'Without Health, We have nothing': Need for holistic Sustainable Development in Morocco

This article - by Fariha Mujeebuddin from the University of Virginia - discusses the health landscape in rural Morocco, and addresses the need for more comprehensive health initiatives to be included in development and empowerment efforts.

After a windy uphill journey to Aguerzran, a small village nestled within the High Atlas Mountains, we reached the building where we would be conducting workshops. The small rectangular building, painted in sun-faded pink and green, overlooked the lush valley. My colleague explained to the group, over thirty women of varying ages, the purpose of our visit:
Two girls run down the road that leads from Aguerzran village to Souk L’Arbaa. Photo by Fariha Mujeebuddin, July 2019

reiterated the same sentiment.

Within minutes, the mood within the room shifted. One woman, a matriarch in the village, spoke through tears about challenges her community faces in accessing healthcare. Aware of her heart disease, she was unable to leave the village to take any action towards treatment. With merely one ambulance in the municipality, it is both physically and financially inaccessible. Aguerzran’s nearest health clinic is located in the Imlil Souk L’Aarba, three hours away by foot. Workshop handouts and diagrams originally brought to discuss nutrition, exercise, and hygiene were important, but not adequate.

The problem does not lie in the do’s and doesn’t of health. The issue lies in addressing economic stability, education systems, the built environment, and community context; all of which are social and structural determinants surrounding health in Aguerzran. Three months prior to our visit, the women went through an empowerment workshop conducted by the High Atlas Foundation. The workshop aims to cultivate visions women have for themselves within different spheres of personal development including money, spirituality, emotions, and the body. During our visit, facilitators conducted follow up interviews with the women to track their progress in actualizing their goals. The women expressed feeling more confident, advocative, and self-aware. Yet, their perception of taking care of their personal health and well-being was defined simply by "working hard." Measured by means such as healthy lives, education, and standard of living, Morocco ranks 123rd on the United Nations Human Development Index out of 189 countries. Although this indicator is widely used to gauge the country’s progress, it may not capture severe regional disparities and inter-sectional inequalities. Nearly forty percent of Morocco's population is rural, and women make up half of the population.

With the implementation of Moudawana, the Moroccan family code, and the National Initiative for Human Development, Morocco has made strides towards improving social and economic development. However, empowerment is not the only means for development; and improved
health is more than a result of development. Health, empowerment, and development have a symbiotic relationship. Significant strides in development should be holistic and include the reduction of health inequalities in order to achieve sustainable change. Morocco faces the double burden of communicable and increasing non-communicable diseases. A 2015 study published in BMC Cancer found that rural Moroccan women are at higher risk of late diagnosis for breast cancer, the most common cancer among Moroccan women. Illnesses such as tuberculosis are also often detected at late stages in rural communities.

According to the World Health Organization, non-communicable diseases such as diabetes and cardiovascular disease make up nearly seventy-five per cent of all deaths in Morocco. Coupled with inaccessibility to clinical care and monitoring, rural communities are increasingly susceptible to undetected chronic diseases. This epidemiological shift is indicative of unresolved structural inequalities that exacerbate rates of non-communicable diseases. Physically and figuratively on the margins, rural women face a two-fold disadvantage. Weaker education systems in rural communities do not address health education, and weaker health systems can prevent women from pursuing their education. Additionally, physical distance from health centres is discouraging and compromises safety. Women in Aguerzran (tag=Aguerzran) expressed that heavy lifting and labour causes intense aches and pains. If left unaddressed, these pains can increase the risk of serious injury, halting their ability to work. Addressing the mutual relationship between these determinants will lead to better long-term health and equity outcomes for rural women and their communities. When in Aguerzran (tag=Aguerzran), Marrakech, or anywhere in between, the crucial role of women in their communities and families is undeniable. The migration of rural men into cities has increased women’s agricultural labour and domestic care responsibilities, occupying a rural woman’s ability to give attention to their own health. As epicentres for their families, evidence suggests that the educational success and overall well-being of children are positively correlated with educational attainment and health of their mothers. Fostering comprehensive women’s empowerment not only encourages internal progress but also paves the way for better future generations and communities. Empowering rural women through health provides the foundation for improved human capital, capacity building, and better long-term economic outcomes through participation in activities such as cooperatives.

Talking to the women in Aguerzran (tag=Aguerzran) brought forth the importance of including health in an empowerment context. Since health seems to truly be everything for these women, it should also be an integral part of empowerment and development methodologies. Just as empowerment programs may inform women of their societal rights, the right to health should also be progressively achieved through increased data, awareness, and advocacy. Not prioritizing the wellbeing of the most vulnerable populations will prevent sustainable development from becoming a reality.

Note: Fariha Mujeebuddin (fam9ab@virginia.edu) is a student at the University of Virginia studying Economics and Global Public Health, and an Intern for the High Atlas Foundation.
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