Rationale: Catron County Telehealth Pods- A Health Promotion Program

Catron County, NM occupies over 6,900 square miles (*Catron County | NM Counties, 2015)*, making it the largest New Mexico County by land mass, and larger than three states, including Rhode Island, Connecticut, and Delaware (US Census Bureau, 2010). Catron County also boasts a unique community with a median age of 62.6, which is 1.5 times higher than the New Mexico and United States median ages of 39.2 and 38.7 respectively (*Census Reporter, 2023).* On September 5th, the only rural health clinics in Catron County were closed permanently (Mahler, 2025), leaving the county without any healthcare services that accept Medicare or Medicaid coverage and no general practitioners.

Catron County is considered a frontier and remote county (FAR) because of its low population, 3,579 in 2020 (US Census Bureau, 2023) expansive landmass, and its isolation from urban areas and resources (Dobis, 2025). Catron County's frontier designation, aging population, and lack of access to resources has left Catron with various health disparities. New Mexico's suicide rates are about 50% higher than the national average, and Catron County leads New Mexico in suicide deaths with 55.2 per 100,000 people from 2017-2021 (NM IBIS, 2025). The New Mexico Department of Health (2025) also reports higher than state average rates of cardiovascular disease (217 per 100,000), stroke deaths (48.8 per 100,000), unintentional injury deaths (112 per 100,000), firearm deaths (55.8 per 100,000), and alcohol related deaths (49.4 per 100,000) in Catron County.

With Catron County already experiencing disparities and available reported health outcomes including residents having access to two rural health clinics, which are now closed, there is an immediate concern and need for a solution to give residents in the county access to

general practice and preventative medical services. Without access to any care, it can be expected that in the short term there will be an increase in negative health outcomes, as rural individuals with chronic health conditions report being three times more likely to avoid medical care because of cost, complexity, and privacy (Burch, 2022). Removing the two physical options for care within 7,000 square miles increases all of those risk factors, with the next closest options being several hours round trip, often hundreds of miles away, with practitioners who community members have never met.

In New Mexico, all insured residents have access to their insurance's telehealth programs for general practice and mental healthcare, at no additional copay cost than seeing a practitioner in person (*2024 New Mexico Statutes, 2024).* Given the historical context of access to care being recorded as an issue, with a historical recording of residents displaying a need for healthcare in the county as early as 1947 (Erwin, 1947), citing many of the same issues occurring today, including travel time to another county for care being costly, unreliable, and prohibitory for various reasons, and the closure of the existing health clinics, it is imperative for the county to consider alternative methods of care.

Catron county is an isolated community, with a strong distrust for governmental process because they have been historically underserved, with a higher than average amount of chronic health conditions because of the average age of the county, A telehealth pod program, which will afford community members a chance to train as Community Healthcare Workers (CHW) would allow for already trusted community members to gain the knowledge they need to travel to the homes of community members in need, set up a wifi booster and computer, and allow community members to meet with their medical professionals in their own home. By training community members who are already involved in the community to be CHWs, while there are

still barriers to privacy meeting with a practitioner on the computer, there is also a trusted community member to help facilitate that meeting and ensure follow through with meeting times.

A telehealth pod program would address the isolation in Catron County, by allowing for medical care to be brought to a person who otherwise would not be able to drive to medical services outside of the county, and also by covering gaps in mental health care, which has been A gap successfully covered by both telehealth and by CHWs in low-income and isolated areas (Barnett, Gonzalez, et. al., 2017). Offering internet services and a computer, as well as assistance getting set up and logged in for a medical appointment by the CHW allows for a bridge between the digital literacy in the community and access to care. The community being isolated and aging lends to many members being without access to these resources or the know-how to use them, but a Community Health worker offering hands-on support and acting as a digital navigator from community members, can increase continuity of care in the county. Additionally, because of the historical undeserving and general distrust of the government and outsiders experienced by the community, a community health worker will be able to facilitate the connection between services that are offered at no extra cost (telehealth) and the community actually being able to access those resources with the help of a trusted member, allowing for face-to-face communication and a mitigation of distrust and fear.

The relatively low financial burden of training CHWs, and providing the technological supports of Wifi and a computer, will significantly decrease both the short-term immediate health effects of community members not being able to access the medications and treatments that are currently working for them, such as low blood pressure medications, therapy, and diabetes supplies, generally provided at the county's health clinics in the past, and the long-term health effects that lack of access to care provide. This program will afford the community access to

continuity of care, which has been proven to lengthen lives, and improve health outcomes (Pereira, Sidaway-Lee, et. al., 2018) in the short and long-term, and allow for Catron County to begin to rise in health rankings, for the first time in its history.

To ensure the success of the program, it will be imperative to conduct a needs assessment in the community to understand why most people are going to the doctor, how often they are going, and how often they are foregoing care because of barriers. It will also be important to build relationships with community members who might be interested in becoming CHWs, and coordinate with the county commissioner and the County Health Council to understand how to facilitate this program in Catron County. Because of the immensely small and spread out population, it is unrealistic to conduct community surveys. For the purpose of this project, focus groups and interviews with community leaders will be used to determine the needs of the community and their receptiveness to a Telehealth Pod Program, and how the community envisions the program working for them.

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