

## Addictive Behaviors

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A dramatic upsurge is observed worldwide in addictive behaviors, whether they relate to using psychoactive substances, such as tobacco, alcohol, drugs, or potentially addictive activities like sports betting, gambling, or the internet.

Morocco is no exception to the rule. The review of the different manifestations of addictive behavior provides insight into how widespread and manifold the phenomenon is. Based on the latest indicators and data, this situation is worrisome:

- Psychoactive substance use is estimated at 4.1%, drug abuse and dependence at 3%, alcohol abuse at 2%, and alcohol dependence at 1.4%;
- 18,500 injecting drug users with high rates of both hepatitis C (57%) and HIV (11.4%);
- About six million smokers, including half a million minors under the age of eighteen;
- 2.8 to 3.3 million gamblers, 40% of whom are considered high-risk gamblers;
- The pathological use of the internet, screens and video games is on the rise among teenagers and young adults.

Addictions of all types adversely affect and alter end users' psychic integrity and health. Other than that, addictions are costly and potentially damaging to people's relationships with their families, their incomes and material resources, the community's health and psychological well-being, and by extension, the country's economic and social growth potential.

As part of our country's efforts to address this issue, the Ministry of Health developed a national strategy to combat addictions. However, there is a lack of understanding as to why addictions are not properly recognized and covered by social welfare institutions. Furthermore, contrary to WHO guidelines, these behaviors do not constitute illnesses that require treatment. Plainly, public policies in this area are lacking due in part to a repressive approach as well as outdated and nonprotective legal schemes.

Based on the situation diagnosis, the ESEC suggests, inter alia, adopting a set of recommendations:

1. Provide health insurance coverage for substance or substance-free addictions.
2. Amend and update the legal framework of health coverage to specify the types and nature of addictive disorders that require treatment.

3. Enact stronger sanctions against illicit substance dealers and amend the criminal law to authorize drug users to benefit from therapeutic injunctions.
4. Allocate a sustainable share (10%) of state income from legally accessible products and services that are potentially addictive (tobacco, alcohol, horse racing betting, lottery, sports betting) to care, research, and prevention. Combined, these products and services generate over MAD 32 billion, nearing 3% of GDP, which represents 9.1% of tax revenue.
5. To build up human resources, recognize addictology as an academic discipline and adopt the statutes for related professions such as psychology and occupational therapy.
6. Increase the resources of the Moroccan National Observatory on Drugs and Addictions (OMDA) to ensure regular monitoring, publication, and evaluation of data on the prevalence, types, effects, and methods of reversing both psychoactive substances and behavioral addictions.
7. Launch a National Plan to prevent and combat addictions in the workplace.
8. Establish an oversight agency to regulate the ethics and practices of the betting and gaming industry to preempt and combat addictive behaviors.
9. Scale-up access to opiate substitution treatment in all penitentiary institutions while allowing addicted inmates to access healthcare services if they so wish.