

2023 County of Marin Fact Sheet: HIV/AIDS in Marin County



Since the first Marin County AIDS case was reported in 1982, 1,493 people have been diagnosed with HIV infection in the Marin community—618 of whom are still living (Table 1). At San Quentin State Prison (SQSP), 659 cases of HIV infection have been identified. The vast majority of people diagnosed with HIV at SQSP are no longer incarcerated there. For this reason, the demographic data presented after Table 1 do not include cases diagnosed at SQSP.

Please note: HIV/AIDS epidemiology data are from the enhanced HIV/AIDS Reporting System (eHARS) maintained by the Office of AIDS. The data presented here are cumulative through December 31, 2022 and were generated from the 2023 1st quarter Marin County dataset. Tables 1 & 3 and Figure 4 only include people who were residents of Marin County at the time of HIV diagnosis. Table 2 and Figures 1-3 describe people who have Marin County as their current residence.

Table 1. All Reported Cases of HIV infection (including AIDS), diagnosed 1981-2022

	Total Reported*	Deaths [#]	Living Cases [†]
San Quentin	659	397	262
Community	1493	875	618
Combined	2152	1272	880

* Does not include cases that were later found to be duplicates

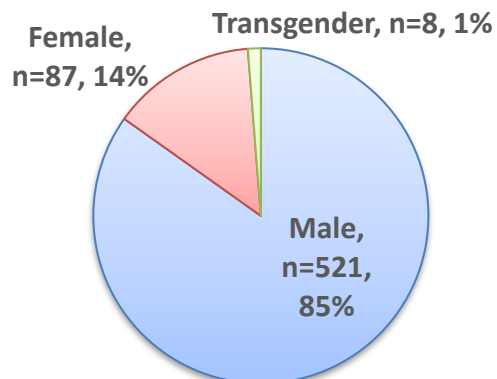
Deaths from all causes

† Includes cases of unknown vital status

Demographics of People Living with HIV Infection as of December 31, 2022, with a Current Residence in Marin County (Community only), n=616

Six hundred sixteen people living with HIV infection have a current residence in Marin County as of the end of 2022. Of these people, 85% are male (Figure 1) and over half are currently age 55 or older (Figure 2). Table 2 provides a look at race/ethnicity and a breakdown by transmission category.

Figure 1. Gender of People Living with HIV



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Figure 2. Current Age in Years of People Living with HIV Infection

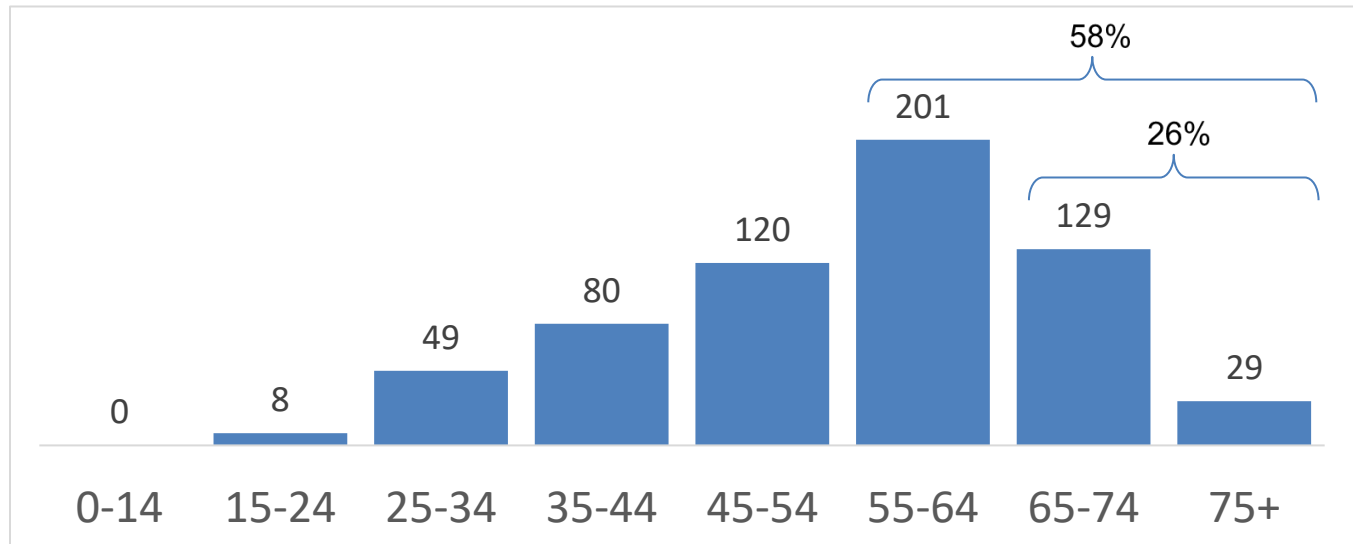


Table 2. Race/Ethnicity and Transmission Category of People Living with HIV Infection

Race/Ethnicity	Non-Hispanic White	365	59%
	Hispanic/Latino/a/x	168	27%
	Black/African American	46	7%
	Multiple Races	19	3%
	Asian	15	3%
	Native Hawaiian/Pacific Islander	3	<1%
Transmission Category	Male-Male Sexual Contact (MSM)	399	65%
	MSM & IDU	35	6%
	Injection Drug Use (IDU)	41	7%
	High-Risk Heterosexual Contact*	72	12%
	Heterosexual Contact	49	8%
	Medical** or Perinatal	5	1%
	Unknown	15	2%
Total		616	100%

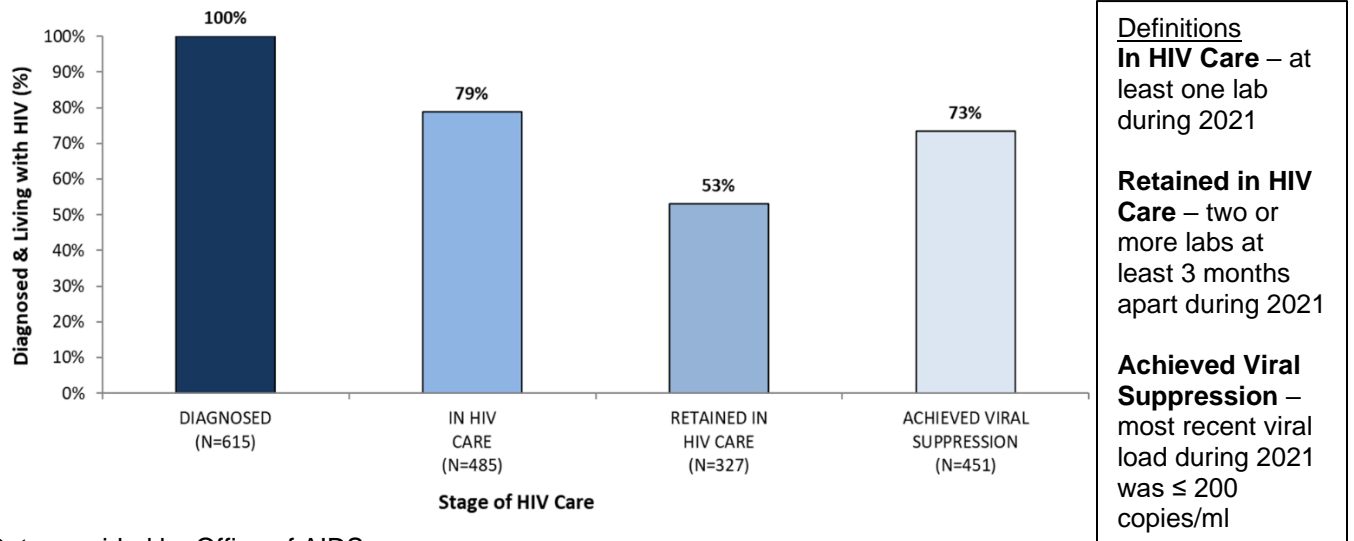
* Heterosexual sex with an injection drug user, a male who has had sex with a male, a hemophiliac, a transfusion or transplant recipient with documented HIV infection, or a person with AIDS or documented HIV infection with unspecified risk.

** Receipt of clotting factor, transfusion of blood or blood products, tissue or organ transplant, or artificial insemination.

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Figure 3. Continuum of HIV Care*, Marin County Residents#, Diagnosed & Living with HIV, 2021



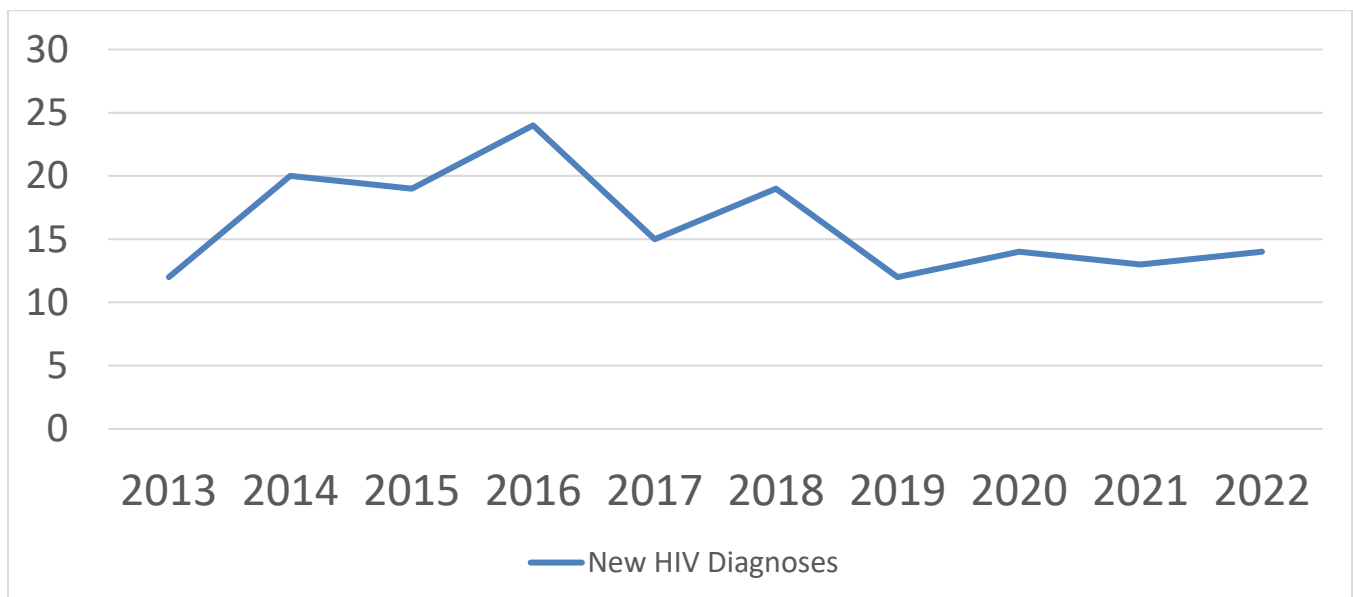
* Data provided by Office of AIDS

Residency based on 2020 year-end address; addresses in San Quentin, CA excluded as a proxy for SQSP

New Cases of HIV Infection in Marin County

Over the past ten years, Marin County averaged 16 new community HIV infection diagnoses per year.

Figure 4. New HIV Diagnoses, Marin County, 2013-2022



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Table 3. Marin County Residents Newly Diagnosed with HIV Infection in the Community

Characteristics	Year of HIV Diagnosis	2013-17		2018-22	
		#	%	#	%
Gender	Male	72	80%	62	86%
	Female	17	19%	9	13%
	Transgender	1	0%	1	1%
Age at Diagnosis	0-14	1	1%	0	0%
	15-24	12	13%	14	19%
	25-39	36	40%	33	46%
	40-54	23	26%	19	26%
	55+	18	20%	6	8%
Race / Ethnicity	Non-Hispanic White	31	34%	25	35%
	Hispanic/Latino/a/x	36	40%	34	47%
	African American/Black	11	12%	7	10%
	Other/Multiple	12	14%	6	8%
Transmission Category	Male-Male Sexual Contact (MSM)	48	53%	46	64%
	MSM & IDU	3	3%	2	3%
	Injection Drug Use (IDU)	3	3%	4	6%
	High-Risk Heterosexual Contact*	10	11%	6	8%
	Heterosexual Contact	23	26%	11	15%
	Unknown/Not Reported	3	3%	3	4%
Total		90	100%	72	100%

*Heterosexual sex with an injection drug user, a male who has had sex with a male, a hemophiliac, a transfusion or transplant recipient with documented HIV infection, or a person with AIDS or documented HIV infection with unspecified risk.

Observations

- 90 diagnoses during 2013-17 vs. only 72 during 2018-22 – overall decrease of 20%
- Instead of 1 in 4 being diagnosed with AIDS within a month of their HIV diagnosis, it's only 1 in 5 – diagnoses are happening sooner
- More males/fewer females moves the gender distribution back to what it typically has been in Marin (~ 85% males)
- Only age group with increase in count as well as % was 15-24 year olds
 - Nearly 20% of new cases are under age 25
- 55+ age group has had the largest decline
- Most race/ethnicity groups have fewer cases in line with the overall decrease
- Cases among Latino/a/x have not declined accordingly, so now almost half of new cases
 - Only 17% of population in Marin County

Community Input

Community input was gained through comments on the annual countywide client satisfaction survey. This survey is sent to all ARIES Share clients who receive mail at home (n=154), and clients are provided the option of completing the survey either by paper or online. The response rate was 48%. The respondents ranked food vouchers, emergency financial assistance, and health insurance premium and cost sharing assistance as the top three priorities.

The Care Council sponsored a community forum in May 2023 to gather additional community input on the Ryan White services provided. The forum featured presentations on behavioral health resources, resocialization, substance use, and the HIV Consumer Advocacy Project.

The Marin HIV/AIDS Care Council has been a functioning entity since 2004 and meets about every two months. H&HS continues to support the Council by working closely with the Council to prioritize and allocate Ryan White resources. The Council has been working to increase community and HIV service provider membership. The Care Council meetings are open to the public. Meeting minutes and agendas are posted and downloadable from the County website:

<https://www.marinhhs.org/boards/marin-hiv-aids-care-council>

Table 4. Demographic Composition of Marin HIV/AIDS Care Council through October 2023

		Number	%
Race/Ethnicity	Non-Hispanic White	6	55%
	Hispanic/Latino	2	18%
	African American/Black	2	18%
	Asian	0	0%
	Native Hawaiian/Pacific Islander	0	0%
	American Indian/Alaska Native	1	9%
	Multiple races	0	0%
	Other/Unknown	0	0%
Gender	Male	5	45%
	Female	6	55%
	Transgender	0	0%
Age	13-24	0	0%
	25-49	0	0%
	50+	10	91%
	Decline	1	9%
HIV Status	Positive	7	64%
	Negative	4	36%
	Undisclosed	0	0%
Total Council Membership		11	100%

Marin County's 2024-2025 Prioritization and Allocation Process

The Marin HIV/AIDS Care Council held a meeting on August 16, 2023, to conduct prioritization and allocation for 2024-2025.

Preparation

The Council received data from the following sources for review:

- 2022/23 Ryan White Annual Client Satisfaction Survey results
- 2022/23 Service Category Summary Sheets
- 2022/23 ARIES Data
- 2022 HIV/AIDS surveillance and epidemiology data in Marin County provided by Deborah Gallagher, HIV/AIDS Surveillance Epidemiologist for Marin County

Key Decisions

Eight members were present for the prioritization and allocation meeting.

- The Council made some small changes in its prioritization rankings. Emergency Financial Assistance and Medical Nutrition Therapy moved up one ranking while Health Insurance Premium Cost Sharing Assistance and Medical Transportation moved down one ranking.
- There were changes to the allocations for some of the service categories compared to the previous year. There was an increase in the Mental Health budget as there was a high need for therapy. There was also an increase in Food Vouchers to accommodate the increase from \$60 to \$80 monthly voucher per eligible client. Emergency Financial Assistance and Medical Transportation were decreased.
- The 2024/25 budget was approved unanimously.

Marin Ryan White Part A 2024/25 Allocation

Service Category	Previous Priority	New Priority Rank	24/25 Part A Allocation	% of Total Award	24/25 Part B Award
CORE SERVICES					
Mental Health	2	2	\$45,000	8.2%	
Medical Case Management	1	1	\$100,000	18.2%	\$86,944
Health Insurance Premium and Cost-Sharing Assistance	6	7	\$35,000	6.4%	
Oral Health Care	3	3			\$35,124
Outpatient/Ambulatory Health Services	9	9			\$7,932
Medical Nutrition Therapy	12	11			
SUPPORT SERVICES					
Non-Medical Case Management	4	4	\$114,000	20.8%	
Food Bank/Home-Delivered Meals	5	5	\$171,242	31.2%	\$22,476
Emergency Financial Assistance	7	6	\$56,000	10.2%	
Housing	8	8			
Medical Transportation	11	12	\$10,000	1.8%	
Psychosocial Support Services	10	10	\$16,000	2.9%	
Outreach	Not ranked	Not Ranked			\$46,981
Core Services			\$180,000	33%	
Support Services			\$367,242	67%	
TOTALS¹			\$547,242¹	100%	\$199,457²

¹Table excludes a small portion of the total award for Council support

²Does not include a portion for administrative expenses

Ryan White Part A Funding Allocation, 2020/21 through 2024/25

Service Category	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025
CORE SERVICES					
Outpatient/Ambulatory Health Services*	\$0	\$0	\$0	\$0	\$0
Mental Health	\$30,000**	\$30,000	\$25,532	\$35,532	\$45,000
Medical Case Management**	\$105,000	\$102,000	\$99,635	\$99,635	\$100,000
Oral Health Care*	\$0	\$0	\$0	\$0	\$0
Health Insurance Premium and Cost-Sharing Assistance	\$52,250	\$34,783	\$35,203	\$35,203	\$35,000
SUPPORT SERVICES					
Non-Medical Case Management	\$118,000	\$118,000	\$113,969	\$113,969	\$114,000
Emergency Financial Assistance	\$43,250	\$44,497	\$36,879	\$44,994	\$56,000
Food Vouchers**	\$78,491	\$64,492	\$97,242	\$121,242	\$113,242
Food Bank/Home-Delivered Meals	\$40,000	\$50,000	\$59,226	\$59,226	\$58,000
Psychosocial Support Services	\$25,000	\$15,000	\$25,915	\$15,915	\$16,000
Medical Transportation	\$18,250	\$17,177	\$13,410	\$21,526	\$10,000
Housing	\$28,250	\$48,543	\$40,231	\$0	\$0
TOTAL***	\$539,491	\$525,492	\$548,242	\$548,242	\$548,242

*Service categories funded entirely through Part B

**Additional funding through Part B

***Table excludes a small portion of the total award for Council support