Human capital – knowledge, skills, and good health – empowers people to achieve their potential and drives economic growth. This brief tracks progress by Côte d’Ivoire in building and using human capital. This page presents the Human Capital Index (HCI), its components parts, and relevant benchmarks. The HCI quantifies how underinvestment in education and health for today’s children reduces future incomes. Data are the most recently available as of 2020. The back page presents a set of Human Capital Complementary Indicators (HCCI) that shows progress at each stage of the lifecycle.

THE HUMAN CAPITAL INDEX

A child born in Côte d’Ivoire will be 38% as productive when she grows up as she could be if she enjoyed complete education and full health. This is lower than the average for the Sub-Saharan Africa region (40%) and Lower Middle Income countries (48%).

THE HUMAN CAPITAL INDEX COMPONENTS

- **Probability of Survival to Age 5.** Of every 100 children born in Côte d’Ivoire, 92 survive to age 5.

- **Expected Years of School.** In Côte d’Ivoire, a child who starts school at age 4 can expect to complete 8.1 years of school by her 18th birthday.

- **Learning-Adjusted Years of School.** Factoring in what children actually learn, expected years of school is 4.8 years.

- **Average Harmonized Test Scores.** Students in Côte d’Ivoire score 373 on a scale where 625 represents advanced attainment and 300 represents minimum attainment.

- **Adult Survival Rate.** Across Côte d’Ivoire, 66% of 15-year-olds survive until age 60.

- **Fraction of Children Under 5 Not Stunted.** Approximately 78 out of 100 children are not stunted. This means that 22 out of 100 children are at risk of cognitive and physical limitations that can last a lifetime.

UTILIZATION-ADJUSTED HUMAN CAPITAL INDEX

The Utilization-adjusted Human Capital Index (U-HCI) scales down the HCI by taking into account how many adults are not employed. The U-HCI for Côte d’Ivoire is 0.21. Thus, children born today will be 21% as productive in adulthood as they could have been if they had access to full health and education, and they became fully employed adults. The U-HCI for girls is even lower at 0.17.

<table>
<thead>
<tr>
<th>Gender differences in Human Capital and Utilization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td>Human Capital Index</td>
</tr>
<tr>
<td>Boys</td>
</tr>
<tr>
<td>0.38</td>
</tr>
<tr>
<td>Utilization-Adjusted HCI</td>
</tr>
<tr>
<td>Boys</td>
</tr>
<tr>
<td>0.25</td>
</tr>
</tbody>
</table>

Note: - represents no internationally comparable data available.

HUMAN CAPITAL PROJECT

worldbank.org/humancapital

PROTECT AND INVEST in people
The Human Capital Complementary Indicators (HCCIs) offer a snapshot of human capital investments at four stages of the lifecycle. The figures show the latest available data, benchmarked against regional averages. The figures also report progress over the previous 5 years.

**EARLY CHILDHOOD**

- **Neonatal mortality rate.** The neonatal mortality rate is 32 per 1,000 live births (2021), compared to 36 in 2016. The indicator is higher than the regional average.
- **Participation rate in organized learning.** In 2020, 25% of children who were one year younger than the official primary school entry age participated in an organized learning program, compared to 17% in 2015. The indicator is below the regional average.
- **DTP vaccination rate, third dose.** In 2022, 76% of infants received the third dose of the diphtheria, tetanus and pertussis vaccine, compared to 83% in 2017. The indicator is lower than the regional average.

**SCHOOL AGE**

- **Child mortality rate.** The mortality rate for children ages 5-14 is 24 per 1,000 children aged 5 (2021), compared to 26 in 2016. The indicator is higher than the regional average.
- **Primary school completion rate.** The primary school completion rate at the official entrance age of the last grade of that level is 74% (2022), compared to 72% in 2017. The indicator is similar to the regional average.
- **Net school enrollment rate, lower secondary.** The percentage of lower secondary school-aged children enrolled at that level is 62% (2021), compared to 54% in 2016. The indicator is lower than the regional average.

**YOUTH**

- **Youth literacy rate.** The share of youth (ages 15-24) who are literate is 84% (2019). The indicator is higher than the regional average.
- **Adolescent fertility rate.** The number of births for every 1,000 women ages 15-19 is 105 (2021), compared to 112 in 2016. The indicator is above the regional average.
- **Upper secondary school completion rate.** The upper-secondary completion rate at ages 3-5 years above the intended age for the last grade of that level is 13% (2020), compared to 11% in 2015. The indicator is lower than the regional average.

**ADULTS & ELDERLY**

- **Life expectancy at birth.** Life expectancy at birth is 59 years (2021), compared to 58 in 2016. The indicator is lower than the regional average.
- **Probability of dying from NCDs.** The probability of dying from non-communicable diseases between the ages of 30 to 70 is 36% (2019), compared to 33% in 2015. The indicator is below the regional average.
- **Prevalence of hypertension.** The prevalence of hypertension among people ages 30-79 is 37% (2019), compared to 38% in 2015. The indicator is similar to the regional average.

Note: Missing symbols indicate internationally comparable data are not available to generate the corresponding statistic.