

Title X Family-Planning Services: Fast Facts

Title X (ten) of the Public Health Service Act is the cornerstone of the federal domestic family-planning program: It is the only federal program exclusively dedicated to family planning and reproductive-health services. It was enacted with broad bipartisan support in 1970: one of the chief co-sponsors of the bill was then-Rep. (subsequently President) George H.W. Bush,¹ and it was signed into law by then-President Richard Nixon.

What services does the Title X family-planning program provide?

- Title X provides voluntary, confidential reproductive-health services, including educational services and nondirective counseling on abstinence and contraceptive methods.²
- Federal law *prohibits* any Title X money from being used for abortion care.³
- Besides providing contraceptive methods, counseling and education, Title X family-planning clinics offer many other reproductive-health services, including: screening for breast cancer, cervical cancer, and sexually transmitted diseases (STDs); Pap tests; breast and pelvic exams; hypertension and blood pressure measurement; as well as prenatal, postpartum and well-baby care.⁴
- The Title X program also sponsors continuing-education programs for family-planning clinicians each year. In addition, the program maintains a clearinghouse for information and educational materials on family planning and reproductive health, and supports a research program which focuses on family-planning service delivery improvements.⁵

Who receives care at Title X clinics?

- Each year, approximately 5 million young and low-income women and men receive basic health care through the 4,500 clinics nationwide receiving Title X funds.⁶ Grants are administrated through state health departments or regional umbrella agencies which subcontract to local agencies.
- Most Title X patients are low-income women who are uninsured and ineligible for Medicaid. No one can be refused services based on their inability to pay. Women with incomes at or below the poverty level receive fully subsidized services; women with incomes over 100 but less than 250 percent of the poverty level are charged on a sliding scale; and women with incomes over 250 percent of poverty must be charged full fees.⁷

- For many women, particularly those who cannot afford private health insurance and who do not qualify for Medicaid, Title X clinics provide their only source of basic health care.⁸ In fact, six in 10 women who receive services at a publicly funded family-planning center consider it their primary source of medical care.⁹
- The Title X program provides an important source of affordable health care for women of color, who disproportionately work in low-wage jobs that do not offer benefits. Twenty percent of all Title X clients are black and 28 percent identify as Hispanic or Latino, although blacks and Hispanics/Latinos make up 13 and 16 percent of the population respectively. (Overall, 60 percent of Title X clients are classified as white; the percentages total more than 100 because some clients self-identify as Latino in regard to ethnicity but as white in terms of race.)

Access to contraceptive services is central to improving women's overall health and reducing unintended pregnancy:

According to the Guttmacher Institute:

- Contraceptive services at Title X centers annually prevent 973,000 unintended pregnancies, which would result statistically in 433,000 unplanned births, 406,000 abortions, and 134,000 miscarriages.¹³
- In the absence of publicly funded family planning, the number of abortions each year in the United States would be 34 percent higher than it currently is.¹⁴
- In fact, from 1980 to 2000, Title X clinics helped women prevent nearly 20 million unintended pregnancies, nine million of which would have ended in abortion.¹⁵

Publicly funded contraceptive services also significantly reduce rates of unintended pregnancy and abortion among young people:

According to the Guttmacher Institute:

- Without these services an additional 390,000 teenagers would become pregnant each year, increasing unintended teen pregnancies by 60 percent. Of these young women, 200,000 would give birth, and 130,000 teenagers would have abortions, an increase of 65 percent.¹⁶
- Since 1981, Title X-funded clinics have prevented more than 5.5 million adolescent pregnancies, which would have resulted in more than two million births and two million abortions for minors.¹⁷
- Despite new evidence of a recent increase, in general the national teen-pregnancy rate has dropped dramatically since the early 1990s.¹⁸ While many strategies have been undertaken in a 20-year effort to prevent teen pregnancy, research shows that 80 percent of the decline in teen-pregnancy rates from 1990-2000 was due to increased contraceptive use.¹⁹

Other benefits of the Title X program:

- It helps prevent the spread of STDs: Title X funds are used to perform vital STD screening and treatment. In 2009 alone, Title X clinics performed 6.6 million tests for STDs including HIV.²⁰
- It helps women deliver healthier babies: By helping women plan their pregnancies, publicly funded contraceptive services prevented 20,000 occurrences of low-birth-weight births and 12,000 neonatal and infant deaths between 1982 and 1988.²¹
- It positively affects women's lives and saves taxpayer dollars: A socially responsible and fiscally sound reproductive-health-care policy requires that affordable, safe and effective contraceptive care be available. Every government dollar spent on contraceptive services saves an average of \$3.74 in Medicaid-related costs.²²

By providing women access to family-planning services, Title X gives women real choices over their reproductive lives, providing a realistic and effective mechanism to reduce unintended pregnancy and make abortion less necessary. However, anti-choice lawmakers in Congress have repeatedly attempted to defund the program and restrict minors' access. Furthermore, under anti-choice control for 12 years, Congress chronically failed to provide adequate funding levels for Title X. Had the program simply kept pace with inflation since 1980, earning no other increases, it would now be funded at more than \$700 million; instead, it receives \$300 million.

Recent Congressional Action

FY'11

- February 1, 2010: President Obama proposes \$327 million for the Title X family-planning program in his FY'11 budget request a \$10 million increase from the FY'10 funding level.
- July 15, 2010: House Appropriations Subcommittee on Labor, Health and Human Services, and Education passes the FY'11 spending bill. The bill includes \$327 million for the Title X family-planning program, the same amount as the president's budget request and a \$10 million increase over the FY'10 funding level.
- July 27, 2010: Senate Appropriations Subcommittee on Labor, Health and Human Services, and Education passes the FY'11 spending bill. The bill includes \$327 million for the Title X family-planning program, the same amount as the president's budget request and a \$10 million increase over the FY'10 funding level.
- July 29, 2010: Senate Appropriations Committee passes the FY'11 spending bill. The bill includes \$327 million for the Title X family-planning program.
- February 19, 2011: House passes a spending bill intended to fund government programs through the end of the fiscal year; the legislation eliminates all funding for the Title X account and bars Planned Parenthood from receiving any federal funding, including family-planning grants. The bill fails in the Senate, and Congress passes several short-term

- continuing resolutions over the next several months to avert a government shutdown.
- April 14, 2011: House and Senate pass a continuing resolution for the remainder of FY'11.
 The bill includes \$300 million for Title X, a \$17 million reduction, but avoids imposing the restrictive Planned Parenthood funding ban.
- April 15, 2011: President Obama signs the bill into law P.L. 112-10.²³

FY'12

- February 14, 2011: President Obama proposes \$327 million for the Title X family-planning program in his FY'12 budget request a \$27 million increase from the FY'11 funding level.
- September 21, 2011: Senate Appropriations Committee passes the FY'12 Labor, Health and Human Services, and Education spending bill. The bill level funds the Title X familyplanning program at \$300 million.
- September 29, 2011: House Appropriations Committee proposes an FY'12 Labor, Health and Human Services, and Education spending bill which eliminates all funding for Title X.

January	1,	2012)
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Notes

¹ Region VIII Family Planning Training Center. *About Title X Family Planning, at* http://www.region8familyplanning.org/titleXFamilyPlanning.htm (last visited Oct. 18, 2011).

- ⁴ Office of Population Affairs (OPA), U.S. Department of Health and Human Services (HHS), *Program Guidelines for Projects for Family Planning Services* (2001) *at* http://www.hhs.gov/opa/title-x-family-planning/title-x-policies/program-guidelines/2001-ofp-guidelines-complete.html.
- ⁵ Office of Population Affairs. *Family Planning, at* http://www.hhs.gov/opa/familyplanning/index.html (last visited Oct. 18, 2011).
- ⁶ Office of Population Affairs. *Family Planning, at* http://www.hhs.gov/opa/familyplanning/index.html (last visited Oct. 18, 2011).
- ⁷ A minor seeking confidential services is eligible based on her income and not that of her parents. AGI, *Issues in Brief: Title X and the U.S. Family Planning Effort*, at 2 & 4; *see also* 45 Fed. Reg. 108 (1980) (codified at 42 C.F.R. § 59.5(7), (8), § 59.2).
- ⁸ Cynthia Dailard, *Challenges Facing Family Planning Clinics and Title X*, GUTTMACHER REP. ON PUB. POL'Y, April. 2001, at 8.

² Bureau of Community Health Services (BCHS), U.S. Department of Health and Human Services (HHS), *Program Guidelines for Project Grants for Family Planning Services* 9-15 (1981).

³ 42 U.S.C.A. § 300a-6.

- ⁹ Rachel Benson Gold et al., *Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System* at 4 (2009) *at* http://www.guttmacher.org/pubs/NextSteps.pdf
- ¹⁰ Kaiser Family Found., *Women's Health Care Chartbook: Key Findings from the Kaiser Women's Health Survey*, at 14 (May 2011) *at* http://www.kff.org/womenshealth/upload/8164.pdf.
- ¹¹ Research Triangle Institute (RTI), *Family Planning Annual Report*, 2008, at 15(Nov. 2009). *at* http://www.hhs.gov/opa/familyplanning/toolsdocs/fpar_2008_natl_summ.pdf
- ¹² U.S. CENSUS BUREAU. " USA Quick Facts at http://quickfacts.census.gov/qfd/states/00000.html (last visited Oct. 19, 2011)...
- ¹³ Jennifer J. Frost et al., Guttmacher Institute (GI), Contraceptive Needs and Services: National and State Data, 2008 Update (2010) at http://www.guttmacher.org/pubs/win/contraceptive-needs-2008.pdf (last visited Oct. 18, 2011).
- ¹⁴ GI, In Brief: Facts on Publicly Funded Contraceptive Services in the United States (2011) at http://www.guttmacher.org/pubs/fb_contraceptive_serv.pdf (last visited Oct. 18, 2011).
- ¹⁵ Rachel Benson Gold, *Title X: Three Decades of Accomplishment*, GUTTMACHER REP. ON PUBLIC POL'Y, Feb. 2001, at 5.
- ¹⁶ Rachel Benson Gold et al., Next Steps for America's Family Planning Program: Leveraging the Potential of Medicaid and Title X in an Evolving Health Care System at Figure 2.4 (2009) at http://www.guttmacher.org/pubs/NextSteps.pdf
- ¹⁷ Rachel Benson Gold, *Title X: Three Decades of Accomplishment*, GUTTMACHER REP. ON PUBLIC POL'Y, Feb. 2001, at 7.
- ¹⁸ Press Release, GI, U.S Teenage Pregnancy Rate Drops for 10th Straight Year (Feb. 19, 2004).
- ¹⁹ Rebekah Saul, *Teen Pregnancy: Progress Meets Politics*, GUTTMACHER REP. ON PUBLIC POL'Y, June 1999, at 7.
- ²⁰ Research Triangle Institute (RTI), *Family Planning Annual Report*, 2009, at 42 and 44 (Nov. 2010). *at* http://www.hhs.gov/opa/pdfs/fpar-2009-national-summary.pdf
- ²¹ GI, Issues in Brief: The U.S. Policy Can Reduce Cost Barriers to Contraception, at http://www.guttmacher.org/pubs/ib_0799.html (last visited Oct. 18, 2011).
- ²² Jennifer J. Frost et al., GI, Contraceptive Needs and Services: National and State Data, 2008 Update at 3(2010) at http://www.guttmacher.org/pubs/win/contraceptive-needs-2008.pdf (last visited Oct. 18, 2011).
- ²³ P.L. 112-10, 112th Cong. (2011).