

## **The Title X Family Planning Program: Providing Critical Reproductive Health Care to Millions of Women**

Title X (ten) of the Public Health Service Act was signed into law in 1970 by President Richard Nixon, with strong bipartisan support in Congress. As the first and only comprehensive federal program dedicated to the provision of family planning services nationwide, Title X is an integral component of the nation's public health infrastructure, providing critical reproductive health care to more than five million low-income women and men at over 4,500 community-based clinics across the nation.<sup>i</sup> As the economy falters, more and more individuals come to rely on Title X clinics for reproductive and preventive care.

### **Millions of Women Facing Financial Hardship Need Publicly-Funded Family Planning**

- More than 17 million women are in need of publicly supported contraceptives,<sup>ii</sup> a number that will likely grow as families continue to feel the effects of the recession.<sup>iii</sup>
- The percentage of women at risk of unintended pregnancy because of a lack of contraception has been rising, with over 10% of women now at risk for this reason.<sup>iv</sup>
- Over 3.5 million people who have incomes below the federal poverty line, which is just \$18,310 for a family of three, currently depend on Title X for family planning.<sup>v</sup> In total, Title X clinics served 5,186,267 people in 2009.<sup>vi</sup>

### **Title X Helps Prevent Unintended Pregnancies, Keeping Women and Families Healthy**

- The CDC lists family planning as one of the “ten great public health achievements” of the 20<sup>th</sup> century because it decreases infant, child and maternal deaths.<sup>vii</sup> Contraception allows women to time and space their pregnancies, which results in better health outcomes for women and children.<sup>viii</sup>
- In 2008 Title X family planning centers helped women avoid 973,000 unintended pregnancies.<sup>ix</sup> Without the services provided in Title X funded clinics, U.S. unintended pregnancy rates would be 31% higher.<sup>x</sup>

### **The Title X Program Provides Many Non-Contraceptive Preventive Health Services**

- Title X-funded clinics are required to offer a variety of services in addition to contraceptive supplies and counseling, including blood pressure evaluation, diabetes testing, breast, cervical and colorectal cancer screening and STI and HIV screening.<sup>xi</sup>
- Over one 20 year period Title X-funded clinics provided an estimated 54.4 million breast exams and 57.3 million Pap tests, resulting in the early detection of as many as 55,000 cases of invasive cervical cancer.<sup>xii</sup>

### **Publicly Funded Contraception is Cost-Effective**

- Helping women who want to avoid pregnancy do so saves money. For every public dollar from the Title X family planning and Medicaid programs invested in publicly-funded family planning clinics, the public saves \$4.02 in Medicaid-related costs alone.<sup>xiii</sup>
- In 2004, publicly funded family planning clinics, including clinics receiving Title X funds, Medicaid funds, and others, saved a total of \$4.3 billion public dollars.<sup>xiv</sup>

*With the law on your side, great things are possible.*

### **Title X-Funded Clinics are a Crucial Source of Health Care**

- Six in 10 women who receive care at a family planning center consider it their usual source of health care.<sup>xv</sup>
- Title X-funded clinics disproportionately serve minority women and men. In 2009, 20% of clients identified themselves as black; 28% identified as Hispanic or Latino.<sup>xvi</sup>
- Seventy percent of those who use Title X services have incomes below the federal poverty line (FPL) and receive services at no charge.<sup>xvii</sup> An additional 23% have incomes between 101% and 250% of FPL and receive services on a sliding fee scale.<sup>xviii</sup>

### **Title X Funds Are Not Used to Pay for Abortion**

- Federal law prohibits Title X funds from being used to provide abortion.<sup>xix</sup>
- Providers who receive funds from Title X that provide abortions with private, non-federal dollars must follow strict federal separation requirements.<sup>xx</sup> Clinics that receive Title X funding and perform abortions must pro-rate all their costs, even the cost of the waiting room, to ensure that no government funds contribute to abortion-related activities.<sup>xxi</sup>

### **The Title X Program Should Be Expanded, Not Eliminated**

- In 2009, *the Institute of Medicine recommended increasing Title X funding* so that it can “fulfill its mission and ... finance such critical supplemental services as education, outreach and counseling ...”<sup>xxii</sup>
- “Between 1999 and 2009, the total number of [people who receive Title X funded services] increased 17%.”<sup>xxiii</sup> This number is likely to continue to increase as people continue to feel the economic effects of the recession.
- Some states facing budget shortfalls have cut state funding to family planning services, increasing the number of people who must rely on Title X.<sup>xxiv</sup>

### **Voters Strongly Support Efforts Like the Title X Family Planning Program as Part of a Comprehensive Approach to Reproductive Health Issues**

- Voters’ strongly support (76%) efforts to reduce the number of unintended pregnancies in America through common-sense measures such as comprehensive sex education and access to contraception.<sup>xxv</sup>
- An overwhelming majority (73%) strongly favor making it easier for women at all income levels to obtain contraceptives.<sup>xxvi</sup>

<sup>i</sup> Christina Fowler et al., Family Planning Annual Report: 2009 National Summary 7-8 (2010), available at [http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar\\_2009\\_national\\_summary.pdf](http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar_2009_national_summary.pdf).

<sup>ii</sup> Jennifer J. Frost et al., Guttmacher Inst., Contraceptive Needs and Services, 2008 Update 3 (2010), available at <http://www.guttmacher.org/pubs/win/contraceptive-needs-2008.pdf>.

<sup>iii</sup> See Guttmacher Inst., A Real-Time Look at the Impact of the Recession on Women’s Family Planning and Pregnancy Decisions (2009), available at <http://www.guttmacher.org/pubs/RecessionFP.pdf>.

<sup>iv</sup> Nat’l Ctr. for Health Statistics, Ctrs. for Disease Control, Use of Contraception and Use of Family Planning Services in the United States: 1998-2002 (2004).

<sup>v</sup> Fowler et al., *supra* note i at 9, 21.

<sup>vi</sup> Id. at 8.

<sup>vii</sup> Ctrs. for Disease Control and Prevention, *Ten Great Public Health Achievements—United States, 1900-1999*, 48 Morbidity and Mortality Weekly Report 241-43 (1999), available at <http://www.cdc.gov/mmwr/preview/mmwrhtml/00056796.htm>.

- <sup>viii</sup> Ctrs. for Disease Control & Prevention, Dep't of Health & Human Servs., Unintended Pregnancy Prevention, <http://www.cdc.gov/reproductivehealth/UnintendedPregnancy/> (last visited March 2, 2011) (“Unintended pregnancy is associated with an increased risk of morbidity for women, and with health behaviors during pregnancy that are associated with adverse effects.”).
- <sup>ix</sup> Guttmacher Inst., Title X-Supported Family Planning Services Nationally and in Each State (Feb. 16, 2011), <http://www.guttmacher.org/media/inthenews/2011/02/16/index.html>.
- <sup>x</sup> Rachel Benson Gold et al., Guttmacher Inst., Next Steps for America’s Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System 16 (2009), available at <http://www.guttmacher.org/pubs/NextSteps.pdf>.
- <sup>xi</sup> Office of Family Planning, U.S. Dep’t of Health & Human Servs., Program Guidelines for Project Grants for Family Planning Services 21-22 (2001), available at [http://www.hhs.gov/opa/familyplanning/toolsdocs/2001\\_ofp\\_guidelines\\_complete.pdf](http://www.hhs.gov/opa/familyplanning/toolsdocs/2001_ofp_guidelines_complete.pdf).
- <sup>xii</sup> Rachel Benson Gold, Title X: Three Decades of Accomplishment 4 (Feb. 2001), <http://www.guttmacher.org/pubs/tgr/04/1/gr040105.pdf>.
- <sup>xiii</sup> Jennifer J. Frost et al., *The Impact of Publicly Funded Family Planning Clinic Services on Unintended Pregnancies and Government Cost Savings*, 19 J. Health Care for the Poor & Underserved 778, 778 (2008), available at [http://www.guttmacher.org/pubs/09\\_HPU19.3Frost.pdf](http://www.guttmacher.org/pubs/09_HPU19.3Frost.pdf).
- <sup>xiv</sup> Id. at 789.
- <sup>xv</sup> Rachel Benson Gold et al., *supra* note xii, at 4.
- <sup>xvi</sup> Fowler et al., Family Planning Annual Report: 2009 National Summary 9, 12 (2010), available at [http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar\\_2009\\_national\\_summary.pdf](http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar_2009_national_summary.pdf).
- <sup>xvii</sup> Id. at 21.
- <sup>xviii</sup> Id.
- <sup>xix</sup> 42 U.S.C. § 300a-6 (2011) (“None of the funds appropriated under this subchapter shall be used in programs where abortion is a method of family planning.”)
- <sup>xx</sup> Provision of Abortion-Related Services in Family Planning Services Projects, 65 Fed. Reg. 41,281, 41,282 (July 3, 2000).
- <sup>xxi</sup> Id.
- <sup>xxii</sup> Inst. of Med., Report Brief: A Review of the HHS Family Planning Program: Mission, Management, and Measurement of Results 2 (2009).
- <sup>xxiii</sup> Fowler et al., Family Planning Annual Report: 2009 National Summary 8 (2010), available at [http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar\\_2009\\_national\\_summary.pdf](http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar_2009_national_summary.pdf).
- <sup>xxiv</sup> E.g. Kerry Grens, *Family Planning Services Cut Back*, WHYY, Sept. 24, 2010, available at <http://whyy.org/cms/news/health-science/2010/09/24/family-planning-services-cut-back/46548> (discussing elimination of New Jersey family planning funding; noting that clients are referred to federally-funded clinics); see also Mike Dennison, *Budget Panel Chops Tobacco-Prevention Funds*, *Family Planning*, Billings Gazette, Jan. 31, 2011, available at [http://billingsgazette.com/news/state-and-regional/montana/article\\_e736882-8980-5187-81bf-e4b0f91f4ce1.html](http://billingsgazette.com/news/state-and-regional/montana/article_e736882-8980-5187-81bf-e4b0f91f4ce1.html) (discussing Montana’s cuts to family planning).
- <sup>xxv</sup> Research conducted by Peter D. Hart Research Associates on behalf of the National Women’s Law Center and Planned Parenthood Federation of America, 2007.
- <sup>xxvi</sup> Id.