



International Journal of Advance Research in Nursing

Volume 8; Issue 2; Jan-Jun 2025; Page No. 1046-1048

Received: 06-09-2025
Accepted: 09-10-2025

Indexed Journal
Peer Reviewed Journal

Health Insurance Literacy Among Adults in a Selected Panchayat, Thrissur District, Kerala

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DOI: <https://www.doi.org/10.33545/nursing.2025.v8.i2.J.609>

Abstract

Background: Health insurance literacy is defined as the ability to understand, evaluate and utilize health insurance information. It is a critical component of achieving sustainable development goal (SDG) 3.8, which focuses on universal health coverage and financial protection. In India, there are numerous Government sponsored and private health insurance schemes. The low health insurance literacy continues to impede optimal healthcare utilization. Kerala is one of a leading state in insurance claims and program outreach struggles with underutilization of benefits due to gaps in knowledge and decision-making capacity. This highlights the need to assess and enhance health insurance literacy, particularly in rural areas.

Objectives: This study was conducted to assess the level of health insurance literacy among adults and find the association between health insurance literacy and selected socio-personal variables.

Methods: A quantitative, cross sectional analytical study was conducted in wards 5 and 6 of Kaiparambu Grama Panchayat, Thrissur district. A total of 200 adults aged 20–60 years were selected using stratified random sampling based on APL and BPL classification. Data were collected through semi-structured interviews using two tools: a socio-personal data sheet and a health insurance literacy measurement tool. This tool assessed three domains include, knowledge of health insurance schemes, confidence in decision-making regarding health insurance and ability to seek health insurance benefits. Data were analysed using descriptive statistics and inferential statistics.

Results: The study revealed that 72% of participants had average health insurance literacy, 25% had fair literacy, and only 3% had good literacy. In terms of components, 54% had average knowledge of insurance schemes, 74.5% had average confidence in decision-making regarding health insurance and 42% had fair ability to seek health insurance benefits. Significant associations were found between health insurance literacy and family income. No significant associations were observed with age, gender, marital status, or educational status etc.

Conclusion: Most of adults have only average health insurance literacy, with particular difficulty in utilizing benefits. There is a need for community-based awareness programs, simplified insurance communication, and targeted support mechanisms. Improving health insurance literacy will enhance service utilization, reduce financial burden and contribute to achieving universal health coverage in rural India.

Keywords: Health insurance literacy; Universal health coverage; Sustainable development goal; Confidence in decision making; Health insurance utilization

Introduction

Health insurance is the agreement between an insurance agency and the customer for the coverage of medical expenses. Health insurance covers future treatment costs with coverage for accidents and several illnesses. Insurance providers in the Government and private sector are offering various kinds of health insurance schemes. The criteria of beneficiary and benefits under each scheme vary based on the conditions given by the provider. The person who bought an insurance plan is called an insurer and the premium is payment for the insurance [1]. Health insurance literacy refers to an individual's knowledge and decision-making skills in selecting, buying and utilizing health insurance [2]. The key concepts in health insurance literacy are collecting information regarding health insurance and utilize this information for decision making in selecting health care and availing health insurance benefits.

This study aimed to assess the health insurance literacy

among adults residing in selected wards of Kaiparambu Grama Panchayat at Thrissur district, Kerala.

Materials and methods

Design: cross sectional analytical design

Setting: 2 wards (ward 5 and ward 6) in Kaiparambu Grama Panchayat, Thrissur district.

Participants: 200 adults aged 20-60 years

Tool: Health insurance literacy measurement tool.
Reliability coefficient: $r=0.76$

Data collection: A house list categorized into two strata, above poverty line (APL) and below poverty line (BPL) groups. 100 participants were selected randomly from each stratum. Health insurance literacy measurement tool was

administered to the participants. The data was collected in a semi structured interview.

Analysis: Descriptive statistics (frequency, percentage, mean and standard deviation) and inferential statistics (Chi-

square test and Fisher's exact test).

Results and discussion

Results

Table 1: Socio-personal and health insurance profile of the participants.

Socio personal data	f	%
Age (in years) 41- 50	70	35
Gender Female	136	68
Marital status Married	192	96
Type of family Nuclear	198	99
Number of members in the family 1-4	109	54.5
Education status High school education	59	29.5
Occupation Homemakers	96	48
Monthly personal income (in Rs.) ≤1000	97	48.5
Monthly family income (in Rs.) 5001- 10000	72	36
Enrolment in health insurance schemes Yes	114	57
Gender wise health insurance enrolment Female	74	64.9
Available health insurance scheme Private health insurances	62	54.4
Previous hospitalization and utilization of health insurance Yes	61	53.5
Difficulties in receiving health insurance benefits after hospitalization Admitted and received benefits without difficulties	48	78.7
Source of information about health insurance Social media	67	33.5
Lifestyle diseases among family members Yes	118	59
Average monthly medical expenses of the family (in Rs.) ≤500	106	53

Table 2: Distribution of health insurance literacy levels among participants.

Health insurance literacy	f	%	Mean	SD
Good	06	03.00		
Average	144	72.00	59.80	16.46
Fair	50	25.00		

Table 3: Distribution of components of health insurance literacy among participants.

Components of health insurance literacy	Good		Average		Fair		Poor	
	f	%	f	%	f	%	f	%
Knowledge regarding health insurance schemes	38	19	108	54	54	27	00	00
Confidence in decision making regarding health insurance	37	18.5	149	74.5	14	7	00	00
Ability to seek health insurance benefits	00	00	76	38	84	42	40	20

- Health insurance literacy- 144 adults (72%) average, 50 adults (25%) fair, 6 adults (3%) good and 0 adults poor. mean score on health insurance literacy was 59.80 ± 16.46 .
- knowledge regarding health insurance- 108 adults (54%) average, 54 adults (27%) fair, 38 adults (19%) good, 0 poor.
- Confidence in decision making regarding health

- insurance- 149 adults (74.5%) average, 37 adults (18.5%) good, 14 adults (7%) fair, 0 poor.
- Ability to seek health insurance benefits- 84 adults (42%) fair, 76 adults (38%) average, 40 adults (20%) poor, 0 good.
- Association - Significant association between health insurance literacy and family income ($\chi^2=4.85$). No association with age, gender, marital status, type and

number of family members, educational status, job, enrolment in health insurance schemes, available health insurance scheme, source of information, lifestyle diseases in family, previous hospitalization and utilization of health insurance, difficulties in receiving health insurance and average monthly medical expenses.

Discussion

The study revealed that majority of adults had an average level of health insurance literacy. The findings were discussed with earlier research, assess the relationship between health insurance literacy, health insurance coverage and health insurance utilization revealed that There was a significant relationship between an individual's health insurance status and knowledge regarding insurance terms, having a usual source of care and knowledge of insurance terms and confidence in finding and using information on health insurance [3].

Conclusion

Adults residing in rural areas had average literacy on health insurance.

Implications

- **Nursing Practice:** Nurses can work as a information provider, advocate, health educator, collaborator to improve the literacy on health insurance in people.
- **Nursing Education:** The nursing curriculum should emphasize health insurance concepts, teaching students about various health insurance plans. Nursing education should highlight the impact of health insurance literacy on healthcare access, patient outcomes, and healthcare disparities.
- **Nursing research:** Research can highlight disparities in insurance knowledge and access based on socioeconomic status, educational background and language barriers.

Conflict of Interest

Not available

Financial Support

Not available

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How to Cite This Article

Athira T. Health Insurance Literacy Among Adults in a Selected Panchayat, Thrissur District, Kerala. International Journal of Advance Research in Nursing. 2025;7(2): 1046-1048

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