Human capital – knowledge, skills, and good health – empowers people to achieve their potential and drives economic growth. This brief tracks progress by Myanmar 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 Myanmar will be 48% 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 East Asia & Pacific region (59%) and similar to Lower Middle Income countries (48%).

THE HUMAN CAPITAL INDEX COMPONENTS

- **Probability of Survival to Age 5.** Of every 100 children born in Myanmar, 95 survive to age 5.
- **Expected Years of School.** In Myanmar, a child who starts school at age 4 can expect to complete 10 years of school by her 18th birthday.
- **Learning-Adjusted Years of School.** Factoring in what children actually learn, expected years of school is 6.8 years.
- **Average Harmonized Test Scores.** Students in Myanmar score 425 on a scale where 625 represents advanced attainment and 300 represents minimum attainment.
- **Adult Survival Rate.** Across Myanmar, 80% of 15-year-olds survive until age 60.
- **Fraction of Children Under 5 Not Stunted.** Approximately 71 out of 100 children are not stunted. This means that 29 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 Myanmar is 0.31. Thus, children born today will be 31% 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 0.26.

### Gender differences in Human Capital and Utilization

<table>
<thead>
<tr>
<th></th>
<th>Boys</th>
<th>Girls</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Capital Index</td>
<td>0.46</td>
<td>0.49</td>
<td>0.48</td>
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<tr>
<td>Utilization-AdjustedHCI</td>
<td>0.37</td>
<td>0.26</td>
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</tr>
</tbody>
</table>

Note: - represents no internationally comparable data available.

### HCI AND COMPONENTS

- **Latest Available Data for Myanmar**
- **Average for East Asia & Pacific**
- **Avg. for Lower Middle Income countries**

**Human Capital Index**

- **Probability of Survival to Age 5 (%)**
- **Expected Years of School**
- **Learning-Adjusted Years of School**
- **Average Harmonized Test Scores**
- **Survival Rate from Age 15-60 (%)**
- **Fraction of Children Under 5 Not Stunted (%)**
- **Utilization-Adjusted Human Capital Index**

Note: Missing symbols indicate internationally comparable data are not available to generate the corresponding statistic.
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 22 per 1,000 live births (2021), compared to 24 in 2016. The indicator is higher than the regional average.

- **Participation rate in organized learning.** In 2018, 12% of children who were one year younger than the official primary school entry age participated in an organized learning program. The indicator is below the regional average.

- **DTP vaccination rate, third dose.** In 2022, 71% of infants received the third dose of the diphtheria, tetanus and pertussis vaccine, compared to 89% in 2017. The indicator is lower than the regional average.

**SCHOOL AGE**

- **Child mortality rate.** The mortality rate for children ages 5-14 is 4 per 1,000 children aged 5 (2021), compared to 5 in 2016. The indicator is similar to 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 95% (2018). The indicator is below the regional average.

- **Net school enrollment rate, lower secondary.** The percentage of lower secondary school-aged children enrolled at that level is 79% (2018). The indicator is lower than the regional average.

**YOUTH**

- **Youth literacy rate.** The share of youth (ages 15-24) who are literate is 95% (2019), compared to 85% in 2016. The indicator is lower than the regional average.

- **Adolescent fertility rate.** The number of births for every 1,000 women ages 15-19 is 33 (2021), compared to 34 in 2016. The indicator is above the regional average.

- **Youth not in employment, education or training.** In 2020, 15% of youth (ages 15-24) were not in employment, education or training, compared to 19% in 2015. The indicator is lower than the regional average.

**ADULTS & ELDERLY**

- **Female labor force participation rate.** Female labor force participation as a percentage of the female working-age population (ages 25+) is 46% (2020), compared to 50% in 2015. The indicator is lower than the regional average.

- **Life expectancy at birth.** Life expectancy at birth is 66 years (2021). This remains unchanged since 2016. The indicator is below the regional average.

- **Adult unemployment rate.** Unemployed adults as a share of the adult labor force (ages +25) is 1% (2020). This remains unchanged since 2015. The indicator is lower than the regional average.

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