



2.2.1 ADOLESCENT SERVICES

POLICY:

Title X grantees must comply with applicable legislative mandates in the HHS appropriations act. Grantees must have written policies in place that address these legislative mandates:

- “None of the funds appropriated in the Act may be made available to any entity under Title X of the Public Health Service Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities.”
- “Notwithstanding any other provision of law, no provider of services under Title X of the Public Health Service Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”
- The Title X Statute SEC 1001(a) states, “To the extent practicable, entities which receive grants or contracts under this subsection shall encourage family participation in projects assisted under this subsection.”

Title X recipients must:

Provide adolescent-friendly health services, which are services that are accessible, acceptable, equitable, appropriate, and effective for adolescents. (42 CFR § 59.2)

To the extent practical, Title X projects shall encourage family participation. However, Title X projects may not require the consent of parents or guardians to provide services to minors, nor can any Title X project staff notify a parent or guardian before or after a minor has requested and/or received Title X family planning services. (Section 1001, PHS Act; 42 CFR § 59.10(b))

Ensure that all applicants for Title X funds certify that they encourage family participation in the decision of minors to seek family planning services. (Consolidated Appropriations Act, 2022, Pub. L. No. 117-103, 136 Stat. 49, 466 (2022))

Ensure that all applicants for Title X funds certify that they provide counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities. (Consolidated Appropriations Act, 2022, Pub. L. No. 117-103, 136 Stat. 49, 466 (2022))

No Title X services provider shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest. (Consolidated Appropriations Act, 2022, Pub. L. No. 117-103, 136 Stat. 49, 444, 466–67 (2022))

Unemancipated minors who wish to receive services on a confidential basis must be considered on the basis of their own resources. (42 CFR § 59.2)

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PROCEDURE:

Staff must provide counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities and to comply with State laws requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.

Adolescents are a priority population for Title X, and adolescent services are addressed specifically in Providing Quality Family Planning Services pgs. 38-40. [Providing Quality Family Planning Services \(hhs.gov\)](#)

Title X providers must provide counseling specific to the unique needs of adolescent clients. Family planning programs should take steps to make their services youth friendly, which means they are accessible, equitable, acceptable, appropriate, comprehensive, effective, and efficient for youth. Adolescents should be allowed to make clinic visits with short notice, same day when possible.

While research shows most adolescent clients who come to a family planning program have been sexually active for nine months to one year, some teenagers seek assistance in deciding about sexual activity.

Special attention should be given to the age of the adolescent client and the age of the client's sexual partners if such age is an element of a state notification law under which a report is required. CHAPTER 12.1-20 SEX OFFENSES [North Dakota Century Code t12.1c20 \(ndlegis.gov\)](#)

Adolescents who talk with parents (or a trusted adult) about topics relating to dating, healthy relationships, and pregnancy and STI prevention are more likely to:

- Delay initiation of sexual activity
- Use condoms or other birth control more often if they do have sex
- Have better communication with romantic partners
- Decrease the likelihood of being involved in coercive sexual relationships
- Have sex less often

Services will be provided to the adolescent regardless of whether they decide to involve a parent/trusted adult. If follow-up is necessary, every attempt must be made to assure the privacy of the adolescent. A method for contact should be established at the initial visit and reviewed at all follow-up visits.

Service sites must maintain records to demonstrate compliance with legislative mandates for this policy and document each notification or report made pursuant to such State notification laws.

Continuation of grantee or subrecipient funding for Title X services is contingent upon demonstrating to the satisfaction of the Secretary of HHS that the criteria have been met.

Required adolescent counseling must be completed and documented at every appointment. Medical records of minors must document:

- encouragement regarding family participation in their decision to seek family planning services
- counseling on how to resist attempts to being coerced into engaging in sexual activities.

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- confidentiality
- informed of mandatory reporting requirements regarding child abuse, child molestation, sexual abuse, rape, or incest

Further documentation may include:

- Use of condoms (as applicable)
- Review of methods of contraception (as applicable)
- Reproductive life planning
- Abstinence

RESOURCES:

ND FPP Policy 2.11 Compliance with Legislative Mandates

[Search | Reproductive Health National Training Center \(rhntc.org\)](#)

[RHNTC: Counseling Adolescent Clients to Resist Sexual Coercion Discussion Guide](#)

[RHNTC: Encouraging Family Participation in Adolescent Decision Making Discussion Guide](#)

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