



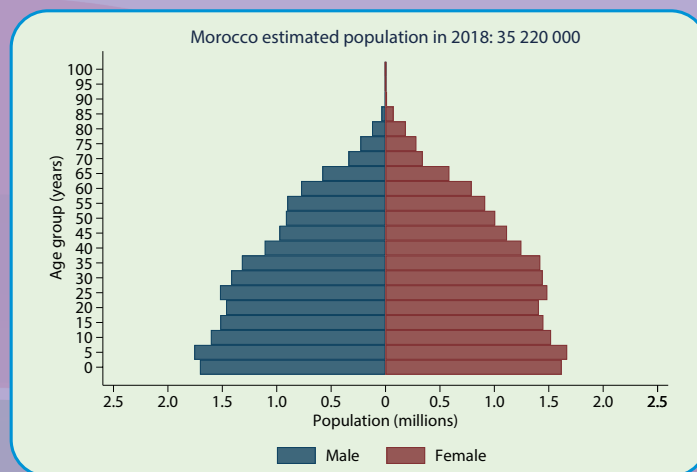
Universal health coverage

UHC service coverage index (2017)	70
Primary health care facilities per 10 000 population (2017)	0.8
Hospital beds per 10 000 population (2017)	10.0
Demand for family planning satisfied with modern methods (%) (2017)	78.5
Antenatal care visits (4+ visits) (%) (2018)	60.9
Measles immunization coverage among 1-year olds (%) (2018)	100
Tuberculosis treatment success rate and relapse TB cases notified (%) (2017)	88
DTP3-containing vaccine / Pentavalent coverage among 1-year olds (%) (2018)	99
Out-of-pocket expenditure (OOPS) as percentage of current health expenditure (CHE) (2016)	48.6
Domestic General Government Health Expenditure (GGHE-D) as % of General Government Expenditure (GGE) (2016)	9.1

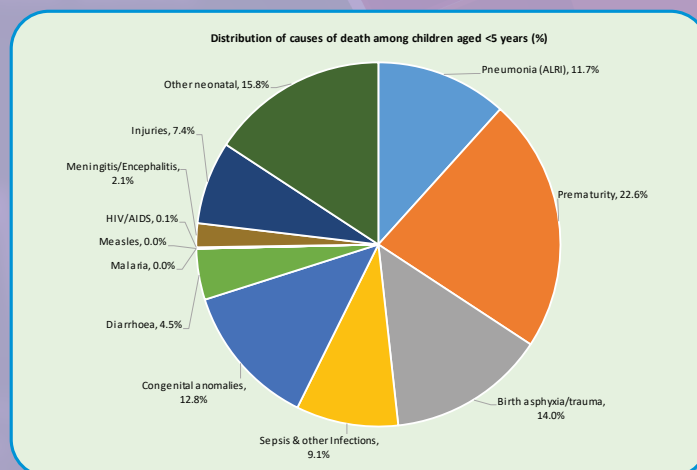
Selected determinants of health

Population living in urban areas (%) (2018)	62
Annual GDP growth (%) (2018)	3.0
Population growth rate (%) (2017)	1.1
Children aged < 5 years with pneumonia symptoms taken to a healthcare provider (%) (2011)	70.1

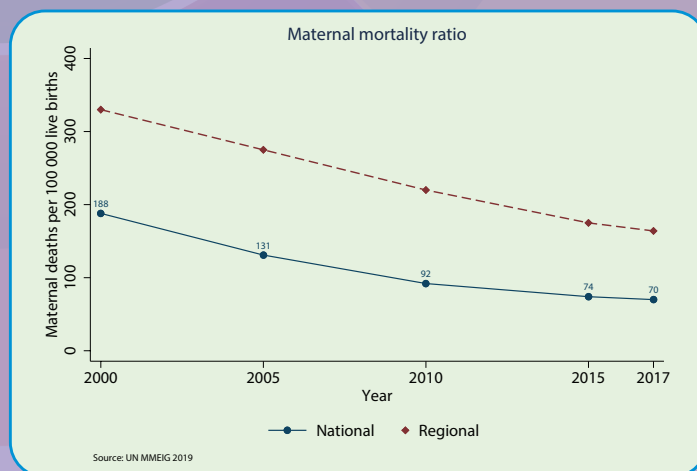
Estimated population in 2018



Distribution of causes of death among children aged <5 years (%)



Trends in estimates of maternal mortality ratio



Selected SDGs health-related indicators*

1 NO POVERTY

Population below the international poverty line (2014) % 2.2

Proportion of employed population below the international poverty line (ILO estimate, 2019)

Male %	0.3
Female %	0.4

2 ZERO HUNGER

Children under 5 who are (2018)

stunted	%	15.1
wasted	%	4.7
overweight	%	10.8

4 QUALITY EDUCATION

Literacy rate (15-24 years) (2016)

Total %	89
Male %	93
Female %	86

Net primary school enrolment ratio per 100 school-age children (2017)

Total ratio	82
Male ratio	82
Female ratio	81

7 AFFORDABLE AND CLEAN ENERGY

Population with primary reliance on clean fuels and technologies at the household level (Global Health Observatory, 2017) % 94

6 CLEAN WATER AND SANITATION

Access to improved drinking water (World Health Statistics, 2018) % 87

Access to improved sanitation facilities (World Health Statistics, 2018) % 96

8 DECENT WORK AND ECONOMIC GROWTH

Unemployment rate (15+ years) (ILO estimate, 2019)

Total %	9.0
Male %	8.6
Female %	10.4

11 SUSTAINABLE CITIES AND COMMUNITIES

Concentrations of fine particulate matter (PM2.5) ($\mu\text{g}/\text{m}^3$) (WHO/CEHA, 2016)

Total	31.0
Urban	...

16 PEACE, JUSTICE AND STRONG INSTITUTIONS

Estimated direct deaths from major conflicts (per 100 000 population) (WHO Global Health Observatory, 2012-2016) <0.1

*Because of the scarcity of data, the above presentation is limited. Where available, information is obtained from the Regional Core Indicators Programme

Key health indicators

Indicator	Male	Female	Total
Life expectancy at birth in years (2018)	74.8	77.0	76.0
Maternal mortality ratio (deaths per 100 000 live births) (UN-MMEIG 2017 estimate)	—	—	70
Neonatal mortality rate (deaths per 1000 live births) (UN-IGME 2017 estimate)	...	...	14
Infant mortality rate (deaths per 1000 live births) (UN-IGME 2017 estimate)	...	...	20
Under-five mortality rate (deaths per 1000 live births) (UN-IGME 2017 estimate)	...	...	23
Tobacco use among persons 15+ years (%) (2018)	37.7	0.5	18.6
Overweight (18+ years) (%) (2016)	...	...	60.4
Obesity (18+ years) (%) (2016)	...	...	26.1
Raised blood pressure among persons 18+ years (%) (2014)	...	...	26.1
Raised blood glucose among persons 18+ years (%) (2015)	...	...	13.7
Raised cholesterol among persons 18+ years (%) (year)	...	...	...
Probability of dying between age 30 and exact age 70 from any of cardiovascular disease, cancer, diabetes, chronic respiratory diseases, (%) 2016	...	...	12.4
Cancer incidence per 100 000 (2018)	...	...	139.6

Universal health coverage (UHC) means provision of quality services to everybody without discrimination of any kind and without exposing people to financial hardship. UHC is one of the targets of Sustainable Development Goal 3, and attaining UHC will also contribute directly or indirectly to achieving the other SDGs. Achieving UHC means ensuring healthy lives and promoting well-being for all at all ages with explicit affirmative action for vulnerable populations including refugees and migrants. Thus, disaggregated data will be necessary to assess and address inequities in health. UHC requires inter-sectoral action. All countries can and must advance towards UHC by year 2030, if not earlier.

3 GOOD HEALTH AND WELL-BEING



ENSURE HEALTHY LIVES
AND PROMOTE WELL-BEING
FOR ALL AT ALL AGES

Voluntary National Review, include year(s) and link(s)

Completed in 2016:

[https://www.sustainabledevelopment.un.org/content/documents/10560NVR%20\(Morocco\).pdf](https://www.sustainabledevelopment.un.org/content/documents/10560NVR%20(Morocco).pdf)

National Focal Point for 2030 Agenda

Ministry of Foreign Affairs and International Cooperation along with the High Commission of Planning

National Focal Point in Ministry of Health for health related SDGs

Abdelilah El Marnissi, Head of Division of Planning and Studies

1. What efforts have been made to agree on national targets for SDG3+?

N/A

2. How is Morocco incorporating SDG 3 targets in health policy, strategy, and planning?

The Ministry of Foreign Affairs and International Cooperation along with the High Commission of Planning is leading efforts towards advancing the 2030 Agenda. The process of nationalising Sustainable Development Goals (SDGs) is ongoing through a consultative process including not only ministries and public institutions, but also all other stakeholders. The first national consultation was held in 2016 to sensitize both public institutions and non-governmental organizations on the 2030 agenda. The second national consultation was held in May 2019 to review the status of implementation of the SDGs.

The National Health Plan-2025 was formulated in consideration of the SDGs and in particular SDG3 related to health and wellbeing. The Ministry of Health has developed a first version of an action plan to achieve health SDGs which will require updating based on new available data. In addition, many plans and strategies have been established taking into account the health targets. For example, the National Child policy-2030, the National strategy for the prevention and control of noncommunicable diseases (NCDs) and the National strategy to end preventable maternal and neonatal mortality and morbidity. Furthermore, universal health coverage (UHC) is one of the major priorities of the Government Programme 2016-2021 and the national health plan 2025. The objective is to improve access to health care services and extend health insurance to other populations such as self-employed people and liberal professions to achieve the goal of 90% of covered population.

3. Are there any major partnerships for advancing the 2030 Agenda?

To achieve the SDGs by 2030, Morocco will need to establish key national and international to mobilize funds and technical assistance to accelerate achieving different targets of the 2030 agenda. For this purpose, the High Commission of Planning and the United Nations Agencies have signed a partnership agreement for the monitoring and reporting on the SDGs.

4. Are there any major partnerships for advancing the health-related SDGs?

To achieve health related targets, the Ministry of Health needs to establish partnerships with different stakeholders in order to promote health in all policies and mobilize more resources for health sector. On one hand, 11 Ministries, as well as civil society actors and the private sector, have signed a charter for the prevention and control of NCDs, committing to adopt the vision, the objectives and the mechanisms for implementing the national strategy. In addition, in June 2019, the Ministry of Health in collaboration with WHO, the European Union, the World Bank and the African Development Bank organized a national conference on health financing and the first Country-Dialogue on three accelerators identified in the Global Action Plan: Community and civil society engagement; Determinants of health; and Data and digital health.

5. Describe a success story or an example of efforts to accelerate action on the health-related SDGs.