

CHAPTER FOUR

DATA ANALYSIS AND RESULTS

4.1 INTRODUCTION

In this chapter, the researcher will answer the research questions to fulfill the objectives of this research. The findings of the research based on the results of the interviews and the completed resilience scale (see appendix XIII: p. 71) will be analyzed. Before this is carried out, the profile of the twenty respondents will be described with reference to the demographic data (see appendix IX: p. 67) and the completed couple resilience scale.

4.2 PROFILE OF RESPONDENTS

Respondent one is Mr. Lee, aged 36 years, who is a Science teacher in a secondary school in Klang. Respondent number two is Mrs. Lee, the wife of Mr. Lee who is 44 years old. She is a Mathematics teacher in a secondary school in Klang. This couple has a child named Lee Sek Koon, aged 19 years who has sensori-neural deafness.

Respondent three is Mr. Charles Goh, aged 43 who is a car mechanic in Klang. Mrs. Lee Keng Eng who is the wife of Mr. Charles is respondent number four. Mrs. Lee Keng Eng, aged 39 years is a clerk in Port Klang. They have a daughter named Adeline who is 17 years old and has sensori-neural deafness.

Respondent number five is Mr. H.M, aged 49 years who is a manager of a firm in Klang. His wife, Mrs. Surina Kasim is respondent number six. She is 40 years old and is a housewife. They have a 16 year old daughter, named Suraya who has sensori-neural deafness.

Respondent number seven is Mr. Shafiee bn. Mahmud, aged 48 who is an administration assistant in Klang. His wife Mrs. Che Zabedah Ismail, aged 43 years is respondent number eight. She is a bank executive in Klang. They have a son named Mohd. Firdaus, aged 16 who has sensori-neural deafness.

Respondent number nine is Mr. Abu Bakar bn. Hasan @ Hassan. He is aged 47 years old and is a technical executive in Klang. Respondent number ten is Mrs. Zainan Mohamad, the wife of Mr. Abu Bakar. She is aged 44 years old and is a housewife. They have a son named Amir who is 19 years old and has sensori-neural deafness.

Respondent number eleven is Mr. Mohd. Salleh bn. Mohd. Noh. He is 50 years old and is a lecturer in the Mara Technological Institute in Shah Alam, Selangor. His wife Mrs. N.I is respondent number twelve. She is 44 years old and is a headmistress of a primary school in the outskirts of Klang. They have a son named Mohd. Hafeez who is twenty years old and has sensori-neural deafness.

Respondent number thirteen is an Indian man named Mr. Gomez. He is 48 years old and is a lecturer in a teacher's training college in Kuala Lumpur. Mrs. Gomez who is respondent number fourteen is a Chinese. She is 46 years old and is a Mathematics teacher of the hearing impaired children in a secondary school in Klang. They have a 19 year old son named Gerard who has sensori-neural deafness.

Respondent number fifteen is Mr. Nada who is a bank manager in Subang Jaya, Selangor. He is 50 years old and his wife, Mrs. Irene is respondent number sixteen. She is 43 years old and is a bank officer in Subang Jaya. This Indian couple have a son named Tristen, aged 20 years who has sensori-neural deafness.

Respondent number seventeen is Mr. Krishnan who is 55 years old and is a security guard in Klang. His wife, Mrs. Indra Devi is respondent number eighteen. She is 44 years old and is a Science laboratory assistant in the secondary Convent school in Klang. They have a son, named Sivabalan who is 16 years old and has sensori-neural deafness.

Respondent number nineteen is Mr. Rajagderan who is 45 years old. He is a field assistant in an oil palm estate in Kuala Selangor. His wife, Mrs. Letchumi is respondent number twenty. She is 45 years old and is a housewife. They have a son, named Yuvarajan who is 16 years old and has sensori-neural deafness.

All the couples reside in Klang with the exception of Mr. and Mrs. Rajagderan who reside in Kuala Selangor.

4.3 ANALYSIS OF THE INTERVIEWS

The results of the interviews held with the ten couples will be analyzed to determine whether the ten couples employed resiliency mechanisms that are effective in dealing with the problem of having a child who has sensori-neural deafness.

The first couple, Mr. and Mrs. Lee reacted differently from each other when they were informed by an ear, nose and throat or ENT specialist that their child had sensori-

neural deafness at the age of two. Mr. Lee felt helpless and wondered why this 'tragedy' had occurred to them because no one in his or his wife's family was hearing impaired. Mrs. Lee on the other hand, felt 'numb' and could not come out of this state for a few months. Mrs. Lee felt that she had just lost a 'normal baby' and was taking home a different baby. She stopped talking to her infant for several months. The Lee couple isolated themselves from their family, relatives, friends, neighbours and society at large because it was too painful to repeat their child's incurable problem to different people at different times. Initially, the couple could not talk to each other about their child's problem and did not work together to face this adversity in their life. They could think of nothing else but the fact that their child will never hear. Nevertheless, resilience began to be manifested in the couple, two years later as they slowly accepted their child's handicap. They developed toughness and hardiness, which are psychological resources to face their adversities. They strived hard to stop being 'pessimistic' over the situation that they were in. They did not receive any social support from their religious community, family and friends. They did not receive professional counseling from their child's local school. The local hospital in Klang did not have speech therapy services for their child. The couples decided to contact the Education Ministry and the Social Welfare Department to obtain expert advice on necessary measures to undertake when dealing with a child such as theirs. However, the couple did not obtain the kind of help that they were seeking for and they had to depend on their own coping skills and intelligence to meet the demands of their child.

The second couple Mr. Charles and Keng Eng were shocked and confused when the ENT specialist in the University Hospital in Kuala Lumpur, informed them their one

year old child had sensori-neural hearing loss. They had never heard of such a term prior to this time. The couple began to blame themselves for their child's condition, which may have been due to her high fever when she was eleven months old. The couple did not respond quickly and felt that their negligence had brought about this situation. The couple could not think rationally enough to cope with their child's problem. Due to their financial instability, the couple was filled with anxiety when they were told the price of purchasing hearing aids by the manager of the Woon Top Hearing Aid shop in Kuala Lumpur. The couple did not receive any aid from their family or friends. In fact, Mr. Charles's mother accused Keng Eng of eating the wrong kind of herbs during her pregnancy and having bad blood. The couple felt very much 'alone' and wanted some guidance in the upbringing of their child. However, neither the Education or Health Ministry and the Social Welfare Department could help them in the manner that they expected. Only their Catholic priest, was a blessing in their life as he comforted and strengthened the couple to face their problems rationally. Finally, Mr. Charles and Keng Eng began to accept and withstand their hardship in their own individual way after a period of four years. They have stopped all self-blame and are in the process of becoming more tolerant of their crisis in life despite their failures. However, Keng Eng feels that her husband has still to overcome many of his shortcomings.

The third couple Mr. H.M. and Mrs. Surina Kassim were depressed when the Universiti Kebangsaan Malaya (UKM) ENT specialist in Kuala Lumpur told them that their one year old daughter, Suraya had sensori-neural deafness. Mrs. Surina Kassim said they were fated to receive such a child from God. The couple said they had to look to God to give them strength to accept Suraya's condition. Mrs. Surina Kassim made a lot

of self-sacrifices such as giving up her job to spend more time with Suraya. The couple decided not to have another child for the next ten years, in order to fully concentrate on Suraya. The couple's commitment to the family and their interest in each other's well-being formed part of their inner locus of control over the adversities in their lives. They were able to think rationally and determine the best course of action to take for their child's well being. They received some emotional support from Mrs. Surina's parents who were constantly at their side and were models of resilience themselves. The Welfare Department gave their child a few benefits when they registered Suraya. The speech therapist, Mrs Shereen at the UKM unit helped Suraya for as long as the couple could take her to the unit. The couple contacted the Education Ministry which gave them the address of the nearest suitable school for Suraya. However, despite this help, the couple still had to rely on their own personal skills, intelligence and psychological resources in the upbringing of their child.

The fourth couple, Mr. Shafiee and Mrs. Che Zabedah refused to believe that their 16 month old baby, Mohd. Firdaus had sensori-neural deafness. They went for a second opinion at the Medical Center in Klang where their worst fears were confirmed. The couple traveled outstation to visit many famous bomohs. Che Zabedah had nightmares and burst into tears frequently. However, she gradually began to come out of this state of denial. Mr. Shafie said that they were given this child by God. This couple is very religious and this has enabled them to accept their son's hearing impairment. They have psychological resources such as patience, perseverance and courage in the face of their hardship. This couple has learnt the Malay sign language in order to communicate with their son. They have received a lot of support from their individual

families and friends who have stepped forward to lend a helping hand or a listening ear to their problems. The couple sought information about hearing aid from their son's speech therapist and purchased the hearing aids at the Cahaya Suria Top Hearing Aid in Kuala Lumpur. The couple have been taking turns to take their son for regular speech therapy since he was four years old. They have registered him at the Social Welfare Department upon the advise of their son's class teacher. They have encouraged their son to participate in social activities conducted by the Kuala Lumpur Society For The Deaf (KLSD) and the Young Men Christian Association (YMCA) in Kuala Lumpur. It is clear that this resilient couple have used their personal skills, psychological resources, physical resources and cognitive skills to make the best of their situation.

The fifth couple Mr. Abu Bakar and Pn. Zainah Mohamad said that after the initial unpleasant surprise of being informed by the ENT specialist at the University Hospital in Kuala Lumpur, that their two-year old son Amir had sensori-neural deafness, they began to accept it as their fate. They felt sad that their son couldn't hear but the couple have not weakened or given up their faith in the future of their son's well-being. This couple has a sense of humour that has strengthened their inner locus of control and enabled them to be optimistic. Their adequate financial resources have enabled them to cater to their son's physical needs. Currently, they have enrolled their son at the Cosmopoint in Kuala Lumpur where he is becoming adept at using the computer. This couple has a good sense of self-efficacy and self-determination that has helped them to deal with the hearing problem of their son. They have received a lot of family support from their immediate family and extended family members who have encouraged them not to give up on their son. They contacted the Ministry of Education to obtain the

address of a suitable school for their son. They obtained the address of the Top Hearing Aid shop from their son's speech therapist. This couple has not received any professional counseling from their son's educators or the Social Welfare Department. However, the couple has been resilient in dealing with their son by spurring him to be confident and persistent in all his endeavours.

The sixth couple, Mr. Mohd. Salleh and Mrs. N.I were deeply upset when the ENT specialist at the University Hospital in Kuala Lumpur informed them that their two-year old son, Hafeez had sensori-neural deafness. This well educated couple discussed their son's problem and decided to seek for help in the area of child-care. However, they didn't receive any counseling from the Health and Education Ministry or the Social Welfare Department that they approached. Other than being provided with the address of a suitable school and the shop to purchase hearing aids, this couple were left alone to deal with the parenting of a hearing impaired child. In order to communicate with their son this couple took the effort to learn the Malay sign language by reading the sign language book, which was given to them by their son's class teacher. Their family and relatives gave them a lot of emotional and moral support. Their love and commitment for their son has motivated them to make a lot of sacrifices such as giving first priority to cater to their son's needs. This resilient couple is determined to do everything possible to help their son to be an independent being. Currently, their son is working at OYL, a company, which deals with the air-conditioner. Their son is well adapted in the society.

The seventh couple, Mr. and Mrs. Gomez is a well-educated couple that resiliently and maturely faced the problem of having a son named Gerard, who has sensori-neural deafness. This couple took their sixth month old baby to an ENT

specialist in the University Hospital in Kuala Lumpur and was told that Gerard's deafness was incurable. The news was very painful to the couple. Mrs. Gomez felt that she was in a 'trap' where there was no 'escape'. Their families gave them a lot of moral support, which sustained them during the initial period of the discovery of their son's hearing impairment. After a few months, Mr. and Mrs. Gomez decided to take life 'one day at a time'. The couple has learnt through trials and errors and taken responsibility for the upbringing of their son seriously. They have spent time to teach their son many living skills such as using public facilities for the sake of survival. They did not receive any professional counseling from the Health and Education Ministry or the Social Welfare Department that they approached. Upon their own initiative, this couple enrolled free of charge by writing to the director of the John Tracy Correspondence in U.S.A. The course helped them to understand their four-year old son better and improved their parenting skills. In order to help other children like Gerard, Mrs. Gomez began to teach the hearing impaired children in Klang. This couple has enrolled their son in the Vocational School in Shah Alam, Selangor, where Gerard is studying pottery. This resilient couple continues to guide their son rationally so that he may never feel that he is alone in his path of life.

Mr. Nada and Mrs. Irene, the eighth couple said it was a time of mental and emotional trauma when the ENT specialist at the University Hospital in Kuala Lumpur informed them that their ten-month old baby, Tristen had sensori-neural deafness. Mrs. Irene said she broke down completely and could not talk about the problem with her husband for a period of several months. Mr. Nada appeared to be calm about it outwardly but he was very despondent over the situation. Mr. Nada's family did not

provide any support unlike Mrs. Irene's family who volunteered to baby sit and take Tristen for his speech therapy sessions in University Hospital in Kuala Lumpur. This couple didn't remain stagnant in their misery but they came out of it for the sake of their child's development. They were very disappointed with the minimal help given by the Ministry of Education and the Social Welfare Department in the area of professional guidance for parents with hearing impaired children. This resilient couple patiently and tirelessly strove to tutor their son and enhance his speech skills by emphasizing on lip reading throughout his primary and secondary schooling years. Currently, this financially stable couple has sent their son to New Zealand to do his A levels and has found trustworthy and loving foster parents for him. The couple found it very difficult to part with their son but their self-sacrifice was willingly endured for the betterment of their son's future.

The ninth couple, Mr. Krishnan and his wife Mrs. Indra Devi reacted differently to the news given by the ENT specialist in University Hospital in Kuala Lumpur that their son had sensori-neural deafness. Mr. Krishnan felt frustrated and angry that his sole son, Sivabalan was irreversibly handicapped. Mrs. Indra was fearful and panic stricken because she had no idea on how to deal with this chronic crisis. The couple was ashamed of talking about their problem and felt that friends might criticize them. The couple's family members failed to give the couple any moral support. Mr. Krishnan isolated himself from his family and Mrs. Indra could not manage to take her son for speech therapy by herself. When Mrs. Indra overcame her despair, she registered her son at the Social Welfare Department and managed to get some financial aid to purchase hearing aids for her son. She went to the Selangor Education Department to obtain advise on a

suitable school for her son. Despite her personal strength and courage to see her son succeed in life, Mrs. Indra feels a sense of hopelessness when she ponders over the fact that her son will never hear like a normal child does. Her limited physical resources make it difficult for her to pay for the maintenance of her son's hearing aids but she intends to do her level best with her limited financial resources. She hopes she has made the correct decisions in the development of her son's life. She has endured many hardships and often stood alone in the area of parenting. Mrs. Indra is quite resilient in her efforts to overcome marital problems in her life so that her son will grow up in a better environment.

The tenth and final couple, Mr. Rajagderan and Mrs. Letchumi took their ten-month old son, Yuvarajan to the ENT specialist in University Hospital in Kuala Lumpur when he failed to respond to environmental sounds. When Yuvarajan was diagnosed as having sensori-neural deafness, his parents grieved for him over a period of time. Mrs. Letchumi blamed herself because she had mumps during her pregnancy. However, Mr. Yuvarajan said that it was God's chosen will and he strengthened his wife to face the problem of coping with a hearing impaired child. The couple talked about their problem and received advise from their Bahai religious leader and fellow believers who encouraged them to continue their lives with a positive purpose. The couple decided to take their son regularly for speech therapy. Their son's speech therapist, Dr. Vanitia advised them to use only one language at home. The couple only speaks in Malay to their son even though their mother tongue is Tamil. The couple takes their son for family trips and plan activities that are educational, meaningful and enjoyable for their son. The couple sought advise on parenting from the Social Welfare Department, the Health and

Education Ministry and their son's educators but they were disappointed. The couple encourages their son to participate in co-curricular activities and societies in the local school, which they feel will help the son to be creative, confident and sociable. This couple's commitment, affection, tolerance and hardiness are outstanding qualities of resilience that they possess which will be gainful for the healthy development of their son.

4.4 AN OVERVIEW

The analysis of the data collected during the interviews appears to correlate with the Scores derived from the Couple Resilience Scale, with the exception of Mr. Krishnan's scores. After the initial stage of grief, denial, self-blame and other adverse emotions, almost all of the parents were able to show internal factors of resilience and psychological resources which includes variables such as tolerance, affection, love, commitment, trust, hope and hardiness that are effective in dealing with the problem of facing and parenting a child with sensori-neural deafness. The Malay couples and the Bahai couple had a strong sense of assignment of meaning in their lives as they attributed their adversity to be the will of God, which they had to accept and cope with, without critical complaint in their lives. Some couples did not have social support such as community, school, professional, personal and family support. The researcher believes that it is essential for the couples to have these external factors of resilience in order to become more resilient parents.

4.5 ANALYSIS OF DATA ON THE COUPLE RESILIENCE SCALE

The scores on the couple resilience scale (see appendix X: p. 68) is analyzed using the Statistical Product and Service Solutions (SPSS) 8.0 software programme which indicates which are the most frequent, moderate and less frequent categories of resilience that the respondents identify with. The researcher will analyze the frequency of the ratings for each of the seventeen categories on the first answer summary sheet (see Appendix X: p. 68). By analyzing the frequency of the scores, the researcher will know the kinds of resiliency mechanisms that the couples with hearing impaired children employ in their lives. The Frequency Table displaying the valid percentage for categories one to seventeen is found in the appendix section XII (see p. 70)

35% of the respondents scored 5, which is the highest score and 45% of the respondents scored 4, which is a high score for category 1 that is hardiness. This shows that 80% of the respondents have hardiness to deal with adversities in their lives. Only 5% of the respondents scored 5, which is the highest score for category 2 that is personal skills. This indicates that a low percentage of respondents identify with this category of resilience. 30% of the respondents scored 1, which is the lowest score and 20% of the respondents scored 2, which is a low score for category 3 that is intolerance. This shows that a fairly high percentage of respondents think that they are tolerant. Only 20% of the respondents scored 4 for category 4 and claimed to have high pessimism. This shows that a high percentage of respondents think that they are optimistic in life. 45% of the respondents scored 5, which is the highest score for category 5 that is religious faith. This indicates that a fairly high percentage of respondents identify with this resiliency

mechanism. 50% of the respondents scored 5, which is the highest score for category 6 that is affection. This indicates that a high percentage of respondents identify with this category of resilience. 75% of the respondents scored 5, which is the highest score for category 7 that is commitment. This indicates that a high percentage of respondents identify with this resiliency mechanism. 40% of the respondents scored 5, which is the highest score for category 8 that is self-sacrifice. This indicates that a fairly high percentage of respondents identify with this category of resilience. Only 15% of the respondents scored 1, and 5% scored 2, which are the lower scores for category 9 that is past role model. This indicates that a higher percentage of respondents had past role models in their lives whom they could learn from or be influenced by to become more resilient in the face of stress or adversities. Only 5% of the respondents scored 1, which is the lowest score for category 10 that is value differences. This indicates that a low percentage of respondents have similar values, interests, priorities and goals with their spouses. Only 15% of the respondents scored 5, which is the highest score for category 11 that is communication skills. This indicates that a low percentage of respondents use specific skills like listening, being open and honest, using good solutions for both partners, pausing to avoid blowups with each other and effective communication or planning skills to deal with relationship issues. 45% of the respondents scored 2, which is a low score for category 12 that is task differences. This indicates that a high percentage of respondents work together to solve problems and cope with challenges in life. 20% of the respondents scored 5, which is the highest score and 40 % scored 4 which is a high score for category 13 that is shared fun. This indicates that 60% of the respondents do things together for fun, recreation and rest to enhance their relationship.

Only 5.3% of the respondents scored 5, which is the highest score and 47.4% scored 4, which is a high score for category 14 that is support networks. This indicates that a fairly high percentage of respondents received help from support networks such as family, friends and the community. Only 10% of the respondents scored 1, and 15% scored 2, which are the lower scores for category 15 that is saving face. This indicates that a fairly high percentage of respondents do joint actions to avoid showing weakness and to prevent embarrassment, criticism or social disapproval. 20% of the respondents scored 5, which is the highest score and 50% of the respondents scored 4, which is a high score for category 16 that is their history as a couple. This indicates that a high percentage of respondents who have been with their spouses for a stretch of time have learnt valuable lessons from their past problems and times of stress. Only 10% of the respondents scored 1, which is the lowest score whilst 45% of the respondents scored 3, which is a moderate score for this category. This shows that a higher percentage of respondents believe that they are moderately financially stable.

The frequencies above indicate that the kinds of resiliency mechanisms that couples with hearing impaired children frequently employ when they encounter problems are hardiness, tolerance, optimism, past role models, religious faith, affection, commitment, self-sacrifice, shared fun, saving face, shared tasks, learning from past failures during the marriage period and adequate physical resources. According to Holaday and McPhearson, 1997, these kinds of resiliency mechanisms are known as the internal factors of resilience and psychological resources that portray an internal locus of control.

In order to test the reliability of the scores on the couple resilience scale, the researcher analyzed the partner ratings for categories 1 to 9 on the same couple resilience scale (see Appendix XI: p. 69: Partner Rating – Answer Summary Sheet). In addition, the researcher analyzed the couple ratings for categories 10 to 17 that was answered separately and individually by each partner (see Appendix X: p. 68, Couple Resilience – Answer Summary Sheet).

The results indicated that there is a strong correlation between their own rating of themselves and their partner's rating of themselves for couples, numbers 1 (Mr. and Mrs. Lee), 2 (Mr. and Mrs. Charles) and 8 (Mr. and Mrs. Nada). Couples, numbers 3 (Mr. H.M and Mrs. Surina), 4 (Mr. Shafiee and Mrs. Che Zabedah), 5 (Mr. Abu Bakar and Mrs. Zainah) and couple 10 (Mr. and Mrs. Rajagderan) varied in their partner ratings for category 4 that is pessimism. Either the husband or wife differed in their opinion of their spouse's pessimistic outlook. Mr. Krishnan who comes under couple number 8, feels that he is affectionate but his wife denies this and she feels that she is more committed to the family than her husband. The Gomez couple (number 7) varied in their opinion on partner ratings for category 8 that is self-sacrifice. Couple number 5 (mentioned above) and 6 (Mr. Mohd. Salleh and Mrs. N.I) varied in their partner ratings of each other in category 3, which is intolerance.

Upon analyzing the couple rating scores for categories 10 to 17, the researcher discovered that there is a strong correlation between the scores given by both partners with the minor exception of couples number 3 and 5 who varied in their scores for category 12 on task differences. The differences in the scores stated above are not significant enough to determine that the couple ratings and partner ratings are unreliable

because on the whole there is a significant correlation in the partner ratings for categories 1 to 9 and couple ratings for categories 10 to 17. This strengthens the validity of the results of the analysis carried out on the data obtained from the couple resilience scale.

4.6 ANALYSIS OF DATA ON THE RESILIENCE AS A COUPLE

This analysis is carried out based on the ratings on the couple resilience scale and the data collected from the interviews with the ten couples. The purpose of this analysis is to determine if the couples' character indicates that they have the resiliency to deal with stress or adversity together and still maintain a good relationship with each other.

Based on the frequencies of the ratings, it is clear that a high percentage of the couples with children who are hearing impaired have the resiliency to deal with stress or adversities together. With reference to category 12 on the couple resilience scale, it is evident that a fairly high percentage (45%) of respondents actively work together to solve problem and cope with challenges in life. Couple 4 (Mr. Shafiee and Mrs. Che Zabadah) and couple 8 (Mr. and Mrs. Nada) had exceptional scores for this category on couple resilience. A high percentage (60%) of respondents with children who have sensori-neural deafness actively do joint activities of recreation in order to enhance family relationships. Couples number 3, 4, 5, 6 and 8 or respondents number 5, 6, 7, 8, 9, 10, 11, 12, 15 and 16 can identify with this category of resilience which is shared fun. A high percentage (52.7%) of respondents claimed to have good support networks (see: category 14), which is an external factor of resilience that is essential for couples with children who are handicapped. However, it is important to note that the majority of

couples are referring to family and friends support rather than support from professional helpers and organizations. 50% of the respondents felt that they have a better ability to do joint actions with their spouses to prevent showing weakness, embarrassment, criticism and social disapproval. This category of resilience (see: category 16), which is saving face can be fully ascribed to couples numbers 3, 4, 5 and 10 which consists of respondents numbers 5, 6, 7, 8, 9, 10, 19 and 20. 70% of the respondents claimed to have successfully learnt lessons from their past problems or stress during their married life. This is an important resilient factor in couples numbers 1, 3, 5, 6, 7, 8, and 10 which consists of respondents numbers 1, 2, 5, 6, 9, 10, 11, 12, 13, 14, 15, 16, 19 and 20 who have emerged to become better parents and life partners based on their past experiences during times of adversities that they faced together. 45 % of the respondents felt that they were moderately equipped with physical resources (see: category 17). Financial security can aid couples in their endeavour to be resilient in the face of trials and problems. 50% of the respondents claimed to have very high mutual respect, trust or support for their life partners and an interest in each other's well being. This is especially applicable to couples numbers 3, 4, 5, 8 and 10 which make up respondent numbers 5, 6, 7, 8, 9, 10, 15, 16, 19 and 20. This quality of affection (see: category 6), love and caring for one another is an important resilient factor that serves to help couples to face hardships together. 75% of the respondents claimed to have a very high commitment (see: category 7) and a sense of responsibility based on personal caring and love for their life partner, children and family. This pertains to couples numbers 1, 3, 4, 5, 6, 7, 8 and 10 which make up respondent numbers 1, 2, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 19 and 20. Without commitment, which is an important factor of resilience couples will not

be able to maintain a strong relationship with each other during the traumatic moments of their lives. Finally, 40% of the respondents claimed to be very highly self- sacrificial (see: category 8) in their married life. This is true of couples 3, 4, 5 and 10 that make up respondent numbers 5,6, 7, 8, 9, 10, 19 and 20 who claim to have made one- way sacrifices for the sake of their spouses without expecting any returned favour for their good deed. Couples with this virtue are very resilient during the darkest moments of their married lives.

The analysis of the information obtained during the interviews affirms that the ratings on the couple resilience scale are valid. There is a correlation between the feedback from the interviews and the scores on the couple resilience scale, which determines that most of the couples with the exception of couple numbers 2 and 9 have the resilience to deal with stress and adversity together. Couple number 2, Mr. and Mrs. Charles underwent a very trying period of financial instability during the period when Adeline, their daughter was diagnosed with sensori-neural deafness. Mrs. Charles faced a few false accusations that upset her deeply. These factors may have contributed to their initial lack of resilience when Adeline's hearing impairment condition was made known. Couple number 9, Mr. and Mrs. Krishnan are currently living apart. Mr. Krishnan's inability to accept his son's hearing impairment has been detrimental for the family. Mrs. Krishnan has been forced to bear the responsibility of taking care of her son.

Based on the completed analysis of the data obtained from the use of the above mentioned 2 research instruments, it is beyond doubt that eight out of the ten couples mentioned in this research have the resiliency to deal with stress or adversity together and still keep their relationship strong at the same time.