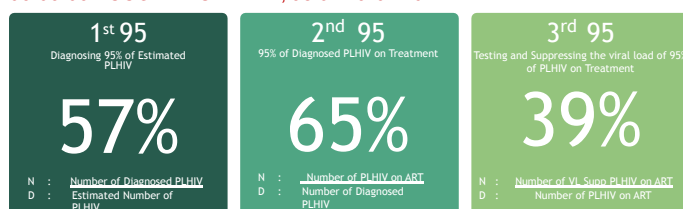




HIV & AIDS SURVEILLANCE OF THE PHILIPPINES

HIV & AIDS CONTINUUM OF CARE

95-95-95 ACCOMPLISHMENT, as of March 2024

**The 95-95-95 Targets**

The 95-95-95 by 2025 is the global targets set by the Joint United Nations Programme on HIV and AIDS (UNAIDS). The Philippines, as one of the States who committed to the "Political Declaration on HIV and AIDS: Ending Inequalities and Getting on Track to End AIDS by 2030" adopted during the General Assembly in June 2021, integrated these high-level targets in the 7th AIDS Medium Term Plan - 2023 to 2028 Philippines: Fast Tracking to 2030. It aims that by 2030, 95% of people living with HIV know their HIV status or are diagnosed, 95% of PLHIV who know their status are receiving treatment (ART), and 95% of PLHIV on ART have a suppressed viral load so their immune system remains strong, and the likelihood of their infection being passed on is greatly reduced (Undetectable=Untransmissible).

The Philippine People Living with HIV (PLHIV) Estimates

The Philippines has been using the national PLHIV estimates to determine the state and trend of the epidemic in the country, to aid programmatic response and develop strategic plans, and to monitor progress towards the 95-95-95 targets. Annually, the National HIV/AIDS & STI Surveillance and Strategic Information Unit of the Department of Health-Epidemiology Bureau leads the process of developing the PLHIV estimates, which was modeled through the AIDS Epidemic Model (AEM) and Spectrum. The latest PLHIV estimates were updated in May 2023 with analyzed and triangulated data from the 2022 HIV/AIDS & ART Registry of the Philippines (HARP), 2018 Integrated HIV Behavioral and Serologic Surveillance (IHBS), 2019 and 2020 Online Survey among Males having Sex with Males and Transgender Women (MSM & TGW), 2019 Facility-based Survey, 2022 Laboratory and Blood Bank Surveillance (LaBBS), 2020 Population Census, and other program data. Further, the development of PLHIV estimates underwent a comprehensive consultation, validation, and vetting process with technical experts from EastWest Center, UNAIDS, WHO, and key national, regional, and local program implementers and stakeholders. Previously released estimates in May 2022 were based on the IHBS 2018, HARP December 2020, and Population Census 2015.

Diagnosed PLHIV

The total number of diagnosed or laboratory-confirmed HIV cases reported in the HIV/AIDS Registry who are currently alive or not yet reported to have died.

PLHIV on ART

A PLHIV who is currently on ART defined as visited the facility for an ARV refill or accessed ARV refill, and has not run-out of pill for 30 days.

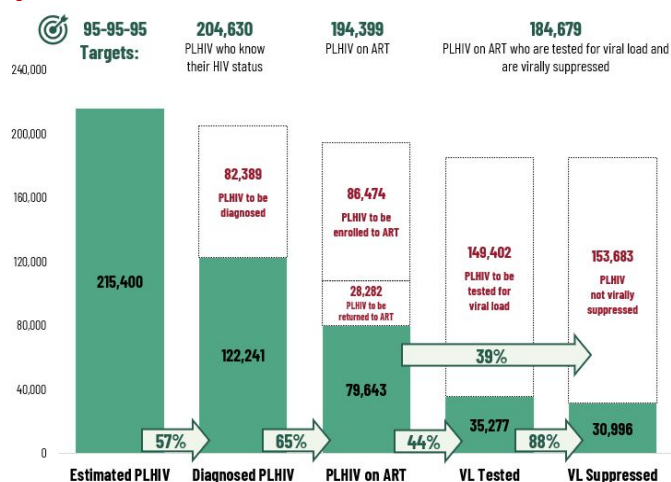
Virally Suppressed PLHIV

PLHIV on ART who have viral load of ≤ 50 copies/mL. Viral load refers to the amount of the Human Immunodeficiency virus (HIV) present in an infected person's blood.

The latest Philippine HIV estimates show that by the end of 2024, there will be 215,400 estimated People Living with HIV (PLHIV) in the country.

Of the estimated PLHIV, 122,241 (57%) cases have been diagnosed or laboratory-confirmed and currently living or not reported to have died, as of March 2024. Further, 79,643 (65%) PLHIV are currently on life-saving Antiretroviral Therapy (ART), of which, 35,277 (44%) PLHIV have been tested for viral load (VL) in the past 12 months. Among those tested for VL, 30,996 (88%) are virally suppressed. However, only 39% were virally suppressed among PLHIV on ART [Figure 1].

Figure 1. National Care Cascade as of March 2024



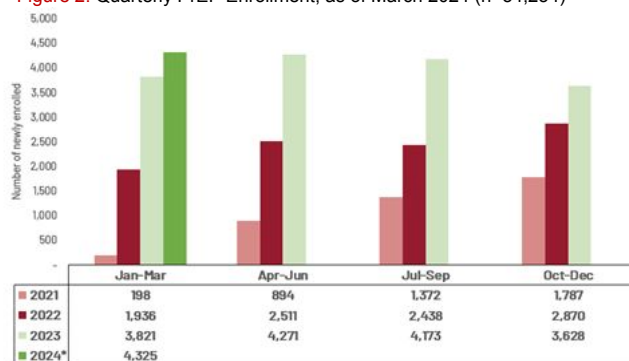
See Annex A: HIV Care Cascade per Region, Age Group and Key Population

PREVENTION

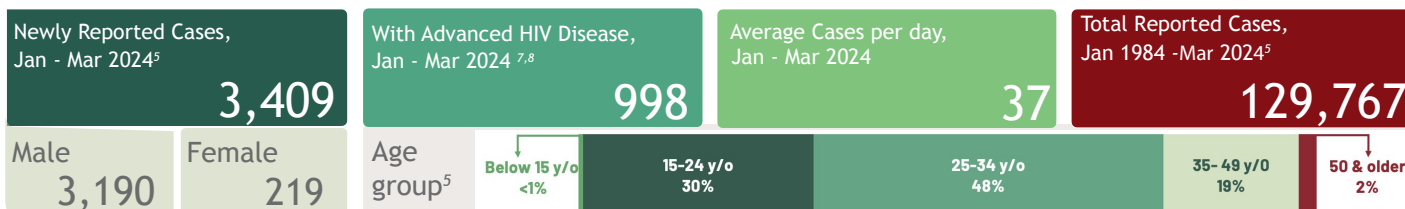
In January to March 2024, there were 4,325 clients newly enrolled to Pre-Exposure Prophylaxis (PrEP), which is a 13% increase in new enrollees compared to the same period in 2023. Of the enrollees in the 1st quarter, 39 (1%) were less than 18 years old at the time of enrollment, 1,682 (39%) were 18-24 years old, 1,993 (46%) were 25-34 years old, 559 (13%) were 35 years old and above^{1,2}. Sixty-one percent (3,790) of the newly enrolled to PrEP were from the National Capital Region (NCR).

Since the implementation of PrEP in March 2021, a total of 34,234 clients have been enrolled to PrEP, of which, 33,372 (97%) were males and more than half (17,198, 50%) were among 25-34 years old. Majority of clients ever enrolled to PrEP (30,583, 91%) were enrolled in facilities in NCR, CALABARZON (4A), and Central Luzon (3)⁴. Of the total number enrolled, 31% (10,555) returned for a PrEP refill, of which 41% were new enrollees this quarter. Among non-returnees, 2% (431) tested positive for HIV.

Figure 2. Quarterly PrEP Enrollment, as of March 2024 (n=34,234)



DIAGNOSIS



In January to March 2024, there were 3,409 confirmed HIV-positive individuals reported to the One HIV/AIDS & STI Information System (OHASIS), of which, 998 (29%) had an advanced HIV infection^{5,6} at the time of diagnosis. Compared to last year's first quarter average of 53 cases per day, there has been a significant decrease of 30%, with only 37 cases reported daily on average.

Of the newly reported confirmed HIV-cases this period, 3,190 (94%) were males while 219 (6%) were females. The age of the newly reported cases ranged from 1 to 76 years old (median: 28 years). By age group, 15 (<1%) were less than 15 years old at the time of diagnosis, 1,038 (30%) were 15-24 years old, 1,640 (48%) were 25-34 years old, 640 (19%) were 35-49 years old, and 76 (2%) were 50 years and older⁴. Moreover, 2,293 (67%) were cisgender, 82 (2%) identified themselves as transgender women, 8 (<1%) identified as others, eight (<1%) as neither man nor woman, three (<1%) as transgender man and 1,014 (30%) had no data on gender identity⁸. Of the newly reported cases, 1,072 (31%) were confirmed in Certified Rapid HIV Diagnostic Algorithm (rHIVda) Confirming Laboratories (CrCLs) while 2,337 (69%) were confirmed through the National Reference Laboratory-San Lazaro Hospital/STD AIDS Cooperative Central Laboratory (NRL-SLH/SACCL). Lower diagnosis rates in CrCLs were observed, primarily due to limited availability of test kits needed for confirmation.

1. Age at the time of enrollment to PrEP

2. Percentages were rounded off to the nearest whole number - sum may not be equal to 100% due to rounding of figures

3. Based on the region of PrEP facility

4. Reported diagnosed HIV cases, including deaths

5. Age at diagnosis; 3 had no data on age

6. Advanced HIV Disease (AHD) definition is based on clinical criteria of WHO staging 3 and 4 while immunologic criterion is based on baseline CD4 results (<200 cells/mm³)

7. 1,928 cases had non-advanced HIV infection and 741 had no data on immunologic/clinical criteria at the time of diagnosis

8. Gender identity is based on sex at birth and self identity reported at the time of diagnosis. Those with unknown gender identity either had unspecified or no data on self identity and/or sex at birth.

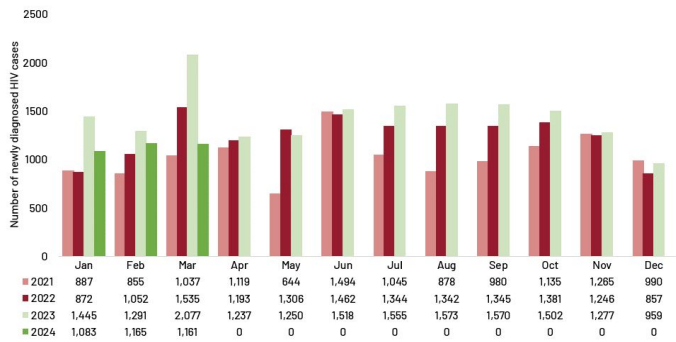


Cumulatively, 129,767 confirmed HIV cases have been reported to the HIV/AIDS and ART Registry of the Philippines since the first reported HIV case in the Philippines in 1984 [Figure 3].

Since 2021, the number of newly diagnosed HIV cases reported monthly has been increasing [Figure 3]. From an average of 1,027 monthly cases reported in 2021, it has increased to 1,502 cases per month in 2023. However, during the 1st quarter of 2024, there was a notable decrease in the average monthly cases to 1,136.

Moreover, the number of reporting Certified rHIVda Confirming Laboratories (CrCLs) in OHASIS increased from 26 facilities in 2021 to 50 facilities in the first quarter of 2024.

Figure 3. Number of monthly newly diagnosed HIV cases, 2021-March 2024



Geographic Distribution

From January to March 2024, NCR, CALABARZON (4A), Central Luzon (3), Central Visayas (7), and Western Visayas (6) reported the highest number of new cases, comprising 66% of the total cases.⁹ Meanwhile, 1,168 cases (34%) were reported from other regions [Figure 4]. Between January 2019 to March 2024, these same regions, along with Davao region (11), accounted for 78% of the total reported cases, altogether accounting for 53,320 of the total reported cases, while 15,350 (22%) were from the rest of the country [Table 1].¹⁰ Cumulatively, from January 1984 to March 2024, NCR, CALABARZON (4A), Central Luzon (3), Central Visayas (7), Western Visayas (6) and Davao Region (11) have consistently reported the highest number of cases, totaling 104,032 (80%) of the total reported cases [Table 1].

Meanwhile, 25,738 cases (20%) were reported from other regions within the country, while seven cases (<1%) reported an overseas permanent residence, and 1,167 cases (1%) had no data on region of residence.

Figure 4. Distribution of newly diagnosed HIV cases by region of residence^{9,10}, Jan-Mar 2024 (n= 3,409)

Region	Number of Cases	%
NCR	990	29%
4A	690	20%
3	317	9%
7	243	7%
6	204	6%
1	134	4%
5	123	4%
10	111	3%
11	89	3%
12	88	3%
8	87	2%
2	78	2%
4B	69	2%
9	38	1%
CAR	39	1%
CARAGA	41	1%
BARMM	6	<1%

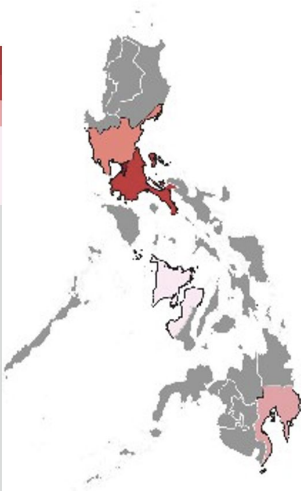


Table 1. Number of diagnosed HIV cases, by region of residence, Jan 1984 - Mar 2024^{9,10}

Region	January 2024 –March 2024 (n=3,409)		January 2019 - March 2024 (n=68,670)		January 1984 - March 2024 (N=129,767) ¹⁰	
NCR	990	29%	19,480	28%	43,511	34%
4A	690	20%	12,381	18%	21,507	17%
3	317	9%	7,875	11%	13,518	10%
7	243	6%	5,069	7%	10,535	8%
6	204	5%	4,815	7%	7,807	6%
11	89	3%	3,700	5%	7,154	6%
12	88	4%	2,085	3%	3,498	3%
1	134	3%	2,140	3%	3,464	3%
10	111	3%	2,102	3%	3,397	3%
5	123	4%	1,730	3%	2,737	2%
8	87	2%	1,380	2%	2,152	2%
2	78	1%	1,377	2%	2,113	2%
9	38	2%	1,242	2%	2,056	2%
4B	69	1%	1,325	2%	2,010	2%
CARAGA	41	1%	970	1%	1,574	1%
CAR	39	1%	629	1%	1,117	1%
BARMM	6	<1%	272	<1%	443	<1%

Sex and Age

Majority of the total reported cases (122,416, 94%) were males and 7,341 (6%) were females [Figure 5]¹¹. By age group, 424 (<1%) were below 15 years old, 38,021 (29%) were among the youth aged 15-24 years old, half (65,125, 50%) were 25-34 years old, 22,754 (18%) were 35-49 years old, and 3,367 (3%) were 50 years and older¹². The age of diagnosed cases ranged from <1 to 81 years old (median: 28 years).

Since 2012, the proportion of males among the newly diagnosed cases has consistently been at least 95%. Moreover, diagnosed HIV cases are getting younger with the predominant age group shifting from among 35-49 years old in 2002 to 2005, to 25-34 years old starting 2006 [Figure 65]. Among age groups, the highest increase in the proportion of cases in the past five years were among those below 15 years old (+80%), followed by those aged 15-24 years (+64%).

Figure 5. Proportion of diagnosed HIV cases, by sex, Jan 1984 – March 2024¹¹

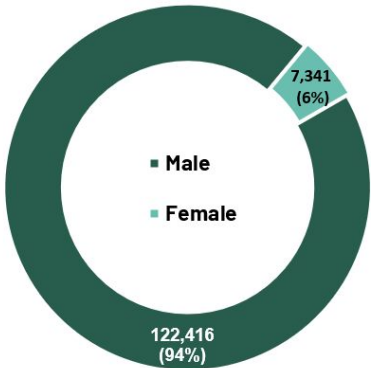
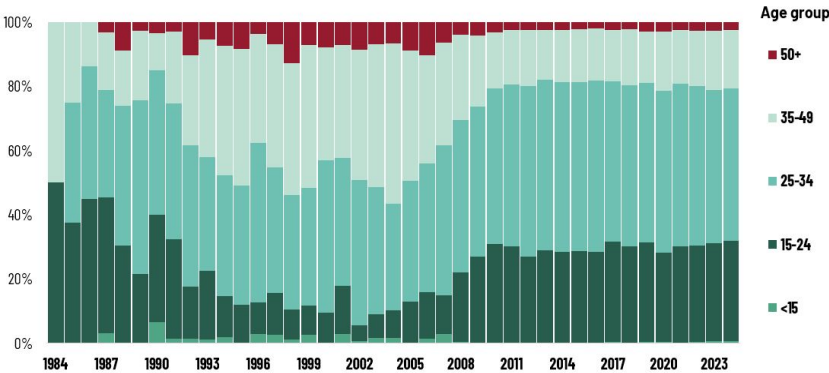


Figure 6. Distribution of diagnosed HIV cases, by age group, Jan 1984 – March 2024¹²



9. 2 cases reported on Jan-March 2024 had no data on region of residence
10. 7 (<1%) were from overseas; No data on region of residence for 1,167 cases (1%)
11. No data on sex for 10 cases
12. No data on age for 76 cases



Mode of Transmission (MOT)

In the first quarter of this year, 3,233 (94%) newly reported cases had acquired HIV through sexual contact - 2,323 through male-male sex, 450 male - female¹³, and 460 male - female sex. Meanwhile, 14 (<1%) reported sharing of infected needles, 10 (<1%) through mother-to-child transmission, and 152 had no data on mode of transmission at the time of diagnosis [Table 3].

Table 3. Number of diagnosed HIV cases, by mode of transmission and sex, Jan 1984 - Mar 2024^{14, 15}

Mode of Transmission	January 2024 – March 2024 (n= 3,409)		January 2019 – March 2024 (n=68,669)		January 1984 – March 2024 (n=129,767)	
	M (3,190)	F (219)	M (65,187)	F (3,482)	M (122,416)	F (7,341)
Sexual Contact	3,032	201	63,494	2,652	118,118	6,841
Male-male	2,323	-	44,576	-	75,702	-
Both males & females ¹³	450	-	14,100	-	31,266	-
Male-female	259	201	4,818	3,276	11,150	6,841
Sharing of infected needles	14	-	485	34	2,437	154
Mother-to-child	5	5	88	93	177	170
Blood /blood products	-	-	-	-	5	14
Needlestick injury	-	-	-	-	1	2
No data	139	13	1,120	79	1,677	161

Over the past five years, sexual contact remained the predominant mode of transmission among newly diagnosed cases [Figure 7]. However, a slight increase was observed in the number of diagnosed cases acquiring HIV through mother-to-child transmission among children less than 5 years old, rising from 16 cases in 2018 to 29 cases in 2022, and reaching 43 newly reported cases in 2023.

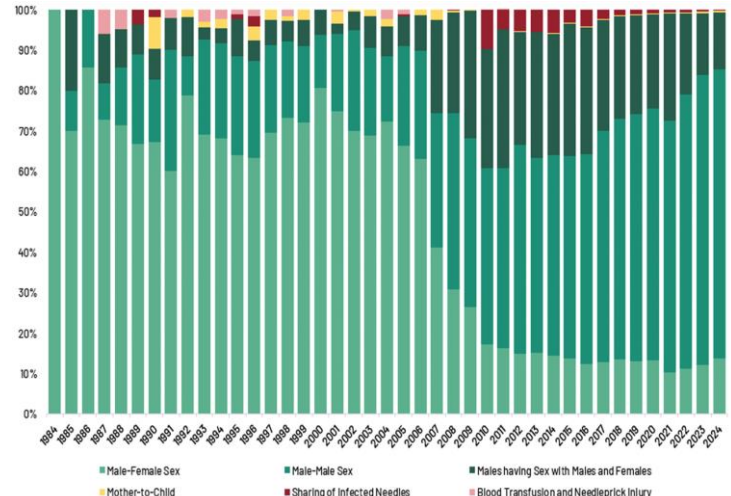
Cumulatively, among the 129,767 reported cases from January 1984 to March 2024, 124,959 (96%) acquired HIV through sexual contact. This includes 75,702 reported cases attributed to male-male sex, 31,266 to male-male/female encounters, and 17,991 to male-female sex¹⁵.

Additionally, 2,591 cases (2%) resulted from sharing infected needles, 347 (<1%) from mother-to-child transmission, 19 (<1%) from blood/blood products & needlestick injuries, while 1,838 (1%) had no data on mode of transmission.

Among diagnosed male cases, 106,968 (87%) acquired HIV through sex with another male, 11,150 (9%) through sex with a female, 2,437 (2%) through sharing of infected needles, and 177 (<1%) through mother-to-child transmission. Conversely, among diagnosed females, the majority (6,841, 93%) acquired HIV through sexual contact with a male, 170 (2%) through mother-to-child transmission, and 154 (2%) through sharing of infected needles [Table 3].

Modes of transmission (MOT) show regional variations. For instance, 35% of diagnosed males who have sex with males were from NCR; over half of those who acquired HIV through mother-to-child transmission were from NCR, Region 4A, and Region 3 (59%); and almost all (99%) who acquired HIV through sharing of infected needles among people who inject drugs were from Region 7.

Figure 7. Distribution of diagnosed HIV cases, by mode of transmission, Jan 1984 - March 2024¹⁵

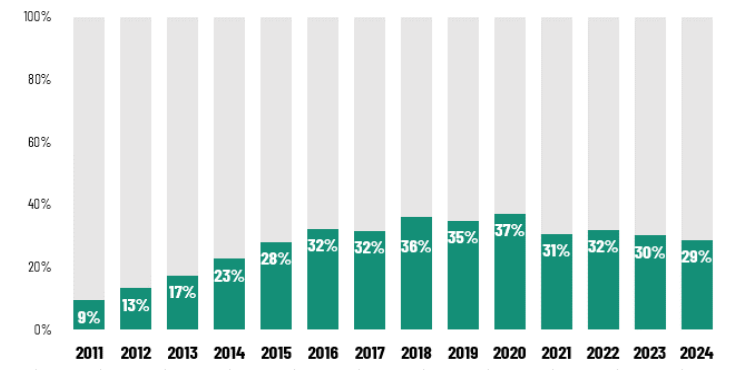


Advanced HIV Disease (AHD)

Reporting of Advanced HIV Disease (AHD)¹⁶ cases only started in 2011. Among the total reported cases, 38,562 (30%) were diagnosed with Advanced HIV disease (AHD), while 2,682 (2%) presented with non-advanced HIV infection at the time of diagnosis. Notably, data on immunologic and clinical criteria at the time of diagnosis were unavailable for the remaining 88,523 (68%) cases.

From 2011 to 2020, there was a notable increase in the proportion of cases with AHD, rising from 9% in 2011, with a median baseline CD4 count of 128 cells/mm³, to 37% in 2020 [Figure 8], with a median baseline CD4 count of 198 cells/mm³. Over the past 5 years, there was a 17% increase in AHD cases with a median CD4 count of 227 cells/mm³. This trend experienced a slight decline to 31% in 2021, 32% in 2022, 30% in 2023, and further decreased to 29% in the first quarter of 2024. In comparison to the first quarter of 2023, the median baseline CD4 count saw a slight decline from 231 cells/mm³ in 2023 to 223 cells/mm³ in 2024.

Figure 8. Proportion of newly diagnosed HIV cases with advanced HIV disease¹⁶, 2011 – March 2024



See Annex B: Disaggregation of AHD by region, sex, age group, MOT and KP

Antiretroviral Therapy (ART)

Newly Enrolled to ART, Jan- Mar 2024¹⁷

4,055

Median Baseline CD4 at enrollment (in cells/mm³)¹⁸

220

In January to March 2024, there were 4,405 people with HIV who were enrolled to treatment, of which, 3,997 (99%) were on the first line regimen, two were on second line regimen, and 56 were on other line of regimen. Among them, 24 (1%) were less than 15 years old, 1,232 (30%) were 15-24 years old, 1,978 (49%) were 25-34 years old, 728 (18%) were 35-49 years old, and 86 (2%) were 50 years and older. The median CD4¹⁸ of these patients upon enrollment was at 220 cells/mm³.

TREATMENT

PLHIV on ART as of Mar 2024

79,643

Current age (in years)¹⁹

Age Range 1 - 85

Median Age 32

Sex assigned at birth

Male 76,656

Female 2,985

13. Among males only
14. Sex at birth: M=Male, F=Female
15. No data on MOT and sex for 10 cases
16. Classification of diagnosed cases with advanced clinical manifestations based on immunologic and clinical criteria has been newly implemented in 2022. Previously advanced HIV cases were identified based solely on available clinical criteria.
17. Started on ART are those enrolled from January to March 2024 regardless of diagnosis date
18. No data on baseline CD4 count for 1,616 cases newly enrolled to ART from October to December 2023
19. Current age as of the reporting period



Among the 107,925 people living with HIV (PLHIV) who have ever been enrolled in antiretroviral therapy (ART) since 2002, a total of 79,643 individuals aged 1 to 85 years old (median age: 32 years) were alive on ART as of March 2024. Of these, 77,731 were on a first-line regimen, 1,019 were on a second-line regimen, and 892 were on other lines of treatment.

As of March 2024, 23,450 individuals (22%) who were previously on ART were no longer receiving treatment. This group includes 23,432 individuals who were lost to follow-up (LTFU), five who refused to continue ART for various reasons, and 13 who reported migrating overseas [Table 4].

Sixty-five percent of the PLHIV on ART are concentrated in the Greater Manila Area (GMM), which includes NCR, CALABARZON (4A), and Central Luzon (3). Conversely, the highest rates of lost to follow-up are observed in NCR, followed by Central Visayas (Region 7) and CALABARZON (4A). Together, these three regions contribute to 63% of the total number of PLHIV not on treatment in the country.

Table 4. Number of PLHIV by treatment outcome and region, as of March 2024

Region of Treatment Facility ²⁰	Treatment Outcome			
	Alive on ART ²¹ (n= 79,643)	Lost to Follow-up ²² (n= 23,450)	Trans out (Overseas) ²³ (n= 13)	Stopped ²⁴ (n= 5)
NCR	36,514	10,199	-	-
4A	8,343	2,050	1	-
3	7,008	1,798	7	1
7	6,199	2,471	-	-
6	4,912	862	-	-
11	4,880	1,515	-	-
12	2,198	913	-	-
10	1,567	901	-	-
5	1,454	437	-	-
1	1,383	385	-	-
2	1,183	193	1	-
CAR	873	184	-	-
8	858	385	-	-
9	794	423	4	-
4B	759	434	-	-
CARAGA	658	264	-	4
BARM	59	18	-	-

Viral Load (VL) Testing and Suppression

Among the PLHIV on ART as of March 2024, a total of 75,741 individuals had been enrolled in ART for at least 3 months and were tagged as eligible for viral load testing. Of these eligible individuals, 35,275 PLHIV (47%) underwent viral load testing within the past 12 months. Specifically, 8,697 (25%) were tested between January and March 2024, 9,724 (28%) between October and December 2023, 9,290 (26%) between July and September 2023, and 7,564 (21%) between April and June 2023.

Further, among the 35,275 PLHIV on ART who were tested in the past 12 months as of March 2024, 30,996 (88%) were virally suppressed ²⁵ while 4,280 (12%) were not virally suppressed [Figure 9]. Comparatively, there was a 13% increase in viral load testing coverage as of the first quarter of 2024 compared to last year's coverage ²⁶. Moreover, there has been a notable 178% increase in coverage over the past 5 years (2019-2023). On the other hand, viral suppression rates have ranged from 82-88% since 2019 while viral load testing coverage has consistently remained below 50%.

Regionally, Western Visayas (Region 6), Central Luzon (Region 3), and NCR have reached viral load testing coverage exceeding 50%, with suppression rates ranging from 84-90%. In contrast, other regions have reported coverage below 50%, with suppression rates varying from 63-100%, the lowest being in CARAGA [Table 5].

Figure 9. Viral Load Testing and Suppression among PLHIV on ART, 2019 - March 2024^{25,26}

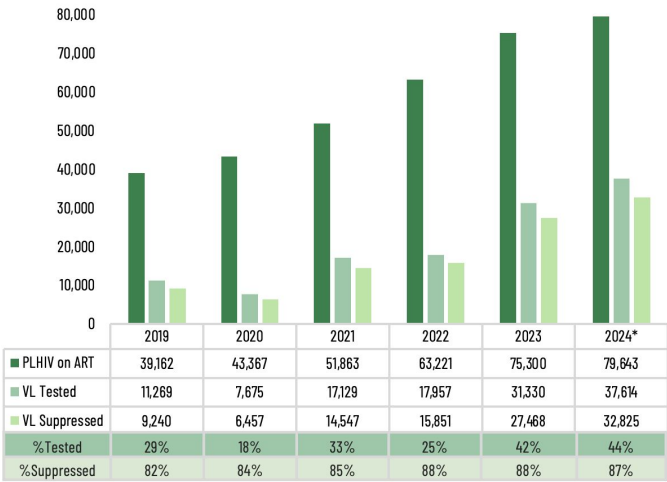


Table 5. Viral load testing and Suppression ²⁵ among PLHIV on ART by region, as of March 2024

Region of Treatment Facility	Viral Load Status among PLHIV on ART per region				
	Alive on ART (n= 79,643)	Tested for VL (n= 37,614)	% Tested for VL	VL Suppressed (n= 32,825)	% Suppressed
NCR	36,514	19,403	53%	17,367	90%
4A	8,343	4,036	48%	3,362	83%
3	7,008	3,836	55%	3,218	84%
7	6,199	2,643	43%	2,319	88%
6	4,912	2,844	58%	2,501	88%
11	4,880	2,014	41%	1,831	91%
12	2,198	653	30%	537	82%
10	1,567	265	17%	166	63%
5	1,454	421	29%	311	74%
1	1,383	376	27%	295	78%
2	1,183	381	32%	329	86%
CAR	873	130	15%	119	92%
8	858	209	24%	156	75%
9	794	33	4%	25	76%
4B	759	314	41%	252	80%
CARAGA	658	54	8%	35	65%
BARM	59	2	3%	2	100%

MORTALITY

Newly reported deaths
Jan-Mar 2024

302

Total reported deaths
Jan 1984 - Mar 2024²⁷

7,535

From January 2019 to March 2024, there have been 4,558 deaths reported among diagnosed HIV cases in the Philippines, with more than 500 new deaths reported each year since 2018.

Since January 1984, a total of 7,535 deaths have been reported, of which, 3,528 (47%) had an advanced HIV disease at the time of diagnosis ²⁸. Among age groups, the largest proportion of reported deaths were among the 25-34 years old accounting for 3,778 (49%) of total deaths followed by 35-49 years old with 1,940 (25%), 15-24 years old with 1,579 (20%), 50 years old and older with 396 (5%), and <15 years old with 64 (1%). Eight (<1%) of the reported deaths had no reported age at the time of death.

From January to March 2024, there were 302 reported deaths due to any cause among people diagnosed with HIV, of which, three (1%) were below <15 years old at the time of death, 49 (14%) were 15-24 years old at the time of death, 172 (49%) were 25-34 years old, 99 (28%) were 35-49 years old, and 25 (7%) were 50 years old and above.

20. Current treatment facility where PLHIV last visited for ARV refill

21. PLHIV is alive on ART if he/she visits the treatment facility for ARV refill within 30 days from expected day of last (run-out) pill

22. PLHIV is lost to follow-up if he/she did not visit the treatment facility for ARV refill within 30 days from expected day of last (run-out) pill

23. Clients who reported to have migrated or transferred to another country

24. Clients who stopped due to refusal to treatment

25. Viral Suppression is defined as having less than 50 copies of HIV per milliliter of blood, based on DOH AO 2022-0024

26. PLHIV currently alive on ART with at least 1 visit and screened within the reporting period

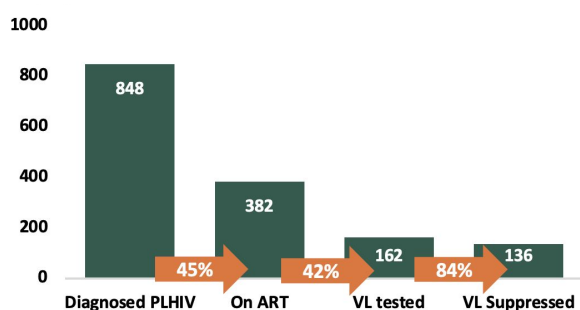
27. Reported deaths due to any cause and not limited to AIDS-related causes. Based on reported date, and actual date of death may not necessarily fall in this reporting period

28. 85 (1%) of the total reported deaths had non-advanced HIV infection and 3,756 (52%) had no data on immunologic/clinical criteria at the time of diagnosis.

OTHER VULNERABLE POPULATIONS

Pregnant Women with HIV

Figure 10. Diagnosis and Treatment coverage among PLHIV Diagnosed during pregnancy



From January to March 2024, there were 34 HIV positive women aged 15 to 37 years old (median: 30 years) who were pregnant at the time of diagnosis. This was a 55% increase compared to the same reporting period last year.

The reporting of pregnancy status at the time of diagnosis was integrated into HARP in 2011, and since then, a total of 872 diagnosed women were reported pregnant at the time of diagnosis. Moreover, over the past 5 years, there has been a 11% increase in reported cases.

Among the pregnant women at the time of diagnosis, 848 (97%) were currently alive. Of these, 680 (80%) were initiated to ART however, only 382 (45%) among them were retained on ART. Of those who were on treatment, only 162 (42%) were tested for viral load with 84% (136) viral load suppression [Figure 10].

Transgender Women (TGW)

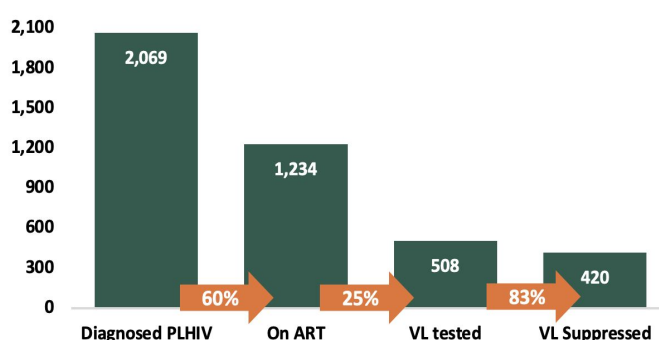
Of the 82 newly reported cases from January to March 2024 who identified as transgender women²⁹, 23 (28%) were 15 - 24 years old, 40 (49%) were 25 - 34 years old, 18 (22%) were 35-49 years old, and one (1%) were 50 years and older. The age of diagnosis ranged from 18 to 52 years old (median: 27 years).

Of the 2,193 TGW diagnosed from January 2018³⁰ to March 2024, almost all (2,170, 99%) acquired HIV through sexual contact, four (<1%) through sharing of infected needles, one through mother to child transmission, and 18 (1%) had no data on MOT. By age group, 609 (28%) were 15-24 years old at the time of diagnosis, half (1,096, 50%) were 25-34 years old, 435 (20%) were 35-49 years old, and 52 (2%) were 50 years and older, and one had no data on age. The age of diagnosis ranged from 15 to 63 years old (median: 22 years).

Among the diagnosed cases of TGW, 2,069 (94%) were currently alive. Of these, 1,768 (85%) were initiated to ART however, only 1,234 (60%) among diagnosed TGW living with HIV were retained on ART.

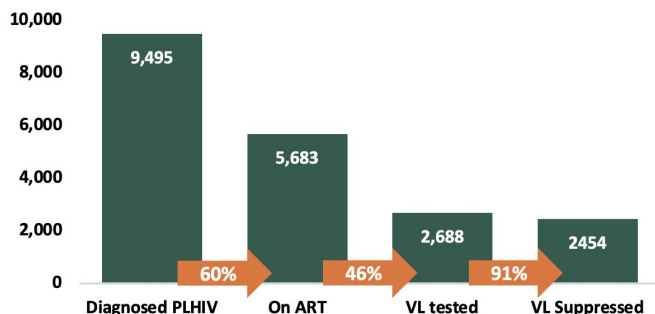
Of those who were on treatment, only 508 (25%) were tested for viral load with 83% (420) viral load suppression [Figure 11].

Figure 11. Diagnosis and Treatment coverage among TGW living with HIV



Migrant Workers

Figure 12. Diagnosis and Treatment coverage among Migrant Workers living with HIV



Among the diagnosed cases of Migrant workers, 9,495 (96%) were currently alive. Of these, 7,270 (77%) were initiated to ART however, only 5,683 (60%) among diagnosed living with HIV were retained on ART. Of those who were on treatment, only 2,688 (46%) were tested for viral load with 91% (2,454) viral load suppression [Figure 12].

From January to March 2024, 184 (5%) of reported cases were Filipinos aged 22 to 76 (median: 23) who had worked overseas in the past five years. Of these, 165 (90%) were male and 19 (10%) were female. Most (179, 97%) acquired HIV through sexual contact: 95 (52%) through male-male sex, 40 (22%) through sex with both males and females, and 44 (24%) through male-female sex; 5 (3%) had no data on transmission. There was a 24% decline in HIV diagnoses among migrant workers compared to the same period last year, and a 14% decrease over the past 5 years.

Since 1984, 10,069 (8%) of diagnosed cases have been migrant workers. Of these, 9,893 (98%) acquired HIV through sexual contact, 19 (<1%) through needle sharing, 9 (<1%) through exposure to blood, 3 (<1%) through needlestick injury, and 154 (2%) had no data on transmission.

People Engaging in Transactional Sex

In January to March 2024, 404 (12%) of the newly diagnosed engaged in transactional sex within the past 12 months. Majority (392, 94%) were males and 12 (6%) were females, their age ranged from 17 to 71 years old (median: 31 years). Of the male cases, 124 (32%) reported accepting payment for sex only, 194 (48%) reported paying for sex only, and (20%) engaged in both. On the other hand, five (42%) accepted payment for sex two (17%) of the female cases reported paying for sex only, and five (42%) engaged in both. More than half, 8,244 (57%), of the total cases who had history of transactional sex were diagnosed from 2019- March 2024, of which half (50%) of them paid for sex [Table 6].

Since the reporting of transactional sex began in December 2012, a total of 14,219 cases have been reported to HARP³¹. The majority, 13,803 (97%), were males, while 416 (3%) were females. Among them, 4,634 (33%) accepted payment for sex, 7,346 (52%) paid for sex, and 2,239 (16%) engaged in both.

Among the diagnosed cases who had history of transactional sex, 13,278 (93%) were currently alive. Of these, 10,914 (82%) were initiated to ART however, only 8,256 (76%) among of them were retained on ART. Of those who were on treatment, only 3,776 (46%) were tested for viral load with 85% (3,194) viral load suppression.

Table 6. Diagnosed HIV cases who engaged in transactional sex, by sex and age, Dec 2012 - March 2024 (n=6,439)^{32,33}

Type of Transactional Sex	January 2024 - March 2024 (n=404)	January 2019- March 2024 (n=5,518)	December 2012- March 2024 (N=14,219)
Accepted	129 (32%)	1,762 (32%)	1,769 (27%)
Male	124	1,701	1,707
Female	5	61	62
Age range (Median)	17-52 (35)	14-61 (45)	12-68 (24)
Paid for sex only	194 (48%)	2,419 (44%)	2,431 (38%)
Male	192	2,402	2,414
Female	2	17	62
Age range (Median)	17-71 (27)	10-80 (40)	10-80 (26)
Engaged in both	81 (20%)	1,337 (24%)	2,239 (35%)
Male	76	1,299	2,122
Female	5	38	117
Age range (Median)	18-60 (26)	15-73 (35)	15-73 (23)

29. Cisgender is based on gender identity which corresponds to their sex assigned at birth

30. Reporting of gender-identity in HARP started in 2018

31. People engaging in transactional sex includes all individuals who reported having either accepted payment, paid for sex, or done both in the form of money or in kind in the past 12 months. This also encompasses other key populations with similar experiences. Reporting of transactional sex was included in the HARP starting December 2012.

32. Transactional sex within the past 12 months at the time of diagnosis

33. Cumulative number of cases reported regardless when the person engaged in transactional sex. Reporting of specific time period when the person last engaged in transactional sex started only in 2017 [Form version 2017]



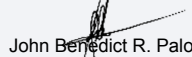
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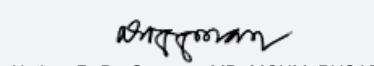

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HIV & AIDS Surveillance of the Philippines

The HIV & AIDS Surveillance of the Philippines (HASP) is the official record of total number of diagnoses (laboratory-confirmed), ART outcome status and deaths among people with HIV in the Philippines. All individuals in the registry are confirmed by the San Lazaro Hospital STD/AIDS Cooperative Central Laboratory (SACCL) which is the HIV/AIDS National Reference Laboratory (NRL) and DOH Certified Rapid HIV Diagnostic Algorithm - rHIVda Confirmatory Laboratories (CrCLs). Confirmed HIV positive individuals were reported to the DOH-Epidemiology Bureau (EB) and recorded to OHASIS. ART figures are counts of HIV positive adult and pediatric patients currently enrolled and accessing Antiretroviral (ARV) medication during the reporting period in 180 treatment hubs and primary HIV care treatment facilities that had reported in EB. This report did not include patients who have previously taken ARV but have died, left the country, have been lost to follow-up and/or opted not to take ARV. Lost to follow-up is considered once a person have failed to visit a treatment facility 1 month after the expected date of ARV refill. HASP is a passive surveillance system. Except for HIV confirmation by the NRL & CrCLs, all other data submitted to the HASP are secondary and cannot be verified. Hence, it cannot determine if an individual's reported place of residence is where the person got infected, or where the person lived after being infected, or where the person is presently living. This limitation has major implications on data interpretation. Readers are advised to interpret the data with caution and consider other sources of information before arriving at conclusions.



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Access a list of facilities offering HIV services at:
tinyurl.com/HIVFacilities

For further details or data requests not covered in
this report, please send us your inquiries.



HIV Care Cascade

Care Cascade by Region

REGION	ESTIMATED PLHIV	DIAGNOSED PLHIV	1st 95) (Dx PLHIV/ Est. PLHIV)	ON ART	2nd 95 (On ART/ Dx PLHIV)	VL TESTED	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Tested/ On ART)
NCR	60,800	41,472	68%	26,015	63%	13,096	11,716	89%	45%
4A	38,400	20,523	53%	13,352	65%	6,263	5,466	87%	41%
3	25,300	12,522	49%	8,295	66%	4,294	3,678	86%	44%
7	17,900	9,947	56%	5,461	55%	2,369	2,078	88%	38%
6	15,000	6,871	46%	5,017	73%	2,766	2,456	89%	49%
11	13,000	6,795	52%	4,382	64%	1,701	1,547	91%	35%
1	6,600	3,255	49%	2,072	64%	673	573	85%	28%
12	6,600	3,337	51%	2,162	65%	682	603	88%	28%
10	6,000	3,156	53%	1,819	58%	384	299	78%	16%
5	5,100	2,600	51%	1,738	67%	633	513	81%	30%
2	4,000	2,007	50%	1,428	71%	511	445	87%	31%
8	3,800	2,012	53%	1,226	61%	398	346	87%	28%
9	3,700	1,924	52%	1,061	55%	186	158	85%	15%
4B	3,600	1,874	52%	1,130	60%	462	386	84%	34%
CARAGA	2,800	1,457	52%	886	61%	178	146	82%	16%
CAR	2,100	1,052	50%	720	68%	187	167	89%	23%
BARMM	800	415	52%	215	52%	78	58	74%	27%

Footnote: Regional cascade is based on the residence of the HIV-positive individual at the time of diagnosis.

Care Cascade by Age Group

Age Group	ESTIMATED PLHIV	DIAGNOSED PLHIV	1st 95) (Dx PLHIV/ Est. PLHIV)	ON ART	2nd 95 (On ART/ Dx PLHIV)	VL TESTED	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Tested/ On ART)
CHILDREN (<10)	1,300	204	16%	117	57%	58	33	57%	28%
ADOLESCENTS (10-19)	11,300	1,007	9%	672	67%	227	167	74%	25%
YOUTH (15-24)	50,700	10,593	21%	7,264	69%	2,659	2,203	83%	30%
ADULTS (25+)	168,400	111,293	66%	69,699	63%	32,178	28,441	88%	41%

Footnote: Age is based on the current age of the PLHIV as of the reporting period.

Care Cascade by Key Population

KEY POPULATION	ESTIMATED PLHIV	DIAGNOSED PLHIV	1st 95) (Dx PLHIV/ Est. PLHIV)	ON ART	2nd 95 (On ART/ Dx PLHIV)	VL TESTED	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Tested/ On ART)
MALES HAVING SEX WITH MALES	165,000	101,238	61%	67,883	67%	30,729	2,723	89%	40%
PERSONS WHO INJECT DRUGS (PWID)	3,000	2,223	74%	521	23%	250	221	88%	42%
OTHER MALES	29,300	11,793	40%	5,741	49%	2,600	2,249	87%	39%
OTHER FEMALES	14,800	6,631	45%	2,807	42%	1,256	1,100	88%	39%

Footnote:
Key Population: This group is identified based on their reported risky behaviors or exposures at the time of diagnosis. The classification focuses on the behaviors or exposures rather than the individual's sexual orientation, gender identity, or expression (SOGIE).
“Other Males” and “Other Females”: These refer to the general population of males and females who are not specifically categorized as part of the key population.