

## VSLAによる小口医療保険の“押しつけ効果”に関する 行動経済学的研究

Crowding-out Effects of VSLA on Micro-health insurance

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当該研究では、カンボジアにおける小口医療保険の加入率を向上させるために、現行の医療保険のスキームをどのように変更すれば効果的であるかについて、現地調査による情報収集と計量経済学的分析とにより明らかにしようとした。具体的には、離散選択モデルを用いて潜在的保険需要者の保険に対する支払い意思額を推計し、需要額とそれを規定する要因（家計特性、リスク選好、時間選好、VSLAへの加入など）との間の関係を統計学的に分析した。

2019年度における成果は、以下のとおりである。

- 1 . Hiroki Wakamatsu, Seiichi Fukui, and Kana Miwa.2019. Heterogeneous Preferences for Micro Health Insurance Attributes in Rural Cambodia: Latent Class Analysis, Economics Bulletin Vol.39(4),2019

概要：

This study estimates the heterogeneous preferences and willingness-to-pay (WTP) of potential clients for different attributes of micro health insurance (MHI) and to seek a more acceptable insurance scheme in rural Cambodia. A latent class model is employed to treat with heterogeneity of consumer preferences, and found a two-class model as the best model, where one of the two classes is responsive to improvement of micro health insurance scheme. In the comparison of the two classes, the second class, comprising household heads who were younger and well-educated, with more remittances from migrant family members, more assets, and facing more illness, was significantly responsive to improvement in the insurance schemes. As for present time bias, we could not find any evidence that supports the hypothesis that it negatively affects WTP for MHI. In addition, our findings suggest that potential insurance customers who would have purchased MHI accounted for more than 60% in our study area, Thus, our results can be used to support improvements in existing MHI to attract more MHI customers.

- 2 . Hiroki WAKAMATSU, Seiichi FUKUI, Nina TAKASHINO, and Kana MIWA. 2019. Heterogeneous preferences for Micro Health Insurance in Cambodia: Discrete

Choice Experiment, 日本経済学会 2019 年度秋季大会個別報告（於：神戸大学、2019 年 10 月 13 日）

概要：

The poor in developing countries tend to suffer from economic loss caused by diseases and injuries. To cope with the economic shocks, micro health insurance programs have been introduced as informal risk-coping mechanisms. Although the authority took supportive action, take-up rates of the micro insurance have been low and declining in some countries. In spite of immediate needs to understand purchasing factors of the insurance to increase take-up rate, little literature exists on the consumer preference for micro health insurance. This study examines what the most acceptable insurance scheme is, considering heterogeneous consumer preferences in developing countries. We conducted a discrete choice experiment in a rural Cambodian area. Since risk and time preference is related to the willingness to pay for insurance, we also implemented an experiment to measure risk and time preference to control those effects. A latent class model estimates the poor Cambodian preferences for micro insurance categorizing them into three groups: 35% of non-consumers, 25% of risk-averse consumers and 40% of potential consumers. The risk-averse consumers show higher WTP while non-consumers show insignificant and irrelevant WTP. The potential consumers consist of those who experienced negative shocks and are unsatisfied with the present insurance services. We found that take-up rate would increase if we promote service management to the potential consumers.