Women + OB/GYN Providers

Research Findings

November 2013

6 Focus Groups and a National Survey of Women 18-44
This study is about understanding the role that OB/GYN providers play in the health of young women. There has been no recent exploration of this important relationship and as the Affordable Care Act reshapes health coverage and delivery, it is helpful to learn how women ages 18-44 think about and access OB/GYN care.

The study was sponsored by Planned Parenthood Federation of America and was conducted by PerryUndem Research/Communication.
Focus Groups
May 2013
6 Focus Groups

- 3 groups with African American women, Latinas, and White women ages 18-29
- 3 groups with African American women, Latinas, and White women ages 30-44
- Groups were held in Baltimore and Denver
- Women represented a mix of income, insurance status, and children/no children

National Survey
July 2013
N = 1,036 Women Ages 18-44
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conclusions
Half of women 18-44 currently have children. More than half are married or living with a partner, but a significant portion are single (43%). They are more racially/ethnically diverse than the public as a whole and 4 in 10 have incomes under $50,000. Six in ten work for themselves or an employer and another 14% are looking for work.

Race/Ethnicity
- 58% White, non-Hispanic
- 19% Hispanic
- 14% Black/African-American
- 10% Other, 2+ races

Annual Income
- <$50K (41%)
- $50-$100K (34%)
- $100K+ (25%)

Marital Status
- Married 46%
- Never married 36%
- Living with partner 11%
- Widowed/Divorced/Separated 7%

Work Status
- Working, paid employee (56%)
- Working, self-employed (5%)
- Looking for work (14%)
- Not working or looking (26%)

Age
- 18-24 (36%)
- 25-34 (37%)
- 35-44 (27%)

Education
- Less than high school (11%)
- High school degree (24%)
- Some college (34%)
- Bachelor’s degree or higher (32%)
Just as with the public as a whole, most women 18-44 have health insurance coverage (76%). However, 1 in 5 are uninsured and Latinas figure largely in this group (52% are uninsured). Lower income women also are more likely to be uninsured. This affects access to OB/GYN care: the study shows uninsured women are less likely to report seeing an OB/GYN on a regular basis. Of note, uninsured women are also more likely to report their OB/GYN is their main source of care.

1 in 5 women in this age group are uninsured.

Those most likely to be uninsured:
- Latinas (52%)*
- Women with incomes <$25K (39%)
- Women with incomes $25-$49K (33%)

Breakdown of coverage type:
- Employer sponsored insurance (33%)
- Partner’s employer sponsored insurance (26%)
- Buy own insurance (5%)
- Parent’s plan (18%)
- Medicaid (11%)
- Other (6%)

* The 2011 American Community Survey estimates the number of uninsured Latino/as ages 18-44 at 45%. There is not a breakout for Latinas in this age range. Our number may be slightly high but still within the margin of error for the survey.
The study finds that OB/GYN providers play a unique and central role for women ages 18-44.

For many women, their OB/GYN is the first provider they chose when they became an adult. Most see their OB/GYN on a regular basis, more frequently than other providers at this stage in their life. Their relationship with their OB/GYN is different from their relationship with other providers. They feel comfortable with their OB/GYNs and are more open and honest with them. They discuss intimate topics that are important to them – that they cannot imagine raising with any other provider. For many young women, their OB/GYN is their first and primary link to the health system.

Key survey findings:

1. Six in 10 women ages 18-44 (58%) report they see an OB/GYN on a regular basis.
2. Four in 10 women ages 18-44 (41%) say their first provider as an adult was an OB/GYN.
3. One-third of women ages 18-44 (35%) view their OB/GYN as their main healthcare provider.
4. Women’s main healthcare needs – now and when they first accessed the system – relate to OB/GYN care and services (e.g., birth control, pap test, breast exam, etc).
5. Women say they are more likely to be open and honest with an OB/GYN provider than with their internal medicine/family practice provider (56% vs. 40%).
6. Women report that their OB/GYNs are more likely than other providers to talk to them about intimate topics: their relationships, birth control, planning for a family, STDs, and physical abuse. They value this.
Almost 6 in 10 women report they see an OB/GYN on a regular basis. Married women/those living with a partner and women in the 25-34 age range are among those most likely to be seeing an OB/GYN on a regular basis. Of note, African American women also are more likely to see their OB/GYN regularly. Uninsured women and those with the lowest incomes are less likely to be receiving regular care from an OB/GYN. Also, the youngest women in this survey (ages 18-24) and those who have never married are less likely to be seeing an OB/GYN regularly.

Do you see any of the following types of providers on a regular or usual basis?

- **OB/GYN**: 58%
- **Family Practice/Internal Medicine**: 54%
- **Specialists**: 19%

Those most likely to see an OB/GYN on a regular basis:

- Women ages 25-29 (71%)
- Women who are married/living with a partner (67%)
- Women in the Northeast (67%)
- Women with incomes $100K+ (67%)
- Women ages 30-34 (66%)
- African American women (64%)
Half of women ages 18-44 say they are more likely to see their OB/GYN on a regular basis than any other type of provider.

When asked if their OB/GYN is their “main” source of care, more than one-third say “yes.” Of note, those subgroups of women who are most likely to say their OB/GYN is their main source of care are also those who are less likely to see an OB/GYN regularly, likely due to access barriers like being uninsured.

35% of women in this study report that their OB/GYN is their “main source of care.” Those most likely to say their OB/GYN is their main source of care:

- Latinas (47%)
- Women ages 25-29 (43%)
- Women with incomes <$25K (41%)
- Uninsured women (40%)
The majority of women ages 18-44 (61%) have seen an OB/GYN provider in the last two years.

Most received a pap test, annual exam, breast exam, a blood pressure check, and birth control. One-third to one-quarter received a check on their cholesterol, prenatal care, testing and/or treatment for STDs and HIV, and a referral for a mammogram.

For those women who saw an OB/GYN provider in the last two years, here are the types of care they received:

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>A pap test</td>
<td>91%</td>
</tr>
<tr>
<td>An annual exam</td>
<td>85%</td>
</tr>
<tr>
<td>A breast exam</td>
<td>79%</td>
</tr>
<tr>
<td>Blood pressure check</td>
<td>77%</td>
</tr>
<tr>
<td>Birth control</td>
<td>57%</td>
</tr>
<tr>
<td>Cholesterol check</td>
<td>29%</td>
</tr>
<tr>
<td>Prenatal care</td>
<td>29%</td>
</tr>
<tr>
<td>Sexually transmitted disease (STD) testing and treatment</td>
<td>28%</td>
</tr>
<tr>
<td>HIV testing</td>
<td>26%</td>
</tr>
<tr>
<td>Referral for a mammogram</td>
<td>23%</td>
</tr>
</tbody>
</table>
The main types of care women ages 18-44 need at this stage in their life include annual exams, birth control, a pap test, and prenatal care. These are the kinds of services provided by an OB/GYN provider, underscoring the importance to women in this age group of access to OB/GYN care.

Of the services women have needed in the last two years, the ones they consider MOST important are:

- Annual exam (21%)
- Birth control (18%)
- Prenatal care (16%)
- A pap test (15%)
- Care for ongoing health issues (11%)

What type of care do women in this age group need?

In the past two years, what have been the main types of health care you have needed?

<table>
<thead>
<tr>
<th>Service</th>
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</tr>
</thead>
<tbody>
<tr>
<td>An annual exam</td>
<td>56%</td>
</tr>
<tr>
<td>A pap test</td>
<td>49%</td>
</tr>
<tr>
<td>Birth control</td>
<td>34%</td>
</tr>
<tr>
<td>A breast exam</td>
<td>29%</td>
</tr>
<tr>
<td>Prenatal care</td>
<td>14%</td>
</tr>
<tr>
<td>Care for an ongoing health issue like diabetes or asthma</td>
<td>14%</td>
</tr>
<tr>
<td>Diet or nutrition counseling</td>
<td>9%</td>
</tr>
<tr>
<td>Mental health care</td>
<td>8%</td>
</tr>
<tr>
<td>Immunizations, like HPV</td>
<td>8%</td>
</tr>
<tr>
<td>STD testing and treatment</td>
<td>6%</td>
</tr>
<tr>
<td>Other</td>
<td>12%</td>
</tr>
</tbody>
</table>
Think back to when you first started getting care on your own as an adult...what were the main types of health you needed back then:

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>An annual exam</td>
<td>49%</td>
</tr>
<tr>
<td>A pap test</td>
<td>47%</td>
</tr>
<tr>
<td>Birth control</td>
<td>42%</td>
</tr>
<tr>
<td>A breast exam</td>
<td>22%</td>
</tr>
<tr>
<td>Prenatal care</td>
<td>14%</td>
</tr>
<tr>
<td>STD testing and treatment</td>
<td>10%</td>
</tr>
<tr>
<td>Immunizations, like HPV</td>
<td>8%</td>
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</tr>
<tr>
<td>Care for ongoing health issues like diabetes or asthma</td>
<td>6%</td>
</tr>
<tr>
<td>Mental health care</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

Of the services women 18-44 received when they first started getting care as an adult, these are the MOST important:

- Birth control (32%)
- Annual exams (30%)
- Pap test (14%)
- Prenatal care (9%)
For 4 in 10 women in this study, their first provider as an adult was an OB/GYN. Focus group insights suggest that birth control is the reason many young women go to an OB/GYN provider initially. For some, establishing a relationship with a family practice or internal medicine provider in their early 20s seemed less urgent than finding an OB/GYN because they were healthy and young.

First provider?
4 in 10 women ages 18-44 (41%) say that when they first started receiving care on their own as an adult back in their late teens and early 20s, their first provider was an OB/GYN.

From the focus groups...
Thinking back to when they first sought care in their late teens and early 20s, many women in the groups said they went to an OB/GYN provider initially just for birth control but then it expanded to testing for STDs, pap tests, discussing plans for having children, and more as their needs changed. Many said at this stage in their life they did not see a family practice/internal medicine provider – they were healthy and if they became sick, they could just go to a “minute clinic” or find a provider as needed.

My OB/GYN works with me wherever I am in my life... in a year from now, I might be married, wanting children.
Latina 18-44
From the focus groups, it is clear that women in this age group view their relationship with their OB/GYN provider as unique, confidential, and close. They say the intimacy of the care leads to open, trusting conversations that many women say they would only have with their OB/GYN.

Because I am more comfortable with her [my OB/GYN], things come up... I didn’t know I had gallstones until she told me. She said I should go to the hospital... so I dropped my primary care doctor.

African American woman 18-44

It’s the most intimate area of my life... if they can be open, non-judgmental, I can say the most intimate things to this doctor.

Latina 18-44

From the focus groups...

To the right is a word cloud from the six focus groups. Women in these groups were asked how they want to feel with their providers. The words they use most often – such as “comfortable” – are the same words many use when describing their relationship with their OB/GYN.
The majority of women ages 18-44 report they are more likely to be open and honest with OB/GYN providers than with internal medicine providers. They say that OB/GYNs do a better job than other providers in knowing their bodies and concerns as women. They also value their OB/GYN providers’ ability to talk with them about birth control and planning for a family.

Which type of provider are you more likely to be open and honest with?

- **OB/GYN** 56%
- **Family Practice/Internist** 40%
- **DK/REF** 4%

In general, do you think OB/GYN providers do a better job, a worse job, or about the same job as other providers when it comes to...

<table>
<thead>
<tr>
<th></th>
<th>Better</th>
<th>Worse</th>
<th>About the Same</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding women’s bodies</td>
<td>53%</td>
<td>2%</td>
<td>31%</td>
</tr>
<tr>
<td>Understanding your concerns as a woman</td>
<td>49%</td>
<td>2%</td>
<td>34%</td>
</tr>
<tr>
<td>Talking to you about birth control</td>
<td>46%</td>
<td>2%</td>
<td>35%</td>
</tr>
<tr>
<td>Helping you plan for family/kids</td>
<td>41%</td>
<td>2%</td>
<td>36%</td>
</tr>
</tbody>
</table>
Women ages 18-44 say that their OB/GYN providers are more likely than their internal medicine providers to ask them about birth control, their intimate relationships, planning for a family, STDs and HIV. These are priority issues for young women – they value that OB/GYNs raise these issues.

I am more apt to ask [my OB/GYN] about having kids, about things that are important to me... I wouldn’t think to ask my primary care physician. They don’t (answer) those questions.

White woman 18-44

<table>
<thead>
<tr>
<th>Topic</th>
<th>OB/GYN “yes” (n=640)</th>
<th>Other Provider “yes” (n=753)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth control</td>
<td>74%</td>
<td>36%</td>
</tr>
<tr>
<td>Exercising</td>
<td>52%</td>
<td>57%</td>
</tr>
<tr>
<td>Diet or nutrition</td>
<td>50%</td>
<td>53%</td>
</tr>
<tr>
<td>Your intimate relationships</td>
<td>47%</td>
<td>23%</td>
</tr>
<tr>
<td>Planning for a family</td>
<td>46%</td>
<td>19%</td>
</tr>
<tr>
<td>Smoking</td>
<td>43%</td>
<td>39%</td>
</tr>
<tr>
<td>STDs</td>
<td>35%</td>
<td>18%</td>
</tr>
<tr>
<td>Alcohol or drug use</td>
<td>34%</td>
<td>32%</td>
</tr>
<tr>
<td>HIV</td>
<td>24%</td>
<td>12%</td>
</tr>
<tr>
<td>Mental health issues</td>
<td>21%</td>
<td>25%</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>20%</td>
<td>15%</td>
</tr>
</tbody>
</table>
Having choice and access to an OB/GYN provider are important factors for women ages 18-44 in choosing a health plan. This is relevant now because millions of uninsured young women will soon be enrolling in health plans through the new health insurance marketplaces. They will want to see information about OB/GYN participation and access when making decisions about plans.

Let’s say you were looking for a new health plan. How important would it be…

- The plan gives you a choice of OB/GYNs nearby
  - Very: 53%
  - Somewhat: 30%
  - Total: 83%

- You could see an OB/GYN without a referral
  - Very: 53%
  - Somewhat: 28%
  - Total: 81%

- Your current OB/GYN is part of the plan’s network
  - Very: 51%
  - Somewhat: 26%
  - Total: 77%

To me, my OB/GYN is just as important as my primary care doctor.

White woman 18-44
conclusions
The findings from this study show the important role that OB/GYN providers play for women ages 18-44. The key take aways are:

**OB/GYNs are a primary link to care.**
They are often the first and main provider for women ages 18-44. Many see their OB/GYN more regularly than any other kinds of providers. This makes OB/GYNs an important link to care and the health system.

The care they need at this stage of life is provided by an OB/GYN.
The services women say are most important to them are exactly the kinds of care provided by OB/GYN providers.

They are more open and honest with OB/GYNs.
Women discuss topics and reveal things about their lives and health they may only raise with an OB/GYN provider.

Lack of health coverage and having a low-income are barriers to OB/GYN care.
Uninsured women and those with incomes under $25,000 see an OB/GYN less regularly than other women.

Choice of OB/GYN providers and direct access without a referral are priorities.
When women ages 18-44 choose a health plan, these factors will weigh heavily.