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Research article

Mobility issues and multidimensional inequalities: exploring the limits of the National Strategy for Immigration and Asylum during the COVID-19 pandemic in Morocco

Daniela Santus* and Sara Ansaloni

Department of Foreign Languages, Literatures and Modern Cultures, Università degli Studi di Torino, Turin, Italy

*Correspondence: Email: daniela.santus@unito.it; Tel. +39 (334) 7356525.

Abstract: In December 2019, the severe respiratory syndrome coronavirus-2 was discovered in China. The virus spread rapidly and, by March 2020, the World Health Organization (WHO) declared COVID-19 to be a global pandemic. Scientists expected the African continent to be among the worst affected by the sanitary emergency in terms of prevalence, incidence and mortality. This prediction was refuted by evidence, considering that Africa reported the least number of cases and deaths compared to Europe, Asia and America. The first case in Africa was registered in Egypt on February 14, 2020. By the end of 2021, the continent recorded a cumulative of 7,110,817 cases and 155,505 deaths. Nonetheless, estimates are likely to be distorted due to the lack of available data about the impact of COVID-19 and the limited documentary capacity of most African countries. There are several theories to explain why, contrary to the expected trend, Africa had the fewest COVID-19 incidences compared to other continents. Africa is characterized by a young population, which is notoriously less susceptible to COVID-19, with an average age of 19.7 years. In addition, most of the Africans (59%) live in rural areas, with few opportunities to travel or get in contact with outsiders. Moreover, governments enforced outstanding measures to contain the spread of the virus and safeguard the national economy, such as strengthening their documentary capacity and enforcing effective social safety nets. However, most of these policies have aggravated entrenched patterns of discrimination, making certain populations uniquely vulnerable. Indeed, mobility restrictions and border closures severely affected people with mobile livelihoods. In Morocco, the emergency measures compromised the resilience capacity of sub-Saharan migrants, particularly women and girls. To study the phenomenon of African migration to Morocco, we conducted fieldwork research from October to December 2021, interrupted by the closure of the kingdom's borders, and continued remotely thanks to key informants.

Keywords: Morocco; COVID-19; vulnerability; migration; gender

1. Introduction

For much of the 20th century, the Alawite Kingdom was a land of emigration, with millions of its citizens moving to Europe and West Africa. The Moroccan diaspora across the two continents contributed to strengthen the country's interregional and international connections, further consolidated with the development of the Euro-African Dialogue on Migration and Development, known as the Rabat Process, that was established in 2006. The creation of the Migration and Border Surveillance Directorate (2014) and the African Observatory for Migration and Development (2018), in compliance with the Euro-Mediterranean Association Agreement (2000), formed the legal basis of the European Union-Morocco relationship [1]. In 2013, the Ministry in Charge of Moroccans Living Abroad, part of the Ministry of Foreign Affairs, extended its mandate to include incoming migration. Prior to this date, only the Moroccan diaspora was considered in the development and implementation of migration management policies. The 10-years long process that has transformed Morocco from a country of origin to a destination hub for many sub-Saharan migrants was determined by the changes that occurred in the 2000s during the regional migration dynamics. The increased flow of irregular migration along the western Mediterranean route resulted from the deterioration of many African countries' socioeconomic conditions and the security concerns linked to the Arab Spring. King Mohammed VI has seized the economic opportunity represented by the new migratory phenomenon, gradually redefining the kingdom's identity and foreign policy. Considering the limited capacity of most Maghreb countries to establish robust economic and political relations and the need to curb Moroccan dependence on Europe and Western allies, the kingdom turned its attention to Africa within the framework of the south-south cooperation. The 2011 Constitution laid the foundation for the kingdom's pilot to Africa, emphasizing the Africanité of the nation in its preamble. In economic terms, the new approach focused on investments in banking and phosphorus fertilizer industries, which are Morocco's key drivers of development. Emulating the United States of America and China's clever use of their soft power, the kingdom adopted a similar modus operandi to obtain economic and political benefits. For instance, during the COVID-19 pandemic, Rabat has provided medical products and financial aid to 15 African countries, promoting the initiative within the framework of "African solidarity". Following its readmission in the African Union in 2017, after 33 years of absence, Morocco was named as the coordinator of the African Agenda on Migration and hosted the United Nations Intergovernmental Conference for the promulgation of the Global Compact for Safe, Orderly and Regular Migration. The subscription of more than 500 cooperation agreements with African countries and the expansion of Moroccan companies in 25 African nations are strong indicators of the kingdom's foreign policy reorientation [2]. Aligned with the king's "African vision", Rabat has signed agreements

with 54 African Union nations (2018) to create a continental free-trade area, with a common market of 1 billion consumers. Despite its request to join the Economic Community of West African States (ECOWAS) in February 2017, its bid has stalled by reason of the fear that goods imported through Morocco's free-trade agreements with Western countries will flood the community's marked and compete unfairly [3]. The commitment to improve Morocco's anti-extremist religious diplomacy was part of the country's effort to encourage regional mobility. Religion-related job and academic opportunities have contributed to the consolidation of settlement migration and the creation of strong networks of migrants who decide to permanently stay in Morocco. Indeed, the realization of training centers that regularly host apprentice imams have increased the number of theology students coming from West and sub-Saharan Africa. Therefore, the neighborhoods where migrant communities live are experiencing the growth of places of worship, primarily Pentecostal, protestant and prophetic, which represents the entire religious landscape of West and Central Africa. Those informal networks of churches and civil society organizations (CSOs) have assumed a key role in improving the living conditions of sub-Saharan migrants and refugees [4]. The pivot to Africa, the diversification of partnerships and dependencies, the emergence of a tolerant and moderate Islam, along with the Moroccan attitude to assume a more assertive position regarding international political issues, demonstrate the kingdom's aspiration to play a significant role in the world politics, especially when disagreeing with its traditional western allies [5].

King Mohammed VI has succeeded in further strengthening its regional alliances and increasing its bargaining power toward Europe by adopting an Afro-centric approach to migration. Indeed, the European Union, as Morocco's main economic and political partner, is pressuring the kingdom to block transmigration, which has become a political obsession and an object of electoral manipulation. One of the most effective tools was the development of the National Strategy for Immigration and Asylum (NSIA) in 2013. The NSIA was promoted through a discursive framework that aspired to change the common perception of incoming migration from a threat to national security to an economic opportunity [4]. The new migration management strategy relied on a human rights-based approach with the purpose of (i) combating human and sex trafficking; (ii) regularizing migrants and asylum seekers to facilitate their access to education, formal employment and lodging; (iii) upgrading the legal framework of immigration in compliance with international agreements and standards; and (iv) enhancing economic growth through the promotion of cultural diversity and integration [6]. Morocco's first symbolic act to consolidate its new role as a destination hub for incoming migration was the promotion of three regularization campaigns held in 2014, 2016 and 2017, enabling thousands of sub-Saharan migrants to obtain residence permits and contribute to the country's economic development [4]. In September 2014, non-nationals in Morocco numbered 86,206, i.e., 0.26% of the total resident population, which stood at 33,848,242, as indicated by the country's sixth census [7]. The most recent figures about the demographic profile of sub-Saharan migrants transitioning in Morocco refer to a survey conducted by the Association Marocaine d'Études et de Recherche en Migrations (AMERM) on 1,000 people with mobile livelihoods. Accordingly, in the late 2000s, Nigerians accounted for 16% of the surveyed migrants, followed by Senegalese and Malian (13% each), Congolese (10%), Ivorian (9%), Cameroonian (7%), Gambian and Guinean (5% each) migrants. Despite national variations, migrants were predominately male (79% on average), in the age group of 25–34 (66%), and most often (82%) unmarried. One-third of the sample was made up of illiterate people, but 16% were college graduates. About 60% of the surveyed migrants revealed having no source of income, 19% was reduced to begging and 10% received assistance from charitable organizations [8]. In March 2016, the United Nations High Commissioner for Refugees (UNHCR) registered 4,277 refugees transitioning in Morocco. Asylum seekers numbered 1,910, most of whom came from sub-Saharan countries [9]. Nonetheless, official estimates show only a small fraction of all of the de facto migrants and refugees present in the kingdom. Since the 1990s, cooperation in the field of higher education has been a key strategy to attract foreign students and facilitate their integration into the formal labor market. However, sub-Saharan migrants rarely get a job position compatible with their level of education [10]. Only 2.3% of the migrants surveyed by AMERM reported being employed. Most of them worked in the construction, retail and domestic service sectors. The average length of stay in Morocco is up to 2.5 years. According to AMERM, only 2% of the surveyed migrants planned to permanently settle in Morocco due to the harsh living conditions and the lack of employment opportunities in the formal economy, proving the failure of the kingdom's migration management policies [8]. As reported by the CSOs (Table 1) interviewed during the present study, most migrants suffer from labor exploitation, such as non-payment, underpayment of promised salaries, excessive workload, lack of rest days and vacation, deprivation of personal liberties, restrictions on movement and even segregation. Among the most vulnerable are men employed in the construction industry and call centers, as well as cleaning ladies hired in private residences, whose average wage is 2,500 MAD (USD 260). According to Youseef, the vice-president of the K-Sofore association, which supports 150 sub-Saharan migrants settled in Marrakech, as well as the representatives of the three women's committees working in the Saada, Doha Massirra and Hay Zitoune districts, it is almost impossible for both a regular and irregular migrant to get dignified employment and a rent accommodation. Those who speak French can be hired in call centers. Otherwise, driven by the lack of alternatives, most migrants make their living in the informal economy. For instance, there is much of a demand for sub-Saharan women in the domestic service sector [1]. However, female migrants are often compelled to leave their employment due to abusive working conditions. Some of them succeed in starting their own entrepreneurial activity by opening African boutiques and tailor shops in their apartments [11–13]. As stressed by Adah, a representative of the Doha Massirra sector, before the COVID-19 outbreak, informal entrepreneurial activities, such as hair salons, sewing shops, African boutiques and grocery stores, where sub-Saharan women used to sell products imported from their country of origin, allowed female migrants to achieve economic independence and escape abusive working conditions. Nonetheless, the COVID-19 restrictions, notably, the closure of borders, lockdowns, curfews and quarantines, deprived them of their only source of income. For this reason, most sub-Saharan women have survived thanks to the employment of detrimental coping strategies, such as prostitution, mendicancy and borrowing money from dubious lenders. Others continued to be employed in the informal labor market, being frequently subjected to physical violence, xenophobia and segregation. As stressed by the Organization for Economic Cooperation and Development (2020), the sanitary emergency has exacerbated the already widespread feminization of poverty and incremented housework and family care activities. Despite the massive shift toward teleworking, as engaged by civil servants and employees in private companies, women faced great difficulties of adaptation to the new working dimension [14]. According to International Labour Organization's labor market indicators (2020), youth and female unemployment rates rose respectively by 11 and 4.5 percentage points in just one year. Furthermore, since February 2020, more than 60% of households have seen their incomes declining, nearly 35% stagnating and only 5% have reported an increase [15]. Key informants pointed out that the female workforce is usually employed in those job sectors that are likely to be worst affected by crisis, notably, the hospitality, beauty, tourism and trading industries. Most female street vendors, hammam employees, beauticians, hairdressers, sex workers and housemaids have lost their jobs and were unable to obtain the COVID-19 allowances. Indeed, being mostly employed in the informal economy, immigrant women are usually not registered to the Caisse nationale de Sécurité sociale (CNSS) and do not possess a RAMED card. According to the most recent HCP data, which refer to the period of 2013-2014, roughly 28.7% of the total workforce is employed in the shadow economy. Informal laborers are mainly sub-Saharan migrants, uneducated youth, women and children, who work in the craft, food, textile and construction industries, or in the cleaning, retail and car repair sectors [16]. Despite Morocco having experienced increased formalization in the last two decades, i.e., from 33% of formal wage workers in 2000 to 45% in 2019, about 54.6% of wage workers still operate in the informal sector. By reason of domestic chores and childcare, traditional gender-related social norms and the skills gap, the shadow economy is the privileged sector for those immigrant women who live in desperate circumstances and are willing to accept precarious employment conditions [17]. Considering the lack of an effective social safety net capable of targeting the irregular migrants, the most fortunate received the humanitarian assistance offered by local CSOs, which improved their resilience capacity during the three-month lockdown.²

2. Migration issues in times of pandemic: materials and methods

A large body of literature investigates the impact of COVID-19 on people with mobile livelihoods [18–22], however, few studies have focused their attention on African migration to Morocco. Interestingly, Moumni's research stressed the behavioral changes resulting from the spread of the novel coronavirus, including xenophobia and racism. By investigating the un/ethics of self-care and collective care, the author noticed the arise of new social behaviors based on avarice, self-interest and self-care [23]. The present research refutes this theory by stressing the emergence of a community-based approach developed by the members of the target population with the purpose of strengthening people's resilience capacity. Indeed, refugee and migrant-led CSOs have implemented innovative strategies to support the immigrant community, as based on participation, collective care and network building. In addition, studies and journalistic research aiming at investigating the impact of COVID-19 on different social groups have been almost exclusively conducted in the United States of America. The *New York Times* (2020) published a

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¹ Adah, Sanu, Jaineba, Ammina, Hasani M. (2021, December 3) personal communication (in-person semi-structured interview), Marrakech. Fatoumata D. (2021, December 5), personal communication (in-person semi-structured interview), Marrakech. Nadia (2021, December 6), personal communication (in-person semi-structured interview), Marrakech). Chaimah Wahb (2021, December 8), personal communication (in-person semi-structured interview), Casablanca. Fathia, Aisha (2023, March 29), online conversation (semi-structured interview), Savona. Philemon Beb A. Don, Khadija B. (2022, April 2), online conversation (semi-structured interview), Savona. Fofana Lassana, Traore H. Falikou, Sarah A. (2022, April 6), online communication (semi-structured interview), Savona.

² Youssef, Adah, Sanu, Jaineba, Ammina (2021, December 3), personal communication (in-person semi-structured interview), Marrakech.

series of articles that demonstrated the direct correlation between COVID-19-related mortality and unfavorable social and biological conditions in New York's impoverished neighborhoods [24–27]. Vesoulis, in March 2020, foresaw that low-income and marginalized communities would have faced greater risks of exposure to the virus, having no access to teleworking, sick leaves, financial aid, or social or healthcare services [28]. It is worth mentioning that the survey conducted by AMP Research Lab in 2020 showing that the crude COVID-19 death rate for Black Americans doubled that of other racialized groups [29]. These proportions dramatically increased when adjusted for age. Notably, Basset et al. highlighted how the risk of death from COVID-19 was as much as nine times higher for African Americans compared to white people [30]. Drawing inspiration on the studies carried out in the United States of America, the present research investigates the direct correlation between people's social identities (migration and social status, ethnic and gender relations) and increased COVID-19-related vulnerability and mortality. Indeed, despite immigration to Morocco having never been easy, with the pandemic, the situation increasingly worsened, particularly affecting sub-Saharan women and girls. Ethnographic research was conducted between October and December 2021 and started with a month of exploratory fieldwork to determine the selected CSO accessibility and define the subject of the study. Indeed, it was necessary to be introduced by a gatekeeper to establish contact with local organizations; therefore, the first phase of the study focused on bibliographic research, document review and secondary data collection. In November 2021, it was possible to secure access to local associations thanks to the non-governmental organization (NGO) Iscos Marché and the research center Menassat, which assumed the role of gatekeepers and contributed to the selection of 16 local CSOs dealing with vulnerable migrants and refugees. The research institution made available a PhD student of Casablanca University with the purpose of providing linguistic support to interview *Darija* speakers. However, since all subjects of the study speak perfectly in French, collaboration with a local interpreter was unnecessary. Iscos Marché and Menassat allowed the authors to create the first network of contacts with seven local CSOs based in Casablanca and Marrakech between November and December 2021. Nonetheless, the closure of Moroccan borders in December 2021 compelled the authors to suspend fieldwork research and keep working remotely thanks to key informants. The first set of interviews was transcribed and analyzed with the purpose of realizing a more effective questionnaire for the next respondents. Since the interviewed associations adopt different strategies (advocacy, development or service-oriented initiatives) to support a specific social group (vulnerable or battered women, street children, asylum seekers or migrants with disabilities), the questionnaire was adapted depending on the characteristics of the specific CSO. The establishment of trustworthy relations with respondents proved to be an excellent strategy to establish contact with nine local CSOs based in Casablanca, Rabat and Marrakech in March 2022. The selection of CSOs was determined by their social group of interest and the willingness to participate in the study. The last phase of the study dealt with data analysis and follow-up questions carried out via WhatsApp and Facebook. Fieldwork research lasted two months in the field, for a total of 7 months of fieldwork, and remote research lasted between October 2021 and April 2022. The authors conducted semi-structured interviews and informal conversations to investigate the impact of COVID-19 on marginalized communities, evaluate the effectiveness of NSIA, investigate the strategies implemented by the kingdom to contain the spread of the virus and analyze the innovative strategies implemented by local CSOs to strengthen the immigrant population's resilience capacity. The interviews were recorded by phone, with prior consent from the respondents, while follow-up questions were carried out via WhatsApp and Facebook. During the second phase of

the study, the research group compiled an online questionnaire about the approaches implemented during the lockdown to support their beneficiaries. Thereafter, the authors debated remotely with the respondents about the community-based initiatives carried out by the other subjects of the study. This strategy aimed at delineating the best practices employed by local CSOs to address the government's response gaps and elaborating a set of policy suggestions to improve Morocco's Emergency Action Plan (EAP). Data analysis is thematic, as it focused on identifying the interviews' common themes. It was conducted through a pattern-matching word-table with no use of specific software. The methodology is based on mixed methods research, which prioritizes qualitative methods in line with the methodological approach of humanistic geography. Document review and secondary data collection, through the analysis of HCP's datasets [17,31–33], newspaper articles, academic research and CSOs' working papers [34– 38], allowed the authors to assess Morocco's socioeconomic situation before and during the sanitary emergency, and to evaluate the government's policy effort to strengthen immigrant people's resilience capacity. The direct testimonies of CSO presidents and co-founders (10), Violence Against Women (VAW) units and civic organization managers, secretaries and directors (7), social workers, educators and psychologists (8), and members of the targeted social groups (5), for a total number of 30 respondents, were obtained to understand the impact of COVID-19 and the related restrictions on the targeted group, as well as the strategies adopted by the civil society to cover the government's response gap.

Table 1. Summary table of in-person and online interviews.

Activity	Place	Date	CSO	CSO's function	Respondents
In-person semi-	Marrakech	12/03/2021	K-Sofore	1 CSO President	Youssef
structured	Marrakech	12/05/2021	K-Sofore	4 Female Committees'	Sanu, Jaineba, Ammina,
Interviews and				Representatives	Adah.
Informal				1 CSO Co-founder	Hasani M.
Conversations	Marrakech	12/05/2021	AMD	1 Cleaning Lady	Fatoumata D.
	Marrakech	12/06/2021	Ennakhil	1 Responsible VAW	Nadia
				1 Restaurant Director	S.M.
	Marrakech	12/06/2021	Al-Karam	1 CSO President	Amine Mkika
	Casablanca	12/07/2021	Al-Amane	1 Educator	Mubarak
				1 Psychologist	Nora B.
	Casablanca	12/08/2021	ATEC	1 Social Worker	Chaimah Wahb
Online semi-	Savona	03/29/2022	AMVEF	1 Admin. Manager	Fathia
structured				1 Responsible VAW	Aisha
Interviews and	Savona	04/02/2022	ADM	1 CSO President	Philemon Beb A. Don
Informal				1 Psychologist	Khadija B.
Conversations	Savona	04/04/2022	SOS Trav. à Domicile	1 CSO President	Sarah N.
	Savona	04/04/2022	100% Mamans	1 CSO President	Claire Trichot
	Savona	04/05/2022	FLDF	1 Admin. Manager	Khadija Trikaro
	Savona	04/06/2022	ASSIRIDA	1 CSO President	Fofana Lassana
				1 Secretary-general	Traore H. Falikou
				1 Social Worker	Sarah A.
	Savona	04/06/2022	ASF	2 Social Workers	Hania B.
					C.N.
	Savona	04/07/2022	FOO	1 Project Manager	Carmen Romero
	Savona	04/12/2022	AICEED	1 CSO President	Khalid Msari
	Savona	04/12/2022	FLDF	1 Social Worker	Karima
	Savona	04/13/2022	ADMF	1 CSO President	Atifa Tima
	Savona	04/22/2022	MRA	1 CSO Co-founder	Stephanie W. Bordat
Total Number of	f Respondents	: 30			•
Total Number of					

In regard to ethical concerns, some respondents requested to remain anonymous, change their names, be referred only by their initials, or not be recorded during the interview for privacy reasons. Moreover, considering the subject studied in the present research, which involves female migrants suffering from different kinds of trauma and abuse, being women researchers allowed better access to the contacts' sensitive information.

Thinking about immigration to Morocco, it should be noted that there are three primary entry points used by migrants arriving in Morocco: (i) the Casablanca airport, which is the main formal entry route into the country and is employed by middle-class nationals coming from the member states of the Economic Community of West African States; (ii) Oujda, which is located on the northeastern border with Algeria and is mostly used by undocumented migrants coming from Mali and Niger; and (iii) the Mauritanian border via Western Sahara, which is crossed by migrants traveling from Senegal and West Africa. The outbound routes include the Spanish enclaves of Ceuta and Melilla and the Strait of Gibraltar [39]. Demographic factors, such as sex, age and family status, type of transport, migration route and the availability of financial resources, determine the hazards of the journey. The data collected during the present fieldwork research testifies to the extreme vulnerability to human trafficking of unaccompanied women and children. They are usually kept in groups in remote and inaccessible areas and compelled into prostitution and forced labor in exchange for their safety. They are required to provide sexual services to other migrants or people living in the transit cities in exchange for protection. Inevitably, they are exposed to tuberculosis, HIV/AIDS and other sexually transmitted diseases [40]. ³ Some smugglers are Moroccans who work independently, while others are part of Nigerian or Côte d'Ivoire's criminal networks. Trafficked women and children usually come from Cameroon, Nigeria, the Ivory Coast and the Democratic Republic of Congo. Since gender stereotypes and racism intersect, resulting in the sexualization of Black women, female migrants are often exposed to sexual harassment on the streets, gender-based violence and labor and sexual exploitation. Once the migrant woman loses the support of her protector, by reason of disease or the inability to work, she has to adopt detrimental coping strategies, including mendicancy, prostitution and seeking the companionship of men as a buffer against the hazards they experience during the journey [41]. In some cases, abandoned women even disappear, while pregnant women are frequently forced to take abortion drugs, causing bleeding or death. Sometimes, they use pregnancies to protect themselves from sexual harassment and abuse, or to reach Europe more easily. Furthermore, an increasing number of young migrants, including children migrating independently of their families, is also subjected to extreme violence. Abandoned children are at high risk of coerced labor in artisanal and construction industries, sex trafficking, domestic work and begging [42]. According to Médecins Sans Frontières (2013) and human rights organizations, migrant women and girls have no control over their sexual and reproductive health and are subjected to mobility restrictions and segregation [43].

³ Youssef, Hasani M., Adah, Sanu, Jaineba, Ammina (2021, December 3), personal communication (in-person semi-structured interview), Marrakech. Fatoumata D. (2021, December 5), personal communication (in-person semi-structured interview), Marrakech. Philemon Beb A. Don, Khadika B. (2022, April 4), online communication (semi-structured interview), Savona. Sarah N. (2022, April 4), online communication (informal conversation), Savona. Fofana Lassana, Sara A., Traore H. Falikou (2022, April 6), online communication (informal conversation and semi-structured interview), Savona. Karima (2022, April 12) online communication (semi-structured interview), Savona.

Women's mobility is further restricted by the fear of violence, detention and the consequential police abuse. In addition, irregular female migrants and refugees are discouraged to report any violence they suffer for fear of retaliation or expulsion. When the offender is of the same nationality of the victim, or, more generally, when they are also a migrant or refugee, access to justice and protection is even more difficult [39]. The increasing number of migrants deciding to permanently settle in the kingdom results from the heightened risks associated with the journey to Europe. Notably, human rights watchdogs are concerned about the police brutality at the Spanish and Algerian borders and the dangers related to the trans-Saharan journey, where hundreds of people die every year from starvation, malnutrition and dehydration [4]. According to the International Organization for Migration, the COVID-19 restrictions have further endangered the security of those migrants who decide to cross the desert, since they had to frequently change the route at the risk of getting lost. Furthermore, despite the improved operational efficiency and effectiveness of migration management policies and the country's declared emphasis on a more humanitarian approach, most migrants continue to face harsh treatment, including arbitrary arrests, forced relocation, incarceration and deportation [44]. Indeed, the Migration Act of November 11, 2003 is still the main piece of legislation regulating foreign immigration. Law No. 02-03 establishes the standard practices related to the issuance of visas and residence permits (Art. 17), the deportation and refoulement of migrants (Art. 29) and the treatment of asylum seekers in waiting areas (Art. 38). Nonetheless, human rights associations have raised concerns about the active procedures regarding irregular migration. The offense is a misdemeanor punishable by detention for up to 6 months and/or a fine of 20,000 MAD. Foreign nationals who evade or attempt to evade a deportation order or return in Morocco after having been expelled are punished with imprisonment for up to two years [4]. In addition, since the kingdom does not dispose of any dedicated immigration facility, apprehended non-nationals are confined in prisons, detention centers and transit zones [44]. As reported by the Moroccan Association for Human Rights and Groupe Antiraciste de Défense et d'Accompagnement des Étrangers et Migrants (GADEM), since the summer of 2018, hundreds of sub-Saharan migrants have been reportedly arrested, imprisoned in police stations or taken from the north to the south of the country during raids conducted by the Moroccan police, the Royal Gendarmerie and the Auxiliary Forces. Others have been deported from the country without any explanation about the reasons for their detention nor the possibility to contest the removal decision. According to the data collected by Caminando Fronteras, between March and May 2020, at least 100 migrants—most of them children —were detained by Moroccan security forces in areas close to the Spanish enclaves of Ceuta and Melilla before being abandoned in the Algerian desert. In addition to mass expulsion, during the COVID-19 pandemic, numerous migrants have been detained to be tested for the virus. On June 21, 2020, 50 sub-Saharan migrants were arrested in Laâyoune, which is notorious for the departures to the Canaries Islands, and detained for seven days in the local school. The group could not leave the building and had no access to running water, clean clothes or basic livelihoods. Migrants who tested positive for the virus were quarantined in nearby hotels. According to the testimonies collected by the Moroccan Association for Human Rights, since the onset of the COVID-19 pandemic, similar occurrences have taken place around the nation, with migrants and refugees detained in schools, youth centers and hotels for periods ranging from a few days to several months [44]. Irregular migrants who are planning to enter Europe used to settle in informal camps and forests close to the Spanish mainland, especially in the cities of Tangier, Nador and Tetouan. Rabat, Fez, Casablanca, Marrakech and Meknes are the final destinations for those deciding to look for temporary employment in the informal economy

before heading to the border. Since finding a rent accommodation is particularly challenging in border cities, where landlords required tenants to show their residence permits, irregular migrants live in overcrowded makeshift shelters built in caves, forests, cemeteries or uninhabited buildings often dismantled by the police [39]. During the COVID-19 outbreak, the prospects of survival for sub-Saharan migrants decreased, given the impossibility to comply with hygienic measures and physical distancing. The exclusion from the formal economy compels migrants to live on the margin of society, while the precarity of their condition makes it difficult to establish a collective voice, without which is nearly impossible to negotiate policies that could eventually facilitate their integration and settlement. Furthermore, the institutional environment is still excessively focused on promoting repatriation and combating human trafficking, detracting from the effort to encourage integration and cultural diversity. Many Moroccans maintain that the governmental institutions are unprepared to integrate significant numbers of migrants and fear that settlement migration will destabilize the country's social system. The negative perception about incoming migration testifies to the failure of the NSIA, which still strives to present the nation as a welcoming country. Rabat should carefully analyze the popular discontent resulting from the increasing competition over limited economic and social opportunities, which inevitably leads to xenophobic behaviors, growing violence and migrants' social exclusion [45-49]. Indeed, Morocco's open attitude toward incoming migration has alarmed the local population, resulting in the creation of stereotypical portrayals that misrepresent the sub-Saharan community. Migrants are deemed to be poor, dangerous, easy to exploit and—more recently, in the aftermath of the COVID-19 pandemic—diseases carriers [1]. This phenomenon is due to the government lack of awareness about the specific challenges faced by migrants and refugees, especially during unexpected crises.

3. Government response to the sanitary crisis and the impact of COVID-19 on multidimensional inequalities: research and discussion

From the early stages of the COVID-19 outbreak in March 2020, the kingdom established the Comité de Veille Économique, with the task of monitoring the economic situation and identifying appropriate measures, as well as the COVID-19 Solidarity Fund to finance health expenditures and social protection programs. To safeguard the national economy, the IMF provided USD 3 billion emergency fund, followed by the USD 460 million loan granted by the African Development Bank. On January 28, 2021, the Alawite Kingdom launched a massive vaccination campaign that led to the immunization of 37 million persons—48.6% of the total population—due to the mobilization of 2,880 primary healthcare facilities, 3,047 base stations and 10,000 mobile units. The operation started just one week after the first shipment arrival of Oxford-AstraZeneca and Sinopharm BIBP vaccines. In addition, Morocco inaugurated the *liqah* platform and launched an awareness-raising campaign via SMS, with the purpose of clarifying the vaccination procedures [50]. Only in November 2021, the vaccination campaign has been extended to migrants and refugees without identity papers to facilitate their access to healthcare services, including the provision of medical treatments. They could get registered in their neighborhood by presenting their passport or a proof of residence and create an account on Ligacorona [51]. Nonetheless, as stressed by K-Sofore, most of their members did not receive the vaccine dose. However, the Association des Ressortissants Sénégalais Résidant au Maroc, in partnership with the Senegalese government, started an emergency initiative that allowed Senegalese migrants to be vaccinated by showing their passport.⁴ In the first nine months of the sanitary emergency, Morocco has recorded 353,803 COVID-19 cases and 5,789 deaths, with an average fatality rate of 1.6% [52]. By reason of the country's fragile healthcare system, characterized by low bed and physician capacity per person, along with inequalities in access to medical services, the strict lockdown has proven to be crucial in containing the spread of the virus. As reported by Paul-Delvaux, Crépon, Devoto, et al. (2021), almost a quarter of rural households live 10 km away from basic healthcare facilities and the transportation costs are prohibitively expensive. The rural-urban divide is evident when comparing, for instance, the share of births attended by qualified medical staff: 63% in rural areas against 92% in urban areas. According to the Haut Commissariat au Plan's survey conducted in April 2020, the lockdown measures have further restricted the access to healthcare services. Indeed, nearly half of the total households (30%) with one or more members suffering from chronic illness had no access to medical services, among 53% in rural areas and 46% in urban areas [53]. In addition, pregnant women and single mothers faced great difficulties to access pre- and post-natal services (30%) of women who needed consultations), sexual and reproductive health facilities (27% in rural areas and 17% in urban areas) and contraception methods [31]. According to Ennaji, women's physical and mental health have sharply deteriorated due to the interruption of family planning services, literacy, schooling, training programs, and projects aiming at counteracting female malnutrition [54]. Additionally, the 100% Mamans, Association Démocratiques de Femmes Marocaines (ADMF), Association Solidarité Féminine (ASF) and Ennahkil stressed the difficulties of pregnant women, in particular irregular and undocumented migrants, in accessing healthcare facilities during labor. Despite the progresses made in recent years, the healthcare sector was unprepared to deal with the sanitary emergency, by reason of profound territorial and socioeconomic inequalities. The state public health spending accounted for 5% of the total national expenditure, instead of the 12% recommended by the World Health Organization (WHO). In April 2020, the World Bank granted a Disaster Risk Management Development Policy Loan of USD 275 million with a Catastrophe Deferred Drawdown Option. In addition, it has reallocated USD 12 million of existing projects' unused funds to upgrade the healthcare sector and raised USD 35 million from the World Bank Group's Fast Track COVID-19 Facility to improve the technical knowledge of health professionals, equip the research labs with the necessarily facilities and digitalize the systems of detection and tracking [55]. Notwithstanding the impressive social-welfare programs implemented during the health emergency and the extraordinary awareness campaign carried out by King Mohammed VI, there are still great concerns about the state's ability to provide protection to marginalized communities during unexpected crises. Mehdi Alioua, a sociologist and founding president of GADEM, reported that nearly 20,000 migrants and refugees had not received any financial, social or healthcare assistance during the lockdown. Only the wage earners regularly registered to the CNSS had benefited from the COVID-19 Solidarity Fund, which consisted in the disbursement of 2,000 MAD per month. The few people holding a RAMED card could apply for the emergency financial aid of 800 MAD up to 1,200 per month [56]. As was the case during previous crises, regular migrants with adequate levels of resources, better employment and housing conditions, language skills, access to information and a supportive social network have been less exposed to the short- and long-term effects of the pandemic. Others more economically vulnerable and

⁴ Youssef, (2021, December 3), personal communication (in-person semi-structured interview), Marrakech.

with an irregular status have experienced loss of income, unemployment, stigmatization and the deterioration of their living conditions [57]. As stressed by Gravlee, pandemics follow the fault lines of societies, revealing and often amplifying the power inequities that affect population health, even in times of stability [24]. Indeed, the measures adopted to mitigate the effects of the crisis have aggravated entrenched patterns of discrimination and inequality based on ethnic origin, gender and social status. Those factors often intersect, by exposing certain populations to extreme poverty and vulnerability [58]. For instance, Benachour pointed out that localized lockdowns, border closures and restricted mobility have severely affected people with mobile livelihoods, who found themselves stranded across the region. Their ability to return to their homelands or continue working to feed themselves, finance onward mobility or send remittances to their relatives was highly compromised. In June 2020, 50,000 migrants were stranded at international borders, quarantine centers and transit points in West and Central Africa [59]. The COVID-19 pandemic has also multiplied the risks associated with the journey, causing migrants and refugees to be more dependent on smugglers. In addition, loss of income and protracted immobility set off a vicious cycle, as people with mobile livelihoods had to resort to dangerous coping mechanisms, such as accepting abusive working conditions or borrowing money from dubious lenders. At the outbreak of the crisis in April 2020, migrant smuggling considerably declined due to stricter border controls and a general reduction of interregional mobility. Nonetheless, smugglers have continued to operate in the Central Mediterranean route to Italy and the West African route to the Canary Islands, as demonstrated by the growing number of sub-Saharan migrants smuggled into Europe.

Our, albeit brief, presence in Morocco allowed us to approach the research with an insider's eye, delving more closely into the issues addressed. Key informants testified that the closure of borders and, consequently, of the legal routes of immigration, compelled migrants to use hazardous routes to bypass the COVID-19 mobility restrictions. This phenomenon was proven by the re-emergence of the Atlantic route from the West African coasts to the Canary Islands, which has become the deadliest sea route from Africa to Europe. Indeed, between January and mid-November 2020, there were 40 reported shipwrecks, with 529 people who have died or gone missing [39]. Despite the development of the NSIA, Rabat is still unable to effectively support migrants and refugees during unexpected crises. For this reason, most CSOs reoriented their agenda by privileging service-oriented initiatives at the expense of Vocational Education and Training (VET), local development and advocacy programs with the purpose of increasing the resilience capacity of the most marginalized social groups, notably, sub-Saharan women and youth in precarious situations. As stressed by Sarah, the founder of SOS Travailleuse à Domicile, which is a network of 325 sub-Saharan women employed as housekeepers in Casablanca, the working and living conditions of female migrants have severely deteriorated during

⁵ Sarah N., (2022, 4 April), online communication (semi-structured interview), Savona. Foutumata D., (2021, December 5), online communication (semi-structured interview), Savona. Sarah (2022, March 29), online communication (semi-structured interview), Savona. Philemon Beb a. Don, (2022, April 2), online communication (semi-structured interview), Savona. Fofana Lassana, Traore H. Falikou, (2022, April 6), online communication (semi-structured interview), Savona. Carmen Romero (2022, April 7), online communication (semi-structured interview), Savona. Nadia, S.M., (2021, December 6), personal communication (in-person semi-structured interview), Marrakech. Youssef, Sanu, Jaineba, Ammina, Adah (2021, December 5), personal communication (in-person semi-structured interview), Marrakech.

the lockdown. Single mothers and unmarried/unaccompanied girls strived to survive by keeping their employment in the informal economy. Most of them worked as cleaning ladies in private houses, cafés and hammams, and they were increasingly subjected to segregation and physical punishments. Indeed, their employers feared that they could be infected by the virus once they returned to their homes. Therefore, they were compelled to decide whether to go back home and lose their employment or stay and be treated as slaves. As explained by Philemon Beb A. Don, the president of Association Migrantes et Démunis (AMD), the situation of sub-Saharan women is alarming. Young girls are often persuaded by their male relatives, who have already settled in Morocco, that they would easily find a job. However, once illegally emigrated, they are sold to locals or left on the streets, being forced into mendicancy or prostitution. During the COVID-19 outbreak, most of them suffered from mental illnesses due to the increasing violence and sexual abuse, coupled with the poor living and working conditions.⁷ Assirida and AMD received around 30 requests of assistance from abused cleaning ladies every week. During this period, local CSOs tried to mediate between the two parties by convincing immigrant women to get vaccinated before returning to duty. Furthermore, financial hardship and a lack of basic livelihood led to an increase in domestic violence, mostly affecting the poorest households. As stressed by Fofana Lassana, the president of Assirida, Assirida received about 500 requests of assistance per month from sub-Saharan women subjected to gender-based violence.8 According to Mobilizing for Rights Associates (MRA), gender-based violence (GBV) in Morocco was already a pandemic prior to the sanitary emergency. However, this phenomenon was exacerbated by the restrictions imposed to contain the virus. Indeed, the national survey conducted by Ministre de la Solidarité, du Développement Social, de l'Egalité et de la Famille (2019) revealed that 7.6 million women aged between 15 to 74 years (57%) reported having experienced at least one act of violence during the lockdown, usually perpetrated by their husbands or relatives [60]. Violence against vulnerable women was amplified by reason of the lockdown's constraints, notably, (i) forced cohabitation 24/7 in small, overcrowded and inadequate housing; (ii) fear of being infected by the virus and infecting the elderly family members; (iii) the limited access to listening centers, hospitals and court VAW units; (iv) the lack of accommodation facilities for battered women or wives ejected from their marital homes; (v) mobility restrictions and the need for authorization to leave the house, usually owned by the husband; (vi) increased domestic workload with additional responsibilities; (vii) the lack of digital devices and the high illiteracy rate that prevented women from reporting violence and obtaining protection; and (vi) the increased vulnerability of women working in the informal sector and the consequential economic dependence on relatives, procurers or smugglers. The influence of contextual factors is equally determining, notably, the functioning of the COVID-19 allowances. Indeed, women employed in the informal economy are not registered to the CNSS, while RAMED cards are usually owned by the male heads of the household. As stressed by Stephanie W. Bordat, a co-founder of Mobilizing for Rights Associates, female economic precariousness and forced isolation

⁶ Sarah (2022, April 4), online communication (informal conversation), Savona.

⁷ Philemon Ousmane Beb Adon (2022, April 2) online communication (semi-structured interview), Savona.

⁸ Fofana Lassana (2022, April 6), online communication (semi-structured interview), Savona.

⁹ Data collected by Ennakhil Listening Center as part of the project «Contribution à la lutte contre la violence basée sur le genre impactée par la crise du COVID-19 dans la région Marrakech-Safi», 2020.

have exacerbated women's vulnerability, preventing them from the opportunity to flee violence. 10 Khadija Trikaro, the administrative director of Fédération des Ligues des Droits des Femmes (FLDF) in Casablanca, pointed out that the existing reception structures did not have enough places available for abused women. Additionally, accommodation facilities were multifunctional centers that do not meet the specific criteria required to host victims of GBV. 11 According to Ennakhil, the limited capacity of accommodation facilities and the ban on traveling that prevented abused women from reaching shelters in nearby cities increased the gravity of psychological and physical violence. For instance, young rape victims who got pregnant during the lockdown have experienced severe depression, by reason of their limited access to abortion, with no choice but to turn to risky traditional practices or attempting suicide. 12 Street children and youth in precarious situations, many of whom are second-generation migrants, have also been severely affected by the pandemic. Indeed, most of them have been persuaded that the streets could offer them better chances of survival than society, profiting from the informal economy, stealing or begging, and the feelings of belonging to a clan [61]. During the sanitary emergency, they experienced a loss of income due to the lack of tourists, being at risk for coerced labor, sex trafficking and prostitution. Furthermore, as highlighted by Khalid Msari, the director of Association d'Initiative Citoyenneté, Education, Environnement et Développement (AICEED), before the pandemic, street children were "invisible" in the public space since they used to build their shelters in hidden places. However, during the lockdown, when streets were deserted, the children became very visible. In Tangier, local authorities destroyed their shelters due to the population's complaints. As a result, street children rebuilt them in other places, often very noticeable, such as cafés or restaurant terraces. The local population dealt with an unprecedented phenomenon and was outraged by the children's habits, language and disrespect, resulting in a very conflictual situation. Local authorities used to relocate street children to the outskirts of the city or to reception facilities perceived as fully fledged prisons. Paradoxically, the relaxation of restrictions exacerbated this phenomenon, since retailers feared that children's "visible" presence in the public space could ruin their business. Moreover, street children are often affected by severe disabilities or healthcare conditions that require constant medical care. Nonetheless, if not accompanied by local CSOs, they have no access to medical facilities, even in normal circumstances. During the sanitary crisis, most hospitals were exclusively devoted to COVID-19 patients; thus, street child access to healthcare facilities was further restricted. As explained by Msari, street children needed a proof of identity or a MASSAR number to get the COVID-19 vaccine. Nonetheless, since migrant children do not have any documentation, they were consequently excluded from the possibility to be vaccinated.¹³

According to the WHO (2020), vulnerable migrants and refugees are left behind in the government response to crisis, by reason of a general lack of awareness about their specific challenges and vulnerabilities. The limited access to sanitation facilities, the impossibility to comply with physical distancing and hygienic measures, the increasing obstacles to accessing healthcare services, the high rates of homelessness, the loss of income and the uncertainty regarding their legal status have highly

¹⁰ Stephanie W. Bordat (2022, April 22), online communication (semi-structured interview), Savona.

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¹¹ Khadija Trikaro (2021, December 10), personal communication (semi-structured interview), Casablanca.

¹² Nora (2021, December 12), personal communication (semi-structured interview), Marrakech.

¹³ Khalid Msari (2022, April 12), online communication (semi-structured interview), Savona.

compromised their resilience capacity. To include migrants and refugees' needs in the country's EAP, it would be necessary to (i) facilitate their access to the formal labor market, medical care, a basic livelihood, information and social and financial assistance; (ii) prevent deportation, expulsion and dislocation; and (iii) encourage social and labor integration by promoting regularization campaigns and fighting against xenophobia and stigmatization [62]. The COVID-19 outbreak allowed the acknowledgment of the limits of the NSIA and improvement of the migration management response. Indeed, ineffective social safety nets and poor living and working conditions not only harm some people more severely than others, but they pose risks to everyone. In addition, the rise of the shadow economy is the direct consequence of the state's inability to generate sufficient jobs to absorb a continuously growing unskilled workforce and facilitate the formalization of small-business activities. This phenomenon contributes to increase corruption, fiscal evasion and unfair competition against the formal economy, hindering human capital accumulation and sustainable economic development. Therefore, the sanitary emergency could be an opportunity to rethink the current approach to human development by specifically targeting multidimensional inequalities through the strategic cooperation between state and local governments and CSOs. Furthermore, as stressed by Menara, policy measures alone are insufficient to address the problems related to the increasing flow of illegal migrants. Encouraging voluntary returns, facilitating the integration of those migrants who aspire to settle in the country and implementing a multilateral framework that envisages the dialogue and cooperation between different stakeholders—including the European Union, host nation and origin country—are necessary preconditions to counteract human and sex trafficking [42].

4. CSOs and COVID-19: development of a community-centered approach

There are three main obstacles that hamper the effectiveness of the NSIA. First, the European Union attempts to externalize control across its borders and the consequential implementation of stricter regulations concerning security and civil protection. Indeed, migrants and refugees are constantly subjected to violence and police brutality at the Spain and Algerian borders. In June 2022, at least 23 sub-Saharan migrants were killed in clashes with the Moroccan security forces, following an attempt to reach the enclave of Melilla [63]. Second, the kingdom's effort to encourage the inclusion and integration of the immigrant population demonstrates several structural and organizational flows. For instance, during the sanitary emergency, key informants reported having received assistance only from local CSOs that provided migrants with medical and psychological care, financial aid and a basic livelihood. Despite the fact that the vaccination campaign was extended to migrants without official identification in November 2020, most CSO members did not get a vaccine dose. In addition, many UNHCR-recognized refugees have not obtained the refugee status by the Moroccan authorities, being stranded across international borders without the possibility to access a basic livelihood, while even those holding a residence permit were excluded from social protection or medical care. Persistent xenophobia and discrimination compelled migrants to accept low-skilled temporary jobs in the informal economy, which limited their possibility to finance ongoing mobility or sustain themselves and their relatives. Third, since the implementation of the NSIA (2013), Moroccan media coverage began playing on the citizens' fear by oversimplifying the complex reality of migrants through the creation of stereotypes. As explained by Lemaizi (2017), national newspapers, including Al Akhbar, Assabah and Al Massae, conveyed the image of the "African drug dealer" and "prostitution ringleader" [64,46–49]. This

phenomenon was exacerbated during the COVID-19 pandemic, when migrants started to be perceived as "virus carriers" [1]. Security-focused journalism justified the eviction of illegal camps, the expulsion of migrants and the use of excessive violence by the Moroccan security forces as part of the kingdom's strategy to counteract human and sex trafficking. Nonetheless, the Catholic Church and local CSOs began strengthening their communication activities by creating new narratives that addressed the reality of migration. For instance, the Diocesan Delegation of Migrants developed the Migration Desk to circulate the testimonies and stories of migrants, with the purpose of curbing misinformation in mainstream media [41]. According to Lemaizi (2017), Moroccan society has not yet come to terms with the institutional changes of the NSIA, and, especially, the transformation of the kingdom from a country of transit to a destination hub for sub-Saharan migrants [64]. Over the last 10 years, the tension between these three dimensions has become more pronounced, leading numerous local and international CSOs to support the government's initiative with the publication of studies and surveys highlighting the benefits of migration, including sustainable economic development and cultural diversification. Moreover, drawing inspiration from the international and regional experiences, particularly in the aftermath of the Arab Spring, Moroccan CSOs have implemented an intersectional approach able to identify and address the needs of the immigrant population. By creating a nationwide network of contacts, civil society did a remarkable job of bringing together different associations and governmental bodies. Moreover, the CSOs' agenda not only deals with advocacy campaigns, with the purpose of raising public awareness on topics such as gender-, ethnic- and disability-based discrimination, but it includes basic legal and sexual education, along with vocational trainings specifically targeting vulnerable social groups. This two-pronged strategy enables the formation of a civic rights-conscious population that is capable of appreciating migrants' cultural heritage and skills. Since refugee and migrant-led CSOs played a significant role in providing relief services to the most vulnerable, they have become the rightful expression of the marginalized communities' social demands in the vacuum of a genuine political representation. During the COVID-19 outbreak, CSOs not only played the role of intermediary between the formal institutions and the population, but they also developed innovative strategies to address the governmental shortcomings. Civic organizations, rather than contesting the state's action—except for Collectif Citoyen, which strived against the vaccine pass—were mobilized to improve the collective response to the sanitary crisis, drafting surveys about the major COVID-19-related structural and institutional concerns, encouraging solidarity initiatives and organizing raising-awareness campaigns. As explained by Stephanie W. Bordat, a founding partner of Mobilizing for Rights Associates, which has created a network of 100 associations operating in different Moroccan regions, local authorities have proven to be particularly proactive during the lockdown, improving cooperation between governmental and non-governmental actors and eliminating time-consuming procedures to accelerate the implementation of strategic interventions. This new approach allowed for the avoidance of the duplication of efforts and amelioration of the state's response to crisis. 14 Furthermore, for the first time, Moroccan CSOs have adopted a communitycentered approach that directly involved the population or representatives of special-interest groups in the design and planning of solidarity initiatives, particularly, the delivery of a basic livelihood and financial aid, coupled with the transformation of existing recreational clubs into accommodation

¹⁴ Stephanie W. Bordat (2022, April 22), online communication (semi-structured interview), Savona.

facilities for homeless people. Refugee and migrant-led organizations, which usually lack the funding and organizational capacities, worked in partnership with local CSOs to support the immigrant population. Furthermore, they attempted to establish contact with European CSOs with the purpose of strengthening the immigrant population's resilience capacity and increasing their chance of survival once emigrated into Europe. Many CSOs are trying to obtain the status of Cooperative to allow their members to continue their entrepreneurial activities in a lawful manner. CSO advocacy and grassroot interventions proved to be ultimately successful when King Mohammed VI, in July 2020, announced the extension of the social security assistance to all Moroccans within 5 years. Moreover, the establishment of a *Unified Social Registry*, planned for 2023–2025, together with an *Integrated Management System* for social protection programs, are expected to enhance the coordination between CSOs and public and private actors, and to improve the targeting of the beneficiary population [52].

As shown in Table 2, since the early stages of the COVID-19 pandemic, interviewed CSOs have provided the immigrant population with basic livelihoods, financial aid and legal and logistic support. Moreover, they tracked and monitored the spread of the virus and organized awareness campaigns about the risks associated with the disease, the social consequences of lockdowns and prevention measures. CSOs have also strengthened their digital capacity building and technological expertise, thanks to research-based associations such as Mobilizing for Rights Associates, to guarantee educational continuity, psychological and moral support to their beneficiaries. CSOs made available on their social network platforms the emergency contacts of each region's social workers, civil servants, psychologists, medical professionals, advocates and district prosecutors to ameliorate the coordination between different governmental and non-governmental bodies. Even though refugee and migrant-led groups are usually underfunded, they have developed different strategies to raise money for the beneficiary population. In regard to the city of Marrakech, the three feminine committees operating in the Saada, Doha Massirra and Hay Zituoune districts collected 10 to 20 MAD for each member every month, and the amount was distributed to poor migrant families by drawing lots. In addition, some CSOs have developed online platforms to facilitate people's identification of the specific service that their condition required. Since most marginalized communities have no access to internet connection or digital devices, most CSOs used accessible tools, especially WhatsApp, Zoom and Google Meet, to share short videos or audio about a topic of interest, and they organized roundtables to encourage debates. Among the most discussed topics were COVID-19's risks and prevention, hygienic measures, cooking recipes to counteract children's malnutrition, children's activities and psychological support, taking care of oneself and creating a healthy familiar environment. Some CSOs held vocational trainings in hospitality, bakery, gardening or handcraft in WhatsApp's groups and provided the poorest households with phone cards and e-tools to guarantee education continuity for their children. For instance, ASF and Fondation Orient et Occident (FOO) have pledged their support to migrant single mothers, through online focus groups and individual session, by suggesting activities and games to

¹⁵ Nadia, S.M. (2021, December 6), personal communication (in-person semi-structured-interview), Marrakech. Chaimah Wahb (2021, December 8), personal communication (in-person semi-structured interview), Casablanca. Fathia, Aisha (2022, March 29), online communication (informal conversation), Savona. Claire Trichot (2022, April 4) online communication (semi-structured interview), Savona. Khadija Trikaro (2022, April 5), online communication (semi-structured interview), Savona.

mitigate their children's psychological distress. Considering that most vulnerable people had no possibility of staying informed about the sanitary emergency, WhatsApp's groups were also used to share the latest news. Furthermore, Facebook and Twitter pages were often employed to launch fundraising campaigns, aiming at financing solidarity action initiatives, such as the distribution of food baskets, vouchers, hygienic and school kits, clothes and cash. One of the most interesting strategies, i.e., the "SOS Migrants" online platform, has been launched by FOO in partnership with the Netherlands Embassy, Organization International de Migrantes (OIM), UNHCR and United Nations International Children's Emergency Fund (UNICEF). This nationwide coverage's initiative enabled the delivery of food baskets, hygiene kits, phone cards, housing aids, medical supplies and tablets for distance learning to 243 households and 300 children. FOO's project also guaranteed education continuity through capacity-building classes, as well as remedial courses. Moreover, PsyFOO Listening Unit allowed the association's psychologists to assist vulnerable families in Rabat, Casablanca and Tangier. During the lockdown, *PsyFOO* received 222 aid requests, gave 183 personal consultations and followed 113 practices. The R-Radio's initiative enabled FOO to give voice to migrants and refugees with the purpose of raising awareness about their COVID-19-related daily problems. In addition, the sanitary emergency drastically changed the VAW units and female association's agenda, whose main objective is to create "safe spaces" enabling women to build support networks, insofar as an abusive environment isolates them from their emergency contacts. Nonetheless, lockdown and social distancing have physically prevented victims of GBV from reaching these spaces, making marginalized women even more vulnerable to abuse and violence. 16 Therefore, the interviewed CSOs' VAW units have redesigned their strategy of action, working mostly by phone or through social media. Notwithstanding the few resources available, civil society organizations did a remarkable job to recreate these "safe spaces" online, through WhatsApp and Facebook's groups, Zoom, Skype and Google's meetings. Furthermore, illiterate women victims of GBV, especially in rural areas, could obtain assistance by explaining their situation on WhatsApp's audio messages. Interestingly, Ennakhil and ATEC are developing two freely downloadable applications—"Fintmchi" and "Stop la Violence Numérique" respectively—to counteract GBV. The apps allow women to report violence by filing the complaints online, making the process faster, easier, and more accessible than before. As reported by Al-Amane, they have been able to support 206 women in just three months thanks to teleworking. Prior to the COVID-19 outbreak, ATEC recorded about 300 cases per year. During the lockdown, they dealt with 700 cases due to remote assistance. Nowadays, the VAW units work almost exclusively online or by phone, since teleworking not only allows social workers to process cases more quickly and efficiently but enables a better coordination between different governmental and non-governmental bodies.¹⁷

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¹⁶ Nadia (2021, December 6), personal communication (in-person semi-structured interview), Marrakech). Chaimah Wahb (2021, December 8), personal communication (in-person semi-structured interview), Casablanca. Fathia, Aisha (2023, March 29), online conversation (semi-structured interview), Savona. Hania B., C.N. (2022, April 6), online communication (semi-structured interview), Savona.

¹⁷ Mubarak, Nora B. (2021, December 7), personal communication (in-person semi-structured interview), Casablanca. Nadia (2021, December 6), personal communication (in-person semi-structured interview), Marrakech). Chaimah Wahb (2021, December 8), personal communication (in-person semi-structured interview), Casablanca.

Table 2. CSOs sociopedagogical activities during the COVID-19 outbreak.

Sociopedagogi cal Initiatives	MRA	ADFM	ASF	SOS trav.dom.	Al-Amane	Ennakhil	100% Mamans	AMVEF	FLDF	ATEC	AMD	K-Sofore	FOO	AICEED	Al-Karam	ASSIRIDA
Digital Capacity- Building	X	X					X			X			X		X	
Distance Vocational Training			X								X	X	X	X	X	X
Distance Learning Courses		X	X								X	X	X	X	X	X
Advocacy Campaigns	X	X		X		X				X						
Raising Awareness Campaigns	X		X	X	X	X	X		X	X	X	X	X			X
Fundraising Campaigns			X		X							X				
Delivery of Basic Livelihood				X			X						X		X	
E-Learning Platform					X											
Self- development Podcast									X							
Psychological, Legal, Moral Assistance				X	X		X	X		X	X	X	X	X	X	X
Remote VAW Assistance					X	X		X	X	X						
App and Online Platforms						X			X	X			X			

It is worth mentioning that Moroccan CSOs have always paid particular attention to the education continuity of marginalized communities. In the aftermath of King Mohammed VI's accession to the throne (1999), the number of CSOs operating in Morocco grew significantly, and it further increased in 2005 with the launch of the Initative Nationale pour le Développement Humain (INDH). According to the Ministry in Charge of the Relationship with Parliament and Civil Society, the estimated number of CSOs operating in Morocco reached 160,000 organizations in 2019 [65]. As underlined by Dimitrovova (2009), Morocco's increased political openness and pluralism brought to CSOs a new dimension of internationalization, diversification and professionalism [66]. These changes positively affected the society, driving private citizens to form an increasing number of religious and communal organizations dealing with a variety of issues, such as human and women rights' protection, sustainable development, marginalized social group education and cultural preservation [67]. The development of

The National Charter for Education and Training provided the guidelines for the process of education reform by declaring the years of 1999–2009 as the "decade of education". Indeed, Morocco aspired to increase the number of qualified workforce employed in the formal labor market through the establishment of more accessible VET programs and work-related learning projects. The Ministry of Education increased the number of scholarships by 177% and focused its strategy on encouraging VET's enrollment by inaugurating 27 vocational institutes [68]. Under the umbrella of global governance evaluation, Moroccan educational policy started to include mechanisms such as participatory governance, decentralization and performativity [69]. Nonetheless, VET and working-related learning projects can still offer only one place for every five eligible applicants, by reason of their limited capacity, prompting vulnerable social groups to seek opportunities in the shadow economy [70]. For this reason, over the last three decades, Moroccan CSOs backed by international organizations have taken responsibility for the education and vocational training of the most vulnerable, with the purpose of improving sociopolitical participation and facilitating marginalized people's access to the formal labor market. In the early 2000s, civil society's sociopedagogical effort focused on mobilizing the public opinion to reform the Moudawana by raising awareness on the "women question" through the adoption of innovative communication strategies, such as social media, radio and TV advertising. This nationwide grassroot mobilization improved CSOs' participation in decision-making processes, which led to the creation of more structured civic organizations, with an improved agenda and more sociogeographical representation [71]. As reported by the Conseil Supérieur de l'Einsegnement (2008), since the early 2000s, the number of people benefiting from literacy and education programs has risen from 233,650 in 2000 to 709,155 in 2007, with an annual increase of 17.2%. The major operators are CSOs, which account for 44% of the beneficiaries, followed by the public sector (34%), general programs (21%) and private companies (0.68%) [72]. In addition, the research study carried out by the Ministère de la Solidarité, de la Femme, de la Famille, et de Développement Social (MDSFS) on 1254 Moroccan CSOs and 400 partners revealed that Moroccan CSOs' development strategy mainly focuses on education continuity, VET and advocacy programs (78% of the interviewed CSOs), local development and poverty eradication (53.3%), as well as a service-oriented initiative to increase the resilience capacity of the most vulnerable social groups (41%) [73]. Creating an inclusive education system capable of addressing migrant children's pedagogical needs was among the NSIA main objectives. 18 Indeed, as Morocco has been increasingly becoming a destination hub for most sub-Saharan migrants, establishing an inclusive and multicultural education system was necessary to encourage tolerance and improve migrant children's psychological well-being [74]. As pointed out by Ramona Amthor and Kevin Roxas, VET programs, by providing personalized support to migrant and refugee children, can accelerate the acquisition of skills, becoming fundamental to bridge education and language gaps. In addition, migrant youth often prioritize work instead of education, by reason of mobile livelihoods and the responsibility of taking care of their parents [75]. Therefore, in a context characterized by social inequalities and economic fragility, combining free compulsory education with a series of programs enabling marginalized social groups to acquire competences expendable in the formal labor market is a necessary pre-condition to reduce poverty. Since the early 2000s, as reported by the Ministry of Migration, CSOs have played a

¹⁸ For an overview of the program's main achievements, see the documents available a https://marocainsdumonde.gov.ma/en/programmatic-achievements/.

significant role in supporting migrant households. Indeed, most parents are often unaware about the possibility to enroll their children in formal or non-formal education since information is rarely translated into French or English. During the last decade, FOO, backed by 15 local CSOs, has held most of the migrants' language and vocational trainings, significantly improving their integration into society. In 2013, only 110 migrant children were enrolled in VET, but thanks to local CSOs, this number grew to 1,628 the following year [76]. As reported by the interviewed CSOs (Table 3), most programs specifically address Sub-Saharan single mothers, who are likely to work as cleaning ladies or sex workers, making them at risk of sexual or labor exploitation. Female associations and solidarity restaurants' formative programme usually includes 6-months of training in hospitality, bakery, tailoring or cosmetic, followed by a stage in local riads, hammams, hotels or restaurants. CSOs dealing with vulnerable migrants and refugees organize paid or free VET, according to the applicant's economic possibility, in many job sectors. They address migrant single mothers, sex workers, and women and children in precarious situations, often victims of GBV. For instance, AMD and Assirida held vocational trainings in hospitality, bakery, cosmetic, hairstyling and informatics for 20 persons per class, along with language courses in French, English and Arabic. As explained by Khalid Msari, despite the INDH grants a special fund to disability focused CSOs, allowing them to pay for schools' supplemental materials, such as books, technical equipment and children's transportation costs, most children with disabilities are still unable to access public education. Moreover, since none of these financial benefits is directly allocated to households, children in precarious situations can receive assistance only by joining local CSOs. 19

Nonetheless, during the lockdown, most VET programs and schooling remedial courses addressing sub-Saharan women and children in precarious situations were temporarily interrupted, while female solidarity restaurants closed their doors for three months, employing all of their financial resources to pay the employees' salaries. Despite the suspension of most relief programs, by implementing a community-centered approach, Moroccan CSOs have created and mobilized a network of migrants able to develop coordinated strategies with the purpose of addressing immediate challenges. For instance, Association 100% Mamans mobilized 25 single mothers to assist 650 women and children in precarious situations. Moreover, in partnership with UNICEF, the CSO recruited 25 representatives (15 Moroccan and 10 migrants) to establish a community mechanism aiming to raise awareness about COVID-19 prevention strategies, reduce domestic violence and promote positive parenting. A similar initiative was undertaken by ASF, who involved its beneficiaries in the distribution of food baskets to 25 single mothers and 1,200 poor households. Refugee-led CSOs, in partnership with Banque Alimentaire du Maroc, Banque Solidarité, OIM, Handicap International du Maroc and Caritas, delivered basic livelihood items, such as food baskets, clothes and financial aid, to cover expenses for accommodation and medical bills. One of the most interesting projects was developed by AICEED, which repatriated 35 migrant street children of Tangier in just one week. The association's educators and volunteers, by working with local CSOs, prepared and delivered 100–150 meals per day. During the lockdown, as stated by key informants, the only way to continue moving was from the port of Tangier Med, where the immigrant population started to settle. CSOs asked for the authorization to support the community, but, after rejecting the request, local authorities dismantled the camps. By the end of the three-month lockdown, Moroccan CSOs had resumed the suspended

¹⁹ Khalid Msari (2022, April 12), online communication (semi-structured interview), Savona.

projects. Nonetheless, all interviewed associations decided to maintain a mixed system, both remotely and in-presence, to support people in precarious situations, keep in direct contact with the beneficiaries and guarantee vulnerable social groups' education continuity.

Table 3. Most common sociopedagogical initiatives carried out by the interviewed CSOs.

CSOs	Sociopedagogical Initiatives					
Feminist	- Literacy and schooling training;					
Associations and	- French and English languages courses;					
Solidarity	- VET in hospitality, bakery, tailoring, jewelry-making and cosmetic.					
Restaurants	- Organization of youth-oriented seminars and workshops about citizenship rights, se					
	education, individual capacity-building and self-development.					
	For instance, Ennakhil trained in hospitality 30 women coming from disadvantaged background					
	every 6 months, while ASF supported and trained in bakery, hospitality, tailoring and cosmetics					
	fields 50 single mothers each year.					
Vulnerable	- Advocacy initiatives to raise awareness about physical and mental disabilities;					
Children	- Literacy and schooling training for people with physical and mental disabilities;					
	- Art and informatics courses;					
	- VET and paid internship for people with mental disabilities in hospitality, tailoring, gardening					
	and carpentry to promote youth integration into the labor market;					
	For instance, AICEED under the program école de la deuxième chance held education continuity					
	programs for 100 children each year.					
Migrants,	- Advocacy initiatives to raise awareness about migrants' everyday challenges;					
Refugees and	- French and English languages and informatics courses;					
Asylum Seekers	- VET in cosmetic, hairdressing, bakery, hospitality, tailoring and entrepreneurship;					
	- Sexual education and free Sexually Transmitted Diseases (STD) consultation;					
	- Sports and cultural activities to encourage intercultural exchange;					
	- Seminars and workshops on human and migrants' rights;					
	For instance, AMS organizes nursing and OSS courses addressing 25 migrants every 3 years,					
	while K-Sofore, in partnership with al-Amane, offers a 6-month child-minder course every year.					

5. Conclusions

When, as Italian scholars, we think about the topic of migration, we cannot ignore the tendency of mainstream media to oversimplify the reality of migrants. Caught in the trap of sensationalism, newspapers, television and radio broadcasts disseminate information about thousands of individuals, the majority of whom are young males, who secretly cross the Italian borders in the darkness of night without official identification or regular permits. Public broadcasters provide detailed descriptions of rubber dinghies and vessels carrying dehydrated sick bodies to our southern lands [77–82]. The purpose of the narratives is almost never to encourage solidarity or humanitarian endeavors, as the piece of "news" in itself, is a continuous crescendo that aims to add ever-new stereotypes in the map of fear. The case of Morocco is quite interesting by reason of the proliferation of three different narratives that compete against each other, fueling the widespread confusion about internal migration: (i) the Western storyline that describes the kingdom as the country of origin of thousands of people that try to illegally cross its borders every year to reach Europe; (ii) Moroccan journalism that portrays

the sub-Saharan migrant as a threat to national security; and (iii) the discursive framework developed by the governmental institutions that try to present the nation as a welcoming country by describing migration as an economic opportunity.

We consider our research as an asset to wade through these misleading narratives, which fail to properly describe the reality of internal migration to Morocco. Indeed, the negative perception about incoming migration not only testifies to the failure of the NSIA, but it has led to increasing violent and xenophobic behaviors, particularly those affecting sub-Saharan women and girls. This phenomenon severely worsened during the COVID-19 outbreak by reason of mobility restrictions and the closure of borders, which set off a vicious cycle, as people with mobile livelihoods had to resort to dangerous coping mechanisms, such as accepting abusive working conditions, borrowing money from dubious lenders or relying on procurers and smugglers. On a positive note, in contrast with existing research about behavioral changes during the COVID-19 pandemic, the present study has shed light on the emergence of social behaviors based on collective care. In addition, the analysis of the existing flaws in the country's migrant management policies allows the formulation of more effective tools to strengthen the resilience capacity of vulnerable migrants and refugees. Therefore, the COVID-19 pandemic could become an opportunity to rethink the current approach to human development by specifically addressing multidimensional inequality and discrimination through the strategic cooperation between governmental and non-governmental bodies. By offering a picture of a Moroccan mixed-migration landscape, including the abuse and violence suffered by sub-Saharan migrants, the present research is a starting point to further investigating Moroccan immigration, reception and integration policies.

Conflict of interest

The authors declare no conflict of interest

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