

## Evaluation of social capital among students of Isfahan University of Medical Sciences in 2016

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**Accepted for publication:** 15 December 2018

### Abstract

**Background:** Social capital includes a series of issues and values, which is potentially in relation with social groups and organizations. Due to the importance of social capital as a determining factor in the health, this study aimed to evaluate the social capital in the students of the Isfahan University of Medical Science.

**Methods:** This survey was the first phase of a survey that was carried out in Isfahan University of Medical Sciences on 700 students. Students were selected by a stratified random sampling method. Data on social capital of students were collected using Bullen questionnaire. For data analysis, IBM SPSS Statistics for Windows, Version 22.0. software was used.

**Results:** The mean (SD) score of social capital of the students in this study were 62.11 (14.6), in which the lowest score belonged to the cooperation domain and the highest one belonged to the identity. The most important factors that related to the social capital of the students, included the gender (male: 58.82 (15.87) vs. female: 65.44 (15.87),  $P=0.028$ ), residency (dormitory: 62.89 (14.3), live with family: 62.22 (14.27), personal home: 50.53 (20.63),  $P=0.006$ ) and educational level (doctorate degree: 60.48 (13.79) vs. bachelor degree: 63.27 (15.07),  $P=0.019$ ).

**Conclusion:** The results of this study showed that the social capital score of college students was in a moderate level and policymakers need to design interventions in order to improve students' social capital especially in the level of their participation in the society.

**Keywords:** Female; Social Capital; Students

**Cite this article as:** Farajzadegan Z, Heidari K, Samoei R, Tavakolifard N. Evaluation of social capital among students of Isfahan University of Medical Sciences in 2016. *SDH*. 2018;4(4):217-225. DOI: <https://doi.org/10.22037/sdh.v4i4.23112>

### Introduction

In recent decades, some studies have been carried out on the identification of the effect of factors like income, poverty and social media on the individual's health condition. Medical researchers indicate that in addition to chemical and bacterial risk factors, the social and economic structure of society has an impact on the health, either. Social phenomenon and factors have shown more relation with people's health

than medical care. Social capital is a new concept that is considered as one of the health determinants and has attracted public attention (1). There is a set of social values or sources which are potentially included in social relations, interactions, quality, and types of support among people of groups and organizations (2). Confidence, group solidity, and relationship, awareness, participation in public affairs and cooperation are also considered (3-4).

Therefore, social capital and utilizing its parameters among community members are significant factors on social connection and participation. In addition to its effect on the mental and social health of participants, many issues such as the quality and quantity of social engagement, using social recourses and facilities depend on it (3).

Evidence about relation between the social capitals and social identity as human capacity among students of 11 universities in Iran indicated that the growth and support of students' social capital, led to support their social identity, therefore, help them to detect their different form of their social identity, such as family, national, and religious identity (5). Psychological health of the students is correlated to social capital of them (6).

Studies carried out in Iran indicate that post-educational system wasn't able to have an important impact on the social promotion of educated people. Contrary to global researches, an increase in education in Iran has shown a negative effect on the Iranian social capital rate (7).

Due to the importance of the social capital as a determining factor on the students' health, the aim of this study was to determine the social capital score and factors affecting it among the students of the Isfahan University of Medical Sciences.

## Methods

This study was the first phase of a survey, which was designed as a cross-sectional study and conducted in Iran at Isfahan University of Medical Sciences in 2016. The study population was students who have admitted to study at this university in 2016. Isfahan University of Medical Sciences is one of five prestigious universities of the country (8) and offers education in nine fields. Around 1500 students are accepted each year in the university and register in related schools. The sampling method of this study was stratified random sampling. We got samples from each school and weighted

based on the of the number of students and the ratio of male to female at each school.

The sample size of this study was calculated by the formula using average values. Considering the standard deviation of social capital of 13.72 (1) and a precision of 1 and alpha error level of 0.05, a sample size of 700 was calculated.

The modified Persian version of Bullen questionnaire contains 30 items and was validated by the researcher at this study. The validity of the questionnaire was achieved by the expert panel, and reliability was assessed by test re-test and Chronbach's Alpha. The questionnaire was completed twice in a month by 30 students. Pearson correlation was 0.83 and Chronbach's Alpha was 0.87.

It was a self-administered questionnaire, contained 8 subscales including Confidence containing 5 questions (items number 1, 2, 3, 4 and 5), Network (items number 6, 7, 8 and 9), Co-operation (items number 10, 11 and 12), relationship (items number 13, 14 and 15), values (items number 16, 17 and 18), Understanding (items number 19, 20, 21 and 22), Commitment (items number 23, 24, 25 and 26) and identity (items number 27, 28, 29 and 30). Items were scored as: 0=never; 1=little; 2=somewhat; 3=very; 4=very much. Minimum and maximum range of scores of questionnaire were zero and 120 respectively.

All participants invited to consolation center of the university, and after explanation of the purpose of the study and following their agreement, the questionnaire was administered by the researchers. The demographic data such as age, gender, educational level, marital status, and type of residence were recorded. Descriptive statistics were used to present the demographic data and the social capital score. The Student's t test, One-way ANOVA, and chi-square test were used to determine the difference between the groups in demographic and outcome variables. For data analysis, IBM SPSS Statistics for Windows, Version 22.0. software was used.

The study was approved by the Ethics committee of the Vice Chancellor for Research, Isfahan University of Medical Sciences (Ethical code: 387197). Oral and informed consent was obtained from all participants.

## Results

In this study, 700 participants from Isfahan University of Medical Sciences were recruited. The response rate was 100%. The demographic characteristics of students are shown in table 1.

The best positive point of view was “I believe that people, in the long run, help themselves by helping others” (505 (72%) answered very and very much) and the worst negative attitude was “Students to critique each other’s in a constructive way” (283 (40.2%) answered never and little). The results are shown in table 2.

The mean (SD) score of social capital, which indicates the total amount of its

whole dimensions was 62.1 (14.40). Minimum score was 17 and the maximum was 102. The lowest average amount was related to the domain of cooperation with friends and family, and the highest belonged to the domain of identity. The results are shown in figure 1.

The total score of the married was higher than that of single students, but this difference wasn’t statistically significant ( $P=0.368$ ). The score of social capital and its dimensions were compared regarding gender, the findings are demonstrated in table 3.

The total score of students with a bachelor degree was higher than that of doctorate grade, and this difference was statistically significant ( $P<0.05$ ). Although among different dimensions, the field of confidence, identity and values did not have a statistically significant relationship with the educational degree of the students ( $P=0.944, 0.252$  and  $0.309$  respectively).

Table 1. Demographic characteristics of the study participants.

Variable		N (%)
Gender	Female	254 (36)
	Male	451 (64)
Type of school	Medicine	109 (15.3)
	Dentistry	84 (11.8)
	Pharmacy	89 (12.5)
	Health	72 (10.1)
	Nursery and Midwifery	108 (15.2)
	Management	58 (8.1)
	Nutrition	24 (3.4)
	Para-medicine	87 (12.3)
	Rehabilitation	80 (11.3)
	Type of residence	Dormitory
Living with family		381 (54.3)
Personal home		16 (2.3)
level of education	Doctorate	282 (39.8)
	Bachelor	427 (60.2)
Marital status	Single	681 (98.8)
	Married	9 (0.9)
	other	2 (0.3)
		Mean±SD
Age in years		19.0±1.18

Table 2. Description of total items of social capital questionnaire in Students of Isfahan University of Medical Sciences.

Item	Never	Little	Somewhat	Much	Very much
	N (%)	N (%)	N (%)	N (%)	N (%)
I think most people are confidence worthy	17 (3.8)	199 (28.1)	324 (45.8)	144 (20.3)	14 (2)
Most people I know are honest in their behavior	27 (3.8)	200 (28.2)	324 (45.7)	144 (20.3)	14 (2)
Classmates & friends, share important information with me	30 (4.3)	177 (25.2)	301 (42.7)	162 (23)	34 (4.8)
Classmates & friends, always informed each other	16 (2.3)	150 (21.4)	326 (46.6)	175 (25)	33 (4.7)
Generally, students confidence each other	50 (7.1)	214 (30.4)	345 (49)	89 (12.6)	6 (0.9)
Students gather their information & ideas for decision making	36 (5.1)	164 (23.2)	313 (44.3)	173 (24.5)	21 (3)
Classmates & friends, respect each other's feelings	25 (3.5)	130 (18.4)	313 (44.4)	204 (28.9)	33 (4.7)
University worth performance of student's groups	62 (8.9)	144 (20.7)	293 (42.2)	176 (25.2)	21 (3)
University provides opportunity for social and group collaboration	53 (7.6)	141 (20.1)	291 (41.6)	186 (26.6)	29 (4.1)
University have a tendency to collaborate for problem solutions	50 (7.2)	159 (22.7)	313 (44.8)	165 (23.6)	12 (1.7)
Classmates & friends, often help each other	10 (1.4)	102 (14.5)	304 (43.2)	250 (35.5)	38 (5.4)
There is a spirit of partnership between Classmates & friends,	31 (4.4)	146 (20.7)	299 (42.5)	199 (28.3)	29 (4.1)
Students have good relationship with each other	27 (3.8)	82 (11.6)	292 (41.2)	260 (36.7)	47 (6.6)
Students exchange their opinion and information in a friendly atmosphere	16 (2.3)	116 (16.5)	307 (43.5)	233 (33)	33 (4.7)
Students evaluate and solve problem with the right manner	25 (3.6)	172 (24.4)	343 (48.7)	153 (21.7)	11 (1.6)
In general, the students' values & goals are coordinated with university's goals	55 (7.8)	157 (22.4)	351 (50.1)	125 (17.8)	13 (1.9)
There are common values & goals between university and students	14 (2)	69 (9.8)	263 (37.4)	304 (43.2)	54 (7.7)
Intentions & goals of students are worthy	22 (3.1)	84 (11.8)	330 (46.5)	232 (32.7)	34 (4.8)
Students can easily accept each other's differences	47 (6.7)	176 (25)	324 (46)	144 (20.4)	14 (2)
Students understand each other's feeling & cope easily with them	39 (5.5)	175 (24.8)	347 (49.2)	126 (17.9)	18 (2.6)
Students to critique each other's in a constructive way	65 (9.2)	218 (31)	301 (42.8)	106 (15.1)	14 (2)
There are a respectful atmosphere at the university	32 (4.5)	89 (12.6)	300 (42.5)	243 (34.4)	42 (5.9)
University & students are committed to fulfill the objective of each	42 (5.9)	150 (21.2)	356 (50.4)	142 (20.1)	17 (2.4)
Students feel themselves as a joint family	56 (8)	198 (28.2)	290 (41.3)	138 (19.6)	21 (3)
Students are loyal to university's values	29 (4.1)	153 (21.8)	343 (48.8)	159 (22.6)	19 (2.7)
University is are loyal to student's values	58 (8.3)	144 (20.6)	322 (46)	153 (21.9)	23 (3.3)
I believe the collective success are better than individual success	21 (3)	45 (6.4)	180 (25.6)	297 (42.2)	160 (22.8)
I believe that people in the long run help themselves by helping others	6 (0.9)	43 (6.1)	147 (21)	300 (42.8)	205 (29.2)
Classmates& friends, accept each other's different believes and values	26 (3.7)	120 (17)	327 (46.4)	200 (28.4)	32 (4.5)
Classmates& friends have common future	17 (2.4)	67 (9.5)	317 (44.8)	231 (32.7)	75 (10.6)

282 (39.8%) of the students were studying in the doctorate level and 426 (60.2 %) of them were studying in the bachelor level,

and there was statically difference between the social capital score of these groups ( $P<0.05$ ).

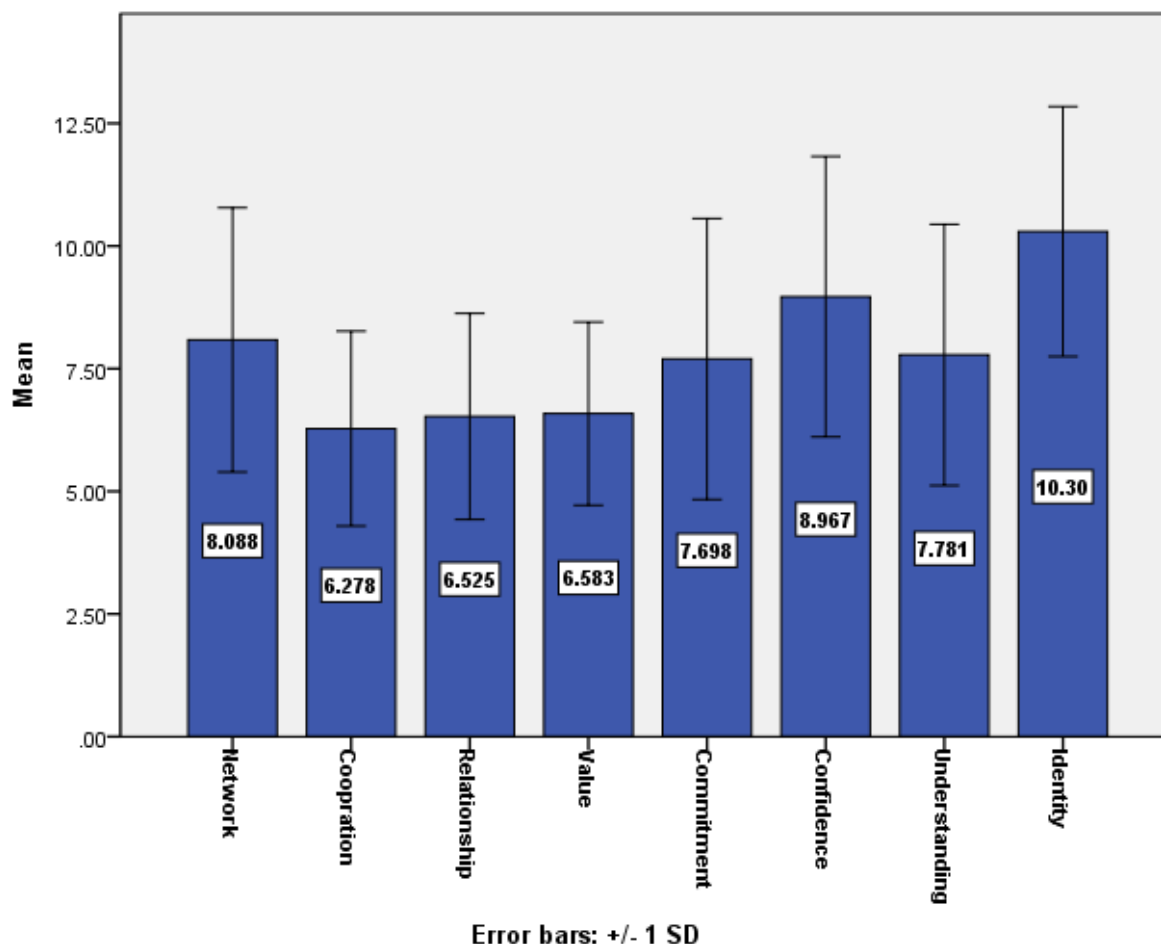


Figure 1. Description of social capital score in its dimensions.

But the mean score of the dimensions of confidence, value, and identity did not have a statistically significant difference between the two groups ( $P=0.944$ ,  $0.309$  and  $0.250$  respectively).

Status of social capital and its dimensions were compared regarding the living place, the finding is demonstrated in table 4. The result of post-hoc test of comparison between these three groups is shown in table 5.

Eventually, the result of this study indicates that total social capital score and all of its related dimensions except identity showed a statistically significant difference among the students of different schools ( $P<0.05$ ), among which, the pharmacology students indicated the lowest and the nutrition students the highest total score.

## Discussion

In this study, the average score of total social capital of the students of Isfahan University of Medical Sciences was 62.11, which indicated that the status of the social capital in newcomer students was average. In the field of cooperation, the lowest score was gained, which indicates that our schools less proceeded to the cooperation and collaboration concept, and the families spent less time in the field of making the youth to cooperate.

In the field of identity, the highest score was gained, because the youth believed that in the current social and economic situation, all of them can expect a common future. In the field of commitment, the social values and networks of the girls gained the higher score than that of the boys, which indicates the difference in the culture of the domestic and social training between the boys and the girls.

Table 3. The evaluation of the score difference between total social capital and its different dimensions based on the gender using independent sample t-test.

	Gender		t	df	Mean Difference	95% CI		P
	Male Mean (SD)	Female Mean (SD)				Lower	Upper	
Confidence	8.83 (3.10)	8.98 (2.76)	-0.489	462.9	-.115	-.578	.347	0.52
Network	7.61 (2.97)	8.27 (2.52)	-2.925	437.6	-.659	-1.102	-.216	0.002
Cooperation	6.25 (2.10)	6.27 (1.93)	-0.157	686	-.024	-.336	.286	0.75
Relationship	6.58 (2.23)	6.43 (2.00)	0.883	476.7	.150	-.184	.484	0.46
Values	6.31 (2.07)	6.68 (1.74)	-2.405	440.4	-.375	-.682	-.068	0.01
Understanding	7.75 (2.91)	7.67 (2.59)	0.348	691	.074	-.347	.496	0.83
Commitment	7.32 (3.03)	7.84 (2.70)	-2.235	463.5	-.519	-.975	-.062	0.01
Identity	10.26 (2.81)	10.22 (2.37)	0.203	438.9	.043	-.373	.459	0.99
Total Score	61.18 (15.90)	62.82 (13.43)	-1.295	397.6	-1.642	-4.135	.850	0.13

Table 4. Total social capital score and its fields based on the habitation conditions of the students using one-way ANOVA test.

Domain	Habitation Conditions	N	Mean (SD)	95% CI		F	df	P	
Confidence	Dormitory <sup>1</sup>	296	8.84 (2.86)	8.51	9.16	4.86	682	0.008	
	Live with family <sup>2</sup>	371	9.12 (2.86)	8.83	9.41				<i>P</i> <sup>1,2</sup> =0.442
	Personal home <sup>3</sup>	16	6.93 (2.88)	5.39	8.47				<i>P</i> <sup>1,3</sup> =0.036
	Total	683	8.95 (2.88)	8.73	9.16				<i>P</i> <sup>2,3</sup> =0.012
Network	Dormitory <sup>1</sup>	293	8.22 (2.61)	7.92	8.52	3.28	679	0.038	
	Live with family <sup>2</sup>	371	7.94 (2.75)	7.66	8.22				<i>P</i> <sup>1,2</sup> =0.420
	Personal home <sup>3</sup>	16	6.56 (3.34)	4.77	8.34				<i>P</i> <sup>1,3</sup> =0.050
	Total	680	8.03 (2.72)	7.82	8.23				<i>P</i> <sup>2,3</sup> =0.137
Cooperation	Dormitory <sup>1</sup>	297	6.41 (1.91)	6.19	6.62	2.65	686	0.71	
	Live with family <sup>2</sup>	375	6.18 (2.05)	5.98	6.39				
	Personal home <sup>3</sup>	15	5.33 (2.60)	3.88	6.77				
	Total	687	6.26 (2.01)	6.11	6.41				
Relationship	Dormitory <sup>1</sup>	301	6.57 (2.03)	6.34	6.80	3.31	693	0.037	
	Live with family <sup>2</sup>	377	6.46 (2.11)	6.24	6.67				<i>P</i> <sup>1,2</sup> =0.804
	Personal home <sup>3</sup>	16	5.18 (2.90)	3.64	6.73				<i>P</i> <sup>1,3</sup> =0.038
	Total	694	6.48 (2.10)	6.32	6.63				<i>P</i> <sup>2,3</sup> =0.06
Value	Dormitory <sup>1</sup>	295	6.61 (1.83)	6.40	6.82	1.62	683	0.199	
	Live with family <sup>2</sup>	373	6.52 (1.91)	6.33	6.72				
	Personal home <sup>3</sup>	16	5.75 (2.43)	4.45	7.04				
	Total	684	6.54 (1.89)	6.40	6.68				
Understanding	Dormitory <sup>1</sup>	299	7.68 (2.60)	7.39	7.98	4.6	690	0.01	
	Live with family <sup>2</sup>	376	7.79 (2.78)	7.51	8.07				<i>P</i> <sup>1,2</sup> =0.881
	Personal home <sup>3</sup>	16	5.68 (3.41)	3.86	7.50				<i>P</i> <sup>1,3</sup> =0.017
	Total	691	7.70 (2.73)	7.4961	7.9048				<i>P</i> <sup>2,3</sup> =0.01
Commitment	Dormitory <sup>1</sup>	298	7.79 (2.74)	7.48	8.10	2.55	682	0.079	
	Live with family <sup>2</sup>	369	7.60 (2.90)	7.30	7.90				
	Personal home <sup>3</sup>	16	6.18 (3.22)	4.46	7.90				
	Total	683	7.65 (2.85)	7.44	7.86				
Identity	Dormitory <sup>1</sup>	295	10.34 (2.53)	10.05	10.63	1.14	685	0.319	
	Live with family <sup>2</sup>	375	10.18 (2.55)	9.92	10.44				
	Personal home <sup>3</sup>	16	9.43 (3.05)	7.80	11.06				
	Total	686	10.23 (2.55)	10.04	10.42				
Total	Dormitory <sup>1</sup>	259	62.89 (14.30)	61.14	64.64	5.17	607	0.006 <i>P</i> <sup>1,2</sup> =0.856 <i>P</i> <sup>1,3</sup> =0.006 <i>P</i> <sup>2,3</sup> =0.01	
	Live with family <sup>2</sup>	334	62.22 (14.27)	60.68	63.76				
	Personal home <sup>3</sup>	15	50.53 (20.63)	39.10	61.96				
	Total	608	62.22 (14.56)	61.06	63.38				

The result of this study was compatible with other studies. Moradian et al. showed the social capital of the students of Tehran University of Medical Sciences was moderate and the dimensions of participation in local communities and communication with family members and friends had the lowest and highest mean scores (1). In other studies, conducted in Ardabil and Kermanshah the results were the same (9-11).

In Iran, students who are accepted in medical disciplines have been stressed for many years to participate in hard competition, therefore, they may have less chance for social interactions, and consequently, their total score was less than other majors.

Similar to Yazdi et al. study, in our research, the social capital of the women and men wasn't statically different (13).

In other study, there was a direct and low correlation between the age and the students' social capital score, which wasn't statistically significant (1, 9, 11, 15). However, as the age increases, the experiences of the individuals will be increased as their ability of adaptation and interaction with their environment will increase. In our study, there was an inverse correlation between the age and confidence of the students, which indicates the effect of the age of the higher grade students led to their consequent lower confidence on the society.

Our findings showed a statistically significant difference between the residence of students and their social capital, and the field of confidence, relationship and understanding, so the exotic students with a personal home had a significantly lower social capital than the native students in dorms. However, this difference wasn't significant between the students inhabited in dormitory and native students, this indicates that the students who lived alone had lower social capital than the students who lived with their family or among their friends and in the

field of life value have gained the lowest scores among the whole students.

The gained score of the students living in the dormitory indicates that by making the interactions, plural living would help in the development of social capital and the newcomer students from smaller cities had the higher readiness for participation, trust, relation, and making the friendship networks. This result is in agreement with the result of other studies (1, 11, 15-17).

Due to the lower number of married students in our study, the result of the marital status of students with their social capital was not analyzable.

In this study, the social capital of the master degree students didn't show a statistically significant difference with doctorate students and the fields of network, value, and commitment of master degree students were significantly higher than doctorate students, which is concordant with the result of Rezaee et al. study (4, 11, 15 and 18). But Amiri et al. reported that the bachelor's students had the highest average social capital score (19).

In our study the highest social capital score was for management school and the lowest score was for pharmacy school, and social capital score of nursing, obstetrics, and para-medicine school was higher than that for students of medical, dentistry, and pharmacology schools, but this difference was not statistically significant and was in disagreement with the results of the study done by Mazlom Khorasani et al. in 2005 in Mashhad University of Medical Sciences (20).

Noticeable point in this study was that social capital of the students in the field of cooperation has been lower than other fields and indicates the failure of the higher education system of the country in providing an adequate bed for the social capital growth and because the relationship and understanding field scores are lower in women than men, there is a need for a purposeful planning for increasing participation of the women in social programs.

The important affecting factors on the social capital of the students were also determined as education level, residence, and gender of medical students in this research.

Social capital is one of the social health determinants, which its growth in students as the young and active stratum is very important. This indicator was average among the medical students and its lowest level was in the field of cooperation. It seems that there is a need to examine the factors affecting the social capital of the students and the ways to increase it in students, especially medical students.

#### *Acknowledgment*

This article is a part of the theoretical project of “the evaluation of the situation and the procedure of the social capital variations among the students of the Isfahan University of Medical Sciences between years 2016 to 2019” with Ethical code of 387197. The scholars of this project appreciate the financial support of the Vice Chancellor for Research of Isfahan University of Medical Sciences for granting this project, and all participated student in this project.

#### *Conflict of interest*

Authors declare no conflict of interests.

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