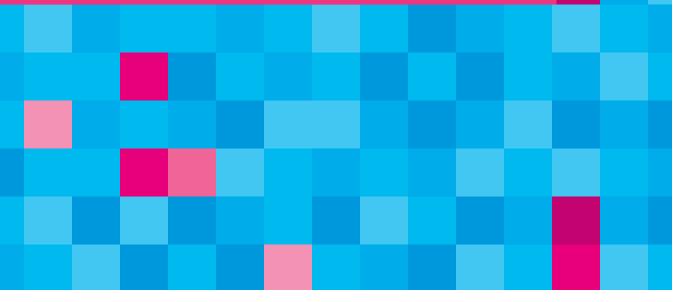
## **POLICYLAB**

RESEARCH AT A GLANCE | FALL 2022 A SYNOPSIS OF EMERGING POLICYLAB RESEARCH

EVALUATING
ADOLESCENT ACCESS
TO CONFIDENTIAL
FAMILY PLANNING
SERVICES FOLLOWING
CHANGES TO
TITLE X FUNDING
REGULATIONS





## WHAT IS THE PROBLEM:

Rule changes to the federal Title X program in 2019 forced many clinics to leave the program. In states where there were not superseding state-level protections, this impacted access to confidential family planning services for adolescents.

Federal funding for family planning services is administered through the Title X program, which serves more than 3.1 million patients per year with an annual budget of over \$285 million. All minors seeking care at a Title X-funded clinic are legally allowed to access confidential services without a parent or guardian, including testing for sexually transmitted diseases, contraception and pregnancy counseling. This confidentiality protection is a critical feature of the Title X program, as decades of research have reinforced that adolescents who are assured confidentiality during health care encounters are more likely to obtain appropriate sexual and reproductive services.  $^{3-6}$ 

In May 2019, the federal government enacted new rules regarding Title X funding. These rules required any clinic accepting Title X funds to be physically and financially separated from abortion services and prohibited Title X-funded clinics from discussing or referring patients for abortions. As a result of these rule changes, many clinics—including almost all Planned Parenthood clinics—were forced to leave the Title X program in 2019.

Clinics that left the program no longer benefited from the unique Title X legal protections permitting them to offer confidential services to minors; thus, they had to defer to state laws regarding minor consent and confidentiality. The majority of states do not allow all minors to consent to contraceptive services or guarantee the confidentiality of minors receiving these services—only 19 states and Washington, D.C. maintain these rights for minors.

# WHAT WE ASKED:

How did minors' access to confidential family planning services change across the U.S. after the 2019 Title X rule change?

What were the characteristics of census tracts most likely to lose access to confidential family planning care after the rule change?

## WHAT WE DID:

We identified and characterized clinics participating in the Title X program before (2018) and after (2020) the rule change. For each clinic, we determined whether they were a Planned Parenthood affiliate, Federally Qualified Health Center (FQHC) or a crisis pregnancy center.

We then looked at every U.S. census tract and asked if adolescents in that tract lost, gained, or maintained access to legally protected confidential family planning care after the Title X rule change. We defined access to confidential family planning care based on presence of state laws protecting youth confidentiality in seeking contraceptive care *or* access to a Title X-funded clinic within a 30-minute drive.

## WHAT WE FOUND:

## After the 2019 Title X rule change:



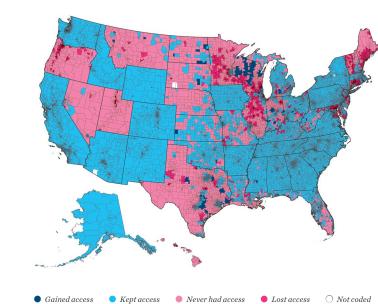
# 8.7%

of census tracts lost access to legally guaranteed confidential family planning care.



# 15

states had more than 25% of youth ages 15–17 who did not have access to confidential family planning care, as compared to 6 states prior to the rule change.



Characteristics of youth who lost access to confidential family planning care after the 2019 rule change:



Youth living in the Midwest were more than two times more likely to lose access than youth in the Northeast.



Youth in rural areas were more likely to lose access than youth living in urban settings.



Youth living in relatively less affluent and more diverse census tracts were less likely to lose access than their peers in more affluent and less diverse census tracts.

# 1.8M+

youth aged 15–17 did not have access to legally guaranteed confidential family planning care as of 2020.

# **WHAT IT MEANS:**

Youth across the U.S. faced significant decreases in access to confidential family planning care after the 2019 Title X rule change.

Youth living in the Midwest and in rural areas were disproportionately affected by the rule change.

While the 2019 Title X rule change has since been reversed by the Biden administration, future changes to the Title X program may again put adolescents' health and well-being at risk.

## STUDY METHODS

Title X-funded entities in August 2018 and August 2020 were identified and geocoded based on publicly available Office of Population Affairs documents. We further classified clinics based on Federally Qualified Health Center designation, Planned Parenthood affiliation and identification as a crisis pregnancy center.

U.S. census tracts were then evaluated for the availability of confidential family planning care for minors within a 30-minute drive time, based on presence of a Title X clinic or state legislation allowing all minors of a certain age to consent to contraceptive services and guaranteeing the confidentiality of minors receiving these services. Logistic regression evaluated associations between census tract characteristics, determined using the 2015–2019 American Community Survey, and the odds of losing versus maintaining access to legally protected confidential minor services.

### **RELATED POLICYLAB WORK**

Akers A, Dowshen N, Mollen C, Wood S. Investing in America's Adolescents: Why the Distribution of Title X Funds Matters. PolicyLab. May 23, 2018. <a href="https://policylab.chop.edu/blog/investing-americas-adolescents-why-distribution-title-x-funds-matters">https://policylab.chop.edu/blog/investing-americas-adolescents-why-distribution-title-x-funds-matters</a>

## **PUBLICATION**

 $Krass\,P,\,Tam\,V,\,Min\,J,\,et\,al.\,Adolescent\,Access\,to\,Federally\,Funded\,Clinics\,Providing\,Confidential\,Family\,Planning\,Following\,Changes\,to\,Title\,X\,Funding\,Regulations.\,\\ \textit{JAMA Netw Open.}\,\,2022;5(6):e2217488.\,\underline{doi:10.1001/jamanetworkopen.2022.17488}$ 

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The mission of PolicyLab at Children's Hospital of Philadelphia (CHOP) is to achieve optimal child health and well-being by informing program and policy changes through interdisciplinary research. PolicyLab is a Center of Emphasis within the Children's Hospital of Philadelphia Research Institute, one of the largest pediatric research institutes in the country.

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