The Title X Family Planning Program is the only federal program dedicated solely to the provision of family planning and related preventive health services. Each year, the Family Planning Annual Report (FPAR) provides national-level data on the Title X Program and the clients who use its services.

### ABOUT TITLE X

A network of public and private nonprofit health and community service agencies deliver Title X services.

- **$286.5 million** Title X program funding
- **99 grants awarded**
  - 49 state and local health departments
  - 50 nonprofit family planning and community health agencies
- **3,954 service sites** in 50 states, the District of Columbia, and eight U.S. territories and Freely Associated States (American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, Guam, Puerto Rico, Republic of the Marshall Islands, Republic of Palau, and the U.S. Virgin Islands)

### WHO TITLE X SERVED

Providers served a vulnerable population, most of whom are female, low income, and young.

- 3.9 million family planning clients seen through 6.5 million family planning encounters
- Nearly 9 of every 10 clients (87%) were female
- Two-thirds (63%) were under 30
- 53% identified themselves as white; 22% as black or African American; 4% as Asian; 1% as either Native Hawaiian or Other Pacific Islander; and 1% as American Indian or Alaska Native
- One-third (33%) identified themselves as Hispanic or Latino
- 13% had limited English proficiency
- 65% had family incomes at or below the poverty level ($25,100 for a family of four in the 48 contiguous states and Washington, DC)
- 3.5 million (89%) qualified for either subsidized or no-charge services

Providers delivered male-focused family planning and reproductive health services to a growing number of male clients.

- 13% (493,245) of all Title X clients were men, a number that has increased by 50% since 2008
- Most male clients were in their 20s (42%) or 30s (23%)
Title X providers offer clients a broad range of effective and medically safe contraceptive methods approved by the U.S. Food and Drug Administration.

79% (2.7 million) of all female clients adopted or continued use of a most, moderately, or less effective method of contraception at exit from their last encounter.

- 19% of all female clients are using a most effective contraceptive method: female sterilization, implant, IUD, or rely on male vasectomy
- 41% used a moderately effective method: injectable contraception, vaginal ring, contraceptive patch, pills, diaphragm, or cervical cap
- 18% used a less effective method: male condom, female condom, sponge, withdrawal, a fertility awareness-based method, or spermicide used alone
- 8% did not use a contraceptive method because they were pregnant or seeking pregnancy

FEMALE CONTRACEPTIVE METHODS

The pill was the preferred method of 24% of all female clients, followed by male condoms (15%), injectable contraception (14%), IUDs (9%), hormonal implants (7%), female sterilization (3%), the vaginal ring (2%), and the contraceptive patch (1%).

MALE CONTRACEPTIVE METHODS

Nearly two-thirds of all male clients used male condoms (62%), followed by reliance on a female method (7%), withdrawal (3%), or vasectomy (1%).

SCREENING AND PREVENTIVE HEALTH SERVICES

Title X-funded STD and HIV screening services prevent transmission and adverse health consequences.

Clinics performed:
- 2,142,561 chlamydia tests
- 2,376,993 gonorrhea tests
- 1,237,968 confidential HIV tests
  ▶ Of the confidential HIV tests performed, 2,699 were positive for HIV
- 752,288 syphilis tests

Title X-funded cervical and breast cancer screenings contribute to early detection and treatment.

Title X clinics:
- Conducted Papanicolaou (Pap) testing on 18% (625,808) of female clients, and 14% of Pap tests conducted by Title X providers had an abnormal result
- Performed clinical breast exams on 24% (816,202) of female clients, and referred 6% of females for further testing based on the findings from their exam

For more information about FPAR and the Title X Program, please visit www.hhs.gov/opa.