Digitalization of Insurance Claim Services and Efficient Customer Service Delivery in Nigeria

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Abstract
Claim settlement is one of the core insurance functions. It is important for an efficient claim management system enhanced by digitalization to boost the confidence of the insured in the claim settlement process and to project a good image of the insurance industry. This study examines the digitalization of insurance claim services and its prospects for efficient customer service delivery in Nigeria. The objectives of this study are to ascertain if insurance claims services have been digitalized in the Nigerian insurance industry, to examine if digitalization promotes efficient customer service delivery in the industry, and to investigate if digitalization can result in reduced premiums for the insured. A descriptive research design was used for the study. The population consist of all insurance companies in Nigeria from which a sample is drawn using a multistage sampling technique to select 180 staff members from 6 insurance firms. Data were obtained through the instrumentation of the questionnaire forwarded to selected staff and analyzed using descriptive and inferential statistics. The test of hypotheses revealed that insurance claim services have been digitalized in the Nigerian insurance industry, also a significant positive effect of claim process automation as a parameter of digitalization of insurance claims was observed on customer satisfaction, a proxy of efficient customer service delivery. Moreover, digitalized claim services have a positive and insignificant effect on premium reduction for insureds. We conclude that the digitalization of insurance claim services can promote efficient customer service delivery in the insurance industry. It is recommended that more effort should be made to increase the digitalization of insurance claim services and regulators should ensure that the public benefits from the digitalization process through efficient service delivery and premium reductions.

Keywords: Digitalization, Claims, Insurance, Service Delivery, Nigeria.

Introduction
Insurance plays a significant role in the Nigerian economy. This has been attested to in many literature (Fadun, et al., 2024; Fashagba, 2018; Ukpong & Acha, 2017; Ukpong, et al., 2024). Beyond the safety and security provided to individuals and organizations, insurance enables the spread of risk, serves as a financial intermediary, enables savings, increases accessibility to

medical services, generates employment, and ultimately, adds to the gross domestic product. Hence the adoption of digital technologies in insurance services provides a leeway of opportunities for easy access to customers, faster and easier data collection for better risk forecast, enhanced risk mitigation methods which can give rise to better service delivery. Digitalization of the insurance sector entails the incorporation of digital technologies into every aspect of the insurance service through the usage of suitable digital devices targeted at obtaining, processing, storing and conveying information between the insured and the insurer, across various devices, equipment and circuits (Chojan, et al., 2022; Eling & Lehmann, 2018).

Prior to the COVID-19 outbreak and the subsequent restriction of movement, most of the insurance processes were based on an analog system that ran through a lot of bureaucratic processes. Consider the case of a motor vehicle accident on a Nigerian road or a fire outbreak in a building. The insured who suffers the loss would file a notification of loss to the insurer which would go through some bureaucratic processes, then a risk assessor would be assigned. The risk assessor goes to the scene of the incident or object of loss, assesses the loss and files his reports. The report would be tabled for approval, forwarded to the loss adjuster, and then to the claims department for subsequent attention. This process could take weeks, months or years, depending on the type of loss incurred and the policy in force. Now imagine the same scenario in a digitalized setting with digitalized insurance services. Built-in vehicle software would enable immediate and speedy detection of the extent of damage on the vehicle involved in an accident and alert a towing service where needed. The insured driver, who hopefully does not suffer too great an injury, can record 3-D photos of the damage incurred and forward the photos and electronic address cards of all parties involved to their insurers. With digitalization, enhanced by artificial intelligence (AI) and machine learning, virtual reconstructions of the accident can be made which would translate to virtual dialogue with the insured and the claim settlement process begins almost immediately (Naujoks, et al., 2022; Pauch & Bera, 2022). This way, digitalization would enable the insured to recover from his insurer faster and more efficiently.

This study is of significance to insurance companies, consumers, regulatory bodies, shareholders, investors and technology providers. The scope covers the fifty-eight (58) registered insurance companies in Nigeria as of December 2023 (National Insurance Commission [NAICOM], 2023). The study is limited by insufficient access to insurance personnel to obtain information bordering on the extent of digitalization of claim services in their respective companies.

Statement of the Problem

It has been asserted that digitalization is capable of promoting customer service delivery, reducing cost as well as enhancing underwriting and claims management efficiency (Radwan, 2019). Claim settlement is the heartbeat of insurance and the core of the insurance service. In a global consumer insurance survey carried out by EY (2022), 87% of policyholders claimed that claim experience is a major determinant of their decision to insure. This experience is enhanced by transparency in the claim settlement process and speed of settlement. Needless to

say, efficient claim management boosts the confidence of the insured in the system, serves as an informal advertisement for the company and promotes the image of the insurance company.

In a perfect system, neither the insured nor the insurer is desirous of claim occurrence. However, when they do occur, the insured party expects a humane response from the insurer, with a clear and easy communication process, and speedy resolution of the extent of damage and claim payable. Prompt, accurate and efficient claims settlement reduce the risk of fraud and litigation on the insurers. Thus, the integration of digitalization and AI, characterized by more data-driven and analytics-enabled customer service would convert claims processing from a bureaucratic never-ending process into an efficient competitive advantage and market differentiation strategy for the insurer (Bruggemann, 2018; Pauch & Bera, 2022). Seeing then that digitalization offers so many prospects, there is a need to assess the extent to which digitalization has been integrated into the Nigerian insurance industry. What does the insured stand to benefit and how would it influence the premiums paid by the insured? This is why the researchers embarked on this study.

Objectives of the Study

The main objective of this study is to assess the prospect of digitalization of insurance claim services for efficient customer service delivery in Nigeria. Specific objectives are set to:

(i) investigate if insurance claim services have been digitalized in the Nigerian insurance industry.
(ii) determine if there is a significant effect of digitalization of insurance claim services on efficient customer service delivery in the industry.
(iii) examine if digitalization can result in reduced premiums for the insured.

Consequent to these, three research questions are posed for the study. They are:

(i) Have insurance claim services been digitalized in the Nigerian insurance industry?
(ii) Is there any significant effect of digitalization of insurance claim services on efficient customer service delivery in the Nigerian insurance industry?
(iii) Can digitalization result in reduced premiums for the insured?

The hypotheses of this study are:

H_{01}: Insurance claims services have not been digitalized in the Nigerian insurance industry.

H_{02}: Digitalization of insurance claims services has no significant effect on efficient customer delivery in the Nigerian industry.

H_{03}: Digitalization does not result in reduced premiums for the insured.

The rest of the paper is structured as follows: Section two is the literature review where literature is reviewed under conceptual, theoretical, and empirical reviews. Section three is the research methodology while section four covers the data analysis, interpretation, and discussion of findings. Section five is the summary, conclusion, and recommendation.

Literature Review

Customer Service Delivery

The delivery of efficient customer service is a panacea for the growth, advancement and overall competitive advantage of an insurance organization. According to Ogbeide, et al., (2023) and Uwabor, et al., (2021) the delivery of an efficient customer service in the insurance industry is essential for customer satisfaction, increased market share and greater competitive edge for the insurer. As insurance thrives on premiums received from customers, the latter are very essential to the continued existence and profitability of the insurance company.

In a study by Jeya and Gopinath (2020), on the efficiency of customer service techniques, the authors identified the factors defining effective customer service delivery as adopted internet service communication, prompt claim settlement, fair premium, effective marketing communication, easy-to-understand policy documents, courteous communication between staff and customer, efficient customer advisory services, and timely transmission of notices for renewal and premium payments.

Concept of Digitalization

Digitalization involves the transformation of previously analog material into a digital form with the aid of appropriate electronic devices such that the processed information can be stored or transmitted through digital networks, devices or circuits. For the insurance industry, digitalization incorporates the integration of new digital technology to aid the transformation of the industry through innovative and customer-centric applications (Priya & Kalarani, 2019; Yaneva (2021). Table 1 is a classification of common digitalization methods used in insurance operations and their applications.

Table 1: Digitalization Techniques and their usage in the Insurance Industry

Digitalization techniques	Usage in the Insurance industry	Benefits
Big data	Used in insurance rating and pricing, collating customer data, personalized offers, and cross-selling.	Enables updating of information and extensive registration of insureds.
AI	Used in risk assessment, fraud detection, customer management and segmentation.	Increases speed and reduces claims processing time.
Cloud computing	Aids in the creation of partnership models that facilitate interactions with brokers and intermediaries.	Saves configuration cost, and enables the development of hardware, licensing and installation.

Internet of things	In introducing new products, fraud prevention, risk assessment, and management.	Aids in research and development in customer behavior, and claims processing.
Blockchain	Used for setting claims models, risk assessment, underwriting and rating, identifying insurance fraud, and preparing insurance contracts.	Enhances an inclusive customer database, organization of information, sustainability, and security.

Source: Adapted from Radwan (2019) and Yaneva (2021)

From Table 1, it can be reasoned that the adoption of digital technology by insurance companies would increase speed and efficiency in insurance processes, widen consumer options, and lead to healthy competition in the insurance market.

Digitalization of Insurance Claim Services

Insurance has been defined from many contexts. Feinman (2018) defines insurance as a risk transfer device between two parties, the insured and insurer, where the insurer legally agrees to indemnify or cover for the insured's losses as specified in the terms of the agreement between them. Oluwaleye, Shoyemi and Edewusi (2022) define insurance as an arrangement for the transfer of loss from one entity to another as a form of risk management to guard against uncertain loss. Ukpong and Acha (2017) define insurance as a financial risk management plan that enables a large number of people to share losses through effective risk management. From these definitions, it can be deduced that through the transfer of risk, insurance serves as a loss prevention and loss reduction instrument by ensuring that the insured does not have to suffer too much of a loss from risk occurrence.

Insurance claims can be considered as a request made by the insured to whom the loss occurred to the insurance company to make good their word through indemnification as stated in the insurance policy (Ajemunigbohun, Isimoya & Ipagansi, 2019; Brooks, Popow & Hoopes, 2015). It is the right of the insured or policyholder who has fulfilled his side of the contract by paying his premiums up to date and whose claims fall within the policy terms to demand claim settlement. (Ajemunigbohun, Olowokudejo & Ukpong, 2022; and Ajemunigbohun, Sogunro & Oluwaleye, 2022).

Insurance Premium

A premium is the sum of money paid in exchange for insurance protection. It is also known as the consideration and is regarded as a small value that must be given up by the insured to keep the policy in force. Funds received from accumulated premiums from a large number of policyholders to which the insured-against-event may not occur, are used to settle the claims of the few insureds to which it does. This enables the spread of financial loss over a large number of people. Ramos (2017) and Ukpong (2019) hold that a rational premium should be able to cover the cost of claim services, underwriting costs, and administrative expenses and still ensure a margin of profit for the insurer.

Theoretical Review

This study is based on Fountain's technology enactment framework as postulated by Fountain (2004) which holds that technology used to aid organizational and institutional goals can be grouped as objective and enacted technologies. Objective technologies involve the use of digital devices such as the internet, digitalized apps, and AI devices while enacted technology involves the perception and usage of these technological devices by institutions and organizations. According to this theory, organizational policies determine the extent of perception and usage of technological-enhanced devices in the organization. Thus, the usage of technology in organizations differs and is a function of the organization's goals and policies and those who make up the organization. While some organizations may be more receptive to new technology, others may be less receptive to it (Fountain, 2004; Mergel & Edelmann, 2019).

Empirical Review

Preethi and Padmavathi (2024) studied the impact of digitalization on motor insurance using a sample of 100 insureds with motor vehicle covers. Their findings showed that the application of online self-service platforms grants easy access to data, enables the effective management of policies, and ease of claims services. Eckert, Eckert, and Zitzmann (2023) studied the effect of COVID-19 on the digital transformation of insurance sales. Using a sample size of 530 insurance agents drawn from different insurance companies, independent brokers, and agents in Germany, they discovered that between 2022 and 2023, there has been a pronounced rise in the perception and usage of digital applications in the German insurance industry while applications like video chat for client reporting have more protracted functions and increased usage.

The impact of digitalizing claims procedures on insurance firms' service delivery in Kenya was established by Angima and Jebiwott (2022). The 56 insurance firms in Kenya were the population, and a descriptive study approach was used. Utilizing questionnaires, data was gathered. The association between claims digitization and service delivery was evaluated using regression analysis and descriptive statistics. The results show that many insurance firms have partially adopted, if not completely, digitalized claims.

Ogbeide, et al., (2023) carried out a study on service quality and customer satisfaction. Using a sample size 100 respondents drawn from the customers of selected insurance firms in Akure metropolis of Ondo state, Nigeria, they applied the partial least square structural equation modelling (PLS-SEM) and found a significant positive effect of service quality (proxied by responsiveness and tangibility) on customer's satisfaction. Wang (2023) wrote on the digital transformation of the insurance industry and identified some of the challenges of digitalization of the sector to include imperfect digitalization mechanisms, unformed digitalization culture, limited investment in digitalization by insurers, and lack of clear and qualified leadership to man the process.

Methodology

The descriptive research design was used to organize the study, enabling the researchers to gather primary data and assess differing viewpoints about the possibility of digitalizing

insurance claim services for effective customer service delivery in Nigeria. Thus far, the research has concentrated on 58 insurance companies that are properly registered with Nigeria Exchange Group. A multistage random selection procedure was employed to choose life and non-life insurance sub-sectors for the study.

In the second phase, two life insurance and four non-life insurance firms were randomly selected to make a total of six insurance firms from the aforementioned insurance firms. The six insurance firms are *Stanbic IBTC Insurance and* Mutual Benefit Assurance Ltd as well as *AIICO General Insurance Co. Ltd., NICON Insurance Plc., Great Nigeria Insurance, and Leadway Assurance Plc.* The justification for the selection of these firms is based on a vast branch network and substantial client base. In the third and final phase, 30 insurance personnel were randomly selected from the six insurance firms to make a total of 180 insurance personnel. The researchers used primary data gathered from 180 randomly selected insurance personnel working for 6 randomly chosen insurance businesses that were the subject of the study. A Google form-administered questionnaire was adopted as the instrument of data collection. Guidance was sought from research experts in claims management in the insurance industry who assessed the questionnaire and provided content and face validity. A pilot test was carried out to test for reliability and a mean Cronbach Alpha score of 0.939 was obtained which is well above the 0.7 threshold and authenticates the reliability of the research instrument.

The study adopted the model employed by Angima and Jebiwott (2022) on claim digitalization and service delivery by insurance firms. Based on the model, the study proxied the digitalization of insurance claims with claim process automation while efficient customer service delivery is proxied by customer satisfaction. Hence, the model becomes:

$ECS = f(DIC)$ - - - - - - - - 1

ECS = Efficient customer service (proxy by customer satisfaction)

DIC = Digitalization of insurance claims (proxy by claim process automation)

By applying econometrics, the model is restated as:

$ECS = \alpha_0 + \alpha_1 DIC + \mu$ - - - - - - - - 2

Where:

α_0 = Constant

α_1 = Coefficients of parameter that was estimated

Results and Discussion

Descriptive Statistics of Respondents

Table 2: Distribution of Respondents According to Socio-Economic Characteristics (N = 180)

Item	Frequency	Percentage (%)
Gender:		
Male	78	43.3
Female	102	56.7
Age Bracket		
18 but less than 30	9	5.0
30 but less than 40	66	36.7
40 but less than 50	49	27.2
50 but less than 60	44	24.4
60 and above	12	6.7
Educational Qualification		
BSC/HND	151	83.9
MSC	12	6.7
PHD	1	0.6
Professional Certificate	16	8.9
Business Experience:		
Less than 5 years	43	23.9
5 years but less than 10 Years	59	32.8
10 years but less than 15 years	59	32.8
15 years and above	19	10.6

Source: Field Survey, 2024

Table 2 shows that 102 (56.7%) of the employees are female, while 78 (43.3%) of the employees are male. The employee's age ranges from 18 to 60 years old and beyond. Specifically, 9 people (5.0%) fall within the 18–50 age range, 66 people (36.7%) fall within the 30-year age range, 49 people (27.2%) fall within the 40–50 age range, 44 people (24.4%) fall within the 50–60 age range, and the remaining 12 people (6.7%) are within the 60–plus age range. The rest of the descriptives are as shown in the table.

Presentation of Core Issues of Investigation

Table 3: Perceptions of Members on Digitalization and Insurance Claim Services (n-180)

S/N	Items	Sum	Mean	Std Dev.	Decision
1	My organization has digitalized all its claims services	264	3.4731	.58500	Agree
2	My organization has a user-friendly digital claim processing system for both customers and insurance professionals.	250	3.3939	.48389	Agree
3	My organization has a well-designed and functional digital platform to handle its claims services	259	3.4405	.49814	Agree
4	My organization is well equipped with digital technology facilities for its effective claims' services	299	3.6685	.47595	Agree
	Grand Mean	1,072	3.494	.51074	Agree

Source: Field Study 2024

The average coding value of 3.0 was utilized to determine whether to agree or disagree based on the 4-point scale in the study instrument. A mean answer of more than 3.0 indicates that the respondents agree with the statement; several less than 3.0 indicate that the respondents disagree. The respondents agreed, based on the above analysis, that digitalization of claim services, friendly digital claims for customers and insurance professionals, digital platform and claim services, and effective digital technology and claim services had respective mean values of 3.4731, 3.3939, 3.4405, and 3.6685. Ultimately, the grand mean of (3.494) indicates that all four of the items as mentioned above had mean values of approximately 3.0, which implies an above-average adoption of digitalization of claim services in the industry.

Regression Analyses

Table 4: Test of hypothesis one: Insurance claims services have not been digitalized in the Nigerian insurance industry

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.662[a]	.439	.436	.329

a. Predictors: (Constant), Digitalised insurance claims services

ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	15.029	1	15.029	139.224	.000[b]
	Residual	19.215	178	.108		
	Total	34.244	179			

a. Dependent Variable: Nigerian insurance industry

b. Predictors: (Constant), Digitalised insurance claim services

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	T	Sig.
1	(Constant)	.418	.075		5.561	.000
	Insurance claim services	.582	.049	.662	11.799	.000

a. Dependent Variable: Nigerian insurance industry

Source: SPSS Version 23

Statistically, the model has a linear correlation of about 66.2% with adjusted R=square value of 43.6 suggesting that digitalization of insurance claims services influence Nigerian insurance industry. The result was further reiterated by the overall F.stat of 139.224, P<0.05, suggesting that the overall model is statistically significant. Moreso, the variable of digitalized insurance claim service individually contributes to Nigerian insurance industry by 58.2% which expressed that the more changes in digitalized insurance claims services, the more impactful and significantly it will affect insurance industry in Nigeria. Thus, the result is expected and accepted. Hence, the study inferred that insurance claim services have been digitalized in the Nigerian insurance industry.

Table 5: Test of hypothesis two: Digitalization of insurance claims services has no significant effect on efficient customer delivery in the Nigerian industry.

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.734[a]	.539	.537	.333

a. Predictors: (Constant), Claim process automation

ANOVA[a]

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	23.076	1	23.076	208.491	.000[b]
	Residual	19.701	178	.111		
	Total	42.778	179			

a. Dependent Variable: Customer satisfaction

b. Predictors: (Constant), Claim process automation

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	t	Sig.
1	(Constant)	.358	.076		4.740	.000
	Claim process automation	.821	.057	.734	14.439	.000

a. Dependent Variable: Customer satisfaction

Source: SPSS Version 23

The model's outcome demonstrated a 73.40 correlation coefficient with an adjusted R-square coefficient value of 53.7 between the dependent and explanatory variables. This suggests that the study's selection of factors was fruitful and rational in ascertaining the degree to which the claim process automation (digitalization of insurance claims) influences customer satisfaction (effective customer service delivery). According to an additional report, the model's overall statistical significance suggests that it is not error- and bias-free. Independently, the study demonstrates that, with a coefficient of 0.821, the claim process automation impacts customer satisfaction. All other variables being equal, this similarly favorable and substantial finding suggests that claim process automation would have a direct and significant impact on customer satisfaction by 82.1%. After the significant value of 0.00 < 0.05, this outcome is expected and accepted.

Table 6: Test of hypothesis three: Digitalization does not result in reduced premiums for the insured

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.456[a]	.208	.204	.438

a. Predictors: (Constant), Digitalisation of insurance claims

ANOVA[a]

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	.703	1	.703	2.974	.086[b]
	Residual	42.075	178	.236		
	Total	42.778	179			

a. Dependent Variable: Reduced premium

b. Predictors: (Constant), Digitalisation of insurance claims

Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta	T	Sig.
1	(Constant)	1.189	.121		9.804	.000
	Digitalisation of insurance claims	.127	.073	.128	1.724	.086

a. Dependent Variable: Reduced premium

Source: SPSS Version 23

Result of hypothesis 3 in Table 8 connotes that R (correlation) has a value of 0.456 whereas the R-squared and Adjusted R-squared have value of 0.208 and 0.204 respectively. By all indication, the result expressed that digitalization of insurance claims has a very low variation of 20.4% changes on reduced premium for the insured. Also, the model collectively is insignificant following the reported F. stat. value of 2.974 and its P. value 0.86> 0.05. Individually, the variable of digitalization of insurance claims expressed a positive and insignificant effect on reduced premium for the insured to the tune of 46.9%. To this extent, the study acknowledged that the efficacy of digitalized insurance claims, however, its effect remains insignificant on reduced premium, which stipulates that digitalized insurance claims does not translates to reduction in insurance premium.

Discussion of Findings

Notably, the study's goal was to investigate the digitalization of insurance claim services and the potential for effective customer service delivery in Nigeria. Three specific objectives have been designed to achieve the study's goal: finding out if the Nigerian insurance industry has digitalized its claim services; examining whether this digitalization encourages effective customer service delivery within the sector; and figuring out whether this digitalization can

lead to lower premiums for the insured. From the findings of the study, the Nigerian insurance sector has digitalized its claim services; nevertheless, this digitization has not resulted in lower premiums for the insured. This was determined using the mean and standard deviation. Regression analysis's t-test was also used to assess the study's premise. The test's outcome showed that digitalizing insurance claims had a favorable impact on effective customer service provided by Nigerian insurance companies. This outcome is anticipated given the current technological trend.

The finding that claim services are digitalized in the Nigerian insurance industry is in agreement with the Fountain technology enactment framework (2004) used in the study. It illustrates that the adoption of digitalization in the insurance industry is in tandem with their organizational goals and objectives based on their risk appetites. The positive effect of digitalization on efficient service delivery aligns with the study of Angima and Jebiwott (2022). Using a sample of insurance companies in Kenya, the authors observed a significant positive relationship between the digitalization of claims and service delivery in Kenyan companies. However, the finding that digitalization does not result in reduced premiums is contrary to the assertions of Naujoks, et al. (2022) who opined that digitalization is a tool for premium reduction in insurance companies.

The analysis supports Preethi and Padmavathi's (2024) empirical finding that digital platforms facilitate efficient policy management, simple access to data, and convenient claims services. This suggests that one way to provide services effectively is through the digitization of insurance claims. The findings of the study align with the empirical research conducted by Verma, Gupta, Goyal, and Sahni (2021), which concluded that digitizing the claim process is essential to improving the effectiveness of customer service provided by Nigerian insurance companies.

Conclusion and Recommendations

This research is an empirical investigation on the Nigerian insurance sector's use of digitalization for insurance claims and effective customer service delivery. Digitalization has been explained as the use of digital technology in carrying out processes in order to create value to the society. The digitalization of insurance claim services would enable easier and more user-friendly access to claim settlement and the transformation of the industry through innovative and customer-centric applications.

Regression, mean, and descriptive statistics were used to accomplish the study. Findings show that insurance claim services have been digitalized, and digitization of insurance claims has a significant positive influence on the effective provision of customer service in the Nigerian insurance industry.

The following suggestions are made from the findings of the study:

(i) There should be an increased effort to promote the digitalization of insurance claim services in the industry.

(ii) Policymakers and regulators should regulate the use of digitalization to ensure continued and efficient service delivery.

(iii) To improve service delivery, digitalized systems could be monitored to avoid infiltration by fraudsters.

(iv) There should be regular sensitization on the insuring public to improve the adaptation of digitalized methods.

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