

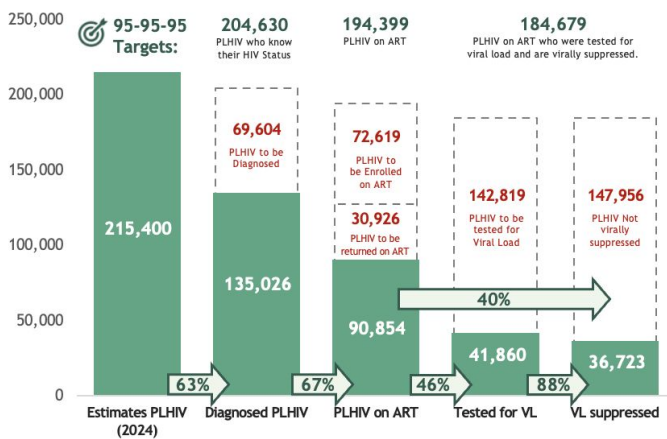


# HIV & AIDS SURVEILLANCE OF THE PHILIPPINES

## HIV & AIDS CONTINUUM OF CARE

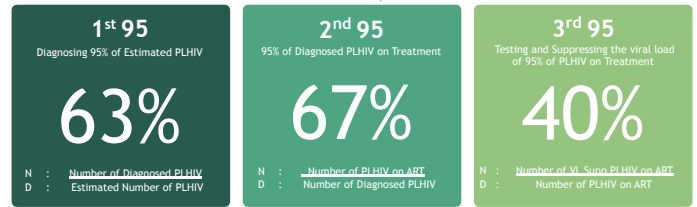
The latest Philippine HIV estimates show that by the end of 2024, there will be 215,400 estimated People Living with HIV (PLHIV) in the country. As of December 2024, of the estimated PLHIV, 135,026 (63%) of the estimated PLHIV have been diagnosed or laboratory-confirmed, and are currently living or not reported to have died. Further, 90,854 (67%) PLHIV are currently on life-saving Antiretroviral Therapy (ART), of which, 41,860 (46%) PLHIV have been tested for viral load (VL) in the past 12 months. Among those tested for VL, 36,723 (88%) were virally suppressed. However, only 40% were virally suppressed among PLHIV on ART [Figure 1]. While the national 95-95-95 targets have not yet been achieved, there have been improvements in art treatment by 6% and viral suppression by 11%. However, the achievement for diagnosis remains the same.

Figure 1. National Care Cascade as of December 2024



See Annex : HIV Care Cascade per Region, Age Group

### 95-95-95 ACCOMPLISHMENT, as of December 2024



#### The 95-95-95 Targets

The 95-95-95 by 2025 is the global targets set by the Joint United Nations Programme on HIV and AIDS (UNAIDS). The Philippines, as one of the states who committed to the "Political Declaration on HIV and AIDS: Ending Inequalities and Getting on Track to End AIDS by 2030" adopted during the General Assembly in June 2021, integrated these high-level targets in the 7th AIDS Medium Term Plan - 2023 to 2028 Philippines: Fast Tracking to 2030. It aims that by 2030, 95% of people living with HIV (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 2023 with analyzed and triangulated data from the 2022 HIV/AIDS & ART Registry of the Philippines (HARP), 2018 Integrated HIV Behavioral and Serologic Surveillance (IHBS), 2019 and 2020 Online Survey among Males having Sex with Males and Transgender Women (MSM & TGW), 2019 Facility-based Survey, 2022 Laboratory and Blood Bank Surveillance (LaBBS), 2020 Population Census, and other program data. Further, the development of PLHIV estimates underwent a comprehensive consultation, validation, and vetting process with technical experts from EastWest Center, UNAIDS, WHO, and key national, regional, and local program implementers and stakeholders. Previously released estimates in May 2022 were based on the IHBS 2018, HARP December 2020, and Population Census 2015.

#### Diagnosed PLHIV

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

#### PLHIV on ART

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

#### Virally Suppressed PLHIV

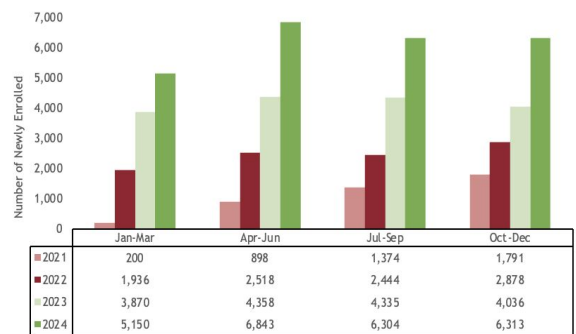
PLHIV on ART who have viral load of  $\leq 50$  copies/mL. Viral load refers to the amount of human immunodeficiency virus (HIV) present in an infected person's blood.

## PREVENTION

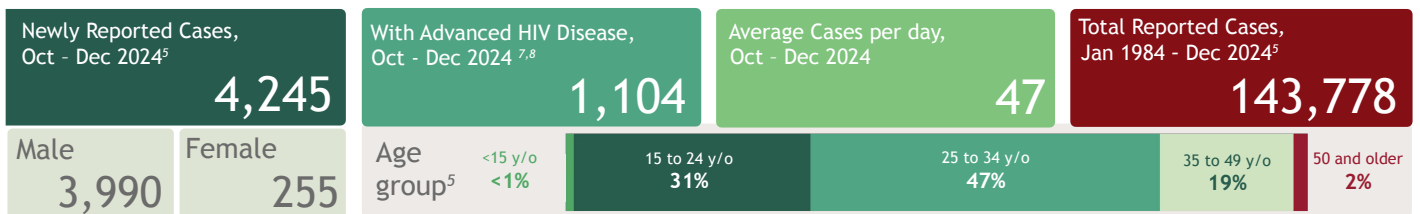
In October to December 2024, there were 6,313 clients newly enrolled to Pre-Exposure Prophylaxis (PrEP), which is a 78% increase in new enrollees compared to the same period in 2023. Of the enrollees in the fourth quarter, 53 (1%) were less than 18 years old at the time of enrollment, 2,692 (43%) were 18-24 years old, 2,704 (43%) were 25-34 years old, 862 (14%) were 35 years old and above<sup>1,2</sup>, and 2,685 (43%) of those newly enrolled to PrEP were from the National Capital Region (NCR). PrEP is most heavily used by the young key populations and young adults aged 25 to 34 which experience the greatest burden of disease, and is most widely distributed in Greater Metro Manila where most cases occur.

Since the implementation of PrEP in March 2021, a total of 55,284 clients have been enrolled. Of these, 53,545 (97%) were male, and 35,486 (64%) were 25 years old or older. The majority of clients ever enrolled in PrEP (86%, 47,418) were registered at facilities in NCR, CALABARZON (4A), and Central Luzon (3)<sup>3</sup>. As of December 2024, among the total enrolled, over half (66%, 36,453) returned for a PrEP refill in 2024, of which 68% or 24,607 were new enrollees. Of the 18,831 non-returnees, 644 (3%) tested positive for HIV.

Figure 2. Quarterly PrEP Enrollment, as of December 2024 (n=55,248)<sup>4</sup>



## DIAGNOSIS



In October to December 2024, there were 4,245 confirmed HIV-positive individuals reported to the One HIV/AIDS & STI Information System (OHASIS), 14% higher than the cases recorded in the same quarter last year. Of the recorded cases for this quarter, 1,104 (26%) had an advanced HIV infection<sup>5,6</sup> at the time of diagnosis, which is 3% higher than the same reporting period last year. Compared to last year's fourth quarter average of 50 cases per day, there has been a 7% decrease compared with this year's daily average of 47 cases.

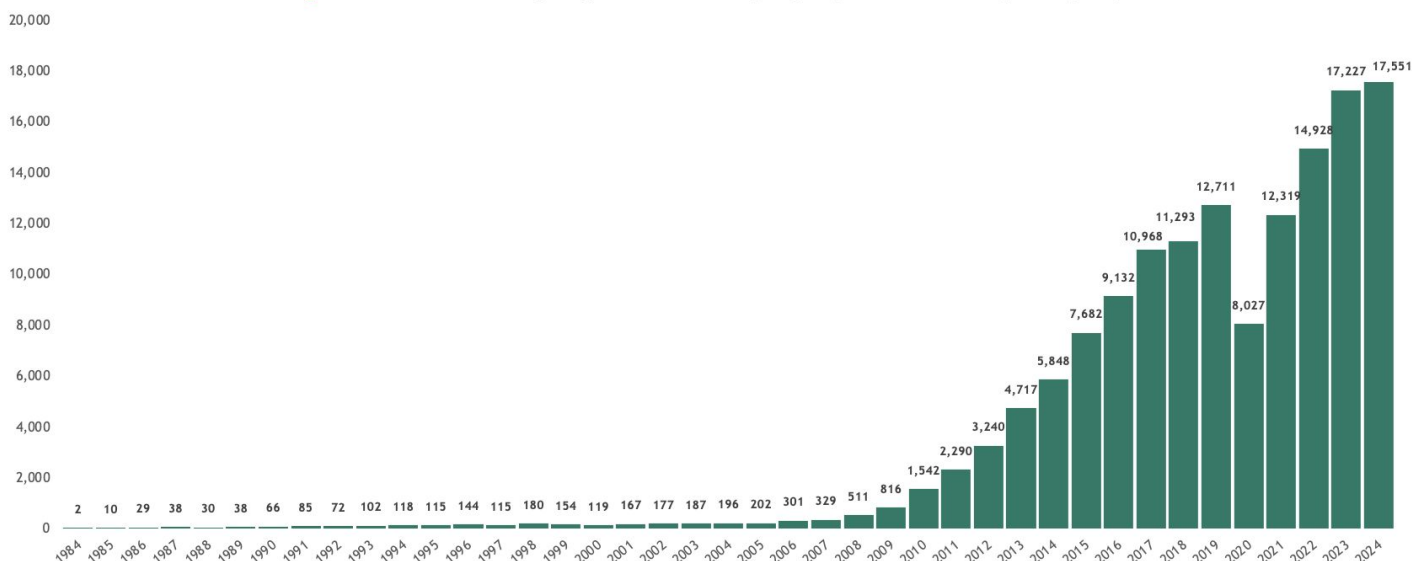
Of the newly reported confirmed HIV-cases this period, 3,990 (94%) were males while 255 (6%) were females. The age of the newly reported cases ranged from 1 to 71 years old (median: 28 years). By age group, 14 (<1%) were less than 15 years old at the time of diagnosis, 1,321 (31%) were 15-24 years old, 1,990 (47%) were 25-34 years old, 811 (19%) were 35-49 years old, and 103 (2%) were 50 years and older<sup>4</sup>. Moreover, 3,054 (72%) were cisgender, 110 (3%) identified themselves as transgender women, 19 (<1%) identified as others, 15 (<1%) as neither man nor woman, 4 (<1%) as transgender man, and 1,041 (25%) had no data on gender identity<sup>8</sup>. Of the newly reported cases, 3,286 (77%) were confirmed in Certified Rapid HIV Diagnostic Algorithm (rHIVda) Confirming Laboratories (CrCLs), while 959 (23%) were confirmed through the National Reference Laboratory-San Lazaro Hospital/STD AIDS Cooperative Central Laboratory (NRL-SLH/SACCL).

1. Age at the time of enrollment to PrEP; 6 has no data on age among 4th quarter of 2024 enrollees  
 2. Percentages were rounded off to the nearest whole number - sum may not be equal to 100% due to rounding of figures  
 3. Based on the region of PrEP facility; 4 had no data on PrEP facility; 96 were from Overseas  
 4. Difference in totals from previous quarters were due to late reporting from the sites  
 5. Age at diagnosis for 4th quarter; Reported diagnosed HIV cases, including deaths

6. Advanced HIV Disease (AHD) definition is based on clinical criteria of WHO staging 3 and 4 while immunologic criterion is based on baseline CD4 results (<200 cells/mm3)  
 7. 3,141 cases had non-advanced HIV infection and 154 had no data on immunologic/clinical criteria at the time of diagnosis  
 8. Gender identity is based on sex at birth and self identity reported at the time of diagnosis. Those with unknown gender identity either had unspecified or no data on self identity and/or sex at birth.



**Figure 3. Number of Newly Diagnosed HIV cases per year, 1984 Dec 2024 (n=143,778)**

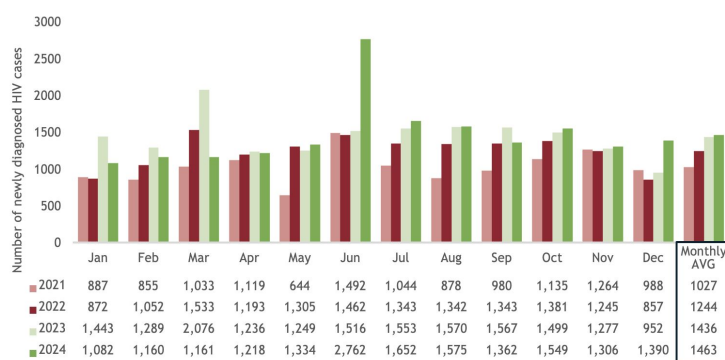


Cumulatively, 143,778 confirmed HIV cases have been reported to the HIV/AIDS and ART Registry of the Philippines since the first reported HIV case in the Philippines in 1984. There is a 13% increase in diagnosed cases compared to the same reporting period in 2023 [Figure 3].

Since 2021, the number of newly diagnosed HIV cases reported monthly has been increasing [Figure 4]. The average monthly cases were 1,027 in 2021, increased by 21% or 1,244 in 2022, and then rose by an additional 15% or 1,436 in 2023. The slight increase in the average diagnosis from January to December 2024 was observed at 1,463 monthly.

Moreover, the number of reporting Certified rHIVda Confirming Laboratories (CrCLs) in OHASIS increased from 26 facilities in 2021 to 92 as of December 2024.

**Figure 4. Number of monthly newly diagnosed HIV cases, Jan 2021-Dec 2024**



## Geographic Distribution

From October to December 2024, the regions with highest reporting of newly diagnosed cases were NCR, CALABARZON (Region 4A), Central Luzon (Region 3), Western Visayas (Region 6), Central Visayas (Region 7), and Davao (Region 11), accounting for 72% of the total cases, while 1,157 cases (27%) were reported from other regions [Figure 5]<sup>9</sup>. Between January 2019 and December 2024, these same regions contributed to 77% or 60,587 of the total reported cases. The remaining 19,165 cases (23%) were distributed across other regions [Table 1]<sup>10</sup>.

Similarly, from January 1984 to December 2024, these regions have consistently reported the highest number of cases, with a total of 114,231 cases, representing 79% of all reported cases [Table 1]. During this period, 28,341 cases (20%) were reported from other regions within the country, 11 cases (<1%) were reported from overseas, and 1,195 cases (1%) had no data on their region of residence.

**Figure 5. Distribution of newly diagnosed HIV cases by region of residence<sup>9</sup>, Oct - Dec 2024 (n= 4,245)**

Region	Number of Cases	%
NCR	1,038	24%
4A	749	18%
3	445	10%
6	314	7%
7	263	6%
11	253	6%
12	166	4%
1	141	3%
5	136	3%
4B	129	3%
10	125	3%
8	100	2%
2	100	2%
9	95	2%
CARAGA	91	2%
CAR	42	1%
BARMM	32	<1%

**Table 1. Number of diagnosed HIV cases, by region of residence, Jan 1984 - Dec 2024<sup>10</sup>**

Region	Number of CrCLs as of December 2024	January 2024 - December 2024 (n=17,551) <sup>10</sup>	January 2019 - December 2024 (n=82,763) <sup>10</sup>	January 1984 - December 2024 (N=143,778) <sup>10</sup>			
NCR	12	4,180	24%	22,641	27%	46,631	32%
4A	12	3,168	18%	14,857	18%	23,976	17%
3	10	1,929	11%	9,485	11%	15,121	11%
7	5	1,271	7%	6,092	7%	11,539	8%
6	13	1,318	8%	5,929	7%	8,919	6%
11	3	984	6%	4,594	6%	8,045	6%
1	4	649	4%	2,654	3%	3,978	3%
12	4	550	3%	2,547	3%	3,959	3%
10	4	546	3%	2,550	3%	3,830	3%
5	3	585	3%	2,192	3%	3,198	2%
8	3	436	2%	1,729	2%	2,501	2%
2	5	425	2%	1,724	2%	2,460	2%
4B	3	482	3%	1,737	2%	2,422	2%
9	3	291	2%	1,495	2%	2,308	2%
CARAGA	6	366	2%	1,295	2%	1,899	1%
CAR	1	181	1%	771	1%	1,259	1%
BARMM <sup>11</sup>	0	91	<1%	356	<1%	527	<1%

9. 26 (<1%) had no data on residence cases reported on Oct-Dec 2024.

10. From Jan-Dec 2024, 91 had no data on residence while 8 were from overseas; From Jan 2019 - Dec 2024, 104 (<1%) had no data on residence while 11 (<1%) were from overseas; Since 1984, 1,195 cases (1%) had no data on residence and 11 (<1%) were from overseas.

11. Residents of BARMM obtain confirmatory testing from the facilities of other regions.

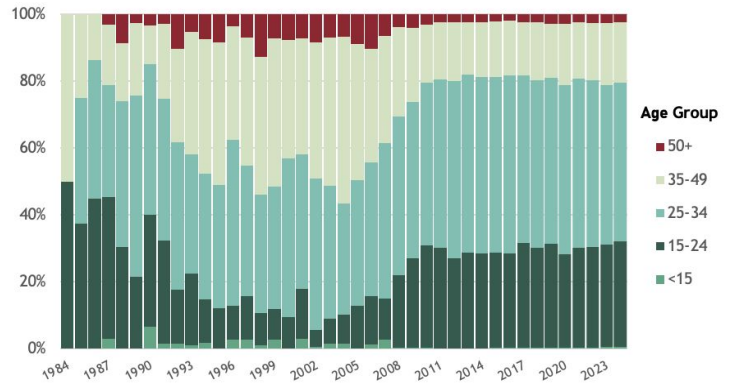


## Sex and Age

Majority of the total reported cases (135,649, 94%) were males and 8,119 (6%) were females [Figure 5]<sup>12</sup>. By age group, 484 (<1%) were below 15 years old, 42,512 (30%) were among the youth aged 15-24 years old, half (71,726, 50%) were 25-34 years old, 25,267 (18%) were 35-49 years old, and 3,710 (3%) were 50 years and older<sup>13</sup>. The age of diagnosed cases ranged from <1 to 81 years old (median: 28 years).

Since 2012, the proportion of males among the newly diagnosed cases has consistently been at least 95%. Moreover, diagnosed HIV cases are getting younger with the predominant age group shifting from among 35-49 years old in 2002 to 2005, to 25-34 years old starting 2006 [Figure 6]. Among age groups, the largest increase in the proportion of cases over the past five years (2019-2023) compared to the period from 1984-2018 was observed in individuals below 15 years old. Specifically, there were 179 cases in this age group from 1984 to 2018, which rose to 305 cases from 2019 to December 2024.

**Figure 6. Distribution of diagnosed HIV cases, by age group, Jan 1984 - Dec 2024<sup>12</sup>**



## Mode of Transmission (MOT)

In the fourth quarter of this year, 4,050 (96%) newly reported cases had acquired HIV through sexual contact – 2,973 through male-male sex, 563 male - male/female<sup>14</sup>, and 514 male - female sex. Meanwhile, 9 (<1%) reported sharing of infected needles, 11 (<1%) through mother-to-child transmission, and 159 had no data on mode of transmission at the time of diagnosis [Table 3].

Additionally, sharing of infected needles has consistently accounted for 2% (2,618) of the total cases. Transmission through blood/blood products and needlestick injuries has been reported in 19 cases (<1%), with no new cases reported since 2011. Furthermore, 2,232 cases (1%) have an unknown mode of transmission.

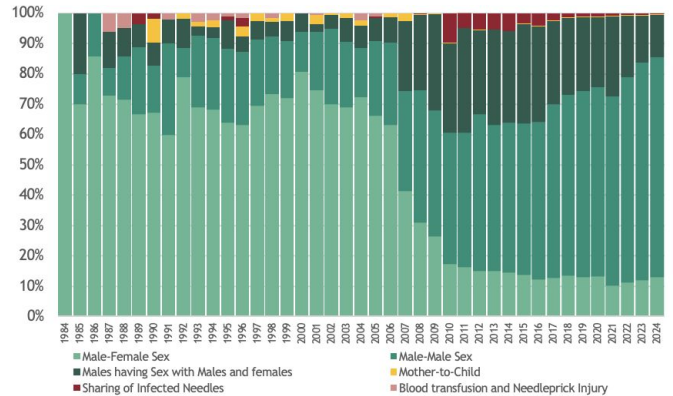
**Table 2. Number of diagnosed HIV cases, by mode of transmission and sex, Jan 1984 - December 2024<sup>15, 16</sup>**

Mode of Transmission	January 2024 - December 2024 (n= 17,848)		January 2019 - December 2024 (n=82,763)		January 1984 - December 2024 (n=143,671)	
	M	F	M	F	M	F
Sexual Contact	15,863	931	76,293	4,001	130,855	7,560
Male-male	12,259	-	54,491	-	85,582	-
Both males & females <sup>13</sup>	2,340	-	15,982	-	33,127	-
Male-female	1,264	931	5,820	4,001	12,146	7,560
Sharing of infected needles	57	4	523	38	2,461	157
Mother-to-child	26	22	108	110	197	187
Blood /blood products	-	-	-	-	5	14
Needlestick injury	-	-	-	-	2	1
No data	536	45	1,476	107	2,033	189

Among diagnosed male cases, 118,709 (88%) acquired HIV through sex with another male, 12,146 (9%) through sex with a female, 2,461 (2%) through sharing of infected needles, and 197 (<1%) through mother-to-child transmission. Similarly, among diagnosed females, the predominant mode of transmission was sexual contact, with 93% (7,560) acquiring HIV through sex with a male. Additionally, 187 (2%) of diagnosed female cases were attributed to mother-to-child transmission, and 157 (2%) were due to sharing infected needles [Table 3].

Modes of transmission (MOT) show regional variations. For instance, 34% (40,365) of diagnosed males who have sex with males were from NCR; over half of those who acquired HIV through mother-to-child transmission were from NCR, Region 4A, and Region 3 (58%, 223); and almost all (99%, 2,609) who acquired HIV through sharing of infected needles among people who inject drugs were from Region 7. Mode of transmission in these regions mirror national data.

**Figure 7. Distribution of diagnosed HIV cases, by mode of transmission, Jan 1984 - December 2024<sup>16</sup>**



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 2024, of the 143,778 reported cases, 138,415 (96%) were acquired through sexual contact. This includes 85,582 cases from male-male sex, 33,127 from male-male/female sex, and 19,706 from male-female sex [Table 3].

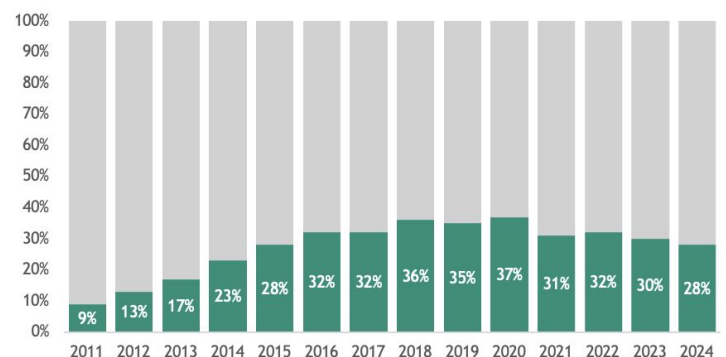
In contrast, there has been a notable increase in HIV cases resulting from mother-to-child transmission. Out of a total of 384 cases, more than half (57%, 218) were reported between January 2019 and December 2024 [Table 3].

## Advanced HIV Disease (AHD)

Reporting of Advanced HIV Disease (AHD)<sup>17</sup> cases only started in 2011. Among the total reported cases, 41,554 (30%) were diagnosed with Advanced HIV disease (AHD), 13% increase compared to the previous year and a 4% rise relative to the same quarter of the preceding year. Notably, data on immunologic and clinical criteria at the time of diagnosis were unavailable for the remaining 97,994 (70%) cases.

From 2011 to 2020, there was a notable increase in the proportion of cases with AHD, rising from 9% in 2011, with a median baseline CD4 count of 128 cells/mm<sup>3</sup>, to 37% in 2020 [Figure 8], with a median baseline CD4 count of 198 cells/mm<sup>3</sup>. Over the past 5 years, there was a 17% increase in AHD cases with a median CD4 count of 226 cells/mm<sup>3</sup>. The proportion of AHD cases experienced a slight decline to 31% in 2021, 32% in 2022, 30% in 2023, and further decreased to 28% in 2024. In comparison to the fourth quarter of 2023, the median baseline CD4 count saw a decrease from 223 cells/mm<sup>3</sup> in 2023 to 203 cells/mm<sup>3</sup> in 2024.

**Figure 8. Proportion of newly diagnosed HIV cases with advanced HIV disease<sup>17</sup>, 2011 - December 2024**



12. No data on sex for 10 cases  
13. No data on age for 79 cases  
14. Among males only

15. Sex at birth: M=Male, F=Female  
16. No data on sex and MOT for 10 cases  
17. 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 2024, there were 4,089 people with HIV who were enrolled to treatment, of which, 4,010 (98%) were on the first line regimen, 11 (<1%) were on second line regimen, and 70 (2%) were on other lines of regimen. Among them, 14 (<1%) were less than 15 years old, 1,210 (30%) were 15-24 years old, 1,910 (47%) were 25-34 years old, 850 (21%) were 35-49 years old, and 98 (2%) were 50 years and older. The median CD4<sup>19</sup> of these patients upon enrollment was at 196 cells/mm<sup>3</sup>.

Newly Enrolled to ART,  
Oct- Dec 2024<sup>18</sup>

# 4,089

Median Baseline CD4  
at enrollment (in  
cells/mm<sup>3</sup>)<sup>19</sup>

# 196

PLHIV on ART as of Dec 2024

# 90,854

Current age (in years)<sup>20</sup>

Age Range **1 - 83**

Median Age **33**

Sex assigned at birth

Male **87,432**

Female **3,420**

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

Region of Treatment Facility <sup>21</sup>	Treatment Outcome			
	Alive on ART <sup>21,22</sup> (n= 90,854)	Lost to Follow-up <sup>23</sup> (n= 25,059)	Trans out (Overseas) <sup>24</sup> (n= 13)	Stopped <sup>25</sup> (n= 5)
NCR	39,361	11,286	-	-
4A	10,135	2,251	1	-
3	8,115	1,868	7	1
7	6,950	2,690	-	-
11	5,779	1,578	-	-
6	5,765	969	-	-
12	2,884	809	-	-
10	2,187	648	-	-
1	1,709	404	-	-
2	1,419	219	1	-
5	1,410	581	-	-
4B	1,141	334	-	-
8	1,037	442	-	-
CAR	1,001	221	-	-
9	999	407	4	-
CARAGA	875	318	-	4
BARMM	83	33	0	-

Among the 121,780 people living with HIV (PLHIV) who have ever been enrolled on antiretroviral therapy (ART) since 2002, a total of 90,854 individuals aged 1 to 83 years old (median age: 33 years) were alive on ART as of December 2024. Of these, 88,663 (98%) were on a first-line regimen, 963 (1%) were on a second-line regimen, and 1,228 (1%) were on other lines of regimen.

As of December 2024, 25,077 (21%) individuals who were previously on ART were no longer receiving treatment. This group includes 25,059 individuals who were lost to follow-up (LTFU), 5 who refused to continue ART for various reasons, and 13 who reported migrating overseas [Table 4].

Sixty-three percent of the PLHIV on ART are concentrated in the Greater Manila Area (GMM), which includes NCR, CALABARZON (4A), and Central Luzon (3). Conversely, NCR, Central Visayas (7), and CALABARZON (4A) contribute to 65% of the total number of PLHIV not on treatment in the country. On the other hand, the highest rates of lost to follow-up are observed in Central Visayas (8), followed by BARMM and Bicol (5).

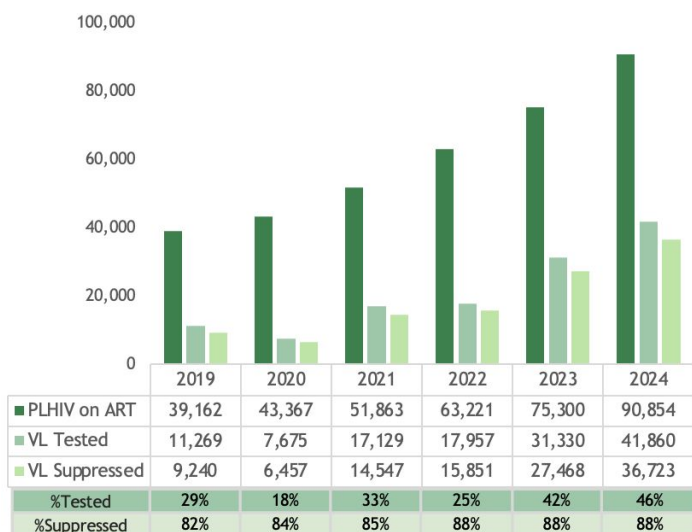
### Viral Load (VL) Testing and Suppression

Among the PLHIV on ART as of December 2024, a total of 86,961 individuals had been enrolled in ART for at least 3 months and were tagged as eligible for viral load testing. Of these eligible individuals, 41,860 (48%) PLHIV underwent viral load testing within the past 12 months. Specifically, in 2024, 9,465 (23%) were tested between October and December, 6,959 (18%) between July and September, 9,825 (25%) between April and June, and 13,201 (34%) between January and March.

Further, among the 41,860 PLHIV on ART who were tested in the past 12 months as of December 2024, 36,723 (88%) were virally suppressed<sup>26</sup> while 5,137 (12%) were not virally suppressed. Moreover, there has been a notable 59% increase in viral testing coverage over the past 5 years. On the other hand, viral suppression rates have ranged from 82-88% since 2019 while viral load testing coverage has consistently remained below 50%.

Regionally, Bicol (5), Cagayan Valley (2), Western Visayas (6), and Central Luzon (3) have reached viral load testing coverage exceeding 50%, with suppression rates ranging from 84-89%. In contrast, other regions have reported coverage below 50%, with suppression rates varying from 0-94%, the lowest being in BARMM [Table 5].

**Figure 9. Viral Load Testing and Suppression among PLHIV on ART, 2019 - December 2024<sup>25,26</sup>**



**Table 5. Viral load testing and Suppression<sup>26</sup> among PLHIV on ART by region, as of December 2024**

Region of Treatment Facility	Viral Load Status among PLHIV on ART per region				
	Alive on ART (n= 90,854) <sup>22</sup>	Tested for VL (n= 41,860)	% Tested for VL	VL Suppressed (n= 36,723)	% Suppressed
NCR	39,361	17,625	45%	15,946	90%
4A	10,135	4,745	47%	3,939	83%
3	8,115	4,767	59%	4,028	84%
7	6,950	2,924	42%	2,566	88%
11	5,779	2,482	43%	2,231	90%
6	5,765	3,705	64%	3,310	89%
12	2,884	1,093	38%	879	80%
10	2,187	294	13%	206	70%
1	1,709	696	41%	534	77%
2	1,419	924	65%	817	88%
5	1,410	955	68%	814	85%
4B	1,141	547	48%	475	87%
8	1,037	301	29%	253	84%
CAR	1,001	658	66%	618	94%
9	999	24	2%	17	71%
CARAGA	875	119	14%	90	76%
BARMM	83	1	1%	0	0%

18. Started on ART are those enrolled from October to December 2024 regardless of diagnosis date

19. No data on baseline CD4 count for 2,996 cases newly enrolled to ART from October to December 2024

20. Current age as of the reporting period

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

22. 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

23. 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

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

25. Clients who stopped due to refusal to treatment

26. Viral suppression is defined as having <50 copies of HIV per milliliter of blood, based on DOH AO 2022-0024

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



## MORTALITY

Newly reported deaths  
Oct - Dec 2024  
**419**

Total reported deaths  
Jan 1984 - Dec 2024<sup>28</sup>  
**8,752**

From October to December 2024, there were 419 reported deaths due to any cause among people diagnosed with HIV, 152% higher than the fourth quarter last year. Five (1%) were below <15 years old at the time of death, 59 (14%) were 15-24 years old, 192 (46%) were 25-34 years old, 141 (34%) were 35-49 years old, and 22 (5%) were 50 years old and above.

From 2019 to 2024, there have been 5,775 deaths reported among diagnosed HIV cases in the Philippines, with more than 500 new deaths reported each year since 2018.

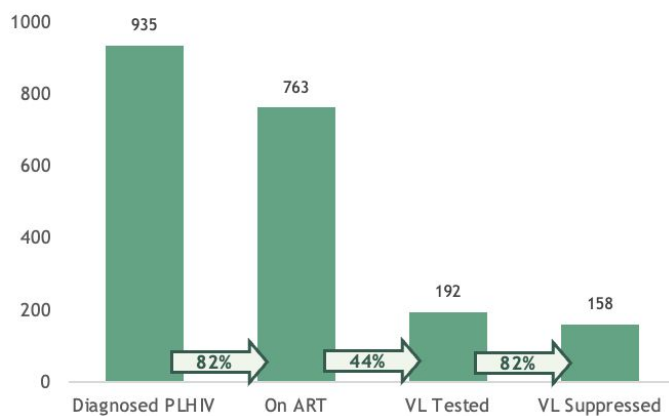
Since January 1984, a total of 8,752 deaths have been reported, which is 21% higher than total reported deaths last year. Among deaths, 4,093 (47%) had an advanced HIV disease at the time of diagnosis<sup>29</sup>. Among age groups, the largest proportion of reported deaths were among the 25-34 years old accounting for 4,198 (48%) of total deaths followed by 35-49 years old with 2,052 (23%), 15-24 years old with 2,028 (23%), 50 years old and older with 407 (5%), and <15 years old with 63 (1%). Four (<1%) of the reported deaths had no reported age at the time of death.

28. Reported deaths due to any cause and not limited to AIDS-related causes. Based on reported date, and actual date of death may not necessarily fall in this reporting period  
29. 4,585 (52%) had no data on immunologic/clinical criteria at the time of diagnosis.

## OTHER VULNERABLE POPULATIONS

### Pregnant Women with HIV

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



From October to December 2024, there were 36 HIV positive women aged 14 to 37 years old (median: 27 years) who were pregnant at the time of diagnosis. This was an 6% increase compared to the same reporting period last year.

The reporting of pregnancy status at the time of diagnosis was integrated into HARP in 2011, and since then, a total of 971 diagnosed women were reported pregnant at the time of diagnosis. Moreover, over the past 5 years, there has been a 22% increase in reported cases.

Among the pregnant women at the time of diagnosis, 935 (96%) were currently alive. Of these, 763 (82%) were initiated to ART however, only 432 (57%) among them were retained on ART. Of those who were on treatment, only 192 (44%) were tested for viral load, of which 158 (82%) had viral load suppression [Figure 10].

### Transgender Women (TGW)

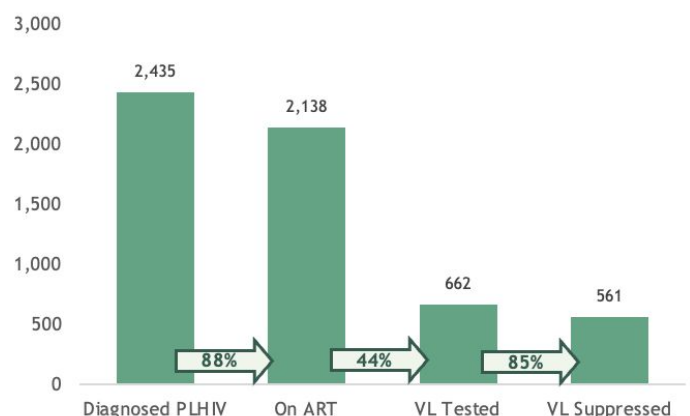
From October to December 2024 there were 110 newly reported cases who identified as transgender women (TGW)<sup>30</sup> where 34 (31%) were 15 - 24 years old, 44 (40%) were 25 - 34 years old, 27 (25%) were 35-49 years old, and five (5%) were 50 years and older. The age of diagnosis ranged from 16 to 60 years old (median: 28 years).

Of the 2,599 TGW diagnosed with HIV from January 2018<sup>31</sup> to December 2024, almost all (2,567, 99%) acquired HIV through sexual contact, five (<1%) through sharing of infected needles, and 25 (1%) had no data on mode of transmission. By age group, 737 (28%) were 15-24 years old at the time of diagnosis, half (1,284, 49%) were 25-34 years old, 514 (20%) were 35-49 years old, and 63 (2%) were 50 years and older, and one had no data on age. The age of diagnosis ranged from 15 to 65 years old (median: 28 years).

Among the diagnosed cases of TGW, 2,435 (94%) were currently alive. Of these, 2,138 (88%) were initiated to ART however, only 1,510 (71%) among diagnosed TGW living with HIV were retained on ART. Of those who were on treatment, only 662 (44%) were tested for viral load with 85% (561) viral load suppression [Figure 11].

Of those who were on treatment, only 556 (41%) were tested for viral load with 82% (457) viral load suppression [Figure 11]

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

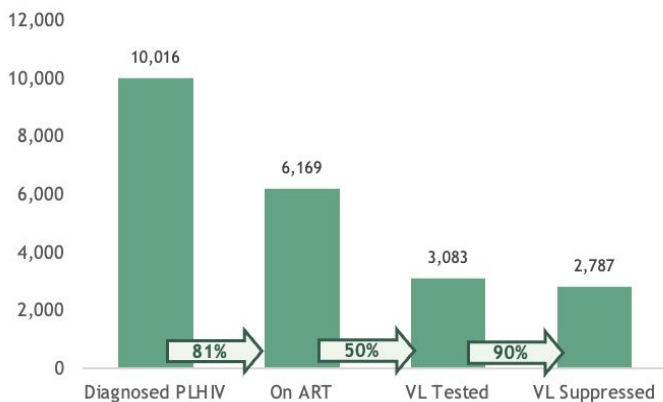


30. Transgender woman tagging is based on the reported gender identity of clients which is female  
31. Reporting of gender-identity in HARP started in 2018



## Migrant Workers

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



## People Engaging in Transactional Sex

In October to December 2024, 531 (13%) of the newly diagnosed engaged in transactional sex within the past 12 months. Majority (519, 98%) were males and 12 (2%) were females, their age ranged from 17 to 64 years old (median: 30 years). Of the male cases, 183 (35%) reported accepting payment for sex only, 222 (42%) reported paying for sex only, and 114 (16%) engaged in both. On the other hand, among female cases, 10 (83%) accepted payment for sex, none reported paying for sex only, and 2 (17%) engaged in both. Sixty-three percent or 10,029 of the total cases who had history of transactional sex were diagnosed from 2019 to 2024, of which almost half (49%) of them paid for sex [Table 6].

Since the reporting of transactional sex began in December 2012, a total of 15,994 cases have been reported to HARP<sup>32</sup>. The majority, 15,535 (97%), were males, while 459 (3%) were females. Among them, 5,336 (33%) accepted payment for sex, 8,099 (51%) paid for sex, and 2,559 (16%) engaged in both.

Among the diagnosed cases who had history of transactional sex, 14,873 (93%) were currently alive. Of these, 12,406 (83%) were initiated to ART however, only 9,544 (77%) among of them were retained on ART. Of those who were on treatment, only 4,487 (47%) were tested for viral load with 88% (3,930) viral load suppression.

From October to December 2024, 181 migrant workers were reported, among whom were Filipinos aged 19 to 60 (median: 36). Of these, 149 (82%) were male and 32 (18%) were female. Most (171, 94%) acquired HIV through sexual contact: 87 (48%) through male-male sex, 29 (16%) through sex with both males and females, and 55 (30%) through male-female sex; 12 (7%) had no data on transmission. There was a 10% increase in HIV diagnoses among migrant workers compared to the same period last year, and an 18% decrease over the past five years.

Since 1984, 10,630 (7%) of diagnosed cases have been migrant workers. Of these, 10,418 (98%) acquired HIV through sexual contact, 19 (<1%) through needle sharing, 9 (<1%) through exposure to blood, 3 (<1%) through needlestick injury, and 176 (2%) had no data on transmission.

Among the diagnosed cases of migrant workers, 10,016 (94%) were currently alive. Of these, 8,143 (81%) were initiated to ART, but only 6,169 (76%) among diagnosed living with HIV were retained on ART. Of those who were on treatment, only 3,083 (50%) were tested for viral load with 90% (2,787) viral load suppression [Figure 12].

Table 6. Diagnosed HIV cases who engaged in transactional sex, by sex and age, 2012 - 2024 (n= 15,994)<sup>33,34</sup>

Type of Transactional Sex	Oct - Dec 2024 (n=1,666)	2019 - 2024 (n=9,505)	2012 - 2024 (N=15,480)
Accepted	834	3,459	5,336
Male	797	3,318	5,049
Female	37	141	287
Age range (Median)	14-62 (26)	14-62 (26)	12-68 (26)
Paid for sex only	960	4,912	8,099
Male	955	4,886	8,052
Female	5	26	47
Age range (Median)	15-71 (33)	13-80 (32)	13-80 (32)
Engaged in both	402	1,658	2,559
Male	389	1,612	2,434
Female	13	46	125
Age range (Median)	14-62 (29)	14-73 (29)	14-73 (29)

32. 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.

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

34. 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 328 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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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](https://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)
NCR	60,800	44,441	73%	28,040	63%	13,085	47%	11,701	89%	42%
4A	38,400	22,791	59%	15,208	67%	7,089	47%	6,140	87%	40%
3	25,300	13,933	55%	9,602	69%	5,339	56%	4,596	86%	48%
7	17,900	10,818	60%	6,200	57%	2,704	44%	2,365	87%	38%
6	15,000	7,863	52%	5,925	75%	3,682	62%	3,289	89%	56%
11	13,000	7,655	59%	5,140	67%	2,173	42%	1,950	90%	38%
1	6,600	3,746	57%	2,454	66%	1,111	45%	935	84%	38%
12	6,600	3,758	57%	2,621	70%	1,109	42%	936	84%	36%
10	6,000	3,556	59%	2,434	68%	460	19%	366	80%	15%
5	5,100	3,009	59%	1,935	64%	1,168	60%	1,014	87%	52%
2	4,000	2,306	58%	1,694	73%	1,008	60%	899	89%	53%
8	3,800	2,337	62%	1,490	64%	528	35%	472	89%	32%
9	3,700	2,151	58%	1,261	59%	199	16%	174	87%	14%
4B	3,600	2,250	63%	1,510	67%	741	49%	642	87%	43%
CARAGA	2,800	1,760	63%	1,129	64%	250	22%	210	84%	19%
CAR	2,100	1,192	57%	849	71%	517	61%	471	91%	55%
BARMM	800	493	62%	277	56%	92	33%	76	83%	27%

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

### Care Cascade by Age Group

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)
CHILDREN (<10)	1,300	245	19%	176	72%	85	48%	47	55%	27%
ADOLESCENTS (10-19)	11,300	1,886	17%	1,084	57%	350	32%	280	80%	26%
YOUTH (15-24)	50,700	14,972	30%	9,998	67%	3,768	38%	3,148	84%	31%
ADULTS (25+)	168,400	114,841	68%	77,112	67%	36,517	47%	32,260	88%	42%

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

### Care Cascade by Key Population

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)
MALES HAVING SEX WITH MALES (MSM)	165,000	112,173	68%	77,373	69%	36,289	47%	31,950	88%	41%
PERSONS WHO INJECT DRUGS (PWID)	3,000	2,361	79%	582	25%	228	39%	205	90%	35%
OTHER MALES	29,300	13,033	44%	6,690	51%	3,164	47%	2,737	87%	41%
OTHER FEMALES	14,800	7,288	49%	3,174	44%	1,568	49%	1,372	88%	43%

Footnote:

**Key Population:** This group is identified based on their reported risky behaviors or exposures at the time of diagnosis. The classification focuses on the behaviors or exposures rather than the individual's sexual orientation, gender identity, or expression (SOGIE). KP tagging is among adult PLHIV (15+).

**"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.