

THESIS

INTRODUCING A CRITICAL APPROACH TO STUDIES OF UNCERTAINTY:  
ENGAGING UNCERTAINTY WITH HISPANIC ADULTS IN COLORADO DURING THE  
COVID-19 HEALTH CRISIS

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## ABSTRACT

### INTRODUCING A CRITICAL APPROACH TO STUDIES OF UNCERTAINTY: ENGAGING UNCERTAINTY WITH HISPANIC ADULTS IN COLORADO DURING THE COVID-19 HEALTH CRISIS

Existing scholarship on the communicative experience of uncertainty revolves primarily around understanding intrapersonal and interpersonal processes for engaging with uncertainty. After its beginning with Berger and Calabrese's (1975) work on Uncertainty Reduction Theory, multiple advances in conceptualizing how the study of uncertainty is approached have been theoretically developed such as that of Babrow's (2001) development of Problematic Integration theory and Afifi and Weiner's (2004) introduction of the Theory for Motivated Information Management. These theories primarily look inward at how individuals process information at an intrapersonal level when deciding whether and how to engage uncertainty in their lives. In sum, existing theories of uncertainty are adept at exploring how uncertainty is processed; however, they offer very few insights into the factors that determine what kinds and how uncertainty comes to be experienced by particular individuals. This thesis aims to expand our understanding of the experience of uncertainty by shifting our attention into the sociocultural sphere, specifically looking into how introducing the critical/cultural concepts of *culture*, *subjectivity*, and *power* into studies of uncertainty has the potential of enhancing awareness of the multilayered and interconnected nature of uncertainty.

This research engages the study of uncertainty and health communication through the lens of the Hispanic community in Morgan County, CO, to answer the research question: *What*

*uncertainties have Hispanic adults in Morgan County encountered during the COVID-19 health crisis and how have these uncertainties been communicatively engaged by this specific community?* Using a mixed methods approach through an online survey and virtual focus groups, I adopt a critical perspective to interpersonal communication in the study of uncertainty as a needed step in arriving at more holistic understandings of its experience. In collecting survey data, I utilized two scales: Diener et al. (2010) Scale of Positive and Negative Experiences, and Grimmelikhuijsen and Knies (2017) scale for Citizen Trust in Government Organizations. I used these instruments alongside a set of qualitative prompts that served the purpose of gaining general insights about the overall perspectives of the Hispanic community in Morgan County regarding the COVID-19 health crisis. Focus group discussions involved collecting more detailed data about participant experiences throughout the duration of the COVID-19 health crisis.

A thematic analysis of the data collected was conducted through the application of the hermeneutic circle as presented by Dibley et al. (2020) complemented by Tracy's (2018) phronetic approach to data analysis. Both of these approaches prioritize engaging with data in deep and structured manners that allow for the research question to guide analysis. Five themes emerged from the data analysis: 1) uncertainty about employment and financial stability, 2) fear of infection based on sociocultural factors, 3) disagreements about social behavioral expectations, 4) concern for children's well-being, and 5) acceptance of risk of infection in uncertainty management strategies. Each of these themes carry with them sociocultural factors outside of the individual that can only begin to be understood through a critical perspective on uncertainty that pays specific attention to how *culture*, *subjectivity*, and *power* impact how Hispanic adults faced uncertainties emerging from the COVID-19 health crisis.

Results point not only to how individuals engage with uncertainty once they experience it, but also give insight into sociocultural sources of uncertainty that may be overlooked when utilizing existing theoretical approaches to uncertainty. They also show how Hispanic adults in Morgan County engaged diverse strategies for addressing uncertainty in a manner that resisted behavioral expectations set by public health guidelines in order to reduce intrapersonal, interpersonal, and sociocultural uncertainty related to the COVID-19 health crisis.

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To the community and leadership at OneMorgan County who welcomed me into their spaces and learn more about their experiences in Morgan County. Although every meeting and focus group was virtual, I really felt as though we were sitting and chatting at the kitchen table.

## DEDICATION

Dedico este proyecto a mis padres, que me han apoyado en todo momento cual difícil la situación, a mi hermana por la inspiración y el atrevimiento a pensar en grande, y a la comunidad de Morgan County por dejarme ser parte de un pedacito de sus vidas.

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## CHAPTER ONE: INTRODUCTION

As of September 3, 2021, the United States Centers for Disease Control and Prevention (2021) reported an estimated 39.5 million cases of SARS-CoV-2, otherwise known as the virus responsible for the COVID-19 health crisis, in the United States alone. An estimated 640,000 of those COVID-19 cases resulted in death. Data describing the impact of the COVID-19 health crisis throughout the United States illustrates the deep disparities between the rates of death and infection among different racial and ethnic groups. In Colorado (CO), for example, whereas Hispanic residents currently constitute short of one fifth (18.7%) of the population (United States Census Bureau, 2021a), the rate of COVID-19 infections for Hispanic patients constitute one fourth (25.69%) of total cases reported as of September of 2021 (Colorado Department of Public Health and Environment, 2021). These rates have improved drastically from data collected nearly a year before in October of 2020, when Hispanic patients represented nearly 44% of all COVID-19 cases in the state (The COVID Tracking Project, 2020).

Hispanic residents make up around 36% of Morgan County's total population of roughly 29 thousand people (United States Census Bureau, 2021b), which doubles the 18.7% overall Hispanic population makeup in the state. Fort Morgan, the largest city in Morgan County comprising roughly 40 percent of the county's population (United States Census Bureau, 2019), houses a meat processing plant that became the site of a major COVID-19 outbreak resulting in 101 confirmed cases and six personnel deaths between April and May of 2020 (Paul, 2020; Colorado Department of Public Health and Environment, 2020). Data released by the Northeast Colorado Health Department, which encompasses the counties of Morgan, Logan, Sedgwick, Phillips, Washington, and Yuma estimates that around 23.7% of the 9,590 reported cases were Hispanic or Latinx patients (Northeast Colorado Health Department, 2021). Morgan County

accounts for a third (3,046) of the total cases within the district (Northeast Colorado Health Department, 2021b). Data from Morgan County is consistent with that of the larger health district, as 27.28% (831) of cases in the county have been confirmed to be Hispanic or Latinx patients. However, it is worth noting that this number is likely higher than reported, since almost 32% (971) of reported cases lack demographic data (P. Chandrashekar, September 15, 2021). This health communication project engages with the Hispanic community in Morgan County, CO, as a case study analyzing uncertainty brought upon the county's Hispanic population by the COVID-19 health crisis and the impact of that uncertainty on their lives.

In this study, I analyze how the COVID-19 health crisis has precipitated a variety of uncertainties for the Hispanic community in Morgan County, CO, paying particular attention to the causes of and strategies for engaging with multiple sources of these uncertainties. A number of complexities must be considered when engaging with health-related uncertainty in Hispanic communities within the United States. For example, Hispanic health care is impacted by sociocultural conditions such as perceived acculturation, economic and legal status, and literacy/proficiency in the English language in conjunction with the existing health status of the patient to name but a few (Elder et al., 2009, Jandorf et al., 2010; Wallace et al., 2010; Sentell & Braun, 2012). Each of these complexities brings with it a particular sense of uncertainty and related emotions that could arise from engaging in direct information-seeking behaviors: How much would care cost? What will happen when medical professionals learn of my legal situation? Can I accurately convey my situation to my doctor across languages? What will my diagnosis mean for me and my family? Layered on top of these sources of uncertainty is the individual communication event in which the patient is involved or preparing to engage with when speaking with care providers. Theories of uncertainty reviewed in this project point to a

number of intersecting factors that might influence the experience and processing of uncertainty by the Hispanic community, such as setting, tolerance, temporality, values, efficacy assessments, and information providers present in the communication event and engagement.

Uncertainty is multilayered and interconnected (Brashers, 2001); thus, meeting the needs of Hispanic patients ought not only to rely on engaging uncertainty pertaining to health status on an intrapersonal or interpersonal level alone, but also take sociocultural context and experiences into account. An example of how needs are *not* being met is the misconception that assigns low levels of perceived agency and self-efficacy to Hispanic patients in health care settings (Mayo et al., 2007). Patient misunderstanding, which itself is a result of preconceptions of who is permitted agency in the health care process, often leads to inadequate care and subsequent hesitance from patients when attending future medical appointments. Critical perspectives of Hispanic patients' experiences of uncertainty in United States health care also requires the recognition of the historical conditions that inform health care experiences. For example, public messages that equate Hispanic descent with immigration, and subsequently ascribe the act of immigration (particularly when framed as unauthorized immigration from the southern border) with impending biological and criminal danger for the United States, have the potential of producing burdensome conditions for anyone who may be perceived as being an immigrant while in public or private settings.

The relationship between unauthorized immigration and medical care is best described by Ruiz (2002):

First, the undocumented person, widely known as an "illegal alien," faces discrimination and exclusion from needed medical care. Second, all the people perceived to fit this

category are damned by a representational logic...that reduces them to threatening bodies who breach national borders (p. 38).

Undocumented immigrants are often targets of exclusion from federal and other public assistance programs in the United States. To give an example in the realm of health care: the Affordable Care Act of 2010, which had the purpose to expand access to health insurance, required individuals to prove their citizenship/lawful immigration status in the United States through their Social Security Number in order to apply for benefits (National Immigration Law Center, 2014). This effectively excluded undocumented immigrants from the potential benefits provided by the legislation.

The increase in attention given to bodies perceived as unauthorized has resulted in what Ruiz (2002) labels as the medicalization of borders and borderization of health care—turning health, health conditions, and health care services into tools for identifying and removing perceived dangers to national security. A clear example of how health has been used as a tool for immigration policy enforcement is a 1987 policy which came to be known as the Helms amendment. A revision to the 1986 Immigration Reform and Control Act, the Helms amendment required immigrants to produce a negative diagnosis for Human Immunodeficiency Virus (HIV) in order to be eligible to apply for adjustment of legal status (Fuerbringer, 1987; Fernandez, 1992; Ruiz, 2002). Policies aimed at policing perceived immigration violations such as California's now void proposition 187, which obligated health providers to report undocumented immigrants, and Arizona's SB 1070, known as the 'show me your papers' bill, have historically created hostile environments for anyone who looks as though they may be undocumented.

In this study, I have three primary objectives. First, I provide examples of communication theories used to explore uncertainty dating back to Berger & Calabrese's (1975) initial

developments on uncertainty reduction. Through review of communication theories used to study uncertainty to date, I argue that current theoretical frameworks about uncertainty present an incomplete picture of how uncertainties impact communication and relational processes due to their lack of deep consideration of context beyond intrapersonal and dyadic interpersonal communication foci. In doing so, I explain how each theory engages with uncertainty at mainly intrapersonal and interpersonal levels of communication with little to no attention to the contexts within which these communicative interactions occur beyond what may be deemed socially appropriate communicative behaviors among conversation partners. Second, I propose that our conceptualization of uncertainty and its experience can be expanded by considering context through critical analysis of the role of *culture*, *subjectivity*, and *power* in the sociocultural and geographical area in which the uncertainty is being experienced.

I introduce critical/cultural studies literature that offers generative knowledge related to these concepts to enrich and expand current and future theories for the study of uncertainty and offer innovative theoretical development of what I coin “critical uncertainty studies.” Lastly, I apply this critical uncertainty studies lens to the context of Hispanic adults in Morgan County, presenting an analysis of data gathered from surveys and focus group interviews conducted within the Morgan County Hispanic community during Spring 2021. Throughout the analysis, I explicate how particular established theories of uncertainty are useful, though limited, in understanding the processing of uncertainty by attending to more diverse sociocultural human experiences. In doing so, I offer ways that critical considerations of context within and beyond the dyadic interpersonal sphere are of use in gaining a more concrete understanding of sources, meanings, and processing of uncertainty that are present in our communication processes. By engaging in such analysis, this study aims to complicate the study of uncertainty and sits within

Moore & Manning's (2019) description of Critical Interpersonal and Family Communication studies and provides an example of how merging critical theory into existing interpersonal theory, as called for by Moore (2016), can take shape in future research.



## CHAPTER TWO: REVIEW OF LITERATURE

This chapter establishes a lineage of theories engaging with the study of uncertainty; in doing so, it presents current scholarly lacunae in which these theories can be expanded to construct a more thorough understanding of the communicative experience of uncertainty and its management as explicated by theoretical developments from 1975 to date, including Uncertainty Reduction Theory, Anxiety/Uncertainty Management, Motivation to Reduce Uncertainty, a normative approach to uncertainty, Problematic Integration, and Theory of Motivated Information Management, among other scholarly innovations. This chapter concludes with the introduction of three concepts grounded in a critical/cultural studies theoretical tradition: *culture*, *subjectivity*, and *power*. Examples of how each concept could be adopted for use in studies of uncertainty are offered as a framing for my case study which explores management of uncertainty during the COVID-19 health crisis by the Hispanic community of Morgan County, CO.

### **Evolution of Theories Exploring Uncertainty**

Uncertainty, as historically studied, refers to the absence of predictable and reliable information and a feeling of insecurity based on level of knowledge about a person, object, or situation (Brashers, 2015; Afifi, 2015). Uncertainty is experienced when one remains in expectation of an outcome (in communication or other aspects of life) that is largely dependent on factors outside of one's control. One can feel uncertain about practically anything, however seemingly mundane or significant it may at first appear to be. For example, one may be uncertain about the weather forecast for a beach day, or about the possibility of developing severe illness due to genetic and environmental factors. Though uncertainty may arise due to a myriad of situations, theories designed to study uncertainty have primarily been grounded on the

communicative interactions of partners engaged in a dyadic communicative event with little reference to context.

### ***Initial Steps in Studying Uncertainty: URT and AUM***

The focus on the interpersonal realm of communication for exploring uncertainty traces its theoretical roots back to Charles Berger and Richard Calabrese's (1975) ground-breaking work developing a theory of uncertainty reduction (URT) that inflects communication during relationship development. URT presents uncertainty as the starting emotional state upon which 'strangers' (communicative partners) find themselves in when constructing a new relationship. The theory presents initial understandings of distinct phases over the course of a relationship's lifespan. First comes the *entry* phase, characterized by low consequence and low involvement interactions between conversation partners. For Berger and Calabrese (1975), this stage serves as a gauge to decide whether the relationship will be pursued or not. It is important to note that the *entry* phase is the stage in a relationship during which Berger and Calabrese determine most uncertainty to be felt between strangers. Said low consequence and low involvement interactions involve information exchanges that are more structured around social expectations and thus have a higher probability of being received positively by one another because they follow an expected script of the communicative partners. Exchanges in the *entry* phase contain primarily demographic information, serving as initial indicators of whether further communication and relationship development will occur. The *entry* phase is followed by the *personal* phase, which consists of deeper, less structured, and more spontaneous exchanges of communication. Lastly, the *exit* phase is where decisions are made considering the future of the relationship – termination or continuation. Uncertainty has relatively low impact in the latter two phases, as any

information shared, or decisions made are based upon a reasonable understanding of the relationship partner.

The goal of URT is, as its name describes, is the reduction of uncertainty in interpersonal relationships. URT explores how people engage with uncertainty of the other by through the use of seven axioms describing different aspects of interpersonal relationships such verbal communication, nonverbal affiliative expressiveness, information seeking behaviors, intimacy, reciprocity, similarity, and liking to uncertainty and its reduction. Axiom three for example, argues that there is a positive relationship between high levels of uncertainty and information seeking behaviors, meaning uncertainty drives information seeking behaviors. Axiom six posits that there exists a negative relationship between uncertainty and similarity, arguing that higher levels of similarity between people reduces uncertainty (Berger & Calabrese, 1975). These axioms are then organized into twenty-one theorems that describe how each axiom can potentially interact with one another or with themselves to decrease or increase uncertainty between communicative partners. For example, theorem three infers that amount of communication exchanges and information seeking behaviors are inversely related, whereas theorem eleven posits that nonverbal affiliative expressiveness and similarity are positively related. Taken as a whole, the phases, axioms, and theorems in URT present uncertainty as an obstacle to the development of relationships. While Berger and Calabrese allow for the intentional dissolving of a relationship, this is not guided as much by uncertainty as it is by certainty by one or both relational partners that the relationship and its embedded communication ought to end.

Subsequent projects engaging the study of uncertainty moved to expand the use of URT for different types of relationships, such as those occurring between people with different

cultural backgrounds, by recognizing the limited scope proposed in its framework for understanding uncertainty. Gudykunst and Nihida (1984), for example, integrated initial considerations for decreasing uncertainty in intercultural communicative exchanges. In their work, they used the examples of United States and Japanese cultures to examine the role of cultural differences between low-context and high-context cultures and the ways that these cultural differences impacted individuals' use of uncertainty reduction communication strategies during their interpersonal interactions. This position came from the argument that low- context and high-context cultures, characterized and differentiated by the varying role of implicit or explicit messages at use in communication interactions, inherently provide differing strategies for reducing uncertainty. An example of how individuals from low- context and high-context cultures differ in their approach to reducing uncertainty can be seen in the use of self-disclosure. Guydykunst and Nishida argue that, because a high-context culture such as the Japanese relies on context ques for gathering information more than that of a low-context culture like that of the United States, direct self-disclosure behaviors are a less common strategy utilized among Japanese interactants.

Obstacles arising from cultural differences between conversation partners were also presented by Neuliep and Ryan (1998), who found that intercultural communication apprehension—the anxiety felt from the anticipation of interacting with people of different cultural or ethnic backgrounds—is a predictor of perceived uncertainty. Engaging with the potential obstacles for reducing uncertainty between individuals of different cultures opened the theoretical door to transport the application of URT to spaces (cultural and geographical) beyond the initial sociocultural context within which it was developed—North American, middle class, white spaces and subjects (Gudykunst & Nishida, 1984). Although this two-fold recognition

emerged related to the need to expand URT to include diverse cultural perspectives, the theoretical historical focus remained on how uncertainty impacted dyadic interpersonal communicative interactions without much further attention to the ways that diverse and evolving sociocultural experiences impact experiences of uncertainty in everyday communicative events.

As mentioned above, one of the factors that had been found to lead to elevated levels of uncertainty was that of intercultural communication apprehension (Neuliep & Ryan, 1998; Neuliep, 2012). Considerations for uncertainty reduction in intercultural exchanges had been, and continue to be, explored from perspectives of cultural vacuums. That is, uncertainty was explored from the perspective of interactants in enclosed settings and social gatherings, seemingly generic interactions whose cultural nuances were left unexplored, and with which limited contextual information could be gathered to understand how uncertainty might be reduced. One of the theories that brought physical location, regarding culture and geography, to the study of uncertainty reduction is Gudykunst's (1993; 1998) theory of Anxiety/Uncertainty Management (AUM).

In developing AUM, Gudykunst (1998) brings to the forefront the ways that physical location and cultural nuance impact interpersonal and intercultural exchanges and related uncertainty reduction. AUM was developed as an effort to incorporate intercultural adjustment as an additional factor for those experiencing uncertainty in cultures other than their own. With this in mind, Gudykunst (1993) saw AUM as a tool central for developing theory-based trainings on how to manage one's uncertainty when dealing with intercultural adjustment. AUM introduced two new concepts to the study of uncertainty that had been largely ignored to date: anxiety and management. AUM argues that there is a natural anxiety that comes with the experience of uncertainty, which is due to the perception that negative outcomes are more likely to occur when

interacting with others in environments and cultures outside of what is familiar. Additionally, AUM posits that uncertainty can be better understood through a lens of management rather than one of reduction (1998), since uncertainty reduction does not necessarily mean its complete removal, and uncertainty management, as a process of balancing how much information is enough to act upon, would suffice in order for people to engage in effective communication and cultural adjustment within a new host culture. The development of AUM in the 1990s marks a major theoretical step in moving from theories of uncertainty reduction to those of uncertainty management and to actively engaging the role of anxiety in negotiating that uncertainty.

Even though AUM touches on the importance of considering cultural and geographical factors when dealing with uncertainty, it focuses primarily on what an outsider could expect from interactions in a different culture (Griffin, 2006). This perspective of uncertainty, which privileges the outsider's point of view and magnifies cultural difference is problematic, as it can potentially lead to obtuse cultural generalizations and erasure of individual difference within geographical and cultural contexts as individuals navigate intrapersonal experiences, interpersonal interactions, and broader social engagement. AUM also frames its central subject through the lens of voluntary relocation, placing agency completely on the outsider, which becomes problematic once global dynamics of movement and displacement are introduced—where mobility is impacted by others' choices and not solely dependent on one's own decisions. Indeed, as described previously, uncertainty is experienced when one remains in expectation of an outcome that is largely dependent on factors outside of one's control, and these involuntary relocations offer evidence toward even increased uncertainty that must be managed interculturally when displacement is centered in human experience.

### *The Role of Motivation and Community in Managing Uncertainty*

Before continuing, it is paramount to recognize that studies of uncertainty, like those of any other field of study, are often in conversation with one another which leads to theoretical overlaps, repetitions, and gaps and could result in oversights when reviewing literature for any given study. My goal in presenting select advances in the study of uncertainty through URT and AUM is not to establish legitimate vs. illegitimate approaches adopted and innovated on by communication scholars to date, but rather to provide a general theoretical context and knowledge of the evolution of the study of uncertainty as it continued to expand in size and complexity. To this conversation, this project offers an additional theoretical expansion that focuses on the role of power and culture in the ways that individuals navigate their own experiences of uncertainty in their unique sociohistorical contexts.

**Moving from General to Specific.** The recognition that uncertainty is managed and that its reduction is only one possible outcome of this management encouraged studies of uncertainty to shift their focus to the nuances around uncertainty management that are experienced by people engaged in all sorts of communicative interactions. Kramer (1999), for example, added to this URT/AUM historical trajectory by offering a model of Motivation to Reduce Uncertainty (MRU), which focused on the role of personal motivation as an indicator upon which to decide whether and how, uncertainty would be handled by those experiencing it. Kramer's model proposed that different levels and sources of motivation lead to different approaches to uncertainty, arguing that competing motivations can lead to situations where one must often choose between conflicting strategies for managing uncertainty. For example, one may be faced with a situation where saving face and transparency are both important values; in this case, seeking further information could be seen as both an indicator of incompetence, damaging one's

reputation, and/or as a sign of transparency, which could benefit attributes of transparency. In order to study these conflicting factors, MRU suggests one look at the level of motivation one has to save face or present themselves as transparent. Understanding which motivation weighs more for the individual presents an indicator of how uncertainty would likely be addressed.

MRU also provides the basis for engaging active and passive approaches to uncertainty management, citing that, “when competing motives are not a concern, high motivation will result in direct inquiry...and that low motivation without competing goals would rely on expending minimal resources by monitoring or waiting for unsolicited information” (Kramer, 1999, p. 310). In other words, based on competing motives and the level of motivation to address uncertainty, individuals may choose to engage passively or actively in information seeking behaviors. Alongside passive and active strategies for information seeking, Kramer also recognizes that individuals have the capacity to build tolerance to uncertainty through cognitive processes, effectively managing it without engaging in active or passive strategies. An example of this could be building tolerance of other’s opinions of oneself by cognitively reappraising their significance in our lives. Another key contribution of MRU is the indication that uncertainty reduction does not always necessarily lead to positive outcomes. Though Kramer only provides general examples of how uncertainty reduction may lead to negative outcomes, the introduction of differing value assessments of uncertainty management outcomes further complicates its study.

Another step taken to make further complex uncertainty management in our communicative interactions is evident in Goldsmith’s (2001) work toward a normative approach, or a normative theory, of the study of uncertainty. Goldsmith builds upon Gudykunst’s (1993; 1998) AUM and Kramer’s (1999) MRU model by arguing that uncertainty inherently carries



with it different meanings, significance, and value assignments that can only be understood within particular sociocultural contexts. Goldsmith avoids demarcating cultural and geographical origins in general terms or pre-existing labels, opting instead to engage with Hymes' (1972) concept of 'speech communities,' that share rules for interaction and interpretation of language. Each speech community, Goldsmith argues, carries with it different beliefs and understandings of what uncertainty is and the purposes that it serves. A normative approach to studies of uncertainty further complexifies the subject matter by recognizing that uncertainty may have different meanings even within speech communities depending on the sort of speech event being evaluated. Goldsmith (2001) states:

Rather than seeking comparable means for measuring the level of uncertainty (e.g., developing parallel assessments of high- and low-context uncertainty), a normative approach attends to the distinctive and variable meanings associated with the experience of uncertainty in a particular sociocultural context. (p. 517)

Thus, a normative approach renders general theories of uncertainty management as secondary for understanding uncertainty management outside of the speech community and speech event from which they are developed.

In composing a framework for exploring uncertainty from a normative approach, Goldsmith (2001) proposes 1) a shift in attention from communication behaviors to communication practices, focusing on practices that are recognized within a speech community as useful for engaging uncertainty; 2) inclusion of expectations that compose speech events alongside the range of ways people could react and be judged; and 3) that explorations of communication and uncertainty involve "explaining why, within a sociocultural context, some communicative responses...are likely to be more effective and appropriate" (pp. 517 – 518).

Each of these foci bring with them a level of depth to the study of uncertainty that had not appeared in previous theoretical frameworks. Moreover, it is clear that Goldsmith made a shift from the general to the specific, recognizing that particular communication practices may carry different responses depending on the speech community being analyzed. This move is significant in the study of uncertainty because it places meaning and significance within the understandings of speech communities rather than as independent of them. By doing so, a normative approach moves away from asserting that, for example, communication and information seeking behaviors are inversely related, as is presented in theorem three of URT, and would move to investigate the relationship between communication and information seeking behaviors within the speech community and speech event at hand. We see, then, that a normative approach to studies of uncertainty moves from general to specific understandings, allowing for difference to manifest itself not through models, but through an understanding that different cultures/speech communities are bound to carry different communicative practices to address uncertainty. Such an approach of continuing to concentrate from general to specific is maintained throughout the next set of theories presented.

**Moving From Interpersonal to Intrapersonal.** Brashers' (2001) contributions to theories of uncertainty management, as well as Hines' (2001) and Babrow's (1995; 2001) development of Problematic Integration (PI) theory and Afifi and Weiner's (2004) Theory of Motivated Information Management (TMIM), shift the approach toward uncertainty by moving from relational interactions to individual evaluations. That is, while these works recognize that individuals live in particular sociocultural contexts, they engage with the intrapersonal meanings of uncertainty, its outcomes, and how they influence interpersonal communication and decision making. In a way, these theoretical advances retake the focus of interpersonal, relationship

oriented, communication presented in URT and AUM, and compile it alongside the nuanced understandings of uncertainty presented in MRU and a normative approach to uncertainty studies.

Brashers' (2001) work toward a theory of uncertainty management focuses on addressing three main areas for each individual: 1) understanding the experience and meaning of uncertainty, 2) exploring the role of appraisal and emotion in uncertainty management, and 3) looking into the range of possible behavioral and psychological responses to uncertainty. These areas overlap with those presented in Goldsmith's normative approach to uncertainty; however, they differ in that while Goldsmith focused on uncertainty as experienced in speech communities and their specific shared speech events, Brashers moves toward recognizing individuals' own perceptions of uncertainty as they navigate diverse contexts. This focus involves a turn toward intrapersonal communication (which characterizes the rest of the works in this section), involving the conversations that one has with oneself to determine the magnitude, meaning, and response toward the uncertainty being experienced—whether personal or otherwise.

By focusing on the individual, Brashers (2001) argues that uncertainties are multilayered and interconnected, and that such characteristics of uncertainty position individuals in a manner where uncertainty can be about any number of aspects of the communicative encounter, including the self, others, relationships, or other aspects of a context. As just one set of examples, by exploring the decisions made by patients of advance care, parents of young children, and individuals with genetic risk factors for cancer, uncertainty may hold different meanings based not only on health diagnosis, but also on the different layers of context encountered such as age, parental status, and perceived risks for others (Sudore, Schillinger, Knight, & Fried, 2010; Rauscher, 2017; Li, Wen, McKeever, & Kim, 2021). Indeed, Health Communication represents a

significant field of study that has engaged uncertainty studies, an area that is the target of the case study included in this project.

Secondly, when considering the role of emotions and appropriate responses, Brashers (2001) argues that uncertainty is constantly being cognitively and emotionally appraised to determine its significance. Such appraisals are not final judgements of the significance of uncertainty but are ongoing cognitive adaptations as new information is gathered. For example, anxiety may turn into happiness should a situation unfold in a positive manner. These emotional and cognitive appraisals and reappraisals of the results of an experience are the factors that motivate people to action or lack thereof in any given moment. Brashers presents that uncertainty may be desired and sustained, rather than reduced, if the result of reducing uncertainty would be considered as negative by the person engaging that uncertainty. In other words, one may desire to maintain hope and live with uncertainty about a situation rather than be certain about a potentially negative outcome.

Lastly, Brashers (2001) agrees with Goldsmith (2001) and Kramer (1999) in recognizing that the multilayered and interconnected nature of uncertainty complicates its management by often presenting multiple, competing goals. Competition that may lead to dilemmas in how to handle and engage with uncertainty to reach certain outcomes while also being satisfied with the means through which such outcomes were achieved. Babrow's (1995; 2001) and Hines' (2001) work on Problematic Integration theory deal specifically with such dilemmas. Problematic Integration (PI) theory argues that people categorize the world around them into probabilistic (what are the chances X factor/strategy/interaction results in Y outcome?) and evaluative (is outcome Y good or bad?) orientations, and that integrating such orientations is often problematic. Feeling regret, for example, presents a situation in which probabilities and values

diverge, where probabilistic expectations are met with unexpected outcomes. PI places negotiations of one's expectations as the central concept that mediates uncertainty. Such intrapersonal communication is aided by interpersonal interactions that help contextualize probabilistic and evaluative orientations of the situation at hand, however, the decision of how to engage with uncertainty circles back to intrapersonal negotiations.

Said intrapersonal focus is reiterated in PI as Babrow (2001) states that the theory "asserts that we are often uncertain about how to integrate a particular belief with other beliefs or values" (p. 559). This argument elevates the occurrence of cognitive dissonance that may happen when deciding how to engage with uncertainty, as people may ascribe to a specific set of values but act in manners that represent them differently. It is because PI deals with subjective value sets, that it presents dilemmas of uncertainty as often unresolvable in a completely satisfying way for the individual, always leaving room for interpretation of how uncertainty could be handled. This perspective goes hand-in-hand with Goldsmith's argument that general theories that aim to address uncertainty holistically are inappropriate because, not only do particular speech communities and speech events carry unique meanings for communication and uncertainty, but individuals also carry complexities in value set and belief systems that complicate such transcendental approaches.

The final work considered in this review of uncertainty-related theoretical developments with a move toward the intrapersonal is Afifi and Weiner's (2004) Theory of Motivated Information Management (TMIM). Although uncertainty is missing from the theory's name, TMIM is presented as a framework for analyzing information-management process within specific conditions. In other words, TMIM intends to present a framework through which information is used to manage uncertainty under particular contexts. Afifi and Weiner place, and

in fact limit, TMIM and its application within the area of interpersonal communication. In addition, TMIM is geared toward analysis of information management only of those who are actively engaging in cognitive behavioral processes that involve said information management. TMIM recognizes individuals as having limited rational thought, arguing that although most strategies for information management are conceived of rationally, emotional and cognitive factors may limit said rationality. Whereas URT establishes uncertainty as the initial stage of every relationship, TMIM posits that uncertainty (and anxiety) may come in at any stage of the relationship as new developments occur. TMIM thus argues that individuals find themselves in cycles of interpretation, evaluation, and decision phases every time they encounter uncertainty and that these moments may occur at any point in a relational interaction.

Key to TMIM is the concept of outcome assessments similar to those proposed by Babrow (2001) in PI, arguing that people consider and negotiate values, expectations, behaviors, and perceived outcomes before selecting strategies for information management. TMIM presents three perspectives from which outcomes come to be assessed: expectancies, importance, and probability. Each of these assessments centers on how individuals sift through potential outcomes, weighing their potential cost-benefit, utility, and probability before deciding to engage in specific information seeking behaviors. While the decision to engage in information seeking behaviors may involve communicating with others, outcome assessment in TMIM occurs within the intrapersonal sphere, meaning that the individual negotiates with themselves whether or not engaging with uncertainty is worth pursuing. This makes up the interpretation phase. TMIM also posits that individuals engage in intrapersonal assessments of efficacy both of the self and of the source of information (always portrayed as another person in TMIM, reinstating prevalence of the dyad). These assessments are used to gauge whether 1) the individual has the efficacy to

proficiently engage in the information management behaviors required to obtain the desired knowledge, and 2) the information provider is capable of producing the sought-after information with no major obstacles (Afifi & Weiner, 2004). Outcome and efficacy assessments occur in the evaluation phase.

Lastly, TMIM's decision phase provides different strategies used to engage with uncertainty based on the interpretation and evaluation phases. The different strategies presented are those of actively, passively, and/or interactively seeking or avoiding relevant information, and cognitive reappraisal. TMIM assumes that information providers engage in similar assessments as they come up to a decision of whether or not providing the requested information. In full, TMIM attempts to engage with uncertainty by centering on interpretation at every stage of uncertainty management. That is, first, individuals interpret whether or not uncertainty even matters enough to them to engage in information-seeking. Then, there is a need to determine whether one is capable of achieving satisfactory outcomes through engaging that uncertainty (while also interpreting why an outcome is necessary at all). Finally, the person interprets which information seeking strategies would be best suited to collect the information required to meet their outcome expectation.

TMIM follows the intrapersonal focus presented by Brashers and Babrow in previous theories for engaging with uncertainty, which is that individuals engage with uncertainty only as it pertains to achieving particular outcomes that may or may not result in uncertainty reduction. In doing so, these theories attempt to account for context and culture by situating the uncertain subject as already existing within a cultural context that contains its own norms for approaching uncertainty (Afifi & Weiner, 2004; Brashers, 2001).

**Moving from the Intrapersonal to the Sociocultural.** Studies of communication and uncertainty, whether analyzing family, relationship, health, or organizational spaces, continue to focus primarily on these processes of intra- and interpersonal information ingestion, digestion, and response. Knobloch and Solomon (2002), Knobloch (2006), Kuang and Gettings (2020), and Jang and Tian (2012) are just a few of examples of how the study of uncertainty remains focused on information-seeking in interpersonal relationships, paying little attention to sociocultural context and other conditions that could produce insight as to why the uncertainty is being experienced in the first place. In this survey of the theoretical communication traditions engaging the negotiation of uncertainty in our relational lives, it is apparent that the theories have largely demoted the importance of sociocultural contextual information and broader relational networks in favor of focusing on interpersonal and intrapersonal communicative practices for engaging with uncertainty. That is, the rich theoretical tradition of engaging uncertainty to date focuses so much on understanding *how* individuals intrapersonally and interpersonally engage with uncertainty, that the origins of *why* they are socioculturally experiencing uncertainty are often brushed over. In addition to studying uncertainty as the emotional state that comes from having enough information to predict an outcome (Knobloch, 2009), we must also investigate the overarching sociocultural context that underlie recurrent feelings of uncertainty for an individual's specific situation and interpersonal life.

In the following section, I introduce concepts from critical/cultural studies to this conversation in order to address this theoretical demotion, raising awareness of and focusing theoretical innovation on the cultural context (*culture*), *subjectivity*, and *power* that inflect uncertainty in people's lives. Ultimately, expanding understanding of these critically inflected



concepts is crucial for advancing the scope of theories of uncertainty management that better respond to the diversity of human experience at work in our communication and communities.

### **Expanding Understandings of Uncertainty through a Critical Sociocultural Approach**

A critical epistemological shift is currently taking place in the field of Interpersonal Communication (Moore, 2016; Moore & Manning, 2019). This turn can most aptly be understood through Moore's (2016) and Moore and Manning's (2019) work on Critical Intercultural and Family Communication studies (CIFC), which describes CIFC as Interpersonal and Family Communication Studies with an added lens of critical theory. Responding to their calls for critically inflected interpersonal communication scholarship, I add to that scholarly tradition by introducing and applying critical/cultural studies concepts to the study of uncertainty and advance a critically inflected critical approach to uncertainty. This critical approach to uncertainty follows Moore's guidelines that a critical lens could be introduced to interpersonal communication by merging critical theory into existing interpersonal theory.

My central goal in applying the concepts of *culture*, *subjectivity*, and *power* to existing theories of uncertainty is not to develop new theory. Rather, I aim to present a platform for the ways that critical approaches to uncertainty might further our understanding beyond interpersonal and intrapersonal lenses to sociocultural ones and offer initial examples of how critical/cultural studies could help us develop new and exciting work in the field of uncertainty. In this section, I introduce three concepts present in critical/cultural studies, namely those of *culture*, *subjectivity*, and *power*. Then, I move to introduce my own fieldwork and research with the Hispanic community in Morgan County, Colorado, the ongoing COVID-19 health crisis, and engagement with uncertainty. Ultimately, this project offers theoretical innovation to theories of uncertainty through additional critical perspectives on *culture*, *subjectivity*, and *power* to

demonstrate the usefulness of a critical approach to studies of uncertainty in understanding how individuals decide to engage with uncertainty on intrapersonal, interpersonal, and sociocultural levels.

### ***Culture and the Importance of Shared Meaning***

Although the term *culture* has a host of diverse definitions, I adopt the definition presented by Stuart Hall (1997) when he refers to culture as the sphere in which “sharing of meanings” takes place among individuals who understand each other through signs and symbols otherwise referred to as languages. This definition of culture continues to be used in recent critical/cultural studies, with it being described as the sphere within which production, circulation, and negotiations of meaning are established, and where social in/equalities are reproduced (Araújo, 2012; Hartley, 2020). Worth noting is that Hall referred to language as a representational system, a set of signs and symbols used to represent ideas, concepts, and feelings, that is not necessarily spoken. That is, for Hall, language encompassed any shared set of signs and symbols that could be understood amongst individuals who share similar notions for interpretation of the language used. For example, referring to the concept of low-context and high-context cultures, a high-context culture may prioritize and interpret nonverbal signs and symbols differently than a low-context culture in which meanings may be primarily communicated verbally. As such, Hall (1997) opens the concept of language, and the meanings it negotiates within a culture, beyond the audiovisual representations of language through speech or text. The adoption of Hall’s notion of language allows for meaning to be negotiated through interactions outside those prioritizing spoken and gestural interpretations of language to include nuanced differences in non-verbal communication that provides for the sharing of meaning. In

other words, meaning can be shared through avenues other than spoken, written, or gestured language.

For the purposes of this study, culture (and the languages which give meaning to objects, ideas, and practices) is conceptualized as the communicative site where uncertainty is interpreted by those experiencing it. Uncertainty, for example, could manifest itself through discrepancies in the systems of signs and symbols from which individuals pull to give meaning to their actions and the ways that these systems are interpreted by others. Low-context and high-context cultures, for example, may assign different meanings to nonverbal communication strategies for managing uncertainty. This non-alignment is because low-context cultures place higher emphasis on the explicit code or symbol being shared, while high-context cultures rely more heavily on implicit meanings based on the communicative situation (Baldwin et al., 2014). Baldwin et al., also present the notion that individuals, families, and organizations may have communication practices that differ from those of the culture in which they live. For example, a family may place higher value on physical contact over explicit affective messages. Additionally, sharing one language, such as a verbal speech code, with someone else does not mean that those same individuals have shared meanings of nonverbal language being synchronously communicated during that interaction. Culture further complicates meaning production and interpretation when considering whose language is being valued and adopted when navigating the distribution of information that is crucial for the survival of those involved.

Privileging one system of interaction over others is closely tied to the notion of Discourse. Discourse, as proposed by Bonilla and Fragoso (2012) refers to “a linguistic event, a social practice, a system of representation, or a means of constructing knowledge...ways of thinking, acting, and interacting” in a specific context (p. 137). That is, Discourse, with a capital

“D,” acts as the practice of assigning truth value to particular ways of thinking (Johanssen, 2020; Bonilla & Fragoso, 2012). Discourse is presented as a system for making relationships, behaviors, and values unintelligible through “regimes of truth” (Bonilla & Fragoso, 2012, p. 138). The expression “regime of truth” used by Foucault refers to how Discourse establishes boundaries around what is appropriate, acceptable, and therefore ‘true’ in specific contexts. Because Discourse establishes boundaries around a way of acting and knowing, Discourse itself is a way of representing knowledge about a specific topic at specific historical moments. A clear connection can be made, then, in linking culture with Discourse as the spheres within which meaning and knowledge are interpreted and shared through language.

### ***Subjectivity: Establishing the Significance of Uncertainty***

Culture necessitates the participation of individuals in order to create shared meanings (Waisbord, 2012). Conversely, individuals carry with them different identities, experiences, and opinions that constitute their participation in creating shared meanings, all of which are subjective. That is, culture is formed through the interaction among subjects who carry shared meanings about the world around them. Shifting from the terminology of individuals to subjects is a move that is most understood through a frame of subjectivity. *Subjectivity*, what Hartley (2020) refers to as the “creation of selfhood” (p. 276), is the joint consideration of structures, conditions, moments, and processes that come into play when defining oneself—the ways in which we “construct a narrative about the self” (Johanssen, 2020, p. 1685) based on how culture and society categorize us. In constructing these narratives, subjects make use of language and constructions, around gender, race, class, and other discourses that demarcate what one is/is not as well as how one should and should not behave (Araújo, 2012).

Subjectivity in studies of uncertainty could be of use for theories such as Problematic Integration, which deal with the orientations in which individuals see themselves and the world around them. I look at employing subjectivity as a factor through which uncertainty garners significance for individuals. That is, because subjects tell themselves stories about who/what they are, they create spaces for misunderstandings from information meant (intentionally or unintentionally) for who/what they are *not*. For example, someone who is not categorized in normative formations of race, sexuality, and other subject positions may misunderstand, or completely miss, information intended for the public good, thus creating vacuums of knowledge that lead to uncertainty.

### ***Power Relations as Sources of Uncertainty***

Lastly, *power* in communication can be referred to as the production of intended effects, what a person can cause (Ng, 2015). In critical/cultural studies, power is referred to in connection to relationships between subjects, which themselves are tied to constructions of subjectivity via structures and social discourses (Araújo, 2012).

For Foucault, power is not something that is exerted through force over others, instead, Foucault posits that power is found within the subject as they are placed in power relations that produce and circulate knowledge (Foucault, 1982). Therefore, Discourse is of importance for understanding power from the perspective of Foucault—because Discourse delimits what is appropriate, and thus what can be considered as knowledge. The relationships of power presented by Foucault also expand beyond those of interpersonal nature, such as a parent over a child, and explore relationships of power between subjects and institutions (Foucault, 1982)—including how power operates in “the minutiae of everyday transactions, in private life, and in the technologies mobilized to evaluate, measure, appraise, and assign to hierarchies—and so to

produce—‘normal’ society” (Hartley, 2020). Thus, power in the sense that will be used in the present study is not only that which presents power *over*, but on delineations of what is considered knowledge, ‘truth’, and how relations of power act upon subjects’ present and future actions (Foucault, 1982).

Tied to the concept of power is the counterweight concept of resistance. According to Canal (2012), resistance occurs when subjects attempt to break existing norms and established avenues of knowledge. This definition of resistance lends itself well to the study of power and uncertainty since, whereas dominant Discourses may delimit appropriate channels for managing uncertainty within a cultural context, resistance challenges said norms, instead acting in what could be seen as socially inappropriate ways to regulate uncertainty.

I posit that contextualizing relations of power is crucial to the study of uncertainty since, even within interpersonal relationships, larger systems and institutions delineate manners of communicating with one another as well as the appropriate means through which to engage with eventual uncertainty. As such, a critical/cultural approach to studies of uncertainty pays attention to the social fabric and relations of power that demarcate the ways uncertainty arises in diverse relationships whether those be interpersonal or political (pertaining to public life). For example, specifically for this project, how could we explore the relations of power between state authorities and the Hispanic community in Morgan County? How do public discourses depicting what practices are appropriate stimulate the manifestation of uncertainty in different communities? By keeping power and its relationship to Discourse at the forefront of studies of uncertainty, we are able to not only explore *how* subjects engage with uncertainty, but also *how* their uncertainty came to be.

Taken together, the concepts of culture, subjectivity, and power provide a solid foundation through which the conceptualization and study of uncertainty can be expanded beyond intrapersonal and interpersonal spheres into sociocultural ones. I now move toward introducing how a critical/cultural approach to studies of uncertainty can expand our understandings of uncertainty, its sources, meanings, and engagement processes. I do this by adopting a particular communicative context to examine how these critical/cultural concepts inflect uncertainty negotiation: communication around the COVID-19 health crisis among the Hispanic community of Morgan County, CO.

## CHAPTER THREE: METHODOLOGY

This study is framed through a phenomenological lens and used an embedded mixed methods approach. This design is guided by the work of Creswell and Plano Clark (2007), who describe the method as one “in which one data set provides a supportive, secondary role in a study based primarily on the other data type” (p. 67). In this study, I adopt an approach that focuses primarily on qualitative data collected via five virtual focus group discussions and is complemented with a combination of qualitative and quantitative data collected via online surveys from 28 participants. This chapter first introduces the phenomenon under study. I then outline the rationale used for choosing an embedded mixed methods design and describe the study’s organizational collaborator and participant sampling approach. From here, I introduce participant demographics as well as reflections on researcher positionality. The chapter concludes with a report of data collection in accordance IRB approval from Colorado State University (IRB #20-10296H), as well as analysis procedures, including descriptions of the hermeneutic and phronetic iterative approaches utilized and a brief reflection on study validity and reliability.

### **Phenomenon and Research Question**

This study investigates the different affective and material impact the COVID-19 health crisis and related public health communication ordinances have had on the Hispanic community in Morgan County, CO, in 2020-2021. In addition to generating awareness of how COVID-19 has given rise to different sources of tension and stress among Hispanic adults in Morgan County, this project pays specific attention to the means through which this community navigates uncertainty in their communication processes. More specifically, this study examines individual



and communal strategies used for engaging with uncertainty related to the COVID-19 health crisis and the public health guidelines caused by it.

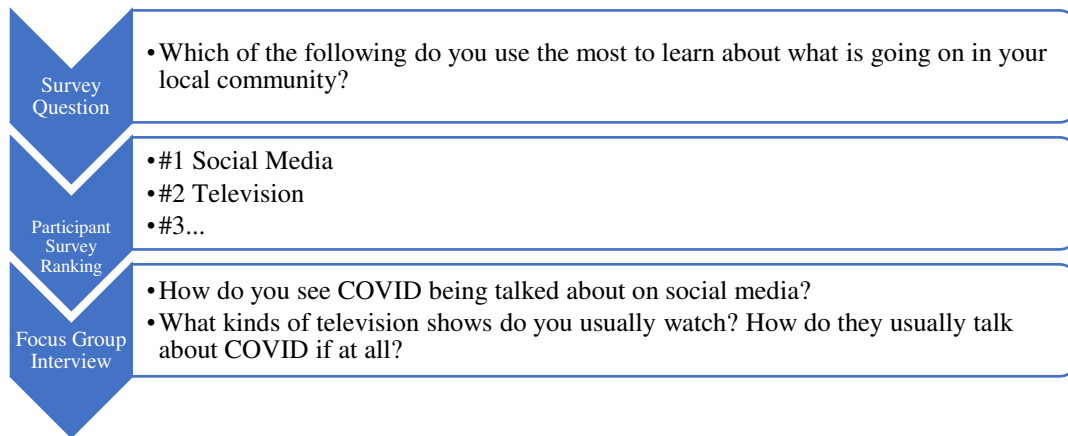
Because uncertainties are multilayered and interconnected, understanding the impact of the COVID-19 health crisis and accompanying public health ordinances requires a detailed examination of lived experience. Research aimed at interpreting lived experience can easily become overwhelming due to the richness of personal accounts. To maintain a reasonable scope for this research project, boundaries were established by the research question around which communication and relational experiences were most related to experiences of engaging with uncertainty. The overarching research question framing this project is thus: *What uncertainties have Hispanic adults in Morgan County encountered during the COVID-19 health crisis and how have these uncertainties been communicatively engaged by this specific community??*

### **Research Design**

This project's research design proceeded in a two-step process. First, an online survey served as a primary means for recruiting focus group participants; second, focus group interviews engaged participants who volunteered during this survey to be part of an emergent community conversation about uncertainties that they were experiencing during the COVID-19 health crisis. Lindolf and Taylor (2019) describe the use of surveys in qualitative-focused research to be valuable "due to their ability to capture a comprehensive view from 30,000 feet at a social unit" (p. 142). That is, when constructed appropriately, surveys provide general perspectives from individual participants that can be useful in generating broad descriptions of the target population. On the other hand, according to Morgan (2019), focus groups give space not only for individual perspectives—including perceptions, opinions, reasonings, beliefs, attitudes, and experiences—but group opinions to be expressed as well from those communities

located at the center of the research project. In addition, focus groups provide a context for interaction between participants to take place, allowing for comparing and contrasting among participants within shared spaces. These survey and focus group methods work in conjunction to provide both individual and group data, while also allowing for the exchange of opinions between informants that might benefit their lives as well.

The two-phase research design of this project afforded me the opportunity to construct focus group interview guides based on participant responses to the online survey and promoted the collection of increasingly specific data about participant beliefs and behaviors in response to the current COVID-19 health crisis. An example of how survey responses informed the focus group interview guide can be seen in Figure 1 below:



*Figure 1: Question Development from Survey to Focus Groups*

The ability to discover and make connections between the survey and focus group methodologies and their respective data opened the path for me to explore the different meanings and rich perspectives presented by each participant. Together, these mixed survey and focus group methods allowed for gathering data that describes participants' general understanding of their experiences, as well as detailed accounts of their behaviors and interactions with others. Engaging with respondents in group settings during the interviews allowed the observation of the

behaviors that emerged in response to others' sharing of their stories, providing another layer of richness to the data gathered. Questions and prompts in both the online survey and focus group interviews were designed with the intent of eliciting detailed descriptions of each research participant's experiences, beliefs, and communicative behaviors while engaging the COVID-19 health crisis.

### **Sponsor Organization and Participant Sampling**

OneMorgan County (OMC), a leading non-profit organization in the field of serving the Hispanic community in Morgan County, functioned as the sponsor for this study. OMC has focused intensely on informing their community about the evolving conditions surrounding COVID-19 over the course of the health crisis, hosting numerous workshops and programs addressing safe practices around COVID-19 and mental health during periods of isolation (S. Guardado, personal communication, January 7, 2021). I coordinated with OMC in the recruitment of participants by engaging in criterion-based purposeful sampling from within the OMC's community and organizational membership. Purposeful sampling refers to the use of predetermined criteria to differentiate among a potential pool of participants, approaching those who meet specific criteria and who can potentially provide rich insights throughout their engagement in the study (Emmel, 2013). Survey participant recruitment was subject to criteria based on age (adults 18 years of age or older), county of residence (Morgan County), ethnicity (Hispanic), and affiliation with OMC. At the same time, OMC also played a role in purposeful sampling, a practice based on recommending individuals to participate in the study whose insight is believed to be of great benefit (Palinkas et al., 2015). It is important to note that OMC's involvement in the recruitment of participants did not extend beyond recommending and

facilitating participation and was not bound to any benefit outside those related to the study. There is no conflict of interest to report.

### **Participant Demographics**

A total of 28 participants completed the online survey. Participant ages ranged from 21 to 55 years, with the median age falling in between 37 and 38 years old. Of the 28 participants, 24 (86%) selected Spanish as their preferred language, the remaining 4 participants (14%) expressed no preference between English or Spanish. No further questions regarding demographics were asked since the purposeful criterion sample used in this study focused only on recruiting Hispanic participants who resided in Morgan County, CO at the time of their participation in the study and this identity was the primary motivating factor of better engaging health communication initiatives. Refraining from asking further demographic questions in the survey also promoted the creation of spaces of trust where participants considered their holistic experience as valuable input for the benefit of their community without needing to over-disclose areas of their life experiences that were unnecessary information for answering my primary research question. However, I will note for the purposes of understanding the results that follow, that eight focus group participants self-identified as mothers and this role (especially when verbally referencing their responsibilities and relationships with their children) did inflect the ways that uncertainty and health contexts related in the community with whom I worked.

### **Researcher Positionality**

Researcher identity is an important component not only in determining the initial subject and purpose of the study (Shaw et al., 2019), but also to understand how study participants construct connections with who the researcher is. This allows for participants to affiliate themselves with the researcher and vice-versa based on shared attributes that establish common

grounds within the data collection event. These connections can potentially enhance the quality of both the data collected and its analysis as the researcher may have previous insight into the opportunities and challenges that may arise when engaging with participants and their input throughout the research process (Lindolf & Taylor, 2019). While expanded understandings of data are possible, I believe researcher identity may also lead to limited interpretations of the data collected, specifically when paired with hermeneutic and phronetic approaches to analysis since these require intense focus on the minutiae of participant experience. This would be true of any qualitative project, but it is true of this one as well.

I am a member of the Hispanic population in Colorado. Although I have not resided in Morgan County, I have a competent understanding of cultural codes and norms that are shared among members of this population. In addition, I am fluent in Spanish, which was the preferred language for participants in 4 out of the 5 focus groups conducted. I shared parts of my life story (upraising, education, family) with focus group participants at the beginning of each conversation in order to establish common ground and build rapport and trust. I included my own immigration story as well in the spirit of creating a welcoming space to share their own stories around immigration and other experiences/identities. By engaging in self-disclosure, participants are able to feel more comfortable and give more detailed accounts when answering my questions, specifically those who engaged in focus group conversations (Pezalla, Pettigrew, & Miller-Day, 2012). I also recognize that, in addition to sharing identities and varying degrees of cultural upbringing with them, hearing the stories of those who chose to participate in this research impacted my own engagement and theorizing in this project as I became personally invested and relationally engaged with the Morgan County Latinx community.

## **Data Collection**

Implementation of the research methods was conducted via online platforms in accordance with the approval of Colorado State University's Institutional Review Board (IRB #20-10296H). Adhering to the approved recruitment and participation methods, every informant's involvement in the study was completely voluntary, participants were informed of their ability to withdraw from the study at any given time. Criterion-based purposeful sampling was used to recruit participants, thus no marketing materials were created or used outside of word of mouth between myself, OMC, and the participants themselves. I also had the opportunity to join one of OMC's virtual health education classes to promote the study to those in attendance.

The survey component of the data collection methods was hosted through Colorado State University's Qualtrics online survey platform. In taking the survey, each participant was presented with a description of the study as well as a request for consent. If consent was denied, the survey platform would prompt them to a page thanking them for their time and consideration, effectively ending their participation. On the other hand, a positive response to the consent prompt would allow participants to continue taking the survey. Every participant was prompted to input their age in order to conform to age requirements established in the IRB—inputs signaling participant age to be under 18 years old prompted the end screen described above.

The survey was constructed with the goal of gaining general insight into participants' overall sentiments around the COVID-19 health crisis. The survey included two existing research instruments: the Scale of Positive and Negative Experience (SPANE) (Diener et al., 2010), which served for evaluating the range of emotions tied to participant experiences over the course of the health crisis, and the Scale for Citizen Trust in Government Organizations (CTGO)

(Grimmelikhuijsen & Knies, 2017), which aided in gauging the levels of trust among participants toward the Colorado Department of Public Health and Environment (CDPHE)—the primary source of information surrounding the COVID-19 health crisis from the state of Colorado. Matrix table questions were also used for gathering spectrums of opinions on different aspects of the COVID-19 health crisis. Qualitative survey questions were also present in the survey, asking for participant input that focused on how participants understood and experienced the ongoing health crisis. I translated existing English-language research instruments into Spanish. The survey remained active from January 11 until February 25, 2021. Refer to [Appendix A](#) for the complete survey in English and Spanish.

The concluding question in the survey served as a recruitment prompt aimed at identifying potential focus group participants. The question asked if the participant would be interested in engaging in a single focus group interview lasting no longer than 1 hour and 30 minutes. Focus group participation was incentivized with receiving a gift of appreciation consisting of a \$25 grocery store gift card. Those who responded positively were prompted to enter either an email address or phone number and were later contacted by me to schedule their corresponding focus group.

Focus group interviews took no longer than 1 hour and 30 minutes, with the shortest interview at 52 minutes and the longest at 1 hour and 19 minutes. Complete consent forms used for focus group interviews, in English and Spanish, can be found under [Appendix B](#). Total engagement in focus group can be seen below in Figure 2.

Table 1: Focus Groups – Participants and Duration

Focus Group #	# Of Participants	Duration
1	3	1hr .12min.
2	4	52min.
3	3	54min.
4	3	56min.
5	2	1hr. 19min.

Following Lowry’s (2006) guidance that smaller focus groups lean toward increased appropriateness, openness, and accuracy in communication, focus groups were limited to a maximum of three participants excluding the researcher and a representative from OMC with whom the participants were familiar with prior to the study. OMC representatives joined focus group discussions as participants and aided in establishing a relationship of trust between participants and myself (McAllum & Arlien, 2006). Additionally, participants in every focus group recognized the representatives of OMC as trusted sources of information, and their presence as participants allowed for conversation to flow. The complete focus group guide was constructed in English and Spanish (see [Appendix C](#)) and encouraged participants to reflect upon their perceptions, experiences, and attitudes around the COVID-19 health crisis.

### **Data Analysis**

Qualitative data sets retrieved from survey responses and focus group interviews were analyzed by implementing the hermeneutical circle as presented by Dibley et al., (2020). The hermeneutical circle consists of a continuous circular and reflexive process where themes emerge via initial and subsequent readings of data (Dibley et al., 2020). By engaging with data in repeated iterations, the researcher enters ‘converging conversations’ of existing and emerging knowledge and understanding presented by the data. The practice of moving back and forth



between existing and emerging understandings of data opens space for arriving at more nuanced interpretations, thus furthering data comprehension during the research process. This method of analysis posits the researcher “as instrument of understanding...a means to enact the interpretation of meaning of lived experiences” (p. 115), making it a highly appropriate tool for analyzing the data collected for the present study. Taking on such a role requires the researcher to prepare prior to engaging in analysis by recognizing one’s own pre-understandings of the phenomena at hand, referred to as creating horizons of understanding that delineate one’s lived experiences and those found in data (Dibley et al., 2020).

The interpretative process is not self-contained either to the data or the researcher, as it requires constant engagement in converging conversations with data, self, literature, and others. This prompts a rendering of shared interpretations of meaning, referred to by Gadamer as a “fusion of horizons” (Vessey, 2009). This fusion of horizons represents interpretations of data that make sense based on the research context at hand and supported by the data collected. Implementation of hermeneutic analysis is complicated by the understanding that there is no clear beginning or end to the data analysis, as every individual carries with them preconceptions of the phenomenon being studied even prior to engaging with literature, study participants, and raw data, and reshape said preconceptions during and after the process of finalizing the study (Smythe, 2005). To this point, Dibley et al., (2020) recommend the use of leading research questions as anchors for grounding and limiting the extent to where thought processes expand. By conceptualizing research questions as also being delineators of scope, utilization of the hermeneutical circle can be relatively fluid as it pertains to the data collected while also creating boundaries that aid in limiting the scope of the analytical process.

Tracy's (2018) phronetic iterative approach also aided in the process of analysis by allowing for the analysis to be grounded on both etic, theory-based, and emic, emerging readings, of data. The use of an abductive phronetic approach opened space for engaging with the hermeneutical circle with a guided yet flexible perspective that relied on both theory and data to address the research question. This approach mirrors the proposition that analysis ought to have guides and boundaries upon which to ground a sense of scope. For the purposes of the study, the theories used to guide data analysis include URT, AUM, normative approaches to uncertainty, uncertainty management, PI, and TMIM, as well as the inclusion of critical/cultural concepts of culture, subjectivity, and power.

In preparation for analyzing the data collected for this study, I engaged in recognizing my own pre-understandings of uncertainty in the Hispanic community in regard to the COVID-19 health crisis. This was done by journaling my own thoughts and reflections before engaging in deep analysis of the data, as well as by writing interpretive summaries throughout the transcription stage. Another step in preparation for analysis includes the adoption of a hermeneutic stance, which refers to remaining "open to thinking and questioning and being attuned to listening to the story of ontological experience...listening to the story and reflecting on that which needs to be thought about" (Dibley, et. al., 2020, p. 117). Reflecting upon my own pre-understandings of the phenomenon and adopting a hermeneutic stance allowed for analysis to be more complex. This is because I was able to move passed initial analysis that may have been informed mainly by my initial pre-understandings in favor of focusing the experiences of study participants.

Having prepared to engage with the data collected, I moved on to the transcribing phase of analysis. During this phase, I manually transcribed the recorded focus group interviews into

Microsoft Word in accordance with the guidelines provided by Dibley, et al. These include properly identifying each interview, creating space in the document for handwritten or digital notes side-by-side with the transcription, and careful word-for-word transcription including verbal filler, pauses, and indicators for non-verbal expressions. After having transcribed each focus group interview, I moved to read each transcript for thematic coding purposes. This process entailed a repeated readings per transcript, each more detailed than the last, moving from initial impressions from the text toward the construction of preliminary codes. In practice, this process included making a combination of digital and hand-written annotations as well as writing interpretive summaries for each focus group interview transcript.

Analysis of quantitative data gathered consisted of providing descriptive statistics for trends present throughout the participant responses to the scales used in the survey. As will be noted in the results of the study, there were not enough data points present in the dataset to call for a thorough analysis of the quantitative data presented. Instead, the basic trends included in the descriptive statistics present in the results section should be interpreted as pilot quantitative data that can drive future research. These descriptive statistics were used as complement to the responses provided throughout the rest of the survey and focus group interviews. Additionally, the use of descriptive statistics aided in painting a picture of the demographics of those who participated in this study.

### **Validity and Reliability**

According to McDermott (2009), the presentation of qualitative results and analysis should have a focus on establishing credibility, transferability, and dependability of the research. Each of these components have been given consideration in the construction and conduction of the present study as they apply to the primary focus on qualitative data. To begin with, credibility

was established throughout the data-collection methods by encouraging participants to reflect on their own experiences and responses in the interest of collecting accurate data. On the other hand, transferability pertains to the capacity for interpretations based on the data set to apply, or transfer, across multiple situations. To enhance transferability, I engaged in practices such as asking participants clarifying and follow-up questions in order to provide rich, thick descriptions of the data. This last point also connects to the construction of research reliability, as rich data description provided for the crafting of more accurate interpretations of data, context, and circumstances of participant experience and study site.

## CHAPTER FOUR: RESULTS

The purpose of this study was to investigate how Hispanic adults living in Morgan County engaged with the different sources of uncertainty caused by the COVID-19 health crisis and the subsequent public health policies that emerged. Furthermore, I explore the uses and limitations of established theories of uncertainty and how they could usefully explain the experiences shared by participants during survey and focus group responses, offering potential areas of expansion for communication theory through the use of critical/cultural concepts of culture, subjectivity, and power. This chapter first provides an overview of participant demographics, number and basic descriptions of completed survey responses, and focus group participation. It concludes with a brief outline of the themes that emerged throughout the survey and focus group data that addresses the research question: *What uncertainties have Hispanic adults in Morgan County encountered during the COVID-19 health crisis and how have these uncertainties been communicatively engaged by this specific community??*

### **Online Survey Results**

Participants were asked to respond to a series of quantitative and qualitative prompts in the online survey. The first prompt aimed to gain a perspective about the emotional state of the community throughout the duration of the COVID-19 health crisis as context for the broader question about managing uncertainty. In order to achieve this outcome, participants were asked to answer questions from the Diener et al., (2010) Scale of Positive and Negative Experience (SPANE). This scale prompts participants to gauge how often they felt positive and negative emotions such as happiness, sadness, anger, and joy during a specific period in time. In this case, participants were asked to reflect on their emotions throughout the length of the COVID-19 health crisis starting in March of 2020 through the time of their survey response. Survey

collection concluded March 18, 2021. In total, 25 out of the 28 participants (89%) had a positive SPANE score, indicating that the overall self-perception of their emotional state throughout the COVID-19 crisis during that time frame was generally positive.

The next survey section asked respondents to rank their preferred sources of information when seeking to learn about what happens in their community in order to better understand the community's communicative engagement during this historical moment. The source options provided in the survey included social media, television, radio and podcasts, newspapers, congregation/church, local non-profit organizations, and school (participant's or children's school). Social media was ranked highest from among the given options, with 13 participants (46%) selecting it as their preferred option, followed by television (27%), and local non-profit organizations third (18.5). Of note was that newspapers were ranked by 15 participants (58%) as the least preferred channel for learning about the local community.

Participants were also asked to provide a description of how they understood the COVID-19 health crisis as affecting them in order to better understand the uncertainties that might have emerged in their life experiences. Three overlapping uncertainty themes emerged from the 28 responses gathered from online survey participants: 1) loss of work and its impact on a family's financial stability (32 mentions), 2) fear of infection and the accompanying social isolation that came from following social distancing guidelines (24 mentions), and 3) concern for children and their well-being (14 mentions). For clarification, many of the participant responses to this prompt addressed two or more of these themes and how they were interconnected for the participants and their families, which is why the theme on employment and financial instability contains more mentions than there are total online survey participants.

Following these questions on information engagement and impacts of COVID-19 on their lives, a second self-assessment scale was used to better understand uncertainty as impacted by broader engagement with government institutions. The survey adopted Grimmelikhuijsen and Knies (2017) scale for Citizen Trust in Government Organizations (CTGO), which rates trust in government organizations based on perceptions of competence, benevolence, and integrity. The original scale allows for inserting the name of the government organization whose public trust is being assessed. In this case, the scale assessed the levels of trust existing toward the Colorado Department of Public Health and Environment (CDPHE), which houses and produces state communication about the COVID-19 health crisis in the state of Colorado. Participant responses pointed to a relatively high level of trust toward the CDPHE, with 24 out of 28 responses (86%) agreeing or strongly agreeing that the department does well in the trust-related areas of competence, benevolence, and integrity.

Lastly, survey participants were prompted to provide topics or concerns they thought were not receiving enough attention during this COVID-19 health crisis, as based on their personal and community experiences. Based on this survey question, emergent themes were more diverse than those presented in the prompt asking directly about the impacts of the COVID-19 health crisis on their lives. The most frequently mentioned concerns expressed were those related to vaccines and the need for increased support to meet and adhere to public health guidelines (4 mentions), provision of Personal Protective Equipment (4 mentions), employment (3 mentions), and children's education (2 mentions). Five participants expressed not being sure of how to answer the prompt and the remaining five participants indicated that they did not have an opinion.

After having completed the main body of questions aimed to collect data around opinions and lived experience during the COVID-19 health crisis, participants were asked if they would like to participate in a subsequent focus group dialogue. A total of 19 of the 28 participants (68%) who completed the survey indicated interest in participating in a focus group. From these positive responses, ten participants ultimately participated in the subsequent focus group interviews as impacted by their availability at this second stage of the research process.

### **Focus Group Results**

Focus group participants were asked a series of questions about their experience around the COVID-19 health crisis (see [Appendix C](#) for the complete focus group protocol). Although each focus group focused addressed aspects of the focus group question guides differently, three question categories garnered the most attention: 1) descriptions of life in your community, 2) opportunities/spaces to breathe, and 3) social and related challenges due to COVID-19. Participants consistently described ways that they had encountered and navigated uncertainties while living through the challenges brought forth by the health crisis. These descriptions reflected two themes that were evident in the online survey: 1) concerns for work and financial stability and 2) concern for children's health and education. The reiteration of these themes across time and responses indicated their importance to the overarching conversation and my research question related to communicative management of uncertainty.

In a noticeable departure from the results gathered from the survey, focus group participants were ready and open to disclose their negative emotions whereas in the survey responses trended consistently positive in emotional content based on input gathered through the SPANE scale. Seven participants mentioned constantly experiencing negative emotions—primarily fear and sadness, throughout the length of the COVID-19 health crisis. This finding



gives insight into the importance of investing time to listen to community member's stories beyond asking for individual disclosures of emotion. Focus group discussions also reflected on trusted sources of information. In this area, although survey responses indicated high levels of trust on the Colorado Department of Health and Environment (CDPHE), participants expressed trust in a variety of sources besides the CDPHE. Trusted sources included primarily radio and television news outlets (7 participants) and OneMorgan County (4 participants). The only references to state sources of information were those of the Governor of Colorado's Facebook page (2 participants) and health institutions such as the CDC (2 participants).

Two additional themes emerged during the focus group conversations process that were not previously evident in the online survey responses. First, focus group participants related uncertainty related to disagreements between individual, family, and friend expectations, with half of the focus group participants expressing that they had struggled with practicing safe social distancing while also navigating social pressure from friends and family who chose not to adhere to public health guidelines. Second, a theme of acceptance of risk was also found in focus group responses; however, it manifested not as an uncontrollable source of uncertainty, but something which participants were very aware of and navigating in their day-to-day lives. That is, focus group participants expanded the results of this study that were originally found in the online survey by expressing knowledge about the risks of getting infected with COVID-19 and talked about their own strategies for coping with the social pressures that came about with social distancing guidelines. In this case, half of the participants expressed engaging with others in manners they understood as not being the most adherent to social distancing guidelines.

Finally, every participant shared their strategies for finding space to de-stress during the COVID-19 health crisis that navigated, and in some cases circumvented, social distancing

guidelines, pointing toward an understanding of what was considered as correct and incorrect forms of acting and engaging with others during the crisis. These strategies will be addressed in the discussion chapter.

In sum, results from this study contribute the following: First, although participants initially expressed having a generally positive emotional state in the midst of the uncertainty of this health crisis in the survey, deeper focus group conversations revealed the prevalence of fear and sadness that continued to be present in their day-to-day lives. Second, participants indicated obtaining community-related information predominately from social media, television, and local non-profit organizations. The survey also found participants to be trusting of the Colorado Department of Public Health and Environment (CDPHE); however, further focus group discussions found no actual engagement with the CDPHE, and more recognition toward other state sources of information such as the state Governor's Facebook page. This finding may reflect participants trust state institutions in theory but limited engagement in certain spaces of information challenges separating institutions from the figure of the governor. Additionally, these findings combined with the preferred sources of information indicate that participants may not have access to information from the state of Colorado frequently enough to distinguish it from other information found in the content they consume through their primary information sources.

This study identified five themes that provide valuable insight to the research question at hand about the different uncertainties faced by Hispanic adults in Morgan County and the ways this community engaged these emerging uncertainties. Three of these themes emerged from analyzing responses to the online survey in regard to the impact of the COVID-19 health crisis on participants' lives: 1) the loss of work and its related impacts of a family's financial stability,

2) fear of infection and the accompanying social isolation and reported sadness that came from following social distancing guidelines, and 3) concern for children and their schooling. Focus group responses largely echoed the first and third themes, while also expanding them with additional themes of 4) disagreements between individual, family, and friend expectations about public health guidelines, and 5) acceptance of risk related to uncertainty management strategies. In Chapter 5, I discuss the sources of and strategies for dealing with uncertainty presented by participants in their online survey and focus group dialogue responses and as interpreted through the themes of concern for employment and financial stability, fear of infection based on sociocultural factors, concern for children's well-being, disagreement about social behavioral expectations, and acceptance of risk for infection in uncertainty management strategies.

## CHAPTER FIVE: DISCUSSION

In this chapter, I discuss how the five uncertainty themes found through analysis of the collected data with the Hispanic community of Morgan County can be integrated with existing interpersonal and intrapersonal theories of uncertainty management and additional critical/cultural concepts of *culture*, *subjectivity*, and *power* to respond the research question: *What uncertainties have Hispanic adults in Morgan County encountered during the COVID-19 health crisis and how have these uncertainties been communicatively engaged by this specific community??* To do this, I present four themes that emerged related to sources of uncertainty plus a fifth theme related to engaging with said uncertainty and explore how different existing theories may contribute to understanding of each theme. Participant quotes are used throughout the presentation of each theme to provide context and highlight participant voices. I provide participant quotes and include English translation if originally provided in Spanish. I then move to incorporate the concepts of *culture*, *subjectivity*, and *power* to enhance understandings of the ways that uncertainty is communicatively constructed and advance the call for an intentional move toward additional sociocultural perspectives on uncertainty theory.

In weaving back and forth between existing theories of uncertainty and the potential areas of growth presented by the inclusion of critical/cultural lenses, I establish what I coin as “critical uncertainty studies.” I suggest that a move toward critical uncertainty studies can expand upon existing interpersonal and intrapersonal focused uncertainty studies by increasing focus on the sociocultural contexts in which uncertainty is experienced, with particular focus on the ways that *culture*, *subjectivity*, and *power* impact the experience of uncertainty by individuals and family units within broader cultures.

## **Sources of Uncertainty**

Based on thematic analyses of survey and focus group data, five themes emerged regarding the causes of uncertainty faced by Hispanic adults in Morgan County, CO. These themes include 1) uncertainty about employment and financial stability, 2) fear of infection based on sociocultural factors, 3) concern for children's well-being, and 4) disagreements about social behavioral expectations and 5) acceptance of risk in uncertainty management strategies. Every theme and source of uncertainty presented here is interconnected with the others, supporting Brasher's (2001) theoretical perspective that people simultaneously manage multiple intersecting uncertainties in their lives.

### ***Uncertainty about Employment and Financial Stability***

One of the initial responses to the COVID-19 health crisis in the state of Colorado was to temporarily pause operations and businesses deemed as not essential for the immediate functioning of society through "stay at home" ordinances (Colorado Department of Public Health and Environment, 2020a). As a consequence of these ordinances, numerous business owners saw a pause to their day-to-day operations resulting in the cutting of employee hours and the laying off of employees. Said loss of work resulted in increased concerns about employment and financial stability and the related capacity to meet basic needs. Responses collected from the online survey reflected these concerns (Survey Responses #8, #10, #12 Q11)<sup>1</sup>: "Nos ha afectado en el trabajo porque nos cortaron las horas," "A afectado el trabajo de mi y de mi esposo y nos atrasamos en los biles," "y me quedé sin trabajo y pues era muy necesario para mí porque tengo una familia tengo 6 hijos." These quotes from survey responses respectively translate to "it has

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<sup>1</sup> A number of quotes used in this chapter were originally in Spanish and translated by me with intention and meaning deduced from having heard the participants express their thoughts.

affected us because they cut our work hours,” “it impacted my and my husband’s job and we fell behind on our bills,” “I was left without a job, and I really need it because I have a family with six children.”

The topic of job and financial instability was also present in four out of the five focus group interviews. Some of the most salient stories related to uncertainty about job stability came from participants who self-identified as undocumented:

En mi caso me duele decir que mi familia y yo emos sido unos de las personas más afectadas directamente. Primeramente, yo me quedé sin trabajo y por no tener documentos legales no pude aplicar por desempleo y mi esposo siguió trabajando pero le cortaron sus horas de trabajo. Por ser indocumentados no podíamos aplicar por ayudas del gobierno. Tenemos cuatro hijos que tres de ellos solo tienen DACA... Todos ellos son estudiantes universitarios de tiempo completo y por lo tanto no tienen tiempo para un trabajo de tiempo completo. Mi esposo es un trabajador esencial y cuando estábamos todos bajo cuarentena el fue contagiado de COVID-19 y desafortunadamente toda la familia fuimos contagiados...Hubo personas que desafortunadamente pude sentir que se burlaban de nosotros, pero también gente que aún se preocupan por nuestro bienestar. Eso me hace muy feliz.

*In my case it really hurts to say that we have been heavily impacted directly. I lost my job and, due to not having legal documentation, I could not apply for unemployment. My husband continued working but they cut his hours. Neither we nor our kids could apply for government assistance because they only have DACA... [the kids] are all full-time college students and don't have time to get a full-time job. My husband is an essential worker and he was infected with COVID-19 during quarantine and the rest of the family*

*was infected unfortunately...unfortunately there were people that I could feel were making fun of us...but there is people that still procure our well-being. And that makes me happy.* (Survey Response #15, Q11)

This comment offered from the participant displays how uncertainty is multilayered and interconnected in manners that go beyond the interpersonal realm by presenting a situation in which, even when employment is maintained, there still remain worries about family health, the balancing of children's educational achievement with meeting basic needs, and how being infected with COVID-19 impacted how this family was perceived.

Existing theories of uncertainty, particularly the model of Motivation to Reduce Uncertainty (Kramer, 1999), the normative approach to uncertainty (Goldsmith, 2001) and the Theory of Motivated Information Management (Afifi & Weiner, 2004), are well suited for understanding the baseline situation from which individuals experience uncertainty. From here, these theories present explorations into how different sources of uncertainty may lead to different actions based on intrapersonal evaluations and interpersonal interactions. For example, TMIM is intentionally concerned with individuals who are seeking to manage their uncertainty—I would argue relieving uncertainty about financial stability is a high priority for participants. Yet, TMIM explores how people navigate and assess outcomes, overlooking the factors that placed the individual in an uncertain emotional state. It is because these theories engage individuals on the basis that they are already facing uncertainty that they overlook the sociocultural factors that lead to the experience of uncertainty. In the case of uncertainty about employment and financial stability, existing theories of uncertainty fail to recognize the multiple factors that lead to the loss of employment and subsequent uncertainty by these community members.

Uncertainty related to job instability was reflected in participant responses not only through the consequences once employment was lost—for example, falling behind on paying their bills, not being able to pay rent—but also functioning in a constant state of intrapersonal preoccupation and worry about the potential loss of work. As one focus group participant stated:

Mi esposo tiene una compañía de construcción, y lo primero que pensamos—yo soy desempleada... “¿que es lo que vamos a hacer? Se va a terminar el trabajo.” Los niños pararon de ir a la escuela, y como tengo muchos y son solamente hombres, son muy buenos para comer. Lo primero que me preocupe fue “¿qué les voy a dar de comer a mis hijos?” este, “que es lo que va a pasar con la escuela? ...Gracias a dios no faltó el trabajo. *My husband has a construction company, and the first thing we thought was- I’m unemployed... “What will we do? Work is going to run out.” The kids stopped going to school and I have a lot [of children] and they are good at eating. The first thing that worried me was “how will I feed my children?” Thankfully my husband kept working.* (Participant 2 Focus Group 1)

Another participant spoke about the loss of work and its impact on their finances:

Mi tensión más grande fue cuando mi esposo se quedó sin trabajo, que llegó y me dijo que lo habían descansado porque... por el covid no había tanto trabajo y lo descansaron. Si duro varios mesecitos sin trabajar mientras de que conseguía otro. Este y eso y los billes no esperan y tenía que pagar billes. *The greatest tension for me happened when my husband lost his job. He came to me and told me they had sent him home because... well, because there was no work because of COVID and they sent him home. He lasted a good couple of months without working*



*while he found another job. The bills do not wait, and we had to pay our bills.*

*(Participant 1 Focus Group 1)*

As seen in these comments, uncertainty about the potential loss of work is not only connected to income and finances, but also to basic needs such as the increased need of meals for children during the time they would be at school. The quotes presented above display how legal status, employment instability, and family values interact and contribute to complex interpersonal and sociocultural uncertainties that cannot necessarily be addressed by employing strategies found in existing theories of uncertainty such as information-seeking or information avoidance which primarily address intrapersonal uncertainty needs through gaining information support.

In these situations, the individual is aware of their circumstances and the outcomes that will likely occur from the loss of work; thus, theories of uncertainty should address the complex causes of the uncertainty being experienced in addition to the intrapersonal emotional state and interpersonal dyadic needs for information and resolution that might address that uncertainty. A critical approach to the uncertainty derived from the loss of work would include the pre-personal factors that contribute to uncertainty. For example, employing a critical approach that focuses on power and relationships of power would analyze not only the loss of employment and financial instability, but also consider *who* is experiencing these uncertainties and *how* their positionality in relationship to the broader sociocultural environment in which they live impacts their experience. A critical approach to uncertainty would move beyond studying how the individual navigates and negotiates meanings of uncertainty within themselves “how will *I* feed my children?” and ask questions about the social conditions in which the individual has to face uncertainty about meeting their family’s basic needs and bring into the overarching discussion

about uncertainty these sociocultural realities that are inflected by cultural norms leading to individual subjective experiences within overarching power systems.

A critical approach to uncertainty would not only point toward particular individuals being more likely to experience uncertainty derived from certain Discourse sources, but also recognize that there are specific systems and practices at play *in* the specific sociocultural context that directly result in increased uncertainty for these populations. For example, there are clear connections to and dynamics of power at play for someone living as an undocumented immigrant in a context where this population is severely marginalized and underserved—leading to increased feelings of uncertainty related to employment by that population. In the case of Hispanic adults in Morgan County, a critical approach to the uncertainty they experience in relation to the loss of employment and increased financial instability would explore why this uncertainty is prevalent across participants (rather than for any one participant) and integrate aspects of the relationship between Morgan County and their Hispanic identities with regard to socioculturally inflected resource availability as impacting their experience of uncertainty on intrapersonal, interpersonal, and sociocultural levels. Only then can uncertainty management be better understood as a complex set of intersecting social variables rather than ones that are navigated on an individual level.

### ***Fear of Infection Based on Sociocultural Factors***

Alongside the first theme of uncertainty related to employment and financial uncertainty came interconnected worries about fear of infection. These worries are exemplified in the following quote:

Mi esposo se enfermó a principios del año. Yo trabajaba en el campo y después no me daban trabajo por la pandemia. No nos daban trabajo porque mi esposo se enfermó y yo

me podía enfermar. Perdimos todo y me preocupo por que se enfermen mis hijos...Temo traer la enfermedad a mi hogar. Temo en pensar en que haría si tuviéramos que pagar biles del doctor... Temo por mi vida y la vida de mis niños.

*My husband got sick [COVID-19] at the beginning of the year. I used to work in the field but then they stopped giving me work because of the pandemic. They were not giving us work because my husband was sick, and I could get sick. We lost everything and I worry about my kids getting sick... I fear bringing the disease home with me. I fear thinking about having to pay medical bills...I fear for my life and the lives of my kids. (Survey response #19, Q11)*

This quote presents a participant's feelings of being caught in the bind of going to work and being able to maintain their family's well-being at a fundamental level while also potentially being exposed to COVID-19 at work and getting themselves or their children sick. One participant justified their fear of coming into contact with COVID-19 at work, and identified employer's lack of efforts to prevent disease spread at the job site as a major contributor to their fears:

En mi opinión, los trabadores esenciales deberían tener más atención. Por ejemplo, yo pienso que a sus empleadore lo único que les importa es que se presenten a trabajar y hagan su trabajo bien hecho y no les importa la salud o bienestar de sus empleados. No les proporcionan las medidas sanitarias para evitar la propagación del virus y tampoco ponen atención si sus empleados se presentan enfermos a trabajar.

*In my opinion, essential workers should get more attention. For example, I think the only thing employers think about is that they show up and do their job and they don't care about their employees' health or well-being. [Employers] don't provide the sanitary*

*conditions to prevent the spread of the virus and don't pay attention to if their employees show up sick to work. (Survey response #15, Q13)*

Numerous survey and focus group participants echoed these sentiments of having to brace for getting infected because of their need to earn a living during a health crisis. It is crucial to recognize that these uncertainties are not stemming solely from a place of intrapersonal doubt, but rather are placed upon people based on the social systems under which they live. Participants display the characteristics of dealing with the uncertainty of not having enough information to be certain about an outcome as presented by Knobloch (2006). However, they are not presented with the option of being able to act in the interest of obtaining an outcome. Rather, participants saw themselves forced into two potential negative outcomes: either going to work and risking getting themselves and their families sick or losing employment and struggling to meet their family's basic needs. In this regard, agency to engage in uncertainty management strategies was taken away from participants. The uncertainty here was not "will I get a negative outcome if I choose to pursue X or Y strategy," but "when will the negative outcome happen?" The concept of positive and negative outcomes boiled down to day-to-day life, with every day of going to work and not getting sick being an iteration of a positive outcome.

Studying uncertainties such as fear of infection based on factors decided by people who have power over one's employment status through frameworks such as the Theory of Motivated Information Management (TMIM) or Problematic Integration (PI) would likely yield valuable insights into how individuals come to terms with the uncertainties they experience. However, these approaches crucially leave out the sociocultural perspective of *why* individuals are being forced into potential negative outcomes of financial precarity or disease. A critical approach to uncertainty investigates how different factors outside of the self and interpersonal relationships

impact the levels of uncertainty experienced by individuals. The quotes presented above, for example, provide insight not only into uncertainty about disease, but also into fear of accumulating medical debt and criticisms of essential workers being undervalued. All of this points to larger sociocultural conditions that ought to be considered when examining how uncertainty manifests itself for Hispanic adults living in Morgan County.

### ***Disagreement about Social Behavioral Expectations***

Social-distancing recommendations became the norm as scientific knowledge emerged about the infection channels of virus causing the COVID-19 health crisis. Social-distancing ordinances primarily targeted limiting of unnecessary activities that required people to leave the house (Colorado Department of Public Health and Environment, 2020). Guidance recommended that people remain within the confines of their house, limiting their exposure to other households including those of their family members. This isolation from others, including family, left many participants feeling alone, frustrated, and sad. In the case of this theme, uncertainty originated not only from the ordinances being put in place, but also by family and friends who, intentionally or not, opted to continue attending social events and complicated the various social pressures on how to behave during COVID-19 in responsible ways.

Participants expressed those mismatched expectations for following public health mandates between themselves, family, and friends left them feeling torn between caring for themselves and maintaining their relationships. For instance, one participant stated she was pressured to attend family reunions during the holidays against her better judgement in order to not be labeled a “bad daughter” by her siblings and experiencing negative perceptions from family:

The only time when I felt that it was more of a pressure and more present was just with my own family around the holidays. Where I thought that, you know, we had this understanding of- because we live in different houses- of not convening... Felt that we'd be good, but there were pressures, primarily from my sister. Essentially 'don't be a bad daughter.' So, I did, I did see them for Christmas Eve, Christmas, and I want so say Thanksgiving as well...It was easier just to do it than, you know, what I felt at the time the blowback. Or just, you know, evil stares from my sister. (Participant 2 Focus Group 5)

Here we see evaluative outcome assessments as presented by PI and TMIM; the participant is grounded on their probabilistic and evaluative orientations—attend a family reunion and risk potential disease, or reject the invitation and ensure probable future repercussions from their loved ones? PI and TMIM provide appropriate avenues for exploring how individuals come to take certain actions based on outcome assessments. Similar sentiments were shared by the following focus group participant:

Hubo ocasiones que llegamos a cancelar a ir a un cumpleaños por el estar en más de veinte personas. Eh, incluso si perdimos amistades por esa razón. Este “no viniste a mi fiesta,” y ya pues ya ahí dejaron de procurarte. Eso ya no nos hablaron...Yo me reunía con amigos...íbamos a tener una reunión porque iba a ser un cumpleaños de uno de sus hijos [le digo] digo “yo te aviso,” ósea “no quiero que lo tomes como que ya no quiero juntarme contigo, sino porque no quiero exponer.”

*There were times when we had to cancel going to a birthday because there were more than 20 people there. We even lost friendships because of it. “You didn't come to my party” and, well, that was it, they stopped talking to you. I would get together with*

*friends [before the health crisis], we were going to have a reunion because it was going to be their kid's birthday. [I tell them] "I'll let you know," like, "I don't want you to take it like I don't want to be around you, but it is because I don't want to be exposed [to the virus]." (Participant 1 Focus Group 4)*

Again, aspects of TMIM and PI are relevant to the scenarios presented above such as the probabilistic and evaluative components of PI and the outcome assessments presented in TMIM. Applying these theories would yield valuable data around the internal cognitive processes that led each participant to decide on whether to abstain or from attending social gatherings. However, there are certain limitations that could be expanded upon through a critical/cultural studies perspective, particularly that of subjectivity. For example, while dealing with the real, probable risk of contracting COVID-19 at family reunions, the first participant came upon their decision to attend social events based on the narratives that would be constructed around her. Being the “bad daughter,” getting “evil stares,” not complying with family expectations came at the cost of potentially endangering her relationship with her sister, thus the participant acted upon one aspect of the uncertainty (addressing family) in a way that increased an interconnected uncertainty (health). On the other hand, the second quote presented conveyed the story of a participant who chose not to engage in large social gatherings to prevent being exposed to COVID-19 and losing friendships because of her decision.

Approaching uncertainty critically in these scenarios could take the form of exploring participant subjectivity and how an individual is defined by themselves and others in the broader context of social structures and conditions. This also includes the recognition that there are a multitude of cultural values at play—as explored in the prevalence of Discourse and culture in outlining the factors that act in participants' lives. For example, while a health crisis may call for

behaviors of increased isolation to prevent infection, these may be outweighed by collective cultural and family expectations that value physical engagement with others. As will be shown in the section exploring strategies for engaging uncertainty, collectivity expands beyond the choice of being in contact with others and is instead considered as a core pillar for personal and individual identity. It is only through analysis of cultural expectations and implications of narratives and subjectivities that the magnitude of the meaning of these uncertainties can be fully grasped.

### ***Concern for Children's Education and Well-Being***

As seen in the themes of employment and financial instability and fear of infection, children play a key role in how Hispanic adults encounter and engage with uncertainty. On the one hand, children are often at the center of adult uncertainty, with a child's well-being as the main source driving attitudes and behaviors: "Even with the option of sending them [children] to school, I don't feel safe doing it" (Survey response #1, Q11), "my kids don't have the freedom they used to" (Survey response #6, Q11), "I struggle with paying the internet, which my kids need" (Survey response 26, Q11). Interestingly, however, children were also positioned as motivators for confronting uncertainty. This impact is most clearly seen in the following quote from a focus group participant:

Para mucha gente que no sabe, yo soy madre soltera, en primer lugar. Cuatro pequeños tengo, y solo por ellos estoy luchando... Entonces, siempre decía "no voy a salir adelante, porque como yo me sentía decía no puedo y no puedo," pero un día dije "no, si puedo. Si voy a poder, y voy a salir adelante... aquí sigo con mis hijos estudiando, y no me falta un techo, una comida. Pero sé que voy a salir adelante.



*Many people don't know, but I am a single mother. I have four little ones, and I'm fighting for them... I would always say "I won't overcome this, I can't," but then I would say "No, I can. I will, and I'll overcome..." I am still here, with my children studying, and I have food and a roof over my head. But I know I will overcome (Participant 2 Focus Group 2).*

There were six out of ten focus group participants who referred to their children being both a source of uncertainty and a motivator to take action. Children's role in shaping experiences of uncertainty for their parents is significant in a critical approach to the uncertainty felt by Hispanic adults in Morgan County, as they provide grounding for action from their parents in manners that reconcile sociocultural sources of uncertainty and intrapersonal conversation about the meaning of uncertainty. That is, when children experience hunger, extended absence from school, or other negative impacts due to sociocultural or other factors, parents are faced with the decision of having to act in order to be able to meet immediate basic needs. While these are concerns that parents face regardless of public health emergencies, the COVID-19 crisis heightened children-related uncertainties due to the overlapping and interconnected themes of employment and financial stability and fear of infection. That is, although in some instances parents were faced with having to go to work to provide for their children, they were also faced with leaving their kids at home rather than at school. In other instances, parents also struggled with the constant fear of bringing the disease home to their children. With this in mind, adults still engage with sociocultural sources of uncertainty, but they are able to frame these uncertainties in manners that make sense to their lives and in ways they can set parameters of how the uncertainty will be addressed.

The themes of uncertainty about employment and financial stability, fear of infection, mismatching behavioral expectations, and concern for children's education and well-being represent the primary sources of uncertainty faced by Hispanic adults in Morgan County. These themes highlight the multilayered and interconnected nature of uncertainty, as fluctuations in any of these sources of uncertainty have a direct impact on the rest. At the same time, these themes exemplify how a critical approach to uncertainty could expand our understandings of uncertainty by complicating its experience through the inclusion of sociocultural factors that lead the Hispanic community in Morgan County to experiencing heightened levels of uncertainty driven by systemic structures during the COVID-19 health crisis. Existing theories of uncertainty overlook these sociocultural factors and provide limited accounts of uncertainty that center individual action rather than the conditions that lead to the experience of uncertainty.

### **Engaging Uncertainty**

One final uncertainty theme emerged pertaining to how Hispanic adults in Morgan County engage with uncertainty: 5) Acceptance of risk. This theme is particularly pertinent to the study of uncertainty because it manifested itself through participants' decisions of whether or not to engage in behaviors that would increase likelihood of COVID-19 infection for themselves and, by extension, their families. More specifically, acceptance of risk can be divided into two primary strategies for uncertainty management: adherence to public health guidelines and conscious departure from public health guidelines. While the latter strategy can appear counterproductive in reducing uncertainty due to the increased probability of becoming infected with COVID-19 resulting from departing from public health guidelines, a critical approach to uncertainty approaches this strategy not as adverse to the purpose of reducing uncertainty, but as

a manifestation of agency and resistance in a sociocultural context where individual action became hyper monitored.

In this chapter's final section, I introduce the fifth theme derived from analysis of participant responses: 5) acceptance of risk of infection in uncertainty management strategies. This theme encompasses how participants were conscious of the risks of infection associated with adherence or departure from public health guidelines aimed at limiting exposure to COVID-19. I then present two ways this theme was manifested: first, participants rationalized their decision to adhere or depart from public health guidelines by reframing the significance of the uncertainty they were experiencing. Reframing and reappraising are uncertainty management strategies that have been well documented in existing theories of uncertainty such as the Theory of Motivated Information Management (Afifi & Weiner, 2004) and Brashers' (2001) theory of Uncertainty Management. Secondly, I point to how participants reached a point of exhaustion in connection to their social isolation from others, and chose to engage in uncertainty management strategies which I refer to as "creative resistance" for satisfying participant need for social interaction.

### ***Acceptance of Risk of Infection in Uncertainty Management Strategies***

Several focus group participants indicated adherence to social health guidelines (social distancing, mask-wearing, only leaving the house for essential tasks) as a strategy for reducing uncertainty about infection. For example, participants spoke about finding new hobbies such as listening to stand-up comedy at home, staying informed through news consumption, engaging in more at home activities to maintain kids entertained, and only doing recreational activities that allowed the family to be away from others such as hiking as strategies that helped decrease uncertainty about possible infection with COVID-19. However, a subset of these participants

expressed reaching a point of exhaustion, a time when the uncertainty arising from being distanced from others overcame the potential outcome of coming in contact with COVID-19. When talking about exhaustion from social isolation, participants described the different strategies they used to either reframe or engage the uncertainty they faced.

**Reframing and Reappraising Uncertainty** Kramer (1999), Brashers (2001), and Afifi and Weiner (2004) presented different ways of how individuals may face uncertainty through cognitive processes of reframing and reappraisal. These include completely reframing the significance of the uncertainty and rendering it meaningless, as well as shifting perspectives in a way that increases self-efficacy and reduces the challenge posed in searching for relevant information. Participants expressed a range of reframing and reappraising uncertainty and anxiety. For example, in response to a story shared by a single mom about dealing with financial struggles due to divorce, another participant—who also happened to be a single mom, shared the following:

Yo sé que no es fácil, como la señora que dice que está sola. Yo así pensé como ella, y decía “no voy a poder,” y si se puede, si se puede. Porque los hijos son en primer lugar que uno tiene como madre soltera. Se me hacía triste, difícil, dura mi vida. Pero pensé “es una novela, una novela que va a pasar, va a pasar, todo va a estar bien

*I know it isn't easy, like the lady [previous participant] says she is alone. I used to think like her. I would say “I can't,” but we can, we can. Because our children are the first thing we have to think about as single moms...I saw my life as sad and difficult, but I thought ‘it's a soap opera, a soap opera that will unfold and everything will be okay’.*

*(Focus Group Interview 2)*

As it can be seen in this excerpt, the participant responded to their peer's uncertainty and anxiety in a manner that reframed that uncertainty and made it more of a challenge to get over rather than an impassable wall. The communal experiencing of uncertainty and reappraisal could be explored more in detail by considering how culture and subjectivity come into play. The excerpt above, for example, contains language which can be best understood by those who share a single-mother identity, thus it is a microculture within a larger culture that operates with its own recognized systems of performed signification. At the same time, the reference to soap operas indicates that individuals facing challenging conditions may assign themselves different narratives that construct their subjectivities in manners that allow them to make sense of the world through their uncertainties.

Other participants expressed engaging in strategies that more closely related to reappraising by substituting uncertainty with another emotion. One participant stated:

Tratamos de enfocarnos en las cosas buenas y no tanto en esto del virus porque si es estresante estar platicando. Tenemos bromas de eso. Pero, pero casi tratamos de no hablar mucho por lo mismo, porque sí- sí es estresante y es triste pues.

*We try to focus on the good things and not so much on this whole virus thing because it can get very stressful. We have jokes about it...But we try not to talk about it a lot because it is stressful and sad (Participant 2 Focus Group 3).*

In the case of this quote, the participant talked about how their family reframed the stress and sadness created by the health crisis by joking about it or chose not to engage with it by choosing to omit the topic at home.

Another example of a strategy related to reappraisal was that of addressing uncertainty by substituting it with another emotion. A participant mentioned this strategy when talking about having been a health lay worker:

Otra cosa también me ayudó mucho es servir a la comunidad agrícola. Eso es algo que verdaderamente me inspiró a pesar de lo que estamos viviendo...y darle un pedacito de esperanza, que tal vez era lo único que necesitaban en ese día.

*Another thing that helped me a lot was serving the agricultural community. It really inspired me despite what we are living through...giving them a little piece of hope, which maybe was the only thing they needed that day (Participant 1 Focus Group 4).*

Instances like these came up across multiple responses in focus group interviews. Participants would reframe their uncertainty and anxiety by beginning a response with something along the lines of “it has been very hard...” and finishing their statement with something related to “thanking God...we have work/haven’t gotten sick/have access to support” indicating that, although uncertainty is being experienced, there is a perception that it could be worse.

#### ***Creative Resistance and Calculated Risks***

Another interesting finding in this study is the use of engaging in creative resistance and taking calculated risks as a strategy to address uncertainty. By resistance, I refer to earlier critical/cultural terminology related to descriptions of acting outside the norms established and expected by society. Participants’ practices of in resistance were most evident in instances in which they act on their agency to circumvent dominant understandings of expected behaviors in order to satisfy their own needs for social interaction. This strategy is best described through the following excerpts:

Pues yo todavía—sí sé que a lo mejor está mal—pero todavía salgo a ver a mi mama. A mis hermanas yo—a mi mama le gusta cocinar mucho, entonces me gusta ir a su casa,

este, sentir el olor de la comida, de lo que hace y todo... Para mí eso es como la familia, no solamente mi esposo y mis hijos, sino pues estar con mi mamá y relajarme un ratito y platicar con ella es lo que me ha ayudado también.

*Well, I- I know that it may be wrong, but I still go see my mom. My sisters and me. My mom really likes to cook, so I like to go to her house to feel the smell of the food, of everything she makes and just being there for a moment. She also visits me along with my sisters... That is family to me. Not just my husband and my kids but being with my mom and taking a moment to relax and have a conversation with her. That is what has helped me too (Participant 2 Focus Group 3).*

The participant expresses recognition that what they are doing may be wrong on the basis of not following stay-at-home ordinances. However, what is worth noting is the mention of smell as a means to ease uncertainty and anxiety. This factor is important because the participant's inclusion of smell pointed to a departure from how current theories of uncertainty frame its management through acquisition of more information via language and interaction. The mention of engaging the senses was common among similar responses that engaged in this strategy. For example:

Tenemos unos amigos en común que hasta tratamos una vez a la semana invitarlos a comer, y para platicar como con alguien más para tener una conversación diferente porque hay veces que los niños dicen "uy otra vez." Y ya viene alguien--esos amigos y ya es otra plática para ellos diferente.

*We have a few friends in common and we even try to invite them to eat once a week, we also take the opportunity to chat [with someone else outside of the household] because*

*sometimes even our kids are like 'this topic again?' so when our friends come over it's a whole different conversation (Participant 1 Focus Group 3).*

Again, similarly to the previous example, this participant expresses the joy of sharing a meal and having company even if it is true that they may come from a different household. Uncertainty reduction comes not from departing from public health guidelines or receiving information relevant to the health crisis, but from being able to interact in meaningful ways with others. One last example comes from a participant who stated:

Bueno pues yo [conteniendo risa] yo busco el espacio para relajarme ahora sí que con mucha precaución y muchos cuidados si salgo. A mí me gusta mucho, este, haga de cuenta que ir a un buen, aquí voy a hablar con la verdad, ir a una segunda... Y ya con el solo hecho de ir y ver más gente y andado ahí viendo, aunque no compre nada. Y claro cuando veo que hay mucha gente no entro, mejor me devuelvo. Pero si veo que hay poquita gente, si llego y ahí me la paso un buen momento. Ya ahí me desestreso y ya regreso a mi casa con otra manera pues de ver las cosas, ya desestresada.

*Well, I, [containing laughter] I look for spaces to relax with a lot of caution and a lot of care if I do go out. I really like, like, to go to a- I'll speak with the truth here, I like to go to a thrift store [laughter] ...By just going and seeing more people and just walking through the store even if I don't buy anything. And of course, I don't enter the store if I see too many people in there. But if there isn't [a lot of people at the store] I do spend a good amount of time in there. And I de-stress and then I come back home with another perspective on things (Participant 1 Focus Group 1).*

This example clearly presents what I refer to by taking calculated risks. The participant states how they avoid going into the store if they see too many people but walking in if they only see a



few. The participant is also aware of the risk they potentially faced by going to the store, as the statement is prefaced with “I look for spaces to relax with a lot of caution and a lot of care...” There is also a sense of catharsis in the self-disclosure given by the participant in saying “I’ll speak with the truth here...” as though they had been refraining from letting others know about their decision to depart from public health recommendations. In addition, the mention of choosing between when to walk in and when not to represents a recognition that there is a baseline risk associated with going into the store, though one they choose to take based on outcome assessments around their health and stress levels.

Worth noting is that participating in an activity that may seem mundane, such as going to a thrift store, is not relaxing in that the participant likes shopping—they do state they like to go even if they do not buy anything. It is the seeing other people, the sifting through the items, the movement involved in walking through the store that brings about a release of stress which in turn allows the participant to gain a new perspective on things (potentially leading to reframing and/or reappraising of uncertainties). These sort of strategies to address uncertainty come as interesting findings as most of the public health messages throughout the COVID-19 health crisis have given priority to audiovisual information: work or attend school from home, keep up with the news to learn of any updates, find a new hobby, a new series to watch, or listen to a new podcast, etc. The strategies presented above point toward the importance of shifting attention toward crafting theories of uncertainty that approach its study through holistic views of individuals that consider information-seeking outside of the audiovisual sphere.

The themes discussed in this chapter highlight the central role of communication in experiencing and confronting uncertainty. A communication which occurs outside the realm of audiovisual information and into the affective and cultural dimensions of language that can only

begin to be understood through critical lenses. How a community communicates about uncertainty is intricately tied to shared cultural meanings and languages as argued by Hall (1997), which are themselves tied to existing relations of power and the diverse subjectivities that constitute the culture and community. It is paramount that studies of uncertainty begin with an effort to understand the sociocultural dynamics at play in the community they seek to engage.

In the case of this project, I engaged with the Hispanic community in Morgan County, who expressed deep concerns related not just to uncertainty about their health due to the ongoing health crisis, but about their survival. A survival tied to sociocultural factors outside of the individual such as employment and financial stability, fear of infection due to social expectations and access to food and childcare. Each of which is interconnected and made more complex by accompanying factors such as immigration status and ineligibility for financial assistance. At this junction then, comments from participants reflected managing uncertainty at different levels from micro to macro. From the specific uncertainty about how family will react to decisions of skipping gatherings in favor of following health recommendations, to the larger anxieties caused by employment factors outside of the self. It is only by starting from a base of understanding of these factors that the community's strategies for engaging with uncertainty can be comprehended. For example, the strategies presented for engaging with uncertainty that represent departure from public health guidance is better contextualized through an exploration of community exhaustion due to the uncertainty caused by the sociocultural factors laid out above in addition to social isolation. In turn, these representations avoid engaging in surface level analyses that risk assigning misconstrued characteristics that overgeneralize and essentialize communities.

In summary, data from the 28 survey responses and 5 focus group interview sessions shows that adults in Morgan County face a diverse set of multilayered and interconnected uncertainties due to the ongoing COVID-19 health crisis. Unstable financial and employment, mismatched expectations in following public health guidelines, and uncertainty caused by medical providers all represent examples of the sorts of how uncertainties manifest themselves on this community. At the same time, participants displayed signs of engaging in uncertainty management strategies such as reframing and reappraising of uncertainty, as well as in less explored strategies that use sensical information outside of the audiovisual sphere. Taken together, these findings convey a set of implications for theory and practice of uncertainty management.

Results highlighted that the participants face interconnected and multilayered uncertainties spanning from structural sources, such as the lack of social support available for individuals that are part of specific communities, as well as from the lack of communication from health centers. These types of uncertainties have not been considered in established theories addressing the phenomenon, as they are currently limited to the intrapersonal communication around values and orientations (PI), and outcome assessments based on interpersonal communication (uncertainty management, TMIM). The discovery of structural sources of uncertainty was made possible by the inclusion of a critical/cultural studies perspective to existing theories, asking questions beyond “what is the source of this uncertainty?” and shifting into more context specific questions such as “who decides how these processes take place and why?” and “what narratives are being constructed around the uncertainty being experienced?”

In addition, adopting critical approaches for the study of uncertainty also bring with them the possibility of constructing new understandings of the communicative strategies used to

engage with uncertainty. A clear example of this is the theme of engaging in ‘creative resistance and calculated risks’, which found that, during a time where physical social interaction was being heavily reprimanded (with audiovisual information being privileged through remote working and learning), participants found ways to work around ordinances and address their uncertainty in holistic ways that included stimulating smell, touch, and taste. Taken as a whole, a critical approach to studies of uncertainty has the potential of providing invaluable benefits to the field by broadening our scope to include cultural and contextual understandings of what uncertainty is, its origin, how it is manifested, and how people engage it.

## CHAPTER SIX: CONCLUSION

Although theories addressing uncertainty have come a long way from the initial introductions of Uncertainty Reduction Theory and Anxiety/Uncertainty Management, the field continues to focus primarily on intrapersonal and interpersonal communication through theories such as PI and TMIM that focus on individual values and behaviors. This study contributes to the current work addressing uncertainty by providing examples from a current communication study utilizing online surveys and virtual focus group conversations with the Morgan County Hispanic community of how applying critical/cultural concepts such as *culture*, *subjectivity*, and *power* can offer new ways of understanding root causes of uncertainty beyond the intrapersonal and interpersonal domains.

As part of this study, a total of 28 surveys were collected and five focus groups were conducted with the purpose of answering the research question: *What uncertainties have Hispanic adults in Morgan County encountered during the COVID-19 health crisis and how have these uncertainties been engaged by this specific community?* Through the data gathered and analyzed, I identified complex ways uncertainty manifests itself for adult members of the Hispanic community in Morgan County. In this concluding chapter, I discuss the implications of these results and offer a few thoughts about what it means for the Morgan County Hispanic Community, the field of communication, as well as delineating a few research limitations and recommendations for future research.

### **Implications for the Morgan County Hispanic Community**

This research is valuable for Hispanic community members in Morgan County in that it contributes to the validation of their experiences throughout the COVID-19 health crisis. This is particularly true for those who saw themselves impacted the most by the health crisis. This

includes the participants who understood their strategies for engaging with uncertainty as departures from public health guidance, because their actions can be understood as responses within a context of highly monitored, highly individualistic social expectations that are in disagreement with their existing individual, familial, and cultural values.

It is important to return the findings back to the community. As such, the results outlined in this thesis will be delivered to OneMorgan County through a report summarizing the findings of both survey and focus group responses in addition to the analysis provided in the discussion chapter above. These findings will also be shared with those who participated in this study through conversations hosted alongside OMC.

The sources of and strategies for engaging with uncertainty presented above represent one sliver of the experience of Hispanic adults in Morgan County during the COVID-19 health crisis. However, it would not be an ungrounded expectation to believe that large portions of this cultural community may have struggled with similar challenges. My hope is that this study presents the Hispanic community in Morgan County with a retelling of their stories in ways that make sense of their uncertainties and anxieties, as well as tangible accounts about their understandings of themselves and their communities. This research can be valuable in understanding that, although surveys may point to an overall positive trend in the emotional state of the community, more detailed approaches reveal community members have in fact been struggling with fear, anxiety, and sadness throughout the length of the health crisis. Recognizing this may lead to more intentional and appropriate community outreach efforts that understand community sentiment.

A clear example of the need to craft more intentional community outreach efforts is the contrast found in perception of positive and negative experiences between responses to the

survey and focus group conversations—each telling a completely different story about community sentiment. While generalized approaches may be of use in collecting quick data, more comprehensive and intentional procedures can lead to recognizing root causes of community struggle. This includes approaching communities in their preferred languages: the inclusion of language diversity and use of Spanish in this project were crucial in collecting deep descriptive data about participant experiences.

In addition, understanding that Morgan County community members rely on social media, television, and local non-profit organizations provides clear avenues for communication strategizing about current and future matters important to survival. This is not to say that each of these channels of communication do not carry their own set of challenges. Rather, understanding the ways the community learns about itself is a major step toward establishing trusted channels of communication that offer reliable information. Those seeking to engage with the Hispanic community in Morgan County should consider utilizing these avenues for distributing information in intentional and appropriate manners as described above.

### **Implications for Communication and Studies of Uncertainty**

Critical uncertainty studies, as I have coined it here, stand at the juncture between existing theories of uncertainty and critical understandings of the sociocultural conditions that shape our experiences. In practice, this juncture can be seen in the attention that existing theories pay to the intra- and interpersonal processes through which individuals negotiate how to engage with uncertainty, and the understanding that multiple sociocultural factors shape our experience in the contexts we live in. Bringing these two perspectives together provides a more holistic understanding of uncertainty, one that informs on how pre-existing structures around culture, subjectivity, and power delineate how uncertainty will be experienced. These can then be

supplemented by existing theories of uncertainty which, informed by critical understandings, can provide more cohesive accounts of how individuals experience and engage with uncertainty. In sum, critical uncertainty studies represent a contribution to ongoing efforts in the field of communication to arrive at more complete and ever-expanding understandings of human communication.

In this thesis, I sought to expand understandings of critical communication by introducing aspects of critical/cultural studies, namely those of *culture*, *subjectivity*, and *power* to already existing theories of uncertainty. These concepts are crucial for expanding our understandings of uncertainty and broader interpersonal communication by allowing for a holistic view into community dynamics that take context into consideration. First, *culture* provides insights into how specific communities communicate about uncertainty verbally, non-verbally, and through other systems of interpretation. Second, *subjectivity* allows for the explicit connection between shared understandings and the unique individuals who constitute the community they live in. Lastly, analyzing *power* provides perspectives into the prepersonal, factors of those who are subject to power relations that play a large role in dictating how their experiences are structured. While these three concepts provide a solid foundation for critical studies of uncertainty, the area is ready and waiting to be expanded to include how other aspects of critical studies may impact experiences of uncertainty.

### **Research Limitations**

There are clear limitations to the research performed for the purposes of this study. First, even though this study engaged with the topic of uncertainty related to the COVID-19 health crisis, it is this same crisis that limited participation from participants and researchers. Interaction and feedback in this study were bound by the channels through which data was collected.



Though virtual participation carries with it certain benefits such as being able to participate from practically anywhere so long as there exists a reliable connection, the opposite applies when participants do not have said affordances. Such was the case with one participant in this study who had to prematurely end their participation due to poor internet connection. Not only were they unable to hear their fellow participants and engage meaningfully, but the sharing of their own experiences was muddied and limited due to technology constraints. Additionally, there is only so much information to be obtained from virtual spaces, there are limits on collecting data on nonverbal communication for example. In a way, this circles back to the importance of sociocultural factors and their influence on the lives of Hispanic adults in Morgan County—for example, affordances around technology and access to the internet were essential for participation in this study.

Second, although the selected data analysis methods provided deep, rich understandings of the qualitative and related quantitative data gathered, the results derived from 28 survey responses and 10 focus group interviewees do not present enough data points to be considered generalizable, nor should they be expected to extend across diverse and heterogeneous communities. Critical approaches to uncertainty are bound to context, time and space, thus the results presented in this study apply only to the community and individuals who participated in it. For example, focus groups were completely made up of participants who identified as women, which leaves room for improvement as to how the procedures could be made accessible for male perspectives. Additionally, every participant was connected to OneMorgan County, which increased their likelihood of being conscious of health-oriented practices. Future studies should seek to improve representation from across the community beyond organizational membership of connection.

There may be similarity between critical studies of uncertainty in the future; however, no community faces the same set of conditions as the next. This makes the critical approach to uncertainty studies lean more toward the actual process of engaging in the specifics of research method design and comprehensive interpretation of data rather than on constructing generalizable theoretical perspectives.

### **Future Steps: A Call for Critical Uncertainty Studies**

The COVID-19 health crisis unearthed deeply rooted inequities within the United States. Being able to work from home, having access to public assistance, and having enough money for groceries to keep the family fed, are only three of the situations that the Hispanic community in Morgan County have faced throughout the length of the crisis. Yes, particular aspects of uncertainty spanning from factors such as these *can* remain in the intra- and interpersonal spheres—such as vaccine hesitance, a mismatch of values and beliefs within the family unit, and the loss of friendships due to public health policies. However, a vast majority of the sources of uncertainty expressed by participants came from sources outside of the interpersonal—the loss of stable income, fear of infection from unknown sources, inadequate and unequal dissemination of information, to name a few. Going a step further, I argue that, though some of the causes of uncertainty can be addressed through existing theories of uncertainty, most of the sources of uncertainty mentioned above, including of intra- and interpersonal nature, can only be properly analyzed and understood by applying a critical lens to our studies of uncertainty. We have to expand our understanding of uncertainty to include contextual factors such as power relations, which will in turn allow us to construct more robust approaches to this phenomenon.

I have provided an example of how to do just this in this study, displaying how the critical/cultural concepts of culture, subjectivity, and power provide solid outlook posts from

which we can more thoroughly understand into experiences of uncertainty. What communities may be left out when we make crucial information public? How do the stories we tell ourselves about ourselves impact our experiences with uncertainty? To what degree are we subject to discourses that mandate appropriate ways to express ourselves and which in turn create spaces for being uncertain about our actions? How do individuals and communities circle around ‘regimes of power’ to engage with uncertainty in ways that satisfy their needs? These are all questions that can be answered with the help of a critical approach into studies of uncertainty. It must be made clear that this study does not stand in opposition to existing theories that address uncertainty, instead, I aim to highlight the vast benefits that critical perspectives can provide to these theories.

A clear contribution for studies of uncertainty spanning from a critical approach comes in the form of resistance, a concept that remained unconsidered in current uncertainty scholarship. This study displays how when, for example, the ‘appropriate’ means for behaving oneself result in uncertainty and anxiety individuals engage said uncertainty by taking measured risks that step outside what is expected. In the example of social distancing, when discourse revolved around audiovisual information being the only type of communication participants opted to engage in consuming information that stimulated the rest of their senses: spending an evening sifting through items at the thrift store, sharing a meal with friends, visiting parents and smelling their home-cooking are all strategies used by participants to engage their uncertainty which would be overlooked by only focusing on audiovisual information. My hope is that future approaches to uncertainty continue to engage with critical perspectives and will be enthusiastic to see the contributions that result from such endeavors.

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## APPENDICES

### Appendix A: Survey Protocols English & Spanish

#### Survey Morgan County & COVID-19

Q1 The purpose of this survey is to gather information regarding personal experiences about the ongoing public health crisis caused by COVID-19 in Morgan County. This survey will also determine if you are eligible to participate in further group discussions related to COVID-19 and the Hispanic/Latinx community in Morgan County. The choice to participate is up to you. The choice is up to you. If you have any questions about this survey or about the study in general, please contact Jesús Calderón of the CSU Department of Communication Studies via email at [jesus.calderon@colostate.edu](mailto:jesus.calderon@colostate.edu)

This survey should take 10-15 minutes.

The next page contains information specific to this survey as well as an explanation of the larger study. Please read this information carefully before consenting to participate and responding to the survey questions that follow.

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Q2 INFORMATION ABOUT THIS RESEARCH STUDY You are invited to take part in a research study on the impact of the COVID-19 pandemic on the Hispanic/Latinx community in Morgan County, CO. The purpose of this consent form is to give you the information you will need to decide whether to participate in this research study or not. Please read the form carefully. You may ask questions about the purpose of the research, what we would ask you to do, the possible risks and benefits of the research, your rights as a volunteer, and anything else about the research or this form that is not clear. When your questions have been answered, you can decide to be in this study or not. This process is called “informed consent.” This study is being conducted by Jesús Calderón, graduate student in the Department of Communication Studies at Colorado State University, and Dr. Elizabeth Parks, assistant professor in the Department of Communication Studies at Colorado State University. If you have questions or concerns, please contact Jesús Calderón at [jesus.calderon@colostate.edu](mailto:jesus.calderon@colostate.edu) or Elizabeth Parks at [elizabeth.parks@colostate.edu](mailto:elizabeth.parks@colostate.edu). Please note we cannot guarantee the confidentiality of information sent by email.

PURPOSE OF STUDY The primary purpose of this research is to understand the manner in which the Hispanic/Latinx community in Morgan County receives and reacts to public health information related to the COVID-19 pandemic, exploring reasons why individuals do or do not adhere to official public health guidance. This research aims to construct better-informed practices for the communication of information essential for the well-being of individuals and

communities. This study interviews adult (18+) members of the Morgan County Hispanic/Latinx community in order to understand the complexities they are facing due to the COVID-19 pandemic. Your input is valuable in understanding the general state of the Hispanic/Latinx community in Morgan County, and what can be done to improve the well-being of the community. **WHAT WILL I DO?** If you agree to participate, you will fill out this survey. If you are eligible and selected for inclusion in future group discussions, I will contact you about participating in said discussions along with other members of the community. In these group conversations, I will ask you to discuss what you think about the impact of COVID-19 on the Hispanic/Latinx community in Morgan County. Everyone participating in these discussions will be from Morgan County. These group conversations will take place via online meetings and will be audio recorded so that I can remember what is said. Though these conversations will be used to shape future reports and academic writing, your identity will in no way be associated with what is said and will be kept confidential.

Accept, Continue (1)

Decline (2)

*Skip To: End of Survey If INFORMATION ABOUT THIS RESEARCH STUDY You are invited to take part in a research study on the imp... = Decline*

Q3 Please provide some information about yourself:  
First and Last Names:

Q4 Preferred language:

Español (1)

English (2)

Both (4)

Other, please specify (3)

Q5 Age

0 10 20 30 40 50 60 70 80 90 100

Slide Marker to Select Age ()



*Skip To: End of Survey If Age [ Slide Marker to Select Age ] < 18*

---

## Q6 Scale of Positive and Negative Experience

Please think about what you have been doing and experiencing during the time since the

beginning of the COVID-19 health crisis (March-present). Then report how much you experienced each of the following feelings, using the scale below.

	Very Rarely or Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Very Often or Always (5)
Positive (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negative (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Good (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bad (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pleasant (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Unpleasant (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Happy (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sad (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Afraid (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Joyful (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Angry (11)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Contented (12)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Q7 Which of the following do you use the most to learn about what is going on in your local community? Rate on level of preference and use (1=high, 7=low):

Click and drag to rank.

- \_\_\_\_\_ Social Media (1)
- \_\_\_\_\_ Television (2)
- \_\_\_\_\_ Radio & Podcasts (7)
- \_\_\_\_\_ Newspapers (3)
- \_\_\_\_\_ Congregation/Church (4)
- \_\_\_\_\_ Local Organizations & Non-Profits (5)
- \_\_\_\_\_ School (Self or Through Family Member) (6)

---

Q8 Since the beginning of the COVID-19 health crisis (March to the present day), have you been approached by community organizations or other academic researchers to give your opinion on COVID-19?

- Yes (1)
- No (2)
- Don't recall (3)

---

*Display This Question:*

*If Since the beginning of the COVID-19 health crisis (March to the present day), have you been appro... = Yes*

Q9a Around how many times you have been approached?

- Less than 3 times (1)
- Between 3 and 5 times (2)
- More than 5 times (3)

---

*Display This Question:*

*If Since the beginning of the COVID-19 health crisis (March to the present day), have you been appro... = Yes*

Q9b What were you asked to give feedback on? Please give us an idea of some of the topics you were asked about and how you gave your responses.

(For example: face-to-face classes during the pandemic, work and COVID-19, health and COVID-19, etc.)

Q10 In a few sentences, describe how you understand, and feel about, the ongoing COVID-19 pandemic and how it is impacting your local community. For example, how has COVID-19 impacted you in relation to employment, childcare, health, relationships, and other aspects of your everyday life?

Q11 Citizen Trust in Government Organizations Scale

Respond to the following statement:

When it comes to dealing with COVID-19, the Colorado department of Public Health & Environment...

	Strongly Agree (1)	Agree (2)	Neutral (3)	Disagree (4)	Strongly Disagree (5)
Is capable (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is effective (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is skillful (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is expert (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Carries out its duty well (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Will do its best to help citizens who need it (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Acts in the best interest of citizens (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is genuinely interested in the well-being of citizens (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Approaches citizens in a	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

sincere way (9)					
Is sincere (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keeps its commitments (11)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is honest (12)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

---

Q12 Are there topics or concerns regarding COVID-19 you believe should be getting more attention? If so, please list a couple:

Q13 Would you be interested and willing to participate in a small group discussion about COVID19 in the Morgan County Hispanic community in the near future? Upon completion of the group discussion, participants will be thanked for their involvement in this study with a \$25 gift card for groceries.

- Yes. Please provide best email or phone number for contact: (1)
- No (2)

## Cuestionario Morgan County & COVID-19

Q1 El propósito de este cuestionario es la recolección de información acerca de experiencias personales alrededor de la crisis de salud pública causada por el COVID-19 en Morgan County. Este cuestionario también determinará si usted es elegible a participar en futuros diálogos de grupo relacionados al COVID-19 y la comunidad Hispana/Latina de Morgan County. Su elegibilidad no significa que tenga la obligación a participar en estos diálogos. La decisión es totalmente suya. Si tiene cualquier pregunta acerca de este cuestionario o el estudio en general, por favor contacte a Jesús Calderón del departamento de Estudios de la Comunicación de Colorado State University [jesus.calderon@colostate.edu](mailto:jesus.calderon@colostate.edu)

Este cuestionario no tomará más de 15-20 minutos.

La siguiente página contiene información específica a este cuestionario junto con una explicación del estudio en general. Por favor lea esta información con detenimiento antes de dar su consentimiento a participar y completar este cuestionario.

Q2 INFORMACION ACERCA DE ESTE ESTUDIO Está siendo invitado a ser parte de un estudio acerca del impacto de la pandemia causada por el COVID-19 en la comunidad Hispana/Latina de Morgan County, CO. El propósito de esta forma de consentimiento es darle la información necesaria que necesitará para decidir si quiere participar en este estudio o no. Por favor lea la forma con detenimiento. Usted hacer preguntas acerca del propósito de este estudio, los posibles riesgos o beneficios asociados con el estudio, sus derechos como participante voluntario, y cualquier otro asunto relacionado con este estudio que no sea claro. Cuando sus dudas sean clarificadas, puede decidir si desea participar en este estudio o no. Este proceso se llama “consentimiento informado.”

Este estudio está siendo conducido por Jesús Calderón, estudiante posgrado en el Departamento de Estudios de la Comunicación de Colorado State University, y la Dra. Elizabeth Parks, profesora asistente en el Departamento de Estudios de la Comunicación de Colorado State University. Si tiene alguna duda o pregunta, por favor contacte a Jesús por email ([jesus.calderon@colostate.edu](mailto:jesus.calderon@colostate.edu)) o a Elizabeth Parks ([elizabeth.parks@colostate.edu](mailto:elizabeth.parks@colostate.edu)). Por favor sepa que no podemos garantizar la confidencialidad de información compartida por email.

PROPOSITO DEL ESTUDIO La meta principal de esta investigación es entender la manera en que la comunidad Hispana/Latina de Morgan County está recibiendo y reaccionando a información de salud pública relacionada a la pandemia causada por el COVID-19. Asimismo, esta investigación explorará razones por las cuales individuos deciden adherirse o no a direcciones oficiales de salud pública. Esta investigación apunta a construir mejores prácticas para la comunicación de información esencial para el bienestar de individuos y comunidades. Este estudio incluye a adultos (18+ años de edad) miembros de la comunidad Hispana/Latina de Morgan County para comprender las complejidades que están pasando debido a la pandemia causada por el COVID-19. Su aporte es importante para entender el estado de la comunidad Hispana/Latina de Morgan County en general, y lo que se puede hacer para mejorar el bienestar de ella. ¿QUE HARE? Si acepta participar, usted completará este cuestionario. Si es elegible y seleccionado para participar en diálogos de grupo, yo lo contactaré para coordinar junto con los

demás. En estos diálogos de grupo, tendremos una conversación acerca del impacto del COVID-19 en la comunidad Hispana/Latina de Morgan County. Todas las personas que participen en los diálogos de grupo serán miembros de la comunidad de Morgan County. Estas conversaciones se llevarán a cabo por medio del internet y su audio será grabado para poder recordar lo que se mencione. Aunque estas conversaciones serán usadas para escribir reportes académicos, su identidad será confidencial y no será asociada con ningún material.

- Aceptar y continuar (1)
- Declinar (2)

*Skip To: End of Survey If INFORMACION ACERCA DE ESTE ESTUDIO Está siendo invitado a ser parte de un estudio acerca del impa... = Declinar*

Q3 Por favor provea la siguiente información:


Nombre y apellido

Q4 Language de preferencia:

- Español (1)
- English (2)
- Ambos (4)
- Otro, especifique (3)

Q5 Edad:

0 10 20 30 40 50 60 70 80 90 100

Deslice el marcador para seleccionar su edad ( )	
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*Skip To: End of Survey If Edad: [ Deslice el marcador para seleccionar su edad ] < 18*

Q6 Escala de Experiencia Negativa y Positiva

Piensa en lo que has estado haciendo y experimentando durante los meses afectados por el COVID-19 a la fecha (~ desde Marzo al presente).

Por favor marca cuánto experimentaste cada una de las siguientes emociones, utilizando la escala a continuación.

	Muy raramente o Nunca (1)	Raramente (2)	A Veces (3)	Con Frecuencia (4)	Con Mucha Frecuencia o Siempre (5)
Positivo (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negativo (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bien (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mal (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Agradable (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Desagradable (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feliz (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Triste (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Temeroso (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alegre (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enojado (11)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conforme (12)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q7 De las siguientes opciones, cuál utilizas más para aprender acerca de lo que pása en tu comunidad? Clasifica tu preferencia de uso (1=alta, 7=baja):

Seleccione y arrastre para clasificar.

- \_\_\_\_\_ Medios Sociales (1)
- \_\_\_\_\_ Televisión (2)
- \_\_\_\_\_ Radio & Podcasts (7)
- \_\_\_\_\_ Periódicos (3)
- \_\_\_\_\_ Congregación/iglesia (4)
- \_\_\_\_\_ Organizaciones locales y sin fines de lucro (5)
- \_\_\_\_\_ Escuela (Personal o de Miembros de tu Familia) (6)

Q8 Desde el comienzo de la crisis dada por el COVID-19 (Marzo a la fecha), has sido contactado por organizaciones locales, el gobierno local, u otros investigadores académicos para que des tu opinión acerca del COVID-19?

- Sí (1)
- No (2)
- No recuerdo (3)

---

*Display This Question:*  
*If Desde el comienzo de la crisis dada por el COVID-19 (Marzo a la fecha), has sido contactado por o... = Sí*

Q9a Alrededor de cuantas veces has sido contactado?

- Menos de 3 veces (1)
- Entre 3 y 5 veces (2)
- Más de 5 veces (3)

Q9b ¿Acerca de que te han pedido tu opinión? Por favor danos una idea de lo que te preguntaron y cómo diste tus respuestas:

(Por ejemplo: clases presenciales durante la pandemia, el trabajo y el COVID-19, la salud y el COVID-19, etc.)

Q10 En algunas oraciones, describe cómo entiendes y te sientes acerca de la pandemia causada por el COVID-19 y cómo esta impactando tu comunidad local. ¿Cómo a impactado el COVID-19 tu situación alrededor del empleo, cuidado a tus hijos, salud, relaciones personales, u otros aspectos relacionados a tu vida diaria?

Q11 Escala de Confianza de Ciudadanos en Organizaciones Gubernamentales

Responde a la siguiente declaración:

Cuando se trata actuar alrededor del COVID-19, el departamento de Salud Pública y Medio Ambiente del estado de Colorado...

	Muy de acuerdo (1)	De acuerdo (2)	Neutral (3)	En desacuerdo (4)	Muy en desacuerdo (5)
Es capaz (1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Es efectivo (2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Es competente (3)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Es experto (4)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cumple bien su deber (5)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Hace lo mejor para ayudar a sus residentes (6)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Actúa en el mejor interés de sus residentes (9)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Esta genuinamente interesado en el bienestar de sus residentes (7)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Se acerca a sus residentes de manera sincera (8)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Es sincero (10)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Cumple sus  
compromisos  
(11)

Es honesto  
(12)

---

Q12 Hay temas o asuntos/preocupaciones alrededor del COVID-19 que crees deban tener más atención? Por favor enumere algunos:

Q13 Estarías interesado/a y dispuesto/a a participar en un diálogo de grupo acerca del COVID-19 en la comunidad Hispana/Latina de Morgan County? Los participantes de estos diálogos recibirán un certificado de \$25 para mandado en agradecimiento a su tiempo.

- Sí. Por favor provea el mejor email o número de teléfono para contactarle: (1)
- No (2)

## Appendix B: Verbal Consent Form for Focus Group English & Spanish

Title of Study: Morgan County Latinx Community and COVID-19 Public Health Information.  
*Título del Estudio: Comunidad Hispana/Latinx en Morgan County e Información de Salud Pública Acerca del COVID-19*

Research Team: Dr. Elizabeth Parks, PI, Department of Communication Studies, Colorado State University, Elizabeth.Parks@colostate.edu

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*Jesús Calderón, Co-PI, Departamento de Estudios de Comunicación, Colorado State University, Jesus.Calderon@colostate.edu*

### **Why am I being invited to take part in this research?**

This study focuses on adult (18+) members of the Morgan County Hispanic/Latinx community in order to understand the complexities they are facing due to the COVID-19 pandemic. Your input is valuable in understanding the general state of the Hispanic/Latinx community in Morgan County, and what can be done to improve the well-being of the community.

#### ***¿Por qué estoy siendo invitado/a participar en este estudio?***

*Este estudio se enfoca en adultos Hispanos/Latinos en Morgan County para entender las complejidades que están experimentando de cara a la pandemia causada por el COVID-19. Su participación es importante para entender el estado actual de la comunidad Hispana/Latina en Morgan County, y lo que se pueda hacer para mejorar el bienestar de la comunidad.*

### **What is the purpose of this study?**

The primary purpose of this research is to understand the manner in which the Hispanic/Latinx community in Morgan County receives and reacts to public health information related to the COVID-19 pandemic, exploring reasons why individuals do or do not adhere to official public health guidance. This research aims to construct better-informed practices for the communication of information essential for the well-being of individuals and communities.

#### ***¿Cuál es el propósito de este estudio?***

*La meta principal de esta investigación es entender la manera en que la comunidad Hispana/Latina de Morgan County está recibiendo y reaccionando a información de salud pública relacionada a la pandemia causada por el COVID-19. Asimismo, esta investigación explorará razones por las cuales individuos deciden adherirse o no a direcciones oficiales de salud pública. Esta investigación apunta a construir mejores prácticas para la comunicación de información esencial para el bienestar de individuos y comunidades.*

### **What will I be asked to do?**

You will be asked to describe and reflect upon the efficiency of the public health communication you have received about the ongoing COVID-19 epidemic. Your responses can include how you

are receiving information about COVID-19, how you yourself react to said information, and what you see your role as being in this public health context. For today's purposes, we are asking you to participate in a focus group conversation that will take no longer than 90 minutes.

***¿Qué se me pedirá hacer?***

*Se le pedirá que describa y reflexione sobre la eficacia de la información de salud pública que haya recibido acerca de la pandemia ocasionada por el COVID-19. Sus respuestas pueden incluir como recibe información acerca del COVID-19, como reacciona a tal información, y cual ve que su rol sea como persona en este contexto de salud pública. Para el propósito de hoy, estamos preguntando si participara en una conversación de grupo de enfoque que no tomará más de 90 minutos.*

**What are the possible risks and discomforts?**

There are no known risks associated with your participation in this study. However, it is not possible to identify all potential risks in research procedures. The researcher has taken reasonable safeguards to minimize any known and potential, but unknown, risks.

***¿Cuáles son los posibles riesgos e incomodidades?***

*No hay riesgos reconocidos asociados con su participación en este estudio. A su vez, no es posible identificar todos los riesgos potenciales con los procedimientos del estudio. El investigador ha tomado medidas razonables para salvaguardar y minimizar riesgos vistos como potenciales, pero desconocidos.*

**Are there any benefits from taking part in this study?**

This study is designed to identify how the Hispanic/Latinx community in Morgan County is being impacted by, and reacting to, the COVID-19 pandemic. The goal is to design stronger channels of communication that allow for the sharing of accurate and trusted public health precautions. As such, the goal of this study is to be of use in decreasing the impact of the COVID-19 pandemic in the Hispanic/Latinx community in Morgan County.

***¿Hay algún beneficio al participar en este estudio?***

*Este estudio está diseñado para identificar como la comunidad Hispana/Latina en Morgan County está siendo impactada por, y como está reaccionando a, la epidemia causada por el COVID-19. La meta del estudio es diseñar medios de comunicación más robustos que faciliten la distribución de información más precisa y confiable. Así mismo, la meta de este estudio es ayudar a reducir el impacto de la pandemia causada por el COVID-19 en la comunidad Hispana/Latina de Morgan County.*

**Do I have to take part in the study?**

Your participation in this research is voluntary. If you decide to participate in the study, you may withdraw your consent and stop participating at any time.

***¿Tengo que participar en el estudio?***

*Su participación en este estudio es voluntaria. Si decide participar en el estudio, puede retirar su consentimiento y parar su participación en cualquier momento.*

**Who will see the information that I give?**

Although your identity may be known by others in the focus group discussions, the data collected by the researcher (me) in this study will be confidential. This means that there will be no link between your name and the notes and audio recordings gathered. No other agencies will have access to this data. All of the information you provide will be confidential.

Participation in a focus group involves some loss of privacy. The researchers will make every effort to ensure that information about you remains confidential, but cannot guarantee total confidentiality. Your identity will not be revealed in any publications, presentations, or reports resulting from this research study. While we ask all group members to keep the information they hear in this group confidential, we cannot guarantee that everyone will do so.

All notes and audio recordings that identify you will be secured and deleted. The only exceptions to this are for consent-keeping records, and in case we are asked to share the research files for audit purposes with the CSU Institutional Review Board ethics committee, if necessary. In addition, for funded studies, the CSU financial management team may also request an audit of research expenditures. For financial audits, only the fact that you participated would be shared, not any research data. Noteworthy quotes will be included in research publications unless otherwise noted by the participant.

### ***¿Quién verá la información que yo de?***

*A pesar de que su identidad pueda ser conocida por otros en su grupo de discusión enfocada, los datos coleccionados por el investigador serán confidenciales. Esto significa que no se creará ningún enlace entre su nombre y cualquier grabación de audio. Ninguna otra agencia tendrá acceso a estos datos. Toda la información que usted provea será confidencial.*

*Participación en un grupo de enfoque involucra alguna pérdida de privacidad. Los investigadores harán esfuerzos para asegurar que información acerca de usted permanezca confidencial, pero no podemos garantizar total confidencialidad. Su identidad no será revelada en ninguna publicación, presentación, o reporte que resulte de este estudio. Mientras pedimos a todos que mantengan la confidencialidad de la información que escuchen en este grupo, no podemos garantizar que todos lo hagan. Todas las notas y grabaciones de audio que lo identifiquen serán aseguradas y destruidas. La única excepción es para mantener un record de consentimiento, y por si se nos requiere compartir los documentos de la investigación con fines de una auditoria con el comité de ética del CSU Institutional Review Board. Asimismo, para los estudios con fondos, el equipo de manejo financiero de CSU puede también solicitar una auditoria de los gastos de la investigación. Para auditorias financieras, solo el hecho de que usted participo sería compartido, no los datos de la investigación. Citas que sean de interés serán incluidas en publicaciones académicas a menos de que el participante (usted) diga lo contrario.*

### **Future Uses of Data**

If you choose to take part in this study your private information collected for this study will not be used or distributed for future studies, even if we remove all identifiers linking you to your information.

### ***Usos Futuros de Información***

*Si decide participar en este estudio su información privada recolectada para este estudio no será usada o distribuida en estudios futuros, aunque removamos toda la información que lo identifique.*

### **Gifts of Appreciation**

You will receive a \$25 gift card as a thank you for your participation unless you express the contrary.

### ***Agradecimiento por Participar***

*Usted recibirá una tarjeta de regalo de \$25 como una forma de agradecer su participación a menos de que exprese lo contrario.*

### **What if I have questions?**

Before you decide whether to accept this invitation to take part in the study, please ask any questions that might come to mind now. If you have questions about the study at a later date, you can contact the investigator, Jesús Calderón at 720-253-7704. If you have any questions about your rights as a volunteer in this research, contact the CSU IRB at:

RICRO\_IRB@mail.colostate.edu or call at 970-491-1553.

### ***¿Qué puedo hacer si tengo preguntas?***

*Antes de que decida si aceptar o no esta invitación a participar en el estudio, por favor díganos acerca cualquier duda o pregunta que tenga ahora. Si tiene preguntas acerca del estudio después de su participación, puede contactar al investigador, Jesús Calderón al 720-253-7704. Si tiene preguntas acerca de sus derechos como voluntario en este estudio, contacte al IRB de CSU en: RICRO\_IRB@mail.colostate.edu o llamando al número 970-491-1553.*

Would you like to participate?

If yes: Proceed

If no: Thank you for your time.

*¿Le gustaría participar?*

*Si: Procede*

*No: Gracias por su tiempo.*

## Appendix C: Focus Group Protocol (English and Spanish)

### Opening Question

Give me an idea of what it's like to live in your community right now with everything going on around COVID.

- Denme una idea de cómo es vivir en su comunidad hoy con todo lo que está pasando alrededor del COVID.

### Social Media COVID Messaging

A majority of the survey responses indicated that social media and television are the top two ways from which you learn about your community.

- La mayoría de las respuestas al cuestionario indicaron que las redes sociales y la televisión son las dos maneras de las que ustedes aprenden de su comunidad.

How do you see COVID being talked about on social media?

- ¿Como ves que se hable de COVID en tus redes sociales?

What kinds of television shows do you usually watch? How do they usually talk about COVID if at all?

- ¿Qué tipos de programas de televisión ven? ¿Qué dicen acerca del COVID si es que hablan de eso?

### Private COVID Conversations

Do you talk about what is going on with COVID at home?

- ¿Se habla de lo que está pasando con el COVID en su casa?

What is it like when you talk about COVID at home, with your family or friends?

- ¿Cómo es/de que hablan/en que se enfocan, cuándo hablan de COVID en su casa, con familia o amistades?

Why might you not want to talk about COVID at home?

- ¿Por qué tal vez no hablen del COVID en casa?

### Opportunities/Spaces to Breathe

How have you been able to cope with all the changes that have happened around us?

- ¿Como han podido enfrentarse a las adversidades que han aparecido últimamente?

What opportunities have you found have space to de-stress, relax?

- ¿Qué oportunidades han encontrado para tener espacio para desestresarse o relajarse?

What gives you hope and/or motivation to keep moving forward?

- ¿Qué les da esperanza y/o motivación para salir adelante?

### Social Challenges and Challenges due to COVID

A lot of responses to the survey expressed concerns about COVID around access to health care, children's education and transportation, employment, and anxiety. Let's talk a bit about how you are feeling and managing these topics.

- Las respuestas al cuestionario indicaron varias preocupaciones alrededor del acceso a cuidado de salud, educación y transporte de sus niños, empleo, y ansiedad. Platiquemos un poco de cómo se sienten acerca de estos temas.

What tensions have you encountered over the past year in regard to the pandemic? Around personal relationships/friendships, childcare and work, etc. (Follow up: How have you negotiated these tensions personally and in your household?)

- ¿Qué tensiones han encontrado a lo largo del año en cuanto a la pandemia? Alrededor de relaciones personales/amistades, cuidado de sus niños y el trabajo, etc. (Continúa con: ¿Como han negociado estas tensiones personalmente y en su hogar?)

What sort of pressures have you felt about going to work, going to school, going to church, or going to social gatherings during COVID?

- ¿Qué tipo de presiones han sentido presionados para ir al trabajo, a la escuela, iglesia, o a eventos sociales durante el periodo de la pandemia?

How do you feel about attending these?

- ¿Como se sienten al ir a estos lugares?

### Trust and Sources of COVID Information

Who do you trust to provide you accurate and reliable information that is of benefit to you?

- ¿En quién confían para darles información cierta y confiable que sea de beneficio para ustedes?

If public health officials wanted to inform you about an urgent public health situation, how would you recommend they do it? How would you prefer for the information to be delivered to you?

- ¿Si alguien de salud pública les quisiera dar información urgente, que recomendaciones les darían? ¿Como quisieran que se les presentara la información? (lenguaje, fotos/imágenes, audio, etc.)