

# Influence of social capital on happiness of multicultural family: A cross-sectional study using the 2019 Korea community health survey

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**Abstract:** This study aims to identify factors related to the impact of social capital on happiness among multicultural families using the 2019 Community Health Survey, which represents the South Korean population. The study utilized data from the 2019 Korea Community Health Survey, and the study participants, aged 20 years or older, included 3524 members of multicultural families from a total of 229,099 adult households. The study found a significant difference in happiness scores across different age groups ( $t = 57.00, p < 0.01$ ). Based on the median value of happiness, significant relationships were found with the independent variables: Physical Environment of Trust ( $t = -5.13, p < 0.001$ ), Social Networks ( $t = -5.51, p < 0.001$ ), and Social Participation ( $t = -5.47, p < 0.001$ ). Happiness was found to have a positive correlation with the Physical Environment of Trust ( $r = 0.12, p < .001$ ), Social Participation ( $r = 0.11, p < 0.001$ ), and Social Network ( $r = 0.13, p \leq 0.001$ ). In contrast, Age ( $r = -0.13, p \leq 0.001$ ) and Stress ( $r = -0.14, p \leq 0.001$ ) showed negative correlations with happiness ( $r = 0.57, p < 0.001$ ). The analysis identified a positive community physical environment ( $t = 3.85, p < 0.01$ ), increased social networks ( $t = 4.27, p < 0.01$ ), and higher social participation ( $t = 6.88, p < 0.01$ ) as significant predictors of happiness. This model suggests that the explanation power is 15%, which is statistically significant ( $R^2 = 0.15, F = 57.72, p < 0.001$ ). This study highlights the influence of social capital on the happiness of multicultural families living in Korea. Given the increasing number of multicultural families in the country, strategic interventions aimed at enhancing social networks and participation are necessary to promote their happiness.

**Keywords:** multicultural family; physical environment; social network; social participation; happiness

## 1. Introduction

South Korea is transforming into a multicultural society, with a significant increase in the number of marriage immigrants since the early 2000s. As of 2020, these families constitute 360,000 households, accounting for 1.8% of all general households (Statistics Korea, 2021).

In recent years, Korea has been experiencing rapid demographic changes. Due to low birth rates and an aging population, Korea's population is declining, and there is an increasing trend to accept immigrants to address labor shortages. The immigrant population in South Korea, originating predominantly from China, Vietnam, the Philippines, the United States, Uzbekistan, and Thailand, is increasing for various reasons. These shifts are introducing multicultural elements into the fabric of Korean society (Ministry of Gender Equality and Family, 2022).

The number of multicultural families formed through marriage with immigrants is increasing. These families are now a part of the Korean societal fabric but may still

face numerous challenges, including cultural differences, language barriers, and social discrimination. Children in these families often grow up bilingual, learning both Korean and their immigrant parents' native languages, which can pose challenges in their education and social integration. Despite these challenges, the rise of multicultural families adds a new layer of cultural diversity and dynamism to Korean society (Multicultural Families Support Act, 2024). Immigrants in Korea may encounter a range of difficulties, such as language barriers, restricted job opportunities, social discrimination, and cultural clashes. These issues can adversely affect their quality of life. To support immigrants, the Korean government and non-governmental organizations offer various programs. These include Korean language classes, vocational training, and cultural exchange programs, all aimed at promoting their social integration (H. Kim and O. Kim, 2017).

A multicultural family is defined as a household created by individuals from different nationalities, races, or cultural backgrounds, or one that includes such individuals. (Multicultural Families Support Act, 2024) Essentially, a multicultural family is established when a foreigner, who may or may not have acquired Korean citizenship, marries a Korean. This union and the resulting family are recognized as part of a multicultural family. Multiculturalism policies aim to reduce economic disparities and elevate the social status of minorities for political and social integration. However, these policies alone are insufficient to resolve conflicts between different groups and identity issues among individuals (H. Kim and O. Kim, 2017). The Ministry of Justice has established and implemented the 'First Basic Plan for Foreigner Policy' and the 'Second Basic Plan for Foreigner Policy' according to the Basic Law on the Treatment of Foreigners in Korea and is currently implementing the 'Third Basic Plan for Foreigner Policy'. The Ministry of Gender Equality and Family has also established and implemented the 'First Basic Plan for Multicultural Family Support Policy' and the 'Second Basic Plan for Multicultural Family Policy', with the 'Third Basic Plan for Multicultural Family Policy' being implemented since 2018 (Statistics Korea, 2021).

Since the inception of the Basic Plan for Foreigner Policy in 2008, the government has been establishing a system and vision for multicultural family policies. It has been making efforts to improve the quality of life for multicultural families by supporting the settlement and enhancing the self-reliance capabilities of marriage immigrants. However, besides the harms experienced during the migration process, a significant problem for multicultural families has been identified: many wives, who are marriage immigrants, do not fully understand the Korean language, society, or characteristics of Koreans. As a result, upon entering families through marriage, they often face abuse from their in-laws due to cultural differences, and there have been confirmed cases where these women have become victims of violence from husbands with criminal or mental health histories (Kim and Choi, 2011). Furthermore, the majority of marriage immigrant women in multicultural families enter South Korea with limited understanding of Korean culture and language, and begin family life without grasping the male-dominated, patriarchal cultural norms. As a result, conflicts within the family arise not only due to language barriers but also due to a lack of social networks, which prevents these women from receiving external support (Park, 2010) 30% of marriage immigrant women in multicultural families reported that they lack

the social relationships necessary to seek help for everyday needs, such as difficulties at home, job-related issues, children's education, or when they are sick (Ministry of Gender Equality and Family, 2022). Social capital fundamentally begins with kinship, that is, family relationships, and is built as social networks expand and social relationships widen with growth. Social capital refers to the physical environment, social participation, and social networks that occur between people. For marriage immigrant women, the tight bonds they had with their networks in their home countries are lost, and new physical environments, social participations, and social networks are formed as they re-socialize into Korean society. If these social networks are not secured, they experience emotional deficiencies such as longing, loneliness, and frustration, leading to an unhappy life (Kim, 2009).

Although some husbands in multicultural families may engage in domestic violence due to patriarchal thinking and ignorance, they are often also victims of mental, economic, and social hardships. Many of these men, who have little knowledge of or experience with other cultures, find themselves in challenging circumstances within Korean society. They experience conflicts within the family soon after marrying foreign wives, often under rapid and strained conditions. Particularly, Korean men who fail to meet the economic and cultural expectations of women from developing countries are shouldering the burdens of globalization and perpetuating social and hierarchical inequalities along with their foreign wives (Chae and Hong, 2008). Everyone desires a happy life and wants to create a harmonious and healthy family. Happiness, as a search for meaning in life, is one of the universal desires of humans; people feel happy when they find meaning in their lives (Frey and Stutzer, 2002).

Social capital encompasses the interpersonal relationships, networks, and mutual trust within a society. Family happiness and well-being are fundamental components of social capital, and they are intricately interconnected. Multicultural families that are happy pass on social capital to the next generation (H. Kim and O. Kim, 2017). Strong bonds between parents and children facilitate the children in establishing healthy relationships in society, thereby contributing to the expansion of social capital across the community. The cooperation and support among family members extend to broader social networks, fostering cooperation and mutual support throughout society. Social capital generated within families plays a vital role in increasing the resilience and stability of communities. Social capital provides benefits across various aspects of society. The happiness and well-being of families are associated with several positive outcomes such as reduced crime rates, expanded economic opportunities, enhanced social trust, and increased civic participation. South Korea is one of the countries that has experienced rapid economic growth. However, economic prosperity does not necessarily guarantee high levels of happiness (Ministry of Gender Equality and Family, 2022). In the case of South Korea, factors such as intense competition, long working hours, and workplace stress have been found to have a negative impact on happiness independent of economic stability. One of the important factors for happiness is social connections and relationships. While South Korea traditionally had a family-centric culture, modernization and urbanization have led to a weakening of family ties and an increase in social isolation. This could be a factor contributing to lower levels of happiness. According to the World Happiness Report, there could be

evidence emphasizing the role and importance of multicultural families in South Korean society. (Ministry of Gender Equality and Family, 2022). Families play a role in enhancing various factors of happiness, such as social connections, trust, emotional support, and healthy lifestyle habits. Therefore, policies aimed at promoting the happiness and well-being of multicultural families could play a significant role in increasing overall happiness levels in South Korea.

Members of multicultural families have shown that the higher the level of social capital, the greater their expectations for family happiness (J. Kim and N. Kim, 2019). Moreover, it has been confirmed that the higher the level of social capital, the greater the satisfaction and happiness with life in Korea for marriage immigrant women who are members of these multicultural families (Lee and Noh, 2017; Lim et al., 2021).

This study aims to identify factors related to the impact of social capital on happiness among multicultural families using the 2019 Community Health Survey, which represents the South Korean population. Additionally, based on the research results, the study intends to provide foundational data for maintaining happiness through social capital among multicultural families and ultimately for developing healthcare service policies for multicultural families.

## **2. Materials and methods**

### **2.1. Research design**

This study is descriptive correlational research that examines the factors influencing happiness in terms of social capital (physical environment, social participation, social networks) among multicultural families living in Korean society.

### **2.2. Setting and sample**

This study selected research participants based on statistical data conducted by the Korea Disease Control and Prevention Agency to assess the health status of local residents and to provide foundational data for health policy.

From the original data, research subjects were selected from the Community Health Survey, which targets adults aged 19 and older. The survey was stratified by 17 metropolitan cities, districts/towns, and types of housing, taking into account household size to ensure proportional selection during the first phase. In the second phase, using systematic sampling, 229,099 individuals were chosen, and after excluding 146 individuals with missing values, 3524 individuals from multicultural households were selected for research analysis.

### **2.3. Materials and methods**

#### **2.3.1. General characteristics**

The study collected data on the participants' education levels, employment status, monthly income, and marital status. Additionally, to assess stress levels, the study calculated the subjective stress perception rate. This was determined by dividing the number of respondents who reported feeling 'a great deal of stress' or 'tend to feel a lot of stress' in their daily lives by the total number of respondents, yielding a proportion that represents the perceived stress. Household monthly income was

classified from the first to the fifth quintile based on the values entered into the original data and the 2020 Statistics Korea guidelines for monthly income per household, with higher quintiles indicating higher income levels.

### **2.3.2. Social capital**

Social capital is defined as ‘the connections among individuals that include social networks, reciprocal norms, and the trust that facilitates coordination and cooperation for mutual benefit’ (Putnam, 2000). Based on Putnam’s (2000) conceptualization, trust in the physical environment, social networks, and social participation were selected as elements of social capital (Jung and Kim, 2022). The measurement of social capital involved categorizing the raw data from the social physical environment section of the 2019 Community Health Survey into dummy variables.

Trust in the physical environment of the community was measured using a dichotomous ‘Yes, No’ scale across seven items, including statements such as ‘People in our neighborhood can trust each other’ and ‘I am satisfied with the safety level of our neighborhood.’ Social networks were measured based on a question Berkman and Syme’s prior research: ‘How often do you see or contact your most frequently contacted neighbor (or friend, relative)?’ Responses indicating contact at least once a month were coded as ‘Yes=1,’ and less frequent contact was coded as ‘No=0.’ Social participation was measured based on whether individuals participated at least once a month (one session) in religious activities, social activities, leisure/recreational activities, or charitable organization activities, with responses categorized as ‘Yes = 1’ for regular participation and ‘No = 0’ otherwise. Scores from these subcategories were summed, with higher scores indicating a more positive level of social capital.

### **2.3.3. Happiness**

The happiness index was calculated by assessing respondents’ satisfaction with their recent lives on a scale of 1 to 10 in the areas of activity limitation and quality of life, based on data from the Community Health Survey. A higher score indicates a higher level of happiness, with 10 indicating extreme satisfaction with life and 1 indicating extreme dissatisfaction.

## **2.4. Data collection**

The raw data used in this study were collected from August 16 to October 31, 2019, through a collaboration with the Disease Control and Prevention Agency, 17 metropolitan cities, 255 public health centers, and 35 responsible universities and institutions that formed a management office for the survey. Trained interviewers visited selected households to conduct face-to-face interviews using laptops equipped with survey software. The collected data were anonymized to ensure privacy compliance with statistical laws, providing only de-identified information that prevents the estimation of personal identities. The study was conducted with statistical approval from the Statistics Korea (Approval Number 117075).

## **2.5. Ethical considerations**

The Community Health Survey is conducted in accordance with Article 4 (Community Health Status Survey) of the Local Health Act and Article 2 (Methods and Contents of the Community Health Status Survey) of its enforcement decree, to

establish and evaluate local health care plans. This raw data was authorized for use after receiving approval from the website of the Community Health Survey under the Disease Control and Prevention Agency (Approval Number 117075). Subsequently, the study underwent review and was approved by the Institutional Review Board (IRB) of the researchers' university (IRB NO.1041455-202312-HR-022-01), allowing for the analysis of the raw data.

## 2.6. Statistical analysis

The collected data were analyzed using the SPSS 23.0 Program (IBM SPSS Statistics, Chicago, IL, USA). The Community Health Survey data were extracted with individual and household weights applied, utilizing a complex sample design that included variance estimation (variable name kstrata), clustering (variable name psu), and weights (variable name tvex).

The general characteristics of the subjects and the characteristics of their social capital were analyzed using descriptive statistics methods. The mean comparisons of independent variables such as trust in the physical environment, social networks, and social participation in relation to happiness were analyzed using t-tests and chi-square tests. The relationships between happiness, general characteristics, and independent variables were examined using the Pearson correlation coefficient. To determine predictors of happiness, the study first assessed multicollinearity among the independent variables using tolerance and the Variance Inflation Factor (VIF). Subsequently, in a second stage, the study used multiple linear regression analysis (employing the enter method) to identify and evaluate independent predictors specifically related to happiness. Any missing data in the study were addressed using the pairwise deletion method, resulting in a maximum missing data rate of 0.2%. The reliability of the instruments used in the research was established using Cronbach's alpha, with all statistical tests deemed significant at a p-value of less than 0.05.

## 3. Result

### 3.1. General characteristics of the participants

The participants consisted of 1,745 men (49.5%) and 1779 women (50.5%), with an average age of  $50.43 \pm 16.19$  years. The most common age group was 35–49 years, representing 33.2% of the sample. Regarding marital status, 2818 participants (80%) were married. Economically, 1291 participants (48.5%) were classified as lower to middle income, and 2516 participants (71.4%) were employed (**Table 1**).

**Table 1.** General characteristics of multicultural families ( $n = 3524$ ).

Variables	Categories	$n$ (%) or Mean $\pm$ SD
Gender	Men	1745 (49.5)
	Women	1779 (50.5)
Age (year)	Total	$50.43 \pm 16.19$
	Men	$51.57 \pm 12.98$
	Women	$49.31 \pm 18.75$
	$\leq 34$	643 (18.2)

**Table 1. (Continued).**

Variables	Categories	n (%) or Mean ± SD
Age (year)	35–49	1171 (33.2)
	50–64	971 (27.6)
	≥65	739 (21.0)
Marital status	Yes	2818 (80.0)
	No (Single, Married, Widowed /Divorced)	706 (20.0)
Household monthly income	Low	465 (17.5)
	Middle–low	1291 (48.5)
	Middle	650 (24.4)
	Middle–high	179 (6.7)
	High	77 (2.9)
Education	≤Middle school	1314 (37.3)
	High school	1346 (38.2)
	≥College	860 (24.4)
Occupation	Employed	2516 (71.4)
	Unemployed	1008 (28.6)

Note: SD, standard deviation.

### 3.2. Characteristics of the social capital of the participants

**Table 2.** Characteristics of the social capital of the Participants (n = 3524).

Variables	Categories	n (%) or Mean ± SD
Happiness (score)		6.95 ± 1.78
Physical Environment of Trust (yes)		5.30 ± 1.66
	Neighbor-Trust	2242 (69.2)
	Neighbor-event <sup>†</sup>	1895 (56.9)
	Level of safety	2975 (86.3)
	Natural environment <sup>‡</sup>	2913 (83.4)
	Living environment <sup>‡</sup>	2954 (84.0)
	Public transport	2500 (72.9)
	Medical service	2585 (74.6)
Social participation(yes) <sup>§</sup>		0.88 ± 0.90
	Religion	757 (21.5)
	Social activity	1538 (43.7)
	Leisure	582 (16.5)
Social Network(yes) <sup>//</sup>	Charity	206 (5.9)
	Relative or family	2871 (81.5)
	Neighbor	2426 (69.2)
Stress perception rate	Friend	2706 (76.9)
		0.23 ± 0.42

Note: SD, standard deviation; <sup>†</sup> = Mutually supportive relationships for congratulations and condolences; <sup>‡</sup> = air quality, water quality, etc.; <sup>‡</sup> = Electricity, water and sewage, garbage collection, sports facilities, etc. <sup>§</sup> = Contact us more than once a month, <sup>//</sup> = Participate more than once a month.

The happiness score of the study participants was reported as  $6.95 \pm 1.78$ . Within the variables of the Physical Environment of Trust category, 2978 participants (86.3%) believed that the physical safety level of their community was good, while the lowest scoring item was the reciprocal help during important family events with neighbors, at 1895 (56.9%). In terms of social participation variables, social activities occurred at least once a month for 1535 participants (43.7%), with the lowest participation being in charitable activities at 206 (5.9%). For social network variables, contact with relative or family was the highest at 2871 (81.5%) (Table 2).

### 3.3. Differences in independent variables according to happiness

Based on the median value of happiness, significant relationships were found with the independent variables: Physical Environment of Trust ( $t = -5.13, p < 0.001$ ), Social Networks ( $t = -5.51, p < 0.001$ ), and Social Participation ( $t = -5.47, p < 0.001$ ) (Table 3).

**Table 3.** Differences in independent variables according to happiness ( $n = 3524$ ).

Variables	Categories	Happiness score		$\chi^2$ or $t$	$p$
		$\leq 5$ ( $n = 733$ )	$\geq 6$ ( $n = 2776$ )		
		$n$ (%) or Mean $\pm$ SD			
Age	young(20–34yr)	54.57 $\pm$ 16.61	49.26 $\pm$ 15.83	7.99	<0.001
	middle-age(35–49yr)	88 (13.7)	552 (86.3)		
	late middle-age(50–64yr)	207 (28.2)	964 (8203)		
	Old age( $\geq 65$ yr)	231 (31.5)	738 (76.2)		
Sex	Men	207 (28.2)	738 (76.2)	9.93	0.02
	Women	207 (28.2)	522 (71.6)		
Monthly income(won)		283.5 $\pm$ 180.4	351.8 $\pm$ 249.8	-7.29	<0.001
Physical Environment of Trust (score)		5.00 $\pm$ 1.88	5.38 $\pm$ 1.59	-5.13	<0.001
Social Participation(score)		0.71 $\pm$ 0.81	0.92 $\pm$ 0.91	-5.47	<0.001
Social Network(score)		2.12 $\pm$ 0.91	2.3 $\pm$ 0.77	-5.51	<0.001
Stress Perception Rate	high	0.4 $\pm$ 0.49	0.19 $\pm$ 0.39	12.64	<0.001
	low	298 (40.4)	519 (23.2)		
		437 (59.6)	2257 (76.9)	152.94	<0.001

Note: SD, standard deviation.

### 3.4. Correlation between happiness score and the social capital variables

Happiness was found to have a positive correlation with the Physical Environment of Trust ( $r = 0.12, p < 0.001$ ), Social Participation ( $r = 0.11, p < 0.001$ ), and Social Network ( $r = 0.13, p \leq 0.001$ ). In contrast, Age ( $r = -0.13, p \leq 0.001$ ) and Stress ( $r = -0.14, p \leq 0.001$ ) showed negative correlations with happiness ( $r = 0.57, p < 0.001$ ) (Table 4)



**Table 4.** Correlation between happiness score and the Social Capital variables (n = 3524).

Variables	(a)	(b)	(c)	(d)	(f)	(g)	(f)
	<i>r</i>						
(a) Happiness (score)	1						
(b) Physical Environment of Trust	0.12**	1					
(c) Social Participation	0.11**	0.08**	1				
(d) Social Network	0.13**	0.27**	0.22**	1			
(f) Stress Perception Rate	-0.28**	-0.16**	-0.04*	-0.09**	1		
(g) Age	-0.14**	0.22**	0.03	0.08**	-0.14**	1	
(f) Monthly Income	0.13**	-0.01	0.08**	-0.01	-0.00	-0.11**	1

Correlation coefficients and *p*-values of the nominal items. \* Correlation is significant at 0.05 (two-tailed analysis). \*\* Correlation is significant at 0.01 (two-tailed analysis).

### 3.5. Predictors of social capital on happiness score in multicultural families

Before conducting the regression analysis, the independence of the independent variables was verified by checking for autocorrelation, where the Durbin-Watson statistic indicated no issues. Additionally, the examination for multicollinearity showed that the tolerance values ranged from 0.88 to 0.97, all below 1.0, and the variance inflation factors were between 1.03 and 1.13, which did not exceed the critical value of 10, indicating no issues with multicollinearity. After adjusting for age, gender, monthly income, and individual weighting values in multicultural households, the predictors affecting happiness were examined. It was found that higher levels of trust in the social-physical environment ( $t = 3.85$ ,  $p < 0.01$ ), increased social network connections ( $t = 4.27$ ,  $p < 0.01$ ), and greater social participation ( $t = 6.88$ ,  $p < 0.01$ ) were associated with increased happiness. These factors together explained 15% of the variance in happiness ( $R^2 = 0.15$ ,  $F = 57.72$ ,  $p < 0.001$ ). Notably, social participation emerged as the most significant predictor of happiness in multicultural households (**Table 5**).

**Table 5.** Predictors of social capital on happiness score in multicultural families (n = 3524).

Variables	<i>B</i>	<i>SE</i>	$\beta$	<i>t</i>	<i>P</i>
(Constant)	6.69	0.17		39.70	<0.001
Physical Environment of Trust (Refence = yes)	0.17	0.04	0.08	3.85	<0.001
Social Participation (Refence = yes)	0.15	0.02	0.14	6.88	<0.001
Social Network Refence (Refence = yes)	0.16	0.04	0.09	4.27	<0.001
Stress Perception Rate	-0.91	0.08	-0.23	-11.92	<0.001
Gender (Refence = Men)	-0.02	0.00	-0.16	-7.87	<0.001
Age	-0.26	0.07	-0.07	-3.79	<0.001
Monthly Income(won)	0.00	0.00	0.13	6.69	<0.001

$R^2 = 0.15$ , Adjusted  $R^2 = 0.15$ ,  $F = 57.72$ ,  $p < 0.001$ .

## 4. Discussion

This study sought to delve into the intricacies of social capital among multicultural families in South Korea, leveraging data from the Community Health Survey. The objective was to provide foundational data for the maintenance of happiness through social capital among multicultural families in South Korea and, ultimately, for the formulation of healthcare policies tailored to multicultural families.

In contemporary South Korean society, a notable surge in foreign residents has been observed, attributed to factors such as international marriages, the influx of foreign laborers, and the integration of skilled professionals through naturalization. This phenomenon has propelled the nation swiftly towards a multicultural paradigm, marking a significant socio-demographic transition. Furthermore, the rapid rise of multicultural households stemming from international marriages is noteworthy. As these households become more prevalent in our society, it becomes increasingly important to explore the obstacles they encounter in establishing their sense of worth and adapting to Korean societal norms. This necessitates a closer examination of their challenges and the development of strategies to address them. Importantly, it is essential to recognize that multicultural families have the fundamental right to pursue happiness, making the quest for happiness not merely a choice but an essential matter that should naturally be realized.

The happiness scores of the study participants, averaging  $6.95 \pm 1.78$ , indicate a generally favorable level of happiness. This is notably higher than the scores reported in previous studies (Park, 2012) found an average score of 5.20, while Kim (2007) reported a score of 5.10. Considering these findings, while our study suggests relatively high levels of happiness, it warrants further investigation into both the contributing and inhibiting factors of happiness in multicultural families.

In this study, happiness was found to be significantly associated with Physical Environment of Trust ( $t = -5.13, p < 0.001$ ), Social Participation ( $t = -5.47, p < 0.001$ ), and Social Networks ( $t = -5.51, p < 0.001$ ). In the study by Moon (2016), a significant relationship between social capital and happiness was confirmed, which is consistent with the findings of this study. Moon (2016)'s research revealed that factors of social capital such as personal networks, civic participation networks, trust in the physical environment, and social participation have a positive impact on happiness. Similarly, in the study conducted by Song and Lee (2010), it was found that among the components of social capital, trust in networks and the physical environment had the greatest impact on happiness. Particularly, social capital was found to have a greater influence on happiness compared to socio-economic factors. The government assumes responsibility for management and oversight in many areas related to social capital to enhance the happiness of multicultural families. Thus, it is deemed necessary to develop various policies aimed at enhancing the happiness of multicultural families by considering various factors.

In this study, it was observed that the happiness of multicultural families is negatively correlated with stress scores. This finding aligns with results from prior research by Mun and Lee (2017) as well as Lim (2007), indicating consistency with the outcomes of this study. To explore ways to increase the happiness of multicultural families and reduce negative factors, systematic support is necessary. Simultaneously,

providing stress relief programs for multicultural families could help them find stability in life and experience happiness by alleviating stress.

In this study, the predictors affecting happiness were examined and found that higher levels of trust in the social-physical environment ( $t = 3.85, p < 0.01$ ), increased social network connections ( $t = 4.27, p < 0.01$ ), and greater social participation ( $t = 6.88, p < 0.01$ ) were associated with increased happiness.

While it was challenging to find directly comparable prior research, the significance lies in confirming the impact on the happiness of multicultural families.

The most significant factor influencing the happiness of multicultural families in this study was social participation, explaining 15% of the variance in happiness. In future research, it is necessary to explore the impact of other variables not addressed in this study on the happiness of multicultural families. The nursing significance of this research lies in its discernment of factors influencing the happiness of multicultural families. These findings serve as empirical evidence to bolster happiness through social capital among multicultural families, offering valuable utility in practice.

This study, characterized as an analytical investigation utilizing secondary data, assessed social capital and happiness within multicultural families, thereby providing limited insight into the causal relationships among the various factors.

## **5. Conclusion**

In the findings of this study, it was observed that within multicultural families, happiness increased as trust in the social-physical environment rose ( $t = 3.85, p < 0.01$ ), social connections expanded ( $t = 4.27, p < 0.01$ ), and social participation heightened ( $t = 6.88, p < 0.01$ ) with an overall explanatory power of 15% ( $R^2 = 0.15, F = 57.72, p < 0.001$ ). Expanding social support for multicultural families holds the potential to foster their stability in daily life and facilitate early integration into society. Establishing networks aimed at enhancing happiness for both families and local communities lays the groundwork for a more cohesive and supportive social fabric.

Based on research findings indicating the significant role of social capital in the happiness of multicultural households, policymakers should formulate policies to assist these households in building more social capital. This should include initiatives such as support for building social networks, encouragement of participation in community activities, addressing discrimination and prejudice against multicultural families, enhancing multicultural awareness through education, expanding welfare support for multicultural households, and establishing policies that respect cultural diversity.

In future studies, it would be beneficial to adopt a broader approach by investigating how happiness is augmented through social capital, considering a macro-level perspective rather than solely relying on the perspectives of multicultural families. Furthermore, exploring strategies to promote happiness within multicultural families requires not only quantitative investigations but also comprehensive qualitative inquiries to ensure more accurate findings. Therefore, such research methods should be considered in future studies for a better understanding of this subject.

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