Human capital – knowledge, skills, and good health – empowers people to achieve their potential and drives economic growth. This brief tracks progress by Tajikistan 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 Tajikistan will be 50% 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 Europe & Central Asia region (69%) but higher than for Lower Middle Income countries (48%).

THE HUMAN CAPITAL INDEX COMPONENTS

- **Probability of Survival to Age 5.** Of every 100 children born in Tajikistan, 97 survive to age 5.

- **Expected Years of School.** In Tajikistan, a child who starts school at age 4 can expect to complete 10.9 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 Tajikistan score 391 on a scale where 625 represents advanced attainment and 300 represents minimum attainment.

- **Adult Survival Rate.** Across Tajikistan, 87% of 15-year-olds survive until age 60.

- **Fraction of Children Under 5 Not Stunted.** Approximately 82 out of 100 children are not stunted. This means that 18 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 data on the utilization-adjusted human capital index are not available for Tajikistan. The regional average for this indicator is 0.47 and the income group average is 0.27.

<table>
<thead>
<tr>
<th>Gender differences in Human Capital and Utilization</th>
<th>Boys</th>
<th>Girls</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Capital Index</td>
<td>-</td>
<td>-</td>
<td>0.50</td>
</tr>
<tr>
<td>Utilization-Adjusted HCI</td>
<td>-</td>
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</tbody>
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Note: - represents no internationally comparable data available.

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 14 per 1,000 live births (2021), compared to 16 in 2016. The indicator is higher than the regional average.
- **DTP vaccination rate, third dose.** In 2022, 97% of infants received the third dose of the diphtheria, tetanus and pertussis vaccine, compared to 96% in 2017. The indicator is above the regional average.
- **Prevalence of anemia in children.** In 2019, 37% of children ages 6–59 months had anemia, compared to 34% in 2015. The indicator is higher than the regional average.

**SCHOOLAGE**

- **Child mortality rate.** The mortality rate for children ages 5-14 is 2 per 1,000 children aged 5 (2021). This remains unchanged since 2016. The indicator is higher than the regional average.
- **Schools with basic sanitation services.** The share of schools with sanitation facilities is 47% (2021). This remains unchanged since 2016. The indicator is below the regional average.
- **Schools with basic hygiene services.** The share of schools with handwashing facilities with water and soap is 26% (2021). This remains unchanged since 2016. The indicator is lower than the regional average.

**YOUTH**

- **Adolescent fertility rate.** The number of births for every 1,000 women ages 15-19 is 45 (2021), compared to 47 in 2016. The indicator is higher than 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 76% (2020), compared to 70% in 2015. The indicator is below the regional average.
- **Youth unemployment rate.** Unemployed youth as a share of the youth labor force (ages 15-24) is 17% (2022), compared to 16% in 2017. The indicator is higher than the regional average.

**ADULTS & ELDERLY**

- **Life expectancy at birth.** Life expectancy at birth is 72 years (2021), compared to 70 in 2016. The indicator is lower than the regional average.
- **Female labor force participation rate.** Female labor force participation as a percentage of the female working-age population (ages 25+) is 33% (2022), compared to 35% in 2017. The indicator is below the regional average.
- **Adult unemployment rate.** Unemployed adults as a share of the adult labor force (ages +25) is 6% (2022), compared to 5% in 2017. The indicator is similar to the regional average.

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