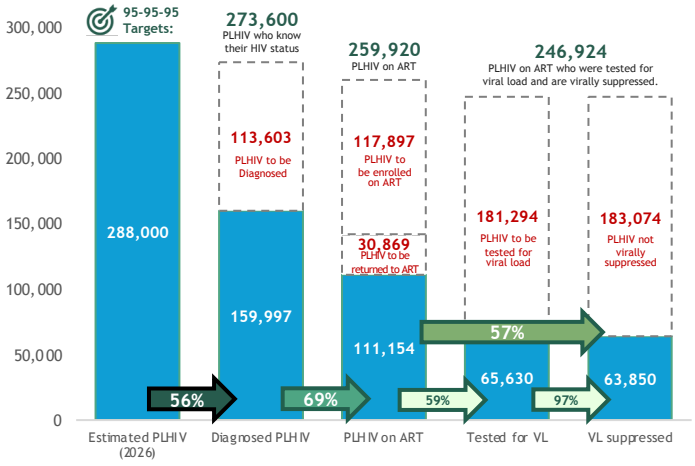
HIV & AIDS SURVEILLANCE OF THE PHILIPPINES

HIV & AIDS CONTINUUM OF CARE

The latest Philippine HIV estimates show that by the first quarter of 2026, there would have been 288,000 estimated People Living with HIV (PLHIV) in the country. As of June 2026, 159,997 (56% of the estimated) PLHIV have been diagnosed or laboratory-confirmed. Further, 111,154 (69% of the diagnosed) PLHIV are currently on life-saving Antiretroviral Therapy (ART), of which 65,630 (59%) PLHIV have been tested for viral load (VL) in the past 12 months. Among those tested for VL, 63,850 (97%) were virally suppressed. However, only 57% were virally suppressed among PLHIV on ART [Figure 1]. Compared to the previous reporting period (Jan-Mar 2026), diagnosis coverage increased by 2 percentage points, treatment coverage decreased by 3 percentage points, and VL suppression among PLHIV on ART increased by 7 percentage points.

Figure 1. National Care Cascade as of June 2026



See Annex : HIV Care Cascade per Region, Age Group

95-95-95 ACCOMPLISHMENT, as of June 2026

1st 95	2nd 95	3rd 95
Diagnosing 95% of Estimated PLHIV	95% of Diagnosed PLHIV on Treatment	Testing and Suppressing the viral load of 95% of PLHIV on Treatment
56%	69%	57%
N : Number of Diagnosed PLHIV D : Estimated Number of PLHIV	N : Number of PLHIV on ART D : Number of Diagnosed PLHIV	N : Number of VL Supp PLHIV on ART D : Number of PLHIV on ART

The 95-95-95 Targets
The 95-95-95 by 2025 is the global target set by the Joint United Nations Programme on HIV and AIDS (UNAIDS). The Philippines, as one of the states that 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 development of the PLHIV estimates, which are modeled using 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 (IHBSS), 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, and WHO, as well as 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.

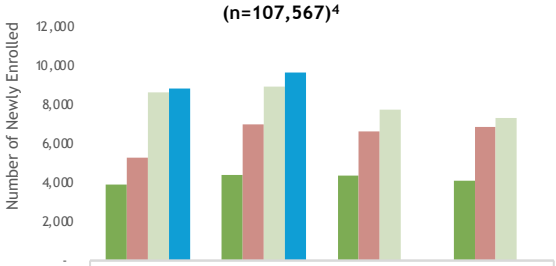
Virally Suppressed PLHIV
PLHIV on ART who have a viral load of ≤1000 HIV RNA copies per mL of blood. Viral load refers to the amount of HIV present in an infected person's blood.

PREVENTION

From April to June 2026, there were 9,640 clients newly enrolled in Pre-Exposure Prophylaxis (PrEP), a 10% increase from the previous quarter [Figure 2]. Of the enrollees in this period, 193 (2%) were less than 18 years old at the time of enrollment, 3,839 (41%) were 18-24 years old, 4,082 (43%) were 25-34 years old, 1,521 (16%) 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. The majority of those newly enrolled in PrEP were from the facilities of the National Capital Region (NCR) (5,316; 55%), Region 4A (1,404; 15%), and Region 7 (625; 6%)[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 107,567 clients have been enrolled. Of these, 102,728 (96%) were male, and 68,383 (64%) were 25 years old or older. The majority of clients ever enrolled in PrEP (78%; 83,855) were registered at facilities in NCR, CALABARZON (4A), and Central Luzon (3). Among the total enrolled before 2026, 22,350 (25%) returned for a PrEP refill in 2026, while 17% (18,440) were newly enrolled during the year. Of the 66,777 non-returnees, 2,195 (3%) tested positive for HIV.

Figure 2. Quarterly PrEP Enrollment as of June 2026 (n=107,567)[4]



	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec
2023	3,901	4,380	4,362	4,106
2024	5,279	6,986	6,615	6,854
2025	8,608	8,909	7,733	7,295
2026	8,800	9,640		

DIAGNOSIS

Newly Reported Cases, Apr - Jun 2026	With Advanced HIV Disease, Apr - Jun 2026[5,6]	Average Cases per day, Apr - Jun 2026	Total Reported Cases, Jan 1984 - Jun 2026
2,994	828	33	171,066

Male	Female
2,865	129

Age group[7]: <15 y/o <1% | 15 to 24 y/o 31% | 25 to 34 y/o 43% | 35 to 49 y/o 17% | 50 and older 3%

From April to June 2026, there were 2,994 confirmed HIV-positive individuals reported to the One HIV/AIDS & STI Information System (OHASIS), 39% lower than the cases recorded in the same quarter last year. Of the recorded cases for this quarter, 828 (28%) had an advanced HIV disease at the time of diagnosis, which is 45% lower than the same reporting period last year[5,6]. The quarter average cases per day are 33, decreased by 35% compared to the previous reporting period.

Of the newly reported confirmed HIV-cases this period, 2,865 (96%) were males, while 129 (4%) were females. The age of the newly reported cases ranged from 0 to 79 years old (median: 28 years). By age group, 10 (<1%) were less than 15 years old, 918 (31%) were 15–24 years old, 1,294 (43%) were 25–34 years old, 509 (17%) were 35–49 years old, and 81 (3%) were 50 years and older[7]. The majority of all newly reported cases (90%) in this quarter were confirmed in Certified Rapid HIV Diagnostic Algorithm (rHIVda) Confirming Laboratories (CrCLs). Moreover, the number of reporting Certified rHIVda Confirming Laboratories (CrCLs) in OHASIS increased from 26 facilities in 2021 to 195 as of 2026.

1. *Age at the time of enrollment in PrEP; 5 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, 1 client 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. *2,166 cases had non-advanced HIV infection. Of these, 1,732 (80%) 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. 182 individuals have no data on age.*

Cumulatively, 171,066 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 broader diagnostic coverage, thereby capturing more cases nationwide.

Since 2021, the number of newly diagnosed HIV cases reported each month has consistently increased. In 2021, the average monthly cases recorded were 1,027, which rose by 21% to 1,244 in 2022. The upward trend continued in 2023, with an additional 15% increase that brought the average to 1,435 monthly cases. In 2024, a smaller increase of 2% was observed, resulting in an average of 1,459 cases per month. The rise became more pronounced again in 2025, when the average monthly diagnoses reached 1,647, reflecting a 13% increase from the previous year. However, as of the first semester of 2026, the average monthly cases declined to 1,271, a 24% decrease from the same period in 2025, when the average was 1,666 cases [Figure 3].

Figure 3. Number of monthly newly diagnosed HIV cases, Jan 2023 - Jun 2026

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Monthly AVG
2023	1443	1289	2076	1236	1249	1516	1553	1570	1567	1499	1277	950	1435
2024	1081	1159	1161	1218	1334	2761	1652	1570	1362	1549	1305	1355	1459
2025	1807	1689	1583	1606	1594	1715	2176	1607	1708	1537	1330	1407	1647
2026	1690	1407	1533	1217	851	926							1271

Geographic Distribution

From April to June 2026, the regions with the highest reporting of newly diagnosed cases were NCR, CALABARZON (Region 4A), Central Luzon (Region 3), SOCCSKSARGEN (Region 12), and Western Visayas (Region 6), accounting for 54% (1,609) of the total cases [Figure 4].

From 1984 to June 2026, NCR and Regions 4A, 3, 7, and 11 consistently reported the highest number of cases, with a total of 121,106 cases (71%). During this period, 48,688 cases (28%) were reported from other regions within the country, while 13 cases (<1%) were reported overseas. [Table 1].

Figure 4. Distribution of newly diagnosed HIV cases by region of residence [8]
Apr - Jun 2026 (n=2,994)

Region	Number of Cases	%
NCR	567	19%
4A	338	11%
3	280	9%
12	235	8%
6	189	6%
10	169	6%
7	165	6%
1	156	5%
5	140	5%
11	130	4%
9	123	4%
2	103	3%
NIR	100	3%
CARAGA	74	2%
4B	73	2%
8	57	2%
BARMM	52	1%
CAR	25	1%

Table 1. Number of diagnosed HIV cases, by region of residence, 1984 - Jun 2026[8,9]

Region	Jan 2020 - Jun 2026 (n=97,375)		Jan 1984 - Jun 2026 (N=171,066)		CrCls as of 2026 (n=195)
NCR	24,516	25%	52,619	31%	39
4A	17,322	18%	28,550	17%	19
3	11,004	11%	18,043	11%	18
7	6,125	6%	12,302	7%	8
11	5,457	6%	9,592	6%	5
6	4,823	5%	7,351	4%	9
12	3,445	4%	5,281	3%	10
1	3,375	3%	5,048	3%	10
10	3,224	3%	4,836	3%	10
NIR	3,129	3%	4,648	3%	7
5	2,787	3%	4,117	2%	9
9	2,241	2%	3,231	2%	13
2	2,223	2%	3,180	2%	8
4B	2,249	2%	3,132	2%	5
8	2,093	2%	3,109	2%	6
CARAGA	1,672	2%	2,447	1%	9
CAR	893	1%	1,490	1%	7
BARMM	616	1%	818	<1%	3

Sex and Age

The majority of the total reported cases (161,529; 94%) were males, while 9,527 (6%) were females [Figure 5]. Since 2011, the proportion of males among the newly diagnosed cases has consistently been at least 94%.

By age group[11], 596 (<1%) were below 15 years old upon diagnosis, 51,375 (30%) were among the youth aged 15-24 years old, 84,185 (49%) were 25-34 years old, 30,158 (18%) were 35-49 years old, and 4,360 (3%) were aged 50 and older. The age of diagnosed cases ranged from <1 to 81 years old (median: 27 years). Diagnosed cases are getting younger as the 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 (+126%), followed by the 15-24 age group (+105%) [Table 2].

Figure 5. Proportion of diagnosed HIV cases by sex, Jan 1984 - Jun 2026[10]

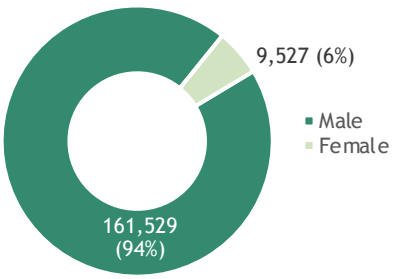
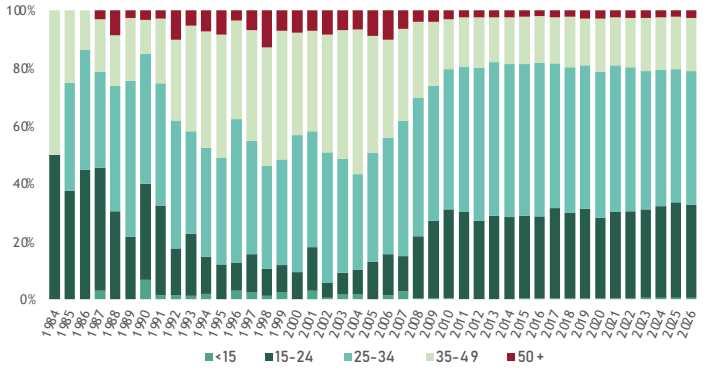


Figure 6. Distribution of diagnosed HIV cases, by age group, 1984 - Jun 2026[11]



8. From April to June 2026, 18(1%) had no data on residence; From Jan 2020- Jun 2026, 168 (<1%) had no data on residence, while 13 (<1%) were from overseas; Since 1984, 1,259 cases (1%) had no data on residence and 13 (<1%) were from overseas.
9. Residents of some regions obtain confirmatory testing from the facilities of other regions.
10. No data on sex for 10 cases
11. No data on age for 392 cases

Table 2. Percent increase between June 2021 and June 2026 of cumulative cases by age group

Age group	As of Jun 2021	As of Jun 2026	% Increase
<15	264	596	125.80%
15-24	25,085	51,375	104.80%
25-34	44,170	84,185	90.60%
35-49	15,172	30,158	98.80%
50+	2,282	4,360	91.10%
TOTAL	87,045	171,066	96.50%

Mode of Transmission (MOT)

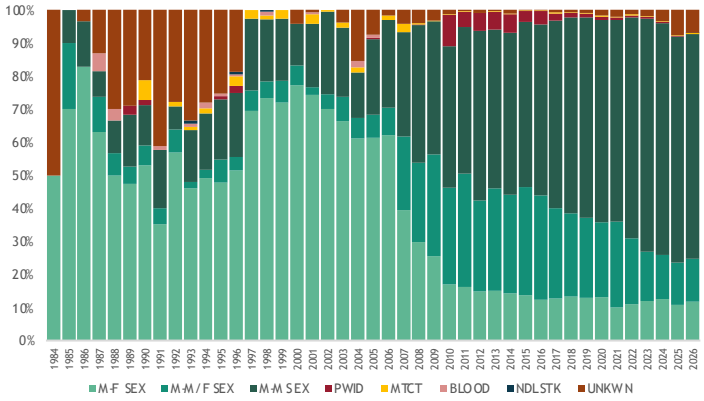
In the second quarter of this year, 2,723 (91%) newly reported cases had acquired HIV through sexual contact – 1,981 through male-male sex, 407 through male-male/female sex[12], and 335 through male-female sex. Meanwhile, 2 (<1%) reported sharing of infected needles, and 9 (<1%) through mother-to-child transmission [Table 3].

Table 3. Number of diagnosed HIV cases, by mode of transmission and sex, 1984 - Jun 2026[13, 14]

Mode of Transmission	Apr - Jun 2026 (n=2,994)		Jan 2020 - Jun 2026 (n=97,272)		Jan 1984 - Jun 2026 (n=171,066)	
	M (2,865)	F (129)	M (92,256)	F (5,015)	M (161,529)	F (9,527)
Sexual Contact	2,603	120	88,387	4,655	154,725	8,836
Male-male	1,981	-	65,429	-	104,215	-
Both males & females[13]	407	-	16,387	-	36,592	-
Male-female	215	120	6,571	4,655	13,918	8,836
Sharing of infected needles	2	0	432	29	2,492	157
Mother-to-child	8	1	136	118	241	212
Blood products	0	0	0	0	5	14
Needlestick injury	1	0	9	0	11	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 June 2026, of the 171,066 reported cases, 163,561 (96%) were acquired through sexual contact. This includes 104,215 cases from male-male sex, 36,592 from male-male/female sex, and 22,754 from male-female sex.

Figure 7. Distribution of diagnosed HIV cases, by mode of transmission, Jan 1984 - Jun 2026[14]

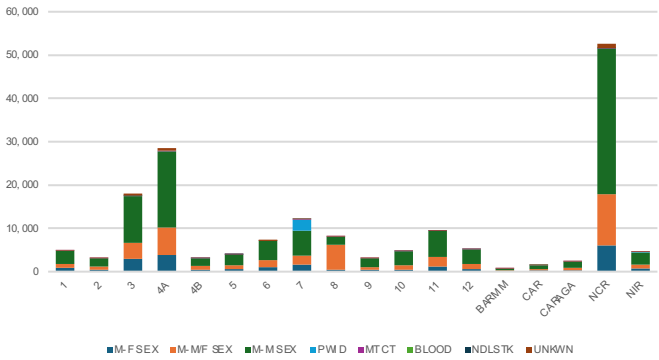


There has been a notable increase in reported HIV cases resulting from mother-to-child transmission. Out of a total of 453 cases, more than half (56%, 254) were reported from 2020 to the current reporting period.

Additionally, sharing of infected needles has consistently accounted for 2% (2,649) 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, one new case of needlestick injury was recorded.

Among diagnosed male cases, 140,807 (87%) acquired HIV through sex with another male, 13,918 (9%) through sex with a female, 2,492 (2%) through sharing of infected needles, and 241 (<1%) through mother-to-child transmission. Similarly, among diagnosed females, the predominant mode of transmission was sexual contact, with 93% (8,836) acquiring HIV through sex with a male. Additionally, 212 (2%) diagnosed female cases were attributed to mother-to-child transmission, and 157 (2%) were due to sharing infected needles.

Figure 8. Distribution of diagnosed HIV cases, by mode of transmission and region, Jan 1984 - Jun 2026[14]



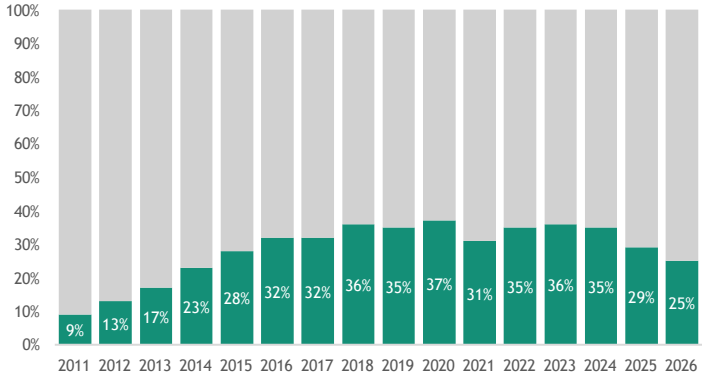
Mode of transmission (MOT) shows regional variations. For instance, 32% (45,296) of diagnosed males who have sex with males were from NCR. Over half (56%, 255) of those who acquired HIV through mother-to-child transmission were from NCR, Region 4A, and Region 3. Moreover, almost all (99%, 2,631) who acquired HIV through sharing of infected needles were from Region 7 [Figure 8]. The mode of transmission in these regions mirrors national data.

Advanced HIV Disease (AHD)

Reporting of Advanced HIV Disease (AHD)[15] cases only started in 2011. Among the total reported cases, 50,805 (30%) 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 28% (31,957) 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. From 2021 to 2024, the proportion of AHD remained above 30%, ranging from 31% to 36%. However, the proportion declined to 29% in 2025 and further to 25% as of June 2026, which is 12 percentage points lower than in 2020. Median baseline CD4 improved over the past five years, from 205 cells/mm^3 in 2020 to 221 cells/mm^3 in 2025.

Figure 9. Proportion of newly diagnosed HIV cases with advanced HIV disease, 2011 - Jun 2026



12. Among males only
13. Sex at birth: M=Male, F=Female
14. No data on MOT for 4,372 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)

From April to June 2026, there were 4,291 people with HIV who were enrolled in treatment, of whom 4,193 (98%) were on the first-line regimen, 11 (<1%) were on a second-line regimen, and 87 (2%) were on other lines of regimen. Among them, 12 (<1%) were less than 15 years old, 1,382 (32%) were 15–24 years old, 1,968 (46%) were 25–34 years old, 814 (19%) were 35–49 years old, 113 (3%) were 50 years and older, and 2 (<1%) have no age data. The median CD4[19] count among these patients at enrollment was 176 cells/mm^3.

Newly Enrolled to ART, Apr-Jun 2026[16]
4,291

Median Baseline CD4 at enrollment (in cells/mm^3)[17]
176

PLHIV on ART as of Jun 2026
111,154

Current age (in years)[18]

Age Range	1 - 84
Median Age	33

Sex assigned at birth[19]

Male	106,897
Female	4,256

Table 4. Number of PLHIV ever enrolled in ART by treatment outcome and region of treatment facility as of Jun 2026

Region of Treatment Facility[20]	Treatment Outcome						
	Alive on ART[21] (n= 111,154)	Lost to Follow-up[22] (n=32,610)	Dead (n= 7,374)	Trans out (Overseas)[23] (n= 18)	Stopped[24] (n= 4)	Total (n=151,160)	% LTFU
NCR	43,557	14,916	1,858	0	0	60,331	**34%**
4A	13,543	3,036	724	1	0	17,304	**22%**
3	10,114	2,370	1,164	5	1	13,654	**23%**
7	8,260	3,196	725	0	0	12,181	**39%**
11	7,069	2,003	343	0	0	9,415	**28%**
6	5,093	777	604	7	0	6,481	**15%**
12	3,721	1,030	124	0	0	4,875	**28%**
10	2,828	855	201	0	0	3,884	**30%**
NIR	2,710	701	413	0	0	3,824	**26%**
1	2,446	436	177	0	0	3,059	**18%**
5	2,059	629	233	0	0	2,921	**31%**
2	1,939	246	152	1	0	2,338	**13%**
9	1,743	505	169	4	0	2,421	**29%**
CARAGA	1,476	252	119	0	3	1,850	**17%**
8	1,410	623	121	0	0	2,154	**44%**
4B	1,390	624	112	0	0	2,126	**45%**
CAR	1,365	290	84	0	0	1,739	**21%**
BARMM	431	116	51	0	0	598	**27%**

A total of 151,160 people with HIV have ever been enrolled in antiretroviral therapy (ART) since 2002. Of these, 111,154 (74%) were reported to be currently receiving ART, with ages ranging from 1 to 84 years and a median age of 33 years. Among those on ART, 108,298 (97%) were on a first-line regimen, 1,127 (1%) on a second-line regimen, and 1,729 (2%) on other treatment regimens.

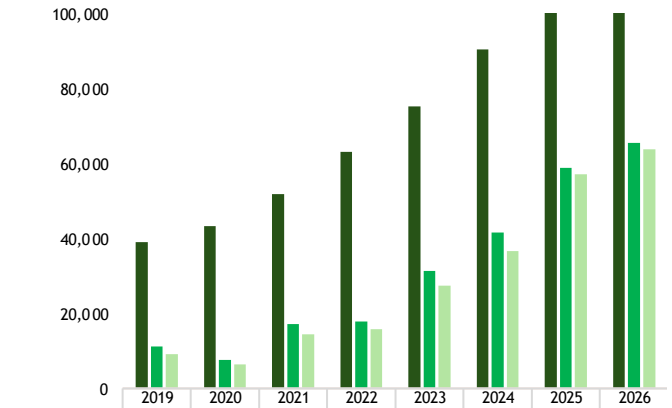
As of June 2026, 32,632 (22%) individuals who were previously on ART were no longer receiving treatment. This group includes 32,610 individuals who were lost to follow-up, 4 who stopped ART for various reasons, and 18 who reported migrating overseas [Table 4].

60% of the PLHIV on ART are concentrated in the Greater Manila Area (GMM), which includes NCR, CALABARZON, and Central Luzon. Similarly, NCR, CALABARZON, and Central Luzon contribute to 62% of the total number of PLHIV who were lost to follow-up in the country. The highest rates of clients lost to follow-up are observed in MIMAROPA (45%), Eastern Visayas (44%), Central Visayas (39%), and NCR (34%).

Viral Load (VL) Testing and Suppression

Among the PLHIV on ART as of June 2026, a total of 111,154 individuals had been enrolled in ART for at least 3 months and were tagged as eligible for viral load testing. Of these eligible individuals, 65,630 (59%) PLHIV underwent viral load testing within the past 12 months. Specifically, 17,759 (27%) were tested between April and June 2026; 16,628 (25%) were tested between January and March 2026; 16,027 (24%) were tested between October and December 2025; and 15,428 (24%) were tested between July and September 2025.

Figure 10. Viral Load Testing and Suppression among PLHIV on ART, 2019 - Jun 2026



	2019	2020	2021	2022	2023	2024	2025	2026
PLHIV on ART	39,162	43,367	51,863	63,221	75,300	90,568	100,671	111,154
VL Tested	11,269	7,675	17,129	17,957	31,330	41,746	58,887	65,630
VL Suppressed	9,240	6,457	14,547	15,851	27,468	36,633	57,182	63,850
%Tested	29%	18%	33%	25%	42%	46%	59%	57%
%Suppressed	82%	84%	85%	88%	88%	88%	97%	97%

Table 5. Viral load testing and Suppression among PLHIV on ART by region of treatment facility, as of Jun 2026

Region of Treatment Facility	Viral Load Status among PLHIV on ART per region				
	Alive on ART (n= 111,154)	Tested for VL[25] (n= 65,630)	% Tested for VL	VL Suppressed (n= 63,850)	% Suppressed
NCR	43,557	17,883	41%	17,528	98%
4A	13,543	11,249	83%	11,006	98%
3	10,114	7,438	74%	7,221	97%
11	7,069	3,927	56%	3,793	97%
7	8,260	3,785	46%	3,694	98%
6	5,093	3,672	72%	3,614	98%
NIR	2,710	2,321	86%	2,285	98%
10	2,828	1,994	71%	1,902	95%
1	2,446	1,910	78%	1,860	97%
5	2,059	1,854	90%	1,752	94%
12	3,721	1,817	49%	1,744	96%
2	1,939	1,681	87%	1,614	96%
9	1,743	1,182	68%	1,142	97%
8	1,410	1,037	74%	999	96%
4B	1,390	830	60%	811	98%
CARAGA	1,476	862	58%	794	92%
CAR	1,365	740	54%	727	98%
BARMM	431	329	76%	315	96%

16. Enrolled on ART from April to June 2026 regardless of diagnosis date
17. No data on baseline CD4 count for 1,732 cases newly enrolled on ART in April to June 2026
18. Current age as of the reporting period
19. No data on sex for 1 case
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 and tested for viral load within the past 12 months from the reporting period

Furthermore, among the 65,630 PLHIV on ART who were tested in the past 12 months as of June 2026, 63,850 (97%) were virally suppressed (≤1,000 copies/mL) while 1,780 (3%) were not virally suppressed. Moreover, viral testing coverage more than doubled from 2020 to June 2026 but remained below 50% until 2024. As of June 2026, VL testing coverage reached 59% [Figure 10].

Regionally, all regions except NCR, Central Visayas (7), and SOCCSKSARGEN (12) have reached viral load testing coverage exceeding 50%, with suppression rates ranging from 92% to 98% [Table 5].

MORTALITY

Newly reported deaths
Apr - Jun 2026
352

Total reported deaths
Jan 1984 - Jun 2026[26]
11,069

From April to June 2026, 352 deaths from any cause were reported among people diagnosed with HIV, 9% lower than in Q2 of the previous year. Of these, 2 (1%) were aged 0–14 years, 36 (10%) were 15–24 years, 179 (51%) were 25–34 years, 111 (32%) were 35–49 years, and 24 (7%) were aged 50 years and above.

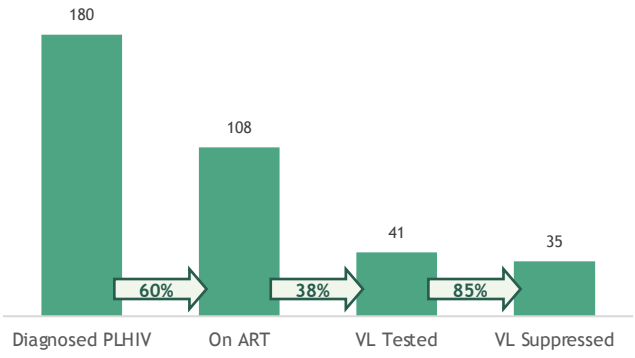
From 2020 to 2026, there have been 7,430 deaths reported among diagnosed HIV cases in the Philippines, with more than 500 new deaths reported each year from 2016 to 2025.

Since January 1984, a total of 11,069 deaths have been reported. Among total deaths, 5,256 (47%) had an advanced HIV disease at the time of diagnosis. Among age groups of diagnosed HIV cases, the largest proportion of reported deaths were among 25-34 years old accounting for 4,954 (45%) of total deaths, followed by 35-49 years old with 2,921 (26%), 15-24 years old with 1,521 (14%), 50 years old and older with 598 (5%), and <15 years old with 74 (1%). 9% 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 (Jul 2025 - Jun 2026)



From April to June 2026, there were 23 HIV-positive women aged 16 to 42 years (median age: 23) who were pregnant at the time of diagnosis. This represents a 51% decrease 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 1,243 diagnosed women have been reported as pregnant at the time of diagnosis.

Among pregnant women diagnosed with HIV within the past year (n=180), 97 (54%) were aged 15–24 years, 68 (38%) were aged 25–34 years, and 15 (8%) were aged 35–49 years.

All pregnant women diagnosed within the past year (n=180) were alive at the time of reporting. Of these, 142 (79%) were initiated on ART; however, only 108 (60%) were retained on ART. Among those on treatment, 41 (38%) underwent viral load testing, of whom 35 (85%) were virally suppressed [Figure 11].

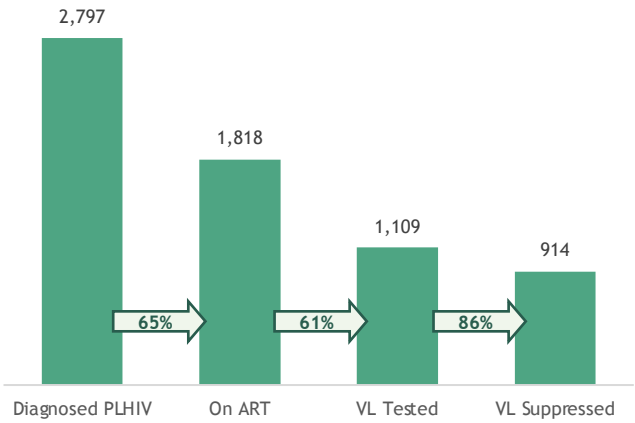
Transgender Women (TGW)

From April to June 2026, there were 23 newly reported cases who identified as transgender women (TGW)[27] where 6 (26%) were 15-24 years old, 11 (48%) were 25-34 years old, 5 (22%) were 35-49 years old, and 1 (4%) had no data on age. The age at diagnosis ranged from 18 to 39 years old (median: 28 years).

Of the 3,048 TGW diagnosed with HIV from January 2018 to June 2026, almost all (3,006; 99%) acquired HIV through sexual contact, 6 (<1%) through sharing of infected needles, 1 (<1%) through mother-to-child transmission, and 35 (1%) had no data on mode of transmission. By age group, 871 (29%) were 15-24 years old at the time of diagnosis, almost half (1,498; 49%) were 25-34 years old, 603 (20%) were 35-49 years old, and 75 (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, 2,797 (92%) were currently alive. Of these, 2,460 (88%) were initiated on ART; however, only 1,818 (65%) among diagnosed TGW living with HIV were retained on ART. Of those who were on treatment, only 1,109 (61%) were tested for viral load, with 86% (959) viral load suppression [Figure 12].

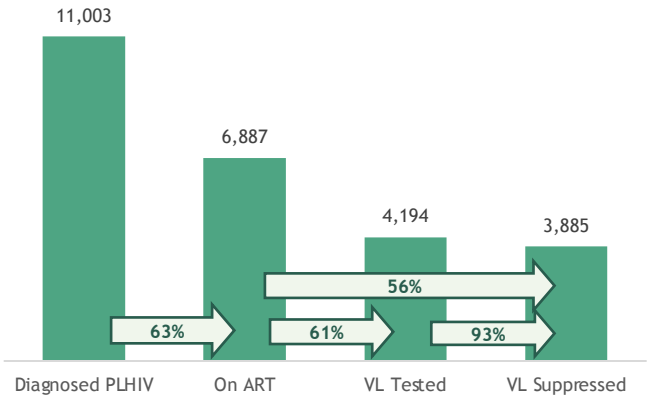
Figure 12. HIV Care Cascade among TGW living with HIV



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 April to June 2026, 125 migrant workers were reported, among whom were Filipinos aged 21 to 66 (median: 34). Of the Filipino migrant workers, 115 (92%) were males, and 10 (8%) were females. Most (124, 99%) acquired HIV through sexual contact: 85 (68%) through male-male sex, 15 (12%) through sex with both males and females, 24 (19%) through male-female sex, and 1 (1%) had no data on transmission. There was a 26% decrease in HIV diagnoses among migrant workers compared to the same period last year.

Since 1984, 11,703 (7%) of diagnosed cases have been migrant workers. Of these, 11,457 (98%) acquired HIV through sexual contact, 20 (<1%) through needle sharing, 9 (<1%) through exposure to blood, 4 (<1%) through needlestick injury, and 213 (2%) had no data on transmission.

Among the diagnosed cases of migrant workers, 11,003 (94%) were currently alive. Of these, 9,239 (84%) were initiated on ART, but only 6,887 (63%) among diagnosed living with HIV were retained on ART. Of those on treatment, only 4,194 (61%) were tested for viral load, with 93% (3,885) showing viral load suppression [Figure 13].

People Engaging in Transactional Sex[28]

From April to June 2026, 324 (11%) of the newly diagnosed cases engaged in transactional sex within the past 12 months. The majority (317, 98%) were males, and 7 (2%) were females; their age ranged from 17 to 66 years old (median: 33 years). Of the male cases, 116 (37%) reported accepting payment for sex only, 149 (47%) reported paying for sex only, and 52 (16%) engaged in both. On the other hand, among female cases, 4 (57%) accepted payment for sex, 1 (14%) reported paying for sex only, and 2 (29%) engaged in both. 11,479 (60%) of the total cases who had a history of transactional sex were diagnosed from 2020 to 2026, of which almost half (47%) paid for sex [Table 6].

Since the reporting of transactional sex began in December 2012, a total of 19,098 cases have been reported to HARP[30]. The majority (18,569; 97%) were males, while 529 (3%) were females. Among them, 6,503 (34%) accepted payment for sex, 9,481 (50%) paid for sex, and 3,114 (16%) engaged in both.

Among the diagnosed cases who had a history of transactional sex, 18,349 (96%) were currently alive. Of these, 16,310 (89%) were initiated on ART; however, only 11,794 (64%) of them were retained on ART. Of those who were on treatment, only 7,191 (61%) were tested for viral load, with 87% (6,279) viral load suppression.

Table 6. Diagnosed HIV cases who engaged in transactional sex, by sex and age, 2012 - Jun 2026 (n= 19,098)[29,30]

Type of Transactional Sex	Apr - Jun 2026 (n=324)	2020 - Jun 2026 (n=11,479)	2012 - Jun 2026 (n=19,098)
Accepted	120	4,072	6,503
Male	116	3,923	6,174
Female	4	149	329
Age Range (median)	17-44 (25)	14-63 (26)	12-68 (26)
Paid for Sex Only	150	5,418	9,481
Male	149	5,387	9,425
Female	1	31	56
Age Range (median)	17-66 (33)	15-80 (33)	14-73 (29)
Engaged in Both	54	1,989	3,114
Male	52	1,932	2,970
Female	2	57	144
Age Range (median)	17-66 (33)	14-73 (29)	13-80 (32)

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]

HIV & AIDS Surveillance of the Philippines - Editorial Team

Data Quality Team

Rueta P. Haynes
Surveillance Officer

Angeline C. Molina
Surveillance Officer

John Benedict R. Palo
Database Specialist

Data Analytics Team

Syo Joseph M. Mateo
Surveillance Officer

Gian Rei A. Mangcucang
Surveillance Officer

Don Matthew E. Fabian
Surveillance Officer

Niel Gabriel E. Saplagio
Surveillance Officer

Ethan Heinrich Ancheta
Surveillance Officer

Noel S. Palaypayon, RN, MGM-ESP
Manager, NHSSS

Mariel A. Dejesa, MD, MPM
OIC-Division Chief, Monitoring and Evaluation Division (MED)

Gerna M. Manatad, MD, PHSAE, MDM, CESO IV
OIC - Assistant Secretary of Health
Concurrent Director IV, Epidemiology Bureau

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.

National HIV/AIDS & STI Surveillance and Strategic Information Unit (NHSSS)

Department of Health 2/F Bldg. 19, San Lazaro Compound, Sta. Cruz, Manila
1003 Philippines
+632 8651-7800 local 2952

nhsss@doh.gov.ph
ebreports@doh.gov.ph
https://doh.gov.ph/
@hivepicenter

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

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	9,500	4,765	50%	3,317	70%	1,910	58%	1,860	97%	56%
2	5,800	2,951	51%	2,297	78%	1,681	73%	1,614	96%	70%
3	34,300	16,453	48%	11,559	70%	7,438	64%	7,221	97%	62%
4A	50,000	26,916	54%	18,540	69%	11,249	61%	11,006	98%	59%
4B	4,900	2,904	59%	1,860	64%	830	45%	811	98%	44%
5	7,200	3,753	52%	2,664	71%	1,854	70%	1,752	94%	66%
6	13,400	6,528	49%	5,188	79%	3,672	71%	3,614	98%	70%
7	21,400	11,460	54%	6,647	58%	3,785	57%	3,694	98%	56%
8	5,400	2,905	54%	1,845	64%	1,037	56%	999	96%	54%
9	4,900	2,999	61%	2,038	68%	1,182	58%	1,142	97%	56%
10	8,000	4,518	56%	3,135	69%	1,994	64%	1,902	95%	61%
11	16,700	9,136	55%	6,239	68%	3,927	63%	3,793	97%	61%
12	9,000	5,025	56%	3,718	74%	1,817	49%	1,744	96%	47%
BARMM	1,200	764	64%	490	64%	329	67%	315	96%	64%
CAR	2,700	1,403	52%	1,043	74%	740	71%	727	98%	70%
CARAGA	3,900	2,267	58%	1,716	76%	862	50%	794	92%	46%
NCR	81,300	50,084	62%	31,679	63%	17,883	56%	17,528	98%	55%
NIR	8,300	4,053	49%	3,009	74%	2,321	77%	2,285	98%	76%

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	275	18%	184	67%	111	60%	85	77%	46%
ADOLESCENTS (10-19)	13,700	1,584	12%	1,097	69%	508	46%	452	89%	41%
YOUTH (15-24)	57,300	15,251	27%	11,112	73%	6,135	55%	5,862	96%	53%
ADULTS (25+)	194,100	143,963	74%	95,520	66%	58,293	61%	56,892	98%	60%

Note: 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 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	132,869	68%	93,832	71%	57,037	61%	55,673	98%	59%
PERSONS WHO INJECT DRUGS (PWID)	2,800	2,332	83%	550	24%	308	56%	293	95%	53%
OTHER MALES	36,500	15,545	43%	8,252	53%	4,717	57%	4,552	97%	55%
OTHER FEMALES	18,000	8,349	46%	3,923	47%	2,320	59%	2,192	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.