



# KIRIBATI

Region: East Asia and Pacific  
Income Category: Lower Middle Income



This 2-page brief provides the 2020 Human Capital Index (HCI) released in September 2020, and a set of indicators that are complementary to the HCI. The HCI measures the amount of human capital that a child born today can expect to attain by age 18. It conveys the productivity of the next generation of workers compared to a benchmark of complete education and full health. Although the effects of COVID-19 on the HCI are yet to be measured due to the lack of data, we expect the post-pandemic HCI to be relatively lower due to the deep learning and health losses globally. **Data collection efforts to allow updates to the HCI remain critical for all countries to inform policies and programs to address the setbacks to human capital.**

## THE HUMAN CAPITAL INDEX

A child born in Kiribati just before the pandemic will be **49 percent** 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 percent) but slightly higher than the average for Lower Middle Income countries (48 percent).

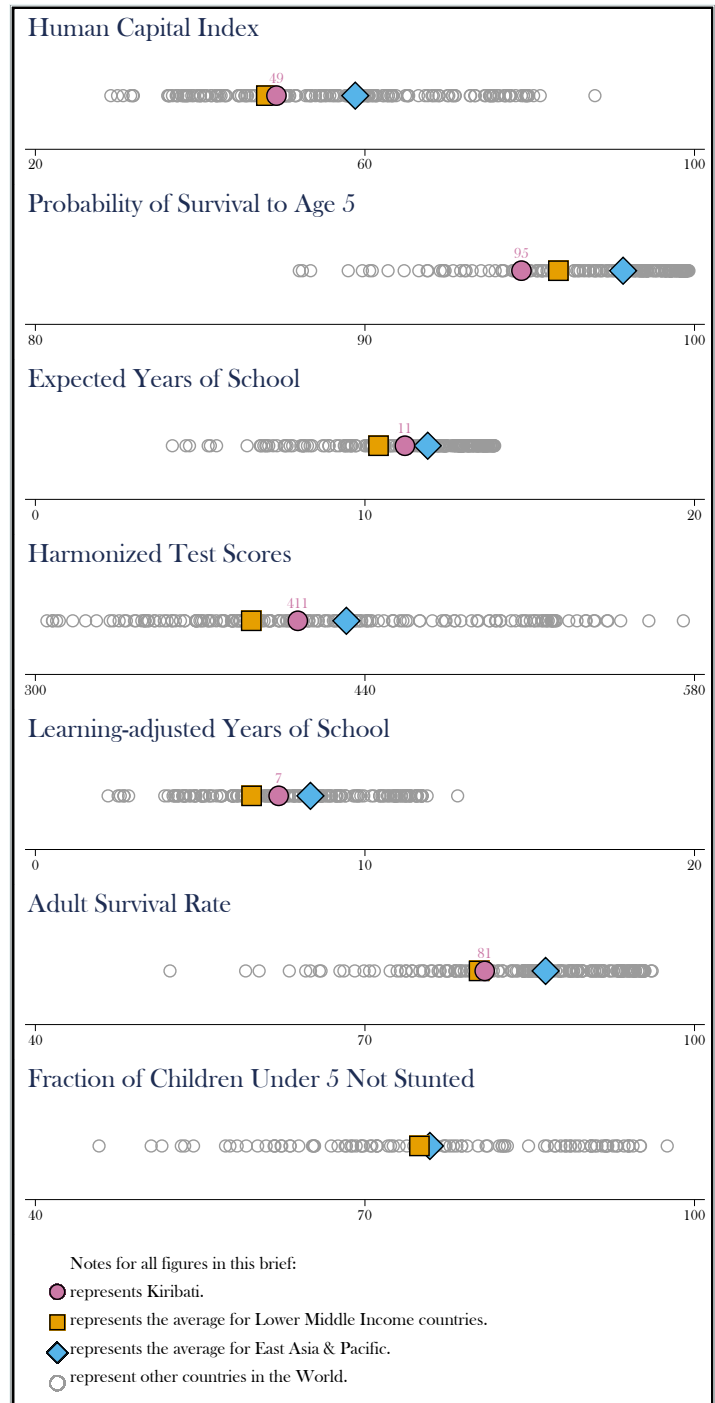
## THE HUMAN CAPITAL INDEX COMPONENTS

- **Probability of Survival to Age 5.** 95 out of 100 children born in Kiribati survive to age 5.
- **Expected Years of School.** In Kiribati, a child who starts school at age 4 can expect to complete **11.2 years** of school by her 18th birthday.
- **Harmonized Test Scores.** Students in Kiribati score **411** on a scale where 625 represents advanced attainment and 300 represents minimum attainment.
- **Learning-adjusted Years of School.** Factoring in what children actually learn, expected years of school is only **7.4 years**.
- **Adult Survival Rate.** Across Kiribati, **81 percent** of 15-year olds will survive until age 60. This statistic is a proxy for the range of health risks that a child born today would experience as an adult under current conditions.
- **Fraction of Children Under 5 Not Stunted.** Internationally comparable data on stunting are not available for Kiribati.

## DIFFERENCES IN HCI ACROSS GENDER AND SOCIO-ECONOMIC GROUPS

In Kiribati, the HCI for girls is higher than for boys. The table below shows gender disaggregation for each of the HCI components. There are insufficient data to disaggregate the HCI by socio-economic groups.

HCI and its components	Boys	Girls	Overall
HCI	0.45	0.54	0.49
Survival to Age 5	0.94	0.95	0.95
Expected Years of School	10.6	11.8	11.2
Harmonized Test Scores	396	426	411
Learning-adjusted Years of School	6.7	8.1	7.4
Adult Survival Rate	0.77	0.85	0.81
Not Stunted Rate	-	-	-



Human capital, a crucial ingredient for economic growth, is multi-dimensional and cumulatively built over the lifecycle. Due to the slow moving nature of the HCI, an additional set of Human Capital Complementary Indicators (HCCIs) offer a snapshot of proximate dimensions of human capital in Kiribati that can be monitored to measure simultaneous progress in intermediate outcomes. These selected HCCIs are based on the latest available data (*italicized* and shown in parenthesis) and benchmarked against regional and country income group averages. **They highlight where the need is for investment in people in each stage of life and for data collection and updates for evidence-based policy making.**

## EARLY CHILDHOOD

- **Neonatal mortality (deaths per 1,000 live births).** The neonatal mortality rate is **21 per 1,000 live births** (2020), higher than both the regional average (10) and the income group average (18).
- **Children receiving minimum meal frequency (%).** Adequate meal frequency among children 0-23 months is **74 percent** (2018), above the regional (62%) and income group (53%) averages.
- **Pre-primary school gross enrollment (%).** The pre-primary school gross enrollment ratio is **89 percent** (2020), higher than both the regional and income group averages.

## SCHOOL AGE

- **Primary school completion (%).** Primary school completion rate is **93 percent** (2020), lower than the regional average (99%) and higher than the income group average (89%).
- **Lower secondary school completion (%).** The lower secondary school completion rate is **100 percent** (2020), higher than both the regional (85%) and income group (70%) averages.
- **Hepatitis B vaccination (%).** Hepatitis B vaccine coverage is **95 percent** (2021). This is higher than both the average for its region (80%) and the average for its income group (71%).

## YOUTH

- **Adolescent fertility (births/1000 women).** The adolescent fertility rate, i.e., the number of births for every 1000 women aged 15-19, is **14** (2020). This is lower than both the average for its region (27) and the average for its income group (57).
- **Female youth NEET (%).** **49 percent** (2019) of the female youth is not in employment, education or training. This is higher than both the average for its region (27%) and the average for its income group (32%).
- **Male youth NEET (%).** And, **50 percent** (2019) of the male youth is not in employment, education or training. This is higher than both the average for its region (20%) and the average for its income group (19%).

## ADULTS & ELDERLY

- **Probability of dying from NCDs (%).** The probability of dying from non-communicable diseases between the ages of 30 to 70 is **28 percent**, higher than both the regional (20%) and income group (22%) averages.
- **Female life expectancy at birth (years).** Female life expectancy at birth is **73 years** (2020), lower than the regional average (77 years) and higher than the income group average (71 years).
- **Male life expectancy at birth (years).** Male life expectancy at birth is **64 years** (2020), lower than both the regional (72 years) and income group (66 years) averages.

