

# Footnotes and explanatory notes

Figures have been computed by WHO to ensure comparability; thus they are not necessarily the official statistics of Member States, which may use alternative rigorous methods.

For indicators with a reference period expressed as a range, figures refer to the latest available year in the range; except in *Inequities in health care and health outcome*, where the figures refer to the period specified. For specific years, indicator definitions and metadata, please refer to <http://www.who.int/whosis>.

... Data not available or not applicable.

The global, regional and income aggregates for rates and ratios are weighted averages when relevant while for absolute numbers they are the sums. Certain Member States do not have an associated income group and are not included in aggregate calculations. Aggregates are calculated only if data are available for 50% of the population within the group. For a list of country groupings, refer to the end of this section.

## Mortality and burden of disease

<sup>a</sup> *Life tables for WHO Member States*. Geneva, World Health Organization, 2006 ([http://www.who.int/whosis/database/life\\_tables/life\\_tables.cfm](http://www.who.int/whosis/database/life_tables/life_tables.cfm), accessed 18 March 2008).

<sup>b</sup> *The World Health Report 2004: changing history*. Geneva, World Health Organization, 2004 (<http://www.who.int/whr/2004/en/index.html>, accessed 18 March 2008).

<sup>c</sup> *Neonatal and perinatal mortality: country, regional and global estimates 2004*. Geneva, World Health Organization, 2007 ([http://whqlibdoc.who.int/publications/2007/9789241596145\\_eng.pdf](http://whqlibdoc.who.int/publications/2007/9789241596145_eng.pdf), accessed 18 March 2008).

<sup>d</sup> *Maternal mortality in 2005: estimates developed by WHO, UNICEF, UNFPA and the World Bank*. Geneva, World Health Organization, 2007 ([http://www.who.int/reproductive-health/publications/maternal\\_mortality\\_2005/mme\\_2005.pdf](http://www.who.int/reproductive-health/publications/maternal_mortality_2005/mme_2005.pdf), accessed 18 March 2008).

<sup>e</sup> Based on the 2006 *Report on the global AIDS epidemic*. Geneva, UNAIDS and World Health Organization, 2006. Annex 2: HIV and AIDS estimates and data, 2005 and 2003 ([http://www.who.int/hiv/mediacentre/2006\\_GR\\_ANN2\\_en.pdf](http://www.who.int/hiv/mediacentre/2006_GR_ANN2_en.pdf), accessed 18 March 2008). Ranges of estimates are available from this document. WHO region and income group aggregates have been computed using preliminary data for the 2008 report (forthcoming).

<sup>f</sup> These are classified as deaths from tuberculosis (A15–A19, B90) according to the *International Statistical Classification of Diseases and related Health Problems*, tenth revision. Geneva, World Health Organization, 1992. *Global tuberculosis control: surveillance, planning, financing*. WHO report 2008. Geneva, World Health Organization, 2008 (WHO/HTM/TB/2008.393) ([http://www.who.int/tb/publications/global\\_report](http://www.who.int/tb/publications/global_report), accessed 18 March 2008).

<sup>g</sup> These deaths are classified as HIV disease resulting in tuberculosis (B20.0) according to the *International Statistical Classification of Diseases and related Health Problems*, tenth revision. Geneva, World Health Organization, 1992. They are already counted in the number of deaths from HIV/AIDS (B20–B24). *Global tuberculosis control: surveillance, planning, financing*. WHO report 2008. Geneva, World Health Organization, 2008 (WHO/HTM/TB/2008.393) ([http://www.who.int/tb/publications/global\\_report](http://www.who.int/tb/publications/global_report), accessed 18 March 2008).

<sup>h</sup> *Mortality and burden of disease estimates for WHO Member States in 2002*. World Health Organization, December 2004 (<http://www.who.int/entity/healthinfo/statistics/bodgbdddeathdalyestimates.xls>, accessed 18 March 2008).

<sup>i</sup> Rates are age-standardized to WHO's world standard population. Ahmad OB et al. *Age standardization of rates: a new WHO standard*. Geneva, World Health Organization, 2001 (GPE Discussion Paper Series No. 31) (<http://www.who.int/healthinfo/paper31.pdf>, accessed 18 March 2008).

<sup>j</sup> YLL, years of life lost.

<sup>k</sup> The sum of individual proportions may not add up to 100% due to rounding.

<sup>l</sup> Communicable diseases include maternal causes, conditions arising during the perinatal period and nutritional deficiencies.

<sup>m</sup> Neonatal causes include diarrhoea occurring during the neonatal period. Bryce J et al. WHO estimates of the causes of death in children. *Lancet*, 2005, 365:1147–1152; *Mortality profiles*. Geneva, World Health Organization, 2007 (<http://www.who.int/whosis/mort/profiles/en/>, accessed 18 March 2008).

<sup>n</sup> TB, tuberculosis. Data are for all forms of TB including TB in people with HIV infection. *Global tuberculosis control: surveillance, planning, financing*. WHO report 2008. Geneva, World Health Organization, 2008 (WHO/HTM/TB/2008.393) ([http://www.who.int/tb/publications/global\\_report](http://www.who.int/tb/publications/global_report), accessed 18 March 2008).

<sup>o</sup> Confirmed poliomyelitis cases include any circulating polioviruses (wild poliovirus and circulating vaccine-derived poliovirus – cVDPV). Data from WHO Polio Eradication Initiative as of 22 January 2008. Updated information can be found at [http://www.who.int/immunization\\_monitoring/en/diseases/poliomyelitis/case\\_count.cfm](http://www.who.int/immunization_monitoring/en/diseases/poliomyelitis/case_count.cfm), accessed 18 March 2008).

## Health service coverage

<sup>a</sup> WHO reproductive health indicators database, 2008 update. Geneva, World Health Organization, 2008 ([http://www.who.int/reproductive-health/global\\_monitoring/RHRxmls/RHRmainpage.htm](http://www.who.int/reproductive-health/global_monitoring/RHRxmls/RHRmainpage.htm), accessed 17 March 2008).

<sup>b</sup> WHO global database on births attended by skilled health personnel, 2008 update. Geneva, World Health Organization, 2008. ([http://www.who.int/reproductive-health/global\\_monitoring/index.html](http://www.who.int/reproductive-health/global_monitoring/index.html), accessed 17 March 2008).

<sup>c</sup> Proportion of neonates protected at birth against neonatal tetanus through maternal immunization with tetanus toxoid, based on a mathematical model taking into account the mother's immunization in infancy, during pregnancy and in tetanus campaigns. The model is described in: Griffiths U et al. Incremental cost–effectiveness of supplementary immunization activities to prevent neo-natal tetanus in Pakistan. *Bulletin of the World Health Organization*, 2004, 82:643–651.

<sup>d</sup> DTP3, 3 doses of diphtheria–tetanus toxoid–pertussis vaccine; HepB3, 3 doses of hepatitis B vaccine, Hib3, 3 doses of *Haemophilus influenzae* type B vaccine. WHO/UNICEF estimates of national immunization coverage [online database]. Geneva, World Health Organization, 2007 ([http://www.who.int/immunization\\_monitoring/routine/immunization\\_coverage/en/index4.html](http://www.who.int/immunization_monitoring/routine/immunization_coverage/en/index4.html), accessed 16 March 2008). Estimates based on data available up to August 2007. For countries recommending the first dose of measles vaccine in children older than 12 months of age, the indicator is calculated as the proportion of children less than 24 months of age receiving one dose of measles-containing vaccine.

<sup>e</sup> Data compiled by WHO from Demographic and Health Surveys (DHS) (<http://www.measuredhs.com>, accessed 17 March 2008).

<sup>f</sup> *World contraceptive use 2007* [wall chart]. New York, Population Division, Department of Economic and Social Affairs, United Nations Secretariat, 2008.

<sup>g</sup> PMTCT, preventing mother to child transmission. The coverage estimate is calculated by dividing the number of pregnant HIV-infected women who received antiretrovirals for PMTCT by the estimated unrounded number of pregnant HIV-infected women. In this table, only data for generalized epidemics are included. Source: *Children and AIDS: Second stocktaking report*. New York, United Nations Children's Fund, World Health Organization, Joint United Nations Programme on HIV/AIDS, April 2008. See Goal 1: Preventing mother-to-child transmission of HIV in low- and middle-income countries. A complete set of data with ranges of estimates are available from this document.

<sup>h</sup> *Towards universal access: scaling up priority HIV/AIDS interventions in the health sector: progress report, June 2008*. Geneva, World Health Organization, Joint United Nations Programme on HIV/AIDS, United Nations Children's Fund, 2008 (forthcoming). See Annex 1: Estimated number of people receiving antiretroviral therapy, people needing antiretroviral therapy and percentage coverage in WHO Member States. Ranges of estimates are available from this document.

<sup>i</sup> TB, tuberculosis; DOTS, internationally recommended TB control strategy. The detection rate is the number of new smear-positive cases notified under DOTS to WHO divided by the estimated number of new smear-positive cases. *Global tuberculosis control: surveillance, planning, financing*. WHO report 2008. Geneva, World Health Organization, 2008 (WHO/HTM/TB/2008.393) ([http://www.who.int/tb/publications/global\\_report](http://www.who.int/tb/publications/global_report), accessed 17 April 2008).

<sup>j</sup> The treatment success rate is the percentage of new smear-positive patients registered for treatment under DOTS who were cured (with laboratory confirmation) or completed their course of treatment. *Global tuberculosis control: surveillance, planning, financing. WHO report 2008*. Geneva, World Health Organization, 2008 (WHO/HTM/TB/2008.393) ([http://www.who.int/tb/publications/global\\_report](http://www.who.int/tb/publications/global_report), accessed 17 April 2008).

<sup>k</sup> *The World Health Report 2005: make every mother and child count*. Geneva, World Health Organization, 2005 (<http://www.who.int/whr/2005/en/index.html>, accessed 17 April 2008).

<sup>l</sup> Data are preliminary or provisional.

<sup>m</sup> Includes 5–15% of deliveries by cadres of health workers other than doctors, nurses and midwives.

<sup>n</sup> Data pertain to sexually active women of reproductive age.

<sup>o</sup> Coverage of women surveyed aged 20–69 years screened for cervical cancer through an organized screening programme within the past three years. Source: Mattke S et al. *Health Care Quality Indicators Project. Initial indicators report*. Paris, OCED, 2006.

<sup>p</sup> Coverage of women surveyed aged 52–69 years reporting having received a bilateral mammography. Source: Mattke S et al. *Health Care Quality Indicators Project. Initial indicators report*. Paris, OCED, 2006.

<sup>q</sup> Coverage for the female population aged 18–69 years. Source: World Health Survey, Geneva, World Health Organization, 2006 (<http://www.who.int/healthinfo/survey/whsresults/en/index.html>, accessed 17 March 2008).

<sup>r</sup> Coverage for the female population aged 50–69 years. Source: World Health Survey, Geneva, World Health Organization, 2006 (<http://www.who.int/healthinfo/survey/whsresults/en/index.html>, accessed 17 March 2008).

<sup>s</sup> Compiled by UNICEF from Demographic and Health Surveys (DHS). New York, UNICEF, 2008 (<http://childinfo.org/areas/malaria/maldata.php>, accessed 17 March 2008).

<sup>t</sup> Includes deliveries by cadres of health workers other than doctors, nurses and midwives – range not available.

<sup>u</sup> Includes <5% of deliveries by cadres of health workers other than doctors, nurses and midwives.

<sup>v</sup> Institutional births.

<sup>w</sup> Compiled by UNICEF from Multiple Indicator Cluster Survey (MICS). New York, UNICEF, 2008. (<http://childinfo.org/areas/malaria/maldata.php>, accessed 17 March 2008).

<sup>x</sup> Includes >15% of deliveries by cadres of health workers other than doctors, nurses and midwives.

<sup>y</sup> Data pertain to men and women of reproductive age who are in union.

<sup>z</sup> Data pertain to ever-married women of reproductive age.

<sup>aa</sup> 6+ visits.

<sup>ab</sup> Estimate.

<sup>ac</sup> 5+ visits.

<sup>ad</sup> 3+ visits.

<sup>ae</sup> Data pertain to all women of reproductive age.

<sup>af</sup> Including women in visiting unions, which are non-cohabiting but are nevertheless regular partnerships.

<sup>ag</sup> Excluding Northern Ireland.

## Risk factors

<sup>a</sup> Joint monitoring programme for water supply and sanitation [online database]. Geneva, WHO, UNICEF, 2008 (<http://www.wssinfo.org/en/wecome.html>, accessed 17 April 2008).

<sup>b</sup> Estimates were made by WHO's Department of Public Health and Environment based on Rehfuess E, Mehta S, Prüss-Üstün. Assessing household solid fuel use: multiple implications for the Millennium Development Goals. *Environmental Health Perspectives*, 2006, 114:373-378 (<http://www.who.int/indoorair/mdg/en>, accessed 17 April 2008).

- <sup>c</sup> *Low birthweight: country, regional and global estimates*. New York & Geneva, UNICEF & WHO, 2004. ([http://www.who.int/reproductive-health/publications/low\\_birthweight/low\\_birthweight\\_estimates.pdf](http://www.who.int/reproductive-health/publications/low_birthweight/low_birthweight_estimates.pdf), accessed 18 March 2008).
- <sup>d</sup> Global database on child growth and malnutrition [online database]. Geneva, World Health Organization, 2008 (<http://www.who.int/nutgrowthdb/database/en>, accessed 17 April 2008). Prevalence estimates are based on WHO standards.
- <sup>e</sup> Comparisons between countries may be limited owing to differences in sample characteristics or survey years. Source: Global database on body mass index (BMI) [online database]. Geneva, World Health Organization, 2006 (<http://www.who.int/bmi>, accessed 17 April 2008).
- <sup>f</sup> Global information system on alcohol and health [online database]. Geneva, World Health Organization, 2008 (<http://www.who.int/globalatlas/DataQuery/default.asp>, accessed 17 April 2008).
- <sup>g</sup> Appendix III, Age Standardised Prevalence Estimates for WHO Member States, WHO Report on the Global Tobacco Epidemic, 2008: The MPOWER Package. Geneva, World Health Organization, 2008. Definition: Smoking at the time of the survey of any form of tobacco, including cigarettes, cigars, pipes, bidis, etc.
- <sup>h</sup> *WHO/CDC Global Youth Tobacco Survey (GYTS)*. Geneva, World Health Organization, 2007 (<http://www.cdc.gov/tobacco/global/GYTS/results.htm>, accessed 17 April 2008). Data relate to tobacco use in any form in the past 30 days.
- <sup>i</sup> *2006 report on the global AIDS epidemic*. Geneva, Joint United Nations Programme on HIV/AIDS, World Health Organization, 2006. See Annex 2: HIV and AIDS estimates and data, 2005 and 2003.
- <sup>j</sup> City surveys were extrapolated into country figures reported here.
- <sup>k</sup> Upper limit is 49.
- <sup>l</sup> Data were not validated by country focal point in time for publication of this report.
- <sup>m</sup> Self-reported data.
- <sup>n</sup> Upper limit is >65.
- <sup>o</sup> Lower limit is >15.
- <sup>p</sup> Upper limit is 64.
- <sup>q</sup> Upper limit is 59.
- <sup>r</sup> Upper limit is 60.

## Health systems resources

- <sup>a</sup> Global atlas of the health workforce [online database]. Geneva, World Health Organization, 2008 ([http://www.who.int/globalatlas/autologin/hrh\\_login.asp](http://www.who.int/globalatlas/autologin/hrh_login.asp), accessed 17 March 2008).
- <sup>b</sup> Sources: *Regional Core Health Data Initiative*. Washington, DC, Pan American Health Organization, 2007 (<http://www.paho.org/english/dd/ais/coredata.htm>, accessed 17 March 2008); *The work of WHO in the Eastern Mediterranean Region. Annual Report of the Regional Director 1 January – 31 December 2006*. Alexandria, WHO Regional Office for the Eastern Mediterranean, 2006 (<http://www.emro.who.int/rd/annualreports/2006>, accessed 17 March 2007); European health for all database (HFA-DB) [online database]. Copenhagen, WHO Regional Office for Europe, 2007 (<http://data.euro.who.int/hfadb>, accessed 17 March 2008); *Core indicators 2005*. Manila, WHO Regional Office for the Western Pacific, 2005 ([http://www.wpro.who.int/information\\_sources/databases/core\\_indicators](http://www.wpro.who.int/information_sources/databases/core_indicators), accessed 17 March 2008); *Core indicators 2005*. New Delhi, WHO, Regional Office for South-East Asia, 2005 ([http://www.searo.who.int/EN/Section1243/Section1382/Section1386\\_9855.htm](http://www.searo.who.int/EN/Section1243/Section1382/Section1386_9855.htm), accessed 17 March 2008); additional data compiled by the WHO Regional Office for Africa.
- <sup>c</sup> *National health accounts: country information*. Geneva, World Health Organization, 2007 (<http://www.who.int/nha/country/en/index.html>, accessed 17 March 2008).
- <sup>d</sup> In some cases the sum of the ratios of general government expenditure and private expenditure on health may not add up to 100% because of rounding.

- <sup>e</sup> The GDP includes the illicit opium economy.
- <sup>f</sup> Estimates should be read with caution as these are derived from limited evidence.
- <sup>g</sup> Estimates updated using data from NHA reports, surveys, National Accounts series or information provided by contacts during national consultations.
- <sup>h</sup> Hospital beds include inpatient and maternity beds. Maternity beds are included, while cots and delivery beds are excluded.
- <sup>i</sup> Data refer to year prior to 2000.
- <sup>j</sup> Fiscal year ends in June; expenditure data have been allocated to the previous calendar year, e.g. data for 2005 are for the fiscal year 2005–2006.
- <sup>k</sup> Adjustments for currency changes were made for the entire series.
- <sup>l</sup> Adoption of “A System of Health Accounts” (SHA) methodology, classifications and recommended documentary sources induced changes in the level of previously reported ratios and may constitute a break in the series between 2000 and 2005.
- <sup>m</sup> Refers to public sector only.
- <sup>n</sup> The estimates do not include expenditures for the Hong Kong and Macao Special Administrative Regions.
- <sup>o</sup> Exchange rate changed from 2.15 Won in 2001 to 152 Won in 2002. This explains sudden changes in per capita levels between 2000 and 2005.
- <sup>p</sup> In 2005, grants accounted for 754 million pesos and loans for 675 million pesos (a substantial downward trend for loans).
- <sup>q</sup> Benchmark revision of the GDP lowers the health expenditure to GDP ratio compared to previous levels.
- <sup>r</sup> Increases in international dollar rates reduced the per capita levels compared with previous releases.
- <sup>s</sup> Exchange rate changed in 2002 from multiple to a managed floating exchange rate. Inter-bank market rate used prior to 2002.
- <sup>t</sup> The estimates do not include expenditures of Northern Iraq.
- <sup>u</sup> The public expenditure on health includes contributions from the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) to Palestinian refugees residing in Jordanian territories.
- <sup>v</sup> Market exchange rate is used to estimate the per capita figures.
- <sup>w</sup> Serbia and Montenegro data are presented separately.
- <sup>x</sup> The exchange rate used for the Syrian Arab Republic is the rate for non-commercial transactions from the Central Bank of Syria.
- <sup>y</sup> GDP does not include income from petroleum.

## Inequities in health care and health outcome

- <sup>a</sup> Sources: Figures stratified by “place of residence” and “educational level of mother” were extracted from Demographic and Health Survey data using STATcompiler software or Demographic and Health Survey reports (<http://www.measuredhs.com/>). Figures stratified by “wealth quintile” were extracted from Demographic and Health Survey reports. When not available in the reports, which mostly applies to surveys conducted in 2001 or earlier, the figures were extracted from Gwatkin DR et al. *Socio-economic differences in health, nutrition, and population within developing countries: an overview*. Washington, DC, World Bank, 2007 (<http://go.worldbank.org/XJK7WKSE40>, accessed 17 April 2008).
- <sup>b</sup> For all countries, under-five mortality rate is based on the ten-year period preceding the survey, except for India and Turkey where it is based on the five-year period preceding the survey.

- <sup>c</sup> Lowest educational level achieved by mother is “no education”; highest level is “secondary or higher”.
- <sup>d</sup> Lowest educational level achieved by mother is “secondary general”; highest level is “higher than specialized secondary”.
- <sup>e</sup> MMR (measles, mumps, rubella) vaccination coverage.
- <sup>f</sup> The figures in parentheses are based on a small number of cases (25–49 unweighted cases).
- <sup>g</sup> Data for “Births attended by skilled health personnel” correspond to births occurring in the three years preceding the survey rather than five years.
- <sup>h</sup> Highest educational level achieved by mother is “12 or more years complete”.
- <sup>i</sup> Lowest educational level achieved by mother is “primary or secondary”; highest level is “higher than secondary special”.
- <sup>j</sup> Lowest educational level achieved by mother is “secondary”; highest level is “higher than secondary special”.
- <sup>k</sup> Lowest educational level achieved by mother is “no education/primary incomplete”; highest level is “second level primary and higher”.
- <sup>l</sup> Lowest educational level achieved by mother is “primary or middle school”; highest level is “higher than secondary special”.

## Demographic and socioeconomic statistics

- <sup>a</sup> *World population prospects: the 2006 revision*. New York, Population Division, Department of Economic and Social Affairs, United Nations Secretariat, 2007.
- <sup>b</sup> WHO mortality database: tables [online database]. Geneva, World Health Organization, 2008 (<http://www.who.int/healthinfo/morttables>, accessed 17 April 2008).
- <sup>c</sup> *World fertility patterns 2007* [wall chart]. New York, Population Division, Department of Economic and Social Affairs, United Nations Secretariat, 2008.
- <sup>d</sup> UNESCO Institute for Statistics Data Centre [online database]. Montreal, UNESCO Institute for Statistics, 2007 (<http://stats.uis.unesco.org>, accessed 16 March 2008).
- <sup>e</sup> PPP int. \$, purchasing power parity at international dollar rate. Source: *GNI per capita 2007, atlas method and PPP*. Washington, DC, World Bank, 2007.
- <sup>f</sup> *World development indicators 2007*. Washington, DC, International Bank for Reconstruction World Bank, 2007.
- <sup>g</sup> Percentage of children less than five years of age who were registered at the time of the survey. The numerator of this indicator includes children whose birth certificate was seen by the interviewer or whose mother or caregiver said the birth had been registered. *The state of the world's children 2008: child survival*. New York, United Nations Children's Fund, 2008.
- <sup>h</sup> *United Nations demographic yearbook 2005*. New York, United Nations Statistics Division. (<http://unstats.un.org/unsd/demographic/products/dyb/dyb2005.htm>, accessed 15 April 2008).
- <sup>i</sup> International Data Base (IDB). Washington, DC, US Census Bureau, 2008 (<http://www.census.gov/ipc/www/idb>, accessed 16 March 2008).

## WHO regional groupings

**African Region:** Algeria, Angola, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Cape Verde, Central African Republic, Chad, Comoros, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Equatorial Guinea, Eritrea,\* Ethiopia, Gabon, Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mauritius, Mozambique, Namibia, Niger, Nigeria, Rwanda, Sao Tome and Principe, Senegal, Seychelles, Sierra Leone, South Africa, Swaziland, Togo, Uganda, United Republic of Tanzania, Zambia, Zimbabwe

**Region of the Americas:** Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Cuba, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Peru, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, United States of America, Uruguay, Venezuela (Bolivarian Republic of)

**South-East Asia Region:** Bangladesh, Bhutan, Democratic People's Republic of Korea, India, Indonesia, Maldives, Myanmar, Nepal, Sri Lanka, Thailand, Timor-Leste\*

**European Region:** Albania, Andorra,\* Armenia,\* Austria, Azerbaijan,\* Belarus, Belgium, Bosnia and Herzegovina,\* Bulgaria, Croatia,\* Cyprus, Czech Republic,\* Denmark, Estonia,\* Finland, France, Georgia,\* Germany, Greece, Hungary, Iceland, Ireland, Israel, Italy, Kazakhstan,\* Kyrgyzstan,\* Latvia,\* Lithuania,\* Luxembourg, Malta, Monaco, Montenegro,\* Netherlands, Norway, Poland, Portugal, Republic of Moldova,\* Romania, Russian Federation, San Marino, Serbia,\* Slovakia,\* Slovenia,\* Spain, Sweden, Switzerland, Tajikistan,\* The former Yugoslav Republic of Macedonia,\* Turkey, Turkmenistan,\* Ukraine, United Kingdom, Uzbekistan\*

**Eastern Mediterranean Region:** Afghanistan, Bahrain, Djibouti, Egypt, Iran (Islamic Republic of), Iraq, Jordan, Kuwait, Lebanon, Libyan Arab Jamahiriya, Morocco, Oman, Pakistan, Qatar, Saudi Arabia, Somalia, Sudan, Syrian Arab Republic, Tunisia, United Arab Emirates, Yemen

**Western Pacific Region:** Australia, Brunei Darussalam, Cambodia, China, Cook Islands, Fiji, Japan, Kiribati, Lao People's Democratic Republic, Malaysia, Marshall Islands,\* Micronesia (Federated States of),\* Mongolia, Nauru,\* New Zealand, Niue,\* Palau,\* Papua New Guinea, Philippines, Republic of Korea, Samoa, Singapore, Solomon Islands, Tonga, Tuvalu,\* Vanuatu, Viet Nam

## Income groupings\*\*

**Low income:** Afghanistan, Bangladesh, Benin, Burkina Faso, Burundi, Cambodia, Central African Republic, Chad, Comoros, Côte d'Ivoire, Democratic People's Republic of Korea, Democratic Republic of the Congo, Eritrea, Ethiopia, Gambia, Ghana, Guinea, Guinea-Bissau, Haiti, India, Kenya, Kyrgyzstan, Lao People's Democratic Republic, Liberia, Madagascar, Malawi, Mali, Mauritania, Mongolia, Mozambique, Myanmar, Nepal, Niger, Nigeria, Pakistan, Papua New Guinea, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, Solomon Islands, Somalia, Sudan, Tajikistan, Timor-Leste, Togo, Uganda, United Republic of Tanzania, Uzbekistan, Viet Nam, Yemen, Zambia, Zimbabwe

**Lower middle income:** Albania, Algeria, Angola, Armenia, Azerbaijan, Belarus, Bhutan, Bolivia, Bosnia and Herzegovina, Cameroon, Cape Verde, China, Colombia, Congo, Cuba, Djibouti, Dominican Republic, Ecuador, Egypt, El Salvador, Fiji, Georgia, Guatemala, Guyana, Honduras, Indonesia, Iran (Islamic Republic of), Iraq, Jamaica, Jordan, Kiribati, Lesotho, Maldives, Marshall Islands, Micronesia (Federated States of), Morocco, Namibia, Nicaragua, Paraguay, Peru, Philippines, Republic of Moldova, Samoa, Sri Lanka, Suriname, Swaziland, Syrian Arab Republic, Thailand, The former Yugoslav Republic of Macedonia, Tonga, Tunisia, Turkmenistan, Ukraine, Vanuatu

**Upper middle income:** Argentina, Belize, Botswana, Brazil, Bulgaria, Chile, Costa Rica, Croatia, Dominica, Equatorial Guinea, Gabon, Grenada, Hungary, Kazakhstan, Latvia, Lebanon, Libyan Arab Jamahiriya, Lithuania, Malaysia, Mauritius, Mexico, Montenegro, Oman, Palau, Panama, Poland, Romania, Russian Federation, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Serbia, Seychelles, Slovakia, South Africa, Turkey, Uruguay, Venezuela (Bolivarian Republic of)

**High income:** Andorra, Antigua and Barbuda, Australia, Austria, Bahamas, Bahrain, Barbados, Belgium, Brunei Darussalam, Canada, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Iceland, Ireland, Israel, Italy, Japan, Kuwait, Luxembourg, Malta, Monaco, Netherlands, New Zealand, Norway, Portugal, Qatar, Republic of Korea, San Marino, Saudi Arabia, Singapore, Slovenia, Spain, Sweden, Switzerland, Trinidad and Tobago, United Arab Emirates, United Kingdom, United States of America

Cook Islands, Nauru, Niue and Tuvalu are not categorized into income groups and are therefore excluded from the computation of aggregate indices by income group.

\* State may have associated figures for periods prior to its membership in WHO.

\*\* *World Bank list of economies (July 2007).*

World Bank, July 2007 (<http://siteressources.worldbank.org/DATASTATISTICS/Resources/CLASS.XLS>, accessed 1 December 2007).