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| **Associations of individual social capital with subjective wellbeing and mental health among migrants: a survey from five cities in China** |
| **Background/Objectives**  There were 245 million migrants in China until 2016. Previous studies indicated that migrants possessed small social capital, and were vulnerable to poor mental health compared with natives. Although, social capital attracted more attentions from public health professionals, here was few studies to examine the effects of social capital on mental health among migrants. In the current study, we aimed to examine the associations of cognitive and structural social capital with subjective wellbeing (SWB) and mental health among migrants in five cities in China.  **Methods**  We conducted healthy cities surveys in five cities (Shanghai, Zhengzhou, Xinzheng, Xingyang and Baoji) during Jun 2017 and Spring 2018. Two-stage sampling method was used to sample participants aged 15-75 years old in all cities. we retrieved data from 3038 migrants from all participants to examine the associations of social cohesion, membership of social organizations and social participations with SWB and mental health. The Chinese versions of the Personal Wellbeing Index and WHO-5 were used to measure SWB and mental health. Social capital was proxied by social cohesion, membership of social organizations and social participation, which were measured by validated scales. The covariates included sociodemographic characteristics (sex, age, education, marriage and employment status), self-rated health and health behaviors (smoking, problematic drinking and physical activity). Generalized linear regressions for SWB and logistic regressions for mental health were used to examine the associations of social capital and subjective wellbeing and mental after controlling for covariates.  **Results**  The median level of SWB was 75.7(Inter Quartile Range, IQR: 62.9-85.7). After controlling for sociodemographic characteristics, self-rated health and physical activity were positively associated with SWB, SWB level among migrants perceived high individual social cohesion was much higher than their counterparts(Unstandardized Coefficients, B: 7.01, 95%CI: 5.82, 8.21). The prevalence of poor mental health was 10.0%. After controlling for covariates, high social cohesion (OR: 0.32, 95%CI: 0.24, 0.44) and high social participation (OR: 0.77, 95%CI: 0.57, 0.97) was significantly associated with low ratio of poor mental health compared with their counterparts respectively.  **Discussion**  These findings suggest that the cognitive social capital is positively associated with SWB, while both the cognitive and structural social capitals were negatively associated poor mental health. So it is beneficial to migrants’ mental health and SWB to promote social participations and social cohesion.  **Keywords**  social capital, mental health, subjective wellbeing, migrant |