

<u>Title X: Proven Effective at Improving Public Health and Saving Taxpayer Dollars</u>

For over 40 years, family planning services and supplies provided through Title X-funded health centers have prevented unintended pregnancies—nearly half of which would have likely ended in abortion—improved public health and *saved billions* in taxpayer dollars.

- Unintended pregnancy costs U.S. taxpayers approximately \$11 billion a year. Without publicly funded family planning services, these costs would be 60 percent higher.
- In 1999, the *U.S. Centers for Disease Control and Prevention* (CDC) called family planning *one of the ten great public health achievements of the twentieth century*. Access to family planning has altered the social and economic roles of women, prevented unintended pregnancies and the transmission of sexually transmitted diseases, including HIV/AIDS, and decreased infant, child and maternal deaths. iii
- The U.S. Department of Health and Human Services' (HHS) *Healthy People 2020* report, which provides science-based, 10-year national objectives for improving the health of all Americans, includes family planning in its objectives, stating, "For many women, a family planning clinic is their entry point into the health care system and is considered to be their usual source of care. This is especially true for women with incomes below 100 percent of the poverty level, women who are uninsured, Hispanic women, and black women."^{iv}
- In 2009, the non-governmental *Institute of Medicine* assessed the Title X program, and found not only that "Title X is a valuable program that successfully serves its target audience," but that funding should be "increased so the program can meet its statutory responsibility to provide family planning services to those who cannot obtain them through other sources."
- A 2005 government review by the *White House Office of Management and Budget* (OMB) confirmed that Title X's overall purpose, design and management are strong. The OMB review also concluded that "Women who utilize Title X . . . services as their primary source of health care have significantly greater odds of receiving contraceptive services and/or care for sexually transmitted diseases (STDs) than women who utilize private physicians or HMOs."

- Family planning services at Title X-funded health centers helped prevent 973,000 unintended pregnancies in 2008, which would likely have resulted in 432,600 unintended births and 406,200 abortions. vii
- Title X-funded services produce significant cost savings to the federal and state governments; services
 provided at Title X-supported clinics accounted for \$3.4 billion in such savings in 2008 alone.
- For every public dollar invested in family planning care, nearly \$4 in Medicaid expenditures are averted.^{ix}

Cutting Title X funding would harm millions of low-income and poor families across the country, in turn costing, not saving, the federal government money. Congress must protect funding for this essential, cost-effective program that improves public health.

Sonfield, A., Kost, K., Gold, R., & Finer, L., "The Public Costs of Births Resulting from Unintended Pregnancies: National and State-Level Estimates, Perspectives on Sexual and Reproductive Health," Guttmacher Institute, 43 (2): 94-102 (June 2011). Available online at http://www.guttmacher.org/pubs/psrh/full/4309411.pdf.

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iii Centers for Disease Control and Prevention, *Ten Great Public Health Achievements -- United States, 1900-1999*, Morbidity and Mortality Weekly Report (April 2, 1999). Available online at http://www.cdc.gov/mmwr/preview/mmwrhtml/00056796.htm.

iv Healthy People 2020. Available online at http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=13.

^v Institute of Medicine, *A Review of the HHS Family Planning Program: Mission, Management, and Measurement of Results*. Washington, DC: The National Academies Press, 2009.

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vii Frost, JJ., Henshaw, SK., & Sonfield, A. (2010, May). Contraceptive Needs and Services: National and State Data, 2008 Update. New York, NY: Guttmacher Institute.

viii Frost, J.J., Finer, LB., & Tapales, A. (2008). The impact of publicly funded family planning clinic services on unintended pregnancies and government cost savings. Journal of Health Care for the Poor and Underserved, 19(3):778–796.