Dimensions of Social Well-being and Determinants in Korea: Personal, Relational, and Societal Aspects

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Abstract: This paper constructs a social well-being indicator and empirically examines how social well-being is distributed across the population in Korea. We also investigate which factors are likely to contribute to higher social well-being. After reviewing previous research, we figure out that social well-being consists of three dimensions; personal, relational, and societal, and a balance between individual resources and life events or challenges people face can impact the level of social well-being. We emphasize conditional factors of social quality, such as social cohesion, socio-economic security, social inclusion, and empowerment, play critical role in the perception of social well-being. The results confirm that life experiences in the social environment contribute to the level of social well-being. Trust gap, risk experiences, and discrimination experiences, which reflect low level of social cohesion, socio-economic security, and social inclusion respectively, reduce social well-being significantly. On the other hand, experiences of community participation, which show high level of social empowerment, raise well-being level substantially. What is noticeable is that those stressful life experiences are heavily concentrated on those who don't have enough resources to cope with. The vulnerable in terms of social well-being are those who are deprived in multiple ways. They have lack of money, lack of education, no job, and lack of social network. Therefore, policy intervention needs to target those vulnerable individuals preferentially and to enhance their social well-being by maximizing their psychological and social resources as well as economic resources.

Keywords: social well-being, the vulnerable, social quality, cohesion, security, inclusion, empowerment

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[date of submission: August 3, 2016] [date of acceptance: August 4, 2016]

1. Introduction

The concept of 'well-being' has in recent years been recognized as an alternative to GDP which captures the level of societal progress and the living condition of individuals. Concomitantly, the number of well-being indicators have been produced and used as an important complement for policy makers to assess the effect of public policy.

Current interest in well-being has been derived from a series of empirical findings. Evidence, known as the 'Easterlin paradox', showed that individual well-being did not necessarily rise with economic growth. Korea is one of the striking examples of this paradox. Between 1990 and 2010, GDP per capita increased by three times (6,505$ in 1990, 22,170$ in 2010), but overall satisfaction of life fell from 61.1% to 57.0% (WVS, each year). While GDP per capita ranking continues to go up, happiness index ranking of Korea tends to go down. It questioned the widespread assumption that economic prosperity will increase utility and result in the increase in the level of happiness and life satisfaction. This evidence has made researchers and policy makers aware of that exclusive reliance on economic indicators such as GDP might not be adequate to show how good people's lives were.

After that, a growing body of research contributed to a more elaborated understanding of well-being. Although how well-being should be defined is still debatable, increasing number of researchers seem to agree on that well-being should be considered as a multidimensional concept encompassing various aspects of human life beyond material condition. It is based on reasonable doubts that a single, catch-all measure such as happiness or life satisfaction, or GDP may not represent enough all the aspects of good life. This led to search for constituents of well-being and produced an endless list of well-being components in a simple additive equation. The OECD Better Life Initiative, for instance, identifies 11 well-being dimensions consisting of 24 indicators.

The multidimensionality of well-being, however, should not simply be regarded as the sum or combination of different dimensions of life, such as health, job, income, safety, education, etc. It is partly due to the fact that additive equation assumes there can be trade-offs among the different well-being dimensions. For instance, high income could be compensated for poor health in additive aggregation. Although it is unavoidable to have a certain degree of substitutability, the relation among its dimensions need to be complementary one another. It means that the effect of each dimension on individuals' well-being should be enhanced by the presence of any other dimension. Therefore, careful consideration should be given to the linkages between different components or domains of well-being.

In addition, well-being needs to be thought of as a dynamic social process, emerging from the way in which people interact with the world around them. The individual may not be regarded as a separate entity split off from social circumstances. To live a good life can be pursued in socially acceptable ways with relation to other persons in a society. As Kitayama and Markus (2000: 115) point out, "Well-being then is very much a collaborative project, one can't experience well-being by one's self; it requires engaging a system of consensual understandings and practices and depends on the nature of one's connections and relations to others." Thus, by

focusing solely on individual level components, we may ignore the fact that how good our lives are depends on the way we live and on the characteristics of society we live in. In this respect, it is important to consider 'the social' seriously.

Social well-being emphasizes the importance of interpersonal and societal-level experiences and behaviors. By adding 'social' to well-being, we focus on the relational nature of individuals' everyday life and interaction with institutional and normative aspects of a society. Thus, social aspects of well-being require to reveal the quality of social relations and the quality of society.

There are number of studies to give attention to the quality of relationship as an important element to increase individual well-being. Helliwell (2003), for example, shows that the degree of connectedness has a positive effect on subjective well-being of individuals. The analysis done by Fowler and Christakis (2008) also exhibits that well-connected individuals are happier and have a stronger impact on the society than others. Their analysis suggests that how individuals are connected may provide important information for the intersection of individual well-being and societal progress. Vaillant (2012), who participated in one of the longest and comprehensive studies, known as the Harvard Grant Study, discloses "… 70 years of evidence that our relationships with other people matter, and matter more than anything else in the world".

Quality of society, also, matters for the quality of individual life. Well-functioning society provides favorable environments for people's quality life and encourages individual actions and interactions with other persons. Various forms of institutions and social norms in a well-functioning society enhance the calculability and predictability in people's interaction with the world and the sustainability of society. A large body of evidence has proven that the individual well-being significantly differs depending on the society's institutional context, including government quality, size of social protection expenditure, and resource distribution.

Social well-being measures, hence, require to combine the perception of individuals on micro and macro levels as well as to integrate objective conditions with subjective perceptions, or material conditions with non-material conditions. In this respect, we think that in order for measuring social well-being, it is necessary to capture 1) how people feel about their own lives, 2) how they feel about people around them, and 3) how they feel about the society they live in.

This paper aims to construct a social well-being indicator and empirically examine how social well-being is distributed across the population. We particularly focus on the vulnerable individuals within society. It is because they might benefit most from interventions designed to increase social well-being. We think the improvement of social well-being of people who are most vulnerable is more effective to improve social well-being of a society. We also investigate which factors are most likely to contribute to higher social well-being.

The remainder of the paper is structured as follows. In the next section, we review various models of well-being and attempt to draw a model for social well-being. In section three, we describe the data and the way of measuring and operationalizing the variables we utilize. We then present the results. We finish with a discussion of the results and implications.

2. Literature Review

2.1. Previous researches on well-being

Subjective Well-being Models

Headey & Wearing's (1991) stocks and flows framework defines well-being as depending on prior equilibrium levels of well-being and of life events, and also on recent events (1992, p. 95). This reflects their framework for analyzing subjective well-being (SWB), which considers the relationship between stocks and flows: They proposed that differences between individuals in terms of SWB are due to 'stable stocks' (otherwise known as stable personal characteristics). As a result of stable stocks each person has a level of subjective well-being which represents his/ her own normal equilibrium level (1991, p. 57). Stocks are drawn upon to deal with specific life experiences ('flows') so that satisfaction is enhanced and distress is diminished. Consequently, it is more appropriate to regard subjective well-being as a fluctuating state rather than a stable trait (p. 56).

In his paper, "Subjective Well-being, Homeostatically Protected Mood and Depression: A Synthesis," Cummins (2010) proposes that subjective well-being is managed by a system of psychological devices which have evolved for this purpose. It is proposed that this management is actually directed at the protection of Homeostatically Protected Mood, as the major component of SWB. We normally experience HPMood as a combination of contentment, happiness and positive arousal. A theoretical description of this construct is offered that can account for many of the commonly observed empirical characteristics of SWB data. It is further proposed that when homeostasis fails, due to the overwhelming nature of a negative challenge, people lose
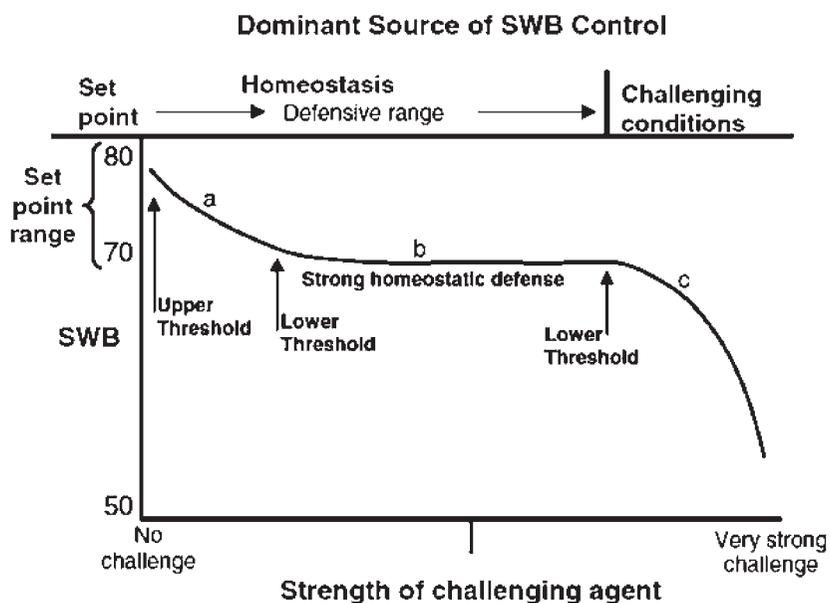

Figure 1 Changing levels of SWB as homeostasis is challenged

contact with HPMood and experience the domination of negative rather than positive affect. If this condition is chronic, people experience the clinical condition we call depression.

When an individual experiences no challenge, SWB stays at the set-point. When an individual experiences mild challenge, the level of SWB will vary slightly within the set-point range (Phase a). Phase b signifies where SWB is prevented from decreasing below the set point, due to the strong homeostatic defense. Phase c signifies a situation where the challenge is too strong for homeostasis to manage. SWB would now fall sharply.

Dodge *et al* discuss the challenge of defining well-being (Dodge et al, 2012). By highlighting the pertinence of dynamic equilibrium theory of well-being (Headey & Wearing, 1989), the effect of life challenges on homeostasis (Cummins, 2010), and the lifespan model of development (Hendry & Kloep, 2002), they concluded that it would be appropriate for a new definition of well-being to center on a state of equilibrium or balance that can be affected by life events or challenges. According to their theory, stable well-being is achieved when individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or physical challenge. When individuals have more challenges than resources, the see-saw dips, along with their well-being, and vice-versa. This definition conveys the multi-faceted nature of well-being and can help individuals and policy makers move forward in their understanding of this popular term.

All these approaches to well-being can be summarized and generalized as salutogenesis. The word "salutogenesis" comes from the Latin *salus* (= health) and the Greek *genesis* (= origin). Antonovsky developed the term from his studies of "how people manage stress and stay well."[1] In salutogenic theory, people continually battle with the effects of hardship. These
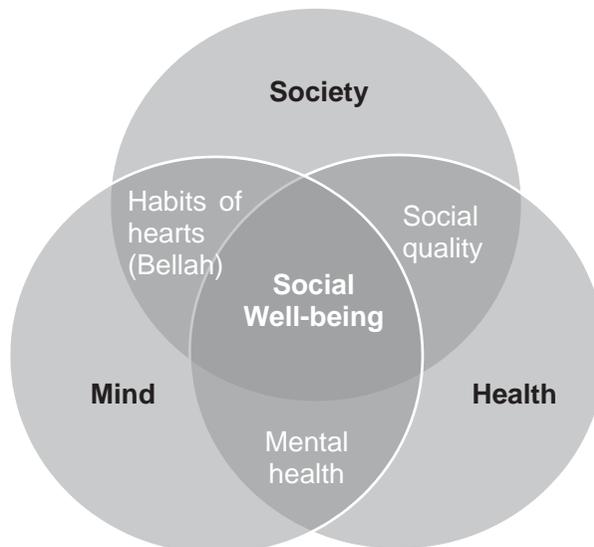

Figure 2 Components of Social Well-being

[1] http://www.salutogenesis.net/

general and ubiquitous forces are conceptualized as generalized resource deficits (GRDs). To deal with these hardships, there are generalized resistance resources (GRRs). These resources include all of the resources that help a person to cope, avoiding or combat against psychosocial stressors. Examples are resources such as money, ego-strength, and social support. It is the balance between GRDs and GRRs that determines whether a factor will be pathogenic, neutral, or salutary. Antonovsky argues that "sense of coherence" is central for the explanation of the role of stress in human functioning.[2]

Social Well-being Models
Classical sociologists, such as Durkheim and Marx, were interested in social health. Durkheim thought social health can be measured by concepts such as social integration, cohesion, belongingness, collective identity. Following this tradition, Keyes (1998) defined that social well-being as the appraisal of one's circumstance and functioning in society: He proposed to measure social integration as the evaluation of the quality of one's relationship to society and community; Social contribution as the evaluation of one's social value; Social actualization as the evaluation of the potential and the trajectory of society; Social coherence as the perception of the quality, organization, and operation of the social world; Social acceptance as the treatment of others through a generalized category.

Well-being is often vaguely conceptualized (Carlisle, Henderson and Hanlon, 2009) within a community or society. Social well-being is a holistic conception of what is necessary for people and communities to experience positive life trajectories. It assumes that individual well-being is most likely to occur when there is an environment or social ecology that includes multiple supports, protections, resources and opportunities.[3] From this perspective, specific problems should not be viewed in isolation, but in context. Social well-being is composed of three different elements: society, psychology, and health. Each element, once combined bilaterally, became a productive research field.

Mental health refers to a broad array of activities directly or indirectly related to the mental well-being component included in the WHO's definition of health. It is related to the promotion of well-being, the prevention of mental disorders, and the treatment and rehabilitation of people affected by mental disorders. Psychiatry has focused on mental disorder and mental well-being. Social psychiatry combines a medical training and perspective with fields such as social anthropology, social psychology, cultural psychiatry, sociology and other disciplines relating to mental distress and disorder.

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[2] In his formulation, the sense of coherence has three components: 1) Comprehensibility, a belief that things happen in an orderly and predictable fashion and a sense that you can understand events in your life and reasonably predict what will happen in the future; 2) Manageability, a belief that you have the skills or ability, the support, the help, or the resources necessary to take care of things, and that things are manageable and within your control; 3) Meaningfulness, a belief that things in life are interesting and a source of satisfaction, that things are really worthwhile and that there is good reason or purpose to care about what happens. According to Antonovsky, the sense of coherence predicts positive health outcomes.

[3] http://publichealth.gwu.edu/projects/center-social-well-being

There were also efforts to read the mindset of the people in more generalized terms. Some sociologists focus on the role of "hearts". Robert Bellah published *Habits of the Heart*, where he analyzed the dominant value system of Americans from individualism. The title is from Alexis de Tocqueville, author of *Democracy in America*, who discovered habits of the heart, such as family life, religious convictions and participation in local politics, as helping to form the unique American character. Bellah argues that De Tocqueville was all too prophetic: "We are concerned that this individualism may have grown cancerous--that it may be destroying those social integuments that De Tocqueville saw as moderating its more destructive potentialities, that it may be threatening the survival of freedom itself." He is concerned about how to preserve or create a morally coherent life. He introduces interesting concepts, such as "the moral ecology," "the web of moral understandings and commitments that tie people together in community" and of the urgent need for a transformation of the society. Kim Hong Jung (2014) operationalizes the concept of heart as 'the source of cognitive, emotional, volitional agency, which generates social practices. He argues that the heart is psychic agency and simultaneously a social fact by positing positivity, extimacy, and perfomativity of the heart. Sociology of the heart, in his view, is expected to function as an important part of sociology of culture, and as a program for various empirical researches.

Increasing shifts in health and social policy to encompass the promotion of health and well-being, have occurred during periods of both neoliberalism (or economic rationalism) and a 'crisis of legitimation' in Habermasian term. Social quality (SQ) is a comprehensive concept of the quality of people's daily lives. Instead of GDP which measures "the economy" in narrow sense, SQ is more concerned about "the social" in broader context. Originally 'social quality' was defined as "the extent to which people are able to participate in the social, economic and cultural life of their communities under conditions which enhance their well-being and individual potential" (Beck et al., 1997; 2001). As a measure of society-level quality, SQ has certain advantages and shortcomings at the same time.

Ward and Meyer (2009) argues that well-being is similar to what has been termed 'happiness-plus-meaningfulness' (Seligman, Parks and Steen, 2005). In their view, the Social Quality theory is in and of itself, a salutogenic approach to understanding health and well-being. The current Social Quality theory addresses the inherent relationships between the social conditional factors and related systems that impact on well-being of individuals.

There is a great deal of literature which argues the importance of trust for the well-being and health of society. Especially, the erosion of both interpersonal trust and institutional trust in a number of countries, as well as widening trust gap between close alters and remote strangers contribute to the worsening of the social quality and declining well-being. In this sense, social theory of trust is essential in order to 'bridge' the divides between individuals-systems and systems-life world. Why Social Quality is important in explaining social well-being?

First of all, SQ is a powerful alternative to GDP and extends the measure to the societal progress. Contrary to Quality of Life tradition, SQ is a theoretically articulated concept: SQ is defined as a function of the constant tension between individual self-realization and participation

in the various collective identities that constitute everyday life (micro and macro world), and between the world of organizations and the one comprising informal relationships (system and life world). Four constitutional factors in combination open up the possibility for social quality: protection for humane life (or safety), social recognition (or respect); the rule of law, human rights and social justice; social responsiveness (the openness of society); and the individual's own capacity to engage. Once constituted, four conditional factors determine the opportunities for the achievement of social quality. Social structures may be more or less enabling and supportive (social empowerment); institutions and groups may be more or less accessible (social inclusion); people will have variable access to the material, environmental and other resources necessary for participation (socio-economic security); and their society and communities will be characterized by different forms and levels of cohesion (social cohesion) (van der Maesen and Walker 2001; van der Maesen, Walker, and Keiger 2005).

It is assumed that these four "conditional" factors, derived from theoretical construction, can be measured by indicators and then combined into a composite index of social quality. Though it is a theoretically rigorous construction, it is too complicated to operationalize into empirical indices. Following the theoretical tradition as suggested by Habermas, we propose that Social Quality of a country can be measured in two main domains, i.e., system and life-world (Habermas 1984, 1987). System aspect of Social Quality is closely related with risk governance, and life-world level interaction among individuals is constrained by and contributes to the "societal moral resource."

It is very important to note that risk is not confined to the traditional types such as natural disasters and illness. Anything which threatens the well-being of people can be interpreted as risks (Beck 1992, 1999; Taylor-Gooby 1999, 2004). Risk governance system is closely related with the institutional arrangement by the government as well as market and informal networks, to provide people enough resilience to social and economic risks created by the working of the economy and by other causes (Holzmann, Sherburne-Benz, and Tesliuc 2003). Without risk governance system, many people excluded from the labor market will directly confront the shock caused by diverse social risks, such as unemployment, poverty, social isolation, discrimination, and victimization to crime without any safety net. People can accumulate resilience to social risks by maintaining their jobs, and by enhancing their human capital through education. Therefore, there will be two different types of risk governance either by education and provision of jobs on the one hand (enhancing resilience), and providing public assistance and covering pension schemes on the other hand (providing safety net).

"Societal moral resource" is the socially constructed element of social quality, and it is composed of social capital and perceived democratic process that empowers people and thus harbors active participation. The most important aspect of social capital lies in the predictability of social rules and transparency of the society. When people think that rules are respected without exception, legitimacy of the system is enhanced. When people think democracy is working, they will be encouraged to participate in elections and other political events to determine their own fate.

These measures of SQ can be measured at the societal level as well as at individual level. To be completely an ideal measure, it must be measured at both the macro level, and at the micro-individual level, and multiple countries should be compared at multiple levels. Yet the SWB data allows only at the individual level, so all SQ measures are indicators reflecting perceptions of the respondents.

National accounting of well-being(NAWB)[4] is a new way of assessing societal progress. By explicitly capturing how people feel and experience their lives, NAWB helps to redefine the notions of national progress, success and what we value as a society. By capturing population well-being across areas of traditional policy-making, and looking beyond narrow, efficiency-driven economic indicators, NAWB provides policy-makers with a better chance of understanding the real impact of their decisions on people's lives. By resonating with what people care about, NAWB provides opportunities for national governments to reconnect with their citizens and, in doing so, to address the "democratic deficit" now facing many European nations.

From the review of previous researches, we find that well-being is more than a life satisfaction. First, to understand subjective well-being as a multifaceted experience, we need dynamic combination of different factors. Second, there are different dimensions of well-being in addition to personal level. Relational and Social dimensions of well-being is to be considered for the measurement. Third, previous research shows that in addition to the feelings and subjective happiness, there is a growing recognition of 'mental capital' as a key component of well-being. Psychological resources such as resilience, should also be included in future research to measure for this component of well-being.

2.2. Concept of Social Well-being and its Determinants

We define social well-being as a combination of the perception of individual life conditions, their quality of relationship with others, and the conditions of society they live in. It consists of three dimensions: personal, relational and societal well-being. Personal well-being denotes a positive evaluation about life overall. Relational well-being means people have quality relationship with others and have developed favorable attitudes toward others. Societal well-being indicates the quality of institutions, positive judgement of functioning of a society, and hopeful views of the society's progress. Social well-being will be higher where well-connected individuals living in a well-functioning society have a feeling of satisfaction with their lives.

Social quality is important to social well-being in that it forms the (perceived) conditions of society where people as a social being interacts one another. As the social quality framework suggests, a decent society requires four conditional factors: socio-economic security, social cohesion, social inclusion, and social empowerment. People have experience on how well these factors are functioning in their everyday lives. These specific life experiences constitute social well-being.

As previous subjective well-being models suggest, we assume that the manageability of specific life events and experiences people are facing with depends on individual's resources. If

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[4] http://www.nationalaccountsofwell-being.org/

the resources they hold are not defensible enough to various life challenges, social well-being may fall. We, therefore, build a model that life events or experiences corresponding to four conditional factors of social quality may be considered as important contributors to the state of social well-being. Those life experiences we select are trust gap, risk experience, discrimination experience, and community participation. Each contributor indicates social cohesion, socio-economic security, social inclusion, and social empowerment respectively.

3. Research Method

3.1. Data

Our analysis is based on the Korean data of "International Comparative Survey on Lifestyle and Value (ICSLV)" The data collection was supported by the MEXT-Supported Program for the Strategic Research Foundation at Private Universities of Japan, 2014-2018 (S1491003). "International Comparative Surveys on Lifestyle and Values" were designed and conducted by the Center for Social Well-being Studies, Institute for the Development of Social Intelligence, Senshu University, Japan, in collaboration with Social Well-being Research Consortium in Asia. ICSLV is conducted to search lifestyle and values related to social well-being of Asian countries. The data we used is surveyed in Korea using web-panel (for detailed explanation of the survey method and characteristics, see Yee et al. 2016). This web-panel includes 2,000 respondents

Table 1 Descriptive statistics of the data

		Case	%
Total		2000	100
Gender	Male	1018	50.9
	Female	982	49.1
Age	20s	366	18.3
	30s	428	21.4
	40s	490	24.5
	50s	454	22.7
	60s	262	13.1
Marital status	Married	1264	63.2
	Single	621	31.1
	Divorced/widowed	115	5.8
Education	High school and below	344	17.2
	Over high school (College, University etc.)	1656	82.8
Personal monthly income decile number	1st decile group (0~990,000won)	440	22
	2nd~5th decile group (1,000,000~1,990,000won)	400	20
	6th~8th decile group (2,000,000~2,990,000won)	396	19.8
	9th~10th decile group (3,000,000won and over)	764	38.2
Household monthly income decile number	1st~5th decile group(0~1,990,000won)	190	9.5
	6th ~7th decile group(2,000,000~2,990,000won)	274	13.7
	8th~9th decile group(3,000,000~3,990,000won)	334	16.7
	10th decile group(4,000,000won and over)	1202	60.1

who are regarded as a representing sample group of the Korean society. Descriptive statistics for demographic and socio-economic characteristic of the data are provided in Table 1.

3.2. Measures

Measuring social well-being

As mentioned above, social well-being consists of three dimensions of well-being; personal, relational, and social. We measure the level of personal well-being with overall life satisfaction question. Life satisfaction has long been regarded as a crucial component of subjective well-being measures. Happiness has also been considered as an appropriate measure, too. Two measures, however, are different in that while happiness is likely to reveal emotional nature of well-being, life satisfaction tends to demonstrate a cognitive element of well-being. Although happiness and life satisfaction can be used interchangeably, we choose life satisfaction as a basic indicator of personal well-being. It is partly because life satisfaction is more likely to be sensitive to the changes of personal and social circumstances. Personal well-being is measured by respondents' rate of their satisfaction on current life overall on a scale from 0(very unsatisfied) to 10(very satisfied).

Three variables are used to measure relational well-being: the degree of trust in general others, the frequency of contact with close others, and satisfaction with their relationships. For relational well-being, we intend to grasp the quantitative and qualitative aspects of intimate relationships and positive attitude towards general relationship. Societal well-being is measured by confidence in institutions, the evaluation of current situations regarding equal opportunities, fair competition, and inclusiveness in society. We also add the prospect on society's progress regarding income equality to societal well-being measure.

In order to produce each well-being indicator scores, we follow three stages of process: standardizing, aggregating, and transforming. Since component variables of each well-being are measured in different units and on different scales, we standardize each variable into z-score so that each score expresses the same terms, which is the distance from the mean. Once the scores for individual questions are standardized, they are aggregated by taking the unweighted mean of the z-scores. We then transform the aggregated scores onto 0-10 scales, where 0 is the minimum and 10 is the maximum. Table 2 shows the original survey questions, the way of aggregation and descriptive statistics.

Table 2 Components of social well-being index and descriptive statistics

Domain	Components	Survey Question	Mean	SD.	Min.	Max
Personal Well-Being	Satisfaction on Current Life Overall	W2. How satisfied are you currently with the following? - Current Life Overall	5.70	2.09	0	10
Relational Well-Being	Contact Frequency	C2. How often do you interact with the following people? - Relatives (c021) - Friends and acquaintances outside school or work (c022)	2.94	0.65	1	5
	Subjective Quality of Relation	W2. How satisfied are you currently with the following? - Family life (w0205) - Relationships with friends and acquaintances (w0207)	6.39	1.88	0	10
	Trust on General People	C1. To what degree do you feel you can trust or not trust "Most people"?	2.81	0.69	1	5
Societal Well-Being	Fair Competition	W5. How do you agree to the following statements on current Korean society? a. Competition for achieving high status and income is fair	4.38	2.53	0	10
	Equal Opportunity	W5. How do you agree to the following statements on current Korean society? b. Opportunities for university education are equally available to all regardless of wealth disparity	4.24	2.57	0	10
	Inclusive Society	W5. How do you agree to the following statements on current Korean society? c. The disabled can be socially active, regardless of their degree of disability	3.74	2.55	0	10
	Positive View on Society's Progress	W5. How do you agree to the following statements on current Korean society? d. The income gap is currently too big (w054, reversed) e. The income gap will likely be greater in 10 years (w055, reversed)	1.87	2.02	0	10
	Institutional Trust	C1. To what degree do you feel you can trust or not trust the following people? Government; Assembly; The judiciary; Local government; Armed forces; Political party; Trade union; NGOs; The press	2.19	0.62	1	5

Table 3 displays distribution of each well-being indicators and descriptive statistics.

Table 3 Descriptive statistics of the dependent variables

	Personal Well-being	Relational Well-being	Societal Well-being	Social Well-being
Cases	2000	2000	2000	2000
Mean	5.70	5.21	4.99	5.46
Std. Deviation	2.09	1.27	1.78	1.34
Minimum	0	0	0	0
Maximum	10	10	10	10
Distribution Graph				

Determinant variables

Our research assumes that trust gap, risk experience, discrimination experience, and community participation would give effects on different well-being indicators.

As many researchers point out, social trust plays an important role in bonding and bridging social relations and contributes to cohesiveness of society. Social trust can be classified by two types: trust for in-group and trust for out-group. In-group trust credits trust to people who are close to respondents such as family, relatives, friends and acquaintance. Out-group trust credits trust to people who are relatively distant such as neighbor, strange, or "most people (generalized others)". While researches have examined that in-group trust and out-group trust are correlated positively, at the same time, these two variables are distinct in conceptual dimension. A recent research of Welzel and Delhey (2015) has found that there is transcendent out-group trust related to human emancipation factor after controlling the in-group trust even though there is significant correlation between in-group and out-group trust. Therefore, in our research, we focus on trust gap rather than in-group and out-group trust. We use in-group trust level variable as anchoring vignettes to adjust scale difference in trust gap. In-group trust and out-group trust is measured by 1(cannot trust at all) to 5(can trust a lot) scale and calculated for mean value. Trust gap is calculated by subtraction of in-group trust and out-group trust.

Risk experience variable is measured by the number of different sources of risks respondents have experienced. Nine sources of risks are presented to the respondents including poverty, traffic accidents, crime, and war. We focus on recent risk experiences. We count the number of risks experienced by respondent in less than 5 years ago (response category 4 and 5) to measure the extent of risk exposure. In order to normalize the skewed distribution, we recode

Table 4 Independent variables

Conditional factors	Variable	Measure	Sub-Indicator	Survey Question

Cohesion	**In-group Trust**	Mean value of z-scores of sub-indicators	Trust on family and relatives, Truts on friends and acquaintances	C1. To what degree do you feel you can trust or not trust the following people?
				  - Family and relatives (c012)
				  - Friends and acquaintances (c014)

	Trust Gap	Subtracted value: (In-group trust) - (Out-group trust)	In-group trust (Mean value)	C1. To what degree do you feel you can trust or not trust the following people?
				  - Family and relatives (c012)
				  - Friends and acquaintances (c014)

			Out-group trust (Mean value)	C1. To what degree do you feel you can trust or not trust the following people?
				  - Most people (c011)
				  - Neighbors (c013)
				  - Strangers (c016)

Security	**Risk Experience**	Total number of types of risk experiences	Experiences of various types of risks	R1. When did your household experience the following things latest?
				  - Threatened livelihood due to unemployment or low income of household members (r011)
				  - Threatened livelihood due to unemployment or low income due to illness or injury of household (r012)
				  - Food insecurity (r013)
				  - Threatened access to safe water (r014)
				  - Threatened life due to poor means of transportation or road conditions, traffic accidents (r015)
				  - War or armed conflict (r016)
				  - Political oppression, denying of human rights (r017)
				  - Someone in your household got involved in a crime (r018)
				  - Someone in your household been a victim of corruption such as demanded a bribe from civil servants (r019)

Inclusion	**Discrimination Experience**	Total number of types of experiences of discrimanation	Experiences of various types of discrimination	W4. How do you think the following attributes or attainments of yourself have given you an advantage or a disadvantage in your life?
				  - Gender (w0401)
				  - Age (w0402)
				  - Educational background (w0403)
				  - Occupation (w0404)
				  - Income (w0405)
				  - Assets (w0406)
				  - Family background (w0407)
				  - Race, ethnicity, or nationality (w0408)
				  - Area of residence (w0409)
				  - Region of origin (w0410)
				  - Religion (w0411)

Empowerment	**Community Participation**	Total number of types of community participation	Activities in various types of communities	C4. In the past year, how active were you in the following neighborhood activities?
				  - Sports, hobbies, leisure activities (c041)
				  - Community development (c042)
				  - Elderly support (c043)
				  - Childcare support (c044)
				  - Crime prevention (c045)
				  - Disaster prevention (c046)
				  - Neighborhood association's activities (c047)

the variable by degree 0(no experience of risk at all) to 3(more than 3 sources of risks have experienced).

Discrimination experience variable is measured in the same way risk experience is measured. Respondents are asked "How do you think the following attributes or attainments of yourself have given you an advantage or a disadvantage in your life so far?" and 11 forms of discriminations are presented. These are gender, age, education background, occupation, income, assets, family background, race·ethnicity, or nationality, area of residence, region of origin, and religion. We count the number of responses choosing 0~3 categories on 11-point scale (0-very disadvantageous; 10-very advantageous) for each respondent. The total number of discriminated experiences is calculated and entered in the research model.

Participation in community activities is measured by number of types of community activity such as elderly support, childcare support, and crime prevention. We count the number of response choosing at least several times a year (response category 3~5). Maximum number of participations is seven. The detail measurement logics of determinant variables are presented in Table 4.

Lastly, several demographic and socio-economic variables are entered as control variables. These are age, gender, education, working status, and household income per person.

4. Results

4.1. Distribution of social well-being

The mean score of social well-being is 5.46 with a standard deviation of 1.343 on a scale of 0-10. The mean of the lowest 10% of social well-being measure is 3.61 and that of the highest 10% is 7.21. The social well-being of the highest 10% is two times higher than that of the lowest 10%. It suggests that there exists sizable inequality in social well-being distribution in the populations.

Table 5 Distribution of well-being scores

		social well-being	personal well-being	relational well-being	societal well-being
N		2000	2000	2000	2000
Mean		5.46	5.70	5.21	4.99
Std. Deviation		1.343	2.085	1.273	1.785
Percentiles	10	3.61	3.00	3.56	2.58
	20	4.35	4.00	4.18	3.34
	80	6.55	7.00	6.22	6.69
	90	7.12	8.00	6.68	7.26

Table 6 shows the distribution of social well-being scores across groups. We find that lower income groups and lower education groups have lower average score of social well-being than higher income and higher education groups. The mean score (4.67) of those who have the lowest household income (the lowest income quintile) is significantly lower than that of other income groups. The social well-being of those who have university degree or more is significantly higher compared with college graduates or high school graduates. In addition, the unemployed shows significantly lower social well-being than other groups do. Those who have regular job status reveal the highest social well-being. This pattern of group difference is found in all three sub-domains of social well-being. These results imply that socio-economic backgrounds have significant influence on the level of social well-being.

Table 6 Group differences in well-being scores

		N	social well-being	personal well-being	relational well-being	societal well-being
Household income (equivalized and classified by income quintiles)	low incomer	260	4.67	4.38	4.60	4.68
	mid-low incomer	768	5.42	5.58	5.21	5.02
	mid-mid incomer	552	5.57	6.00	5.26	4.97
	mid-high incomer	272	5.84	6.31	5.54	5.14
	high incomer	148	5.88	6.43	5.54	5.11
Education level	high school	344	5.27	5.38	5.04	4.99
	college	341	5.38	5.52	5.18	5.01
	university or more	1315	5.52	5.83	5.27	4.98
Work status	unemployed	116	4.63	4.37	4.59	4.57
	non-regular workers	219	5.20	5.29	5.06	4.82
	self-employment	345	5.37	5.50	5.16	5.01
	not searching for job	354	5.44	5.81	5.15	4.90
	regular workers	966	5.65	5.99	5.37	5.10

4.2. The vulnerable: who they are?

Given the fact that the inequality in social well-being is substantial, we can reasonably expect that society's overall social well-being might be more likely to be improved when those with poor well-being increase their well-being, rather than improvement for those who are already doing well. For that reason, we attempt to distinguish those who are vulnerable from those who are not and figure out who they are.

As no theoretical criteria are available, we adopt the lowest quintile as a threshold for

classification, which leads to identify 400 respondents who have social well-being score between 0 and 4.35. The differences in socio-economic characteristics between this group and the remainders are displayed in Table 7.

Table 7 Socio-economic characteristics of the vulnerable

	Mean/ %		Std. Deviation		Sig. diff
	vulnerables	endurables	vulnerables	endurables	
Age (yr)	42.0	43.3	11.994	12.445	**
Male (%)	53.3	50.3			n.s.
Never married (%)	17.3	11.6			***
Low education (%)	26.2	18.6			***
No job (%)	30.8	21.7			***
Low incomer (%)	26.0	9.8			***
Household Income (10,000₩)	233.06	298.46	130.97	145.19	***

Table 7 shows that those who get never married, low education, low income, no job are likely to become vulnerable in terms of social well-being. 26.2% of the vulnerable have low educational attainment, compared to 18.6% of the endurable. 26% of the vulnerable are low incomers compared to 9.8% of the endurable. The average equalized household income of the vulnerable is 2,330,600 won, while the average household income of the endurable is almost 3,000,000 won.

The subjective well-being profiles of the vulnerable and the endurable reveal striking differences. The overall life satisfaction level of the vulnerable is 2.88 on an 11-point scale of
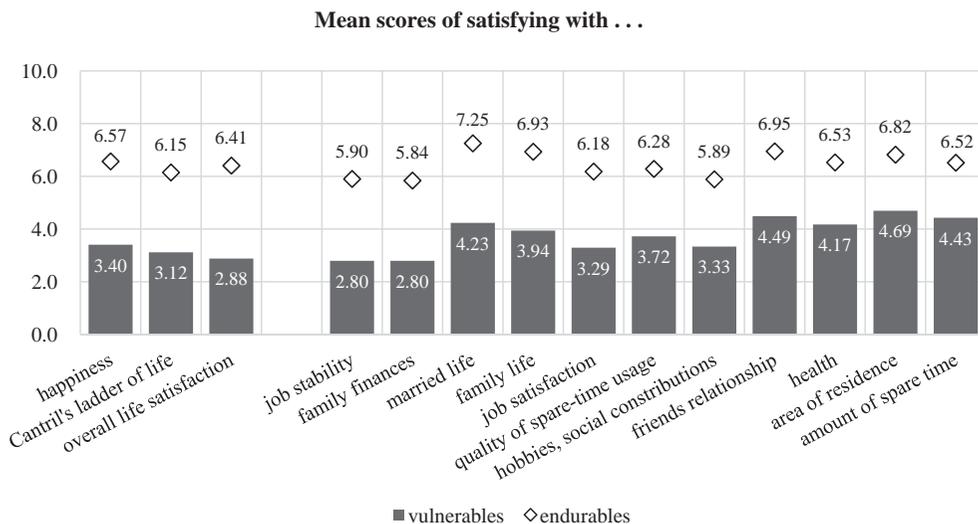

Mean scores of satisfying with . . .

Figure 3 Life satisfaction profiles of the vulnerable

0~10, which is much lower than the endurable (6.41). The vulnerable feel less happy and worse about their lives. The vulnerable are less satisfied with all life domains and the gaps are noticeable enough. The biggest gap is found in employment and job stability domain (3.1) and the second biggest gap in family finances domain (3.04). The average score of satisfaction with family life and married life also show large gap, 3.02 and 3.00, respectively.

The vulnerable tend to experience discrimination against various factors more than the endurable do. More than 60% of the vulnerable reported that they have get disadvantage (choose 0~3 response categories in 0~10 range, the lower score means more disadvantageous) due to assets and income level in contrast to less than 20% of the endurable. The proportion of
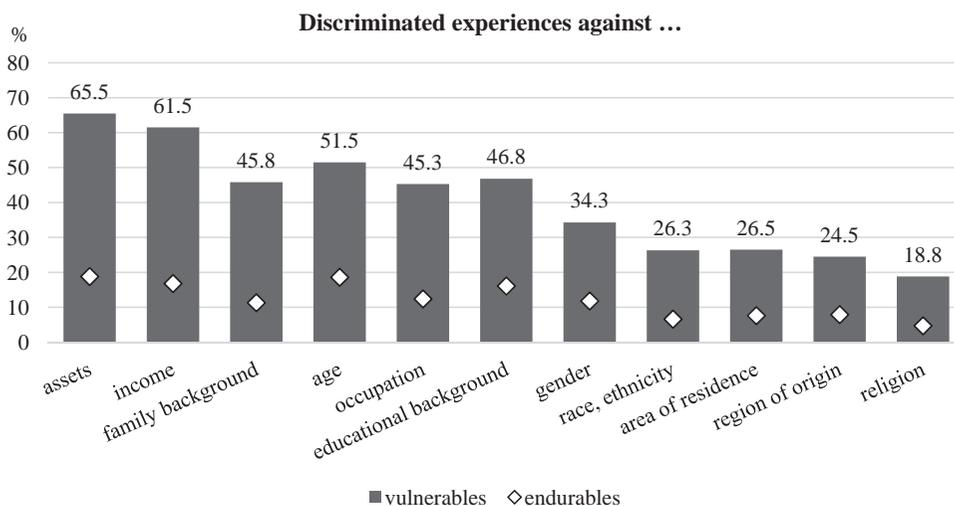
Discriminated experiences against …

%

| | 65.5 | 61.5 | 45.8 | 51.5 | 45.3 | 46.8 | 34.3 | 26.3 | 26.5 | 24.5 | 18.8 |

assets, income, family background, age, occupation, educational background, gender, race, ethnicity, area of residence, region of origin, religion

■ vulnerables   ◇ endurables

Figure 4 Discrimination experience profiles of the vulnerable

Recent exposure to risk of …

%

| | 64.0 | 39.3 | 14.3 | 10.0 | 24.0 | 2.5 | 12.3 | 7.0 | 4.3 |

low household income, illness or injury, food insecurity, safe water, poor transportation, war or armed conflict, political oppression, criminal involvement, victim of corruption
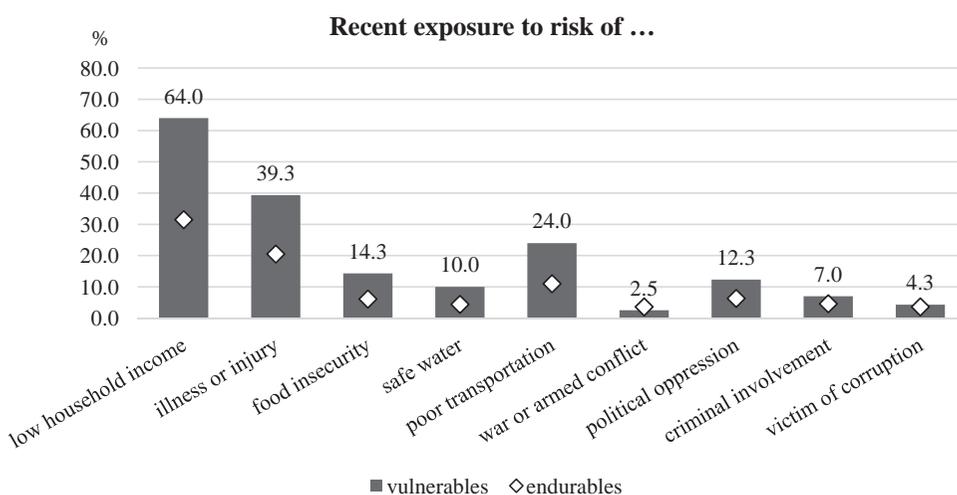
■ vulnerables   ◇ endurables

Figure 5 Risk experience profiles of the vulnerable

experiencing discrimination is systematically higher in all kind of attributes and attainments for the vulnerable. This indicates that the vulnerable think they have been treated unfairly in their life courses.

The vulnerable, also, tend to have suffered various risks more than the endurable have. Particularly, they reported the high probability of having threatened livelihood due to unemployment and low income, and illness or injury of household members in the recent 5 years.

The vulnerable tend to say that their circumstances have worsened compared to those at the earlier years and will continue to become worse. They also have pessimistic view on their elderly lives. Result shows that, among the vulnerable, more than one over three (35%) answer that the current circumstances have worsened compared to 5 years ago and will be getting worse 5 years from now and in their old age. This result implies that a significant number of the vulnerable have lost their hope for the future. It is quite a contrast to the answers of the endurable. Only 7.7% of the endurable answered that their lives have been worsening and will be getting worse. On the contrary, 41% of the endurable say that their lives have been improved and will be improved in future. In sum, the vulnerable have experience more life challenges, but do not have enough resources to cope with. This circumstance leads them to view their lives more negatively and to be pessimistic about their future prospects.

4.3. Determinants of social well-being: Regression analysis results

We examine the effects of social quality factors on the social well-being indicator. The analysis is proceeded in two steps: model 1 which includes only control variables and model 2 which is added five independent variables. Through this process, we can identify significant effect of independent variables and power of explanation of the model. The values in the Table 8 are standardized coefficients and significance of p-value is marked by asterisks (*: $p<.1$, **: $p<.05$, ***: $p<.01$).

As shown in Table 8, five independents have significant effects on all of well-being measures. Also, their direction of effects is the same across four dependent variables: the increase of community participation increases all types of well-being and the increase in trust gap, risk experiences, and discrimination experiences decreases all types of well-being. We can also find that addition of these independent variables gives great power of explanation to each model (as confirmed in model 2).

Yet, the magnitude of each determinant varies depending on which dimension of well-being is considered. For personal well-being, discrimination experience variable has the largest coefficient values on dependent variables, while trust gap has the largest coefficient values on relational well-being. For societal level, trust gap has the largest negative effect on societal well-being, while discrimination experience, and community participation show comparable coefficient sizes. In social well-being dimension, trust gap and discrimination experience have subsequent effect size in opposite direction.

Among control variables, age, gender, marital status, education, and household income

Table 8 Determinants of well-being measures

		Personal Well-Being		Relational Well-Being		Societal Well-Being		Social Well-Being	
		model 1	model 2	model 1	model 2	model 1	model 2	model 1	model 2
	(Constant)								
Age	age	-0.06 **	-0.06 ***	-0.09 ***	-0.10 ***	0.00	-0.01	-0.07 **	-0.07 ***
Gender	male	-0.05 **	-0.10 ***	0.02	-0.08 ***	0.04 *	-0.01	-0.01	-0.09 ***
Marital Status (base: married)	single	-0.18 ***	-0.13 ***	-0.17 ***	-0.09 ***	-0.10 ***	-0.02	-0.20 ***	-0.11 ***
	Widowed/divorced	-0.08 ***	-0.04 **	-0.07 ***	-0.04 **	0.04 *	0.05 ***	-0.06 **	-0.02
Education Level (base: highschool and below)	university	0.02	-0.01	0.01	-0.01	-0.02	-0.04 **	0.01	-0.03
	graduate school	0.07 ***	0.04 **	0.00	-0.03 *	-0.01	-0.03	0.03	0.00
Work Status (base: having job)	no job	-0.02	0.01	-0.04 *	-0.01	-0.02	0.01	-0.03	0.01
Income	Household income	0.23 ***	0.14 ***	0.18 ***	0.08 ***	0.05 **	-0.02	0.21 ***	0.10 ***
	Ingroup Trust		0.26 ***		0.80 ***		0.24 ***		0.54 ***
	Trust Gap		-0.09 ***		-0.45 ***		-0.35 ***		-0.35 ***
	Risk Experience		-0.17 ***		-0.04 ***		-0.03 *		-0.12 ***
	Discrimination Experience		-0.29 ***		-0.13 ***		-0.27 ***		-0.30 ***
	Community Participation		0.13 ***		0.15 ***		0.22 ***		0.21 ***
	R square (Adjusted)	0.10	0.34	0.06	0.60	0.01	0.28	0.08	0.54
	Model fit	0	0	0	0	0	0	0	0

have significant influence on personal and relational well-being. The young than the old, female than male, the married than single or the widowed or the divorced, the richer than the poor show higher well-being level. Meanwhile people with over graduate school degree show higher personal well-being than people with lower educational degree. The directions of these significant effects are consistent across sub-dimensions of social well-being except marital status. The widowed or divorced have higher societal well-being than married people.

5. Discussion

The results presented above show that specific life experiences contribute to the level of social well-being. Trust gap, risk experiences, and discrimination experiences reduce social well-being significantly. On the other hand, experiences of community participation raise well-being level substantially. This result confirms social quality matters for social well-being of the population. What is noticeable is that those stressful life experiences are more concentrated on those who don't have enough resources to cope with. The vulnerable in terms of social well-being are those who are deprived in multiple ways. They have lack of money, lack of education, no job, and lack of social network. Risk experiences and discrimination experiences may not have similar magnitude of influence on the social well-being level between the vulnerable and the endurable. Therefore, policy intervention needs to target those vulnerable individuals preferentially and to enhance their well-being by maximizing their psychological and social resources as well as economic resources.

The results of regression analyses suggest several policy implications. First, in order to improve social well-being of society's members, government should focus its effort to create the conditions in which people feel safer and more inclusive in society. Second, considering the positive impact of community engagement on social well-being, government should support for developing community activities and encourage people to participate in local communities. It will contribute to favorable feeling of being part of the community and people's out-bound trust, which may reduce trust gap of individuals.

It is worthwhile to mention that better measurements and understanding of various dimensions of social well-being may not be feasible unless we have reliable data. Also it will be a great opportunity to understand the dynamics of macro-micro linking mechanism of social well-being, once we have comparative analysis on different countries, with reliable multi-level data.

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