

Morocco and ICPD25

Achievements, Challenges and Opportunities

Background

Twenty-five years ago, the International Conference on Population and Development (ICPD), set the agenda for a global consensus of the multifaceted aspects of Population and Development. It has put the gender equality, reproductive health, universal education, and inclusive development among other issues as criterion for ensuring the well-being and prosperity of all citizens.

The ICPD is a United Nations coordinated summit that took place in Cairo, Egypt, in 1994 with the participation of around twenty thousand participants representing governments, different United Nations agencies, civil society and media. One of the most significant outcomes of the ICPD was the commitments of governments across the globe to improve the wellbeing of people, especially decreasing infant and maternal mortality, birth control, family planning, and women's education. As such, Cairo summit achieved consensus on the main four goals¹:

- Universal education
- Reduction of infant and child mortality
- Decrease of maternal mortality
- Access to sexual and reproductive health (SRH) services

A quart century after the Cairo Conference, the UNFPA and the Government of Kenya organized the Nairobi Summit on ICPD25 between 12-14 November 2019 themed “Accelerating the promise” with the participation of 9500 representatives from more than 170 countries, including governments’ officials, UN agencies, private sector and civil society organizations especially women's groups and youth networks.

The Nairobi Statement offers a forward-looking framework for achieving “three zeros” by 2030, the deadline for reaching the Sustainable Development Goals (SDGs):²

- Zero maternal deaths
- Zero unmet need for family planning
- Zero gender-based violence and harmful practices against women and girls.

In order to achieve these goals, the debate in Nairobi focused on five commitments:³

¹ Cairo Declaration on Population & Development, UNFPA1994. https://www.unfpa.org/sites/default/files/resource-pdf/94-09-04_Cairo_Declaration_on_Population_Development_ICPPD.pdfhttps://www.unfpa.org/sites/default/files/resource-pdf/94-09-04_Cairo_Declaration_on_Population_Development_ICPPD.pdf

²The Nairobi Summit on ICPD, last modified on December 2019. <https://www.nairobisummiticpd.org/news/nairobi-summit-ends-time-focus-accountability>

³Nairobi Summit on ICPD25 Commitments, April-June 2020. <https://www.nairobisummiticpd.org/commitments>

- Achieve universal access to sexual and reproductive health, and rights as a part of universal health coverage.
- Financing required to complete the ICPD Program of Action, and to sustain the gains made.
- Drawing on demographic diversity to drive economic growth and achieve sustainable development.
- Ending gender-based violence and harmful practices.
- Upholding the right to sexual and reproductive health care even in humanitarian and fragile contexts.

Between Cairo conference in 1994 and Nairobi Summit in 2019, a noticeable progress has been made at numerous levels, with policies and laws enacted to address the challenges related to the wellbeing of the population. As for today, fewer women are dying due to childbirth or face dangerous practices such as child marriage, more and more women and couples are using contraceptives, and more women are engaged in public sphere and included at a greater level than ever before at all echelons of society, from the workplace to parliament and the executive branch.

Yet, despite the promises and the remarkable progress over the past years, the gap between the goals and what has been achieved in reality is still deep. The implementation of the ICPD25 commitments seems a challenge that has not been fully fulfilled across the globe, which may hinder achieving the goals of the UN 2030 Sustainable Development Goals (SDGs).

Morocco attended Nairobi Summit on ICPD25 with high-level representatives as well as civil society and has committed to incorporate the ICPD25 goals into its legal and policy agenda. This is in line with Morocco's international engagements related to population and development since 1994 Cairo conference, when Morocco made visible steps to improve women's rights and allow for more gender equality, as well as enhancing access to SRH services and decreasing of maternal mortality.

In the recent years, Morocco made remarkable advances in ICPD engagements, in terms of policy design, creation of appropriate legal frameworks and adoption of relevant international instruments. This includes transversal policies, such as the launch of the National Initiative of Human Development (INDH) in 2005 that aimed to tackle socio-economic inequalities among citizens, the creation of the gender-budget since 2002, the creation of different bodies to insure gender balance as well as ratification of international agreements such as CEDAW. On a sectorial level, Moroccan government made remarkable efforts to address the complex relations of population and development: such as programs that facilitate access to health and education, family planning and alleviation of poverty among the most vulnerable categories.

Morocco's progress has been demonstrated by its ranking in the ICPD Population Development Composite Index released by the UNFPA's Arab States Regional Office in 2020. In this index, Morocco was ranked third among all Arab countries. It comes in the first place among Arab countries in the indicators of mobility, governance and sustainability; however, it ranked ninth in

dignity and tenth in reproductive health, which might be seen as a useful insight to the priority setting process.⁴

As of today, and despite the progress it made, Morocco still faces challenges to fully implement the ICPD objectives. For instance, while Morocco made remarkable progress in universal education, the high dropout rate, especially among girls in rural areas, deepens social inequalities and reverse the achievement of one of the most important goals of ICPD and SDGs, which is providing free and accessible education for all citizens.

In this regard, Morocco still needs to double its efforts and resources to reach the goals of ICPD25.

More challenging, the outbreak of the coronavirus pandemic in 2020 has had considerable impact on the achievements of ICPD25 commitments and made the situation even harder for the most vulnerable categories in society, especially women, youth and rural population. It is still unclear how the impact of the pandemic will look like in the near-medium future and how deep it will affect society; yet, it is clear that it will slow down or even reverse some of the achievements in the medium and long term if no measures are taken now.

This report aims to understand Morocco's current situation in regard to the ICPD25 commitments. It is therefore important to look on both opportunities and challenges that Morocco encounters to fully implement the ICPD25 objectives.

However, it should be noted that given the short time between the Nairobi Summit which took place in November 2019 and the date of this report (July 2020) and given the outbreak of the coronavirus in 2020, it was difficult for Morocco to provide consistent progress in regard to the implementation of ICPD25 commitments, this is why the report will focus on the period before the Nairobi Summit to provide a larger picture on the most pressing challenges in Morocco.

In specific, this report aims at mapping out the existing legal and policy achievement related to the Nairobi Commitments on ICPD25 and the extent to which Morocco has implemented those commitments. Three areas have specific attention: first, the report paid special attention to the achievement of Morocco in terms of universal education, then to the issues related to health and wellbeing of citizens, particularly in regard to reduction of infant and child mortality, reduction of maternal mortality and access to SRH services. Finally, particular consideration was paid to political participation for women and youth.

By mapping the existing legal frameworks and policies, this report identified the gaps and the challenges that hinder the full implementation of the Nairobi Commitments. In particular, this report looked at the structural problems such as the longstanding problems of inequality and exclusion of youth and women from the main economic and social activities, the emerging challenges related to Morocco's demographic transition and also to specific topics related directly to the ICPD, such as education, health and gender-based violence.

⁴ ICPD Population Development Composite Index (PDCI): Towards people-centered SDGs (Pilot study for Arab states), UNFPA, 2020. P: 39.

<https://arabstates.unfpa.org/sites/default/files/pub-pdf/PDCI.Report.EN%20layout%20final%20for%20web%2012-1-2020.pdf>

Finally, the report proposed alternative course of action and propositions, including policy recommendations, legal and procedural measures to be taken in order to overcome the challenges and fill the gaps.

Methodology of the report:

The report was based on data collected from different sources. First a desk research has been done to identify key elements, especially in the first chapter (achievements), the author relied on primary sources and data provided by the UNFPA, UNDP, World Bank, Morocco's government resources (Ministry of Health, Ministry of Education and Ministry of Family, Solidarity, Equality and Social Development). Moreover, the author relied on the data collected through interviews with key actors such as members of parliament, UNFPA Morocco, and members of civil society organizations involved in the ICPD actions.⁵ In this regard, the author organized one interview with a member of parliament, a focus group with key personnel at the UNFPA Morocco, and three interviews with representatives of civil society working on ICPD25-related issues.

Morocco's Achievements in 2020

In the last years, Morocco has adopted several policies and actions in order to fulfill its commitments in regard to ICPD action program. This chapter will present some of the main achievements of Morocco with a focus on the most recent ones. The first part of this chapter provides a general overview of the policies and legal framework and the second part focuses more on thematic issues related to the ICPD25 objectives.

Overview of Legal Framework and Policies

Since 1994, Morocco made several legal ramifications to align with its international commitments that are in line with ICPD goals. In this regard, Morocco has lifted all reservations on Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW). In 1993, Morocco ratified CEDAW, with the exception of Articles 2, 9, 15, 16 and 29. Some of the reservations were due to clauses opposing national laws. For example, article 9 of the CEDAW, deals with the right of a mother to transmit her citizenship to her children. However, Morocco lifted its reservation on this form of discrimination in 2007 and in 2015 Morocco ratified the Optional Protocol to CEDAW.⁶

Furthermore, after several years of standoff between traditional and modernist forces in the country, Morocco introduced in 2004 a reform of the Family Code (or *Moudawana*)⁷, giving women more rights within the family, providing greater protection within marriage and divorce and

⁵for more details, please check the appendix.

⁶ONU Femmes. Le Maroc adopte le protocole facultatif à la CEDAW. 27 August 2015.

<https://maghreb.unwomen.org/fr/actualites-evenements/actualites/2015/08/op-cedaw-maroc>

⁷Loi n° 70-03 portant Code de la famille, Bulletin officiel N : 5358, 6 – 10 – 2005.http://www.sgg.gov.ma/Portals/0/lois/code_fam_fr.pdf?ver=2012-10-16-155106-000

criminalizing domestic and public violence against women. The new *Moudawana* made Morocco one of the most advanced legislative frameworks for promoting gender equality in the Middle East and North Africa (MENA).

In the same vein, Morocco enacted, in 2007, a new law that allowed women to pass nationality to their children, which was seen as a way to address gender equality, equity and women's empowerment.⁸

In 2018, Morocco adopted two significant laws. The law 103-13 was dedicated to fight against all forms of violence against women,⁹ which criminalizes certain acts that harm women as violence. It also protected the wife from being expelled from the marital house, criminalizing forced marriages and the violation of the sanctity of women's bodies among other things. Moreover, the law created instruments that ensure care for women and children victims of violence.¹⁰ In the same year the parliament adopted another new law (N° 79-14) related to the creation of the national authority of parity and the elimination of all forms of discrimination.¹¹ The bill gave the new authority the ability to make recommendations to the government to harmonize national legislation with the standards of the international conventions, to measure the degree of respect for the principles of equality/parity and non-discrimination in various areas of public life, and to assess the efforts made by the state institutions in the public and private sectors in terms of implementing principles of equality/parity and non-discrimination.¹²

At the level of public policies, the Moroccan Government launched in 2012 the first phase of the Program ICRAM (or PGE: *Plan Gouvernemental pour l'Égalité*) which is considered as a framework of convergence between different government initiatives aiming at the promotion of gender equality and inclusion of women's rights at the public policy level.¹³ The first phase of ICRAM was funded by the EU with a 45 Million Euro donation.¹⁴

In 2017, Morocco launched the second version of Program ICRAM (or ICRAM 2 (2017-2021), which is presumably based on the gains made within ICRAM 1 (2012-2016). According to the ministry, the new version will be based on a human rights and participatory approach and aims to deal more closely with the needs of female citizens on the one hand, and contribute to reducing social and spatial inequalities on the other hand.¹⁵ The programs and activities of ICRAM 2 are implemented through the leadership of Ministry of Family, Solidarity, Equality and Social

⁸Women Empowerment & Sustainable Development. Report of the kingdom of Morocco, Ministry of Solidarity, Women, Family and Social Development, 2016, p:

14. http://www.social.gov.ma/sites/default/files/RAPPORT%20MAROC%20CSW%202016_.pdf

⁹Loi n° 103-13 du 22 février 2018 relative à la lutte contre les violences faites aux femmes, Bulletin officiel, 2018-07-05, n° 6688, pp. 1384-1389. http://www.sgg.gov.ma/BO/FR/2018/BO_6688_Fr.pdf?ver=2018-07-11-124300-213

¹⁰Text of law no. 103.13 on combating violence against women as approved by the parliament.

<http://www.social.gov.ma/en/content/text-law-no-10313-combating-violence-against-women-approved-parliament>

¹¹Official Gazette, February 1st 2018. <http://www.ilo.org/dyn/natlex/docs/ELECTRONIC/106449/130597/F1299340281/MAR-106449.pdf>

¹² Official Bulletin, October 12th, 2017. https://www.mmsp.gov.ma/uploads/documents/loi_79_14.pdf

¹³"Plan Gouvernemental Pour L'Égalité", Ministère De La Solidarité, Du Développement Social, De L'égalité Et De La Famille, Last modified 2016, <http://www.social.gov.ma/fr/domaine-de-la-femme/plan-gouvernemental-pour-l'egalite>. Accessed 4 June, 2020

¹⁴ Ministry of the Family, and Social Development, PLAN GOUVERNEMENTAL POUR L'ÉGALITÉ, 2012-2016

<http://www.social.gov.ma/fr/domaine-de-la-femme/plan-gouvernemental-pour-l%E2%80%99egalit%C3%A9>

¹⁵ Ibid.

Development, with the coordination with an inter-ministerial technical committee that will play the role of tracking and coordinating the activities.

At the economic policy, Morocco introduced in 2002 a gender-sensitive budget that is presented alongside the financial law. This gender-budget intends to be an instrument of analysis and evaluation of public policies related to gender issues. In 2019, the governments alongside with UNWOMEN introduced reforms in the gender-budget in order to strengthen its content and make it a factual strategic instrument for monitoring and evaluating gender of public policies,¹⁶ in line with the provisions of the new Organic Finance Law (LOF)(Law N ° 130-13)¹⁷ that was enacted in 2015 and already mentioned in its article 48 that the annual financial law will be accompanied by a result-based budgeting report integrating the gender dimension, which will present an analysis of the impact of the main sector programs, and will summarize the gender implications of the budget. It aims to become an assessment tool through the gender lens of public policy.¹⁸

At the social policy level, Morocco adopted social policies that align with the ICPD goals. For instance, in 2005, King Mohamed VI launched the first phase of the National Initiative for Human Development (INDH) which aimed at increasing the access to social services, especially among the most vulnerable categories; strengthening the development programs for these same categories; enhancing the integration of disadvantaged categories in development; creating new jobs with emphasis on training and education.¹⁹ The second phase covered the period of 2011-2015²⁰ and in 2018, the king launched the third phase of the INDH that will cover a four-year period (2019-2023).²¹

In response to the growing demand for healthcare services, Morocco has embarked on a process of reforms to the financing and organization of the healthcare sector. Thus, following the 2008-2012 and 2012-2016 strategies, Morocco begins the 2017-2021 strategy. These strategies aim to ensure equitable provision of care between regions and between urban and rural areas, facilitate access for the poorest, and reduce the cost of care and medicines. The new strategy (2017-2021)²² also aims to reduce the share of health financing paid by households, and to take up largely or totally long-term conditions. It plans, among other things, to lower the maternal and child mortality rate, to have a high-performing public health service, to end AIDS in 2030 through the programming of several measures aimed at honoring the Kingdom's commitment to the SDGs.

Moreover, Morocco's Ministry of Health has made efforts that substantially reduced maternal and infant-child mortality levels. Among the most recent programs was the National Acceleration Plan

¹⁶ONU Femmes. Présentation de la nouvelle structure du Rapport sur le budget axé sur les résultats tenant compte de l'aspect genre.30 July 2019.<https://maghreb.unwomen.org/fr/actualites-evenements/actualites/2019/07/bsg-rapport-genre>

¹⁷Official Gazette, 18 June 2015. http://www.sgg.gov.ma/Portals/0/lois/Loi-organique_130.13_Fr.pdf?ver=2015-09-15-160544-490

¹⁸Loi Organique relative à la loi de Finances. <http://lof.finances.gov.ma/fr/glossaire#letter-G>

¹⁹National Initiative for Human Development 2005. Ministry of Interior. <http://www.indh.ma/chantier-de-regne/>

²⁰La 2ème phase de l'INDH a donné une forte impulsion à ce grand chantier de règne, MAP, 24 June 2013.

<http://www.maroc.ma/fr/actualites/la-2eme-phase-de-lindh-donne-une-forte-impulsion-ce-grand-chantier-de-regne>

²¹King Mohammed VI Launches 3rd Phase of National Initiative for Human Development, North Africa Post, 20 Sept 2018.

<https://northafricapost.com/25489-king-mohammed-vi-launches-3rd-phase-of-national-initiative-for-human-development.html>

²² Stratégie de coopération OMS-MAROC 2017-2021, Organisation mondiale de la Santé. 2016.

https://apps.who.int/iris/bitstream/handle/10665/254588/CCS_Maroc_2016_fr_19364.pdf;jsessionid=8A03EA103C67B8C7BEF4CD0B8415B637?sequence=5#:~:text=Pour%20le%20Maroc%2C%20la%20pr%C3%A9sente,pays%20et%20de%20sa%20participation.

for Maternal and Child Health 2013–2015²³. In 2014, the World Health Organization stated that Morocco is among the countries of Mediterranean region that have implemented a national program to tackle challenges linked to maternal and child health development²⁴.

This general overview provides selective elements to understand some of the key policies and legislation related to the implementations of the commitments of ICPD, which has led to remarkable achievements in areas of education, gender equality and access to sexual and reproductive health services.

Universal Education

The primary objective of Nairobi Summit of ICPD25 was achieving universal education. On this front, Morocco made remarkable achievements. Education in Morocco is mandatory and free until the age of 15. The primary school is planned to last six years and the middle (secondary) school requires three years to complete.

Over the last 25 years, the total enrollment increased. For instance, the total net enrollment rate in primary education was 68% in 1994 while in 2017 it reached 96.8%²⁵, which means that around 4.32 million pupils were attending primary schools by 2018. The national net pre-school rate is 49.5% (45% for girls) in 2016-17 and 35.7% (26.4% for girls) in rural areas.²⁶ In 2018, with an estimated annual budget of MAD 3 billion, Morocco launched a national program of generalization and reform of the pre-primary education in Morocco, which aims at reaching a school enrollment of 67% by 2020-2021 and 100% by 2027-2028²⁷, this project will be funded partly by a \$500 million loan by the World Bank.²⁸

In fact, these efforts have remarkable outcomes. For instance, the literacy rate increased significantly as among youth aged 15 to 24 it has reached 90% in 2014 against 58% in 1994. This improvement is much more significant for girls as the rate has gone during the same period from 46% to 85.9% against 71% and 94.1% for boys respectively.²⁹

²³Morocco takes a stride forward for mothers and children, World Health Organization, January 2014.

<https://www.who.int/features/2014/morocco-maternal-health/en/>

²⁴The Moroccan program was established as part of a global effort to save the lives of mothers and children launched by several stakeholders including the WHO, UNICEF, and UNFPA and involved health ministers from 22 countries committed to accelerating progress towards MDGs 4 and 5 (for child protection and maternal health) under the Dubai Declaration adopted at a high-level meeting in the United Arab Emirates on 30 January 2013.

<https://www.who.int/features/2014/morocco-maternal-health/en/>

²⁵Education Statistics, The World Bank, last updated: 13 March 2020. <https://data.worldbank.org/data-catalog/ed-stats>

²⁶Education support program, Document of The World Bank, p.9 and p.63 paragraph 95.

<http://documents1.worldbank.org/curated/en/908441561140203130/pdf/Morocco-Education-Support-Program-Project.pdf>

²⁷Improvement of Preschool Education in Morocco Requires Annual Budget of MAD 3 Billion: Minister, Morocco world news, Safaa Kasraoui 13 July 2018. <https://www.moroccoworldnews.com/2018/07/250502/improvement-preschool-education-morocco-mad-3-billion/>

²⁸Morocco and World Bank Sign \$500 Million Preschool Education Loan, Morocco world news, Margot Eliason, 12 July 2019.

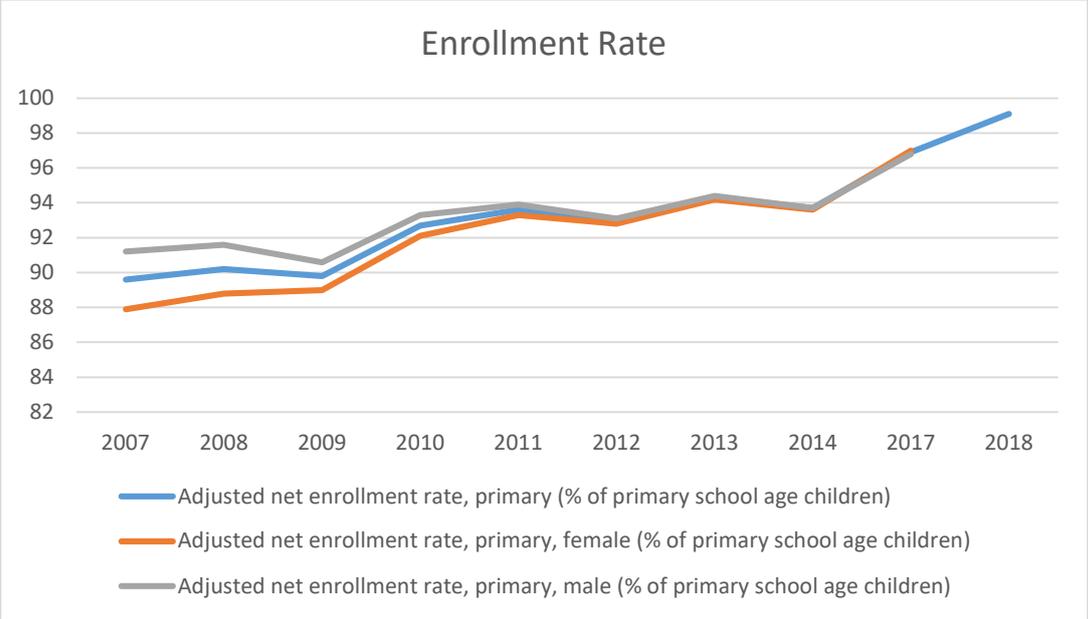
<https://www.moroccoworldnews.com/2019/07/277975/morocco-world-bank-500-million-preschool-education-loan/>

²⁹ Morocco between Millennium Development Goals and Sustainable Development Goals: Achievements and Challenges, HCP, August 2015.

[file:///C:/Users/hp/Downloads/Le%20Maroc%20entre%20Objectifs%20du%20Mill%20C3%A9naire%20pour%20le%20D%20C3%A9veloppement%20et%20Objectifs%20de%20D%20C3%A9veloppement%20Durable%20_%20Les%20acquis%20et%20les%20d%C3%A9fis%20\(Rapport%20national%202015.%20version%20Anglaise\).pdf](file:///C:/Users/hp/Downloads/Le%20Maroc%20entre%20Objectifs%20du%20Mill%20C3%A9naire%20pour%20le%20D%20C3%A9veloppement%20et%20Objectifs%20de%20D%20C3%A9veloppement%20Durable%20_%20Les%20acquis%20et%20les%20d%C3%A9fis%20(Rapport%20national%202015.%20version%20Anglaise).pdf)

The overall number of pupils attending public and private primary education increased at the national level by an average of 0.95% per year between 2011-12 and 2016-17 and by 27.5% in rural areas.³⁰

Figure 1: Education in Morocco (enrollment rate)



Source: World Bank (author compilation)

The total number of pupils enrolled in public secondary education increased nationally by an average of 0.92% (1.45% among girls) between 2011-12 and 2016-17. The trend was more significant in rural areas, where the average annual growth rate reached 8.51% (11.22% for girls) during the same period, while the percentage of rural versus the total rose from 11.89% to 17.09%. The share of the private sector at this level of education rose from 8.46% to 9.13%. The net enrollment rate for public and private qualifying secondary education reached 33%³¹ (37.1% among girls) in 2016-17 and 10.4% (11.4% among girls) in rural areas during the same period.

Health and wellbeing

The second and third objective of the Nairobi Summit of ICPD25 was the reduction of infant, child and maternal mortality. In both goals, Morocco has made significant progress, thanks to the improved maternal and child care since the 1990s, which render Morocco as a leading country to officially initiate a program for maternal and child care. The goal of the Moroccan program was to bring about a further decrease in maternal and under-five mortality, with a decrease of 70% and 82% respectively between 1990 and 2015.³² The program aims to hit the most underserved categories of the Moroccan population living in 44 provinces in nine regions. The goal was to

³⁰ Sustainable Development Goal, UNESCO, UNESCO institute for statistics. <http://uis.unesco.org/country/MA>
³¹ World Bank, the World Bank’s support for the educational sector in Morocco. <http://pubdocs.worldbank.org/en/735041505331586401/education-sector-morocco-AR.pdf>
³² Morocco launches maternal and child health acceleration plan, WHO, April 2014. <http://www.emro.who.int/child-health/2013/morocco-launches-mch-acceleration-plan-nov2013.html>

improve the capacity of the regions to prepare, execute, track and review, rely on their technological expertise and expand access to high-quality Maternal Health Care services, addressing both primary health care and referral services.³³

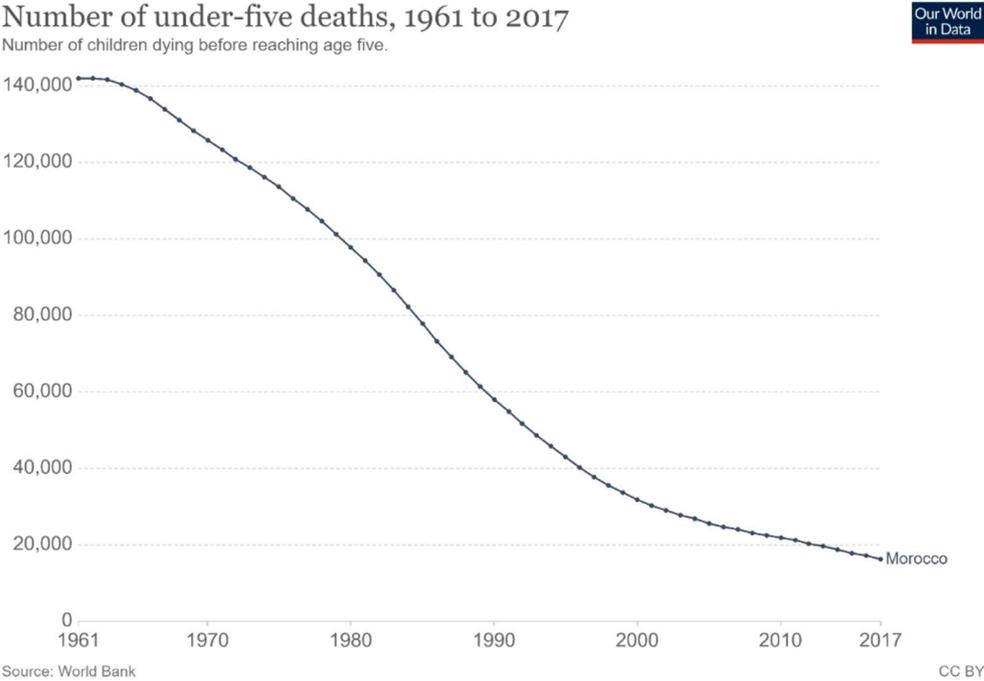
Reduction of infant and child mortality

In the past years, Morocco made significant achievements in the reduction of infant and child mortality. Child mortality in Morocco dropped from 80 deaths per 1,000 live births in the 1990 to 22.4 deaths per 1,000 live births in 2018.³⁴

More significantly, under-five mortality has declined significantly over the past 60 years as it recorded 213 per 1,000 live births in 1960s.³⁵ The country’s under-five mortality rate dropped by 60% between 1990 and 2011. The goal of the new strategy is to make progress even faster. This puts the country on track to achieve a decline of 70% to 82% in maternal and under-five mortality from 1990 rates by 2015, which reached 22.4 deaths per 1,000 live births in 2018 or 16,285 (2017).³⁶

The decline in the under-five mortality rate has been attributed to a combination of several factors, including the National Immunization Program, the National Diarrheal Disease Control Program, the Micronutrient Deficiency Program, the promotion of infant feeding, in particular breastfeeding.

Figure 2: Number of under-five deaths



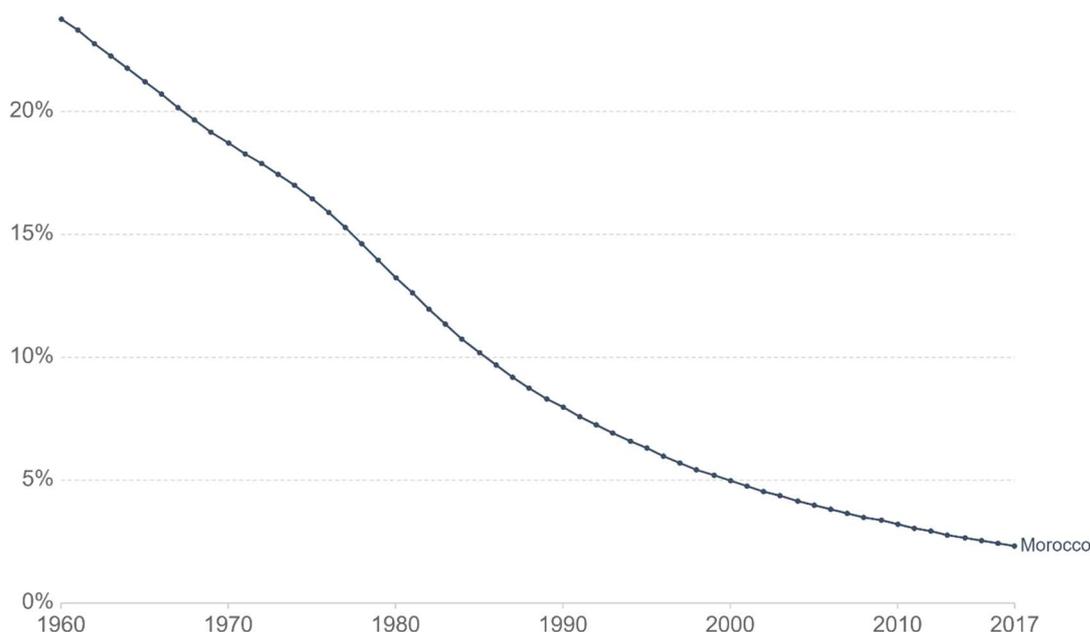
Source: our world in data

³³ Ibid, <http://www.emro.who.int/child-health/2013/morocco-launches-mch-acceleration-plan-nov2013.html>
³⁴ ("Morocco (MAR) - Demographics, Health & Infant Mortality - UNICEF DATA" 2019). <https://data.unicef.org/country/mar/>
³⁵ Number of under-five deaths, 1961 to 2017. <https://ourworldindata.org/grapher/number-of-under-five-deaths?country=~MAR>
³⁶ Number of under-five deaths, 1961 to 2017. <https://ourworldindata.org/grapher/number-of-under-five-deaths?country=~MAR>

Figure 3: Child Mortality rate

Child mortality rate, 1960 to 2017

The share of newborns who die before reaching the age of five.



Source: UN Inter-agency Group for Child Mortality Estimation

OurWorldInData.org/child-mortality • CC BY

Note: The child mortality rate expresses the probability of a child born in a specific year or period dying before reaching the age of 5 years, if subject to age-specific mortality rates of that period. This is given as the share of live births.

Source: our world in data

Reduction of maternal mortality

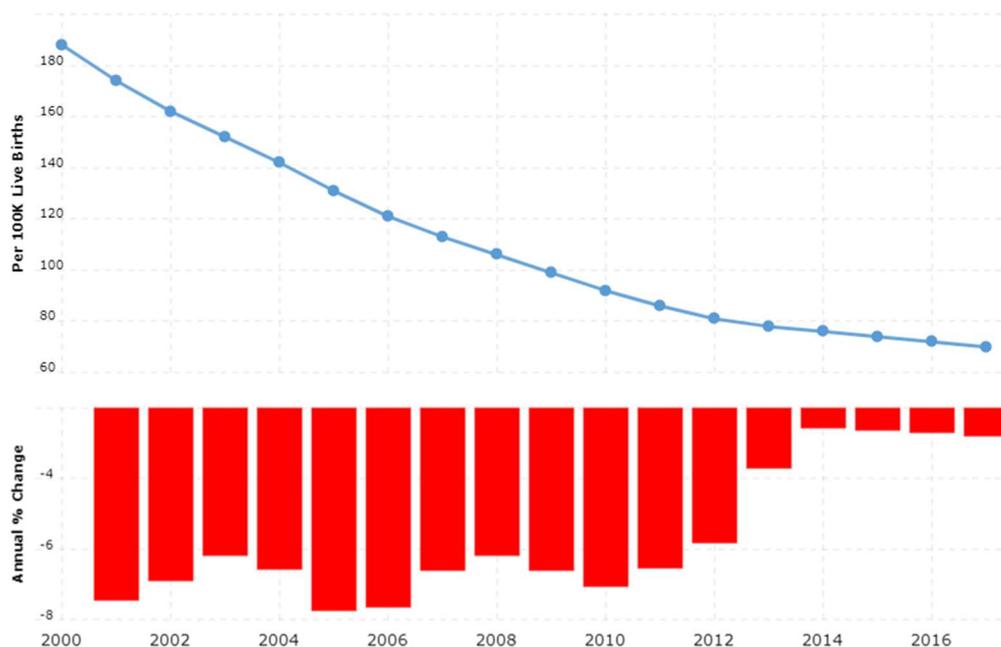
In the same vein, Morocco has made remarkable progress on maternal health. Since the 1990s, and in particular during the last decade, significant improvements in maternal health have been achieved. Continuous efforts culminated in a 78% decrease in maternal mortality and a decrease in the ratio from 332 deaths per 100,000 in 1992 to 72.6 deaths per 100,000 live births in 2017.³⁷

The progress is associated to some degree with a steady rise in the use of maternal health facilities and free treatment for pregnancy, childbirth and obstetric complications, and more importantly, midwives have played a key role in mother's survival: as more professional midwives entered the workforce, births became safer. As of 2020, nearly 89% of births in Morocco are assisted by professional midwives.³⁸

³⁷Morocco Has Made Stunning Advances in Maternal Health, MAP, 13 July 2017. <http://www.maroc.ma/en/news/morocco-has-made-stunning-advances-maternal-health>

³⁸Maternal deaths declining in Morocco thanks to midwives, but more support needed, UNFPA, 14 February 2020. <https://www.unfpa.org/news/maternal-deaths-declining-morocco-thanks-midwives-more-support-needed>

Figure 4 : Maternal Mortality Rate



Source : <https://www.macrotrends.net/countries/MAR/morocco/maternal-mortality-rate>

Access to sexual and reproductive health services

In Morocco, family planning policy has been implemented since 1966, but only intensified in the 1980s. In 1995, contraceptive prevalence was substantially higher in urban areas than in rural areas (64% and 39% respectively, a difference of 25 points). However, the difference between the two environments tends to narrow currently. In 2011, the contraceptive prevalence of urban women was 68.9% and that of rural women was 65.5%, reducing the gap to 3.4 points. According to the National Survey on Population and Family Health, around 70.8% of Moroccan families used contraception in 2018, with 58.0% for modern contraceptive methods and 12.8% for traditional methods.³⁹

Youth and Women Participation

In the recent years, Morocco has made noticeable progress at the level of encouraging the inclusion of youth and women in public life. This included changes in legal frameworks (electoral law, law for petitions, etc.) and enactment of policies that aimed to encourage youth and women to be engaged in public life generally.

This has been clear since 2011, when the mass uprising of the 20th of February movement led to the introduction of a new constitution in Morocco, which affirmed in its preamble that all women and men enjoy “equal opportunities, and respect for their dignity”. Article 6 affirms the

³⁹Enquête Nationale sur la Population et la Santé Familiale (ENPSF-2018), Ministère de santé, 2018. P : 64.
[https://www.unicef.org/morocco/media/1626/file/Enqu%C3%AAt%20Nationale%20sur%20La%20Population%20et%20la%20Sant%C3%A9%20Familiale%20\(ENPSF%20-2018\).pdf](https://www.unicef.org/morocco/media/1626/file/Enqu%C3%AAt%20Nationale%20sur%20La%20Population%20et%20la%20Sant%C3%A9%20Familiale%20(ENPSF%20-2018).pdf)

generalization, the effectiveness of the freedom and equality of citizens and their participation in economic, cultural and social life) and Article 19 affirms equality between men and women in the enjoyment of civil, political, economic, social, cultural and environmental rights and freedoms”.⁴⁰ Article 33 also stipulates that authorities are responsible for taking appropriate measures to extend and generalize “the participation of young people in the social, economic, cultural and political development of the country; help young people to integrate into active and associative life and assist those in difficulty with academic, social or professional life; and facilitate young people's access to culture, science, technology, art, sport and leisure, while creating conditions conducive to full deployment of their creative and innovative potential in all these areas”.⁴¹

The constitution also established an Advisory Council for Youth and Associative Action with a main mission of proposing economic, social and cultural recommendations related to youth and civil society. The law (n° 89-15) related to the creation of the Advisory Council for Youth and Associative Action has been adopted by the parliament in 2018⁴² but the body itself was not created yet (July 2020).

In 2016 Morocco enacted the organic law (N: 44-14) related to the right of petitions⁴³ which was seen as a tool to enhance citizens engagement in public life through participatory democracy mechanism. As such, this law provides an opportunity for youth to engage in the local and national affairs and have a voice in expressing their grievances through this mechanism.

At the level of public policy, the Government of Morocco launched in 2014 the National Strategy for Youth (SNIJ : 2015-2030) that aimed to place youth at the heart of public policies. This strategy revolves around five strategic axes (1. Increase economic opportunities for young people and promote their employability; 2. Increase access and quality of basic youth services and reduce geographic disparities; 3. Promote the active participation of young people in social and civic life and in decision making; 4. Promote respect for human rights; 5. Strengthen institutional communication and information systems, and governance).⁴⁴

On the other hand, in recent years the empowerment of women has been strengthened. At the decision-making level, more women are taking seats. For instance, in 1998, the rate of feminization of positions of responsibility was 2.7% in the position of director, 4.4% as head of division and 6.9% as head of service. In 2001, the average rate of women at the positions of responsibility (director, head of division and head of service) was around 10% and 14% in 2006. In 2012, this rate reached 15% according to the MMSP.⁴⁵

⁴⁰The 2011 Constitution. July 2011. http://www.sgg.gov.ma/Portals/0/constitution/constitution_2011_Fr.pdf

⁴¹Ibid. Article 33.

⁴²Loi n°89-15 relatif au Conseil consultatif de la jeunesse et de l'action associative, *Official Gazette* N :6640, 18 January 2018. http://www.sgg.gov.ma/Portals/0/lois/Loi_89.15_Fr.pdf?ver=2018-02-01-170512-620

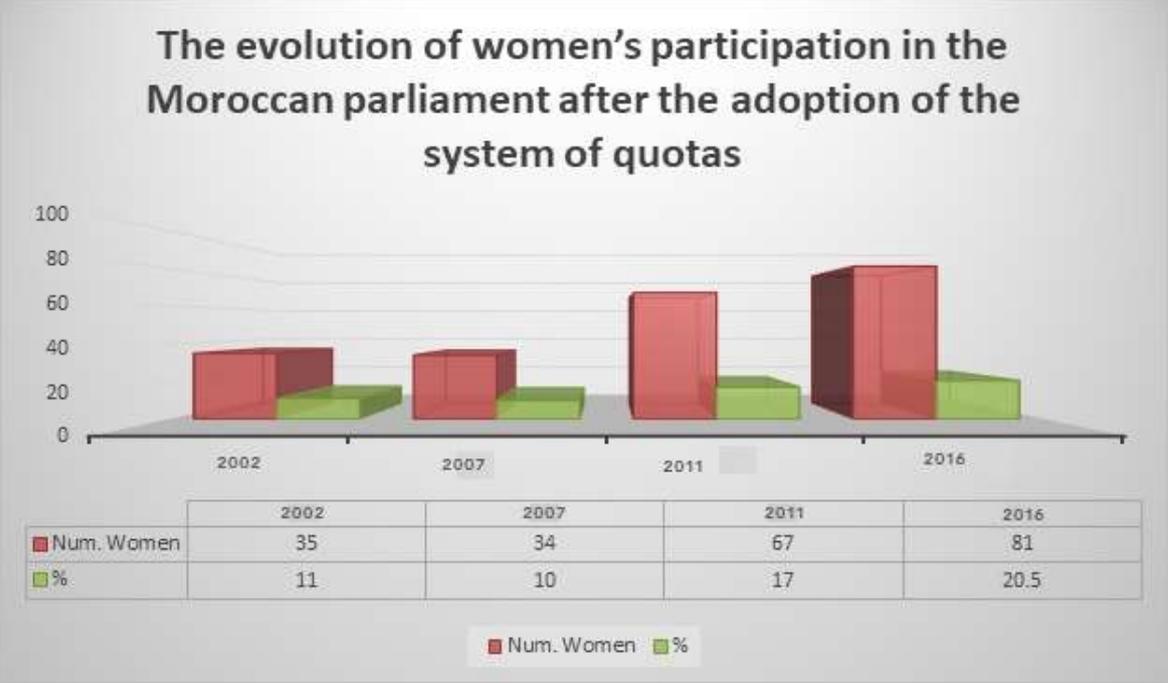
⁴³http://www.sgg.gov.ma/Portals/0/lois/Loiorganique_44-14_Fr.pdf?ver=2017-02-08-171743-837

⁴⁴ Stratégie Nationale Intégrée de la Jeunesse 2015-2030 : Pour une jeunesse citoyenne, entreprenante, heureuse et épanouie, *Ministère de la Jeunesse et des Sports en collaboration avec le Comité Interministériel de la Jeunesse*, 2014. http://mjs.gov.ma/sites/default/files/strategie_nationale_integre_de_la_jeunesse.pdf

⁴⁵« La Place des Femmes Fonctionnaires aux Postes de Responsabilité dans L'administration Publique au Maroc », Ministry of Public Service and Modernisation of the Administration. P 8. <https://www.mmmsp.gov.ma/uploads/file/Rapport%20place%20Femmes%20Fonctionnaires-%20postes%20responsabilit%C3%A9%20dans%20FP.pdf>

Morocco introduced the quota system in 2002 as a mechanism to enhance women’s participation in the elected institutions. Through a national party-list, 35 women (11% of parliamentary seats) reached the parliament in 2002 elections, 67 women (17% of all seats) in 2011 and the number increased in 2016 elections to reach 81 women (20.5%).

Figure 5: Evolution of women seats in parliament



Source: Moroccan Institute for Policy Analysis

At the local level, more women are present at the local elected bodies. For instance, the new organic law n° 34.15 related to the election of members of local authority councils introduced mechanisms that allocate a minimum of seats for women in each local council, which helped to bring the number of female elected at the local level to 21.2%, which is the double of seats won during the 2009 election.⁴⁶

⁴⁶ Orientations pour une meilleure participation des femmes au sein des conseils des collectivités territoriales du Maroc, OECD, p : 3. <https://www.oecd.org/mena/governance/orientations-pour-une-meilleure-participation-des-femmes.pdf>

Gaps and Challenges

As demonstrated in the previous section, Morocco made remarkable progress on different fronts related to the commitments of ICPD. This has included changes in the legal and institutional framework, policies, ratifications of international conventions with respect to the different aspects of the ICPD commitments, such as in the field of sexual and reproductive health, universal education, elimination of discriminations against women, among other things.

While those efforts should be applauded and authorities' efforts recognized, it is nevertheless important to highlight the fact that after quart century after the Cairo conference, several challenges remain and some of the achievements have not been capitalized upon. For instance, the global trends on health and education have been progressed, but a closer look at the data demonstrates that the progress did not touch all the categories in society. The most vulnerable categories, especially the lower social classes and rural areas have not benefitted from the overall progress the country witnessed in the last years.

These challenges are linked to different factors such as the lack of good governance, limitation at the level of institutional capacity and limitation at financial aspects of the ICPD commitments. This is why it is unlikely that Morocco will fully achieve the commitments of ICPD25 anytime soon.

This chapter aims at looking for the broad challenges that limit Morocco's full implementation of the ICPD25 objectives. The first section discusses the structural challenges that face Morocco and prevent it from having an inclusive order for all social categories, especially for women and youth. Then the report shed the light on specific issues such as the SRH, Education and gender-based violence.

Demography, Inequality and Exclusion

To understand Morocco's challenges related to the ICPD25, it is important to look at the broader picture and particularly at the demographic dynamics of the country.

From a demographic perspective, Morocco is in the final phase of the demographic transition. Between 1960's and today the fertility rate declined sharply from an average number of children per woman of 7.4 in 1960 to 2.45 in 2017,⁴⁷ which barely ensures the level of population replacement. In addition to that, Moroccans are living longer today. The life expectancy increased in the last decades to reach around 76.22 in 2017⁴⁸ and it was only 48.4 in 1960. Women's life expectancy is higher by 2 years more than men.

The decrease in fertility and increase in longevity rates mean that the weight on people of working age (15-60 years) increases. As a consequence, the growing of youth portion requires the creation

⁴⁷Fertility rate, total (births per woman) – Morocco 1960-2018, The World Bank.

<https://data.worldbank.org/indicator/SP.DYN.TFRT.IN?locations=MA>

⁴⁸Life expectancy at birth, total (years) 1960 to 2018. The World Bank.

<https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=MA>

of economic opportunities to absorb the growing demands for job market, quality services, such as health, education, political and social participation of youth.

Moreover, older population is also facing specific challenges, especially the lack of safety nets. People over the age of 60 today constitute 9.6% of the population of Morocco, or 3.209 million against 8.1% in 2004, or 2.376 million people, a relative increase of 35%.⁴⁹

Yet, more than half of older people do not have a source of income (52.4%) which indicates an increased economic vulnerability of the elderly. Moreover, older women are more vulnerable than men in regard to the source of income as only 20% of women have a source of income compared to 74% men having a source of income. So, the vulnerability is more acute among women, people of rural areas and the oldest people.⁵⁰ Moreover, only 5% of older people have a social security and retirement pension. There is a need to seize the potential of this category, especially through building programs to benefit from their knowledge, know-how, and expertise.⁵¹

Furthermore, Morocco has an active internal and international migration flux. At the domestic migration, Morocco's urban population increased in the last decades due to the migration from rural areas. In 10 years, the urban population increased from 16.4 million in 2004 to 20.4 million in 2014 with an annual average population growth of 2.2%, with a high concentration in the western coastal regions from Tangier to Rabat. In fact, 5 regions in Morocco are home to more than 70% of the population.⁵² The growing urban population is affected by continuous years of drought in the last decades, which created a rural exodus and new challenges for cities, such as access to basic needs (electricity, water, health, housing, etc.), population density in urban areas and exacerbated the social inequalities.⁵³

In addition to domestic migration, Morocco is a country of departure, transition and recently of settlement of many international migrants. In fact, Morocco became a leading country in the MENA that developed a comprehensive strategy of international migration.⁵⁴ Yet, Morocco's migration policy has been characterized by its centrality and hence was not fully embedded at the local level, and lacks complementarity between different state agencies, this is why it is important to develop tailored and comprehensive strategies to respond to the challenges faced by international migrants, most of whom are at risk, such as threats linked to violence and the management of health, education, and housing of migrants.

At first sight, these demographic elements seem like an opportunity and Morocco appears to meet all the conditions necessary to accelerate its pace of inclusive and sustainable development. However, these favorable conditions also bear risks, among which are the absence of a favorable environment for a dynamic and broad-based private sector that can create enough jobs, leading to

⁴⁹Elderly people in numbers, Ministry of Solidarity, Social Development, Equality and the Family.

<http://www.social.gov.ma/fr/personnes-%C3%A2g%C3%A9s/vieille-et-collecte-des-donn%C3%A9es-concernant-la-situation-des-personnes-%C3%A2g%C3%A9es/personnes>

⁵⁰ ENQUETE NATIONALE SUR LA POPULATION ET LA SANTE FAMILIALE (ENPSF-2018), Ministère de la santé, 2018, p : 168. <file:///C:/Users/hp/Downloads/Rapport%20ENPSF%202018%20i%C3%A8me%20%C3%A9dition.pdf>

⁵¹ Interview with UNFPA team, Rabat, 25 June 2020.

⁵² Mobilité interne et migration : état des lieux et impacts socio-sécuritaires, OCP Policy Center, 2016. P: 11.

<https://www.policycenter.ma/sites/default/files/OCPPC-PP1613.pdf>

⁵³ Interview with UNFPA team, Rabat, 25 June 2020.

⁵⁴ Anna Jacobs, Morocco's Migration Policy: Understanding the Contradiction between Policy and Reality, MIPA Institute, 30 June 2019. <https://mipa.institute/6872>

large-scale, long-term youth unemployment in particular, the risk of not being able to capitalize on increased enrollment and completion rates to get better learning outcomes that are suitable to the labor market, and finally the risk of a system of governance that is not meaningfully inclusive and responsive.⁵⁵

This challenge of inequalities and lack of inclusion of the most vulnerable categories, especially, youth, women, elderly and migrants, make it difficult for Morocco to meaningfully achieve the ICPD25 commitments. Inequalities are clear especially between genders (men and women), between regions (rural and urban) and between different social classes. While there are some data in regard to the gender inequalities, it is difficult to obtain reliable data between the different regions in the country and between rural and urban areas, which makes programs and interventions to decrease the gaps more difficult.

These aforementioned challenges limit the potential of inclusive development that provide equal opportunities for all citizens to benefit from the fruits of development. They also impede the implementation of the ICPD25 commitments, especially in regard to achieving universal access to sexual and reproductive health, providing the right to sexual and reproductive health care and decreasing the gender-based violence. The following sections will discuss those challenges in more details.

Youth: Untapped Opportunity

At first sight, Morocco's youth may seem like a blessing for the country, by taking the advantage of this demographic window of opportunity through investment in human capital; however, a deeper look demonstrates that Morocco did not seize the youth bulge as it should be and the opportunity transformed into a challenge.

Youth in Morocco are among the most excluded categories in political and economic activities and it is one of the areas where Morocco did not progress well in the ICPD commitments.

In this regard, the youth are the most excluded from economic activities. While the average national unemployment rate is 10%, it is almost triple among youth (27.4%)⁵⁶ and the more educated a person is, the more likely he/she is to be unemployed, as 23.3% of youth (mainly urban youth) with diplomas are officially declared unemployed versus 3.8% for those without a degree.⁵⁷

The youth are also excluded from political participation. Less than 1% of youth are members of political parties, 1% are active members of a union, 9% participate in volunteer activities, 4% at meetings of a political party or union, and 4% in social demonstrations or strikes.⁵⁸ During 2016 elections, young people (between 18 and 35 years old) represented only 30% of the official

⁵⁵"GOVERNING TOWARDS EFFICIENCY, EQUITY, EDUCATION AND ENDURANCE", Documents.Worldbank.Org, Last modified 2018, <http://documents.worldbank.org/curated/en/375771529960237724/pdf/CLEARED-Morocco-SCD-ENGLISH-final-June2018-06212018.pdf> p.xv Accessed 20 June 2020.

⁵⁶Taux de chômage au niveau national selon les tranches d'âge, Haut-Commissariat au Plan du Maroc. https://www.hcp.ma/Taux-de-chomage-au-niveau-national-selon-les-tranches-d-age_a262.html

⁵⁷Taux de chômage national selon le diplôme, Haut-Commissariat au Plan du Maroc. https://www.hcp.ma/Taux-de-chomage-national-selon-le-diplome_a267.html

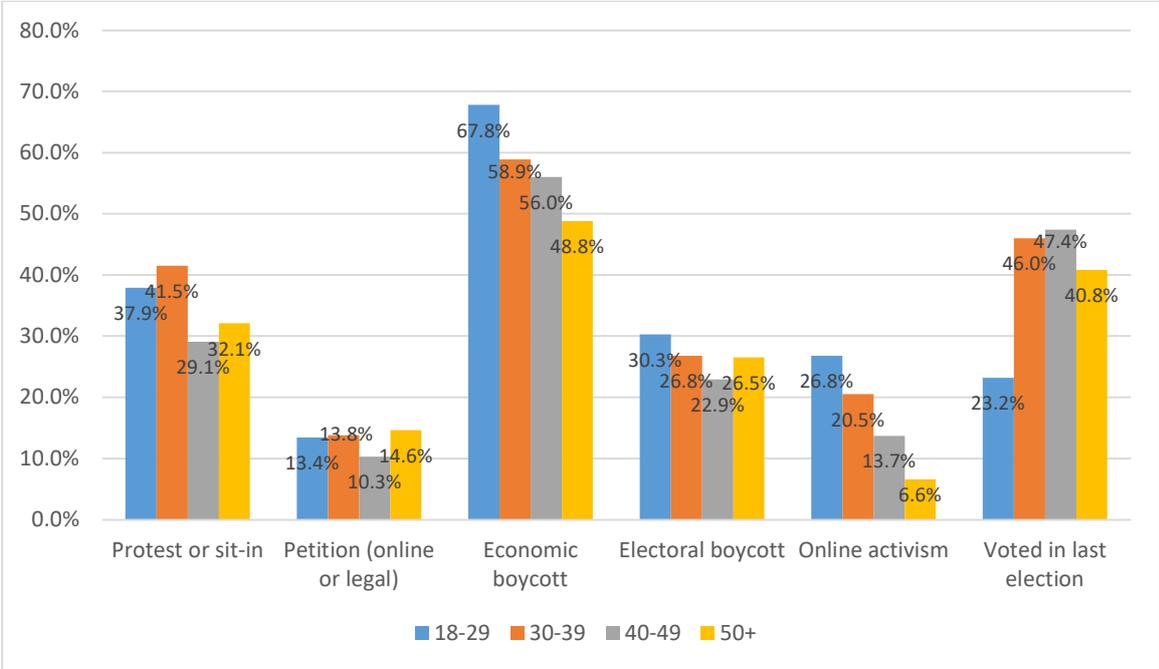
⁵⁸Enquête Nationale sur les Jeunes2011 : Rapport de Synthèse, HCP, p : 39.

<file:///C:/Users/hp/Downloads/Enqu%C3%AAt%20nationale%20sur%20les%20jeunes%202011.%20rapport%20de%20synth%C3%A8se.pdf>

electoral list and in March 2019 they represented only 24%, with a decrease in the number of registrants on the electoral list of 2% between 2016 and 2019. Also, the general voter turnout, according to official figures, has steadily decreased since 1963 (from 71.79% in 1963 to 37.50 in 2007), then rose significantly in 2011 (45.4%) and decreased in 2016 (43%).⁵⁹

One of the main challenges related to youth participation in the public is their low trust in public institutions. A Survey carried out by the Moroccan Institute for Policy Analysis demonstrated that youth are suspicious about political parties and elected institutions. For instance, the percentage of youth (18-29 years old) who have a complete trust for political parties is lower than 1%, while they are turning towards other forms of political participation such as the boycott (both electoral and economic) or the engagement in online activism to express their political views. They also scored the lowest rate of participation in election, showing great disaffection for the participation in the so-called “formal politics”. Nonetheless, it appears clear that Moroccan youth is politically active and participates in different arenas of political engagement⁶⁰ that is not necessarily official.

Figure 6: Modes of participation depending on the age



Source: Moroccan Institute for Policy Analysis

One of the main reasons that explain the youth disengagement from formal politics and engagement in the new forms of political expression (boycott and online activism) can be explained by the lack of civic education. For instance, Morocco enacted the law of access to information⁶¹ in 2018 but as of July 2020 fewer initiatives have been done by youth in order to benefit from this opportunity.

⁵⁹Participation politique des jeunes au Maroc, Mohamed Anwar El Hazziti, 18 February 2020. https://www.libe.ma/Participation-politique-des-jeunes-au-Maroc_a115751.html
⁶⁰ Morocco’s Trust in Institutions Index: Morocco, Moroccan Institute for Policy Analysis, 2020.
⁶¹<https://www.ilo.org/dyn/natlex/docs/ELECTRONIC/107094/131706/F-985611108/MAR-107094.pdf>

Moreover, the majority of the governmental programs that target youth tend to work mainly with *already* engaged youth and CSOs, which automatically excludes a vast majority of non-engaged youth,⁶² especially those who are neither in education, nor in training, nor in search for employment (or NEET). This category comprises nearly 2.7 million people between 15 and 29 years of age, and out of the 1.68 million people aged 15-24 who are NEET, 78% are girls. This reflects the low participation of women in employment in general. In fact, only 23.6% of women of working age are active. An impressive population, but completely ignored.⁶³

Even those who are in school are likely to find difficulties to find jobs because of the chronic mismatch between the skills they get in school and the requirements of the job market. School curricula are lacking components related to the soft skills; such as writing a business plan or a CV, conflict management among other skills, which leave youth seeking jobs without necessary skills needed in real life.

Finally, despite the efforts of CSOs to engage with youth, there are several challenges that face them. The first challenge is the lack of professionalism, as many CSOs in Morocco are centered around one-man show and lack institutional capacity to plan and organize large-scale programs. The second challenge is related to the sustainability of the initiatives geared towards youth. The lack of financial stability leaves many CSOs without proper human and financial resources to carry long term programs.⁶⁴

Sexual and Reproductive Health (SRH)

Despite Morocco's international engagements in relation to sexual and reproductive health (SRH), and despite the remarkable achievements at the level of policies and institutional framework, constraints to fulfill ICPD25 engagements in relation to sexual and reproductive health still exist.

In regard to the maternal mortality, the rate has declined significantly in the last two decades but inequalities between rural and urban areas are still wide. The average maternal mortality rate is currently at 72 per 100,000, however, in the urban areas it is only 44 while it is 111 in the rural areas, which means that women in rural areas die 2.5 times more than in urban areas.⁶⁵ According to a recent report by the UNFPA, half of pregnant women in the rural world were not medically assisted during their pregnancy because they were financially unable or unaware.⁶⁶ In addition to that, rural areas suffer more in regard to healthcare infrastructure and medical staff, poverty, illiteracy and poor hygiene conditions in the living environment.⁶⁷ More challenging is the absence of segregated data by region that allow providing tailored interventions and programs specific to these regions.⁶⁸

⁶² Interview, Yassine Souidi, 16 July 2020.

⁶³ Ahlam NAZIH, Neet : Comment peut-on les ignorer ? *L'économiste*, N°:4990 Le 28/03/2017.
<https://www.leconomiste.com/article/1010225-neet-comment-peut-les-ignorer>

⁶⁴ Interview, Yassine Souidi, 16 July 2020.

⁶⁵ Interview with UNFPA team, Rabat, 25 June 2020.

⁶⁶ 50% of Pregnant Women in Rural Areas Risk Dying during Pregnancy, Morocco world news, Amira El Masaiti, 23 Dec 2017.
<https://www.moroccoworldnews.com/2017/12/237030/pregnant-women-rural-areas-pregnancy-morocco/>

⁶⁷ Interview with UNFPA team, Rabat, 25 June 2020.

⁶⁸ Ibid.

As for safe abortion, the issue is still facing considerable cultural resistance. The parliament is yet to adopt the new amendments in the penal code that was presented in parliament in 2016.⁶⁹ This situation leaves the room for unsafe forms of abortion, especially for youth. A survey published by a Moroccan NGO in 2016 estimates the annual cases of illegal abortions between 50,000 to 80,000, which is an average of 200 abortions per day. These abortions are allegedly responsible for approximately 4.2% of maternal deaths and 5.5% of deaths from postpartum complications.⁷⁰

Despite the growing access to contraception, there are still challenges for women who did not want or wished to delay pregnancy. One of the main challenges is the access to information, education and services for adolescents and young people. In fact, adolescents face triple challenges, the lack of information, the absence of adequate and equipped facilities specializing in sexual and reproductive health, and when these facilities exist, they find difficulties to access, as they are required to provide “marriage certificate” to be treated.⁷¹

This is why Morocco needs a comprehensive sexuality program to address sex-related social issues. With the absence of adequate SRH information and services, there is a higher risk for unwanted pregnancies which then leads to unsafe and clandestine abortions in some cases. For instance, the average age of first sexual contact is approximately 16.5 years for boys and 17.8 years for girls,⁷² this can put Moroccan adolescents and young people in a number of risky behaviors, given that 7.9% of girls aged 15-24 who had sex had unwanted pregnancies and 60% of young boys frequent sex workers and almost a quarter of them never use condoms.⁷³

Besides, Moroccan family planning relies heavily on the pill and does not rely on condoms which can prevent both pregnancy and STD infection. For this reason, it is recommended that Moroccan family planning should devote more resources to stressing other methods of contraception.⁷⁴

Figure 7: Use of contraception in North Africa

Major area, region, country or area	Contraceptive prevalence (any method)			Contraceptive prevalence (modern methods)			Unmet need for family planning			Demand for family planning satisfied with modern methods			
	Notes	2015		2015		2015		2015		2015			
		Median	80 per cent lower bound	80 per cent upper bound	Median	80 per cent lower bound	80 per cent upper bound	Median	80 per cent lower bound	80 per cent upper bound	Median	80 per cent lower bound	80 per cent upper bound
Northern Africa		52.7	49.5	55.8	47.7	44.6	50.7	15.3	13.3	17.3	70.2	66.9	73.3
Algeria		59.4	51.1	67.3	51.2	43.3	58.9	12.9	8.4	18.5	70.9	61.9	78.4
Egypt		59.7	54.5	64.6	57.8	52.8	62.6	12.3	10.1	14.8	80.3	76.3	83.8
Libya		48.6	37.2	59.8	28.4	19.2	39.0	19.8	13.2	27.4	41.8	29.0	54.6
Morocco		68.2	59.6	75.9	58.0	49.3	66.1	9.7	6.1	14.5	74.5	65.6	81.8

Source: Trends in Contraceptive Use Worldwide 2015, WHO⁷⁵

⁶⁹ Interview with Member of Parliament, June 20, 2020.

⁷⁰Loi sur l'avortement : deux ans après, où en est-on ? Association Marocaine de Lutte contre l'Avortement Clandestin. <http://amlac.org.ma/loi-sur-lavortement/>

⁷¹ Interview with UNFPA team, Rabat, 25 June 2020.

⁷²50% of Pregnant Women in Rural Areas Risk Dying during Pregnancy, Morocco World News, Amira El Masaiti 23 Dec 2017. <https://www.moroccoworldnews.com/2017/12/237030/pregnant-women-rural-areas-pregnancy-morocco/>

⁷³Ibid

⁷⁴ In Morocco, More Modern Contraceptive Use Plays Key Role In Decreasing Maternal Deaths, Last modified 2012, <https://www.prb.org/morocco-maternal-deaths/>. Accessed 20 June, 2020.

⁷⁵<https://www.un.org/en/development/desa/population/publications/pdf/family/trendsContraceptiveUse2015Report.pdf>

Gender-based Violence

When it comes to sexual and gender-based violence, Morocco made remarkable advancement in the legal and institutional framework, but this is not enough. Violence against women is still prevalent. In 2018, physical violence was 5.7 %, while psychological violence was 48.95 %⁷⁶ and in May 2019 the prevalence of violence against women is 54.4% at the national level. Violence against women was 55.8% in urban areas, while in rural areas it has reached 51.6%.⁷⁷

The new law 103.13 was unique in the MENA region and Morocco as the second country in the region along with Tunisia to adopt a law sanctioning violence against women. However, the law has been criticized by women of NGOs for not being comprehensive and holistic as it was described, and as not fully in line with international standards.⁷⁸ In addition to that, there are difficulties related to the implementation of the law due to a lack of applicable provisions and implementation mechanisms.

In addition to the problem of stereotypes of women and the structure of power in society, that is dominantly lax vis-à-vis violence against women, there are obstacles that hinder the full implementation of the law 103.13. This includes the low quality of care centers for abused women, the lack of local management (*la prise en charge*) of cases of abuse, lack of human resources that should provide assistance on the local level, such as trained lawyers, doctors, social assistance and psychological assistance professionals who specialize in gender-based violence issues.⁷⁹

Moreover, there is an expressed absence of coordination at the local level between the different stakeholders, especially between civil society, government agencies and other relevant actors to create synergy in this regard.⁸⁰ Some civil society actors expressed their stress when it comes to the absence of coordination between them and the authorities. One of them mentioned that the law enforcement agencies do not coordinate with civil society and in many cases do not take the cases of abuse seriously.⁸¹

Another issue that appeared recently is the emergence of virtual violence against women and the difficulties related to the handling of aggression in virtual space,⁸² such as virtual harassment, spying, blackmail among other emerging challenges. Recently, the DGSN started to receive complaints related to virtual violence, but it is still not clear how seriously those cases are taken.

Finally, the issue of data collection of gender-based violence seems one element that blocks systematic monitoring and reporting about sexual violence.

⁷⁶Safaa Kasraoui, "Morocco Records Alarming Increase In Cases Of Violence Against Women", Morocco World News, Last modified 2019, <https://www.moroccoworldnews.com/2019/11/287516/morocco-alarming-increase-violence-women/>. Accessed 21 June 2020.

⁷⁷ "54.4%, Prevalence Rate of Violence Against Women in Morocco (Survey)", Maroc. Ma, Last modified 2019, <http://www.maroc.ma/en/news/544-prevalence-rate-violence-against-women-morocco-survey>. Accessed 21 June 2020.

⁷⁸Interview with UNFPA team, Rabat, 25 June 2020.

⁷⁹ Ibid.

⁸⁰ Interview with MP, Rabat, 20 June, 2020.

⁸¹ Ibid.

⁸² Interview with UNFPA team, Rabat, 25 June 2020

Universal Education

Morocco made significant progress in universal education, yet challenges remain. Moroccan education system suffers from chronic problems, including the preschool deficit, which significantly widens inequalities in access and success between different social strata and between rural and urban areas. Also, the school dropout is high, which further exacerbates social inequalities.⁸³ Another factor is the low educational achievements and internal performance affecting the quality of learning. All these have been attributed to a dysfunctional governance system and lack of accountability in the education system.

In fact, the current system of preschool is still limited, especially in rural areas. In 2016, only 43% of Moroccan children aged 4-5 were enrolled in preschool and only 27.9% in rural areas.⁸⁴

Likewise, scores of children, especially in the rural areas and girls, are either not in school or drop out before they reach secondary school level. Morocco dropout rate is high. In 2018, 431,876 pupils left schools without having certification, of which 78% were in elementary and middle school cycles, who are supposed to retain children in class at least until the age of 15.⁸⁵

To address these constraints, the Moroccan government adopted a new program called “The 2015-2030 strategic vision”, which aimed to generalize compulsory pre-school education, training and qualifying teachers, access to education for people with special needs, promote rural schools, continuously improve the school’s internal performance, and generalize inclusive education for all Moroccan children, without discrimination, and the consolidation of efforts to ensure sustainable schooling that helps combat interruptions, school losses and repetitions.⁸⁶ Yet, the program has been delayed for several years, and it started only in 2020. Its results are yet to be seen.

Roadmap for the future: Policy Recommendations

Morocco provides a remarkable case where ICPD engagements have been advanced in the last years despite the odds. Yet, not all the population benefitted well from these improvements and many citizens are still left behind, especially women, youth and rural populations.

The full and comprehensive implementation of the ICDP25 engagements requires a strong political will and commitment from the top-level decision makers to implement these reforms. Experience has showed that the implementation of any policy reform requires engagement at the top level policy makers.

Furthermore, ICPD25 commitments are getting more resonance among different political forces in Morocco. Today in Morocco, both secular and Islamic political forces –with different degrees – are positive about the issues of SRH and the importance of universal education. For instance,

⁸³Interview with UNFPA team, Rabat, 25 June 2020

⁸⁴Early Childhood Education in Morocco: A Critical Window of Opportunities, the World Bank, 13 sept 2017.
<https://www.worldbank.org/en/news/feature/2017/09/13/early-childhood-education-in-morocco>

⁸⁵Atlas Territorial de l’Abandon Scolaire. Analyse des parcours de la cohorte 2014-2018 et cartographie communale. P 7.

<https://www.csefrs.ma/wp-content/uploads/2019/12/ATLAS-TERRITORIAL-DE-LABANDON-SCOLAIRE-18-12-web.pdf>

⁸⁶ For a school of equity, quality and promotion: a strategic vision of reform 2015-2030, CSEFRS, 2015.

<https://www.csefrs.ma/wp-content/uploads/2015/05/Re%CC%81sume%CC%81-vision-Anglais.pdf>

during ICPD25, there were almost no political quarrels compared to Cairo conference in 1994, where Islamists and seculars were split about the concepts of the ICPD.

This momentum should be built upon to consolidate the gains and enhance the achievements. In this regard, several recommendations can be suggested.

- **Reducing inequality between rural and urban areas and between men and women should be a top priority for the government of Morocco in the coming years.**

In the next decade, the problem of inequality would be the most important obstacle to tackle in order to advance in the ICPD25 engagements. For instance, maternal death rate in the urban areas is currently at 44, which is very close to the ICPD25 recommendations, which provide an idea of the progress made by Moroccan authorities in the last years, but rural women are still dying while giving birth compared to their urban co-citizens.

- **Encouraging civic education and inclusion of stakeholders**

While Morocco explicitly expressed its willingness to positively implement the ICPD25 engagements; however, this willingness needs to be accompanied with a large outreach and civic education campaign. It is important to work closely with decision and law makers in order to popularize the concepts of ICPD25 and help them to better understand the link between development and ICPD25 commitments.⁸⁷ In this regard, it is important for the UN System and UNFPA in particular to include the parliament and MPs in this process of civic education. This may include sessions, trainings, workshop with different stakeholders, including MPs⁸⁸ as well as government agencies and CSOs.

- **Adapting government policies with the ICPD25 goals and enhancing coordination between and within ministries to increase the outcomes of the government initiatives and increasing its impact and effectiveness.**

In the same line, government policies need to be adapted with the goals of the ICPD25. More specifically, the government should tackle systematically and comprehensively the issue of inequality and quality of services. This is specifically one of the major challenges that hinder full implementation of the ICPD25 objectives.

Another issue is the streamlining of the legal framework and policies related to the ICPD25 goals. This can be done by enacting a specific law that incorporates the nine components of the ICPD25 (reproductive health, maternal health, planning, fight against violence, and so forth). This will help create a complementarity between the different axes: reproductive health and sexual and reproductive health education.⁸⁹ In this regard, UNFPA can work with the CSOs and members of parliament to propose a law that align with the ICPD25 commitments.

Also, better coordination between different government agencies (Ministry of Health, Ministry of Youth, Ministry of the Family, and Social Development, Ministry of National Education) is needed. This will substitute the lack of synergy and collaboration between government departments. There

⁸⁷Interview with UNFPA team, Rabat, 25 June 2020

⁸⁸Interview with MP, Rabat, 20 June, 2020.

⁸⁹Interview with UNFPA team, Rabat, 25 June 2020

is also a need for a more coherence and collaboration within ministry departments themselves, such as between the department of public health (epidemics) and the department of population within the Ministry of Health.

Finally, the government should provide access to segregated and detailed data about the components of ICPD25. This will help the stakeholders develop more tailored and laser-sharp intervention, especially in areas where the challenges are more visible.

- Youth at the epicenter of public policies

On a thematic issue, youth requires special attention from the government. While the SNIJ intends to put youth at the heart of public policies, this should be materialized. The first step is the nomination of the new Advisory Council for Youth and Associative Action. Also, *Maisons des Jeunes* (Youth Houses) at the local level should be doubled and restored and above all, the NEET should be prioritized in all government and CSOs actions. This category is the most vulnerable and excluded, so it should get special attention from authorities. One of the recommendations is the issuance of a youth card for NEET to benefit from social assistance and health insurance.

- Increasing the quality of services

At the level of SRH and in order to decrease clandestine abortion, unwanted pregnancies and abandoned children, it is important to make contraceptives available not only for the married but also for the young and unmarried. This requires changes in the law (and mentalities) that prioritize married couples and stigmatize non-married ones.

At the level of gender-based violence, it is important to increase the quality of care centers services and their territorial coverage. In this regard, the government, with partnership with CSOs and UNFPA, can work to increase the staff and ensure its training, provide legal, medical and psychological assistance. Also, more work of coordination at local level between the different actors, such as law enforcement agencies, CSOs and government departments, is required.

- Bigger role for CSOs

CSOs are reliable actors that will have positive impact on the implementation of ICPD commitments. Authorities should dedicate more resources for CSOs working on the ICPD goals. The Government should provide more financial resources, but also more training and capacity building for CSOs, especially at the local level. This can be done in tandem with the efforts of the UN system in Morocco, including the UNFPA.

CSOs are also required to strengthen their advocacy actions in order to change the way of thinking of decision-makers and politicians. More efforts should be done at the level of working sessions and workshops that bring together CSOs and representatives of the executive and legislative branch.

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He was previously a junior research fellow at the Crown Center for Middle East Studies in the United States, a non-resident scholar at the Carnegie Middle East Center, and a fellow at the German Institute for International and Security Affairs (Stiftung Wissenschaft und Politik, SWP) in Berlin.

Appendixes:

List of interviews

- Dr. Yassine Souidi, Youth Program Analyst, United Nations Population Fund - UNFPA 25 June 2020
- Dr Abdel-Ilah Yaakoub, Assistant Representative. & Program Coordinator, United Nations Population Fund - UNFPA 25 June 2020
- Dr Laila Acharai, Programme Analyst Reproductive Health, United Nations Population Fund - UNFPA 25 June 2020
- Ms. Saadia Sifi, Gender equality & human Rights specialist, United Nations Population Fund - UNFPA 25 June 2020
- Dr. Boutaina Karouri, Member of Parliament, Rabat, 20 June, 2020.
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