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# Trying to cover the sun with your thumb: A critical ethnography of maternity care provision in rural northern New Mexico

Abigail Reese

*University of New Mexico, areese@salud.unm.edu*

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**TRYING TO COVER THE SUN WITH YOUR THUMB:  
A CRITICAL ETHNOGRAPHY OF MATERNITY CARE PROVISION IN RURAL  
NORTHERN NEW MEXICO**

**Abigail L. Reese, CNM, MSN  
College of Nursing**

**ABSTRACT**

Access to maternity care is disappearing for women across rural America. In New Mexico, women often travel long distances in order to access hospitals and providers that offer childbirth services, as these resources are primarily concentrated in metropolitan areas. Although data on provider distribution is available, very few studies have explored the maternity care access crisis from the perspectives of the midwives and physicians who work in rural areas. The purpose of this study was to explore barriers and facilitators to the provision of childbirth services from providers' perspectives with the intent of informing policy debates around the maintenance of safe, local birthing options. Over a one-year period, in-depth interviews and fieldwork were conducted in three rural northern New Mexico counties: Rio Arriba, Taos, and San Miguel, with attention to the unique historical context, challenges, and resources represented in each area. This study had three overarching findings: 1) Structural barriers to rural practice are persistent across disciplines and contribute to the maldistribution of maternity care providers; 2) Midwifery-led models of care are culturally appropriate and appealing to women, but they are not universally accessible and are often marginalized within rural health systems; 3) Perinatal support services such as home-visiting, doula services, and breastfeeding support are a critical complement to clinical care and help to counteract the fragmentation of rural services.

This poster identifies implications for policy reform, clinical training and future research. In order to assure the sustainability of rural maternity care resources, it is imperative that the insights and expertise of providers, community members, and other stakeholders on the front lines be included in present and future policy directives.