

Annex 1. Estimated number of people receiving antiretroviral therapy, people needing antiretroviral therapy, percentage coverage and numbers of antiretroviral therapy sites in low- and middle-income countries^a

Country	WHO region ^b	Estimated number of people 0–49 years old needing antiretroviral therapy, 2005 ^c	Reported number of people receiving antiretroviral therapy, January–December 2005 ^d	Month of report ^e	Average monthly increase in the number of people receiving antiretroviral therapy, January–December 2005 ^f	Estimated number of people receiving antiretroviral therapy, December 2005 ^g		Antiretroviral therapy coverage, December 2005 ^g	Reported number of sites that are providing antiretroviral therapy, September–December 2005 ^h
						Low estimate	High estimate		
Afghanistan	EMR	<1 000	0	Dec	...	...	...	0%	...
Albania	EUR	...	50	Dec	1	<200	<200	...	1
Algeria	AFR	1 000	400	Sep	8	<500	<500	39%	...
Angola	AFR	52 000	2 700	Sep	0	2 500	3 500	6%	6
Antigua and Barbuda	AMR	...	40	Aug	0	<200	<200	...	...
Argentina	AMR	37 000	30 127	Aug	0	27 000	33 000	81%	396
Armenia	EUR	<200	29	Dec	2	<200	<200	15%	1
Azerbaijan	EUR	<200	0	Feb	0	0	0	0%	0
Bangladesh	SEAR	<1 000	5	<05	...	<200	<200	1%	...
Barbados	AMR	<1 000	522	Aug	15	<1 000	<1 000	95%	...
Belarus	EUR	2 500	120	Dec	6	<200	<200	5%	22
Belize	AMR	<1 000	180	Dec	1	<200	<200	31%	8
Benin	AFR	14 000	4 022	Sep	217	3 500	6 000	33%	...
Bhutan	SEAR	<200	5	<05	...	<200	<200	...	...
Bolivia	AMR	<1 000	260	Aug	10	<500	<500	37%	...
Bosnia and Herzegovina	EUR	...	22	May	1	<200	<200	...	4
Botswana	AFR	84 000	55 829	Sep	2 915	67 000 ⁱ	77 000 ⁱ	85%	32
Brazil	AMR	209 000	170 000	Oct	2 000	165 000	183 000	83%	>900
Bulgaria	EUR	...	154	Jan	3	<200	<200
Burkina Faso	AFR	34 000	8 214	Dec	387	7 500	9 000	24%	44

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						Low estimate	High estimate		
						Low estimate	High estimate		
Burundi	AFR	46 000	6 416	Dec	299	6 000	7 000	14%	25
Cambodia	WPR	35 000	12 396	Dec	654	12 000	13 000	36%	32
Cameroon	AFR	108 000	17 940	Jun	980	21 000	26 000	22%	89
Cape Verde	AFR	...	200	Sep	5	...	<500
Central African Republic	AFR	49 000	1 647	Dec	120	1 500	2 000	3%	23
Chad	AFR	38 000	5 000	Sep	522	5 000	8 000	17%	...
Chile	AMR	9 300	6 964	Dec	376	6 500	7 500	75%	31
China	WPR	78 000	15 500	Jun	547	18 000	20 000	25%	>157
Colombia	AMR	30 000	12 000	Dec	0	11 000	15 000	44%	...
Comoros	AFR	...	200	<05	<500
Congo	AFR	18 000	2 550	Sep	139	2 000	3 500	17%	...
Cook Islands	WPR
Costa Rica	AMR	3 400	2 564	Jul	154	2 500	3 000	80%	...
Côte d'Ivoire	AFR	111 000	17 600	Nov	933	18 000	19 000	17%	79
Croatia	EUR	...	226	May	3	...	<500	...	1
Cuba	AMR	1 500	1 963	Aug	29	2 000	2 500	100%	...
Czech Republic	EUR	...	322	Dec	3	...	<500	...	7
Democratic People's Republic of Korea	SEAR	<1 000	0%	...
Democratic Republic of the Congo	AFR	209 000	6 695	Sep	342	7 000	8 500	4%	70
Djibouti	EMR	2 000	350	Dec	12	...	<500	16%	8
Dominica	AMR	...	17	Aug	1	...	<200
Dominican Republic	AMR	15 000	2 582	Dec	134	2 500	3 000	17%	...
Ecuador	AMR	4 200	1 508	Aug	64	1 500	2 000	42%	...
Egypt	EMR	2 000	200	Oct	9	...	<500	12%	1
El Salvador	AMR	4 900	2 681	Sep	64	2 500	3 000	59%	18
Equatorial Guinea	AFR	4 200	5	Jun	<200	0%	...
Eritrea	AFR	11 000	500	Sep	21	...	<1 000	5%	...
Estonia	EUR	1 000	174	Mar	3	...	<200	17%	5
Ethiopia	AFR	278 000	20 477	Dec	680	19 000	22 000	7%	73
Fiji	WPR
Gabon	AFR	8 650	2 000	Oct	...	2 000	2 500	23%	...
Gambia	AFR	1 500	150	<05	<200	10%	...
Georgia	EUR	<500	140	Dec	5	...	<200	49%	2
Ghana	AFR	61 000	3 584	Sep	248	4 000	5 000	7%	5
Guatemala	AMR	13 000	5 513	Nov	119	5 500	6 000	43%	7

Guinea	AFR	23 000	1 774	Sep	109	2 000	2 500	9%	8
Guinea-Bissau	AFR	4 800	62	Dec	20	<200	<200	1%	...
Guyana	AMR	2 500	1 200	Dec	111	1 000	1 500	50%	8
Haiti	AMR	34 000	5 572	Aug	331	6 500	7 000	20%	18
Honduras	AMR	12 000	4 305	Dec	176	4 000	4 500	35%	20
Hungary	EUR	...	371	Jan	6	<500	<500	...	1
India	SEAR	785 000	12 000 ^j	Aug	2 972	36 000 ^j	67 000 ^j	7%	74
Indonesia	SEAR	12 000	3 301	Sep	73	3 000	4 000	30%	61
Iran, Islamic Republic of	EMR	4 250	400	May	...	<500	<500	9%	...
Iraq	EMR	<200	75	Dec	6	<200	<200	...	...
Jamaica	AMR	2 600	1 348	Aug	27	1 500	1 500	56%	...
Jordan	EMR	<200	45	Dec	1	<200	<200	45%	...
Kazakhstan	EUR	1 500	240	Dec	7	<500	<500	15%	5
Kenya	AFR	273 000	55 000 ^k	Nov	2 773	60 000 ^k	72 000 ^k	24%	250
Kiribati	WPR	...	...	...	...	...	...	...	...
Kyrgyzstan	EUR	<500	46	Dec	3	<200	<200	12%	1
Lao People's Democratic Republic	WPR	<500	104	<05	...	<200	<200	49%	...
Latvia	EUR	<1 000	233	Jan	3	<500	<500	31%	1
Lebanon	EMR	<1 000	200	Dec	...	<500	<500	36%	...
Lesotho	AFR	58 000	8 400	Dec	369	7 500	9 000	14%	22
Liberia	AFR	15 000	397	Sep	...	<500	<500	3%	...
Libyan Arab Jamahiriya	EMR	1 500	450	Dec	10	<1 000	<1 000	35%	...
Lithuania	EUR	<200	58	Mar	3	<200	<200	64%	6
Madagascar	AFR	20 000	54	Dec	4	<200	<200	0%	...
Malawi	AFR	169 000	32 214	Dec	1 888	31 000	35 000	20%	60
Malaysia	WPR	10 000	2 700	<05	...	2 500	3 000	27%	...
Maldives	SEAR	<200	0	<05	...	0	0	0%	...
Mali	AFR	22 000	6 000	Sep	346	5 500	9 000	32%	...
Marshall Islands	WPR	...	...	...	0	...	...	...	...
Mauritania	AFR	1 500	400	Sep	33	<500	<500	40%	...
Mauritius	AFR	...	120	Sep	0	<200	<200	...	...
Mexico	AMR	43 000	30 000	Aug	156	28 000	34 000	71%	...
Micronesia, Federated States of	WPR	...	...	...	...	...	...	...	...
Mongolia	WPR	<200	...	...	...	...	...	0%	...
Morocco	EMR	2 000	880	Dec	69	<1 000	<1 000	48%	...
Mozambique	AFR	216 000	17 554	Oct	1 150	19 000	21 000	9%	32
Myanmar	SEAR	50 000	3 500	Dec	167	2 500	4 500	7%	...
Namibia	AFR	41 000	17 000 ^l	Jun	1 700	27 000 ^l	31 000 ^l	71%	29
Nauru	WPR
Nepal	SEAR	8 950	75	<05	...	<200	<200	1%	...

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						Low estimate	High estimate		
Nicaragua	AMR	1 000	163	Dec	1	<200	<200	16%	6
Niger	AFR	12 000	609	Dec	...	<1 000	<1 000	5%	...
Nigeria	AFR	636 000	31 694	Sep	1 510	37 000 ^m	45 000 ^m	7%	71
Niue	WPR
Oman	EMR	<500	225	Dec	4	<500	<500
Pakistan	EMR	8 450	132	Dec	...	<200	<200	2%	10
Palau	WPR
Panama	AMR	3 150	2 708	Aug	94	3 000	3 000	97%	2
Papua New Guinea	WPR	2 000	320	Dec	21	<500	<500	15%	4
Paraguay	AMR	2 000	640	Dec	17	<1 000	<1 000	29%	2
Peru	AMR	12 000	6 410	Dec	243	6 000	7 000	52%	50
Philippines	WPR	1 500	71	<05	...	<200	<200	5%	...
Poland	EUR	2 500	2 407	Jul	60	2 500	3 000	100%	12
Republic of Moldova	EUR	<1 000	222	Dec	10	<500	<500	39%	2
Romania	EUR	...	6 116	Dec	8	5 500	6 500	...	53
Russian Federation	EUR	99 000	5 000	Dec	142	4 500	5 500	5%	68
Rwanda	AFR	49 000	15 975	Sep	938	18 000	20 000	39%	76
Saint Kitts and Nevis	AMR	...	28	Aug	1	<200	<200
Saint Lucia	AMR	...	42	Aug	2	<200	<200
Saint Vincent and the Grenadines	AMR	...	56	Aug	2	<200	<200
Samoa	WPR
Sao Tome and Principe	AFR	...	17	Mar	...	<200	<200
Saudi Arabia	EMR	<1 000	100	<05	...	<200	<200	14%	...
Senegal	AFR	9 000	4 200	Dec	193	3 000	5 500	47%	32
Serbia and Montenegro	EUR	...	470	Jan	10	<500	<500	...	17
Seychelles	AFR	...	43	Sep	0	<200	<200
Sierra Leone	AFR	9 600	210	Jan	0	<500	<500	2%	...
Slovakia	EUR	...	65	Dec	0	<200	<200	...	23
Solomon Islands	WPR	0
Somalia	EMR	6 000	35	Dec	1%	1

South Africa	AFR	983 000	98 688	Oct	9 015	178 000 ⁿ	235 000 ⁿ	21%	183
Sri Lanka	SEAR	<500	25	<05	...	<200	<200	6%	...
Sudan	EMR	62 000	400	<05	...	<500	<500	1%	2
Suriname	AMR	<1 000	351	Aug	10	<500	<500	55%	...
Swaziland	AFR	42 000	13 006	Dec	451	12 000	14 000	31%	17
Syrian Arab Republic	EMR	<1 000	60	Dec	...	<200	<200	9%	...
Tajikistan	EUR	<200	5	Dec	...	<200	<200	16%	1
Thailand	SEAR	135 000	61 000 ^o	Aug	1 227	72 000 ^o	91 000 ^o	60%	>800
The former Yugoslav Republic of Macedonia	EUR	...	7	Dec	1	<200	<200	...	1
Togo	AFR	25 000	5 600	Sep	315	5 000	8 000	27%	...
Tonga	WPR	...	...	...	...	...	...	...	...
Trinidad and Tobago	AMR	4 500	1 700	Nov	0	1 500	2 000	38%	7
Tunisia	EMR	<1 000	229	Oct	...	<500	<500	34%	...
Turkey	EUR	3 900	300	Jan	4	<500	<500	9%	...
Turkmenistan	EUR	<200	0	Dec	0	0	0	0%	0
Tuvalu	WPR	...	...	...	...	...	...	...	...
Uganda	AFR	148 000	67 369	Sep	2 500	71 000	79 000	51%	175
Ukraine	EUR	53 000	3 022	Oct	214	3 000	4 000	7%	28
United Republic of Tanzania	AFR	315 000	19 600	Nov	1 943	20 000	23 000	7%	96
Uruguay	AMR	2 000	1 417	Jul	2	1 500	2 500	69%	24
Uzbekistan	EUR	1 000	0	Dec	0	0	0	0%	0
Vanuatu	WPR	...	...	...	...	...	...	...	...
Venezuela, Bolivarian Republic of	AMR	18 000	15 417	Dec	327	14 000	17 000	84%	60
Viet Nam	WPR	25 000	3 000 ^p	Dec	222	3 000 ^p	3 500 ^p	12%	74
Yemen	EMR	1 000	0	Dec	...	...	...	0%	...
Zambia	AFR	183 000	43 964 ^q	Nov	2 621	45 000 ^q	52 000 ^q	27%	>110
Zimbabwe	AFR	321 000	23 000	Nov	1 500	22 000	27 000	8%	48

... Data not available or not applicable.

^a All countries except those in western Europe and Australia, Bahamas, Bahrain, Brunei, Canada, Cyprus, Grenada, Israel, Japan, Kuwait, New Zealand, Qatar, Republic of Korea, Singapore, United Arab Emirates and United States of America.

^b This table includes 152 WHO Member States. AFR: WHO African Region ($n = 46$); AMR: WHO Region of the Americas ($n = 31$); EMR: WHO Eastern Mediterranean Region ($n = 17$); EUR: WHO European Region ($n = 27$); SEAR: WHO South-East Asia Region ($n = 10$); WPR: WHO Western Pacific Region ($n = 21$).

^c The needs estimates are based on the methods described in Annex 2. The estimates for individual countries may differ according to the local methods used.

^d An increasing number of countries report the number of children younger than 15 years of age receiving antiretroviral therapy, and they have been included in this table.

^e <05 means that data exist but no update has been received since December 2004. These data should be interpreted cautiously, as they may reflect the situation in early 2004 or even 2003.

^f The monthly increase in the number of people receiving antiretroviral therapy during, in most cases, the last six months of 2005, is calculated using two recent data points in 2005 with the longest period between them and applying a linear projection for each month up to December 2005. Except for India and Kenya, the calculated monthly growth rate only applies to the growth in the public sector.

^g The coverage estimate is based on the estimated number of people receiving antiretroviral therapy and the estimated need for antiretroviral therapy.

^h The reported sites reflect mainly the situation in the public sector. See also paragraph 1.3: Expansion of treatment sites.

ⁱ Includes a private-sector estimate of 7000. The national health authorities reported a number of almost 56 000 for the public sector in September 2005.

^j The government reported that 12 000 people were receiving antiretroviral therapy through the public sector by August 2005. About 10 000 people were treated in 40 sites in the private sector. A further 15 000 to 20 000 people were treated in the unorganized private sector. Overall, an estimated 52 000 people were receiving antiretroviral therapy by the end of 2005, including people enrolled through private facilities.

^k A public-sector estimate of almost 55 000 people receiving antiretroviral therapy is based on numbers reported by the Ministry of Health, nongovernmental organizations and mission facilities receiving direct or indirect support from the United States Government (as of November 2005). The estimated number of over 8000 people receiving treatment from private facilities is based on consultant reviews and reports from the Kenyan Business Council. This estimate was made in late 2003 or early 2004 and has not been re-estimated, as it is assumed that the number of people entering care in the private sector equals the number shifting to public-sector providers of antiretroviral therapy.

^l The Ministry of Health and Social Services in Namibia estimated that 17 000 people were receiving antiretroviral therapy through public facilities by the end of June 2005. An estimated 2000 people were provided with antiretroviral therapy through the private sector in 2005.

^m Includes a private-sector estimate of 5000.

ⁿ Includes a private-sector estimate of 90 000. The national health authorities reported a number of 98 688 for the public sector in October 2005.

^o The Ministry of Health in Thailand estimates that the number of people receiving antiretroviral therapy through private facilities is 25% of those enrolled through the public sector.

^p The figure is based on the quantity of antiretroviral drugs distributed to provinces; a patient monitoring system to track the number of people on antiretroviral therapy is currently being developed.

^q The Central Board of Health of Zambia reported that 43 964 people were receiving antiretroviral therapy through the public sector in November 2005. An additional 2000 people were estimated to be receiving antiretroviral therapy through private facilities.

Annex 2.

Data by WHO region and methods used in estimating the number of people receiving and needing antiretroviral therapy

Estimated number of people receiving antiretroviral therapy, people needing antiretroviral therapy and percentage coverage in low- and middle-income countries according to WHO region, December 2005^a

WHO region	Estimated number of people receiving antiretroviral therapy, December 2005 [low estimate–high estimate] ^b	Estimated number of people 0–49 years old needing antiretroviral therapy, 2005 ^a	Antiretroviral therapy coverage, December 2005 ^c
African Region	810 000 [730 000–890 000]	4 700 000	17%
Region of the Americas	315 000 [295 000–335 000]	465 000	68%
European Region	21 000 [20 000–22 000]	160 000	13%
Eastern Mediterranean Region	4 000 [3 000–5 000]	75 000	5%
South-East Asia Region	140 000 [115 000–165 000]	970 000	14%
Western Pacific Region	40 000 [35 000–40 000]	150 000	27%
Total	1 330 000 [1 200 000–1 460 000]	6.5 million	20%

Note: the numbers do not add up due to rounding.

^a See below for explanation of the methods used.

^b Data on children are included.

^c The coverage estimate is based on the estimated number of people receiving antiretroviral therapy and need for antiretroviral therapy.

Estimating the number of people receiving antiretroviral therapy

The methods for estimating the number of people receiving treatment, treatment need and coverage have been described elsewhere.⁵⁹ In this report, the same method was used except that WHO now solicited updates for all countries.

In brief, the current estimate of the number of people receiving antiretroviral therapy is based on the most recent report received from either the health ministry, the WHO or UNAIDS office in the country or another reliable source in the country. The estimated numbers involve some uncertainty for countries that have not yet established systems for regular reporting of numbers of new people receiving treatment, adherence rates, defaulters, people lost to follow-up and deaths. One particular source of uncertainty is that country-reported figures often do not distinguish between those who have ever started antiretroviral therapy and those who are still receiving treatment (continuing to pick up their medicines). The difference between the two numbers reflects losses due to discontinuation of treatment or death.

Another source of uncertainty is the difficulty in measuring the extent of treatment provision in the non-state sector. Many people are supplied with medicines through local pharmacies and private clinics that do not report through the usual channels. Private companies may have programmes that support treatment for workers with advanced HIV disease, but in some cases data are not easily accessible.

A third source of uncertainty arises from the time lag between global reporting, which is for December 2005, and country reporting, which usually relates to an earlier point in time. Given the current rapid expansion in numbers in many countries, monthly increases must be estimated and projected to December 2005. Thus, the end-of-the-year estimates are based on simple linear projections of reported numbers using the current trend as an indicator of growth. For most countries, this projection of the past trend was only needed for 1–2 months, as countries provided updates for October or later.

Because of the uncertainty involved in making the overall estimates by country, the table indicates uncertainty ranges for the December 2005 estimate of the number of people receiving treatment. For the country-reported data, public sector only or public and private sector combined, 5–25% uncertainty ranges have been used depending on the strength of the monitoring system. WHO and UNAIDS worked with countries in an attempt to obtain facility-specific data on the number of people receiving treatment to the extent possible. For non-state sector numbers, which were separately reported in a limited number of countries, uncertainty ranges from 10% to 40% were used.

The United States President's Emergency Plan for AIDS Relief and the Global Fund to Fight AIDS, Tuberculosis and Malaria are major funders of antiretroviral therapy programmes in low- and middle-income countries. The United States President's Emergency Plan for AIDS Relief works in over 120 countries around the world, with a special emphasis on 15 countries in Africa, Asia and the Caribbean. The Global Fund funds AIDS programmes with an antiretroviral therapy focus in more than 100 countries.

At the end of 2005, funding provided by the United States President's Emergency Plan for AIDS Relief was supporting programmes treating 471 000 people. Programmes supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria were providing treatment to 384 000 people. However, according to the methods developed by the Emergency Plan and the Global Fund, approximately 214 000 people were receiving treatment through programmes jointly financed by the two initiatives. Together, the two initiatives were therefore supporting 641 000 individual people receiving treatment.

These numbers are used to cross-validate the reported country numbers. The two initiatives support more than half of the total number of people receiving treatment as reported by countries to WHO. WHO/UNAIDS estimates are based on country reports, not by adding up and double-counting data from other sources.

⁵⁹ Boerma TJ et al. Monitoring the scale-up of antiretroviral therapy programmes: methods to estimate coverage. *Bulletin of the World Health Organization*, 2006, 84:145–150.

Estimating treatment need

UNAIDS and WHO have developed a standard method to estimate the size and course of the AIDS epidemic that also generates estimates of the number of new HIV infections, AIDS cases and deaths.⁶⁰ These numbers are used to estimate the number of adults needing treatment taking into account the maturity of the epidemic. In a young and growing epidemic, a smaller proportion of people living with HIV/AIDS will need to start treatment than in a mature or declining epidemic.

As a small but growing number of countries are now able to provide treatment numbers for children younger than 15 years of age, this report includes treatment needs for the age group 0–49 years. These estimates were made in collaboration with UNICEF.

WHO recommends that, in resource-constrained settings, HIV-infected adults and adolescents should start antiretroviral therapy when the infection has been confirmed and there are signs of clinically advanced disease.⁶¹ Studies have shown that, in resource-constrained settings, the median survival time for people with AIDS not receiving antiretroviral therapy is just under one year. Ideally, people should start receiving treatment before developing AIDS, once they have advanced HIV infection. The number of people with advanced HIV infection who need to start treatment is estimated as the number of AIDS cases in the current year times two.

The total number of people needing antiretroviral therapy is calculated by adding the number of people who need to start antiretroviral therapy to the number of people who were receiving treatment in the previous year and survived into the current year. Since some of the people who are projected to develop AIDS in these two years may already have started treatment in the previous year, the number who need to start antiretroviral therapy is adjusted to subtract those who started treatment in the previous year. It is currently assumed that 80–90% of the people receiving treatment will survive to the following year, depending on when treatment is initiated, adherence, drug resistance patterns, the quality of clinical management and other factors.

Antiretroviral therapy coverage

The level of coverage is a measure of the number of people receiving antiretroviral therapy by December 2005 divided by the total number of people estimated to need treatment. This method slightly underestimates coverage, since the number of people estimated to need antiretroviral therapy includes both children and adults, and few countries provide treatment data for children. However, children account for a small proportion of the total number of people receiving treatment, probably less than 6%.

⁶⁰ Walker N et al. Methods and procedures for estimating HIV/AIDS and its impact: the UNAIDS/WHO estimates for the end of 2001. *AIDS*, 2003, 17:2215–2225.

⁶¹ HIV disease stage IV, regardless of CD4 cell count; stage III with CD4 cell count below 350 cells per mm³ or laboratory evidence of severe immunosuppression (CD4 cell count below 200 per mm³) or, if not available, lymphocyte count below 1200 mm³ with symptomatic disease. *Scaling up antiretroviral therapy in resource-limited settings: treatment guidelines for a public health approach*. Geneva, World Health Organization, 2003 (http://www.who.int/3by5/publications/documents/arv_guidelines/en, accessed 13 February 2006).

Annex 3. The “3 by 5” focus countries

Listed below are the 49 countries WHO identified in December 2003 as “3 by 5” focus countries due to their need for intensified technical support and dedicated resources to scale up antiretroviral therapy and accelerate HIV prevention. Overall, these 49 countries represent a mixture of global and regional priorities. Global focus countries are the 34 initially identified by WHO as having the highest unmet treatment need that together comprised 93% of the unmet need for treatment in low- and middle-income countries. WHO regional offices identified an additional 15 focus countries due to their special strategic significance as a result of factors such as size, location and epidemic profile (such as a rapidly spreading epidemic).

As of December 2005, the 49 countries accounted for 87% of all adults and children living with HIV/AIDS globally, 78% of mortality from AIDS globally and 89% of people needing treatment in low- and middle-income countries. Six countries comprised more than 50% of treatment need in low- and middle-income countries: Ethiopia, India, Nigeria, South Africa, the United Republic of Tanzania and Zimbabwe.

High-burden countries

- | | |
|--------------------------------------|---------------------------------|
| 1. Angola | 18. Lesotho |
| 2. Botswana | 19. Malawi |
| 3. Burkina Faso | 20. Mozambique |
| 4. Burundi | 21. Myanmar |
| 5. Cambodia | 22. Namibia |
| 6. Cameroon | 23. Nigeria |
| 7. Central African Republic | 24. Russian Federation |
| 8. China | 25. Rwanda |
| 9. Côte d'Ivoire | 26. South Africa |
| 10. Democratic Republic of the Congo | 27. Sudan |
| 11. Ethiopia | 28. Swaziland |
| 12. Ghana | 29. Uganda |
| 13. Guatemala | 30. Ukraine |
| 14. Guinea | 31. United Republic of Tanzania |
| 15. Haiti | 32. Viet Nam |
| 16. India | 33. Zambia |
| 17. Kenya | 34. Zimbabwe |

Regionally strategic countries

- | | |
|-----------------|----------------|
| 35. Belize | 43. Kyrgyzstan |
| 36. Costa Rica | 44. Nicaragua |
| 37. Djibouti | 45. Panama |
| 38. El Salvador | 46. Somalia |
| 39. Guyana | 47. Tajikistan |
| 40. Honduras | 48. Uzbekistan |
| 41. Indonesia | 49. Yemen |
| 42. Kazakhstan | |