

Legislation Text

File #: 0217X-2018, Version: 1

To Support Access to Comprehensive Reproductive Health Care through Maintaining Title X Funding for Health Centers in Columbus

WHEREAS, Title X of the federal Public Health Service Act was enacted in 1970 to fund and provide access to contraceptive care and reproductive health care for low-income, uninsured, and underinsured individuals; and

WHEREAS, in Columbus each year, approximately 10,000 patients rely on Title X funding to receive basic care such as screenings for cervical and breast cancer, screenings and treatment for STIs, testing and links to care for HIV/AIDS, infertility services, family planning and contraception services, and screening for high blood pressure, anemia, and diabetes; and

WHEREAS, the United States Secretary of Health and Human Services issued a Notice of Proposed Rulemaking on June 1, 2018, that would block certain health centers from receiving Title X funding, jeopardizing access to care for thousands of Columbus residents; and

WHEREAS, Planned Parenthood of Greater Ohio plays an important role as a Title X provider in Columbus through administering 4,512 pregnancy tests, 1,643 HIV tests, 1,493 cancer screenings, and 22,212 sexually transmitted infection tests and treatment in 2017 alone; and

WHEREAS, blocking health centers like those run by Planned Parenthood of Greater Ohio from receiving Title X funding will reduce access to reproductive health care in Columbus, making residents less healthy and damaging the financial security of families; and

WHEREAS, public investments in reproductive health like the Title X Family Planning program save seven times the investment by preventing unintended pregnancies, increasing women's participation in the labor force, and improving the financial picture for families; now, therefore

BE IT RESOLVED BY THE COUNCIL OF THE CITY OF COLUMBUS: That this Council does hereby support comprehensive access to reproductive health care through Title X funding for health centers in Columbus and oppose any changes to this funding that will reduce or eliminate access to care.