit Unions or Caisses Populaires	37.9	79.7	6	67.9	26.1	4.8	1.2	94.0	7	6.0	10
4. Consumer Loan or Finance Companies	12.6	54.8	14	46.3	35.1	10.4	8.2	81.4	16	18.6	1
5. Credit Card Service	57.2	43.9	16	62.2	30.8	4.5	2.5	93.0	10	7.0	7
6. Stock Brokers, Investment Counselors...	10.8	50.0	15	53.5	36.0	6.1	4.4	89.5	13	10.5	4
7. Income Tax, Financial Counseling Service	36.0	78.6	7	69.6	24.3	4.0	2.1	93.9	8	6.1	9
8. Government Health Insurance	69.5	89.3	1	72.5	22.5	3.4	1.6	95.0	5	5.0	12
9. Supplementary Health Insurance	33.9	77.3	10	72.2	24.2	2.2	1.4	96.4	3	3.6	14
10. Homeowners or Renters Insurance	49.8	83.1	4	67.0	29.5	1.2	2.3	96.5	2	3.5	15
11. Personal Liability Insurance	43.8	81.3	5	62.8	35.2	1.1	0.9	98.0	1	2.0	16
12. Life Insurance	55.1	78.0	8	63.9	31.6	3.1	1.4	95.5	4	4.5	13
13. Auto Insurance	78.3	87.0	2	58.3	30.1	6.7	4.9	88.4	14	11.6	3
14. Government Workmens Compensation	14.3	76.2	12	52.7	31.3	8.0	8.0	84.0	15	16.0	2
15. Supplementary Accident & Disability Insurance	19.6	77.6	9	57.4	36.8	2.9	2.9	94.2	6	5.8	11
16. Pension Plans, RRSP, RHOSP	39.6	77.0	11	61.3	32.0	5.0	1.7	93.3	9	6.7	8

*N = 1052

the Canadian results, health insurance showed the highest percentage of dissatisfied purchasers in the Bloomington data. Taking into account the existence of differences in industry structure and government policy towards health care between Canada and the United States, the convergence between the two sets of results is impressive.

Individual Satisfaction Scores

An average satisfaction score was computed for each subject based upon the satisfaction ratings provided for all sixteen service categories. Each of the subjects was assigned to one of the six half-point intervals spanning the four point satisfaction/dissatisfaction scale. Thus, if a subject had checked the "somewhat" or "very satisfied" response for all sixteen categories, that individual would have been assigned a score of 1.000. However, if the respondent had checked the "somewhat" or "very dissatisfied" response for all categories, that subject would have received a score of 4.000.

Results covering the average satisfaction scores for the financial services and insurance section of the services questionnaire are reported in Table 2. They show that an overwhelming majority of 94.5% of subjects had average scores in the satisfaction range. The distribution of mean satisfaction scores for the financial services and insurance section suggest that, when asked to assess their satisfaction or dissatisfaction with a broad range of service categories, "consumers see far more good than bad in their consumption experiences" (Day and Bodur, 1977). In fact, a higher percentage of respondents fell into the satisfaction range than did so in the Bloomington study from which conclusion was drawn. In that study, 90% of respondents fell into the satisfaction group for financial services and insurance (Day and Bodur, 1977) compared to 94.5% in this study.

Instances of Consumer Dissatisfaction

Subjects were then requested to indicate whether they had had one or more experiences during the previous two years with financial services and insurance with which they were highly dissatisfied. Approximately 20.2% of subjects responded affirmatively. Over 50% of these respondents indicated that they had experienced extreme dissatisfaction with financial services

TABLE 2
 RESPONDENTS CLASSIFIED BY AVERAGE SATISFACTION
 SCORES ON FINANCIAL SERVICES AND INSURANCE

A. Satisfaction Group			
Mean Satisfaction Score			TOTAL ¹
1.000-1.499	1.500-1.999	2.000-2.499	1.000-2.499
515 (51.8%)	222 (22.4%)	203 (20.3%)	940 (94.5%)
B. Dissatisfaction Group			
Mean Satisfaction Score			TOTAL ¹
2.500-2.999	3.000-3.499	3.500-4.000	2.500-4.000
30 (3.0%)	16 (1.7%)	8 (0.8%)	54 (5.5%)

¹ Combined total less than 1052 due to missing data

and insurance five or more times during the recall period. Approximately 25% reported suffering financial loss as a result of their experiences.

To organize the analysis on reasons for dissatisfaction and actions by dissatisfied consumers, subjects who had reported high dissatisfaction were asked to indicate the one service category which was the most unsatisfactory of all. Table 3 shows the five categories cited most frequently as unsatisfactory. About 60% of highly dissatisfied respondents cited automobile insurance. Whereas Table 1 is more concerned with frequency of dissatisfaction, Table 3 is more concerned with intensity of dissatisfaction. The relative prominence of automobile insurance as a source of consumer dissatisfaction is much greater on the intensity dimension than on the frequency dimension.

Space limitations preclude a thorough consideration of the reasons why dissatisfaction with one service is greater than with another. Initial conceptual work in this area has been conducted by Liechty and Churchill (1979). For illustrative purposes, however, it is worth considering why consumer dissatisfaction with automobile insurance is so high relative to

TABLE 3

FIVE MOST UNSATISFACTORY ITEMS

Financial Services and Insurance

Service Categories	Percent Respondents Reporting the Service as the Most Unsatisfactory ^a
1. Automobile Insurance	12.8
2. Chartered Banks	1.4
3. Consumer Loan or Finance Companies	0.9
4. Government Health Insurance	0.8
5. Credit Card Service	0.6

^a_n = 1052

levels of dissatisfaction with all other types of insurance:

- If consumer dissatisfaction stems primarily from claims handling rather than policy writing practices, the probability of a claim being made is of importance. If the probability of an insured consumer making a claim is higher with automobile insurance than with other insurance services, a higher percentage of automobile purchasers might be expected to be dissatisfied. A further effect of a higher frequency of claims is that a higher percentage of consumers have prior claims experience. On the basis of such experience, consumers are likely to gain self-confidence and to develop firmer expectations regarding service performance.
- The likelihood of disputes arising between insured consumers and insurance companies over "what actually happened" may be greater in the case of automobile insurance (and workmens' compensation). In the cases of life, health and disability insurance, claims may or may not be legitimized by expert medical evidence. The consumer, is perhaps, less likely to question the reduction of a claim than in the case of automobile insurance, where the assignation of liability may have a substantial financial impact on his subsequent premium.

- The importance of the automobile to the North American life-style may be reflected in a greater salience attached to automobile insurance relative to other types of insurance which consumers purchase. It is worth noting that, just as the percentage of dissatisfied consumers of automobile insurance is high among insurance services, so the percentage of dissatisfied consumers of automobiles is often found to be the highest among consumer durable products. In addition, the disproportionate publicity which automobile insurance rate increases receive may precondition some consumers to anticipate dissatisfaction, irrespective of the manner in which the service is delivered by the insurance industry. And dissatisfaction which might appropriately be directed at government regulators of automobile insurance rate structures is more likely to be reflected in the development of negative attitudes towards the automobile insurance industry.

Reasons for Dissatisfaction

Subjects were asked to check reasons for dissatisfaction with the one service category named as the most unsatisfactory of all. Multiple responses were permitted. From among a list of twenty-one reasons, respondents checked an average of 1.76 items for financial services and insurance. Table 4 reports the percentage share of mentions for each of the reasons in the case of eight financial services and for eight insurance services. A wide dispersion of responses is evident with no one reason assuming particular prominence. In the case of financial services, the most frequently cited reasons were: "the service was provided in a careless, unprofessional manner" and "I feel that I was treated like an object rather than as an individual." The relative importance of these two reasons reflects the difficulties of ensuring quality control and consistency in service organizations when quality is largely dependent upon the performance of individual representatives of those organizations. Similarly, in the case of insurance services, the behaviors of organizational representatives appear to be the principal reasons for dissatisfaction. However, a significantly higher percentage of dissatisfied consumers indicated that "results fell far short of those claimed by the person providing the service." Deceptive practices and misrepresentations on the

TABLE 4

COMPARISON OF REASONS FOR DISSATISFACTION BETWEEN
FINANCIAL SERVICES AND INSURANCE

REASONS	PERCENTAGE SHARE OF MENTIONS	
	<u>Financial Services^a</u>	<u>Insurance Services^b</u>
1. The service was provided in a careless, unprofessional manner.	15.0	9.8
2. The service was not completed in the agreed time.	3.9	2.9
3. The service was not performed correctly the first time.	5.5	5.9
4. I was charged for services that were not performed.	3.2	2.9
5. The fee was much higher than the amount agreed upon in advance.	3.2	4.9
6. The fee was higher than an advertised price for the service received.	0.0	2.9
7. Many mistakes were made in my account.	11.0	5.9
8. A professional confidence was violated to my embarrassment or injury.	2.4	2.0
9. The professional advice I paid for was incorrect and caused me substantial losses.	3.2	6.9
10. Services were rendered in an incompetent manner with very harmful results.	7.9	6.9
11. I was tricked by the person providing the service into buying services, insurance, or other intangibles I didn't want.	2.4	2.0
12. Results fell far short of those claimed by the person providing the service.	4.7	14.7
13. My insurance policy was cancelled without justification.	0.0	1.0
14. The company refused to pay a valid claim.	0.0	9.8
15. I was unfairly refused credit or other financial services.	7.9	2.0
16. Credit terms were misrepresented to me.	1.5	0.0
17. I was harassed by bill collectors.	2.4	2.9
18. The benefits did not cover all of the expenses as claimed.	0.0	6.9
19. Interest to be paid on a savings account or plan was misrepresented to me.	2.4	0.0
20. I feel I was treated with extreme rudeness.	9.4	2.9
21. I feel that I was treated like an object rather than as an individual.	13.3	6.9

^a Based on 139 mentions by 47 respondents. Responses to the "Other" category have been excluded.

^b Based on 229 mentions by 164 respondents. Responses to the "Other" category have been excluded.

part of insurance salesmen are regarded as a substantial problem of the insurance industry (Belth, 1974).

Responses to Consumer Dissatisfaction

Of the 211 subjects who cited reasons for dissatisfaction, only 65 reported that they had taken personal and/or direct actions as a result. Consumers who took no action following dissatisfaction were asked to consider four possible reasons for not doing so and to check the one which they considered most appropriate. The results for financial services and for insurance services separately are reported in Table 5.

TABLE 5
REASONS DISSATISFIED RESPONDENTS GAVE FOR TAKING NO ACTION:
FINANCIAL SERVICES AND INSURANCE

"The one single reason which best explains why you did not do anything"	Percentage of Respondents	
	Financial Services ^a	Insurance Services ^b
I didn't think it was worth the time and effort...	14.3	3.8
I wanted to do something about it but never got around to it...	7.1	0.8
I didn't think that anything I could do would make any difference...	64.3	10.7
I didn't know what to do about it or where I could get help...	14.3	84.7

^a Based on 15 of 47 dissatisfied users of financial services who took no action.

^b Based on 131 of 164 dissatisfied users of insurance services who took no action.

The percentages of dissatisfied consumers who took no action varied substantially by type of service. Whereas only 31.9% of subjects dissatisfied with financial services took no action, 80.0% of respondents dissatisfied with insurance services reported taking no action. In the case of consumers dissatisfied with insurance services, failure to take some form of action

when dissatisfied appears to be not so much the result of a defeatist lack of determination or willingness to invest time and effort on the part of the consumer, but rather the result of uncertainty as to how or where to obtain redress. On the basis of this evidence, to merely monitor volunteered complaint data would provide the insurance industry with a severe underestimate of levels of dissatisfaction with insurance services. On the other hand, for financial services, uncertainty as to what action to take or where to seek help was mentioned relatively infrequently as a reason for not taking action. The principal reason was a perception of helplessness on the part of the consumer, that nothing (s)he could do would make any difference. This may reflect the prominence of personal relationship problems between consumer and service representative among the reasons for dissatisfaction with financial services. The rudeness of an employee cannot be corrected retroactively as easily as an error in an account.

A summary of the actions taken by dissatisfied purchasers of financial services and insurance services is presented in Table 6. On average, the number of actions cited by respondents was 2.66. The results indicate substantial similarity in the relative emphasis placed on alternative action options by the dissatisfied purchasers of both types of service. Among the personal actions, word-of-mouth warning to family and friends was frequently mentioned. It is important to note that neither business firms nor consumer protection agencies would be directly aware of these types of actions. Among the direct actions, considerably more emphasis was placed upon complaining as opposed to formal efforts to seek redress including requesting a refund or that the service be performed again.

Subjects who took direct actions were also asked how satisfied they were with the way their complaint was handled. The results are presented in Table 7 and indicate that a majority of consumers remain dissatisfied in the case of both types of service. These results parallel those reported by Nichols and Dardis (1973) who found that over 50% of the complainers identified in their study were not satisfied with the action taken by retail stores.

TABLE 6

CONSUMER BEHAVIOR IN RESPONSE TO
DISSATISFACTION: Financial Services and Insurance

<u>RESPONSE/TYPE OF ACTION TAKEN</u>	<u>Percentage Share of Total Actions</u>	
	<u>Financial Services^a</u>	<u>Insurance Services^b</u>
A. <u>PERSONAL ACTION</u>		
I decided not to buy that particular service again.	9.4	6.7
I decided to quit using the particular company or professional person providing the service.	17.6	14.6
I warned my family and friends about the service.	18.8	13.5
Other personal action not listed above.	7.1	12.4
A. <u>TOTAL PERSONAL ACTION</u>	52.9	47.2
B. <u>DIRECTION ACTION</u>		
I requested that the service be done again in the correct way.	7.1	6.7
I asked for a refund or an adjustment to the fee.	7.1	6.7
I contacted the company to complain.	20.0	23.6
I contacted the industry or professional association to complain.	1.2	2.3
I contacted the Better Business Bureau to complain.	2.4	1.1
I contacted a governmental agency or a public official to complain.	1.2	4.4
I contacted a private consumer advocate or consumer organization to complain.	1.2	2.3
I contacted a lawyer, went to Small Claims Court, or otherwise took legal action.	2.4	2.3
Other direct action not listed above.	4.7	3.4
B. <u>TOTAL DIRECT ACTION</u>	47.1	52.8
A & B <u>TOTAL ACTION SUMMARY</u>	100.0	100.0

^aBased on 32 of 47 dissatisfied users of financial services who took action.

^bBased on 33 of 164 dissatisfied users of insurance services who took action.

TABLE 7

HOW SATISFIED CONSUMERS ARE WITH COMPLAINT-HANDLING:

Financial Services and Insurance

<u>Level of Satisfaction</u>	<u>Percentage of Subjects Reporting Satisfaction With The Way Complaints Were Handled</u>	
	<u>Financial Services^a</u>	<u>Insurance Services^b</u>
Very Satisfied	0.0	10.3
Somewhat Satisfied	23.8	24.1
Somewhat Dissatisfied	23.8	24.1
Very Dissatisfied	52.4	41.5

^a Based on 22 dissatisfied users of financial services who took direct action.

^b Based on 29 dissatisfied users of insurance services who took direct action.

SUMMARY AND CONCLUSIONS

This paper has reported some of the results from a broader study of consumer satisfaction/dissatisfaction and complaining behavior using data obtained from a national probability sample of 1052 households in Canada.. In this study, analysis centered both on satisfaction/dissatisfaction scale responses and on post-evaluation responses of dissatisfied consumers. These results are an important step in the development of a base line for evaluating levels of satisfaction across a broad set of service categories. The focus of this paper was on data covering financial services and insurance. Although the results showed widespread variation in the proportions of dissatisfied users over the sixteen categories, they tended to parallel and reinforce those reported previously for the services

part of the Bloomington study (Day and Bodur, 1978). When mean satisfaction scores were tabulated for all respondents completing the financial services and insurance section, only 5.5% of these subjects fell in the dissatisfaction range.

The five service categories which were identified as the most unsatisfactory by subjects highlight automobile insurance as a more prominent source of consumer dissatisfaction than any other service included in this study. Reasons for dissatisfaction were widely dispersed. Relations with service personnel and "human error" problems tended to overshadow other reasons for dissatisfaction such as selling practices and advertising claims though a significant number of dissatisfied purchasers of insurance services were concerned about misrepresentation of service offerings by service organization personnel. These results tend to confirm those reported in earlier studies (Day and Bodur, 1978; Mason and Himes, 1973; Wall et al., 1977).

In this study, only 65 of the 211 subjects who cited reasons for dissatisfaction, or about 31%, reported that they had taken a personal or direct action to resolve their dissatisfaction. On the basis of the results reported here, it would appear that at any given time approximately 20% of consumers are aware of an can report a specific instance of dissatisfaction with financial services and insurance. However, only a small proportion of the dissatisfied consumers, perhaps 30-35%, may actually take some form of corrective action. Thus consumers' complaints may not reflect the full magnitude of consumer dissatisfaction.

The results reported here confirm the feasibility of obtaining high quality data on consumer satisfaction, dissatisfaction and complaining behavior through large-scale survey research. The type of information which is provided is of potential use to policy makers as a basis for developing actionable proposals aimed at setting priorities for consumer protection programming. The results presented here are part of an extended data base which has been created to serve as a focal point for integrating the numerous data sources available to policy makers. It is hoped that they will stimulate further research on consumer satisfaction, dissatisfaction and complaining behavior in product and service categories which have received little, if any, attention by researchers to date.

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