

REPUBLIC OF MAURITIUS

STATISTICS

IN

MAURITIUS

A GENDER APPROACH

2019

TABLE OF CONTENTS

1	Population, Marriage and Families	4
1.1	More newborn boys	4
1.2	Population Growth Rate	4
1.3	More Elderly Women	5
1.4	Dependency Ratio	6
1.5	Population Age Structure	6
1.6	The number of households increases but household size decreases	7
1.7	Women headed households are on the increase	7
1.8	Age at first marriage increasing	7
1.9	Fewer Marriages, More Divorces	8
1.10	More unmarried parents	9
1.11	Marriages of minors aged 16 years and above	9
1.12	Teenage Pregnancy	10
1.13	Services at Drop-In-Centre	11
2	Health	12
2.1	National health system	12
2.2	Life Expectancy of women and men	13
2.3	Lower mortality rate of women compared to men	14
2.4	Diabetes-leading cause of mortality for women	15
2.5	Accidents – External causes of death	15
2.6	Infant mortality rate on a decreasing trend	16
2.7	Maternal mortality on the rise	17
2.8	HIV/AIDS	17
2.9	Family Planning and Contraceptive Use	19
2.10	Antenatal Care	21
3	Education	21
3.1	Overview of the education system	21
3.2	Expenditure on education	22
3.3	Literacy gap between men and women is narrowing	22
3.4	Enrolment in Day-Care Centres	22
3.5	Boys and girls are equally likely to go to pre-primary and primary schools	22
3.6	A slightly higher proportion of girls complete basic education (primary) than boys ...	24
3.7	Girls perform better than boys in PSAC examinations	25
3.8	Girls are more likely to be enrolled than boys at secondary level	25
3.9	Girls are less likely than boys to drop out	26
3.10	Girls perform better than boys in SC and HSC examinations	26
3.11	More women than men in the staff room	27

3.12	Girls less likely to enrol for technical and vocational education.....	27
3.13	Girls are more likely to be enrolled than boys at tertiary level	28
3.14	Fewer women than men in research.....	29
3.15	Women were underrepresented in science-related fields	29
3.16	Home Economics	30
4	Employment and work.....	31
4.1	Employment.....	31
4.2	Women are less likely than men to participate in the labour force	31
4.3	Unemployment	32
4.4	Young women are more likely to be unemployed than young men.....	32
4.5	For both women and men, employment in the services sector keeps growing	35
4.6	Women are less likely than men to be managers	36
4.7	Men as well as women are more likely to be employees	37
4.8	Men are more likely than women to be in vulnerable employment	37
4.9	Men are more likely than women to be engaged in small business	37
4.10	Men are more likely than women to be engaged in informal activities.....	38
4.11	Women earn less than men	39
4.12	Higher pay-gap in primary sector	39
4.13	Young women were more likely to be neither studying nor working	40
5	Public life and decision-making.....	41
5.1	Women continue to be underrepresented in Parliament.....	41
5.2	Mayors are largely men.....	42
5.3	Women are underrepresented among senior-level civil servants	42
5.4	Women are less likely to hold senior positions in the private sector	43
5.5	More women as judge and magistrate	43
5.6	Women are underrepresented in the police force	44
6	Disability.....	44
6.1	More disabled women than men.....	45
6.2	Prevalence rate of disability increases with age for both women and men	45
6.3	More disabled men than women in employment	47
6.4	Washington Group.....	48
6.5	Welfare of persons with disabilities.....	48
7	Poverty and Social Welfare.....	49
7.1	Women were more likely than men to be in poverty	49
7.2	Female-headed households more likely to be in poverty.....	50
7.3	Social Welfare.....	50
8	Gender based and family violence.....	51

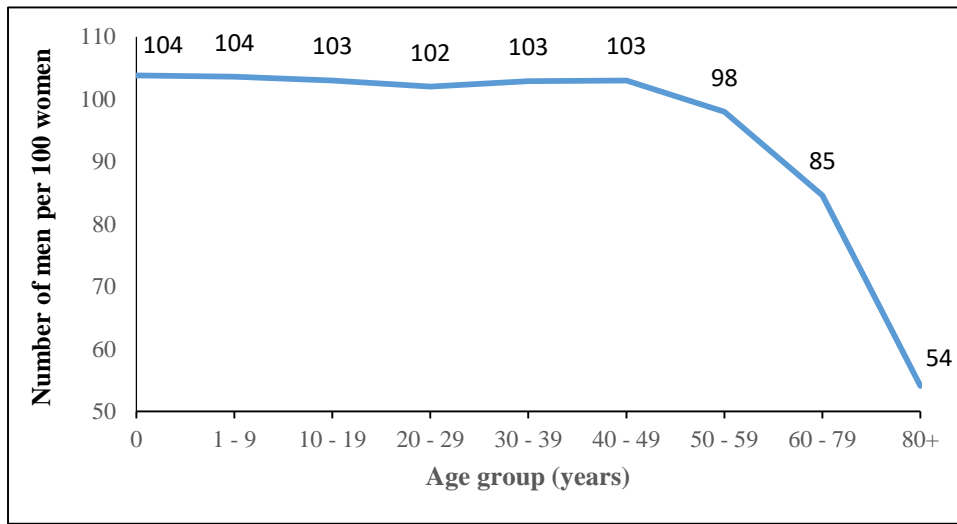
8.1	What is Gender-Based Violence (GBV)?	51
8.2	Types of Gender-Based Violence	51
8.3	Women are more likely to be victims of domestic violence	52
8.4	Child abuse	53
8.5	Admission of children in institutions under the aegis of MGEFW	54
8.5.1	Rehabilitative and Alternative Care Support System of ACU	55
8.5.2	Children placed in Government owned Shelters and NGOs	55
8.5.3	Children placed in Foster Care families	56
8.5.4	Children from Shelters/NGOs reintegrated back within a family setting	56
8.5.5	Child Mentoring Programme	56
9	Crime and security	57
9.1	Crimes	57
9.2	Nearly all juveniles admitted to CYC had committed theft	58
10	International comparisons	58
10.1	Gender Inequality Index	58
10.2	Human Development Index (HDI)	60
11	Concepts and Definitions	62

1 Population, Marriage and Families

1.1 More newborn boys

More boys than girls were born in 2019 – 101 boys for every 100 girls, which is a universal biological norm. However, the sex ratio eventually shifts due to higher mortality rate among men. As from the age of 50, there were more women. And as from age 80 years and above, there were about twice as many women as men.

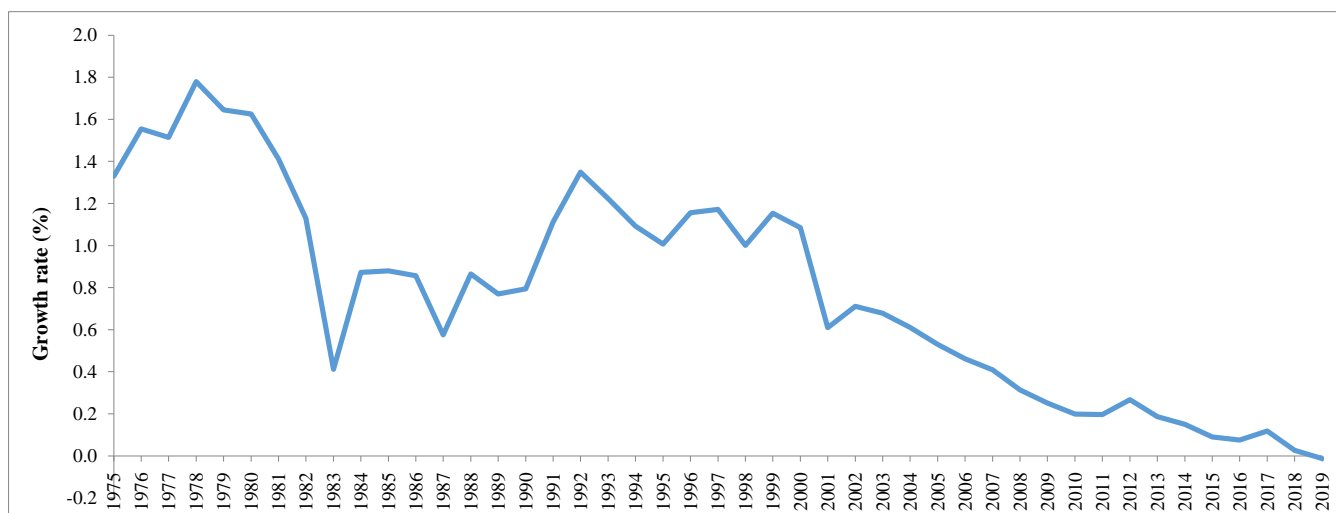
Figure 1 - Number of men per 100 women, Republic of Mauritius, 2019



1.2 Population Growth Rate

During the past 40 years, the population growth rate peaked in the late seventies followed by a fall in the eighties. The population growth rate caught up in the early nineties after which it dropped continuously to reach its lowest in 2018 (+0.03%) and attained a negative value (-0.01%) in 2019. The dips observed since the eighties and nineties mainly indicate falling fertility. It is worth to be noted that population growth is influenced by births, deaths and migration.

Figure 2 – Growth rate of resident population, Republic of Mauritius, 1975 – 2019



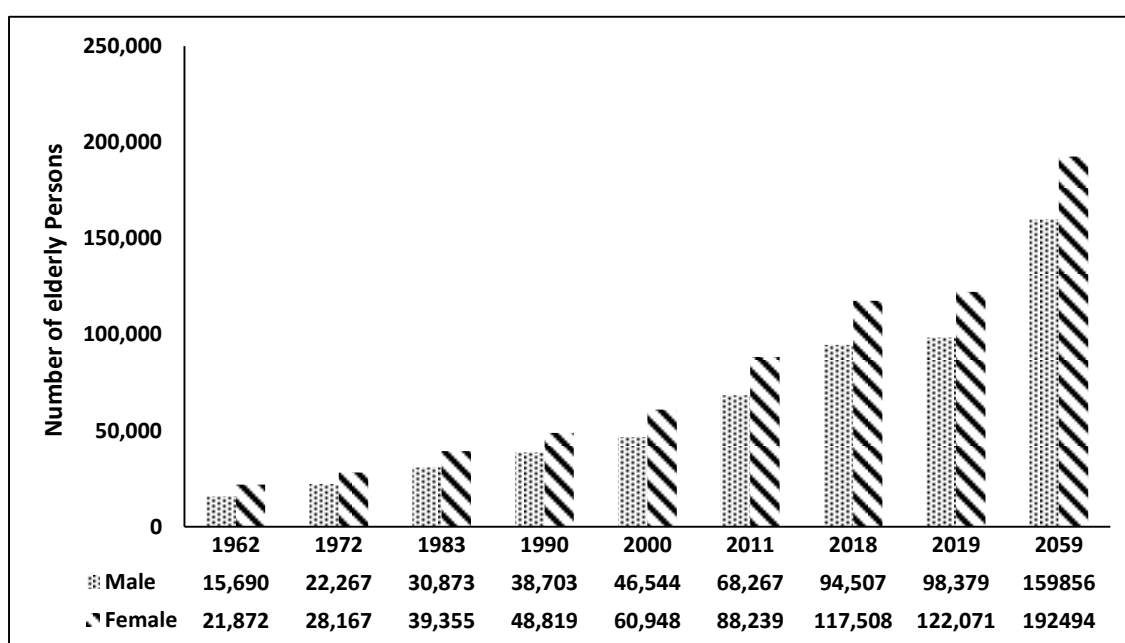
1.3 More Elderly Women

The Mauritian population is undergoing an ageing process. Population ageing is an increasing proportion of old persons in the population. It usually occurs when the number of births decreases and when people live longer.

Older persons, defined as those aged 60 years and above, who made up 5% of the population in 1962, now make up 17% and are projected to reach 37% in 2059. In terms of numbers, the seniors are now 220,450 and will reach 352,350 in forty years.

Women live longer than men; the life expectancy for women is 77.7 years compared to 71.2 years for men. As a result, old women outnumber old men. This has been the situation during the past 55 years and is likely to persist in the future.

Figure 3 - Elderly population by sex, Republic of Mauritius, 1962 – 2059

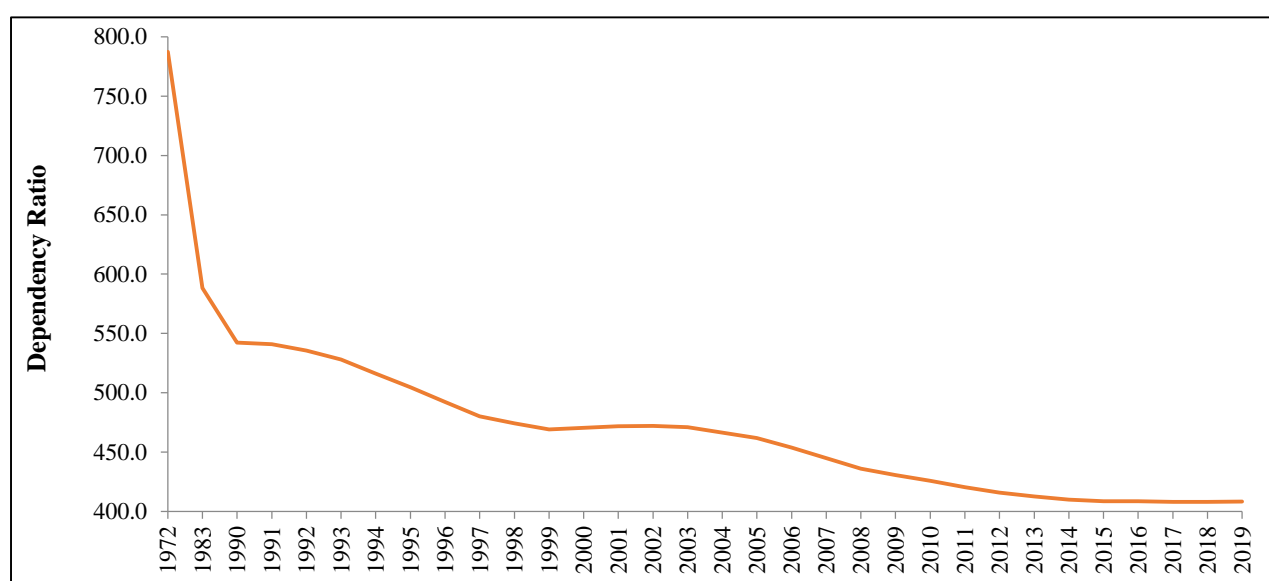


1.4 Dependency Ratio

Dependency ratio is defined as the combined child population (under 15 years) and population aged 65 years and over per 1,000 population of typical working age (15-64 years) in a particular year.

There has been a general decrease in the dependency ratio from 787.2 in 1972 to 408.5 in 2019 (Figure 4). The fall in dependency ratio observed is mainly the result of a decline in child population over the years.

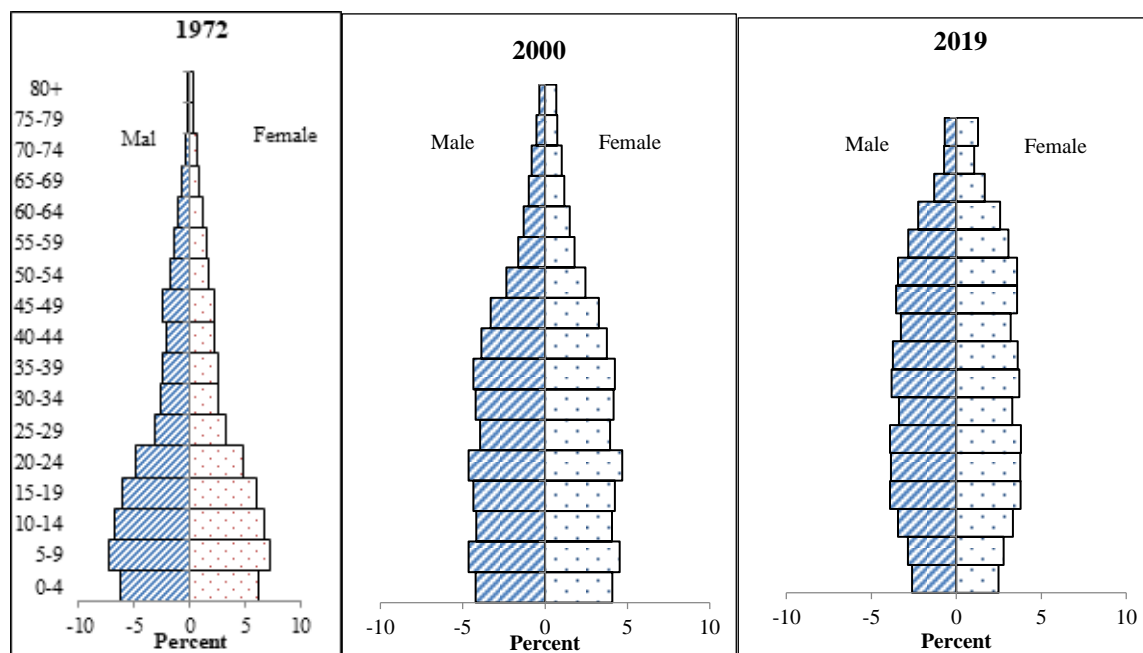
Figure 4 - Dependency Ratio, Republic of Mauritius, 1972 - 2019



1.5 Population Age Structure

The first pyramid in 1972, with its wide base and narrow top, is typical of a young population with high fertility. This shape is the result of high birth rates that increase the number of people in the youngest age groups (lowest bars) and in turn shrink the relative proportion at the oldest age groups. Between 2000 and 2019, the base of the pyramid has started to narrow because of the fall in birth rates. These are typical of a population with a slow growth. The female bars are almost always longer because women live longer than men. Between 1972 and 2019, there has been a decline in the proportion of children in the age group 0-14 while the proportion of old persons aged 60 and above has increased steadily.

Figure 5 - Population pyramids, Republic of Mauritius, 1972, 2000 & 2019



1.6 The number of households increases but household size decreases

The number of private households went up by 16.6% from 296,800 in 2000 to 346,000 in 2011. At the same time, the average household size decreased from 3.9 to 3.5 persons.

1.7 Women-headed households are on the increase

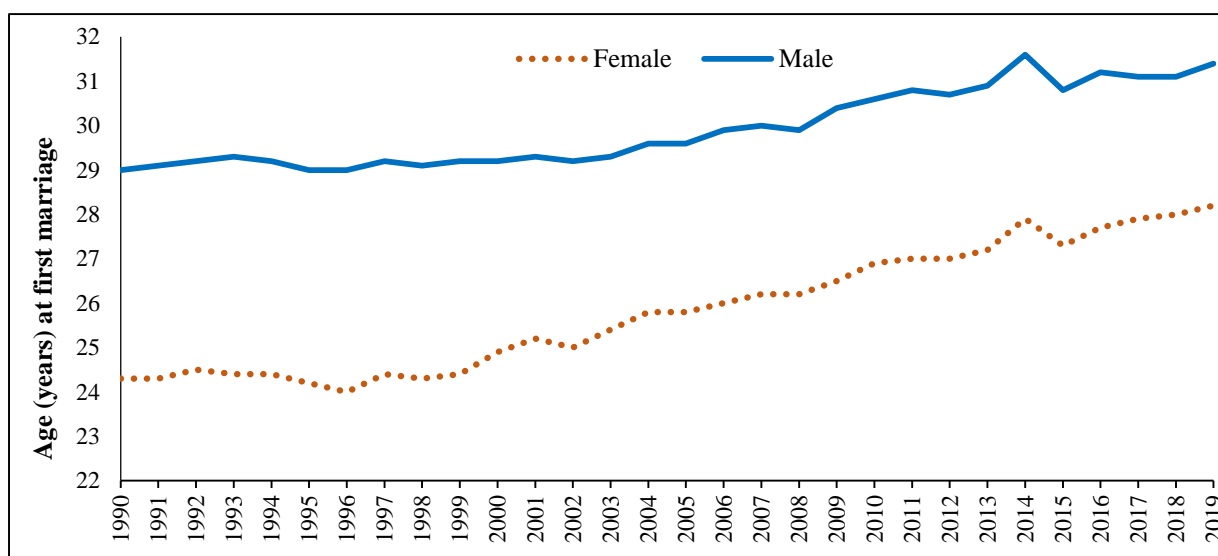
Based on results of Household Budget Surveys (HBS), there were 22.1% women headed households in 2017 compared to 21.3% in 2012. Women heads were predominant among small sized households while men tend to head larger households.

1.8 Age at first marriage increasing

Grooms are generally older than their brides. However, both women and men are marrying at a later stage, a reflection of higher education levels and consequential entry into the labour force. In 1990, the average age at first marriage was 24 years for women and 29 years for men. By 2019, this had increased to 28.2 years for women and 31.4 years for men.

The average age gap at the time of marriage was 4.7 years in 1990. This gap has steadily decreased to 3.1 years in 2019.

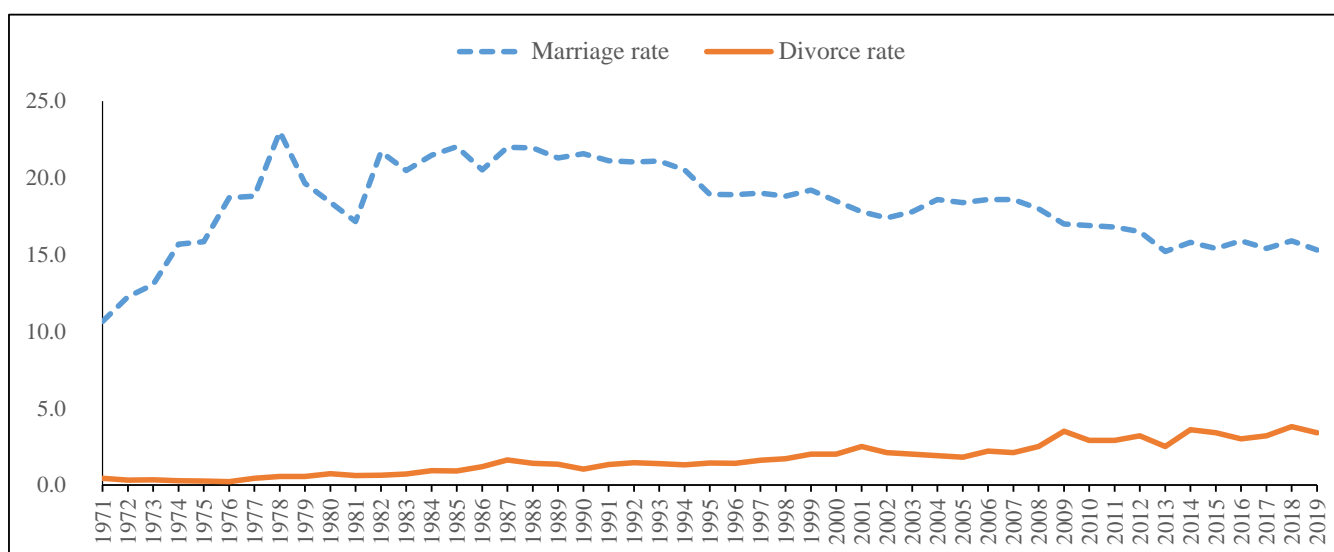
Figure 6 - Average age at first marriage, Republic of Mauritius, 1990 - 2019



1.9 Fewer Marriages, More Divorces

The marriage rate (the number of persons married per 1,000 people) has been increasing while the divorce rate (number of divorced persons per 1,000 people) remained relatively stable till the late 1970s. A shift occurred in the 1980s with the marriage rate falling and the divorce rate increasing. In 1978, the marriage rate peaked to 23.0 then started declining to reach 15.3 in 2019. On the other hand, the divorce rate which was around 0.3 in the 1970s, gradually rose to reach 3.4 in 2019.

Figure 7 - Marriage and Divorce Rate, Republic of Mauritius, 1971 - 2019



1.10 More unmarried parents

Marriage, as recognized by law, has long been considered to mark the formation of a family. However, the analysis of trends in family formation and dissolution based on just marriage and divorce data might not offer a full picture.

An increase in the proportion of unmarried parents was also observed. Unmarried parents, made up mostly of unmarried mothers, were on the increase from 2,100 in 2000 to 3,700 in 2011.

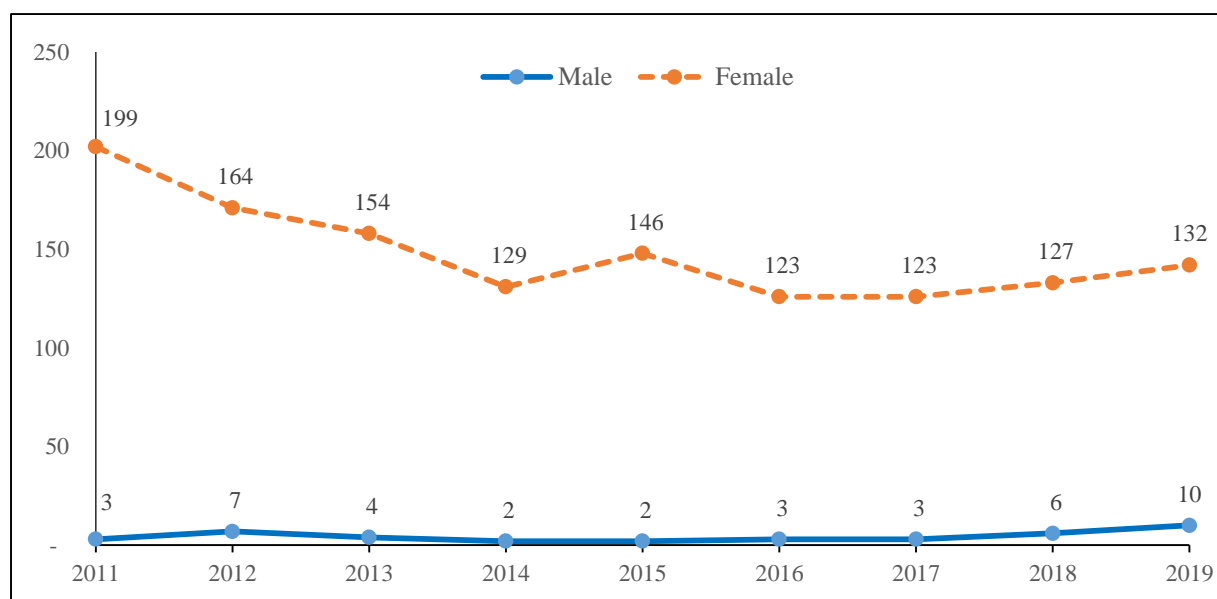
Table 1 – Distribution of resident population aged 15 years and over by marital status, Republic of Mauritius, 2000 and 2011 Population Censuses

Marital Status	Census 2000 (%)	Census 2011 (%)
Single	29.2	27.4
Married/In a union	60.0	59.8
Widowed	7.5	8.2
Divorced/Separated	2.9	4.2
Unmarried parent	0.2	0.4
Other & not stated	0.2	0.0
Total	100.0	100.0

1.11 Marriages of minors aged 16 years and above

The legal age of marriage in Mauritius is 18 years old as per the ‘Code Civil Mauricien’. However, boys and girls may get married as from the age of 16 with the consent of his/her parents or with the consent of one of the parents exercising ‘l’*autorité parentale*’. In the absence of the consent of parents, a Judge can grant authority to marry if the latter considers it to be in the best interest of the child. Free compulsory education up to the age of 16 is also a deterrent to child marriage. It is to be noted that child marriage is considered as a harmful practice and ending child marriage is one of the targets under SDG 5. Early marriage often reduces education and increases adolescent fertility, putting the health of mother and baby at risk.

Figure 8 - Marriage of Minors aged 16 years and above, Republic of Mauritius, 2011 - 2019



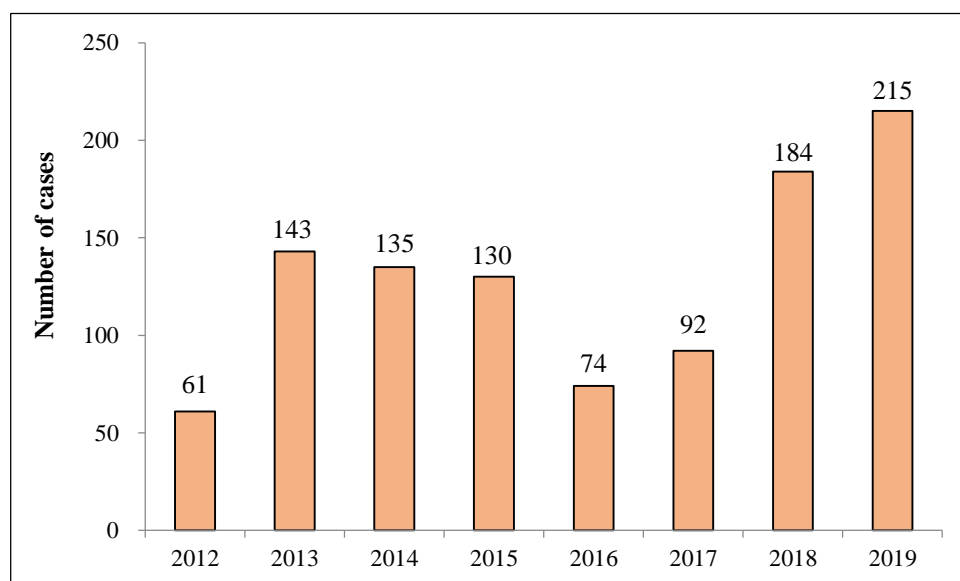
In 2019, there were 142 marriages involving minors aged 16 years and above and the vast majority were girls (132) compared to boys (10). Marriages of minors aged 16 years and above have fallen since 2011 where 202 minors were married in that year (199 girls and 3 boys).

1.12 Teenage Pregnancy

Young people are becoming sexually active at an increasingly earlier age. According to the 2014 Contraceptive Prevalence Survey, 12.1% of adolescents (women aged 15-19 years) have already started childbearing. In 2019, 8.9% of all live births occurred in Mauritius, were to women aged 15-19. This is a major concern since more complications are associated with births among women below the age of 20 years.

Notwithstanding knowledge of at least one method of contraceptives among women aged 15-19 years is high (94.0%), teenage pregnancy is on the rise. The number of cases of teenage pregnancy reported at the Child Development Unit (CDU) is on the rise in the island of Mauritius. It was 215 in 2019 compared to 61 in 2012, more than triple the number of cases.

Figure 9 - Reported cases of teenage pregnancy at CDU, Island of Mauritius, 2012 - 2019



1.13 Services at Drop-In-Centre

The Drop-in-Centre (DIC) was set up at the Ministry of Health & Wellness in December 2003, following a study which was commissioned in 2001 by UNICEF and the Ministry of Gender Equality and Family Welfare to assess the extent of Commercial Sexual Exploitation of Children (CSEC).

The DIC and the Mauritius Family Planning and Welfare Association (MFPWA) are continually taking various preventive measures to combat the issues of early sexual activities among teenagers resulting in teenage pregnancy. In 2019, 309 cases were reported at the DIC and the following measures were taken:

- Information and Education Campaign (IEC) programmes in school, colleges and community on the ill effects of child sexual abuse and teenage pregnancy.
- Training of 90 educators/stakeholders on how to identify and report cases of child sexual abuse and teenage pregnancy.
- Radio programmes in Hindi and Creole languages at the MBC and other radio channels. 56 radio programmes were recorded and broadcasted on MBC in 2019 on sexual abuse, teenage pregnancy and DIC services.

The following services are also offered by the DIC to the victims:

- Long Term counselling and therapy;
- Monthly medical sessions;

- Parental counselling;
- Couple/Contraceptive counselling;
- Monthly home visits to clients to ascertain their recovery and reinsertion;
- Focus group discussions;
- Echography and clinical services, include, gynaecologist at MFPWA's Clinic;
- Laboratory tests (HIV/Pregnancy);
- Prevention and sensitization of adolescents/public on sexual abuse and Teenage Pregnancy;
- Referral to other NGOs/Social aid and other institutions (as and when needed for specific supports);
- Group activity therapy (personality development, Art and Craft therapy, Art competition in school holidays);
- Referral to vocational courses through MITD/NEF/HRDC; and
- Radio programmes, networking.

2 Health

2.1 National health system

Public health services in Mauritius are provided free of cost throughout the country. The public health services in Mauritius operate through 5 regions with separate arrangements for Rodrigues. There is a well-established private sector which provides healthcare services on a user fee basis.

The healthcare system in the public sector is best described as an interlocking set of primary, secondary and specialized healthcare institutions. Primary healthcare institutions serve a dual function. First, they provide direct provision of first-contact services. Second, they coordinate patients' health care services to ensure continuity of care.

In 2019, the Primary Health Care network, in the island of Mauritius, comprised 18 Area Health Centres, 116 Community Health Centres, 5 Medi-clinics and 2 Community hospitals. Services provided at the primary care level are increasingly comprehensive and include prevention and treatment of common diseases and injuries, basic emergency services, referrals to and coordination with other levels of care, primary maternity care and healthy child development, specialized clinics, disease prevention and screening, health promotion, surveillance of communicable diseases, reproductive health and rehabilitation services.

General curative and specialized services are provided through a network of 5 regional hospitals, 2 district hospitals, 1 eye hospital, one ear/nose/throat (ENT) hospital, 1 mental

hospital, 1 chest hospital, 1 vascular centre and 2 cardiac centres. The number of beds in government health institutions was 3,768 as at end 2019.

The private health sector, consisting mainly of providers of curative and specialised services, comprised 19 hospitals in 2019. Bed capacity in the sector which was 517 in 2001 improved to 730 in 2019. The total number of beds in the public and private sectors as at end of 2019 was 4,498, that is, 272 inhabitants per bed.

The healthcare delivery system in Rodrigues comprises 1 main hospital, that is, the Queen Elizabeth Hospital (QEH) located at Crève Coeur, Port Mathurin and 2 Area Health Centres with inpatient facilities at Mont Lubin and La Ferme. There is also a network of 14 Community Health Centres across the island, providing primary health care services including treatment of common diseases and injuries, maternal and child health care and family planning. The total number of beds in government institutions providing in-patient facilities was 211, that is, 206 inhabitants per bed.

At the end of 2019, there were 3,290 doctors registered with the Medical Council of the Republic of Mauritius, that is, 26.0 doctors per 10,000 inhabitants.

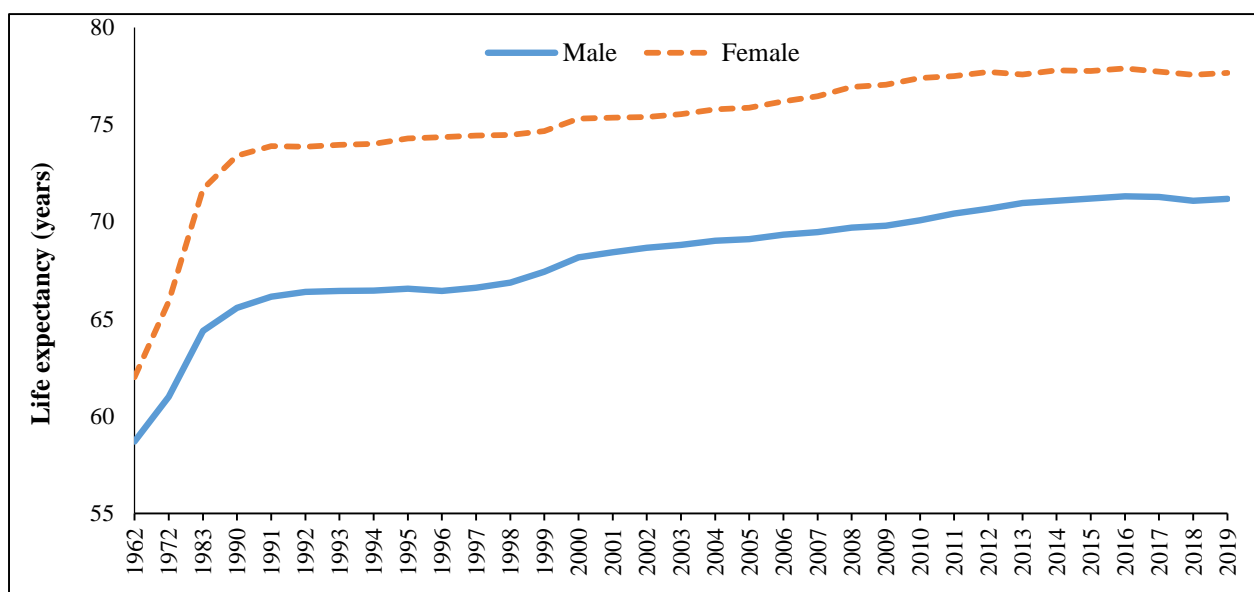
The general state of health of both men and women has been improving over the years. The statistics presented below show that people are living longer and fewer children die in their first year.

2.2 Life Expectancy of women and men

Life expectancy at birth is a summary indicator of mortality conditions and it is one of the most frequently used indicators to measure the health status of a population. A lower mortality rate among women means that they live nearly seven years longer than men. In 2019, a newborn boy can expect to live to 71 years, whereas a girl can expect to reach 78 years of age.

Female life expectancy at birth was 7 years higher than for men in 2019, compared to 3 years in 1962 in the Republic of Mauritius. The smaller gap in the 1960's may be due to high mortality prevailing at that time. Over time, the gap has widened reaching a peak of 8.0 years in 1996, after which it fell down to 6.7 in 2003. A slight increase to 7.3 was noted in 2010.

Figure 10 - Life Expectancy at birth, Republic of Mauritius, 1962 - 2019

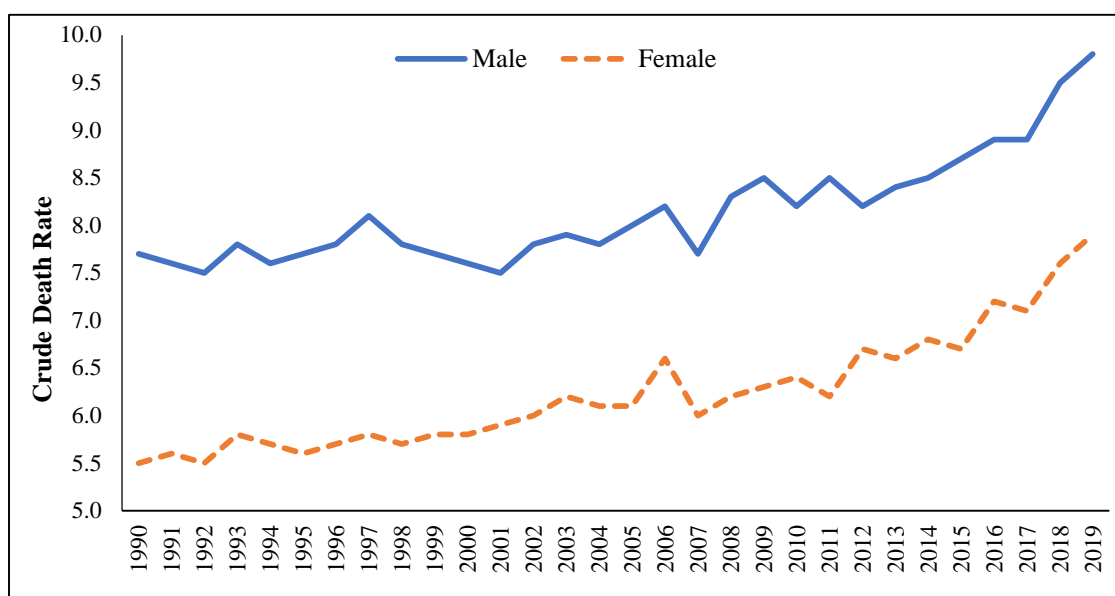


According to population projections from 2019, life expectancy is expected to increase. Projections suggest that a boy born in 2059 will have a life expectancy of 75.6 years and a girl 80.9 years. The gender gap in 2019 stood at 6.5 years and it is expected to reduce to 5.3 years in 2059.

2.3 Lower mortality rate of women compared to men

With an ageing population, an increasing trend was observed in the death rate of both women and men. However, even though there are more women than men in the population, a lower mortality rate was observed for women than for men. In 2019, 5,050 women compared to 6,124 men died. The crude death rate in 2019 was 7.9 for women and 9.8 for men.

Figure 11 - Crude death rate, Republic of Mauritius, 1990 - 2019



2.4 Diabetes-leading cause of mortality for women

In the past, heart and cerebrovascular diseases were the most prominent cause of death among women and men alike. However, a decline has been observed in heart and cerebrovascular mortality among both women and men. On the other hand, mortality due to diabetes mellitus and cancer were on the rise. In 2019, diabetes mellitus, more commonly known as diabetes, was the leading cause of death among women, while for men heart disease was most common. Diabetes was responsible for nearly 23.4% of all female deaths and 20.8% of all male deaths. Heart disease was responsible for 18.0% of male deaths and 17.5% of female deaths. Cancer was responsible for 14.8% of female death and 12.1% of male deaths. Breast and uterus cancer (38.4%) were more common among women while lung and prostate cancers (30.5%) were more common among men.

2.5 Accidents – External causes of death

As regards external causes of death, no major changes have occurred over the last 19 years, either among women or men. More men than women die in traffic accidents, accidental drowning, injuries, poisoning, smoke and fire and suicide. In 2019, 38 women died in accidents compared to 183 men.

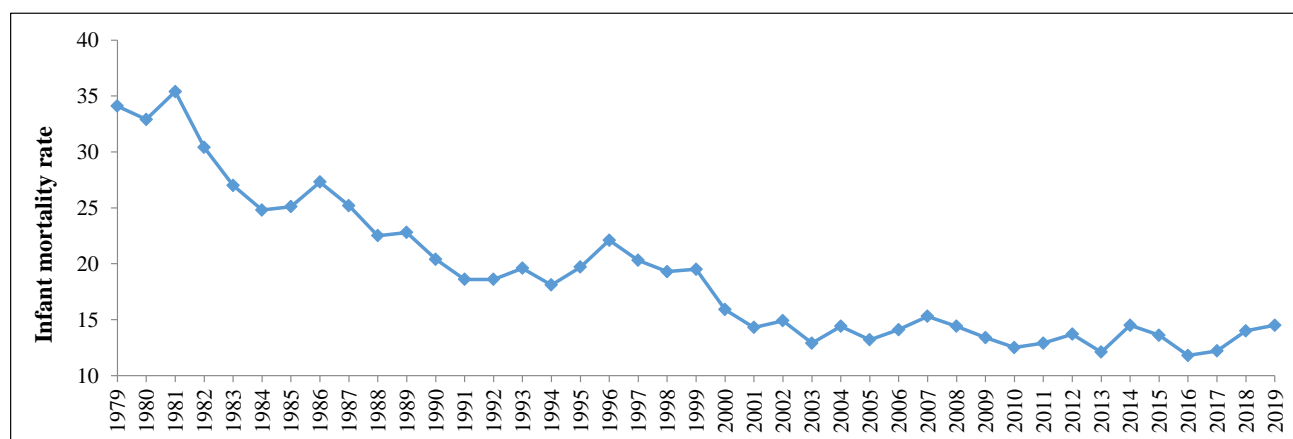
Table 2 - Causes of death, Republic of Mauritius, 2000 and 2019

Causes of death	2000		2019	
	Male	Female	Male	Female
Diabetes mellitus	719	798	1,272	1,182
Heart disease	935	805	1,103	884
Hypertensive Disease	94	145	270	300
Cerebrovascular disease	410	372	495	440
Neoplasm:	365	387	738	745
<i>of which: Breast cancer (malignant)</i>	-	63	1	212
<i> Uterus cancer (malignant)</i>	<i>n/a</i>	63	<i>n/a</i>	74
Diseases of the respiratory system	457	282	739	674
<i>of which: Pneumonia</i>	138	96	143	148
<i> Asthma and Bronchitis</i>	125	92	113	82
Diseases of liver	188	35	156	31
Maternal death	<i>n/a</i>	4	0	8
Injury, poisoning, accident and other external causes	386	116	417	101
<i>of which: Accident</i>	157	28	183	38
<i> Suicide</i>	109	30	106	16
Other	406	177	934	685
Total	4,489	3,493	6,124	5,050

Source: Ministry of Health and Wellness

2.6 Infant mortality rate on a decreasing trend

Figure 12 - Infant Mortality Rate, Republic of Mauritius, 1979 - 2019

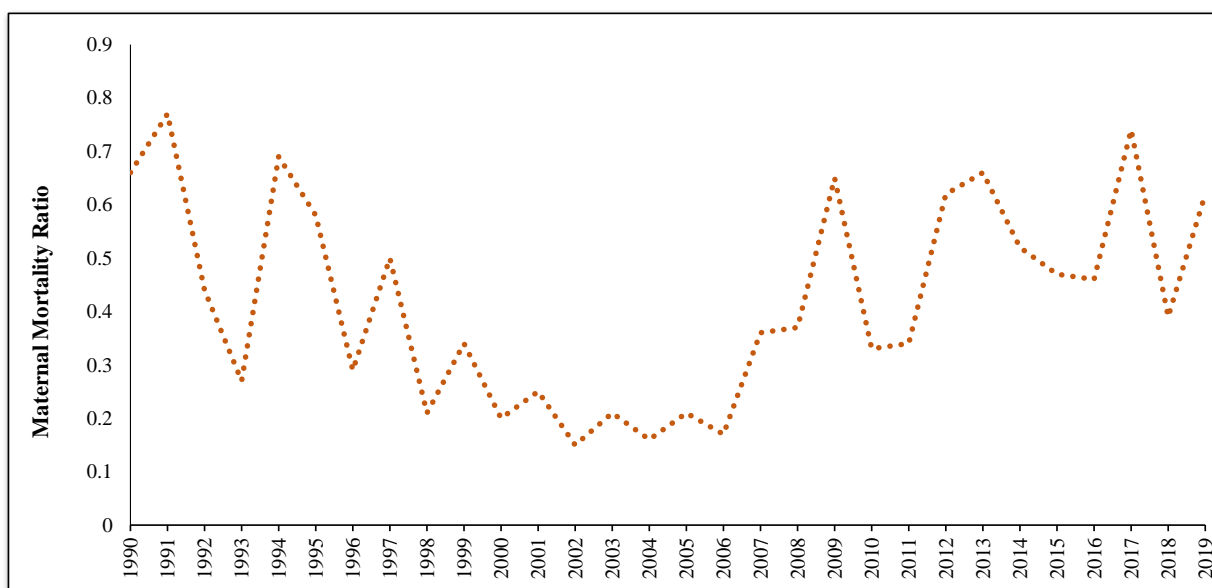


The infant mortality rate, defined as the number of infant deaths per 1,000 live births, decreased significantly from 34.1 in 1979 to 14.5 in 2019, indicating improvements made in reducing child mortality. It is to be noted that a Neonatal Intensive Care Service was opened at Victoria Hospital in May 1999. The infant mortality rate fell from 19.5 in 1999 to 15.9 in 2000 and 14.3 in 2001 and then to 14.0 in 2018. However, the infant mortality rate rose to 14.5 in 2019.

2.7 Maternal mortality on the rise

The risk of a woman dying as a result of pregnancy or childbirth during her lifetime has generally been declining over the years with slightly higher level of maternal deaths in recent years. From 1990 to 2006, the maternal mortality ratio declined from 0.66 maternal death per 1,000 live births to 0.17. After 2006, the maternal mortality ratio was on a rising trend to reach 0.66 in 2013, but then decreased to reach 0.46 in 2016. In 2017, the maternal mortality ratio increased again to reach 0.74, but then decreased to 0.62 in 2019.

Figure 13 - Maternal Mortality Ratio, Republic of Mauritius, 1990 - 2019



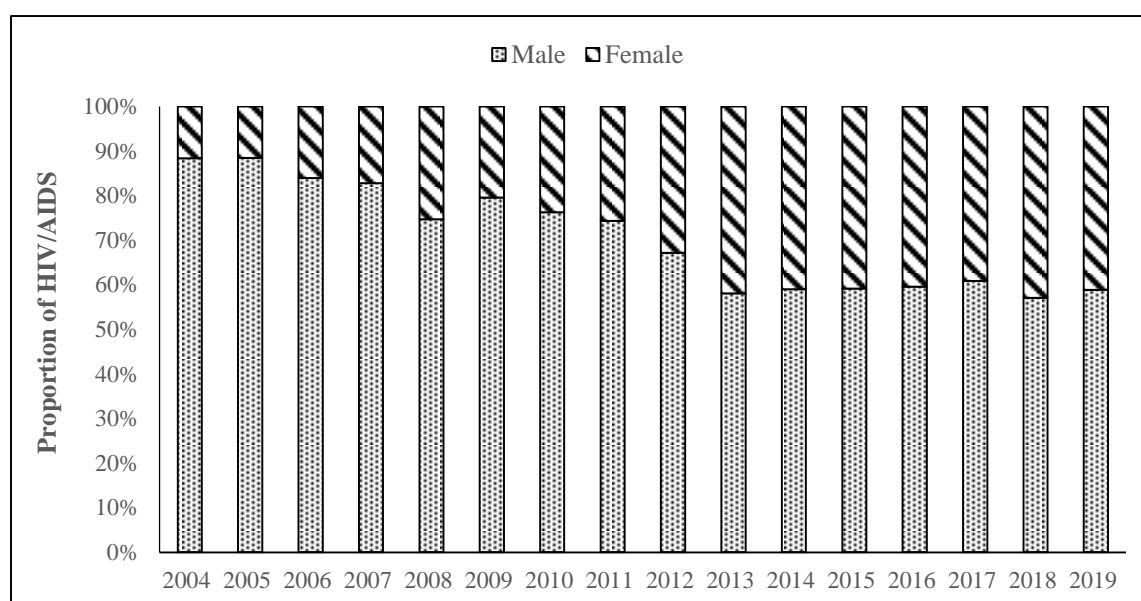
2.8 HIV/AIDS

HIV (Human Immunodeficiency Virus) is the virus that can lead to AIDS (Acquired Immunodeficiency Syndrome), if not treated. Unlike some other viruses, the human body can't get rid of HIV completely, even with treatment. So once someone get HIV, they have it for life. HIV attacks the body's immune system making the person more likely to get other infections.

In the Republic of Mauritius, the first case of AIDS was notified in October 1987. As at end of 2019, a total of 8,109 cases of HIV/AIDS were detected, of whom 7,795 (5,723 males, 2,072 females) were Mauritians.

Figure 14 shows that the proportion of new cases of HIV/AIDS registered among Mauritians was consistently higher for men compared to women. However, an increasing trend in the number of new cases for women was observed from 2004 to 2013. From 2013 to 2019, the proportion of new cases for women oscillated at around 40%.

Figure 14 - Proportion of new cases of HIV/AIDS registered among Mauritians, 2004 - 2019



HIV is transmitted through body fluids such as blood, semen, breast milk and this can happen in several ways:

1. Blood Transmission

- Injecting drug with needles, syringes or other injection equipment used by someone who has HIV.
- From being stuck with a needle or cut with a sharp object that contains HIV-positive blood.
- From getting a blood transfusion.

2. Sexual Transmission

- From vaginal or anal sex with someone who has HIV, while not using a condom.

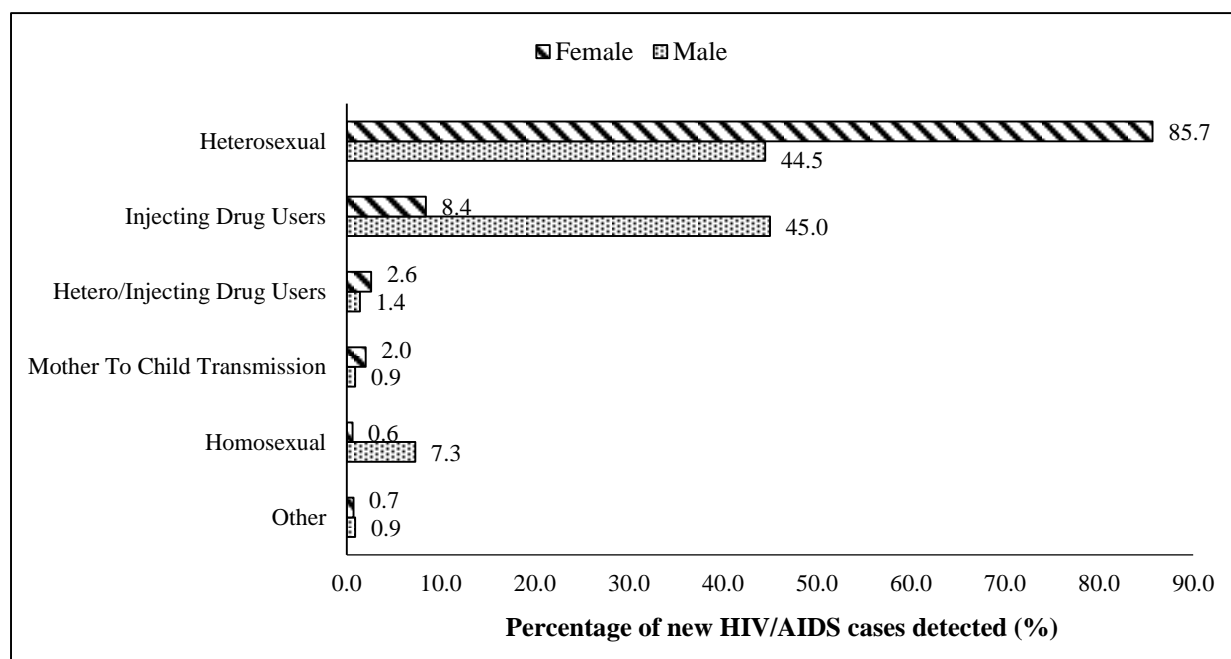
3. Mother to Child Transmission

- From mother to child during pregnancy, childbirth or breastfeeding.

Unsafe sex was the leading risk factor in transmitting HIV/AIDS among women whereas men have a higher risk of contracting HIV/AIDS when injecting drug with contaminated

needles, syringes or other injection equipment. In 2019, out of the 154 new HIV/AIDS cases detected among females, 86% was due to heterosexual as mode of transmission and 8% to drug injection. As regards males, among the 220 new cases, the mode of transmission was 45% for both through heterosexual and drug injection.

Figure 15 - Proportion of new cases of HIV/AIDS by mode of transmission & sex, Republic of Mauritius, 2019



2.9 Family Planning and Contraceptive Use

Family planning helps save women’s and children’s lives by avoiding unintended pregnancies. An unintended or unwanted pregnancy may be a pregnancy too early in life, too soon after a previous pregnancy, or after having reached the desired family size.

Family planning services are provided by government and two NGOs, namely the Mauritius Family Planning and Welfare Association (MFPWA) and Action Familiale. Government family planning services are available to individuals and couples, free of user cost, through an extensive network of health service points since late 60s. The MFPWA was set up in 1957 by some volunteers. The family planning programme was integrated with the government Maternal and Child Health Programme in 1972, and thereafter, the MFPWA has continued to run a family planning clinic where contraceptive methods and counselling services are offered. Moreover, the ‘Action Familiale’, which was established in 1963, has been

promoting use of natural family planning methods and has been providing counselling services.

As at 31 December 2019, there were 57,724 current users who were registered at the family planning service points of government, MFPWA and Action Familiale in the Republic of Mauritius. Sympto-thermal was the most preferred method among the current users accounting for 46%, followed by tubal ligation (25%), male condom (11%), pill (7%) and injectable (6%).

Table 3 - Current users of family planning method, Republic of Mauritius, 2019

Method	Current Users	
	Number	%
Pill	3,894	6.8
Male Condom	6,667	11.5
Intra-Uterine Device (IUD)	1,852	3.2
Injectable	3,446	6.0
Sympto Thermal	26,696	46.2
Tubal Ligation	14,254	24.7
Implant	915	1.6
Total	57,724	100.0

The Contraceptive Prevalence Survey, which was carried out in 2014, showed that the contraceptive prevalence rate for currently married women age 15-49 years was 63.8 percent in the Island of Mauritius. There was an almost equal proportion of currently married women age 15-49 years are using modern methods¹ (32.0 percent) and traditional methods² (31.8 percent).

This survey revealed that women in the reproductive age group 15-49 years were obtaining their contraceptive method either from programme sources (government and NGOs) or from non-programme sources (e.g. pills from pharmacies) or were using non-programme methods (such as withdrawal). The findings showed that withdrawal (28.5 percent) was the most commonly used method among currently married women age 15-49 years followed by male condom (10.6 percent), pill (8.9 percent) and tubal ligation (7.3 percent).

¹ Modern methods: Tubal ligation; vasectomy; pill; 1-month or 3-month injectable; IUD; male condom; female condom; diaphragm; foaming tablet; implant; contraceptive patch; emergency contraceptive pill; sympto-thermal; mucus and temperature

² Traditional methods: Withdrawal; calendar; and cycle beads.

The 2014 survey also revealed that unmet need for family planning³ in Mauritius was 12.5% among currently married women age 15-49 years. Moreover, 62.4% of women with unmet need for family planning do not intend to use a contraceptive method in the future.

2.10 Antenatal Care

The 2014 Contraceptive Prevalence Survey revealed that almost all women (98.1%) received antenatal care for their last live born child from a health professional. The majority (76.4%) received care from the public sector, 12.3% from the private sector and 11.3% received care from both the public and private sector simultaneously. 77.7% of women received regular antenatal care (i.e. they made four or more visits to a provider).

3 Education

3.1 Overview of the education system

Mauritius introduced in 2017, the nine year continuous basic education across six years of primary education and the first three years of lower secondary education. The new education structure consists of the following 4 stages, namely: (1) Early Childhood Care and Education – duration 2 years (ages 3-4 years), (2) Basic Education – duration 9 years (ages 5-14 years), (3) Post Basic Education/Upper Secondary – duration 4 years (ages 14-18 years), and (4) Post-Secondary and Higher Education – duration at least two years (above 18 years).

After two years in pre-primary schools, all children aged 5 years enter primary schools for the first six years of basic education (Grades 1-6). At the end of six years, students take part in the Primary School Achievement Certificate (PSAC) and then move on for three years of Lower Secondary education (Grades 7-9) and hence complete the nine year cycle of basic education.

From there onwards, after the National Certificate of Education examination, learners will opt to pursue their secondary schooling in either general or technical education. Those opting for the general education will spend two years of Upper Secondary (Grades 10-11), after which they sit for the Cambridge School Certificate (SC) examination. Passing the SC examination allows them to continue another two-year study (Grades 12-13) ending with the Cambridge Higher School Certificate (HSC) examination. Students passing the HSC examination can pursue their study in a tertiary education institutions either in Mauritius or overseas.

³ Unmet need for family planning is defined as the percentage of women of reproductive age (15-49), either married or in a union, who have an unmet need for family planning. Women with unmet need are those who want to stop or delay childbearing but are not using any method of contraception. Source: United Nations

3.2 Expenditure on education

Government expenditure on education and training for the financial years 2018/2019 and 2019/2020 are estimated at Rs 16,284 million and Rs 16,296 million, representing 10.8% and 8.3% of total expenditure respectively.

3.3 Literacy gap between men and women is narrowing

Between 2000 and 2011, the literacy rate of the population aged 12 years and above improved (Table 4). The improvement was higher among females as indicated by a decrease in the gender gap from 7.2 to 5.0 percentage points.

Table 4 – Literacy Rates, Republic of Mauritius, 2000 and 2011 Population Censuses

Sex	2000	2011	Difference
Male	88.7	92.3	+3.6
Female	81.5	87.3	+5.8
Both Sexes	85.0	89.8	+4.8

3.4 Enrolment in Day-care Centres

In 2019, there were 3,093 boys and 2,858 girls (aged 3 months to 3 years) enrolled in 348 Day-care Centres.

Table 5 - Number of children aged 3 months to 3 years enrolled in day care centres, Island of Mauritius, 2009 - 2019

Year	Number of children enrolled		Number of day care centres
	Male	Female	
2009	1,420	1,259	216
2011	1,673	1,601	228
2015	2,267	2,156	325
2019	3,093	2,858	348

Source: Annual Survey in Day Care Centres, Ministry of Gender Equality & Family Welfare

3.5 Boys and girls are equally likely to go to pre-primary and primary schools

The pre-primary school population in the Republic of Mauritius was 25,479 in 2019. Boys represented 51% of the 2019 pre-primary school population and girls 49%. The Gross

Enrolment Ratio (pre-primary enrolment as a percentage of the population aged 4 to 5 years) was 97 % for boys compared to 96% for girls.

Gender Parity Index (GPI) measures progress towards gender parity in education participation and learning opportunities available to girls in relation to those available to boys. A GPI equal to 1 indicates no disparity between girls and boys. A value less than 1 indicates disparity in favour of boys and a value greater than 1 indicates disparity in favour of girls. Table 5 shows that there is no disparity between boys and girls with regards to enrolment at pre-primary level.

Table 6 - Gross Enrolment Ratio (4-5 years) at pre-primary level, Republic of Mauritius, 1999 - 2019

Year	Gross Enrolment Ratio (%)		Gender Parity Index
	Male	Female	
1999	99	98	1.00
2004	100	98	0.98
2009	95	97	1.03
2014	98	98	1.00
2019	97	96	0.99

The primary school population in the Republic of Mauritius was 85,730 in 2019. Boys represented 50% of the 2019 primary school population, same as for girls. The Gross Enrolment Ratio (primary enrolment as a percentage of the population aged 6 to 11 years) was 95% for boys and 96% for girls.

Table 7 shows that boys and girls alike have access to primary education.

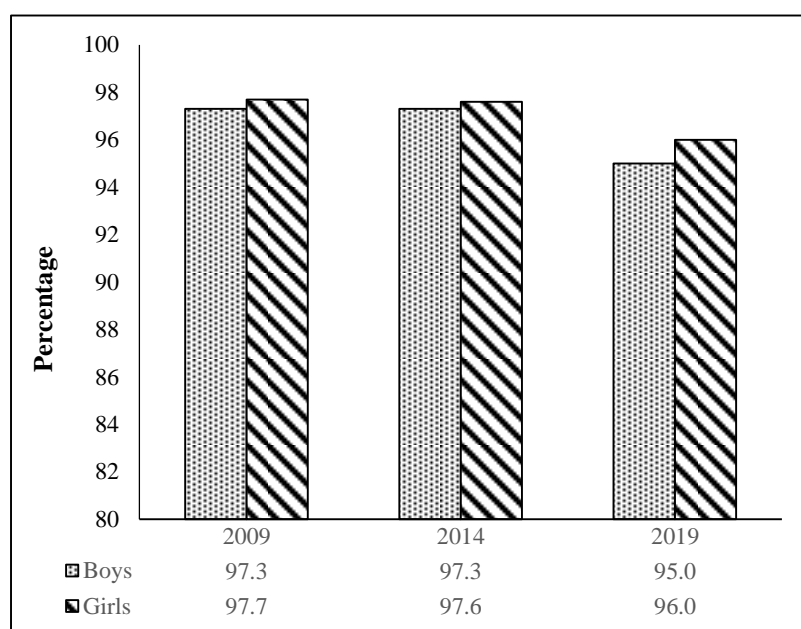
Table 7 - Gross Enrolment Ratio (6-11 years) at primary level, Republic of Mauritius, 1999 - 2019

Year	Gross Enrolment Ratio (%)		Gender Parity Index
	Male	Female	
1999	104	105	1.01
2004	102	101	0.99
2009	100	100	1.00
2014	97	98	1.01
2019	95	96	1.01

3.6 A slightly higher proportion of girls complete basic education (primary) than boys

In 2019, the proportion of girls starting Grade 1 who reach Grade 6 was 96%, slightly higher than boys with 95%.

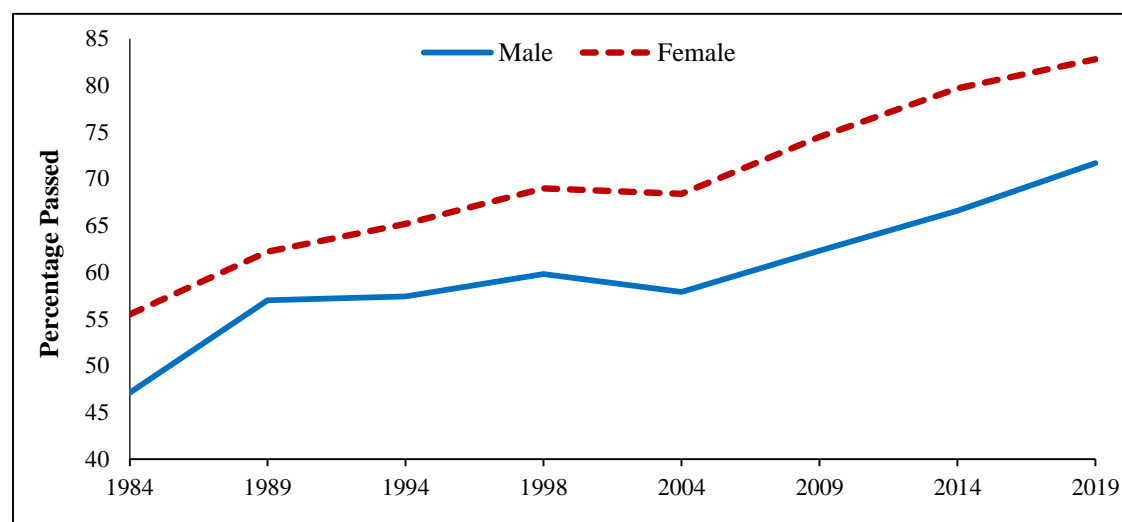
Figure 16 - Proportion of pupils starting Grade 1 who reach Grade 6, Republic of Mauritius, 2009 - 2019



3.7 Girls perform better than boys in PSAC examinations

At the end of primary, girls generally perform better than boys at the Primary School Achievement Certificate (PSAC) examinations. In 2019, the pass rate for girls was nearly 83% against 72% for boys.

Figure 17 - PSAC (formerly CPE) Pass Rate, Republic of Mauritius, 1984 - 2019



3.8 Girls are more likely to be enrolled than boys at secondary level

At secondary level, the Gross Enrolment Ratio (GER) was higher for girls than for boys. The 2019 Gross Enrolment Ratio (secondary enrolment as a percentage of the population aged 12 to 19 years) was 76% for girls against 69% for boys. The Gender Parity Index (GPI) in secondary enrolment was 1.1 in 2019 showing a disparity in favour of girls.

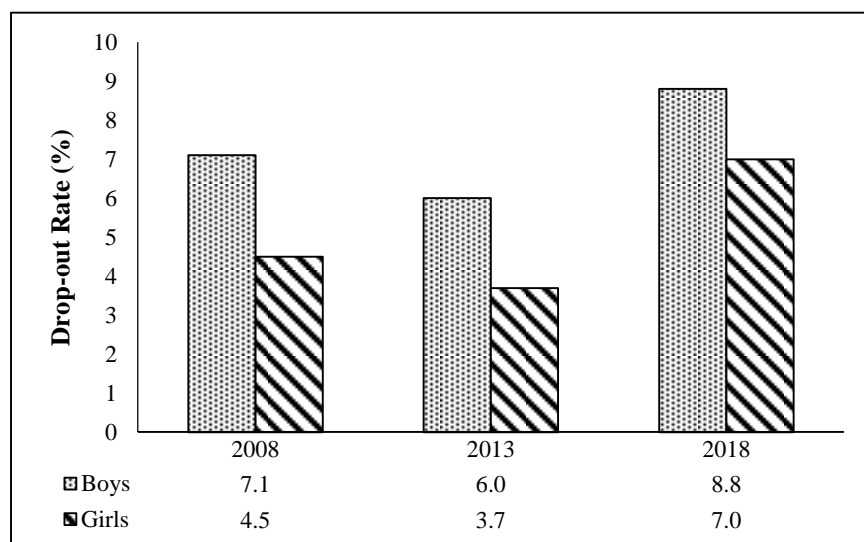
Table 8 - Gross Enrolment Ratio (12-19 years) at secondary level, Republic of Mauritius, 1999 - 2019

Year	Gross Enrolment Ratio (%)		Gender Parity Index
	Male	Female	
1999	55	60	1.09
2004	64	71	1.11
2009	67	75	1.12
2014	69	78	1.13
2019	69	76	1.10

3.9 Girls are less likely than boys to drop out

Girls are less likely than boys to drop out from secondary academic stream, 7% against 9% in 2018.

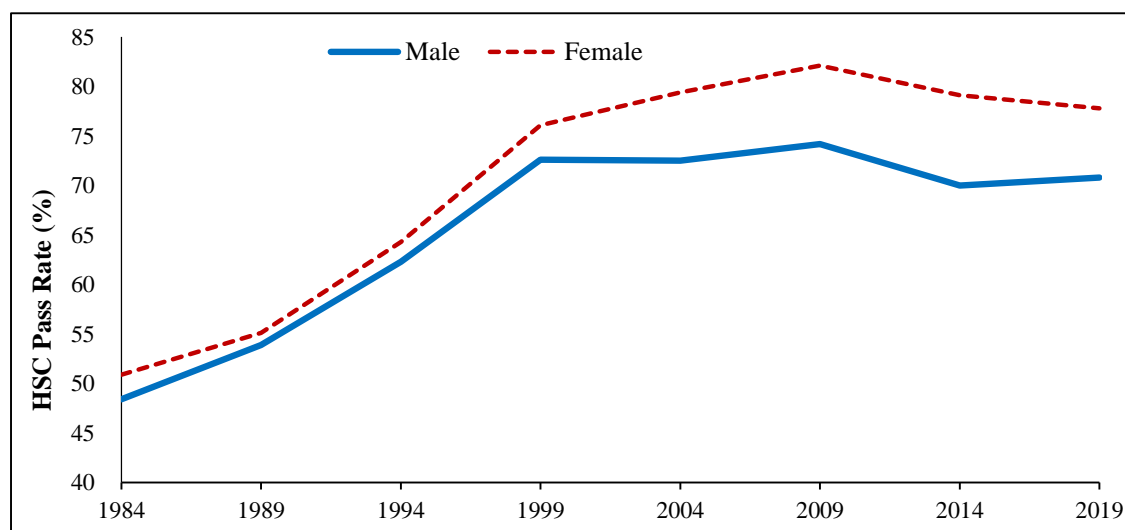
Figure 18 - Drop-out Rate (%) in secondary schools (general), Republic of Mauritius, 2008 - 2018



3.10 Girls perform better than boys in SC and HSC examinations

Regarding performance in examinations at secondary level, it was observed that girls were more successful than boys. For the 2019 School Certificate (SC) examinations, girls recorded a higher pass rate, 73% against 68%. The pass rate for girls at the Higher School Certificate (HSC) for 2019 was 78% against 71% for boys.

Figure 19 - HSC Pass Rate, Republic of Mauritius, 1984 - 2019

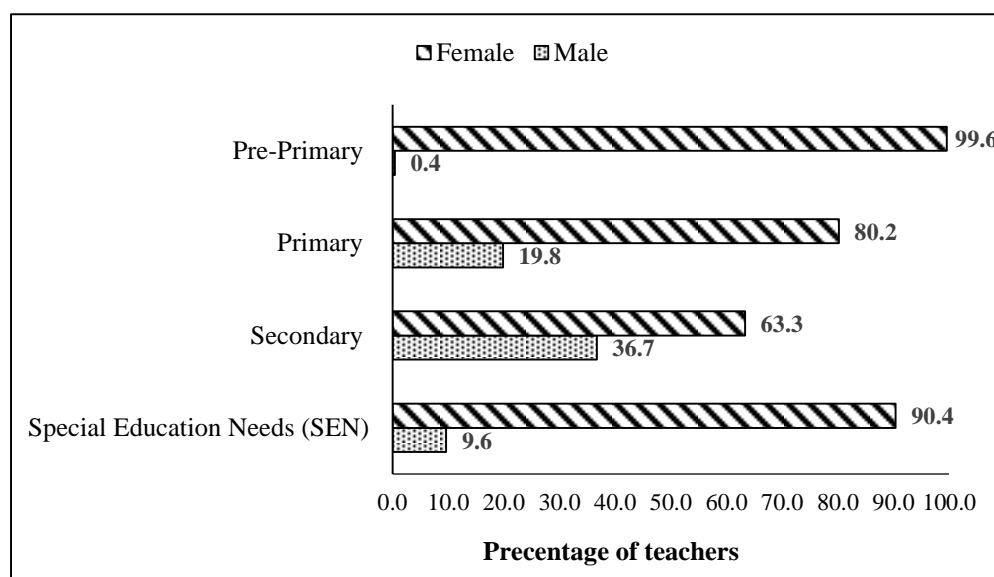


3.11 More women than men in the staff room

Teachers play an important role in society – they educate, nurture and shape the thinking of the future citizens, parents and contribute to developing the human capital of the country. In Mauritius, teaching is a female-dominated profession from pre-primary to secondary. However, the proportion of female teachers decreases as the level increases.

The pre-primary teaching sector is overwhelmingly represented by female teachers. In 2019, out of the 2,134 pre-primary school teachers, only 14 were male. Women also dominated the primary school sector. About 80% of teachers in the primary sector were female and at secondary level, the proportion remained 63%.

Figure 20 - Proportion of teachers by level, Republic of Mauritius, 2019



3.12 Girls less likely to enrol for technical and vocational education

In 2019, there were 8,024 students (of whom 76.5% were males) enrolled in publicly funded technical and vocational courses compared to 6,973 in 2018. Some 36.1 % of the students were enrolled in full-time courses, 33.5% in part-time courses and the rest (30.4%) in apprenticeship courses (Table 9).

Table 9 - Enrolment in Mauritius Institute of Training and Development (MITD) Centres, 2019

Sex	Mode of Study			Total
	Full Time	Part Time	Apprenticeship	
Male	2,273	2,127	1,735	6,135
Female	622	561	706	1,889
Both sexes	2,895	2,688	2,441	8,024

For the full time courses, there were only 21.5% of girls (Table 9).

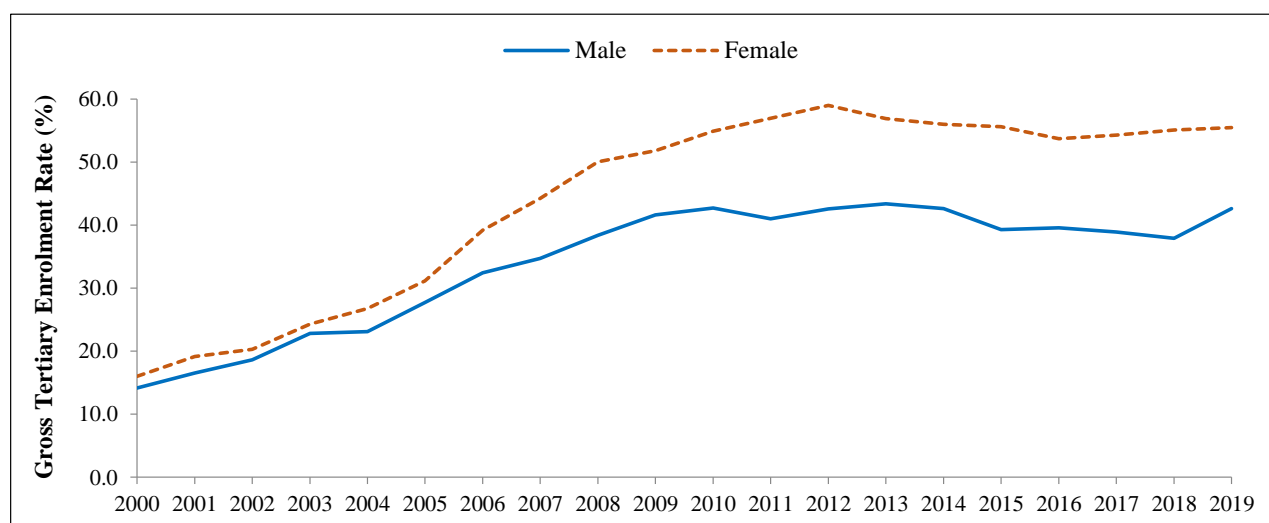
Table 10 - Enrolment in MITD Centres by course level, year of study and sex (Full Time), 2019

Course Level	Male	Female	Both sexes
National Certificate Level 2	355	151	506
National Trade Certificate Level 3	-	-	-
National Certificate Level 3	232	92	324
National Certificate Level 4	884	131	1015
National Certificate Level 5	92	18	110
Brevet de Technicien	336	5	341
Diploma	264	122	386
Higher National Diploma	110	103	213
All levels	2,273	622	2,895

3.13 Girls are more likely to be enrolled than boys at tertiary level

From 2000 to 2012, participation in tertiary education for both boys and girls has increased but with a widening gap in favour of girls. Tertiary enrolment, as measured by Gross Tertiary Enrolment Rate (GTER), rose from 16 per cent in 2000 to 59 per cent in 2012 for girls, then started to decline to reach 55 per cent in 2019. A similar pattern is observed for boys, the GTER rose from 14 per cent in 2000 to attain a peak of 43 per cent in 2013 then reached 38 per cent in 2018. In 2019, women enrolled in public, private and overseas tertiary institutions numbered 27,624, representing 55.6% of the student population which stood at 49,653.

Figure 21 - Gross Tertiary Enrolment Rate (GTER), Republic of Mauritius, 2000 - 2019



3.14 Fewer women than men in research

Even though female participation in tertiary education surpasses male participation in almost all levels, women were underrepresented in the more advanced degree programmes (PhD, MPhil and DBA), 244 women against 259 men. As a result, there were fewer women than men in research.

Table 11 – Enrolment¹ in tertiary institutions by level, Republic of Mauritius, 2019

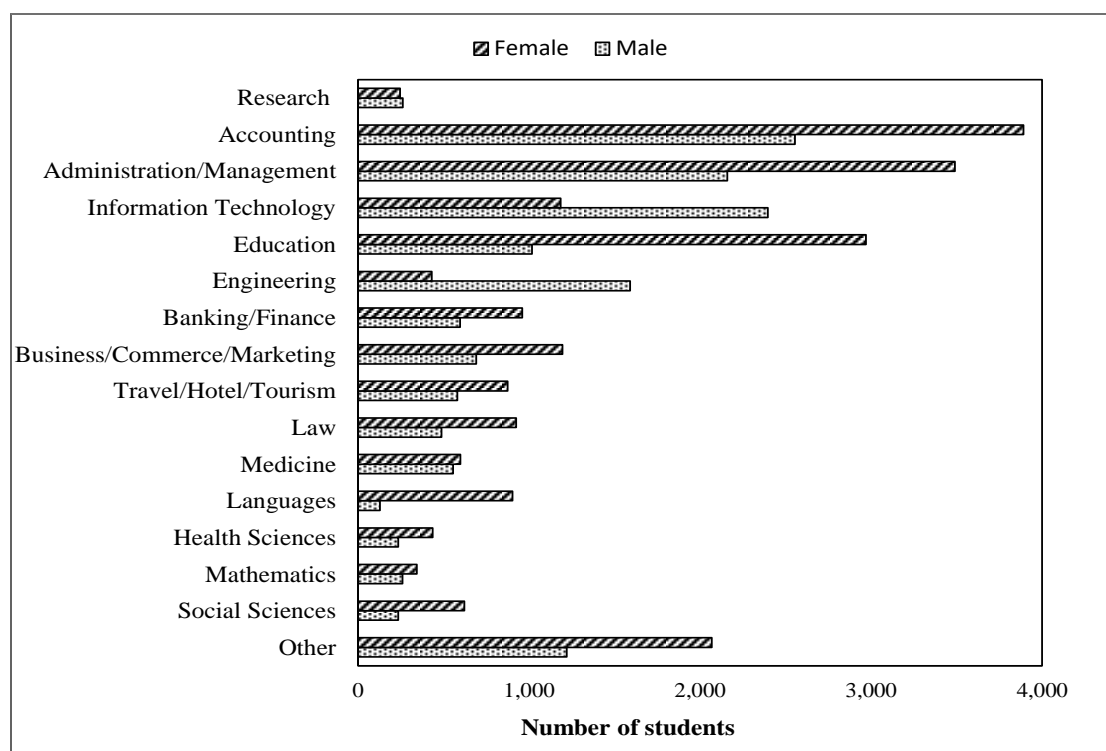
Level	Male	Female
PhD	135	128
MPhil	101	107
DBA ²	23	9
Masters Degree	1,625	1,834
Post Graduate Diploma	113	124
Post Graduate Certificate	133	404
Professional	1,898	2,809
Bachelor Degree	8,769	12,676
Diploma	2,023	2,920
Certificate	151	126
All levels	14,971	21,137

3.15 Women were underrepresented in science-related fields

The most popular field of study for both men and women was Accounting (17% and 18% respectively) followed by Information Technology (16%) for men and Administration/Management (17%) for women. Administration/Management was the third most popular subject for men (14%) followed by Engineering (11%). Education was the third choice for women (14%).

Women were underrepresented in science related fields such as Engineering (21% against 79%) and Information Technology (33% against 67%) whereas men were underrepresented in Social Science (27% against 73%) and Languages (12% against 88%).

Figure 22 - Number of student enrolled¹ in tertiary institutions by field of study, 2019



¹ Enrolment in local public and private institutions, excluding overseas students

3.16 Home Economics

Table 12 - Number of persons by sex who followed training courses held by the Home Economics Unit, Island of Mauritius, 2019

Course	Male	Female	Both sexes
Floral arrangement	1	240	241
Food processing	4	323	327
Healthy Vegetarian Cooking	7	268	275
Home Economics	-	34	34
Pastry & Dessert	5	497	502
Curtain Making	-	28	28
Motherhood and Childcare	-	10	10
Healthy Lifestyle Programme	3	431	434
Yoga	-	205	205
Aerobics	-	150	150
Pattern Making	1	114	115
Recycle Decorative Household Items	-	79	79
Beauty Care	5	376	381
Sustainable Development & Food Security	-	298	298
Family & Consumer Issues	-	159	159
Caring for Elderly	-	29	29
All courses	26	3,241	3,267

Source: Home Economics Unit, Ministry of Gender Equality & Family Welfare

In 2019, out of the 3,267 persons who benefited from the training courses held by the Home Economics Unit, 99% of them were women. The training courses that were mostly followed by the women were as follows Pastry and Dessert (15%), Healthy Lifestyle Programme (13%), Beauty Care (12%), Yoga (6%), Aerobics (5%) and Food Processing (10%).

4 Employment and work

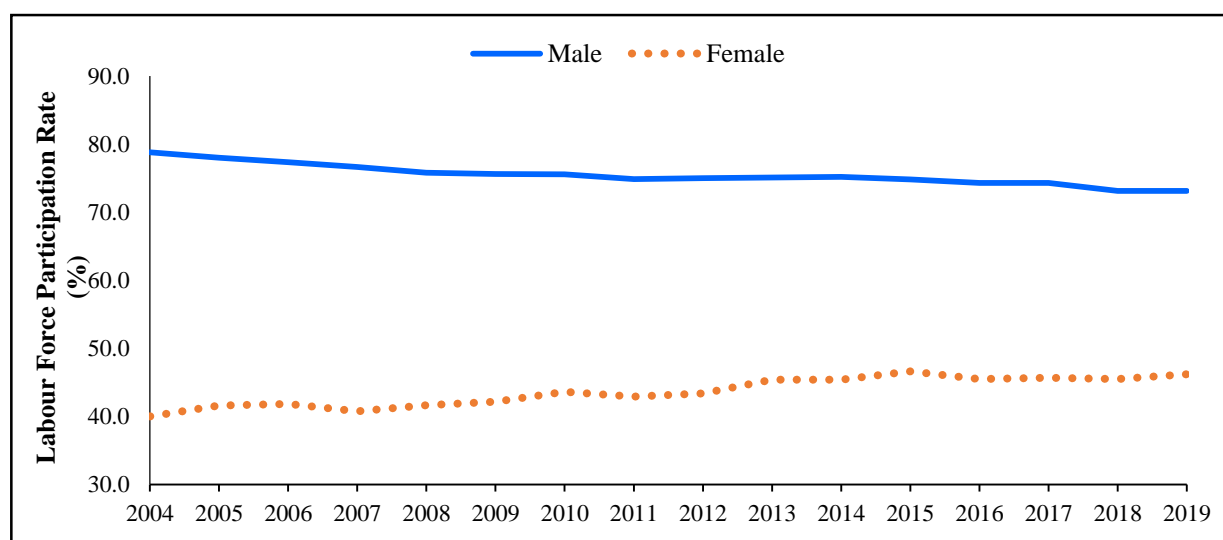
4.1 Employment

Labour force is made up of employed and unemployed population. Employed population consists of Mauritians aged 16 years and above (16+) who have worked for pay, profit or family gain for at least one hour during a week. Unemployed population comprises all Mauritians aged 16+ who are not working but who are looking for work and are available for work. Around 591,000 people aged 16 years and above made up the labour force in Mauritius. There were 236,300 (40%) women and 354,700 (60%) men in the labour force in 2019.

4.2 Women are less likely than men to participate in the labour force

While women's participation in the labour force has increased over the last decade, it is still below that of men. However, these gender differences in participation rates have been narrowing over time (figure 23). In 2019, the labour force participation rate for women - at around 46 per cent – was nearly 27 percentage points lower than the rate for men.

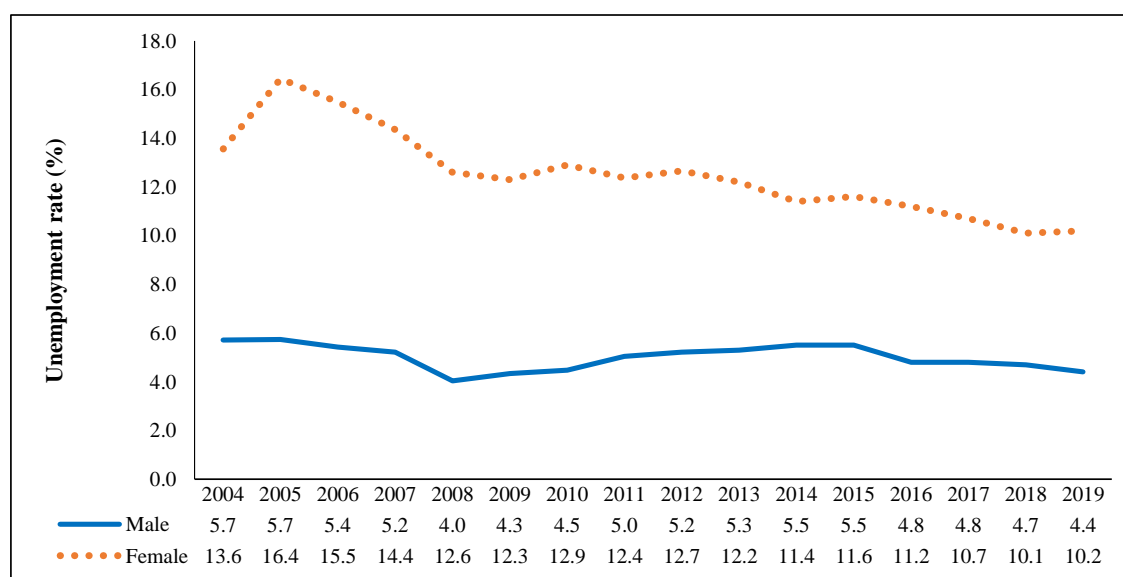
Figure 23 - Labour Force Participation Rate (%) by sex, 2004 - 2019



4.3 Unemployment

Unemployed people are those who have no job but are seeking and available for work. From 2004 to 2019, unemployment rate for women was higher than that for men. However, the gender gap in unemployment is decreasing due to a declining trend in the unemployment rate for women while that for men remaining fairly stable at around 5%. In 2019, there were 24,100 unemployed women compared to 15,600 men. Female unemployment rate stood at 10.2%, much higher than the rate of 4.4% for male.

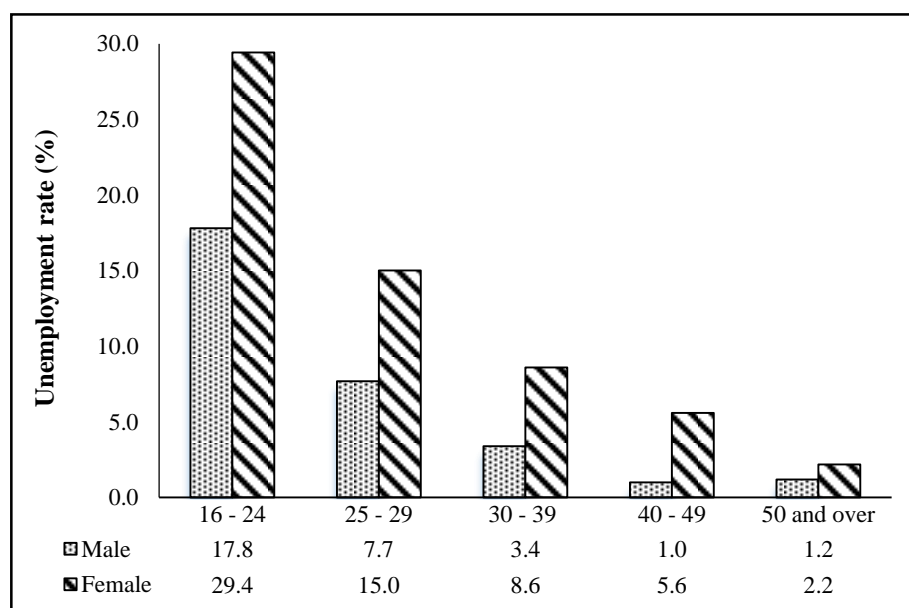
Figure 24 - Unemployment Rate (%) by sex, 2004 - 2019



4.4 Young women are more likely to be unemployed than young men

In 2019, around 29 per cent of young women aged 16 to 24 years were unemployed compared to 18 per cent of young men; the difference was nearly 11 percentage points. Also, unemployment was more prevalent among young persons aged 16 to 24 years than among adults aged 25 and older. In 2019, the unemployment rate for young women aged 16 to 24 years was three times higher than women aged 30 to 39 years. Higher unemployment among young people, especially women, may be attributed to several factors, including lack of job experience and skills mismatch.

Figure 25 - Unemployment Rate (%) by age-group & sex, 2019



Government has taken several initiatives to reduce unemployment, especially for youth and women, namely the Youth Employment Programme, the Back to Work Programme and the Dual Training Programme.

The Youth Employment Programme (YEP) which started in 2013 is meant for unemployed youth aged between 16 and 35 years and provides them with training and placement in an enterprise for an initial period of one year with the possibility of one additional year of placement with another enterprise. The Programme provides for the payment of a monthly stipend to the youth and 50% of the stipend is refunded to the employer by Government as well as 50% of the training cost up to a maximum of Rs 7,500 per youth. As at 31 December 2019, 14,565 male and 19,267 female youths were registered with YEP and 10,458 males and 12,518 females obtained placement.

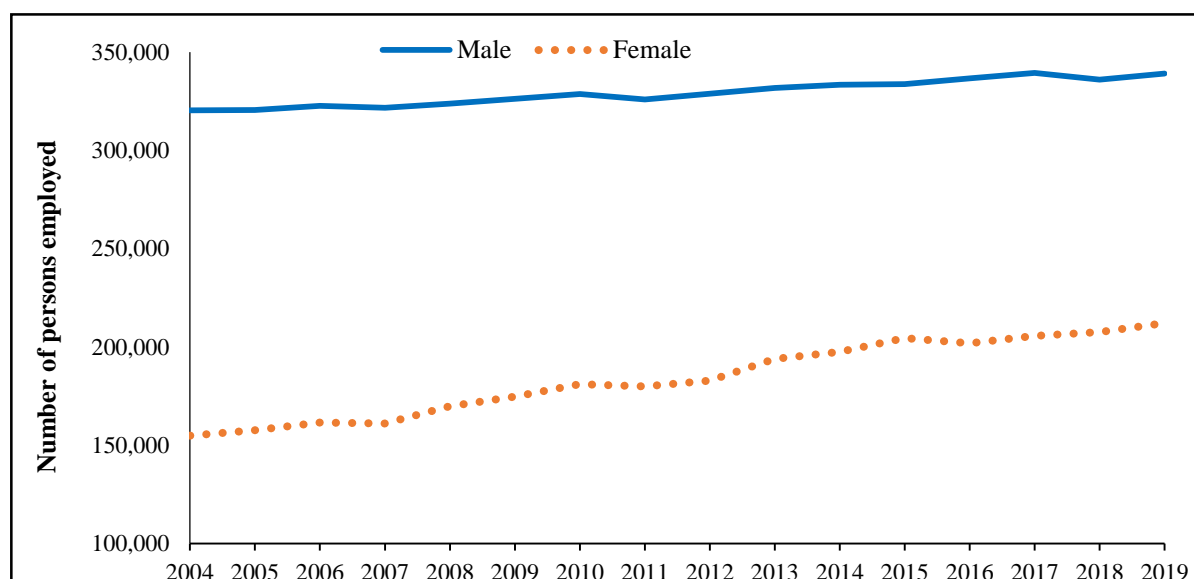
The Back to Work Programme (BTWP) which was launched in June 2015 is meant for women above 35 years of age to enable them take up or resume employment. The Programme provides for the placement of women in a job for an initial period of one year following which they may be employed. During the placement period, the women will be paid a stipend of Rs 5,000 and will get the opportunity of following training in a registered institution. Employers enrolling women on placement under the Programme will be refunded the training cost up to a maximum of Rs 7,500 per woman as well as the stipend for the placement period. As at December 2019, 4,505 women were registered in this programme and 1,199 have been placed.

The Dual Training Programme (DTP), launched in June 2015 provides for unemployed Mauritians to follow a Diploma or Degree Course with a tertiary institution registered with either the Tertiary Education Commission or the Mauritius Qualifications Authority in fields required by the labour market, with placement in an enterprise. Under the Programme, trainees were paid a monthly stipend of Rs 6,000 for a maximum period of three years. As for employers, they were refunded 50% of the course fees or Rs 50,000 whichever is the lower, per year per trainee as well as the stipend for a maximum of three years. After satisfactory completion of the course, the trainees would be employed. As at December 2019, 100 male and 130 females were enrolled in re engaged in the DTP, out of which 55 males and 74 females have already completed their training programme and 87 trainees have obtained permanent jobs after completion of the training.

The Trainee Engineer Scheme (TES) was launched in September 2016 in the Public Sector and was extended to the Private Sector in March 2017. The objective of the Trainee Engineer Scheme is to provide practical training to graduates for a period of 24 months under supervision of a professional Engineer so as to enable them to qualify for registration with the Council of Registered Professional Engineers of Mauritius and to operate as full-fledged Engineers. Under the TES trainees are paid a monthly stipend of Rs23,975. Employers from the private sector are refunded 50% of the stipend. The requirements for enlistment of trainees for the Trainee Engineer Scheme are a Degree in Engineering plus Eligibility Certificate Stage 1 from the Council of Registered Professional Engineer. As at 31 December 2019, the number of applications received for the scheme was 1,170 (863 males and 307 females). The number of placements effected in the public sector was 348 (274 males and 74 females) and in the private sector was 179 (134 males and 45 females). Most placements were made in the following fields: 49% in Civil Engineering and 20% in Mechanical Engineering.

The number of women working has been increasing gradually. In 2019, an estimated 212,200 women compared to 339,100 men were in employment.

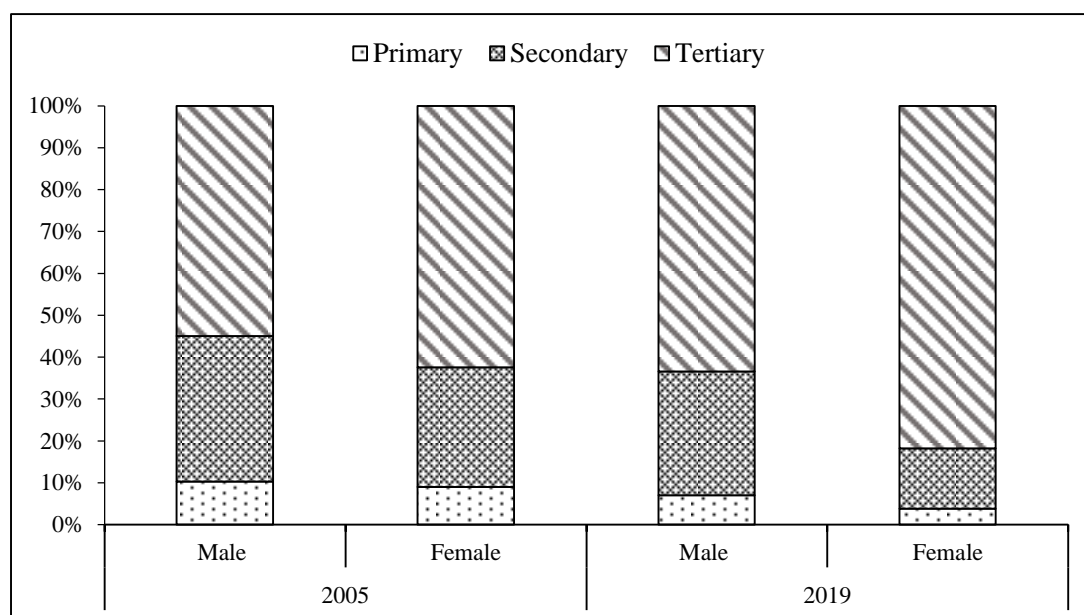
Figure 26 - Number of people in employment by sex, 2004 - 2019



4.5 For both women and men, employment in the services sector keeps growing

Overtime, the tertiary sector has become increasingly important as a source of employment for both women and men. In 2019, 81.8 per cent of employed women and 63.4 per cent of employed men were engaged in this sector. On the other hand, employment in the primary and secondary sectors has been declining overtime. In the primary sector, employment during the period 2005 to 2019 went down by 42 per cent for women and 27 per cent for men due to a decline in the agricultural sector. During the same period, the secondary sector has declined in importance as a source of employment, more so for women than for men. In fact, the decrease was 32 per cent for women compared to 10 per cent for men mainly due to a decreasing workforce in the manufacturing sector.

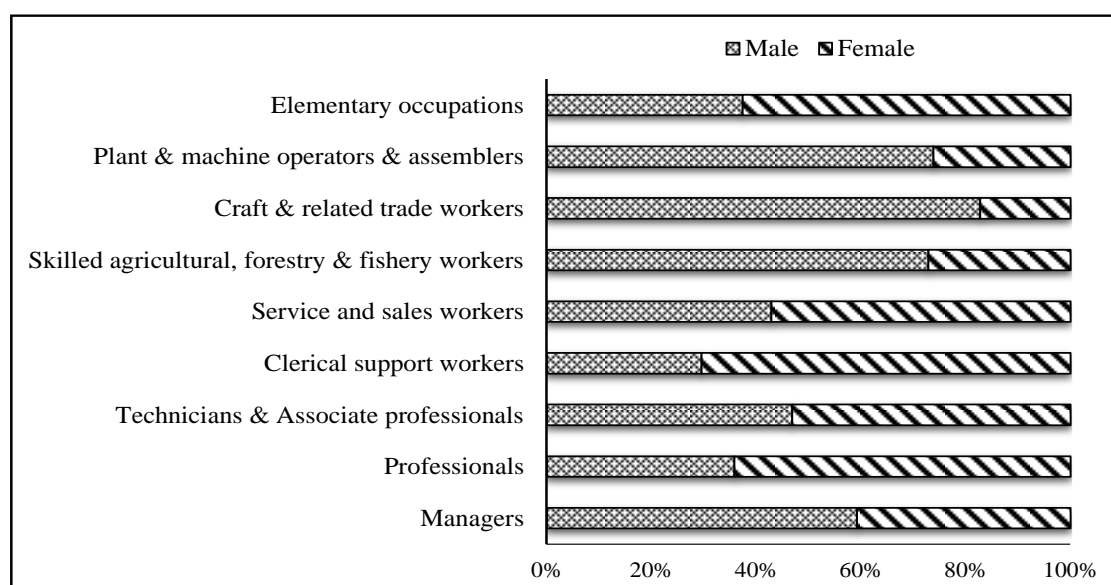
Figure 27 - Employed population by industrial sector, 2005 & 2019



4.6 Women are less likely than men to be managers

An analysis of employment segregation for women and men in the labour market at occupational level shows that women were more concentrated in certain types of jobs than others. In 2019, nearly 62% of women in employment were engaged as professionals, service and sales workers and in elementary occupations. The largest occupation group for women was “service and sales workers” with 56,200 women employed while for men was “craft and related trade workers” with 67,500 men employed. The most male-dominated occupation was “craft and related trade workers” where men held nearly 88% of the jobs. Women held 45% share in management and professional positions.

Figure 28 - Employment by occupational group & sex, 2019

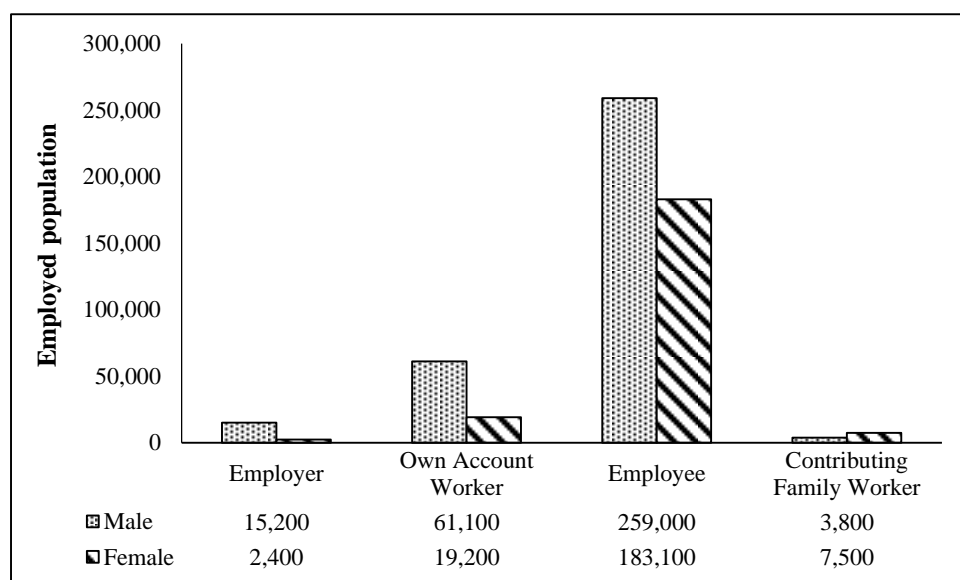


4.7 Men as well as women are more likely to be employees

Information on how jobs are held by people is important as such classification provides the basis for analysing employment conditions in terms of a job’s level of security, protection and rights. Jobs can be classified into four main categories, which can be grouped under two main types of jobs: paid employment (employees) and self-employment (employers, own-account workers and contributing family workers).

The majority of employed women and men are wage and salaried employees. In 2019, around 86 per cent of employed women and 76 per cent of employed men were wage and salaried employees.

Figure 29 - Employed population by employment status & sex, 2019



4.8 Men are more likely than women to be in vulnerable employment

Some jobs are less secure than others. People working as own-account workers and contributing family workers tend to lack basic social protections and are subjected to variance in income and difficult working conditions. They are considered to be in “vulnerable” types of employment. In 2019, 26,700 women compared to 64,900 men were in vulnerable employment.

4.9 Men are more likely than women to be engaged in small business

A small production unit is an establishment or an itinerant unit engaging less than 10 persons, including working proprietors. An establishment is defined as a production unit engaged in one kind, or predominantly one kind of economic activity at a single physical location. An itinerant unit refers to a mobile production unit which does not operate at a fixed location.

Examples are hawkers and sellers along the road within a temporary makeshift location, taxi operators and units involved in construction activities.

The number of small production units (establishments and itinerant units) was estimated at 138,600 in 2018. Around 102,800 females compared to 219,200 males were engaged in those small units. The figures include both full-time and part-time workers; a part-time worker being counted as one person engaged.

Male workers were mostly engaged in “Wholesale and retail; repair of motor vehicles and motor cycles, etc.” (32%), “Construction” (13%), “Transportation and storage” (14%) and “Manufacturing” (13%). Among female workers, 39% were in “Wholesale and retail trade; repair of motor vehicles and motor cycles”, 16% in “Accommodation and food service activities” and 14% in “Manufacturing”.

4.10 Men are more likely than women to be engaged in informal activities

The informal sector comprises household unincorporated market enterprises that do not have a complete set of accounts. This definition satisfies the four mandatory criteria adopted by the UN expert group on Informal Sector Statistics, that is, the enterprises (production units) are unincorporated and owned by households and they sell all or part of their production but do not have a complete set of accounts.

Household unincorporated enterprises are those enterprises that are not considered as separate legal entities independent of the households who own them. They can be engaged in virtually any kind of productive activity – agriculture, mining, manufacturing, construction, retail distribution or production of other kinds of services. They can range from single persons working as street traders or shoe cleaners with no capital or premises of their own to manufacturing, construction or service enterprises with many employees.

Based on the 2018 Census of Economic Activities (CEA) which cover all types of economic activities except agriculture, 27% (33,500 units) of all small production units were informal. They were mainly engaged in ‘Wholesale and retail trade; repair of motor vehicles and motorcycles’ (35%), ‘Transportation and storage’ (17%), ‘Manufacturing’ (13%), ‘Construction’ (10%) and ‘Accommodation and food service activities’ (9%).

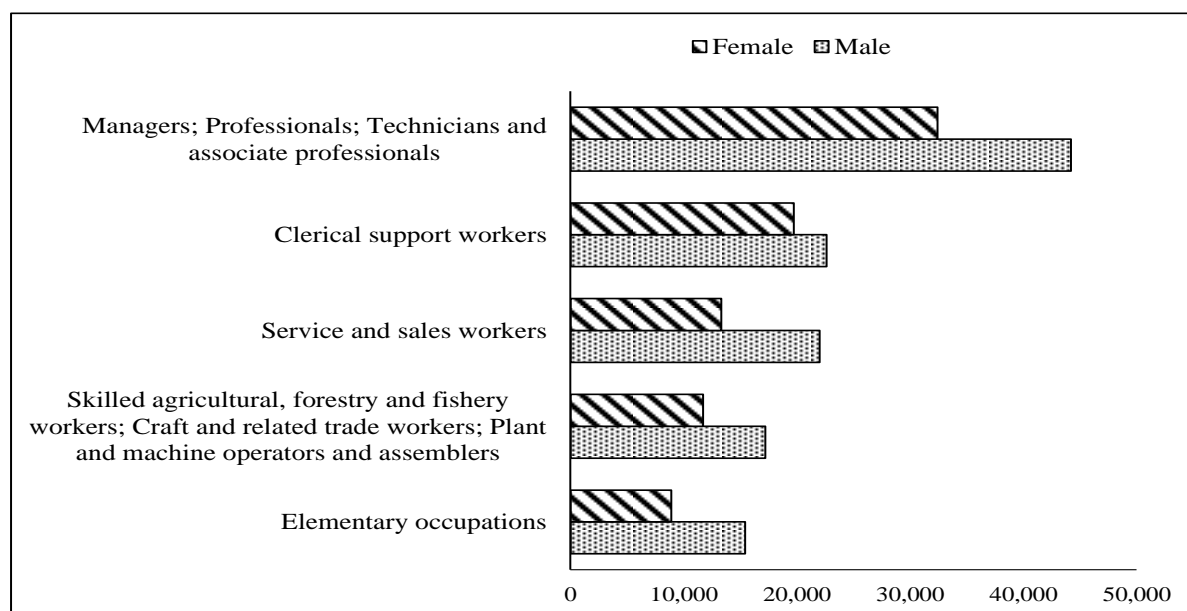
The number of persons engaged in the informal units was around 56,100, representing 20% of the total number of persons engaged in all small establishments covered in the CEA. Male employment was estimated at 41,000 and female employment at 15,100.

Nearly half of the female workers were engaged in retail trade while men were mostly in ‘Wholesale and retail trade; repair of motor vehicles and motorcycles’ (27%), ‘Transportation and storage’ (25%) and ‘Construction’ (24%).

4.11 Women earn less than men

On average, women earned Rs 19,100 per month compared to Rs 25,100 earned by men. The gender pay gap was 24%, meaning that women earned 76% of what men earned. A gap in earnings between women and men was observed across all occupational groups. In the occupational category of managers, professionals and associate professionals, women earned on average 73 per cent of what men earned. In elementary occupations, women earned on average 57% of what men earned.

Figure 30 - Average monthly income (Rs) by occupational group & sex, 2019



4.12 Higher pay-gap in primary sector

On average, women earned Rs 10,000 per month compared to Rs 18,400 earned by men in the primary sector. The gender pay gap was 46%, meaning that women earned 54% of what men earned in that sector. Other sectors with high pay gap were manufacturing and accommodation/food services activities. On the other hand, lowest pay gap was observed in public administration and defence sectors.

Table 13 - Average monthly income (Rs) of employees by industrial sector and sex, Year 2019

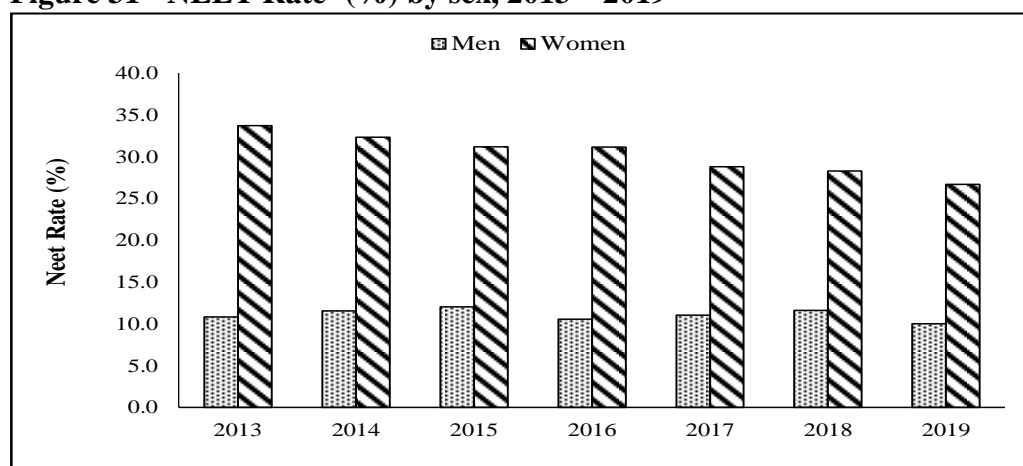
Industrial sector	Average monthly income (Rs)		
	Male	Female	Both Sexes
Primary	18,400	10,000	16,500
Secondary	20,100	13,900	18,400
<i>of which: Manufacturing</i>	21,600	13,500	18,100
<i>Construction</i>	16,800	16,900	16,800
Tertiary	27,500	20,200	24,100
<i>of which: Wholesale and retail trade</i>	19,400	14,700	17,300
<i>Accommodation and food service activities</i>	20,700	14,200	18,000
<i>Transportation and storage</i>	26,200	28,600	26,600
<i>Public administration and defence</i>	33,100	29,600	32,100
<i>Education and Human Health & social work activities</i>	35,500	27,200	30,200
All Sectors	25,100	19,100	22,600

4.13 Young women were more likely to be neither studying nor working

Young people are particularly susceptible to unemployment as they typically have less work experience than others competing for the same jobs. Young people not engaged in education, employment or training, expressed as the acronym “NEET”, are being used increasingly as a measure of youth marginalisation and disengagement. Because they are neither improving their future employability through investment in skills nor gaining experience through employment, NEETs are particularly at risk of both labour market and social exclusion.

Figure 31 shows that women were more likely to be neither studying nor working. During the period 2013 to 2019, the NEET rate was consistent higher for women compared to men. In 2019, the NEET rate was 27 per cent for women and 10 per cent for men.

Figure 31 - NEET Rate¹ (%) by sex, 2013 – 2019



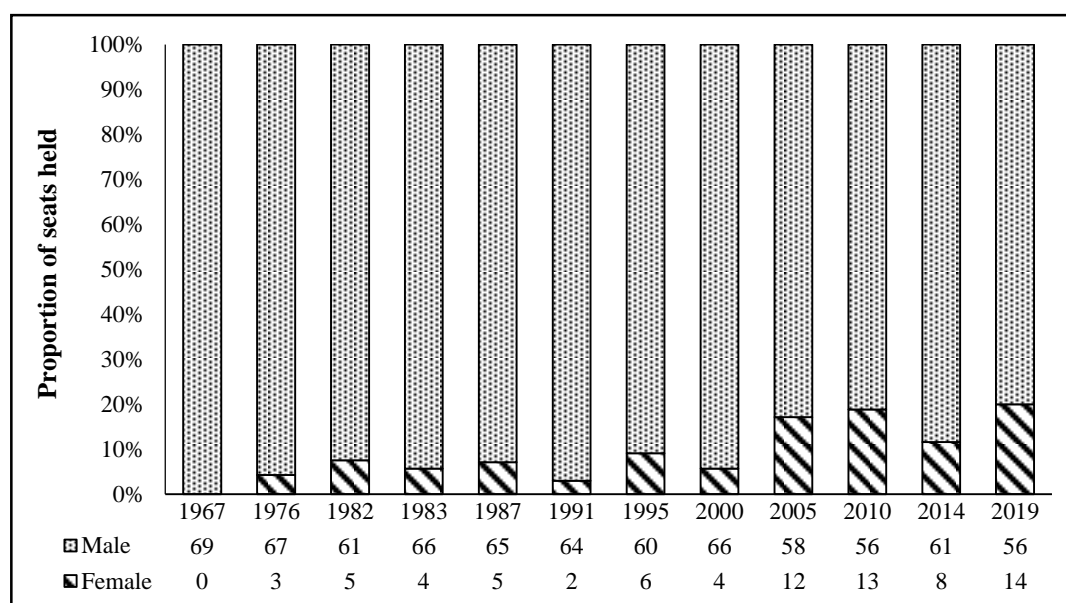
¹Percentage of youth aged 16-35 years not in employment, education or training

5 Public life and decision-making

5.1 Women continue to be underrepresented in Parliament

Although women make up about fifty-one per cent of the population, and the proportion of women candidates has been increasing over the years, they continue to be underrepresented as members of Parliament. The proportion of seats held by women in Parliament was 20 per cent in the last 2019 election.

Figure 32 - Proportion of seats held by women in Parliament, 1967 - 2019



Source: Statistics Mauritius

In 2011, Government enacted the Local Government Act which provides for adequate representation of each sex at local government level. As a result, the proportion of women elected at Municipal Council elections increased significantly in 2012 and 2015 as shown in the Table 12 below.

Table 14 - Elected Members at Municipal Council Election, 1985 – 2015

Year	Elected Members			
	Male	Female	Both sexes	% female
1985	119	7	126	5.6
1988	118	8	126	6.3
1991	119	7	126	5.6
1996	115	11	126	8.7
2001	109	17	126	13.5
2005	110	16	126	12.7
2012	57	33	90	36.7
2015	79	41	120	34.2

Source: Electoral Commissioner's Office

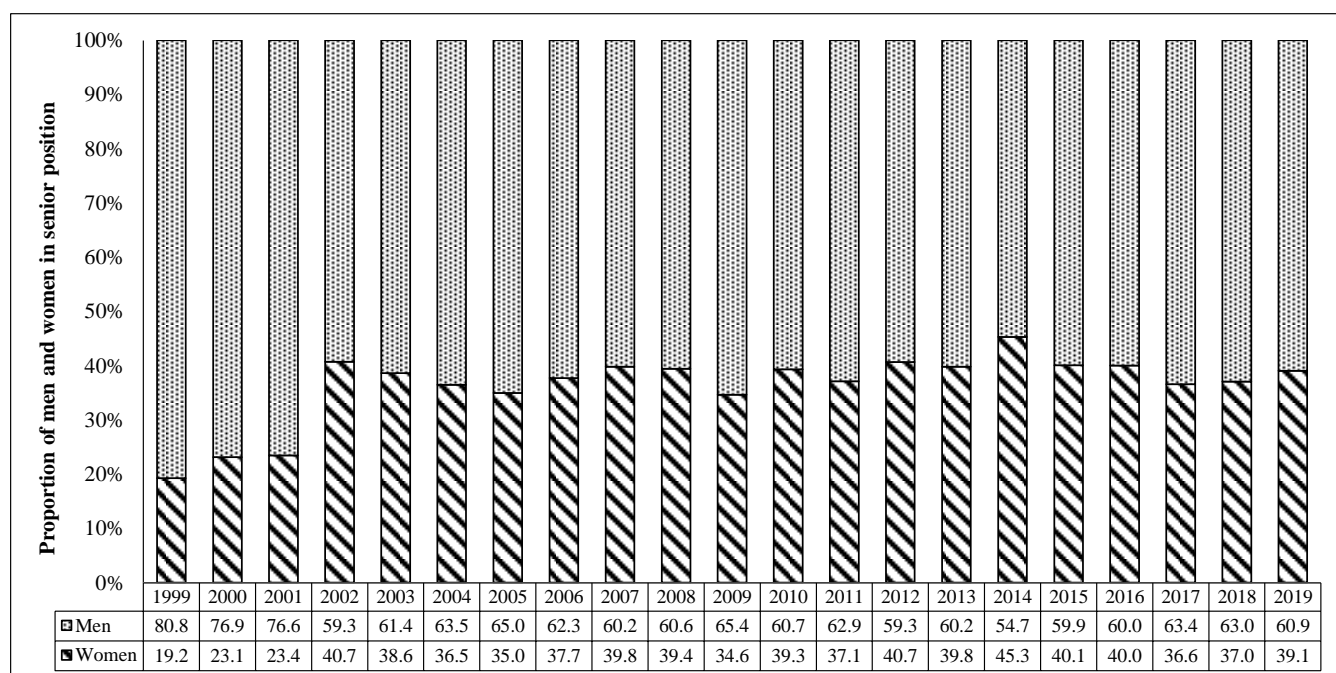
5.2 Mayors are largely men

Even though the proportion of women elected at Municipal Council elections has increased, the proportion of female mayors remained low. In 2019, out of the five municipalities, only one has a female mayor.

5.3 Women are underrepresented among senior-level civil servants

From 1997 to 2002, there has been a noticeable progress in the proportion of women holding senior positions¹ in Government. However, data from 2003 to 2019 on senior-level civil servants indicate that the share of women in those posts remain at around 39%.

Figure 33 - Proportion of women in senior positions¹ in Government, 1997 - 2019



Source: Annual Survey of Employment in Government Services, Ministry of Gender Equality

5.4 Women are less likely to hold senior positions in the private sector

Women are severely underrepresented in senior positions in the private sector. According to available 2015 data², the proportion of women holding senior positions in the private sector was around 8 per cent.

Very few women are able to reach the position of CEO. Data indicate that the glass ceiling remains impenetrable in private companies in Mauritius. In 2015, less than 5 per cent of the CEOs were women.

¹ Senior positions: Senior Chief Executive, Permanent Secretary, Deputy Permanent Secretary, Director, Manager, Judge and Magistrate

² The Top 100 Companies, 2015 Edition, La Sentinelle

5.5 More women as judge and magistrate

There has been a noticeable progress in the representation of women among judges and magistrates in the judiciary over the last ten years. The proportion of women among judges and magistrates increased from 58 per cent in 2009 to 60 per cent in 2019.

Table 15 - Judge and Magistrate in the Judiciary, 2009 – 2019

Year	Male	Female	Both sexes	% female
2009	25	35	60	58.3
2014	26	38	64	59.4
2019	26	39	65	60.0

Source: *The Judiciary*

5.6 Women are underrepresented in the police force

The proportion of women in the police force has gradually increased but remained low. The share of women in the police force increased from 5.7 % in 2008 to reach 8.3 % in 2019.

Table 16 - Women in the Mauritius Police Force, 2009 - 2019

Year	Male	Female	Both sexes	% female
2009	10,478	648	11,126	5.8
2010	10,305	733	11,038	6.6
2011	9,997	709	10,706	6.6
2012	10,455	912	11,367	8.0
2013	10,836	893	11,729	7.6
2014	11,408	1,048	12,456	8.4
2015	11,158	1,021	12,179	8.4
2016	11,648	1,012	12,660	8.0
2017	11,907	1,084	12,991	8.3
2018	11,841	1,214	13,055	9.3
2019	13,343	1,210	14,553	8.3

Source: *Mauritius Police Force*

6 Disability

According to UN Convention on the Rights of Persons with Disabilities, persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others.

Data on disabilities were collected at the 2011 Population Census where a person was counted as a disabled person if he/she had any difficulty to perform a daily-life activity considered normal for his/her age, i.e. , regardless of the severity of the difficulty. Persons were asked to report all disabilities that they had. However, each disabled person was counted only once.

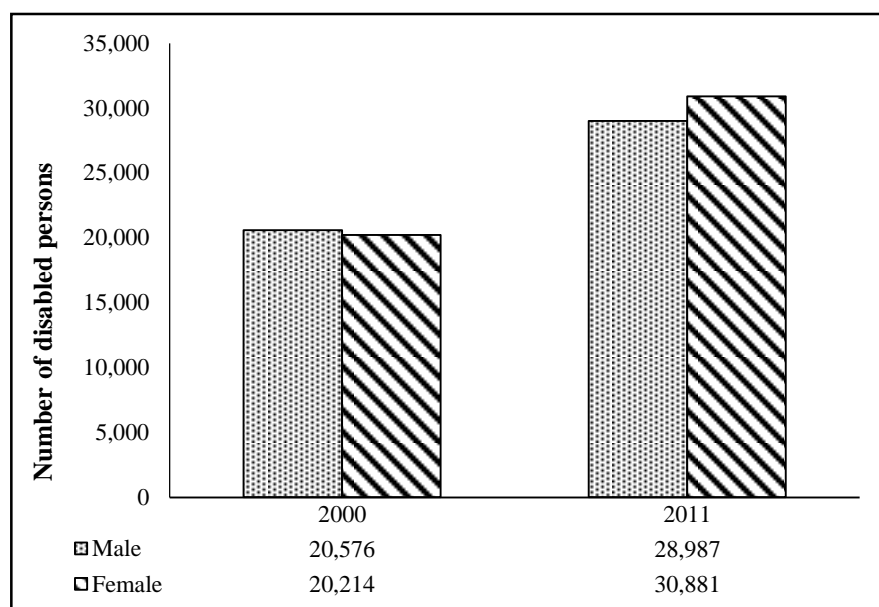
6.1 More disabled women than men

Figure 34 on disabled population shows two important changes. Firstly, the disabled population in 2011 for both women and men has increased compared to 2000. Secondly, there were more females than males in 2011 compared to 2000 where males outnumbered females.

In 2011, the disability prevalence rate, defined as the number of disabled persons per 1000 mid-year population was 47.5 for men and 49.3 for women. To enable comparison with year 2000, standardized rate is used to remove the effect of any change in age structure between 2000 and 2011. Using the 2000 population age structure as standard, the 2011 standardised disability prevalence rate was 40.4 for men and 40.7 for women per 1000 mid-year population.

In 2000, the disability prevalence rate was 35.2 for men and 34.0 for women per 1000 mid-year population. The figures reveal a higher prevalence of disability for both men and women in 2011.

Figure 34 - Disabled population, 2000 and 2011 Population Censuses



Source: Population Censuses, Statistics Mauritius

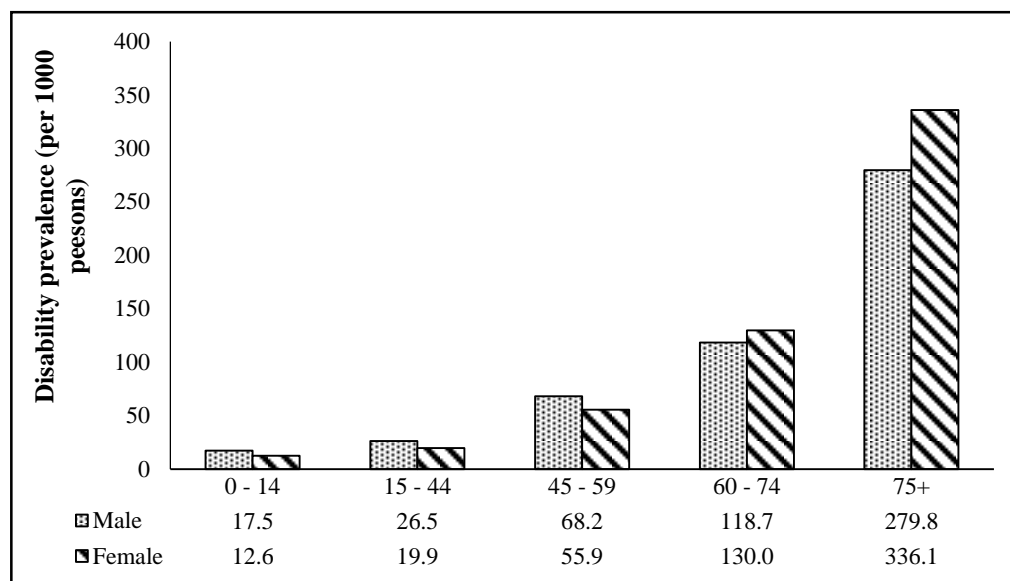
6.2 Prevalence rate of disability increases with age for both women and men

Disability prevalence (figure 35), which relates to the number of disabled person in an age group to its corresponding population, is the most appropriate measure to compare tendency between age groups. In 2011, there were 13 out of 1000 girls below 15 years having some

form of disability, the prevalence increased rapidly to reach 336 per 1000 women aged 75 years and above. A similar pattern is observed for men.

Figure 35 also shows that prevalence among male was higher than among female for population below 60 years whereas female prevalence was predominant in the age groups 60 years and above.

Figure 35 - Disability prevalence (per 1000 persons) by age, 2011



Source: 2011 Population Census, Statistics Mauritius

An analysis of educational attainment reveals that disabled females are much more disadvantaged than their male counterparts. In 2011, nearly 31% of disabled females had no formal education or had attended pre-primary only compared to 14% for males. Furthermore, only 19% of the disabled females reached at least secondary level of education against 31% for males.

Table 17 - Distribution of population aged 2 years and above by educational attainment, 2011

Educational attainment	Disabled population		Overall population	
	Male	Female	Male	Female
Nil and pre-primary	13.7	31.1	6.8	11.0
Primary	49.1	46.0	35.4	36.6
Secondary	29.7	18.1	51.9	48.5
University degree or equivalent	1.3	0.6	4.4	3.1
Specialised school for the Disabled	5.5	3.4	-	-
Other & not stated	0.7	0.8	1.5	0.8
Total	100.0	100.0	100.0	100.0

Source: 2011 Population Census, Statistics Mauritius

6.3 More disabled men than women in employment

From 2000 to 2011, there has been an improvement in the level of activity of both disabled men and women. During this period, the activity rate for men increased from 18.6% to 24.2% while for women, it increased from 6.4% to 9.9%. However, disabled women were less active compared to men. In 2011, 2,542 disabled women were in employment compared to 5,893 men. The number of unemployed disabled women stood at 348 against 516 men.

Table 18 - Distribution of disabled population aged 16 years and above by activity status, 2000 and 2011

Activity status	2000		2011	
	Male	Female	Male	Female
Economically active	18.6	6.4	24.2	9.9
<i>Employed</i>	16.6	5.6	22.2	8.7
<i>Unemployed</i>	2.0	0.8	1.9	1.2
Economically inactive	79.3	91.6	75.4	89.6
<i>Household duties</i>	1.0	34.3	0.4	36.1
<i>Studies</i>	1.4	1.0	2.0	1.8
<i>Disability</i>	50.6	45.1	42.3	35.6
<i>Retired</i>	25.5	9.1	29.4	14.3
<i>Other</i>	0.7	2.1	1.3	1.8
Activity not stated	2.1	2.0	0.4	0.5
Total	100.0	100.0	100.0	100.0

Source: Population Censuses, Statistics Mauritius

Disabled men are most likely to be employed as “craft & trade workers”, while women mostly work in “elementary” occupations, such as cleaner, cook, attendant or labourer.

Table 19 - Employed disabled population aged 16 years and above by occupation, 2011

Occupation	Persons employed		% distribution	
	Male	Female	Male	Female
Managers	242	105	4.1	4.1
Professionals	216	168	3.7	6.6
Technicians and associate professionals	346	153	5.9	6.0
Clerical support workers	257	201	4.4	7.9
Service and sales workers	1,029	492	17.5	19.4
Skilled agricultural, forestry & fishery workers	490	120	8.3	4.7
Craft & related trade workers	1,545	151	26.2	5.9
Plant & machine operators & assemblers	599	219	10.2	8.6
Elementary occupations	1,155	930	19.6	36.6
Not stated	14	3	0.2	0.1
All occupations	5,893	2,542	100.0	100.0

Source: 2011 Population Census, Statistics Mauritius

6.4 Washington Group

The Washington Group on Disability Statistics (WG) was set up in 2001 following the United Nations International Seminar on Measurement of Disability to address the need for statistical and methodological initiatives at an international level to facilitate the measurement of disability and the comparison of data on disability cross-nationally.

To date the WG has designed for inclusion in Censuses a set of six questions on disability and has also introduced a measure of severity of the reported disability as “(1) Some difficulty, (2) A lot of difficulty and (3) Cannot do at all”. However, according to WG, only those reporting “(2) A lot of difficulty and (3) Cannot do at all” are to be considered and counted as disabled persons.

Data on measure of severity of disability has been collected, for the first time, at the 2011 Census. According to WG recommendations, the disabled population numbered 31,978 (15,969 male and 16,009 female) at the 2011 Census, representing a disability prevalence rate of 25.9 (26.1 for male and 25.6 for female) per 1000 mid-year population.

6.5 Welfare of persons with disabilities

The Government gives financial assistance to persons with disabilities through the Basic Invalidity Pension (BIP). The BIP is payable to any person under the age of 60, if certified by a Medical Board that the person is either permanently or substantially incapacitated to a degree of 60% or more for at least 12 months. As at June 2019, there were 31,935 such beneficiaries, with a higher proportion of men (53%) compared to women (47%).

Table 20 - Beneficiaries of Basic Invalidity Pension by age and sex, June 2019

Age-group (years)	Male	Female	Both sexes
0-14	2,000	1,289	3,289
15-19	971	643	1,614
20-24	868	640	1,508
25-29	991	846	1,837
30-34	1,036	941	1,977
35-39	1,483	1,406	2,889
40-44	1,725	1,678	3,403
45-49	2,044	1,954	3,998
50-54	3,119	2,997	6,116
55-59	2,748	2,556	5,304
Total	16,985	14,950	31,935

Source: Statistics Mauritius

7 Poverty and Social Welfare

Poverty is multidimensional. Poverty entails more than lack of income and productive resources to ensure sustainable livelihoods. It includes hunger and malnutrition, limited access to education and other basic services, social discrimination and exclusion, as well as lack of participation in decision-making. Poverty is usually measured in either monetary or non-monetary terms.

In Mauritius, the monetary approach is used to assess the poverty situation based mainly on the Household Budget Survey data. A person or household is “poor” if its resources fall below a threshold or cut off line known as the poverty line. The relative poverty line is defined as half of the median monthly household income per adult equivalent. In 2017, the relative poverty line was estimated at Rs 7,497.

7.1 Women were more likely than men to be in poverty

In 2017, women were more likely to be in relative poverty. The proportion of female in relative poverty was 11.0% against 9.6% for male. Out of 130,500 persons in relative poverty, 70,300 were females and 60,200 were males.

Table 21 - Number of persons in relative poverty, 2012 and 2017

	2012	2017
Relative poverty line (Rs)	5,652	7,497
Persons in relative poverty		
Both sexes	122,700	130,500
Male	56,000	60,200
Female	66,700	70,300

Source: Household Budget Surveys, Statistics Mauritius

7.2 Female-headed households more likely to be in poverty

In 2017, 15.9% of female-headed households were in relative poverty as compared to 7.6% of male-headed households.

Table 22 - Proportion (%) of households in relative poverty, 2012 and 2017

	2012	2017
Relative poverty line (Rs)	5,652	7,497
Number of households in relative poverty	33,600	36,100
Proportion of households in relative poverty (%)	9.4	9.4
Proportion of male-headed households in relative poverty (%)	7.3	7.6
Proportion of female-headed households in relative poverty (%)	17.0	15.9

Source: Household Budget Surveys, Statistics Mauritius

7.3 Social Welfare

Mauritius has a comprehensive social welfare system that consists of policies and programs designed to reduce poverty and vulnerability, namely: free health care, free education, basic pensions, assistance to families with special needs, social aid, food aid, cyclone refugee allowance, subsidized housing, subsidies for rice and flour and free bus transport to student and elderly.

Social protection, free health services, education and bus transport play a key role in bringing down poverty. Without them, poverty would have soared to more than three times its level. In 2012, the proportion of poor households would have been 30% instead of 9.4%.

Social protection which comprises mainly universal pensions is the main instrument in reducing poverty by bringing it down to half its level. The 2012 poverty rate of 9.4% would have been higher at 19% without any social protection.

8 Gender-Based Violence

8.1 What is Gender-Based Violence (GBV)?

GBV is an umbrella term used to describe any harmful act that is perpetrated against a person's will and is based on socially ascribed gender differences between males and females. GBV is a gross violation of human rights and a significant public health issue.

8.2 Types of Gender-Based Violence

- ***Physical Violence***

Arm twisting, attempt to murder, backhanding, beating, biting, burning, choking, denial of access to services, deprived of medication, forced use of substances (e.g. alcohol and drugs), grabbing, holding the partner down, kicking, over medication, pinching, pulling hair, punching, pushing, refusal to get help or medical attention, scratching, shaking, slapping, spitting, stabbing, strangling, throwing objects and using weapons.

- ***Sexual Violence***

Being criticized sexually, being forbidden the use of birth control, being forbidden the use of protection against sexually transmitted diseases, coerced into having sex with others, forced abortion, forced pregnancy, forced prostitution, forced sexual intercourse, forced sterilization, forced to perform degrading or painful sexual acts, sodomy, unfounded allegations of promiscuity and/or infidelity, unwanted kissing or touching and withholding sex as a punishment.

- ***Psychological Violence***

Denied with meeting ones' basic physical needs (e.g: eating and sleeping), locked out of the home, lying to confuse, manipulating the victim with words- ideas or lies, playing mind games, threatening to harm victim- the children and victim's family- if victim leaves, threats of abandonment.

- ***Emotional Violence***

Brain washing children, constant criticism, constant humiliation, denying opportunities, destroying possessions, detained against ones' will, discriminating, disproportionate anger, expressing negative expectations, harming pets, intimidation, jealousy, name calling, perpetrator using silent treatment, prevented from leaving, recalling past mistakes, restraining to meet specific-persons, stalking, threatening to commit suicide, threatening to take the children, threatening with objects, blaming victim for all relationship problems and not allowing victim to have contact with family and friends.

- **Economic Violence**

Controlling victim's choice of occupation, forbidding the victim to work, forbidding the victim to have access to the family income and bank accounts, forcing the victim to work, jeopardizing the victim's employment, perpetrator refusing to contribute to expenses, requiring justification for all money spent, taking money needed for the care of the family.

Since domestic violence constitutes a big segment of GBV, deeper analysis is being carried out on domestic violence.

8.3 Women are more likely to be victims of domestic violence

In 2019, there were 2,222 cases of domestic violence reported at the Ministry of Gender Equality and Family Welfare, 1,710 were new cases (i.e. 77%). Overall a slight increase of domestic violence cases from 2,066 in 2018 to 2,222 in 2019 was noted.

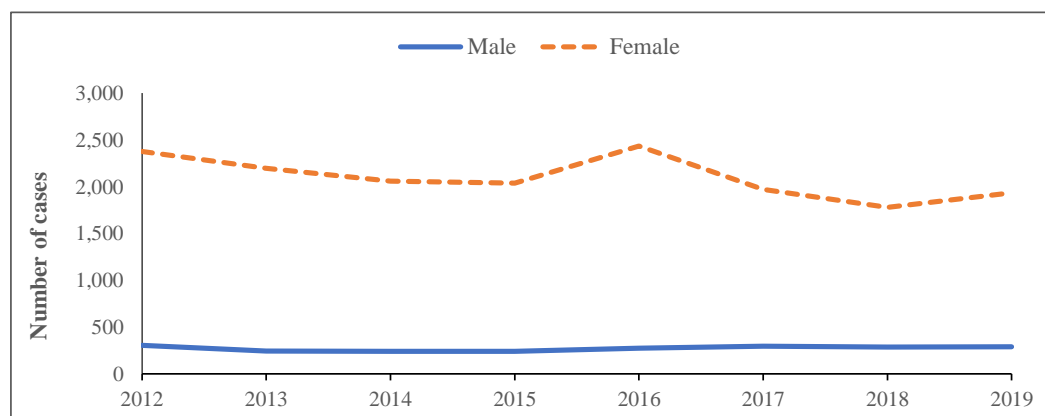
Table 24 - Number of cases of domestic violence, 2012 – 2019

	2012	2013	2014	2015	2016	2017	2018	2019
New	1,974	1,786	1,680	1,626	2,077	1,703	1,527	1,710
Old	707	652	621	655	632	566	539	512
Total	2,681	2,438	2,301	2,281	2,709	2,269	2,066	2,222

Note: old cases are cases which were already registered previously and recurred again in the reference year.

The total number of cases of domestic violence against women increased from 1,778 in 2018 to 1,933 in 2019. However, the number of men victims of domestic violence remained almost the same that is, 288 in 2018 and 289 in 2019 (Figure 36).

Figure 36 - Number of cases (new and old) of domestic violence reported, 2012 - 2019



It is to be noted that a victim of domestic violence can be subject to one or more types of violence and thus the number of cases of domestic violence tend to be higher than the number

of victims. Some 28.1% women victims of domestic violence reported physical assault by spouse or partner, 30.7% verbal assault by spouse or partner (ill treatment, harassment, abuse, and humiliation), 10.5% threatening assault by spouse and nearly 5.4% have been subjected to physical assault by others living under the same roof. Reported cases by men related mostly to verbal assault by spouse or partner (26.6%), physical assault by spouse or partner (19.3%) and verbal assault by others living under the same roof (15.1%).

Support Services to family

The Family Welfare and Protection Unit of the Ministry of Gender Equality and Family Welfare operates through a network of six (6) Family Support Bureaux (FSBx) around the island. The following services are available at the FSBx:

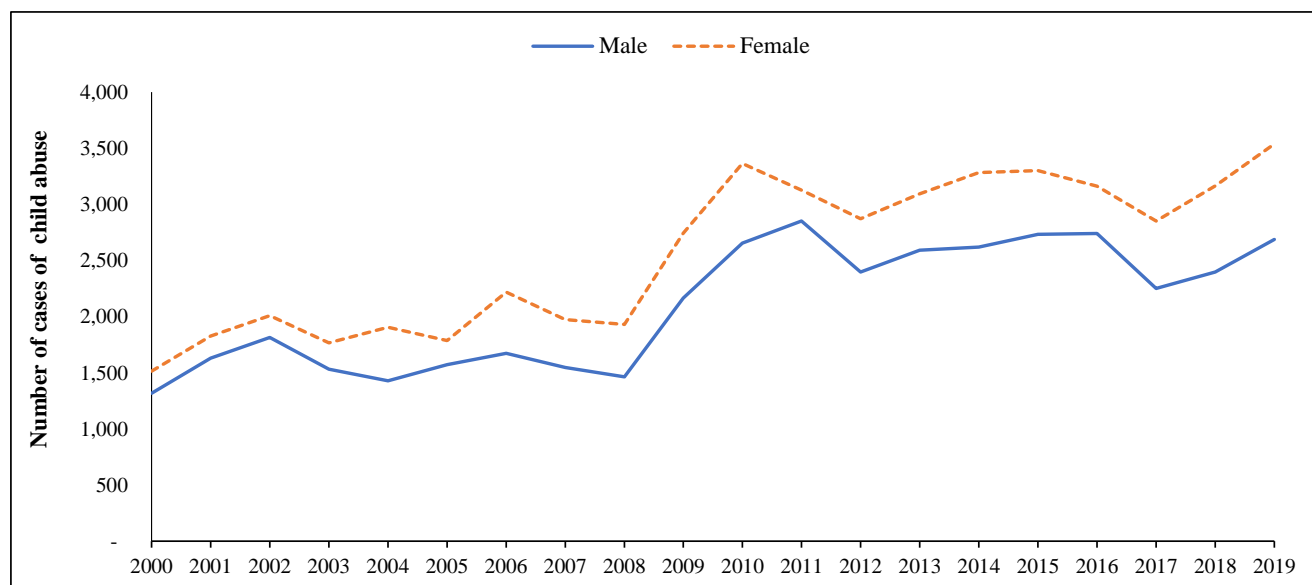
- First hand counselling
- Psychological counselling
- Legal advice
- Psycho-social support to victims of domestic violence;
- Assistance to victims of domestic violence with regards to their application for a Protection Order, Occupation Order and Tenancy Order under Protection from Domestic Violence Act (PDVA);
- Provision of psycho-social support as a follow-up following provision of Court Orders under the PDVA;
- Counselling services and psychotherapeutic intervention to adult perpetrators;
- Assistance to victims of domestic violence for temporary accommodation in shelters pending their application for appropriate Court Orders under the PDVA;
- Psycho-social assistance to families in distress (in cases of tragic deaths, natural disasters, accidents);
- Assistance, psychological counselling and therapy to adult victims of sexual assault; and
- Referral to other institutions as appropriate, amongst others.

Note: A 24-hour service is offered in emergency situations to victims of domestic violence through the Integrated Support Centre on Hotline 139.

8.4 Child abuse

The total number of cases reported at the Child Development Unit is generally on the rise and reached 6,225 in 2019 compared to 5,565 in 2018 (Figure 37).

Figure 37 - Number of cases reported at the Child Development Unit (CDU), 2000 - 2019



Of the reported cases in 2019, some 56.8% of the victims were females. The most common nature of abuse was psychological/emotional (24.6% for male and 22.6% for female) followed by neglect cases (22.6% male and 14.4% for female) and physical abuse (7.3% for male and 5.4% for female).

Table 25 - Cases reported at Child Development Unit (CDU) by nature of problem, 2019

Nature of Problem	Male		Female	
	Number	%	Number	%
Abandonment	34	1.3	24	0.7
Physical abuse	196	7.3	190	5.4
Neglect cases	606	22.6	508	14.4
Worst forms of Labour	3	0.1	7	0.2
Sexual abuse	58	2.2	398	11.2
Psychological /Emotional abuse	660	24.6	800	22.6
Other problems	1,130	42.1	1,611	45.5
Total	2,687	100.0	3,538	100.0

Source: CDU, Ministry of Gender Equality & Family Welfare

8.5 Admission of children in institutions under the aegis of Ministry of Gender Equality and Family Welfare

There were 107 children victim of violence, under Court Orders, who were admitted in institutions in 2019, representing a decrease as compared to 109 in 2018. The number of admission was higher in the past, it was 136 in 2012 and a peak of 197 was observed in 2014.

Table 26 - Number of children admitted in institutions by sex, 2012 - 2019

	2012	2013	2014	2015	2016	2017	2018	2019
Male	65	63	100	67	56	48	51	59
Female	71	70	97	119	70	54	58	48
Both sexes	136	133	197	186	126	102	109	107

8.5.1 Rehabilitative and Alternative Care Support System of ACU

The Ministry of Gender Equality and Family Welfare (MGEFW), through the agency of the ACU, provides for all children requiring its services impartially. The ACU works for the proper rehabilitation of all the children under its care, and it caters mainly for children victims of abuse and violence. The ACU is dedicated towards its mission, whereby all children are treated and cared for equally, and with a view of providing a sustained continuum of care and service provision, as well as to avoid the issue of overcrowding of Shelters/Residential Care Institutions (RCIs).

8.5.2 Children placed in Government owned Shelters and NGOs

The Rehabilitation Section caters for a Rehabilitation Programme for Children victims of violence and their reinsertion into their families/next to kins. As a measure of last resort, children with non-stable families are placed in Residential Institutions and are provided with more permanent residential care facilities following the issue of Committal Orders. These institutions are Charitable Institutions/Non-Governmental Organisations which work in collaboration with the Ministry.

There are 3 Government-owned Shelters and 15 Residential Care Institutions (RCIs) run by NGOs. As at December 2019, there were 515 children placed in the 18 Shelters/RCIs.

There were more girls than boys in the Shelters/NGOs, i.e. 247 boys and 268 girls. In terms of percentage, there is a disparity of 2% in the rate of girls accommodated in the Ministry's institutions which implies that more girls were victims of violence and removed as a measure of last resort from their biological settings. There are 12 Shelters/NGOs that cater for both girls and boys, 2 Shelters cater only boys and 4 Shelters/NGOs cater only girls.

Residential/ Drop in Centre designated by the Ministry as a Place of Safety (POS) dedicated for cases of Commercial Sexual Exploitation of Children, and it is operational since 26 May 2016. It caters for victims of sexual abuse and commercial sexual exploitation of children including those who have been harmed through child trafficking. The setting up of the Drop in Centre is in line with the recommendations made by the United Nations Committee on the Rights of the Child with a view to strengthening policies and programmes for the prevention,

recovery, rehabilitation and reintegration of children victims of CSEC. Twenty nine female children, victims of sexual abuse and CSEC, have been placed at Residential Drop in Centre L'Oasis since December 2019.

8.5.3 Children placed in Foster Care families

In case, where it is noted that residents of residential institutions cannot get reinserted into their biological environment due to reasons of incest or where parents are imprisoned and involved in prostitution or in drug addicts, the option for Foster Care is explored.

In 2019, 16 children out of which 9 were boys and 7 girls, were placed in 8 Foster Care Families.

The table below shows the number of children placed in foster families from 2012 to 2019. There were 16 children placed in families in 2019, which represented an increase as compared to 9 children placed in 2018.

Table 27 - No. of children placed in foster families by sex, 2012 - 2019

	2012	2013	2014	2015	2016	2017	2018	2019
Male	7	2	5	7	9	5	5	9
Female	5	6	-	1	2	8	4	7
Both sexes	12	8	5	8	11	13	9	16

8.5.4 Children from Shelters/NGOs reintegrated back within a family setting

The Back-to-Home Programme has been initiated since October 2018 at the level of the Ministry. This programme ensures the re-integration of minors (previously victims of violence) into the family settings. The main objective of the Back-To-Home Programme is to provide children in Residential Care Institutions (RCIs) the opportunity to live and evolve among their kins and relatives.

After the discharge of the minor, follow-up with parents through visits/phone calls is ensured by the Back-to-Home Officers and psychologists.

There were 88 children (44 boys and 44 girls) who have been re-integrated back within their family setting in 2019.

8.5.5 Child Mentoring Programme

The Child Mentoring Programme through its trained Child Mentors provides assistance to children aged 10 to 16 years in need of emotional and social reconstruction. In December 2019, 32 Children (18 boys and 14 girls) were placed under this programme.

9 Crime and security

9.1 Crimes

Men are more likely to be victims of homicides and assaults, while women are more prone to sexual violence and sexual exploitation. In 2019, some 53.8% of the cases of assaults and 71.7% of the intentional homicides were committed against men. Some 92.6% of victims of sexual violence and sexual exploitation were women (Table 25).

Table 28 - Victims¹ of selected offences² reported at the Police, Republic of Mauritius, 2019

Offences	Male	Female	Both sexes
Homicides	82	23	105
<i>of which Intentional homicides</i>	33	13	46
Assaults	5,475	4,705	10,180
Sexual violence and sexual exploitation	51	634	685
<i>of which Rape</i>	-	43	43

¹A person may be victim of one or more than one offence and/or an offence may involve one or more victims

²Based on latest Classification of Crime for Statistical Purposes (ICCS) Version 1.0, developed by United Nations Office on Drugs and Crime (UNODC)

Boys are much more likely to commit offences than girls. In 2019, only 7.4% of the juvenile offences were committed by girls. The female juvenile delinquency rate stood at 1.4, while that for male was 12.0.

Table 29 - Number of Juvenile offenders¹ reported, Republic of Mauritius, 2019

	Male	Female	Both sexes
Crimes	267	11	278
<i>of which drug offences</i>	24	2	26
Misdemeanours	411	66	477
<i>of which drug offences</i>	30	-	30
Contraventions ²	348	5	353
Total	1,026	82	1,108
Juvenile Delinquency Rate ³	12.0	1.4	6.8

¹Persons aged 12 to 17 years

²Exclude contraventions established by camera

³Rate per 1,000 mid-year juvenile population and exclude contraventions

9.2 Nearly all juveniles admitted to CYC had committed theft

Correctional Youth Centre (CYC)

From year 2018 to year 2019, the number of juveniles admitted increased by 6.5% from 154 (147 boys and 7 girls) to 164 (156 boys and 8 girls). Some 80.0% (12) of the 15 juvenile convicts admitted to CYC in 2019 had committed theft/robbery/burglary.

Rehabilitation Youth Centre (RYC)

The number of juveniles admitted for detention and training at RYC increased by 9.8% from 122 (60 boys and 62 girls) in 2018 to 134 (78 boys and 56 girls) in 2019. Some 79.1% of the juveniles admitted in 2019 were on remand. Out of the 28 convicts admitted, all were cases of child beyond control.

Probation Home/Hostel

The number of juveniles admitted in probation institutions decreased from 9 (4 boys and 5 girls) in 2018 to 6 (1 boy and 5 girls) in 2019.

10 International comparisons

10.1 Gender Inequality Index

Since 2006, through the Global Gender Gap Report series, the World Economic Forum has been quantifying the magnitude of gender-based disparities and tracking their progress over time. By providing a comprehensive framework for benchmarking global gender gaps, the report identified countries that are role models in dividing their resources equitably between women and men, regardless of the overall resource level.

The Global Gender Gap Index (GGI) seeks to measure one important aspect of gender equality; their relative gaps between women and men across a large set of countries and across four key areas, namely: (a) economic participation and opportunity, (b) educational attainment, (c) health and survival and (d) political empowerment. The equality benchmark is considered to be one with no gap between men and women.

In 2019, Mauritius was ranked 115 out of 153 countries worldwide compared to 109 out of 149 countries in 2018 (Table 30). Mauritius has closed both its education attainment, and health and survival gender gaps with indices nearing 1 (Table 31).

Table 30 - Global Gender Gap Index by selected countries, 2017 - 2019

Country	2017		2018		2019	
	Rank	Value	Rank	Value	Rank	Value
Iceland	1	0.878	1	0.858	1	0.877
Norway	2	0.830	2	0.835	2	0.842
France	11	0.778	12	0.779	15	0.781
United Kingdom	15	0.770	15	0.774	21	0.767
Canada	16	0.769	16	0.771	19	0.772
South Africa	19	0.756	19	0.755	17	0.780
Australia	35	0.731	39	0.730	44	0.731
United States	49	0.718	51	0.720	53	0.724
Singapore	65	0.702	67	0.707	54	0.724
Madagascar	80	0.692	84	0.691	62	0.719
Brazil	90	0.684	95	0.681	92	0.691
China	100	0.674	103	0.673	106	0.676
India	108	0.669	108	0.665	112	0.668
Mauritius	112	0.664	109	0.663	115	0.665
Pakistan	143	0.546	148	0.550	151	0.564
Yemen	144	0.516	149	0.499	153	0.494

Source: The Global Gender Gap Report, World Economic Forum

Table 31 - Global Gender Gap Index for overall and four key areas, Republic of Mauritius, 2007 - 2019

Year	Overall	Economic participation	Educational attainment	Health and survival	Political empowerment
2007	0.649	0.547	0.983	0.980	0.085
2008	0.647	0.527	0.988	0.980	0.091
2009	0.651	0.546	0.988	0.980	0.091
2010	0.652	0.549	0.988	0.980	0.091
2011	0.653	0.544	0.989	0.980	0.099
2012	0.655	0.554	0.990	0.980	0.095
2013	0.660	0.574	0.991	0.980	0.096
2014	0.654	0.551	0.990	0.980	0.097
2015	0.646	0.534	0.991	0.980	0.078
2016	0.652	0.550	0.991	0.980	0.087
2017	0.664	0.595	0.992	0.980	0.090
2018	0.663	0.585	0.991	0.980	0.097
2019	0.665	0.596	0.992	0.980	0.094

10.2 Human Development Index (HDI)

The HDI is a summary measure for assessing long-term progress in three basic dimensions of human development: a long and healthy life, access to knowledge and a decent standard of living. A long and healthy life is measured by life expectancy. Knowledge level is measured by mean years of schooling among the adult population, which is the average number of years of schooling received in a life-time by people aged 25 years and older; and access to learning and knowledge by expected years of schooling for children of school-entry age, which is the total number of years of schooling a child of school-entry age can expect to receive if prevailing patterns of age-specific enrolment rates stay the same throughout the child's life.

Mauritius' HDI value for 2019 is 0.796— which put the country in the high human development category positioning it at 66 out of 189 countries and territories.

Mauritius' 2019 HDI of 0.796 is above the average of 0.750 for countries in the high human development group and above the average of 0.541 for countries in Sub-Saharan Africa. From Sub-Saharan Africa, countries which are close to Mauritius in 2019 HDI rank and to some extent in population size are Botswana and Gabon, which have HDIs ranked 94 and 115 respectively.

Table 32 - Human Development Index of selected countries, 2018

Country	2018	
	Rank	Value
Norway	1	0.954
Germany	4	0.939
Australia	6	0.938
Singapore	9	0.935
Canada	13	0.922
United Kingdom	15	0.920
United States	15	0.920
France	28	0.891
Mauritius	66	0.796
Brazil	79	0.761
China	85	0.758
Botswana	94	0.728
South Africa	113	0.705
India	129	0.647
Pakistan	152	0.560
Madagascar	162	0.521
Yemen	177	0.463

11 Concepts and Definitions

Activity rate: The ratio (%) of the economically active population (employed and unemployed) to population aged 16 years and above.

Assault: Assault is defined as intentional or reckless application of physical force inflicted upon the body of a person.

Contraventions: Contraventions are defined as offences that are punishable by: (a) imprisonment for a term not exceeding 10 days; (b) fine not exceeding 5,000 rupees.

Contributing Family Worker: A contributing family worker is a person who works without pay in an enterprise operated by a family worker.

Crimes: Offences that are punishable by: (a) penal servitude (b) fine exceeding 5,000 rupees.

Crude death rate: the number of deaths in a year per 1,000 mid-year population.

Current User of contraceptive method: A new acceptor who continues with the same or different method of contraception and pays regular return visits to the family planning service point to receive services and supplies.

Divorce rate: the number of persons divorced in a year per 1,000 mid-year population.

Employee: An employee is a person who works for pay for someone else, even in a temporary capacity.

Employer: An employer is a person who operates his/her own business or trade and hires one or more employees.

Employment: Employed population consists of Mauritians aged 16 years and above who have worked for pay, profit or family gain for at least one hour during reference week of a month. It includes those who are temporarily absent from work for reason such as leave with pay, leave without pay and temporary disorganisation of work (bad weather, breakdown of equipment, lack of order, etc.).

Gross Enrolment Ratio (GER): Number of pupils enrolled in a given level of education, regardless of age, expressed as a percentage of the population in the relevant age-group

- 4 - 5 years for pre-primary ,6 – 11 years for primary,12 – 19 years for secondary

Gender Parity Index (GPI): Ratio of the GER for female to the GER for male. It measures the relative education participation of boys and girls. A GPI of 1 reflects equal enrolment rate for boys and girls, whereas a GPI greater than 1 shows disparity in favour of girls.

HIV/AIDS: AIDS (Acquired immune deficiency syndrome or acquired immunodeficiency syndrome) is a disease caused by a virus called HIV (Human Immunodeficiency Virus).

Household income: It comprises income from work (both paid and self-employment), transfer income (mainly government pensions, regular allowances from relatives and organisations), property income, and income from owned produced goods and it also includes imputed rent – a rental value for non-renting households.

Intentional homicide: Intentional homicide is defined as unlawful death inflicted upon a person with the intent to cause death.

Juvenile: a person aged below 18 years.

Juvenile delinquency rate: the number of juvenile offenders involved in offences (excluding contraventions) per 1,000 juvenile population.

Life Expectancy at birth: the number of years a new born infant would live if prevailing patterns of mortality at the time of its birth were to stay the same throughout its life.

Marriage rate: the number of persons married in a year per 1,000 mid-year population.

Maternal mortality rate: number of deaths due to pregnancy, childbirth and the puerperium per 10,000 live births during that year.

Misdemeanours: Offences that are punishable by: (a) imprisonment for a term exceeding 10 days; (b) fine exceeding 5,000 rupees.

New acceptor of contraceptive methods: Someone who accepts a contraceptive method for the first time from a provider of a family planning programme.

Own Account Worker: An own account worker is a person who operates his/her own business or trade but does not hire employees. He/She may be working alone or with the help of contributing family workers.

Primary sector: Primary Sector comprises activities related to 'Agriculture, hunting, Forestry and fishing' and 'Mining'.

Relative poverty line (RPL): It is a threshold below which a household/ person is deemed poor and is set as the 'half median monthly household income per adult equivalent'.

Secondary sector: Secondary Sector comprises activities related to 'Manufacturing, 'Electricity, gas and water supply' and 'Construction'.

Sex Ratio: The sex ratio is defined as the number of males per 100 females.

Sexual violence: Sexual violence is defined as unwanted sexual act, attempt to obtain a sexual act, or contact or communication with unwanted sexual attention without valid consent or with consent as a result of intimidation, force, fraud, coercion, threat, deception, use of drugs or alcohol, or abuse of power or of a position of vulnerability.

Sexual exploitation: Sexual exploitation is defined as acts of abuse of a position of vulnerability, power or trust, or use of force or threat of force, for profiting financially, physically, socially or politically from the prostitution or sexual acts of a person.

Tertiary sector: Secondary Sector comprises activities related to Trade, Accommodation & Food Service Activities, Transportation & Storage, Information & Communication, Financial & Insurance, Real Estate Activities, Administrative & Support Service, Education, Human Health & Social Work Activities, and other service industries

Total fertility rate: the average number of children born to an average woman assuming that she survives to the end of her child-bearing age and is subjected to a fixed schedule of age-specific fertility rates.

Unemployment Rate: Unemployment rate is the ratio (%) of unemployment to economically active population (employed and unemployed).

Unemployment: Unemployed population comprises all Mauritians aged 16 years and over who are not working but who are looking for work and are available for work during the reference week.

Vulnerable employment: Vulnerable employment refers to own-account workers and contributing family workers have a lower likelihood of having formal work arrangements, and are therefore more likely to lack elements associated with decent employment, such as adequate social security and a voice at work. Therefore, the two statuses are summed to create a classification of ‘vulnerable employment’, while wage and salaried workers together with employers constitute ‘non-vulnerable employment’. *Source: International Labour Organization (ILO)*