



# Multi-Country Analysis of Social Capital and Health: Building Evidence of the Positive Relationship in Low- and Middle-Income Countries

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# INTRODUCTION

Social capital is a key component to understand the social determinants of health by linking social cohesion, income inequality, and social support to health outcomes. The relationship is strongly influenced by context, but evidence from low- and middle-income countries (LMIC) is limited, particularly from Sub-Saharan Africa (SSA). While social capital is a multi-dimensional concept, data capturing its full scope are limited. As a result, most studies on social capital and health largely use measures of trust as the sole measure of social capital.



#### **OBJECTIVES**

Overall, this analysis aims to explore the relationship between social capital, measured as trust, and health at the global level through a multi-country analysis of the relationship between social capital and key health outcomes using datasets that include more LMICs than previous work.

Specific research aims include:

- To assess the relationship between trust and socio-economic status across countries.
- To conduct a multi-country analysis of the relationship between trust and health outcomes.

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### METHODS

Multiple sources for country-level data on measures of social capital were identified. Data on trust are collected as part of several multi-country panel surveys, but the Wellcome Global Monitor surveys of 2018 and 2022 are recognized as having better global representation though for limited years than other sources. Additionally, we explored the feasibility of using data from Afrobarometer surveys.

Social capital was measured as the percent of the population reporting they trust their neighbors a lot. Trust of neighbors is specifically associated with bonding social capital, a measure of the social resources that can be assessed from networks or groups. In this conceptualization, individuals with high levels of trust of their neighbors would have, or be perceived to have, more access to the social resources of their neighbors.

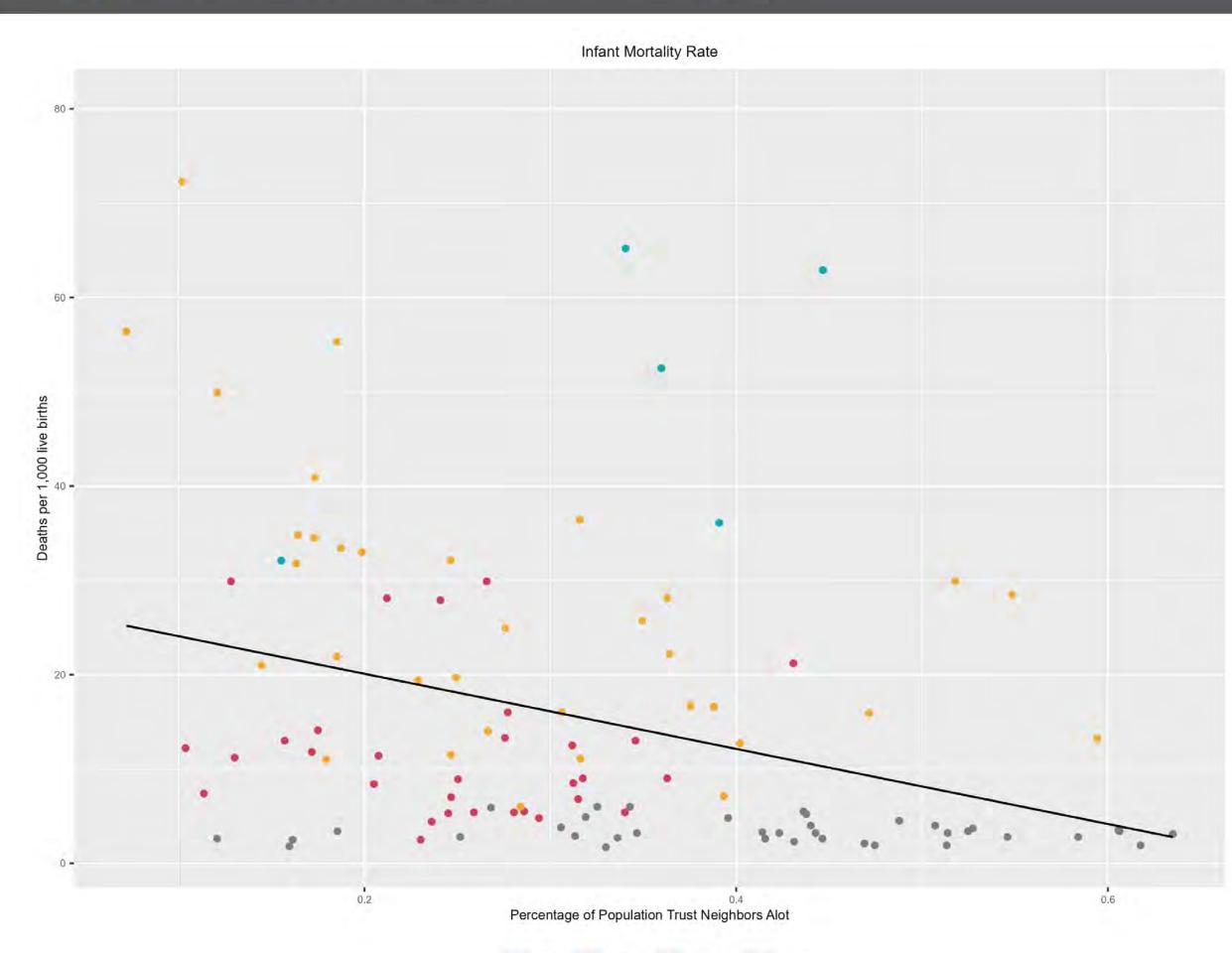
Covariates came from the World Bank:

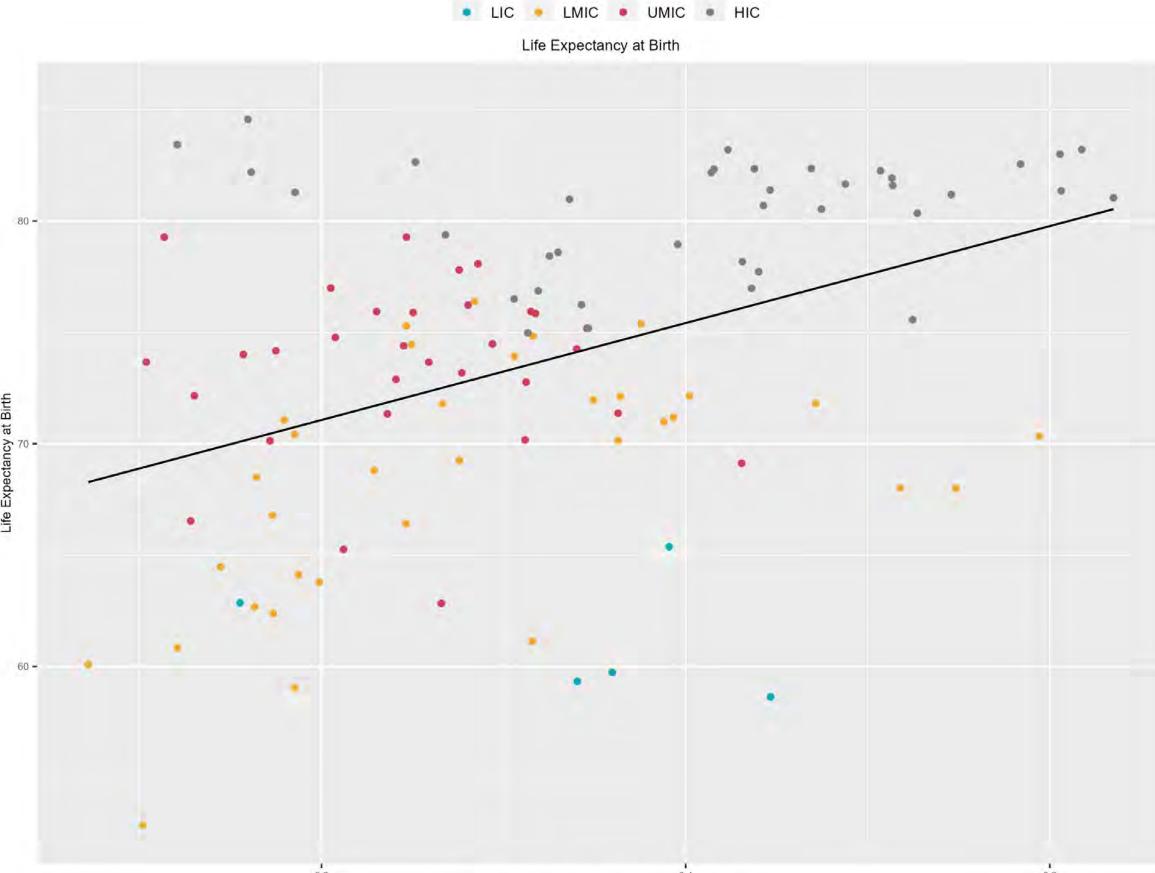
- Country income level was based on gross domestic product and is classified as high income, upper middle income, lower middle income, and low income.
- Gini Index, a commonly used measure of economic inequality in a country (results not shown).
- Life expectancy at birth was used as an overall measure of population health.
- Infant mortality rate was used as an overall measure of population health.

We conducted exploratory analysis examining relationships through data visualizations and linear regression. Data analysis and visualizations were done in Stata 18 and R statistical software.

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#### KEY FINDINGS





Data source: Wellcome Global Monitor (2020); World Development Indicators (2020)

Note: Trust measures are presented as weighted estimates at the country-level for responses that they trusted their neighbors 'a lot'

Percentage of Population Trust Neighbors Alot

Overall, our analysis found the positive relationship between social capital, measured as trust of neighbors using the Wellcome Global Monitor survey, and health outcomes held when including more LMIC and SSA countries.

Lower levels of trust were significantly associated with higher rates of infant mortality when controlling for country income level. This suggests a relationship where higher levels of social capital are associated with better infant mortality outcomes, a measure of overall population health.

Lower levels of trust were significantly associated with lower life expectancy at birth, an alternative measure of population health. This suggests a relationship where higher levels of social capital are associated with better life expectancy, a measure of overall population health.

Additionally, less equal societies, those with higher Gini Index values, had lower levels of trust, (results not shown). This suggests that less equal societies, in terms of income, are also societies with lower levels of social capital, as expected.



#### CONCLUSIONS

This work found further evidence of a positive relationship between measures of social capital and health but is limited in its ability to assign a direction to that relationship. Further isolating this relationship will require additional data to allow for more robust models. The understanding of causal pathways remains limited, especially in LMIC and SSA contexts, which hampers efforts to develop policy or programs that utilize the positive relationship between social capital and health to improve health outcomes.

Further research is needed to better unpack this relationship and will benefit from the longitudinal collection of social capital measures.









