

Family Planning Clinics Prevent 1.4 Million Unplanned Pregnancies Annually, Save Billions of Government Dollars

In 2004, publicly funded family planning clinics in the United States helped women and couples avoid more than 1.4 million unintended pregnancies, an estimated 600,000 of which would have ended in abortion. Without publicly subsidized clinics, the U.S. unintended pregnancy rate would be 46% higher, and the abortion rate would be 49% higher, than the most recent national estimates, according to a Guttmacher Institute study published in the *Journal of Health Care for the Poor and Underserved* in August 2008. Unintended pregnancies would be 68% more common among poor women.

The study—the first of its kind in a decade and the first ever to look exclusively at the impact of clinic-based services—estimates the impact of such services at both the

federal and state levels. After modeling a range of potential scenarios, the study predicts that if subsidized clinic services were cut off completely, one-quarter of today’s clinic clients would stop using contraceptives entirely and a similar number would shift from methods such as oral contraceptives and the injectable to the less-reliable condom, the only major over-the-counter contraceptive available. These changes would translate into an additional 242 unplanned pregnancies per year for every 1,000 women losing subsidized clinic services. That adds up quickly, as clinics serve nearly seven million women annually.

The vast majority of those women are low-income, young or both: Nearly 300,000 of the unplanned pregnancies averted each year with the aid of publicly funded clinics would have been to teenagers, and one million would have been to women with incomes under 200% of the federal poverty level (see chart). Clinics receiving funds under the Title X family planning program, which is dedicated to serving these populations of women, account for seven in 10 of the clients served and the unplanned pregnancies averted. Women served at Title X–supported clinics are especially likely to be uninsured and are particularly vulnerable to the negative social, economic and health consequences of an unplanned birth (related article, page 6).

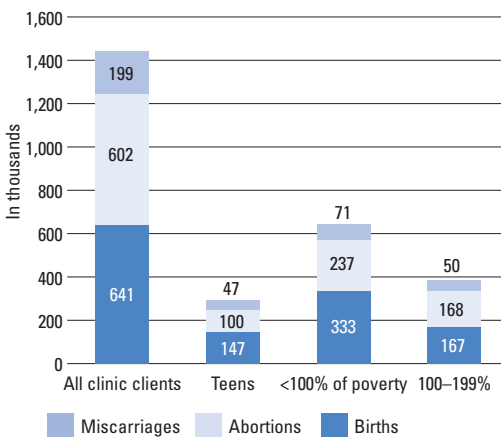
In addition to the clear benefits for individual women and couples in helping them plan and space their families, publicly funded clinic serv-

ices afford considerable fiscal benefits to federal and state governments—\$4.3 billion in savings in a single year. Indeed, for every dollar spent, the government saves \$4.02. These estimated savings come from avoiding the public-sector costs for maternal and infant care that would otherwise result from births women had wanted to avoid, more than nine in 10 of which would have been to women eligible for pregnancy-related coverage under Medicaid. Notably, the study does not attempt to measure the health or fiscal benefits that result from other services provided routinely by clinics, such as STI prevention, testing and treatment or screening for breast and cervical cancer (related article, page 19). Nor does the study include the impact of Medicaid-funded family planning services provided by private physicians outside of the clinic setting.

The new research bolsters the case for additional funding for Title X and for family planning services under Medicaid. According to a 2006 Guttmacher study, each \$20 million increment in new funding for Title X would help women avoid another 17,200 unintended pregnancies, including 7,000 that would end in abortion. Expanding Medicaid family planning eligibility nationwide to the income eligibility levels used for pregnant women would further reduce the rates of unplanned pregnancy and abortion by 15%, while saving an additional \$1.5 billion annually (related article, Summer 2006, page 2).—*Adam Sonfield*

REAL-LIFE IMPACT

Clinic services allow U.S. women to avert hundreds of thousands of unintended pregnancies each year—and the births, abortions and miscarriages that would follow.



Source: Guttmacher Institute, 2008.