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SANTA BARBARA

Understanding the Psychosocial Impact of the COVID-19 Pandemic on Latinx Emerging

Adults

A dissertation submitted in partial satisfaction of the

requirements for the degree Doctor of Philosophy

in Counseling, Clinical, and School Psychology

by

Natalia Jaramillo

Committee in charge:

Professor Erika Felix, Chair

Professor Alison Cerezo

Professor Miya Barnett

September 2022

The dissertation of Natalia Jaramillo is approved.

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Alison Cerezo, Ph.D.

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Miya Barnett, Ph.D.

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Erika Felix, Ph.D., Committee Chair

June 2022

ACKNOWLEDGEMENTS

CURRICULUM VITAE OF NATALIA JARAMILLO

Education & Training

Anticipated to Complete June 2022	**Ph.D. in Counseling, Clinical, and School Psychology,** University of California, Santa Barbara (UCSB) - Clinical Psychology Emphasis Department of Counseling, Clinical, and School Psychology (APA Accredited) Advisor: Erika Felix, Ph.D.
2021-June 2022	**Clinical Psychology Doctoral Intern** – Children's Hospital Los Angeles, USC Center for Excellence in Developmental Disabilities Adolescent and Young Adult Medicine Specialty Track
June 2018	**M.A. in Counseling Psychology,** University of California, Santa Barbara Department of Counseling, Clinical, and School Advisor: Erika Felix Ph.D.
May 2012	**B.A. in Psychology,** Clark University Honors in Psychology, *Summa Cum Laude*

Honors & Awards

2019 - 2020	**National Science Foundation – Alliances for Graduate Education and the Professoriate Fellowship (AGEP)** Multi-year fellowship awarded to outstanding graduate students in science, technology, engineering, and mathematics (STEM) fields to support pedagogical training and academic career development for students from groups underrepresented in academia.
2018	**Ray E. Hosford Award for Excellence in Clinical Dedication – UCSB** Awarded for demonstrating excellence in helping others through clinical work and demonstrating active involvement in the well-being of fellow clinicians
2018	**James Hong Memorial Research Fellowship – UCSB** Fellowship to support one-quarter of masters-level research to study at-risk youth and school violence, with the goal of helping to prevent violence and promote safety. The funded study assessed psychosocial factors and posttraumatic growth following Isla Vista Mass murder
2017	**Ford Foundation Pre-Doctoral Fellowship, Honorable Mention** Outstanding scholars accorded honorable mention status

Research Experience

2020-Present	**Dissertation Research**

Title: Understanding the Experiences of Latinx Emerging Adults during the *COVID-19 Pandemic*

Committee: Erika Felix, Ph.D. (Chair), Miya Barnett, Ph.D., Alison Cerezo, Ph.D.

· Examined the psychological experiences of Latinx emerging adults during the COVID-19 pandemic and how they are negotiating their identities, roles, and cultural values as a result of the COVID-19 pandemic
· Utilized a qualitative constructivist grounded theory approach
· Carried out focus groups in California and Florida
· Completed data analysis utilizing Constructivist Grounded Theory framework
· Trained and mentored three undergraduate students to assist with coding qualitative data and research-related tasks

2019-Present   **Graduate Student Researcher**

Families and Stress Lab
University of California, Santa Barbara
Principal Investigators: Erika Felix, Ph.D.

· Conducted research in collaboration with Dr. Erika Felix focusing on understanding the individual, relational, and cultural factors that promote positive development and recovery following natural disaster, terrorism, or other collectively experienced traumas such as natural disasters and COVID-19.
· Studies include Psychological Adjustment Following Isla Vista Mass Murder, Media Exposure to Mass Violence and Parenting, College Life After Natural Disasters, Media Exposure and Implicit Bias
· Developed surveys for research on media exposure to acute mass violence, implicit bias, and hurricane exposure (English and Spanish)
· Collaborated with co-investigators at research sites in Puerto Rico
· Assisted with data collection and database management
· Trained undergraduate students assisting on research projects
· Assisted on project to enhance disaster preparedness in the Latinx community

2018 –2018	**Program Evaluator** Sharkey Lab Principal Investigator: Jill Sharkey, Ph.D.

2018 –2018   **Program Evaluator**
Sharkey Lab
Principal Investigator: Jill Sharkey, Ph.D.
- Assisted in project funded by the Substance Abuse Mental Health Services Administration (SAMHSA) for the Veterans Treatment Court
- Developed trauma toolkit for mental health providers
- Oversaw program evaluation tasks with providers
- Created databases and carried out statistical analyses
- Attended training coordinated by SAMHSA in Washington D.C.
- Developed and wrote annual evaluation reports

2014 –2016   **Project Coordinator**
Children's Hospital Los Angeles Biobehavioral Pain Laboratory
Role: Project Coordinator | Principal Investigators: Jeffrey I. Gold, PhD and Lara P. Nelson, MD
- Coordinated an NIH funded, multi-site study observing healthcare provider/patient interactions and the effect on perioperative patient stress
- Observed and coded patient and healthcare provider interactions from pre-operative stage through anesthetic induction in the operating room and in the Post Anesthesia Recovery Unit
- Collaborated with investigators at UC – Irvine as well as three other research sites
- Coordinated an NIH funded, longitudinal study observing parents' and children's (8-17 years) PTSD and acute stress response as the result of
- admission into the pediatric intensive care unit
- Screened patients for posttraumatic stress disorder
- Collected saliva cortisol samples to measure stress responses
- Conducted structured interviews with children and adolescent patients

2012 –2014   **Research Coordinator**
University of Southern California (USC) - Culture & Mental Health
Principal Investigator: Steven Lopez, Ph.D.
- Research coordinator for a multi-site study assessing family socialization of participants with schizophrenia to understand the relationship with neurobiological underpinnings and the expression of the disorder
- Facilitated the development of a systematic protocol for study data assessment
- Managed data collection process in Mexico
- Completed behavioral observations in the home of participants

	· Assisted in study recruitment process
	· Collaborated with study consultants, administrative staff, and clinicians in community mental health agencies in Los Angeles

Summer 2012   **Research Trainee**
Latino Mental Health Research Training Program (NIMH/USC)
Principal Investigators: Steven Lopez, Ph.D., Maria del Carmen Lara M.D., Kristin Yarris, Ph.D.
- Research trainee at the National Institute of Mental Health (NIMH) Latino Mental Health Research Training Program. Nationally funded summer research-training program in Puebla, México
- Completed mental health disparities research training
- Conducted an extensive literature review for theoretical development of schizophrenia and social orientation and contributed to the development of coding manual
- Conducted interviews in Spanish with participants with schizophrenia and their relatives in the home of participants
- Carried out quantitative and qualitative analyses of data from family interviews and video-taped interactions
- Delivered oral presentations regarding research study in Spanish for La Universidad Nacional Autonóma de México (UNAM) and El Instituto de Psiquiatría

Teaching Experience

Spring
2021   **Personality Assessment – Teaching Assistant**
University of California, Santa Barbara
Professor: Steve Smith, Ph.D.
Responsible for reviewing student work, writing quiz questions, providing clarification on course content, grading assignments for graduate level course

Fall
2021   **Intro to Chicano Studies - Teaching Assistant**
University of California, Santa Barbara
Professor: Mario Garcia, Ph.D.
Responsible for instructing weekly sections, grading weekly course assignments, holding office hours, maintaining, and assigning grades

Summer 2020   **Introduction to Positive Psychology (CNCSP 112: Undergraduate Course) – Course Instructor**
University of California, Santa Barbara
Responsible for all aspects of course design and construction, including writing examinations and assigning grades

Spring 2020	**Introduction to Black Psychology (BLST 15: Undergraduate Course)** **Teaching Assistant** University of California, Santa Barbara *Professor: Sharon Tettegah, Ph.D.* Responsible for reviewing student work, responding to forum posts, grading midterm and final paper assignments
Winter 2020	**Intro to Helping Skills (CNCSP 101: Undergraduate Course)** **Teaching Assistant** *University of California, Santa Barbara* *Professor: Miya Barnett, Ph.D.* Responsible for instructing weekly sections, grading course assignments, holding office hours, assigning grades
Fall 2019	**Alliances for Graduate Education and the Professoriate – Teaching Fellow** *California State University Channel Islands* *Mentor: Christy Teranishi-Martinez, Ph.D.* Completed a semester-long teaching fellowship to incorporate research, assessment, and service-learning opportunities in the CSU a CSU research methods course for undergraduates, obtained mentorship on discipline-specific teaching strategies and goals, completed summer institute on pedagogical practices
Spring 2019	**Intro to Helping Skills (CNCSP 101: Undergraduate Course)** **Teaching Assistant** *University of California, Santa Barbara* *Professor: Amanda Cisler, Ph.D.* Responsible for instructing weekly sections, grading course assignments, holding office hours, assigning grades
Winter 2019	**Intro to Vocational Guidance (CNCSP 110: Undergraduate Course)** **Teaching Assistant** *University of California, Santa Barbara* *Professor: Melissa Morgan Consoli, Ph.D.* Responsible for instructing weekly sections, grading course assignments, holding office hours, assigning grades
Summer 2018	**Intro to Helping Skills (CNCSP 101: Undergraduate Course)** **Course Instructor** *University of California, Santa Barbara* Responsible for all aspects of course design and construction, including writing examinations and assigning grades

Fall 2017	**Intro to Chicano Studies – (CNCSP 112: Undergraduate Course) Teaching Assistant**
	University of California, Santa Barbara
	Professor: Mario Garcia, Ph.D.
	Responsible for instructing weekly sections, grading weekly course assignments, holding office hours, maintaining, and assigning grades

Summer 2017	**College Student Peer Helping and Leadership (CNCSP 115: Undergraduate Course) - Teaching Assistant**
	University of California, Santa Barbara,
	Professor: Tania Israel, Ph.D.
	Responsible for instructing weekly sections, grading weekly course assignments, holding office hours, maintaining, and assigning grades

Published Journal Articles

Jaramillo, N., & Felix, E. D. (2020). Psychosocial influences on posttraumatic growth among university students following a mass murder. *American Journal of Orthopsychiatry*. DOI:10.1037/ort0000512

Felix, E. D., Meskunas, H. M., **Jaramillo, N.**, & Quirk, M. (2019). Measuring media exposure to acute mass violence. *Psychological Trauma: Theory, Research, Practice and Policy*. 12, 397-404. DOI:10.1037/tra0000514

Technical & Brief Reports

Jaramillo, N., Sharkey, J., Gonzalez, J., & Janes, L. (2018). A toolkit for addressing trauma in mental health treatment. Report for Behavioral Wellness, Santa Barbara County.

Jaramillo, N., Sharkey, J., & Powers, M. Veterans Treatment Court Santa Barbara County. (2018). Report for Substance Abuse and Mental Health Services Administration.

Janes, L., **Jaramillo, N**., Der Sarkissian, A., Whaling, K., Guzman, S., Toscano, A., Stelling, A., Powers, M., Gonzalez, J.C., Palacios, E., Pacheco, D., Scott, M., Hunnicutt, K. L., &Sharkey, J. D., (2018). *Santa Barbara County Mental Health Treatment Court Process Evaluation: Santa Barbara Mental Health Treatment Court*. A report funded by the Public Safety Realignment Act, Santa Barbara County Probation, Santa Barbara, CA.

Jaramillo, N., Cogan, C., & Kagee, A. (September 2018) *Thank you for Participating*: *Fourth annual membership drive*. Published in Stress Points, International Society for Traumatic Stress Studies.

Jaramillo, N., Cogan, C., & Kagee, A. (May 2018) *Healing trauma together: help ISTSS grow*. Published in Stress Points, International Society for Traumatic Stress Studies.

Posters & Presentations

Teranishi-Martinez, C., & **Jaramillo, N.**, *Power of Positive Mentoring: Supporting underrepresented minorities on the path towards a successful career in STEM.* Presentation at the 2021 virtual conference for the Western Psychological Association.

Jaramillo, N., Janson, M., Felix, E. D., Canino, G., Rosa-Rodriguez, Y., & Lugo-Hernandez, E. (October, 2019). *The role of post-traumatic stress symptoms in mediating the relationship between hurricane disaster exposure and identity distress in Puerto Rican college students.* Poster presented at the annual meeting of the National Latinx Psychological Association, Miami, Florida.

Jaramillo, N., Felix, E., Meskunas, H., & Mamidanna, S. (November, 2018). *The effects of media exposure to acute mass violence on parenting: an online experimental study.* Poster presented at the International Society for Traumatic Stress Studies 34th Annual Meeting, Washington, D.C.

Jaramillo, N., Felix, E., & Meskunas, H., (November, 2017). *Influences of Post-Traumatic Growth among University Students Following the Isla Vista Mass Murder.* Poster presented at the International Society for Traumatic Stress Studies 33rd Annual Meeting, Chicago, IL.

Nelson, L.P., **Jaramillo, N.**, Barton, J.D., & Gold. J.I., (February, 2016). *Latino children's posttraumatic stress and pain after admission to a pediatric intensive care unit.* Presentation and poster presented at the Society of Critical Care Medicine's 45th Critical Care Congress, Orlando, FL.

Nelson, L.P., **Jaramillo, N.**, Barton, J.D., & Gold. J.I., (November, 2015). *Acute stress disorder and posttraumatic stress disorder in children and parents after admission to a pediatric intensive care unit.* Poster presented at the International Society for Traumatic Stress Studies 31st Annual Meeting, New Orleans, LA.

Connors, A., **Jaramillo, N.**, Gold, J., & Meyer, R., (October, 2015). *Effects of acupuncture and massage therapy on pain intensity in children and adolescents with chronic pain: pilot data from an ongoing randomized control trial.* Poster presented at the 10th International Forum on Pediatric Pain, White Point, Nova Scotia.

Jaramillo, N., Meyer, R., Conn, L., & Gold, J.I. (August, 2015). *Massage therapy for the reduction of pain in palliative care patients at a children's hospital.* Poster Presented at the17th Annual Convention of the Massage Therapy Association National Convention, Pittsburgh, PA.

Nelson, L.P., **Jaramillo, N.**, Barton, J.D., & Gold, J.I. (June, 2015). *Children's pre-hospitalization risk factors for acute stress in the pediatric intensive care unit.* Poster presented at the Saban Research Institute's 20th Annual Poster Session, Los Angeles, CA.

Nelson, L.P., Barton, J.D., **Jaramillo, N.**, & Gold, J.I. (June, 2015). *Posttraumatic stress and growth after admission to a pediatric intensive care unit.* Poster Presented at the Saban Research Institute's 20th Annual Poster Session, Los Angeles, CA.

Jaramillo, N., Yarris, Y. E., & López, S.R. (April, 2014). *Social Orientation and What Really Matters among Mexican-American patients with schizophrenia and their*

family caregivers. Symposium Presentation at the Western Psychological Association 94th Annual Convention, Portland, OR.

Arcos, K., **Jaramillo, N., &** López, S. R. (April, 2014). *Exploring acculturation's role in Mexican-origin families caring for relatives with schizophrenia.* Poster Presentation at the Western Psychological Association 94th Annual Convention, Portland, OR.

Jaramillo N., López, S.R., Carmona, J.A., & Rodríguez-Soto, N. C. (June, 2013). *The role of caregiver's social orientation in their interactions with relatives who have schizophrenia.* Poster presentation at the 21st International Association for Cross-Cultural Psychology Conference, Los Angeles CA.

Jaramillo, N., Moreno, O., & Cardemil, E.V. (March, 2013). *Latino mental health: the role of machismo and acculturation on Latino men with depression.* Poster presented at 84th Annual Eastern Psychological Association Conference. New York City, NY.

Clinical Experience

2021 – Present	**Children's Hospital Los Angeles – USC Center for Excellence in Developmental Disabilities,** Los Angeles, CA Predoctoral Psychology Intern Specialized Year-Long Placement: Department of Adolescent and Young Adult Medicine, *Supervisors: Natalie Cruz, PsyD, Whitney Brammer, PhD, Hana Carmona, Ph.D.* Program Director: Dr. Amy West, Ph.D.

- Providing outpatient psychotherapy for children, adolescents and their families in English and Spanish
- Completing comprehensive developmental, psychological, and educational assessments within the pediatric population
- Participating as a mid-term trainee in Leadership Education in Adolescent Health (LEAH) Program on a weekly basis - program provides interdisciplinary training in adolescent health
- Providing consultation services to physicians, psychiatry fellows, case managers, and other healthcare providers
- Trained in Coping Cat for children with anxiety and Incredible Years evidence-based treatments
- Facilitating a group therapy utilizing evidence-based Incredible Years for parents of school-age children to foster parents' ability to promote children's social, emotional, and language development
- Participating in weekly didactics and seminars focused on topics related to multicultural issues, treatment modalities, consultation, and assessment
- Completed comprehensive intake assessments
- Utilizing a range of evidence-based interventions including Cognitive Behavioral Therapy (CBT) and Acceptance Commitment Therapy (ACT)

- Participating in group supervision and training in Spanish to increase the effectiveness in the provision of mental health services to Latinx client
- Working with a range of diagnostic concerns including family problems, depression, disruptive behavior, eating disorders, substance abuse, neurodevelopmental difficulties, chronic health problems, traumatic stress

2019 – 2020

Cottage Hospital: Psychiatry and Inpatient Medical Detoxification Unit – Externship Trainee, Santa Barbara, CA
Supervisors: Layla Farinpour, LMFT, Heidi Zetzer, Ph.D.
- Led process group therapy to adult clients with a wide range of disorders with acute symptoms, chemical dependency, and co-occurring disorders
- Conducted bio-psychosocial and diagnostic evaluations
- Consulted with medical team and presented cases in multidisciplinary team meeting with psychiatrists, psychologists, and social workers
- Utilized Cognitive Behavioral Therapy (CBT), Dialectical Behavioral Therapy (DBT), Acceptance Commitment Therapy (ACT), and motivational interviewing

2018 – 2019

Child Abuse Listening Mediation (CALM) – Clinical Trainee
Community Mental Health, Santa Barbara, CA
Supervisors: Alyson Huneycutt PsyD., Anna Krasno, Ph.D., Melissa Cordero, Psy.D.
Provide individual/family therapy and parent training for the Child and Adolescent Trauma program, a program that provides children and adolescents affected by any form of abuse and traumatic stress
- Provided therapy to parents in Spanish
- Co-led weekly child group therapy for victims of domestic violence utilizing a cognitive behavioral model
- Co-led weekly somatic focused therapy group for outpatient adults affected by a childhood history of sexual abuse
- Provided individual/family therapy for the Great Beginnings program, supporting families and caregivers with children ages 0-8 at risk for abuse and neglect
- Facilitated a support group for children ages 5-8 who have witnessed domestic violence; utilized a Trauma Focused Cognitive Behavioral Therapy (TF-CBT) model
- Facilitated a support group for mothers who have experienced domestic violence
- Utilized Interpersonal Psychotherapy and Dialectic Behavioral Therapy

2016 – 2018	**Hosford Counseling & Psychological Services Center – Clinical Trainee**
	University of California, Santa Barbara, CA
	Supervisors: Heidi Zetzer, Ph.D., Maryam Kia-Keating, Ph.D.

- Provided weekly outpatient therapy sessions to adults and adolescents
- Conducted comprehensive intake assessments with individuals and families
- Received advanced training in case conceptualization, empirically based therapies, cultural/ethnic diversity considerations, and diverse theoretical orientations
- Obtained training to gather phone intake information for prospective Spanish-speaking clients

Specialized Trainings

- **NSF AGEP Summer Institute,** completed eight-day pedagogical training

- **Gottman Couples Therapy Level 1 Training**, completed 2-day training on Bridging the Couple Chasm, The Gottman Institute

- **Santa Barbara Response Network**, completed 1-day psychological First Aid (PFA) training in Spanish

- **Patient Centered Outcomes Research Coping Cat Training,** completed 2-day long training on CBT Coping Cat for children and adolescents with anxiety

- **Incredible Years Group Leader Program**, completed group leader 3-day parent training and 3-day child training program for children with early onset conduct problems.

Professional Affiliations

- International Society for Traumatic Stress Studies (ISTSS) – Membership Committee (2017, 2018), led membership drive in 2018, student member
- National Latinx Psychological Association (NLPA) – student member

ABSTRACT

Understanding the Psychosocial Impact of the COVID-19 Pandemic on Latinx Emerging

Adults

by

Natalia Jaramillo

The coronavirus disease (COVID-19) which was declared a global pandemic on

March 11, 2020, has had devastating consequences on the mental health of people worldwide

(World Health Organization, 2020). Latinx and other ethnic minorities in the United States

are experiencing substantial distress secondary to the COVID-19 pandemic (Garcini et al.,

2020). Notably, Latinx have been shown to be over-represented in COVID-19 cases and

deaths (Center for Disease Control, 2022). Among the possible reasons for these disparities

are a variety of contextual factors (e.g., employment in essential work that cannot be

performed remotely); many Latinx often live in crowded spaces that limit social distancing;

and some have difficulty obtaining health insurance and medical services due to financial

difficulties or immigration status (Hayes-Bautista, 2020). These disparities as well as

pandemic-related stressors have led to concerns about the consequences of this disaster on

the mental health of vulnerable Latinx (Garcini et al., 2020).

There is also growing evidence about the psychosocial impact that the COVID-19

pandemic has had on younger populations from racial and ethnic minority groups (Penner et

al., 2021; Villatoro et al., 2022). Emerging adulthood is a developmental stage (ages 18-29

years old) that is characterized by identity exploration, instability, self-focus, feeling "in

between" and having a sense of possibilities (Arnett, 2015). According to recent studies,

Latinx emerging adults have experienced significant socio-emotional consequences as a

result of the COVID-19 pandemic (Goodman et al, 2020). The current pandemic has affected the developmental trajectory of emerging adults, particularly in terms of education, employment opportunities, and short-and long-term wellbeing (Halliburton et al., 2021). Latinx young adults may now be contending with other responsibilities and potential disaster-related stressors that may compound their risk for mental health problems. Prior to the COVID-19 pandemic, research documented that Latinx emerging adults experienced acculturative stress and served as language and cultural brokers for their immigrant families, including mediating health-related information (Sim et al., 2010; Villanueva & Buriel, 2010). In addition, this population has been shown to navigate high levels of family obligations and responsibilities associated with the collectivistic family expectations (Stein et al., 2019). Often, Latinx emerging adults are first-generation university students and must negotiate a variety of contextual roles including completing academic tasks and balancing financial expenses. In light of this, it is imperative to understand more about the impact of the COVID-19 pandemic on Latinx emerging adults in order to better meet their specific needs, identify protective factors, and implement culturally sensitive interventions to prevent psychological maladjustment.

The aim of this study was to explore the psychosocial impact of the COVID-19 pandemic on Latinx emerging adults ($N = 31$; ages 18-29) in California and Florida through online focus group interviews. A qualitative constructivist grounded theory approach was used in an effort to develop empirical knowledge, as research on the psychosocial impact of the COVID-19 pandemic was limited when this study began. This approach served to capture the richness of the experiences and context of participants by allowing analytic codes and

categories to drive theory development (Charmaz, 2014). This study addressed the following research questions:

    1. What is the impact of the COVID-19 pandemic on the psychosocial functioning of Latinx emerging adults residing in California and Florida?

    2. How are Latinx emerging adults negotiating their identities, roles, and cultural values as a result of the COVID-19 pandemic?

Participants in California and Florida were recruited through flyers posted on social media, word of mouth, and some were recruited from a prior multi-site study looking at natural disasters. Data was collected with participants in California and Florida in order to obtain diversity with regards to context of Latinx and varied experiences during the COVID-19 pandemic. In total, seven focus groups were held and participants attended a virtual focus group with other Latinx emerging adults from their state. The focus groups were transcribed verbatim and coded using constructivist grounded theory (Charmaz, 2001). The qualitative process facilitated the in-depth exploration and understanding of an understudied phenomenon. It also took into consideration how cultural factors, values, and beliefs, could influence the experiences of Latinx emerging adults during the pandemic.

       There were six themes identified from the data concerning the impact of the pandemic on Latinx Emerging adults. These themes centered around systemic and environmental factors, pandemic-related communication, career and academic disruptions, navigating family factors, mental health experiences, and the adaptation process. From these themes, two theoretical models were constructed to explain how the pandemic has impacted the psychological wellbeing and adjustment of Latinx emerging adults California and

Florida. Additionally, *familismo* and multigenerational values were found as protective factors for Latinx emerging adults.

The high levels of psychological distress reported in this sample reflect emerging research showing that young adults have experienced an alarming increase in adverse mental health outcomes during the COVID-19 pandemic (Conrad et al., 2021, Villatoro et al., 2022). The findings are also consistent with a qualitative study that found that Latinx college students reported fear and disillusionment about the future as a result of undergoing the COVID-19 pandemic and being exposed to social injustices (Morgan & Zetzer, 2022).The study has important implications for helping to advance science in a variety of areas such as increasing knowledge regarding the consequences of pandemics on mental health and cultural considerations that may influence disaster recovery. Examples of these cultural considerations include multigenerational values, heightened responsibilities and mediating pandemic information. This research is needed to inform public health efforts to support emerging adults as they navigate changes brought about by the pandemic and to prevent adverse psychosocial outcomes for this population. Results may inform universities and mental health efforts on how to increase support and resources for Latinx emerging adults in order to address the psychological difficulties resulting from the COVID-19 pandemic.

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CHAPTER I

Introduction

The following chapter provides a literature review discussing the psychological impact of the COVID-19 pandemic. Based on this global pandemic, research on disaster mental health is particularly relevant to addressing the research questions for the study. Hence, this chapter provides an overview of empirical research on disaster mental health, discussing who may be most vulnerable during disasters such as pandemics. It covers contextual disaster aspects that may influence psychosocial functioning for the population of interest during the COVID-19 pandemic. Additionally, the literature review addresses the impact of the pandemic on the Latinx population in the US and covers specific cultural considerations for Latinx emerging adults.

Global Impact of the COVID-19 Pandemic

In December 2019, the Wuhan Municipal Health Commission in Wuhan, China, reported a cluster of cases of pneumonia, and a novel coronavirus, SARS-CoV-2, was identified. Over several weeks, there were over 7,818 confirmed reported cases of the novel coronavirus outbreak (COVID-19), characterized as an acute respiratory syndrome (World Health Organization, 2020). Over three months, the number of cases continued to escalate exponentially, with more than 118,000 cases in 114 countries (World Health Organization, 2020). In reaction to this public health emergency, the World Health Organization declared the COVID-19 outbreak a global pandemic (World Health Organization, 2020). As of May 2022, a total of 6,260,387 deaths due to COVID-19 have been recorded (World Health Organization, 2022). The COVID-19 pandemic has resulted in significant grief and losses of multiple types (e.g., employment, housing, in-person opportunities; Kumar, 2021).

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Additionally, the ever-changing landscape of the COVID-19 pandemic, along with economic loss, grief, and missed opportunities, has significantly affected people's psychological well-being and stability worldwide. Research on many other disasters has documented in depth the psychological impacts of these collectively experienced events on mental health. The following section discusses the mental health impacts of COVID-19 and reviews current information on how disasters can impact individuals' psychological well-being and adjustment.

Psychological Impact of the COVID-19 Pandemic and Prior Disaster Research

When this literature review was conducted in spring 2022, empirical research on the psychological impact of the COVID-19 pandemic was rapidly emerging (Rosenfeld et al., 2020; Hoyer et al., 2020; Liao et al., 2020; Germani et al., 2020). Since that time, more comprehensive studies have been published regarding the psychological impact of COVID-19, which may not be discussed in this literature review.

Exposure to disasters such as pandemics has been linked to various short and long-term psychological problems for a substantial minority (around 30%) of the population (Bonanno et al., 2010). Bonanno and colleagues (2010) identified several disaster-related psychological reactions in an extensive literature review. The most common reaction to disasters was posttraumatic stress symptoms (PTSS), identified in 68% of studies. Other reactions included grief, depression, anxiety, stress-related health problems, increased substance abuse, and suicidal ideation (Bonanno et al., 2010). Importantly, research shows that most people who experience disasters appear to return to predisaster functioning, and clinical levels of psychological problems occur only in a small percentage of people exposed to disasters, which rarely exceeds 30% in most adult samples (Bonanno et al., 2010). Overall,

the range of psychological reactions that can occur from a pandemic might vary and be influenced by how personally impacted a person is by the pandemic. Nonetheless, with the entire global population exposed to the COVID-19 pandemic, even the minority of people who show clinical levels of mental health problems means that the mental health system is flooded with many individuals needing treatment. This has significant implications for the mental health infrastructure and underscores the need for more global investment in mental health services.

Research on pandemics and natural disasters has revealed profound and wide-ranging psychosocial impacts on people at individual, community, and international levels (Bonanno & Burton, 2013; Taylor, 2019). As a pandemic unfolds, people experience fear of becoming ill and may feel helpless (Taylor, 2019, Czeisler et al., 2021). Regarding the COVID-19 pandemic, the adjustment process for many individuals has included navigating emotions surrounding the fear of contagion, the death toll, self-isolation, and supply shortages. Conversely, experiencing a moderate level of fear resulting from a pandemic can be protective in that it can motivate people to act and adhere to health protocols (Taylor, 2019). Nonetheless, severe distress associated with a pandemic and isolation caused by social distancing can be highly debilitating and negatively impact well-being. Notably, research indicates that social interactions and connections help people regulate emotions and cope with stress (Bavel, 2020). Hence, distancing and isolation during a pandemic may increase loneliness and produce negative psychological outcomes (Gruber et al., 2020). Adverse mental health has profound consequences for society and therefore there is an urgent need to support mental health efforts in order to promote the adjustment of people in the era of the COVID-19 pandemic.

Risk Factors Associated With Mental Health in a Disaster Context

Individual Risk Factors

Extensive research on disaster mental health has identified a range of characteristics that may contribute to how people adjust to disasters, such as pandemics (Norris et al., 2009; Bonanno et al., 2010). Examining risk factors in a disaster context can guide prevention and intervention strategies that support those most vulnerable in the pandemic. This section discusses specific risk factors pertaining to the research study.

Age. Children and youth may be more vulnerable than adults to developing PTSD symptoms soon after disasters; however, these symptoms commonly decline over time (Neria et al., 2009; Silverman & La Greca, 2002). For example, during the SARS outbreak, a cross-sectional study found that significant rates of SARS-related psychiatric and posttraumatic morbidities were associated with younger people (Sim et al., 2010). Postdisaster functioning in youth may be related to perceptions of support and life stressors occurring early in the recovery period, as well as comorbid anxiety and ways of coping with stress (Silverman & La Greca, 2002). Fewer studies have been conducted on the impact of disasters on young adults. However, research shows that young adults may experience more psychological problems and be less resilient than older adults after a disaster (Bonanno et al., 2010). A study conducted at Changzhi Medical College found that 24.9% reported anxiety symptoms. The factors found to be associated with their anxiety appeared to be related to their place of residence, income, stressors in living, and academic delays (Cao et al., 2020). These findings are relevant to the current research study as they highlight the importance of continuing to understand the impact of COVID-19 on young adults to adequately respond to their specific psychological needs.

Preexisting Mental Health. Other factors to consider during the COVID-19

pandemic that may predict disaster adjustment include predisaster psychological functioning

(Norris & Elrod, 2006). Research has shown that individuals with depression before

experiencing a flood were more impacted by the disaster than those with a lower level of

depression (Phifer, 1990). Furthermore, research shows that coping strategies may predict

adjustment (Vernberg et al., 1996). For example, a study found that tendencies to ruminate

were associated with PTSD and depressive symptoms for college students impacted by the

Loma Prieta earthquake (Nolen-Hoeksema & Morrow, 1991).

Ethnicity. Notably, in the aftermath of disasters such as hurricanes and mass

violence, research shows that racial and ethnic minorities may experience more adverse

psychological consequences than members of the majority culture (Norris & Alegría, 2005).

This often results from systemic factors, including difficulty accessing services, help-seeking

comfort, and immigration status (Norris & Alegría, 2005). Several disaster studies have

found that minority ethnic groups fare worse than those with majority group status (Norris &

Alegría, 2005; Neria et al., 2009). For example, African Americans were more likely than

White and Latinx disaster survivors to experience postdisaster PTSD and depression

symptoms after Hurricane Ike (Davidson et al., 2013). Nonetheless, as discussed by Bonnano

and colleagues (2010), understanding outcomes associated with race and ethnicity is often

confounded by socioeconomic status, exposure, and other risk and resilience factors.

Contextual Risk Factors

Numerous contextual factors, such as property damage, job loss, displacement, may

influence mental health outcomes and adjustment following disasters such as pandemics.

Understanding contextual factors is essential, as these may affect implemented policies and

can clarify areas that could influence the mental health trajectories of those impacted by disasters. The following paragraphs discuss the influence of two contextual factors (social support and media exposure) pertinent to this research study.

Social Support. Disasters such as pandemics can lead to isolation and a shattered sense of community (Kaniasty, 2020). Research shows that social support can play a major role in protecting against the development of psychopathology after a disaster (Kaniasty & Norris, 2009). Forms of social support include emotional reassurance, assistance with tasks of daily living, and information to manage the disaster context (Kaniasty, 2012). Both perceived social support (e.g., belief that help would be available if needed) and embedded support (e.g., quantity and type of relationships) have been shown to play an important role in postdisaster adjustment and may protect against the development of psychopathology (Kaniasty, 2020; Bonanno et al., 2010). The type and amount of social support that people may experience from a disaster may vary depending on the source of the social support, such as whether it originates from immediate family or acquaintances, and it can also differ depending on the sense of connectedness to that support (Bonanno et al., 2010). Additionally, the amount of received support may vary depending on context and other factors such as disaster-related losses. Therefore, for this research study, it was important to consider who Latinx emerging adults sought support from during the pandemic, as well as the quality and type of social support.

Media Exposure. Concerning the COVID-19 pandemic, the role of media exposure should be as it relates to psychological stress and disaster adjustment (Garfin et al., 2020). Both news and internet media have increased the dissemination of required disaster-related information, including up-to-date safety information; however, this media may also contain

graphic visuals and emotionally disturbing content (Pfefferbaum et al., 2020). Importantly, both the type and amount of media exposure may influence psychological and physical responses to community-wide traumatic events (Garfin et al., 2020). For example, during a pandemic, a study examining the SARS outbreak found that providing the public with realistic information about risk and recovery associated with the virus helped reduce SARS-related worry (Shi et al., 2003). Hence, media information is crucial in delivering safety information to the public regarding health and safety; however, it can also negatively influence and heighten emotional reactions to a pandemic outbreak. Many questions remain regarding the role of media, and more research is needed to understand how different types of media (e.g., social media) may be implicated in psychological well-being during the COVID-19 pandemic. For this research study, it was valuable to consider how media content impacts the populations of interest, as Latinx emerging adults often serve as language and information brokers to family members and may be highly exposed to news sources via multiple social media outlets.

Impact of the COVID-19 Pandemic on Latinx and Prior Disaster Research

The COVID-19 pandemic has significantly impacted minoritized populations in the US. For the purpose of this study, this section examines the various ways that Latinx have been affected by the COVID-19 pandemic and covers prior research on the impact of other disasters on this ethnic group to highlight important mental health outcomes for this population.

The COVID-19 pandemic has highlighted significant health disparities for Latinx populations in the US (Clay et al. 2021). Importantly, data show that Latinx have been overrepresented in COVID-19 cases and deaths (CDC, 2022). These disparities result from a

broad range of contextual factors, such as the fact that during the shelter-in-place orders, a high proportion of Latinx was considered essential workers (e.g., farmworkers, custodians, and grocery clerks) and could not remain at home or work remotely, practice social distancing, or obtain the necessary personal protective equipment to reduce infection risk (Coven & Gupta, 2020; Hayes-Bautista, 2020). Additionally, due to the high cost of living, many Latinx tend to live with more inhabitants per household and often reside in multigenerational homes, further increasing the probability of contracting COVID-19 (Hayes-Bautista, 2020). Other reasons include vulnerable Latinx, particularly those who are undocumented, having no health insurance or being unable to seek attention from a medical doctor (Page et al., 2020). For example, many Latinx who are undocumented are afraid of being screened or seeking health-related services due to fear of repercussions, such as deportation (Page et al., 2020). The combination of these deeply rooted systemic injustices has augmented distress for many Latinx and led to concerns regarding the consequences of the pandemic on the mental health of this group.

Studies examining pandemic-related factors impacting Latinx in the US have provided important insights regarding mental health outcomes for this population. Some studies have indicated that Latinx adults experienced higher psychological distress during the COVID-19 pandemic than other groups (Czeisler et al., 2020; Garcini et al., 2021). Conversely, research with a primarily adolescent Latinx sample showed statistically significant reductions in internalizing problems and no changes in attention and externalizing problems (Penner et al. 2021). For Latinx college students, a research study found high levels of negative mental health effects due to the pandemic, although no significant differences were found for undocumented Latinx students and US citizens with undocumented parents

(Enriquez et al. 2022). Much of the research conducted with Latinx populations during the COVID-19 pandemic has been cross-sectional or focused primarily on specific domains of mental health (e.g., anxiety); therefore, more work is needed to better understand the long-term mental health impact of the pandemic among different Latinx age groups and clarify the factors driving psychological distress.

Although there is much that needs to be studied regarding Latinx mental health in the context of the pandemic, prior disaster research has noted that Latinx have a higher risk of disaster exposure and are disproportionally affected by disasters such as hurricanes (Perilla et al., 2002). For example, a study conducted following Hurricane Ike in 2008 found that the extent of personal impact (i.e., concern for the safety of family and fear of death or injury) contributed to depression status for Latinx (Davidson et al., 2013). Another study with Puerto Rican youth following Hurricane Maria in 2017 found that the sample experienced high levels of disaster stressors (e.g., seeing houses damaged or perceiving their lives to be at risk), and 7.2% of youths reported clinically significant symptoms of posttraumatic stress disorder (Orengo Aguayo et al., 2019). Multiple risk factors may explain differences in posttraumatic stress following a disaster. These include low socioeconomic status, chronic adversities, and differential exposure to the event (Norris & Alegría, 2005).

Research conducted with residents from different ethnic backgrounds (e.g., Latinx, non-Latinx Blacks, and Whites) in southern Florida following Hurricane Andrew showed that ethnic groups differed strongly in the prevalence of posttraumatic stress disorder (Perilla et al., 2002). Specifically, Spanish-preferring Latinx showed higher rates of PTSD than Whites and non-Latinx Blacks. Importantly, the study also found that Spanish-preferring Latinx had the highest levels of PTSD (38%) and were more likely to experience intrusion and

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avoidance symptoms. This finding demonstrates the diversity among the Latinx population and the authors' caution against treating this population as a homogenous group (Perilla et al., 2002).

Given the rapid growth of the Latinx population in the United States, it is also necessary for psychologists to deliver culturally sensitive interventions and increase engagement with mental health services, particularly due to the impact of the pandemic on this population (Castaño et al., 2007). Additionally, pandemic research on different ethnic groups is crucial to identify who is most vulnerable, examine the best ways for communities to prepare and respond to the needs of different populations, and inform policymakers, as this influences the implementation of high-quality mental health services. Research on the impact of the COVID-19 pandemic on emerging adults is reviewed, including how this group may be vulnerable and potential cultural considerations regarding Latinx.

Emerging Adults and Mental Health During the COVID-19 Pandemic

Emerging adulthood is a term developed to capture the developmental stage of young people aged 18–29 (Arnett, 2015). Emerging adults are a vulnerable group, and they have experienced unique difficulties due to the COVID-19 pandemic. The COVID-19 pandemic has disrupted educations, careers, finances, relationships, and key developmental milestones for emerging adults (Gruber et al., 2020). Additionally, long-term vocational and social growth for emerging adults may have been narrowed through curtailed education, limited ability to travel, lack of opportunities to obtain vocational training, and limited employment opportunities (Gruber et al., 2020). This section provides information about the developmental stage of emerging adulthood, how the COVID-19 pandemic has impacted

individuals in this life stage, and why it is crucial to consider the experiences of Latinx emerging adults and cultural aspects resulting from the pandemic.

The term emerging adulthood largely originated from the steep rise in the age of young people entering marriage, the extension of training beyond secondary school, and job instability for young people in the 21st century in more economically developed countries such as the United States (Arnett, 2015). How people experience emerging adulthood is likely to vary considerably across national, cultural, and socioeconomic contexts (Arnett, 2015). Hence, this developmental stage should be understood to have many different paths regarding how emerging adults experience education, work, relationships, values, and beliefs. The five distinctive features most prevalent in the emerging adulthood stage in the United States are 1) *identity development*, which involves considering and trying various life options; 2) *instability*, which involves instability in work, love, and place of residence; 3) *self-focus*, which involves taking time to focus on directing one's life; 4) feeling *in-between*, not quite an adolescent or an adult; and 5) experiencing a sense of *possibilities/optimism* regarding life opportunities (Arnett, 2015).

Considering both education and social class background is crucial when examining the experiences of emerging adults, as this can influence their educational attainment, time finding a long-term job, and decision to marry. Additionally, emerging adulthood for low-income, ethnic minority, and immigrant populations may be experienced differently due to having to accept adult roles earlier and being unable to explore a wide range of life opportunities (Sánchez et al., 2010). Nonetheless, research on emerging adults from lower socioeconomic backgrounds has shown that although these emerging adults may feel less positive about their lives and are less likely to have financial resources to obtain an education

or job, they still feel a high sense of freedom, instability, and a sense of optimism (Arnett, 2015). Nonetheless, when conducting research with emerging adults, it is important to consider that they may experience this developmental stage in various ways and that the stage may last for shorter or longer periods depending on gender, culture, social class, and other contextual circumstances.

The COVID-19 pandemic has increased uncertainty about the present and future, impacting routines and autonomy (Germani et al., 2020). These aspects may affect emerging adults in specific ways. For example, one research study showed that emerging adults have reported being more worried about their role as potential asymptomatic carriers of COVID-19 (Liao et al., 2020). Another survey study conducted with 1,183 Italian emerging adults found that emerging adults reported higher worries and concerns about COVID-19 for their relatives, followed by more general social worries, and reported less worry about contracting COVID-19 themselves (Germani et al., 2020). Cultural factors, such as cultural orientation, may also play a role for emerging adults and their experiences during the pandemic. For example, the study found that emerging adults who reported having a more collectivistic orientation (e.g., interdependence and sense of connectedness) reported higher perceived risk of infection but lower psychological maladjustment than emerging adults who reported being more individualistically (e.g., independent) oriented (Germani et al., 2020).

Latinx Emerging Adults and Pandemic-Related Stressors

Disasters such as the COVID-19 pandemic may pose unique challenges for Latinx emerging adults. These challenges include economic and social burdens, experiencing heightened communication inequities, living in multigenerational households with family members at high risk of contracting COVID-19, and increased stigma and isolation related to

immigration-related factors (Villatoro et al., 2022). Additionally, many have experienced isolation and disruptions that may impact their developmental trajectories. This is troubling considering Latinx emerging adults are also the youngest major racial group in the US and play a vital role in contributing to the country's future (Lopez et al., 2020). Hence, research is needed to examine factors influencing their distress, protective factors, and adequate ways to promote their long-term adjustment.

Studies examining the psychosocial impact of the COVID-19 pandemic on Latinx emerging adults have shown that mental health distress has increased for this group (Goodman et al., 2020; Villatoro et al., 2022; Czeisler et al., 2020). Notably, elevated rates of anxiety, depression, and suicidal ideation have been reported among Latinx emerging adults relative to other ethnic and age groups (Czeisler et al., 2020). Additionally, these patterns of elevated distress were reported to persist among Latinx during the first 6 months of the pandemic (Riehm et al., 2021). Moreover, existing literature has identified that Latinx emerging adults are vulnerable to psychological stress due to being more collectivistically and family oriented (Valdivieso-Mora; 2016), having to manage various obligations and roles (Sánchez et al., 2010), acculturative stress (Mayorga et al., 2018), and serving as language and information brokers to family, which can involve mediating health-related information (Sim et al., 2019; Villanueva & Buriel, 2010). This warrants attention as Latinx emerging adults have lower rates of mental health service use than their white counterparts, and many experience barriers to treatment (Maani & Galea, 2020; Alegría, 2020).

Cultural Considerations for Latinx Emerging Adults During the COVID-19 Pandemic

Various cultural constructs are relevant to understanding the experiences of Latinx emerging adults during the COVID-19 pandemic and to the topic of this research study. The

following section discusses *familismo*, acculturation stress, and language brokering as cultural factors. Specifically, it examines how they have been identified to influence the experience of Latinx emerging adults and may be salient to their psychosocial functioning and adjustment during the COVID-19 era (Sánchez et al., 2010; Mayorga et al., 2018; Shen & Dennis, 2017).

Familismo. Research indicates that Latinx generally have a relational orientation that helps shape their identity, family life, community, social world, and collectivist orientation (Comas-Díaz, 2006). Many young Latinx appear to adhere to *familismo*, a cultural value where one's family is expected to provide necessary emotional and instrumental social support (Valdivieso-Mora; 2016). Importantly, *familismo* can increase a sense of obligation, which involves caring for one's family and considering family when making decisions (Valdivieso-Mora, 2016). *Familismo* has been reported to impact emotional proximity, affective resonance, interpersonal involvement, and cohesiveness (Comas-Díaz, 2006). Additionally, a systematic review of 39 studies assessing the relationship between familism and mental health outcomes found a small effect size in the relationship between familism and depression, suicide, and internalizing behaviors (Valdivieso-Mora; 2016).

Since Latinx culture tends to endorse *familismo*, this aspect may translate into behaviors such as accepting various family responsibilities. For example, a study found that for low-income Latinx emerging adults, having family obligations, and lacking economic resources influenced their decision to attend college or delayed their attending college due to a need to work, support, or care for other family members (Sánchez et al., 2010). Given the COVID-19 pandemic, it is possible that Latinx emerging adults may experience increased family obligations and need to provide increased levels of support to other family members.

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Examples include caring for younger siblings or ill relatives or needing to take other jobs to help support family due to economic difficulties. Hence, a more in-depth understanding of this population and the role of *familismo* is needed to better understand how to adequately support the adjustment of Latinx emerging adults.

Acculturative Stress. Acculturative stress is defined as stress associated with demands placed on an individual that can result from adapting to a new culture (Alegría & Woo, 2009). For Latinx emerging adults, the vulnerabilities of this period are also probably heightened by the additional stressors of being an ethnic minority within a majority culture and having to adjust to college or the workforce. For some people, experiencing acculturation stress can involve encountering discrimination from the majority culture, rejecting the culture of origin, and struggling to communicate one's experience. For Latinx emerging adults, research has shown that acculturative stress may be a potential risk for mental health problems, particularly in stressful contexts such as college. For example, a study with 448 Latinx university students showed that acculturative stress was associated with depression and anxiety symptoms (Mayorga et al., 2018). Furthermore, the study findings highlighted a close interconnection between acculturative stress and emotion regulation for Latinx emerging adults (Mayorga et al., 2018). Consequently, Latinx emerging adults from immigrant families may be particularly vulnerable to experiences of social isolation due to this acculturative stress being heightened by the pandemic climate (Hawkins et al., 2021).

Language Brokering. Research shows that Latinx emerging adults tend to serve as language brokers or linguistic intermediaries for their families and relatives (Shen & Dennis, 2019). They may also assist in navigating across cultures and making important family decisions. This role is invaluable as they inform their families. For example, Latinx may

interpret medical and contextual information for their families and relatives. Those serving as language brokers may sometimes report stress associated with this role, which can create a sense of burden and negatively influence family dynamics (Shen & Dennis, 2019). During the COVID-19 pandemic, emerging adults may need to provide information to their parents and relatives regarding safety measures and the pandemic due to the limited availability of information and culturally targeted public health messaging for the Latinx Spanish-speaking community.

Overall, factors such as *familismo*, family responsibilities, acculturative stress, and language brokering are only a few of the constructs that may impact the experience of Latinx emerging adults in a disaster context and may be important to consider regarding adjustment, protective factors, and the development of culturally responsive disaster-related interventions. Furthermore, according to Norris and Alegría (2005), the best way to respond to the disaster needs of ethnic minority groups is to involve communities in evaluating their own needs and strengths. Hence, an in-depth understanding of Latinx emerging adults during the COVID-19 pandemic is imperative to better understand and respond to their specific needs, mitigate adverse educational outcomes, and adequately support their adjustment.

The Current Study

The current qualitative study aimed to explore the psychosocial impact of the COVID-19 pandemic on Latinx emerging adults (ages 18–29) in California and Florida through virtual focus groups conducted from December 2020 through April 2021. Data was collected in these two regions of the US to obtain diversity in participants' experiences and account for how varied settings, COVID-19 protocols, and context influenced Latinx emerging adults. A constructivist grounded theory approach was selected as it served to

capture the richness of the experiences and context of participants by allowing analytic codes and categories to drive theory development (Charmaz, 2014; Strauss & Corbin, 1990). In using this approach, knowledge was generated and interpreted through the interactions and lenses of the participants and the researcher (Haverkamp & Young, 2007). When the study began in 2020, the effect of the COVID-19 pandemic on Latinx emerging adults was a new phenomenon, and a qualitative approach was ideal for developing empirical knowledge on this topic. Additionally, the virtual focus group method was chosen for this study because it could foster a collectivist social environment for Latinx emerging adults who could elicit exploration of beliefs and feelings associated with the COVID-19 pandemic (Liamputtong, 2011). The study investigated the following two questions:

1. What is the impact of the COVID-19 pandemic on the psychosocial functioning of Latinx emerging adults residing in California and Florida?

2. How are Latinx emerging adults negotiating their identities, roles, and cultural values as a result of the COVID-19 pandemic?

CHAPTER II

Methodology

Participants and Procedures

Institutional Review Board approval was obtained at the University of California Santa Barbara. Recruitment began in November 2020 and continued through April 2021. The initial plan was to recruit participants who originally participated in a longitudinal, multi-site survey study regarding the psychosocial adjustment of young adults' following devastating hurricanes and wildfires that occurred in 2017-2018 as they were readily available and easy to reach. They were recent graduates from different universities in California and Florida and had agreed to be contacted again for future related studies. Those residing in California and Florida who self-identified as Latinx or Hispanic were invited to participate in the study via email and phone (see Appendix A for recruitment email). Only eight participants were recruited from the longitudinal, multi-site survey study, therefore the IRB protocol was modified to recruit other Latinx emerging adults in California and Florida. The study was advertised by posting a flyer (see Appendix B) on social media (Facebook and Instagram), sending the study information to faculty at universities in California and Florida, and sharing through word of mouth. Those interested in participating were screened and completed a brief phone briefing prior to being enrolled in the study. The consent form (see Appendix C) was sent to each participant through a Qualtrics survey. In the consent form, the participant was informed about the focus group procedures, the recording of the focus group, risks of participating in the study, and the transcription of the audio. All participants were compensated for their time with a $15 Amazon gift card which was funded using a grant from the Institute for Social, Behavioral, and Economic Research.

A total of 35 Latinx individuals were recruited for this study but four participants who initially expressed interest were unable to be reached. Thus, the final sample consisted of 31 participants. By study design, participants were between the ages of 18-29 years ($M = 23.32$, $SD = 2.73$). In addition, 66.7% of participants were bilingual in English and Spanish. Over half of the participants (56.7%) reported that they had a family member that was considered an essential worker and a large percentage (83.3%) reported having family members that they considered to be at greater risk of contracting COVID-19. Over half (63.3%) were living in multigenerational homes at the time of the study. Additional information about the participant characteristics is displayed in Table 1 and demographic information about each participant is provided in Appendix D (Table D1).

Table 1

Demographic Characteristics of Study Participants (N=31)

Participants	n	%
Gender		
Female	25	80.6
Male	5	16.1
Non-binary	1	3.2
Generational Status in U.S.		
1st generation	4	12.9
2nd generation	26	83.9
3rd generation	1	3.2
Latinx Descent		
Mexico/Mexican American	19	61.3
Cuba/Cuban American	4	12.9
Puerto Rico/Puerto Rican	1	3.2
Other (Colombia, El Salvador, Honduras)	7	22.6
Residence Setting		
Suburban	17	56.7
City/Urban	12	40

Rural	1	3.3
Enrolled as student		
Yes	21	67.7

Participants	n	%
University Class		
Freshman	1	3.3
Sophomore	3	10
Junior	4	13.3
Senior	9	30
Graduate Student	5	16.7
Completed College	8	26.7
Currently Working		
Yes	24	80
Income Bracket		
Less than $20,000	10	33.3
$20,000 to $49,999	8	26.6
$50,000 or above	9	30
Preferred not to respond	3	10
Tested positive for COVID-19		
Yes	6	19.4
Family member essential worker		
Yes	17	54.8
Family member at high risk of contracting COVID-19		
Yes	83.3	25
No	15	50

Research Paradigm

The paradigm of this dissertation is constructivist, meaning that it denies the existence of an objective reality (Creswell & Poth, 2018). Constructivism asserts that reality is socially constructed and emphasizes that many truths or realities may exist which may also be shared among people. Additionally, this paradigm is non-reductionistic meaning that in

this perspective, the world consists of multiple individual realities that are influenced by context and the research affects the participants' world (Charmaz, 2014). In this approach, the researcher is not a neutral observer that is value-free. Instead, the researcher must examine their own preconceptions and values which may shape the data and the knowledge that is co-created from the interactions and context (Charmaz, 2014).

The Role of the Researcher and Research Team

This study was conducted by Natalia Jaramillo, a Ph.D. student at the University of California, Santa Barbara's Counseling, Clinical, and School Psychology program. I am a cisgender, Latinx, female, woman of color, and a first-generation Colombian immigrant. I am bilingual in both Spanish and English. Based on my lived experiences and academic training, I believe that social factors, such as race, class, gender, and power struggles play a crucial role in shaping values, coping patterns, and more generally the wellbeing of a person. I utilize a relational and multi-cultural approach to understand the experiences of others in my research and clinical work. I consider that the Latinx population and other ethnic minorities have experienced unique challenges resulting from the COVID-19 pandemic due to the disproportionate impact that the pandemic has had on underserved communities (Noe-Bustamante et al., 2021). Furthermore, I believe that Latinx emerging adults may be having to negotiate a variety of roles to support their family and have been confronted with additional stressors such as caretaking and navigating pandemic resources for their relatives. Despite these potential biases, I approached the focus-group interviews and data analysis process in a nonleading way with the aim of understanding the experiences of Latinx emerging adults.

There were four undergraduate Latinx research assistants that helped with the data collection and coding process of the study. Due to other academic obligations, two of the assistants were only involved for a shorter period of data collection and coding. All research assistants were trained in the study protocol and the philosophical underpinning of constructivist grounded theory method. A weekly research meeting was held with the team to address any ethical or methodological concerns. A fundamental aspect of qualitative research and the use of constructivist grounded theory is that the collection and interpretation of the data can be influenced by the researcher's experiences and background (Malterud, 2001). Therefore, as the lead researcher in the study, I practiced reflexivity and prompted the research team to consider how different backgrounds and positions affected the angle of investigation and interpretation of data throughout the various facets of the research process. Prior to collecting data, the research team discussed how social identities and personal factors such as being Latinx, and an emerging adult influenced the research. Each team member audio recorded a reflexivity statement and wrote down some of their perspectives about the psychological impact of the pandemic on the Latinx community in the US. As the lead researcher, I kept in mind that the research assistants were in the developmental stage of emerging adulthood and had inside knowledge about the psychological impact that the pandemic was having for Latinx emerging adults.

Measures

Demographic Form

Participants were asked demographic questions regarding their ethnic background, gender identity, primary language, education and/or work status, immigration generational status, income bracket, COVID-19 perceived risk and exposure (i.e., whether participants had

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COVID-19, if they had a family member or loved one who they considered to be at high risk for exposure to COVID-19, etc.), and residence setting (i.e., suburban, rural, or urban community) (see Appendix E for demographic questionnaire). Participants were not asked to disclose their documentation status. The demographic information was used to understand the context of each participant and to determine any key differences between the participants in each focus group.

Interview Protocol

A semi-structured interview protocol was developed, piloted, and revised (See Appendix F). I first created thirteen open-ended questions that could answer the research questions. These questions moved from a broad scope to more specific in the topic as the discussion progressed. The protocol was piloted by conducting a virtual focus group with three Latinx emerging adults in California who were similar to the target population. The pilot focus group allowed me to obtain feedback about the nature of the study, to adjust any protocol questions, and identify themes that could emerge from participants. Based on this pilot focus group, one question was omitted which asked participants to discuss what being at home had been like during the pandemic since the question felt repetitive, and most participants discussed this information without needing to be prompted.

Following the second focus group, one question on the impact of experiencing a natural disaster was removed as it would not apply to all participants in the study. In addition, another question was modified that concerned the types of support or help a participant's family had obtained during the pandemic. The question made assumptions about the participant's resources, and it was modified to the following: "Has your family experienced

any challenges related to resources as a result of the pandemic? Such as food security or with regards to healthcare?"

Memos

Memos of written notes about the data, observations, ideas, assumptions, and challenges were completed throughout the research process to adhere to a constructivist grounded theory approach. Memo-writing throughout the research process helped the team to identify patterns, consider biases, and explore themes in the data (Charmaz, 2014). The memos captured less apparent aspects of the focus groups such as body language, eye-contact, and crosstalk. Some of the questions considered during the memo writing included: "what are participants trying to say?", "what are some assumptions being made?", "what do participants remain silent about?", "how do different topics compare?" "How does context influence the experiences of participants?", and "what aspects felt challenging during the virtual zoom group?"

Timeline Notes

In addition to writing memos, the research team also collected news articles about the COVID-19 pandemic and the socio-political climate that affected the geographical area of the participants during the time of the study. This information served to identify a timeline of current events to better understand contextual factors during the time when the focus groups were conducted as well as any details that could influence the findings (Bowen, 2009).

Data Collection

Seven focus groups were conducted for the study. To adhere to COVID-19 social distancing protocols, and because of the geographical location of the participants, they were conducted online using the video software program Zoom. The participants were grouped

based on geographical region. This format was supported by the focus group guidelines of Krueger and Casey (2008), who recommend that participants in focus groups be organized based on different characteristics to create a more comfortable and cohesive group dynamic where individuals can feel most at ease during a discussion.

Before the focus group began, introductions took place, the purpose and confidentiality of the focus group was reviewed, and participants were invited to ask questions to ensure their understanding of the study. The focus group sessions ranged from three to seven participants and lasted approximately 1.5 hours each. Following this process, the audio recorder was activated, and the semi-structured focus group interview began. Throughout the focus groups I kept in mind the importance of validating the perspectives of all participants and asked follow-up questions when clarification was needed. After each focus group, participants were emailed information regarding mental health resources and services in case they had experienced emotional distress. Using constructivist grounded theory, data was gathered until each category (or theme) was saturated, meaning that the research team no longer found that additional information was contributing to an understanding of the derived categories (Strauss & Corbin, 1988; Charmaz, 2014).

Data Analysis

Focus groups were transcribed with the program Otter.ai. which uses artificial intelligence and machine learning to transcribe audio. The transcript obtained from the software was then reviewed first by a research assistant with the focus group audio and edited to fix any errors and to change any identifying information during the focus groups. After the research assistant reviewed the transcript, the lead researcher checked each

transcript with the recording. The transcript for each focus group was then used for data coding.

After completing each focus group and reviewing the transcripts, the research team met to analyze the data using a constant comparative method which involved comparing the focus groups within and across focus group interviews. The aim of using this method was to account for differences in the data, to clarify if consistent themes were being captured across the focus groups, to follow up with participants about specific codes that were emerging and to bring explicit systematic checks and refinements into the analysis (Charmaz, 2014). Furthermore, I used triangulation which included utilizing the memos, the timeline of pandemic-related events, and observations to adequately interpret the themes and to advance towards concepts of an emerging (Morrow, 2005). After completing coding of seven focus groups, the research team agreed that saturation had been reached. At that point there was no new data or leads that were arising and the categories were sufficiently dense. Upon reaching saturation, I consulted with an external auditor who is an experienced qualitative researcher to present the codes, themes, and discuss the rationale for stopping the collection of data. The auditor reviewed the codes and categories and provided feedback on ways of clarifying definitions of the focused codes utilizing the constructivist grounded theory tenets.

Line-by-line Coding

The research team individually reviewed each of the focus group transcripts during the initial coding phase. In this process, fragments of data such as words, lines, segments, and incidents were examined for analytic significance and there was a focus on identifying implicit meanings and actions of what participants shared (Charmaz, 2014). The research team then met and categorized each response into interpretable units of text that contained

one idea. In addition to this process, the memos that had been written were also utilized to analyze the data and interpret the codes which made it possible to further engage in critical reflexivity (Charmaz, 2014). Throughout the coding process a codebook was created which contained the codes, information about the focus group, and the page number and row numbers from each Microsoft Word document with the transcripts.

Discrepancies between coders and differences in interpretation of the data were discussed throughout all steps of coding. Rather than focusing on reliability, constructivist grounded theory acknowledges subjectivity and considers the researcher's involvement in the process of producing and interpreting data (Charmaz, 2006, p. 254). Hence, the process of discussing the line-by-line codes and discrepancies enabled the team to return to the data to look at quotes and derive additional new codes. To diminish the hierarchy between the research team, we rotated the lead role for each focus group. This meant that someone in the team was in charge of directing coding and leading the discussions regarding the codes and discrepancies in the data that were identified by the team.

Focused Coding

Focused coding involved reviewing the initial codes and selecting the most significant and frequent initial codes. This process also prompted the lead researcher to make decisions about which initial codes fit the research questions (Charmaz, 2014). In this phase, the codes were more conceptual than line-by-line coding and allowed for greater analytic direction which made it easier to conceptualize larger amounts of data (Charmaz, 2014). The team identified what kind of theoretical categories the codes fit and considered whether they reflected what had been described by the participants as they tried to make sense of their pandemic experiences.

Theoretical Categories

The third phase involved theoretical coding of the data. This process entailed conceptualizing how the substantive codes related to each other. During theoretical coding, the categories that emerged during focused coding were synthesized into a coherent model of the process in question (Charmaz, 2014). At this point in the data analysis process no more core theoretical categories were being generated by the data. In the final stages of data analysis, I developed clear definitions and names for each theme. The themes were consolidated, and the memos were reviewed. The theoretical categories were presented in an order that represented the experiences that appeared to be most salient and important to the lives of the participants and answered the research questions. Following this step, quote examples representative of each theme were selected.

CHAPTER III

Results

The aim of this research study was to derive an understanding of the impact of the COVID-19 pandemic on the psychosocial functioning of Latinx emerging adults residing in California and Florida. In addition, the study explored how Latinx emerging adults had been negotiating their identities, roles, and cultural values as a result of the COVID-19 pandemic. After coding the focus group transcripts, there were 17 focused codes that supported the final theoretical codes. Table 2 displays the names and a brief description of the focused codes.

Table 2

Description of Focused Codes

Focused Codes	Description
Psychological Distress	Reports of a range of psychological distress that ranged from depression, anxiety, internalizing symptoms (e.g., irritability, withdrawing, worry), difficulty sleeping, psychosomatic complaints, rumination, sense of helplessness or guilt. Reflections describing that the psychological distress experienced had resulted from a multitude of pandemic-related stressors. Some accounts of prior mental health before pandemic. Reports of change in motivation as a result of adjusting to the COVID-19 pandemic.
Mental Health Stigma	Reports regarding the challenges or discomfort of communicating feelings about mental health to family and identifying stigma as an issue in the Latinx community.
Mentality about Self-care	Reports of prioritizing self-care more as a result of undergoing the pandemic. Examples include learning how to manage self-care, having more time for self-care due to remote circumstances.

Focused Codes	Description
Familismo and Multigenerational Values	Reports of high emphasis placed on the family in terms of respect, support, obligation, family closeness, socialization, support during pandemic. Also includes prioritizing personal and family health safety and concern of safety for older generations. Seeing the importance of taking care of oneself and family members during the pandemic. Participants acknowledging concern about the safety of family who are constantly exposed to the threats of covid due to employment.
Heightened Responsibilities	Reports of pressure related to increased family responsibilities, such as caring or looking after family members, supporting others' education, household chores, getting covid related resources, as well as taking on financial responsibilities.

Focused Codes	Description
Mediating Pandemic Related Information	Reports of a sense of duty to clarify or share pandemic related information with family and loved ones due to their level of acculturation, education level, or ability to speak English.
Impact of Media Exposure	Reports of high levels of media exposure (e.g., social media, news, tv) to covid-related news and the impact that pandemic has had on wellbeing. Includes discussing the Latinx community depending on and trusting that Spanish news channels are providing the most up to date information related to the pandemic. Overuse of social media platforms reporting on COVID.
Transition to Virtual Format	Reports of academic strains related to general remote learning challenges, includes difficulties learning in a virtual format, Zoom fatigue, and lack of access to online campus resources and mentorship.

Focused Codes	Description
Sense of Loss	Reports of the pandemic interfering with their academic and career experiences. Reports of a felt sense of loss with regards to academics and work. Examples include not graduating at the year expected, not being able to attend graduation in person.
First Generation Experience	Reports of encountering academic barriers as a first-generation student. Examples include comparing privilege of others, parental education differences, having to navigate academic life with limited support, desiring more mentorship.
Increased Awareness of Social Disparities	Reports of experiencing a heightened awareness about health disparities in the US across ethnic groups during the pandemic. Comparing resources and experiences during pandemic to that of other emerging adults from a different ethnic background or with a higher SES. Acknowledging noticing the different responses across the US with regards to COVID protocols.

Focused Codes	Description
Barriers to Accessing Pandemic Resources	Reports of own or family members' ineligibility or limited access to pandemic resources, including lacking health insurance, mental health services, COVID-19 testing, and immigration related concerns with accessing services.
Pandemic Climate	Reports of instances in which pandemic safety protocol views differed between political parties. Reports of how the pandemic has been used for ideological and political interest for the past year and a half. Recognizing and navigating through differences in COVID beliefs amongst family

Focused Codes	Description
	members. Reports of politics guiding pandemic behavior such as mask wearing.
Social Adjustment	Reports of the pandemic shifting social relationships. Participants experiencing an inability to practice cultural norms. Examples include having the inability to have large gatherings, not having a funeral ceremony that abides to cultural standards. Includes reflections regarding traditional forms of greeting in Latinx community, this including demonstrating physical affection.
Altering Expectations	Shifting expectations about themselves. Includes grappling with experiencing less independence due to financial and contextual circumstances during the pandemic. For example, reports of wanting to make own money to be self-sufficient, experience of youth as a time of independence. Includes changing expectations about work prospects.
Personal Growth	Reports of personal growth. Specifically, participants reporting that due to the pandemic and its uncertainty they had grown to appreciate the little things in life, to notice their personal strengths, to strengthen their relationships. Reports of acknowledging vulnerability and new possibilities.

These focused codes were used to develop theoretical codes. The theoretical codes were the following: mental health experiences, navigating family factors, pandemic related communication, career and academic disruptions, systemic and environmental factors, and adaptation process. See Table 3 for the theoretical codes and example quotes. These theoretical codes are described at length in this section and direct quotes from the raw data are provided with the purpose of highlighting the voices of participants.

Table 3

Theoretical Codes and Example Quotes

Theoretical Codes	Focused Codes	Example Quotes
Mental Health Experiences	1. Psychological Distress 2. Mental Health Stigma 3. Mentality about Self-care	*"I had feelings of impending doom, there were days when I would probably cry a lot. There were other days when I felt better, and then I would go back to the crying or to the anxiousness."*
Navigating Family Factors	1. *Familismo* and Multigenerational Values 2. Heightened Responsibilities	*"But for my parents it's a lot different and I think as a Latinx young adult their well-being falls on my well-being as well, I'm not okay, if they're not okay."*
Pandemic Communication	1. Mediating Pandemic Related Communication 2. Impact of Media Exposure	*"the pressures to deliver the right information and trying to figure out, you know, like the sources that are actually saying the right things."*
Career and Academic Disruptions	1. Transition to Virtual Format 2. Sense of Loss 3. First Generation Experience	*"I abruptly transitioned to work from home, the work wasn't the same I wasn't feeling fulfilled. And then I would close my laptop, but then it's like, what do I do now? Right? My life was just between four walls for like an undetermined amount of time. So I would definitely had little bouts of, I guess you can say depression, but it was really just more low moods. like low affect not really motivated to do much. "*

Theoretical Codes	Focused Codes	Example Quotes
Systemic and Environmental Factors	1. Increased Awareness of Social Disparities 2. Barriers to Accessing Pandemic Resources 3. Pandemic Climate	*"so yeah, she was very, very sick, she was hospitalized, and she was put on a ventilator. And I think for, for me, just like how this experience was unique, maybe to someone who what isn't a LA... from Latinx background, is just that access to adequate health care. You know, being from a low-income, growing up in a very low-income community, predominately Hispanic community. We're surrounded by hospitals that aren't very, they're not the best."*
Adaptation Process	1. Social Adjustment 2. Altering Expectations 3. Personal Growth	*"For a lot of us we thought straight out from college, we might get into the job that we wanted, or research opportunities, or whatever other things people might be pursuing and that kind of has changed for a lot of us. So, I think my expectations of life has changed in the sense that it is teaching me to be a little bit more flexible about how I see the future and how I can go about it."*

Timelines of COVID-19 Pandemic Context for Participants in California and Florida

To account for contextual differences between participants in California and Florida, the research team collected relevant news articles regarding COVID-19 spread, political events, and safety protocols applicable to COVID-19 that could have potentially affected the experiences of participants during the time when the focus groups were conducted. Timelines containing pandemic-related events in California and Florida highlighted different courses of action in terms of responding to the COVID-19 crisis and the political divide in the US (See

Figure 3 for timelines). The news-related events that were gathered were not discussed

during the focus groups but rather helped the research team to consider any pandemic-related

variations between California and Florida in terms of safety protocols, political climate,

COVID-19 infection, and death rates.

Table 4

Abbreviated Timeline of News Events in California and Florida (December 2020 – April

2021)

Month and Year	News Event Recorded
December 2020	Dec 9: Focus Group #1 is carried out with participants in CA* Dec14: Vaccine approved for health care and essential workers News reports ICUs in CA at full capacity and new COVID-19 variant reported
January 2021	Jan 6: President Trump supporters storm the capitol Jan 19: COVID-19 vaccine becomes available to people 65+ Jan 20: Biden and Harris are sworn into office Jan 21: Trump changes residency to FL** Jan 22: Focus Group #2 is carried out with participants in FL Biden announces vaccination timeline (vaccines for every adult by end of May) Jan 22: FL requires proof of residency to get the vaccine due to vaccine tourism
February 2021	Feb 3: CA hospitalizations fall by 78% although death rates remain high Feb 10: South African coronavirus strain found in CA Feb 12: Florida has the record month of total COVID-19 fatality Feb 18: State lawmakers unveil a plan to reopen schools in CA Feb 27: Democrats pass relief packages
March 2021	March 1: Biden directs states to make all US adults eligible for vaccine by May 1st Mar 3: Focus Group #3 is carried out with participants CA Biden sets goal for Americans to gather in person with families in July Mar 8: Miami beach imposes emergency curfew over spring break 'chaos' Mar 10: Focus Group #4 is carried out with participants FL Mar 10: Focus Group #5 is carried out with participants CA Mar 19: Focus Group #6 is carried out with participants CA March 25: Government Newsom announces everyone over 16 will be eligible for vaccine starting April 15 Mar26: Vaccines expand to 50+, healthcare providers, and long-term care facility residents and staff in FL

Month and Year	News Event Recorded
April 2021	April 7: Focus Group #7 is carried out with participants FL The FL Department of Health reported 6,817 new COVID-19 cases April 13: California halts Johnson & Johnson vaccine doses

Note. *California = CA, **Florida = FL

Based on the news information that was gathered, the research team identified that California had stricter rules with regards to mask wearing and social distancing than Florida. It was also noted that Florida had higher death rates due to COVID-19 in the winter of 2020 although later in 2021 the COVID-19 infection rates became higher in California. Based on the collection of this data, the research team understood that there was a multitude of factors influencing regional differences in COVID-19 infection and death rates including population density, climate differences, and variation in COVID-19 protocols between these two states. In terms of the themes that emerged from the focus groups, there were no significant differences between participants in Florida and California although it was noted that some themes were discussed more frequently between regions.

COVID-19 Pandemic Impact on Psychosocial Functioning

The data analysis resulted in a theoretical model regarding the psychosocial functioning of Latinx emerging adults during the COVID-19 pandemic. This model about psychosocial functioning included themes of psychological distress, reflections on mental health stigma, and a shifting mentality about self-care. The factors that were influential in terms of driving the psychosocial functioning of Latinx emerging adults included navigating family factors, pandemic communication, career and academic disruptions, and systemic and environmental factors. The themes and codes that make up the model will be discussed below (see Figure 1 for model).

Figure 1

Model of Psychosocial Functioning of Latinx Emerging Adults as a Result of the Pandemic
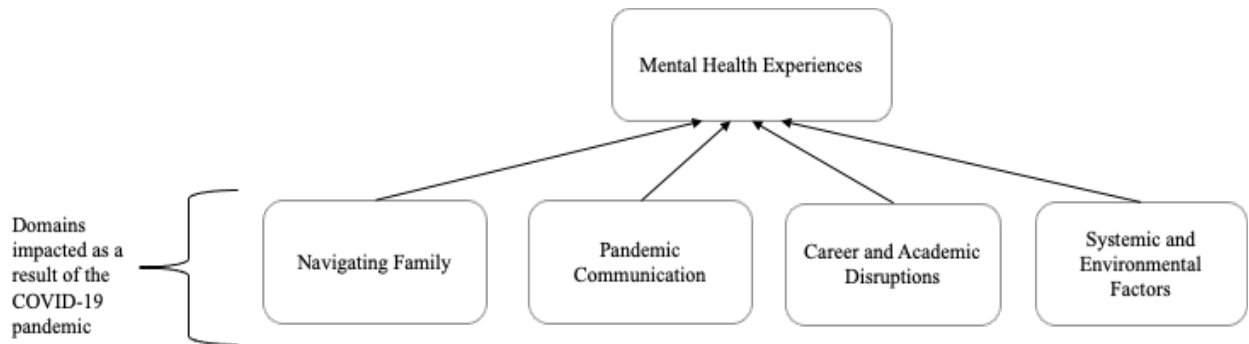
Mental Health Experiences

Participants reported experiencing significant interruptions in their daily lives which led to a range of mental health experiences. For many participants, the pandemic had taken a significant toll on their mental health and had generated distress. For those with preexisting mental health disorders, the pandemic aggravated their symptoms or led them to seek additional mental health services. There were many instances where participants described how mental health stigma in the Latinx community often made it hard for them to discuss their mental health experiences openly with their loved ones during the pandemic. In addition, when discussing mental health experiences, some reflected on how the pandemic had encouraged them to prioritize and value self-care as a way of coping with pandemic-related distress. Below I discuss the areas that pertained to the mental health experiences of participants.

Psychological Distress. Collectively, participants described experiencing substantial psychological distress due to the COVID-19 pandemic, and for most, the distress was still present at the time when the study was conducted, which was between 13 - 17 months into the pandemic. Notably, participants reported experiences of distress, including depression,

anxiety, irritability, withdrawal, difficulty sleeping, psychosomatic complaints, rumination, and a sense of helplessness or guilt. Below are two accounts of participants, one in Florida and one in California, that described their emotional distress during the beginning of the pandemic:

> *"I had feelings of impending doom, there were days, when I would probably cry a lot. There were other days when I felt better, and then I would go back to the crying or to the anxiousness." - (Participant 3, Florida)*

> *"I think my mental health has definitely been impacted a lot. I've been getting so anxious. I've not gotten depressed, but I've had a lot of symptoms of depression." – (Participant 1, California)*

Another participant from California described that their psychological distress had been acute and had led to suicidal ideation. This participant stated:

> *"And so, it's gotten really bad to the point where I'm suicidal and I'm attending intensive outpatient program right now for extra support." – (Participant 20, California)*

Various participants shared that although they did not have a specific diagnosis for a mental health disorder or were not receiving mental health services, they were highly aware that they were experiencing high levels of distress. These participants reported noticing mood changes, difficulty sleeping and concentrating, and a decrease in motivation. A participant shared the following:

> *"I didn't have the motivation to really do much because I didn't really feel very well. So that really took a huge toll on my mental health for a good while." – (Participant 12, California)*

Several participants clarified that they already had preexisting mental health disorders such as depression or anxiety and that the pandemic had further compounded their distress. For some, the pandemic was a time when they began to experience a significant decline on their mental health and decided to reach out to their providers (e.g., therapists and psychiatrists) to obtain additional support or medication. For example, a participant shared the following:

> *"I also really relate to that, I actually started my anti depression journey in the middle of the pandemic because it got really, really, bad for me." – (Participant 5, Florida)*

Overall, participants reported augmented distress as a result of undergoing the pandemic and this distress was impacting their functioning with regards to engaging in activities of daily living, socialization, and academic engagement. Given, their psychological distress some had decided to seek mental health services and were concerned about their psychological wellbeing.

Mental Health Stigma. The topic of mental health stigma emerged consistently throughout the focus group interviews as it related to having a Latinx identity. For example, some participants discussed their perceptions of how Latinx culture has a high level of stigma about mental health problems, and for them the stigma had become more apparent during the pandemic. Notably, a participant in California described being unable to communicate with family about experiencing mental health symptoms because they did not feel comfortable sharing or having a conversation about mental health.

> *"I'm not transparent and I don't communicate about my mental health, I've been more distant because the moment that I reach out to my mom, it's like, hola como estas?[hi how are you?] And I have to lie every time." – (Participant 20, California)*

Furthermore, another participant noted that her family had trauma that had not been addressed due to mental health stigma and this unresolved trauma was affecting her during the pandemic. She shared:

> *"Dynamics that affect me and you know… it's specifically due to being Hispanic, there's a lot of like their [parental] trauma that they haven't worked out because therapy wasn't a thing for them" – (Participant 6, Florida)*

Related to stigma, another participant who worked as a counselor in a mental health clinic in Miami, Florida, shared her perspective regarding the relationship between emotional and physical health and how stigma was influential in mental health service utilization.

> It was very important during the pandemic, and specifically for Latin people who don't usually believe in mental health, to take care [of it], because of the fact that it can lower your immune system, and if it lowers your immune system it puts you at a higher risk of getting COVID. So, I think that was the most challenging aspect for me. (Participant 31, Florida)

When talking about stigma in the Latinx community participants exhibited frustration and reported wishing that mental health stigma would decrease as they felt that it impacted them and their community. Notably, some participants felt hopeful that the pandemic could promote the importance of mental health for the Latinx community.

Mentality about Self-Care. One dimension of coping that emerged when discussing mental health experiences with participants was self-care. Importantly, participants expressed that due to the pandemic they had shifted their mentality about self-care and were making it a higher priority to promote their wellbeing and reduce stress due to changes in their routine. According to participants, before the pandemic, self-care was not a priority or was

considered a luxury by their families, yet they felt that this had shifted and was becoming a more important aspect for coping with the pandemic. For participants, self-care looked differently based on each participant; however, some provided examples of how they were taking time to engage in self-care activities such as painting, reading, exercising, baking, listening/creating podcasts, going into nature, getting sunlight, spending time with pets, journaling, watching television shows, and connecting with friends. Some others also reflected that they were practicing self-care by putting less pressure on themselves.

> *"Before like COVID a lot of people didn't really do[self-care] that or didn't really think it was a priority. But I found that it's very valuable to take that time for yourself." – (Participant 12, California)*

Other participants discussed how the pandemic had motivated them to prioritize their mental health and to identify their wellbeing as their own responsibility.

> I feel like the pandemic kind of helped me too. And now I'm way more comfortable just being on my own and I found little ways to regulate myself and my emotions when I'm going through really rough patches. So that's kind of the silver lining that has come to light at the tail end of this pandemic, and that I have kind of really come in to my own, of really being able to manage and to hold myself accountable for my own mental health. (Participant 5, Florida)

> I think balance is important. I think that's something that the pandemic taught me as, as a young person and Latin person, balance between family, work life, friendships, caring for yourself…try and balance as much as you can. Your mental health and your physical health is definitely more important than anything at all. I wasn't able to work when I had COVID, I wasn't able to do anything because I had fatigue, and I had a lot

of bad feelings in my body… I guess it was a sign that I wasn't taking care of myself well enough and that I was kind of taking my youth for granted. (Participant 31, Florida)

Summary and Recommendations Related to Mental Health Experiences. Overall, participants reported experiencing a range of symptoms of distress including depression, anxiety, difficulty sleeping, hopelessness, somatization. For some participants, the pandemic had shifted their sense of motivation. Participants consistently expressed the challenges associated with mental health stigma in the Latinx community and reported finding it challenging to talk to their families and relatives about their distress. In addition, others described that the pandemic had served as an opportunity to prioritize self-care. Participants provided a range of suggestions that they thought could be helpful to promoting the psychological wellbeing of other Latinx emerging adults living in the context of the pandemic. These suggestions included stress management groups and information sessions, increase access to mental health services and ethnic matching between client and provider, addressing mental health stigma, enhancing cultural awareness and exploration of identity, additional childcare services, affordable housing, career counseling and mentorship, improved access to resources for immigrant parents, student loan forgiveness, and financial assistance.

Navigating Family Factors

In the context of the pandemic, navigating family factors was a theme that emerged and heavily influenced the psychosocial functioning of the participants. Helping family manage stressors such as identifying COVID-19 related resources or managing financial concerns with family brought about additional stressors during the pandemic, but it also

served as a protective factor for participants. Notably, family closeness proved to be supportive and less isolating during the pandemic. The related themes under this code included *familismo* and multigenerational values, as well as heightened responsibilities.

Familismo and Multigenerational Values. Most participants discussed adhering to *familismo*, which is a cultural value that one's family is expected to provide necessary emotional and instrumental social support (Stein et al., 2019). For example, one participant described being highly concerned about the well-being of their family and how this impacted them. They shared the following:

> *"But for my parents it's a lot different and I think as a Latinx young adult, their well-being falls on my well-being as well, like, I'm not okay, if they're not okay." –*
> *(Participant 20, California)*

Another participant who moved out of her family's home during the pandemic reported having difficulty entertaining herself alone and expressed appreciation for living in a multigenerational household.

> *"But now that I am not with my family, it is a little more difficult trying to find ways*
> *to entertain myself alone, not having that multigenerational household where I*
> *always had the social aspect whenever I wanted." – (Participant 4, California)*

Several participants emphasized that it was difficult to talk about their psychological distress or feelings about undergoing a pandemic because they did not feel that their families validated what they were experiencing. The lack of validation made them feel isolated and bad about how they were coping during the disaster. For example, a participant described that her family had experienced so much adversity as immigrants in the US that they did not view

the pandemic as a significant stressor and could not relate to the emotions of distress that the participant was experiencing. Below is an example of a participant discussing this aspect:

> *"And it makes it very difficult to complain about anything, because they'll always try to one up me in a way, like you have nothing to complain about." – (Participant 4, California)*

Another participant shared what her parents would often mention when she expressed distress:

> *"You've had the privilege of us having given you such a good start that we didn't have, that there's no reason for you to complain or to be struggling the way you are." – (Participant 3, California)*

Contrastingly, some participants that lived with family during the initial part of the pandemic, or returned home to live with family, also reported experiencing increased emotional support. Some participants described that it was reassuring to be around family as there was less isolation and increased opportunities to interact or learn from other family members.

> Because like every Hispanic person…I would say, has two or three people in a house. And maybe I'm generalizing. But we're used to being around people. So that helped a lot. And I feel like there was a lot of [emotional support] even on the phone, a lot of emotional support from family members. So that really helped everyone to kind of go through it, and not become so anxious at all times. (Participant 30, Florida)

Another participant described experiencing a mixture of emotions regarding family during the pandemic. They stated:

I have always been worried I'm going to cause them to contract COVID but at the

same time, having all that support in one household, there is always someone you can

speak to or just think about things with them. There's not really a quiet moment,

which if you're working from home, or anything like that, where you need a quiet

moment and you need to focus, but when you're just trying to wind down and relax,

you always have someone to speak to you when you're not allowed to go out, you're

not really supposed to be speaking to so many people you have this small circle of a

small family, smaller community inside your own house. (Participant 4, California)

In general, living in a multigenerational home was challenging for many participants, both in

terms of protecting their relatives from COVID-19 and juggling additional family

responsibilities. On the other hand, the pandemic had also made it easier to get emotional

support by increasing opportunities to share time with relatives and to promote a sense of

community at home when so many were isolated.

Heightened Responsibilities. Participants reflected about having increased family

obligations during the pandemic, including helping around the house, taking care of family

members, and making financial contributions. Participants shared that their responsibilities

had increased for a multitude of reasons but oftentimes it was due to their parents being

essential workers, needing more support, being older, or at a higher risk of contracting

COVID-19. Below is an example of a participant discussing their perceptions of taking on

responsibilities.

So, I just think for me, my family comes first. And sometimes it could conflict with

other things. And not everybody is so family oriented, or, their family members don't

always depend on them. And I feel like growing up, that was always the case for me.

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Like, my parents always depended on me. And I think that's very common for an

immigrant youth. (Participant 29, Florida)

Another participant shared:

My sister's husband, he's immunocompromised. So, I was always going to the store.

I'll go and if I get it [COVID-19] then I guess the expectation was that it wasn't going

to be as bad as other people in the house. I am the youngest, so I was always like

going out and getting groceries and kind of taking that responsibility to protect

everyone else. (Participant 30, Florida)

As a result of having increased responsibilities during the pandemic, various participants

shared that the pandemic was serving as an opportunity to learn how to manage boundaries

with parents and relatives.

Like setting those boundaries and being like, look at these times when I'm in finals

week or midterm season. I need my space or else are I'm just gonna get overwhelmed

with everything that's going on at school, and then at home and everything. I feel like

definitely having those conversations [with family] is very important. (Participant 3,

California)

Summary of Navigating Family Factors. Participants reported concerns about the

safety and wellbeing of their family during the COVID-19 pandemic and experiencing high

levels of stress due to potentially exposing others to COVID-19. Participants described that

living back home posed challenges with regards to having to take on additional household

responsibilities, caring for other relatives, encountering increased academic hardship as a

result of family experiencing unemployment, and encountering limited space to work and

study. Nonetheless, participants shared a deep sense of gratitude for their families and were

appreciative for the wisdom of relatives, particularly older relatives during the pandemic. Furthermore, participants reported that the pandemic had provided an opportunity for them to practice setting more boundaries with family in order to prioritize work and academics during that time.

Pandemic Communication

Another area that related to the psychosocial functioning of participants was pandemic communication. Throughout the focus groups, participants reflected about their experiences serving as language or information brokers to their families during the pandemic and how this had impacted their mental health. Participants served as language and information brokers for the following reasons: their parents or older relatives did not speak English and lacked accurate public health information in Spanish, they had difficulty understanding COVID-19 safety protocols, or needed advocacy. Participants in California and Florida described that in the process of providing information and interpreting public health or safety protocols, they had felt a sense of duty or pressure to present accurate and trustworthy information to keep their loved ones safe. Additionally, many indicated that they spent time identifying accurate public health information to support their families in advocating for their safety at work since many of them were essential workers and had little to no flexibility when it came to working remotely. Some also discussed the impact of prolonged and repeated exposure to media and graphic pandemic-related images. For example, they reported feeling highly stressed by the media content and how the pandemic was affecting those in their country of descent such as Mexico or Colombia. There were two related themes that emerged: mediating pandemic related information and impact of media exposure.

Mediating Pandemic Related Information. Even before the pandemic, participants described the way they supported their families by navigating across cultures and often served as language brokers to relatives who did not speak English, but this increased significantly since the implementation of COVID-19 safety and health protocols. Participants often had to provide information regarding safety measures to their parents and relatives due to limited information available in Spanish or inaccurate information that their family was obtaining from Spanish news channels regarding COVID protocols. Participants expressed that they felt a responsibility to deliver pandemic-related information accurately and were often spending time educating relatives about COVID-19 or making difficult decisions about the safety of their parents and elders due to pandemic-related protocols. A participant shared:

"Like the pressures to deliver the right information and trying to figure out the

sources that are actually saying the right things." – Participant 3 (California)

Another participant highlighted that one of the challenges of the pandemic was providing safety information to parents or relatives who may have different views about health and safety protocols or confronting the values (e.g., importance of social gathering).

They [parents] come from a different generation than where I come from so like

really getting the information about the safety precautions that we needed to take, and

why we needed to take them and why it's so necessary, even if we just go out to the

parking lot in our car, we still have to go out with the mask. I feel like just helping

them [parents] understand that. (Participant 3, California)

Another participant shared what it was like to relay COVID-19 services for parents:

My sister and I have a tag team with like, you know, finding, making appointments

for them [parents] to get tested. Finding a location for them to get vaccinated was like

a whole ordeal and like giving them the directions on how to get there, like it's a lot of

hand holding. (Participant 20, California)

From the viewpoint of participants, information in Spanish news channels like Univision and

Telemundo was often sensational or inaccurate. One participant discussed how the

information that they were obtaining heightened their distress and created additional

confusion.

> *"I feel like even the regular news.. sometimes the wording is not necessarily great.*
>
> *And then the things that people will talk about in the Hispanic community, there was*
>
> *a lot of people very scared, and a lot of misinformation being spread around" –*
>
> *(Participant 30,* Florida)

Based on the reports of the participants, it seemed that the topic of mediating

pandemic related information had been a significant factor contributing to emotions of

burden and fear particularly during the initial part of the pandemic. Some also expressed

disillusionment by communication inequities in public health messaging and how this was

impacting Latinx and those who were predominately Spanish speaking.

Impact of Pandemic Media Coverage. Aside from mediating pandemic related

information, participants described feeling overwhelmed and distressed by the media

coverage that they had encountered during the initial phases of the pandemic. Various

participants felt conflicted as they wanted to remain informed so they could protect

themselves and their families; yet at the same time were overwhelmed by the heightened

emotional reactions and the distressful content that they were being exposed to relating to

social inequities and how the pandemic was impacting ethnic minorities. Furthermore,

several participants discussed how they were not just overwhelmed by the media content that

they were obtaining regarding their state or community, but also felt concerned about the news that they were receiving regarding the impact that the pandemic was having in Latin America.

> It's just been too much like, all that's on my plate plus, like everything with COVID or like the news and worrying about my family, the family here, the family in Mexico, and all that was just stress that I did not have before the pandemic. (Participant 16, Florida)

Another participant reported:

> I think another thing that we experienced was that you would hear, while being home in lockdown, you would hear about the stories about what was happening to people here, but also about what's happening to people back in Colombia, or in other countries, which has been a different situation in different countries. So, it's also keeping everything in mind. But oh, in Colombia is like this is happening. So imagine, in Mexico and Brazil, I think in Ecuador was also very bad. I heard about like bodies in the streets. So yeah, being Hispanic, you're always having to be aware of whatever is happening in the rest of the world. (Participant 30, Florida)

Summary of Pandemic Communication. Overall, participants shared extensively about feeling some pressure to inform their families about taking safety precautions during the COVID-19 pandemic. Some were also frustrated by inaccurate information being shown on Spanish news channels. In addition, participants reflected on the psychological impact of having constant exposure to news and updates regarding the pandemic and how their stress was compounded by the pandemic-related information shifting so rapidly.

Career and Academic Disruptions

Most participants described how the COVID-19 pandemic had led to drastic disruptions in their academics or employment and had brought about many challenges for Latinx emerging adults. The primary themes related to this topic were: transitioning to a virtual format, loss of opportunities, change in career plan, and first-generation experience.

Transitioning to Virtual Format. As a result of the safety precautions put in place to prevent the spread of COVID-19, participants shared their experiences of the psychological impact of transitioning to virtual learning or working. Several participants mentioned that studying and working virtually had affected their mood, motivation, sleep, and productivity. In addition, due to their home environments and the burdens brought about by the pandemic, participants reported that it was difficult to stay focused on academics and work. They also described having trouble connecting and communicating with faculty and colleagues virtually, leading to feelings of isolation, low motivation, and diminished effectiveness. Generally, participants attributed their difficulties in keeping up with academic work as being due to a lack of academic support, managing family expectations, and lacking a distraction free environment in their home to complete their work or attend virtual classes. One participant shared the following:

> I abruptly transitioned to work from home, the work wasn't the same I wasn't feeling fulfilled. And then I would close my laptop, but then it's like, what do I do now? Right? my life was just between four walls for an undetermined amount of time. So, I had little bouts of, I guess you can say depression, but it was really just more like low moods, low affect not really motivated to do much. (Participant 29, Florida)

Participants reported that they struggled so much academically in virtual classes that they had to adjust their expectations about their performance, shift their career plans, or take time off from studying. For example, participant stated the following:

> *"I failed last semester because everything was on Zoom and I was very overwhelmed with it." – Participant 10 (California)*

> Latinx students in our university might not have the resources to have a stable internet connection or have that economic possibly to get a tutor or other outside resources that you need to continue to be successful in college. There are other struggles and other things that they're going through than a White student might not be going through and just having professors take that into consideration. (Participant 3, California)

In addition, participants felt that virtual learning or working had been particularly difficult due to feeling that their parents did not understand the format and would interrupt them while in classes or work. For example, a participant shared the following:

> *"I feel like it's just they [parents] don't really understand. Like how we need to adjust you know, this lifestyle, you know, virtual lifestyle. It's very new to everybody and I feel like it's especially new to them too." – Participant 15 (California)*

Sense of Loss. Participants felt a sense of loss by not being able to partake in different opportunities that they were hoping to have during their youth, as a result of social distancing, limited travel, and changes in safety protocols. For example, several participants reported feeling a sense of loss and a shift in their expectations with regards to not being able to attend college or graduate in person. One participant shared:

I think at the very base level, it essentially took away my senior year of college, which is, you know, a big thing. Being a first generation Latinx. Immediately just thinking about the fact that I won't have a graduation, like an in person graduation, you know, like the four years that I was here, and like, my parents aren't going to be able to see me walk, like they didn't get to go to college. (Participant 24, California)

In addition, another participant discussed their sense of loss as it related to being young during the pandemic:

"And I feel like a year of my 20s is gone and so it wasn't until they said that that I reflected, oh, wait, I, we pretty much did lose that year." – (Participant 19, Florida)

Other participants described how this pandemic presented for them uncertainty with regards to their future and this compounded their anxiety due to the limited job prospects and the state of the world in terms of the environment, economy, and sociopolitical climate.

"I feel like finding a job in general is even hard without a global pandemic. But even now, there's not as many opportunities for us, which kind of adds to the anxiety." – (Participant 26, California)

Overall, many participants were aware that they were experiencing a sense of loss during the pandemic and were working to understand and validate the grief that they were feeling. Some were coping with this sense of loss by acknowledging the things that they were grateful for while others and others were leaning on friends and family to process how the COVID-19 pandemic had impacted their lives and that of so many.

First Generation Experience. Participants reflected on the challenges that they encountered as first-generation students during the pandemic. They reported having limited knowledge with regards to navigating their academics or lacking support and guidance. For

these students, having campus resources was crucial and returning home due to the pandemic made it difficult for them to concentrate, to feel a sense of mastery in their coursework, to ask career related questions. One first-generation student shared:

> *"I don't know what I'm doing or where I'm going. And I didn't have the opportunity to have parents who went to college, as well. So, I don't really have anyone to help me out, you know?" – (Participant 12, California)*

Another participant described that their parents did not understand the process of being a first-generation student and the commitment to completing coursework.

> *"Well, I think I have a big responsibility because I'm first generation and then my parents not really knowing what I go through at home and staying home and like trying to do schoolwork." – (Participant 27, California)*

> *"And I want to be a psychologist you know, but the thing is, right now I'm just at home, I don't know what steps to take, or what internships or what information I need in order to achieve my goal." – (Participant 15, California)*

Summary of Career and Academic Disruptions. In summary, participants described how academic and work-related disruptions was significantly impacting them. Participants shared concerns regarding disrupted income and discussed feeling less engaged in academics and less hopeful about their work prospects. In addition, Latinx emerging adults reported difficulties focusing on academics and work due to lack of space at home or the addition of additional responsibilities in their families. With regards to these disruptions brought about by the pandemic, they reported a sense of loss from lacking in-person interactions with peers and coworkers or having the opportunity to live on a college campus and in addition felt worried about the uncertainty of their future academic and career

prospects. First-generation students in the study also noted feeling less supported

academically as a result of the virtual academic format.

Systemic and Environmental Factors

Systemic and environmental factors was defined as experiences that participants

shared regarding encountering systemic disparities during the pandemic and discussing

environmental factors that influenced their pandemic experiences. These factors increased

their awareness of systemic injustices and influenced their psychosocial experiences. There

were three related themes that were identified: increased awareness of social disparities,

barriers to accessing pandemic resources, and the pandemic climate. Participants reflected on

the challenges that they encountered navigating service systems (e.g., healthcare,

immigration resources) to support their families during the pandemic. They expressed feeling

overwhelmed by having to identify pandemic resources and by protecting their families who

they considered to be vulnerable during the pandemic. Furthermore, participants shared how

the political polarization increased hostility and made it sometimes challenging to engage in

conversations with others due to different perspectives and stances on the covid-19 safety

protocols and race related issues.

Increased Awareness of Social Disparities. Participants indicated that although they

had previously experienced issues of discrimination and racial injustice, their awareness of

systemic inequities and how they impact Latinx in the US had become more visible as a

result of experiencing COVID-19. They described how ethnic minorities had been

disproportionately affected by the pandemic and they had gained a deeper understanding of

how Latinx, undocumented immigrants, and those of indigenous background were at a

disadvantage when it came to accessing COVID-19 testing, healthcare, and COVID-19

economic relief support. For example, a participant stated:

> *"But thinking about my community, and not just the Latinx community, my parents*
>
> *are from Oaxaca, they are from a small pueblo in Oaxaca. So, we're indigenous…and*
>
> *have even less resources." – (Participant 28, California)*

Another participant discussed how systemic inequities were impacting her community,

family, friends, and her own well-being.

> Even further would help in supporting my wellbeing and knowing that my
>
> community is being taken care of, because that'll trickle down into my parents and
>
> their friends. And if their friends are doing good, my parents are going to do good.
>
> And if my parents are happy, I'll be happy, you know. (Participant 28, California)

In addition, participants highlighted that they were more aware of disparities in resources

they had at their disposal as Latinx young adults. Participants reported feeling more pressure

than White friends and peers during the pandemic due to their culture, socioeconomic status,

and home context. For example, participants reported having to spend many hours

identifying pandemic-related resources in their community, caring for younger siblings and

relatives, and living in more crowded spaces. For some participants, gaining awareness and

experiencing these differences in privilege made them feel overwhelmed and unmotivated.

One participant shared:

> Some of my friends who are you know, white and from rich families, they get to live
>
> on their own or they have like their own apartment, and so they don't have that worry
>
> of coming back home. And, getting someone sick, or someone who's older in their
>
> family sick or they just have their personal space. I don't have that luxury, because I

am a grad student and I'm again trying to save money as much as I can. And so, coming back home is like the only option I have. (Participant 1, California)

Barriers to Accessing Pandemic Resources. The focus groups revealed that participants had difficulties locating resources related to pandemics, including COVID vaccine testing, as well as barriers to accessing mental health care. Participants reported that encountering these barriers added additional stress to their lives and confirmed their perception of social inequities due to ethnicity, immigration status, and income level. In one case, a participant in the study shared the challenges she experienced in trying to obtain healthcare for her mother who became extremely ill with COVID-19. The participant described having to go to a different hospital outside of their residential community to access adequate healthcare, as their nearby hospital had turned them away. The participant stated:

She [mother] was very, very sick, she was hospitalized, and she was put on a ventilator. And I think for me, just how this experience was unique, maybe to someone who what isn't from a Latinx background, is just that access to adequate health care. You know, being from a low-income background, growing up in a very low-income community, predominately Hispanic community. We're surrounded by hospitals that aren't very, they're not the best I want to say….. And so, we had to go out of our way and drive very far away to go to a better hospital that had better resources. And even then, they were still questioning whether she would be sent to another hospital, just because she wasn't from that specific area. And so, yeah, I mean, eventually, she was permitted, and she did receive adequate care. (Participant 1, California)

In addition to experiencing barriers to resources, multiple participants described that their family members were fearful and hesitant to seek different types of pandemic-related resources or to be in public settings due to fear of discrimination or their immigration status. Below are two examples of these experiences from participants.

> From my own experience, and from my family members, they've always had issues going to the grocery store, just because of the little remarks that people would say, or faces that they would make, or having issues communicating with what they need from a cash register or employee, that after the pandemic, because everything was, or once the pandemic started everything was so uncertain. (Participant 14, California)

> And just one other thing that came to mind was undocumented folks, I, myself don't identify as undocumented. But I know there's a lot of fear within the Latinx community, who identify as undocumented in the sort of resources and who they can ask these sorts of questions to. (Participant 24, California)

Pandemic Climate. Participants discussed how the distress that they were experiencing was not limited to COVID-19, but also to the political climate and navigating perspectives regarding pandemic-related safety protocols with others. Participants expressed concern about the actions being taken to combat COVID-19 as well as the role of the Trump administration with regards to safety protocols. For example, a participant shared the following:

> And there's no middle ground and I've noticed that like a lot of divide has been like are you listening to the science? Are you listening to the emotions behind it or the fear behind it. And there's so much fake news, you don't know what's reliable or not, this past year, I've just been experiencing that even with friends my age and stuff, like the

way they think about the pandemic or look at COVID is very different depending on

the lens that you put behind it. (Participant 29, Florida)

Another participant discussed how political views were impacting perceptions of COVID-19

safety precautions, which, in turn, created additional stress and frustration for her. She

emphasized that those close to her who had different political views and were not taking

adequate steps to protect themselves.

It really is difficult if you're younger, and you have a political view that is so different

from the majority of other people. Yeah, it was tough, because you try to see it from

not a political point of view, you understand it's a virus and you have to take care of

yourself and take care of other people. But then you see other people were like it's not

such a big deal. Like, you work hard, you're young, you don't have to worry about it.

But I'm also trying to take care of other people. (Participant 30, Florida)

Summary of Systemic and Environmental Factors. Based on the focus groups, it

was evident that participants became more aware of racial health disparities and systemic

inequities due to experiencing the pandemic and this exposure contributed to their distress.

They also discussed the barriers that the Latinx community faced during the pandemic and

provided examples of how these inequities affected them personally. Another source of stress

that emerged was related to the political divide in the US and the ways in which the

pandemic climate influenced their perspectives on safety protocols.

Negotiation of Identities, Roles, and Cultural Values

The second research question sought to explore how Latinx emerging adults were

negotiating their identities, roles, and cultural values as a result of the COVID-19 pandemic.

In terms of this research question, the results of the study indicated that participants were

negotiating their identities, roles, and cultural values during the pandemic by undergoing an adaptation process. This adaptation process involved coming to term with changes brought about by the pandemic which had impacted most aspects of their daily lives and led to uncertainty about their futures. A model was developed to capture distinct areas that were contributing to the adaptation process for these participants. The related codes included social adjustment, altering expectations, and personal growth (see Figure 2 for model).

Figure 2

Model Describing Negotiation of Identities, Roles, and Values through an Adaptation Process
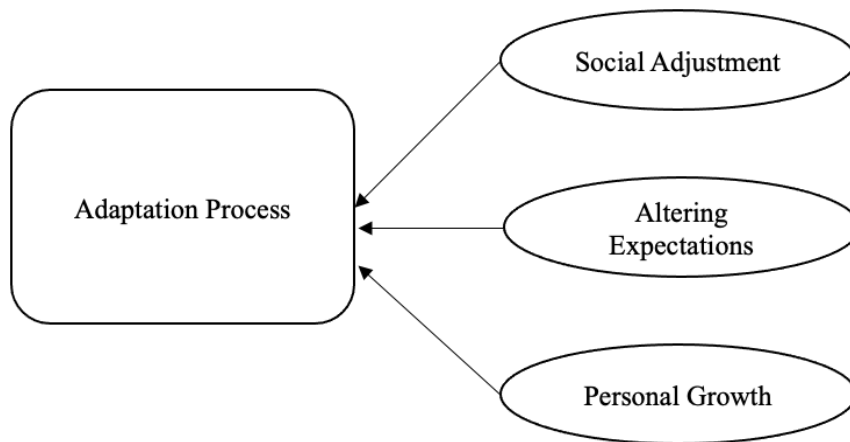
Adaptation Process

The process of adaptation during the pandemic was prompting participants to encounter a transitional period where they could explore their ethnic and intersecting identities, clarify values, and consider personal goals. For participants in the study, the adaptation process entailed reflecting on what it meant to undergo such a significant global disaster and how the pandemic would shape their future and impact their opportunities. Factors that influenced their adaptation process included social adjustment, altering life expectations, and reflecting on experiences of personal growth.

Social Adjustment. Participants shared about the challenges of not being able to gather or to socialize with family and friends in the ways that they normally would have prior to the pandemic. They discussed how social distancing had increased their appreciation for collectivism and connection. This theme was coded equally for both regions. Participants expressed that an important cultural aspect of being Latinx was gathering to celebrate traditions and to show physical affection to family (e.g., hugging, kissing) and support. As a result of having to practice social distancing during the pandemic, they reflected on this cultural value and its significance to the Latinx experience. Below are examples of participants discussing their process of social adjustment.

Because culturally, I think for me, family values are really big. It's my main value, actually my main cultural value. So like, living in COVID, and not being able to gather to like celebrate small or big wins. It's almost like removing that value. And it's like removing a piece of view and a piece of how you grew up. And that's a really important aspect of my life. So, it's difficult when there's a barrier there. (Participant 20, Florida)

Sometimes it's been hard to not gather… for our culture, you know, what I'm saying? it's very huge in our culture, and I feel like get togethers are very common and help you feel close, especially for times like this, or times where people pass away, I think it's something big. So, I think that's been very affected by the pandemic. (Participant 1, California)

"I guess I've been able to find myself more. I know what I like to do. I like being alone now." – (Participant 27California)

Overall, Participants recognized how much connection had shaped their identities and as they were undergoing this social adjustment. They were experiencing high levels of concern regarding the safety of those who were most vulnerable in their communities and were also learning to manage emotions associated with spending more time on their own.

Altering Expectations. Participants shared that prior to the pandemic they had a range of expectations about themselves and their future opportunities. This included exploration of their identities as young adults, living in new places, taking on different jobs, and engaging in romantic relationships. They reflected that the pandemic had limited their ability to seek out different opportunities in their youth and diminished their independence.

> I guess I have these expectations of myself because I'm a certain age and I feel like oh, I should have done this by now, you know, I'm this old and I want to move out, but I can't because I'm not working full time and everything's just changing.
> (Participant 10, California)

Another participant in the study shared specifically about the challenges of engaging in romantic relationships as a young person during the pandemic. The participant stated:

> At this point, I feel like it's almost nearly impossible to form a romantic relationship with anyone, so I mean, that was something before the pandemic that I was looking for but once the pandemic hit, like, all right, not a priority, and I definitely focus more on relationships with family and friendships. (Participant 6, Florida)

It appeared that participants were learning to alter their expectations about what it meant to be in the developmental stage of emerging adulthood as there was great economic devastation and uncertainty about prospects. They were finding ways to remain hopeful and

were coming to a place of acceptance about how the pandemic had limited possibilities and was altering their options for exploration.

Personal Growth. With regards to personal growth, participants reported how reexamining aspects of themselves and their culture during the pandemic had led them to notice how they had flourished. They discussed that seeing the toll that the pandemic had in the lives of so many had challenged them to mature and appreciate the little things in life, to notice their personal strengths, to evaluate their relationships, and identify new goals and ways of supporting their community. A participant shared the following:

> I learned to appreciate life more, I learned to appreciate the little things like time spent with family, like some or maybe even even simpler than that. Could be the taste of food of certain foods or learn to appreciate or get excited about little things like buying a Star Wars shirt, or like the silliest things, because our life is happening right now in our surroundings, and we don't know what's going to happen tomorrow. What happened yesterday already happened. So, I think that the pandemic taught me also to appreciate life more and everything in general, to be more grateful. (Participant 31, Florida)

Furthermore, a participant reflected in depth on their process of adaptation and becoming more flexible given the COVID-19 pandemic.

> I think for me, it kind of plays in like that, that phrase people saying you need like to learn to dance in the rain, I think it's a pretty good example of that, where we're faced with situations where we don't know what might be coming, but we kind of have to adapt to these things and keep our minds on our end goal, be kind of flexible on the details of the way we'll get there. For a lot of us, we thought straight out from college

we might get into the job that we wanted, or research opportunities, or whatever other things people might be pursuing and that kind of has changed for a lot of us. So, I think my expectations of life has changed in the sense that it is teaching me to be a little bit more flexible about how I see the future and how I can go about it. (Participant 7, Florida)

Summary of Adaptation Process. Generally, the focus group discussions revealed that these Latinx emerging adults were highly reflective about their adjustment during the pandemic, which in turn contributed to how they negotiated their identities, roles, and cultural values. Despite the pandemic impacting their psychosocial functioning and creating uncertainty, it had also served as an opportunity for them to consider the power of social connection and to develop a deeper understanding about their responsibility to protect those who were most vulnerable. Furthermore, they were observing their own growth, becoming more psychologically flexible, and readjusting certain expectations of their trajectory and life stage.

CHAPTER IV

Discussion

The COVID-19 pandemic has disproportionately affected communities of color in the US and has exposed racial disparities and injustices that significantly influence the physical and emotional wellbeing of Latinx (Garcini et al., 2021). The pandemic has been financially devastating for many Latinx families and combined with anti-immigration legislation the pandemic has led to a heightened sense of threat for those who are undocumented (Fitzpatrick et al., 2020). Additionally, it has also elevated anxiety and depression symptoms for this group (Fitzpatrick et al., 2020). Despite Latinx emerging adults exhibiting resilience, the pandemic has increased their uncertainty about their future and hindered their access to community resources (Alegría, 2020). Considering this, it is imperative to clarify which factors have influenced their adjustment and psychosocial functioning. The current qualitative study explored the psychosocial functioning of Latinx emerging adults during the pandemic and how they were negotiating their roles, identity, and values. The aim was to inform on potential risk and protective factors for this group that could elucidate on their disaster adjustment and long-term mental health outcomes.

Mental Health Experiences

Overall, the study findings serve to alert the public's attention about Latinx emerging adults experiencing compounding challenges in the pandemic that contributed to them experiencing a range of psychological distress (e.g., anxiety, depression, helplessness, somatization). The high levels of psychological distress reported in this sample reflect emerging research showing that overall, young adults have experienced an alarming increase in adverse mental health outcomes and suicidality during the COVID-19 pandemic (Conrad

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et al., 2021, Liu et al., 2020). For example, the Center for Disease Control survey data collected during the summer of 2020 showed that those between the ages 18–24 had higher rates of anxiety, depression, trauma, and suicidality than any other age cohort (Czeisler et al., 2020). In terms of Latinx emerging adults, studies have found that this population has experienced clinical levels of mental health symptoms during the pandemic (Villatoro et al., 2022; Goodman et al., 2020). Notably, high levels of distress have been reported for Latinx emerging adults that are undocumented immigrants who entered the US as minors and Latinx emerging adults that are US citizens with undocumented parents (Enriquez et al., 2021; Goodman et al., 2020). Despite not asking about the documentation status of participants or family members, results from this study showed that participants were highly distressed and psychologically affected during the pandemic. Importantly, the distress they experienced impacted their academic performance and careers, presented challenges to their family lives, influenced their socialization, and shifted their perspective of the future.

Mental health stigma was a topic of importance to these Latinx emerging adults as it made it challenging for them to communicate openly about their mental health during the pandemic. Prior research has shown that older generations of Latinx may report higher rates of shame and embarrassment about having a mental illness than non-Latinx Whites, thus limiting their help-seeking for mental health problems (Jimenez et al., 2013). Additionally, Latinx parents and their children are less likely to agree about the severity of mental health problems, with findings suggesting that Latinx parents may only observe distress associated with more severe symptoms (Roberts et al., 2005). Furthermore, stigma may serve as a barrier to obtaining services for Latinx children significantly more than non-Latinx white parents (Chavira et al., 2017). Given the prevalence of psychological distress among the

sample and reports of perceived mental health stigma, study findings highlight the need to improve the mental health literacy of family members as this may influence the way in which they can support the mental health of Latinx emerging adults. Although participants in the study noted the impact of mental health stigma, findings indicate that in the context of the pandemic, they prioritized their self-care to enhance their wellbeing and used a variety of coping strategies. Hence, although perceived stigma from family may affect an individual's ability to communicate about distress, it may not influence their willingness to seek mental health services or to utilize informal coping strategies to address symptoms or adjust to the pandemic.

Navigating Family Factors

Overall, participants reported that family dynamics had contributed to their stress during the pandemic. This stress was driven by the fear of having family members contract COVID-19 due to their work context or through close contact with relatives. Participants also reported feeling overwhelmed trying to obtain pandemic relief resources for family and encountering additional responsibilities at home. Research has extensively documented that Latinx culture tends to endorse *familismo*, which encompasses both value endorsement (i.e., attitudinal familism) and enactment of behaviors (i.e., behavioral familism (Stein et al., 2019). Hence, *familismo* may translate into behaviors such as the provision of support to family members and taking on a variety of family responsibilities (Stein et al., 2019). Study results showed that *familismo* as a value played an important role in the mental health of participants during the pandemic and promoted additional worry for the participants as they navigated additional family responsibilities. For these Latinx emerging adults, the pandemic brought about unique challenges regarding protecting and advocating for family.

Spending quality time with parents and relatives also appeared to serve as a protective factor in decreasing isolation and promoting a sense of social support for participants. In several studies, perceived support has been consistently positively associated with better postdisaster adjustment among adults and children (Bonanno et al, 2005; Kaniasty, 2020). Notably, several studies have specifically linked perceived social support with a resilient mental health outcome after a disaster (Bonanno et al., 2008). In this study, it appeared that many participants felt supported and cared for, yet there were also areas, particularly with regards to speaking about their emotions or mental health during the pandemic, where participants felt less supported by their families. Accordingly, it is important to note, when taking into account the experiences of this population, that family factors may create additional distress, while at the same time enhance perceptions of social support.

Pandemic-Related Communication

Latinx emerging adults were found to be psychologically affected by pandemic-related media exposure. Specifically, participants shared feeling overwhelmed due to being trusted informants to their families and having the responsibility of passing along COVID-19 safety information to parents and relatives who they felt may not be able to obtain up-to-date or trustworthy pandemic-related information in Spanish. Aligned with these findings, a study with Latinx from Laredo, Texas, found that children often serve as information brokers for parents and relatives participating as opinion leaders (Soto-Vásquez et al., 2021). Overall, these findings shed light on the role that Latinx youth play in keeping their families informed about public health safety protocols. The findings also highlight the need for accurate reporting of science in media and provides insight regarding the quality of public health content that Latinx in the US may encounter in a disaster context.

Participants were psychologically impacted by exposure to pandemic-related news via multiple outlets (e.g., television, social media, live footage, and internet blogs). They reflected on how they felt conflicted about wanting to stay informed regarding updates associated with the COVID-19 pandemic and the evolving political events while also recognizing that media exposure was leading to distress. Prior research has shown that repeated media exposure to community crises may impact physical and psychological health (Pfefferbaum et al., 2020; Silver et al., 2021). In addition, social learning theory suggests that viewing the experiences of others through media is involved in the acquisition of fear (Bandura, 2001). Supporting the study findings, a study conducted with adults found that increased time spent on social media and consulting a greater number of traditional media sources to learn about COVID-19 was associated with increased distress (Riehm et al., 2020). With the intense media coverage of tragedies and disasters, it is essential to further understand the mechanisms by which youth cope with this media content.

Career and Academic Disruptions

Latinx emerging adults' academic and professional paths were disrupted by the pandemic. Specifically, the study found that remote learning and working transitions and loss of face-to-face encounters negatively impacted the ability of participants to cope with academic and work demands. Some of the aspects that made the pivot to virtual learning and working most challenging for participants involved having limited space in the home to focus on online learning, time demands, and working as well as lacking social interactions with peers and colleagues. These findings are well supported by multiple reports that have addressed concerns regarding the remote learning transition, technology barriers, and perceived lack of university support during the COVID-19 pandemic (Halliburton et al.,

2021; Hasan, N., & Bao, 2020; Cortés-García et al., 2021). Notably, the results from this study indicate that Latinx emerging adults may need additional support with academics and job transitions due to some of the barriers and difficulties that they experienced adjusting to virtual formats and working more independently during the initial stages of the pandemic. Additionally, the study highlights that Latinx emerging adults who are first-generation students may need extra academic support and mentorship. The pandemic has shifted learning environments and therefore developing sustainable interventions to support first-generation students could reduce barriers in academic settings and promote their academic success.

Participants were concerned about their career prospects and economic stability resulting from the recession brought about by the pandemic. These findings are consistent with a study that analyzed data on young adults from a cross-sectional Household Pulse Survey conducted by the US. Census Bureau and found that that more than half of participants experienced direct or household employment loss since the start of the pandemic (Ganson et al., 2020). That study also found a strong association between employment loss and expected employment loss and symptoms of mental health distress (Ganson et al., 2020). Based on findings from this study, it is likely that Latinx emerging adults are feeling less optimistic about having certain life-stage opportunities and feel economically vulnerable due to high levels of unemployment. Therefore, it may be crucial to expand job opportunities and unemployment benefits to support young workers who have yet to launch their careers (Landfield et al., 2021). This finding also has implications for the conceptualization of emerging adulthood as a developmental stage marked by a sense of possibilities and

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exploration as this may be shifting or less available for Latinx and other marginalized young people with less socioeconomic resources during the pandemic.

Systemic and Environmental Factors

The study showed that participants were adversely affected by systemic racism, persistent poverty, and health disparities associated with COVID-19. The mental and physical health impact of exposure to social inequities has been well documented for people of color (Alegría et al., 2008; Shi et al.,2020). The findings of the study provide insight into the social, political, economic, and environmental stresses faced by the Latinx community, as well as how disparities and injustices have been magnified by the COVID-19 pandemic. Several participants reported experiencing first-hand a lack of resource access for themselves and their families, including the inability to obtain COVID-19 testing and health care, which led to additional burden and distress. This finding is consistent with a recent qualitative study found that Latinx college students reported suffering from disillusionment with the nation's leadership and were worried about the future as a result of social injustices during the pandemic (Morgan & Zetzer, 2022).

Overall, findings from the study demonstrate the significant impact that systemic, social determinants of health, and racism have with respect to impacting the wellbeing of Latinx emerging adults during the pandemic. The findings support the critical need to implement additional resources for communities of color and to prioritize the mental health of Latinx emerging adults. In addition, the results demonstrate the need to address inequities across sectors by improving stable housing, unemployment benefits, food security, healthcare, and mental health services.

Adaptation Process

A key finding from the study was that Latinx emerging adults described adjusting their expectations about socializing due to the COVID-19 pandemic and felt a greater sense of appreciation for social gatherings in the Latinx culture. In addition, study results revealed that participants were finding ways to come to terms with the fact that the pandemic had shifted different developmental stage opportunities. These results align with a study conducted with emerging adults in a southeastern university that found that participants reported significant distress about missing important milestones or having virtual substitutes for important events (Halliburton et al., 2021). The study argued that COVID-related alterations to events likely increased the sense of feeling in-between, which was likely similar for participants in this study. Overall, this study showed that these Latinx emerging adults were working to adjust their expectations about the future and were concerned about their ability to become independent.

As a result of experiencing uncertainty and challenges due to the pandemic, the participants reported an increased sense of personal growth. Prior research has shown that uncertainty is associated with psychological distress in a disaster context (Afifi et al., 2012). However, reliance on communal coping may buffer the negative effect of uncertainty for those evacuated (Afifi et al., 2012). In addition, studies that have examined growth in the context of COVID-19 have found that individuals with high levels of pandemic-related stress experienced moderate to high levels of COVID-related growth on various items of the Posttraumatic Growth Index (Chen et al., 2021; Asmundson et al., 2021). Nonetheless, as COVID-19 related study confirmed, research in personal growth must be considered with caution as there is evidence of personal growth being illusory (i.e., characterized by avoidant

or defensive coping that results from high levels of distress) versus being real growth in the context of the pandemic (Asmundson et al., 2021). Therefore, reports of personal growth, such as in the case of participants in this study, may reflect ineffective coping if accompanied by worsening mental health and may not necessarily be actual personal growth. Future researchers examining personal growth or posttraumatic growth in the context of the COVID-19 pandemic should account for illusory growth and should triangulate reports of growth from other respondents, such as family members.

Considerations Regarding the Theoretical Framework

There are several considerations associated with this theoretical framework that emerged. First, the study did not intend to generalize participants' experiences but rather to understand from their perspective and lay a foundation for future research on this topic (Charmaz, 2014). The framework illustrates the complexity associated with Latinx psychosocial functioning without simplifying their pandemic experiences. In addition, it emphasizes the idea that Latinx emerging adults are interacting with their environment dynamically, which serves to inform how they have adapted based on their mental health experiences, social relationships, and resources. Furthermore, the model is helpful in considering the types of adversity that may impact the development of a Latinx emerging adult and considering areas where they may need additional support in a disaster context.

The framework provides a wider range of variables that may mediate or moderate psychosocial outcomes for this population. Furthermore, it highlights factors driving psychosocial functioning can inform policy and practice as it acknowledges the complexity associated with the pandemic-related experiences of Latinx emerging adults. For example, it highlights that the pandemic has limited access to resources such as mental health services

for this population and therefore policies that promote high quality insurance coverage and the expansion of Medicaid may promote the psychological wellbeing of this population. In addition, it points to how the transmission of COVID-19 was a source of distress for this population, therefore public health policies that focus on keeping the population safe and provide culturally targeted public health information are critical to decreasing the burden that is often placed on youth.

In addition, the framework advocates for the integration of factors that have influenced psychosocial functioning and could be highly beneficial to examine in a clinical context to promote adjustment. For example, interventions that target the impact associated with navigating family dynamics or provide psychoeducation regarding pandemic-related communication may have the capacity to promote wellbeing. Evidence-based, family-focused interventions such as brief strategic family therapy has been shown to be useful in enhancing family interactions for Latinx youth and could be utilized in this context (Santisteban et al., 2003). Furthermore, psychoeducation on the impact of media-related stress could be helpful in providing valuable information regarding the role of media exposure on mental health (Looi et al, 2021). Additionally, it calls attention to the importance of interdisciplinary collaborations and partnerships between families, community organizations, and universities to better support the adjustment of Latinx emerging adults during and after the COVID-19 pandemic.

Strengths and Limitations of the Study

This study has several strengths. Notably, the study makes a significant contribution to the literature as it utilized qualitative methodology to examine the psychological impact of the COVID-19 pandemic on Latinx emerging adults. This was useful as it provided nuance

regarding the perceptions of the pandemic from participants, it generated new insight about cultural factors that may mediate disaster adjustment and psychosocial functioning for this population experiencing barriers to pandemic-related resources, heightened responsibilities, and having to relay disaster information. Another important strength is that the study examined Latinx young adults residing in distinct regions of the US with varied political climates and varying COVID-19 protocols. Findings showed similarities with regards to their psychosocial functioning and the differences that were noted were primarily associated with how often specific themes were discussed between regions. The study integrated the experiences of Latinx young adults with diverse descents, varied levels of education and socioeconomic status. One of the benefits of conducting a focus group study was that it allowed for a rich discussion and for participants to recall information that they may not have shared or remembered if they had participated in individual interviews. Another strength is that through rich descriptions of the participant's experiences, it was possible to obtain information that could be beneficial in promoting the wellbeing of this population, such as recommendations to implement stress management groups, additional resources for immigrant parents, and academic support. Furthermore, undergraduate research team members of a similar background to participants were involved in the data collection and analysis process which allowed for varied perspectives in the codification process. This mitigated the influence of individual biases and enhanced the interpretation of the data.

The study is not without limitations that should be taken into consideration. As a result of the focus group online format, it is possible that some participants may have felt uncomfortable discussing information with the group and may have had privacy constraints in their homes. In addition, it should be noted that some participants were more talkative than

others, and as a result, some of them may not have shared in depth about their personal experiences. In addition, the study did not inquire specifically about how participants arrived at their identity status or what it meant for them to be Latinx. It is possible that the category of Latinx may not fit a participant as well, and there may have different levels of acculturation that were not captured in the study. Future research should include questions/measures that can better capture identity aspects and acculturation levels among emerging adults. It's also possible that the mental health experiences recalled by participants could have been different had the study taken place during the early stages of the pandemic when lockdowns were in effect and less information was available about COVID-19.

Notably, my in-group status as a Colombian immigrant could have served to be both a strength as well as a limitation. Having familiarity with some cultural themes discussed in the focus groups allowed me to connect with participants and to promote their sense of comfort as they participated in the study. However, it is possible that participants may have made certain assumptions about my understanding of their experiences which they may not have chosen to explain during the focus groups. Keeping this in mind, I worked to reflect on my own identity and background throughout the data collection and analysis process. Importantly, the study results are not intended to be generalizable since this is a qualitative, exploratory study that conducted with a small sample size. Therefore, more research utilizing multi-method approaches with a larger sample would further enhance understanding of the impact of COVID-19 pandemic on this population. Despite these limitations, the study adds important information about the mental health experiences and the adjustment process of Latinx emerging adults. This is valuable as it provides a deeper level of understanding of pandemic-related factors influencing distress, their social resources, and areas for

consideration for protecting the mental health of this population. Notably, the results clarify the various areas where young adults may need additional support and underlines protective factors.

Implications for Clinical Practice and Research

It is imperative that clinicians, counselors, and education professionals, as well as family members, recognize the various domains and systems which have psychologically impacted Latinx emerging adults during the COVID-19 pandemic. It is critical to acknowledge the distress impacting the mental health of Latinx communities during the COVID-19 pandemic (Garcini et al., 2021). Mental health providers and those working with Latinx emerging adults should consider the importance of social determinants of health (e.g., regional communities, economic stability, acculturation level, social resources) that can influence the experience of Latinx emerging adults and exacerbate stress for this population. Additionally, more culturally targeted COVID-19 messaging in Spanish may reduce the burden placed on Latinx emerging adults to serve as information brokers. For example, having Spanish translation of COVID-19 press conferences by government leaders, as was done in the city of Los Angeles, could be useful with regards to reducing pandemic-related misinformation. Furthermore, increasing access to free and/or low-cost mental health services that are developmentally, culturally, and collectivistically grounded would address inequities in access for this group. More funding should also be allocated to reduce barriers to treatment by expanding telehealth and hiring therapists that speak Spanish and are from a Latinx background. In addition, based on participants' suggestions, a group therapy format with other Latinx emerging adults could be helpful to address cultural themes, to promote identity exploration, and increase perceived social support.

The study also highlighted the importance of family relationships for Latinx. Hence, if some of the stressors affecting Latinx families during the pandemic are reduced (i.e., limited caregiving, barriers to health care, and increased targeted public health information in Spanish), then it is likely that the mental health of Latinx will also be improved (Garcini et al., 2021). It is also important for mental health providers to address the psychological impact that social injustices have had on them during the pandemic and to promote sources of strength and meaning (Morgan & Zetzer, 2022).

Based on the findings of the study, university staff should implement interventions to enhance the well-being of first generation Latinx students who are either returning to college campuses or completing degrees remotely. Universities can work with administrators, faculty, and staff to adjust evaluation systems, promote flexibility in workload expectations, and provide alternative pathways to promoting career goals (Wolff et al., 2020). In addition, universities should offer additional opportunities for first generation students to engage in campus activities, build social support with peers, and obtain career-related mentorship.

Universities can also collaborate with service offices to connect Latinx emerging adults to community/campus resources that promote instrumental support such as housing, food security, and financial aid. Also, federal and state government agencies should consider student loan forgiveness, providing tax credits to universities that lower tuition, providing more scholarships for underserved students, and promoting more career launch programs (Wolff et al., 2020). Lastly, future research is needed to continue to inform on the mental health of Latinx emerging adults in the long-term context of the COVID-19 and to identify areas to promote resilience and wellbeing as this population navigates the changing landscape and long-term impact of the COVID-19 pandemic.

Conclusion

      The present study utilized a constructivist grounded theory approach to explore the psychosocial functioning of Latinx emerging adults during the COVID-19 pandemic. The themes that emerged are valuable in clarifying aspects driving distress and contributing to the adjustment process of Latinx emerging adults. Taken together, study findings enhance the current growing base of literature looking at the psychosocial impact of Latinx emerging adults during the pandemic. These insights are important because providers, universities, and communities will need to know how to best assist Latinx emerging adults in their post-pandemic recovery, in the hopes of promoting their psychosocial and adjustment outcomes. The results can inform how universities and mental health efforts can take action to address the needs of Latinx emerging adults during and following the pandemic. My hope is that the current study is one step forward in continuing to improve our knowledge about factors driving distress for Latinx in the context of the COVID-19 pandemic and that the study findings provide insight regarding ways to increase mental health, academic and career prospects, and adjustment for this population.

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Appendix A

Recruitment Email Script Sent to Participants in Initial Focus Groups

To: Participants Consenting to Follow-Up Study

From: Natalia Jaramillo, MA

Subject: Research Invitation: Focus Group – Latinx Emerging Adults During COVID-19

Hello,

I hope that you are staying safe during the COVID-19 pandemic. In the past you participated in the study *College Life After Natural Disaster Study* and indicated that you would be willing to participate in follow-up research. I am a researcher at the University of California, Santa Barbara, being supervised by Dr. Erika Felix, Ph.D. and I am conducting a dissertation study to examine the experiences of Latinx emerging adults (18-29) during the COVID-19 pandemic.

I am reaching out to invite you to participate in a focus-group interview with other Latinx college/graduate students and young adults. The purpose of this study is to learn more about how this pandemic is specifically impacting Latinx emerging adults. If you identify as Latinx, are between the ages of 18-29, and would like to participate in a 15-minute phone briefing and 1- 1.5 hour online focus group (small discussion with other participants), please contact the researcher.

Natalia Jaramillo, M.A.
Doctoral Candidate
Counseling, Clinical, and School Psychology
njaramillo@ucsb.edu

Appendix B

Recruitment Flyer

Appendix C

Consent Form

Hello,

We hope that you are staying safe during the COVID-19 pandemic. We are requesting your participation in research to better understand the experiences and unique stressors of Latinx young adults during this pandemic. We would like to invite you to participate in a study to understand about how you have been impacted during this time. This study focuses on the psychological impact of the COVID-19 pandemic and the process of adaptation for Latinx young adults.

We anticipate that results from this study can help us to understand the experiences and adjustment process of Latinx young adults during the COVID-19 pandemic. Importantly, this study can also help inform university and mental health response efforts in how to best support and tailor programs for Latinx emerging adults, like yourself.

Below is the informed consent information. Please indicate if you choose to participate or not at the end of this page and email me if you have any questions. You can decline to participate at any point.

Participating in this study would involve completing a phone briefing where you will be asked to share some demographic questions and participating in a focus group (90-120 minutes) with other Latinx emerging adults where you will be prompted to share about your experiences during the COVID-19 pandemic.

PROCEDURES: You will be asked to participate in an online focus group interview on the platform Zoom with other young adults and will be asked to complete some demographic questions. Your participation will last approximately 90-120 minutes. The focus group interview will be led by Natalia Jaramillo and will be audio recorded to ensure accuracy of the information and for the purpose of transcribing answers for data analysis. Topics covered during the focus group include how you have been doing since the pandemic started and how you have been impacted.

The participation will be in the following phases:

    1. INITIAL PARTICIPANT PHONE BRIEFING. After you sign the consent form, I will schedule a brief phone call to tell you about the study procedures of the study. You can ask questions at this time. During the phone briefing you will be asked some demographics questions. This session will take approximately 10-15 minutes.

    2. FOCUS GROUP AND SURVEY COMPLETION. If you agree to participate, we will then schedule you into a focus group. The focus group session will range from 5-12 participants. The focus group will be recorded.

3.   POTENTIAL RISKS: There are minimal risks associated with participating in this study. However, some questions may be of a sensitive nature and may be upsetting to you, including questions about the direct impact of COVID-19; therefore, you may experience some emotions when thinking of these things. Additionally, you may feel upset by a comment that another participant could make. If you become distressed by the questions during the focus group, you may stop at any time. After completing the study, ALL participants are given information about helpful resources related to mental health.

CONFIDENTIALITY: Please be advised that although the researchers will take every precaution to maintain confidentiality of the data, the nature of focus groups prevents the researchers from guaranteeing confidentiality. For this study, absolute confidentiality cannot be guaranteed, since research documents are not protected from subpoena. Additionally, under the terms and conditions of Zoom, the company may have access to any audio or video recorded. Participants will be asked to use first names only during the focus group discussion. The researcher will remind participants to respect the privacy of your fellow participants and not repeat what is said in the focus group to others. When the focus group interviews are transcribed, we will replace first names with a random participant ID. Write-ups of study findings will not include any identifying information. Additionally, audio recordings of the focus groups will be kept on a password-protected computer and after completion of the study the focus group recording is typed it will be destroyed.

POTENTIAL BENEFITS: There is no direct benefit to you as a result of your participation in this study. This study will help us understand how the COVID-19 pandemic may be impacting the well-being and functioning of Latinx young adult university students over time. This can help us understand the unique issues and cultural factors that Latinx young adults may face when dealing with this pandemic and help us understand how to support other Latinx young adults in the aftermath.

PAYMENT
There will be no direct payment to you as a participant in the study. However, we appreciate your participation.

RIGHT TO REFUSE OR WITHDRAW: Your participation is entirely voluntary. Your refusal to participate in this study will involve no penalty or loss of benefits to which you are otherwise entitled and will not affect your relationship with your university. In addition, you may stop or withdraw participation at any time. If you do not want to be contacted about future surveys, you can email Natalia Jaramillo, and we will remove your email address.

QUESTIONS: If you have any questions about this research project or if you think you may have had a problem as a result of your participation, please contact Natalia Jaramillo, M.A., njaramillo@ucsb.edu

If you have any questions regarding your rights and participation as a research participant, please contact the Human Subjects Committee at (805) 893-3807, orhsc@research.ucsb.edu. Or write to the University of California, Human Subjects Committee, Office of Research,

Santa Barbara, CA 93106-2050.

By participating in this research, you are verifying that you are 18 years of age or older.

PARTICIPATION IN RESEARCH IS VOLUNTARY. BY CLICKING "I AGREE TO PARTICIPATE" BELOW YOU INDICATE THAT YOU HAVE DECIDED TO PARTICIPATE AS A RESEARCH PARTICIPANT IN THE STUDY.

I AGREE TO PARTICIPATE.

I <u>DO NOT</u> AGREE TO PARTICIPATE.

Participant Demographic Table

Table includes participant pseudonym, sex, age, job status, country of origin, generation

status and focus group of the participant.

Table D5

Demographic Information of Each Study Participants (N=31)

Participant number	Sex (male or female)	Age	Job/Student	Descent	Generation Status	FG#
Participant 1	F	23	Career Counselor/Grad student	Mexico	2nd generation	1/CA
Participant 2	F	24	Works in school as a teacher	Mexico	2nd generation	1/CA
Participant 3	F	20	3rd year/ Research Assistant	Mexico	2nd generation	1/CA
Participant 4	F	24	Engineering	Mexico	2nd generation	1/CA
Participant 5	F	28	Grad student/ university RA	Ecuador	2nd generation	2/FL
Participant 6	F	23	4th year/ music therapy/	Mexico/Cuba	2nd generation	2/FL
Participant 7	M	21	3rd year	Colombia	1st generation	2/FL
Participant 8	M	21	3rd year/ Administrator Assistant	Cuba/Honduras	2nd generation	2/FL
Participant 9	F	22	3rd year	El Salvador/Mexico	2nd generation	3/CA
Participant 10	F	25	4th year/ helps children with disabilities	Mexico	2nd generation	3/CA
Participant 11	F	22	4th year/ABA therapist	Mexico	2nd generation	3/CA
Participant 12	F	23	4th year/waitress	Mexico	2nd generation	3/CA

Participant 13	M	24	4th year/ Target	Mexico	3rd generation	3/CA
Participant 14	F	23	4th year/ Respite Worker	Mexico	2nd generation	3/CA
Participant 15	F	21	3rd year	Mexico	2nd generation	3/CA
Participant number	**Sex (male or female)**	**Age**	**Job/Student**	**Descent**	**Generation Status**	**FG#**
Participant 16	F	21	4th year/ Bank worker	Mexico	2nd generation	4/FL
Participant 17	M	21	2nd year	Cuban	2nd generation	4/FL
Participant 18	F	29	Registered mental health professional	Puerto Rico	2nd generation	4/FL
Participant 19	F	28	Outpatient mental health	El Salvador/Black	2nd generation	4/FL
Participant 20	F	28	Community Education Coordinator	Mexico	2nd generation	5/CA
Participant 21	F	24	After school program coordinator	Mexico	2nd generation	5/CA
Participant 22	F	23	Program consultant, working with undocumented student services	Mexico	1st generation	5/CA
Participant 23	F	19	2nd year/Assistant	El Salvador	2nd generation	5/CA
Participant 24	F	26	Grad student/ Graduate Peer Educator with Suicide Prevention Program	Mexico	2nd generation	6/CA
Participant 25	M	24	2nd year/ Activity monitor and tutor	Mexico	2nd generation	6/CA
Participant 26	F	21	4th year	Mexico	2nd generation	6/CA

Participant 27	F	18	1st year	Mexico	2nd generation	6/CA
Participant 28	F	21	4th year/ Interdisciplinary Humanities Center	Mexico	2nd generation	6/CA
Participant 29	F	26	Research Coordinator	Cuban	2nd generation	7/FL
Participant 30	F	26	Grad student/ IT Analyst	Colombia	1st generation	7/FL
Participant 31	F	24	Mental Health Therapist	Cuban	2nd generation	7/FL

Appendix E

Demographic Questionnaire

Researcher will ask these questions to the participant over the phone during the phone briefing.

1. Do you identify as:

   Mexican, Mexican American, Chicanx

   Puerto Rican

   Cuban

   Other group (Ex: Colombian, Dominican, Nicaraguan) _____

2. What is your birth sex?

   Female

   Male

3. What is your gender identity?

   Woman

   Man

   Transgender

   Non-binary

   Other_____

4. What is your primary language?

   English

   Spanish

   Bilingual

   Other _____

5. Are you currently enrolled as a student?

   Yes

   No

6. What year are you in college/university?

   Freshman

   Sophomore

   Junior

   Senior

   Graduate Student

   N/A. I graduated.

7. If studying what is your major?_____

8. Are you currently working? _____

9. If working, what is your occupation? _____

10. Are you an essential worker?

   Yes

   No

   Other_____

11. Are any of your family members essential workers?

   Yes

   No

   Other_____

12. What is your generational status in the United States?

   1st generation (not born in the United States)

2nd generation (born in the United States, parents born in another country)

3rd generation (you and your parents were born in the United States)

4th generation (you and your parents were born in the United States, one of your

grandparents was born in another country)

5th generation (you, your parents, and your grandparents were born in the United

States)

13. What is your yearly household oncome?

Less than $20,000
$20,000 to $34,999
$35,000 to $49,999
$50,000 to $74,999
$75,000 to $99,999
Over $100,000

14. In what type of community do you live?
Suburban community
Rural community
City or urban community
Other_____

15. Do you live in a multigenerational home?

Yes

No

Other_____

16. Have you tested positive for COVID?

Yes

No

Other_____

17. Has someone close to you contracted COVID-19?

Yes

No

Other_____

18. Do you have members of your family/friend group that you consider to be at greater

risk of contracting COVID-19 (e.g., having a health condition, being immune-

compromised, being an essential service or health care

worker, etc.)?

Yes

No

Other_____

19.Do you currently live with individuals that you consider to be at greater risk of

contracting COVID-19 (e.g., having a health condition, being immune-compromised,

being an essential service or health care worker, etc.)?

Yes

No

Other_____

Appendix F

Focus Group Protocol

Thank you for agreeing to participate in this focus group. We will be spending approximately 1.5-2 hours together. the purpose of this focus group is to learn about how Latinx young adults like yourself have been impacted during the COVID-19 pandemic. TheCOVID-19 pandemic has disproportionally impacted the Latinx population in the US and disrupted many aspects of daily life. Therefore, I am interested to learn about your unique experiences as Latinx young adults. During the focus group I will be asking you all some questions to learn about your experiences. Please be as open as possible in responding. All responses are valid and appreciated. Our goal is to learn from you. Do you have any questions for me? Okay, I will now be turning on the recording, let's begin.

1. How has COVID-19 impacted your life? How is this unique to being a Latinx young adult?

2. How does being Latinx impact your adjustment during COVID-19?

3. How have you dealt or coped during this time?

4. As a Latinx young adult what are the most challenging aspects you are facing during pandemic?

5. Has your mental health been impacted as a result of the pandemic?

6. How have your expectations about life or your future changed?

7. How has the pandemic affected your educational or career goals?

8. How have your relationships changed as a result of the pandemic?

9. What are your responsibilities with family like during the pandemic and how is this similar or different?

10. Has your family experienced any challenges related to resources as a result of the pandemic? Such as food security or with regards to healthcare?

11. As a Latinx young adult what would be helpful to support your wellbeing?

12. Are there any other experiences you would like to share?