



**ST. MARY'S UNIVERSITY
SCHOOL OF GRADUATE STUDIES**

**ASSESSMENT OF MOTOR INSURANCE BUSINESS ON
FINANCIAL PERFORMANCE OF INSURANCE COMPANY,
THE CASE OF AWASH INSURANCE COMPANY**

BY

AYELE DESALEGN

**FEBRUARY, 2014
ADDIS ABABA, ETHIOPIA**

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**A THESIS SUBMITTED TO ST.MARY'S UNIVERSITY, SCHOOL
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DECLARATION

I, the undersigned, declare that this thesis is my original work, prepared under the guidance of Temesgen Belayneh (PhD). All sources of material used for the thesis have been duly acknowledged. I further confirm that the thesis has not been submitted either in part or in full to any other higher learning institutions for the purpose of earning any degree.

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St. Mary's University, Addis Ababa

Signature

February, 2014

ENDORSEMENT

This thesis has been submitted to St. Mary's University, School of Graduate Studies for examination with my approval as a university advisor.

Temesgen Belayneh

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St. Mary's University, Addis Ababa

Signature and Date

February, 2014

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LIST OF ACCRONYMS

ABI	Association of British Insurers
ABS	Automatic Brake System
AEI	Association of Ethiopian Insurers
AIC	Awash Insurance Company
BI	Bodily Injuries
CII	Chartered Insurance Institute
CMTP	Compulsory Motor Third Party
FDRE	Federal Democratic Republic of Ethiopia
GDP	Gross Domestic Product
GNP	Gross National Product
GWP	Gross Written Premium
HIC	High Income Countries
IFO	Insurance Fund Office
LIC	Low Income Countries
MTPL	Motor Third Party Liability
NBE	National Bank of Ethiopia
NCD	No Claim Discount
OECD	Organization for Economic Cooperation and Development
UK	United Kingdom
UN	United Nations
UNCTAD	United Nations Conference on Trade and Development
UNECA	United Nations Economic Commission for Africa
VAT	Value Added Tax
WHO	World Health Organization
WTO	World Trade Organization

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ABSTRACT

Motor insurance is the most prevalent line of insurance in the world, and in Ethiopia the largest sector in non-life insurance. Despite the large proportion that motor insurance constitutes of all general insurance premiums, it is reported to be a loss leader for most insurance companies. This is the significant economic challenge the insurance companies face in Ethiopia: grow the business while improving the profitability of motor class of business. The study aims at identifying the main causes of the problems associated with motor insurance, its impact on the revenue account of the insurer, factors contributed to high motor claims ratio and giving recommendations based on the findings. It focuses on the data of insurance industry and awash insurance company for the past six years (2007/08 to 2012/13). Primary data were collected through questionnaires and in-depth interview methods. Furthermore, data were also obtained from NBE, Federal Police Commission, Federal Transport Authority and Insurance Fund Office and financial publications of NBE were analyzed. Failure to charge equitable level of premium (inefficiency in pricing); inability to select risk precisely; increased cost of claims; increased administration and acquisition costs; and low investment income; have been identified as a key determinants of the problem. This study recommends that charging equitable level of premium based on statistical data, reducing costs and expenses, and diversifying investment opportunities. Moreover, joint coordination works with the stakeholders, lobby policy makers and legislative bodies to produce the required level of behavioral change in order to curb the growing problem in this regard.

CHAPTER ONE

INTRODUCTION

1.1. BACKGROUND OF THE STUDY

Insurance Industry assists the development process of an economy in several ways. Primarily, it acts as mobilizer of savings, financial intermediary promoter of investment activity, stabilizer of financial market, risk manager and an agent to allocate capital resources efficiently. Although the insurance industry has grown rapidly in the industrialized countries, its growth in developing countries like Ethiopia has neither been satisfactory nor in tandem with the growth of other sectors of the economy.

Generally, the development of the insurance sector since 1994 in many ways resembles that of the banking sector, with the establishment of several new private insurance companies in addition to the state-owned EIC which continues to be the largest player. The range of insurance products offered is limited indicating that the sector is still at an early stage of development. Reinsurance and auxiliary services (such as actuaries) are hardly available in Ethiopia. Besides, insurance companies have limited capacities – premium setting is based on outdated methods, and there is a considerable lack of risk assessment methodologies. Capacity limitations also affect regulation of the sector with insurance supervision being largely ineffective (Ageba, 2008).

Contrary to the banking sector, however, competition is stiff in the insurance industry. Private insurance companies (or at least some of them), ambitious to increase their sales volume, have been granting unfair and unjustifiable discounts to attract clients and attain their sales forecast. This aggressive pricing policy has led to an unhealthy spiral of premium cutting. Finally, insurance companies' investment activities are heavily constrained by the restrictions that the NBE's investment proclamation imposed. This forces insurance company to invest the majority of their funds in government securities and bank deposits at negative real interest rates.

The lack of infrastructure, especially a stock market, further constrains insurance companies' investment activities (Ageba, 2008).

At present, there are about 16 insurance companies including the stated owned EIC, operating in the country after acquiring licenses from the National Bank of Ethiopia to offer insurance services as per the Insurance Business Proclamation No. 86/ 1994. The license enables the insurance companies to transact insurance business under “general insurance/Non-Life” and/or “long-term/Life” insurance (NBE, 2012).

The general/non-life insurance category includes all non- life insurance services such as fire and lightening, motor , marine, aviation, engineering, liability and workmen's compensation while long-term/life assurance service focus on life and health insurance.

Insurance Business Proclamation Number 746/2012 is adopted by the Federal Parliament in its session of June 21, 2012 by repealing the Proclamation mentioned above. The Proclamation specifically amends the minimum paid-up capital required to provide insurance services in Ethiopia.

Motor insurance business is the largest sector in non-life category. From the total non-life production about more than 46% of income/GWP has been generated from motor class of business. However, the business of motor insurance in Ethiopia is not as such attractive to the insurers. Almost all insurance companies describe in their annual reports that motor insurance is consistently registered a negative results.

On the other hand, Compulsory Motor Third Party Insurance Proclamation No.559/2008 has introduced mandatory insurance cover of motor vehicles for third party risks in Ethiopia. The law requires vehicles to have a third party insurance arrangement before being driven on a road. The Proclamation is adopted to mitigate the death, bodily injury as well as property damages to third parties caused by motor vehicle accidents. Pedestrians, passengers in vehicles as well as drivers are exposed to such accidents by motor vehicles. Motor Third Party Insurance legislation is received by insurers with uncertainties because of the challenge that motor insurance business was not considered profitable let alone with the addition of compulsory motor third party insurance.

1.2. STATEMENT OF THE PROBLEM

Motor insurance is the most prevalent insurance line in the world and, in Ethiopia, the largest sector in non-life insurance. In 2006/07, Ethiopian insurance company's generated a total premium income of almost USD 44m or 46% of all general insurance premiums from motor class of business. However, the business of motor insurance in Ethiopia is not as such attractive to the insurers. Almost all insurance companies describe in their annual reports that motor insurance is consistently registered a negative results.

On the other hand, the legislation of Compulsory Motor Third Party Insurance Proclamation No.559/2008 has received by insurers with uncertainties due to the challenge that motor insurance business was a loss making business let alone with the addition of compulsory motor third party insurance.

Previous researches conducted with regard to motor mostly focused on motor vehicle accidents. Academic researches conducted in the form of masters of thesis includes: the causes of motor vehicle accidents and possible counter measures on Addis Ababa –Shashemene Roads (Segni, 2007); taxi traffic accidents in Addis Ababa (Mebratu, 2002); analysis of traffic accidents in Addis Ababa (Samuel, 2006) are some of the studies conducted to consider the engineering and road safety aspects of road traffic accidents in Ethiopia. Some researches conducted on the area of motor insurance sector includes: the evaluation of motor risks and status of motor insurance in Ethiopia (NBE, 2004). Regarding the profitability performance of motor insurance business on insurance company revenue account was not adequately assessed.

Therefore, as the motor class of business represents the largest share it terms of GWP in non-life insurance sector, a clear insight/assessment about the financial performance of motor class of business on the profitability of insurance company has been the problem assessed under this study.

The absence of empirical studies in insurance companies concerning the financial performance of motor insurance on company's profitability is then what motivated the researcher to put his own contribution on assessing the financial performance of motor insurance business on insurance company's profitability.

Hence, these are important issues to be investigated for the insurance managers, professionals, regulators and policy makers to support the sector in achieving the excellence so that required economic outcomes could be obtained from the help of the sector by understanding the positive and negative results of motor insurance. In other words, what contribution has motor insurance business on the financial performance of insurance company has not been adequately assessed. While taking in to consideration the absence of empirical inquiry into assessing the contribution of motor insurance business on company's financial performance/profitability, the researcher attempts to work on such untouched empirical evidence of the insurance company.

1.3. RESEARCH QUESTIONS

Awash insurance is one of the pioneer private insurance company Licensed by NBE in October, 1994 to provide Non-Life and Life insurance businesses in Ethiopia. Generally, Awash insurance company has so far registered a relatively positive result. It comes to grow from time to time. But the significance of profitability from underwriting the motor class of business is questionable whether it is adding value to the profit account of the company as expected from it or not. Accordingly, the study tries to answer the following questions.

- What are the problems associated with underwriting motor insurance?
- What is their contribution to the revenue account of AIC?
- What are the factors contributing to high motor claims ratios?
- How the company reduces the adverse impact of motor insurance

1.4. OBJECTIVES OF THE STUDY

With regard to the objectives of this study, the researcher tried to address one broad general objective and some more specific objectives just derived from the general objective and these were presented below.

1.4.1. General objective

The general objective of the study is to assess the financial performance of motor insurance business on the revenue account of Awash insurance company for the past six years of operations.

1.4.2. Specific Objectives

Based on the above general objective, the following are specific objectives of the study:

- To identify the factors that make motor class of business a loss leader among other AIC business portfolios;
- To investigate the contribution of motor insurance business on the profitability of Awash insurance company;
- To identify the contribution of motor insurance according to the type of policy cover;
- To rank the factors according to their degree of impact;

1.5. DEFINITION OF KEY TERMS

Bonus malus system: the use of premium discounts for claim-free driving and surcharges for crash involvement (OECD, 1990).

Claim: is notification of an incident that may lead to compensation (CGU, 2004).

Claims incurred: refers to the losses sustained by the insurer in a given period (Ransom, 2008).

General insurance: is non-life insurance from which motor insurance is one segment (Reja, 2008).

Gross premium: means the total premium including provision for anticipated claim, insurer's administrative expense and profit margin (CGU, 2004).

Indemnity: is monetary compensation payable to offset the loss of the insured (Ransom, 2008).

Insurance: is the promise given by insurer to the insured to make the damage good (CGU, 2004).

Insurance policy: refers to the legal document that proves the existence of insurance cover (Ransom, 2008).

Loss ratio: is the ratio of premium collected against the claims incurred (Ransom, 2008).

Motor insurance: is insurance arrangement for the risks relating to the motor vehicle and the damage it may result to others (Ransom, 2008).

Motor vehicle: is engine propelled moving that is recognized as a motor vehicle by the regulator (FDRE, 2008).

Net premium: it is the payment that an insurer earns for the lapsed period of the insurance cover (CGU, 2004).

Premium: is the consideration that the insured pays to the insurer to obtain cover (CGU, 2004).

Reinsurance: is partial transfer of the risk to another insurer or reinsurer (CGU, 2004).

Risk based supervision: is the supervisory tool that focus on identification of significant risks and undertake measurement of the direction of the risk over time (NBE, 2012).

Road safety: is absence of injuries on the road to the road users (UNECA, 2009).

Underwriting: refers to the steps followed to assess the risk that an insurer accepts from the insured (Diacon & Carter, 2003).

1.6. SIGNIFICANCE OF THE STUDY

The main reason for this study is that the researchers have not paid enough attention to this subject in the insurance sector. Therefore, this study is expected to provide empirical evidence on the contribution of motor insurance business on company's profitability (financial performance). Furthermore, many parties will be benefited from the results that will emerge from the results of the study and these parties are:

Management: by identifying the success and failure of motor insurance, the management of insurance company will take the necessary actions to improve the performance of their company and choose the right decisions.

Regulators: National bank of Ethiopia will be interested in knowing whether the companies operate successfully or failed to take the necessary measures to avoid crises of the bankruptcy.

Investors: Investors interested in such studies in order to protect their investment, and directing it to the best investment.

Customers: Customers interested in knowing the ability of insurance companies to pay their obligations based on the indicators of success of the companies.

Moreover, the researcher also contributes that this study can potentially serve as a stepping stone for further research in the area.

1.7. DELIMITATION/SCOPE OF THE STUDY

The study has not gone up to addressing the cases of each and every class of business of the insurance company. Rather the horizon of the study confined merely on assessing the impact of motor insurance on insurance company's profitability (financial performance) without any overall performance assessment tool. It would have also been very useful, if it included the impact of all class of business on insurance company's profitability. However, due to the constraints of cost, time and other resources, the researcher was forced to limit the study only on the impact of motor insurance on profitability.

1.8. LIMITATION OF THE STUDY

The impact or contributions of the motor insurance to other portfolio in a packaged policy have not covered by this research. This study is also limited to Awash insurance company and the findings cannot generalized to whole industry. Despite these limitations, this research contributed considerably to the understanding that motor insurance has a negative impact on insurance company profitability and provides a foundation to guide further research in this area.

1.9. ORGANIZATION OF THE PAPER

This study has been organized in to five chapters. In the first chapter an introduction to the research (back ground of the study), statement of the problem, research questions, objectives of

the study, definition of key terms, significance of the study, and delimitation/scope of the study were clarified. Chapter two presents the previous studies by looking at insurance, motor insurance, profitability, the impact of motor insurance on profitability and other class of business in general so as to revise relevant literature. Chapter three presents the research design and methodology. Chapter four presents the findings/results and discussion, and chapter five presents the conclusions and recommendations based on the findings of the study.

CHAPTER TWO

LITERATURE REVIEW

2.1 INTRODUCTION

This chapter deals with the concept of insurance, profitability and provides investigations regarding motor insurance business on the financial performance or profitability of Awash insurance company. In the investigations, the factors that have an impact on financial performance or profitability of insurance company were classified as underwriting performance (losses and expenses, which were affected by product pricing, risk selection, claims management, and marketing and administrative expenses); and second, by investment performance, which is a function of asset allocation and asset management as well as asset leverage.

The review of related literature is divided in to four sections; the first section deals with the concept of insurance, characteristics, practices and types of insurance, the second section provides studies concerning profitability performance of insurance companies together with measure of profitability in insurance companies. The third section presents previous investigations on the impact of motor insurance performance in insurance companies. The last section summarizes empirical literature concerning effective factors for motor crash.

2.2 THE CONCEPT OF INSURANCE

There is no single definition for insurance. Insurance can be defined from the view point of several disciplines, including law, economy, history, actuarial science, risk theory and sociology. A working definition of insurance and the one that captures the essential characteristics of a true insurance plan by the Commission on Insurance terminology of the American Risk and Insurance Association is defined as following:

Insurance is the pooling of fortuitous losses by transfer of such risks to insurers, who agrees to indemnify insured people for such losses, to provide other pecuniary benefits on the occurrence, or to render services connected with the risk (Rejda, 2008, p. 13).

Also from a view point of individual, insurance can be defined as an economic device whereby the individual substitutes small certain cost (the Premium) for a large uncertain financial loss (the contingency insured against) that would exist if it were not for the insurance. In addition to eliminating risk for the individual through transfer, the insurance device reduces the aggregate amount of risk in the economy by substituting certain cost for uncertain losses. So from the view point of society insurance is an economic device for reducing and eliminating risk through the process of combining a sufficient number of homogeneous exposures into a group to make the losses predictable for the group as a whole (Vaughan and Vaughan, 1999).

Moreover, there is another definition by Bickelhaupt (1983 p. 13) that defines insurance as:

Insurance is an agreement by which one party (the insurer) promises to pay another party (the insured or policy holder) a sum of money if something happens which causes the insured to suffer a financial loss. Hence, in the case of accident the responsibility for paying such losses is transacted from policy holder to the insurer. In return for accepting the burden of paying for losses when they occur, the insurer charges the insured a price, the insurance premium.

2.2.1 Characteristics of Insurance

Based on the above definition an insurance agreement typically characterized by pooling of losses, payment of fortuitous losses, risk transfer and indemnification.

Pooling or the sharing of losses is the heart of insurance. Pooling is the spreading of losses incurred by the few over the entire group, so that in the process, average loss is substituted for actual loss. Moreover, pooling involves the grouping of a large number of exposure units so that the law of large numbers can operate to provide a substantially accurate prediction of future losses (Rejda, 2008). The law of large number means that the greater the number of exposure units, the more accurate the insurers can be in calculating their premiums, and this is because they are better able to assess the size of future loss payments and hence to work out an appropriate charge that will enable them to cover those losses (Bickelhaupt, 1983).

A payment of fortuitous loss is one that is unforeseen and unexpected and occurs as a result of chance. In other words, the loss must be accidental. The law of large numbers is based on the assumption that losses are accidental and occur randomly. Risk transfer means that a pure risk is transferred from the insured to the insurer, who typically is in a stronger financial position to pay

the loss than the insured. Indemnification means that the insured is restored to his or her approximate financial position prior to the occurrence of loss. Thus for example, if one's home burns in fire, a home owner's policy will indemnify or restore the person to the previous position (Rejda, 2008).

2.2.2 The Insurance Company Practices

The business of any insurance company is to pay claims in return for the payment of premiums. But running such a business is, of course, a great deal more complex than this. According to Diacon & Carter (2003), every insurance company undertakes the following essential activities:

- *Underwriting*: this is a procedure by which an insurer evaluates the risk of a proposal and decides whether or not to enter into a contract, and if so on what terms.
- *Deciding a price*: pricing is an important part of underwriting and is a process known as premium rating. The price should reflect the claims costs and expenses associated with the contract but must also include the allowance for the insurer's profit margin. This allowance depends on the level of competition in the relevant insurance market.
- *Generating new business*: like all other companies, these types of companies want to increase the amount of business that they undertake at the right price. Companies differ in their degree of reliance on a direct sales force rather than using brokers, and also in the amount they spend on advertisement.
- *Paying claims*: the procedure used by companies for paying claims.
- *Maintaining fund*: insurer cannot pay all claims out of revenue received from premiums and investment income. Therefore, they must maintain a fund that can be used to pay claims.
- *Investing the fund to earn investment income*: in many classes of insurance substantial funds are accumulated. Careful investment of these funds allows insurers to earn investment income and make capital gains.
- *Buying reinsurance*: the insurer may be aware that certain claim payments may exceed his financial resources. Hence, he will wish to pass on part of liability for these claims to another insurer by purchasing reinsurance.

- *Provide additional services:* as part of their operations, insurers may provide additional services and advice to their customers.
- *Drawing up accounts:* like other trading enterprises, insurers make payments to creditors and receive money from debtors. They must then compile accounts for internal managements, shareholders, and the taxation and supervisory authorities.
- *Paying taxes:* insurance companies, like other trading enterprises must pay corporation tax, value added tax, and capital gain tax (Diacon & Carter, 2003).

2.2.3 Different Types of Insurance

Any risk that can be quantified can potentially be insured. Specific kinds of risk that may give rise to claims are known as “perils”. An insurance policy will set out in details which perils are covered by the policy and which are not. The insurance market consists of two sectors Life and Non-Life insurance sector (Datamonitor, 2006).

The life insurance sector covers all life insurance products including annuities, which can be linked to retirement savings plans. Another classification of life insurance is temporary and permanent insurance. Temporary insurance provides for life insurance coverage for a specified term of years for a specified premium. Permanent life insurance is life insurance that remains in force (in-line) until the policy matures (payout), unless the owner fails to pay the premium when due (the policy expires). The policy cannot be cancelled by the insurer for any reason except fraud in the application, and that cancellation must occur within a period of time defined by law (usually two years).

The non-life insurance sector consists of two segments accidental and health segments, and property and casualty insurance segments (Datamonitor, 2007). Global non-life insurance market segmentation is 24.2% for accident and health insurance and 75.8% for property and casualty insurance (Data monitor, 2005).

Also there is a broader classification of insurance according to Rejda (2008), insurance can be classified as either private (Life and health, Property and liability (also called property and casualty), personal line and commercial line) or government insurance (social insurance and other government insurance).

Life insurance pays benefits to designated beneficiaries when the insured dies. Property insurance indemnifies property owners against the loss or damage of real or personal property caused by various perils, such as fire, lightning, collision, windstorm, or tornado. The various types of coverage's by property and casualty insurance -nonlife insurance- can be grouped into two major categories: personal line and commercial line.

Personal line refers to coverage's that the real state and personal property of individuals and families or provides protection against legal liability. It includes: (a) private passenger auto insurance, (b) homeowners insurance, (c) personal umbrella liability insurance, and (d) boat owners insurance.

Commercial line refers to property and casualty coverage for business firms, nonprofit organizations, and government agencies. Commercial lines include: (a) fire and allied lines insurance, (b) commercial multiple peril insurance, (c) general liability insurance, (d) workers compensation insurance, (e) commercial auto insurance, (f) accident and health insurance, (g) inland marine and ocean marine insurance professional, (h) liability insurance, (i) equipment breakdown insurance, (j) fidelity and surety bonds, (k) crime insurance, and other miscellaneous insurance.

Government insurance can be divided into social and other government insurance. Social insurance programs are government insurance programs with certain characteristics and that distinguish them from other government insurance programs. These programs are financed entirely or in large part by mandatory contributions from employers, employees, or both and not primarily by the general revenues of government.

Other government insurance programs do not have the distinguishing characteristics of social insurance programs and exists at both federal and state level (Rejda, 2008).

2.3. THE CONCEPT OF PROFITABILITY

Generally, business organizations are established with a view to earning profit from its business operations. However, sometimes indifferent situations the objects of the business organizations may be change to survival, growth and stability, etc. If the business firm is to survive in a dynamic and expanding environment, it has to go on expanding the scale of its operations on a

regular and continuing basis by generating sufficient profit. Hence, the profit margin is the most essential objectives of the business firm which is very good indicator of profitability, any increase in profit margin, when the other things remains the same, represents that the business operations are sound, efficient and successful. It provides incentives and encouragement for prospective investors and attracts external funds and as a major source of internal funds. Among the financial institutions, insurance industry is part of immune and repair system of an economy and successful operation of the industry can set energy for other industries and development of an economy. To do so the insurance industry is expected to be financially solvent and strong through being profitable in operation (Harker and Zenios, 2000).

Although there are various approaches, estimating insurer profitability is generally done by examining premiums (insurance price) and investment income and either underwriting results (underwriting gain or loss) or overall operating performance (gain or loss from operations).

According to Kearney (2010), most of the insurance companies use the combined ratio to measure the success of their underwriting activities. The combined ratio is a profitability ratio that indicates whether an insurer has made an underwriting loss or gain from all of its business activities. Although the combined ratio is the most-often-cited measure of underwriting success, the results that it produces are generally subject to an additional analysis of its components. Changes in premium volume, major catastrophic losses, moral and physical hazards, and delays in loss reporting can distort the combined ratio, making it difficult to evaluate the effectiveness of underwriting. Without a clear understanding of their underwriting performance of each business unit, insurers may not be able to respond to conditions that affect their performance.

An insurer's overall operating performance (gain or loss from operations) is its net underwriting gain or loss plus its net investment gain or loss for a specific period. This overall figure gives a more complete picture of an insurer's profitability because investment income generally helps to offset any underwriting losses. The formula for overall gain or loss from its operations is expressed as: overall gain or loss from operations = net underwriting gain or loss + investment gain or loss. To obtain an accurate picture of an insurer's profitability, it is important to analyze the overall gain or loss from operations for several years because any insurer might have a single unprofitable year that is offset by a pattern of profitability over a longer period (Harker and Zenios, 2000).

An insurer's profits depend heavily on the premium revenue the insurer generates from the sale of its business portfolios. Insurance companies use premium rates based on the insured's loss exposures to determine the premium to charge for insurance policies. Insurers must charge premiums to have the funds necessary to make loss payments. In fact, an insurer's total revenue (premiums and investment income) must equal or exceed the amount needed to pay for losses, to cover its costs of doing business and profit for the investor.

Investment profit also depends, in part, on premium revenue that creates the funds used for investment.

According to William and Segal (2004), the performance of insurance companies in financial terms is normally expressed in net premium earned profitability from underwriting activities, annual turnover, return on investment, and return on equity. These measures could be classified as profit performance measures and investment performance measures.

The term profit can take either its economic meaning or accounting concept which shows the excess of income over expenditure viewed during a specified period of time. On one hand, profit is one of the main reasons for the continued existence of every business organization. On the other hand, profit is expected so as to meet the required return by owners and other outsiders.

Accordingly, the term 'profitability' is a relative measure where profit is expressed as a ratio, generally as a percentage. Profitability depicts the relationship of the absolute amount of profit with various other factors (Harker and Zenios, 2000).

The variation of profit among business lines of insurance companies over the years in a given company would result to suggest that factors like product pricing, risk selection, claims management, marketing & administrative expenses, and investment performance play a crucial role in influencing insurance companies profitability (Swiss Re, 2008).

It is therefore imperative to identify the impact of these factors as it can help insurance companies to take action on what will increase their profitability and investors to forecast the profitability of their companies. To do so, it is better to see their impacts on profitability that were considered in previous times by different individuals. The following points are some of the work of others among many others.

2.4. PROFITABILITY PERFORMANCE OF MOTOR INSURANCE

Motor insurance is the most prevalent insurance line in the world and, in Ethiopia, the largest sector in non-life insurance. In 2006/07, Ethiopian insurance company's generated a total premium income of almost USD 44m or 46% of all general insurance premiums from motor class of business. Despite the large proportion that motor insurance constitutes of all general insurance premiums, it is reported to be a loss leader for most insurance companies (Smith and Chamberlai, 2009).

According to Thomas's (2002), the economic health of the motor insurance industry will affect both its attractiveness to investors and the likelihood of investment in road safety activities. Unfortunately, the motor insurance industry too often appears to be a loss making business in both HICs and LICs. In India, recent loss ratios (claim cost ratio to premium income) have been reported to be as high as 189 per cent. In 1998, South Africa's RAF deficit was reported to be doubling every three to five years, with the premium paid at the time estimated to be only 40 per cent of that needed (Joffe, 1998).

In Ghana, the fund for victims of uninsured/untraced vehicles has had to pay for the outstanding claims of the insurance companies which have gone bankrupt (Thomas, 2002).

Similarly, Dorfman (2009), would also argued that "Automobile accidents cause billions of dollars in annual damage, including destroyed property, medical and funeral expenses, and loss of income." (p. 222).

According to the study conducted in Cyprus, motor insurance is the largest class of non-life business mainly because of its compulsory by law. However the findings of the study revealed that motor class of business are consistently recorded adverse/negative effects on the insurance company results. The main causes of the negative results have been identified as low premium rates charged, increased cost of claims, high acquisition and administration costs, and inadequate investment income (Demertriou, 2002).

According to Swiss Re (2008) insurance Profits are primarily determined by underwriting performance i.e. losses and expenses, which are affected by product pricing, risk selection, claims management, and marketing and administrative expenses); and second, by investment

performance, which is a function of asset allocation and asset management as well as asset leverage. In the following sections, let us see the impact of these factors in detail.

2.4.1. Motor Insurance Premium Rating

The role of healthy competition in a business environment is indispensable for economic growth and development. Also in the insurance industry an insurer must normally compete in order to satisfy its customers thereby realizing reasonable profit by charging reasonable, adequate and fair prices. The determination of premium (insurance price) initially emanates from the law and some business considerations. For example in many parts of the world, Motor Third Party Liability (MTPL) insurance premiums will be set by tariffs and formed part of the regulations of the motor legislation. The rates set by the tariff are the maximum that could be charged by insurance companies and was considered low for most types of vehicles, especially private saloon cars.

The premium charged to the insured must represent the risk introduced to the insurance company and allow an acceptable level of profit margin. However, in a competitive market such as motor insurance, the actions of competitors play an important role as well. For example according to the survey conducted in Cyprus, possible reaction companies fear they will face from competition and insured's alike, and the absence of statistical information and qualified personnel which would guide the market in calculating the correct premium to be charged was cited as the main causes to charge an equitable level of motor insurance premiums (Demetriou, 2002).

Similarly, in most countries of the world, the government determines, after consulting with the insurance industry, on the cost of motor insurance premiums. In many LICs, the third party premium charges are influenced by transport fleet operators. The lowest third party premium for a private car was reported to be approximately £16 while in India, it was about £10 for a motor vehicle with greater than 1500cc (£7 for less than 1500 cc). Such low premiums obviously affect not only the potential compensation amounts available but also on the sensitivity of the premium to any pricing incentives.

Adjusting insurance premiums to reflect perceived risk is the traditional, if not necessarily effective, road safety intervention adopted by insurers (Thomas, 2002).

It is standard practice to base the insurance premium on the vehicle type, and many countries also consider geographical location. For example in the UK government allow premiums to be set by the insurers and many factors can influence the price. UK insurers offer premium reductions on the basis of age, sex, additional driver training, and just recently, an insurer is offering to charge on the basis of mileage with a black box fitted to the vehicle. Other countries use penalties to discourage drink driving. In the UK, drivers convicted of a drink driving conviction will experience difficulty in finding an insurer and their premiums will double in price. The impact of a drink driving conviction will also affect the insurance premium for several years (Thomas, 2002).

The bonus malus system is also adopted by some motor insurers in some parts of the world. It refers to the use of premium discounts for claim-free driving and surcharges for crash involvement. For example study shows that no-claims discounts (NCD) are still popular in the UK, British Columbia and Sweden, with discounts up to 75 per cent available in the UK (OECD, 1990). Even in countries where NCDs are popular, such as the UK, the ABI acknowledges NCDs are not thought to be effective in reducing collisions. NCDs are believed by many to encourage non-reporting of claims, especially minor claims, rather than safer driving.

On the other hand, there are also penalties on claim compensation if policy holders are found to have contributed to the crash (or casualty severity), or if they have breached their policy conditions.

Motor insurers are commonly believed to be able to encourage safer driving habits by offering rewards and financial incentives for additional training and for not being involved, or at least not reporting any claim. The most common variable in third party insurance premiums appears to be a no claims discount. However, this is not believed by the insurance industry to lead to safer driving or fewer collisions but at best, reduced reporting of claims. No claims discounts remain popular but they should be viewed more as a marketing tool than as an effective road safety intervention.

On the other hand insurance premiums are made up of different parts, including the cost of estimating, collecting and managing the premiums, the cost of paying the claims, taxes, levies, duties, reinsurance costs, the profit margin and the cost of the insurance company administering the insurance cover, and the cost of insuring the particular valuable.

Insurance companies typically set premiums depending on the amount of risk the insured valuable as of being damaged, lost, stolen or injured. For instance, with car insurance, premiums may be based on the age and sex of the main driver and their driving experience and accident or traffic conviction record; who else may be driving the vehicle; where the vehicle is used or kept; what the vehicle is used for, for instance if the vehicle is used for business purposes, as this may mean it will be driven more and is more likely to be involved in an accident; the vehicle's value, if the car is an exotic import with expensive and hard-to-get parts; and Previous claims record (CGU, 2004).

Family cars with moderate repair costs may be cheaper to insure than large or powerful cars, which may be more expensive to repair.

Some people may pay more for their insurance than others because their risk of an accident or theft is higher. Others, for example, older drivers, may pay less, because they are statistically less likely to have a car accident.

Speeding Convictions - there is a likely connection between the number of speeding convictions a person may have and their likelihood of making an insurance claim. Sometimes people with speeding convictions may pay higher premiums until their driving record improves (CGU, 2004).

Drink Driving Convictions - Drink driving convictions are taken very seriously by insurers. Convicted drivers returning to the roads may face difficulty in obtaining insurance and may have to pay far higher premiums than before their conviction. The level of cover available may be reduced - for example from comprehensive down to third party fire and theft. These higher premiums and cover restrictions may apply for a number of years (CGU, 2004).

People should look after their car - Insurance policies may require that the car is in a roadworthy condition. If the car is not roadworthy, it may affect the insurance cover.

When buying or renewing motor insurance, the insurer's questions need to be answered truthfully. For instance the insurer needs to be informed about the details, or any changes to details such as address, occupation, and type of car and motoring convictions (CGU, 2004).

The price of insurance is important for different reasons, first it has a direct impact on the amount of revenue the insurer earns, second it affects the volume of policies the insurer sold and finally the premium must cover anticipated claims and other expenses (Morley, 2009).

From the above statement we can understand that charging appropriate level of premium is very important from two points of view. On the one hand if the insurer charged inadequate level of premium it will have an adverse effects on the revenue account of insurer and the insurer cannot able to cover anticipated claims and other expenses and may become bankrupt. On the other hand, if the insurer charged too high premium the customer may shift to cheaper companies and consequently affects the volume of policies the insurer sold. This will also has adverse impacts on the revenue account of the insurer. So assessing the risk precisely and rating it adequately in a professional manner is very important to improve the financial performance of motor class of business.

According to the market survey of UK retail motor insurance (2010), price discipline and the ability to select risk precisely were identified as the most important factors in maximizing company's profit. So as we understand from the above statement charging effective price ensure that the company will get underwriting profit and wise selection of risk will also help to minimize the loss and expense of the company (Ernest & Young, 2010).

Similarly, the effect of inadequate price on an insurance program will ultimately have a cash flow deficit if the assessment charged to household or firm in conjunction with other sources of income is less than expected costs of insuring them (Brix & Schick, 2002).

It is clear from the above statement that the insurer will not be able to cover the expected losses and expenses if prices are inadequate. And this leads the insurer to become insolvent and discourage the investors.

2.4.2. Cost of Claims Management

Claims and loss handling is the materialized utility of insurance; it is the actual "product" paid for. Efficient claims management is critical for achieving customer loyalty (thus retention), and helps for increasing wallet share and generating positive word of mouth. It is also an opportunity to liaise with third party service providers and minimize losses. In managing the claims handling function, insurers seek to balance the elements of customer satisfaction, administrative handling expenses, and claims overpayment leakages. As part of this balancing act, fraudulent insurance practices are a major business risk that must be managed and overcome (CEA, 2007).

Components of motor claims relate to bodily injuries, deaths and property damages are: cost of labor, cost of vehicles and spare parts, level of value added tax (VAT), medical costs, court awards, fraudulent claims and administration cost in handling claims (Demertriou, 2002).

Motor claims involving bodily injury (BI) have different characteristics to material damage claims which mean that, in practice, these two types of claim are separately processed by most motor insurance companies. More specifically, BI claims are less frequent, but involve larger compensation payouts, greater variability in the payments and higher litigation rates. As a result, BI claim settlements have the largest impact on insurer's claims expenditure (Bell, 2006; CEA, 2007) and entail a long handling period.

Quarterly journal of chartered insurance institute was illustrated the claims liability of automobile products as "with automobile components, claims in this area tend to be infrequent but significant, with routine claims climbing into the tens of millions of pounds." (Gibson, 2010: 36).

According to the survey conducted in Cyprus, the main reason for the negative underwriting results of motor insurance market was identified as increased cost of claims due to increased cost of medical expense, increased cost of legal expenses, increased cost of labor, increased cost of spare parts, increased court awards, increased number of fraudulent claims and increase in VAT (Demertriou, 2002).

The study conducted in Iran shows that, the third party motor insurance is unprofitable and risky business in insurance companies. The reasons for high third-party insurance losses were identified as increasing severity and frequency of losses: due to the increasing number of vehicles, increasing risky behaviors in young driver, increasing acceleration vehicles and ... cited (Dehghani, 2011), Poor quality of some domestic cars i.e. bad quality of domestic cars such as the lack of equipped with safety systems as ABS brakes and airbags nonstandard of these cars is the reasons for the increasing financial losses, as well as becoming the financial losses to lives and property losses and finally, existence of lots of cars without insurance in the country i.e. according to the law of large numbers, whatever insured population is greater in result insurance companies will have a greater chance of success in loss management (Asli, 2012).

Another reason is lack of accuracy of the premium and failure to observe the user type of vehicle made many insurers in loss. That is the user type in receiving premium is not obeyed that is mainly due to non-compliance with the principle of good faith as the basic principle of insurance. From the above statement we infer certainly that, personal cars pay lower insurance premiums than non-personal cars, because non-personal cars such as taxis, school bus are riskier more than personal car. Nevertheless, the insurance companies without attention to their user type take same premium from them that causes losses for insurance companies and have serious consequences for at-fault drivers when compensation payment. More over the existence of old and non-standard cars, particularly old heavy vehicles are one the reason of high losses caused by third-party motor insurance. Due to the risk of technical defects of these cars and their problem in causing accident, taking the same premium for cars top model would not be correct way and it increases the claims ratio of the insurers (Asli, 2012).

2.4.3. Acquisition and Administration Costs

The second most important costs and expense that affect the profitability of insurance company is the high commission rates paid to the agents/brokers who introduce the business to insurance companies, and direct and indirect administration costs in relation with this class of business.

The cost of acquiring business depends very much on the way business is sourced to the companies. Most of the motor insurance business is introduced to insurance companies through

agents and/or brokers who are remunerated by way of commissions of at least 20%, which is considered high (Demertriou, 2002).

The cost of policy administration and handling claims are the other most important factors that have a negative impact on the profitability of insurance company.

2.5. EFFECTIVE FACTORS FOR MOTOR ACCIDENT

The study of World Health Organization (WHO) estimated that 1.17million deaths occur each year worldwide due to road traffic accidents. A breakdown of the figure indicates however, that about 70 percent of the deaths occur in developing countries. The increased rate of fatal road traffic accident worldwide has been attributed to population explosion and increased motorization. Increased motorization may be characterized briefly as the “automotive revolution”, that is the motorizing of urban population especially in the developing countries.

Traffic crashes also has an impact on the economy of developing countries at an estimated cost of 1-2% of a country’s GNP per annum, as a result of morbidity, mortality and property – related costs (WHO, 2012).

Causes of motor vehicle crashes are multi-factorial and involve the interaction of a number of pre-crash factors that include people, vehicles and the road environment (Haddon, 1980; AMA, 1983; Robertson, 1992). Human error is estimated to account for between 64 and 95% of all causes of traffic crashes in developing countries (TRL, 1990; Atubi, 2009c). A high prevalence of old vehicles that often carry many more people than they are designed to carry, lack of safety belt and helmet use, poor road design and maintenance and the traffic mix on roads are other factors that contribute to the high rate of crashes in less developed countries.

Similarly, the evaluation and analysis of traffic accidents in Iran indicates that human is one of the major factors affecting accidents. In general, the human factor effects on accidents by four main ways as following (Doerpinghaus& et al, 2008):

- *How to Drive*: how to drive is a sign of personality and traits of driver. Behaviors such as speed and illegal overtaking, not to observe minimum distance to the vehicle in front, left shift, disregard for other vehicles and traffic lines and signs, driving, driving when tired

and aggressive conditions towards others or a gaucherie due to improper training, inexperience, bad decisions are effective human factor on accidents.

- *Gender and age:* mainly young people have more risky behavior than older people. In addition, studies have shown the influence of gender on risky behavior and men show more risky behavior compared to women and driving accuracy rate in women is higher than men (Borodolini and Giacomo, 2011).
- *Sensory and perceptual mistakes:* these mistakes are caused by factors such as incorrect look at surroundings, level of consciousness, confusion, low concentration and traffic mistakes.
- *Reduction of driver's physical and mental power:* these factors can be such as drug abuse, certain medications, illness, and so on.

Factor of environment (road) can be an effective factor for accidents. It can be categorized under the following general framework:

- *Geometric Design:* Geometric design includes intersection design (Distances of vision, directing traffic in the traffic lanes, and control of traffic entry and exit points, etc), evaluation of engineering features of direction at the horizontal and vertical direction and design of cross-sections.
- *Fine and Coarse Texture of Road Surfaces:* Fine and coarse textures of road surfaces consists of slippery road surface, relationship between speed and resistance against possible slips, uniformity of road surfaces.
- *Road signs and lines:* These signs are including prohibitions and components relating to road safety such as design and technical and engineering aspects of road that impact traffic safety, things that increase safety of vehicles, training programs for road users, development or revision of the relevant provisions of the road transportation, full and proper implementation of the provisions relating to road transportation, relief and aid after accident.

- *Transportation safety management:* Generally, transportation safety management is defined in framework of issues that related to the permitted speed and how to control them, control of intersections, one-way systems and parking.

Similarly, in Ethiopia, the findings of the study conducted by united nation economic commission for Africa indicated that more than 90 per cent of the traffic accidents were caused by human errors. Of these accidents, drivers are indicated as responsible causes in about 89 per cent (UNECA, 2009).

Accordingly, the major causes of traffic accidents are failure to give way for pedestrians, followed by over speeding and failure to give way for other vehicles in that order (UNECA, 2009). Similarly, the major causes of fatal accidents in their order of importance are failure to give way for pedestrians, over speeding, failure to respect right hand rule. The causes of driver errors are many which include inadequate training, driving under the influence of alcohol, drug or Chat, and others. The police traffic accident statistics in 2007/8 indicated that over 5 % of the fatal accidents were occur when driving without having a driving license.

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1. INTRODUCTION

In the previous chapter the pertinent literature to this research project have been reviewed. This chapter was cover the research design and methodology being used in this research. For this purpose, first research design was discussed. Second, population and sampling techniques were explained. Third, types of data and data collection tools were discussed. Fourth and finally, procedures for data collection and data analysis method were considered through this chapter.

3.2. RESEARCH DESIGN

Based on the research objectives and questions this research has both descriptive and explanatory aspects. Because the objective was to assess the financial performance of motor insurance business in Awash insurance company for the past six years of operations and potential remedial actions that could be tested to address the problems. The reliance of this explanatory study was on qualitative techniques, in-depth interviews with professionals i.e. description.

3.3. POPULATION AND SAMPLING TECHNIQUE

The total population from whom the data were obtained is city branches in Addis Ababa and head quarter motor claims employees of Awash Insurance Company.

For this study, a non-probability sampling of purposive sampling techniques was adopted and followed by convenience sampling which was also used to obtain responses from different groups of Awash insurance branch's in Addis Ababa and, employees and managers of different department in head office. Accordingly, twenty seven employees from different branches in Addis Ababa and five employees from motor claims department were selected purposefully in order to respond the questionnaire of the researcher. They were selected based on their accessibility, proximity, willingness to respond and convenience.

Four questionnaires were purposefully allocated to Bole grand main employees, three questionnaires for Finfinne main branch, six questionnaires for three grade III branch's in Addis Ababa (Kolfe branch, Teklehaimanot branch, and Nefase-silk branch), six questionnaires for three grade II branch's (Central merkato branch, Piazza branch, and Gotera branch) and eight questionnaires for four grade I branch's (Kazzanchis branch, Sebategna branch, Sheger branch, and Gulele branch) totally twenty seven questionnaires were purposefully distributed.

3.4. TYPES OF DATA AND TOOLS

For this research work both primary and secondary data were used and collected by using different tools of data collection. Primary data was collected through questionnaires and in-depth interview methods. The questionnaires were addressed to branch employees of Awash insurance companies in Addis Ababa as well as claims employees at head office. Furthermore, data were also obtained from NBE, Federal Police Commission, Federal Transport Authority and Insurance Fund Office. In-depth interview with prominent practitioners and experienced department managers at Awash Insurance head office were also conducted.

The questionnaires were structured as it only allowed a limited response options for the respondents. However, it was contain option for respondents that want to provide additional narrative for the respective questions. The questionnaires were circulated to branch managers, branch employees, and claims department employees to obtain response from different perspectives.

Secondary data were also gathered from the books of accounts of the insurer annual reports, pamphlets, business plan and performance measurement documents, audit reports, government offices mainly the National Bank of Ethiopia, Road Transport Authority, Federal Police Commission and Insurance Fund Office.

The data of insurer for the past six years on motor insurance business were employed to look into the contribution of motor insurance business. The total premium, the premium from motor class of business, the claims on motor class of business, losses and expenses, investment performance as well as other pertinent quantitative and qualitative data of insurers for the past six years were reviewed to assess the financial performance of motor insurance business in

Awash Insurance Company. Quantitative data on the motor insurance business of insurer and the share of other non-motor insurance business portfolios were also considered. Furthermore, data on vehicles registration and motor vehicle accidents for the past six years were also acquired from the relevant institutions. These data were help to investigate the relationship between number of vehicles insured and magnitude of motor vehicle accidents in terms of its contribution on the insurance company financial performance.

3.5. PROCEDURES OF DATA COLLECTION

Primary data were collected through questionnaires and in-depth interview with professionals of Awash insurance company. Secondary data were collected by using documentary method i.e. internets, proceedings, reports, survey based secondary data. Besides, the template forms with specific fields were employed to obtain relevant quantitative data from Government institutions such as the National Bank of Ethiopia, Federal Transport Authority, and Federal Police Commission.

3.6. METHODS OF DATA ANALYSIS

Regarding data analysis, descriptive statistics such as proportion (percentage), tabulation, narrative, scale and trends were employed to analyze and interpret the data obtained on motor insurance business.

In the descriptive statistics, the basic summary features in the data that depict the nature of the variables were employed. Intervals and ratios were also used after the tabulation of data. Then, interpretations were made based on the data analysis in order to arrive at managerial implications.

CHAPTER FOUR

RESULTS AND DISCUSSION

4.1. INTRODUCTION

This chapter presents the findings and results based on the data collected to assess the financial performance of motor insurance on the revenue account of Awash insurance company for the period of 2007/08 to 2012/13. The investigation was done by analyzing the factors that affect underwriting/operational and investment performance of Awash Insurance Company with regard to motor class of business. Therefore, this chapter provides the results from the analysis of data and its interpretation. It is divided into six sections. The first and the second section provides the registered motor data and motor accident data in Ethiopia; the third section presents insurance business portfolios and operational performance of motor insurance in Ethiopia; the fourth section presents descriptive analysis of Awash insurance company's business portfolios, insured motor data, registered motor claims and data on losses and expenses of motor insurance; the fifth section presents the findings from the response of questionnaire, interview question, and the final section of this chapter presents discussion of the findings from the response of questionnaire and interview question.

4.2. REGISTERED DATA OF MOTOR IN ETHIOPIA

According to the data obtained from Federal Transport Authority, the numbers of registered motor vehicles in Ethiopia as at June 2013 were estimated to be more than 425,000 including three wheelers and motor cycles. The average growth in the number of vehicles based on the forecast of Federal Transport Authority is 5%. This means that on average there are additional 20,000 vehicles will be added on Ethiopian roads annually. The establishment of local vehicle manufacturing plants, economic growth of the country, the increment of foreign investors from time to time, and the increased in road network etc were among the main contributor to the growth of motor vehicles in Ethiopia.

From the total registered motors 425,000 in Ethiopia, about 200,609 vehicles were used for transporting peoples from one place to another place. These vehicles were categorized as taxis (22,892); private use vehicles (94,066); commercial use vehicles (54,191); mass organization owned vehicles (2,304); diplomatic vehicles (4,551); vehicles of aid organizations (7,009); government owned vehicles (14,570); and other vehicles (1,026).

This category of vehicles constitutes about 47 percent of the total registered vehicles in Ethiopia. From this we can infer that the more these vehicles engaged in accident, there is high possibility of deaths and bodily injuries to the person.

Furthermore, the data also shows that the remaining vehicles about more than 224 thousand vehicles were categorized as dry cargo vehicles, liquid cargo vehicles, motor cycles as well as dry cargo and liquid cargo trailers.

However, according to the annual report of Ethiopia insurance fund office, as at June 30th 2013 only about 92 percent of the registered motor vehicles were insured against the third party compulsory insurance (IFO, 2013). Similarly, on the other hand the motor vehicle insured on comprehensive basis were not more than 35 percent of the registered motor in Ethiopia (IFO, 2011).

From these data that about 8 percent and 65 percent of the registered motor vehicle in Ethiopia have not insured for compulsory third party insurance and comprehensive basis respectively. As indicated in the literature part of this study, as the operation of insurance risks have been based on the law of large numbers i.e. if sufficient number of similar risks should not be pooled together to spread the risks it will have a negative impact on the revenue account of the insurer.

4.3. MOTOR ACCIDENT DATA IN ETHIOPIA

The data on motor vehicle accidents is summarized for the period from 2007/8 to 2012/13 as follows:

Table 4.1: Motor Vehicles Accident Data for the period 2007/08 to 2012/13

S/N	Year	Deaths	Bodily injuries		Property damage (Number of accidents)	Property damage estimated (Birr in millions)
			Major	Minor		
1	2007/08	2161	3376	3773	15086	82
2	2008/09	2613	4177	4332	15695	184
3	2009/10	2121	2789	3655	13677	326
4	2010/11	2541	3545	4570	18469	159
5	2011/12	3117	4206	4916	21532	448
6	2012/13	3362	4963	5875	25517	527

According to WHO data, road crashes are the 9th biggest cause of death, killing 1.2 million people annually, and projection is made that this could rise to 2.4 million by 2020, with 85 percent of this increase being in low- and middle income countries. It also costs developing countries a staggering 1-2 percent of their gross domestic product. Data on Ethiopia that road traffic accidents cause deaths reached 22,786 per year Or 2.77 percent of the total deaths in the nation. The age adjusted death rate of Ethiopia is 37.83 per 100,000 and Ethiopia ranks 12th globally in this regard (World Health Rankings, 2012).

The data of federal police report shows that fatal and injury crashes totaled 66,115 over a six year period (July 2005 - June 2011). The composition of fatalities and injuries was 22% and 78% respectively. Fatalities in terms of road users (drivers, passengers, and pedestrians) were 7.36%, 39.21%, and 53.43% respectively.

Failing to observe the priority of pedestrians and speeding were the major causes of crashes attributed by police. Commercial vehicles, minibuses and buses were involved in the majority of crashes, while automobiles (small vehicles) were less involved in crashes relative to other vehicle types, partially because small vehicles tend to be driven fewer kilometers per annum. According to the data, commercial vehicles were involved in 38.4% of fatalities and 37.8% of injuries in the six-year period. Minibus taxis and buses were also involved in 34.5% of fatalities. However, trucks and buses currently make up only 18.22% and 12.49% respectively of the vehicle population in the country.

The highest number of crashes (fatal, injury, and property damage) involved drivers in the 18–30 year age group (45%) and in the 31-50 year age group (35%). The drivers in the age group 18-30 were involved in more crashes, followed by the age group 31-50 (Federal Police Commission, 2011).

On the other hand, according to the Federal Transport Authority report of August 2012, study was conducted to register road accident fatalities on Addis –Adama Street from 2008 to 2010. In the period, 1264 accidents caused the deaths of 566 persons. From this 188 deaths fatalities were caused by 305 minibuses; 139 deaths fatalities were caused by 294 light trucks; 59 deaths fatalities were caused by 142 automobiles; 50 deaths fatalities were caused by 120 pickup vehicles; 80 deaths fatalities were caused by 237 heavy trucks; and 50 deaths fatalities were caused by 166 truck and trailers.

As per the study conducted by Federal Transport Authority in March 2011, from the total 1339 accidents, 270 accidents or 20% were caused by failure to give-way to pedestrians; 270 accidents or 20% were caused due to over-speed driving; 202 accidents or 15% were the result of failure to maintain required distance from the other vehicle; 103 accidents or 8% were the result of improper overtaking; and 494 accidents or 37% were caused due to other reasons than those mentioned above (Federal Transport Authority, 2011).

Both the above data indicated that most of the motor accidents in Ethiopia result from the negligence of road users/ human factors to abide by the road traffic regulations.

The national data at the Federal Transport Authority affirms that more than 2200 deaths, more than 8000 bodily injuries and more than Birr 500 million of property damages occur annually in Ethiopia (Federal Transport Authority, 2012).

4.4. BUSINESS PORTFOLIO OF INSURANCE INDUSTRY

Data on the portfolio of insurers in Ethiopia for the past six years from 2007/08 to 2012/13 in terms of GWP is data compiled from NBE and summarized in the Table below.

Table 4.2: Insurance Business Portfolios in Ethiopia for the period 2007/08 to 2012/13

S/N	Class of Business	Years of operations					
		2007/08	2008/09	2009/10	2010/11	2011/12	2012/13
1	Fire and Lightning insurance production (in millions)	79	92	108	186	296	418
2	Marine insurance production (in millions)	230	293	388	579	814	1025
3	Motor insurance production (in millions)	508	582	771	1082	1861	2605
4	Workmen's compensation insurance production (in millions)	38	42	50	57	65	74
5	Other class of business production (in millions)	334	371	508	617	680	751
	Total	1,189	1,380	1,825	2,521	3,716	4,873

As we can see from the above table, the average annual growth of general insurance business from 2007/08 to 2012/13 was 33.16 percent. While the average annual growth rate of motor insurance production from 2007/08 to 2012/13 was 40 percent. It is clear that the contribution of motor insurance to the insurers production portfolio for the years from 2007/08 to 2012/13 account in average 45.65 percent.

4.4.1. Motor Insurance Gross and Net Written Premiums

Data on motor insurance gross and net written premium of insurers in Ethiopia for the past six years from 2007/08 to 2012/13 is compiled from NBE and summarized in the Table below.

Table 4.3: Motor Insurance Written Premiums in Ethiopia for the period 2007/08 to 2012/13

S/N	Year	Motor Insurance Gross written Premium (million Birr)	Motor Insurance Net Premium earned (million Birr)	Motor insurance ratio of Net to Gross Premium
1	2007/08	508	483	95%
2	2008/09	582	550	94%
3	2009/10	771	735	95%
4	2010/11	1082	1011	93%
5	2011/12	1861	1778	95%
6	2012/13	2605	2423	93%

Gross written premiums are the gross amount payable by the insured to which the insurer is contractually bound within the accounting period regardless of the period of cover.

Net premium earned refers to the net premium for which cover has been provided in a given period. It is the result obtained after deductions of premium ceded and unearned premium for unexpired risks plus change in provision for earned premium for the expired risks at the end of the period.

4.4.2. Motor Insurance Claims Incurred and Loss Ratio

Data on motor insurance net premium written, net claims incurred and loss ratio of insurers in Ethiopia for the past six years from 2007/08 to 2012/13 is data compiled from NBE and summarized in the Table below.

Table 4.4: Motor Insurance Claims ration in Ethiopia for the period 2007/08 to 2012/13

S/N	Year	Motor Insurance Net Premium (million Birr)	Motor Insurance Net Claims incurred (million Birr)	Motor Insurance Loss ratio (ratio % from Net motor premium)
1	2007/08	483	386	80
2	2008/09	550	454	82
3	2009/10	735	593	81
4	2010/11	1011	836	83
5	2011/12	1778	1243	70
6	2012/13	2423	1,914	79

The trend of claims incurred and loss ratio from motor insurance business at industry level as indicated for the six years was on average 79 %. It is to be noted here that this loss ratio is only the average as compared for the six years taken and it appears that closer look of the motor claims in terms of the volume of business and the administrative expenses allotted to motor claims would be at a higher percentage than the average 79% had insurers have the mechanism of specifically keeping the expenses incurred for managing motor claims.

According to the study done earlier on motor risks and current status of motor insurance in Ethiopia, motor insurance was the largest contribution to the portfolio of insurers in Ethiopia and the performance of the motor class of business was loss making (NBE, 2004).

4.5 MOTOR INSURANCE PERFORMANCE IN AIC

Motor insurance in Awash Insurance Company is the largest class of business in Non-Life/General insurance sector with a premium volume of more than birr 775 million for the six years 2007/08 to 2012/13. In the following sections the performance of motor class of business in relation with other portfolio of AIC has been presented as follows.

4.5.1 Premium by Class of Business

Data on the portfolio of Awash Insurance Company for the past six years from 2007/08 to 2012/13 in terms of GWP is compiled from AIC and summarized in the Table below.

Table 4.5: Business Portfolio of Awash Insurance Company for the period 2007/08 to 2012/13

S/N	Class of Business	Years of operation					
		2007/08	2008/09	2009/10	2010/11	2011/12	2012/13
1	Fire and Lightning insurance (in millions)	7	8.20	9.44	11.44	15.25	17.39
2	Marine insurance production (in millions)	17	15.14	16.22	22.27	33.05	33.60
3	Motor insurance production (in millions)	59	63.83	84.44	128	217.17	222.21
4	Workmen's compensation insurance production (in millions)	2.48	2.63	3.28	4.51	5.80	6.05
5	Other class of business production (in millions)	16.66	25.53	25.13	34.71	51.51	67
	Total (in Millions birr)	102.14	115.33	138.50	201	322.78	346.25

As we can see from the above table the annual growth rate of non-life business of Awash Insurance Company was about 30% for the past six years of operations. The average annual growth rate by class of business for the past six years was 16%, 18%, 30%, 20% and 33% for fire, marine, motor, workmen's compensation and other class of businesses respectively. On the other hand the average contribution of each class of business to the total GWP for the past six years was 6%, 13%, 61%, 2% and 20% for fire, marine, motor, workmen's compensation and other class of business respectively. We can easily understand from the data that motor class of business was take the lion share in contributing to the GWP of Awash Insurance Company. Its contribution in average was about 61% of the total production of Awash Insurance Company for the past six years of operation. Its contribution was above the industry average of 45.65 percent for the past six years. Using graphs, the above data can be presented as follows:

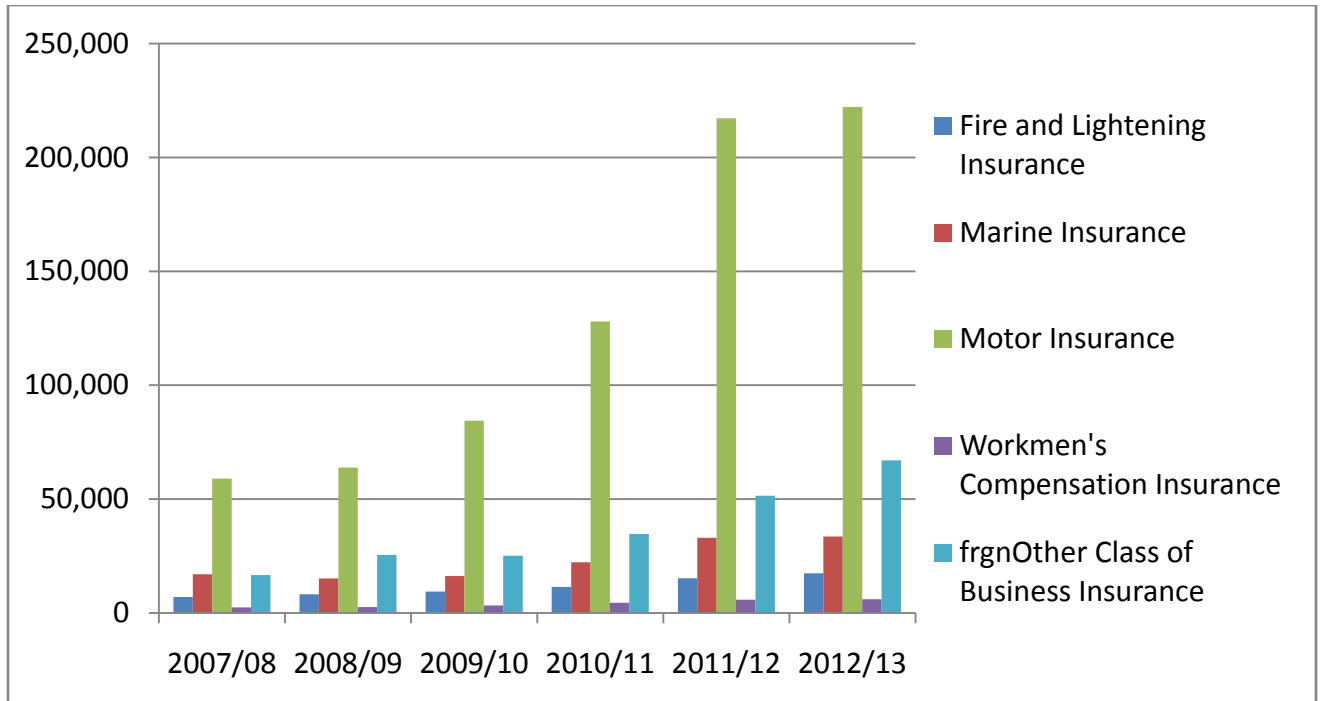


Figure 4.1: Bar Graph showing GWP in '000 birr of non-life insurance of AIC, from 2007/08 to 2012/13

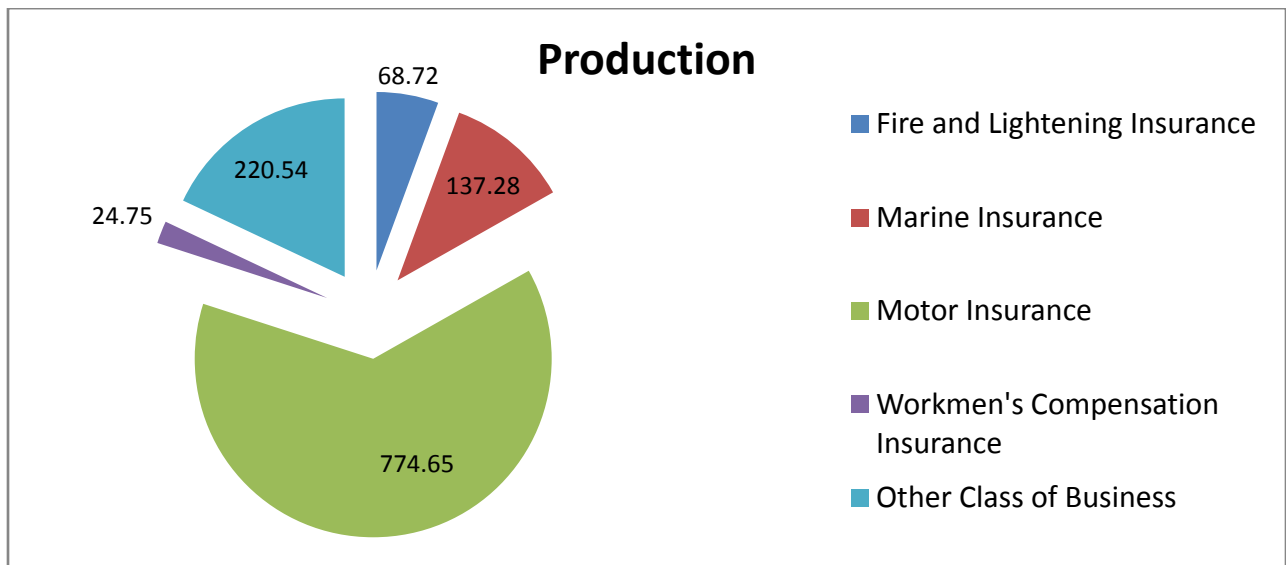


Figure 4.2 Business portfolio of AIC in Million Birr from 2007/08 to 2012/13

Figure 4.1 and 4.2 clearly show the dominant position of motor insurance production to the insurers' portfolio and the increasing trend of motor insurance production is quite noticeable.

4.5.2 Claims Incurred by Class of Business

Data of incurred net claims incurred in million by class of business of Awash Insurance Company for the past six years from 2008/09 to 2012/13 is compiled from AIC and summarized in the Table below.

Table 4.6: Net claims incurred of Awash Insurance Company for the period 2008/09 to 2012/13

S/N	Class of Business	Years of operation					
		2008/09	2009/10	2010/11	2011/12	2012/13	Total
1	Fire and Lightning insurance	1.6	2.08	0.41	1.6	2.6	8.29
2	Marine insurance	11.36	2.40	9.30	5.3	9.6	37.96
3	Motor insurance	51.64	68.04	92.30	156.42	182.20	550.70
4	Workmen's compensation	1.71	2.12	2.45	3.10	2.80	12.18
5	Other class of business	8.60	8.33	17.50	19.40	8.6	62.43
	Total	75.20	83	122	185.73	205.73	671.56

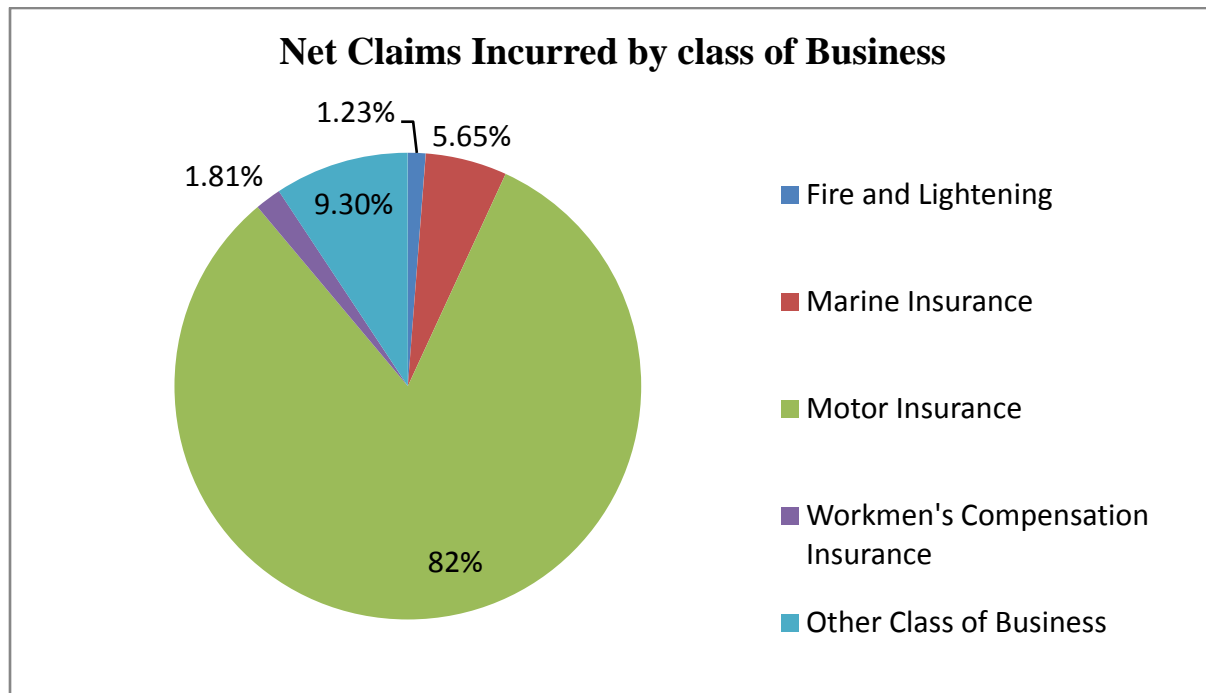


Figure 4.3 Ratio of Claims incurred of AIC from 2008/09 to 2012/13.

4.5.3 Motor Insurance Written premium and Claims incurred

The data of Awash Insurance Company regarding the ratio of Motor Gross written premium and Gross claims incurred as well as net earned premium and net claims incurred for the study period has been presented as follows:

Table 4.7: Written premium and incurred claims of AIC, for the period 2007/08 to 2012/13

S/N	Year	Motor Insurance			Motor Insurance		
		Gross written Premium (million Birr)	Gross Claims incurred (million Birr)	Gross Claims Ratio (%)	Net Earned premium (million Birr)	Net Claims incurred (million Birr)	Net Claims/ loss ratio (%)
1	2007/08	59	52.63	88	52.66	46	87
2	2008/09	63.83	47.60	74	55.93	44.31	79
3	2009/10	84.44	71.00	84	71.70	61.23	85
4	2010/11	128.00	93.02	73	97.00	77.30	80
5	2011/12	217.17	148.00	68	164.40	134.80	82
6	2012/13	222.21	182.20	82	173.32	149.40	86

It is clear from the above data that the average net claims ratio of motor class of business was about 83.20% of the net earned premium for the past six years of operations.

4.5.4 Performance of Motor Insurance/Combined Ratio

In order to measure the performance of this class of business and draw the right conclusions, we must consider the expenses and commissions paid as well since the performance of insurance companies is measured by examining their underwriting results being net earned premiums less claims incurred, less expenses and commissions paid. It has been further analyzed in table below:

Table 4.8: Combined ratio of motor insurance of AIC, 2007/08 to 2011/12

S/N	Descriptions	Years of operation					Total
		2007/08	2008/09	2009/10	2010/11	2011/12	
1	Net Earned premium	52.66	55.93	71.70	97.00	164	441.29
2	Net claims incurred	45.95	44.31	61.23	77.30	134.77	363.56
3	Brokerage commission	1.76	2.04	2.71	3.77	5.34	15.62
4	Operating Expense	5.30	6.51	9.36	12.41	14.84	48.42
5	Total Outgo	53.01	52.86	73.30	93.48	154.95	427.60
6	Underwriting Surplus	(0.35)	3.07	(1.60)	3.52	9.05	13.69
7	Administrative expense (indirect cost)	2.72	7.10	6.14	17.49	24.16	57.61
8	Profit from insurance business	(3.07)	(4.03)	(7.74)	(13.97)	(15.11)	(43.92)
8	Combined Ratio= 5+7/1	107%	102%	113%	107%	104%	110%

As we can see from the above table that the average combined ratio of Awash insurance for the past five years was more than 100%. This indicates that the company was made an underwriting loss from motor insurance businesses. The combined ratio of more than 100% has not been acceptable by many insurers. An alternative way to measure profits is through overall results from operations. Overall operating performance (gain or loss from operations) and gain/loss from investment of Awash Insurance Company also reveals that losses incurred from

underwriting activities could not be offset by the investment income generated from this class of business. This was due to the fact that there was no available cash from motor class of business to earn investment income. Generally, investment income generated from this class of business could not help the company to offset underwriting losses.

Using the bar chart the ratio of the losses and expenses associated with motor class of business described above was presented as follows:

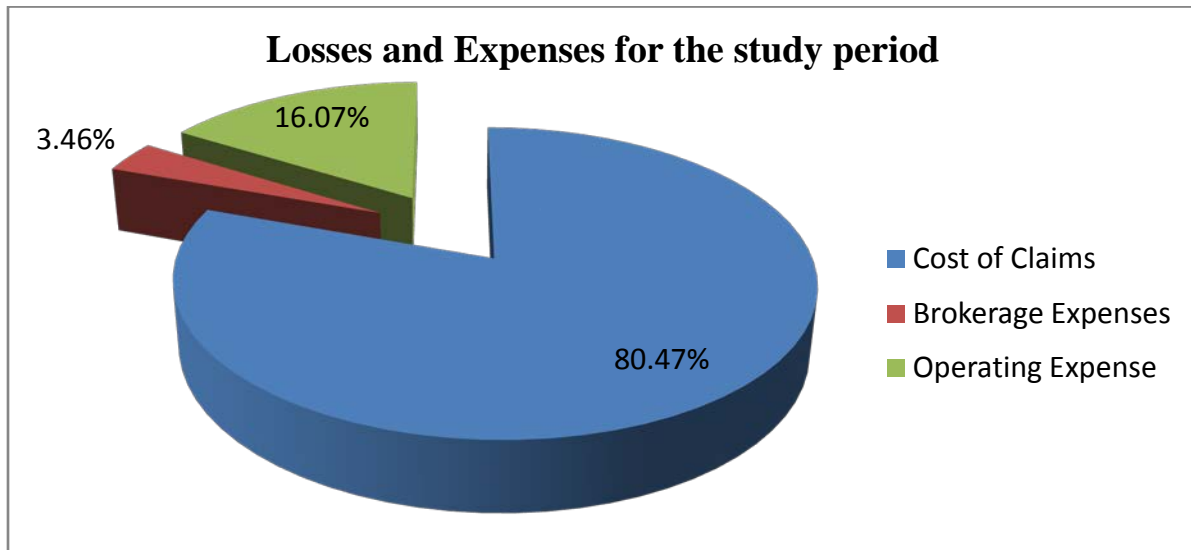


Figure 4.4 Ratio of Motor Insurance losses and expenses of AIC from 2007/08 to 2011/12.

The combined ratio measures operational underwriting profitability and allows the sources of profitability to be highlighted. An improvement in the combined ratio can be due to higher premiums, better cost control and/or more rigorous management of risks covered in insurance classes. Typically, a combined ratio of more than 100 percent represents an underwriting loss for the non-life insurer.

From the overall operating direct and administrative indirect costs of AIC for the past five years about more than 68% of unavoidable cost/fixed cost of the company was covered by motor class of business. This is one of the reasons that the company has not to quit to underwrite this class of business since its loss is not more than the fixed cost of the company i.e. the share of motor class of business in covering the operating and administrative cost of the company was about more than 68% even though it was reported as a loss leader.

The other reason was due to the need of corporate clients to insure their properties in package policy .i.e. the company may loss other businesses by avoiding this class of business and to secure a market share.

4.6. RESPONSES ON QUESTIONNAIRE AND INTERVIEW QUESTION

4.6.1. Responses on Questionnaires

The questionnaire has three sections: the first section presents profile about general information, the second section provides information regarding motor insurance underwriting, the third section presents motor insurance claims management, and its problems. Specific statements were provided under each section to obtain responses from the sampled respondents of branch and claims department employees of Awash Insurance Company that are selected on the basis of convenience. The statements were positively stated so that the responses were assigned 1,2,3,4, and 5 on the level of agreement from strongly disagree to strongly agree by using the Likert Scale. This method is employed to measure the attitude of the respondents in two categories i.e. motor underwriting and claims management category.

In the first category, response rate was twenty one out of twenty seven respondents to motor underwriting branch's (78%) and although only fifteen or 56% of the responses are usable. In the second category, all the sampled claims department employees provided response to the survey. From the respondents in the first category (branch employees), eleven respondents were having more than five years experience in the sector while four respondents have below five years experience. The respondents in the second category (claims department), three employees have more than five years experience in the sector while the remaining two respondents have below five years experience. The data is presented after undertaking the reverse coding of the Likert Scale from strongly agree with five marks while strongly disagree has one mark.

Summary of the responses from branch and claims department employees of AIC has been summarized as follows:

Table 4.9 Responses on Underwriting (motor insurance premium rating)

S / N	Item	Total numb er of Respo nses	Strongl y agree (5)		Agree (4)		Neutral (3)		Disagre e (2)		Strongl y Disagr ee(1)	
			N	%	N	%	N	%	N	%	N	%
1	Motor insurance premium rate determination should regularly consider the impact it has on the business of the insurer	15	8	53	4	27	3	20				
2	Motor insurance policies are preferable to be driver based than vehicle based (so that drivers features such as gender, age, occupation, experience of accidents, driving crimes etc. be considered during premium setting).	15	7	47	4	27	2	13	2	13		
3	It is appropriate if the environmental and traffic places be considered in determining motor insurance premium rate	15	9	60	3	20	3	20				
4	It is appropriate if insurance policy cancellation is allowed in case of drivers conviction for driving under the influence of alcohol and use of drug, and causing fatal accidents as a result of over speeding	15	12	80	3	20						
5	It is appropriate if insurers are allowed to increase premium after a road crash resulting from drivers violation of records	15	11	73	2	13	2	13				
6	It is appropriate to adjust motor insurance premium based on the loss ratio of the insured	15	13	87	2	13						
7	NCD allowed to the insured helps to build safer driving behaviors	15	5	33			6	40	4	27		
8	In my branch driver violation records be considered the higher rate in determination of insurance premiums at policy renewal	15	4	27			3	20	4	27	4	27
9	CMTP insurance premium is adequate to deal with the total cost of the common pool	15	10	67	5	33						
	Total	135	79	59	23	17	19	14	10	7	4	3

The results of responses on the data presented in the above table tell us that: about 59% were strongly agreed, 17% agreed, 14% neutral, 7% disagree and 3% strongly disagree about questionnaires regarding motor insurance premium setting/underwriting motor insurance in Awash insurance company. We can again summarize these data as about 76% of the respondents were agreed, 14% neither agreed nor disagreed to the statements (neutral), and about 10% of the respondents were disagreed to the statements.

Findings from the responses on the questionnaire of motor claims department employees are summarized in table 4.10, 4.11, 4.12, and 4.13 as follows:

Table 4.10 Summary of responses on motor claims performance in general

S/N	Item	Total number of Responses	Strongly agree (5)		Agree (4)		Neutral (3)		Disagree (2)		Strongly Disagree (1)	
			N	%	N	%	N	%	N	%	N	%
1	Motor claims represents the largest share in terms of severity of losses	5	2	40	3	60						
2	Motor insurance is unprofitable and risky business in insurance companies	5	2	40	2	40	1	20				
1-2	Total	10	4	40	5	50	1	10				

The results of responses on the data presented in the above table tell us that: 40% of the respondents were strongly agreed, 50% agreed, and 10% neutral to the statements. We can again summarize these data as about 90% of the respondents were agreed that motor vehicle insurance is a risky business and sever losses in Awash insurance company, and 10% neither agreed nor disagreed to the statements.

Table 4.11 Responses on effective road related/environmental factors to motor accident

S/N	Item	Total number of Responses	Strongly agree (5)		Agree (4)		Neutral (3)		Disagree (2)		Strongly Disagree (1)	
			N	%	N	%	N	%	N	%	N	%
1	Road related factor is estimated to take the highest contributor of all causes of traffic accidents reported to the company	5	2	40	3	60						
2	Poor road design and maintenance and the traffic mix on roads are other factors that contribute to the high rate of motor accident	5	3	60	2	40						
1-2	Total	10	5	50	5	50						

The results of responses on the data presented in the above table tell us that: 50% were strongly agreed and 50% agreed to the statements of effective road/environmental related factors to motor accident reported to Awash insurance company. We can again summarize these data almost all respondent agreed that road/ environmental related factors are the main causes of motor accident reported to Awash insurance company.

Table 4.12 Responses on effective vehicle related factors to motor accident

S/N	Item	Total number of Responses	Strongly agree (5)		Agree (4)		Neutral (3)		Disagree (2)		Strongly Disagree (1)	
			N	%	N	%	N	%	N	%	N	%
1	Vehicle related factor is estimated to take the highest contributor of all causes of traffic accidents reported to the company	5	2	40							3	60
2	A high prevalence of old vehicles that often carry many more people than they are designed to carry are other factors that contribute to high rate of motor accident in my company	5	2	40	1	20	2	40				

3	Lack of safety belt and helmet use are also factors that contribute to the high rate of motor accident	5			2	40	3	60				
4	The higher the engine power of the vehicle the higher frequency in involving to an accidents	5	3	60	2	40						
5	The higher the engine power the higher severity in terms of damage	5	3	60	2	40						
6	Latest model vehicles are frequently involved in accident than old model	5	4	80	1	20						
7	Latest model vehicles have high severity than old model vehicles	5	5	100								
8	Private use vehicles are frequently involved in accident than commercial use vehicles	5	4	80			1	20				
9	Private use vehicles have high severity than commercial use vehicles	5					2	40			3	60
10	Familiar brand vehicles are frequently involved in accident than unfamiliar brand vehicles	5	3	60	2	40						
11	Familiar brand vehicles have high severity than unfamiliar brand vehicles	5							2	40	3	60
12	Existence of old and non-standard cars, particularly old heavy vehicles are one of the reason of high losses caused by motor insurance	5	4	80	1	20						
<i>1-12</i>	<i>Total</i>	60	30	50	11	18	8	13	2	3	9	15

The results of responses on the data presented in the above table tell us that: 50% were strongly agreed, 18% agreed, 13% neutral, 3% disagree and 15% strongly disagree about effective vehicle related factors to motor accident reported to Awash insurance company. We can again summarize these data about 68% of the respondents were agreed that vehicle factors are the main causes of motor accident reported to the company, 13% neither agreed nor disagreed to the statements, and about 18% of the respondents were disagreed to the statements.

Table 4.13 Responses on effective human factors to motor accident

S/N	Item	Total number of Responses	Strongly agree (5)		Agree (4)		Neutral (3)		Disagree (2)		Strongly Disagree (1)	
			N	%	N	%	N	%	N	%	N	%
1	Human error is estimated to take the highest contributor of all causes of traffic crashes reported to the company	5	5	100								
2	The causes of most of motor insurance accidents reported to the company could be attributed to recklessness on the part of drivers, ignorance of high way codes, over speeding etc.	5	5	100								
3	The main causes of most of the motor insurance accident was due to bad traffic situation because of the absence of effective planning, vehicle-misuse, poor management, inadequate street parking, traffic congestion and delays among other contributory factors	5	4	80	1	20						
4	Alcohol and use of chat causes many accidents reported to my company	5	3	60	2	40						
5	Driver licensing needs to be investigated, as not only are there many bogus licenses but also a very poor test procedure carried out in many Regions	5	4	80	1	20						
6	In my company failure to observe the user type of vehicle by the insured is one of the causes of motor accidents	5	2	40	1	20	2	40				
7	There is a significant relationship between different age groups of driver and a possibility of loss and young drivers have risky behavior compared to older middle-aged drivers	5	4	80	1	20						
8	Women are more carefully in driving and their accidents severity is less than men	5	2	40			3	60				

9	Behaviors such as speed and illegal overtaking, not to observe minimum distance to the vehicle in front, left shift, disregard for other vehicles and traffic lines and signs, are the main causes for motor insurance claim reported to my company	5	4	80	1	20							
10	Driving when tired and aggressive conditions towards others or a gaucherie due to improper training, inexperience, bad decisions are effective human factor on motor accidents	5	3	60	2	40							
11	Incorrect look at surroundings, level of consciousness, confusion, low concentration and traffic mistakes are the main causes of motor accident	5	1	20	1	20	3	60					
12	Reduction of driver's physical and mental power due to drug abuse, certain medications, illness, and so on are the major factors for motor accidents in my company	5	3	60			2	40					
1-12	Total	60	40	66	10	17	10	17					

The results of responses on the data presented in the above table tell us that: about 66% were strongly agreed, 17% agreed, and 17% were neutral to the response of effective human related factors to motor accident reported to Awash insurance company. We can again summarize these data as about 83% of the respondents were agreed that human related factors are the main causes of motor accident reported to the company, 17% neither agreed nor disagreed to the statements.

4.6.2. Findings from Interview Question

The problems associated with insuring motor class of business and its impact on the revenue account of Awash insurance company insurer as well as the factors that contributes to high motor loss ratio were made items of the interview questions to the concerned department managers in Awash Insurance Company and presented as follows:

- Major problems on motor insurance underwriting are: failure to charge equitable level of premiums, inefficiency to precisely select the risks, increased cost of claims and inefficiency in marketing the product and controlling the administrative costs;
- Pricing objectives of motor is to retain the existing customer, attracting new customer and making profit;
- The price for Third party motor insurance was decided by insurance fund agency;
- Premium for motor insurance doesn't vary by the age group of drivers;
- Insurance coverage is not cancelled either due to the driver conviction of driving under the influence of alcohol or speeding;
- On average motor insurance contributes more than 60% to NL production;
- Motor insurance has continuously registered a negative result on the underwriting performance of the company;
- Motor insurance is promoted through written and electronic media;
- Motor insurance has a negative impact on claims performance ;
- Costs associated with motor claims are cost of labor, cost of vehicle and spare parts, medical and funeral expenses, value added tax (VAT), Court awards, Fraudulent claims, and Administration cost in handling claims
- Motor accident has a negative impact on other class of business like workmen's compensation, personal accident and life assurance;
- The main causes of motor accident reported to the company are: lack of experience and negligence on the part of the driver (speed, overloading, not observing rules of driving, night driving); high road congestion; increasing numbers of cars that doesn't commensurate with available road; unsafe cars (mechanical imperfection of vehicles); forged driving license; poor road design;
- Current legal requirement for compensating third party deaths, medical for injury and property damages are up to birr 40,000.00, 40,000.00 and 100,000.00 per event respectively;
- Insurance fund agency compensates victims of hit and run collision; and is funded 10 percent of the premium by insurers;
- Time limit for laying a claim is 24 hours for comprehensive cover and up to 10 days for third party compulsory insurance cover;

- Available investment opportunities for insurers are buying shares, time deposit, bonds, real estate, and opening own garage;
- Investment option used by AIC are share buying, time deposit, and real estate;
- Costs and expenses in relation with motor insurance are cost of reinsurance, cost of claims, acquisition cost, marketing and administration costs;
- Profitability ratio used by AIC are combined ratio, return on investment, return on asset, liquidity ratio, among these combined ratio is mostly used.
- Limited option of investment opportunities for insurance companies to offset the negative impact of underwriting losses.

4.7. DISCUSSION OF THE FINDINGS

4.7.1. Discussion of Findings from Questionnaires

The finding from the questionnaire reveals that motor claims represent the largest share in terms of losses. The premium collected from the insured could not cover related losses and expenses of this class of business. So it was performing under losses. This could have a negative impact on the financial performance of the company. The main components of the losses arises from motor class of business was high claim costs due to high accident rate of the vehicle and these costs represents about 80.47% of the total cost for the past six years of operation. We can group effective factors for motor accident as vehicle factors, human factors, and environmental/road related factors, and review according to their features to relative justice and efficiency on determining insurance premium.

Classifying the vehicles in country based on engine power, year of make, type of use, type of vehicle (car, truck, etc.), and the maximum number of groups and categories is the common method in determining the premium. This will help insurance companies to charge appropriate level of premium and consequently minimize losses arise from accident of the car.

In this regard, it is necessary that an insurance company should give adequate attention to assess the technical specifications of the cars because speeds can be greatly influencing factors in determining the premium paid.

Application of driver features in determining premium and issuing insurance policy that most of these features can be cited factors such as gender, age, occupation, experience of accidents, driving crimes etc. For instance, when several people use a car, the problem is how this car can be insured whereas the probable risk in different people is varied. It seems that young people should be pay premium more than middle-aged people. Because evidence shows that there is significant relationship between different age groups and a possibility of loss and young drivers have risky behavior compared to older middle-aged drivers.

Paying premiums based on job classification also will be somewhat helpful. It should be noted that the type of job and the job culture has effect on quality and type of driving. If studies show that women observe more carefully aspects in driving and their accidents severity is less therefore should be pay premiums less than men.

It is necessary that traffic office record driving crimes and driving and information to provide insurance according to the driver violation records be considered the higher rate in determination of insurance premiums and for drivers with good records, deductions for the premiums be considered good discounts on premium.

Involving environmental factor and driving places is another important issue that can be considered in time of issuing insurance policy and determining premiums of insurance companies. Therefore according to significant relation between driving environment and the possibility of an accident it is necessary that driving environment should be considered in premium setting. Cooperation and coordination between relevant agencies, such as, traffic, law enforcement authorities, medical examiners, hospitals, courts and tribunals can prevent from losses and particularly unrealistic losses and collusion aroused from third party insurance claims. Creating common site among all insurance companies and organizations referred to above personal records and records for traffic violators will reduce loss and prevent rights violations of insurance companies.

4.7.2. Discussion on the Findings from Interview Question

There is no doubt that motor insurance is the most important class of business since it represents more than 60% of the gross volume of premiums written. It is also clear that motor insurance has negative profitability margins. In an effort to identify the reasons behind this negative underwriting result of motor insurance, I have discussed the issue with claims department manager, underwriting department and branch operations, finance department managers and claims officers of Awash Insurance Company. Based on the discussion the following points have been identified as the main causes for negative underwriting results of motor insurance:

- Increased cost of claims due to increased cost of spare parts, increased cost of labor, increased cost of medical expenses, increased cost of legal expenses, increased court awards, increased number of fraudulent claims, and VAT.
- Although the level of the cost of claims is continuously increasing due high accident rate, premium levels in respect of motor comprehensive cover has been decreasing from time to time due to stiff market competition and the price of Compulsory Motor Third Party (CMTP) cover was based on the tariffs set by law.
- The other most important expenses are the operating costs, brokerage commission rates paid to the agents/brokers who introduce the business to insurance companies and indirect administration costs.
- Inadequate investment income due to limited investment options and limited availability of cash.

These factors which affect the profitability/financial performance of the company have been further analyzed in terms of underwriting performance and investment performance as follows:

I. Underwriting performance

- **Premium Rating**

According to the Chartered insurance institute the price of insurance is important for different reasons, first it has a direct impact on the amount of revenue the insurer earns, second it affects the volume of policies the insurer sold and finally the premium must cover anticipated claims and other expenses (Morley, 2009).

Therefore the premium charged to the insured must represent the risk introduced to the insurance company and allow an acceptable level of profit margin. However, in a competitive market such as motor insurance, the actions of competitors play an important role as well.

In an Ethiopian motor insurance market, the premium rate for comprehensive motor insurance cover was varying from company to company. The insurance sector in Ethiopia has been characterized by strong price based competition. Most of motor insurance customers in Ethiopia have also been price sensitive. As we have seen in the literature part of this study, insurance is based on the law of large numbers and the actuaries has been considered the total population of the property to be insured while fixing the premium rate. However, according to the study of Ethiopian insurance fund office, the total number of insured vehicle on comprehensive basis in Ethiopia was about 35% of the registered vehicles. This implies that there is insufficient number vehicles insured or 65 percent of the registered vehicles in Ethiopia have not been insured. Therefore the premium charged for motor comprehensive coverage was unfair and it could not cover the expected losses and expenses, consequently it will have a negative impact on the profitability of the insurance company. On the other hand, third party motor insurance (CMTP) premiums were set by tariffs and formed part of the regulations of the motor legislation. The rates set by the tariff were the maximum that could be charged by insurance companies and were considered low for most types of vehicles, especially private cars and minibus taxis.

The main reason for charging an equitable level of motor insurance premium in respect of comprehensive cover is the possible reaction company's fear they will face from competition and insured's alike. In addition, the absence of statistical information and qualified personnel which would guide the market in calculating the correct premium to be charged made companies more apprehensive.

In order to improve the profitability performance of motor class of business in the Ethiopian insurance industry, following the general actuarial findings a more specific study should be initiated by each company to take a step further in creating and strictly following its own rating structure in a professional manner so that the sector will be developed and contributed its share to the development of the country in general and attract investors and talents to the sector in particular.

- **Claims**

The cost of claims is the main outflow of cash from insurance companies and as such it is one of the main components of premium rating. Adding the projected cost of claims to the premium is one way of taking into consideration the effect of claims on the premium structure. However as we have seen above it is not always possible to do so in a competitive market.

It is therefore imperative to find ways of reducing the cost of claims and for this to be successful we have to identify the causes behind them. Components of cost of motor claims relate to bodily injuries, deaths and property damages are: labor cost, vehicle and spare parts, medical cost, court awards, tax, and administration cost in handling claims.

The main factors affecting the cost of claims can be grouped into different categories such as: those which can be controlled and improved internally, those which can be influenced by the market, and the economy as a whole.

The administration cost of handling claims is the most obvious factor, which can be controlled and improved internally by the insurance company. These costs are the cost of collecting the information in respect of an accident, cost of processing the information, cost of investigating the claim, cost of evaluating the damages, and cost of handling the payments of claim.

These procedures can be simplified and help insurance companies to save costs through: internal reorganization by investing in information technology for example, AIC digitalize its operation by investing in information technology helps the company to save costs; actions taken by companies internally and which relate to the training of employees in enabling them to investigate claims more efficiently and identify cases of fraudulent claims, recognize cases where costs charged to the company are above normal and reduce claims handling time; and finally outsourcing the handling and investigation of claims to specialized professional may also help companies somewhat. Although this may be successful in cost reduction it may lead to loss of internal expertise and the loss of personal contact with the insured, which is very important in the retention of insurance business.

Trying to settle claims out of court to avoid protracted and costly legal actions is also one way of reducing claims costs. In order to succeed in this, insurance companies need qualified and

well trained personnel who can evaluate the cost of claims, whether this is injuries or loss of life and agree with the claimants to a just settlement without recourse to courts.

The second other main factors which affect the cost of claims are those which can be influenced by the market in general, the market can also assist in the reduction of the cost of claims by concerted actions taken aiming at the reduction of fraudulent claims. Such action can take the form of a centralized register in which all claims in excess of a certain amount are input and to which all members can have access to. In addition a separate register of fraudulent or suspicious claims can be created. The market can also get in touch with other bodies or authorities which can assist, such as the police force and seek assistance in combating fraudulent claims or improve the safety on the roads. This can take the form of increased police patrols on the roads especially on highways, the imposition of higher penalties for traffic offences, more frequent checks on the use of safety belts whilst driving and compliance with speed limits. Also breath analyzer tests help in the reduction of driving under the influence of alcohol and other drugs like chat.

In addition to the above, the market may coordinate with the ministry of transport and road authority to improve and maintain the condition of the roads regularly as well as the condition of the motor vehicles circulating in the country. Recent legislation in Ethiopia has made the use of safety belts compulsory for drivers of motor vehicles and the use of mobile phones prohibited whilst driving.

The third main factors affecting the cost of claims are those costs which can be influenced by the economy as a whole. These factors cannot be controlled by insurance companies or the market as they depend on the economy as a whole. Such factors relate to the level of inflation, indirect taxation, such as VAT and the economic situation in general. For example in conditions of economic recession fraudulent claims tend to increase.

- **Administration costs**

Reduction of administration costs in underwriting can be done by simplifying procedures, investing in information technology and training personnel. Cost reduction can be achieved by way of simplified procedures leading to reduced working time and paper work. The GIIS

underwriting software developed by AIC has been help in this regards. Call centers are also leads to cost reduction as all information is gathered by phone and logs in the computer directly thus avoiding the need to keep physical files, checking whether the proposal forms have been correctly completed, communicate with the proposer and/or the agent if information is incomplete, and to check the manual calculation of premium done by the agent to ensure its accuracy. Direct selling through the Internet has an additional advantage in that the proposal form is completed directly by the proposer thus reducing further the need for clerical staff and consequently to reduced payroll.

- **Acquisition costs**

The cost of acquiring business depends very much on the way business is sourced to the companies. According to the data of AIC, more than 40% of the GWP of motor insurance business is generated through agents and/or brokers who are remunerated by way of commissions at least 7.5% or at high15%, which is considered high.

Introducing new method of selling in the market such as direct selling and internet selling, which lead to increased direct sourcing of business and consequently reduced acquisition costs.

II. Investment Performance

The importance of cash availability for investment as a source of additional income is obvious in the insurance sector. Availability of cash is the most important factor for the viability of an insurance company in addition to the reduction of claims and other costs. New legislation no premium no cove number 746/2012 recently legislated by the parliament prohibited credit sales of all types of insurance policies except for nonprofit making government organizations. In this respect insurance companies can be benefited by immediate premium collection and investing it. It is to be clear that in addition to cash availability, the availability of investment option to the insurance industry could determine the results of their performance.

In many parts of the world, majority of the insurer's income has been generated from investment performance due to available investment opportunities. The loss incurred from underwriting results has been subsidized by the significant proportion of income generated from investment activities.

The available investment opportunities for Ethiopian insurers includes: share, real estate, bond, time deposit, and opening vehicle repair center in connection with the business of the insurer. Most of the insurer's in Ethiopia invest their money in buying bank shares up to the limit allowed by the NBE directives and generating an average return on investment of up to 30% of their shares. The other option used was time deposit saving at an average negative real interest rate of 8%. This option was not a good investment opportunities for insurers because it generates only an accounting profit not an economic profit due high inflation rate of the country. The third option used by some insurers was real estate which has been generated short and long term profits to the insurers. Diversifying the investment opportunity is very important to the insurers, however due the shortage of capital many of the insurers have a financial constraint to invest in the long term investments. The absence of stock market in Ethiopia has also limited the investment options of the insurers.

The environment in which insurance companies operate in Ethiopia is very competitive and care must be taken to ensure that insurance companies run their business prudently so as to avoid financial difficulties. The insurance supervision department of the NBE exists to supervise and control the operation of insurance companies and ensure that they are solvent, thus protecting the interests of the insured's/policy holders.

CHAPTER FIVE

CONCLUSIONS AND RECOMMENDATIONS

5.1. SUMMARY OF MAJOR FINDINGS

- The main problem associated with motor insurance is increased rate of motor accidents due to human error (recklessness on the part of driver), vehicle factor (prevalence of old vehicle), and environmental factors like poor road design and maintenance, and the traffic mix on the roads are effective factors for motor accidents;
- Motor insurance has a negative impact on the financial performance of Awash insurance company;
- The major factors that made motor insurance loss leader among other products of the insurance company was low premium charged, inefficiency in risk assessment, increased rate of vehicle accident, increased losses and expenses, low public awareness about the benefit drawn from insurance service;
- Almost 68% of the overall fixed costs of AIC for the past five years was covered by/charged to motor class of business;
- AIC portfolio was highly dependent on motor class of business
- No investment income was generated from motor class of business

5.2. CONCLUSIONS

The study aimed at assessing the financial performance of motor insurance business on profitability of Awash insurance company and to suggest ways of improving its performance so that contribution of motor class of business will be improved in the future.

Generally, insurance business in Ethiopia is not well developed. According to the report of center for financial regulation and inclusion the overall premium income from the sector represents only about 0.2% of the GDP in 2007- while in Kenya and Namibia premiums represent 2.5% and 8.1% of their GDP respectively. Lack of public awareness about the benefit drawn from

insurance, unfair market competition, underdeveloped domestic market, lack of experience and insurance technique, and absence of domestic actuarial service are some of the reasons.

Motor insurance is the largest sector in Awash insurance company's portfolios over the past six years on average by contributing about 63% of the total gross written premium in Non-life sector. Despite its largest contribution to the premium income, motor insurance business in Awash insurance company has consistently operating at a negative results and it has been subsidized by profits from other class of business. Low premium rate charged due to stiff market competition, increased cost of claims due to increased rate of motor vehicle accidents, increased administration and acquisition costs, and inadequate investment incomes are some of the reasons for negative results.

5.3. RECOMMENDATIONS

In order to improve the adverse impact of motor insurance, the following possible solutions were suggested:

5.3.1. Premium Rating

- Increase premium rates: insurance companies to charge premium rates commensurate to the risks covered. Based on the statistical information to be collected and analyzed by each insurance company the AEI should have assist the companies to maintain certain level premium rate to be charged;
- Making awareness to the public to insure/attract the required level similar exposure units
- Strictly following underwriting factors to be considered in risk assessment and risk selection;
- Young drivers should be charged more premium than older middle aged driver due to their risky behavior in driving;
- Insurers should work in partnership with Federal Transport Authority and police authorities and other law enforcement organs for the establishment of road safety and motor vehicle accidents information system that gives access to insurers and law enforcement organs. Such information system can help to take preventive measures and it

facilitates the aggregation process of demerit points for violations of the road safety legislations;

- Insurance companies should plan their marketing strategies aiming at changing the attitude of the public towards competing on provision of efficient claim services rather than price based competition;
- A concerted action should be taken by all companies to charge equitable level of premium to turn motor class of business to positive results in particular and to develop the sector in general;

5.3.2. Claim costs

- Reduce claim costs –company can reduce claim costs by of employing and training competent employees to handle claims more efficiently and be able to identify cases of claims leakage, overcharging, or of fraudulent claims;
- Claims database should be maintained by insurers centrally and it helps the insurance company to identify the history of the proposer so as to charge equitable level of premium;
- Lobby policy makers to revise the procedures for training, testing and licensing the drivers ;
- Establishment of own garages, making backward and forward linkages with spare part dealers and garages that helps to reduce cost of operating;

5.3.3. Acquisition and Administration Costs

- Reduce acquisition costs – devising the alternative way of selling insurance for example through alternative channels such as directly over the telephone and selling through internet may lead to reduced acquisition costs.
- Reduce administration costs – Investing in new technology or implementing more simplified procedures can lead to reduction of administration costs.

5.3.4. Investment Performance

- Improve cash flow – using different types of long term and short term investment opportunities, the availability of funds to be invested and consequently the ability to pay claims without resorting to borrowing;
- The government should give more attention for the development of capital market in order to encourage the insurance market by creating opportunity for investment.

Generally, the regulatory body should give due emphasis to build the capacity of domestic insurers towards international competitiveness because the sector might open for wider international market when Ethiopia become a member of WTO which has been under progress.

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APPENDIX A

Questionnaire for Branch Employees

Dear Respondents,

This questionnaire is part of an MBA thesis research project to assess the impact of motor insurance on the financial performance of the insurance company. Your responses are important in enabling me to obtain as full understanding as possible of this topical issue.

The questionnaire should take you about five minutes to complete. Please answer the questions in the spaces provided. If you wish to add further comments, please feel free to do so. The information you provide will be treated in the strictest confidence. You will notice that you are not asked to include your name and address anywhere on the questionnaire.

The findings from your questionnaire and others will be used as the main data set for my thesis for my post graduate studies in Masters of Business Administration at Saint Marry University.

I hope you will find completing the questionnaire enjoyable. Please return the completed questionnaire to me, Ayele Desalegn before 5th February 2014. If you have any queries or would like further information, please feel free to contact me on 0911 66-96-42.

Thank you for your help

Ayele Desalegn,

Section A. General Information

Gender: _____

Age: _____

Higher educational qualification: _____

Year of experience: _____

Current position: _____

Section B

In answering the questions in this section, please use the scale in such a way that:

- 1= Strongly Disagree 4= Agree
 2= Disagree, 5= Strongly Agree
 3= Neutral,

No	Statements	1	2	3	4	5
1	Motor insurance premium rate determination should regularly consider the impact it has on the business of the insurer					
2	Motor insurance policies are preferable to be driver based than vehicle based (so that drivers features such as gender, age, occupation, experience of accidents, driving crimes etc. be considered during premium setting).					
3	It is appropriate if the environmental and traffic places be considered in determining motor insurance premium rate					
4	It is appropriate if insurance policy cancellation is allowed in case of drivers conviction for driving under the influence of alcohol and use of drug, and causing fatal accidents as a result of over speeding					
5	It is appropriate if insurers are allowed to increase premium after a road crash resulting from drivers violation of records					
6	It is appropriate to adjust motor insurance premium based on the loss ratio of the insured					
7	NCD allowed to the insured helps to build safer driving behaviors					
8	In my branch driver violation records be considered the higher rate in determination of insurance premiums at policy renewal					
9	CMTP insurance premium is adequate to deal with the total cost of the common pool					

APPENDIX B

Questionnaire for Claims Department Employees

Dear Respondents,

This questionnaire is part of an MBA thesis research project to assess the impact of motor insurance on the financial performance of the insurance company. Your responses are important in enabling me to obtain as full understanding as possible of this topical issue.

The questionnaire should take you about five minutes to complete. Please answer the questions in the spaces provided. If you wish to add further comments, please feel free to do so. The information you provide will be treated in the strictest confidence. You will notice that you are not asked to include your name and address anywhere on the questionnaire.

The findings from your questionnaire and others will be used as the main data set for my thesis for my post graduate studies in Masters of Business Administration at Saint Marry University.

I hope you will find completing the questionnaire enjoyable. Please return the completed questionnaire to me, Ayele Desalegn before 5th February 2014. If you have any queries or would like further information, please feel free to contact me on 0911 66-96-42.

Thank you for your help

Ayele Desalegn

Section A. General Information

Gender: _____

Age: _____

Higher educational qualification: _____

Year of experience: _____

Current position: _____

Section B

In answering the questions in this section, please use the scale in such a way that:

- 1= Strongly Disagree 4= Agree
 2= Disagree, 5= Strongly Agree
 3= Neutral,

No	Statements	1	2	3	4	5
1	In my department, motor claims represents the largest share in terms of severity of losses					
2	Road related factor is estimated to take the highest contributor of all causes of traffic accidents reported to the company					
3	Vehicle related factor is estimated to take the highest contributor of all causes of traffic accidents reported to the company					
4	Human error is estimated to take the highest contributor of all causes of traffic crashes reported to the company					
5	A high prevalence of old vehicles that often carry many more people than they are designed to carry are other factors that contribute to high rate of motor accident in my company					
6	Lack of safety belt and helmet use are also factors that contribute to the high rate of motor accident					
7	Poor road design and maintenance and the traffic mix on roads are other factors that contribute to the high rate of motor accident					
8	The causes of most of motor insurance accidents reported to the company could be attributed to recklessness on the part of drivers, ignorance of high way codes, over speeding etc.					

9	The main causes of most of the motor insurance accident was due to bad traffic situation because of the absence of effective planning, vehicle-misuse, poor management, inadequate street parking, traffic congestion and delays among other contributory factors					
10	Alcohol and use of chat causes many accidents reported to my company					
11	Driver licensing needs to be investigated, as not only are there many bogus licenses but also a very poor test procedure carried out in many Regions					
12	The higher the engine power of the vehicle the higher frequency in involving to an accidents					
13	The higher the engine power the higher severity in terms of damage					
14	Latest model vehicles are frequently involved in accident than old model					
15	Latest model vehicles have high severity than old model vehicles					
16	Private use vehicles are frequently involved in accident than commercial use vehicles					
17	Private use vehicles have high severity than commercial use vehicles					
18	Familiar brand vehicles are frequently involved in accident than unfamiliar brand vehicles					
19	Familiar brand vehicles have high severity than unfamiliar brand vehicles					
20	In my company failure to observe the user type of vehicle by the insured is one of the causes of motor accidents					
21	Existence of old and non-standard cars, particularly old heavy vehicles are one of the reason of high losses caused by third-party insurance					

22	There is a significant relationship between different age groups of driver and a possibility of loss and young drivers have risky behavior compared to older middle-aged drivers					
23	Women are more carefully in driving and their accidents severity is less than men					
24	Behaviors such as speed and illegal overtaking, not to observe minimum distance to the vehicle in front, left shift, disregard for other vehicles and traffic lines and signs, are the main causes for motor insurance claim reported to my company					
25	Driving when tired and aggressive conditions towards others or a gaucherie due to improper training, inexperience, bad decisions are effective human factor on motor accidents					
26	Incorrect look at surroundings, level of consciousness, confusion, low concentration and traffic mistakes are the main causes of motor accident					
27	Reduction of driver's physical and mental power due to drug abuse, certain medications, illness, and so on are the major factors for motor accidents in my company					
28	Third party insurance is unprofitable and risky business in insurance companies					

APPENDIX C

Interview Question for Underwriting and Branch operations Department manager

1. Do you state how many years do you have served the company and your current position?_____
2. Do you state the types of insurance policy available for market in your company?

3. Do you state the types of motor insurance service available for market in your company?

4. Is the Insurance Industry represented on any national road safety policy making body?

5. When motor insurance was made mandatory and what are current requirements?

6. Which ministry/department supervises the insurance industry? What information is required to be provided to the regulatory body?_____
7. How is the industry structure, i.e. how many private sector companies and how large is the public sector share? Do government vehicles have to be insured?

8. What is the basic consideration for accepting the risk of motor insurance?

9. What are the pricing objectives of motor insurance in your company?

10. How is motor insurance coverage promoted? Is there a windscreen sticker or decal to show proof of insurance coverage?_____
11. How many vehicles are insured (if available, provide by vehicle type and insurance type, i.e. third party or comprehensive)_____

12. How many total vehicles (by type) are currently operating (provide registered vehicles if necessary) what is the estimated rate of non compliance?_____
- _____
13. Who sets premium rate for motor comprehensive cover? Is it based on according to the result of actuaries' findings or the market condition?_____
- _____
14. Who sets CMTP premium tariffs? What is the role of the insurance companies/association?_____
15. What is average third party premium for a private car?_____
- _____
16. Is motor insurance vehicle or driver based, i.e. does the premium vary by the age or experience of the driver, or his/her previous driving record?_____
- _____
17. Will the insurance coverage be cancelled if the driver is convicted of driving under the influence of alcohol? What about speeding?_____
- _____
18. What kind of No Claims Discount is offered (including initial and maximum amount)_____
19. Is there an excess imposed after a claim?_____
- _____
20. What is the contribution of motor insurance premium to GWP among all services of the insurance company?_____
21. What is the growth rate of motor insurance for the past six years?_____
- _____
22. What is the impact of motor insurance on the financial performance of your company?_____
- _____
23. Will the third party premium be increased after a speeding conviction or a drink driving conviction? _____
24. How else could insurers encourage safe driving and penalize risky driving?_____
- _____

25. Is there a levy added to insurance premiums to finance road safety activities? If so, how much?_____
26. Is there a levy added to finance compensation for victims of hit and run collisions? If so, how much?_____
27. Has an insurance levy ever been considered as a way of financing road safety?_____
28. What kind of voluntary sponsorship of road safety activities have the insurance companies undertaken in recent years? Was this done under the Insurance Association or by individual companies?_____
29. Have any insurance companies sponsored or provided data for any road safety research in recent years? If so, what was the research subject?_____
30. How would you evaluate the success of motor insurance in the industry in general and your company in particular for the past 6 years?_____
31. How would you evaluate the performance of motor insurance in terms of market growth among other portfolios' of the company?_____
32. What type of risk minimization technique/tools that are used by your company in order to minimize the cost of motor insurance?_____

APPENDIX D

Interview Question for Claims Department Manager

1. Do you state how many years do you have served the company and your current position? _____
2. What is the effect of motor insurance on your companies claims performance?

3. Among other services of the insurance company, how do you evaluate the frequency and severity of motor insurance claims and its associated problems?

4. What are the types of costs incurred due to the accident of motor insurance?

5. Do you state the impact of motor insurance claims on the other class of business?

6. What are the main causes of motor accident reported to your company? please specify according to their degree of severity of damage _____

7. How do you evaluate the overall traffic situation in Ethiopia? _____

8. Is there a Motor Insurance Board (or equivalent) which compensates victims of hit and run collisions? If so, how is it funded and what level of compensation does it provide? _____
9. What is the time limit for laying a claim? Does the crash have to be reported to the police? _____
10. Are funeral costs paid by insurance companies? If so, when? _____

11. How is the fairness of claim offers monitored? Is there a complaints system? _____

12. What information is given to drivers and/or victims about the compensation process and their legal rights and responsibilities? _____

APPENDIX E

Interview Question for Finance Department Manager

1. Do you state how many years you served the company and your current position?

2. What are the costs and expenses associated with motor insurance?

3. What is the average commission rate paid for agents/brokers? _____

4. What is the average share of agents/brokers to direct production of motor insurance for the past six years? _____

5. What is the average marketing and expense ratio of motor insurance in the past six years?

6. What is the effect of motor insurance on your company's profitability? Overall how do you evaluate the financial performance of motor insurance? _____

7. What are the investment opportunities available for insurance industries?

8. Which of them are used by your company? please state according to their importance in terms of revenue generated _____

9. What is the average ratio of investment earnings from collected premium of motor insurance for the past six years? _____
10. How have their effectiveness/success of previous investments been evaluated? _____

11. How many different measures of profitability performance were used in your company _____
