

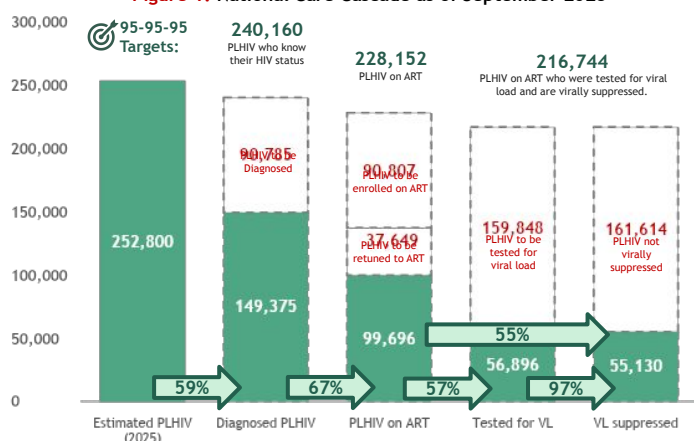


HIV & AIDS SURVEILLANCE OF THE PHILIPPINES

HIV & AIDS CONTINUUM OF CARE

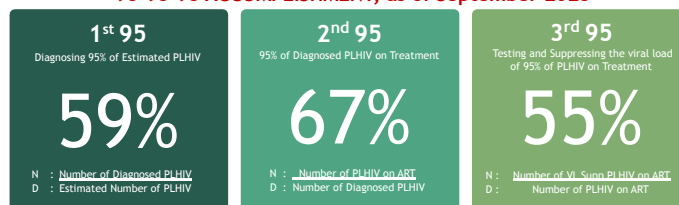
The latest Philippine HIV estimates show that by the end of 2025, there will be 252,800 estimated People Living with HIV (PLHIV) in the country. As of September 2025, 149,375 (59%) of the estimated PLHIV have been diagnosed or laboratory-confirmed. Further, 99,696 (67% of the diagnosed) PLHIV are currently on life-saving Antiretroviral Therapy (ART), of which 56,896 (57%) PLHIV have been tested for viral load (VL) in the past 12 months. Among those tested for VL, 55,130 (97%) were virally suppressed. However, only 57% were virally suppressed¹ among PLHIV on ART [Figure 1]. Compared to the previous reporting period, diagnosis coverage increased by 2%, treatment coverage increased by 1%, while VL suppression among PLHIV on ART increased by 8%.

Figure 1. National Care Cascade as of September 2025



See Annex : HIV Care Cascade per Region, Age Group

95-95-95 ACCOMPLISHMENT, as of September 2025



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 (PLHIV) 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 2025 with analyzed and triangulated data from the HIV/AIDS & ART Registry of the Philippines (HARP), Integrated HIV Behavioral and Serologic Surveillance (IHBS), Key Population surveys, Laboratory and Blood Bank Surveillance (LaBBS), 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.

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 is defined as having visited the facility for an antiretroviral (ARV) refill or accessed ARV refill before or within 30 days after pill run-out.

Virally Suppressed PLHIV

PLHIV on ART who have viral load of ≤ 1000 HIV RNA copies per mL of blood. Viral load refers to the amount of HIV present in an infected person's blood.

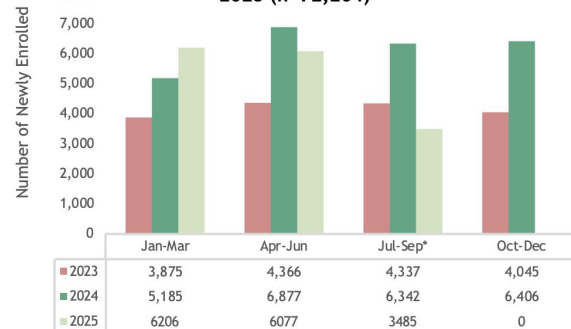
PREVENTION¹

*Note: : Data for oral PrEP is partial as of September 2025. Due to ongoing information system migration, data validation is in progress for September data and will be reflected in the succeeding reports.

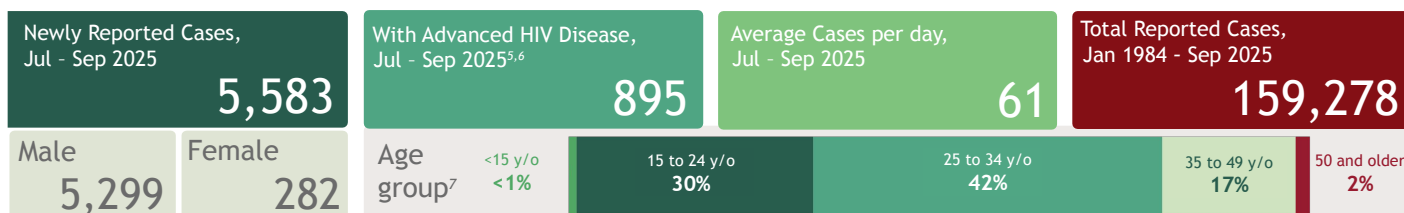
In July to September 2025, there were 3,485* clients newly enrolled to Pre-Exposure Prophylaxis (PrEP). Of the enrollees in this period, 46 (1%) were less than 18 years old at the time of enrollment, 1,485 (43%) were 18-24 years old, 1,593 (46%) were 25-34 years old, 532 (15%) were 35 years old and above^{1,2}. PrEP is most heavily used by the young key populations and young adults aged 18 to 34 who experience the greatest burden of disease. Majority of those newly enrolled to PrEP were from the National Capital region (NCR) (1,019, 29%), Region 4A (722, 21%), and Region 3 (376, 11%)³. PrEP is most widely distributed in Greater Metro Manila where most cases occur.

Since the implementation of PrEP in March 2021, a total of 72,264 clients have been enrolled. Of these, 69,533 (96%) were male, and 45,560 (63%) were 25 years old or older. The majority of clients ever enrolled in PrEP (81%, 58,289) were registered at facilities in NCR, CALABARZON (4A), and Central Luzon (3). Among the total enrolled, only 38% (27,683) returned for a PrEP refill in 2025, while 21% (14,967) were new enrollees. Of the 29,614 non-returnees, 1,335 (5%) tested positive for HIV³.

Figure 2. Quarterly PrEP Enrollment as of September 2025 (n=72,264)⁴



DIAGNOSIS



In July to September 2025, there were 5,583 confirmed HIV-positive individuals reported to the One HIV/AIDS & STI Information System (OHASIS), 22% higher than the cases recorded in the same quarter last year. Of the recorded cases for this quarter, 895 (16%) had an advanced HIV infection at the time of diagnosis, which is 31% lower than the same reporting period last year^{5,6}. Compared to the previous year third quarter average of 50 cases per day, there has been a 22% increase with this year's quarter average of 61 cases per day.

Of the newly reported confirmed HIV-cases this period, 5,299 (95%) were males, while 282 (5%) were females. The age of the newly reported cases ranged from 1 to 73 years old (median: 27 years). By age group, 20 (<1%) were less than 15 years old, 1,702 (30%) were 15-24 years old, 2,363 (42%) were 25-34 years old, 926 (17%) were 35-49 years old, and 111 (2%) were 50 years and older⁷. All newly reported cases in this quarter were confirmed in Certified Rapid HIV Diagnostic Algorithm (rHIVda) Confirming Laboratories (CrCLs).

1. Age at the time of enrollment to PrEP; 2 have no data on age
2. Percentages were rounded off to the nearest whole number, hence, sum may not be equal to 100% due to rounding of figures
3. Based on the region of the PrEP facility. For this quarter, 962 obtained PrEP from overseas facilities. Since March 2021, 2 had no data on PrEP facility while 2,879 obtained PrEP from overseas facilities.
4. Difference in totals from the previous quarter reports is due to validation or late reporting from sites

5. AHD definition is based on clinical criteria of WHO staging 3 and 4 or immunologic criterion of baseline CD4 result <200 cells/mm³
6. 4,688 cases had non-advanced HIV infection. Of these, 1,570 (33%) had no data on immunologic/clinical criteria at the time of diagnosis which were then classified as non-advanced HIV disease.
7. Age classification is based on age upon diagnosis. 461 individuals have no data on age.

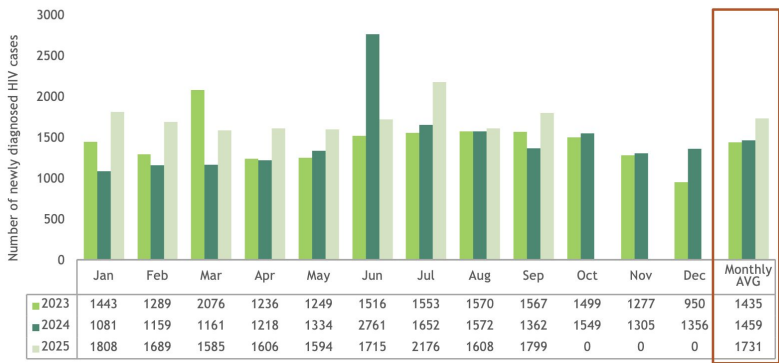


Cumulatively, 159,278 confirmed HIV cases have been reported to the HIV/AIDS and ART Registry of the Philippines since the first reported HIV case in the Philippines in 1984. Expanded testing strategies yielded a wider coverage for diagnosis, thus capturing more cases in the country.

Since 2023, the number of newly diagnosed HIV cases reported monthly has been increasing [Figure 3]. The average monthly cases were 1,435 in 2023. A 2% increase in the average diagnosis in 2024 was observed at 1,459 cases monthly. As of the third quarter of 2025, average monthly cases reached 1,731, 17% higher than the same period last year (1,478).

Moreover, the number of reporting Certified rHIVda Confirming Laboratories (CrCLs) in OHASIS increased from 26 facilities in 2021 to 193 as of September 2025.

Figure 3. Number of monthly newly diagnosed HIV cases, 2021 - Sep 2025



Geographic Distribution

From July to September 2025, the regions with the highest reporting of newly diagnosed cases were NCR, CALABARZON (Region 4A), Central Luzon (Region 3), Central Visayas (Region 7), and Davao (Region 11), accounting for 61% (3,408) of the total cases [Table 1].

From 1984 to September 2025, NCR and Regions 4A, 3, 7, and 11 consistently report the highest number of cases, with a total of 114,283 cases (72%). During this period, 43,788 cases (27%) were reported from other regions within the country, while 11 cases (<1%) were reported overseas.

Table 1. Number of diagnosed HIV cases, by region of residence, 1984 - September 2025⁸

Region	Jul - Sep 2025 (n=5,583)		Jan - Sep 2025 (n=15,580)		Jan 2020 - Sep 2025 (n=85,579)		Jan 1984 - Sep 2025 (N=159,278)		CrCLs as of Sep 2025 (n=193)
NCR	1,219	22%	3,572	23%	22,078	26%	50,183	32%	40
R4A	957	17%	2,725	17%	15,469	18%	26,698	17%	22
R3	557	10%	1,654	11%	9,736	11%	16,775	11%	19
R7	349	6%	936	6%	5,513	6%	11,695	7%	7
R11	326	6%	883	6%	4,797	6%	8,932	6%	9
R6	250	4%	754	5%	4,211	5%	6,739	4%	12
R12	230	4%	664	4%	2,792	3%	4,628	3%	6
R1	201	4%	556	4%	2,860	3%	4,533	3%	10
R10	196	4%	523	3%	2,741	3%	4,353	3%	10
NIR	214	4%	522	3%	2,713	3%	4,232	3%	7
R5	170	3%	497	3%	2,363	3%	3,693	2%	10
R8	154	3%	397	3%	1,904	2%	2,861	2%	4
R4B	144	3%	430	3%	1,969	2%	2,852	2%	9
R2	124	2%	329	2%	1,815	2%	2,831	2%	9
R9	202	4%	488	3%	1,809	2%	2,799	2%	7
CARAGA	118	2%	296	2%	1,421	2%	2,196	1%	7
CAR	35	1%	132	1%	793	1%	1,390	1%	3
BARMM ⁹	79	1%	153	1%	479	1%	681	0%	2

Sex and Age

Majority of the total reported cases (150,349, 94%) were males, while 8,917 (6%) were females [Figure 4]¹⁰. Since 2011, the proportion of males among the newly diagnosed cases has consistently been at least 94%.

By age group¹¹, 548 (<1%) were below 15 years old upon diagnosis, 47,546 (30%) were among the youth aged 15-24 years old, 78,661 (49%) were 25-34 years old, 27,924 (18%) were 35-49 years old, and 4,056 (3%) were aged 50 and older. The age of diagnosed cases ranged from <1 to 81 years old (median: 28 years). Diagnosed cases are getting younger as predominant age group shifted to 25-34 years old starting 2006, and the proportion of cases among 15-24 years old has reached 30% as of the third quarter of 2024 [Figure 5]. Moreover, the highest percent change in the past five years occurred among the <15 age group (+129%), followed by the 15-24 age group (+106%) [Table 2].

Figure 4. Proportion of diagnosed HIV cases by sex, Jan 1984 - Sep 2025

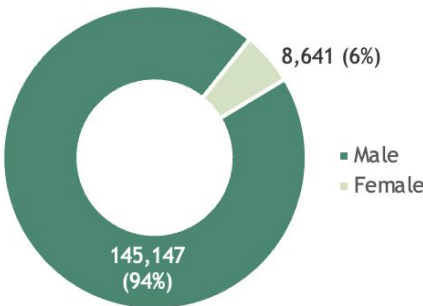
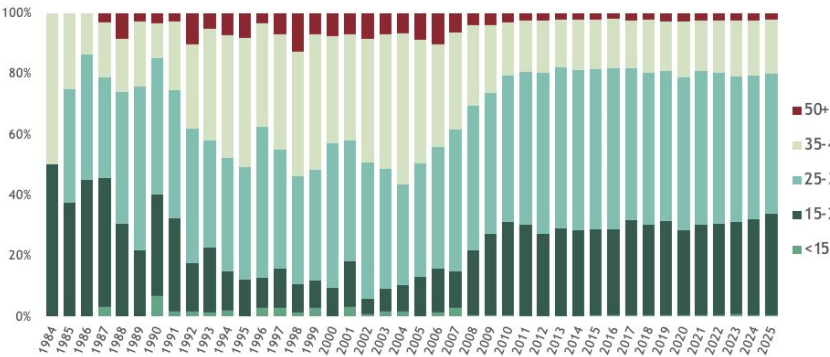


Figure 5. Distribution of diagnosed HIV cases, by age group, 1984 - Sep 2025



8. From July to September, 2025, 58 (1%) had no data on residence; From Jun 2020- September 2025, 105 (<1%) had no data on residence while 11 (<1%) were from overseas; Since 1984, 1,196 cases (1%) had no data on residence and 11 (<1%) were from overseas.
9. Residents of BARMM obtain confirmatory testing from the facilities of other regions.
10. No data on sex for 10 cases
11. No data on age for 82 cases

**Table 2.** Percent increase between September 2020 and September 2025 of cumulative cases by age group

	As of Sep 2020	As of Sep 2025	% Increase
<15	239	548	129.29%
15-24	23,099	47,546	105.84%
25-34	40,784	78,661	92.87%
35-49	14,084	27,924	98.27%
50+	2,155	4,056	88.21%
TOTAL	80,361	158,735	97.53%

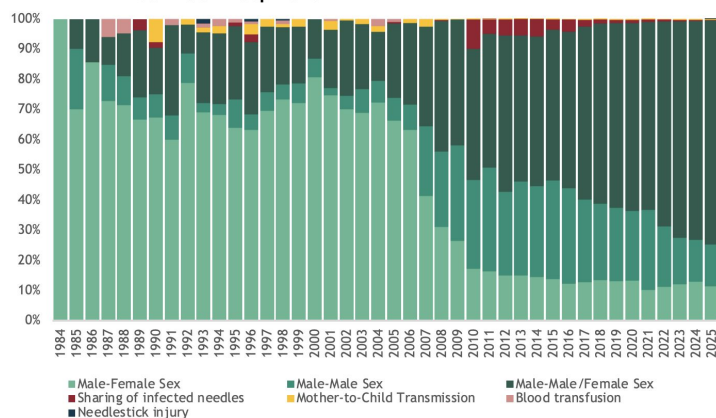
Mode of Transmission (MOT)

In the third quarter of this year, 4,879 (87%) newly reported cases had acquired HIV through sexual contact – 3,661 through male-male sex, 659 through male-male/female sex¹², and 559 through male-female sex. Meanwhile, 1 (<1%) reported sharing of infected needles, and 13 (<1%) through mother-to-child transmission [Table 3].

Table 3. Number of diagnosed HIV cases, by mode of transmission and sex, 1984 - September 2025^{13, 14}

Mode of Transmission	Jul - Sep 2025 (n=5,583)		Jan - Sep 2025 (n= 5,580)		Jan 2020 - Sep 2025 (n=85,579)		Jan 1984 - Sep 2025 (n=159,278)	
	M	F	M	F	M	F	M	F
	(5,299)	(282)	(14,776)	(802)	(81,167)	(4,410)	(150,349)	(8,917)
Sexual Contact	4,636	243	13,740	721	78,182	4,098	144,526	8,279
Male-male	3,661	-	10,795	-	57,544	-	96,331	-
Both males & females ¹³	659	-	2,000	-	14,900	-	35,109	-
Male-female	316	243	945	721	5,738	4,098	13,086	8,279
Sharing of infected needles	1	0	33	0	427	28	2,489	156
Mother-to-child	8	5	23	16	115	109	220	203
Blood products	0	0	0	0	0	0	5	14
Needlestick injury	5	0	5	0	5	0	7	1

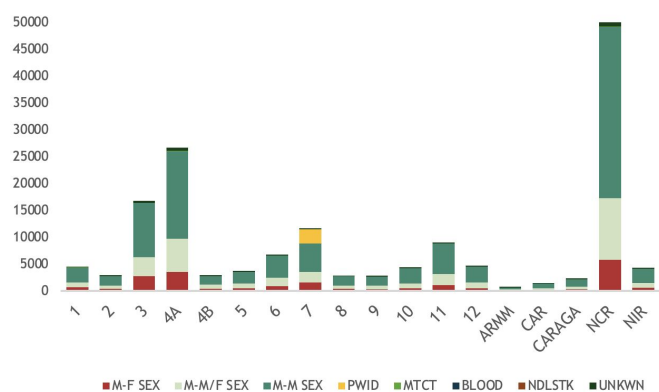
Sexual contact has consistently been the leading mode of HIV transmission among newly diagnosed cases over the years [Figure 6]. From January 1984 to September 2025, of the 159,278 reported cases, 152,805 (96%) were acquired through sexual contact. This includes 96,331 cases from male-male sex, 35,109 from male-male/female sex, and 21,365 from male-female sex.

Figure 6. Distribution of diagnosed HIV cases, by mode of transmission, Jan 1984 - Sep 2025¹⁶

There has been a notable increase in reported HIV cases resulting from mother-to-child transmission. Out of a total of 423 cases, more than half (53%, 224) were reported from 2020 to the current reporting period.

Additionally, sharing of infected needles has consistently accounted for 2% (2,645) of the total cases. Transmission through blood or blood products has been reported in 19 cases (<1%) with no new cases reported since 2012. During this quarter, five new cases of needlestick injury were recorded, the last reported since 1998, bringing the total to eight cases.

Among diagnosed male cases, 131,440 (87%) acquired HIV through sex with another male, 13,086 (9%) through sex with a female, 2,489 (2%) through sharing of infected needles, and 220 (<1%) through mother-to-child transmission. Similarly, among diagnosed females, the predominant mode of transmission was sexual contact, with 93% (8,279) acquiring HIV through sex with a male. Additionally, 203 (2%) diagnosed female cases were attributed to mother-to-child transmission, and 156 (2%) were due to sharing infected needles.

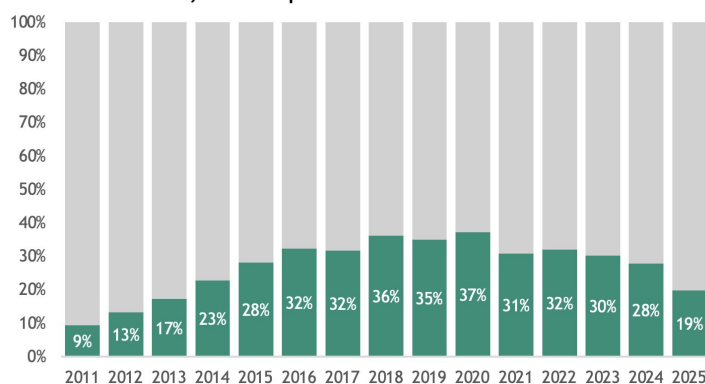
Figure 7. Distribution of diagnosed HIV cases, by mode of transmission and region, Jan 1984 - Sep 2025¹⁶

Modes of transmission (MOT) show regional variations. For instance, 33% (43,369) of diagnosed males who have sex with males were from NCR. Over half (57%, 239) of those who acquired HIV through mother-to-child transmission were from NCR, Region 4A, and Region 3. Moreover, almost all (99%, 2,645) who acquired HIV through sharing of infected needles were from Region 7 [Figure 7]. Mode of transmission in these regions mirror national data.

Advanced HIV Disease (AHD)

Reporting of Advanced HIV Disease (AHD)¹⁵ cases only started in 2011. Among the total reported cases, 44,566 (29%) were diagnosed with AHD. HIV cases without immunologic or clinical tagging were classified as non-AHD. Immunologic or clinical criteria at the time of diagnosis were unavailable for 42% (46,123) of non-AHD cases.

From 2011 to 2020, there was a notable increase in the proportion of cases with AHD [Figure 5], rising from 9% in 2011 to 37% in 2020. The proportion of AHD cases has been steadily declining since 2021, with the current proportion being 18% lower than in 2020. Median baseline CD4 improved over the past five years, from 198 cells/mm³ in 2020 to 215 cells/mm³ in 2025.

Figure 8. Proportion of newly diagnosed HIV cases with advanced HIV disease, 2011 - Sep 2025

12. Among males only

13. Sex at birth: M=Male, F=Female

14. No data on sex and MOT for 2,589 cases

15. 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.



TREATMENT

Antiretroviral Therapy (ART)

In July to September 2025, there were 4,893 people with HIV who were enrolled to treatment, of which, 4,833 (99%) were on the first line regimen, 6 (<1%) were on second line regimen, and 54 (1%) were on other lines of regimen. Among them, 21 (<1%) were less than 15 years old, 1,581 (32%) were 15-24 years old, 2,338 (48%) were 25-34 years old, 856 (17%) were 35-49 years old, and 90 (2%) were 50 years and older. The median CD4¹⁹ of these patients upon enrollment was at 203 cells/mm³.

Newly Enrolled to ART,
Jul-Sep 2025¹⁸

4,893

Median Baseline CD4
at enrollment (in
cells/mm³)¹⁹

203

PLHIV on ART as of Sep 2025

99,696

Current age (in years)²⁰

Age Range

1 - 84

Median Age

33

Sex assigned at birth²¹

Male

95,792

Female

3,688

Table 4. Number of PLHIV ever enrolled to ART by treatment outcome and region as of September 2025

Region of Treatment Facility ²²	Treatment Outcome					Total	% LTFU
	Alive on ART ²³ (n= 99,696)	Lost to Follow-up ²⁴ (n= 30,812)	Dead (n= 6,503)	Trans out (Overseas) ²⁵ (n= 11)	Stopped ²⁶ (n= 4)		
NCR	40,596	14,352	1,676	0	0	56,624	25%
4A	12,171	2,469	548	1	0	15,189	16%
3	9,159	2,185	977	5	1	12,327	18%
7	6,834	3,243	646	0	0	10,723	30%
11	5,969	2,232	316	0	0	8,517	26%
6	5,028	673	552	0	0	6,253	11%
12	3,438	720	153	0	0	4,311	17%
10	2,481	779	193	0	0	3,453	23%
NIR	2,194	510	358	0	0	3,062	17%
1	2,099	386	166	0	0	2,651	15%
5	1,734	567	202	0	0	2,503	23%
2	1,689	214	132	1	0	2,036	11%
4B	1,240	522	98	0	0	1,860	28%
9	1,215	627	147	4	0	1,993	31%
8	1,212	544	114	0	0	1,870	29%
Caraga	1,168	294	113	0	3	1,578	19%
CAR	1,055	385	79	0	0	1,519	25%
BARMM	354	110	33	0	0	497	22%

Among the 137,345 people living with HIV (PLHIV) who have ever been enrolled on antiretroviral therapy (ART) since 2002, a total of 99,696 individuals aged 1 to 84 years old (median age: 33 years) were alive on ART as of September 2025. Of these, 97,748 (98%) were on a first-line regimen, 945 (1%) were on a second-line regimen, and 1,003 (1%) were on other lines of regimen.

As of September 2025, 30,827 (22%) individuals who were previously on ART were no longer receiving treatment. This group includes 30,812 individuals who were lost to follow-up, 4 who refused to continue ART for various reasons, and 11 who reported migrating overseas [Table 4].

Sixty-two percent of the PLHIV on ART are concentrated in the Greater Manila Area (GMM), which includes NCR, CALABARZON, and Central Luzon. Conversely, NCR, Central Visayas, and CALABARZON contribute to 65% of the total number of PLHIV not on treatment in the country. On the other hand, the highest rates of clients lost to follow-up are observed in Zamboanga Peninsula (31%), followed by Central Visayas (30%) and Eastern Visayas (29%).

Viral Load (VL) Testing and Suppression

Among the PLHIV on ART as of September 2025, a total of 95,123 individuals had been enrolled in ART for at least 3 months and were tagged as eligible for viral load testing. Of these eligible individuals, 56,886 (60%) PLHIV underwent viral load testing within the past 12 months. Specifically, 12,852 (23%) were tested between July to September 2025, 16,114 (28%) were tested between April to June 2025, 17,304 (30%) were tested between January to March 2025, and 10,616 (19%) between October and December 2024.

Figure 9. Viral Load Testing and Suppression among PLHIV on ART, 2019 - September 2025

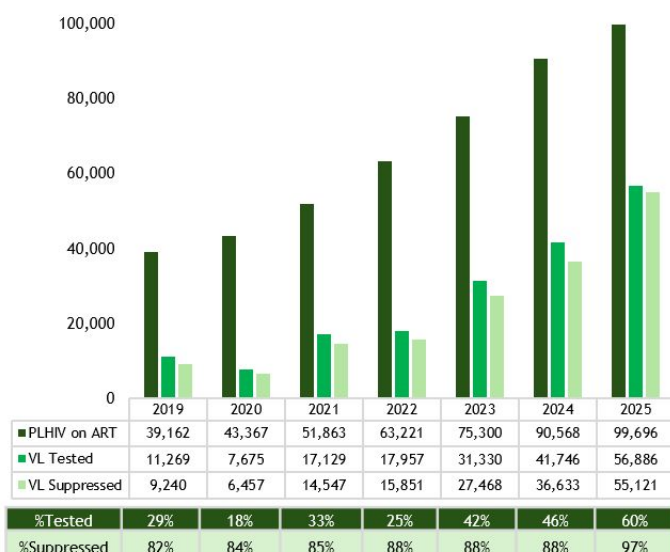


Table 5. Viral load testing and Suppression among PLHIV on ART by region, as of September 2025

Region of Treatment Facility	Viral Load Status among PLHIV on ART per region				
	Alive on ART (n= 99,696) ²²	Tested for VL (n= 56,886)	% Tested for VL	VL Suppressed (n= 55,121)	% Suppressed
NCR	40,596	22,349	55%	21,863	98%
4A	12,171	7,555	62%	7,321	97%
3	9,159	6,148	67%	5,976	97%
7	6,834	3,506	51%	3,400	97%
11	5,969	3,340	56%	3,208	96%
6	5,028	3,431	68%	3,359	98%
12	3,440	807	23%	726	90%
10	2,481	1,474	59%	1,399	95%
NIR	2,194	1,662	76%	1,624	98%
1	2,099	1,254	60%	1,186	95%
5	1,734	1,170	67%	1,100	94%
2	1,689	1,222	72%	1,179	96%
4B	1,241	461	37%	447	97%
9	1,215	433	36%	398	92%
8	1,212	469	39%	440	94%
Caraga	1,168	661	57%	585	89%
CAR	1,055	694	66%	684	99%
BARMM	354	224	63%	205	92%

18. Enrolled on ART from July to September 2025 regardless of diagnosis date

19. No data on baseline CD4 count for 3,462 cases newly enrolled to ART in July to September 2025

20. Current age as of the reporting period

21. No data on sex for 216 cases

22. Current treatment facility where PLHIV last visited for antiretroviral (ARV) refill

23. 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

24. 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

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

26. Clients who stopped due to refusal to treatment

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



Furthermore, among the 56,886 PLHIV on ART who were tested in the past 12 months as of September 2025, 55,121 (97%) were virally suppressed²⁸ ($\leq 1,000$ copies/mL) while 1,765 (3%) were not virally suppressed. Moreover, viral testing coverage more than tripled from 2020 to September 2025 but remained below 50% until 2024. As of September, VL testing coverage reached a record high of 60% [Figure 9].

Regionally, all regions except SOCCSKSARGEN (12), MIMAROPA (4B), Zamboanga Peninsula (9), and Eastern Visayas (8) have reached viral load testing coverage exceeding 50%, with suppression rates ranging from 89 to 99% [Table 5].

MORTALITY

Newly reported deaths
Jul - Sep 2025

125

Total reported deaths
Jan 1984 - Sep 2025²⁹

9,903

From July to September 2025, there were 125 reported deaths due to any cause among people diagnosed with HIV, 2% lower than the third quarter of the previous year. Twenty-two (18%) were 15-24 years old at the time of death, 56 (45%) were 25-34 years old, 41 (33%) were 35-49 years old, and 6 (5%) were 50 years old and above.

From 2020 to September 2025, there have been 4,685 deaths reported among diagnosed HIV cases in the Philippines, with more than 500 new deaths reported each year since 2016.

Since January 1984, a total of 9,903 deaths have been reported. Among total deaths, 4,619 (47%) had an advanced HIV disease at the time of diagnosis.³⁰ Among age groups, the largest proportion of reported deaths were among 25-34 years old accounting for 4,391 (44%) of total deaths, followed by 35-49 years old with 2,542 (26%), 15-24 years old with 1,378 (14%), 50 years old and older with 523 (5%), and <15 years old with 68 (<1%). 10% of the reported deaths had no reported age at the time of death.

28. According to Administrative Order 2022-0024-A, viral load suppression is defined as $\leq 1,000$ RNA copies/mL.

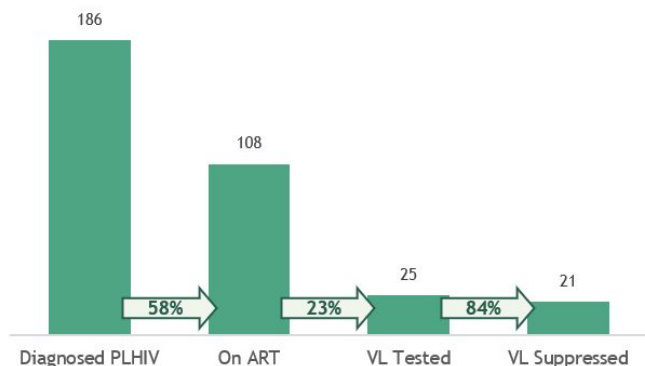
29. Reported deaths are due to any cause and not limited to AIDS-related causes. These are based on reported date, and actual date of death may not necessarily fall in the current reporting period.

30. 3,074 (31%) out of 9,606 deaths had no data on immunologic/clinical criteria at the time of diagnosis.

OTHER VULNERABLE POPULATIONS

Pregnant Women with HIV

Figure 10. HIV Care Cascade among PLHIV Diagnosed during pregnancy within the past year (Oct 2024-Sep 2025)



From July to September 2025, there were 56 HIV positive women aged 15 to 39 years old (median: 25 years) who were pregnant at the time of diagnosis. This was a 75% increase compared to the same reporting period last year.

The reporting of pregnancy status at the time of diagnosis was integrated into HIV and AIDS Registry of the Philippines in 2011; and since then, a total of 1,118 diagnosed women were reported pregnant at the time of diagnosis.

Among the pregnant women at the time of diagnosis within the past year ($n=189$), 186 (98%) were currently alive. Of these, 138 (74%) were initiated to ART however, only 108 (78%) among them were retained on ART. Of those who were on treatment, only 25 (23%) were tested for viral load, of which 21 (84%) were virally suppressed [Figure 10].

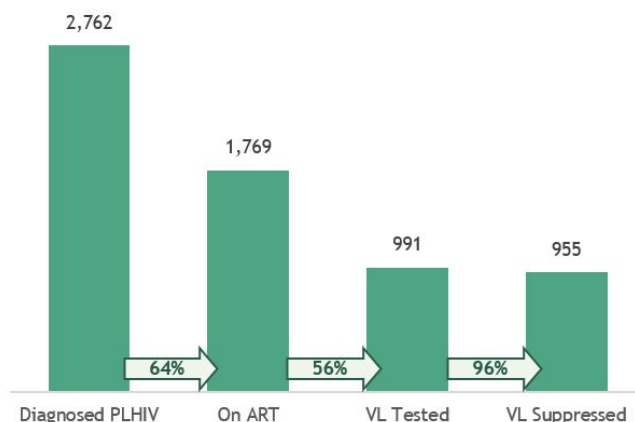
Transgender Women (TGW)

From July to September 2025 there were 55 newly reported cases who identified as transgender women (TGW)³¹ where 10 (18%) were 15 - 24 years old, 30 (55%) were 25 - 34 years old, and 12 (22%) were 35-49 years old. The age at diagnosis ranged from 18 to 43 years old (median: 29 years).

Of the 2,964 TGW diagnosed with HIV from January 2018³² to September 2025, almost all (2,923, 99%) acquired HIV through sexual contact, 6 (<1%) through sharing of infected needles, and 35 (1%) had no data on mode of transmission. By age group, 844 (28%) were 15-24 years old at the time of diagnosis, almost half (1,455, 49%) were 25-34 years old, 589 (20%) were 35-49 years old, and 72 (2%) were 50 years and older, and 4 had no data on age. The age of diagnosis ranged from 15 to 75 years old (median: 28 years).

Among the diagnosed cases of TGW, 2,762 (93%) were currently alive. Of these, 2,380 (86%) were initiated to ART however, only 1,769 (64%) among diagnosed TGW living with HIV were retained on ART. Of those who were on treatment, only 991 (56%) were tested for viral load with 96% (955) viral load suppression [Figure 11].

Figure 11. HIV Care Cascade among TGW living with HIV

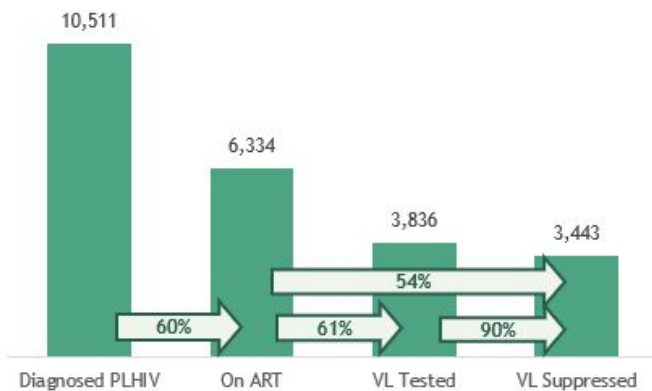


31. Transgender woman tagging is based on the reported gender identity of clients

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



Migrant Workers

Figure 12. Diagnosis and Treatment coverage among migrant workers living with HIV

From July to September 2025, 183 migrant workers were reported, among whom were Filipinos aged 16 to 64 (median: 35). Of the Filipino migrant workers, 168 (92%) were male and 15 (8%) were female. Most (179, 98%) acquired HIV through sexual contact: 109 (60%) through male-male sex, 36 (20%) through sex with both males and females, and 34 (19%) through male-female sex; 1 (1%) from needlestick transmission, and 3 (2%) had no data on transmission. There was a 1% increase in HIV diagnoses among migrant workers compared to the same period last year, and a 7% decrease over the past five years.

Since 1984, 11,168 (7%) of diagnosed cases have been migrant workers. Of these, 10,938 (98%) acquired HIV through sexual contact, 20 (<1%) through needle sharing, 9 (<1%) through exposure to blood, 4 (<1%) through needlestick injury, and 191 (2%) had no data on transmission.

Among the diagnosed cases of migrant workers, 10,511 (94%) were currently alive. Of these, 8,694 (83%) were initiated to ART, but only 6,334 (73%) among diagnosed living with HIV were retained on ART. Of those who were on treatment, only 3,836 (61%) were tested for viral load with 90% (3,443) viral load suppression [Figure 12].

People Engaging in Transactional Sex³³

In July to September 2025, 429 (9%) of the newly diagnosed engaged in transactional sex within the past 12 months. Majority (418, 97%) were males and 11 (3%) were females, their age ranged from 15 to 62 years old (median: 29 years). Of the male cases, 173 (41%) reported accepting payment for sex only, 171 (41%) reported paying for sex only, and 74 (18%) engaged in both. On the other hand, among female cases, 5 (46%) accepted payment for sex, only two (18%) reported paying for sex only, and 4 (36%) engaged in both. 9,953 (57%) of the total cases who had history of transactional sex were diagnosed from 2020 to 2025, of which almost half (47%) of them paid for sex [Table 6].

Since the reporting of transactional sex began in December 2012, a total of 17,577 cases have been reported to HARP³³. The majority, 17,088 (97%), were males, while 489 (3%) were females. Among them, 5,956 (34%) accepted payment for sex, 8,787 (50%) paid for sex, and 2,834 (16%) engaged in both.

Among the diagnosed cases who had history of transactional sex, 14,966 (94%) were currently alive. Of these, 14,966 (90%) were initiated to ART however, only 10,712 (65%) among of them were retained on ART. Of those who were on treatment, only 6,206 (58%) were tested for viral load with 86% (5,356) viral load suppression.

Table 6. Diagnosed HIV cases who engaged in transactional sex, by sex and age, 2012 - 2025 (n= 17,577)^{34,35}

Type of Transactional Sex	Jul - Sep 2025 (n=429)	2020 - 2025 (n=9,953)	2012 - 2025 (N=17,577)
Accepted	178	3,524	5,956
Male	173	3,398	5,650
Female	5	126	306
Age Range (median)	15-51 (26)	14-63 (26)	12-68 (26)
Paid for Sex Only	173	4,721	8,787
Male	171	4,694	8,735
Female	2	27	52
Age Range (median)	17-62 (33)	16-80 (33)	13-80 (32)
Engaged in Both	78	1,708	2,834
Male	74	1,664	2,703
Female	4	44	131
Age Range (median)	19-52 (28)	14-73 (29)	14-73 (29)

33. 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.

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

35. 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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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 306 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 was 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
or by scanning the QR Code





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 TESTING COVERAGE (VL Tested/On ART)	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Suppressed/ On ART)
1	7,900	4,270	54%	2,858	67%	1,751	61%	1,681	96%	59%
2	4800	2,659	55%	1,990	75%	1,341	67%	1,298	97%	65%
3	30,000	15,414	51%	10,630	69%	6,879	65%	6,697	97%	63%
4A	43,800	25,341	58%	17,237	68%	10,143	59%	9,844	97%	57%
4B	4,200	2,656	63%	1,669	63%	714	43%	696	97%	42%
5	6,100	3,373	55%	2,286	68%	1,466	64%	1,405	96%	61%
6	11,500	5,985	52%	4,789	80%	3,364	70%	3,290	98%	69%
7	19,200	10,932	57%	5,940	54%	3,181	54%	3,079	97%	52%
8	4,500	2,645	59%	1,632	62%	759	47%	728	96%	45%
9	4,200	2,598	62%	1,542	59%	663	43%	625	94%	41%
10	6,900	4,058	59%	2,747	68%	1,615	59%	1,545	96%	56%
11	14,600	8,516	58%	5,371	63%	2,978	55%	2,862	96%	53%
12	7,700	4,388	57%	3,273	75%	1,064	33%	990	93%	30%
ARMM	900	643	71%	374	58%	193	52%	177	92%	47%
CAR	2,300	1,315	57%	868	66%	591	68%	577	98%	66%
CARAGA	3,300	2,033	62%	1,397	69%	800	57%	727	91%	52%
NCR	73,700	47,804	65%	29,617	62%	16,804	57%	16,402	98%	55%
NIR	7,100	3,689	52%	2,717	74%	1,806	66%	1,767	98%	65%

Note: Regional cascade is based on the residence of the HIV-positive individual at the time of diagnosis.; Dx = Diagnosed

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 TESTING COVERAGE (VL Tested/On ART)	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Suppressed / On ART)
CHILDREN (<10)	1,500	269	18%	157	58%	85	54%	42	49%	27%
ADOLESCENTS (10-19)	13,700	1,959	14%	1,380	70%	539	39%	406	75%	29%
YOUTH (15-24)	57,300	15,813	28%	11,347	72%	5,684	50%	4,657	82%	41%
ADULTS (25+)	194,100	127,855	66%	81,628	64%	48,315	59%	42,534	88%	52%

Note: Age is based on the current age of the PLHIV as of the reporting period. Overlap in counts occur between adolescent and youth age groups.

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 TESTING COVERAGE (VL Tested/On ART)	VL SUPPRESSED	VL SUPPRESSION AMONG TESTED	3rd 95 (VL Suppressed/ On ART)
MALES HAVING SEX WITH MALES (MSM)	194,300	124,051	64%	85,343	69%	49,609	58%	43,409	88%	51%
PERSONS WHO INJECT DRUGS (PWID)	2,800	2,348	84%	524	22%	270	52%	251	93%	48%
OTHER MALES	36,500	11,953	33%	6,018	50%	3,471	58%	2,983	86%	50%
OTHER FEMALES	18,000	7,975	44%	3,499	44%	2,084	60%	1,804	87%	52%

Note:

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). KP tagging is among adult PLHIV (15+). MSM group includes transgender women.

"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.