

## **Social Capital and Health: A Multidimensional Approach**

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### **Abstract**

In the last few decades as American society and urban life has changed dramatically, public health and urban sociological research has focused on the effect of residential location on individual well being. In recent years, social capital theory has been used as an important pathway in understanding the associations between where one lives and health and social outcomes. This research has often relied on Putnam's theory (1993, 1995, 2000) and a communitarian approach to defining social capital and its possible relationship to health and well-being. Although Putnam's social capital constructs have been popular with many researchers, it has been criticized for its lack of depth and its inability to explain the causal pathways in which social capital and health operate. In addition to the negative impacts of this over-reliance of Putnam's work within the public health literature, there has been substantial criticism that the measures used by Putnam based theorists are too conceptually broad and limited in scope as it is often reduced to three variables. In this research, we use a more recent paradigm of social capital theory that delineates social capital into several dimensions thereby enabling one to understand that different forms of social capital and cohesion have different impacts (both negative and positive) on health outcomes and well-being. We will evaluate a strictly Putnam-based social capital model as measured by the predominant three variables against the utility of a multi-dimensional model that measures social capital across several constructs and variables.

We utilize this re-specified framework that delineates the different forms of social capital from social cohesion (the Putnam-based Traditional Model) while incorporating neighborhood social conditions as antecedent factors within the model with a new dataset. Additionally, recent sociological research using this different paradigm highlighted the important role of individual attachment to the neighborhood as an important mediator in the association between social capital and health outcomes. We will analyze data from the Fragile Families and Child Wellbeing Study (FFCWS), a longitudinal birth cohort study of families in 20 cities with populations of 200,000 or more people. Using FFCWB wave 4 data responses by mothers, we investigate the role of social capital as measured across four dimensions, social cohesion (the Putnam-based Traditional Model), individual neighborhood attachment, and neighborhood socio-economic conditions on the likelihood of maternal smoking, drinking, and self rated health.

Moreover, this model will be enhanced by the addition of another feature of social capital that was not addressed in prior research, bridging social capital. Bridging social capital has also been defined as relationships among individuals who are not alike in social identity or characteristics. In recent years, bridging social capital at times has been further refined to highlight the relationships with heterogeneous networks who do not share the same power structures and institutions, and economic spheres. This has been referred to as “linking” social capital. In this research, we will incorporate a measure of bridging social capital to highlight the possible role this form of social capital may play in understanding the association of social capital and health outcomes.

This research extends the current literature by applying a recently developed model of social capital on a new data set. This study hopes to not only to explore self rated health, neighborhood socioeconomic conditions, indicators of social capital (as defined by social support, social leverage, informal social control, neighborhood organization participation, and bridging social capital), and the role of individual neighborhood attachment but also highlight the importance for public health researchers to use a multidimensional approach rather than rely on utilizing a traditional Putnam-based approach to understanding the association between social capital and health and well-being.

These different dimensions, along with other health factors, will be statistically tested through multiple regression analysis, which will highlight a hypothesized interaction effect between individual neighborhood attachment and social capital and its association with health outcomes and behaviors. In this research, we aim to further advance the public health discourse regarding the association between social capital, measured across several dimensions and conceptualized through a network based lens, and health outcomes.