

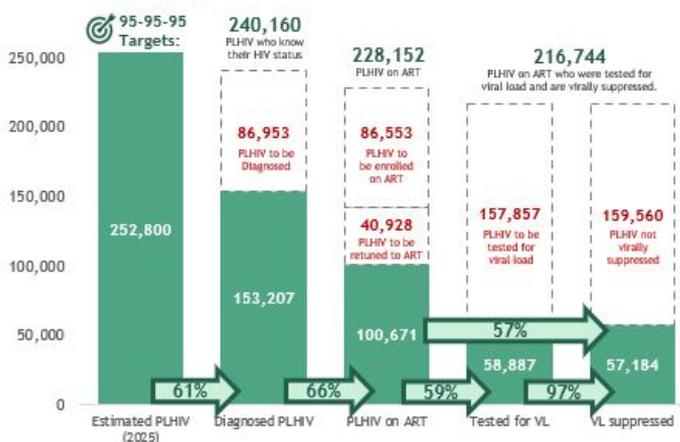


HIV & AIDS SURVEILLANCE OF THE PHILIPPINES

HIV & AIDS CONTINUUM OF CARE

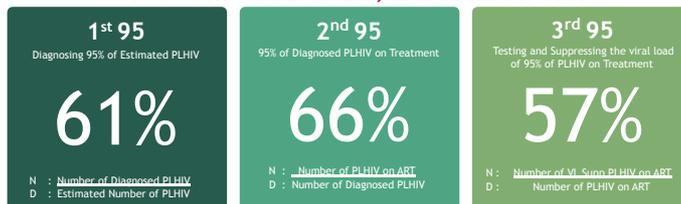
The latest Philippine HIV estimates show that by the end of 2025, there would have been 252,800 estimated People Living with HIV (PLHIV) in the country. As of December 2025, 153,207 (61% of the estimated) PLHIV have been diagnosed or laboratory-confirmed. Further, 100,671 (66% of the diagnosed) PLHIV are currently on life-saving Antiretroviral Therapy (ART), of which 58,887 (59%) PLHIV have been tested for viral load (VL) in the past 12 months. Among those tested for VL, 57,184 (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 decreased by 1%, while VL suppression among PLHIV on ART increased by 2%.

Figure 1. National Care Cascade as of December 2025



See Annex : HIV Care Cascade per Region, Age Group

95-95-95 ACCOMPLISHMENT, as of December 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.

PREVENTION

*Note: : Data for oral PrEP is partial as of December 2025. Data validation is in progress and will be reflected in the succeeding reports.

From October to December 2025, there were 4,760* clients newly enrolled to Pre-Exposure Prophylaxis (PrEP). Of the enrollees in this period, 61 (1%) were less than 18 years old at the time of enrollment, 1,924 (40%) were 18-24 years old, 2,107 (44%) were 25-34 years old, 660 (14%) 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 facilities of National Capital region (NCR) (1,376, 29%), Region 4A (918, 19%), and Region 3 (503, 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 78,797 clients have been enrolled. Of these, 75,858 (96%) were male, and 49,702 (63%) were 25 years old or older. The majority of clients ever enrolled in PrEP (78%, 61,485) were registered at facilities in NCR, CALABARZON (4A), and Central Luzon (3). Among the total enrolled, only 18% (14,040) returned for a PrEP refill in 2025, while 29% (22,860) were new enrollees. Of the 41,897 non-returnees, 1,415 (3%) tested positive for HIV³.

Figure 2. Quarterly PrEP Enrollment as of December 2025 (n=78,797)⁴



DIAGNOSIS

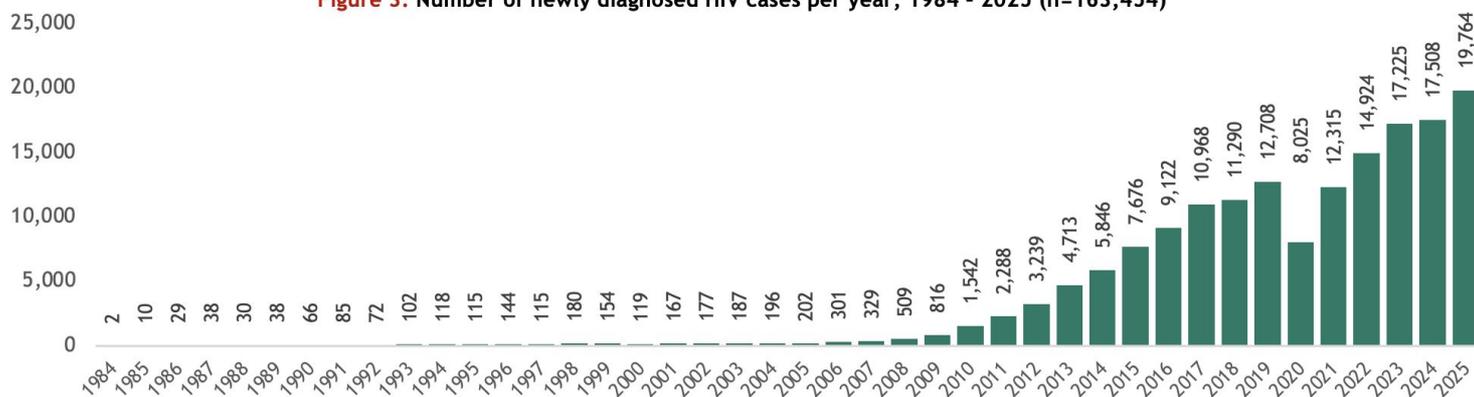


In October to December 2025, there were 4,277 confirmed HIV-positive individuals reported to the One HIV/AIDS & STI Information System (OHASIS), 1% higher than the cases recorded in the same quarter last year. Of the recorded cases for this quarter, 1,069 (25%) had an advanced HIV infection at the time of diagnosis, which is 3% lower than the same reporting period last year^{5,6}. The quarter average cases per day is 47, which did not change from the the same quarter last year.

Of the newly reported confirmed HIV-cases this period, 4,038 (94%) were males, while 239 (6%) were females. The age of the newly reported cases ranged from 1 to 76 years old (median: 27 years). By age group, 15 (<1%) were less than 15 years old, 1,361 (32%) were 15-24 years old, 1,929 (45%) were 25-34 years old, 821 (19%) were 35-49 years old, and 101 (2%) were 50 years and older⁷. Almost all newly reported cases (86%) in this quarter were confirmed in Certified Rapid HIV Diagnostic Algorithm (rHIVda) Confirming Laboratories (CrCLs).

1. Age at the time of enrollment to PrEP: 8 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. For this quarter, 3 obtained PrEP from overseas facilities. Since March 2021, 2 had no data on PrEP facility while 2,715 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. 3,208 cases had non-advanced HIV infection. Of these, 930 (29%) 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. 50 Individuals have no data on age.

Figure 3. Number of newly diagnosed HIV cases per year, 1984 - 2025 (n=163,454)



Cumulatively, 163,454 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]. 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 4]. 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. In 2025, average monthly cases reached 1,647, 13% higher than the previous year.

Moreover, the number of reporting Certified rHIVda Confirming Laboratories (CrCLs) in OHASIS increased from 26 facilities in 2021 to 195 as of 2025.

Figure 4. Number of monthly newly diagnosed HIV cases, 2021 - Dec 2025



Geographic Distribution

From October to December 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 60% (2,562) of the total cases [Table 1].

From 1984 to December 2025, NCR and Regions 4A, 3, 7, and 11 consistently report the highest number of cases, with a total of 116,792 cases (71%). During this period, 45,426 cases (28%) 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 - 2025^a

Region	Oct - Dec 2025 (n=4,277)		Jan - Dec 2025 (n=19,764)		Jan 2020 - Dec 2025 (n=89,761)		Jan 1984 - Dec 2025 (N=163,454)		CrCLs as of 2025 (n=195)
NCR	899	21%	4,458	23%	22,964	26%	51,067	31%	39
4A	723	17%	3,432	17%	16,175	18%	27,404	17%	19
3	447	10%	2,089	11%	10,170	11%	17,209	11%	18
7	223	5%	1,156	6%	5,733	6%	11,911	7%	8
11	270	6%	1,152	6%	5,066	6%	9,201	6%	5
6	210	5%	961	5%	4,418	5%	6,946	4%	9
12	149	3%	806	4%	2,934	3%	4,770	3%	10
1	169	4%	724	4%	3,028	3%	4,701	3%	10
10	135	3%	655	3%	2,873	3%	4,485	3%	10
NIR	183	4%	705	4%	2,896	3%	4,415	3%	7
5	130	3%	623	3%	2,489	3%	3,819	2%	9
2	113	3%	506	3%	2,013	2%	2,970	2%	13
9	171	4%	659	3%	1,980	2%	2,970	2%	8
4B	110	3%	536	3%	2,075	2%	2,958	2%	5
8	123	3%	449	2%	1,935	2%	2,951	2%	6
CARAGA	98	2%	389	2%	1,514	2%	2,289	1%	9
CAR	38	1%	170	1%	831	1%	1,428	1%	7
BARM ⁹	46	1%	196	1%	522	1%	724	<1%	3

Sex and Age

Majority of the total reported cases (154,296 94%) were males, while 9,148 (6%) were females [Figure 5]¹⁰. Since 2011, the proportion of males among the newly diagnosed cases has consistently been at least 94%.

By age group¹¹, 565 (<1%) were below 15 years old upon diagnosis, 49,015 (30%) were among the youth aged 15-24 years old, 80,781 (49%) were 25-34 years old, 28,806 (18%) were 35-49 years old, and 4,164 (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 2025 [Figure 6]. Moreover, the highest percent change in the past five years occurred among the <15 age group (+192%), followed by the 15-24 age group (+106%) [Table 2].

Figure 5. Proportion of diagnosed HIV cases by sex, Jan 1984 - Dec 2025

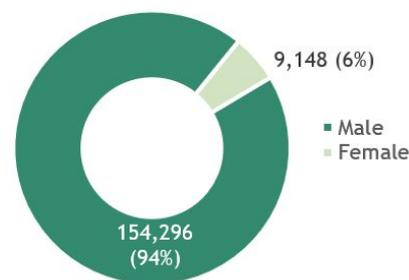
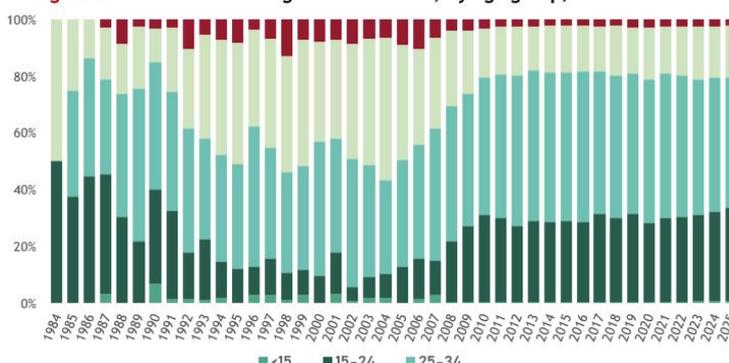


Figure 6. Distribution of diagnosed HIV cases, by age group, 1984 - Dec 2025



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 BARM obtain confirmatory testing from the facilities of other regions.
 10. No data on sex for 10 cases
 11. No data on age for 123 cases

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

Age group	As of Dec 2020	As of Dec 2025	% Increase
<15	249	565	126.91%
15-24	23,511	49,015	108.48%
25-34	41,449	80,781	94.89%
35-49	14,276	28,806	101.78%
50+	2,161	4,164	92.69%
TOTAL	81646	163,331	100.05%

Mode of Transmission (MOT)

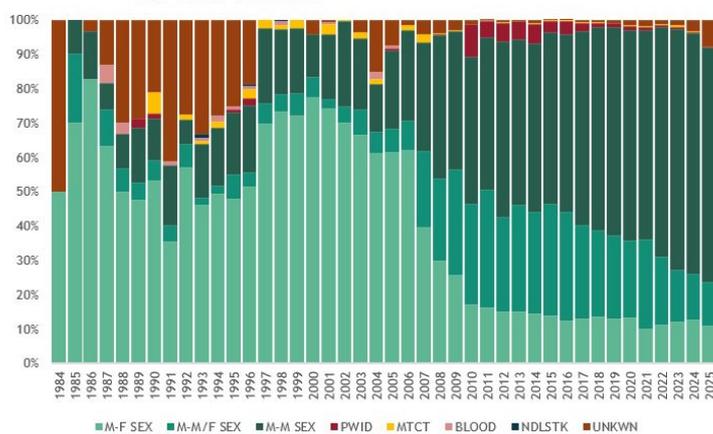
In the fourth quarter of this year, 3,715 (87%) newly reported cases had acquired HIV through sexual contact – 2,718 through male-male sex, 504 through male-male/female sex¹², and 493 through male-female sex. Meanwhile, 2 (<1%) reported sharing of infected needles, and 8 (<1%) through mother-to-child transmission [Table 3].

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

Mode of Transmission	Oct - Dec 2025 (n=4,277)		Jan - Dec 2025 (n=19,764)		Jan 2020 - Dec 2025 (n=89,660)		Jan 1984 - Dec 2025 (n=163,353)	
	M	F	M	F	M	F	M	F
	(4,038)	(239)	(18,731)	(1,033)	(85,024)	(4,636)	(154,200)	(9,143)
Sexual Contact	3,508	207	17,231	925	81,674	4,308	148,013	8,489
Male-male	2,718	-	13,506	-	60,257	-	99,043	-
Both males & females ¹³	504	-	2,499	-	15,398	-	35,604	-
Male-female	286	207	1,226	925	6,019	4,308	13,366	8,489
Sharing of infected needles	2	0	35	0	429	28	2,490	156
Mother-to-child	5	3	28	19	119	113	224	207
Blood products	0	0	0	0	0	0	5	14
Needlestick injury	0	0	0	0	0	0	2	1

Sexual contact has consistently been the leading mode of HIV transmission among newly diagnosed cases over the years [Figure 7]. From January 1984 to December 2025, of the 163,353 reported cases, 156,502 (96%) were acquired through sexual contact. This includes 99,043 cases from male-male sex, 35,604 from male-male/female sex, and 21,855 from male-female sex.

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

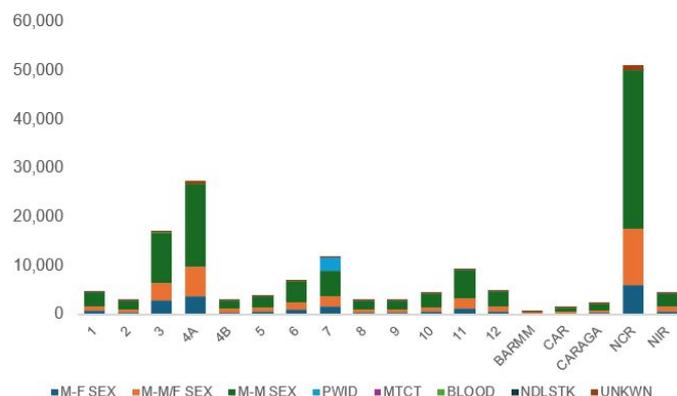


There has been a notable increase in reported HIV cases resulting from mother-to-child transmission. Out of a total of 431 cases, more than half (54%, 232) were reported from 2020 to the current reporting period.

Additionally, sharing of infected needles has consistently accounted for 2% (2,646) 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, no new cases of needlestick injury were recorded. The last reported case occurred in 1998, and no further incidents have been documented since then.

Among diagnosed male cases, 134,647 (87%) acquired HIV through sex with another male, 13,366 (9%) through sex with a female, 2,490 (2%) through sharing of infected needles, and 224 (<1%) through mother-to-child transmission. Similarly, among diagnosed females, the predominant mode of transmission was sexual contact, with 93% (8,489) acquiring HIV through sex with a male. Additionally, 207 (2%) diagnosed female cases were attributed to mother-to-child transmission, and 156 (2%) were due to sharing infected needles.

Figure 8. Distribution of diagnosed HIV cases, by mode of transmission and region, Jan 1984 - Dec 2025¹⁶



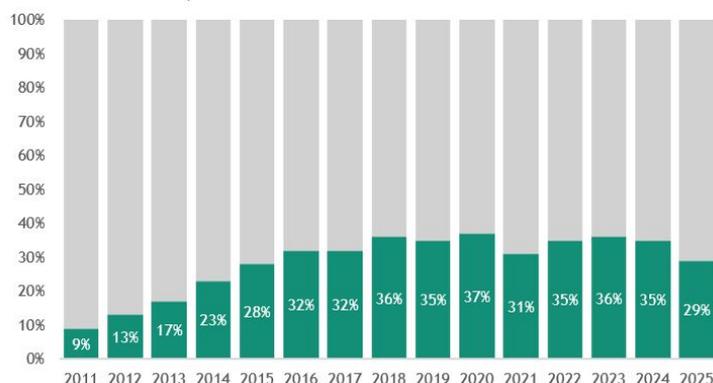
Modes of transmission (MOT) show regional variations. For instance, 33% (43,995) of diagnosed males who have sex with males were from NCR. Over half (56%, 242) of those who acquired HIV through mother-to-child transmission were from NCR, Region 4A, and Region 3. Moreover, almost all (99%, 2,631) who acquired HIV through sharing of infected needles were from Region 7 [Figure 8]. 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, 49,703 (32%) 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% (66,599) of non-AHD cases.

From 2011 to 2020, there was a notable increase in the proportion of cases with AHD [Figure 9], rising from 9% in 2011 to 37% in 2020. Since 2021, the proportion of AHD cases has remained relatively stable, consistently exceeding 30% annually, with the current proportion being 8% lower than in 2020. Median baseline CD4 improved over the past five years, from 205 cells/mm³ in 2020 to 221 cells/mm³ in 2025.

Figure 9. Proportion of newly diagnosed HIV cases with advanced HIV disease, 2011 - Dec 2025



12. Among males only

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

14. No data on MOT for 3,752 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 October to December 2025, there were 4,150 people with HIV who were enrolled to treatment, of which, 4,102 (99%) were on the first line regimen, 3 (<1%) were on second line regimen, and 45 (1%) were on other lines of regimen. Among them, 19 (<1%) were less than 15 years old, 1,306 (31%) were 15-24 years old, 1,893 (46%) were 25-34 years old, 826 (20%) were 35-49 years old, and 105 (3%) were 50 years and older. The median CD4¹⁹ of these patients upon enrollment was at 199 cells/mm³.

Newly Enrolled to ART,
Oct-Dec 2025¹⁶

4,150

Median Baseline CD4
at enrollment (in
cells/mm³)¹⁷

199

PLHIV on ART as of Dec 2025 **100,671**

Current age (in years)¹⁸

Age Range **1 - 84**

Median Age **33**

Sex assigned at birth¹⁹

Male **96,602**

Female **3,860**

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

Region of Treatment Facility ²⁰	Treatment Outcome					Total (n=141,241)	% LTFU
	Alive on ART ²¹ (n= 100,671)	Dead (n=6,761)	Lost to Follow-up ²² (n= 33,794)	Trans out (Overseas) ²³ (n= 11)	Stopped ²⁴ (n= 4)		
NCR	40,662	1,716	15,421	0	0	57,799	27%
4A	12,525	602	2,677	1	0	15,805	17%
3	9,246	999	2,450	5	1	12,701	19%
7	7,364	676	2,986	0	0	11,026	27%
11	4,913	323	3,561	0	0	8,797	40%
6	4,840	568	663	0	0	6,071	11%
12	3,241	157	1,063	0	0	4,461	24%
10	2,655	199	749	0	0	3,603	21%
NIR	2,537	370	633	0	0	3,540	18%
1	2,179	170	433	0	0	2,782	16%
5	1,858	212	576	0	0	2,646	22%
2	1,718	144	282	1	0	2,145	13%
9	1,531	154	465	4	0	2,154	22%
4B	1,331	101	534	0	0	1,966	27%
CARAGA	1,280	118	262	0	3	1,663	16%
8	1,212	117	626	0	0	1,955	32%
CAR	1,193	83	293	0	0	1,569	19%
BARMM	366	52	117	0	0	535	22%

Among the 141,599 people living with HIV (PLHIV) who have ever been enrolled on antiretroviral therapy (ART) since 2002, a total of 100,671 individuals aged 1 to 84 years old (median age: 33 years) were alive on ART as of December 2025. Of these, 98,890 (98%) were on a first-line regimen, 908 (1%) were on a second-line regimen, and 873 (1%) were on other lines of regimen.

As of December 2025, 33,806 (24%) individuals who were previously on ART were no longer receiving treatment. This group includes 33,794 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 62% 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 Davao Region (40%), followed by Eastern Visayas (32%)

Viral Load (VL) Testing and Suppression

Among the PLHIV on ART as of December 2025, a total of 96,763 individuals had been enrolled in ART for at least 3 months and were tagged as eligible for viral load testing. Of these eligible individuals, 58,887 (61%) PLHIV underwent viral load testing within the past 12 months. Specifically, 12,280 (21%) were tested between October to December 2025, 16,042 (27%) were tested between July to September 2025, 15,597 (26%) were tested between April to June 2025, and 14,968 (25%) were tested between January to March 2025.

Figure 10. Viral Load Testing and Suppression among PLHIV on ART, 2019 - December 2025

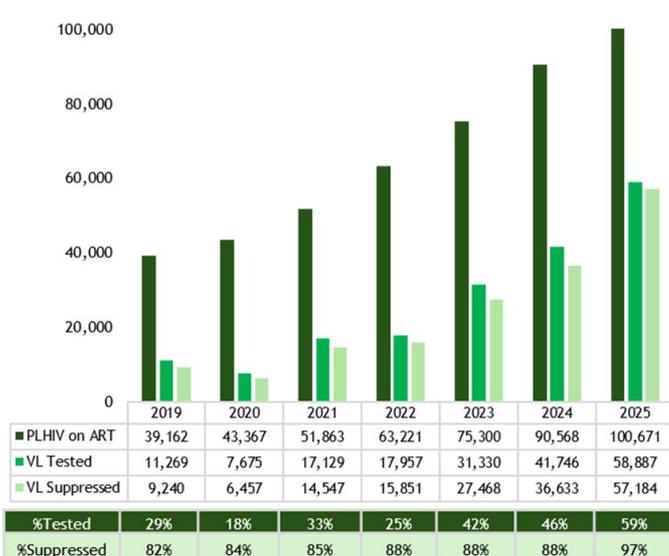


Table 5. Viral load testing and Suppression among PLHIV on ART by region of treatment facility, as of December 2025

Region of Treatment Facility	Viral Load Status among PLHIV on ART per region				
	Alive on ART (n= 100,671) ²⁵	Tested for VL (n= 58,887)	% Tested for VL	VL Suppressed (n= 57,184)	% Suppressed
NCR	40,662	22,267	55%	21,800	98%
4A	12,525	7,859	63%	7,645	97%
3	9,246	6,290	68%	6,116	97%
7	7,364	4,014	55%	3,920	98%
11	4,913	3,086	63%	2,973	96%
6	4,840	3,683	76%	3,605	98%
12	3,241	1,071	33%	997	93%
10	2,655	1,587	60%	1,498	94%
NIR	2,537	1,759	69%	1,727	98%
1	2,179	1,221	56%	1,176	96%
5	1,858	1,247	67%	1,166	94%
2	1,718	1,322	77%	1,282	97%
9	1,531	653	43%	613	94%
4B	1,331	471	35%	458	97%
CARAGA	1,280	781	61%	702	90%
8	1,212	523	43%	494	94%
CAR	1,193	768	64%	752	98%
BARMM	366	273	75%	248	91%

16. Enrolled on ART from October to December 2025 regardless of diagnosis date
 17. No data on baseline CD4 count for 2,009 cases newly enrolled to ART in October to December 2025
 18. Current age as of the reporting period
 19. No data on sex for 209 cases
 20. Current treatment facility where PLHIV last visited for antiretroviral (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. PLHIV currently alive on ART with at least 1 visit and screened within the reporting period

Furthermore, among the 58,887 PLHIV on ART who were tested in the past 12 months as of December 2025, 57,184 (97%) were virally suppressed ($\leq 1,000$ copies/mL) while 1,705 (3%) were not virally suppressed. Moreover, viral testing coverage more than tripled from 2020 to December 2025 but remained below 50% until 2024. As of December, VL testing coverage reached a record high of 59% [Figure 10].

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 90% to 98% [Table 5].

MORTALITY



From October to December 2025, 141 deaths from any cause were reported among people diagnosed with HIV, 5% lower than in Q4 of the previous year. Of these, 1 (1%) was aged 0–14 years, 24 (17%) were 15–24 years, 66 (47%) were 25–34 years, 44 (31%) were 35–49 years, and 6 (4%) were aged 50 years and above

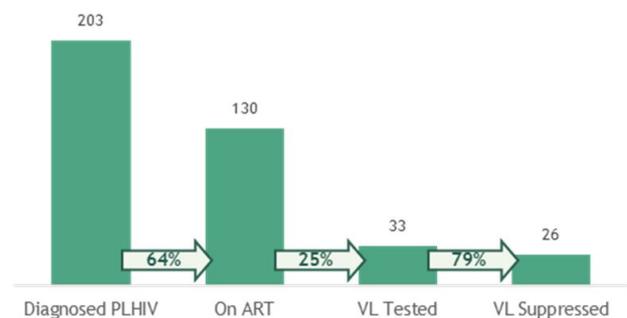
From 2020 to 2025, there have been 4,995 deaths reported among diagnosed HIV cases in the Philippines, with more than 500 new deaths reported each year since 2016.

Since January 1984, a total of 10,247 deaths have been reported. Among total deaths, 4,878 (48%) had an advanced HIV disease at the time of diagnosis.³⁰ Among age groups of diagnosed HIV cases, the largest proportion of reported deaths were among 25–34 years old accounting for 4,544 (44%) of total deaths, followed by 35–49 years old with 2,662 (26%), 15–24 years old with 1,432 (14%), 50 years old and older with 538 (5%), and <15 years old with 70 (<1%). 10% of the reported deaths had no reported age at the time of death.

OTHER VULNERABLE POPULATIONS

Pregnant Women with HIV

Figure 11. HIV Care Cascade among PLHIV Diagnosed during pregnancy within the past year (Oct-Dec 2025)



From October to December 2025, there were 55 HIV-positive women aged 15 to 36 years (median age: 24) who were pregnant at the time of diagnosis. This represents a 53% increase compared to the same reporting period last year.

Reporting of pregnancy status at the time of diagnosis was integrated into the HIV and AIDS Registry of the Philippines in 2011. Since then, a total of 1,174 diagnosed women have been reported as pregnant at the time of diagnosis.

Among pregnant women diagnosed with HIV within the past year (n=203), 106 (52%) were aged 15–24 years, 75 (37%) were aged 25–34 years, and 22 (11%) were aged 35–49 years.

All pregnant women diagnosed within the past year (n=203) were alive at the time of reporting. Of these, 157 (77%) were initiated on ART; however, only 130 (83%) were retained on ART. Among those on treatment, 33 (25%) underwent viral load testing, of whom 26 (79%) were virally suppressed [Figure 11].

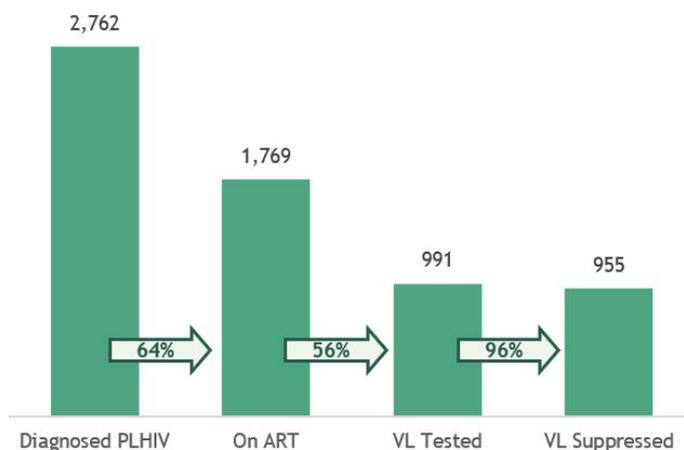
Transgender Women (TGW)

From October to December 2025 there were 33 newly reported cases who identified as transgender women (TGW)²⁷ where 11 (33%) were 15 – 24 years old, 19 (58%) were 25 – 34 years old, 2 (6%) were 35–49 years old, and 1 (3%) was 50+ years old. The age at diagnosis ranged from 19 to 50 years old (median: 27 years).

Of the 2,997 TGW diagnosed with HIV from January 2018 to December 2025, almost all (2,955, 99%) acquired HIV through sexual contact, 6 (<1%) through sharing of infected needles, 1 (<1%) through mother-to-child transmission, and 34 (1%) had no data on mode of transmission. By age group, 856 (28%) were 15–24 years old at the time of diagnosis, almost half (1,475, 49%) were 25–34 years old, 591 (20%) were 35–49 years old, and 74 (2%) were 50 years and older, and one 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, 2,780 (93%) were currently alive. Of these, 2,559 (93%) were initiated to ART however, only 1,723 (62%) among diagnosed TGW living with HIV were retained on ART. Of those who were on treatment, only 1,016 (59%) were tested for viral load with 84% (855) viral load suppression [Figure 12].

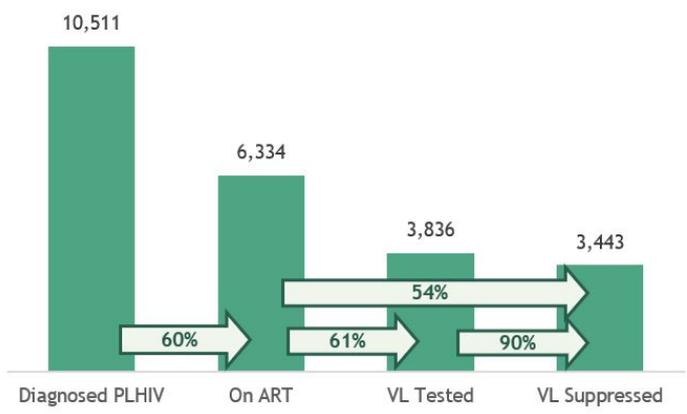
Figure 12. HIV Care Cascade among TGW living with HIV



²⁶ 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
²⁷ Transgender woman tagging is based on the reported gender identity of clients. Reporting of gender-identity in HARP started in 2018

Migrant Workers

Figure 13. Diagnosis and Treatment coverage among migrant workers living with HIV



From October to December 2025, 192 migrant workers were reported, among whom were Filipinos aged 19 to 65 (median: 35). Of the Filipino migrant workers, 180 (94%) were males and 12 (6%) were females. Most (185, 96%) acquired HIV through sexual contact: 107 (56%) through male-male sex, 45 (23%) through sex with both males and females, and 33 (17%) through male-female sex, and 7 (4%) had no data on transmission. There was a 6% increase in HIV diagnoses among migrant workers compared to the same period last year, and a 29% increase over the past five years.

Since 1984, 11,357 (7%) of diagnosed cases have been migrant workers. Of these, 11,122 (98%) acquired HIV through sexual contact, 20 (<1%) through needle sharing, 9 (<1%) through exposure to blood, 4 (<1%) through needlestick injury, and 198 (2%) had no data on transmission.

Among the diagnosed cases of migrant workers, 10,686 (94%) were currently alive. Of these, 8,882 (83%) were initiated to ART, but only 6,345 (71%) among diagnosed living with HIV were retained on ART. Of those who were on treatment, only 3,890 (61%) were tested for viral load with 90% (3,501) viral load suppression [Figure 13].

People Engaging in Transactional Sex²⁸

In October to December 2025, 486 (11%) of the newly diagnosed engaged in transactional sex within the past 12 months. Majority (474, 98%) were males and 12 (2%) were females, their age ranged from 16 to 65 years old (median: 30 years). Of the male cases, 162 (34%) reported accepting payment for sex only, 235 (50%) reported paying for sex only, and 77 (16%) engaged in both. On the other hand, among female cases, 9 (75%) accepted payment for sex, none reported paying for sex only, and 3 (25%) engaged in both. 10,654 (58%) 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 18,275 cases have been reported to HARP³³. The majority, 17,765 (97%), were males, while 510 (3%) were females. Among them, 6,206 (34%) accepted payment for sex, 9,106 (50%) paid for sex, and 2,963 (16%) engaged in both.

Among the diagnosed cases who had history of transactional sex, 16,972 (93%) were currently alive. Of these, 15,439 (91%) were initiated to ART however, only 10,749 (70%) among of them were retained on ART. Of those who were on treatment, only 6,386 (59%) were tested for viral load with 97% (6,202) viral load suppression.

Table 6. Diagnosed HIV cases who engaged in transactional sex, by sex and age, 2012 - 2025 (n= 18,275)^{29,30}

Type of Transactional Sex	Oct - Dec 2025 (n=486)	2020 - 2025 (n=10,654)	2012 - 2025 (N=18,275)
Accepted	171	3,775	6,206
Male	162	3,634	5,885
Female	9	141	321
Age Range (median)	16-54 (25)	14-63 (26)	12-68 (26)
Paid for Sex Only	235	5,041	9,106
Male	235	5,013	9,053
Female	0	28	53
Age Range (median)	18-65 (32)	15-80 (33)	13-80 (32)
Engaged in Both	80	1,838	2,963
Male	77	1,789	2,827
Female	3	49	136
Age Range (median)	16-57 (28)	14-73 (29)	14-73 (29)

28. 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.
 29. Transactional sex within the past 12 months at the time of diagnosis
 30. 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 QHASIS. 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	4,437	56%	2,972	67%	1,721	58%	1,673	97%	56%
2	4,800	2,760	58%	2,052	74%	1,442	70%	1,403	97%	68%
3	30,000	15,848	53%	10,732	68%	7,042	66%	6,855	97%	64%
4A	43,800	25,977	59%	17,561	68%	10,375	59%	10,091	97%	57%
4B	4,200	2,757	66%	1,782	65%	742	42%	728	98%	41%
5	6,100	3,495	57%	2,394	68%	1,542	64%	1,467	95%	61%
6	11,500	6,179	54%	4,899	79%	3,628	74%	3,550	98%	72%
7	19,200	11,131	58%	6,348	57%	3,610	57%	3,520	98%	55%
8	4,500	2,762	61%	1,678	61%	819	49%	793	97%	47%
9	4,200	2,769	66%	1,804	65%	830	46%	788	95%	44%
10	6,900	4,181	61%	2,924	70%	1,753	60%	1,668	95%	57%
11	14,600	8,787	60%	4,489	51%	2,771	62%	2,673	96%	60%
12	7,700	4,536	59%	3,064	68%	1,201	39%	1,138	95%	37%
BARM	900	676	75%	395	58%	234	59%	220	94%	56%
CAR	2,300	1,351	59%	955	71%	633	66%	619	98%	65%
CARAGA	3,300	2,125	64%	1,471	69%	902	61%	829	92%	56%
NCR	73,700	48,697	66%	29,628	61%	16,795	57%	16,412	98%	55%
NIR	7,100	3,876	55%	2,835	73%	1,875	66%	1,845	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	253	17%	148	58%	83	56%	65	78%	44%
ADOLESCENTS (10-19)	13,700	1,132	8%	803	71%	330	41%	299	91%	37%
YOUTH (15-24)	57,300	12,965	23%	9,192	71%	4,634	50%	4,398	95%	48%
ADULTS (25+)	194,100	135,676	70%	85,682	63%	51,501	60%	50,171	97%	59%

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	126,930	65%	85,744	68%	51,068	60%	49,741	97%	58%
PERSONS WHO INJECT DRUGS (PWID)	2,800	2,342	84%	567	24%	315	56%	309	98%	54%
OTHER MALES	36,500	12,181	33%	6,147	50%	3,588	58%	3,460	96%	56%
OTHER FEMALES	18,000	8,198	46%	3,688	45%	2,203	60%	2,074	94%	56%

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.