

An Analysis of Social Capital with Regard to Improving Pregnant Women's Welfare

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Abstract

The process of pregnancy is inseparable from the economic factor since the preparation of childbirth is closely related to the financing and the anticipated complications that require a relatively substantial amount of funds. It has a huge impact on the safety of the mothers and infants, leading to increased maternal mortality rate (MMR) and infant mortality rate (IMR). Social capital is among the basic capitals currently overlooked. The purpose of the present study was to analyze domestic social capital and its impact on improving the welfare of pregnant women of poor households in DesaMlaras, Sumobito Sub-district of Jombang Regency. The population of the present study was pregnant women of poor households residing in in DesaMlaras, Sumobito Sub-district of Jombang Regency. A total of 67 pregnant women of poor households was sampled by the simple random sampling method. The structural model was tested by a multivariate analysis. Regression analysis showed the SC (social capital) regression coefficient of 0.027 with a positive sign for the level of spending/welfare of pregnant women. The regression coefficient for the HC (education) variable was 0.146 with a positive sign. The regression coefficient of the OC (land) variable was 0.054 with a positive sign. The regression coefficient for the Z (family characteristics) variable was 0.335 with a negative sign. The higher the people's desire to increase their social capital the higher the increase in welfare would be. Similarly, the higher the willingness to improve their education and ownership of land the higher the increase in the family quality and income would be, leading to an increase in the welfare of pregnant women. However, an increased number of family members actually reduced the welfare of the family. Thus, as shown by the results of the present study, people is expected to consider family planning and to pay attention to the quality of their family members. Improvement of family welfare shall be considered when increasing the number of family members.

Keywords: Social capital, Pregnant women's welfare

I. INTRODUCTION

The slowdown of economic growth in 2017 brought about a declined people's purchasing power, increased unemployment, and more difficult living of people. This led to social conflicts and violence, ruffling our social capital. As a result, we lost the values of honesty, solidarity, justice, unity, and other values capable of establishing our unity.

Jombang Regency has a fairly complete social capital to become a prosperous region. In addition to the rich natural resources, the people of Jombang also have adequate human resources. However, social capital which is an important element to realize prosperity begins to be underutilized by the people, where cultural values constitute the basis for the formation of social capital. The values of mutual cooperation and mutual help, which were once the most important part in people's lives, have been getting faded. And so does the values of self-reliance and hard work, which were once the part of the people's life. In the past, our people have provided their needs on their own, such as places of worship, schools, public halls, markets, and health facilities, especially those for pregnant women. It constitutes the evidence of self-reliance and hard work of the people. However, those social values are no longer seen among our society today.

The process of pregnancy is inseparable from the economic factor since the preparation of childbirth is closely related to the financing and anticipated complications that require a relatively substantial amount of funds. It has a huge impact on the safety of mothers and infants, leading to increased maternal mortality rate (MMR) and infant mortality rate (IMR). Generally, poor households have a characteristic of having a weak social network of institutional inter-linkage, both horizontally and vertically. Poor access to economic networks and other social capitals is generally caused by inadequate social requirements, such as the lack of education, knowledge, and ability to communicate. Social capital is among the basic capitals currently overlooked. On this basis, efforts of empowering poor households through institutional development should be based on a thorough understanding of the range and nature of the social capital they have in order for the development process to be more appropriate.

Thus, it is important to analyze the extent to which social capital drives an increase in the welfare of pregnant women in Desa Mlaras, Sumobito Sub-district of Jombang Regency. Statements of the problem, Social capital is undoubtedly an energy for development. Development that ignores this dimension that is the driver of the emergence of the societal power will not only lose a solid social foundation but will also experience stagnation and difficulties to get out of the various crises and poverty. As an energy, social capital will be effective in improving the welfare of pregnant women and providing an impetus for the success of both the publicly and privately initiated policies. This belief is based on the strength of social capital to stimulate the people to independently improve the welfare of pregnant women.

Against the backdrop of the fading social capital, there is a need for an in-depth study on how to empower pregnant women of poor households by capitalizing on their social capital and institutional networks in accordance with the resource, social, cultural and environmental characteristics with respect to improving the welfare of pregnant women in Desa Mlaras, Sumobito Sub-district of Jombang Regency.

The present study addresses the following problems:

1. What are the characteristics of social capital of the community, especially those of pregnant women of poor households in Desa Mlaras, Sumobito Sub-district of Jombang Regency.
2. What are the characteristics of both formal and non-formal social and institutional networks possessed by pregnant women of poor households.
3. What are the contribution and role of social capital with regard to the welfare of pregnant women of poor households in Desa Mlaras, Sumobito Sub-district of Jombang Regency.

Objectives And Purposes Of The Study, The general objective of the present study was to analyze households' social capital and its impact on improving the welfare of pregnant women of poor households in Desa Mlaras, Sumobito Sub-district of Jombang Regency. The specific objectives of the study were:

1. To study and analyze the characteristics of social capital of pregnant women of poor households in Desa Mlaras, Sumobito Sub-district of Jombang Regency.
2. To study the characteristics of both formal and non-formal social and institutional networks possessed by pregnant women of poor households.
3. To analyze the contribution and role of social capital with regard to the welfare of pregnant women of poor households in Desa Mlaras, Sumobito Sub-district of Jombang Regency.

The present study is expected to increase the understanding of social capital possessed by poor households, especially those in Desa Mlaras, Sumobito Sub-district of Jombang Regency. The purposes of the present study were:

1. To improve the understanding of social capital within communities so as to support the welfare of pregnant women of poor households.
2. To provide a reference for the government to find solutions to the problems of poverty in urban areas.

Literature Review Social capital, Putnam (1995) defines social capital as "features of social organization such as networks, norms, and social trust that facilitate coordination and cooperation for mutual benefit". Social capital in the form of norms, beliefs and networks serves to link individuals, resulting in mutually beneficial cooperation to achieve common goals. It also implies a need for networks of civic engagement within communities and norms that encourage the communities' productivity. Furthermore, Putnam (1995) extends the meaning of horizontal associations to include not only those providing desirable outcomes but also those producing undesirable outcomes. Based on these parameters, several key indicators that can be used to measure social capital are:

- a. sense of identity;
- b. sense of belonging or, otherwise a sense of alienation;
- c. systems of belief and ideology;
- d. values and purposes;
- e. fear;
- f. attitude towards other members in the community;
- g. perceived access to services, resources and facilities (e.g., employment, income, education, housing, health, transportation, and social security);
- h. opinion on the performance of former government;
- i. trust in public institutions and people in general.
- j. level of trust.
- k. satisfaction in life to be achieved in the future.
- l. Expectations to be achieved in the future (Spellerber, 1997; Suharto, 2005).

It could be argued that social capital is born in a bottom-up fashion, non-hierarchical and based on mutually beneficial interaction. Thus, social capital is not a product of initiatives and policies or it cannot be destroyed by the state through public policies (Cox, 1995; Onyx, 1996).

Empowerment of Pregnant Women, According Sulistiyani (2004), empowerment etymologically is derived from the word “power,” meaning strength or ability. Thus, empowerment is defined as the process of obtaining power, strength or ability, or the process of providing power, strength or ability by the parties with power to those lacking power, in this regard the welfare of pregnant women. According to Sulistiyani (2004), the purpose of empowerment is to create self-reliant individuals and communities, especially for pregnant women in order to achieve welfare.

II. METHODS

Population of the present study was pregnant women of poor households residing in in Desa Mlaras, Sumobito Sub-district of Jombang Regency. A sample of 67 pregnant women of poor households were taken by means of the simple random sampling method. The size of sample was determined by the Slovin sampling formula. Data for the study included the primary and secondary data. Primary data were collected by means of interviews with questionnaires. Secondary data were obtained from relevant agencies, such as the Office of Sumobito Sub-district Head, the Office of Desa Mlaras, the BPS and so on.

Methods employed were informal interviews, direct observation, collective discussions, document study, self-analysis, and study of life-histories. Despite the qualitative nature of the present study, quantitative data were also of importance. Participant observation was selected in order to obtain detailed and accurate data of the issues and capabilities of the existing institutions which were the object of the study. Participant observation was the first step to comprehend the conditions and the existence of social capital, ultimately representing the starting point to build institutional innovation (agribusiness) for them (Syahyuti, 2003).

Among others, the items of the questionnaire included:

- a. Contributions of social capital to the welfare of households with higher levels of social capital, as measured by various indicators of social capital so far, which had a better welfare
- b. The importance of social capital to reduce poverty
- c. The determinants of social capital

Data and information collected were then processed by the conventional model proposed by Woolcock and Narayan (2002). The cornerstone of this model is the assumption that social capital can be obtained in both formal and non-formal forms. However, social capital is largely gained through the interaction among culture, religion and other factors. The structural model is the relationship (function) of household expenditure with various household assets. The structural model is tested by the multivariate analysis. Accordingly, the function of the model is:

$$E = f(SC, HC, OC, Z)$$

The model of this study can be described as follows:

$$\ln E_i = \alpha + \beta SC_i + \gamma HC_i + \sigma OC_i + \eta Z_i + \mu_i$$

where:

E_i	=	per capita household expenditure (i)
SC_i	=	household assets against social capital
HC_i	=	household assets against human capital
OC_i	=	household assets against other assets
ηZ_i	=	household characteristics
α	=	constant
$\alpha, \beta, \gamma, \sigma, \eta$	=	coefficient of each parameter
μ_i	=	error

The dependent variable of this model is household expenditure. The explanatory variables consist of household assets. Household assets are assumed to consist of social capital, education and land ownership. The dummy variable is household characteristics.

Social capital consists of the following dimensions:

1. Social/institutional groups
2. Trust and solidarity
3. Collective action
4. Information and communication
5. Participation and cooperation
6. Government's empowerment and guidance

III. RESULTS

Results of Empirical Test, The model used was in accordance with the functions of the equation noted above. Using the OLS method and observation number (n) of 67, results of regression of the model could explain the impact/relationship of social capital with household welfare.

Table 1. Regression Estimate Results of the Dependent Variable Per Capita Expenditure

Model	B	Standard Error	T	Sig
Constant	187.594	66.572	2.818	0.005
SC	0.027	24.095	2.391	0.005
HC	0.146	15.934	2.146	0.033
OC	0.054	15.722	1.810	0.042
Z	-0.335	15.207	5.107	0.000
Number of Observation	67			
R-squared	0.624			
F-statistic	7.753			

Source: Field survey processing, 2017

Using data of per capita household expenditure as the dependent variable and social capital, education, land ownership and family characteristics as the independent variables, the regression estimate coefficient reflects the effects of each independent variable on household expenditure. Regression coefficients with positive signals increase the opportunity of expenditure; on the contrary, those with negative sign reduces the opportunity of expenditure. The estimates can be written into the following structural equation:

$$\text{LnE} = 187.594 + 0.027\text{SC} + 0.146\text{HC} + 0.054\text{OC} - 0.335\text{Z}$$

(2.391) (2.146) (1.810) (-5.107)

It is shown that F_{count} is 7,753. This F_{count} is larger than F_{table} of 1.26 and significant at 95%. This indicated that the independent variables jointly have effects on the dependent variable.

The t_{count} can indicate the significance of the independent variables with regard to the dependent variables. The t_{count} larger than t_{table} means that the independent variables have an effect on the dependent variable. Based on the estimates, social capital has a t_{count} of 2.391 and t_{table} with degrees of freedom (df) of 206 (n-k) at a significant level of 95% is 1.645. Thus, $t_{\text{count}} > t_{\text{table}}$, meaning that social capital has a significant effect on the expenditure/welfare of pregnant women.

Education has a t_{count} of 2.146, which is also larger than t_{table} with degrees of freedom (df) of 206 and a significant level of 95%, meaning that education has a significant effect on the expenditure/welfare of pregnant women. Likewise, land ownership and family characteristics have t_{counts} of 1.810 and -5.107, respectively, which are higher than t_{table} . The '-' sign for the t_{count} of family characteristics only shows the direction of an opposite relationship. Thus, these two variables also have significant effects on expenditure/welfare of pregnant women.

Jointly, the independent variables have an explanatory power (R^2) of 0.62. This means that 62% of the levels of expenditure in Desa Mlaras, Sumobito Sub-district of Jombang Regency can be explained by the independent variables in the equation, while the remaining 38% is explained by other variables outside the model (u).

IV. DISCUSSION

Results of regression indicates that SC (social capital) has a coefficient of 0.027 with a positive sign against the level of expenditure/welfare of pregnant women. The positive sign of the coefficient indicates that the higher the social capital in the region the higher the levels of expenditure/welfare of pregnant women in Desa Mlaras Village would be. A coefficient of 0.027 means that a 10% increase in social capital

would increase the levels of expenditure/welfare of pregnant women by 0.27%. Despite the small amount, an increase in social capital affecting the welfare of pregnant women should be nurtured and capitalized on in order to achieve welfare and prosperity.

The variable HC (education) has a regression coefficient of 0.146 with a positive sign. This shows that a 10% increase in education by would increase the levels of expenditure/welfare of pregnant women by 1.46%. This result is consistent with the literature that, rationally, an improvement of education would at least improve the living standard of pregnant women, which ultimately increase their prosperity. The variable OC (land) has a regression coefficient 0.054, meaning that the effects of land ownership would provide an opportunity for increased levels of expenditure/welfare of pregnant women by 0.54%. The use of land for the main livelihood or for side businesses would increase the welfare of pregnant women. Thus, any increase in land ownership would have an impact on improving welfare.

The variable Z (family characteristics) has a regression coefficient of 0.335 with a negative sign. This shows that an increase in the number of family members would reduce the levels of welfare of pregnant women by 3.35%. As an evitable consequence, an addition of family members (max. 4 members) would be capable of reducing the welfare of pregnant women of poor households. The saying "the more the merrier" is no longer applicable in Desa Mlaras; on the contrary, more and more family members would degrade the quality of the family since any such improvement of quality as in education, facilities, requires considerable costs. Thus, improvement of family welfare shall be considered when increasing the number of family members.

V. CONCLUSIONS AND RECOMMENDATIONS

In general, social capital of Desa Mlaras had an effect on per capita expenditure. Results showed that social capital was positively related to the welfare of pregnant women of poor households, in which households with a high social capital also have a high level of per capita expenditure, increased assets, increased savings, and more access to financial institutions. This is consistent with Grootaert's (2000) study of social capital in Indonesia.

As with social capital, human capital (education) was also positively correlated to households' welfare, in which a 10% increase in education would improve the communities' welfare by 1.46%. Every household needs to improve education, especially up to universities, since the higher education the higher welfare would be. An improvement of education means improving the quality of human resources of Desa Mlaras. This improvement of quality would also affect the increase in social capital. For example, public trust in local leaders can arise from the local leaders' education and professions.

The empirical test showed that the ownership of land provides opportunities for increased expenditure/welfare of pregnant women. This means that the more land owned the higher the level of welfare of pregnant women would be. This is because land ownership would increase pregnant women's economic activity and income. Therefore, communities should strive to create productive fields of business and improve business effectiveness. Productive field of business would increase the communities access to financial institutions and financial management.

In conclusion, social capital is inherent to a set of human relationships in a social group. Interpersonal relationships, as a set of agreed values and mutual trust between one another, can be productive as collectively expected. A weak social capital would lead to conflicts of values and a heightened distrust. However, social capital not linked to sustainable development may reduce the attention paid to the importance of the continuity of common life. Social capital, with its dimensions of unity, culture/customs, beliefs and participation, can reduce poverty and improve the ability of pregnant women, not only the number but also people's more meaningful lives..

Efforts of improving the welfare of pregnant women should come from the will of the community itself. That is, the higher the community's willingness to increase the social capital the higher the increase in welfare would be. Similarly, the higher the community's willingness to improve their education and ownership of land the higher the increase in the family quality and family income would be, ultimately improving the welfare of pregnant women. However, increasing the number of family members actually reduces the welfare of the family. The present study recommends considering family planning and quality of family members.

VI. REFERENCES

1. Agusta, Ivanovich. 2002. *Assumption of Empowerment at Workplace in Rural Indonesia*. Makalah: The XVth International Sociological Association (ISA) Congress of Sociology, Brisbane, Australia. 7-13 Juli 2002.
2. Ahuja, A., Van, V. (2015) *Natural Leader Kapustakaan Popular Gramedia* Jakarta
3. Alan, G., Sandstorm, K. (1988) *Qualitative Research Methods Sage Publications* Newbury Park Berverly Hills London New Delhi, volume 15.
4. Ardhiyanti, P Lusya. 2015. *Asia Pacific Academic Consortium For Public Health Conference (APACH)*. Proceeding: The role of Social Capital For Community Empowerment in reducing maternal mortality rate related to P4K (Program Perencanaan Persalinan dan Pencegahan Komplikasi) Labor Panning and Complication prevention program in district Jombang, Bandung, Indonesia, October 21-23 2015
5. Ardhiyanti, P Lusya. 2015. *International Nursing Conference. Emphasize the Art of Nursing on Research, Education into Clinical and Community Practice*. Proceeding: The Factors Affecting the Successful implementation of Program Childbirth Planning and Prevention of Complication (IPCPPC) in Reducing maternal mortality in working area of jombang clinic, Surabaya, Indonesia, November 16-17 2015
6. Ashby, M.F and Jones, D.R.H (1980) *engineering materials an introduction to their properties and applications* pergamon
7. BPS, *REKAPPLS*, 2008.
8. Chuang, C., Huang, L, (2014) Social Capital and Health Protective behavior. *Reaserch article Plos One*.
9. Coleman, James. 1990. *Foundation of Social Theory*. Cambridge, Mass.: Harvard University Press, England.
10. Collier, P. 1998. *Social Capital and Poverty*. *Social Development Department*, Washington DC: World Bank
11. Creswell, J. (2002) *Research Design Qualitative, Quantitative and Mixed Methods Approaches* sage Publication second edition
12. Domai, T. (2012) *Sound Leadership Paradigma Barunansa Kepemimpinan UB Press* Cetakan pertama
13. Erikson, E.H. (1968) *Identity: Youth and crisis*, New York: Norton
14. Eriyatno. 2003. *Sistem Ekonomi Kerakyatan: Suatu Tinjauan Dari Ilmu Sistem*, Majalah Perencanaan Pembangunan, No.04, Maret 2003.
15. Farahbod, F., Chegini, M. (2014) The Association between social capital and burn out in nurse, *Trauma Referral teaching hospital*. Received: 16
16. Ferlander, S. (2007) The importance of different forms of social capital for health. *ACTA Sociologica*.
17. Frumence, I., Emmelin, M, (2014) Access to Social Capital and risk of HIV infection. *Archives of Public Health*, 72:38.
18. Fukuyama, F. (1995) *Trust: The Social virtues and the creation of Prosperity*, New York: Free Press, ISBN 0684825252
19. Fukuyama, F. 1995. *Trust: The Social Values and The Creation of Prosperity*. New York: Free Press.
20. Fukuyama, Francis. 2002. *Social Capital and Development: The Coming Agenda*. SAIS Review - Volume 22, Number 1, Winter-Spring 2002, The Johns Hopkins University Press
21. Grootaert, C. 1999. *Social Capital, Household Welfare and Poverty In Indonesia*. *Social Development Department*. Washington DC: World Bank
22. Grootaert, C. 2001. *Social Capital: The Missing Link*. The World Bank. Social Capital Initiative. Working Paper no.3. Washington DC: World Bank.
23. Grootaert, C. and T. Van Bastelaar. 2002. *The Role of Social Capital In Development: An Empirical Assesment*. New York: Cambridge University Press.
24. Henry, P., Takahashi, A. (2014) The role of sister cities staff exchanges in developing "Learning cities": Exploring necessary and sufficient conditions in social capital in social capital development utilizing proportional odds modeling. *International journal of environmenatk research and public health*, ISSN 1660-4601
25. Kwan, Y., Ataguba, J. (2015) Investigating the relationship between self-rated health and social capital in south Africa: a multilevel panel data analysis. *BMC Public health*, 15:266.
26. Moore, S., Daniel, M. (2009) Association of individual network social capital with. *Journal of Public Health*, Vol 31, No 1, PP 175-183
27. Neves, H., Cristina, P. (2014) is there an association between traumatic dental injury and social capital, Binge drinking and socioeconomic indicators among school children. *Department of dentistry federal university of brazil*.

28. Novak, D., Kawachi, I. (2015) Influence of different domains of social capital on. *International Journal of mental health system*, 9:18.
29. Novak, D., Suzuki, E. (2014) Are Family, neighbourhood and school. *BMJ Open*
30. Nazir, M. 1988. *Metode Penelitian*. Penerbit Ghalia Indonesia. Jakarta.
31. Payne, Malcom. 1997. *Modern Social Work Theory*. Second Edition. MacMillan Press Ltd., London. Hal. 266.
32. Putnam, R.D. (1995) Bowling Alone: America's Declining Social Capital. *Journal of Democracy*.
33. Riduwan, Drs.MBA. 2004. *Metode dan Teknik Menyusun Tesis*. Penerbit Alfabeta Bandung.
34. Rozany, Nurmanaf A. dkk. 2002. Strategi Penanggulangan Kemiskinan Dalam Perspektif Pembangunan Partisipatif di Wilayah Agroekosistem Marjinal. Laporan Penelitian: Pusat Penelitian dan Pengembangan Sosial Ekonomi Pertanian, Bogor.
35. Subejo. 2004. *Peranan Social Capital Dalam Pembangunan Ekonomi: Suatu Pengantar Studi Social Capital di Pedesaan Indonesia*. Majalah Agro Ekonomi vol. 11.No.1 juni 2004.
36. Syahyuti. 2003. "Bedah Konsep Kelembagaan: Strategi Pengembangan dan Penerapannya dalam Penelitian Pertanian". Dicitak oleh Pusat Penelitian dan Pengembangan Sosial Ekonomi Pertanian, Bogor.
37. Sulistyowati, Budi. 1998. *Dampak Lingkungan Sosial Dan Budaya*, Makalah Seminar Lembaga Penelitian Ekonomi Dan Masyarakat (LPEM) Universitas Indonesia.
38. Selo Sumarjan, 1993. *Masyarakat dan Manusia Dalam Pembangunan*, Pokok-Pokok Pikiran Selo Sumarjan, Sinar Harapan, Jakarta.
39. Woolcock, Michael & Narayan, Deepa, 2002. "Social Capital: Implications for Development Theory, Research, and Policy". World Bank Research Observer, Oxford University Press
40. Woolcock, Michael, 2001. "Microenterprise and social capital: A framework for theory, research, and policy," *The Journal of Socio-Economics*, Elsevier, vol. 30(2).