



Navigating Obstetric and Gynaecological Healthcare Challenges in Morocco: A Case Study of Systemic Reforms and Persistent Disparities

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Abstract

Morocco has implemented systemic reforms to its obstetric and gynaecological healthcare services. Nevertheless, achieving equitable, high-quality care nationally remains a challenge, with pronounced gaps for rural and underserved populations. This case study critically analyses reforms within Morocco's obstetric and gynaecological services. It aims to identify key achievements, persistent disparities, and the underlying factors hindering effective healthcare delivery. A qualitative case study methodology was employed, based on a comprehensive review of national health policies, strategic plans, and published reports. This was supplemented by analysis of secondary data on relevant health indicators and service coverage. The analysis shows improvement in key maternal health indicators, including skilled birth attendance. However, profound urban-rural and socioeconomic disparities endure. A critical finding is the highly uneven distribution of specialist human resources, with gynaecologists and obstetricians concentrated in major urban centres, leaving peripheral regions severely underserved. While systemic reforms have generated measurable progress in obstetric and gynaecological care, structural inequities remain entrenched. A persistent gap between policy intent and implementation, particularly in workforce distribution, continues to impede universal access to quality services. Future strategies should prioritise decentralising specialist care and strengthening midwifery-led models in primary care settings. Enhanced investment in training, retention schemes for rural practitioners, and robust monitoring of equity indicators are required. Morocco, maternal health, healthcare disparities, health systems reform, gynaecology, obstetrics, rural health, case study This case study offers a consolidated analysis for policymakers and health

planners, illustrating the complex interplay between reform initiatives and enduring inequities in a North African context.

Keywords: *Maternal healthcare, Health systems reform, North Africa, Health equity, Case study methodology, Gynaecological services, Healthcare disparities*



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