Human capital – knowledge, skills, and good health – empowers people to achieve their potential and drives economic growth. This brief tracks progress by Thailand 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 Thailand will be 61% as productive when she grows up as she could be if she enjoyed complete education and full health. This is higher than the average for the East Asia & Pacific region (59%) and Upper Middle Income countries (56%).

THE HUMAN CAPITAL INDEX COMPONENTS

- **Probability of Survival to Age 5.** Of every 100 children born in Thailand, 99 survive to age 5.
- **Expected Years of School.** In Thailand, a child who starts school at age 4 can expect to complete 12.7 years of school by her 18th birthday.
- **Learning-Adjusted Years of School.** Factoring in what children actually learn, expected years of school is 8.7 years.
- **Average Harmonized Test Scores.** Students in Thailand score 427 on a scale where 625 represents advanced attainment and 300 represents minimum attainment.
- **Adult Survival Rate.** Across Thailand, 87% of 15-year-olds survive until age 60.
- **Fraction of Children Under 5 Not Stunted.** Approximately 89 out of 100 children are not stunted. This means that 11 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 Thailand is 0.45. Thus, children born today will be 45% 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 0.42.

### Gender differences in Human Capital and Utilization

<table>
<thead>
<tr>
<th></th>
<th>Boys</th>
<th>Girls</th>
<th>Overall</th>
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</thead>
<tbody>
<tr>
<td>Human Capital Index</td>
<td>0.59</td>
<td>0.63</td>
<td>0.61</td>
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<tr>
<td>Utilization-Adjusted HCI</td>
<td>0.48</td>
<td>0.42</td>
<td>0.45</td>
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Note: - represents no internationally comparable data available.

### HCI AND COMPONENTS

<table>
<thead>
<tr>
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<th>Latest Available Data for Thailand</th>
<th>Average for East Asia &amp; Pacific</th>
<th>Avg. for Upper Middle Income countries</th>
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<tbody>
<tr>
<td>Human Capital Index</td>
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<td>0.61</td>
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<tr>
<td>Probability of Survival to Age 5 (%)</td>
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<td>99</td>
<td>100</td>
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<tr>
<td>Expected Years of School</td>
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<td>14</td>
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<tr>
<td>Learning-Adjusted Years of School</td>
<td>8.7</td>
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<td>14</td>
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<tr>
<td>Average Harmonized Test Scores</td>
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<tr>
<td>Survival Rate from Age 15-60 (%)</td>
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<tr>
<td>Fraction of Children Under 5 Not Stunted (%)</td>
<td>89</td>
<td>100</td>
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</table>

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 5 per 1,000 live births (2021), compared to 6 in 2016. The indicator is lower than the regional average.

- **Children who are developmentally on track.** In 2019, 93% of children (ages 24-59 months) were developmentally on track in health, learning and psychosocial well-being. The indicator is above the regional average.

- **Minimum meal frequency.** The share of children ages 0-23 months who regularly consume an age-appropriate meal is 86% (2019), compared to 82% in 2016. The indicator is higher 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). This remains unchanged since 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 97% (2022), compared to 93% in 2017. 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 93% (2022), compared to 88% in 2017. The indicator is higher than the regional average.

**YOUTH**

- **Adolescent fertility rate.** The number of births for every 1,000 women ages 15-19 is 33 (2021), compared to 43 in 2016. The indicator is higher than the regional average.

- **Youth literacy rate.** The share of youth (ages 15-24) who are literate is 99% (2021), compared to 98% in 2015. The indicator is above the regional average.

- **Youth not in employment, education or training.** In 2022, 13% of youth (ages 15-24) were not in employment, education or training, compared to 16% in 2017. 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 62% (2022), compared to 64% in 2017. The indicator is higher than the regional average.

- **Life expectancy at birth.** Life expectancy at birth is 79 years (2021), compared to 78 in 2016. The indicator is above the regional average.

- **Adult unemployment rate.** Unemployed adults as a share of the adult labor force (ages +25) is 1% (2022), compared to 0% in 2017. The indicator is lower than the regional average.

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