Family planning provider referral, facilitation behavior, and patient follow-up for abnormal Pap smears.

OBJECTIVES: Family planning (FP) clinics are important access points for cervical cancer screening and referrals for follow-up care for abnormal Papanicolaou (Pap) smears for a substantial number of U.S. women. Because little is known about referral and facilitation practices in these clinics or client action based on referrals, we sought to determine FP provider referral and facilitation practices when seeing FP clients with abnormal Pap smear results, and FP client follow-up for abnormal Pap smears due to FP provider referrals.

METHODS: We conducted a mail survey of Medicaid-enrolled FP providers in Arkansas and Alabama, and conducted a telephone survey with a sample of FP clients of those providers responding to the provider survey.

RESULTS: Major provider factors associated with referral included rural location, health department and clinic institutional setting, large Title X practice/clinic size, and high FP clinic focus. Major factors associated with facilitation included rural location, non-physician specialty, health department and clinic institutional setting, and small Title X clinic size. Of women reporting abnormal results, 62.4% reported follow-up care. Of those who received follow-up care, 40.0% received some care and a referral from their FP provider. A major factor associated with clients...
seeking follow-up care was being told by their FP provider where to go for follow-up care. Age was a major factor associated with clients actually obtaining follow-up care.

**CONCLUSIONS:** Where follow-up care is not available at the FP site, referrals are critical and are a major factor associated with whether women seek care for the condition. Interventions to increase follow-up rates should focus on provider and system features, rather than clients.

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