Married couples’ perceptions of relational strengths in the context of a high-risk community

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Mini-dissertation submitted in partial fulfilment of the requirements for the degree Master of Arts in Positive Psychology at the North-West University

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Graduation: May 2019
Student number: 29645824
Summary

Couples who enjoy a loving and faithful marriage are more likely to experience a happy and healthy life. Although considerable research has been done on marriages in need of therapy, few studies have been carried out on couples who experience difficulties, but have the ability to manage it and enjoy a fulfilling relationship. Researchers agreed that people in positive and caring relationships show certain qualities and attitude in “good times” and in “bad times”. People living in high-risk communities are often exposed to various stressors and unsafe circumstances, because of high levels of crime and lack of resources. Despite these stressors that have an impact on their families, many couples still stay together.

The student aimed to explore and describe what the perceptions of relational strengths of these married couples living in a high-risk community are that they believe to be important for a committed and lasting relationship. A qualitative descriptive approach was used.

The World Café was used as data collection method and 17 participants took part.

The findings revealed effective communication, to be friends with your spouse, enjoying a fulfilling sexual relationship, having a relationship with God, the importance of being part of a functional family and emotional fulfilment as the most important relational strengths in people living in a high-risk community.

It is recommended that future research include divorced individuals to acquire their opinion on the relational strengths their relationship lacked and the positive contributions they could have made. The participants mentioned that they often experience interference from outside, and it can be fundamental to identify and improve the resources inside the community with the idea of supporting married couples.

Key words: High-risk community, marriage, positive psychology, relational strengths, resilience, strengths
Acknowledgements

Firstly, I would like to thank Dr. Izanette van Schalkwyk for her constant guidance and expertise in helping me to complete this study. Thanks to Dr. Lizanlé van Biljon for her professional advice and input as co-supervisor.

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I am honored to have met the people from the Delft community and the valuable input received from the participants.

My deepest appreciation goes to my family and friends for their support and in particular to my husband for his love, patience and understanding during this journey.

I am profoundly grateful to my Heavenly Father, without whom this would not have been possible.
Preface

This mini-dissertation is submitted in article format as indicated in the 2018 General Academic Rules (A4.4.2 and A4.10.5) of the North-West University. It is submitted in partial fulfilment of the requirements for the Master of Arts degree in Positive Psychology. The mini-dissertation accounts for 60 of the total 180 course credits. The manuscript in article style meets the requirements of the specific journal that was selected for submission, Family Relations: Interdisciplinary Journal of Applied Family Science. For the purposes of this mini-dissertation, the page numbering of the mini-dissertation as a whole is consecutive. However, for journal submission purposes, the manuscript will be numbered starting from page 1.

The dissertation is divided into three sections. Section 1 consists of the first stage of the research and the preparation for the main phase and manuscript (research proposal and ethics application form as approved by the relevant bodies.). Section 2 reflects the research report for examination in article format, and Section 3 contains the conclusions and reflections of the study.
Declaration

I, Vasti Nortjé, declare herewith that the mini-dissertation, “Married couples’ perceptions of relational strengths in the context of a high-risk community” is my own work, has been text-edited in accordance with the requirements and has not already been submitted to any other university.

Dr. V. Nortjé  November 2018
Letter of Permission

The co-authors hereby grant permission to the first author that this manuscript may be submitted for purposes of a mini-dissertation. The first author contributed to theme development, did the literature review, qualitative analysis, interpreted the data and did the major work for the discussion. She drafted the manuscript and incorporated the suggestions from the co-authors into the manuscript. She took responsibility for the technical and language editing of the manuscript.

[Signature]

Dr. I. van Schalkwyk (Supervisor)

[Signature]

Dr. L. van Biljon (Co-supervisor)
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Section 1

Background Orientation

Section 1 will reflect the first phase of the research process that will be followed by Section 2 that entails the manuscript as the main research report. Section 3 will contain the conclusions and reflections.

A literature study was done and a research proposal conducted that was approved by a subject research group and secondly by the AUTHeR Research Proposal Committee of the African Unit for Transdisciplinary Health Research (AUTHeR). It then was submitted for ethics approval by the Human Research Ethics Committee (HREC) of the North-West University. The documentations, as submitted and approved by HREC, are included in this section. The addenda documents, required for HREC approval, are not included in this study.

There is an overlap between the research proposal, ethics application and parts of the manuscript in Section 2 as it is based on the same research project in different phases. The manuscript, in Section 2, will be the final research report.
1.1 Approved protocol for this study

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Specific aims of umbrella project | N/A

where by this study links

Will new data be collected? | Yes | X
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| Names of small group panel | 1 | Prof Marie Wissing |
| within the school/unit that approved this research protocol | 2 | Dr Lusilda Schutte |
| (before send to AUTHeR) | 3 | Ms Christelle Liversage |
| Date of approval by above mentioned panel | 4 | Ms Amanda Cromhout |
| | | 19 March 2018 |
EXECUTIVE SUMMARY

Married Couples’ Perceptions of Relational Strengths in the Context of a High-risk Community

Problem Statement

People living in high-risk communities are continuously exposed to the impact of poverty, unemployment, violence, and limited resources which have detrimental consequences for families. These stressors have additional strains on family roles. Although married couples’ relationships are challenged, many couples stay committed despite adversities.

Aim

The aim of this study is to explore and describe married couples’ perceptions of relational strengths in the context of a high-risk community.

Method

A qualitative descriptive approach will be used, since the student aims to explore and describe the perceptions of married couples regarding relational strengths in a high-risk community. The World Café method will be used to collect data.

Expected Outcome

The outcome will entail a better understanding of the perceptions of married couples living in a high-risk community about relational strengths to enjoy a committed relationship.
Married Couples’ Perceptions of Relational Strengths in the Context of a High-risk Community

Vasti Nortjé
29645824

Proposal submitted for the degree Master of Arts in Positive Psychology

In the
Africa Unit for Transdisciplinary Health Research
Faculty of Health Sciences
North-West University
Potchefstroom Campus

Supervisor: Dr. Izanette van Schalkwyk

Co-supervisor: Dr. Lizanlé van Biljon
Research Proposal: Master of Arts in Positive Psychology – Vasti Nortjé

Proposed Title: Married couples’ perceptions of relational strengths in the context of a high-risk community

Key words: marriage, high-risk community, strengths, positive psychology, resilience, relational strengths

Introduction

A committed, intimate, and romantic relationship is important for married couples to enjoy the benefits of well-being and a healthy life (Kantrowitz & Wingert, 1999; Frost & Forrester, 2013). Many researchers are in agreement that people in positive, loving, and lasting relationships show certain characteristics and behaviours, such as the expression of gratitude, shared humour, constructive conflict management, and meaningful communication (Fincham & Beach, 2010; Gottman, 2007; Gottman & Silver, 2000; Roffey, 2012). While such behaviour is typical to healthy relationships and the “good times”, Ungar (2015) mentions that these actions are also vital for the “bad times”. For example, a couple’s ability to communicate effectively can also facilitate healthy interaction when they are faced with stressors. In addition, the intentional nurturing of these characteristics and actions, which includes married couples’ relational strengths, is important (Finkel, Cheung, Emery, Carswell, & Larso, 2015; Gable & Reis, 2010; Meunier & Baker, 2012).

Divorce, on the other hand, is linked to extensive and negative impact on the individual’s mental health, productivity, and relationships with families and the bigger community (Coontz, 2006; Hiami & Lerner, 2016; Kaslow, 2001; Murray, 2014;). The rising divorce rate is a cause of great concern and Statistics South Africa (2017) indicated that there was an 2,3% increase in divorce statistics from 2014 to 2015. Despite the rising divorce rate, Banovcinova and Levicka (2015) emphasise that there are married couples that succeed to create a safe environment for their family members even under difficult conditions.
Literature on marriage and relationships frequently reports on intervention programs for struggling relationships or tend to have a strong focus on couples in need for marital therapy (Bolier et al., 2013; Du Toit, Wissing, & Khumalo, 2014; Seligman & Csikszentmihalyi, 2000; Tucker & Crouter, 2008). Married couples who have the ability to manage their challenges effectively and enjoy a thriving relationship are seldom reported on (Tucker & Crouter, 2008). From a Positive Psychology perspective, researchers such as Gable and Haidt (2005) conducted studies on how to cultivate a fulfilling and lasting marriage. Also, resilience studies from the same school of thought show that when married couples experience a healthy relationship they can deal with stressors in a resilient manner by adapting and recovering, even if they are living in challenging circumstances (Masten, 2015; Ungar, 2015).

Felner’s definition of a high-risk community (2006) is a proper description of the selected environment in the Western Cape. It refers to poverty, poor standard housing, high incidence of crimes (e.g. murder, theft and rape), alcohol- and substance abuse problems, violence (such as gang violence and domestic violence), few options of after-school care, and lack of exposure to positive role models. Married couples living in a high-risk community are examples of people who are faced with many socio-economic difficulties that could impact their health and well-being negatively (Mash & Wolfe, 2006) due to restricted access to social, physical, relational, and economic resources. It must be emphasized that married couples living in a high-risk community are exposed to these various stressors and difficulties recurrently. To illustrate, the incidence of high levels of crime in a high-risk community implies that people’s safety is at risk, such as when a husband or wife leaves their residence they always have to be cautious as to being robbed and/or attacked, or being exposed to gang violence. These experiences, i.e. the constant fear of being attacked, bring about distress for married couples residing in a high-risk community. While these external dangerous conditions and stressors are mostly not in the control of couples living in a hostile environment, some couples do have the capacity to nurture their marital resilience despite the adversity (Masten, 2015). But, this
capacity involves deliberate efforts to invest in the relationship, such as, committing to the
growth of the relationship; and, to savour shared mutual activities and goals (Strachman &
Gable, 2006). It is noteworthy that these researchers emphasize that a focus on relational
strengths in research and practice do not necessarily imply the avoidance or absence of
negative behaviour. The understanding of how married couples in a high-risk community in the
South African context, apply relational strengths to face adversities and effectively overcome
their difficulties and hardship (Seccombe, 2002) is vital toward the strengthening of families as
the core of society (The White paper on Families, 2012). In the light of this need, this study
aims to explore married couples’ perceptions of relational strengths in the context of a high-
risk community.

Background/Research Context

Delft, situated in the Western Cape, is divided into six sub-areas: Rosendal, Leiden, The
Hague, Eindhoven, Delft South, Tsunami, and a temporary housing section that was set up in
2007, called Blikkiesdorp (Mortlock, 2015). Delft was established in 1989 and is
accommodating residents that experience high levels of unemployment, gender-based
violence, xenophobic violence, gang violence, cultural diversity, low cost housing, shacks, and
a high number of backyard dwellers (Mortlock, 2015; Western Cape Youth Development

In 2011 the population of Delft was 152 031 (Stats SA, 2014), where 21% reporting no
income, 14% reporting an income of less than R10 000 per annum, and 45% an income of less
than R38 400 per annum. As a result of poor people relocating from areas such as Nyanga and
Mitchells Plain to Delft and the challenging economic situation, the community of Delft
became poorer with the increase of unemployment (Statistics SA, 2014). The concentrated
poverty in these communities increases married couples’ vulnerability to risks, such as,
domestic violence, crime, gang violence, disease and limited access to social and economic
These communal stressors imply additional strains for the roles within families. Coley and Lombardi (2014) refer to the monetary causes of these strains due to unemployment, and scarcity of employment opportunities. In other words, when a married couple (husband and wife) is facing the inability to supply financially in their families’ needs, then it is highly probable that they will experience high levels of anxiety (Perkins, Finegood, & Swain, 2013). Clearly, these external stressors could have a negative impact on the functioning of a family (Coley & Lombardi, 2014; Perkins, Finegood, & Swain, 2013), including a couple’s relationship.

The student has a distinct interest in flourishing families and specifically the relational strengths of competent married couples. Through interaction with Pastor Kobus Pauw, a service provider (through Connection Impact) of many years in the Delft community, it became evident that many married couples in this high-risk community display remarkable relational strengths despite adversity. The student decided to do the study in the Delft community (see figure 1, p.10), in the Western Cape, because it is one of the identified high-risk communities in South Africa (Stats SA, 2014), and no studies have been identified with a focus on married couples’ relational strengths in this particular community. Existing literature in this particular high-risk community was found on topics such as learners’ perceptions and experiences of respect in educator-learners relationships (Grimova & Van Schalkwyk, 2016), assessment of resilience across cultures to construct the Child and Youth Resilience Measure (Ungar & Liebenberg, 2011), and, educators’ experiences of their relationships with adolescents involved in drug use (Walton, Avenant, & Van Schalkwyk, 2016). Seemingly there is a gap in existing literature with a focus on married couples’ relational strengths in this particular high-risk environment, called Delft.

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1 The name of the community is made known as the study will concern itself only with participants from this particular community. The student is acutely aware of the recommendations by the North West research ethics committee as to protect the communities from harm.
Problem Statement

Although individuals and married couples can experience distress and conflict because of restricted resources, these high-risk communities often possess a wealth of resilience-promoting resources (Ramphele, 2003; Roos & Temane, 2007). Boddy, Agllias, and Gray (2012) agree by saying that all people have strengths and capacities which they harness to address adversity. Married couples that enjoy a good quality relationship will make use of these strengths to ensure flourishing (Fincham & Beach, 2010; Fowers & Owenz, 2010). According to Du Toit, Wissing, and Khumalo (2014) married couples in loving committed relationships shared typical characteristics and behaviours, for example, they enjoy a deep friendship, have fun together, share interests, and have meaningful communication. Married couples also show relational competence by making use of constructive conflict management skills and by using
words to strengthen their relational connectedness (Feeney & Collins, 2013; Littman-Ovadia & Steger, 2010).

Good interpersonal relations and a good state of physical, mental, and social well-being are integral to healthy families (The White Paper on Families, 2012). The promoting of relational strengths, such as effective communication and the importance thereof in couples’ relationship building and functioning are well-documented (Bandura, Caprara, Barbaranelli, Regalia, & Scabini, 2011; Liermann & Norton, 2016). According to Banovcinova and Levicka (2015), communication is an essential aspect of married couples’ functioning to achieve a shared reality and to ensure an overall family connectedness. However, many married couples, particularly people residing in high-risk communities such as Delft, are vulnerable due to a lack of interpersonal skills, such as problems associated with ineffective conflict management (Cronjé-Malan & Van Schalkwyk, 2015). The lack of interpersonal skills and the destructive impact thereof is associated with married couples who are suffering economic instability (Banovcinova & Levicka, 2015). In this sense, poverty and exposure to the enduring impact of lack increase possibilities of negative consequences for married couples living in Delft (Cronjé-Malan & Van Schalkwyk, 2015; Felner, 2006). Peterson, Grobler and Botha (2017) refer to this as the spill-over effect. This means that families who live in high-risk communities and are exposed to social ills such as fractured families and domestic violence, are at greater risk that their resources and relational strengths are seriously challenged.

In contrast to the various threats regarding the relational strengths of married couples’ who are residing in a high-risk community, the focus of the study will be to explore the perceptions of married couples’ on relational strengths and how to manage a relationship despite stressors associated with a high-risk community. Studying the nature of married couples’ relational strengths is typical to the approach of Positive Psychology.
Positive Psychology

Positive Psychology is the scientific study of how to enable people and communities to thrive (Wissing, 2014). Positive Psychology has managed to shine a light on flourishing and it offers a set of tools to promote flow, meaning, and healthy relations (Fredrickson, 2009; Lyubomirsky, 2008; Seligman, 2011). According to Du Toit, Wissing, & Khumalo (2014) and Rothmann (2014) flourishing individuals typically have high levels of well-being and a positive relationship with their significant others and their close friends. Flourishing requires active engagement with personal behaviours, emotions, and thoughts. Of particular interest for this study is that engaging in certain positive behavioural routines, such as forgiveness and counting one’s blessings has been found to increase subjective well-being and decrease the risk of mental illness (Keyes, Dhingra, & Simoes, 2010). In addition to these behavioural routines, Fredrickson (2009) has shown that the daily use of positive emotions, such as joy, gratitude, serenity, interest, hope, pride, amusement, inspiration, awe, and love offers important resources for flourishing. Also, the application of practices such as reframing adversity into opportunity, savouring good moments, following your passion, using your strengths, and connecting with others are all pathways towards flourishing (Fredrickson, 2009).

Evans and Prilleltensky (2007) indicate that the well-being of any one person is highly dependent on the well-being of his/her relationships and on the community in which he/she resides. Well-being may be defined as a positive state of affairs in which the personal, relational, and collective needs and aspirations of individuals and communities are fulfilled (Bolier et al., 2013). As such, well-being refers to a satisfactory state of affairs for individuals and communities that encompasses more than the absence of risk. To illustrate, flourishing families are viewed in terms of the presence of strengths, such as warmth and appreciation, respectful communication patterns, shared humour, play and laughter, a spiritual orientation and well-being, and effective management of conflicts, stress and life challenges (Van Schalkwyk, 2018, submitted). Therefore, the focus of Positive Psychology on flourishing
individuals, families, and healthy communities infers that the presence of well-being is unlike the mere absence of ill-being (Keyes, 2005).

According to Ng and Fisher (2013) it is not sufficient to merely diffuse the “negative landmines” in order to protect a family’s well-functioning, but certain factors must be nurtured intentionally to promote individuals and families’ flourishing. In this sense, what Rutter (1985) called “reduction of risk impact” (cf., resilience studies) implies the decreasing of risk factors and the deliberate increasing of protective factors. It is important to clarify that the lens of Positive Psychology and its approach to well-being and flourishing transcends traditional medical and psychological approaches to disease and disorder.

**Positive Psychology and Healthy Relationships**

Seligman and Csikszentmihalyi (2000) posed that psychology has to shift its emphasis of mainly correcting the weaknesses of an individual towards exploring human strengths and virtues. In other words, within traditional Psychology efforts to improve relationships would typically entail the elimination of negative attitudes and emotions associated with divorce, conflict, or betrayal (Bolier et al., 2013). In contrast, the Positive Psychology approach aims to understand and enhance those behaviours and elements that nurture/foster thriving relationships (Du Toit, Wissing, & Khumalo, 2014). However, the intentional developing of flourishing families and fully functioning people does not disregard human suffering. Positive relationships, as experienced by married couples, entail the practice of supportive and loving interaction despite negative circumstances (Meunier & Baker, 2012). Within the theoretical framework of Positive Psychology, the protection and promotion of a flourishing relationship is defined by meaningful connection and actions that help partners to develop as individuals and also as a couple (Du Toit, Wissing, & Khumalo, 2014).

**Rationale of the Study**

Regardless of numerous studies with a strong focus on marriage and relational dynamics (DeFrain & Asay, 2008; Greeff, 2000; Robinson & Blanton, 1993; Viljoen, 1994),
the student found no studies about married couples’ perceptions of relational strengths in the context of a high-risk community. Existing research typically covers, for example, marital strengths in enduring marriages, strengths and weaknesses in the family life of black South Africans, characteristics of families that function well, and strong families around the world (DeFrain & Asay, 2008; Greeff, 2000; Robinson & Blanton, 1993; Viljoen, 1994).

It is crucial to take into account the context of family functioning, since challenging socio-economic circumstances can have a severe impact on the health and well-being of married couples (Mash & Wolfe, 2008). In South Africa, Cape Town is viewed as one of the cities with the highest levels of socio-economic inequality (Booyens, 2012). Therefore, the impact of poverty and inequality deterring the family, and especially married couples, from playing its various roles in society, cannot be ignored. In addition, Cherlin (2010) found that the divorce rate is higher in couples with a low income and low education level. Clearly, context, such as high-risk communities and its numerous risks add to married couples’ vulnerability (Dubois et al., 2014; Felner, 2006). While it is important to understand how married couples manage and overcome adversities, it is also needed to focus on their perceptions of how to nurture and intentionally encourage a happy and fulfilling marriage (Coley & Lombard, 2014). Therefore, the student decided to address the scarcity on marital relationships in a high-risk community, from a Positive Psychology approach, by exploring married couples’ perceptions of relational strengths.

**Research Question**

The research question directing the planned study is formulated in the following way:

What are married couples’ perceptions of relational strengths in the context of a high-risk community?

**Aim**

The aim of this qualitative study is to explore and describe married couples’ perceptions of relational strengths in the context of a high-risk community.
Paradigmatic Choices

Constructivism embraces the viewpoint that individuals, through cognitive processes, mentally construct their experiences in this world. Social constructionism entails how construction moves from an individualistic focus to the society focus (Young & Colin, 2004). From a social constructionist paradigm, the goal is to understand the world through the lived experiences from the perspective of those who live in it (Andrews, 2012). Therefore social constructivism is the paradigmatic choice for the study at hand. According to Schwandt (2003) social constructionists assert that knowledge and truth(s) are constructed rather than being discovered by the mind. Berger and Luckmann (1991) maintain that though social reality is socially defined, it is shaped by the subjective experience of individuals in everyday life, rather than by the objective reality of the natural world. A person’s “reality” is therefore dependent on his/her interaction with reality, which include other persons and groups. Therefore, collected data will be understood and viewed as consistent with the recognised importance of this approach in research concerning individuals in their context (Loftus & Higgs, 2010).

Research Design

The student will make use of a qualitative descriptive design to explore married couples’ perceptions of relational strengths in the context of a high-risk community. This emphasis on the understanding persons’ subjective experiences and the exploration of their reality (Creswell, 2014) entails that the student will be sensitive to participants’ cultural differences and open to shared experiences (Tillman, 2002). Researchers using a descriptive design “stay closer to their data and to the surface of words and events” (Sandelowski, cited in Colorafi & Evans, 2016, p.17). Also, this design is a good fit for the planned study, because qualitative description is grounded in the general principles of naturalistic inquiry (Webb & Auriacombe, 2006). Therefore, a qualitative descriptive study will be used to explore and describe (i.e. the research design as the “how of the study”) married couples’ (“who”) perceptions regarding relational strengths (i.e. the “what”) in a high-risk community (“where”).
Method

Sample Population and Sampling Method

A sample will consist of married couples residing in all six sub-areas in Delft (Western Cape), a high-risk community with challenging socio-economic circumstances (refer problem statement). Participants will be recruited by using a purposive sampling technique, since this manner of recruitment will be a proper fit for the study. Persons complying with the required standards (see inclusion criteria) would be able to provide information-rich data (Fouché & De Vos, 2011; Strydom, 2011; Braun & Clarke, 2014). In this study, where the participants are unknown to the student, the gatekeeper will be asked to appoint a mediator to identify potential participants.

Participants

Twenty four married persons from the Delft community will be invited to participate in the research (see procedure for more information as to the number of participants). It will not be a condition that both members of a couple should participate. In other words, any married person who complies with the inclusion criteria will be able to take part. In qualitative research there are no fixed rules for sample size, seeing that quality is determined by the information obtained from participants rather than on the sample size. According to Creswell (2014), it is important to obtain information-rich data. Data saturation occurs when no or little new information is obtained and mostly a repetition of previous participants’ input is found (Grove, Burns, & Gray, 2013). It is proposed that data saturation will be achieved with 24 participants, since the contributions of all 24 participants will be part of the conversations guided by the six questions (see appendix B – interview schedule) (Polit & Beck, 2012).

The following criteria will be used to direct the recruitment of participants:

- Hetero-sexual married individuals: Marriage represents commitment, and even in the most devoted relationship people can easier be disloyal to their partner as in a marriage where a contractual agreement was made (White, 2010). In Deft, marriage is associated
with commitment; versus, couples living together which means that one of the partners could leave without any undertaking towards a long-term relationship (Van Schalkwyk, submitted 2018). Therefore, the focus of this study will be married couples.

- **Years of marriage:** Individuals must be members of couples married more than five years, because after five years couples have moved pass the romantic “honeymoon” phase and are now in the “reality phase” where they either give up on the marriage or look for healthy and satisfying ways of interacting and creative ways to manage their differences (Hartwell-Walker, 2016; Weinder-Davis, 2009).

- **Language:** Be able to communicate and understand Afrikaans or English, because it is the home language of most of the residents in Delft and the languages in which the study will be conducted.

- **Participation will be voluntary.**

- **Participants will be willing to be digitally recorded.**

The exclusion criteria will entail the following:

- **Homo-sexual married couples:** The prevalence of homo-sexual couples who are married is rare in the Delft community. Personal Conversation: “I will be very surprised if you find homo-sexual couples being married in the Delft community” with Dr Desmond Painter – expert as to high-risk communities, 12 April 2018 @ 09:10).

- **Married couples who are not permanent residents of Delft, such as temporary dwellers.** The reason is that inclusion of temporary dwellers could pose problems for the research team, since they could move to new locations and then it would be difficult to find them for the data collection and feedback of research findings.

When approval for the research has been obtained from the health research ethics committee (HREC) of North-West University, then Pastor Kobus Pauw, from Connection Impact, will be approached to act as gatekeeper. Although he is not a leader or Pastor in the Delft community, he was involved in assisting with the strengthening of married couples’
relationships in the Delft community in 2011. The student will give him all the needed information, such as the aim of the research and the research procedure. Based on his recommendation, an appropriate mediator and independent person will be identified. Both the mediator and independent person will be residents of the Delft community with the needed competence to approach potential participants, for example the ability to explain to possible participants the information as covered, for example, in the informed consent document (ICF). The appointed mediator will be trained by the student on a particular day and time regarding all aspects of recruitment and the independent person will be trained regarding completion of ICF. The mediator will approach possible participants, who fit the inclusive criteria and are able to answer the research questions and explain to them the aim and procedure of the research as described in the informed consent form (Appendix C). Participants will be asked by the independent person to complete the informed consent form (Appendix C). They will be given one week to both consider their participation and to ask questions prior to participation. Participants will be informed that if they decide not to participate, the decision will not jeopardize them in any way (Stevens, 2013).

Data Collection

Data collection will take place at Hindle High School in Delft. The school has a media room/school library with adequate space. Data collection will take place on a Saturday so that participants who work during the week can also partake. The participants’ transport will be remunerated (see budget).

The World Café method is a research tool utilized to collect data in a qualitative field and will be used in this study. For the current study an interview guide will be used (see Appendix B) to complement the World Café and it will be based on certain themes found in existing literature. Brown, Isaacs & the World Café Community (2005) indicate the need for good questions as a pathway to cultivate new or broader insights by means of collective
wisdom. The World Café, as a data collection method, will be discussed in the following paragraph.

**World Café**

John Gottman, who did research on marriages, invited married couples to visit his laboratory that was arranged like a living room. He wanted couples to feel comfortable and talk to each other as if they were at home. By encouraging married couples to discuss certain issues, he then gathered data for his research (Fredrickson, 2009). Just as Gottman got his data by getting his participants to talk to each other in an informal setting, Juanita Brown and David Isaacs learned about the World Café method in 1995, when they invited business and academic leaders to meet at their home for a large-circle dialogue. Due to bad weather, they had to split into small, intimate groups and answered the questions on paper tablecloths. Every few minutes they moved to another table to discuss a different question (Brown, et al., 2005). Brown et al., (2015) are of opinion that many solutions where created while people gathered together in informal conversations to discuss questions, share knowledge, consider possibilities, and create actions. That is also the reason why the student decided on the World Café method to obtain data, since people already have wisdom and creativity within them to confront even the most difficult challenges.

The World Café is reported as being consistent (Bradbury, 2015), and it succeeds in bringing people closer together and giving them the opportunity to be creative and caring while discussing important issues. Thousands of people in South Africa and internationally had made use of the World café method to foster authentic conversation between people that have never met each other and have no formal dialogue training (Brown, et al., 2005). The World Café is a fun, engaging and creative method that works well in any culture, among different age groups, in any circumstances and in different communities and organizations (Brown, et al., 2005).

The World Café have seven core principles, namely:
**Set the context**

Attention must be paid to three key elements, namely the purpose of the meeting, the participants that should be part of the conversation, and the parameters. The purpose of the meeting will determine the participants that need to attend (Brown et al., 2005; Carson, 2011). Attention will also be given to the procedures and matters related to maintain confidentiality; and certain “group rules” will be in place, for example, participants will undertake not to repeat any aspects of discussions during the World Café – data collection to fellow-participants or non-participants.

**Create a hospitable space**

A safe atmosphere must be created where participants feel welcome and where they have the courage to emerge in conversation. When people feel relaxed, they are more open to be themselves and think, speak and listen creatively (Brown et al., 2005). The student will make use of Hindle High School’s (that is centrally situated in Delft) spacious media centre to collect data. She will set it up like a café and cover the tables with colourful tablecloths, flowers, and refreshments. Each table will have two sheets of papers and colourful pens.

**Explore questions that matter**

The quality of the knowledge one wants from a group depends on the quality of questions one asks. Questions have to open the doors to new and creative discoveries. All participants have the right to express their opinion and there are no wrong answers (Brown et al., 2005).

**Encourage everyone’s contribution**

The student will ask the mediator to indicate six possible individuals, from the 24 participants, who would be willing to act as hosts at each of the six tables for six groups and each group will consist of four participants. The student will then arrange an opportunity on a day before the World Café event, to train the hosts. At this event she will allow enough time to explain the World Café procedure, give the hosts their instructions and answer possible
questions. Since these hosts will be participants there will be no need for “extra” informed consent forms (IFCs) to be completed, but their taxi fare/transport and the provision of snacks for the training session will be taken into account. At the World Café participants will be briefed on the practicalities of the method prior to engagements. The table host will encourage the participants not to just listen but also to participate in the conversation (Brown et al., 2005; Carson, 2011). Participants will be made aware of the fact that the World Café includes various rounds of conversation and for each round the participants will rotate between tables. Four people will sit at a table and discuss one question that the table host share with them. Everyone gets the opportunity to discuss the answer and write, draw or doodle their answers on the tablecloth with colourful pens. Each participant has their own unique experience that can be of value to others in the group. After 20 minutes of discussion, the table host will stay at the table, while the other people move as a group together to another table. The table host will welcome the new group at his/her table and share the question. The newcomers will then get the opportunity to answer the question. While moving between tables the participants meet new people, exchange perspectives, and gain enriched insights and new ideas from them (Knowledge Sharing Toolkit, 2017). The student will discuss confidentiality with the participants (acting as hosts) and these persons will be asked to sign a confidentiality agreement.

Connect diverse perspectives

The participants move between tables, to make sure that they share their life experiences and perspectives at each of the tables. New ideas spark again other ideas from other participants and it results in more knowledge. When people interact with each other it leads to optimal learning (Brown et al., 2005).
Listen together for patterns and insights

By practising collaborate dialogue and identifying themes and patterns, participants begin to discover creative connections between the contributions of the different participants (Brown et al., 2005).

Share collective discoveries

Conversations at the one table connect with conversations at the other tables. In the last phase, that is also known as the “harvest”, they will have a group discussion of about sixty minutes where the hosts get the opportunity to present and summarise the data, which the participants will then verify. They will have the opportunity to reflect on the themes, patterns and deeper meanings that came from the answers at their tables and the group can discuss it together until they reach data saturation (Brown et al., 2005).

The student will facilitate the World Café. For this study, there will be six groups and each group will consist of four participants. The World Café discussion at the six tables and the discussion of the hosts at the end of the session will be audio recorded with the participants’ permission. All recordings will be transcribed verbatim to access textual data. The paper tablecloths will be taken photos of and will also be included. An independent transcriber, Ms Elizabeth Le Roux, will be utilized and she will be required to sign a confidentiality contract.

Procedure

The 24 participants will be divided into 6 groups of 4 people at each table. That will take place in an informal manner by giving each participant a number as she/he enters the venue and specific numbers will be grouped together, e.g. numbers 1-3-5; and, 7. The student decided to include 24 individuals (not a bigger group), in order to ensure that each participant’s voice gets heard and that those who are reluctant to speak in bigger groups, will have the courage to speak up in the smaller group setup. Participants in small groups find it easier to communicate with each other (Brown et al., 2005). Participants will not be taking part as
couples in a group, in other words, couples will deliberately be separated in order to avoid any form of “power display” of their partners.

**Demographic Information**

The demographic survey will be used to obtain relevant biographic information about the participants as well as information about their living conditions (socio-economic status). (See appendix A). Therefore the purpose of this information is merely to provide a profile of the participants. This information will assist the student to understand the context of the participants. No information obtained via the overview will be analysed or used as research findings.

**Field Notes**

The student will make the following types of field notes (Groenewald, 2004):

**Observational notes (ON)**

The student will write down what happened during the data collection via the World Café and particularly those incidences that she values of importance as to a deeper understanding of the phenomenon.

**Theoretical notes (TN)**

The student will make notes on what she thinks or reflects on during the data collection experience.

**Methodological notes (MN)**

The student will make reminders, or cues of critique to herself on the process.

These field notes will be used as end-of-a-field-day summary or progress review. In addition, the student will also make use of personal reflections by means of journaling, which will ensure that she remains aware of her own attitude and possible biases. Reflexivity will ensure good quality research as it involves a process of continuously reflecting and being aware of the process that is taking place (Whittaker, 2009).
Data Analysis

Textual data will be obtained from the transcripts of the discussions during the World Café. This will cover the discussions of drawings, words and doodles on the paper tablecloths at the World Café session at each of the six tables as well as the sum-ups given by the hosts. The transcriptions of the collected data will be analysed and discussed in the light of recent literature. According to Niewenhuis (2016) data analysis entails the researcher to gain knowledge about a subject and describing it. In qualitative research the researcher forms part of the research process. He/she collects and understands data by examining documents, observing behaviour and/or interviewing participants. In this specific study, the student will follow certain steps to connect with the participants by understanding their perceptions related to phenomenon.

Data obtained via the demographical questionnaire will only be used to describe the population; and, this data will be depicted in table format. The textual data will be explored using content analysis to develop categories and explanations as described by Bengtsson (2016). The qualitative data will be derived from narrative materials with verbatim transcripts from the World Café method and field notes made. The following steps will be used:

Firstly, the student will familiarise herself with the data through reading it and re-reading the data, noting down the initial ideas. Transcription will be conducted by a transcriber Bengtsson (2016).

Secondly, coding will be data-driven as an inductive process. Analysis of the data will then begin through working through text passages (images deleted) one by one to form aggregated data units, first in codes and then by collapsing the codes into themes Bengtsson (2016). In-vivo coding will be made use of through naming a code from the selected text itself. A code book will be developed in Atlas.ti in order to give meaning to the codes that were developed. All identifying information will be removed from the transcriptions in order to
maintain anonymity. All different types of documents will be loaded onto Atlas.ti as Hermeneutic units.

Thirdly, the student will start looking for themes by collating codes into potential themes and organising all relevant data to each potential theme (Bengtsson, 2016).

Fourthly, themes would be reviewed through checking if the themes work in relation to the coded extracts and the entire data sets and then generate a thematic map of the analysis (Bengtsson, 2016). During this stage the code book will also be sent to the co-coder in order to verify the codes identified and data sets that should be linked to the codes. According to DeCuir-Gunby et al. (2011) a code book is a set of codes, definitions, and examples used as a guide to help analyse the data. This could be incorporated in Atlas.ti. After the completion of this phase defining and naming of the themes will take place. During this phase continuous analysis needs to take place in order to refine the specifics of each theme and also eventually creating clear definitions and names for each theme (this will be recorded in a code book (Bengtsson, 2016).

Finally, the report will be produced. According to Bengtsson (2016) this is the final opportunity for analysis where examples can be extracted, final analysis of selected extracts, relating back of the analysis to the research question and literature.

This means that a literature control will be done in order to establish whether the findings are congruent/or not to existing literature including recent research. Eventually the report will be produced in the format of, for example, journal article and a mini-dissertation (Bengtsson, 2016).

**Trustworthiness of the qualitative data**

While the validity and reliability indices of questionnaires are of key importance for quantitative research, the trustworthiness of qualitative research is dependent on how data is gathered and analysed (Fourie & Van der Merwe, 2014). Trustworthiness can be ensured when the following are applied well-established methods in qualitative investigation such as data
collection, data analysis, and the intervention process (Fourie & Van der Merwe, 2014). To ensure that the study is trustworthy the student will make use of Guba’s (1981) constructs for trustworthiness, namely credibility, transferability, dependability and confirmability. These concepts will be briefly discussed.

**Credibility**

Credibility is the process where the researcher makes sure that the information that was shared by participants is portrayed accurately and according to the participant’s view (Farrelly, 2013). Certain procedures will be in place to assist this process, such as, during the World Café method, participants will be allowed enough time to think about the questions and develop their answers. Each table will have an audio recorder and the information shared by the participants will be audio recorded to make sure that the results of the qualitative research are an accurate version of the collected data.

**Transferability**

Transferability refers to how the results and the assumptions that were key to the research, gets transferred to another context (Farrelly, 2013). The student will make sure that the accurate versions of participants’ viewpoints are produced (Guba, 1981). Thick descriptions of the information gained from the World Café will contribute to the transferability of descriptions and conclusions from the qualitative investigations (Teddlie & Tashakkori, 2009).

**Dependability**

This aspect of trustworthiness refers to the extent to which findings are consistent or dependable (Lincoln & Guba, 1985). It relates to the reliability of data over time and over conditions (Polit & Beck, 2012). The student and co-coder (Dr Marichen van der Westhuizen) will analyse the data separately and then discuss the possible themes to ensure that bias is limited. On a daily basis the student and co-coder can cross-check insights that emerged from the data and decide on the next step to be made. The student will also establish an “audit trail” so that the process of data analysing and interpretation can be audited by a competent person.
An audit trail refers to a process where all data gathering material (notes, audio recordings, questionnaires) will be stored in a file and some electronically and back-ups will be made. In other words, the worksheets and audio recordings will be available if necessary (Guba, 1981). A journal diary will be kept which will clearly describe the steps taken and the reflexivity within each step. Through this each decision made by the student will be justified and verified.

Peer debriefing: Upon completion of the initial analysis of data the student will send her analysis along with the notes and drawings (World Café method) to her supervisors and another peer in order to strengthen the trustworthiness of the analysis. Extensive dialogue with the student’s supervisors will be held via electronic and personal communication in order to consider the data analysis as trustworthy.

**Confirmability**

The construct refers to the assumption that the results can be confirmed by others (Farrelly, 2013). The student will document all the procedures and recheck the data during the study. She will actively look for any contradictions. All evidence of the verification of the findings and analysis will be kept to ensure confirmability. An audit can be done after the study to make sure there was no favouritism or misinterpretation (Farrelly, 2013). The student will also make use of a journal to write down findings and introspection (Guba, 1981).

Guba’s constructs ensure that the methods and practices of research are trustworthy, but Tracy (2010) also made a contribution towards that, namely by recommending that the research needs to have a worthy topic, has resonance, and that it has to make a significant contribution to others.

**Worthy topic**

The topic of the planned research is considered a worthy topic, seeing that there is a scarcity of research within Positive Psychology about the perceptions of married couples regarding relational strengths in the context of a high-risk community.
Resonance

The student will make sure by using the proper scientific process that the reader will be able to connect to the insights of the information gathered.

Significant contribution

The study aims to contribute to existing research and knowledge about marriages in the South African high-risk community context and offer valuable recommendations for future research. Moreover, the researchers working in an indigenous context, wish to join South African indigenous researchers to decolonize research methodology by gathering data via appropriate and culturally sensitive ways (Smith, 2008). The proposed research will contribute to these efforts within Positive Psychology.

In the next session the ethical concerns and risks are discussed. The present study will adhere to the ethical guidelines of the Ethics Committee of the North West University. These ethical considerations are discussed below:

Ethical Considerations

The research proposal for the current study will be reviewed by a small group of experts in the field and then by the scientific panel of the Africa Unit for Transdisciplinary Health Research (AUTHeR). Once the scientific panel has approved the protocol, ethical approval for the present study will be obtained from the Health Research Ethics Committee (HREC) of the North-West University, Potchefstroom, South Africa, which is registered with the National Health Research Ethics Council of South Africa. As detailed below, every effort will be taken to ensure the integrity of the data and the research process.

Ethical guidelines as provided by HREC will guide the research process, for example, by making sure that participants are familiar with the aim and objectives of the study and that they are protected against any intentional harm. A brief description of the following aspects is given to explain how these matters will be addressed in the planned study.
Recruitment of Participants

The purposive method will be used to recruit participants that adhere to the inclusion criteria. No incentives will be offered for participation, but participants’ transportation will be paid to attend the World Café. Snacks and water will be offered to enjoy during the data collection opportunity and a meal with juice after the World Café to compensate for possible inconvenience and long hours.

An appointed mediator, assigned by Pastor Kobus Pauw (Gatekeeper), and an independent person who are involved in projects in the Delft community, will be trained by the student. She will explain the purpose of the study, the procedures, the ethical aspects, and the role of the participants and the content of the informed consent forms. Then the mediator (a community worker) will approach potential participants from the different six areas in Delft who fit the inclusive criteria. He/she will explain to all participants that their responses will be used anonymously for analyses, that their participation will be completely voluntary, and that they will be free to withdraw from the study at any stage without consequence. No coercion will take place. The mediator will also explain the possible emotional repercussions, as well as the possible indirect benefits of participation. Participants will have the opportunity to ask any questions regarding the study to the principal investigator and research team.

When the aim of the research and the ethical aspects have been explained they will be given time to decide whether they wanted to participate in the study. If they confirm that they are willing to join the study they will be allowed time (one week) to consider their decision to take part in the study.

Informed Consent Form

As mentioned above, the appointed mediator will approach potential participants at their homes, before data gathering and explain to them the research procedure as described in the informed consent forms (ICFs) (see appendix C). The participants, with the help of an independent person, will have the opportunity to read through all the details and ask questions
in case of any uncertainty. Potential participants will have enough time to consider participation, namely one week. Once the ICFs are signed in the presence of the independent person, he/she will collect the ICFs and hand it to the student. This will be done before the World Café data collection opportunity. However, consent will not be understood as a once-off event, and this matter will again be clarified at the commencement of the World Café.

**Risk Level and Protection from Harm**

The purpose of the study is to explore married couples’ perception of relational strengths in the context of a high-risk community. The participants can be viewed as a vulnerable group, because they reside in a high-risk, resource-poor community and are exposed to many environmental risks, such as the high incidence of crime and domestic violence.

The supervisors will strictly monitor the research process and make sure that everything is done according to the research protocol. If it seems that amendments need to be made, it will be discussed with the supervisor and co-supervisor. If amendments are required, the supervisor will send an amendment to HREC. Only after this amendment is approved, the student will proceed with the research procedure.

**Possible Risks and Benefits to the Participants**

Although there will be no direct benefit for the participants, participation might hold potential indirect benefits. Participants will have an opportunity to contribute toward scientific knowledge by sharing their insight about the relational strengths of their marriage and learn from other married couples how to strengthen their marriage even more. Ultimately, the student hopes that the valuable contribution of the participants will contribute to the improvement of the quality-of-life of other married couples living in high-risk communities. Married couples can learn from each other on how to cultivate and maintain a committed relationship, despite adversities.

In the table below the possible risks and precaution will be discussed.
Table 1

Possible risks for participants

<table>
<thead>
<tr>
<th>Risks</th>
<th>Precaution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjectivity bias and intimidation</td>
<td>The student will, with the help of supervision, limit possible subjectivity, and be guided by the key issues related to trustworthiness.</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>The student will provide participants with the procedures in place to maintain confidentiality; and certain “group rules” will be in place, for example, participants will undertake not to repeat any aspects of discussions during the World Café – data collection to fellow-participants or non-participants.</td>
</tr>
<tr>
<td>Negative emotions while talking about their past difficulties</td>
<td>The student will create a safe environment where participants can share their opinions. Some “rules” will be stated before the commencement of the World Café discussion to encourage participants to show the needed respect and compassion. Since the content of the questions asked at the World Café will be mainly positive, the risks will be minimal and the in-direct benefits will outweigh any potential risks. The student will offer leaflets with the contact information of Life Line and a social worker from FAMSA (Mrs Daniels) that can assist if participants need such service.</td>
</tr>
</tbody>
</table>
**Monitoring of the Research**

Every effort will be taken to ensure the integrity of the data as well as the research process of the planned study will adhere to the application of the ethical guidelines of the ethical framework as approved by the Ethics Committee of the North-West University. The aim of the study will be achieved via using the qualitative approach and qualitative data analysis will be applied. All data will be captured anonymously and participants will in no way be identified during the analysis or reporting of the current study.

The study leader will complete a monitoring report indicating that the research is conducted in accordance to the proposal. This means that the research process will happen as discussed in the proposal’s methodology section. This report will also give information about the student’s regular contact (via email and telephonic) with the research supervisor and co-supervisor to discuss the research progress. The research proposal will be used as a reference point for discussion, to ensure compliance with the research proposal. Other issues of importance will be the student’s reflective journal throughout the research process in which reflections and observations will be written. These reflections will be used to understand the research and critically review the student’s understanding and experiences of the research process. Any ethical issues that may arise from the research could then be reflected and further discussed with the research supervisor(s).

The research will be critically reviewed and various aspects of the collected data (e.g. data analysis) will be critically reviewed by a co-coder. These critical reviews will allow the student to gain further insights into the research and assist the monitoring and evaluating the research throughout the research process.

If any incidents or adverse events do occur during data collection opportunities, this will be discussed with the research supervisor immediately, on the same day for guidance in dealing with the issue(s). If any amendments are needed to the research proposal, it will be reported to the Ethics Committee immediately and a request for the amendment will be send to
the Ethics Committee. The student will not continue with the research (collecting data from participants) until the amendment is approved by the Ethics Committee.

The student will keep a reflective journal throughout the research process in which reflections and observations made during the research and critically review the student’s understanding and experiences of the research process. Any ethical issues that may arise from the research could then be reflected and further discussed with the research supervisors.

**Confidentiality and Anonymity**

The independent person, trained by the student, will explain the purpose of the study, the procedures, the ethical aspects, and the role of the participants. A safe space will be created for participants to share their opinions and experiences. The student will discuss confidentiality with the participants and will agree that no confidential information that might be shared during the World Café method would be disclosed outside the session. The facility where the data will be collected will be arranged with Hindle High School since this school is centrally situated in the Delft area. Their spacious media centre will be used since at least 24 participants will partake. Privacy will be protected and the needed precautions will be used. A “not to be disturbed” sign will be used to prevent the entrance of uninvited persons. The security staff at the school building will assist with the safety of everyone involved.

An opportunity will be created for the findings of the research to be reported back to participants. Participants will be informed that the findings may be published in a scientific journal and that the data (audio recordings and paper sheets) will only be used for the purpose as stated in this proposal. Participants will get enough time to read through the information as presented in the informed consent form and the questions posed by them, will be addressed. The student will ask their permission to audio record their contributions at the beginning of the data collection opportunity.

Participants’ anonymity will be respected by not exposing their identity. This will be done in the following manner: Participants names will be replaced with pseudo-names or codes
to keep it confidential, and reported findings will be anonymous (Driscoll, 2011). Participation is voluntary and they will have the opportunity to withdraw at any stage during the research process without any negative consequences for them. Only when participants understand and are satisfied with the research procedures and ethical aspects, will they be asked to give written consent prior to their participation.

The co-coder and transcriber will be asked to sign a confidentiality agreement. Only the students and co-coder will have access to the data and will be able to look at the findings. Findings will be kept safe by locking hard copies in locked cupboards in the student’s office and electronic data will be password protected. Once the World Café discussions are conducted the recording device(s) will be locked in the mentioned cupboard in the student’s office, and within 24 hours the recorded information will be transferred to the student’s password protected computer. As soon as qualitative data has been transcribed it will be deleted from the recorders. Data will be stored for six years at the Potchefstroom campus (office of AUTHeR) after the student completed her studies and will be deleted via shredding by an appointed person of the AUTHeR office. The student will inform the participants, by making use of the informed consent form, about their right to privacy and to protection of the person (Strydom, 2011).

**Data Management Plan**

Only the student, her supervisors and co-coder will have access to the data and their laptops will be locked up when they are not working on it. All data and audio recordings will be saved on google drive and on the student’s laptop that will be secured by a password. The laptop will be locked up in a cupboard inside the locked office of the student. The names of the participants will not be used and pseudo-names or codes will be assigned to each participant during data capturing. Once the research dissertation and article(s) are complete (before the graduation ceremony), the student will hand over the raw data to the North-West University (Potchefstroom) for safekeeping and information of recordings will be deleted from her
computer. The data (hard copies) as well other versions of stored data will be destroyed after six years by an appointed person.

**Competence of Researchers**

The student, supervisors and co-coder have adequate experience in research. The supervisor, Dr I van Schalkwyk, has a PhD in Psychology, 12 years’ experience in higher education and has assisted many Masters and PhD students with their research. The co-supervisor, Dr L van Biljon, is a registered Research- and Clinical psychologist and has 5 years’ experience in higher education. The student has a PhD in Social Work (DSW) and is currently busy with her Masters of Arts degree in Positive Psychology. She worked at a NGO as a social worker for four years before she decided to join a corporate company. The skills and knowledge she attained as a social worker and the experience she gained by conducting structured and semi-structured interviews for her previous studies, equipped her to collect data by means of the World Café method.

**Dissemination of Results**

Once the research is completed, a summary of the main findings will be shared with the participants as a group at the same venue where the data gathering took place. The results of the research can also be presented at conferences and/or symposia focussing on strengthening families and/or marriage. One article will be published in a scientific journal. The journal considered for publication is “Journal for Family Relations: Interdisciplinary Journal of Applied Family Science”. (Possible title: Married couples’ perceptions of relational strengths in the context of a high-risk community).

**Publication**

The research report will be according to the one-article format (as indicated in rule A4.4.2.9) for dissertations and will be as follows:

**Structure**

*Title page*
Acknowledgements

Summary (with key words)

Table of contents

Preface

Letter of permission (from co-authors)

Section 1: Background and orientation/ literature review

Section 2: Manuscript for evaluation

  2.1 Author guidelines from journal for manuscripts (instructions to authors)

  2.2 Manuscript

Title page

Abstract

Introduction / Literature review /Problem statement and aim

Method

- Research design
- Participants
- Measures
- Procedure
- Ethical Considerations
- Data Analysis

Results

Discussion

References

  Section 3: Conclusions and reflection

Appendices
## Budget and Funding

Table 2

*Estimated research costs*

<table>
<thead>
<tr>
<th>Description</th>
<th>Estimated Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language editing</td>
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</tr>
<tr>
<td>Binding hard copies</td>
<td>R5 000.00</td>
</tr>
<tr>
<td>Copies</td>
<td>R1 500.00</td>
</tr>
<tr>
<td>Traveling to participants</td>
<td>R400.00</td>
</tr>
<tr>
<td>Travelling costs of participants</td>
<td>R750.00</td>
</tr>
<tr>
<td>Snacks and Meal for participants</td>
<td>R1 500.00</td>
</tr>
<tr>
<td>Co-coder</td>
<td>R1 500.00</td>
</tr>
<tr>
<td>Transcriber</td>
<td>R4 500.00</td>
</tr>
<tr>
<td>Courier services</td>
<td>R500.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>R27 650.00</strong></td>
</tr>
</tbody>
</table>

The student will be responsible for the budget.
References


Liermann, K., & Norton, C. L. (2016). Enhancing family communication: Examining the
impact of a therapeutic wilderness program for struggling teens and parents.

*Contemporary Family Therapy, 38*(1), 14-22. doi: 10.1007/s10591-015-9371-5


1.2 Approved HREC application

Standard Full Ethics Application Form

HREC Health Research Ethics Committee *(REC-130913-037)*

**HREC** Health Research Ethics Committee *(REC-130913-037)*

**Standard Full Ethics Application Form**

**to apply for the approval of** single or larger health and health-related scientific projects involving human participants and biological samples of human origin for research or education/training

_HREC 01-01a, version Nov 2016_

**CONFIDENTIAL!** This document contains confidential information that is intended exclusively for the applicant(s), the Health Research Ethics Committee (HREC) of the Faculty of Health Sciences of the North-West University and the designated reviewers. Should this document or parts thereof come into your possession in error, you are requested to return it to the HREC without delay or destroy it. Unauthorised possession, reading, studying, copying or distribution of this material, or any other form of abuse, is illegal and punishable.

**NWU Ethics Number:** [NWU-000610180S1](#) *(issued upon 1st submission)*

**Instructions and recommended path for the completion of your application:**

a. The research proposal forms the base document that is evaluated in conjunction with this application form. This application form gives the researcher the opportunity to expand on specific ethical issues required for approval.

b. All applicants complete § 0, 0, 0, 0, 0 and 0.

c. Select and complete the research-specific sub-sections from § 0 as applicable to the specific requirements of your study (utilise the table of contents).

d. Ensure that a proposal that has been approved by an appropriate Scientific/Research Proposal Committee is attached to the application form as well as proof of its approval according to the standardised template (see § 1.27).

e. Also attach an executive summary of the study (see § 1.27.1).

f. The applicants should ensure that a copy of the informed consent form for approval, that has been compiled according to the informed consent template and checklist supplied by the Faculty of Health Sciences Ethics Office for Research, Training and Support, is submitted with the ethics application form.

g. Any questionnaires or interview schedules that will be used in the completion of the study have to be attached

h. Any advertisements that will be used in the study have to be attached

i. Attach any permission letters received from governing bodies.

j. Attach any contracts with collaborators/sponsors.
k. For applications of collaborative studies being conducted on more than one site, it is required that copies of the proposal and the informed consent forms from all centres involved in the study are included with the application.

l. Attach a 2-page narrative CV for each of the researchers involved in the study.

m. Liaise with the appropriate officials and colleagues mentioned in § 0, complete and sign a printed copy.

n. Submit scanned copies of the signed pages.

o. Include copies of proof of ethics training for all researchers involved in the study (not older than three years).

p. Submit the completed Ethics Application Form (with all the required attachments) via e-mail to Ethics-HRECApply@nwu.ac.za.

q. All required documentation (as previously outlined) should be attached separately to the aforementioned e-mail as indicated in point p.

r. Applicants must please ensure that all required finalised documents as indicated above are included with the application. **No additional attachments or version correction(s) will be accepted.** If this does occur and the application was incomplete then it will have to be resubmitted with the application form and all the required attachments which could mean that the application may miss the deadline for the closing of the agenda for the HREC meeting.

---

<table>
<thead>
<tr>
<th>Campus</th>
<th>Faculty</th>
<th>Research entity</th>
<th>AUTHeR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Potchefstroom</td>
<td>Health Sciences</td>
<td>Marries couples’ perceptions of relational strengths in the context of a high-risk community</td>
<td></td>
</tr>
</tbody>
</table>
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SECTION 1: STUDY IDENTIFICATION

Provide the necessary descriptions below to identify this study application:

1.1 Full, descriptive title of the study
Married couples’ perceptions of relational strengths in the context of a high-risk community

1.2 Name of the Study Leader/Primary investigator NB! Not the student’s name
Dr Izanette van Schalkwyk

1.3 Name and Surname of the Student (if applicable)
Vasti Nortje

1.4 Student number
29645824

1.5 Discipline e.g. Consumer sciences
Positive Psychology

1.6 Researcher involvement
Self-initiated research with no student involvement
☐
Self-initiated research with student involvement
☐
Honours study for publication purposes
☐
Masters degree
☒
PhD degree
☐
Other: Specify [Click here to enter text.]

1.7 Type of study
Single study
☒
Larger study
☐
Single study affiliated to another study
☐
Educational
☐
Other: Specify [Click here to enter text.]

1.8 In this study use is made of
Mark ALL options as “Yes” or “No” with X in the appropriate box – more than one option may be marked as “Yes”.

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human participants (subjects)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualitative</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Quantitative</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Mixed method</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Other e.g. program evaluation</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Filed privileged information (e.g. medical files) or stored biological samples of human origin (e.g. samples collected for another study or medical diagnosis)</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>
1.9 Envisaged commencement and completion date of the study

More information
Here you can indicate the expected commencement and ending dates of the study, which may be anything from a day to a few years. The full expected duration of the study must be filled in below. Even if the expected duration of the study is uncertain, you can still make an estimate here and report the progress with the annual report. Ensure that the commencement date is at least a few weeks after the date of the HREC meeting at which your application is to be reviewed. The HREC will only grant ethics approval for a one year period. If the study should take longer, a monitoring report requesting permission for continuation must be submitted to the HREC two months before the expiry of the study.

<table>
<thead>
<tr>
<th>Commencement Date</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018/06/01</td>
<td>2018/11/20</td>
</tr>
</tbody>
</table>

SECTION 2: STUDY CLASSIFICATION

Complete every option of all the questions in this section. This section is used to classify your study and select suitable reviewers.

1.10 Name of the Ethics Committee handling the application

| Health Research Ethics Committee (HREC) |

1.11 Dates of applications
Fill in below the date of the first submission and revised submission (of applicable) of this ethics application

<table>
<thead>
<tr>
<th>Date of first application</th>
<th>Date of revise application (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018/05/02</td>
<td>[Click here to enter a date.]</td>
</tr>
</tbody>
</table>

1.12 Version number

Fill in the number of times this application has been submitted.

| Version | 1 |

1.13 Estimated risk level
Please indicate the estimated risk level of the research by using the two risk level tables indicated for adult human participants or children/incapacitated adults.

**Estimated risk level for adult human participants**

<table>
<thead>
<tr>
<th>Risk Level</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Minimal risk</td>
<td>☐</td>
</tr>
<tr>
<td>Medium risk</td>
<td>☒</td>
</tr>
<tr>
<td>High risk</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Estimated risk level for children/incapacitated adults**
No more than minimal risk of harm (negligible risk) ☐
Greater than minimal risk but provides the prospect of direct benefit for the child/incapacitated adult ☐
Greater than minimal risk with no prospect of direct benefit to the child/incapacitated adult, but a high probability of providing generalizable knowledge ☐

1.14 Context of the Study

Mark ALL options as “Yes” or “No” with X in the appropriate box – more than one option may be “Yes”.

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scientific Research</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Study falls within a research entity</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Study falls outside a research entity</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Study includes postgraduate students (e.g. masters or doctorate)</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Study includes contract work</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Education and training (e.g. undergraduate practicals)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For staff of the North-West University</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>For students (undergraduate or postgraduate learners)</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>For other learners (not associated with University)</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

1.15 This study encompasses aspects that require additional ethical explanation

Mark ALL options as “Yes” or “No” with X in the appropriate box – more than one option may be “Yes”. If a specific option is marked please complete the corresponding section in Section 0.

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vulnerable participants</td>
<td>☒</td>
<td>☐</td>
</tr>
<tr>
<td>Infection, genetic modification and commercialisation of cell and tissue lines</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Use of drugs / medicines</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Use of drug delivery systems</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Use of food, fluids or nutrients</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Use of radio-active substances</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Use of toxic substances or dangerous substances</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Measuring instruments and questionnaires that need psychometric interpretation</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Possible impact on the environment</td>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>
Any other aspect of potentially ethically sensitive nature (specify below) □ ☒

Other aspects (specify)

Click here to enter text.

1.16 For this study the following persons will be included in the study team

Fill in the number concerned with ALL options. Ensure that the participant numbers in this table correspond with the individuals indicated in Section 1.18, 1.19 and 1.21.

More information

The study leader is generally viewed as the individual who takes the final responsibility for all aspects of the study e.g. study leader or principle investigator. The study supervisor is generally the individual responsible for the day-to-day management of the study.

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Number</td>
</tr>
<tr>
<td>Only for research studies</td>
<td></td>
</tr>
<tr>
<td>Study Leader (e.g. study leader/principle investigator)</td>
<td>2</td>
</tr>
<tr>
<td>Study supervisor (day to day manager)</td>
<td></td>
</tr>
<tr>
<td>Co-workers (researchers of the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Co-workers (researchers outside the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Co-workers (postgraduate students of the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Assistants/field workers</td>
<td></td>
</tr>
<tr>
<td>Only for education and training (e.g. undergraduate practicals)</td>
<td></td>
</tr>
<tr>
<td>Educator</td>
<td></td>
</tr>
<tr>
<td>Co-workers (lecturers of the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Co-workers (lecturers outside the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Students (undergraduate learners of the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Students (postgraduate learners of the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Other learners (not associated with the North-West University)</td>
<td></td>
</tr>
<tr>
<td>Assistants/field workers</td>
<td></td>
</tr>
<tr>
<td>Sponsors</td>
<td></td>
</tr>
</tbody>
</table>

Other members of the study team not mentioned above (specify)

Not applicable
1.17 The following professional supervisory persons are involved in this study (may in no way be directly part of the research team)

<table>
<thead>
<tr>
<th>Researcher / Supervisor</th>
<th>Number</th>
<th>Researcher / Supervisor</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervisory Doctor</td>
<td>0</td>
<td>Supervisory Psychologist</td>
<td>0</td>
</tr>
<tr>
<td>Supervisory Nurse</td>
<td>0</td>
<td>Supervisory Pharmacist</td>
<td>0</td>
</tr>
<tr>
<td>Supervisory Psychiatrist</td>
<td>0</td>
<td>Supervisory Social worker</td>
<td>0</td>
</tr>
</tbody>
</table>

Other supervisory person (specify)
[Click here to enter text.]

I hereby declare that the above information in “Section 0: Study Classification” is complete and correct and that I did not withhold any information.

[☒] Yes  [☐] No

Remember to save your document regularly as you complete it!
### Section 3: Detail of Study Leader/Principal Investigator, Co-workers and Supervisors

#### 1.18 Details of Study Leader/Principle Investigator

<table>
<thead>
<tr>
<th>Surname</th>
<th>Full Names</th>
<th>Title</th>
<th>NWU Campus</th>
<th>Faculty</th>
<th>Research entity/School</th>
</tr>
</thead>
<tbody>
<tr>
<td>Van Schalkwyk</td>
<td>Izanette</td>
<td>Dr</td>
<td>Potchefstroom</td>
<td>Health Sciences</td>
<td>AUTHeR</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Position</th>
<th>University No.</th>
<th>Professional Registration (body &amp; category)</th>
<th>Telephone</th>
<th>NWU-box or Postal Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Lecturer</td>
<td>20977026</td>
<td>Click here to enter text.</td>
<td>[021–8643593] 021-9758450 0723677739</td>
<td>PO Box 1083, Wellington, 7655</td>
</tr>
</tbody>
</table>

**E-mail Address**: [20977026@nwu.ac.za]

**[PLEASE ATTACH THE TWO-PAGE NARRATIVE CV OF THE STUDY LEADER]**

#### 1.19 Details of Study Supervisor

Is the Study Leader also the study supervisor?

(Please mark with X in the appropriate box.)

---

**More Information**

**NB!** A 2-page CV in a narrative format, giving a brief overview of:
- a researcher's qualifications
- career path to date
- specific research experience applicable to the present study (e.g. methodology or skills required)
- supervisory experience
- publication list (for the past 4 years)

---

**More Information**

Where the Study Leader is not physically present or consistently available and where supervision of the research activities is necessary, a suitable researcher/lecturer may be designated as study supervisor. The study supervisor is part of the study team.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>
If “Yes”, this part can be left blank.
If “No” (i.e. if the Study Leader is not the Study Supervisor) give details below.

<table>
<thead>
<tr>
<th>Surname</th>
<th>Full Names</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NWU Campus</th>
<th>Faculty</th>
<th>Research entity/School</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Position</th>
<th>University no.</th>
<th>Professional Registration (body &amp; category)</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Telephone</th>
<th>NWU-box or Postal Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work</td>
<td>Home</td>
</tr>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

[PLEASE ATTACH THE TWO-PAGE NARRATIVE CV OF THE STUDY SUPERVISOR]

**More information**

**NB!** A 2-page CV in a narrative format, giving a brief overview of:
- a researcher's qualifications
- career path to date
- specific research experience applicable to the present study (e.g. methodology or skills required)
- supervisory experience
- publication list (for the past 4 years) (if applicable)

1.20 Professional Supervisors

This section is completed if applicable and mentioned in Section 1.17.

**More information**

Professional supervisor does not refer to the study leader or the study supervisor. In all cases where medical emergencies may possibly arise, the physical presence of a doctor and a registered nurse is required. For the drawing of blood samples (e.g. diet manipulation and similar studies) the presence of a registered nurse is sufficient.

1.20.1 Name and qualifications of all supervisory professional persons

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
<th>Professional Registration</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

(Type one name per row, or type “Not applicable” if there is no supervisory person.
In last table cell, click on [tab] to add another row)
1.21 Other Members of the Study Team

Names, qualifications, professional registration and functions of all the other co-workers (researchers, postgraduate students in the case of a research study, or lecturers (in the case of training) and assistants/field workers who form part of the study team) should be indicated. The information given in this table should correspond with the number of team members given in Section 1.16 (Add extra rows to the table if required.)

<table>
<thead>
<tr>
<th>Name</th>
<th>Qualifications</th>
<th>Professional Registration</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Izanette van Schalkwyk</td>
<td>PhD Psychology</td>
<td></td>
<td>Supervisor</td>
</tr>
<tr>
<td>Dr Lizanle van Biljon</td>
<td>PhD Psychology</td>
<td>HPCSA – PS0115266</td>
<td>Co-Supervisor</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “none” if there is no other team member.

1.22 Conflict of Interests and Sponsors (if applicable)

1.22.1 Declare with full details any conflict of interests that any member of the study team or professional supervisor (see § 1.18, 1.19, 1.20 and 1.21) might have.

Examples of conflict of interest: financial, non-financial: intellectual, bias, overly optimistic promises of potential benefits, role of the researcher/s, desire of professional advancement, desire to make a scientific breakthrough, relationship with participants.
1.22.2 Give full details of all sponsors of the study.

<table>
<thead>
<tr>
<th>Name of Sponsor</th>
<th>Contact Details</th>
<th>Affiliation &amp; Contribution</th>
<th>Nature &amp; Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “Not applicable” if there are no sponsors. Add extra rows to the table if required.

1.22.3 Is any participant in the study directly or indirectly involved with one or more of the sponsors or the researchers? Give full details.

<table>
<thead>
<tr>
<th>Name of Participant</th>
<th>Association with Sponsor/Researcher</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “Not applicable” if there are no such participants. Add extra rows to the table, if required.

1.22.4 Does any member of the study team receive any form of remuneration or other benefits from the sponsor(s), either directly or indirectly? Give full details.

<table>
<thead>
<tr>
<th>Name of Team Member</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “Not applicable” if there are no such team members. Add extra rows to the table if required.

1.23 Collaborations (if applicable)

Declare with full details all collaboration agreements, e.g. with researchers or lecturers from another institution, national or international, who will be working on a defined section of the study.

More information

Your local team may collaborate with a team from a different national institution in South Africa or internationally, and thereby incorporate and benefit from their expertise and/or facilities. Typically, in such cases, functions and responsibilities differ for certain parts of the study. These functions and responsibilities must be fully described.

<table>
<thead>
<tr>
<th>Name of Collaborator</th>
<th>National/International (Indicate which)</th>
<th>Full Description of functions and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “Not applicable” if there are no contractors. Add extra rows to table, if required.

1.24 Contractual Agreements (if applicable)
Declare with full details all contractual agreements (e.g. with team members, collaborators and sponsors) on the study. Please note: A copy of any contractual agreements must be submitted to the Health Research Ethics Committee, together with the submission of this application. Add extra rows to the table, if required.

More information
Sometimes there are contractual obligations with co-workers or organisations outside the University. These contractual obligations may e.g. place restrictions on certain aspects on the availability of raw data i.t.o. intellectual right of ownership. Particularly where foreign co-workers are involved, these contracts can get complex. Therefore you must indicate here what these contractual obligations encompass, whether the University approved and sanctioned it and declare and describe any other potential legal and ethical implications thereof.

<table>
<thead>
<tr>
<th>Name of Contractor</th>
<th>Full Description of the agreement</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

Note: Type one name per row, or type “Not applicable” if there are no contractors. Add extra rows to the table, if required.

[PLEASE ATTACH ALL CONTRACTUAL AGREEMENTS]

1.25 Confidentiality

Note: Other people involved in the research that could pose a risk to confidentiality should sign confidentiality agreements e.g. transcribers and co-coder/s.

[PLEASE ATTACH ALL CONFIDENTIALITY AGREEMENTS (SEE CONFIDENTIALITY AGREEMENTS AS APPROVED BY THE LEGAL OFFICE OF THE NWU)]

1.26 Indemnity

Note: If people are involved in the research as part of the research team but are not as staff on the payroll of the university or by contract on the payroll of the university, they will not be covered by the insurance of the university and have to sign an indemnity form.

[PLEASE ATTACH ALL INDEMNITY FORMS (SEE INDEMNITY FORMS AS APPROVED BY THE LEGAL OFFICE)]

Remember to save your document regularly as you complete it!

SECTION 4: RESEARCH PROPOSAL AND SCIENTIFIC COMMITTEE APPROVAL

1.27 Executive summary and research proposal

1.27.1 Executive summary of the study

Provide an executive summary (maximum 150 words) of the study in the following format:
- brief problem statement (approx. 3 sentences)
- aims and objectives of the study
- study design and method

People living in high-risk communities are continuously exposed to the impact of poverty, unemployment, violence, and limited resources which have detrimental consequences for
families. These stressors have additional strains on family roles. Although married couples' relationships are challenged, many couples stay committed despite adversities. A scarcity on marital relationships in a high-risk community from a Positive Psychology approach was identified. The aim of this study is to explore and describe married couples' perceptions of relational strengths in the context of a high-risk community. A qualitative descriptive approach will be used, since the student aims to explore and describe the perceptions of married couples regarding relational strengths in a high-risk community. The World Café will be used as data gathering method. The outcome will entail a better understanding of the perceptions of married couples living in a high-risk community about relational strengths to enjoy a committed relationship.

1.27.2 Proposal

Note: For each study a descriptive proposal has to be submitted and is used as the main document for evaluation. The proposal should reflect the ethics of the research throughout. Attach a proposal approved by the Scientific/Proposal Committee of your research entity.

[ATTACH THE RESEARCH PROPOSAL]

1.27.3 Scientific/Proposal Committee approval

This study should have been reviewed and approved by a Scientific/Proposal Committee.

More information
The proposal needs to be approved by a Scientific/Proposal Committee before it will be reviewed by the HREC. The HREC relies on the scientific expertise of this committee regarding the evaluation of the scientific merit and design of the study.

<table>
<thead>
<tr>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of formal Scientific/Proposal Committee:</td>
</tr>
<tr>
<td>Title, initials and surname of all of the members of Scientific/Proposal Committee present during the review.</td>
</tr>
<tr>
<td>Date of approval:</td>
</tr>
</tbody>
</table>

1.27.4 Letter confirming approval of protocol

The HREC has to have proof of confirmation of approval by the Scientific/Proposal Committee.

[ATTACH CONFIRMATION OF APPROVAL OF THE STUDY PROPOSAL BY THE SCIENTIFIC/PROPOSAL COMMITTEE ON THE MANDATED TEMPLATE.]

Remember to save your document regularly as you complete it!

SECTION 5: ADDITIONALLY REQUIRED INFORMATION ABOUT ETHICAL IMPLICATIONS OF THE RESEARCH NOT PROVIDED IN THE PROPOSAL

Note: The information contained in this section is additional to what is contained in the proposal.
1.28 What will be expected of participants during data gathering?

What will be expected of participants during data gathering e.g. a one hour interview, venepuncture, needle prick, etc.

More information

Highlight what participants will be expected to do and what will be done to them, and how long it will take? This includes aspects such as procedures, sample collections and methods of information gathering and what the probable associated experience of participants will be. Provide particular details on any step that might violate privacy e.g. having to undress. This section supports you in the completion of the section in the informed consent form entitled, “What will your responsibilities be?”

Twenty-four participants will be required to complete a short demographical survey (3-5 minutes) to provide a profile of the sample. Participants will then be required to take part in a World Café (small group conversations) to discuss 6x questions (120 - 150 minutes). The married individuals residing in Delft will meet at a particular venue of Hindle High School (spacious venue in a rather safe area). Data collection will take place on a Saturday so that participants who work during the week can also partake. Participants will be divided into six groups (one group per table) where they will talk about a certain question per table. Each table will have a host that will encourage the participants to discuss the answer and write, draw or doodle their answers on the tablecloth with colourful pens. The discussions at each table will be audio recorded. After a 20 minute discussion, the host will stay at the table, while the other people at the table will move to another table to discuss another question. After everyone had an opportunity to discuss all six questions, the participants will get an opportunity to reflect on the themes, patterns and deeper meaning that came from the responses at the tables. The World Café will last for about two and a half hours. During the data gathering opportunity snacks will be available and once the data is collected, a meal will be served for the participants.

1.29 Risks and precautions

Name and explain all the possible risks for all procedures that the participants might experience during the research. Use the template at the back of the approved risk level descriptor document to guide you into identifying all the possible types of risk as well as the probability and magnitude of harm. Ensure that you also include reference to various biological sampling techniques e.g. venepuncture, buccal swabs etc. By completing this section it will help you to answer the two sections on “Are there risks involved in your taking part in research?” and “What will happen in the unlikely event of some form of harm occurring as a direct result of your taking part in this research study?” in the informed consent form.

<table>
<thead>
<tr>
<th>Risks (e.g. physical, psychological, social, legal, economic, dignitary and community)</th>
<th>Precautions (When describing these precautions be clear on how they will mitigate all the identified risks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subjectivity bias and intimidation</td>
<td>The student will, with the help of supervision, limit possible subjectivity bias, and be guided by the key issues related to trustworthiness.</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>The student will provide participants with the procedures in place to maintain confidentiality; and certain “group rules” will be in place, for example, participants will undertake not to repeat any aspects of discussions during the World Café – data</td>
</tr>
</tbody>
</table>
There is a slight possibility that the participants could experience some emotional discomfort, e.g. negative emotions as they reflect, think about, and talk about their marriage and relational strengths in the context of the selected high-risk community. Also, since this activity is not part of their ordinary daily experiences, participants might be somewhat uneasy.

The student will do her utmost to create a safe environment where participants could experience a positive and relaxed atmosphere (similar to a favourite coffee-shop). The creation of this “café” atmosphere should enable the participants to feel comfortable to take part in the conversations at the various tables. Some “group rules” will be stated before the commencement of the World Café discussion to encourage participants to show the needed respect and compassion. Since the content of the questions asked at the World Café will be mainly positive, the risks will be minimal and the in-direct benefits will outweigh any potential risks. The student will offer leaflets with the contact information of Life Line and a social worker from FAMSA (Mrs Daniels) that can assist if participants need such service.

1.30 Benefits for participants

Describe 1) the potential *direct* benefits that the study might hold for the *individual participants*; or 2) the *indirect* benefits that the study holds for the *society at large* or for the *researchers and the organisations/institutions* they are working for, through the knowledge gained. By completing this section it will help you to answer the section on “Will you benefit from taking part in this research” in the informed consent form.

<table>
<thead>
<tr>
<th>Direct benefits for participants</th>
<th>Indirect benefits for society at large or for the researchers/institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>There will be no direct benefit for participants.</td>
<td>Yes, indirect benefits for society at large, since the proposed research aims to investigate the relational strengths of married couples living in a high-risk community.</td>
</tr>
<tr>
<td></td>
<td>On a personal level, participants may have a positive experience by sharing their insight and perceptions of relational strengths in marriages and learn from other married couples.</td>
</tr>
<tr>
<td></td>
<td>Yes, indirect benefits for the student’s institution, because this research will add to important scientific knowledge as to family research; resilience studies on married couples’ relational strengths and more specifically research conducted in the South African context.</td>
</tr>
</tbody>
</table>

1.31 Risk/benefit ratio analysis
The overall benefits should, in general, *always outweigh the risks*, for a study to be considered ethical. If this is not the case, there needs to be a *strong justification* for why research ethics approval should be given.

| Benefit outweighs the risks | ☒ |
| Risks outweigh the benefit | ☐ |

**1.32 Facilities**

Describe the place(s) and facilities in detail where the study will be implemented. This description is applicable to both institutions and the community. Also describe the availability of measures to handle emergencies in an applicable manner and how this will be executed.

Data collection will take place at Hindle High School in the selected high-risk community in the Western Cape. The school is centrally situated in Delft and has a media room/school library with adequate space. Privacy will be protected and a "not to be disturbed" sign will be used to prevent the entrance of uninvited persons. The school has a security fence and the gates will be locked. The security staff at the school building will assist with the safety of everyone involved.

If any emergencies would occur, the student would complete the data collection opportunity with the needed respect toward the participants; and, then she would contact the study-leader and/or co-study leader within 24 hours to consult with them as to applicable manners to manage the emergency.

**1.33 Legal authorisation**

Describe in detail *which bodies* must grant legal authorisation for this study (e.g. Department of Health, Medicine Control Council, etc.). Mention *whether authorisation has already been obtained*, with reference to attached proof, or *how you will go about* getting authorisation before the study commences.

Conditional approval will be granted to obtain this authorisation but the study cannot commence before the HREC has received the final documents.

N/A

[PLEASE UPLOAD ALL DOCUMENTS INDICATING LEGAL AUTHORISATION]

**1.34 Goodwill permission /consent**

Describe in detail *what interest group representatives* must give permission for this study (e.g. community leaders, church leaders, tribal chiefs or other). Also mention *whether permission has already been obtained*, with reference to attached proof, or *how you will go about* getting permission before the study commences.

Conditional approval will be granted until proof of goodwill permission has been granted but the study cannot commence before the HREC has received the final documents.

Verbal and written permission was given by the principal of Hindle High for the use of the particular venue at the school.

[PLEASE UPLOAD ALL LETTERS OF GOODWILL PERMISSION]
### 1.35 Criteria for participant selection and recruitment

Describe in full which inclusion and exclusion criteria will be used to select participants and justify each of your choices. If you include one of the following in your exclusion/inclusion criteria, the need for it in the research has to be justified i.e. *race or ethnic origin, person’s health or sex life, a person’s inherited characteristics or biometric information*. Ensure that your exclusion criteria are not merely the opposite of the inclusion criteria.

<table>
<thead>
<tr>
<th>Inclusion criteria</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hetero-sexual married individuals</td>
<td>Marriage represent commitment, and even in the most devoted relationship people can easier be disloyal to their partner as in a marriage where a contractual agreement was made (White, 2010). In Deft, marriage is associated with commitment; versus, couples living together which means that one of the partners could leave without any undertaking towards a long term relationship (Van Schalkwyk, submitted 2018). Therefore, the focus of this study will be married couples.</td>
</tr>
<tr>
<td>Years of marriage</td>
<td>Individuals must be members of couples married more than five years, because after five years couples have moved pass the romantic “honeymoon” phase and are now in the “reality phase” where they either give up on the marriage or look for healthy and satisfying ways of interacting and creative ways to manage their differences (Hartwell-Walker, 2016).</td>
</tr>
<tr>
<td>Language</td>
<td>Be able to communicate and understand Afrikaans or English, because it is the home language of many of the residents in Delft.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Exclusion criteria</th>
<th>Justification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Homo-sexual married couples</td>
<td>The prevalence of homo-sexual couples who are married is rare in the Delft community (Personal conversation with Dr Desmond Painter: “I will be very surprised if you find homo-sexual couples being married in the Delft community” – expert as to high-risk communities, 12 April 2018 @ 09:10).</td>
</tr>
<tr>
<td>Married couples who are not permanent residents of Delft, such as temporary dwellers</td>
<td>The reason is that inclusion of temporary dwellers could pose problems for the research team, since they could move to new locations and then it would be difficult to find them for the data collection and feedback of research findings.</td>
</tr>
</tbody>
</table>

### 1.36 Participant recruitment
Recruitment of human participants must take place within a specified time frame/schedule (i.e. specified starting and ending date) and cannot continue indefinitely. Explain how you will go about recruiting the participants.

More information
This process should take place in such a way that the participants do not feel intimidated by the process or implicitly “bribed”, but decide absolutely voluntarily to participate. It should be fair and equitable. Include aspects of community entry e.g. advertisements, community advisory boards and the use of gatekeepers and mediators etc.

The gatekeeper will identify a mediator. The mediator will be someone who is involved in projects in the Delft community and knows the 6 areas of high-risk community well. This appointed person will be trained by the student. A meeting will be arranged with the person and the student will inform this person about the aim of the research, procedure, including all matters about approaching potential participants, paying attention to the inclusion criteria, and informed consent.

The mediator will assist with the recruitment of participants He/she will recruit persons that comply with the required standards (see inclusion criteria) that would be able to provide information-rich data.

1.37  Informed consent (consent, permission, assent and dissent)

The focus in this section is on a detailed informed consent process description. According to law all participants must be fully informed about the implications and risks associated with participation in the study.

More information
How will you go about contacting them and explaining the study and accompanying implications to all participants? Ensure that participants are aware that participation in the research is voluntary and that they may withdraw from the study at any time. Where research is not carried out in participants’ mother tongue, explain how you will go about conveying the information in an understandable manner. Where participants are not literate, a witness should be involved in obtaining informed consent. Be clear on who will obtain the informed consent (independent person) and how the researcher will be included to explain the research and answer questions. Discuss the role of the independent person. For your convenience you can use the template for informed consent as well as the accompanying checklist. Be clear on your description of the use of consent, permission, assent and dissent. For minors ensure that parental permission and child assent or adolescent consent (where applicable) is obtained for all participants.

The appointed mediator will be trained by the student regarding all aspects of recruitment and completion of ICF. The mediator will explain to the participants the aim and procedure of the research as described in the informed consent form (Appendix C). Participants will be asked to complete the informed consent form (Appendix C). They will be given one week to both consider their participation and to ask questions prior to participation. Participants will be informed that if they decide not to participate, the decision will not jeopardize them in any way (Stevens, 2013).

Care will be taken to ensure that Informed Consent Forms are signed in the presence of the mediator and a witness. Although informed consent will be sought from the participants prior to data collection, consent will be affirmed at the venue on the day of data collection. The researcher (student) will be available before signing the informed consent form to answer queries about the research.
1.38 Incentives and/or remuneration of participants

Is any form of incentive and/or reimbursement offered to the participants?
If “Yes”, describe it in full in terms of what, how, where, when, how much, terms and conditions, etc. Remember to work according to the TIE principle (time, inconvenience, expenses e.g. transport and meals).
If no remuneration is offered, justify why this is not the case (Please mark with X in the relevant block and provide details).

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
</tr>
</tbody>
</table>

Description
No incentives will be offered for participation, but participants' transportation to and from the particular venue will be paid to attend the World Café. Snacks and water will be offered to enjoy during the data collection opportunity and a meal with juice after the World Café to compensate for possible inconvenience and long hours.

1.39 Announcement of study results to participants

Indicate what, how, when and to whom you will communicate the results of the study to the participants.

<table>
<thead>
<tr>
<th>What?</th>
<th>Verbal feedback on results</th>
</tr>
</thead>
<tbody>
<tr>
<td>How?</td>
<td>Verbally, in a group, at the same school and venue where data gathering took place in the selected high-risk community.</td>
</tr>
<tr>
<td>When?</td>
<td>Once the research is completed, submitted and examined.</td>
</tr>
<tr>
<td>To whom?</td>
<td>All participants who are interested in the results</td>
</tr>
</tbody>
</table>

1.40 Privacy and Confidentiality

Explain how you will ensure both privacy and confidentiality throughout the research.

Privacy
Privacy is concerned with who has access to personal information and records about the participant as well as privacy during physical measurements e.g. anthropometric measures or psychological procedures e.g. interviews/focus groups. Explain how privacy will be ensured in your study.

Privacy will be ensured in the following ways: i) Before the commencement of the collection of data via the World Café method certain rules for the group conversations with the participants will be discussed. This will include for example, by emphasizing privacy and confidentiality as central to research ethics; indicating the importance to NOT discuss any matter related to the World café conversations to any person outside the group. It is acknowledged that complete confidentiality and privacy cannot be ensured as to the World Café conversations, but the accentuation of these ethical concerns before the commencement of data collection will add to the effective application of the “group rules”; ii) only the research team will have access to the personal information and data collected. Privacy will be protected and the needed precautions will be put-into-place, e.g. a “not to be disturbed” sign will be used to prevent the entrance of uninvited persons during the gathering of data via the World Café.
Participants names will be replaced with pseudo-names or codes to keep it confidential, and
reported findings will be anonymous.

<table>
<thead>
<tr>
<th>Confidentiality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confidentiality ensures that <strong>appropriate measures</strong> will be implemented to prevent disclosure of information that might identify the participant either during the course of the research or afterwards e.g. anonymising data or pooling results. Explain how confidentiality will be ensured in your study.</td>
</tr>
<tr>
<td>The information received from the participants will be respected by ensuring that their information will be kept confidential and that the information will not be given to unauthorized persons; and, when writing the research report, the student will use numbers – and not their names - to protect the identity of the participants. In other words, in this qualitative study participants' names will be replaced with numbers to keep it confidential, and reported findings will also be anonymous. Audio-recordings will be transferred from the recording device after the data collection opportunities took place and transcriptions are completed. Although it could be a large threat to confidentiality if the recording device is stolen, the recordings will be transferred to a password-protected computer as soon as possible after the interview or focus group discussion. But, since computers can also be stolen – the recordings will only be deleted from the device once the transcriptions are done. During information sessions and data collection opportunities the names of the participants will be known to the student and characteristics relevant to the study (see inclusion criteria), but the information will be kept secure under password protection on the student’s computer and will not be shared with other persons. In other words, no names or any information about the participants in order to establish confidentiality and to protect participants’ anonymity. In addition, confidentiality will be ensured by the build-in procedure and regular monitoring as set out by HREC of the North-West University. Confidentiality agreements will be signed with the transcriber and co-coder. The sharing of the raw data will be sent electronically to the transcriber, who will delete the raw data once the transcribing is completed. The textual data will be send electronically to the co-coder, and once the co-coder’s function is completed, she will delete the data from her computer.</td>
</tr>
</tbody>
</table>

1.41 Management, storage and destruction of data/biological samples

Describe how you will manage the collected data/biological samples as well as the storage thereof.

<table>
<thead>
<tr>
<th>Data/biological samples management</th>
</tr>
</thead>
<tbody>
<tr>
<td>For management of data/biological samples, indicate:</td>
</tr>
<tr>
<td>• what data/biological samples will be stored</td>
</tr>
<tr>
<td>• how it will be stored</td>
</tr>
<tr>
<td>• how data in its various forms will be managed e.g. questionnaires, recorded interviews or biological samples</td>
</tr>
<tr>
<td>• who will manage the data/biological samples storage</td>
</tr>
<tr>
<td>• who will have access to the stored data/biological samples</td>
</tr>
<tr>
<td>• how will data be regained from other research team members</td>
</tr>
<tr>
<td>• and if data sharing is to occur, how will this be managed?</td>
</tr>
<tr>
<td>Ensure that you refer to both <strong>electronic</strong> and <strong>hard copy versions</strong> of data as well as <strong>biological samples</strong>.</td>
</tr>
<tr>
<td>A data management plan will entail the following: The collected data and audio recordings will be stored on the student's password protected computer, and it will be locked in a cupboard inside a locked office of the student when she is not working on the research. Both the hard copies, namely printed transcripts and working documents will be kept locked in a cupboard in the student’s office and only the student and study-supervisors will have access for a limited period.</td>
</tr>
</tbody>
</table>
The sharing of the raw data will be sent electronically to the transcriber, without the name of the participants, and the transcriber will delete the raw data once the transcribing is completed. The textual data will be sent electronically to the co-coder, and once the co-coder’s function is completed, she will delete the data from his/her computer.

**Storage and destruction of data/biological samples**

Describe:
- where and how data/biological samples will be stored
- for how long it will be stored
- who will be responsible for storage
- how it will be destroyed?

Ensure that you refer to both electronic and hard copy versions of data as well as biological samples

*Where and how data will be stored:* Both the hard copies, namely printed transcripts and working documents as well as electronic versions of the data will be kept locked in a cupboard in the student’s office and only the (student) researcher and supervisor will have access for a limited period. During the research data will be stored on the student’s computer. The student’s PC will be protected with a password.

*For how long it will be stored:* The recorded information will be transferred to the (student) researcher’s password-protected computer. The sharing of the raw data will be sent electronically to the transcriber, who will delete the raw data once the transcribing is completed. The textual data will be send electronically to the co-coder, and once her Dr van der Westhuizen’s (co-coder) function is completed, she will delete the data from her computer.

Data will be stored for six years at the Potchefstroom campus (office of AUTOHeR) after the student completed her studies and will be deleted via shredding by an appointed person of the AUTOHeR office.

### 1.42 Monitoring of research

Describe how you as the researcher will monitor:
- both the implementation and progress of the research
- compliance with the approved protocol
- the management of ethics throughout the research process
- the management of amendments during the execution of the research study, should they be needed
- how incidents and adverse events/serious adverse events (if applicable) will be reported.

Every effort will be taken to ensure the integrity of the data as well as the research process of the planned study will adhere to the application of the ethical guidelines of the ethical framework as approved by the Ethics Committee of the North-West University.

The study-leader will be responsible to complete a monitoring report and in this report it will be indicated how the research was implemented in accordance with the research proposal. This will be done by following the research process as discussed in the research proposal’s methodology section. In this way, compliance with the planned study, i.e. the research proposal will be monitored.

The (student) researcher will also have regular contact (via email, telephonic and face to face consultation) with the research supervisor and co-supervisor to discuss the research progress. The research proposal will be used as a reference point for the discussions, to ensure compliance with the research proposal.

The student will keep a reflective journal throughout the research process in which reflections and observations made during the research will be written. These reflections will
be used to understand the research and critically review the student’s understanding and experiences of the research process. Any ethical issues that may arise from the research could then be reflected and further discussed with the research supervisor. The research will be critically reviewed by means of the various aspects related to the collected data (e.g. data analysis) and will be critically reviewed by a co-coder. These critical reviews will allow the student to gain further insights into the research and assist the monitoring and evaluating the research throughout the research process. Provisions will be made for any incidents or adverse events to be discussed with the research supervisor immediately, i.e. on the same day, or within 24 hours, for guidance in dealing with the issues. If any amendments are needed to the research proposal, it will be reported to HREC immediately, and a request for the amendment will be send to HREC. The student will not continue with the research (collecting data from participants) until the amendment is approved by HREC.

1.43 Misleading of participants (if applicable)

Is use made of any form of misleading in the research, where the participants are not told the complete truth (e.g. placebo or psychotherapeutic interventions)?

*More information*
*In the case of using a placebo (e.g. drug or psychotherapeutic intervention), justification has to be provided that there is no alternative treatment with proven efficacy. When such an alternative treatment exists, the standard of care should be provided to both the experimental and control group.*

If “Yes”, in either case of using a placebo or during a psychotherapeutic intervention:
- justify in full why it is necessary
- describe how the participants will be protected against potential negative consequences of the placebo or misleading information/action.
- when you will disclose and debrief
- describe how you will disclose to them that they were misled.

---

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Justification</th>
<th>Precautionary measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☒</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

*Disclosure*

When? | How?
--- | ---
[Click here to enter text.] | [Click here to enter text.]

1.44 Use of previously collected data/biological samples (if applicable)

When your research study is making use of previously collected data or biological samples, provide a comprehensive description of the following.

**What was the purpose of the original collection?**

N/A

**What will your purpose be?**

N/A

Give a description of how research integrity was ensured in the original study by referring to:
- how informed consent was obtained from participants
- what they consented for
- the circumstances under which the data/biological samples were gathered
- how the ethics of data/biological sample collection was ensured?

Give a detailed description of:
- how data/biological sample storage was managed
- where and how data/biological samples were stored
- for how long it was stored
- who was responsible for storage
- how it was ensured that no tampering occurred?

Foreseeable risks for participants or researchers involved in using the previously collected data/biological samples?

<table>
<thead>
<tr>
<th>Risks</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Participants:

Researchers:

Will re-consent be necessary?
If “Yes” motivate:
- why
- for what
- how this re-consent will be obtained.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Why?</th>
<th>For what?</th>
<th>How?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

[ATTACH A LETTER FROM THE STUDY LEADER/PI GIVING PERMISSION FOR THE USE OF THE DATA/BIOLOGICAL SAMPLES]

[ATTACH THE ETHICAL APPROVAL OF THE ORIGINAL STUDY]

[ATTACH THE INFORMED CONSENT DOCUMENTATION FOR RE-CONSENT (IF APPLICABLE)]

1.45 Use of filed privileged information (if applicable)

Filed privileged information may be used for research purposes with the research ethics committee waiving informed consent. Give a detailed description of the process under the following headings.

The nature of the information to be used:

Process of obtaining permission/ethical approval for access:

Process of data collection:

Process of anonymization of the data:
Foreseeable risks for participants whose filed privileged information is being accessed:

<table>
<thead>
<tr>
<th>Risks</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

1.46 Justifiability of statistical procedures

1.46.1 Statistical consultation

Indicate how you ensured the suitability of the statistical procedures to be used in this study e.g. consultation or proof of expertise.

[Click here to enter text.]

1.46.2 Justification of sample size

Indicate how the sample size was determined e.g. power calculation or previously reported study designs.

[Click here to enter text.]

1.46.3 Method of randomisation (if applicable)

If randomisation is to be used in this study, please indicate the manner by which randomisation will be assured.

[Click here to enter text.]

1.46.4 Statistical methodology

Describe the means by which the statistical analyses will be conducted i.e. descriptive statistics, comparisons to be made, specific statistical tests to be used and the manner in which co-variance will be corrected for.

[Click here to enter text.]

Remember to save your document regularly as you complete it!
SECTION 6: MATTERS THAT NECESSITATE ADDITIONAL INFORMATION

1.47  Sec 6a: Vulnerable participants

Please complete this section if your study includes minors, adults with incapacities, persons in dependent relationships e.g. prisoners, students, persons with physical disabilities, collectivities and research-naïve communities. (Mark ALL options as “Yes” or “No” with X in the appropriate box – more than one option may be “Yes”).

<table>
<thead>
<tr>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minors</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Adults with incapacities</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Persons in dependent relationships e.g. prisoners</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Students</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Persons with physical disabilities</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Collectivities</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Research-naïve communities</td>
<td>☐</td>
<td>☒</td>
</tr>
<tr>
<td>Other</td>
<td>☒</td>
<td>☐</td>
</tr>
</tbody>
</table>

Specify: Participants living in a high risk community

1.47.1  Description

Give a detailed description of the vulnerable group by referring to:
- who they are
- where they come from
- what makes them vulnerable.

The participants live in a high-risk community where there is poverty, poor standard housing, high incidence of crimes (e.g. murder, theft and rape), alcohol- and substance abuse problems, violence (such as gang violence and domestic violence), few options of after-school care, and lack of exposure to positive role models. Married couples living in a high-risk community are examples of people who are faced with many socio-economic difficulties that could impact their health and well-being negatively (Mash & Wolfe, 2006) due to restricted access to social, physical, relational, and economic resources. Vulnerability of participants can be associated with being exposed to these various stressors and difficulties recurrently versus the experience of a distinct disaster.

1.47.2  Justification for inclusion

Explain the necessity for including this specific group of vulnerable people as human participants (subjects) indicating the direct benefit to the participants themselves or the indirect benefit of an improved scientific understanding.

The understanding of how married couples in a high-risk community in the South African context, apply relational strengths to face adversities and effectively overcome their difficulties and hardship (Seccombe, 2002) is vital toward the strengthening of families as the core of society.

1.47.3  Additional precautionary measures to reduce the risk of harm
Explain any additional precautionary measures you will take to reduce the possibility of harm.

The student will offer leaflets with the contact information of Life Line and a social worker from FAMSA (Mrs Daniels) that can assist if participants need such service.

Remember to save your document regularly as you complete it!

### 1.48 Sec 6b: Infection, genetic modification and commercialisation of cell and tissue lines

#### 1.48.1 What will you be doing with the cell or tissue line?

| Infection of the cell or tissue line | ☐ |
| Genetic modification of the cell or tissue line | ☐ |
| Commercialisation of the cell or tissue line | ☐ |

#### 1.48.2 Number

How many cell and/or tissue lines will be used in the study?

| Description | Number |
| Cell lines | ☑ |
| Tissue lines | ☑ |

[OPEN UP THE APPROPRIATE AMOUNT OF SPACES IN SECTION 1.48.3 ACCORDING TO 1.48.2]

#### 1.48.3 Product information

Provide detailed product information, so that the reviewers can evaluate the ethically justifiable use of the cell and tissue lines. Give the necessary details below.

**More information**

**Human origin and consent:**
For standard cell and/or tissue cultures from banks such as the ATCC consent already exists for general, ethically justifiable and medically related research.

**Potential dangers and risks:**
Tissue banks such as the ATCC classify cell and/or tissue cultures as “bio safety level 1, 2 or 3”, depending on potential for infection with pathogens which may be harmful to man, or cancerous characteristics that would make growth in a person possible after undesirable, accidental inoculation. **NB!** These cell cultures may never be used in people.
<table>
<thead>
<tr>
<th>Cell Line or Tissue Line</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved Name &amp; Code</td>
<td>Description</td>
</tr>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Source / Origin / Supplier</td>
<td>Catalogue No.</td>
</tr>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Method of Storage and Maintenance</td>
<td></td>
</tr>
<tr>
<td>Potential Dangers</td>
<td>Precautionary measures</td>
</tr>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
<tr>
<td>Other Relevant Information</td>
<td></td>
</tr>
<tr>
<td>Click here to enter text.</td>
<td></td>
</tr>
</tbody>
</table>

[To add additional tables, copy the whole table above (select, then press Ctrl + C), click here, press enter and then paste (Ctrl + V).]

1.48.4 What is the infectious agent to be used (if applicable)?

1.48.5 Has the participant given informed consent for commercialisation of their cell line?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If “Yes” attach a copy of the completed informed consent form
If “No”, justify why not:

1.48.6 Has a benefit sharing agreement been undertaken with the participant if commercialisation of their cell line is being undertaken?

If “Yes” attach the agreement. If “No” justify why this is the case.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

If “Yes” attach a copy of the completed benefit sharing document
If “No”, justify why not:

1.48.7 Expertise and facilities

Do you have the necessary expertise to work with the cell and/or tissue cultures? Provide full details. Mark “Yes” or “No” with X in the appropriate box. Provide additional details as requested.
### 1.48.8 Facilities

Describe the facilities that are in place to work with the cell and/or tissue line.

Click here to enter text.

### 1.48.9 Biosafety

Explain the measures you have in place to protect the safety of researchers/workers/the environment against the potential detrimental effects of the infection, genetic modification or commercialisation of the cell and/or tissue and waste. Also specify methods and safety measures for the disposal of cell and/or tissue cultures. If available, attach the standard operating procedures (SOPs) of these processes.

Click here to enter text.

**Remember to save your document regularly as you complete it!**

### 1.49 Sec 6c: Use of Drugs/Medicines

Please complete this section if any drugs or medicines are used or administered in this study.

#### 1.49.1 Number

How many types of drugs / medicines will be used in the study? If more than one dosage form or brand name of the same drug (active ingredient) is used, it must be counted and mentioned separately. Where applicable, placebos must also be mentioned and calculated.

<table>
<thead>
<tr>
<th>Description of Drugs / medication</th>
<th>Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

[OPEN UP THE APPROPRIATE AMOUNT OF SPACES IN SECTION 1.49.2 ACCORDING TO 1.49.1]

#### 1.49.2 Product information

Provide detailed product information as requested
Drug 1

<table>
<thead>
<tr>
<th>Approved Pharmacological (Generic) Name</th>
<th>Brand Name(s) (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

If "Yes", MCC-SA Registration Number:

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If registered at the MCC-SA, is this for the indications, dosages and administrations as used in this study? Provide details where necessary.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Registered at the MCC-SA?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Accepted Dosage(s)

| | Accepted Administration Route(s) |
| | Click here to enter text. | |

Pharmacological Action, Therapeutic Effects & Indications

| | Side-effects, Precautions & Contra-indications |
| | Click here to enter text. |

Other Relevant Information

| | Proof of preclinical approval of the product |
| | Click here to enter text. |

Proof of preclinical approval of the product

| | |
| | Click here to enter text. |

[To add additional tables, copy the whole table above (select, then press Ctrl + C), click here, press enter and then paste (Ctrl + V).]

1.49.3 Special authorisation for use in humans:

If any of the medication is not registered with the Medicine Control Council or, if it is registered but the study deals with indications for which it is not specifically registered, or if other doses, dosages, dosage forms or administration routes are used than what is registered, special approval must be obtained for the clinical test from the Medicine Control Council.

Has such special authorisation been obtained? Please mark with X in the appropriate box and complete further as applicable.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Authorisation Number

| | Date of Authorisation |
| | Click here to enter text. |

Date of Authorisation

| | |
| | Click here to enter a date. |

If "Yes" please upload a copy of the approval letter. If "No" please explain the manner in which you plan to go about obtaining approval before the study begins.

NB! Final approval of the application by the HREC is dependent on the approval of the study by the Medicine Control Council. No study may continue before written approval is obtained.

| | |
| | If “No” type explanation here, or type “Not Applicable”. |

---

2 MCC-SA = Medicine Control Council of South Africa.

3 The MCC-SA registration number can be found on medicine product leaflets.
1.49.4 Explain the measures that will be in place to protect the workers, participants and the environment against the potential side-effects of the medicinal substances and waste (disposal).

Remember to save your document regularly as you complete it!

1.50 Sec 6d: Use of drug delivery systems

Please complete this section if any drug delivery systems are used or administered in this study.

1.50.1 Number

How many types of drug delivery systems will be used in the study? If more than one dosage form of a drug delivery system is used, it must be counted and mentioned separately.

<table>
<thead>
<tr>
<th>Description of drug delivery system</th>
<th>Dosage</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Click here to enter text.]</td>
<td>[Click here to enter text.]</td>
</tr>
</tbody>
</table>

[OPEN UP THE APPROPRIATE AMOUNT OF SPACES IN SECTION 1.50.2 ACCORDING TO 1.50.1]

1.50.2 Drug delivery system information

Provide detailed drug delivery system information as requested? If more than one drug delivery system is used, it must be counted and mentioned separately.
1.5.0.3 Special authorisation for use in humans

If any of the drug delivery systems are not registered with the Medicine Control Council or, if it is registered but the study deals with indications for which it is not specifically registered, or if other doses, dosages, dosage forms or administration routes are used than what is registered, special approval must be obtained for the clinical test from the Medicine Control Council. Has such special authorisation been obtained? Please mark with X in the appropriate box and complete further as applicable.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Authorisation Number

| Type no. here, or type “Not Applicable”. |

Date of Authorisation

| Click here to enter a date. |

If “Yes” please upload a copy of the approval letter.

If “No” please explain the manner in which you plan to go about obtaining approval before the study begins.

NB! Final approval of the application by the HREC is dependent on the approval of the study by the Medicine Control Council. No study may continue before written approval is obtained.

[If “No” type explanation here, or type “Not Applicable”.]

[PLEASE UPLOAD MCC APPROVAL LETTER]
1.50.4 Explain the measures that will be in place to protect the workers, participants and the environment against the potential side-effects of the drug delivery system and waste disposal.

1.51 Sec 6e: Use of Food, Fluids or Nutrients

Please complete this section if any food, fluids or nutrients (alone or in combination) are used or administered in this study. This also applies to dangers with abuse, whether or not it holds any potential danger for people, animals or the environment.

Note: This does not include the provision of a regular plate of food for maintenance during residence.

1.51.1 Number

How many kinds of food, fluids or nutrients will be used in the study?

More information
If more than one dosage form or brand name of the food, fluids or nutrient is used, it must be counted and mentioned separately. Placebos are also included, except if the placebo treatment includes no administration.

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Food</td>
<td>0</td>
</tr>
<tr>
<td>Fluids</td>
<td>0</td>
</tr>
<tr>
<td>Nutrients / nutrient combinations</td>
<td>0</td>
</tr>
</tbody>
</table>

[OPEN UP THE APPROPRIATE AMOUNT OF SPACES IN SECTION 1.51.2 ACCORDING TO 1.51.1]
1.51.2 Product information:

Provide detailed product information, so that the reviewers can evaluate the ethically justifiable use of the food, fluids and nutrients.

<table>
<thead>
<tr>
<th>Food, Fluid or Nutrient</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Approved Name</strong></td>
</tr>
<tr>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Potential Dangers with Abuse</th>
<th>Contra-indications</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Relevant Information &amp; Literature References</th>
</tr>
</thead>
<tbody>
<tr>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

To add additional tables, copy the whole table above (select, then press Ctrl + C), click here, press enter and then paste (Ctrl + V).

1.51.3 Explain the measures that will be in place to protect the workers, participants and the environment against the potential detrimental effects of the food, fluids or nutrients and waste.

| Click here to enter text. |

Remember to save your document regularly as you complete it!

1.52 Sec 6f: Use of Radio-Active Substances

1.52.1 Description:

Where any radio-active substances are used in experiments or administered to participants, give full details thereof, including the isotopes and possible risks it may hold for the participants/researchers/workers/environment.

| Click here to enter text. |

1.52.2 Competence and licensing:

Do you have the necessary competence and licensing from the Department of Health at your disposal to work with radio-active substances? Mark “Yes” or “No” with X in the appropriate box. Provide the authorisation number if “Yes”.

<table>
<thead>
<tr>
<th>Yes</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Study leader</td>
<td>Researchers/Students/Fieldworkers</td>
</tr>
<tr>
<td>Authorisation number</td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No</th>
<th>How do you plan to get the expertise required?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Study leader</td>
<td>Students/Researchers/Fieldworkers</td>
</tr>
<tr>
<td></td>
<td>Click here to enter text.</td>
</tr>
</tbody>
</table>
Attach a copy of the approval certificate from the Radiation Control Officer.

[PLEASE UPLOAD THE APPROVAL LETTER FROM THE RADIATION CONTROL OFFICER]

1.52.3 Facilities

Describe the facilities and procedures to ensure safe use and disposal of the radio-active substances? Explain the measures you have in place to protect the safety of participants/researchers/workers/environment against the potential detrimental effects of the radio-active substances and waste. If applicable, also specify methods and safety measures for the disposal of radio-active contaminated body fluids and tissue.

[Type here]

Remember to save your document regularly as you complete it!

1.53 Sec 6g: Use of Toxic Substances or Dangerous Substances

Please complete this section if any toxic or dangerous substances are used or administered in this study. This also applies to dangers with abuse, whether or not it holds any potential danger for people, animals or the environment.

1.53.1 Number

How many toxic substances/dangerous substances will be used in the study?

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toxic substances</td>
<td>0</td>
</tr>
<tr>
<td>Other dangerous substances</td>
<td>0</td>
</tr>
</tbody>
</table>

1.53.2 Product information

Provide detailed product information, so that the reviewers can evaluate the ethically justifiable use of the toxic and dangerous substances.

**NB!** If more than one such substance is used, select and copy the whole table and paste as many tables underneath as is necessary.

<table>
<thead>
<tr>
<th>Substance 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approved Name</td>
</tr>
<tr>
<td>[Type here]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action &amp; Toxic Effects/Dangers</th>
<th>Contra-indications</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Type here]</td>
<td>[Type here]</td>
<td>[Type here]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Relevant Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Type here]</td>
</tr>
</tbody>
</table>
1.53.3 Explain the measures that will be in place to protect the workers, participants and the environment against the potential detrimental effects of the toxic or dangerous substances and waste

<table>
<thead>
<tr>
<th>Possible detrimental effects</th>
<th>Precautions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type here</td>
<td>Type here</td>
</tr>
</tbody>
</table>

Remember to save your document regularly as you complete it!

1.54 Sec 6h: Measuring instruments and questionnaires that need psychometric interpretation

Please complete this section if any measuring instruments or validated questionnaires are used in this study that needs psychometric interpretation.

**NB!** Do not complete this section for any other types of questionnaires.

1.54.1 Name

Which psychometric measuring instruments and validated questionnaires will be used in the study?

**Description**

[Click here to enter text.]

1.54.2 Information about the measuring instrument/questionnaire

Provide detailed information on the psychometric measuring instrument/questionnaire, so that the reviewers can evaluate the ethically justifiable use thereof.

**NB!** If more than one psychometric measuring instrument/questionnaire is used, select and copy the whole table and paste as many tables underneath as is necessary.

<table>
<thead>
<tr>
<th>Psychometric measuring instrument/questionnaire</th>
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</thead>
<tbody>
<tr>
<td>Approved Name</td>
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<td>[Click here to enter text.]</td>
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<tr>
<td>Reliability</td>
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</tbody>
</table>

Other Relevant Information

[Click here to enter text.]

[To add additional tables, copy the whole table above (select, then press Ctrl + C), click here, press enter and then paste (Ctrl + V).]

1.54.3 Validation for target group:

Is the measuring instrument validated for the target group (e.g. for South African circumstances)? Provide full details. Please mark with X in the appropriate box and provide details.
### 1.55 Sec 6i: Possible impact on the environment

Please complete this section if the study to be undertaken will have any impact on the environment as determined by evaluation of the study using the risk level descriptor for environmental impact. If this section is to be completed, please ensure that a completed copy of the risk level descriptor for environmental impact is attached to the application that is submitted.

#### 1.55.1 Please indicate the risk level of the current study in terms of environmental impact.

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
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<td>Effect on the environment: Potential for incidental and/or transient changes to valued flora and fauna, ecosystem processes and structure, including ecosystem services; or</td>
<td></td>
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<tr>
<td></td>
<td>Legal implications: No legal implications. No need to apply for any environmental authorisations; or</td>
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<tr>
<td></td>
<td>Potential impact on reputation of the NWU: No discernible impact on reputation.</td>
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<tr>
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<td>Mild</td>
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</tr>
<tr>
<td></td>
<td>Effect on the environment: Potential for acceptable, short term changes to valued flora and fauna, ecosystem processes and structure, including ecosystem services; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Legal implications: Complaints for the public and/or regulator. No need to apply for any environmental authorisations; or</td>
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<tr>
<td></td>
<td>Potential impact on reputation of the NWU: Potential impact on reputation.</td>
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<tr>
<td></td>
<td>Effect on the environment: Potential for acceptable, longer term changes to valued flora and fauna, ecosystem processes and structure, including ecosystem services; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Legal implications: Departmental enquiry and correspondence. Environmental authorisation may be required; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Potential impact on reputation of the NWU: Limited, reputation impacted with small number of people.</td>
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<tr>
<td>3</td>
<td>Severe</td>
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<tr>
<td></td>
<td>Effect on the environment: Potential for unacceptable, short term changes to valued flora and fauna, ecosystem processes and structure, including ecosystem services; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Legal implications: Notification of intent to issue a directive. Environmental authorisation required; or</td>
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<tr>
<td></td>
<td>Potential impact on reputation of the NWU: Reputation impacted with some stakeholders.</td>
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<td>Very severe</td>
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<tr>
<td></td>
<td>Legal implications: Withdrawal of permit. Environmental authorisation required; or</td>
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<tr>
<td></td>
<td>Potential impact on reputation of the NWU: Reputation impacted with significant number of key stakeholders.</td>
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<td>Intolerable</td>
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<tr>
<td></td>
<td>Effect on the environment: Potential for irreversible changes to valued flora and fauna, ecosystem processes and structure, including ecosystem services; or</td>
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<td></td>
<td>Legal implications: Referral to the National Prosecuting Authority. Potential investigation by authority with prosecution and fines. Environmental authorisation required; or</td>
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<tr>
<td></td>
<td>Potential impact on reputation of the NWU: Reputation impacted with majority of key stakeholders.</td>
<td></td>
</tr>
</tbody>
</table>

#### 1.55.2 Explain the type of environmental impact that the study will have.

Remember to save your document regularly as you complete it!
1.55.3 Name and explain *all the possible risks* for the environment that may occur during the research. Use the template included in the approved risk level descriptor document for studies with environmental impact to guide you into identifying all the possible types of risk as well as the probability and magnitude of harm. Please also include *all the precautions* that will be taken in order to mitigate the risks to the environment.

<table>
<thead>
<tr>
<th>Risks (e.g. effect on environment, legal implications, potential impact on the reputation of the NWU, etc.).</th>
<th>Precautions (When describing these precautions be clear on how they will mitigate all the identified risks).</th>
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</thead>
<tbody>
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</tbody>
</table>

Remember to save your document regularly as you complete it!

**SECTION 7: OTHER ETHICS EVALUATIONS AND RISK INSURANCE**

1.56 Sec 7a: Evaluation by other Research Ethics Committees

Please complete this section if this study has been or will be evaluated by any other research ethics committees, for example with multi-institutional studies. Provide information about all research ethics committees involved in the review and approval of this study.

<table>
<thead>
<tr>
<th>Name of the Research Ethics Committee</th>
<th>Date of Approval/In Process</th>
<th>Approval/In Process</th>
<th>Contact Number or E-mail address of the research ethics committee</th>
<th>Approval no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Type name here, or type “None”]</td>
<td>[Type details here]</td>
<td>[Type details here, or type “Not applicable”]</td>
<td>[Type details here, or type “Not applicable”]</td>
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</tr>
</tbody>
</table>

Remember to save your document regularly as you complete it!

1.57 Sec 7b: Risk Insurance

The North-West University has insurance at its disposal to cover the risk of claims against the University in case of damage to participants due to professional negligence – the maximum cover is currently R100 million per annum (all studies included). However, this is only available if studies are ethically approved and researchers have kept to the proposal.

1.57.1 Describe the potential risks to which the participants/researchers/assistants/field workers are going to be subject to in so far as complications may lead to summonses.

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<thead>
<tr>
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<th>Risks</th>
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<td>Participants</td>
<td>Minimum: fatigue, possible inconvenience</td>
</tr>
<tr>
<td>Researchers</td>
<td>Minimum: fatigue</td>
</tr>
<tr>
<td>Assistants and/or field workers</td>
<td>[Click here to enter text.]</td>
</tr>
<tr>
<td>Others</td>
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</table>
1.57.2 These potential risks are covered by:

<table>
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</thead>
<tbody>
<tr>
<td>Sponsor/s</td>
<td>☐</td>
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<tr>
<td>Other: Specify:</td>
<td>☐</td>
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</table>

1.57.3 Is this insurance adequate (measured against the potential risks)?

Please mark with X in the appropriate box.

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<tr>
<th>Yes</th>
<th>No</th>
<th>If “No”, indicate what will be done to ensure that there is sufficient coverage?</th>
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</table>

Remember to save your document regularly as you complete it!

Section 8: Declarations

Applications and declaration are filled in and signed by:

Sec 8a: Study Leader
Sec 8b: Statistical Consultant
Sec 8c: Research Director

The pages with declarations and signatures must be scanned with this form.

[SCAN ALL SIGNED DECLARATIONS]

Health Research Ethics Application

<table>
<thead>
<tr>
<th>Study Leader</th>
<th>Study Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr I van Schalkwyk</td>
<td>Married couples’ perceptions of relational strengths in the context of a high-risk community</td>
</tr>
</tbody>
</table>

NWU Ethics Number
NWU-00061-18-S1

1.58 Sec 8a: Study Leader

Application and Declarations by Study Leader

I, the undersigned, hereby apply for approval of the research study as described in the preceding proposal and declare that:

1.58.1 The information in this application is, to the best of my knowledge, correct and that no ethical codes will be violated with the study;
1.58.2 I will make sure that the study is managed ethically justifiably from start to finish;
1.58.3 In the case of human participants;
I will put it clearly to all participants that participation (including assent) in any research study is absolutely voluntary and that no pressure, of whatever nature, will be placed on any potential participant to take part;
I will put it clearly to all participants that any participant may withdraw from the study at any time and may ask that his/her data no longer be used in the study, without stating reasons and without fear of any form of prejudice;
every participant who takes part in the study will receive the accompanying form for informed consent and it will be ensured that every participant understands the information (including the process and risks) fully;
every participant will sign the informed consent in writing before the study commences, or a witness will stand in on behalf of the participant when the participant is illiterate;
the written permission of the parent or legal guardians of all minor subjects will be obtained before the research commences;
any foreseeable risk is restricted to the minimum, any permanent damage is avoided as far as possible and that appropriate precautions and safety measures are in place;
confidentiality of all the information of all participants will be respected and ensured;

1.58.4 I and all co-workers/assistants/field workers are appropriately qualified, capable and legally competent to implement the proposed studies/procedures/interventions;
1.58.5 I will not deviate from the approved proposal and that I understand approval for the study will be cancelled if I deviate from the proposal without the approval of the Health Research Ethics Committee;
1.58.6 the study is scientifically justifiable;
1.58.7 where necessary, all contracts, permits and the applicable documents of relevance will be obtained before the research commences;
1.58.8 I will ensure that all data/biological samples are stored safely and remain in the possession of the North-West University;
1.58.9 I will report in writing any incidents or adverse events/serious adverse events that occur during the study without delay to the Health Research Ethics Committee;
1.58.10 I undertake to respect intellectual property rights throughout and to avoid any form of plagiarism;
1.58.11 I will obtain permission for amendments to the protocol and report annually (or more often for medium and high risk studies) to the Health Research Ethics Committee on the prescribed monitoring report concerning progress of the study;
1.58.12 I will notify the Health Research Ethics Committee should the study be terminated.

<table>
<thead>
<tr>
<th>Name (Title, Full Names &amp; Surname)</th>
<th>Qualifications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Izanette van Schalkwyk</td>
<td>PhD Psychology</td>
</tr>
</tbody>
</table>

Signature: [Signature]
Date: 2018/04/30

Remember to save your document regularly as you complete it!
Health Research Ethics Application

**Study Leader**
(Title, Initials and Surname)

Dr I van Schalkwyk

**Study Title**
(see § 1.1)

Married couples’ perceptions of relational strengths in the context of a high-risk community

**NWU Ethics Number**
NWU-00061-18-S1

1.59 **Sec 8b: Statistical Consultant (If applicable)**

The statistician of the Statistical Consultation Service of the North-West University completes this section (where applicable).

1.59.1 Have you ascertained that the statistical analyses to be used in this study is justifiable according to your judgement?

Please mark with X in the appropriate box and provide details.

- **Yes**
- **No**

<table>
<thead>
<tr>
<th>Remarks</th>
</tr>
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<tbody>
<tr>
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</tbody>
</table>

**Name (Title, Full Names & Surname)**

[Click here to enter text.]

**Qualifications**

[Click here to enter text.]

**Signature**

[Click here to enter a date.]

**Date**

Remember to save your document regularly as you complete it!
Health Research Ethics Application

<table>
<thead>
<tr>
<th>Study Leader</th>
<th>Study Title</th>
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</thead>
<tbody>
<tr>
<td>Dr I van Schalkwyk</td>
<td>Married couples’ perceptions of relational strengths in the context of a high-risk community</td>
</tr>
</tbody>
</table>

NWU Ethics Number

NWU-00061-18-S1

1.60 Sec 8c: Research Director (School director if Education request)

I, the undersigned, hereby declare that the above study has been reviewed by a Scientific/Proposal Committee and may proceed to the Health Research Ethics Committee and that the Study Leader/Researcher has enough physical facilities, equipment and money at his/her disposal to implement and complete the study.

1.60.1 Research Director:

The director of the research entity signs here.

<table>
<thead>
<tr>
<th>Name (Title, Full Names &amp; Surname)</th>
<th>Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prof Petra Bester</td>
<td>Research Director, AUTHeR</td>
</tr>
</tbody>
</table>

Signature 2018/05/01

Remember to save your document regularly as you complete it!

Credits

Compiled by the Faculty of Health Sciences Ethics Office for Research, Training and Support

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Section 2

Manuscript for Evaluation

2.1 Manuscript in Article Format

This mini-dissertation is submitted in article format as indicated in the 2018 General Academic Rules (A4.4.2 and A4.10.5) of the North-West University. The manuscript and article style adhere to the requirements for the specific journal, namely Family Relations: Interdisciplinary Journal of Applied Family Science, to which it will be submitted. Exceptions have been made with regard to the length of the manuscript and the page numbers that do not start at the title page, but this will be changed according to the guidelines before submission.

2.2 Guidelines to Authors for the Journal for Family Relations: Interdisciplinary Journal of Applied Family Science

The Family Relations Journal focuses on family issues and has published original, innovative and interdisciplinary articles since 1951. Their aim is to focus on articles for both scholars and practitioners. It includes: aging, child & parent relationships; cross-cultural/international issues; families across the life cycle; family diversity; family health; family interventions; family life education; family policy; family therapy; gender and family relationships; marital enrichment; marital strengths; minor families; religion and the family; sex education; sexual and emotional abuse; stress and relationships; women’s issues and much more.

The Journal contains approximately 120 pages and is published five times a year (February, April, July, October and December). The articles are peer reviewed and the acceptance rate is 20.4 percent.

The abstract must contain less than 150 words and must include the results and most important contributions. Following the abstract, less than six keywords to be included in alphabetical order. The font is to be 12-point Times New Roman or Courier and in double spacing. Only left justification to be allowed. The article, from title to reference, may not be longer than approximately 30 double-spaced pages. Page numbers must start with the title page, and be in the
upper-right-hand corner. The American Psychological Association style guidelines are to be followed when writing the article. The title must entail between 10-12 words and running head less than 50 characters and spaces. Acknowledgement notes can be included on the title page. No footnotes or endnotes are allowed and all important information must be included in the text. Only figures and not words to be used for dates, ages, sample, sub-sample or population size.
Married couples’ perceptions of relational strengths in the context of a high-risk community

Vasti Nortjé *, Izanette van Schalkwyk b and Lizanlé van Biljon c

*a* Corresponding author. Africa Unit for Transdisciplinary Health Research (AUTHeR), North-West University, Potchefstroom Campus, Private Bag X6001, Potchefstroom, 2520, South Africa, +27605017073, vasti.nortje@gmail.com, orcid.org/0000-0002-6983-3559;

b Centre for Child, Youth and Family Studies, North-West University, Potchefstroom Campus, Private Bag X6001, Potchefstroom, 2520, South Africa, +2772367739, 20977026@nwu.ac.za, orcid.org/0000-0002-8662-0897;

cAfrica Unit for Transdisciplinary Health Research (AUTHeR), North-West University, Potchefstroom Campus, Private Bag X6001, Potchefstroom, 2520, South Africa, +27827737607, lizanle@hotmail.com, orcid.org/0000-0003-0970-1121.
Abstract

Families living in high-risk communities are exposed to the destructive influences of poverty, unemployment, violence, and limited resources. Despite these challenging experiences, there are married couples who stay committed to their relationship despite troublesome circumstances. A scarcity on the marital relationship of couples living in a high-risk community with specific reference to existing literature within the Positive Psychology approach was identified.

A qualitative approach and a descriptive design were used to explore and describe the perceptions of married couples regarding relational strengths in a high-risk community. 17 Married individuals (1 male and 16 females) from Delft took part in the World Café. The student made use of content analysis.

Findings indicated effective communication, friendship, fulfilling sexual relationship, relationship with God, being part of a functional family and emotional fulfilment as the most important relational strengths of married couples living in a high-risk community.

Key words
High-risk community, marriage, positive psychology, relational strengths, resilience, strengths
Married Couples’ Perceptions of Relational Strengths in the Context of a High-risk Community

Introduction

To experience a healthy life, it is important for married couples to enjoy a committed, intimate and romantic relationship (Kantrowitz & Wingert, 1999; Frost & Forrester, 2013). Couples, who enjoy a fulfilling relationship, show certain attributes, such as shared humour, constructive conflict management and significant ways to communicate with their spouse (Fincham & Beach, 2010; Gottman, 2007; Gottman & Silver, 2000; Roffey, 2012). Ungar (2015) opines that although such behaviour is typical of couples enjoying a healthy relationship, it is also beneficial for couples to deal with challenges in their marriage. Banovcinova and Levicka (2015) highlighted that there are couples who create a secure environment for their family despite their difficult conditions. Positive Psychology offers the theoretical framework and a good fit to cultivate fulfilling and lasting relationships and to manage stressors in a constructive way (Gable & Haidt, 2005; Masten, 2015; Ungar, 2015).

Research Context

Delft, situated in the Western Cape, was established in 1989. Typical elements of a high-risk community are found in this environment, namely extremely high levels of unemployment (67%), domestic violence, gender-based violence, xenophobic violence, gang violence, cultural diversity, low-cost housing, shacks, and a high number of backyard dwellers (Mortlock, 2015; Western Cape Youth Development Strategy, 2013). Because of the increased poverty, unemployment and scarcity of opportunities, married couples are increasingly exposed to domestic violence, crime, gang violence, disease and limited access to healthy social and economic networks (Philip, Tsedu, & Zwane, 2014; Coley & Lombardi, 2014). Although the harmful impact of these difficulties on their health and well-being cannot be escaped (Mash & Wolfe, 2006), some couples show commitment to invest in their relationship and cultivate a fulfilling marriage (Masten, 2015; Strachman & Gable, 2006; Venter, 2009).
Because of the student’s distinct interest in flourishing families and specifically the relational strengths of competent married couples, it was decided to conduct research in the Delft community in the Western Cape, because it is one of the identified high-risk communities in South Africa (Stats SA, 2014), and no studies have been identified with a focus on married couples’ relational strengths in this particular community.

**Positive Psychology**

Positive Psychology is the scientific study of how to empower people and communities to thrive (Wissing, 2014). The focus on flourishing does not resonate with an ameliorative point of departure, but implies a paradigm shift beyond disorder and disease towards the promotion of flow, meaning, and healthy relations (Fredrickson, 2009; Lyubomirsky, 2008; Seligman, 2011).

Flourishing individuals are living examples of high levels of well-being (Keyes, 2005) and positive relationships with family, friends and others are indicative of high well-being (Du Toit, Wissing, & Khumalo, 2014; Rothmann, 2014). Evans and Prilleltensky (2007) are of the opinion that the well-being of a person (personal well-being) is highly dependent on the well-being of his/her relationships (interpersonal well-being) and on the community in which he/she resides (collective well-being). Bolier et al., (2013) define well-being as a positive state of affairs in which the personal, relational, and collective needs and aspirations of individuals and communities are fulfilled. Flourishing families show strengths, such as warmth and appreciation, respectful communication patterns, shared humour, play and laughter, a spiritual orientation and well-being, and effective management of conflicts, stress and life challenges (Van Schalkwyk, 2018, submitted). Positive Psychology therefore assumes the presence of well-being as dissimilar to the mere absence of ill-being (Keyes, 2005), yet aims to understand and enhance those strengths that nurture/foster thriving relationships, without disregarding human suffering and negative circumstances and/or adversity (Du Toit, Wissing, & Khumalo, 2014; Meunier & Baker, 2012).
Rationale of the Study

Although many studies focus on marriage and relationships (DeFrain & Asay, 2008; Greeff, 2000; Robinson & Blanton, 1993; Viljoen, 1994), no studies were found about married couples’ perceptions of relational strengths in the context of the selected high-risk community in the Western Cape Province of South Africa. Cherlin (2010) mentioned that couples with a low income and low education are more inclined to divorce (Mash & Wolfe, 2008; Williamson, et al., 2018) which has a severe impact on their health and well-being. It is therefore important to understand how married couples manage and overcome adversities and what their perceptions are on how to nurture and intentionally encourage a happy and fulfilling marriage (Coley & Lombard, 2014). The student decided to pay attention to marital relationships in a high-risk community from a Positive Psychology approach, by exploring married couples’ perceptions of relational strengths.

Research Question

The research question for this study was formulated as follows: What are married couples’ perceptions of relational strengths in the context of a high-risk community?

Method

Research Design

The student made use of a qualitative descriptive design to explore married couples’ perceptions of relational strengths in the context of a high-risk community. She was sensitive to the participants’ differences and unbiased in respect of their shared experiences (Tillman, 2002). Researchers using a descriptive design “stay closer to their data and to the surface of words and events” (Sandelowski, cited in Colorafi & Evans, 2016, p.17).

Participants

The sample consisted of married individuals residing in all six sub-areas of Delft (Western Cape), a high-risk community with challenging socio-economic circumstances. Participants were recruited by making use of a purposive sampling technique (participants had to comply with inclusion criteria). Twenty four individuals from the Delft community were invited to participate in
the research, and seventeen attended. Participants were hetero-sexual married individuals, who were married for more than five years. It was not a condition for both members of a couple to participate. All of them could communicate in and understand Afrikaans and English.

Table 1

Demographic Information of Participants

<table>
<thead>
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<th>PARTICIPANTS</th>
<th>MALE OR FEMALE</th>
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<th>YEARS MARRIED</th>
<th>CHILDREN</th>
<th>EMPLOYMENT</th>
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<td>16</td>
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<td>36</td>
<td>Unknown</td>
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<td>17</td>
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<td>24</td>
<td>2</td>
<td>1</td>
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</tbody>
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Note. U = Unemployed, T = Temporary Employment, P = Permanent Employment

Only 1 of the participants was male, while the other 16 participants were female. Although the criteria required individuals to be married for 5 years or longer, it seemed from the demographic
questionnaire that they were married between 2 and 32 years and their ages were between 24 and 58. Participants who were married for less than 5 years were in long-term relationships and regard it no different as being married. All of the participants had children. 5 of them had only 1 child, 6 of them had 2 children, 1 of them had 3 children, 3 of them had 4 children, 1 of them had 6 children and 1 had 8 children. 9 of the participants’ income was less than R10 000 per annum, 4 of them earned between R10 000 and R38 400 per annum and for 4 participants the income was unknown. None of the female participants were permanently employed. 23.5% of the female participants were temporarily employed and 64.7% were unemployed. 7 of the husbands were permanently employed while 4 were temporarily employed and 3 were unemployed. 3 were unknown. According to Stats SA (2018) the current unemployment rate is 26.7%.

Data Collection

Data collection took place on a Saturday at a particular venue (school building which offered security and safety) in Delft. The World Café method was used to collect data and an interview guide based on certain themes found in existing literature was used. The World Café is data collection method that entails participants being seated at different tables. At each of the tables a question is discussed. After a few minutes the participants from each of the tables move to another table where a different question is talked through. This process continues until all the questions at the different tables are answered. According to Brown, Isaacs and the World Café Community (2005), good questions need to be asked to cultivate new or broader insights.

Many solutions can be created when people gather together in informal conversations to discuss questions, share knowledge, consider possibilities, and create actions (Brown, et al., 2005). This was also the reason why the student decided to make use of the World Café to gather information, because participants are holders of the wisdom and creativity to give their perceptions on strengths of couples in a high-risk community. The World Café was a fun and creative way to collect data within this culture, and this particular community (Brown, et al., 2005). The seventeen participants were divided into five small groups of three to four people per table.
Data saturation was achieved, because little or no additional data was generated and sufficient information was obtained for a good understanding of the participants’ perceptions of relational strengths in a high-risk community (Braun & Clarke, 2014).

**Ethical Considerations**

Ethical approval was obtained from the Health Research Ethics Committee of the North-West University (ethics approval number NWU-00061-18-S1). The gatekeeper (person viewed as the one allowing access to the selected high-risk community) was contacted (see HREC letter – Appendix D) and he assigned a mediator who was trained by the student. Informed consent forms were signed by the participants when they agreed to participate, but consent was not viewed as a once-off event, and during the commencement of the World Café it was again discussed with them. The mediator explained the possible emotional repercussions, as well as the possible indirect benefits of participation. Permission was given by the participants for their responses to be audio-recorded and photos to be taken. Participation was voluntary and they had the opportunity to withdraw without reason at any time during the study. It was explained to them that their participation would be anonymous, and instead of names they would have numbers (Driscoll, 2011). Participants’ privacy was protected by displaying a “do not disturb” sign on the door. The security staff at the school building assisted with the safety of everyone involved. After the event, all recordings were transferred to the student’s password protected computer and then it was deleted from the recording devices.

Although the transcriber had access to the interviews, no names were revealed. Only the student and co-coder had access to the transcribed data and were able to look at the findings. A confidentiality contract was signed by the transcriber and co-coder. All data were kept safe by keeping hard copies in a locked cupboard in the student’s office and electronic data were saved on password-protected Google Drive. The participants were informed that the data were only be used for the purposes as set out in the proposal. Once the research dissertation and article(s) were complete (before the graduation ceremony), the student would hand over the raw data to the North-
West University (Potchefstroom) for safekeeping and information of recordings would be deleted from her computer. Data will be stored for six years at the Potchefstroom campus (office of AUTHeR) after the student has completed her studies and will be deleted via shredding by an appointed person of the AUTHeR office.

Data Analysis

The audio discussions of the World Café were transcribed. These transcribed data, i.e. textual data together with the visual data, namely drawings, words and doodles on the paper tablecloths at the World Café session served as the data which were analysed. In qualitative research, the student forms part of the research process by collecting the data and making sense of it by examining documents, observing behaviour and interviewing the participants (Niewenhuis, 2016).

Categories and explanations were developed by making use of content analysis. This transcribed information served as textual data and the student made sense of it by exploring the data, examining the documents and analysing it using steps as explained by Bengtsson (2016). Each stage was repeated several times to ensure quality and trustworthiness (Bengtsson, 2016).

Firstly, the student familiarised herself with the data by listening to the audio recordings, and reading through the transcribed data to get a sense of the whole. The data was then broken down into smaller units that were labelled with a code; a list was made of all the codes; the codes changed as the study progressed. Since computer programs cannot analyse data, the student still had to decide on the themes and the conclusions emerging from the results (Bengtsson, 2016).

The student then made use of coloured pens to distinguish between codes and create themes. The selected codes should not fit into more than one theme. Once the themes were confirmed, the student started with the writing-up process and tried to find the core of the research. The student had selected appropriate quotations, found in the text, to confirm the themes (Bengtsson, 2016).
Finally, the student correlated the findings with literature to establish its thoroughness and trustworthiness (Bengtsson, 2016).

**Trustworthiness**

The student made use of Guba’s (1981) construct for trustworthiness, namely credibility, transferability, dependability and confirmability.

To improve credibility, the student made use of the World Café to make sure that results were the accurate reflection of the participants’ views. The student audio-recorded all the group sessions and transcribed the recordings to make sure no relevant data was excluded (Farrelly, 2013; Bengtsson, 2016). Transferability refers to how applicable the results are to other groups or settings (Bengtsson, 2016). This was done by defining the context, participants and settings of the study in specific detail (Farrelly, 2013). Detailed descriptions of the information gained from the World Café also ensure transferability (Teddlie & Tashakkori, 2009). The student established dependability by analysing the data separate from the co-coder, and discussing the possible themes until clarity was achieved regarding specific themes (Bengtsson, 2016). Confirmability refers to the assumption that the results can be confirmed by others (Farrelly, 2013). An “audit trail” was established by keeping all notes, audio recordings, and paper tablecloths safe. All procedures were documented, and data were checked to make sure there were no contradictions (Farrelly, 2013).

**Findings and Discussion**

In this high-risk community called Delft people are exposed to enduring poverty, high levels of unemployment and violence in all forms, such as gang violence, and domestic violence, where men, women and even children are involved in fights and have to be hospitalised. There is scarcely a family where at least one of the family members is not using illegal substances. South Africa is top of the list for violence against women and children (UNICEF, 2014). In this community, it cannot be assumed that most couples are married and are part of a healthy family structure obtaining knowledge via daily exposure to positive relational strengths (Van Schalkwyk, submitted 2018). Their perception of marriage is largely defined as two people living together in a long-term
relationship. They perceive strengths as communicating in such a way, mainly to prevent violence, because conflict between couples in Delft is ordinary (Personal conversation, Kobus Pauw, 26 August 2018). Participants’ resilient living was illustrated in their honest conversations about facing adversity, and not denying their circumstances, but being positive and grateful despite their adversities, and that prevented them from spiralling downwards (Fredrickson, 2009). This is also in line with Positive Psychology with its focus on strengths, existing assets, such as personal and external resources, and how to enhance quality of life. This shift from subjective well-being and hedonic (feeling good) happiness to living purposefully is understood from the eudaimonic (functioning well) perception (Wissing, 2014).

The results of this research are presented as 6 main themes and 15 sub-themes which were identified during data analysis. The participants identified effective communication, friendship, sexual relationship, relationship with God, family and affection as the core relational strengths of married couples living in a high-risk community. Next the identified themes and sub-themes are discussed with the support from existing literature.

Table 2

Summary of main and sub-themes

<table>
<thead>
<tr>
<th>Main themes</th>
<th>Sub-themes</th>
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<tbody>
<tr>
<td>1. Effective communication</td>
<td>1.1 Qualities of effective communication</td>
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<td>1.2 Possible barrier to effective communication:</td>
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<td></td>
<td>Technology</td>
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<tr>
<td>2. Friendship</td>
<td>2.1 Partnership</td>
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<td>3. Sexual relationship</td>
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<tr>
<td>4. Relationship with God</td>
<td>4.1 Support groups</td>
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<td>5. Couples as part of a functional family</td>
<td>5.1 Support from wider family</td>
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<td>5.2 Family commitment and child rearing</td>
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<td>5.3 Couples and their role as parents</td>
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</tbody>
</table>
5.4 Managing outside interference

6. Emotional fulfilment

6.1 Acts of service/Domestic support

6.2 Words of affirmation

6.3 Quality time

6.4 Gifts

6.5 Affection

6.6 Feeling emotionally safe

6.7 Physical attractiveness

6.8 Gratefulness/Appreciativeness

1. Main Theme: Effective Communication

All participating groups were of the opinion that communication is one of the most important relational strengths between married couples living in the selected high-risk community. This was expressed as: “No communication no relationship.”

According to Harley (2011), intimate conversation has to be an important aspect in a couple’s daily life. To maintain their love for each other and meet their needs, couples need to schedule time for undivided attention, where they can have enjoyable conversation. Effective conversation is also important for everyday problem solving and conflict management. Communication with your spouse is intimate, because it focuses on your feelings, thinking and doing. This will ensure a sustainable marriage (Harley, 2011).

1.1 Sub-theme: Qualities of effective communication

Trust and honesty

Participants spoke about the positive nature of daily conversations and they referred specifically to qualities of trust and honesty. “Ons moet alles met mekaar kan deel. Niks wegsteek van mekaar af nie.” (We must be able to share everything. To not hide anything from each other.)
When couples share their thoughts and feelings with each other, it is a sign of sacred trust where they can feel safe (Hendrix, 2008). People in intimate relationships assumed that it would be defined by safety and trust and that they would be respected (Du Toit, Wissing & Khumalo, 2014).

All groups confirmed that the key role of communication is to build trust in a relationship. “En as ons nie kan praat met mekaar nie, gaan ons vertroue nie goed wees nie.” (And if we cannot talk to each other, there will not be any trust.)

**Effective communication resolve conflict.**

Groups 1, 5 and 6 indicated that effective communication is important to resolve conflict in a relationship, by saying: “Kommunikasie, because why, want as daar nie kommunikasie is tussen twee mense nie dan verstaan ons nie mekaar nie. Dit maak konflik.” (Communication, because if there is no communication between two people, then we do not understand each other. It leads to conflict.) “...as jy jou uit val gehad het, praat daaroor voor jy gaan slaap, praat daaroor en maak vrede. Dan slaap jy sommer lekker want daar is vrede en liefde, more oggend staan jy op vreesaamheid.” (...and if you had a fight, talk about it before you go to bed and make peace. Then you will sleep well, because there is peace and love and you wake up the next morning with that peacefulness.)”As daar probleme was en daar is uit die hand uit geraak, om te herken jy was verkeerd, skuld herken as jy verkeerd was en vra verskoning, voor die violence begin. Voor die oorlog begin.” (If there were problems and things got out of hand, to admit you were wrong and ask for forgiveness, before it gets violent. Before the war starts.)

Conflict becomes dangerous if couples ignore it in the hope that it will go away by itself. Conflict must be addressed when it happens and cannot be ignored. Couples have to talk about matters of interest in constructive ways (Gungor, 2017). Harley (2011) confirmed that by saying that conversation is important for everyday problem solving and conflict management. Conflict about any problems can be resolved if couples only learn to speak to each other. The more relaxed and safe the conversation is, the easier they will come to a mutual agreement. Couples do not need
to agree with each other, but it is important to listen with an open mind and try to understand the other person’s perspective (Du Toit, Wissing, & Khumalo, 2014).

**Respect and acknowledging each other**

Participants spoke freely about the importance of reciprocal respect as one of the mechanisms towards healthy connecting. They also mentioned that if the “how” of communication is not done in a respectful manner, then couples are facing serious problems; even the danger of violence.

All the groups mentioned the importance of communicating with your spouse respectfully. They added: “...groet mekaar te alle tye. To acknowledge each other.” (...greet each other at all times. To acknowledge each other.); “En moenie mekaar embarrass voor ander mense nie. Moenie mekaar verkleineer nie.” (Do not embarrass each other in front of other people. Do not demean each other.); “As daar probleme was en daar is uit die hand uit geraak, om te herken jy was verkeerd. Skuld herken dat jy verkeerd was en vra verskoning. Voor die violence begin.” (If there were problems to admit you were wrong and ask forgiveness before the conflict gets violent.)

Women fall in love with men who take the time to have a conversation with them. They stay in love with him, when he continues to meet those needs (Harley, 2011). No relationship is without its disagreements but what damages it is how quickly the arguments turn nasty. Couples who become very hostile quickly are more likely to separate (Desmond, 2017). Gottman and Silver (2000) encouraged couples to stay calm during an argument. To be able to discuss sensitive topics while staying calm is one of the basic requirements for a happy marriage.

**1.2 Sub-theme: Possible barriers to effective communication: Technology**

Participants referred to the pros and cons of technology with reference to a couple’s communication. Group 4 was of the opinion that technology can be positive and negative in a relationship. They responded: “Ek het ook ‘n vriendin wat getroud is en sy like haar man in die bed, maar prefer om mekaar te WhatsApp. So praat hulle met mekaar.” (I have a friend that is married and although she likes her husband in bed, they prefer to WhatsApp each other. That is how they
communicate.); “Die phone is ‘n probleem. Daar moet eintlik niks tussen hulle kom nie.” “Hulle moet mekaar kan vertrou.” (The phone is a problem. There must be nothing between them.” “They must be able to trust each other.). and “…miskien soos hy nou ‘n voorbeeld gemaak het as hy nou langpad gaan vir ‘n week hy moet sy vrou kan trust.” “Dan is ‘n phone baie, baie belangrik vir communication.” (...maybe like the example he mentioned if he has to work far from home for a week, he has to trust his wife.” “The phone is then very important for communication.)

The positive use of technology is supported by Strachman and Gable (2006) who have shown that couples who contact each other via cellphone during the day to find out how they are doing and to let them know that they were thinking of their spouse, experience greater happiness in their relationship. On the other hand, if a person calls his/her spouse to check up on him/her, it may lead to conflict (Meunier & Baker, 2012). When using technology to communicate, there is a lack of emotion and body language that leads to only listening to reply and not to fully understand the other persons point of view (Richardson, 2018).

Effective communication plays an essential role when empathising with others, understanding their concerns and solving problems (Richardson, 2018). Communication is perceived as a vital emotional need and should be part of daily life for couples to understand each other clearly and to meet each other’s needs (Harley, 2011).

2. Main Theme: Friendship

Participants discussed the worth of being good friends in a marital relationship. Groups 1 and 2 especially highlighted this by mentioning that couples need to be each other’s best friends. They responded by saying: “Mekaar se vriend wees. Baie belangrik.” “Maak ‘n goeie verstandhouding. Julle is nie net man en vrou nie, maar vriende ook.” “Wees beste vriende.” (To be each other’s friend. Very important.) (To have a good understanding. You are not only husband and wife, but friends too.) (Be best friends.)

Most intimate committed relationships start out as friendship. Couples who have a strong friendship relationship from the start will withstand challenges easier later in their relationship.
Once you have found your perfect partner, the relationship has to be nurtured in order to enjoy a solid friendship foundation (Meunier & Baker, 2012; Du Toit, Wissing, & Khumalo, 2014; Bloom & Bloom, 2018).

2.1 Sub-theme: Partnership

Participants in groups 1, 2, 4 and 6 emphasised the role of teamwork and couples being in an equal partnership. They added: “Teamwork. Hulle moet altyd saam.” (Teamwork. They must always be together); “Daar moet equal partnership wees.” (They need to be in equal partnership); “Standing together”; “’n Span te wees. (To be a team.)

In a thriving relationship individuals are equal and do not see one as superior to the other (Meunier & Baker, 2012). Although participants mentioned the importance of equal partnership as relational strength in a marriage, it seems not to be the case in their practical situation. For example, during the data collection opportunity, they put great emphasis on keeping their spouse happy to prevent him/her from having an affair.

Sharing goals, dreams and vision.

Groups 2, 5 and 6 mentioned the importance of shared dreams and that couples need to work as a unit toward these goals. They recorded: “Dieselfde goals vir hulle huwelik vorentoe.” (The same goals for their marriage.); “Share dreams.”; “En saam bou, dieselfde visie het.” (To build together, having the same vision.); “As die een ’n vision het, dan kan saam discuss daai vision en dan werk op daai vision saam as ’n couple.” (If they have a vision, they can work together towards that as a couple.)

People who pursue goals that are in line with their values are more likely to live a life of authenticity and integrity (McMahan & Estes, 2011). When they choose their activities in accordance with their dreams, they are moving towards functioning well (Potgieter & Botha, 2014).

Helping, learning from and supporting each other.

Groups 2, 4 and 5 mentioned the importance of couples helping each other and learning from each other. They said: “Ons moet mekaar help waar ons kan.” (We must help each other
Couples who work on their relationship were more successful in having a fulfilling relationship despite challenges that they had to face (Halford, Lizzio, Wilson, & Occhipint, 2007). In a committed relationship, individuals support each other in their careers and make their dreams come true. They create their own culture, rituals and traditions within their partnership (Meunier & Baker, 2012). Supporting their spouse plays an important role in their relationship (Seychell, 2016).

Lyubomirsky (2013) mentioned that your closest and most intimate relationships are distinguished not by how they react to each other’s disappointments, but by how they react to their good news. The word ‘capitalising’ is a term in Positive Psychology that describes active and constructive listening to the good news they share. They allow the spotlight to shine on the other person. People are more likely to give a shoulder to cry on, but treat good news with negative reaction. In a relationship, your spouse must be your greatest cheerleader (Desmond, 2017).

3. Main Theme: Sexual Relationship

Groups 1 and 2 mentioned the importance of having a healthy sexual relationship with your husband, because there are many young girls who flirt with the married men in the community to get their attention. They added: "One must not only be into it, both must be into it. Otherwise the one is going outside and look somewhere else. A healthy appetite for sex is good."; "En hulle kyk rond en so, so as jy nie jou man gaan bevredig en dan gaan jy, you know? Veral hier by ons, dit gebeur." (The men look around, and if you do not satisfy your husband, then he is going to, you know? Especially here in our community it happens.); and "In Delft is daar ‘n klomp jong dames, wat gaan vir daai getroude mansmense." (In Delft there are many young ladies, who go after married men.)
The reasoning of female participants for having a healthy sexual relationship with their husbands in the high-risk community was mostly based on avoiding their husbands’ unfaithfulness. No literature could be found to support this assumption, but Harley (2011) opines that when an individual finds someone outside his/her marriage to whom he/she is attracted and who meets his/her needs, there is a risk of having an affair, but such a relationship is not built on reality, only on fantasy. However, Gottman and Silver (2000) suggest that the benefit of playfulness in relationships could lead to a greater sense of intimacy and closeness. The intentional use of playful activities can also be associated with greater sexual satisfaction (McCarthy & McCarthy, 2009). Couples experiencing sexual pleasure, affection, trust, openness and consideration in their marriage are more likely to enjoy a lasting marriage (Cohen, Geron & Farchi, 2009).

Although studies have shown that sex is vital for a happy marriage and a fulfilling sexual relationship is only possible where the sexual needs of both individuals are met (Gungor, 2017), the current research hints at female partners in this community using sexual activities to ensure their male partners’ faithfulness and closeness.

4. Main Theme: Relationship with God

Participants of groups 1, 4 and 6 mentioned the importance of always involving God in your relationship and that partners must pray for their marriage and spouse. They stated: “Always involve God.”; “Saam te bid.” (Pray together.); “Want ‘n huwelik sonder Jesus gaan nooit survive nie, maar ‘n huwelik in Christus, dit staan volkome. (A marriage without Jesus will not survive, but a marriage in Christ is complete.)

Seemingly, a relationship with God and the means of prayer were viewed as a relational strength, as when both partners enjoy or use similar spiritual power, they are based on a foundation for a healthy marriage. Moreover, people who participate in religious services and have a relationship with God, are happier than those who are non-religious (Guse, 2014). Being religious fills people with hope and optimism, love and forgiveness (Walsh, 2011), give them a sense of
meaning in (King, 2008) and satisfaction with life. This information is vital for couples living in a high-risk community, since they continuously face various challenges.

4.1 Sub-theme: Support groups

Groups 1, 2 and 3 mentioned the significance of getting help if couples struggle to solve problems. They reported: “...couple groups will also help.”; “Dit help om tips te kry by ander couples.” (It helps to get tips from other couples.); and “As jy nie self die probleem kan uitsorteer nie, gaan sien ’n pastoor of ’n kerkraadslid of gaan vir counselling. Go for counselling or go to a prayer group.”

When couples living in a high-risk community struggle to deal with difficulties by themselves they can benefit by making use of social support or become part of support groups, such as couple support groups or faith communities. People tend to participate in social sharing when they are going through difficult times, because social support is beneficial to people’s health and wellness. Having support from others both reduces stress, as well as equips individuals to better manage stressors (Gable & Gosnell, 2011).

According to research, individuals who pray for their spouse have greater relationship commitment and it generally strengthens happy marriages. It helps couples to create, maintain and transform their most cherished relationship. Studies also showed that religious beliefs of married couples help them cope with adversity and play an important role in promoting family well-being (Mahoney & Cano, 2014). Steffen (2012) confirmed that by saying that taking part in religious practices has a positive influence on one’s physical and mental well-being and it contributes to a person’s values and attitudes (Kashdan & Nezlek, 2012).

5. Main Theme: Couples as part of a functional family

5.1 Sub-theme: Support from wider family

All participants spoke about the importance of the wider family support. Group 6 specifically highlighted the value of a supportive family by saying: “En baie couples soek net support van die familie, want support van die family is baie belangrik, want as jy nie daai kry nie...”
suffer ‘n huwelik.” (A lot of couples are looking for support from their family, because a supportive family is very important, because if they do not have that support their marriage will suffer.)

Group 6 also mentioned the importance of spending time with your family. They added: “Tyd spandeer met familie.” (Spending time with family.)

Meunier and Baker (2012) indicate that in general, all humans benefit from the social support of close positive relationships. Gergen (2009) states emphatically that humans are relational beings per se, therefore positive relations are an indicator of healthy functioning. Diener and Seligman (2002) found that individuals who have a strong relationship with their family and friends and spend time with them are happier and show less symptoms of depression. South African studies show that individuals who have positive relationships with family members experience higher well-being and better health (Guse, 2014; Wissing & Van Eeden, 2014). Having people in your life who will care (give supportive advice, caring) for you during difficult times, has a positive effect on your health and well-being (Compton & Hoffman, 2013; King, 2008). Having people to talk to during difficult times helps them cope more effectively with stress and increase recovery time (Gable & Gosnell, 2011). Clearly, quality of family life, such as shared enjoyable moments could also enable married couples to overcome and conquer any challenges they may face (Meunier & Baker, 2012).

5.2 Sub-theme: Family commitment and child rearing

Groups 5 and 6 spoke about the various benefits of family support with regard to the rearing of children. They indicated: “Ons moet onse kinders beskerm.” (We have to protect our children.); “Die kinders moet ook kan sien my ma en pa is vir ons.”(The children must see that their mom and dad are for them.); “En ons moet onse kinders insluit.” (We have to include our children.); and “Dis ‘n groot adjustment om ‘n man te trou met kinders. Jy moet jou kinders tevrede stel en so lief soos wat jy is vir hom moet jy vir die kinders wees.”(It is a big adjustment to marry a man with children. You have to keep your children happy and must love his children just as much as you love him.)
Family commitment entails responsibility for the development of the children, to help them to understand the value of working together and taking care of each other. Parents need to spend quality time with their children to help them become successful adults (Harley, 2011). According to Fredrickson (2009), love is a “micro-moment of positivity resonance”, meaning that to share a close relationship with a person is defined by positive emotions and is characterised by connectivity and a sense of feeling safe.

**Effect of conflict on children.**

Although domestic violence is not uncommon in this community, participants spoke about the negative impact of parents’ conflict on their children. Groups 1 and 2 indicated the importance of keeping conflict private and not involving the children. They recorded: “Om nie die kinders te involve as hulle skel. Moet nooit voor die kinders skel nie. Praat privaat.” (Do not involve children when there is conflict between you and your spouse. Do not fight in front of the children. Speak to each other in private.); and “Ek het kinders en dit is nie lekker om te sien hoe ‘n kind reageer as die ouers se verhouding nie uit werk nie of die ouers het probleme maak dit die kinders se probleem...” (I have children and it is not nice to see how children react if there is trouble in the marriage or if the parents involve the children with their marital problems.)

Children tend to feel threatened and fearful, when their parents are in conflict. The reason for that is because they blame themselves for the fighting and are scared that their family will split up. Children who are exposed to conflict are more likely to develop mental health and emotional problems, such as depression (ESRC, 2013).

**5.3 Sub-theme: Couples and their role as parents**

The importance of the different roles of a couple in the core family was mentioned by groups 2, 5 and 6. They stated: “Dis nou om jou vroulike pligte na te kom, ‘n ma te wees vir jou kinders, goeie vrou te wees vir jou man.” (To comply in your role as wife, being a mom to your children, to be a good wife to your husband.); “Ons bespreek dit as ‘n gesin, sodat almal kan weet in die huis in, dit is so en so en so word die dinge gedoen in die huis in.” (We discuss it as family so
Most married couples have an understanding of their different roles in their relationship. Couples agree to share chores and duties equally, but that is not always the case. In some instances the roles become reversed. Traditionally, husbands had to go to work, while the wives stayed at home and tended to the household and primarily taking care of the children. Now things have changed. In most households, both parents have to work and responsibilities must be shared, but not necessarily equally. There are still responsibilities that only men and women take care of. Most men take care of the repairs and women of the cooking and cleaning. Both parents determine the child-rearing practices, but usually one takes the lead in disciplining the children. The success of the marriage depends mostly on mutual respect and affection (Neuman, 2013).

5.4 Sub-theme: Managing Outside Interference

In this South African context and in this high-risk community, it is quite common that a family member, for example, the wife involves a parent or a friend or a neighbour in times of difficulty. Groups 1 and 6 discussed the importance of managing interference from outside. They said: “Kan nie na my ma toe hardloop of na my pa toe nie, nou gaan ek gaan praat van hom daar by my ma, en – maar ek het nog nie eens saam met hom gepraat nie.” (I can not run to my mother or to my father and discuss the problems I have, before I have discussed it with my spouse.); “Jy weet nou al hoe om daai probleem op te los sonder om familie in te bring.” (You know by know how to manage problems, without involving the family.); “Waar sy sien miskien, jy lig jou hande. Dan kan sy inmeng. Maar moenie inmeng terwyl julle twee skel nie. Al skel julle hoe hard.” (Where the mother-in-law may see that he is going to hit you, then it is fine to interfere. But she must not interfere when you are only scolding.)

In the past, most individuals stayed close to their families and they shared chores, such as caring for their children, cooking and washing. They were close to their trusted network from which they could get the necessary support. Unfortunately, those networks are not too common these days,
because when a couple gets married, they usually move away from their families. It is especially important for a woman to stay close to her emotional support structure for her to be happy (Gungor, 2017). Like Gungor (2017), the participants also identified the value of family, although they opined that when they get married they have to put their spouse first and cannot share all their problems with their wider family, before they have not discussed it with their spouse first. It also became clear during the data gathering, that the participants do not want family to interfere when they are in conflict, but as soon as the conflict turns into physical abuse, they feel family can step in and defuse the situation.

6. Main Theme: Emotional Fulfilment

When couples experience positive emotions, such as love, contentment and joy, it enhances their psychological resources and it leads to a flourishing life (Guse, 2014). Having close relationships can be a source of great joy and meaning (Du Toit, Wissing & Khumalo, 2014). According to Sternberg (1986) love consists of passion, intimacy and commitment. Most women experience security, protection, comfort and approval when they receive affection from their husbands. They feel that their husbands care for them, see them as important and want to help them with problems they may experience (Harley, 2011). Affection can be in the form of a hug, a greeting card or note expressing love and care, a bouquet of flowers, cooking dinner, holding hands and much more. Women experience affection as one of the core elements of their relationships with their husbands (Harley, 2011). It is a challenge to maintain admiration over a long period of time, but it is important for the stability of a long-term, committed marriage. In order to keep fondness and admiration in the relationship, it is important to generously show appreciation for it and give praise (Meunier & Baker, 2012). Couples who show admiration towards each other are more open-minded and acceptable of their differences (Gottman, 2007) and will be more positive about their relationship (Fredrickson, 2009). For a marriage to stay positive, it is important for couples to express their positive feelings towards each other (Meunier & Baker, 2012).
6.1 Sub-Theme: Acts of service/Domestic support

All the groups spoke about the positive impact when couples demonstrate their love via acts of service. They recorded: “En maak lekker kos.” (Make delicious food.); “Maar vir my is dit ‘n plesier om my man te hanteer. Ek was my man en ek doen alles. Ek sny sy hare. Ek sny sy baard. Ek het gister vir hom so sexy gemaak.” (I enjoy taking care of my husband. I wash my husband and do everything for him. Yesterday I made him so sexy.); “En moenie jou vererg as jou man nou bietjie tee vra nie. Gee vir hom daai tee, gee vir hom daai biscuitjie.” (Do not get annoyed if your husband asks you to make him tea. Give him tea and a biscuit.); “Steel jou vrou se hart en sê een oggend ai jinne liefie ek gaan nou maar opstaan en vir die kinders klaarmaak vir skool en hulle porridges maak en so.” (Steal your wife’s heart by telling her one morning that you will get the children ready for school and give them breakfast.); and ”...en die kinders se huiswerk, kom daddy gaan vir julle nou help met julle huiswerk.” (and daddy will help them with their homework.)

This sub-theme entails doing things you know your spouse would appreciate. It requires thought, planning, time, effort and energy (Chapman, 2015). Acts of kindness improve affection in a relationship, but it is short-lived if the new kindness becomes the new normal. It is important to mix kindness up a bit. For example, making the children breakfast every morning will be delightful for a while, but then it becomes the norm. If you perform different acts of kindness, your partner will be surprised every time. To have a flourishing marriage, it is important to blend kindness with spontaneity (Desmond, 2017).

6.2 Sub-Theme: Words of affirmation

Groups 3 and 6 mentioned the worth of words of affirmation as core components of couples’ relational functioning. They recorded: “Ek was baie insecure na my babatjie. Hy het my laat goed voel. Ek voel nou sexy.” (I was insecure after giving birth to my baby. He made me feel so good. Now I feel sexy.); “Groet mekaar. Staan op in die oggende, sê vir mekaar môre, moenie vergeet om te sê lekker slaap van so iets nie. Ek is lief vir jou.” (Greet each other. When you wake up in the
morning, greet each other and don’t forget to say sleep well or something like that. I love you.); “Mekaar komplimenteer” (Complement each other.); “Sê altyd vir jou vrou sy is lief en sy is like mooi.” (Always tell your wife she looks good and that you love her.)

Another way to express your love for your spouse is by using uplifting words. Couples do not realise the power of verbal affirmation and sincere compliments. These words of affirmation will meet the need for appreciation (Chapman, 2015).

6.3 Sub-Theme: Quality time

Spending quality time together is crucial for emotional fulfilment for couples. All the groups articulated that quality time, namely spending time with each other as a couple, is a core component of healthy couples. They added: “Julle kan peacefully net wees. Stupid sometimes met hom wees, silly dinge doen met hom, hy verstaan jou.” (You can be peaceful with each other. Doing stupid and silly things together, he understands you.); “Jy het nie nodig om daar buitekant te gaan soek vir geselskap nie, want hy is daar (You do not need to look outside for company, because he is there.); “Tyd maak vir mekaar alleen net die twee van julle.” (Making time for each other only the two of you.); “Spandeer so baie as moontlik tyd saam met mekaar (Spend as much time together as possible.), “Belangstelling gee aan waarin jou partner doen.” (Be interested in what your partner is doing.); and “Vra jou man uit oor hoe sy dag was as hy terugkom van die werk af.” (Ask your husband about his day when he comes back from work.)

Gottman (1999) is of the opinion that master couples are genuinely interested in each other and practise rituals of connection to keep in touch. Couples who experience fun and humour in their marriage are more likely to enjoy a positive relationship (Gottman, 2007). When your spouse gets back from work, give him/her your undivided attention and asked about his/her day. Show that you are interested and make the effort to listen to what he/she has to say. Everyone wants to be appreciated and understood. It is important to show your spouse that you know him/her and that you see him/her as the most important person in your life (Desmond, 2017).
6.4 Sub-Theme: Gifts

Group 3 indicated the importance of treating your spouse with gifts. They said: "Jy moet altyd vir jou vrou sê ek is lief vir jou, en 'n bos blomme, pamper." (You must always tell your wife you love her, give her flowers and pamper her.)

Receiving gifts is a visible symbol of love. It is a way of showing your spouse you were thinking of him/her and it does not have to cost money (Chapman, 2015).

6.5 Sub-Theme: Affection

Affection which could include physical touch was mentioned by groups 1, 4 and 5 as a relational strength in a marriage. They proposed: “Loop saam met mekaar en gesels en hou hande.” (Walk together, chatting and hold hands.); “Om vir ‘n man te wys daai vrou is belangrik vir hom.” (To show them that this woman is important to him.); “Being cuddled.”; “My vrou sal altyd my altyd inroep en sê hou vir my vas.” (My wife will always call me inside and tell me to hold her tight.)

Harley (2011) shows that affection is the expression of love and is a vital ingredient in any relationship. He states that many couples view affection, an emotional need, as the cement of their relationship. Desmond (2017) confirmed that by mentioning that affection does not need to be sexual. It can be an occasional hug, an accidental hand on the arm or a simple touch if your partner walks pass. These gestures can be unnoticed. Physical touch registers in the brain, lowering stress hormones such as cortisol, and it will increase oxytocin. Physical touch builds trust, bonding and intimacy (Desmond, 2017).

6.6 Sub-theme: Feeling emotionally safe

Group 6 was of the opinion that a wife wants to feel safe in the relationship. They recorded: “‘n vrou is iets sensitive, sy need daai dat sy voel by ‘n man. Baie vrouens voel nie safe by ‘n man.” (A woman is sensitive, she needs to feel safe with a man. There are many women who do not feel safe with a man.)
In a positive relationship, individuals experience a sense of safety (Johnson, 2008) because they make an effort to be respectful and affectionate towards each other, even when they are fighting. This emotional need implies that couples treasure this “safe space” and will avoid behaviour that could harm their spouse (Meunier & Baker, 2012). There is a discrepancy between the theory and the reality that the participants experience. They mentioned that a woman needs to feel safe, although getting violent during conflict is a normal phenomenon in their community. It can be that the need to feel safe is only their perception of relational strength in a married couple.

6.7 Sub-theme: Physical attractiveness

All groups mentioned the importance of being attractive to your spouse. They stated: “*Jy moet nie net vir jou mooi maak nie. jy moet vir hom ook mooi maak. Jou mooi aantrek. Opgedollie wees.*” (Do not only dress up for yourself, but also for your husband. Make effort with what you put on.); “*Sit jou lipstick aan en maak jou mooi.*” (Put on lipstick and make yourself pretty.); “*...en moenie met jou onesie loop heeldag nie.*” (...do not walk around with your onesie the whole day.); and “*Even if you are unemployed you must still dress you nice every day.*”

Harley (2011) indicates that physical appearance could be one of the greatest sources of love units. He also mentions that choice of clothing, hairstyle, weight, makeup and personal hygiene are indicators of attractiveness, but it can be very subjective.

6.8 Sub-theme: Gratefulness/Appreciativeness

Participants spoke about gratitude as essential for a successful long-term relationship. Groups 1 and 3 mentioned that you have to be grateful for your spouse and not wish for someone else. They said: “*Ons moet altyd dankbaar wees. Vir wat is, vir wat ons kry.*” (We must be grateful always. For what is and for what we have.); “*Aanvaar mekaar soos jy is.*” (Accept each other as you are.); and “*Moenie begeerlik wees nie.*” (Do not wish for someone else.)

Individuals who are grateful for their spouse are closer, more affectionate and more positive towards each other (Fredrickson, 2009). When couples focus intentionally on positive experiences in their marriage and on expressing it, they tend to be more creative about finding ideas and
solutions (Fredrickson, 2009). Lyubomirsky (2008) accentuates counting one’s blessings and/or keeping a gratitude journal as a valuable tool to increase contentment and happiness. Gratitude could assist couples towards increased levels of relational well-being (Fredrickson, Cohn, Coffey, Pek, & Finke. 2008).

**Summary**

In summary, the findings of the study showed that the participants perceive effective communication, being best friends with your spouse, enjoying a fulfilling sexual relationship, having a relationship with God, the importance of being part of a functional family and emotional fulfilment as the most important relational strengths for couples living in a South African high-risk community. These findings are the perceptions about the vital relational strengths for married couples in a high-risk community. In the context of high-risk and the lack of many basic needs, they uncovered these relational pointers, showing the true north towards a healthy marriage.

**Limitations**

Despite valuable information gained from the study, there were limitations. Most of the participants were females and it is highly probable that men would contribute even more rich data. However, it would appear that women are more willing to take part in such opportunities than men in the selected high-risk community.

Although the World Café is an excellent way of gathering data, not all participants gave equal input and they did not necessarily have the confidence to share their opinions where they may have felt outvoted.

In the demographic questionnaire, the participants were asked how many children they have, but no distinctions were made between biological- and stepchildren. It could have been interesting to have that information, because during data gathering, they stressed the challenges of having stepchildren.
Recommendations

Although the focus was on married couples’ perceptions, it could be recommended that the same study also be done with divorced individuals to get their perceptions on relational strengths and to identify the important aspects that their previous relationship lacked.

The participants stressed the importance of support from the wider family versus outside interference. It is recommended that future research can be done to enhance the community resources to support married couples, especially in a high-risk community, such as Delft, where there are countless challenges.

Although the participants viewed having a fulfilling sexual relationship with your spouse as a relationship strength, it would appear that the only reason behind this was to prevent the spouse from being unfaithful, because according to them, there are plenty of young ladies who are willing to take part in “once-off” sexual activities in exchange for money. It is recommended that future studies could be conducted regarding this phenomenon.

It is recommended that a booklet be compiled for couples (married or not) containing these identified relational strengths, with the aim of fostering their relationship.

Conclusion

The aim of this study was to explore and describe married couples’ perceptions of relational strengths in the context of a high-risk community. This specific high-risk community is defined by various social ills, such as poverty, unemployment, substance abuse and violence. Being married and part of a healthy family structure is not the norm in this community.

Participants perceived effective communication, being friends with your husband, enjoying a sexual relationship, having a relationship with God, being part of a functional family and fulfilling each other’s emotional needs as the most important relational strengths for married couples living in a high-risk community. The findings were parallel with the Positive Psychology framework, were the focus is on enhancing the quality of life by paying attention to strengths and existing resources.
The study contributes to existing research and insight about the vital importance of relational strengths for married couples in the context of a South African high-risk community.
References


Desmond, B. (2017). The positive psychology of successful relationships (Oh, and sex....). Retrieved October 11, 2018, from https://positivepsychologyprogram.com/positive-psychology-relationships/


Section 3
Summary, Reflection and Conclusion

Summary

Marriage plays an important part in a person’s well-being. Having a good marriage is strongly associated with a happy life, because all people need healthy human relationships and companionship (Bloom & Bloom, 2018). Seychell (2016) is of the opinion that the best relationship is where you can feel supported by your spouse and able to communicate about almost anything.

Positive Psychology focuses on enhancing the quality of human life, by emphasising strengths and resources of individuals and a community to promote optimal well-being. This theoretical framework was a good fit for the current research aiming to explore and describe married couples’ perceptions of relational strengths in the context of a high-risk community.

Research has mostly focussed on the causes and elimination of marital problems. Little research has been done on couples who thrive because of their ability to maintain a thriving relationship, despite challenges and setbacks (Tucker & Crouter, 2008). People living in a high-risk community experience these challenges and setbacks daily. They are exposed to poverty, a high incidence of crime, alcohol- and substance abuse and many other difficulties (Felner, 2006).

The student decided to do research with the aim of exploring and describing married couples’ perceptions of relational strengths in the context of a high-risk community. It became clear from the data gathered at the World Café, that married couples living in a high-risk community see effective communication with their spouse as one of the most important strengths in a relationship. They are of the opinion that when couples communicate with respect and acknowledge each other, they will be able to understand one another better, build trust and honesty to resolve conflict.

According to Seychell (2016), happiness is based on the time you spend together communicating and listening empathetically to one another. Talking to each other is one of the most fundamental aspects to expressing and sharing your feelings with your spouse. It is important to be able to share everything from your deepest fears to your greatest joys. Be accepting of your
partner’s thoughts, feelings and intentions and learn to accept changes that may happen (Seychell, 2016). Having a supportive friendship relationship with your spouse, working together towards the same goals and dreams were also of importance to them. Chatterjee (1999) is of the opinion that couples who see each other as intimate friends on an emotional and intellectual level, have the best marriages with the ability to repair whatever issue may arise. Couples need to find a balance between being with their partner and making time to spend on their own to refresh body and mind (Seychell, 2016).

They identified enjoying a fulfilling sexual relationship with their spouse as crucial, because of the many young ladies in the Delft area, who chase after married men. The participants believe if your husband does not have a fulfilling sexual relationship at home, he will be more vulnerable to the soliciting of the younger women.

The participants identified having a relationship with God and praying for your spouse of great significance in the relationship. Support from family plays a very valuable role in their relationships and in particular including the children in decision making. Making time to spend with social networks, such as family, is important for a flourishing relationship (Seychell, 2016). Many of the participants described having an affectionate relationship with your spouse as being critical to a happy marriage. In particular they mentioned the importance of acts of service, words of affirmation, spending time with your spouse, receiving gifts, physical touch, feeling safe and being attractive to your spouse. Existing research confirms the importance of being caring and romantic. You have to show your partner that he/she is important to you. Although we need to love each other unconditionally, it is important to pay attention to your appearance and make an effort to look fit and healthy (Seychell, 2016). They quoted being grateful for their spouse and being an example to younger people as fundamental in their community. This finding highlighted the importance of gratitude in the relationships of couples and of appreciating even the smallest acts of kindness for one other. Du Toit, Wissing and Khumalo (2014) confirmed the above by mentioning that having a healthy, close relationship, would enable couples to experience the greatest joy and the deepest
meaning. Positive Psychology focuses on what makes individuals and communities thrive and experience optimal human functioning. By doing this study, the participants had the opportunity to focus on strengths with the aim of enhancing quality of life. Strengths are also based in resilience when individuals show the ability of rebounding committedness despite difficult circumstances. The participants are living examples of persons within a married relationship living in a high-risk and high-need environment who show the ability to recover despite adversity.

The summary of the research aim and findings show that the objectives of the research have been met.

**Personal Reflection**

I am passionate about flourishing marriages and in particular the skills couples cultivate and the strengths they own to enjoy a long and lasting relationship, despite the difficulties they have to face daily. This journey was at times frustrating, because during the initial stages, I had to depend on other people to recruit participants, explain the research process to them and get the participants to sign the informed consent forms. This procedure took longer than expected, because they were oblivious to the fact that I only have a rather limited period of time to complete the research.

The World Café is an extraordinary method of collecting data. It gives participants a safe environment to share their stories and collective wisdom. On the other hand, it is time consuming to organise a World Café and a challenge to get all participants to meet at a specific place and time. People who initially agreed to participate would decide not to go or had to attend to other commitments, such as going to a family-member’s funeral. In this high-risk community, there is no certainty on how many people will actually show up. In this specific World Café, I did not know the participants and I had no idea if the people who arrived at the World Café actually did fit the requirements of the research. I had to trust the appointed mediator.

Because the World Café is such an interactive and engaging method whereby people get to discuss questions, share their knowledge and create actions, it can be taxing, especially where they have to share their personal stories despite the snacks and beverages available. The next time I
make use of this method, I will rather limit it to four questions and have more people in each group. I believe that it will be less draining on the participants and it will motivate people to be more engaging, because people feed off each other’s stories and ideas. Despite some drawbacks, the participants and student had an awesome experience at the World Café and they asked if we could do it again in the near future. They enjoyed the questions, could relate to each other’s answers and felt encouraged.

Interesting observations from the data shared were that most participants viewed having a fulfilling sexual relationship with their partner as a relational strength, but it seems that the only motivation behind that was to prevent their husbands from being unfaithful to them. In their community, there are plenty of young ladies who are making themselves available to married men in exchange for money.

It became clear from the data that violence during conflict was the norm in this specific community and that communication could be used to prevent conflict from turning into physical abuse.

Although this community is defined by poverty, unemployment and lack of resources, none of the participants mentioned the importance of having financial security or financial support as a relational strength.

I am amazed by the resilience these individuals show, by not denying their circumstances, but rather embracing them and being positive and grateful despite the challenges they face daily.

This was a remarkable opportunity where I had the privilege to meet numerous people with a wealth of experience and expertise. I would love to share the knowledge and wisdom I gained in these two years in the hope of benefiting and improving my own well-being, as well as that of others around me. As Robin S. Sharma says: “Quality of life will come down to the quality of our contribution. A little bit of fragrance always clings to the hand that gives you the rose.”
Limitations

In this high-risk community, it is typical for more females to attend such an opportunity, but it would have been valuable to also get the opinions of men on what their perceptions are of relational strength in a marriage.

Not all participants will always have the confidence to share their opinions in a small group and it is recommended that participants also get the opportunity to share their opinions on a piece of paper, that is only shared with the student.

During the data gathering, some of the participants shared the challenges they have in having stepchildren. It would have been interesting to know how many biological and stepchildren each of the participants had. The information could have been shared on the demographic questionnaire.

Recommendation for Future Research

Although the focus was put on married couples’ perceptions of relational strength, it could have been worthwhile to get the opinions of divorced couples too, in order to obtain their reflections on what strengths were lacking in their relationships and what they would perceive as important for an intimate and lasting marriage.

The participants also placed strong emphasis on support from family versus outside interference. Possible future research could be done on how to enhance these resources inside the community to support and improve marriages.

The participants identified that there are many young ladies who make themselves available to married men. Although they perceive having a fulfilling sexual relationship with their husband as a relational strength, it seems as if the main motivation behind this perception was to make sure they keep their husbands faithful to the marriage. Future research on this phenomenon could be of great value.
It would be helpful if a booklet could be made available for couples (married or not) setting out the relational strengths that were identified by the participants, with the idea of improving their current relationships.

**Conclusion**

Participants from the Delft area gave valuable insight into what they perceived as relational strengths in a marriage. This research contributes to research in Positive Psychology, by being the first study in South Africa to be done in exploring married couples’ relational strengths in a high-risk community. It also supports the field of Positive Psychology by helping couples to enjoy a happy (hedonic) and meaningful (eudaimonic) marriage. In the words of Barbara De Angelis: “The real act of marriage takes place in the heart, not in the ballroom or church or synagogue. It’s a choice you make – not just on your wedding day, but over and over again – and that choice is reflected in the way you treat your husband or wife.”
References


Appendix A

Demographic Information Questionnaire

ADDENDUM A: DEMOGRAPHIC INFORMATION/DEMOCRAFIESE INLIGTING

Please complete the overview and answer all the questions/Volsoei asemblief alle onderstaande vrae.
Mark with X where applicable/Merk toepaslike antwoord met X.

<table>
<thead>
<tr>
<th>Participant code/Deelnemer nummer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Age/Uurdeur</td>
</tr>
<tr>
<td>2. Gender/Geslag</td>
</tr>
</tbody>
</table>

Please indicate your gender/Dit is jou geslag aan.
Male/Manlike
Female/Vroulik

<table>
<thead>
<tr>
<th>3. Are you living in Delft/Woon jy in Delft?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes/Ja</td>
</tr>
<tr>
<td>No/Nee</td>
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<table>
<thead>
<tr>
<th>4. How long have you been living in Delft/Hoe lank woon jy in Delft?</th>
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<tbody>
<tr>
<td>Less than 10 years/Minder as 10 jaar</td>
</tr>
<tr>
<td>More than 10 years/Meer as 10 jaar</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. Where did you stay before moving to Delft/Waar het jy gewoon voor jy na Delft verhuis het?</th>
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<table>
<thead>
<tr>
<th>6. Housing (choose option below)Behuizing (kieu uit onderstaande)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brick house/Baksteen huis</td>
</tr>
<tr>
<td>Shack/Sinkttaal huis</td>
</tr>
<tr>
<td>Wendy house/Hout huis</td>
</tr>
<tr>
<td>Other: Specify/Ander: Specifiseer?</td>
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<tr>
<th>7. How many times were you married/Hoeveel keer was jy al getroud?</th>
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<tr>
<th>8. How long have you been married in your current marriage/Hoe lank is jy tog getroud?</th>
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<tr>
<th>9. How many children/dependents do you have/Hoeveel kinders/afhankliks het jy?</th>
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<tr>
<th>10. Employment of wife (choose option below)Buieinsent van vrou (kieu uit onderstaande optie)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not employed/ Werkloos</td>
</tr>
<tr>
<td>Employed temporarily/Tyderylike insentensien</td>
</tr>
<tr>
<td>Employed permanently/Permanents insentensien</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. Employment of husband (choose option below) Buieinsent van man (kieu uit onderstaande optie)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not employed/ Werkloos</td>
</tr>
<tr>
<td>Employed temporarily/Tyderylike insentensien</td>
</tr>
<tr>
<td>Employed permanently/Permanents insentensien</td>
</tr>
</tbody>
</table>

| 12. Household income/Inkomste van huishouding                                                |
| Less than R10,000 per annum/Minder as R10,000 per jaar                                     |
| Between R10,000 – R38,400 per annum/Tussen R10,000 – R38,400 per jaar                   |
| More than R38,400 per annum/Meer as R38,400 per jaar                                      |

Please make sure that you have answered all the questions/Blauk seer dat u al die vrae beantwoord het.
Thank you very much for your willingness to participate in the research/Bye dankie dat u bereid is om deel te neem aan die navorsing.
Appendix B

Interview Schedule

Schedule for World Café

Marital health is important to all couples, because it promotes physical and psychological wellbeing. Since there is a lack of research done on married couples living in high-risk communities, it is necessary to explore married couples’ perceptions of relational strengths in the context of a high-risk community.

1. What is your idea of a healthy marriage?

2. Discuss the aspects (strengths) that are most important for a married couple living in Delft?

3. How can married couples in Delft keep their marriage strong and/or improve it despite the challenges you face regularly?

4. How can married couples in Delft resolve conflict in a way that is positive and not to the disadvantage of their relationship?

5. In what ways are married couples in Delft supported to commit themselves to “keep on trying” with regards to their marriage?

6. What is your special wisdom/insight to continuously protect and promote the marital relationship?
Appendix C

Informed Consent Form

ADDENDUM C

Private Bag X1290, Potchefstroom
South Africa 2520
Tel: +2718 299-1111/2222
Fax: +2718 299-4910
Web: http://www.nwu.ac.za

Health Research Ethics Committee
Faculty of Health Sciences
NORTH-WEST University
(Potchefstroom Campus)
2018 -07- 03
HREC Stamp

INFORMED CONSENT DOCUMENTATION FOR PARTICIPANTS TAKING PART IN THE WORLD CAFé

TITLE OF THE RESEARCH STUDY: Married couples’ perceptions of relational strengths in the context of a high-risk community

ETHICS REFERENCE NUMBERS: NWU-00061-18-S1

PRINCIPAL INVESTIGATOR: Dr. Izaanette van Schalkwyk

POST GRADUATE STUDENT: Dr. Vasti Nortjé

ADDRESS: vasti.nortje@gmail.com

CONTACT NUMBER: 060 501 7073

You are being invited to take part in a research study that forms part of my Masters of Arts Degree in Positive Psychology. Please take some time to read the information presented here, which will explain the details of this study. Please ask the person explaining the research to you any questions about this study that you do not fully understand. It is very important that you clearly understand what this research is about and how you might be involved. Also,
your participation is entirely voluntary and you are free to deny participation. You are also free to withdraw from the study, even if you do agree to participate now.

The study has been approved by the Health Research Ethics Committee of the Faculty of Health Sciences of the North-West University (NWU-00061-18-S1) and will be conducted according to the ethical guidelines and principles of Ethics in Health Research (DoH, 2015). It might be necessary for the research ethics committee members of the university to inspect the research records, your personal details will however always be protected.

**What is the research study all about?**

The goal of the study is to explore married couples’ perceptions of relational strengths in the context of a high-risk community, namely Delft. The study will be conducted at Hindle High School in Delft and it will involve a World Café which is a method used in research to stimulate conversation and gather information. It will take place on a Saturday to allow individuals that work during the week to partake as well.

**Why have you been invited to participate?**

You have been invited to be part of this research because you are a married person living in a particular high-risk community in the Western Cape.

You comply with the inclusion criteria:

- You are in a hetero-sexual marriage for more than five years and reside in Delft.
- You can speak Afrikaans and/or English.

Exclusive criteria:

- Homo-sexual married couples
- Married couples who are not permanent residents of Delft, such as temporary dwellers.

**What will be expected of you?**

You will be expected to take part in a group discussion, called a World Café in the Delft community which will last for about 2 and a half hours on a Saturday.

This group discussion will take place in Delft.

**Will you gain anything from taking part in this research?**

There will be no direct benefit for you. It is possible that you will find it rewarding to be part of the research and having the opportunity to contribute toward scientific knowledge.
On a personal level you may have many positive experiences by sharing your insight and perceptions of relational strengths in marriages and learn from other married couples to strengthen your marriage even more.

Are their risks involved in you taking part in this research, and what will be done to prevent it?

There is a small possibility that the discussion around the tables might cause you to feel emotionally uncomfortable because of self-disclosure or sharing embarrassing moments of your past, however mostly positive questions will be asked, and no one will force you to share information. However, this risk is considered to be minimal and can be managed by contacting Life Line Western Cape (Tel: 0861 322 322) or Mrs Lynette Daniels at FAMSA (Tel: 021 447 0170) that can assist if necessary.

There are more gains for you in joining this study than there are risks.

How will we protect your confidentiality and who will see your findings?

The protection of your confidentiality means that none of your contribution during the World Café will be discussed or used for any other reason than for this research. Since the nature of the World Café implies only partial confidentiality, certain “group rules” will be put in place to encourage all participants to respect aspects related to confidentiality.

The student researcher will also urge all participants to respect the privacy of fellow participants and not repeat what is said in the World Café to others.

Anonymity of your findings will be protected and your privacy will be respected. The student researcher will ask your permission to audio record your contributions at the beginning of the data collection opportunity. Your confidentiality will be respected by not exposing your identity. Your names will be replaced with pseudo-names (fake names) or codes.

Findings will be kept safe by locking hard copies in locked cupboards in the student researcher’s office and electronic data will be password protected.

What will happen with the findings?

Data will only be used for research purposes. The findings will be reported back to the participants and it might be published in a scientific journal and/or presented at an academic conference.

How will you know about the results of this research?

The student researcher will give verbal feedback about the results to all participants who are interested in the information during a specific meeting in Delft.
Will you be paid to take part in this study and are there any costs for you?

No participants will receive any incentives, but your transport will be paid to attend the World Café and you will enjoy snacks and water during the data collection opportunity and a meal with juice after the World Café.

Is there anything else that you should know or do?

You can contact Vasti Nortjé at 060 501 7073 if you have any further questions regarding this data gathering opportunity.

You can also contact the Health Research Ethics Committee via Mrs Carolien van Zyl at 018 299 1206 or carolien.vanzy@nwu.ac.za if you have any concerns that were not answered about the research if you have complaint about the research.

You will receive a copy of this information and consent form for your own purposes.

Declaration by participant

By signing below, I __________________________ agree to take part in this study titled: Married couples’ perceptions of relational strengths in the context of a high-risk community.

I declare that:

- I have read this information/it was explained to me by a trusted person in a language with which I am fluent and comfortable.
- The research was clearly explained to me.
- I have had a chance to ask questions to both the person getting the consent from me, as well as the researcher and all my questions have been answered.
- I understand that taking part in this study is voluntary and I have not been pressurised to take part.
- I may choose to leave the study at any time and will not be handled in a negative way if I do so.
- I may be asked to leave the study before it has finished, if the researcher feels it is in the best interest, or if I do not follow the study plan, as agreed to.
- I will respect the privacy of my fellow participants and will not share what is said at the World Café outside the group.

Signed at (place) __________________________ on (date) __________________________

........................................... ...........................................
Signature of participant Signature of witness
Declaration by person obtaining consent

- I clearly and in detail explained the information in this document to __________________________________________
- I did/did not use an interpreter
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above
- I gave him/her time to discuss it with others if he/she wished to do so.

Signed at (place) __________________ on (date) ____________________

.........................................................................................  ............................................
Signature of person obtaining consent        Signature of witness

Declaration by researcher

I, Dr Vasti Nortjé declare that:

- I explained the information in this document to the participants/I had it explained by __________________________ who I trained for this purpose.
- I did/did not use an interpreter
- I encourage him/her to ask questions and took adequate time to answer them or I was available should he/she want to ask any further questions.
- The informed consent was obtained by an independent person.
- I am satisfied that he/she adequately understands all aspects of the research, as described above.
- I am satisfied that he/she had time to discuss it with others if he/she wished to do so.

Signed at (place) __________________ on (date) ____________________

.........................................................................................  ............................................
Signature of researcher        Signature of witness
Appendix D

Approval Letter from HREC

Dear Dr van Schalkwyk

3 July 2018

APPROVAL OF YOUR APPLICATION BY THE HEALTH RESEARCH ETHICS COMMITTEE (HREC) OF THE FACULTY OF HEALTH SCIENCES

Ethics number: NWU-00061-18-S1

Kindly use the ethics reference number provided above in all future correspondence or documents submitted to the administrative assistant of the Health Research Ethics Committee (HREC) secretariat.

Study title: Married couples' perceptions of relational strengths in the context of a high-risk community

Study leader: Dr I van Schalkwyk

Student: V Nortje-29645824

Application type: Single study

Risk level: Medium (monitoring report required six-monthly)

Expiry date: 30 July 2019 (monitoring reports will be due at the end of February and July annually until completion)

You are kindly informed that after review by the HREC, Faculty of Health Sciences, North-West University, your ethics approval application has been successful and was determined to fulfill all requirements for approval. Your study is approved for a year and may commence from 03/07/2018. Continuation of the study is dependent on receipt of the annual (or as otherwise stipulated) monitoring report and the concomitant issuing of a letter of continuation. A monitoring report should be submitted two months prior to the reporting dates as indicated i.e. annually for minimal risk studies, six-monthly for medium risk studies and three-monthly for high risk studies, to ensure timely renewal of the study. A final report must be provided at completion of the study or the HREC, Faculty of Health Sciences must be notified if the study is temporarily suspended or terminated. The monitoring report template is obtainable from the Faculty of Health Sciences Ethics Office for Research, Training and Support at Ethics-HRECMonitoring@nwu.ac.za. Annually, a number of studies may be randomly selected for an internal audit.

The HREC, Faculty of Health Sciences requires immediate reporting of any aspects that warrant a change of ethical approval. Any amendments, extensions or other modifications to the proposal or other associated documentation must be submitted to the HREC, Faculty of Health Sciences prior to implementing these changes. These requests should be submitted to Ethics-HRECApproval@nwu.ac.za with a cover letter with a specific subject title indicating, "Amendment request: NWU-XXXXX-XX-XX". The letter should include the title of the approved study, the names of the researchers involved, the nature of the amendment(s) being made (indicating what changes have been made as well as when they have been made), which documents have been attached and any further explanation to clarify the amendment request being submitted. The amendments made should be indicated in yellow highlight in the amended documents. The e-mail, to which you attach the documents that you send, should have a specific subject line indicating that it is an amendment request e.g. "Amendment request: NWU-XXXXX-XX-XX". This e-mail should indicate the nature of the amendment. This submission will be handled via the expedited process.
Any adverse/unexpected/unforeseen events or incidents must be reported on either an adverse event report form or incident report form to Ethics-HRECIncident-SA@nwu.ac.za. The e-mail to which you attach the documents that you send, should have a specific subject line indicating that it is a notification of a serious adverse event or incident in a specific project e.g. “SAE/Incident notification: NWU-XXXXXXX”. Please note that the HREC, Faculty of Health Sciences has the prerogative and authority to ask further questions, seek additional information, require further modification or monitor the conduct of your research or the informed consent process.


We wish you the best as you conduct your research. If you have any questions or need further assistance, please contact the Faculty of Health Sciences Ethics Office for Research, Training and Support at Ethics-HREC@nwu.ac.za.

Yours sincerely,

[Signature]

Prof Wayne Towers
HREC Chairperson

[Signature]

Prof Minnie Gosaaf
Ethics Office Head

[Date: 3 July 2018]
Appendix E

Photos from World Café
Appendix F

Example of Verbatims and Data-analysis

Question 1 - Vasti Nortje

What is your idea of a healthy marriage?

What is uitdier van ’n gesonde huwelik?

Deelnemer: Agree met alles. Praat oor die dinge. Praat oor die dinge saam in Kommunikeer meer.

Deelnemer: Om nie met die ooreenkoms te oor die goed te praat.

Deelnemer: Jou seksuele is ook op datum. Laat.

Deelnemer: Moenie woorde nie, ek gaan jou hou wys wat my drie ding is.

Deelnemer: My drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Trust, die use en die huwelik.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.

Deelnemer: Tuisse is moeilik waar daar is.

Deelnemer: Dit is die drie dinge wat ek gedink het, is komunikasie tussen my. Moet oor elke iets kan praat. Ons moet se iets en oor alles. Tuisse is moeilik waar daar is.

Deelnemer: Ek dink hoe ek moet weet.
Appendix G

Example of Data-analysis in ATLAS.ti

- Physical attractiveness

2 Quotations:

27:10 To always make myself irresistible to my partner (2034:2081) - D 27: Question 1

To always make myself irresistible to my partner

27:71 Jy moet nie net vir jou mooi maak nie jy moet vir hom ook mooi maak. Jy moet nie net vir jou mooi maak nie jy moet vir hom ook mooi maak. Jou mooi aantrek. Opgedotlie wees

- Pray for your spouse

1 Quotations:

27:31 Gebed (7253:7267) - D 27: Question 1

Gebed

- Quality time

4 Quotations:

27:42 Gaan plekke saam en geniet dit saam (9228:9262) - D 27: Question 1

Gaan plekke saam en geniet dit saam

27:63 Julie moet tyd maak vir mekaar (17134:17164) - D 27: Question 1

Julie moet tyd maak vir mekaar

27:69 Tyd spandeer met jou man (19100:19123) - D 27: Question 1

Tyd spandeer met jou man

27:80 Tyd maak vir mekaar alleen net die twee van Julie. Daai is the positive...... (20428:20618) - D 27: Question 1

Tyd maak vir mekaar alleen net die twee van Julie. Daai is the positive part. Belangstel in mekaar se do's en don'ts. Waarvan jy hou en nie hou nie.