

The Subjective Wellbeing in Low-Income Neighborhoods: Social Environment influences on Social Wellbeing in Adults Population¹

Masoomeh Ziaepour²

Department of Architecture, Kish International Branch, Islamic Azad University, Kish Island, Iran

Mostafa Behzadfar³

Professor of Urbanism, Department of Urban Planning & Design, Science and Research Branch, Islamic Azad University, Tehran, Iran

Zahra Sadat Saeideh Zarabadi⁴

Associate Professor, Department of Urban Planning, Science and Research Branch, Islamic Azad University, Tehran, Iran

Received 3 November 2021 ||| Accepted 17 August 2021

Abstract: Social wellbeing has great impact on physical and social health, as well as, promoting environmental justice in local communities. Despite several studies on the concept of social wellbeing in relation to social environment, the majority of these works have been conducted in developed countries. The study aimed to investigate the association of social environment aspects (safety, social participation, social network, and social cohesion) with social wellbeing in low-economic neighborhoods in an Iranian adult population. Since many of the old textures of cities have the problem of low-income, poverty and poor conditions, the aim of this study was to improve the situation of low-income and poor neighborhoods in wellbeing. A total of 1100 questionnaires systematically were distributed among adults population residing in 4 low-income neighborhoods of Bandar Abbas city, Iran. Of these 924 qualified questionnaires were used for further analysis. Despite the low economic conditions, social wellbeing were reported high. In addition, women reported higher social wellbeing than men. Women were socially more active than men, however were perceived less safe compared to their counterparts. All aspects of social variables positively contributed with social wellbeing among men, while in women group no link between safety and social wellbeing were determined. Findings suggest that programming efforts and research should focus on increasing social activities that support social participation and social cohesion to promote social wellbeing among residents. Designing and implementing effective intervention to improve inviting spaces to do small and large social activities can help in rising social wellbeing in low-income neighbourhoods.

Keywords: social wellbeing; social environment; social capital; low income neighborhood, Subjective Wellbeing.

|||

Introduction

Wellbeing is a multifaceted condition (Anand, 2016) that determines people's feelings (Guillen-Royo, 2019) and life satisfaction (Wang et.al. 2019). This is most often referred to as 'subjective wellbeing' (Teghe & Rendell, 2005). It can be divided into personal and psychological, social, economic, and political dimensions (Guillen-Royo, 2019). This condition can further be examined in terms of mental and objective dimensions (Anand, 2016). The objective dimension deals with areas associated with culture (Browne-Yung et.al. 2013). Factors such as health, education, employment, leisure, personal security, management of goods and services, and physical and social environment (Australian Bureau of Statistics, 2002, Teghe & Rendell, 2020). Meanwhile, the mental dimension involves the multidimensional assessment of life (Wei & Gao, 2016) and the study of happiness (Dong & Qin, 2017), quality of life (Anand, 2016) and life satisfaction (Wang et.al. 2019), evaluation of people's feelings (Guillen-Royo, 2019) and mood⁷. Well-being can help rebuild health, a concept gaining attention in many disciplines (Wells & Donofrio, 2019). An interesting dimension associated with wellbeing,

¹ This article is taken from the first author's dissertation entitled "Redefining of architectural design pattern in the process of regeneration of neighborhoods with a culture-led approach under the guidance of Dr. Mostafa Behzadfar and the adviser Dr. Zahrasadat Saeedeh Zarabadi.

² Email: m.ziapour@yahoo.com

³ Email: behzadfar@iust.ac.ir (Corresponding Author)

⁴ Email: Zarabadi.s@gmail.com

particularly in recent decades, is social wellbeing (Blanco & Díaz, 2007); social wellbeing demonstrates people's ability to meet basic needs and maintain peaceful coexistence in societies with the opportunity to progress (United States institute of peace, 2020) ' moreover, it assesses peoples' condition in the future societies, the quality of their relationship with others (Keyes, 1998), and the definition of a good life feelings (Guillen-Royo, 2019). Many aspects of physical and social environment can affect people's wellbeing (Wells & Donofrio, 2019) and life satisfaction levels (Anand, 2016, Teghe & Rendell, 2005). Physical and social attributes interact with the distribution of resources and risks and the health of urban residents. Social wellbeing can also affect the complex relationships among social, political, and economic factors (Schulz et.al.2019), ultimately contributing to the improvement of environmental justice (Guillen-Royo, 2019). Environments attract social opportunities (Vogelsang, 2016) and act as "social magnets" wellbeing (Wells & Donofrio, 2019) that increase people's chances of meeting and learning. It can also stimulate the formation of social capital (Colantonio & Dixon, 2011) and well-being and help build trust and social support in neighborhoods (Diener & Diener, 2018). The rapid changes in the environment and the process of urbanization have drastically changed the social and environmental relationships (McGreevy et.al. 2019) and have had a profound impact on human health and wellbeing (Wells & Donofrio, 2019). Lack of attention to environmental quality based on human scale has led to social isolation, which is a major threat to wellbeing in modern societies (Diener & Diener, 2018). In this regards, extensive studies in Europe and the United States have concentrated on the effect of environmental condition on social and health- related behaviors (Colantonio & Dixon, 2011). To measure social and mental well-being, various indicators have been identified by different researchers. These indicators can be categorized into social network, social cohesion, neighborhood trust and personal safety, economic status, and factors related to socio-economic conditions (Keyes, 1998, Woolf & Aron, 2013, Diener & Diener, 2018, Anand, 2016).

Recently, there has been an increase in the research on the social environment and its impact on public health in developed countries (Jiang & Kang, 2019),with an emphasis on social capital and social and wellbeing environment (Vogelsang, 2016, Abu baker et.al. 2015, Daniels et.al. 2017 , Wang et.al. 2019) and its impact on neighborhoods (Mouratidis, 2017). Most of these studies have been conducted in developed countries of the world (Anand, 2016, Blanco& Díaz, 2007, Diener& Diener, 2018, David et.al. 2018). In Asian studies, China's share is higher than the rest. Most research in Asian countries has been focused on the impact of geography (Wang et.al. 2019) and income on wellbeing (Wang et.al. 2019, Browne-Yung et.al. 2013, Wahyuni & Reswita, 2018, Humphrey et.al, 2019). A majority of these studies also focus on quality of life, environmental, and social issues; however, concerning low-income neighborhoods, less attention has been paid to the factors improving people's mental and social wellbeing in the same places. The present research was conducted in one of the southern cities of Iran. We examined the relationship between social wellbeing and social environment. Since previous research has shown the importance of social capital in the old fabric of neighborhoods (Aliyas, 2020), the current study was conducted in the old and low-income neighborhoods of the city. Socio-economic factors of neighborhoods were further considered as controlling factors in evaluating the models.

Theoretical Framework

Low-income and poor neighborhoods are neighborhoods where the economic situation of most people is lower than normal and usually do not have good physical conditions; Its major problems include structural and physical problems such as housing problems, infrastructure including access, water and sewage problems (Chigwenya, 2019), safety, health facilities, lack of healthy environment, green space, service areas, problems Mentioned the creation of informal settlements, etc.; On the other hand, these factors are associated with psychological and mental problems of residents, which sometimes lead to addiction and abnormal behaviors and increase crime; Therefore, paying attention to the issues and issues of these neighborhoods is not hidden from anyone, both physically (objectively) and mentally (subjectively).

Social capital in neighborhoods

Although there is no universal definition of social capital, there seems to be general agreement on the importance of networks, mutual trust, and other social norms to social capital. Formal forms of social interaction include activities of civic associations, religious and spiritual groups, political parties, sports

clubs, unions, and the like; but there are also informal social networks that engage in neighborhoods, such as interactions between neighbors, groups of friends, and informal stakeholders (Colantonio & Dixon, 2011). Also, "social capital is the result of historical, cultural, and social factors that give rise to norms, values, etc.; Actions that lead to collective action" (Australian Bureau of Statistics, 2002); Social capital and its importance, especially in modern society, has become an urban concern. Most research results emphasize the positive effect of social capital on wellbeing to the extent that in policy-making, especially in European countries, special attention is paid to it, including attention to urban design and zoning by building a social environment. And happy, creating policies aimed at reducing public and private corruption and improving transparency; He also mentioned supporting healthy family relationships (Diener & Diener, 2018).

Social wellbeing

"Social wellbeing demonstrates the ability of people to meet basic needs and to coexist peacefully in societies with opportunities for progress" (United States Institute of Peace, 2020) and to assess a person's status and performance in the future society and the quality of communication. He deals with society and groups (Keyes, 1998). Social wellbeing is an issue of socio-historical context (Blanco & Diaz, 2007) that has led to an increase in quality of life and satisfaction of the individual, family and society (Abu Bakar et.al. 2015). Therefore, in addition to physical impact, wellbeing also affects the human mental; this research is based on the study of social wellbeing in the field of Subjective wellbeing. The four factors of participation, social cohesion, safety and social networks were considered as components of social wellbeing according to the objectives and questions of the research. Selected neighborhoods in Bandar Abbas to be considered as low-income neighborhoods with high social capital; each of these variables is briefly described below:

Safety

According to Maslow's hierarchy, safety is the second most important dimension of basic needs; Feelings of security vary from person to person and depend on experience, attitude, actions, desire, memory and mental state (Md Sakip et.al. 2013). Security includes a variety of things, including physical security and a sense of safety (psychologically) ranging from crime to lighting issues.

Social networks

Networks are based on neighborhood and the relationship between social capital, social networks and neighborhood. The results of research on social networks and residential neighborhoods show that the development of networks is enhanced through interaction in the local public space (Bridge, 2002).

Social cohesion

Social cohesion provides the basis for achieving common goals of neighbors and social support, and affects the cognitive evaluation of residents from a psychological perspective (Pei et.al. 2020). Usually the built environment and social cohesion affect the quality of life of individuals (Engel et.al. 2016).

Social participation

"Participation involves the following four levels: interacting with others without doing a particular activity with them, doing an activity with others, helping others, and helping the community" (Richard et.al. 2012). Participation in local affairs and community raises residents' awareness of regional issues and sometimes, at a higher level, leads to decision-making and decision-making on neighborhood status and policies;

Case study

Located near the Persian Gulf, Bandar Abbas is one of the southernmost cities of Iran. The people of this city have different customs and traditions compared with the rest of the country due to its proximity to the sea and influence of other related areas. Bandar Abbas is considered as a multi-cultural city due to its economic and industrial status, welcoming many immigrants every year. The city has a population of approximately 0.54 million and comprises 84 neighborhoods, 20 of which suffer from low income and poor education, The municipality has divided the neighborhoods of the city into three periods, namely new, intermediate, and old, based on the time of development (Aliyas, 2020).

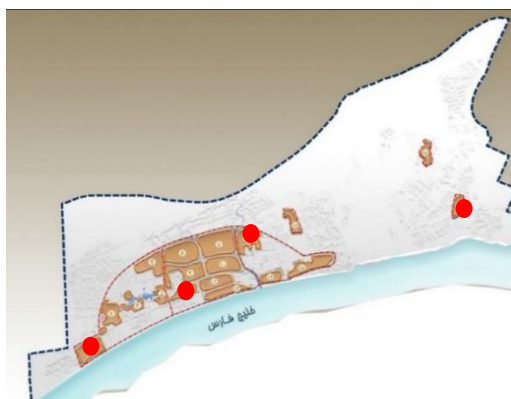


Figure (1): Dilapidated neighborhoods of Bandar Abbas and four selected neighborhoods marked with a circle

Source: Naghsh Piravash Consulting Engineers, 2008

Methodology

Data collection

According to a previous study in Iran, social capital and social network have been reduced by the development of neighborhoods (Aliyas, 2020); therefore, the sample population of the present study was selected from adults living in neighborhoods. Out of these neighborhoods, 15 fall under the category of low income and old development period. Four neighborhoods were randomly selected, and questions were systematically distributed among adults living in these neighborhoods. A total of 1,100 questionnaires were distributed using systematic sampling and door-to-door sampling according to the number of households in each neighborhood. Filled randomly; the questionnaire was usually distributed in the evening or on weekends when more adult residents were present. The distribution and delivery of the questionnaire lasted from November 2019 to February 2020.

Dependent variables

Social wellbeing was measured based on the interpretations of previous research (Radzyk, 2014), the validity and reliability of which were assessed; the questions were measured based on a five-point Likert scale consisting of five sections (very low = 1, low = 2, medium = 3, high = 4, and very high = 5); in the beginning, through testing and re-testing, the ICC of each item was reported in the least (ICC = 0.71), and Cronbach's alpha of 0.84 indicated the reliability of the study.

Independent variable

Personal Safety, social network, and social cohesion were measured based on previous research that confirmed its reliability and validity (Dong & Qin, 2017, Radzyk, 2014, Mouratidis, 2017, Baran & Smith, 2009). Social participation was measured according to the local activities that occurred in the neighborhoods. These activities were determined based on the initial observation of the first author and depth interview with the local residents.

Questions were based on five-point Likert scale ranging from 1 (very few) to 5 (very high). More details of the questionnaire are listed in the appendix. To indicate the reliability of the research, Alpha Cronbach for each of the variables was reported as: participation = 0.78, safety = 0.70, network = 0.74, cohesion = 0.91.

Demographic variables

The sociological information of the participants was obtained using questionnaire data, which included age, gender, marital status (single, married) duration of residence, employment status (student, housewife, employee, self-employed), level of education, and income; the level of education was classified into four categories from high school or lower to PhD, and family income was based on the definition of the country's planning and budget in three categories: low, medium, and high. The questions related to age and duration of residence in the neighborhoods were asked as an open-ended question.

Statistical Analysis

The questionnaire was distributed among 1100 adults living in old generation low-income neighbourhoods in Bandar Abbas city. Of these, 924 qualified questionnaires were used for further analysis. All data were analysed using SPSS version 22. Mean and standard deviations (SD) were calculated for continuous variables, and the frequency and percentage were estimated for categorical

and ordinal variables. Afterwards, Mann-Whitney U test was performed to examine gender-based differences regarding social variables and social well-being indicators. Multivariate models were constructed to investigate the association of between social variables and social wellbeing, multiple logistic regression was used for each gender category, controlling by socio-demographic variables. The models included social variables comprised of social participation, social network, safety, and social cohesion.

Results

The socio-demographic information of the participants is presented in Table 1. Of all participants, 53.1% were female, and 46.9% were male. More than half of the participants were age 18-30 years (54.4%). In addition, 78% stated that they had high school or lower education levels. Furthermore, nearly 60% of the residents had low income levels and stated that they had been living in that neighbourhood since birth.

Table (1): General characteristics of the respondents

Characteristics		Frequency (%)	
		Female	Male
Gender	-	491 (53%)	433 (46%)
Education	under diploma	167 (37%)	118 (29.5%)
	Diploma	201 (43.3%)	190 (47.5%)
	Bachelor	88 (19%)	86 (21.5%)
	Postgraduate	8 (1.7%)	6 (1.5%)
Income	below 800	109 (22.6%)	37 (9.5%)
	800-2	205 (42.5%)	167 (42.7%)
	2-4	54 (11.2%)	94 (24%)
	above 4	114 (22.7%)	93 (23.8%)
Age.Cat	1.00	211 (51.8%)	223 (57%)
	2.00	79 (19.4%)	88 (22.5%)
	3.00	103 (25.3%)	56 (14.3%)
	4.00	14 (3.4%)	24 (6.1%)
Live.Cat	1.00	18 (3.8%)	45 (11.1%)
	2.00	183 (38.7%)	111 (27.3%)
	3.00	124 (26.2%)	108 (26.6%)
	4.00	148 (31.3%)	142 (35%)

As shown in Table 2, females reported a significantly higher social wellbeing ($P < .0001$), social cohesion ($P < .0001$), and social participation ($P=.04$). On the contrary, men had higher perceptions of personal safety compared with women ($P=.03$). A higher social network was found among females than males, but it was not significant

Table (2): Deference between social activity and wellbeing in men and women

Factor	All N(SD)	Female N(SD)	Male N(SD)	p-value	Z/T
Social wellbeing	3.95 (0.78)	4.06 (0.66)	3.80 (0.88)	.000	-4.12
Social cohesion	3.59 (1.21)	3.76 (1.15)	3.38 (1.24)	.000	-4.50
Social Network	3.43 (1.13)	3.46 (1.10)	3.39 (1.16)	.297	-1.04
Personal Safety	3.65 (1.11)	3.55 (1.19)	3.77 (0.98)	.035	-2.10
Social participation	2.79 (1.15)	2.86 (1.12)	2.70 (1.20)	.041	-2.04

Social wellbeing among this gender group. In the male group, the model results showed all indicators significantly affected social wellbeing $F(8,232)=36.23, p < .0001, R^2 = .55$. In this connection, the findings showed that social cohesion, social participation, social network, and personal safety were positively correlated with social wellbeing. Meanwhile, the socio-demographic variables affected social wellbeing in the male group (Table 3). Two gender-based multiple regression models were run to predict

social wellbeing based on social network, social participation, social cohesion, and personal safety, controlling by socio-demographic variables. Regarding the female group, the results showed that all variables, except for safety, significantly predicted social wellbeing, $F(8,309)=21.57$, $p < .0001$, $R^2 = .35$. In this respect, the presence of social cohesion, social participation, and social network positively increased social wellbeing among females. In addition, socio-demographic variables, such as age, education level, income level, and length of residency correlated with

Table (3): Association of social variables with social wellbeing

Factor	Female beta (CI 95%)	Male beta (CI 95%)
Social cohesion	.18 (0.98 -0.26) **	.15 (0.04- 0.26) **
Social network	.14 (.07- 0.22) **	.25 (0.15- 0.34) **
Personal safety	.03 (0.03- 0.04)	.22 (0.13- 0.32) **
Social participation	.19 (0.7- 0.31) **	.19 (0.07- 0.31) **
Control variable		
Education	.20 (0.14- 0.29) **	.11 (0.02- 0.25) *
length of residency	.01 (0.04- 0.02) **	.03 (0.00- 0.06) **
Age	.11(0.06- 0.19) **	.15 (0.07- 0.22) **
Household Income	.15(0.08- 0.23) **	.12 (0.09- 0.24) **
Adjusted R ² Square	.34	.54

- Sig or p value ≤ 0.05 *, $P \leq 0.01$ **

Discussion

The present study examined the relationship between social characteristics and people's social wellbeing in low-income neighborhoods. To the best of our knowledge, this research is one of the first studies in the field of social wellbeing in low-income areas both in Iran and Asia. The objective was to answer two questions regarding wellbeing and social capital: 1) what effects do social variables have on social wellbeing in low-income neighborhoods with high social capital? 2) Are these factors different based on gender? The findings showed a significant difference between men and women regarding social wellbeing and social relations; although case studies were selected from low-income neighborhoods, social relations can still create solidarity among residents and positively affect their social wellbeing, which is corroborated by the research on the relationship between neighborhood environment and human psyche (Li & Rose, 2017, Hutson & Moscovitz, 2019, Dong & Qin, 2017, Browne-Yung et al. 2017, Mouratidis, 2017).

This article can help to strengthen the social concept of low-income neighborhoods; moreover, mental health improves life experiences, and the findings showed that social wellbeing and its close association with social capital reduced the effects of low-income status on social wellbeing. Concerning the analytical framework of social wellbeing, this article contributes to SWB¹ research owing to the important role of strong social capital on low-income neighborhoods and mental and social wellbeing. Four dimensions of social capital, namely personal safety, participation, social network, and social cohesion, were examined in this study. The findings revealed that women had more social participation, social cohesion, and social network than men. These findings might be attributed to the longer duration of their presence in homes (since a large number of respondents were housewives); on the other hand, according to the results, working women also showed interest in group activities and gatherings. Thus, although gender segregation and its effects have been less studied in similar studies, special emphasis has been placed on the role of women and their greater influence on politics (- Australian Bureau of Statistics (2002). For instance, Jiang & Kang (2019) pointed to the different effects of social capital variables on health in different age groups and genders. Ludwig et al. (2013) also examined the long-term effects of neighborhood on low-income families and their relocation to neighborhoods with better physical conditions, which caused reports of higher wellbeing among women. In another study conducted in Iran, Aliyas (2020) stated that social capital was higher in the old neighborhoods of Bandar

¹ Social Wellbeing

Abbas; therefore, urban policies and interventions to strengthen social environment should be considered according to the needs and wants of both genders.

Given the role of social capital on social wellbeing, this study confirmed the positive effect of social cohesion (as a component of social capital) on social wellbeing in poor neighborhoods, and reported higher social cohesion in women than in men. Social cohesion due to the presence of relatives in the neighborhood, the long-term presence of residents and connecting with neighbors can cause people to collaborate in the joint religious, cultural, and professional activities effective in strengthening their social cohesion. However, some research in the field of health shows that long-term living in an unfavorable environment with low economic status has a negative impact on human health and wellbeing (Wang et.al. 2013, Ludwig et.al. 2013). However, based on our results, social cohesion in low-income and old neighborhoods had a positive improving effect on people's wellbeing; Xia & Ma (2020) also observed a positive effect of social cohesion on psychological dimensions and health and wellbeing. Engel et al (2016) further identified the influence of improved environment and the positive role of social cohesion on the wellbeing of old low-income neighborhoods. Elliott et al. (2014) found a stronger link between cohesion and wellbeing in adults. Public and private policymakers can contribute to strengthening social cohesion through creating high quality common spaces to develop local activities such as engaging residents to participate in religious or cultural ceremonies.

In line with previous research findings (Engel et.al. 2016, Jiang & Kang, 2019), the results of this study also showed that men perceived higher safety compared to women. Perception of safety can cause by several neighborhood physical factors that lighting at night is one of them. It is also suggested lighting in local areas associate with mental and general wellbeing of residents. Therefore, urban designers and policy makers should design and implement interventions according factors to increase overall safety of both gender groups. We found the association of social network with social wellbeing for both male and female gender groups. This findings is in line with previous study conducted by Mouratidis (2017). It is recommended by a large number of studies that engaging in social activities can develop overall mental health (Diener & Diener, 2018, Blanco& Diaz, 2007, Australian Bureau of Statistics, 2002, Aliyas, 2020, Li& Rose, 2017, Kawachi et.al. 1999). This article also confirmed this issue in poor neighborhoods, and the participation rate in women was higher than in men; it seems that social subscriptions can pave the way for policies and even the revitalization of urban neighborhoods. Most of the factors in the local community's participatory areas are closely related to the culture of each region (such as attending ceremonies, visiting in holidays, and attending mosques, which reflect the beliefs and customs of local people); therefore, the existence of responsive urban spaces to increase participation and wellbeing is a factor that urban planners, architects, and designers should pay special attention to (Bott et.al. 2019, Wells& Donofrio, 2019).

In addition, to increase social network among neighbors, it is necessary to take socio-cultural and socio-cognitive contexts of each region into account. On the other hand, the World Health Organization has emphasized the interaction between local and national government in dealing with the social factors of health (World Health Organization, 2012). Therefore, the benefits of using urban public places are first for the people and then for the neighborhood, community, and country because the living area can affect the subconscious and mental wellbeing. Some research has suggested that increased national economic prosperity is not necessarily accompanied by an increase in social wellbeing. However, this study revealed the correlation between household income and social wellbeing. Strengthening social capital in local communities can provide opportunities for social and economic activities in the neighbourhoods which can finally cause in rising residents' social wellbeing. Solving the problems of poor neighborhoods is one of the main concerns of urban developers and planners; therefore, this study also examined the importance of social capital and its impact on wellbeing in order to respond to this issue; however, the project had some limitations. Firstly, there may be errors in the measurement and some people may not have answered the questionnaire information correctly; on the other hand, this type of measurement is the most appropriate approach to examining social wellbeing and recognizing social network. Secondly, in this study, only the relationship among the four factors of social environment and social wellbeing was investigated and other environmental factors might have a direct or indirect effect

on this relationship. For example, the physical design of the environment and the amount of access to shared and responsive spaces may strengthen or weaken the relationship between the social environment and wellbeing. Third, we only investigated old and poor neighborhoods of the city. Fourth, the social capital of neighborhoods includes other factors such as education, training, safety, cultural issues, and transportation. In this article, only the social role limited to social activities was considered.

Conclusion

The results of this study contributed to the geography of health care and determined that high social capital plays a key role in the social wellbeing of low-income neighborhoods. The findings of social wellbeing were based on a survey of residents of low-income and old development neighborhoods in Bandar Abbas. The findings indicated that despite their low economic conditions, social wellbeing was good in the old neighborhoods of the city, which is due to the strong participation and social network that exist between the residents of these neighborhoods. In this regard, it can be concluded that strengthening the common spaces in the neighborhoods as well as planning small and large social activities in the neighborhoods can help increase social cohesion and network among local residents. The cultural and religious centers and parks in the neighborhoods can be recognized as social nodes in the context of neighborhoods policies and designs must be such that strengthen the qualitative and environmental conditions of these places. Given the perceptual and relationship differences between men and women, urban design and intervention to improve neighborhood social relations should be considered in response to the needs of both genders. In general, the research findings showed that socio-economic status affected the social capital and well-being of residents; therefore, to create and revitalize public places, urban planners, architects, and designers should pay special attention to the culture and customs of each region and the demands and needs of the residents of the area.

Acknowledgement

We are very grateful to residents of Bandar Abbas city who participated in the study.

References

1. Abu Bakar, A., Mohamed Osman M., Bachok S & Ibrahim M., Mohd Zin (2015). "Modelling economic wellbeing and social wellbeing for sustainability: a theoretical concept", *Procedia Science Environment* 28: 286 – 296
2. Aliyas, Z. (2020). "Social Capital and Physical Activity Level in an Urban Adult Population." *American Journal of Health Education* 51: 40-49.
3. Anand, P. (2016). "Happiness Well-being and Human Development: The Case for Subjective Measures, UNDP Human Development Report", http://hdr.undp.org/sites/default/files/anand_template_rev.pdf, 2020.05.12
4. Australian Bureau of Statistics, (2002). "Social Capital and Social Wellbeing", www.oecd.org, 2020.02.13, 05: 57 p.m
5. Baran, P., Smith, W., (2009). "Walking behavior in Istanbul: Individual attributes, neighborhood context and perceived safety", *ITU J Faculty Arch.* 6: 21–40.
6. Blanco, A., Díaz, D., (2007). "Social order and mental health: A social wellbeing approach", *Psychology in Spain*, 11, 61-71
7. Bott, L.M., Ankel, L.B.B., (2019). "Adaptive neighborhoods: The interrelation of urban form, social capital, and responses to coastal hazards in Jakarta", *Geoforum* 106: 202–213
8. Browne-Yung, K., Ziersch, A., Baum, F., (2013). "Faking til you make it': Social capital accumulation of individuals on low incomes living in contrasting socio-economic neighbourhoods and its implications for health and wellbeing", *Social Science & Medicine*, 85: 9-17
9. Colantonio, A., Dixon, T., (2011). *Urban Regeneration & Social Sustainability, Best practice from European cities*, John Wiley & Sons: 1-336

10. Daniels, K., Watson, D., Gedikli, C. (2017). "Well-Being and the Social Environment of Work: A Systematic Review of Intervention Studies", *Int J Environ Res Public Health*, 14: 9-18
11. David, S.A., Ayers, A. C., Boniwell, I. (2018). "Oxford Handbook of Happiness". Oxford: (Oxford University Press, 2014).
12. Diener, E., Diener, R.B. (2018). "Social Well-Being: Research and Policy Recommendations, Global Happiness Policy Report", www.eddiener.com, 2020.03.13, 03:12 p.m
13. Dong, H., Qin, B., (2017). "Exploring the link between neighborhood environment and mental wellbeing: A case study in Beijing", *China, Landscape and Urban Planning*, 164: 71–80
14. Elliott, J., Gale, C.R., Parsons, S., Kuh, D., The HALCYON Study Team (2014) "Neighbourhood Cohesion and Mental Wellbeing among Older Adults: A mixed Methods Approach", *Social Science & Medicine* 107: 44-51
15. Engel, L., Chudyk, A.M., Ashe, M.C., McKay, H.A., Whitehurst, D.G.T., Bryan, S., (2016) "Older adults' quality of life e Exploring the role of the built environment and social cohesion in community-dwelling seniors on low income", *Social Science & Medicine* 164: 1-11
16. Guillen-Royo, M., (2019). "Sustainable consumption and wellbeing: Does on-line shopping matter?", *Journal of Cleaner Production*, doi: <https://doi.org/10.1016/j.jclepro.2019.05.061>.
17. Humphrey, J.L., Lindstrom, M., Barton, K.E., Shrestha, P., Carlton, E.J., Adgate, J.L., Miller, S.L., Root, E.D., (2019). "Social and Environmental Neighborhood Typologies and Lung Function in a Low-Income, Urban Population", *Int. Journal of Environment Research and Public Health*, 16: 11-33
18. Jiang, J., Kang, R., (2019). "Temporal heterogeneity of the association between social capital and health: an age-period-cohort analysis in China", *public health*, 172: 61-69
19. Kawachi, I., Kennedy, B.P., Glass, R., (1999). "Social Capital and Self-rated Health: A Contextual Analysis". *Am J Public Health*, 89: 1187–1193. Doi: 10.2105/ AJPH.89.8.1187.
20. Keyes, L.M., (1998). "Social well-being", *Social Psychology Quarterly*, 61: 121-140
21. Li, J., Rose, N., (2017). "Urban Social Exclusion and Mental Health of China's Rural-urban Migrants – A Review and Call for Research", *Health & Place* 48: 20–30
22. Ludwig, J., Duncan, G.J., Gennetian, L.A., Katz, L.F., Kessler, R.C., Kling, J.R., Sanbonmatsu, L., (2013), "Long-Term Neighborhood Effects on Low-Income Families: Evidence from Moving to Opportunity", *American Economic Review*, American Economic Association 103: 31-226
23. McGreevy, M., Harris, P., Delany-Crowe, T., Fisher, M., Sainsbury, P., Baum, F., (2019). "Can health and health equity be advanced by urban planning strategies designed to advance global competitiveness? Lessons from two Australian case studies", *Social Science & Medicine*, 242: 1-8
24. Mouratidis, K., (2017). "Built environment and social well-being: How does urban form affect social life and personal relationships?", *Cities* 74: 7-20, <http://dx.doi.org/10.1016/j.cities.2020.03.23>, 09:14 p.m
25. Naghsh Piravash Consulting Engineers (2008), *Strategic Studies of Bandar Abbas Dilapidated Texture Improvement and Renovation Plan "Preliminary Study"*, Ministry of Housing and Urban Development, Parent Company for Urban Development and Improvement, Volume 3
26. Radzyk, J., (2014). "Validation of a New Social Wellbeing Questionnaire", Bachelor thesis Psychology, Department of Psychology, Health & Technology, University of Twente, Netherlands
27. Schulz, A.J., Araya, A.H., Mehdipanah, R., (2018). "Urban Environments and Health", *Encyclopedia of Environmental Health (Second Edition)*, (2018): 266-272, <https://doi.org/10.1016/B978-0-12-409548-9.11249-7>
28. Teghe, D., Rendell, K. (2005). "Social Wellbeing: a Literature Review, school of social work & welfare studies". Doi: 10.13140/RG.2.2.28891.26406, 2020.03.10, 05:23 p.m
29. United States institute of peace, (2020). "Guiding Principles for Stabilization and Reconstruction: Social Wellbeing", <http://www.usip.org/guiding-principles-stabilization-and-reconstruction-the-web-version/social-well-being>, 2020.03.13, 04:40 p.m
30. Vogelsang, E.M., (2016). "Older adult social participation and its relationship with health: Ruralurban differences", *Health & Place*, 42, 111–119

31. Wahyuni, S., Reswita, (2018). "Family Environment: Subjective Well-Being and Children Learning Motivation", IOP Conference Series: Earth and Environmental Science, 175
32. Wang, D., Schwanen, T., Mao, Z., (2019). "Does Exposure to Richer and Poorer Neighborhoods Influence Wellbeing?", *Cities*, 95:102408
33. Wei, L., Gao, F., (2016). "Social Media, Social Integration and Subjective Well-being among New Urban Migrants in China", *Telematics and Informatics*, 1-22, doi: <http://dx.doi.org/10.1016/j.tele.2016.05.017>
34. Wells, N.M., Donofrio, G.A., (2019). "Urban Planning, the Natural Environment, and Public Health", *Encyclopedia of Environmental Health*, 6, 2nd edition, 286-296, <https://doi.org/10.1016/B978-0-12-409548-9.11831-7>
35. World Health Organization, (2012). "Addressing the social determinants of health: the urban dimension and the role of local government", (<http://www.euro.who.int/pubrequest>), 2020. 05.06, 01:47 a.m
36. Xia, Y., Ma, Z., (2020). "Social Integration, Perceived Stress, Locus of control, and Psychological Wellbeing among Chinese Emerging Adult Migrants: A Conditional Process Analysis, *Journal of Affective Disorders*", *Affective Disorders* 267: 9-16, doi: <https://doi.org/10.1016/j.jad.2020.02.016>