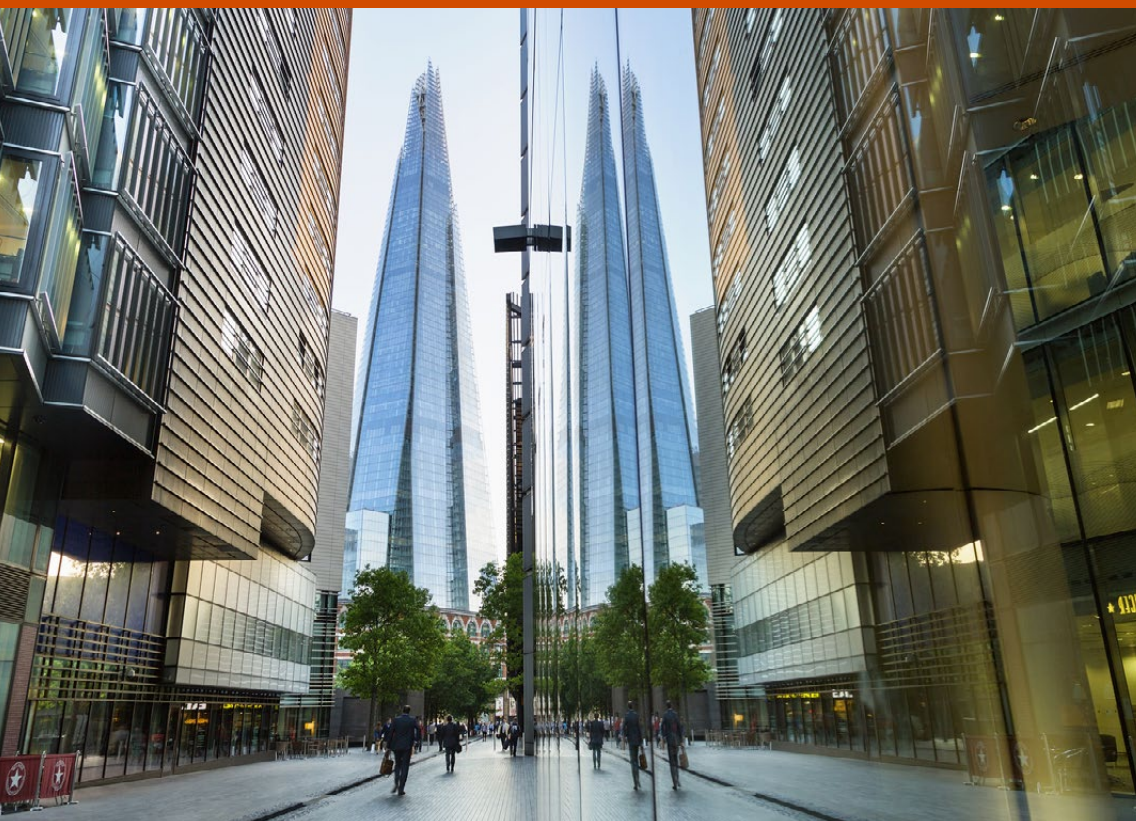


UK Insurance Sentiment Index

An analysis of the UK insurance industry through the lens of social media

2023



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Foreword

Facing a cost-of-living crisis, among other macroeconomic and societal issues, British consumers rely on insurance for greater peace of mind. But insurers are also grappling with significant challenges. From increased regulatory complexity to the disruption caused by AI and technological advancements, executives need to stay ahead in their strategic decision-making.

Key to this is unlocking opportunities from data.

The modern-day consumer has high expectations around service, product quality, pricing, and choice. As more consumers take to social media to share frustrations about insurers, they expect a timely response. And with insurers increasingly engaging with customers via these channels, there has been a rise in social media mentions directed towards the industry.

The good news is that social data offers insurers an opportunity to gain an unfiltered view of what consumers really think about them and their competitors. These platforms house an untapped data pool which can be structured and analysed in real-time, providing valuable insights into emerging trends, interests, and sentiments long before they manifest in traditional data sources.

Conversely, consumers' negative social conversations can pose a significant risk to insurance brands by threatening reputational harm in the public domain. As social media's influence continues to grow as a court of public opinion, insurers must remain vigilant in monitoring relevant social conversations for mentions that could inflict substantial and long-lasting damage.



Six out of every 10 mentions contained predominantly negative Consumer Duty themes

In addition to opening insurers up to unnecessary reputational risk, the failure to swiftly identify and respond to important online conversations now also poses a potential regulatory risk. With the new Consumer Duty having come into effect, firms must shift their focus towards continuous monitoring of consumer outcomes, which includes consideration of the customer voice.

The Financial Conduct Authority (FCA) has clearly placed consumer communication – and communications compliance – at the centre of how it expects firms to approach the Consumer Duty. Harnessing the potential of social media data is a promising way to help identify problems and improve customer-centric strategies, especially given the regulator's stated interest in social media as an alternative data source.

By delving into the main topics driving compliments and complaints on social media platforms, this report underscores the need for insurers to integrate data-led insights into their monitoring and reporting strategies. This is necessary to provide a digital experience that aligns with the evolving preferences of consumers, stakeholders, and regulatory expectations.

Alex Bertolotti, Partner, UK Insurance Leader, PwC





Introduction

For the second consecutive year, PwC has collaborated with DataEQ to gain a deeper understanding of the key themes driving consumer sentiment from social media data.

Given the new regulations that have recently come into effect, this year's report is presented with a special focus on the role that social media data can play in Consumer Duty compliance within the United Kingdom's insurance industry.

By mapping consumer conversation against the Consumer Duty outcomes and analysing the key drivers of customer satisfaction and frustration, the study aims to ascertain whether UK insurers are meeting expectations of customer service and market conduct on social media.

The index tracked 300,000 public online mentions across 15 major UK insurance brands from 1 July 2022 to 30 June 2023. These posts were then processed using DataEQ's unique Crowd¹ and AI technology before being categorised according to the four identified Duty outcomes.

 Consumer support Consumers should be able to use the product in the way they expected. There should be no unreasonable barriers in the service they receive. It should be as easy to complain about, switch or cancel the product as it was to buy it.	01
 Price and value Fees and charges should reasonably reflect the value of the product or service provided. Unjustifiable or unreasonable fees should be avoided.	02
 Consumer understanding Communications should be clear enough that they are likely to be understood by the target customer. Information is made available at the right time and can be adapted to the customers circumstances where appropriate.	03
 Product design Products clearly meet the needs of customers and work as expected. They are sold through appropriate distribution channels.	04

**The above definitions have been modified from the FCA outcomes to ensure the DataEQ Crowd structures social media conversation correctly against the outcome themes.*

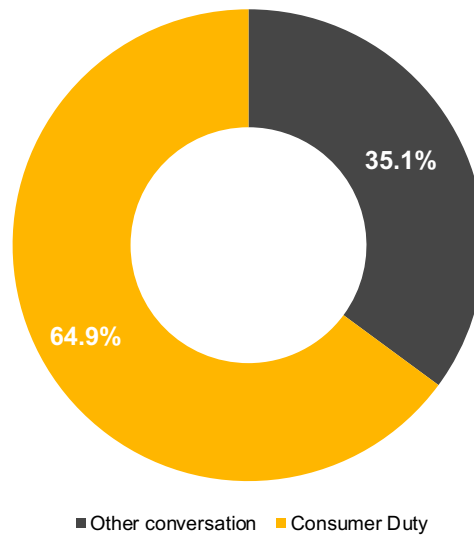
Due to the unsolicited nature of social media conversation, it is possible for multiple themes (product and service related) and outcomes to be captured within one post. This has proven especially prevalent in this year's index. It is this co-occurrence between topics and outcomes that makes social media such a multifaceted and valuable dataset.

¹ The DataEQ Crowd is a proprietary crowd sourcing platform comprising a network of trained and vetted local language contributors. The full DataEQ methodology can be found in the Appendix.

As discussed in a [recent research](#) report, the Consumer Duty necessitates that firms must change how they operate and gather data to demonstrate compliance. Social media has emerged as a powerful data source in this regard, offering real-time feedback on critical themes related to the Duty.

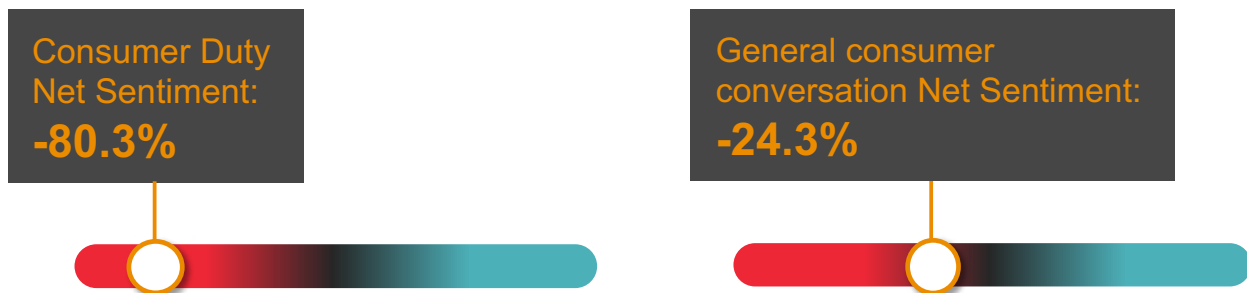
Almost two-thirds (64.9%) of the sentiment-bearing posts referenced content that could be relevant to a Consumer Duty outcome, providing evidence that social media data is rich with conduct-related themes for the attention of regulators and firms alike.

Consumer Duty contribution to overall conversation



The above statistics consider only consumer posts and excludes reshares. Trustpilot data was excluded. Extrapolation based on a sample of 38 153.

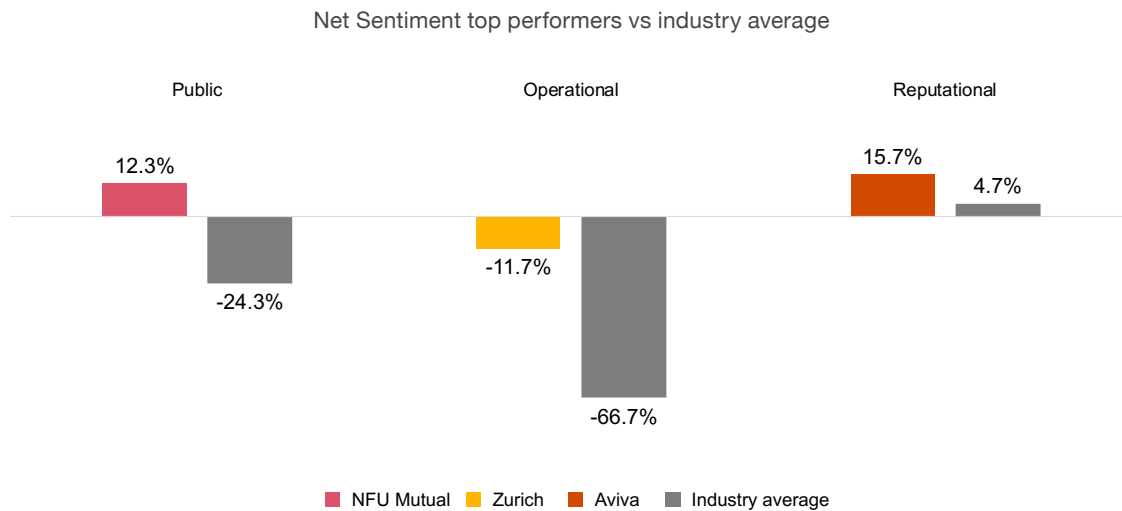
Upon analysing the sentiment of these social media mentions, it was discovered that Consumer Duty conversation was more negative than general consumer conversation. Specifically, the Net Sentiment score for Consumer Duty conversation was -80.3%, while the Net Sentiment score for general consumer conversation was -24.3%.





The UK insurance industry saw a drop in public and operational Net Sentiment

Looking at the broader general consumer conversation, both public and operational² Net Sentiment scores decreased compared to the 2021/22 report, while reputational³ Net Sentiment improved. Importantly, the overall volume of mentions increased from the last report, signalling greater public engagement with the industry on social media.



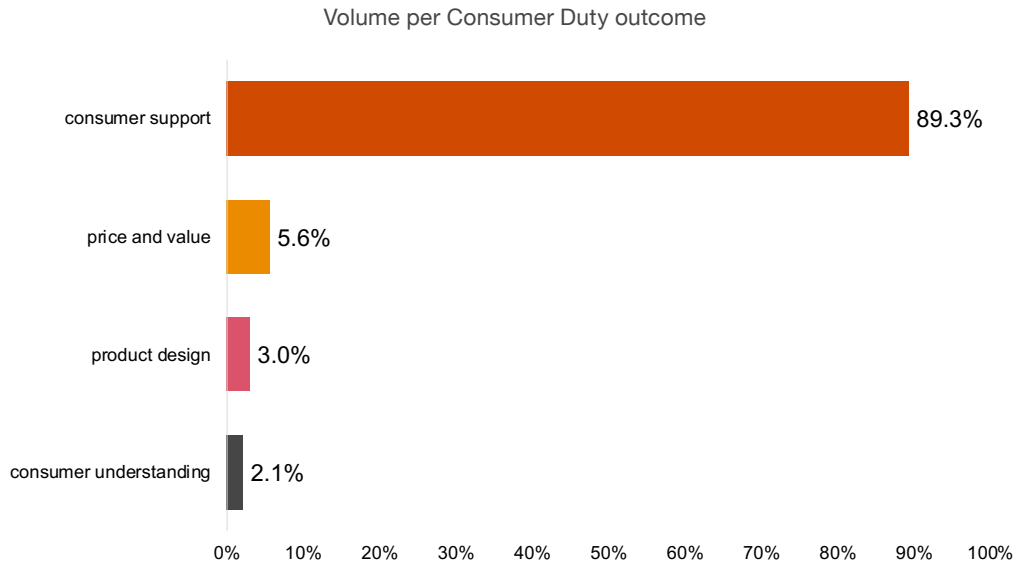
NFU Mutual achieved the highest public Net Sentiment score, driven by CSI initiatives and support shown for education and agriculture. Aviva received the best reputational Net Sentiment, while Zurich had the highest operational Net Sentiment.

Across the industry, customer support was the primary driver of conversations, followed by products, reputational matters and claims. Posts about customer service and claims were generally quite negative, while product and reputation-related conversations were more positive.

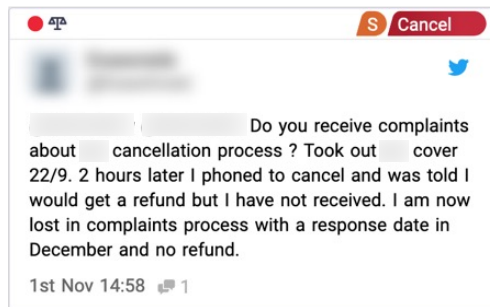
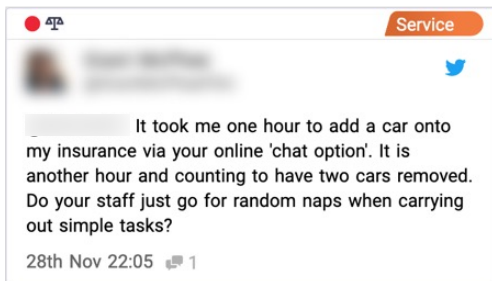
² Operational Net Sentiment factors in mentions from unique authors throughout the customer journey.

³ Reputational Net Sentiment includes mentions and reshares regarding brands' sponsorships, marketing campaigns, and journalistic coverage, among other reputational content.

In categorising the social media conversation against the four Consumer Duty outcomes, it becomes clear that there is an uneven distribution. The bulk of social media conversation related to consumer support, followed distantly by price and value, product design and consumer understanding – all of which contributed far lower volumes.

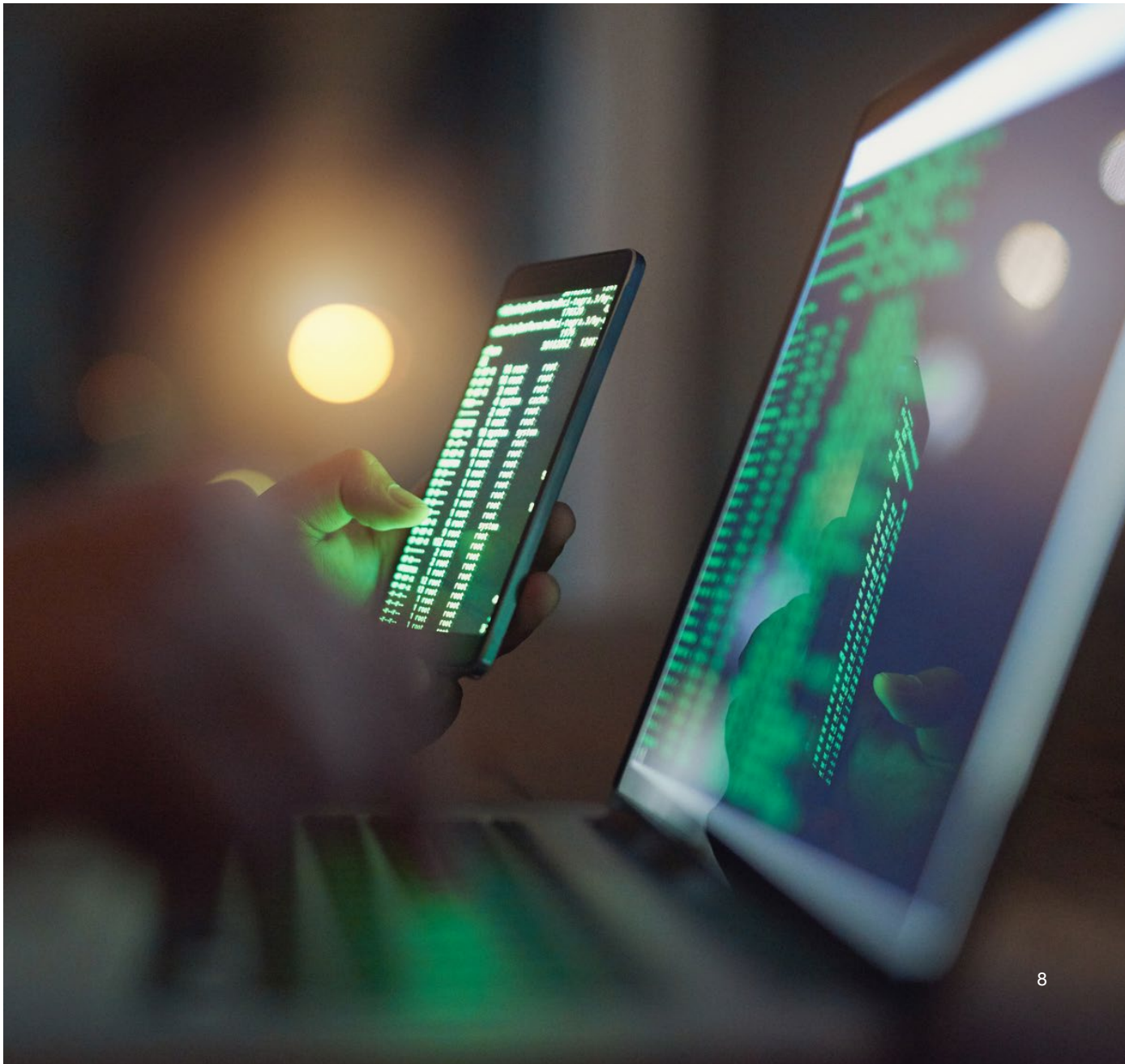


The above statistics consider only consumer posts and excludes reshares.



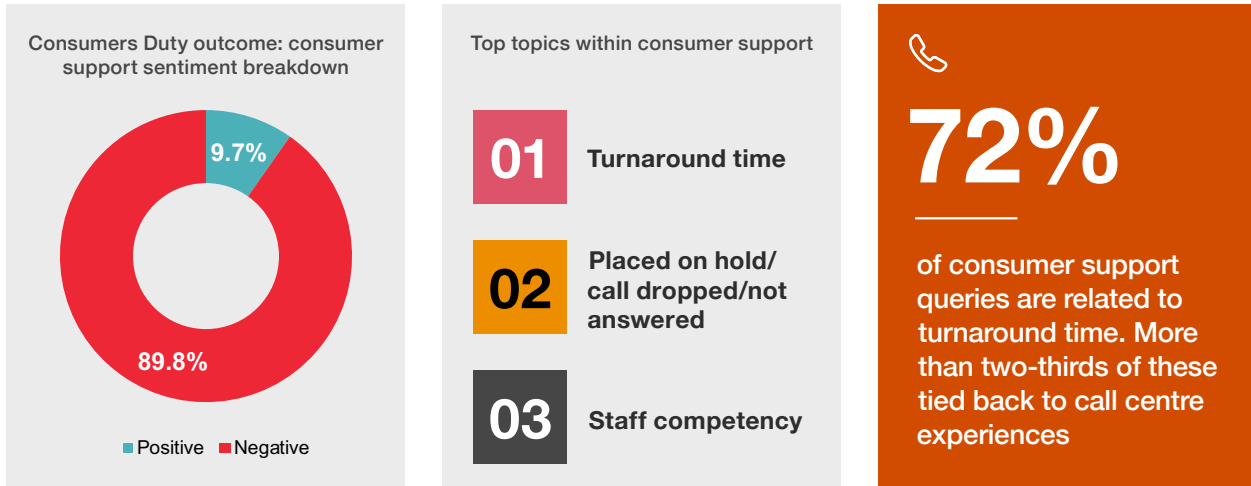
1

Consumer support



Almost 90% of Consumer Duty mentions related to consumer support, or the lack thereof, with 72% of these mentions relating to extended wait times, and a significant portion of these originated from unsatisfactory call centre interactions.

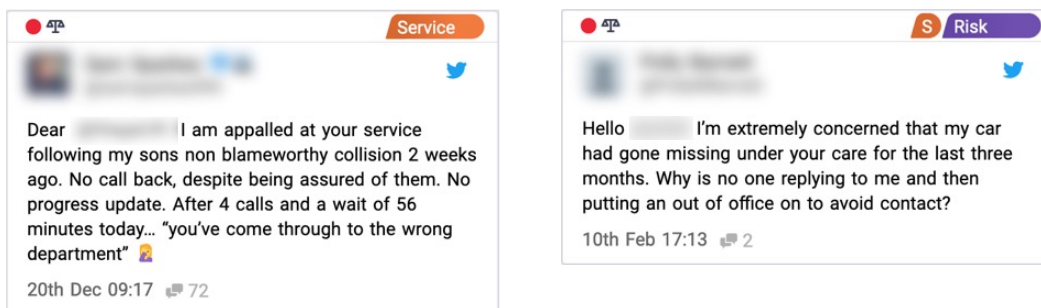
Consumers feel neglected due to poor service and unresponsiveness



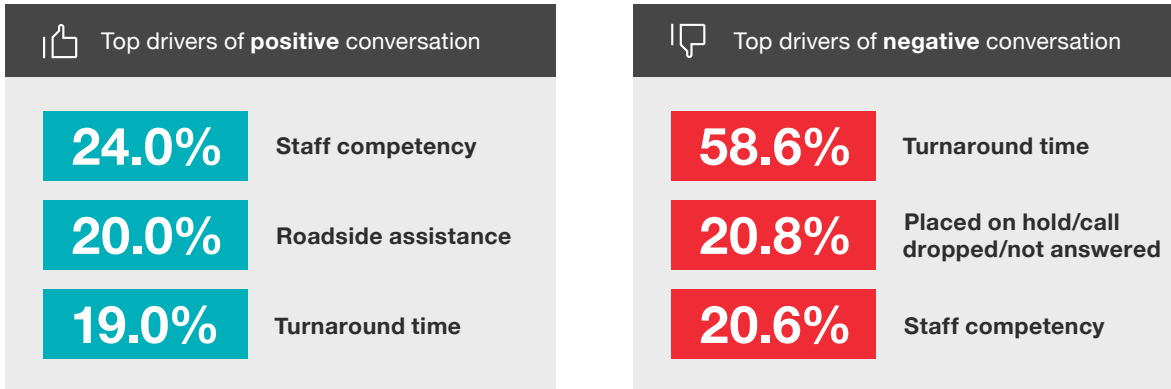
Customers aired their grievances about extended wait times on calls, unresponsive emails or direct messages, as well as delays with car repairs and claims processing. Additional issues that further compounded negative feelings included staff’s perceived lack of empathy and an inability to provide effective and efficient assistance.

Across the four outcomes, the data on consumer support is likely the most practical in terms of actioning to demonstrate compliance, particularly when identifying where foreseeable harm may be about to occur due to struggles customers are experiencing with accessing support.

Unsurprisingly, the top themes within consumer support also ranked as the leading negative drivers in general customer service conversations. Specifically, 84.9% of consumer support mentions co-occurred with those regarding customer service.

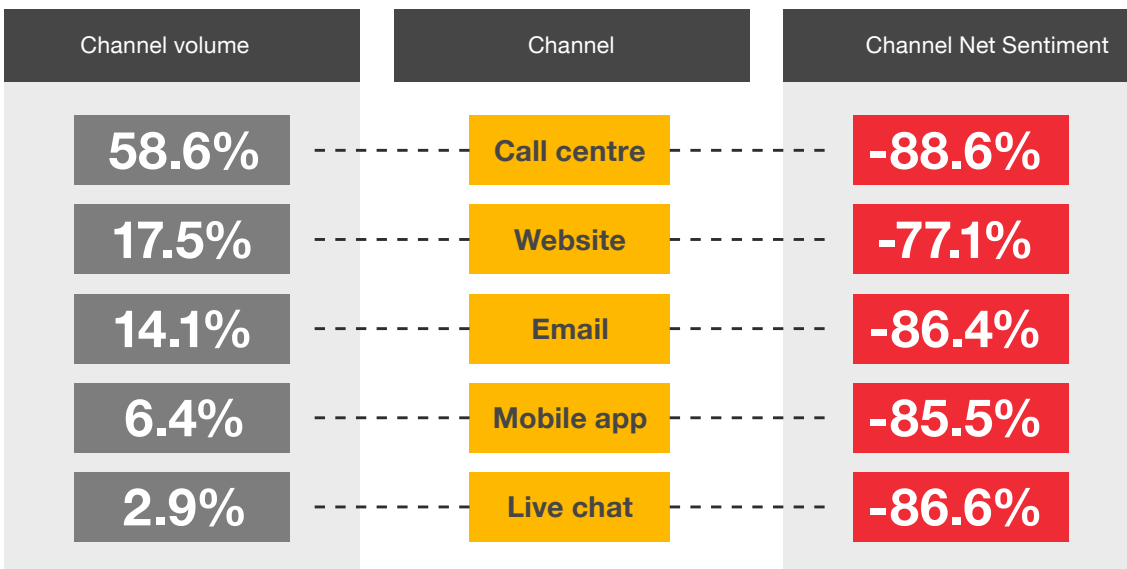


When it comes to customer service feedback on social media platforms, the top drivers of compliments and complaints were related to general service matters like staff competency, turnaround time, and call centre responsiveness, as well as more product-specific feedback about the service experienced with car insurance and roadside assistance.



Social media serves as a feedback channel for other support functions

Considering that social platforms are typically used as a last resort for disgruntled customers, the data can provide valuable insights into the shortcomings of other service and support channels. Call centres, email, and live chats had highly unfavourable Net Sentiments, with customers expressing their frustrations towards the service received via these channels.



Once again, the lack of timely response, with consumers expressing frustration with lengthy call centre wait times, frequent holds, circuitous query resolution, and departmental handoffs contributing to customer frustration.

While this may not come as a surprise, it offers concrete, real-time feedback around the issues experienced by customers trying to get in touch over the phone. This is especially critical for customers with complicated support requirements, vulnerability challenges, or limited internet access.

Ensuring the fair treatment of customers in vulnerable circumstances

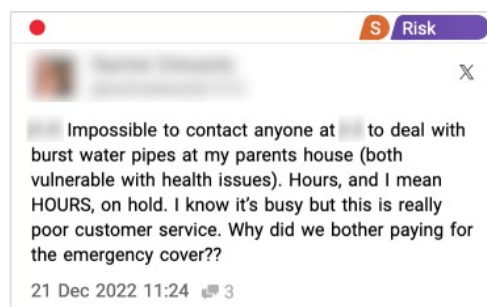
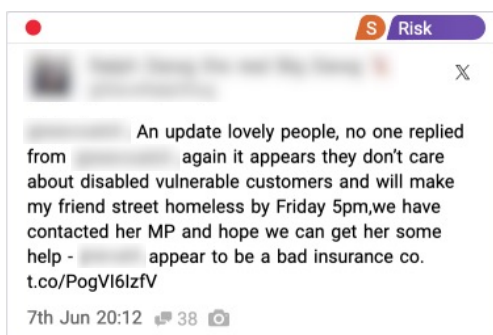
The FCA defines a vulnerable customer as: “Someone who, due to their personal circumstances, is especially susceptible to harm, particularly when a firm is not acting with appropriate levels of care.”

Just over 2% of total conversation in the index spoke explicitly to vulnerability – a customer characteristic that the regulator deems relevant for organisations to consider in relation to the Consumer Duty. This means that, despite representing a very small volume of conversation, this data presents valuable insights to supplement data on vulnerable customers identified by the firm.

These conversations were largely linked to financial vulnerability. It was alleged that insurers were failing to consider customers who have little to no income to deal with the price increases. Consumers felt societal struggles were not factored into price hikes.



Just over 2% of total conversation in the index spoke explicitly to vulnerability

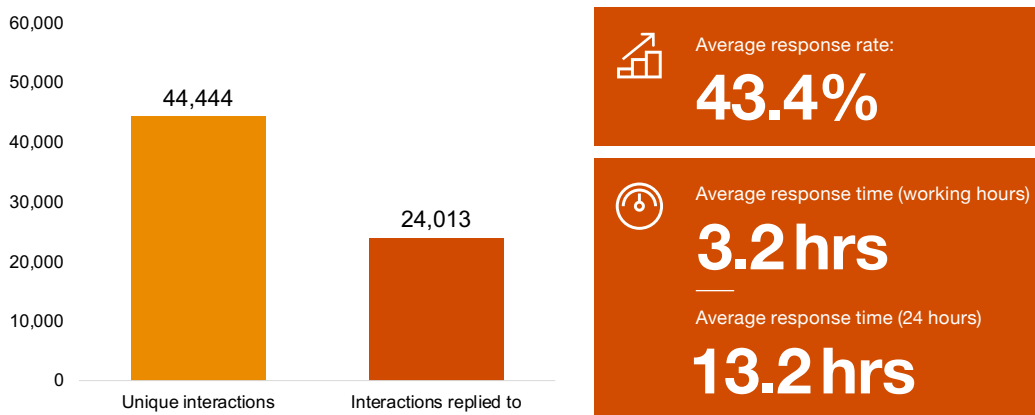


More than half of all priority conversations go unanswered

Priority conversations are consumer mentions that potentially warrant a brand response. These include mentions that either present a risk to the insurer, provide an acquisition opportunity, a chance to mitigate churn or include a service request.

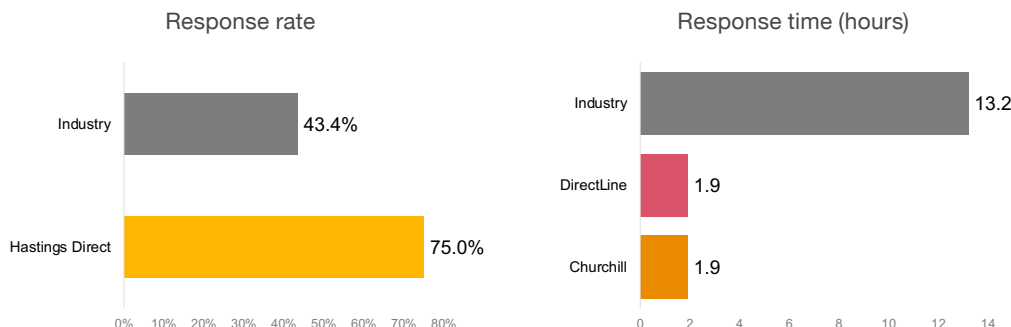
While only 22.9% of the UK insurance industry's conversation is considered "priority", over half of those conversations went unanswered. This means only 43.4% of these mentions received responses.

Industry overview of response rate and time



**Unique interactions: Each interaction represents one work item for an insurer. This includes a post or set of posts from a consumer, followed by a reply, or sets of replies from an insurer. If there is a gap of more than 14 days, or the author switches between private and public, a new interaction is formed.*

Response times for customer queries, also known as waiting time, can be assessed in two ways. The first measures a 24-hour cycle irrespective of working hours, whereas the second considers a standard "working hour" day from 9:00am to 6:00pm. The average response time was 13.2 hours across a 24-hour cycle and 3.2 hours within typical business hours. It was evident that the industry's responsiveness deteriorated, considering the previous average 24-hour response time stood at 8.1 hours in the 2021/22 data.



Across the industry, Hastings Direct had the highest response rate of 75%, while Churchill and DirectLine achieved the fastest response times - just short of 2 hours. These positions have remained unchanged from the previous index.

Understanding the drivers of both good and bad experiences is essential for insurers in effectively managing their clients' expectations around consumer support. Insurers can manage the disparity in expectations around response times by:

Takeouts

1. Implementing **automated responses** that alert customers to expect a reply within designated working hours.
2. **Extending customer service teams to include after-hours agents.** This would accommodate customers who may need support after traditional working hours.

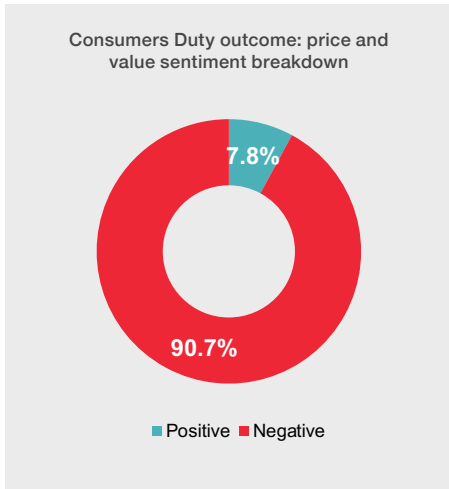


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Price and value

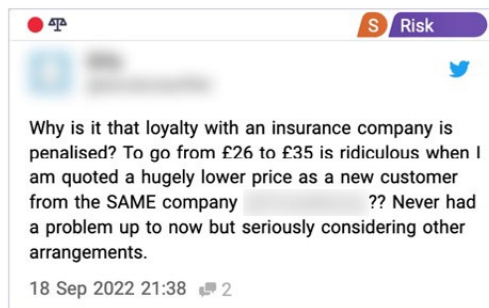
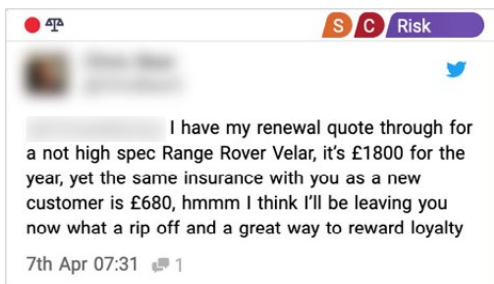
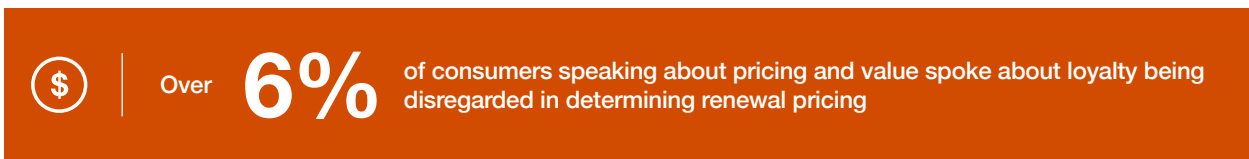


5% of Consumer Duty mentions related to price and value, with the vast majority (90.7%) of these being negative. It is important to remember, however, that customers may not always be the best judges of the value of their financial services products. Premium increases, for example, are generally undesired, but this doesn't necessarily conflate with a fair value issue.

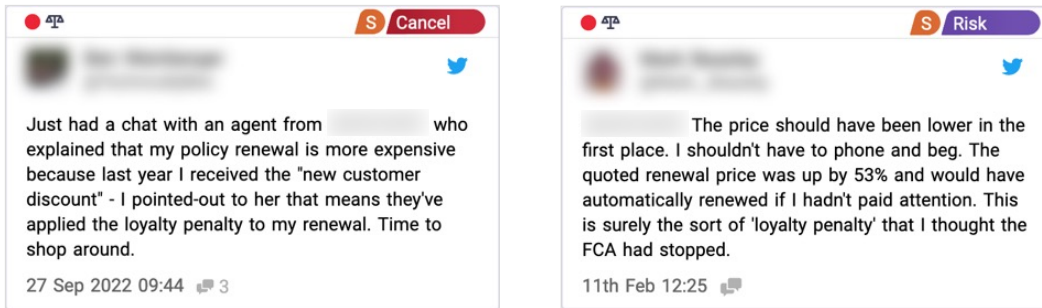


Affordability was the main topic driver under price and value with over 85% of conversations relating to this topic. Significant and potentially undue price increases upon renewals emerged as a recurring theme, as customers questioned considerable annual increases in premiums.

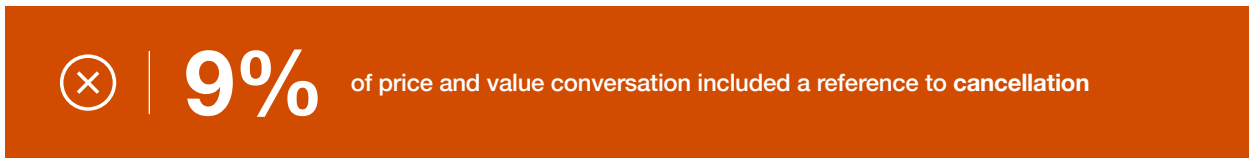
Loyal consumers feel undervalued when comparing renewal prices to new client fees



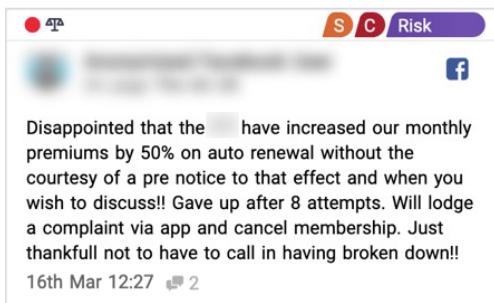
Some long-standing customers felt that insurers were penalising them when it came to renewals, despite being loyal clients who haven't made any claims, and have maintained a good track record with payments. Given the regulator's interventions on the respective pricing of new and existing customers, social data may provide insurers with another check on whether this is playing out in their pricing for all groups of customers alongside existing fair value assessments.



This alleged unfair treatment led some customers to seek cheaper alternatives, which resulted in cancellation threats and enquiries. However, unknown cancellation fees upset customers who wanted to opt out of their current insurance provider. These issues have also surfaced during the policy renewal phase. Customers reported that they chose not to renew their policies, yet found themselves automatically re-enrolled and faced with unexpected cancellation fees. Some felt these fees should be made known to potential and/or current clients before signing up.



Auto renewal



Cancellation fees



While applying a standard cancellation fee is not necessarily unfair practice, cross-checking social data on this topic with indicators of vulnerability in the posts could be useful for insurers.

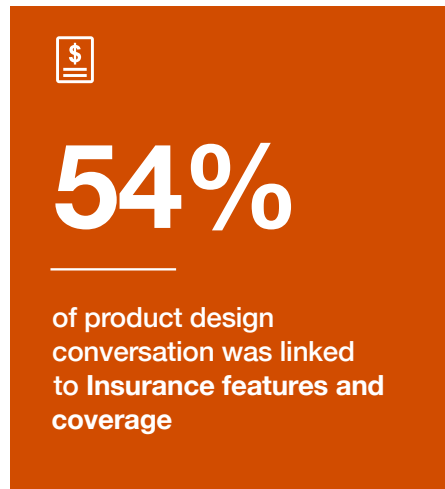
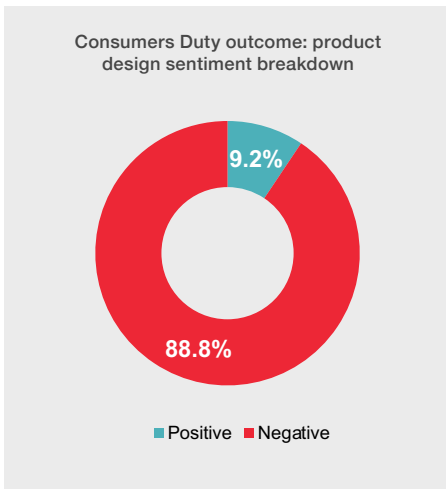
3

Product design



Considering the relatively lower volume (3.6%) of Consumer Duty mentions relating to product design, social media data for this outcome should not be considered in isolation. Nevertheless, there are still valuable insights to be found regarding situations where a product is not suitable or appropriate for its intended use or function, or is being sold outside of its target market.

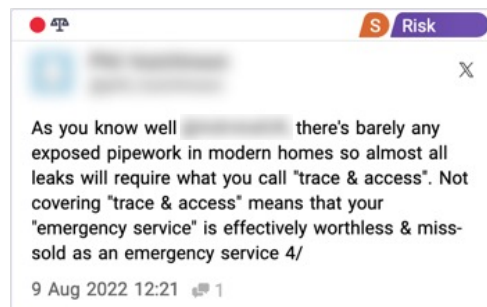
Confusion over product features and coverage drives negativity for product design



Most (88.8%) of these mentions were negative, with consumers feeling let down by insurers rejecting certain coverage applications or placing exclusions on coverage. In general, customers claimed that the products they signed up for were not fit for the purpose they needed.

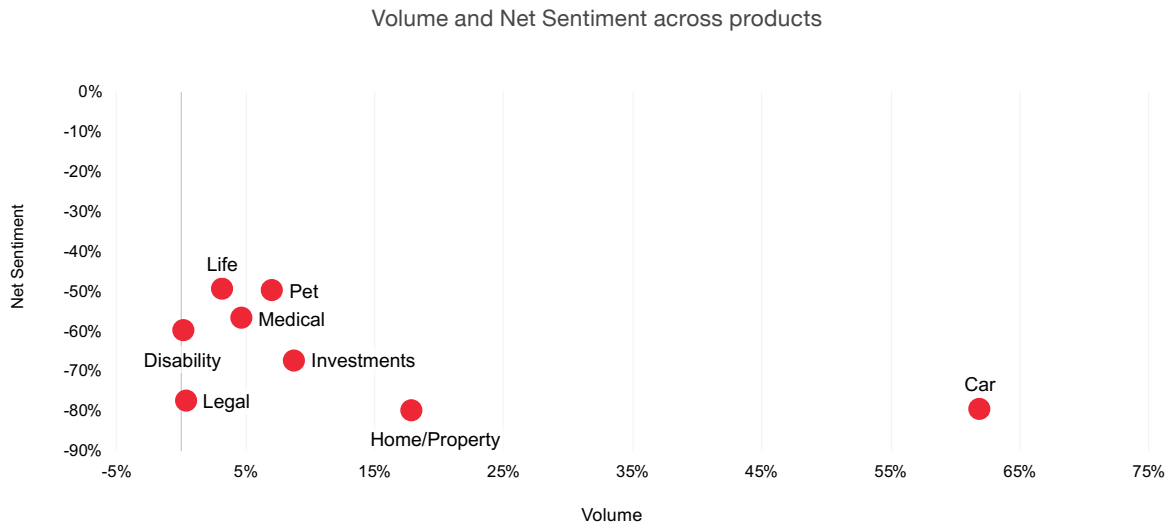
Specific examples cited by consumers included the cover restrictions and exclusions linked to home and emergency cover. They felt these limitations rendered the policy pointless and not fit for its intended purpose.

Due to consumers' confusion surrounding several insurance products and what they cover, there is potential for overlap between the outcomes of product design and consumer understanding.



Car insurance cited in almost two-thirds of conversation

Car insurance was the predominant product complained about in the data, registering a Net Sentiment of -80%.



Car insurance conversation was the predominant product discussed in the data – it was also **nearly -80% net negative**, making it one of the most complained about products

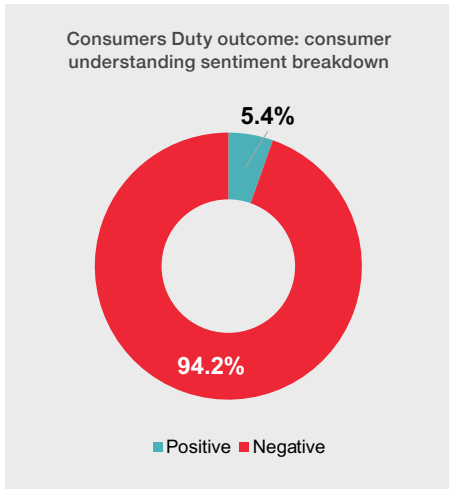


4

Consumer understanding



Consumer understanding recorded the smallest volume (2.1%) of conversation out of the four categories. There was significant overlap between consumer understanding and product design tags, indicating that products and policies were not always clear to consumers and in some cases did not provide the expected cover.

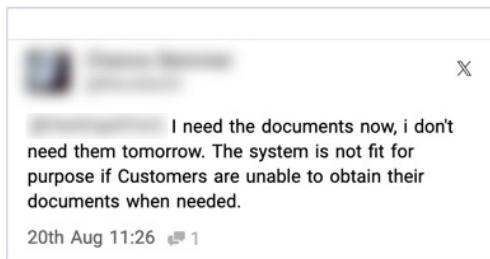
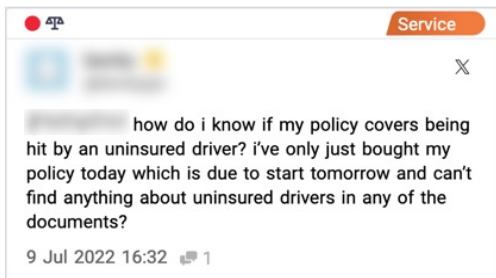


36%

of all consumer understanding complaints were driven by a lack of clarity on **Insurance features and coverage**

The top topic that pulls through in this outcome relates to insurance features or coverage. Consumers felt that transparency fell short, and communications were insufficient when it came to policy changes. Consumers, who felt transparency and clear communication was vital to retain customers, had questions about these offerings, particularly in relation to car insurance products. Consumers struggled with explanations around why they were being refused insurance policies. Others expressed confusion about multi-car policies and difficulty finding information about their coverage.

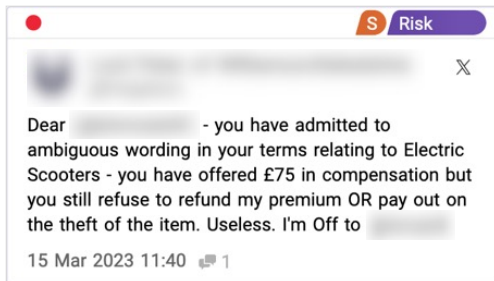
44.8% of consumer understanding complaints also overlapped with **product design**



Unclear policies and confusion around coverage drive consumer negativity

Ambiguous wording in policies sparked concerns for consumers as they struggled to understand why their premiums increased when policies did not clearly state such increases would happen. Some felt that insurers did not factor in client loyalty or abide by their written agreements, questioning how pricing was calculated and whether rules were being created on a per-customer basis. Many called on insurers to provide additional information to clarify the pricing confusion as they felt this was not readily available.

Total transparency from insurers is expected to ensure opportunities for ambiguity do not occur. Yet customers often found communication from insurers to be unclear and involving unnecessarily complex phrasing which led to misunderstandings around policies, payouts and responses to claim requests. In the case of claim requests, clients' confusion typically revolved around which documents were required by an insurer for a claim to be processed or finalised. Clear, easy-to-understand wording and phrasing in all communication is therefore key to dispelling confusion and ensuring consumers have a better chance of understanding.



Social media data can provide feedback on the effectiveness of communications - whether written, online or verbal. In the data assessed for this report, examples largely talked about communications being ambiguous or unclear. In some cases, incorrect information was identified as being provided. This could provide a useful additional mechanism for firms to identify where changes may be needed to their communications outside of a testing cycle



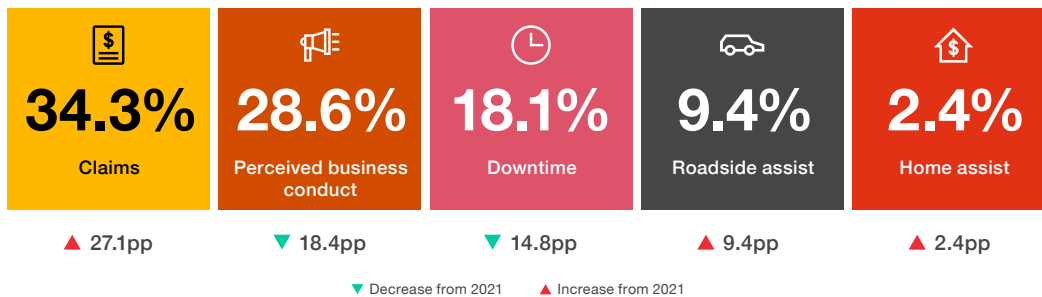
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Risk and reputation



As risk mentions can come from both customers and non-customers, they speak to actual client experiences as well as more general reputational comments. This year, the UK insurance industry saw a pronounced uptick of risk conversations, from 15.6% to 46.1%, largely driven by mentions relating to claim disputes and perceived business conduct.

Top 5 risk factors



Only the top 5 themes are represented above, so volumes do not equate to 100%.

Claim disputes pose the greatest risk to UK insurers

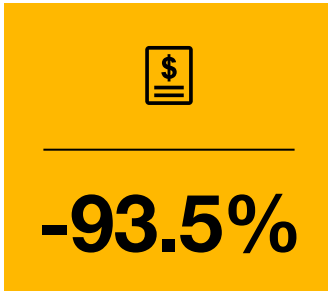
Claims represent a pivotal point for insurers, as this is one of the few times customers must contact their provider, given their otherwise often-limited interaction. Depending on the product and circumstances surrounding the claims event, it can also be an emotional experience for customers. It is therefore not surprising that claim disputes comprised more than a third of total risk conversation, carrying an overtly negative Net Sentiment of 93.5%.



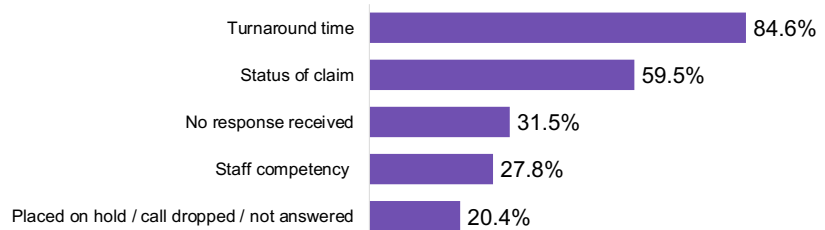
The UK insurance industry saw a pronounced **uptick of risk conversations, from 15.6% to 46.1%**

Customer service issues at the forefront of claims disputes

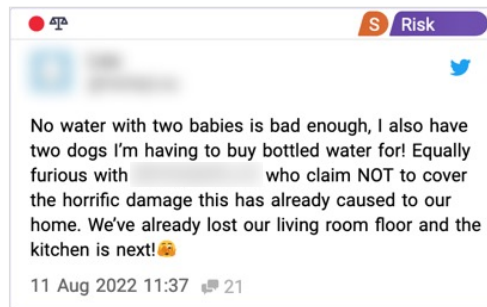
Net Sentiment for claims with risk



Factors driving claims conversation within risk across insurers

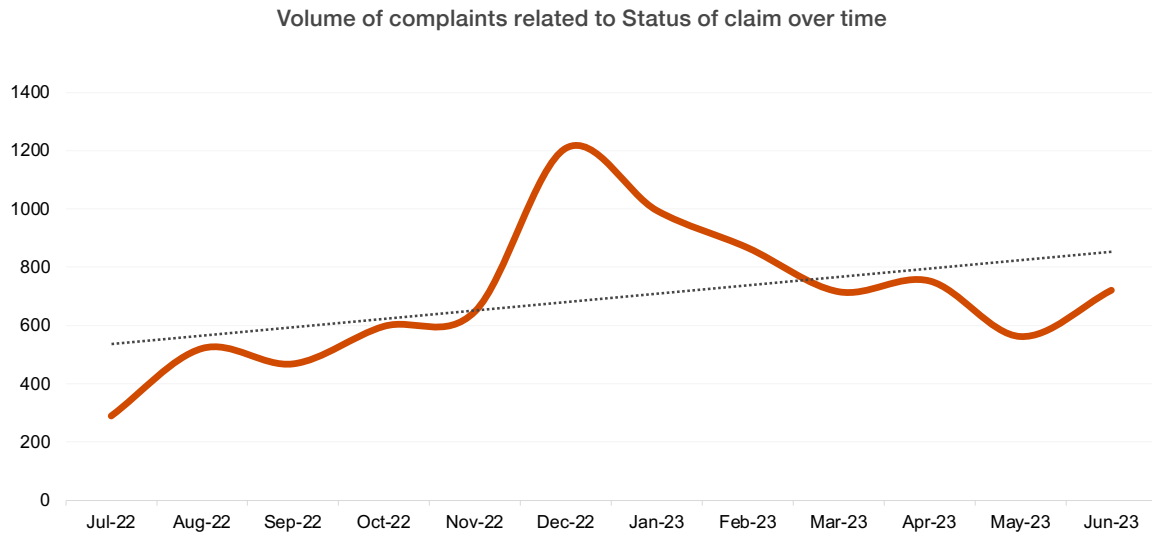


Most grievances centred around delayed claims processing, unacknowledged or unresolved claims, and administrative challenges. These issues were often compounded by extended wait times, poor customer service, and insufficient communication manifesting in unanswered emails and calls, unclear claim status updates or payout schedules, and unmet promises like the provision of courtesy cars.



The second-largest risk factor was perceptions around business conduct, which often linked to the issues surrounding claims. Specifically, when consumers are not kept informed during the claims process, concerns may arise. Additionally, if their claim is not paid out as expected, questions about the insurer's good faith may be raised.

Claims-related risk on the rise



Over time, the number of complaints about claims has seen a gradual incline. This indicates a growing reputational risk for insurers, as consumers are becoming increasingly vocal about their disputes in public forums to solicit action.





Conclusion

This year's UK Insurance Sentiment Index highlights a pivotal shift in the insurance landscape, marked by intensifying consumer voices amidst economic uncertainties and regulatory change.

The result has been a downward trend in overall Net Sentiment coupled with a three-fold surge in risk conversations from last year's report.

Nevertheless, social media is not all doom and gloom. While most Consumer Duty-related discussions were negative, a noteworthy 10% were positive, demonstrating that social media can also be a place for praise:

1. **Positive conversations primarily revolved around consumer support, with commendations for staff efficiency and professionalism. Consumers highlighted insurers with clear and straightforward terms and conditions.**
2. **Consumers praised insurers for transparent pricing structures and flexible renewal structures.**

This points to an opportunity for firms to proactively drive more positive sentiment on social platforms and build trust in the public eye over time. It can also play a role in demonstrating where good outcomes are being achieved, a key requirement under Consumer Duty.

That said, it's important to note that social media should not be the sole - or even the prominent - source of data. It leans heavily towards consumer support and does not always provide a representative view of the entire customer base, which can introduce potential negative biases.

It is important to consider existing data capabilities. Firms should explore how technology, or a third-party data analytics company, can enhance the quality of their social media insights.

By embracing these data-driven opportunities, insurers can turn the tide of negative sentiment and pave the way for a future where consumer trust and satisfaction are at the heart of their operations.

6

Methodology



Methodology

DataEQ retrieved 289,938 public mentions about 15 UK insurers between 1 July 2022 to 30 June 2023. 285 914 mentions were from non-enterprise accounts. 100% of the collected mentions were sent for Crowd verification. This resulted in an overall sampling sentiment Margin of Error (MOE) of 0.0% at a 95% level of confidence. Crowd verification holds a 5% Margin of Error.

Sample sentiment for verification

A total of 289,938 public mentions were collected for the period of 1 July 2022 to 30 June 2023. To carry out sentiment analysis with a 95% confidence level and an overall 0.10% Margin of Error (MOE), a random sample of 235 519 of these mentions were processed through DataEQ's Crowd for evaluation and verification. Mentions were assigned sentiment scores of positive, negative or neutral.

1 st Central	AA	AXA	Admiral
Aviva	Churchill	DirectLine	Hastings Direct
LV	Legal & General	ManyPets	Marmalade
NFU Mutual	Saga	Standard Life	Zurich



Topic methodology

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The eight broad topics are:

- **Customer service**
- **Reputation**
- **Digital experience**
- **Insurance products**
- **Physical facilities**
- **Pricing or fees**
- **Account admin**
- **Claims process**



Market conduct

A random, representative sample of negative conversation was verified by DataEQ's Crowd to surface market conduct complaints. These complaints were segmented according to the four outcomes of the Consumer Duty framework, which is used in the UK by the financial services industry to report on the fair treatment of customers.

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Thank you

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