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Investigating the Impact of Social Capital on Preventing Addiction among Secondary School Students in Sourak

Elham Kazami*[1]

[1] MA. ofPsychology department, Sari branch, Islamic Azad University, Sari, Iran

*Corresponding author's E-mail: elh_kazm@yahoo.com

ABSTRACT

The purpose of this study was to investigate the impact of social capital on preventing addiction among secondary school students in Sourak. The research method was descriptive survey and in terms of purpose was applied survey. The statistical population of this study is consisted of high school students in Sourak, which totally were 521 people. According to the standard table of Karjetsi and Morgan,217 high-school students have formed the statistical sample. To access the sample, simple random sampling method was used. The instrument for collecting data in the research was Social Capital Questionnaire. The validity of the questionnaires was confirmed by obtaining the opinion of the experts and the reliability obtained from Cranbach's alpha was 0.81 for the social capital questionnaire. To test the research hypotheses, a single-sample t test was used. The results showed that that social capital and its dimensions (social participation, social trust, social cohesion, and social relations) are effective in preventing the addiction of students.

Keywords: social capital, social participation, social trust, social cohesion, social relations, addiction.

1. Introduction

One of the plans in the new world is to pay attention to the active and effective participation of all people in society in all aspects of development.Social institutions create social capital and facilitate and make possible to achieve goals that were impossible or costly in their absence.

The inherent characteristic of social capital is that it forms in social relations. According to Portz (1998), social capital is found within the structure of relationships. To have social capital, one must be in touch with others.Social capital is the total available real and virtual resources to an individual or group that has achieved it through the existence of a durable network of more or less interconnected understandings.Bourdieu (1986) believes that the amount of social capital that a person has, depending on the size of his communications network, can be effectively changed (Tajbakhsh, 2005).

In social capital, individuals and communities increase their capabilities in the form of values, norms and social ties which created through social interactions, while at the same time gaining control over their lives, gaining environmental and social support that are obtained by their communication networks.Social capital enables us to create value, do things, achieve our goals, complete our missions in our lives, and contribute the world in which we live.In this case, Whitford (2000) states:"Today, socioeconomic determinants of health are well-documented and there is evidence that the more individuals are socially isolated, they have less mental health, and the more socially integrated the society is, the more healthy it will be.Reducing the burden of mental illness and mental health increases the features that are needed to accept the social roles of individuals.Mental health along with physical health adds to the competencies required for the participation of people in the community and provides social capital at the national level (Barati Sadeh, 2006).

They make new theories that are the primary motive for participation, that is, progress and evolution with others. Helping others both in small and large scale, enrich social capital and create a vast network of interactions.Social capital can be derived from the phenomena of mutual trust, mutual social interaction, social groups, collective identity, the feeling of a shared vision of the future and a working group in a social system.Social capital is briefly manifested in indicators such as loyalty, trust, network connections, individual authority, organizational identity, reciprocity, social norms, and credibility (Sharipoor, 2001).Kaplan and Lynch (1997) have introduced social capital as a form of accumulation of capital and networks that create social cohesion, social commitment and, consequently, a kind of self-esteem and health in people (Honorable, 2003).

The economic functions of social capital include the reduction of transaction costs, the facilitation of some formal relationships (such as contracts, hierarchies, etc.), improving efficiency, speeding the exchange of information, strengthening initiatives and reducing corruption.In fact, the main function of economic social capital is to facilitate any exchange. One must have full confidence in individuals, and interpersonal trust - as well as in institutions - abstract trust and assurance of observance of norms, including trust in institutions, trust in social

groups, trust in authorities, and so on.Both dimensions of intragroup and intergroup of social capital are useful for the success of socioeconomic development (from prevention) (Firoozabadi, 2006).

Little social capital can predict crime, offense, and addiction. Social health is predictable due to the social relationship.The lack of social capital (trust and networking links) in people causes them not to participate in social activities. Theories point to the fact that the greater the cohesion and solidity within a group, community or society, the higher the level of crime and deviation.According to Harpam (2004), social capital reduces the stressors in life and reduces the risk of these factors. Social capital can also reduce the impact of negative life events. The consequence of the lack of meaning in life is the development of a triumph of depression, aggression and addiction. A person who becomes alien to himself, loses his sense of commitment and belonging to others, and his social relations are harmed.Hence, this situation reduces external social control and pushes people towards deviant behaviors.In general, as a result of the erosion of social capital, society suffered from damage and social deviations, such as an increase in crime and offenses, murder, the collapse of the family, drug abuse, suicide, tax evasion, etc., and psychological injuries such as lack of sense of belonging, alienation, nihilism, feelings of isolation and depression, reduced sense of happiness and physical health (Field, 2007).

Drug abuse has a deterrent effect on the growth and prosperity of the community and poses a serious and worrying threat. Dependence and drug abuse are considered as a chronic and recurrent disorder with educational, cultural, psychological, social, behavioral, and spiritual influences.The problem of addiction is a matter of every community as a lethal phenomenon, whose results can have very high social, cultural, political and economic implications, (Amini, 2009).

Positive role models and supportive networks have a powerful inhibitory effect on networks for adolescents, and they get away from crime.Rose (2000) believes that social capital is only achieved through institutional membership and that social capital networks have influence role particularly in providing emotional and psychological support to the individual's mental health.As a result, social capital plays a role in determining the likelihood of individuals turning into criminal behavior and addiction. Of course, social capital is not considered as the only effective factor here (Winstar, Gary, 2005).

Identifying and strengthening social capital in the form of NGOs and voluntary membership will increase the level of cooperation among members in social and community groups, thereby increasing the level of communication, monitoring and controlling at the level of social institutions, thus, it can be used in the addiction prevention process.The social capital makes a society healthier, wealthier, and perhaps more satisfying.

Since NGOs are one of the basic tools of modern state management to develop social-political and developmental activities and they play a major role in the development process in most countries, there are a number of reasons why this is a serious consideration in our country. And the government is trying to help them to form and build these civil society institutions in their developmental activities.

Now, considering what is being addressed in the plan, the main question is whether social capital is effective in preventing the addiction of high school students?

2. Literature Review

Today, the role of social factors in mental health is significantly determined. Growing and expanding attention to social factors and their role in mental health in third world countries is associated with the growth and development of social capital and social models must be formed.Social capital is discussed as a factor in the success of social welfare programs in social health, and for this reason, today has a special place in the study and development of social indicators and development by a recognized global organization.

Mohammadi et al. (2010) conducted a research study called the sociological study of the relationship between social capital and Internet addiction among the youths in Hemedan. The results of data analysis indicate that Internet addiction is (41.05) among boys and (36.41) among girls.Also, the findings indicate that there is no significant relationship between internet addiction and social capital. Moreover, there was no significant relationship between age, field of study and Internet addiction, but there was a significant relationship between addiction to the Internet and gender.

Gholami Kotanaei, Ghorbanezhad (2014) have done a research study on the effect of social capital of the family on youth addiction (Ghaemshahr). The research findings indicate that there is a meaningful relationship between social capital of the family and its dimensions with drug addiction.Also, according to the results of the multiple regression of this research, it is visible that among the dimensions of cognitive social capital within the family (-0.334), it has the highest power, which is the strongest predictor of the behavior of drug addiction among young people.

Amini, Talebi, Zahedi Asl (2009) have investigated a study on social factors affecting addiction with emphasis on social capital (comparison between addicted and non-addicted people). The results of data analysis indicate that there is a meaningful relationship between the amount of social capital of individuals and addiction,there is a meaningful relationship between the level of social trust in people and addiction, there is a significant relationship between the level of social participation and addiction, there is a significant relationship between the status of social networks of people and addiction.There is a significant relationship between the amount of opportunities available to the individual and addiction, but there is no relationship between the amount of control and social monitoring and addiction.

Moradi et al. (2015) have done a research study on the role of social capital on the tendency of adolescents and young people to addiction (15 to 25 years old) in Yasoj. The findings suggest that there is an inverse relationship between social capital, parental education, and religiosity and addiction tendency.Also, there was no significant relationship between the peer group variable and tendency to addiction. Regression was used to simultaneous test of the relationship between the independent variables of the research and the rate of addiction.The results of regression analysis showed that two variables of religiosity and social capital can explain 26.9% of variations of variance of dependent variable.

Springer and colleagues (2006) have studied the relationship between received parental social support and social cohesion in school with high-risk behaviors that the results of the study showed that female students who received less social support from their parents were more likely to commit high-risk behaviors.Students with less social cohesion were more likely to have suicidal thoughts and alcohol abuse. In this study, male students had more high risk behaviors.

Chi Jang and Yang Chang (2008) have conducted a study titled gender differences in the relationship between social capital and tobacco and alcohol consumption in Taiwan, which showed that there was a negative relationship between social capital and cigarette smoking and drinking alcohol.Social trust had stronger effects on smoking and alcohol abuse among women than men. But the effect was weaker than men. Given that women spend more time in the neighborhood, there was a positive correlation between social participation and alcohol abuse.In this study, social trust and proximity to the neighborhood can be seen as a manifestation of the cognitive interpretation of social capital. Which leads to a reduction in drug abuse. One of the reasons is that lower levels of stress and anxiety are inherent in the trust of others.

Thorold son et al. (2012) conducted a research on social structure, social capital, and smoking in adolescents, which research findings showed adolescents who lived in relatively high level neighborhoods with single-parent families and also had a high level of residential mobility compared to those in other neighborhoods smoked more. As a result, social capital has a negative relationship with smoking.

2-1. Hypotheses:

The main hypotheses: Social capital is effective in preventing student addiction.

The sub-hypotheses:

- Social participation is effective in preventing student addiction.
- Social trust is effective in preventing student addiction.
- Social relationships are effective in preventing student addiction.
- Social cohesion is effective in preventing student addiction.

3. Methodology

The research method was descriptive survey and in terms of purpose was applied survey. The statistical population of this study is consisted of high school students in Sourak, which totally were 521 people. According to the standard table of Karjetsi and Morgan, 217 high-school students have formed the statistical sample. To access the sample, simple random sampling method was used. The instrument for collecting data in the research was Social Capital Questionnaire. The validity of the questionnaires was confirmed by obtaining the opinion of the experts and the reliability obtained from Cranbach's alpha was 0.81 for the social capital questionnaire. To test the research hypotheses, a single-sample t test was used.

4. Finding

Table 1: The summary of the statistical test results of the research hypotheses

Variables	Group statistics			
	Number	Mean	Standard deviation	Deviation from the mean
Social capital	217	89.5	13.92865	0.71079
Social participation		20.38	4.43011	0.22607
Social trust		23.83	4.76607	0.24322
Social cohesion		26.14	3.29348	0.16807
Social relationships		18.69	4.67086	0.23886

Table 2: The summary of the statistical one-sample t-test results of the research hypotheses

Row	Variables	number of samples	Statisticst	Degrees of freedom df	The significance level	The result of the hypothesis
The main hypothesis	Social capital	217	121.72	216	0.000	Confirmed
1	Social participation		76.890		0.000	Confirmed
2	Social trust		85.679		0.000	Confirmed
3	Social cohesion		67.685		0.000	Confirmed
4	Social relationships		65.708		0.000	Confirmed

According to the above table, since calculated statistics t (statistics t= 76.890 and sig = 0/000 for the first hypothesis),(statistics t= 85.679 and sig = 0/000 for the second hypothesis),(statistics t= 67.685 and sig = 0/000 for the third hypothesis),(statistics t= 65.708 and sig = 0/000 for the fourth hypothesis),at 95% confidence level ($\alpha = 0.05$), and the degree of freedom is df=217-1=216 is bigger than the t ofcritical table (t = 1/64), so the null hypothesis (H0) is rejectedand the research hypothesis is strongly confirmedby the data thus it can be concluded with 95% confidence that: Social participation, social trust, social cohesion, social relationships are effective in preventing addiction among students.

Also totally, according to the above table,since calculated statistics t (statistics t= 121.072 and sig = 0/000 for the main hypothesis),at 95% confidence level ($\alpha = 0.05$), and the degree of freedom is df=217-1=216 is bigger than the t of critical table (t = 1/64), so the null hypothesis (H0) is rejected and the research hypothesis is strongly confirmed by the data thus it can be concluded with 95% confidence that:Social capital is effective in preventing student addiction.

5. Discussion & Conclusion

Drug addiction is one of the most complex social issues in the present age that causes many social deviations and injuries. In other words, the relationship between addiction and social issues is a two-way communication;on the one hand, addiction brings society down to decline and, on the other hand it is a phenomenon rooted in social, economic and cultural issues. Addiction reduces one's tendency to ethical and spiritual principles and social values.

So far, scholars from different disciplines have identified various causes and factors for drug abuse on the basis of different perspectives, and tried to explain this phenomenon, the social capital approach is discussed the role of factors such as social trust, social participation and social networks by taking into account the relationships that individual have with others.

Addiction is one of the effects of the decline in social capital, and with the increase in social capital and the emphasis on the role of NGOs, drug addiction can be significantly prevented.Strengthening and enhancing social motivation in all individuals especially addicts and organizing them in civil institutions cause to create special treatment and support cultures

andwhile creating a higher level of social participation andsocial belongingindirectly controls social and therapeutic behaviors and interactions of members of these institutions that are dependent on existing policies, as well as reducing the cost of treatment and formal controls, creating job opportunities, and transferring knowledge among members of the groups.In general,in order to prevent addiction and improve the quality and effects of treatment and reduce harmsocial indicators (especially the creation of active community organizations) should be consideredin addition to the field of medical treatment.

Since addiction prevention is a fundamental goal of eradicating and reducing addiction, it seems that a change in the quality of education, the creation and expansion of social capital among the community, especially the youth and adolescents, can be a solution.In social capital, individuals and communities identify themselves in the form of values, norms, and social ties that arise their capabilities during social interactions, while at the same time can gain the control over their lives, obtain environmental and social support from the existing communication networks.And thus, the power of coping with the pressures and environmental issues has increased, and they will be mentally comfortable with peace.

Since social capital has self-empowerment and self-reliance, it can help members of social institutions to access to the resources such as trust and interactive networks, and can improve group performance in achieving its goals by facilitating concerted actions.In this regard, trust networks lead to more time and money devoted to the main activities of adolescents and young people, and, in addition, they can transfer the knowledge of the members of the groups to each other and provide a proper flow of learning and knowledge among them.Strengthening and enhancing social motivation in adolescents and youth and organizing them in civil institutions has led to the formation of special support cultures in these institutions.

It is suggested that develop norms based on the incentive for participation and the spirit of team collaboration for the youth and the community through policies and plans and training, and help them in a safe and stable environment for action and reaction to expand, strengthen and consolidate social capital, as well as encouraging them to avoid individualism.Strengthening the social networking structure that facilitates interactions, strengthening civil society organizations and NGOs specializing in youth and adolescents, strengthening and enriching education in the form of entertainment, encouraging people to volunteer in social institutions, and giving concessions to members are the government's important functions in raising socialcapital.

References:

1. Eftekhari, A., (2003). The lack of social capital and its impact on security. Imam Sadiq University Research Center (Issue 11 and 12).
2. Amini, Talebi, Zahedi Asl (2009) Investigating Social Factors Affecting Addiction with Emphasis on Social Capital (Comparison between addicted and non-addicted individuals, Master's Thesis, Faculty of Social Sciences, Allameh Tabataba'i University.
3. Barati Sadeh, F., (2006). Social exclusion threatens mental health. Hamshahri news papar. No. 4101.

4. Tajbakhsh, K. (2005). Social Capital: Trust, Democracy and Development in Tehran: Shirazeh Publication.
5. Sharepour, M., (2001). The erosion of social capital and its consequences. Sociological Association. 3.
6. Gholami Kutanaei, Ghorbannezhad (2014) The Effect of Family Social Capital on Youth Addiction (Ghaemshahr), Two Quarterly Journal of Contemporary Sociology Researches, Vol. 3, No. 4, Spring & Summer 2014, p. 115-139.
7. Firoozabadi, SA. Imani Jajarmi, H., (2006). Social capital and socio-economic development in the metropolis of Tehran. Journal of Social Welfare. Year 6, No. 23.
8. Field, J. (2007). Social capital. Translated by: Ghaffari, Gh. Ramezani, H., Kavir Publication.
9. Mohammadi, A., Naghdi, A., Aliverdinia, A., Kiani, M., (2010) Sociological Study of the Relationship between Social Capital and Internet Addiction among Youth in Hamedan, Youth Research, Culture and Society: Autumn and Winter 2010, Volume No. 5; From page 1 to page 27.
10. Moradi et al. (2015) Investigating the role of social capital on the tendency of adolescents and young people (15 to 25 years old) in the city of Yasoj, a quarterly journal of law enforcement, Kohgiluyeh and Boyer Ahmad, Volume: 8th, Autumn, 2015.
11. Winstar, G. (2005). Social capital, health and inequality. Published in: Tajbakhsh, K., Social Capital, Trust, Democracy and Development (translated by Khakbaz, A., and Pooyan, H.). Tehran, Shirazeh.
12. Bourdieu, p. (1986).The forms of capital, Richadson, J.G. (Ed).Handbook of Theory and Research for the Sociology of Education. Greenwood press, New York.
13. Harpham, T. (2004). "Urbanization and Mental Health in Developing Countries: A Research Role for Social Scientists, Public Health Professional and Social Psychiatrists", Social Science and Medicine, Vol. 39.
14. Portes.A. (1998).Social Capital: Its Orgins and Application in Contemporary Sociology. Annual Review of Sociology, 22.
15. Rose, R. (2000). "How much does Social Capital add to Individual Health?" Social Science and Medicine, Vol. 51.
16. Uslaner, E. M. (2002). The Moral Value of Trust. Cambridge University Press, Cambridge.
17. Whiteford, H. (2000). Human Capital, social capital and Mental Health (WFMH: Third Quarter New Fetter 2000). Copy Right 1998-2000 world federation for mental Health.