IJBPAS, March, 2016, 5(3): 91-98

ISSN: 2277–4998

International Journal of Biology, Pharmacy and Allied Sciences (IJBPAS)

'A Bridge Between Laboratory and Reader'

www.ijbpas.com

THE RELATIONSHIP BETWEEN SOCIAL CAPITAL AND SELF CARE

BEHNAM NAJAFI[1], SOGAND TOURANI[2*], AMIR OMRANI[3], FATEMEH FARAJZADEH[4]

1: Department of Health Management, School of Health Management and Information Sciences, International Campus, Iran University of Medical Sciences, Tehran, Iran.

2: Department of Health Management, School of Health Management and Information Sciences, Iran University of Medical Sciences, Tehran, Iran.

3: Department of Health Management, School of Health Management and Information Sciences, International Campus, Iran University of Medical Sciences, Tehran, Iran.

4: Department of Health Management, School of Health Management and Information Sciences, International Campus, Iran University of Medical Sciences, Tehran, Iran

***Corresponding Author**

ABSTRACT

The present investigation examines the relationship between social capital and self care. Numerous studies on have attempted to understand the linkage between self-care and social capital. However, such studies have been inconclusive because of the lack of sufficient data means with regards to the correlation between the indicators of the two factors. The study speculates that despite the presence of numerous indicators, measure of connectedness is relatively effective one in the prediction of the interrelationship between self-care and social capital with focus on economic well-being. The study adopted literature review as the study methodology. It was established that self-care and social capital are positively and significantly correlated.

Keyword: self-care, social capital, well-being, economic growth

INTRODUCTION

Social capital in sociology is the expected financial or aggregate benefits accrued from the cooperation and preferential treatment between groups and individuals. Even though sociological sciences focus in distinct facets of social capital, they seem to have a common core concept, emphasizing that social groups are valuable (Ronconi, Brown, & Scheffler, 2012). On the other hand, self care is the key regulatory function that is international, self initiated and under personal control. In the contemporary medicine, self care aligns closely with preventive medicine. Failure to adhere to medical advice and the onset of mental disorders makes self care extremely difficult. Self care is considered as the partial solution to the rising health care costs. The idea that self is a significant pillar of social and health care implies that it is a critical component of a modern system of health care governed by legislation and bureaucracy.

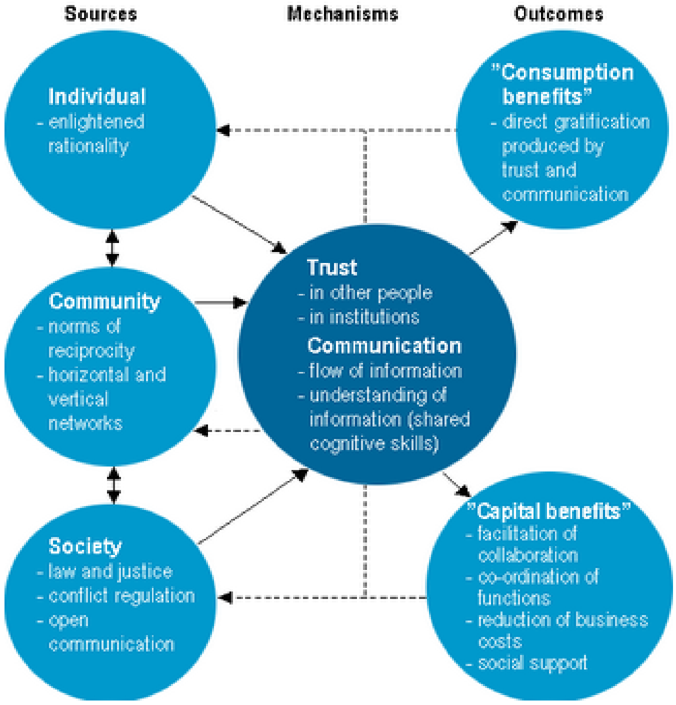

Figure 1: Source Diez-Roux, 2002

Without more occasions and information adjusted for the investigation of the correlation between social capital and development, numerous studies have essentially embedded national measures of interpersonal trust, social capital, and in some cases the nature of administrative unit different organizations, into cross-sectional development relapses (Diez-Roux, 2002; De Silva & Harpham, 2013). This approach is not liable to create persuading results, as measures of social capital have a tendency to be genuinely steady through time and occasionally surveyed so that there is a threat of blending of the cross-country impacts of social capital with an entire scope of different elements that vary between nations yet still inadequate measures. Studies show that outcomes for OECD nations and Asian economies are negative for the degree of organizational memberships, and trust as the outcomes based on Canadian and American provinces and states respectively. Nonetheless, by expanding the specimen to incorporate various middle-income nations, it was possible to distinguish a measurably significant connection of trust and economic development although not from hierarchical participations

METHODOLOGY AND MATERIALS

The study employs a review of literature as the research methodology for the purpose of understanding the relationship between self care and social capital. It gives primary focus to recent scholarly works on social capital and self care. The issue of self care and social capital continue to dominate public discourses as national are attempting to address the welfare of its constituents. The systematic review of existing literature was applied with Coleman's perspectives as the premise of the exploration.

A few meanings of social capital incorporate the nature of organizations, while latest social capital examination picks a smaller definition (De Silva & Harpham, 2013). This does not suggest a conviction that organizations are unimportant, or that they are not connected intimately with social capital. Coleman study of power devolution the contemporary Italy documents various manners in which powerful ties in Italy were related to more effective local government, as well as greater GDP (Coleman, 2008). There are also studies looking for the connections between the nature of organizations of various sorts to the quality and degree of economic development (Fantahun et al., 2007; De Silva et al., 2012).

The persuasive investigation of majority rules system in contemporary Italy document various manners in which powerful ties in Italy were related to more effective local government, as well as greater GDP (Coleman, 2008). It does not suggest that higher levels of social capital provide an environment conducive for the coexistence within communities for increased rates of economic development. The apparent connection between levels of social capital and self care, unlike one between social capital and economy has not been addressed (Bourdieu, 2006; Agardth, 2010). For the latter, the confirmation was as a positive one, with causal impact potentially running in either or both bearings or from different components influencing both salary and social capital (Caroll, 2001).

Studies on Italy on the power devolution provide deeper insights on the linkage between self-care and social capital (De Silva, McKenzie, Harpham, & Huttly, 2012). De Silva and Harpham speculate that despite the many dimensions the distinction among the twenty local governments in Italy, measures of connectedness can predict areas that would use the devolved powers effectively (De Silva & Harpham, 2013). Further, they contend that the assessment included a few pointers of administrative effectiveness prior to and after the process of the devolution, and by and large the anticipated outcomes were tracked - the more an administrative was horizontal, the highly likely it is effective in using the devolved power. It is farfetched that anybody saturated with the developments in history of European, sub-national locales would discover data to bolster such connections, since the transcendent post-war trend of union among the European areas saw the economically deprived Italian districts, which likewise had a tendency to have lower levels of social capital, becoming quicker than the wealthier locales (Carpiano, 2006).

Nonetheless, since the legislative changes occurred halfway through the convergence process, it was conceivable to test for a moderating or even a transitory inversion of convergence for those locales with lower social capital (Carpiano, 2006). Consequently, treating the changes as an incidental occasion exasperating an expectedly modeled process of the geographical area for the identification of the disruptive developmental impacts of lower social capital is unwarranted. Amid the mid-1980s, the provincial development convergence in Italy was turned around in those locales with lower degree of social capital (Carpiano, 2006). There is dependably the likelihood that some factor was behind the inversion, and the assessed impact did not have a high level of statistical accuracy. In any case, the outcome propose that inter-territorial difference in the effectiveness of local government, which turned out to be considerably more critical when more noteworthy power were reverted to the locales, were, for example, to briefly switch the development rankings of the areas, for those with more elevated levels of social capital.

RESULTS AND DISCUSSION

Scholarly works agree that self care and social capital are passively correlated (Agardth et al., 2010; Frumence et al., 2010). Similar outcome were depicted from a sample of forty nations, and were significantly more effective in discovering a positive connection between investment rates and trust levels. Studies separate organizational participations into two, one of which is prone to involve enrollments of associations whose cohesiveness and achievement may be accomplished to the detriment of non-individuals, and subsequently be more averse to add to total development (Edgeworth, 2007). In the conception, Coleman's perspective becomes a dominant one, asserting that most groups are rent-seeking institutions, with negative implications for monetary proficiency and development (Coleman, 2008).

On the other hand, other studies discover no proof that enrollment in either kind of association has a significant influence on development and no confirmation that associations linking economic growth and human capital. The studies note that the essential proof connecting financial development and social capital comes not from direct metrics of connectedness but rather from universal contrasts in trust (Erulkar, 2008). The impact is applied in two courses: as an immediate impact of trust on development, and as an impact of trust on speculated spending, with venture then increasing yield per capita either by means of expansions in the capital proportion or through some assumed connections between the pace of speculation and the normal level of mechanical effectiveness. In both cases the presence and quality of the outcomes are delicate to the time periods and nations utilized as a part of the example (Carpiano, 2006).

Figure 2: Source Caroll 2001

As contended, the reason for embracing a smaller meaning of social capital is to accomplish clarity, furthermore to unravel what social capital is what it does. In this setting, it is maybe fitting to consider both trust and institutional quality as, to some extent, outcomes of social capital (and also conceivable reasons, obviously), as opposed to as a major aspect of social capital. A sociological study on social capital places essential accentuation on the contacts or systems procured by people to encourage their own behavior and auxiliary emphasis on the outcomes for their groups. There is a coordinating strand of monetary studies stressing the hypothetical significance of contacts and systems for people and attempting to clarify singular choices to create and broaden their own particular systems (Frumence et al., 2010). Whether the center is choices by people about group cooperation or national-level assessment of social capital, the hypothetical and exact commitments tend to accord a focus on trust. In a domain of trust, people accept that others are kindhearted and are independent on costly battles or confounded contracts to bolster their monetary and social ventures.

There is a vast group of theoretic work demonstrating that under states of instability commonly advantageous results are significantly more probable when dealings are portrayed by the proverb on others. Such a behavior has an ethical power in numerous religions because if across the board it prompts positive results for society (Agardth et al., 2010). It additionally works with self-intrigued rules in circumstances of thick and rehashed interpersonal dealings. By difference, where general trust levels are low, individuals risk more prominent misfortunes, and being named brainless hoodwinks, in the event that they do not avoid any unnecessary risk. This frequently involves keeping away from what generally may be great endeavors, or else loading exercises with costly defensive things. There is dialog and civil argument about the degree to which individual systems of trust and contacts are substitutes for an indifferent business sector represented by the standard of law (Bourdieu, 2006). It appears to be clear that a lawful framework with characterized and enforceable principles is more necessary without individual ties, however in the social capital, the accentuation is on the degree to which trust and legal systems and public establishments are complementary. Any lawful framework is less complex and less demanding to set up and implement on the off chance that it only classifies acknowledged standards of behavior.

CONCLUSION

The present investigation examined the relationship between social capital and self care. Numerous studies on have attempted to understand the linkage between self-care and social capital. Scholarly works agree that self care and social capital are passively correlated (Agardth et al., 2010; Frumence et al., 2010; Coleman, 2008).To conclude, it does not suggest that more elevated amounts of social capital provide a environment conducive for the smooth existence within communities for increased rates of economic development. There is a higher correlation between trust of the people of the system of administration and economic development, which ultimately translates to wellbeing.

REFERENCES

[1]Agardh, A., Emmelin, M., Muriisa R., & Ostergren P. (2010). *Social Capital and Sexual Behavior among Ugandan University Students*. Philadelphia: Global Health Action Press.

[2]Bourdieu, P. (2006). *The forms of capital. Handbook of theory and Research for the sociology of education*. New York, NY: Greenwood Press.

[3]Carpiano, R. M. (2006). Towards a neighborhood resource-based theory of social capital for health: Can Bourdieu and sociology help? *Social Science and Medicine*, *62*(1), 165–175.

[4]Carroll, T. F. (2001). *Social capital, local capacity building, and poverty reduction* (No. 3). Office of Environment and Social Development, Asian Development Bank.

[5]Coleman J. S. (1998). Social capital in the creation of human capital. *American*

Journal of Sociology, 94(Suppl.), S95–S120.

[6]De Silva, M. J, Harpham, T. (2013). Maternal social capital and child nutritional status in four developing countries. *Health and Place, 13*(2), 341–355.

[7]De Silva, M. J., Harpham, T., Tuan, T., Bartolini, R., Penny, M. E., & Huttly, S. R. (2006). Psychometric and cognitive validation of a social capital measurement tool in Peru and Vietnam. *Social Science & Medicine, 62*(4), 941-953.

[8]De Silva, M. J., McKenzie, K., Harpham, T., & Huttly, S. R., (2005). Social capital and mental illness: A Systematic review. *Journal of Epidemiology and Community Health, 59*, 619– 627.

[9]Diez-Roux, A. V. (2002). Glossary for multilevel analysis. *Journal of Epidemiology and Community Health, 56*(8), 588–594.

[10] Djamba, Y. K. (2003). Social capital and premarital sexual activity in Africa: The case of Kinshasa, Democratic Republic of Congo. *Archives of Sexual Behavior, 32*(4), 327–37.

[11] Edgeworth, R., & Collins, A. E. (2006). Self-care as a response to diarrhea in rural Bangladesh: Empowered choice or enforced adoption? *Social Science and Medicine, 63*(10), 2686 – 2697.

[12] Erulkar, A., & Ferede, A. (2009). Social exclusion and early or unwanted sexual initiation among poor urban Females in Ethiopia. *International Perspectives on Sexual and Reproductive Health, 35*(4), 186–193.

[13] Fantahun, M., Berhane, Y., Wall, S., Byass, P., & Högberg, U. (2007). Women's involvement in household decision-making and strengthening social capital—crucial factors for child survival in Ethiopia. *Acta Paediatrica, 96*(4), 582–589.

[14] Frumence, G., Killewo, J., Kwesigabo, G., Nyström, L., Eriksson, M., & Emmelin, M. (2010). Social capital and the decline in HIV transmission: A case study in three villages in the Kagera region of Tanzania. *Journal des Aspects Sociaux du VIH/SIDA, 7*(3), 9–20.

[15] Ronconi, L., Brown, T. T., & Scheffler, R. M. (2012). Social capital and self-rated health in *Argentina. Health economics, 21*(2), 201-208.