

Legal Discrimination in Morocco

and the United States

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Abstract

Legal discrimination is defined as “where people have created and enforce laws to uphold [...] discrimination” (Krieger, 2014, p. 648). Legal discrimination has direct effects on the health of women and girls in Morocco and the United States. Two cases of legal discrimination and their connection to adverse health outcomes for women and girls will be explored for each country. In Morocco, these are the discriminatory inheritance law and the widespread lack of enforcement and awareness of laws advancing women’s rights. In the United States, the issues identified here are access to reproductive healthcare and paid maternity leave.

Evidence based interventions and actions for each government to take to advance the status of women will be discussed. In Morocco, it is recommended that the discriminatory inheritance law be repealed. Additionally, it is recommended that Morocco provide gender equality protocols for its judicial system and implement widespread access to legal aid through use of community-based paralegals. Lastly, it is recommended that Morocco adopt a definitive and comprehensive definition of domestic violence and revise their current legislation criminalizing gender-based violence to designate roles and responsibilities for upholding the law to specific institutions. In the United States, it is recommended that the government pass a law providing paid maternity leave for all workers. Additionally, it is recommended that the government removes barriers to accessing abortion and other reproductive health services and expands Medicaid to provide coverage to more women.

Keywords: Morocco, United States, Women’s Rights, Legal Discrimination

Legal Discrimination in Morocco and the United States

Discrimination refers “to all means of expressing and institutionalizing social relationships of dominance and oppression” (Krieger, 2014). More specifically, to discriminate against a person or a group of persons, is to distinguish one group or person more favorably than another (Krieger, 2014). While there are many forms of discrimination, the form that will be focused on henceforth is legal discrimination. According to Nancy Krieger, Harvard Professor of Epidemiology, there are two different kinds of legal discrimination, De Jure and De Facto (Krieger, 2014). De Jure is discrimination “that is mandated by law”, while De Facto is discrimination “without legal basis but sanction by custom or practice” (Krieger, 2014). This paper will explore legal discrimination against women and how this discrimination affects women’s health and empowerment in both the United States and Morocco.

The most common adverse effect of discrimination is mental ill-health, but adverse effects also include increased psychological distress, increased likelihood to engage in risky behaviors, heightened stress response, increased risk for chronic disease, and many others (Krieger, 2014). Outside of its infringement on basic human rights, legal discrimination has a broad range of effects on women. Specifically, women are economically, legally and politically disempowered (Burtle & Bezruchka, 2016; Dalacoura, 2019). According to the United Nations Human Rights Office of the High Commissioner (2020), “Women work two-thirds of the world’s working hours and produce half of the world’s food, yet they earn only 10% of the world’s income and own less than 1% of the world’s property.” These effects extend even further as they increase adverse maternal and infant health outcomes (Grossman et al., 2013). By addressing the legal discrimination existing in both countries, women’s health and ability to exercise human rights can be improved.

The United States (US) has an overall population of 330,620,316 with 50.52% of that population being female (World Population Review, 2020b). The US is very culturally diverse with the major race and ethnicities being White, Black, Asian and Hispanic (World Population Review, 2020b). 17.74% of the female population live in Rural areas where 82.26% of the female population live in Urban areas (Trading Economics, 2020b). 57.1% of women in the US participate in the labor force, which is roughly 12% lower than that of the male participation (Catalyst, 2019). Only the top 11% of earners in the US are women, and only 5% of the CEOs in the US are women (Catalyst, 2019). In 2020 the US, women hold only 23.2% of the 435 House of Representative seats and only 26% of the 100 Senate seats (Catalyst, 2019). Currently only 9 of the 50 US governors are women (Catalyst, 2019). Clearly, there is progress to be made in achieving gender equality in the United States.

Morocco has an overall population of 36,825,431 with 50.4% of that population being female (Trading Economics, 2020a; World Population Review, 2020a). Arabs and Berbers account for 99.1% of the Moroccan population. The vast majority of the population identifies as Sunni Muslim - 99% of the country's religious persons (World Population Review, 2020a). 19.92% of the female population live in rural areas whereas 30.54% of the female population live in urban areas (Trading Economics, 2020a). Only 22.4% of the women in Morocco participate in the labor force, which is less than half that of the male participation rate of 71% (El Khaldi, 2018; The World Bank, 2020). In 2016, only 81 of 395 or 21% of the seats in the Majliss-annouwab (House of Representatives) in Morocco are held by women (International IDEA, 2020).

In exploring the complex subject of legal discrimination throughout this paper, two topics of special interest are identified for both nations. Additionally, recommendations will be made

for both governments to help end legal discrimination and progress the health status of women and children. While there are many areas of concern in both countries, the topics chosen were felt of the most pressing at this time. For Morocco, these are a discriminatory inheritance law and the lack of enforcement and general awareness of laws in place that advance women's rights. The discriminatory inheritance law has been in place in Morocco for most of its history and prevents women from receiving an equal share of inheritance relative to a male (The Kingdom of Morocco, 2005). Morocco has made many positive changes to its constitution and family laws to advance the status of women. However, lack of enforcement and awareness of new laws advancing women's rights is a common issue, especially in rural regions of Morocco where people are generally less educated and more conservative (Agence France Presse, 2014). In the United States, areas of concern identified were lack of access to reproductive health care and access to paid maternity leave. In the U.S, there are a great deal of structural and sociocultural barriers to receiving abortion services and other basic essential reproductive healthcare services (American College of Obstetrics and Gynecology [ACOG], 2017). Additionally, paid maternity leave is unavailable to the vast majority of women in the United States, and has significant consequences on the health of both mothers and infants (Livingston & Thomas, 2019).

Literature Review

*Discriminatory Inheritance Law in Morocco**

“Inheritance law is one of the legal areas governed by Mudawwana, Morocco's code of family law. While many inequalities between women and men were addressed during the last reform of Morocco's Mudawwana in 2004, inheritance law was left untouched, leaving women to receive unequal inheritance relative to men. While the many positive changes advancing women's rights in this reform marked an important moment in the advancement of women's

rights in the Islamic state and played an important role in improving their position in Moroccan society, they were and are strongly opposed by traditional religious scholars and other conservative religious groups. Many of these organizations are completely against the Mudawwana reform and its objectives, arguing that it is inherently against the Islamic values traditionally held in Morocco” (Essaddik, 2016).

“The National Council for Human Rights (CNDH) of Morocco in 2015 recommended that the authorities amend provisions of the Family Code relating to inheritance to grant women the same rights as men” (Women News Network [WNN], 2016). “The provisions of the Family Code relating to inheritance are discriminatory and particularly unfavorable to female children and surviving female spouses. As the law currently stands, male relatives receive twice the share received by a woman. In addition, if the father has no male descendants, his inheritance is shared with the closest male parents, thus removing a part which would otherwise revert to closer-related female relatives” (Essaddik, 2016).

“This particular law increases the vulnerability of girls and women to poverty and, given their current lack of social and economic autonomy, many women cede their share of the estate to a male on the pretext of keeping property within the family. This system was suitable in the past, when men headed the vast majority of households. However, it has made life difficult in the modern age for those homes in which women are the primary breadwinners” (Nami, 2019).

“Sharia law is the religious legal system governing members of the Islamic faith, which is derived from the religious precepts of Islam. Inheritance law is considered an important branch within this system; therefore, inheritance law reform is limited, blocked or stalled in most Muslim countries” (Essaddik, 2016, p 16). Women struggle to cope with the economic instability

that results. “Women's legal inability to inherit equally to men can significantly undermine their economic security and independence, as well as their access to economic opportunity” (World Bank, 2011, 2012). The discriminatory inheritance laws perpetuate women’s exposure to poverty and reduces the ability of women to seek health care, support, and treatment when needed.

*all content from this section is from Morocco – citations not available

*Lack of Enforcement and Awareness of Laws Advancing Women’s Rights in Morocco**

“Morocco’s many legal advances in women’s rights, starting with the Mudawwana in 2004 make it an open, tolerant and a progressive country but the lack of effective implementation of law and the existence of many legislative loopholes undermines its reputation” (Hites & Hanafi, 2017). “The barriers preventing implementation of these laws include: judicial oversight and accountability, progressive legislation by formal and informal justice mechanisms, police enforcement, and legal aid and access to legal information” (Hites & Hanafi, 2017). “Judges may use their discretion to permit waivers for early marriage and to restrict female-initiated divorces, among other new rights” (Hites & Hanafi, 2017). “If a woman obtains a favorable resolution, there is no guarantee that the decision will be enforced” (Hites & Hanafi, 2017).

“The key barriers that women's equality face are mainly cultural and social. Social traditions favor old-fashioned and outdated female roles as early brides and domestic workers. Women's literacy and education are not taken seriously in Morocco's rural areas.” (Hites & Hanafi, 2017). “Young urban women and civil society organizations push for greater equality and elimination of all discrimination against Moroccan women, while religious and conservative rural populations stand against effective implementation” (Hites & Hanafi, 2017).

“Two years ago, a new law criminalizing violence against women came into effect in Morocco. Campaigners broadly welcomed the new law, which criminalized ‘harassment, aggression, sexual exploitation, or ill treatment of women’ in Morocco. Many activists criticized the legislation, saying it did not fully protect women against forced marriage or domestic violence and contained loopholes allowing girls under 18 to marry. The law additionally lacked a definition of forced marriage, making it difficult to enforce its ban” (Kanso, 2018).

“The Moroccan government and civil society have taken steps to raise awareness of the gender equality, empowerment, and protective provisions existing under the law. Nonetheless, gender-sensitive interpretation and enforcement of the law remain areas for progress” (Office of the United Nations High Commissioner for Human Rights, 2012). “Islamists, feminist groups, and conservatives are the main divided parts seeking to define the modern national identity. Currently, there is no clear consensus among the Moroccan population on what they wish the law to be. Gender equality and women's rights in Muslim societies continue to be a topic of heated debates” (Hites & Hanafi, 2017).

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Access to Reproductive Healthcare in the United States

There are many inequalities in access to reproductive health services among women in the United States. A lack of access to these services can result in negative health outcomes such as sexually transmitted infections, unplanned pregnancy, unsafe abortions, premature birth, and maternal mortality (Centers for Medicare and Medicaid Services [CMS], 2019). Young women and those of lower socioeconomic status are disparately impacted. Reproductive health services and access continues to be attacked through funding cuts, court rulings, and increasingly restrictive laws.

Women face many financial and structural barriers to care. In America, women and girls are at greater risk of pregnancy and sexually transmitted infections than their European counterparts (Hock-Long et al., 2003). Women receive lower incomes than men due to pay inequities and are more likely to live in poverty (Borchelt, n.d.). High health care costs threaten their health and economic security (Borchelt, n.d.). Healthcare access also depends on health insurance coverage and ability to directly pay for services. Fortunately, with the passing of the Patient Protection and Affordable Care Act, young adults can now be covered by their parents' insurance plans until the age of 26. Despite these advancements, poor women still face significant challenges when it comes to getting the care they need. Many states have failed to expand Medicaid coverage leaving millions of women in a coverage gap (Sonfield & Pollack, 2013). When women forgo care due to financial or structural barriers, they face the risk of postponing diagnosis and treatment of serious health issues.

Legislation in the United States threatens a woman's ability to have a safe and legal abortion. Although abortion was made legal in the 1973 case of *Roe vs. Wade*, administrative obstacles and attacks from antiabortion policies have deterred insurers from covering them. Women who use Medicaid are subject to the Hyde amendment, which prevents federal and some state funds from covering abortions (Borchelt, n.d.). There is great variability in state laws regarding when and how abortions may be performed. These restrictive and variable laws provide unnecessary structural barriers to reproductive health services. These barriers include confidentiality and consent for care, and restrictions on the service environment (Hock-Long et al., 2003). As a result, many young women in the United States who are unable to access abortion services may turn to self-induced abortion.

Women living in rural communities face unique challenges when it comes to receiving proper care. Rural women have limited access to all health services and are less likely to obtain adequate prenatal care (American Medical Association, 2002). “There are 29.4 maternal deaths per 100,000 in most rural areas versus 18.2 in urban areas” (CMS, 2019, p.4). The health and wellness of a woman prior to conception is critical to achieve safe and optimal outcomes for her and her baby. Healthcare access in this time is crucial because it allows healthcare providers to identify and treat chronic conditions, address behavioral needs, and plan ahead for a healthy pregnancy.

Access to Paid Maternity Leave in the United States

Paid maternity leave is another form of legally codified gender discrimination and an important determinant of maternal health. An International Labor Organization (ILO) report (1998) found that “women's job income is vital for the survival of the family” (p.1), especially in the US where 55% of households have women earning more than half of the household income (ILO, 1998). In 1952, the ILO set new standards for maternity leave protections, recommending that all women should have a 14-week maternity leave with 12 weeks as the minimum at at least two-thirds their normal wage (ILO, 1998). Morocco currently meets these recommendations by guaranteeing 14-weeks of maternity leave paid at two-thirds of the normal wage (OECD & Center of Arab Woman for Training and Research, 2014). In contrast, the only law in the US regarding maternity leave is the Family Medical Leave Act (FMLA). This act guarantees unpaid leave for up to a 12-week period for childbirth, childcare, and other familial medical circumstances (ILO, 1998). This law only applies to companies with 50 or more employees (ILO, 1998). All of this has serious implications for maternal health in the US.

The lack of paid-maternity leave in the US is a well-studied phenomenon and results in a variety of negative impacts on maternal and infant health. One such study found that full-time employment at 3 months postpartum or earlier was linked to depressive symptoms, parental stress, and lower self-reported health among mothers. Additionally, the children of these mothers had worse test scores, verbal abilities, and more behavior problems (Chatterji et al., 2012). Mothers who returned to any work before 12 weeks were less likely to attend infant medical appointments and less likely to have their infant appropriately immunized by 18 months (Baker & Milligan, 2008a). Returning to work full-time was also found to be related to their child having an externalizing behavior problem (Baker & Milligan, 2008a).

Despite the existing issues, passage of FMLA in the US has been linked to some improvements to the health of American infants and mothers. These are, namely, small increases in birth weight, small decreases in premature birth, and considerable decreases in infant deaths from congenital abnormalities (Rossin, 2011). However, these changes were only seen among college-educated and married sub-samples; their less educated and single counterparts did not enjoy these benefits (Rossin, 2011). It is likely, though, that a comprehensive paid maternity leave policy would result in better outcomes for women. A study comparing paid and unpaid maternity leave in the US found that women with paid maternity leave were less likely to have themselves or their infant rehospitalized in the postpartum period and reported better exercise and stress management (Jou et al., 2017). The current policy in the US allows only some women and infants to avoid the harmful impacts of working full-time during the immediate postpartum period. It leaves many women and infants vulnerable to adverse health outcomes and does not provide the benefits a paid maternity leave policy could provide.

Data Analysis

Discriminatory Inheritance Law in Morocco

Women and men do not receive equal inheritance under the law in Morocco (Ennaji, 2019). Morocco's inheritance laws state that women inherit half as much as men (Ennaji, 2019) because of interpretation of the tenets of Islam. This was written when men exclusively provided household income; women are now more than a third of Moroccan heads of households (Ennaji, 2019) and are increasingly educated. Despite this, social and cultural norms as well as limited access to financial assets (World Bank Group, 2015) result in women being only 26% of the labor force (Morikawa, 2015). For example, in a survey 61% of Moroccan men agreed with the statement that "When jobs are scarce, men should have more right to a job than women" (Morikawa, 2015).

The law contributes to these sociocultural norms. If a woman is widowed, all assets registered in her husband's name is passed down through the inheritance law, depriving the widow of her home and ability to financially support herself (World Bank Group, 2015). Land in Morocco is often passed through family, especially in rural agricultural areas, via inheritance. In 2015, only 7% of land in Morocco was owned by women (UN Women). With the discriminatory inheritance law in place, women are unable to own their rightful amount of land, curbing their economic participation (World Bank Group, 2015). For more information on landownership and social norms towards women in Morocco, please see Appendix A.

A number of studies have shown that women's quality of life improves when they are given access to equal inheritance rights. Improving women's access to financial capital serves to elevate their agency and break the cycle of poverty for women of low socioeconomic status (World Bank Group, 2015). A study by Harari (2019) looked at the decades following

inheritance law reform in Kenya. She found that after women were given access to equal inheritance, women were more likely to participate in family decisions, delay marriage, have medical assistance at birth, and receive postpartum care. After the Hindu Succession Act in India provided women with increased access to inheritance, Deninger et al (2010) found that girls' educational attainment improved. Other studies have shown that when women have more access to resources and agency there is increased investment in children's education, health, and nutrition (Harari, 2019). Morocco is a conservative and deeply religious society. A national survey conducted by the country's planning commission in 2016 found that 87% of both female and male Moroccan citizens are opposed to gender equality in inheritance (Calcuttawala, 2016). If the law is to be changed, social and cultural norms surrounding women in Morocco must change with it. For more information on social and cultural norms in Morocco, please see Appendix A.

Lack of Enforcement and Awareness of Laws Advancing Women's Rights in Morocco

Morocco's Mudawana, the legal code governing most matters of family law, is considered progressive within the MENA region in regard to women's rights. Morocco has had improvements in female education and government representation. In 2010, 26% of Moroccan supreme court judges and 20% of overall judges were women (OECD & Center of Arab Woman for Training and Research, 2014). Additionally, in 2014, 17% of the seats of parliament belonged to women, surpassing the average for the MENA region (OECD & Center of Arab Woman for Training and Research, 2014). Despite the fact that the law is reformist, it does not translate into changes in daily life for many Moroccan women. These issues are exacerbated for women in rural Morocco. Rural women are less educated than their urban counterparts; 71.8% of rural Moroccan women were illiterate in 2012, compared to 40% of urban women (Agence France

Presse, 2014). This decreased education and literacy translates to decreased legal literacy and knowledge of legal rights.

There are many factors contributing to the continuing legal discrimination against Morocco's women. First, Moroccan law is vague in many cases and left open to interpretation by judges and other judicial parties. For example, the Mudawana increased the legal marriage age from 15 to 18 in 2004 but granted exceptions with a judge's permission. In 2013, 11% of all Moroccan marriages were still child marriages – an increase from previous years (LANDINFO, 2017). Child marriage has both direct and indirect effects on the health of women and girls. It carries an increased risk of depression, obstetric fistula, and maternal mortality (Nour, 2009). Additionally, this tradition is usually driven by poverty and serves to reinforce women and girls' economic vulnerability (Nour, 2009).

In 2018, Morocco passed a law criminalizing gender-based violence. Gender-based violence is a topic of importance in Morocco, as 62.8% of women reported experiencing physical, psychological, sexual, and economic violence (Human Rights Watch, 2018). However, the law fails to provide a definitive definition of domestic violence and fails to designate responsibilities for government agencies in carrying out the legislation. A report by the Moroccan government in 2019 found that only 28.2% of women facing abuse told a person or institution about their abuse. Only 6.6% of victims were able to bring their case before a judge (Eljechimi, 2019, Kingdom of Morocco, 2019). Unfortunately, the majority of women that do file criminal cases against their abusers end up dropping the charges (Human Rights Watch, 2018). Numerous subjective reports expose inconsistencies and blatant discrimination against women in the legal system. Police officers are unwilling to interfere in what they consider “private matters” (Human Rights Watch, 2016). Lawyers report they have only seen perpetrators

arrested in cases where clients were disabled because of abuse (Human Rights Watch, 2016). Additionally, subjective reports from Morocco detail inconsistencies among judges and prosecutors involved in cases of domestic violence; judges demand unreasonable standards for evidence and deny witness testimony without sound reason under the law (Human Rights Watch, 2016). For more information on lack of enforcement of judicial decisions, please see Appendix B.

*Access to Reproductive Healthcare in the United States**

“In the United States, the 1973 Supreme Court case *Roe v. Wade* established the legal right to abortion. State legislative and executive bodies nonetheless continue to battle over legislative barriers to abortion” (Guttmacher Institute, 2015). “In 2016, 623,471 legal abortions were reported to CDC from 48 reporting areas” (Center of Disease Control and Prevention [CDC], 2019). “Abortion rates reveal a disparity based on race, ethnicity and socioeconomic status” (Dehlendorf et al., 2013; Roberts et al., 2014).

“In 2008, the abortion rate for Non-Hispanic White women was 12 per 1,000 reproductive-age women, while the rate for Hispanic women was 29 per 1,000, and 40 per 1,000 for Non-Hispanic Black women” (Dehelendorf et al., 2013). “Differences in abortion rates also exist by socioeconomic status (SES). Women with incomes less than 100% of the federal poverty level (FPL) have an abortion rate of 52 abortions per 1,000 reproductive-age women, compared with a rate of 9 per 1,000 among those with incomes greater than 200% FPL” (Dehelendorf et al., 2013).

“Within the United States, there is great variability as to whether a woman is able to access abortion services. Only 18% and 23% of women live in counties with abortion providers in West Virginia and South Dakota respectively, but 100% of women have access to providers in

California, the District of Columbia and Hawaii” (Guttmacher Institute 2015). “Additionally, public funding for abortion remains contested. Only 17 states provide state funding for all or most medically necessary abortions” (Guttmacher, 2020), “while federal law has banned use of federal funds for most abortions since 1977” (Boonstra, 2013). “This rule, the Hyde Amendment, does not allow the use of federal funds for abortion unless the pregnancy resulted from rape or incest or the woman’s life is in danger” (Boonstra, 2013).

“The current landscape reflects the surge in laws restricting abortion access in many states” (Lai & Patel, 2019). “An example of these restrictive laws is found in South Dakota, where parental consent and notification as well as waiting periods are required. Only one abortion provider exists in South Dakota. Additionally, the state does not provide public funding to poor women for abortion, further limiting their access” (Guttmacher Institute 2015; NARAL Pro-Choice America and NARAL Pro-Choice America Foundation 2015). The primary purpose of these laws is to limit access to abortion. Instead of improving patient care, these laws endanger patients, making safe services harder to obtain” (Guttmacher Institute, 2020).

“In Morocco, abortion is illegal except to safeguard a woman’s life or health.” (Marie Campistron, 2019). “Despite the fact that the penal code criminalizes the practice, more than 600 illegal abortions occur daily” (Rémy Pigaglio, 2019). “According to the National Institute for Solidarity with Women in Need (citation unavailable – content from Morocco) 300 babies are found abandoned dead or alive in Casablanca each year and 50000 children are born out of a legal marriage every year in Morocco”. “These alarming numbers, protests and international calls convinced King Mohammed VI to extend the right to abortion to include cases of rape and incest, fetal malformation and a woman's mental disorder in addition to danger to the health of the pregnant woman” (Marie Compiston, 2019).

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Access to Paid Maternity Leave in the United States

Most mothers look forward to spending time with their newborns. "...bonding is a process, not something that takes place within minutes and not something that has to be limited to happening within a certain time period after birth" (Ben-Joseph, 2018, p.1). Working mothers are limited in bonding with their babies before returning to work. During unpaid maternity leave, stressors prevent mothers from being emotionally, physically and mentally present with their child. "...strong ties between parents and their child provide the baby's first model for intimate relationships and foster a sense of security and positive self-esteem. Parents responsiveness to an infants' signals can affect the child's social and cognitive development" (Ben-Joseph 2018, p. 1). These first stages of a child's life are crucial to development.

In a study of 173 countries in 2007, the United States was one of only four nations lacking federal paid maternity-leave policy (Macmillan 2017). In 1993 Congress passed the Family and Medical Leave Act (FMLA) through the United States Department of Labor. According to FMLA, employers must provide eligible employees 12 weeks off of unpaid time (FMLA, 2020). However, "Nearly half of the workforce is not covered by the act, women are less likely than men to be covered, and single mothers and mothers of low socioeconomic status are even less likely to be covered than married or middle-class mothers" (Kameran, 2000, p. 12).

20 million individuals use FMLA, but only one fourth of them use it for birth or adoption because they do not meet criteria (The Women's initiative, 2017). In 2015, it was found that 70.7% of men were able to take paid leave in 2015, compared to only 47% of women - a nearly 20% difference between men and women receiving payment (Macmillan, 2015). Even when a

woman is paid for her maternity leave, up to 41% of women come back early because of concerns over their job security (Pew Research Center, 2006). “Research has found an association between longer maternity leave and a lowered risk of PPD [Postpartum Depression], with women taking less than 6 months of leave being at an increased risk for the disorder (Chatterji & Markowitz, 2004; Dagher, McGovern, & Dowd, 2014).

Women in the workforce have increased since the 1960s. In 2015, 42% of mothers were the sole/primary breadwinners (Glynn 2016). When mothers are not bringing in income, new families are left economically vulnerable. New mothers rushed back into work are prevented from completely healing after pregnancy, birth and breastfeeding (Office of Women’s Health 2018). Most of all, mothers do not get to spend time with their infants and build the bond crucial for infant development, leaving them more vulnerable to postpartum depression. “If left untreated, peripartum or postpartum mental distress can adversely influence the child’s cognitive and language development, mother–infant attachment, and maternal health and quality of life” (Kuhl 2020, p.1).

In Morocco, most educated women prefer working in public sector jobs as they provide generous maternity and family leave policies with less working hours in the day (MENA Paradox, 2018). This allows them more flexibility to manage their family and workplace responsibilities. Morocco provides 14 weeks of maternity leave at 100% of wages payable from the national social security fund for employees of the public sector. Moreover, after the child is born, fathers are provided three full paid days off. Mothers are additionally entitled to an extra year of unpaid leave after utilizing the 14 paid weeks (UN Women, 2015).

Strategies

Discriminatory Inheritance Law in Morocco

The inheritance law in place in Morocco, called ta'sib, in its current state, is discriminatory against women. The law does not allow for women to receive “rightful inheritance when a father, brother or husband dies” (Ennaji, 2018). This denies women an opportunity to establish economic stability and make economic gains. The law results in women's continued financial dependence on male figures in their lives, which in turn leaves them vulnerable to multiple types of violence (Ennaji, 2018).

The recommendation to address this would be to repeal the discriminatory law, ta'sib, and to implement a new law allowing women equality when it comes to inheritance. This could be initiated with the help of the UN partnership strategy “Equality in Law for Women and Girls by 2030” which has focused on repealing discriminatory civil laws in many countries throughout the world (UN Women, 2019). In addition, getting stakeholders and religious leaders involved in the situation and imploring the use of the ijtiḥad could help gain support for and perpetuate the change. Ijtiḥad is a process of legal reasoning within Islam (Yavuz, 2016) that preacher Mohamed Abdelwahab Rafiki says should be used as “the question of inheritance must be consistent with the evolution of society” (Ennaji, 2018, p.1).

Outcomes that support the need for repealing this law are both economic and health focused. “The McKinsey Global Institute released a report which found that supporting women's economic advancement could add 12 trillion dollars to the global GDP by 2025” (Lemmon 2017, p.1). Thus, economically empowering women through change in inheritance laws can reduce female poverty, lower birth rates, and improve child welfare (Lemmon 2017). It can also lead to

“beneficial effects on nutrition, family planning, maternal mortality, and child mortality” (Bill and Melinda Gates Foundation, 2017, p. 1).

Lack of Enforcement and Awareness of Laws Advancing Women’s Rights in Morocco

There is great variability as to whether laws intended to improve the status of women in Morocco are enforced (Hanafi & Hites, 2017; OECD & Center of Arab Woman for Training and Research, 2014). As such, a multipronged effort on the part of the Moroccan government is recommended to improve the status of women within the legal system and empower them to realize their rights within this institution. Legal empowerment has been proven as a method of increasing the overall well-being of vulnerable populations, as it builds individuals’ capacity to exercise their rights (Kenyon, Forman, & Brolan, 2018). Footer et al. (2019) describes in her article that in this way legal empowerment strategies are able to address social determinants of health and have direct positive impacts on health or on upstream socio-structural determinants connected to health outcomes.

The first recommendation is the creation and implementation of a Gender Equality Protocol. These protocols establish definitive requirements for judges and other legal professionals in respect to women’s rights and access to the justice system. Additionally, it will improve judicial professionals’ capacity to perform gender analyses and provides them with the knowledge and skills to avoid discriminatory rulings (DCAF, OSCE/ODIHR & UN Women, 2019). Gender equality protocols have been implemented in several countries working to improve gender equity within the judicial system, including Mexico, Trinidad and Tobago, and Barbados (DCAF, OSCE/ODIHR & UN Women, 2019). Implementation of Gender Equality Protocols will ideally be paired with gender bias awareness training for all judicial sector members, especially for those in rural areas.

The second recommendation is the use of the legal empowerment strategies of legal aid and community-based paralegals. Both of these strategies were found to increase individuals' agency, willingness to act, and actual action (Goodwin & Maru, 2017). Additionally, it is suggested that the government take a "grassroots" approach to community paralegals (Maru & Gauri, 2018) through training of women to work within their own communities with support from and connection to a lawyer. Lastly, it is recommended that Morocco adopt a definitive and comprehensive definition of domestic violence and revise their current legislation criminalizing gender-based violence to designate roles and responsibilities for upholding the law to specific institutions. Through these evidence-based recommendations, Morocco can take important steps to work towards a future without gender-based discrimination.

Access to Reproductive Healthcare in the United States

Accessing reproductive health services such as family planning, fertility treatment, and abortion remain a challenge for many women in America. As asserted by the U.N Document *Reproductive Rights are Human Rights* (UNFPA, The Danish Institute for Human Rights & U.N Human Rights Office of the High Commissioner, 2014, p 21) reproductive rights are the "basic rights of all couples and individuals to decide freely and responsibly the number, spacing, and timing of their children and to have the information and means to do so...". The healthcare system in the U.S as it pertains to women's health is therefore violating basic human rights in failing to provide comprehensive and affordable access to family planning, fertility, abortion, and other services related to women's health.

It is therefore recommended that the federal Hyde amendment, as well as other restrictions on the coverage of abortion services in both the private and public insurance, be eliminated (American College of Obstetrics and Gynecology [ACOG], 2017). Laws that have

limited access to abortion should also be repealed, allowing women the opportunity to exercise their basic reproductive rights. Furthermore, expansion of Medicaid should be employed in all states, with increased eligibility measures to provide coverage to a larger segment of the population (Kaiser Family Foundation, 2019). Lastly, Medicaid should expand to provide coverage for fertility evaluation and treatment.

These recommendations will lead to advancements in the health of women and children. Improved access to safe and legal abortion services will prevent women from attempting dangerous methods of self-induced abortions (Grossman et al., 2013). Expansion of Medicaid to all 50 states with increased eligibility will allow more women of low socioeconomic status and emerging majority groups to gain access to family planning services and well-woman care, improving health outcomes like infant mortality, preeclampsia, and use of prescription contraceptives (ACOG, 2013).

Access to Paid Maternity Leave in the United States

Accessing paid parental leave in the United States is characterized as inconsistent at best as only “13% of workers have access to paid family leave through their employers” because there is no government mandated paid parental leave (National Partnership for Women and Families, 2015). Additionally, according to data from the Organization for Economic Cooperation and Development, the US is the only country among 41 developed nations that does not mandate any paid leave (Livingston & Thomas, 2019). Because of this, families have to sacrifice economic security to fulfill their caregiving and parental obligations (National Partnership for Women and Families, 2015).

It is recommended that laws regarding paid leave, such as the Federal Employee Paid Leave Act be expanded to include all working persons. This act would grant federal employees

up to 12 weeks of paid time off for the birth, adoption or foster of a new child. In addition to this, it is recommended that the language used in this bill be amended such that it is inclusive of the vast majority of workers (Ogrysko, 2020). This would be fulfilled through passage of the Federal Employee Parental Leave Technical Correction Act (Ogrysko, 2020). Community-based recommendations would be to engage in advocacy efforts in order to get such laws pushed through to legislators. An example of advocacy efforts that could be taken would be partnering with PL+US, which is a national campaign focused on achieving paid family leave by 2022 (PL+US, 2020).

Economic security and health outcomes for mothers and children would be improved through implementation of a comprehensive parental leave bill. These outcomes include longer duration of breastfeeding, which is related to lower rates of SIDS, diabetes, asthma, high blood pressure, and higher levels of cognitive development in children (Burtle & Bezruchka, 2016). The resultant positive health outcomes for mothers include improved physical health, lower rates of psychological distress and depression, and lower rates of intimate partner violence (Burtle & Bezruchka, 2016).

Conclusion

Morocco and the United States continue to struggle with legal discrimination against women. Morocco has several laws – particularly the inheritance law – that overtly place women below men. For the most part, the United States has a lack of laws prioritizing the health and welfare of women. Both situations result in disparate health outcomes for women and children – especially those women and children of low socioeconomic status. This discrimination must be seen for what it truly is – a violation of the basic human rights of half the population.

Women in both cultures deserve to be valued beyond their domestic and childbearing roles. Providing Moroccan women with greater access to financial and economic agency through equal inheritance can help them to exercise their rights and have greater control in their own lives. Strong and effective governmental support agencies and legislation supporting women are crucial towards this end. Lastly, if women are to claim their rights, they must know their rights. Combining effective enforcement of laws advancing women's rights with a widespread legal literacy effort focusing on women's issues can improve the health of women. Future research in Morocco ought to look towards how to effectively implement changes progressing the status of women in such a way that the majority of the population is engaged and supportive.

The expansion of FMLA to include paid maternity leave for every American woman will help to provide economic security for women, foster improved childhood during this critical time, and reduce the existing health inequalities. Additionally, ensuring that every woman has access to affordable healthcare such that she may be in control of when, if, and how she has a child is another tenet of basic human rights. Ensuring these supports are available will go far in progressing the United States. As the United States moves forward, more research will be needed to fully understand and mitigate the existing health disparities among women. These inequalities are complex, but something must be done to prevent the needless illness and death of many women and children.

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Team Reflection

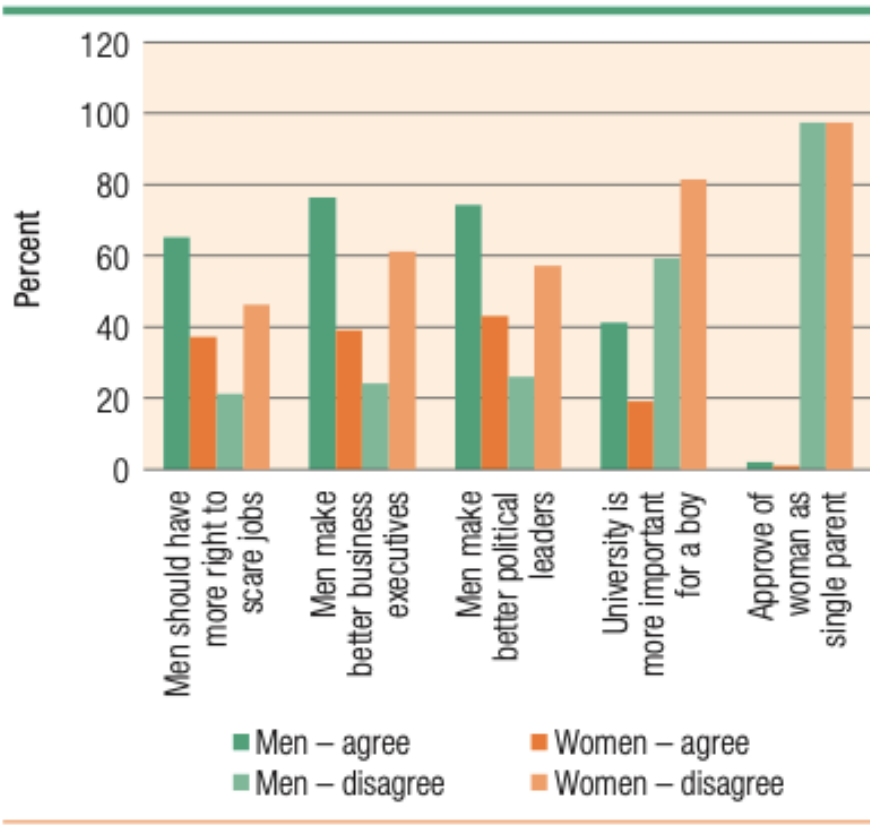
Our experience as a team has been interesting, especially given the extenuating circumstances occurring at this time. I especially appreciated interacting with two of the Moroccan students, Nizar and Omar. Their perspective on things was very interesting to learn from. Many of our conversations were not entirely about the project. As a group, we had a good time just talking about politics, cultural differences, and, of course, the coronavirus situation in our respective nations. It was surprising to hear that pre-marital relationships and living together before marriage was pretty much unheard of and punishable by law. It was similarly shocking to hear that in Morocco a man and woman that are not married are even unable to get a hotel room together. The students also shared a popular Moroccan Instagram hashtag with us: “Moroccan outlaws”. This hashtag tells the stories of many young Moroccan people who have faced discrimination, sexism, and homophobia.

In working with all the team members, a great deal of frustration was experienced. Several team members were not very communicative. This was of course exacerbated given the stress and uncertainty of the current pandemic. As team leader, I learned a great deal about how to function within this kind of environment. In the future, I will be sure to delineate specific roles, responsibilities and expectations from the beginning of projects. My initial fear with this leadership behavior was that it would be considered micromanaging. I was hoping the students would be capable of finding their own literature and writing on-topic and grammatically correct products. Unfortunately, this was not the case. All in all, learning about the cultural, social, and legal differences in legal discrimination between the United States and Morocco was an interesting and beneficial experience.

Appendix A

Examples of Social and Cultural Norms in Morocco

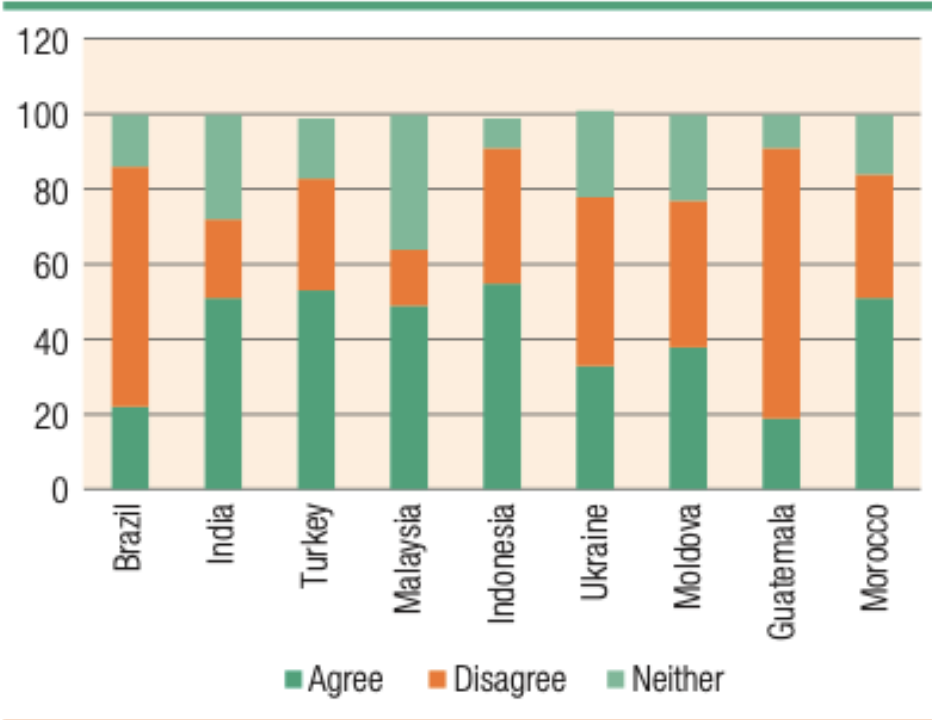
FIGURE 4.2 • Social Norms, Men Versus Women



Source: World Values Survey 2007.

(World Bank Group, 2015)

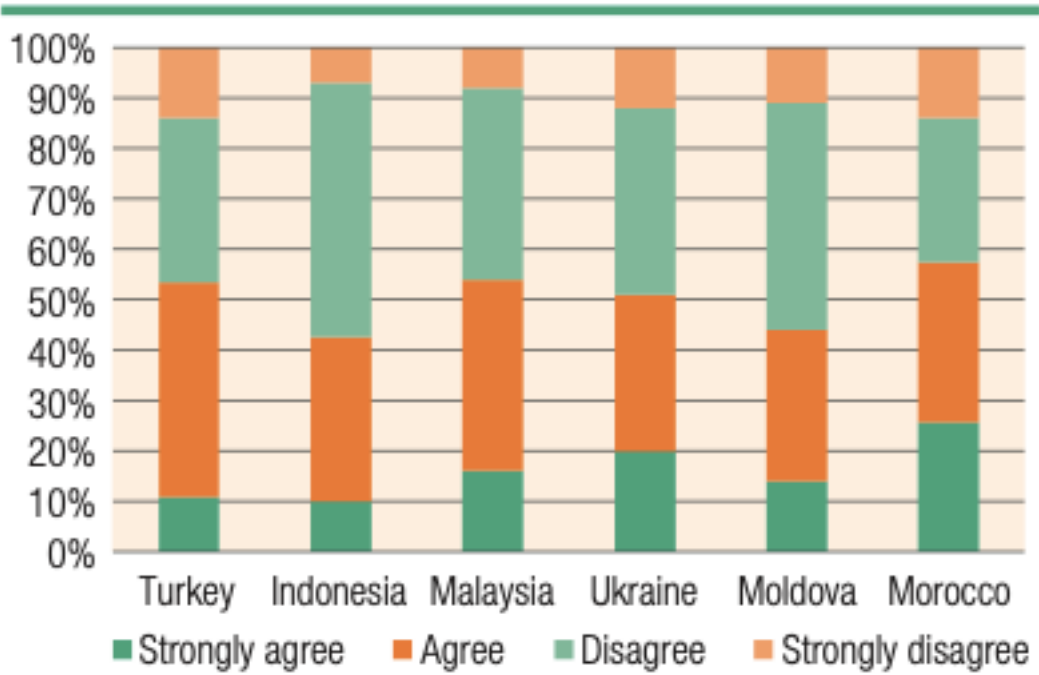
FIGURE 4.3 • Men Should have More Rights than Women to Scarce Jobs



Source: World Values Survey (2011).

(World Bank Group, 2015)

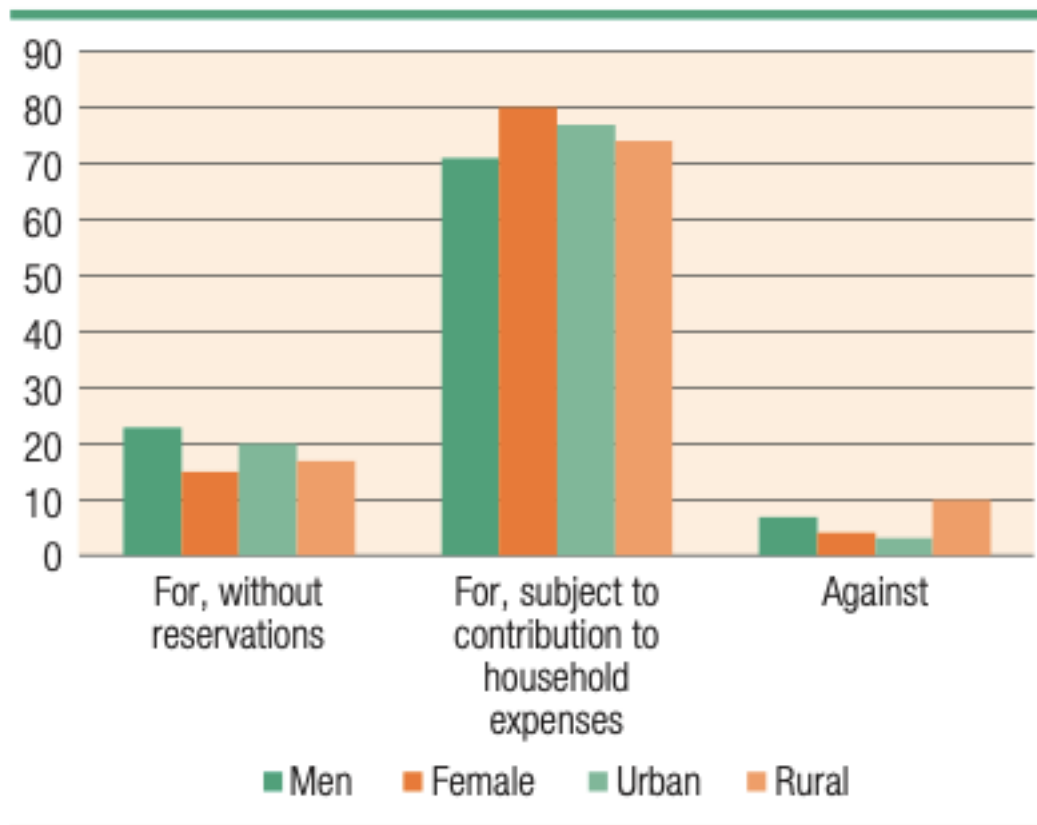
FIGURE 4.4 • Men Make Better Business Executives than Women



Source: World Value Survey (2011).

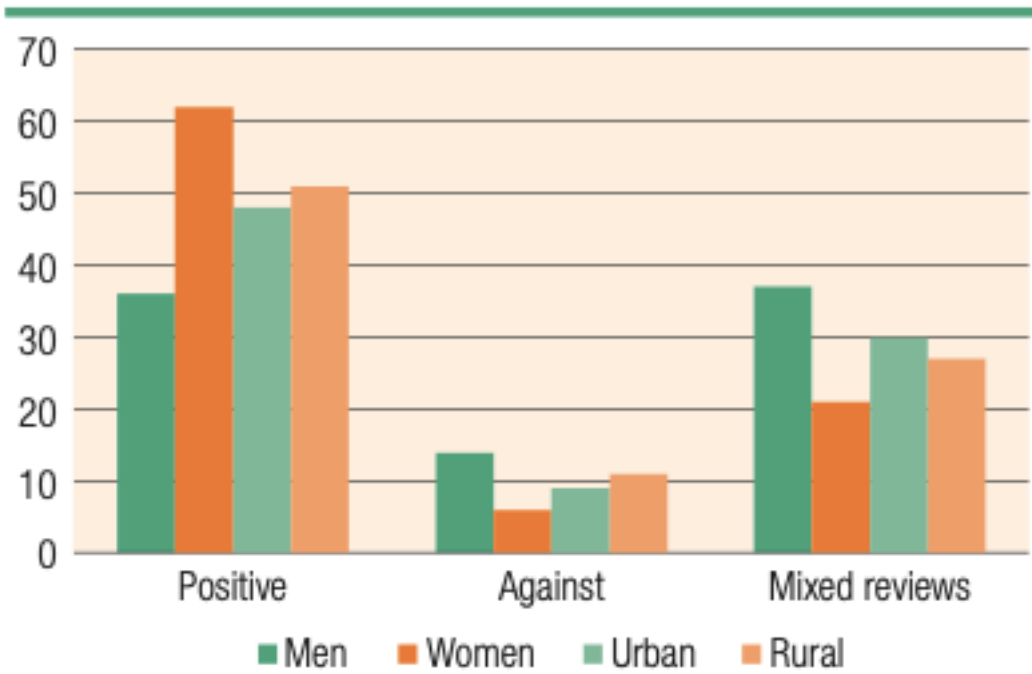
(World Bank Group, 2015)

FIGURE 4.7 • Attitudes Towards Women’s Control of Incomes



(World Bank Group, 2015)

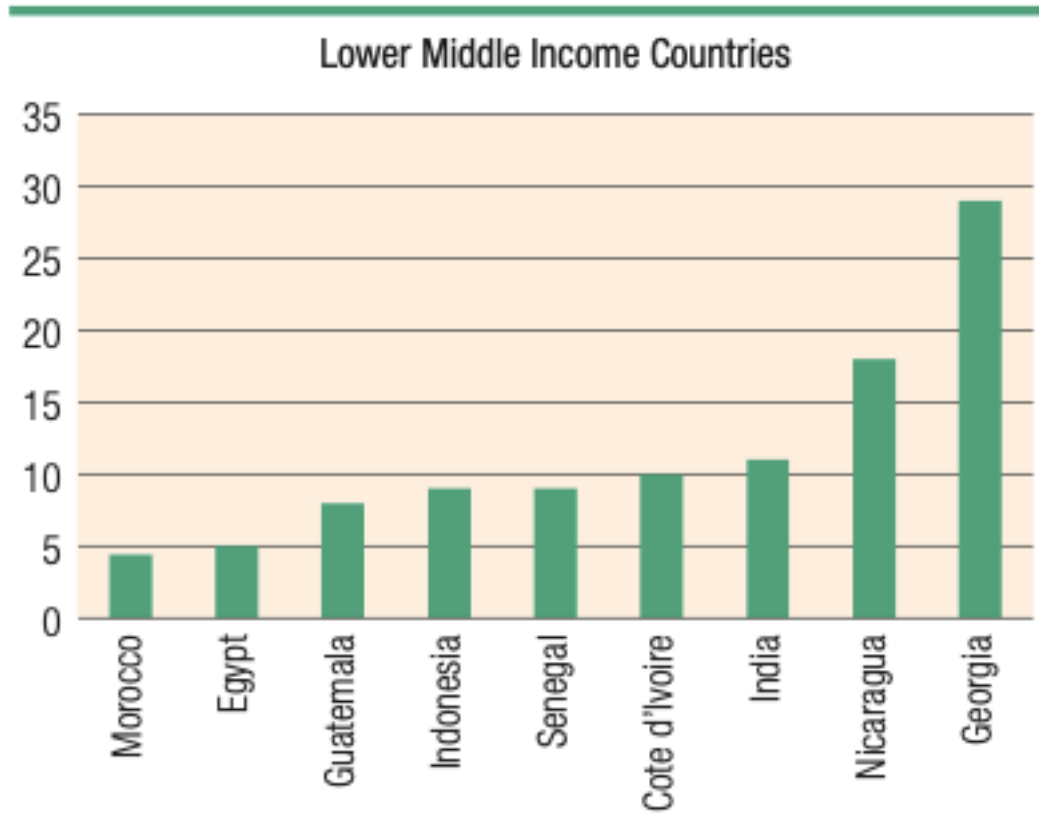
FIGURE 4.9 • Attitudes Towards Reform of the Moudawanna



(World Bank Group, 2015)

Landownership by Women

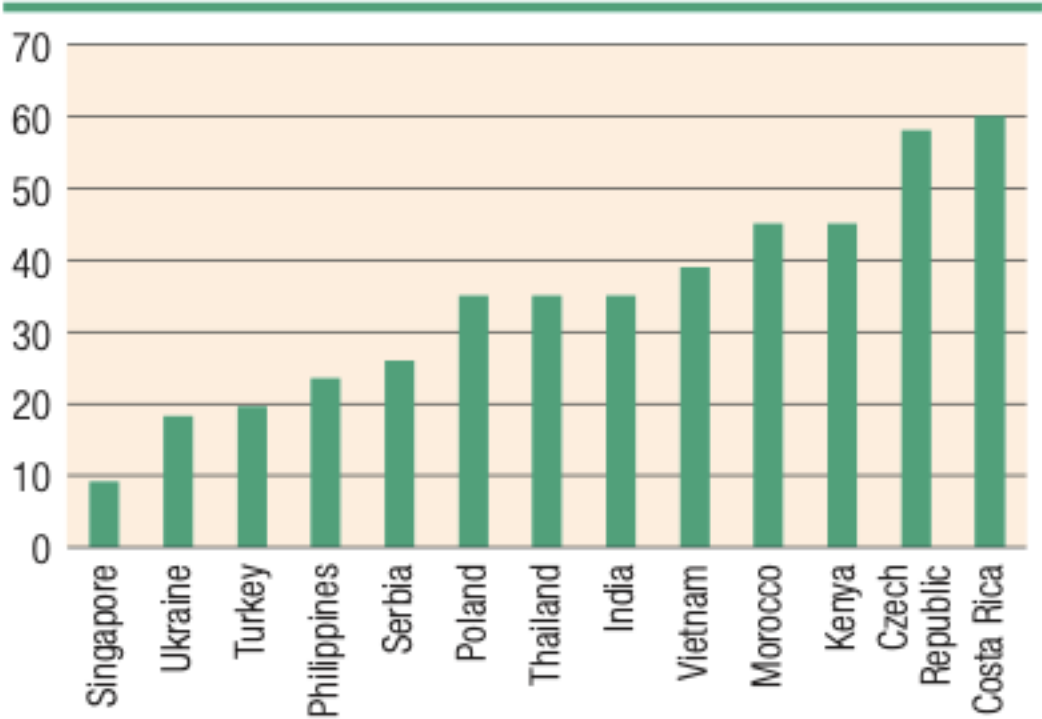
FIGURE 4.8 • Percentage of Agricultural Holdings Headed by Women



(World Bank Group, 2015)

Violence Against Women

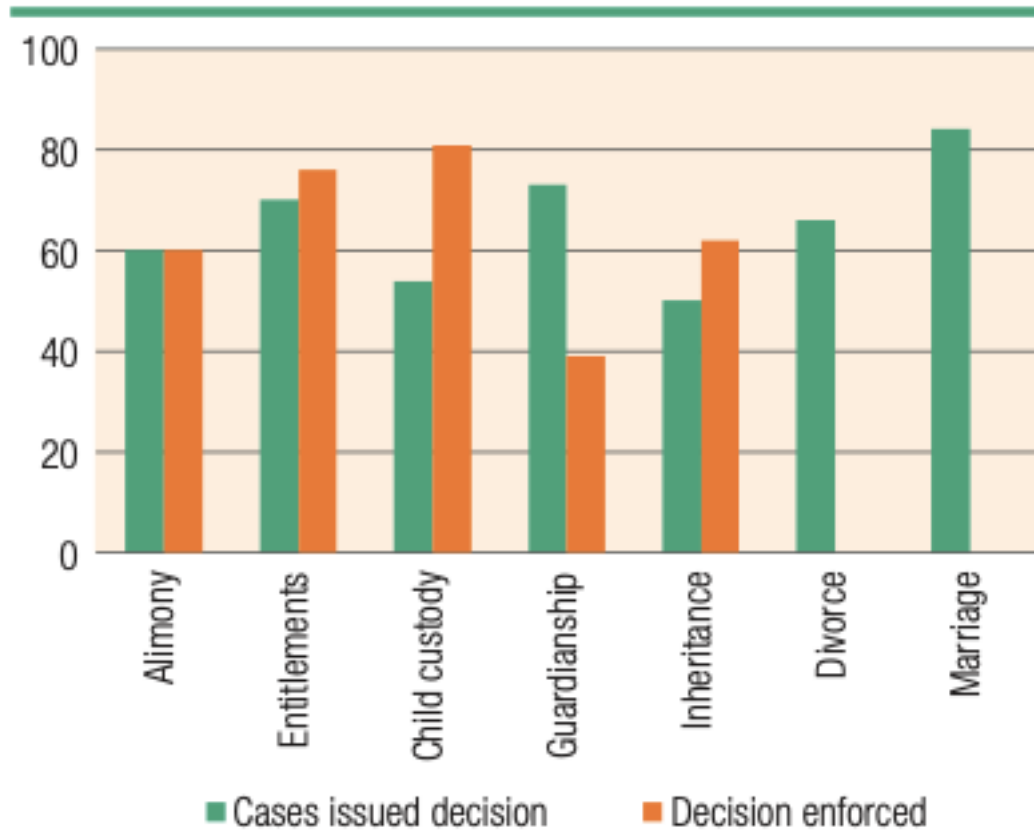
FIGURE 4.12 • Reported Incidence of Physical and/or Sexual Violence, Over Lifetime



(World Bank Group, 2015)

Appendix B

FIGURE 4.20 • Percentages of Family Law Cases Issued Decisions and Enforced (2011)



(World Bank Group, 2015)