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## Comparison of Social Factors Affecting the Health-Oriented Lifestyle of Mothers and Daughters of Sirjan City

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### FURTHER INFORMATION:

This article is taken from the doctoral thesis of Mr. Behrooz Mirzaei in the field of social sciences under the guidance of Asghar Mohammadi at Islamic Azad University, Dehaghan branch.



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**EXTENDED ABSTRACT**

**INTRODUCTION:**

The insurance industry provides security and economic peace for economic actors and the general public and frees them from the worries caused by future harmful and unfortunate events to a large extent. For this reason, today this industry has faced a significant reception and is always developing and expanding, and it has become one of the essential parts and basic and vital needs of economic and social activities. The title of an essential need in today's eventful world is more important among the general public. Fraud includes intentional actions and is committed by a person who has started using deception, trickery, and trickery, and it can be classified into two types of appearance: telling lies and concealing the truth. Fraud is a human endeavor that includes deception, purpose, intensification of desire, risk of arrest, breach of trust, rational justification, and so on. The increase in insurance fraud is one of the main issues of commercial insurance, which causes heavy losses directly on insurance companies and indirectly on the insured and the society.

**METHODOLOGY:**

In this research, a mixed research method has been used. One of the characteristics of mixed research is the sequence of application of quantitative and qualitative research methods. In this research, quantitative and qualitative methods were used. In the first stage, in order to identify the social factors affecting third party insurance frauds, a qualitative method was used by interviewing experts in the insurance industry and social sciences. Then, in the second stage, to achieve the desired result, the results of qualitative research were used in the preparation and formulation of the

questionnaire, and a structural model was presented using the quantitative data extracted from the questionnaire. The present research is an exploratory type of mixed research in terms of its applied purpose and in terms of its approach. The theoretical paradigm that governs this research is a mixed interpretivist-positivist type. The statistical population of the qualitative part of the research included all experts and scientific and executive experts in the field of insurance management, technical and specialized fields of insurance, and development and economic sociology. Also, the statistical population of the quantitative part of the research includes all third-party car insurance providers in Tehran. According to the official statistics of Central Insurance, the total number of third-party car insurance providers in Tehran in 2018 was 4,652,510. The sampling method in the qualitative part of the research was purposeful and snowball until data saturation. In the quantitative part, sampling in two stages using the cluster sampling method, insurers of insurance companies in three clusters of large companies with more than one million policyholders (Iran Insurance with 2,126,255 policyholders) and medium-sized companies with the number of policyholders from 500 to one million (Asia Insurance with 611,776 policyholders and Dana Insurance with 518,725 policyholders) and small companies with less than 500,000 policyholders (Parsian Insurance with 214,015 policyholders and Kausar Insurance with 186,100 policyholders) were grouped and estimated.

### **FINDINGS:**

According to the results of the research, out of a total of 26 participants in the qualitative part of the research, 21 (81%) were male members and only 5 (19%) were female. Also, from the total participants in this part of the research, 14 people (54%) have expertise in third party insurance and other specialized areas, 8 people (30%) have insurance management and 4 people (16%) have expertise in economic sociology. have been Of the 26 participants in the qualitative section, 4 (16%) had master's degrees and 22 (84%) had doctoral degrees. In terms of job experience, a total of 12 people (45%) have more than 20 years of experience, 6 people (23%) have 16 to 20 years, 4 people (16%) have between 6 to 10 years, 3 people (13%) between 11 and 15 years and only 1 (3%) of the participants had less than 5 years of experience. The results of the research in the quantitative section show that out of 384 respondents, 237 (61.8%) were men and 147 (38.2%) were women. Also, 234 people (60.8 percent) were married and 150 people (39.2 percent) were single. From the studied sample population, 125 people

(32.7%) are in the age group of 41 to 50 years, 117 people (30.4%) are in the age group of 31 to 40 years, 76 people (19.9%) are in the age group of 51 Up to 60 years old, 59 people (15.4 percent) are between 21 and 30 years old and 6 people (1.6 percent) are in the age group of 60 years and above. Out of a total of 384 respondents, 147 people (38.2%) had a bachelor's degree, 99 people (25.8%) had a master's degree and above, 90 people (23.5%) had a postgraduate diploma, and 48 people (12.4%) had a diploma. The results of the research on the history of no damage of the respondents showed that 137 people (35.6 percent) were less than 4 years old, 113 people (29.4 percent) were between 4 and 8 years old, 70 people (18.3 percent) were between 8 and 12 years old. year and 64 people (16.7%) had a history of no damage for more than 12 years.

#### **CONCLUSION:**

The present study was conducted with the aim of investigating social factors affecting third-party insurance frauds with a mixed approach. The results of the qualitative part with a theme analysis approach to investigate social factors affecting third party insurance fraud in the insurance industry resulted in four overarching themes of social welfare, religiosity, trust and individualism (independent variables) and an overarching theme of fraud (dependent variable) and 57 concepts or Basic themes. In the quantitative part of the research, the measurement model of social factors affecting third-party insurance fraud was tested and verified by confirmatory factor analysis method, and based on the results obtained, all four comprehensive themes of social welfare, religiosity, trust and individualism are well They have supported the latent variable as well as the measurement model. Also, the measurement indices related to each of the four factors also support their component well. According to the results of the research, it was found that one of the social factors affecting third-party insurance fraud is social welfare, which includes indicators such as: taking care of physical health, doing proper exercise, the type of outlook and level of life satisfaction, the level of feeling depressed, how to face problems. Life, the level of family satisfaction with the individual, the level of family support for the individual, the level of support of friends for the individual, the level of individual satisfaction with the place of residence, the level of influence on others, the level of satisfaction with social justice, the level of expectation from others to solve problems, the level of satisfaction with the situation Job, satisfaction from the path taken in life, etc. Also, the research results showed; Another social component that affects third party insurance fraud is

trust. Among the indicators of trust are: the feeling of duty to help others, the desire to cooperate with others, interaction with others in doing life affairs, the level of trust in relatives and friends, the level of trust He pointed to the family members, the level of trust in the people around the person. Based on the results of the quantitative part of the research, it was found that among the social factors affecting third-party insurance frauds, trust with a factor load of -0.52 has an impact on frauds.

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