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## Telehealth and Orderings of (In)Equity in New Mexico's Mental Healthcare System

### Abstract

This paper takes as its focal point telehealth in the New Mexican (US) mental healthcare system. Telehealth involves the use of secure, internet-based technologies to provide healthcare across distance. New Mexico is sparsely populated and has a large, rural population; the need for mental healthcare in rural communities is disproportionately large compared to their urban counterparts. The paper draws on ethnographic research conducted in 2018 and 2019—before the CV-19 pandemic and before the use of telehealth became routine in health systems and households across the globe. It is situated among one of the earlier promises of these technologies—their ability to address geographic inequalities in the access to care—and follows New Mexico's shifting health infrastructural landscape, as the absence of one type of infrastructure (mental health workers) is addressed by the presence of another (broadband connections, computer screens, and software programmes that link virtually to healthcare workers located elsewhere).

Telehealth in this context enabled the provision of mental health services to rural communities who otherwise would not have had access. However, the use of telehealth also reproduced several existing social orderings that governed the wider New Mexican healthcare system. This paper focuses on two of these orderings. First, certain power dynamics in the healthcare system whereby health workers and patients who already carry a great deal of responsibility in 'making healthcare happen' are put under further pressure to navigate telehealth policy directives on the ground. Second, beliefs among rural communities about where 'good' healthcare can exist and related forms of mistrust communities have in their local health systems. These orderings and the registers of health infrastructure with which they articulate bring into relief the multivalence of technological mediation on forms of equity and inequity.

### Bio

I'm in the writing up stage of a PhD in Medical Anthropology at Durham University. I explore the use of telehealth technologies in New Mexico, USA. One topic of particular interest that I'd be keen to approach together at the workshop in the context of governance is the usefulness of the distinction between technology and infrastructure as analytical lenses, and, if the distinction is useful, how to delimit the boundaries between the two.