

A study on the Effects of Psychological Health Capital on Family Life Satisfaction and Psychological Happiness of Women in Multicultural Family

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Abstract

This study analyzed the effect of psychological health capital on family life satisfaction and psychological well-being of women in multicultural families. In particular, this study classified the sub-factors of psychological health capital into confidence, hope, optimism, and , elasticity, considering the importance of the interaction between psychological health capital and psychological well-being of women in multicultural families. For the study subjects, women from multicultural families living in Gyeongsangbuk-do, Gyeongsangnam-do, Busan, and Ulsan were selected as the population, and convenience sampling was used among non-probability sampling methods.

A total of 168 questionnaires were used in this study. Data processing was performed by conducting frequency analysis and reliability analysis, and the confirming factor analysis and correlation analysis in parallel . Begin with verify the research hypothesis, the structural equation model was used to determine whether the established hypothesis was adopted or rejected. The results obtained through this research procedure are as follows. First, it was found that confidence, hope, optimism, and resilience, which are the sub-factors of health psychological capital, had a significant positive (+) effect on family life satisfaction. Second, it was found that family life satisfaction had a significant positive (+) effect on psychological well-being. Third, it was found that self-confidence, hope, and optimism, the sub-factors of health psychological capital, had a significant positive (+) effect on psychological happiness.

Keywords— Multicultural family women, Mental health capital, Family life satisfaction, Psychological happiness

1. Introduction

Multicultural families in the Korean society began in 1990 as an alternative to marriage for Korean men who had difficulty finding women to marry, which started with the “Yanbyun virgins, rural bachelor mating” project. A multicultural family is a family formed by marriage between men and women of different nationalities, races, and cultures [1]. Looking at the legal basis for multicultural families, Article 2 of the 「Multicultural Family Support Act」 explains that foreigners and their families are multicultural families if there is a fact that they married a Korean citizen who is a foreigner at birth. Among them, women from multicultural families face various problems such as lack of cultural understanding of a new country and difficulties in language communication in the special situation of marriage immigration [2]. Accordingly, countermeasures are required to improve the family health of women from multicultural families. Therefore, efforts to positively change the anxious psychological state of women from multicultural families, who are far from feelings of happiness and satisfaction, are

necessary with psychological health services tailored to the eye level of women from multicultural families[3]. To this end, it is necessary to make efforts to strengthen the mental and health capital of women from multicultural families[4].

In recent studies, psychologists have become more interested in developing and applying the strengths of mental health conditions such as individual health and vitality[5]. Health psychological capital means improving sound thinking, behavior, and attitude by utilizing healthy psychological strengths for a given environment [6]. Women from multicultural families with high health and psychological capital will be more positive about their lives, and the level of happiness will exceed their life expectations [7]. In addition, it can wisely overcome complaints, dissatisfaction, and stress in life, form a positive and healthy mental state of mind, and play a sincere role as a pleasant member of the society [8]. Empirical studies on healthy psychological capital are in the spotlight in various fields of study under various research topics, and it is explained that the independent influence of individual factors affect satisfaction, positive attitudes, and thinking of individuals in their work and life. Furthermore, it was suggested that the sub-concepts of psychological capital, such as confidence, hope, resilience, and optimism, can have a positive influence on individual behavior and motivation[9]. As a result, a healthy psychological state can help improve the quality of life of an individual, manage and evaluate oneself positively, and improve psychological well-being accompanied by a sense of satisfaction. As such, health psychological capital is a major antecedent variable that can improve the quality of life by encouraging individuals' positive attitudes and thinking, strengthening their inner psychological state, and capitalizing the psychological strengths of women from multicultural families to satisfy their family life and psychologically. To have a positive effect on feelings of happiness, it is necessary to broadly verify the causal relationship with various outcome variables.

Satisfaction with family life means an emotional state that one member of society experiences and perceives throughout his or her life[10]. That is, feeling joy in everyday life, giving meaning to life with oneself and their family, having responsibility, and achieving the pursuit of happiness for the purpose of the family together with oneself. Therefore, looking at the research results on family life satisfaction, it focuses on how life worked in a positive way, including the individual's intellectual factors and emotional reactions[11].

Psychological euphoria is a concept that follows the philosophical tradition of eudaemonism, and can be defined as a healthy and energetic state of psychological function, positive interpersonal relationships, autonomy, adequate control over the environment, positive purpose of life, and personal growth. In this respect, this study aims to clarify the relationship between health psychological capital, family life satisfaction, and psychological well-being by recognizing the importance of health psychological capital, which has been relatively neglected among the preceding variables affecting the psychological well-being of women from multicultural families. In other words, despite the fact that health and psychological capital through psychological reinforcement is a very important variable in order to lead a high-quality life for women from multicultural families, studies conducted on women from multicultural families were lacking in many aspects.

Therefore, through this study, as an opportunity to accumulate and expand the theory of health psychological capital, it is intended to seek ways to further increase the psychological happiness of women from multicultural families through family life satisfactions[12]. the purpose of this study is to examine the effects of psychological capital of health of women in multicultural families on family life satisfaction. In particular, this will analyze how family life satisfaction, which is caused by the reinforcement of health and psychological capital for women from multicultural families affect psychological well-being as a result.

2. Theoretical Relational Model and Research Hypothesis

In this study, the following research hypothesis was set up in order to explain the structural relationship model between each variable to be identified based on the results of previous studies and the relationship between individual variables accordingly.

2.1. Relationship between Psychological Capital and Family Life Satisfaction

In general, psychological health capital is a concept born in the process of applying positive psychology to organizational behavior. Accordingly, O'Driscoll, Pierce, Coglán(2006)[6] identified the characteristics of personal health that affect the attitudes and behaviors of organizational members. So far, studies on psychological health capital and family life satisfaction have been mainly conducted on organizational members, and studies that verify the direct relationship between psychological health capital and family life satisfaction are insufficient. However, it is reported that family life satisfaction is a concept with a very subjective and broad meaning. In this respect, it is judged that it is necessary to study the effects of health psychological capital and family life satisfaction of women in multicultural families.

O'Driscoll, Pierce, and Coglán (2006)[6] presented four factors, such as self-efficacy, hope, optimism, and resilience, as sub-elements of healthy and positive psychological capital, considering these positive psychological outcomes and conditions. In other words, psychological health capital refers to the sense of self-efficacy that each member of an organization can successfully perform a task in a healthy state, a hope that can be used as an opportunity to develop toward a goal or to achieve it even when faced with difficult tasks, and positive thinking in the present and future. A healthy and positive psychology composed of four sub-dimensions: optimism, which seeks to find the positive side without being frustrated even in the face of failure or failure, and resilience to endure and overcome problems for success in work when faced with problems or difficulties. I'd say it means status.

On the other hand, since consumers use different views, cognition and emotion, in the decision-making process, the perceived attribute dimension of a product and its performance may be different. In the situation where consumers choose products, product attribute dimensions are divided into practical attribute dimensions and hedonistic attribute dimensions according to their characteristics. The practical attribute dimension refers to the attribute related to the functional, instrumental, and cognitive aspects because it contains practical, rational, and essential aspects by helping to solve problems. On the other hand, the hedonistic attribute dimension refers to attributes related to psychological, experiential, and emotional aspects with characteristics such as aesthetic and sensory

experience or pleasure and joy.

Accordingly, it was found that the different product attribute dimensions showed different patterns in the level of customer satisfaction after purchase. According to previous studies, customer satisfaction is shown by a cognitive response and is close to a cognitive concept, and customer emotion is formed by an emotional response, so it is considered close to an emotional concept.

In addition, the needs model, which explains the relationship between customer satisfaction and customer satisfaction, breaks away from the limitations of existing studies that tried to explain customer satisfaction through the expectation-discordance model, and depends on whether the needs satisfied by consuming products are low-dimensional or high-dimensional. A new approach was presented to distinguish between customer satisfaction and customer satisfaction.

Until now, studies on health psychological capital and family life satisfaction have been mainly targeting organization members, and studies that verify the direct relationship between health psychological capital and family life satisfaction are insufficient. However, it is reported that family life satisfaction is a concept that is very subjective and has a wide range of meanings, and the satisfaction of psychological factors must precede it, and it is reported that it is affected by various variables. In this respect, it is considered necessary to study the psychological characteristics that influence the life satisfaction of women from multicultural families.

H1. Health psychological capital will have a significant positive (+) effect on family life satisfaction.

H1a. Confidence will have a significant positive (+) effect on family life satisfaction.

H1b. Hope will have a significant positive (+) effect on family life satisfaction.

H1c. Optimism will have a significant positive (+) effect on family life satisfaction.

H1d. Elasticity will have a significant positive (+) effect on family life satisfaction.

2.2 Relationship between Family life Satisfaction and Psychological well-being

A necessary factor for this is psychological well-being. Psychological happiness is an index that measures an individual's psychological state and can be said to be a subjective evaluation of life. This can be expressed as satisfaction and joy in life, and it can also be defined as a state of experiencing psychological stability and subjective well-being by turning back on one's life and recognizing that it is worthwhile and successful. The theoretical approach to psychological well-being can be summarized as follows.

First, from a bottom-up approach, happiness means a subjective state that appears by synthesizing both pleasant and painful times and experiences. This theory sees happy people as those who cherish many happy moments. This theory is based on the financial freedom obtained in life, the satisfaction of married life, and the living environment.

Second, the top-down approach originates from Kant's idealism, in that psychological well-being is determined by given characteristics. In other words, happiness is determined by the tendency to respond in a happy way rather than by the feeling of happiness itself. Levels of health, housing, and financial satisfaction are in part determined by these psychological well-being. In other words, it is argued that psychological well-being is essentially a tendency toward happiness rather than a happy emotion, whereas the position that emphasizes the situation argues that the more experiences of happy moments, the greater the psychological well-being.

Third, as an achievement approach, this model proposes a necessary condition or end goal for happiness. If happiness appears as a function of overall degree and satisfied wishes, then happiness can be maintained by reducing the number of wishes or satisfying many wishes. will be able

Fourth, as a judgmental approach, it is the position of explaining that happiness is determined by the comparison between the present condition and the standard condition, and it is argued that happiness is felt when the actual condition exceeds the standard. Therefore, psychological happiness refers to the emotion that governs the comprehensive evaluation of the present situation and life.

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As can be seen from such previous studies, Pleasant satisfaction in one's life is a driving force that leads to a positive psychological well-being in a psychological state, and is a prerequisite variable that positively affects a person's high quality of life.

Netz, Wu, Becker & Tenenbaum (2005)[13] found that in the study of quality of life through leisure activities, activities with family are not only the most effective way to increase life satisfaction and psychological well-being, but also cardiovascular relationship, muscle strength, and functional status. It was reported that these improve the overall feeling of happiness with the family. Therefore, in this study, the following hypothesis was established to explain the relationship between psychological capital and family life satisfaction perceived by women in multicultural families.

H2. Satisfaction with family life will have a positive effect on psychological happiness.

2.3 Relationship between Psychological Capital and Psychological Happiness

In general, it is judged that living a life accompanied by a high level of psychological health will be very easy to maintain a positive emotional state with a sense of psychological stability. Health psychological capital means that individuals can improve the outcome of a healthy life in their own lives by thinking positively and proactively through their psychological strengths in the environment in which they are located. In this regard, Snyder (2012)[14] pointed out that those with high level of hope of psychological capital can quickly return to a positive psychological state by regaining vitality even in a helpless state with high confidence in their tasks. In addition, in a study that verified the relationship between psychological capital and feelings of happiness, it was reported that psychological resources such as hope, optimism, and resilience were combined into psychological capital to increase feelings of happiness. In other words, women from multicultural families with high healthy psychological capital are

positive about life, and their feelings of happiness exceed general expectations. Therefore, it is thought that psychological capital can lead to a feeling of psychological happiness. In this study, the following hypothesis was set up to explain the relationship between psychological well-being and health and psychological capital perceived by women in multicultural families.

H3. Psychological health capital will have a significant positive (+) effect on psychological happiness.

H3a. Confidence will have a significant positive (+) effect on psychological happiness.

H3b. Hope will have a significant positive (+) effect on psychological happiness.

H3c. Optimism will have a significant positive (+) effect on psychological happiness.

H3d. Elasticity will have a significant positive (+) effect on psychological happiness.

Based on the hypothesis established by the relationship between the above concepts, the structural relationship was set as shown in Figure 1.

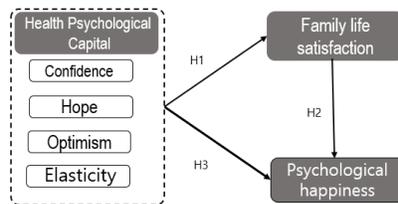


Fig. 1 Research Model

3. Research Method

3.1 Research Subject

The subjects of this study were women from multicultural families living in Gyeongsangbuk-do, Gyeongsangnam-do, Busan, and Ulsan. The survey was conducted in cooperation with the Multicultural Family Support Center, religious organizations, and private organizations that are running programs for women from multicultural families. The survey was conducted by self-filling methods from February 20 to March 19, 2021 by surveyors who received prior training. A total of 200 questionnaires were distributed by dividing 50 copies by region. Of these, 32 were judged to be insincere, and the final number of questionnaires used was 168. The general characteristics of specific study subjects are shown in Table 1.

Table 1. Sample profile (N=168)

Division		N	(%)	Division		N	(%)
Age	Under 30 years old	94	56.0%	Country of origin	China	65	38.7%
	31-40 years old	56	33.3%		Philippines	49	29.2%
	40 years old or older	18	10.7%		Vietnam	37	22.0%
Residential area	Gyeongsangbuk-do	53	31.5%	Income	Etc	17	10.1%
	Gyeongsangnam-do	68	40.5%		Have	29	17.3%
	Busan and Ulsan	47	28.0%		None	139	82.7%
Total=168(100.0%)							

3.2 Research Tools

This study used measures and control variables such as health and psychological capital (Confidence, Hope, Optimism, Elasticity), family life satisfaction, and psychological well-being of women from multicultural families. The questionnaire for health psychology capital was reorganized and used according to this study by the measurement tools suggested by O'Driscoll, Pierce, & Coglán (2006)[6]. Confidence consists of four questions based on belief in the motivation and actionable ability necessary to achieve a specific goal and purpose. Hope consists of four questions based on a plan for the goal and a positive will necessary to achieve the goal, and optimism is the future even in difficult and difficult situations. A total of 15 questions, including 4 questions, are used as a conviction that the environment will improve. The questions were evaluated with a five-point Likert scale ranging from 'Not at all (1 point)' to 'Very much (5 points)'. The Family Life Satisfaction Questionnaire consisted of a total of Four questions by reconstructing the Satisfaction with Life Scale (SWLS) consisting of four questions suggested by Lee & Kim [10] according to this study. The questionnaire was answerable with a five-point Likert scale ranging from 'Not at all (1 point)' to 'Very so (5 points)'. The Psychological Happiness Questionnaire was composed of three questions based on The Scale of Psychological Well-being of Tugade, Fredrickson, & Barrett (2004)[12]. The questionnaire was answered using a five-point Likert scale ranging from 'Not at all (1 point)' to 'Very much (5 points)'.

3.3 Data Processing Method

This study selects 168 samples and uses SPSS 20.0 to find out the demographic characteristics of the subjects. Reliability analysis using cronbach's α coefficient was also conducted. Next, using AMOS 20.0, convergent validity was verified through confirmatory factor analysis, and correlation analysis was

also performed to examine whether there was multicollinearity. In addition, the hypothesis was verified through structural equation model analysis.

4. Analysis

4.1 Reliability Analysis of Reliability Measurement Tools through Confirmatory Factor Analysis

The result of the confirmatory factor analysis of this study was according to the constituent concept. Significant statistical values were shown as $\chi^2(274)=522.219(p<.001)$. The probability of significance according to χ^2 of the measurement items used in this study is $\chi^2/df=2.118$, which is less than 3, so it can be considered suitable (Chungki Lee, 2017). The fitness index also meets the general criteria (Fornell, & Lacker, 1981): GFI = 0.898 (.08 or higher), NFI = 0.875 (.08 or higher), CFI = 0.9 (.09 or higher), TLI = 0.895 (.08 or more), RMSEA = 0.049 (.0 or less), and AGFI = 0.878 (.08 or more), and it is judged that the fitness index for the measured variables is good.

Table 2 . Confirmatory factor analysis and reliability analysis

Factor	Item	Factor loading	Non-Standardized estimate	Standardized estimate	A VE	CR	Cronbach's α
Confidence	My future is what I pioneered and decided		1	.847	.721	.801	.806
	I am an essential person in this society	.855(-) .839(21.311)***	.949	.829			
	Self-understanding of my faults	.844(22.001)*** .860(21.014)***	.1001 .1048	.895 .901			
	I have a clear goal to achieve						
Hope	Always striving for the best of my life	.830(-) .875(16.098)***	1 1.108	.842 .926	.771	.860	.859
	I think my goal will be achieved	.896(18.357)***	1.113	.933			
	Success and failure depend on	.908(23.107)***	1.118	.952			

	individual efforts						
	Life's hard work is rewarded						
	Don't blame others when things go wrong	.863(-)	1	.894			
Optimism	Misunderstanding will be cleared of unfair things	.880(24.240)***	.988	.883	.759	.888	.901
	A lot of fun things happen to me	.915(25.637)***	1.132	.962			
	Best until the end of what started	.860(-)	1	.882			
Elasticity	Don't give up on important things	.898(25.242)***	1.116	.934	.761	.911	.896
	I try to overcome	.860(22.967)***	.981	.882			
	Respond calmly to difficult tasks	.864(23.114)***	1.055	.906			
	Living near ideals						
	My life was very good living conditions	.709(-)	1	.850			
Family life satisfaction	Achieve the life I hope and want	.899(18.398)***	1.116	.934	.655	.722	.744
	I want to live like now even if I live again	.906(18.357)***	1.109	.940			
		.911(29.177)***	1.113	.944			
	Feeling comfortable in everything	.863(-)	1	.894			
Mental happiness		.880(24.240)***	.988	.883	.759	.888	.901
		.915(25.637)***	1.132	.962			

Feelings of joy
and emotions in
everyday life

Living a life full of
vitality

$\chi^2 = 522.219(df=274, p=.000), \chi^2/df = 2.118, GFI = 0.898, AGFI = .878, NFI = 0.875, CFI 0.901, TLI 0.895 RMSEA 0.049$

Note1. As: Action-based strategy, Ncs: Natural Compensation Strategy, Cts: Constructive thinking Strategy, Ds: Decision-Making Self-Efficacy, Cb: Career preparation behavior

Note2. ***p < .001

4.2 Correlation Analysis

In this study, correlation analysis was conducted to test the hypothesis. This suggests the strength of the relationship between the important variables used in all research hypotheses before conducting hypothesis testing, thereby providing a general outline between the variables. As a result of Pearson's correlation analysis, Table 3 showed that there was a correlation at all significant levels of $p < 0.01$. The relationship between the variables was found, and as a result, the relationship between each factor appeared in the same direction as the hypothesis that was set. This satisfies all the conditions that the correlation coefficient should appear less than 0.80, indicating that there is no problem with multicollinearity.

Table 3. Correlation Analysis

Factor	Mean (SD)	Confidence	Hope	Optimism	Elasticity	Family life satisfaction	Mental happiness
Confidence	3.353(.643)	1					
Hope	3.879(.524)	.392*	1				
Optimism	2.341(.761)	.266**	.343*	1			
Elasticity	3.955(.761)	.205**	.476**	.301**	1		
Family life satisfaction	3.766(.534)	.388**	.498**	.349*	.505**	1	
Mental	3.879(.524)	.205**	.476**	.301**	.266**	.343*	1

happiness						
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Table 4. Results of the Structural Model and tests of the Hypotheses

Hypothesis	Paths	Non-Standardized regression weights	Standardized regression weights	S.E	t-values	Result
<i>H1-a</i>	Confidence → Family life satisfaction	<i>.144</i>	<i>.120</i>	<i>.038</i>	<i>2.094**</i>	<i>supported</i>
<i>H1-b</i>	Hope → Family life satisfaction	<i>.512</i>	<i>.491</i>	<i>.077</i>	<i>5.063***</i>	<i>supported</i>
<i>H1-c</i>	Optimism → Family life satisfaction	<i>.289</i>	<i>.278</i>	<i>.035</i>	<i>3.425***</i>	<i>supported</i>
<i>H1-d</i>	Elasticity → Family life satisfaction	<i>.195</i>	<i>.180</i>	<i>.045</i>	<i>2.890***</i>	<i>supported</i>
<i>H2</i>	Family life satisfaction →Mental happiness	<i>.710</i>	<i>.691</i>	<i>.075</i>	<i>7.022***</i>	<i>supported</i>
<i>H3-a</i>	Confidence → Mental happiness	<i>.342</i>	<i>.333</i>	<i>.044</i>	<i>3.790***</i>	<i>supported</i>
<i>H3-b</i>	Hope → Mental happiness	<i>.195</i>	<i>.181</i>	<i>.045</i>	<i>2.798***</i>	<i>supported</i>
<i>H3-c</i>	Optimism → Mental happiness	<i>.342</i>	<i>.336</i>	<i>.044</i>	<i>3.899***</i>	<i>supported</i>
<i>H3-d</i>	Elasticity → Mental happiness	<i>.040</i>	<i>.020</i>	<i>.033</i>	<i>0.775</i>	<i>Not supported</i>

Note: *** : p<.001, ** : p<.01

Note 1. Goodness of fit statistics: $\chi^2(285) = 549.850***$, $\chi^2/df = 2.799$, RMSEA = .075, GFI = .876, AGFI = .859, CFI = .890, NFI = .897, TLI = .875,

Note 2. a = Significance of indirect effect is bootstrapping for the bias-corrected percentile method,

Note 3. * $p < .05$, ** $p < .01$, *** $p < .001$.

s4.3 Structural Model Analysis

Structural model analysis was conducted to verify the hypothesis established in this study, and the fit (Table 4) of the structural model was $\chi^2/df=2.799$, RMSEA=.075, CFI=.890, NFI=.897, TLI=.875, GFI=.876, and AGFI=.859, thus, the conformity index of the structural model was generally good. In particular, the results of the verification of the causal relationship between the constituent concepts are as follows.

First, there is a significant positive (+) influence relationship between women's health and psychological capital()

and family life satisfaction ($\gamma_{\text{Confidence} \rightarrow \text{Family life satisfaction}} = .120, t=2.094, p < .01$), ($\gamma_{\text{Hope} \rightarrow \text{Family life satisfaction}} = .491, t=5.063, p < .001$), ($\gamma_{\text{Optimism} \rightarrow \text{Family life satisfaction}} = .278, t=3.425, p < .001$), ($\gamma_{\text{Elasticity} \rightarrow \text{Family life satisfaction}} = .180, t=2.890, p < .001$), showing support results for H 1-a, H 1-b, H 1-c, and H 1-d.

Second, in the relationship between family life satisfaction and mental happiness of women in multicultural families, a significant positive (+) influence relationship ($\gamma_{\text{Family life satisfaction} \rightarrow \text{Mental happiness}} = .691, t=7.022, p < .001$) appears.

Third, there is a significant positive (+) influence relationship between women's health and psychological capital (confidence, hope, optimism, elasticity) and mental happiness of women from multicultural families ($\gamma_{\text{Confidence} \rightarrow \text{Mental happiness}} = .333, t=3.790, p < .001$), ($\gamma_{\text{Hope} \rightarrow \text{Mental happiness}} = .181, t=2.798, p < .001$), ($\gamma_{\text{Optimism} \rightarrow \text{Mental happiness}} = .336, t=3.899, p < .001$), showing support for H3-a, H3-b, and H3-c

5. Conclusion and Implications

This study analyzed the relationship between psychological health capital, family life satisfaction, and psychological well-being of women in multicultural families. The implications of the study results are as follows.

First, it was verified that the psychological health capital (confidence, hope, optimism, resilience) of women in multicultural families had a positive (+) effect on family life satisfaction. Hypotheses H1-a, H1-b, H1-c, and H1-d were adopted as a result of this test.

Second, it was verified that the family life satisfaction of women in multicultural families had a positive (+) effect on psychological well-being. Hypothesis H2 was thus accepted. These results indicate that the family life satisfaction of women in multicultural families has a positive correlation with psychological happiness. In addition, it can be interpreted that the higher the level of satisfaction with family life, the higher the psychological well-being of women in multicultural families with favorable feelings for the life they live.

Commented [ABM1]: lowercase

Third, it was verified that self-confidence, hope, optimism, and resilience, which are the components of health psychological capital perceived by women in multicultural families, have a positive (+) effect on psychological well-being. In this hypothesis test, since confidence, hope, and optimism suggest a positive influence on psychological well-being, the hypotheses H1-a, H1-b, and H1-c were adopted. However, resilience did not present a positive (+) influence relationship on psychological well-being, so H1-d was rejected.

Overall, as a result of examining the hypothesis that health psychological capital has on psychological well-being, it can be seen that it was partially adopted. These results mean that women from multicultural families can improve their psychological well-being if they maintain a positive and healthy psychological state through healthy mental activities. In other words, the formation of healthy psychological capital that does not lose confidence, hope, and optimism even in difficult situations can bring healthy psychological happiness to women from multicultural families. These support the findings of Synder (2012)[9], which argued that the hope of health and psychological capital improves family life satisfaction because it motivates and enhances mental energy at the stage of achieving and pursuing a goal.

Therefore, in the current situation in which social prejudice against linguistic isolation and ageism experienced by women from multicultural families is fixed and internalized, the reinforcement of healthy psychological capital through health psychological capital improves the quality of life of women from multicultural families. It is believed to be able to play a role of letting go. Accordingly, it is necessary to actively induce comprehensive services such as provision of information, education, and development of various sports and lifestyle programs to induce social participation to women from multicultural families by linking each community-based network and services. Thus in order to promote the health and psychological capital of women from multicultural families to effectively increase family life satisfaction and psychological well-being, it is considered that in-depth discussions should be made through continuous research related to the search for ways to redefine the roles and functions of women from multicultural families. Finally, limitations for follow-up studies are suggested as follows. This study only listed the simple demographic characteristics of women from multicultural families, and did not analyze differences accordingly. Therefore, it is necessary to conduct a difference analysis according to various demographic characteristics in the future

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