

NATIONAL ASSEMBLY

OFFICIAL REPORT

Thursday, 23rd November, 2006

The House met at 2.30 p.m.

[Mr. Deputy Speaker in the Chair]

PRAYERS

PAPERS LAID

The following Papers were laid on the Table:-

Annual Report and Accounts of the Kenya Anti-Corruption Commission for the year ended 30th June, 2006, and the certificate thereon by the Controller and Auditor-General.

*(By the Assistant Minister for Health
(Dr. Machage) on behalf of the Minister
for Justice and Constitutional Affairs)*

Annual Report and Accounts of the Kenya Marine and Fisheries Research Institute for the year ended 30th June, 2005, and the certificate thereon by the Controller and Auditor-General.

*(By the Assistant Minister for Health
(Dr. Machage) on behalf of the
Minister for Livestock and Fisheries)*

Annual Report and Accounts of Municipal Council of Thika for the year ended 30th June, 2005, and the certificate thereon by the Controller and Auditor-General.

*(By the Assistant Minister for Health
(Dr. Machage) on behalf of the
Minister for Local Government)*

Annual Report and Accounts of Safaricom Limited for the year ended 31st March, 2006, and the certificate thereon by the Controller and Auditor-General.

*(By the Assistant Minister for Health
(Dr. Machage) on behalf of the Minister
for Information and Communications)*

Annual Report and Accounts of the National Water Conservation and Pipeline Corporation for the year ended 30th June, 2005, and the certificate thereon by the Controller and Auditor-General.

*(By the Assistant Minister for Health
(Dr. Machage) on behalf of the Minister
for Water and Irrigation)*

NOTICES OF MOTIONS

PRODUCTION OF GASOHOL FOR AUTOMOBILE USE

Prof. Olweny: Mr. Deputy Speaker, Sir, I beg to give Notice of the following Motion:-

THAT, in view of the fact that the sugar mills in this country produce excessive molasses that is used in the production of ethanol and other alcohols which can be blended with petroleum to produce gasohol for propelling automobile engines; this House resolves

that alcohol distilled from molasses be blended with petroleum to produce gasohol for use as automobile fuel.

Mr. Deputy Speaker: Prof. Olweny, you had two Notices of Motions?

Prof. Olweny: No, I had only one and it is the one I have given.

Mr. Deputy Speaker: But our records show that you had two Notices of Motions. Fair enough.

INTRODUCTION OF THE SACRED FORESTS AND MONUMENTS BILL

Mr. Khamisi: Mr. Deputy Speaker, Sir, I wish to give Notice of the following Motion.

THAT, this House grants leave to introduce a Bill for an Act of Parliament entitled the Sacred Forests and Monuments Bill for the purposes of protecting and preserving all sacred sites including *Kaya* forests, *Mau Mau* caves, cultural monuments and all venerative places across the country.

QUESTIONS BY PRIVATE NOTICE

DEATH OF MR. MARTIN ODONGO

Mr. Ojode: Mr. Deputy Speaker, Sir, I beg to ask the Minister of State for Administration and National Security the following Question by Private Notice.

(a) Is the Minister aware that Mr. Martin Ochanda Odongo of Kachuth Sub-Location in Kobama Division within Ndhiwa Constituency was found dead and dumped by the roadside on 10th October, 2006?

(b) Could he table a report on the investigation of the death, if any, and state how many people have been arrested in connection with the death of the deceased?

The Assistant Minister, Office of the President (Mr. Munya): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am aware that Mr. Martin Ochanda Odongo of Kachuth Sub-Location in Kobama

Division within Ndhiwa Constituency was found dead and dumped by the roadside on 10th October, 2006.

(b) Two suspects have been arrested and are assisting the police with investigations.

Mr. Ojode: Mr. Deputy Speaker, Sir, the Assistant Minister is a friend of mine. I will not engage him with a number of questions. I would like to ask him as a friend: What did the Assistant Chief do about this matter? Why did he not report this matter to the police? I am asking this question because when Martin was dumped on the roadside, not even a single Government officer reported the matter to the police. It was until I asked this Question that the body was exhumed and a postmortem done in Kisumu. What did the Assistant Chief do in order to report the matter to the police so that investigations could take place immediately?

Mr. Munya: Mr. Deputy Speaker, Sir, the matter was reported to the police and an inquiry file was opened. Investigations then commenced. A postmortem was supposed to be carried out but the relatives of the deceased refused and obtained a court order barring a postmortem and they buried the deceased. After information reached the police that the victim could have been murdered, the police obtained a court order and exhumed the body. Investigations showed that Ochanda could have been strangled. Two prime suspects are in police custody and they are assisting the police with investigations. If evidence is found to show that they were involved in the murder, they will be charged.

Capt. Nakitare: Mr. Deputy Speaker, Sir, this House must applaud this Assistant Minister who has accepted that he is aware that the incident took place because we always hear other Ministers say that they are not aware. In the absence of a forensic laboratory, what scientific methods are they using to examine bodies which they have exhumed prior to prosecution?

Mr. Munya: Mr. Speaker, Sir, the police exhumed the body following the normal laid down procedures and a postmortem was done. Medical evidence that we have indicates that the late Ochanda was strangled and he died. As far as I know, we have the necessary technical know-how of exhuming bodies and carrying out postmortem.

Mr. Ojode: Could the Assistant Minister explain to this House why they did not do the postmortem before the burial was done? I am asking that because the body had already been buried.

Mr. Deputy Speaker: Mr. Ojode, if I heard the Assistant Minister right, he said that the relatives of the deceased obtained a court order to stop the postmortem from being carried out. You are asking why a postmortem was not done before the burial. I though the Assistant Minister addressed that issue.

Mr. Ojode: Mr. Deputy Speaker, Sir, the relatives did not have a court order barring the postmortem from being done. The relatives did not have the money to pay for a postmortem, which was Kshs2,500. Why was it necessary for them to exhume the body in order for the postmortem to be done? Why could the postmortem not be done first before the burial?

Mr. Munya: Mr. Deputy Speaker, Sir, the information we have is that the relatives got a court order from Homa Bay Chief Magistrate Court barring the postmortem.

Mr. Ojode: On a point of order, Mr. Deputy Speaker, Sir.

Mr. Deputy Speaker: Let the Assistant Minister finish!

Mr. Munya: Mr. Deputy Speaker, Sir, the police had to get another court order to be allowed to do the postmortem which was done. The cause of death was found to be strangulation.

Mr. Ojode: On a point of order, Mr. Deputy Speaker, Sir. I am on the ground and I know what took place. The relatives did not have the money to pay for a postmortem which was Kshs2,500. They were forced to sign an affidavit. It was not a question of not wanting to do the postmortem. Why was it necessary for the Government to do a postmortem after the burial? I will excuse you because this is your first Question!

Mr. Deputy Speaker: I will let the Assistant Minister answer but it appears to me that the necessary action has been taken, whether the postmortem was done before or after the burial.

Anyway, it is up to the Assistant Minister to explain.

Mr. Munya: Mr. Deputy Speaker, Sir, the most important thing is to find the killers of the late Ochanda and the police are proceeding with investigations. They will take action immediately proper evidence is found. There are two prime suspects in custody.

Mr. Deputy Speaker: Fair enough. Next Question by Mr. Ojaamong!

ANNEXATION OF PART OF TESO
DISTRICT TO MATAYOS DIVISION

Mr. Ojaamong: Mr. Deputy Speaker, Sir, I beg to ask the Minister of State for Administration and National Security the following Question by Private Notice.

(a) Is the Minister aware that part of Teso District has been hived off and annexed to Busia District to expand Matayos Division?

(b) If the answer to "a" above is in the affirmative, how was the decision arrived at?

(c) What urgent measures is the Minister taking to forestall skirmishes that might arise as a result of "a" above?

The Assistant Minister, Office of the President (Mr. Kingi): Mr. Deputy Speaker, Sir, I beg to reply.

(a) As far as we are aware, no part of Teso District has been annexed to expand Matayos Division in Busia District.

(b) Since the answer to "a" is not affirmative, then part "b" of this Question does not arise.

(c) We do not expect any skirmishes to take place in this area because there is no reason for that since the residents of the two neighbouring districts have continued to live harmoniously for many years.

Mr. Ojaamong: Mr. Deputy Speaker, Sir, I wish to thank the Assistant Minister for that answer. However, he says that the residents have been living harmoniously and in peace. In view of the fact that there is a person hopping from one funeral to the other, advising the people that part of Teso District has been annexed to Bungoma and Busia district, for the express purpose of fanning animosity, what action will he take against him? The Provincial Commissioner (PC) and the District Commissioner (DC) know him.

Mr. Kingi: Mr. Deputy Speaker, Sir, if the hon. Member can volunteer to give us information about that person, then we will definitely take action against him. No part of Teso District has been annexed to another district.

Mr. Mwanzia: Mr. Deputy Speaker, Sir, I would like to ask the Assistant Minister about the new districts. Before the Referendum, so many districts were created by the Government.

Mr. Deputy Speaker: The Question is on Teso District!

Mr. Mwanzia: Mr. Deputy Speaker, Sir, the Question is actually about new districts. It is talking about annexation. We would like to know what happened to the new districts which were created before the Referendum, because they were not allocated any money in the Budget. Do they still exist or not?

Mr. Kingi: Mr. Deputy Speaker, Sir, I cannot agree more with what you said. I think that is a different Question. Let the hon. Member file it and we will give him information about the new districts.

Mr. Deputy Speaker: Hon. Members, the Standing Orders are very clear on Questions. Supplementary questions must be related to the Question. Now, the question by Mr. Mwanzia certainly is not related to this Question. I would like hon. Members to adhere to the Standing Orders.

Yes, Dr. Ojiambo!

Dr. Ojiambo: Mr. Deputy Speaker, Sir, now that it is in the public domain that part of Teso District has been hived off to Busia District, could the Assistant Minister consider making an

official statement to refute this allegation? Could he instruct the DC to address the two communities in order to defuse this tension and give them an official position?

Mr. Kingi: Mr. Deputy Speaker, Sir, what I have said in this House is official. Teso District has not been annexed anywhere. Therefore, I do not see the need of us organising meetings to tell people about things that did not happen. I wish to advise the hon. Member who brought this Question to take this information back home and allow our chiefs and assistant chiefs to continue working without any interference.

Mr. Rotino: Mr. Deputy Speaker, Sir, Teso District was created alongside other districts. As far as I know, other districts have been given boundaries. Why has it taken long for the Government to determine the boundaries between Teso, Busia, Bungoma and Mt. Elgon districts?

Mr. Kingi: Mr. Deputy Speaker, Sir, the issue of boundaries for districts is totally different. We have information about the districts and we will give it. But Teso District has been gazetted. There is a DC who knows the boundaries of his district. Therefore, the issue that has been raised by the hon. Member does not arise.

Mr. Deputy Speaker: Last question, Mr. Ojaamong!

Mr. Ojaamong: Mr. Deputy Speaker, Sir, I wrote to the Minister of State for Administration and National Security and he replied to the PC. Last Friday, the DC for Teso District held a *baraza* at Chakol to defuse tension between the residents of Busia and Teso districts, just because of one person who the Government knows is spreading propaganda. That is the immediate former Member of Parliament. He wants to incite the Tesos to fight their brothers, the Luhyas, on the other side. What action will the Assistant Minister take against this man called Albert Ekirapa, who is trying to fan animosity between these two communities?

Mr. Kingi: Mr. Deputy Speaker, Sir, we will endeavour to carry out some investigation about this allegation and take the necessary action.

Mr. Deputy Speaker: Next Question by the Member of Parliament for Mumias Constituency!

ESTABLISHMENT OF SUGAR FACTORY IN TANA RIVER DISTRICT

Mr. Osundwa: Mr. Deputy Speaker, Sir, I beg to ask the Minister for Agriculture the following Question by Private Notice.

(a) Is the Minister aware that Mumias Sugar Company intends to establish a sugar factory in Tana River District?

(b) Could he table a feasibility study report to demonstrate the viability of implementing the sugar project in the area?

(c) Could he further table a shareholders' resolution mandating the miller to undertake this project?

The Minister for Agriculture (Mr. Kirwa): Mr. Deputy Speaker, Sir, I beg to reply.

(a) Yes, I am aware that Mumias Sugar Company is considering the possibility of establishing a sugar factory in Tana River District.

(b) The feasibility study on the viability of the project is underway, as the bids for the consultancy of the study were advertised on 5th November, 2006. Therefore, I cannot table any document to that effect.

(c) The Mumias Sugar Company Board, through the Human Resource and Strategy Committee, passed the resolution on 6th July, 2006, mandating the miller to undertake the said project.

Mr. Osundwa: Mr. Deputy Speaker, Sir, I asked this Question because it borders on the Anglo Leasing scandal. First of all, there was no shareholders' meeting which gave the miller the mandate to undertake this project. Secondly, consulting firms were invited to give their services.

One of them offered to do the consultancy at a fee of Kshs21 million. But the Government wants to spend Kshs128 million to do the same work. Could the Minister explain to the House why they are choosing a company which wants to charge Kshs128 million for consultancy? I have documents to prove this.

Mr. Kirwa: Mr. Deputy Speaker, Sir, as I said in my reply, the issue of expenses does not arise at this stage, because the bids were advertised on 5th November, 2006. This, therefore, means that it is when all the bids come in that we shall know the cost of the said feasibility study.

Mr. Khamasi: Mr. Deputy Speaker, Sir, given the figures Mr. Osundwa has presented to this House, this is a very serious matter. Could the Minister confirm to this House that they will give the study to the lowest bidder who is a very well known sugar manufacturer from a neighbouring country, as opposed to this Government spending through the Kenya Sugar Board (KSB), Kshs128 million?

Could he give that undertaking to this House?

Mr. Kirwa: Mr. Deputy Speaker, Sir, what my colleague is implying is that, he wants me to preside over the tender. I cannot give an assurance because we do not know who are going to send in the bids. As I said, the advertisement went on air on 5th November, 2006. Therefore, it is entirely up to the tender committee to preside over, taking into consideration the issue of costing.

Mr. Ochilo-Ayacko: Mr. Deputy Speaker, Sir, for the avoidance of doubt, could the Minister confirm whether the tender has been concluded or not? The impression we are getting from the hon. Member who asked the Question is that the tender has been concluded and yet, the Minister is giving the impression that it has not been concluded. What is the correct position?

Mr. Kirwa: Mr. Deputy Speaker, Sir, I can confirm that the tender has not been concluded.

Mr. M.Y. Haji: Mr. Deputy Speaker, Sir, while I have no doubt about the answer given by the Minister, will I be in order to say that it is the Tana and Athi River Development Authority (TARDA) which is entering into this agreement? With all honesty, it looks like it is single-sourcing because when the tender for the construction of a sugar factory in Tana delta was advertised, companies like Kinana from Sudan and West-Kenya Sugar Factories applied, but some traders from Mombasa were given the contract. However, they could not undertake the project. Now, we are being told that the Mumias Sugar Company is ready to pay Kshs128 million in order to undertake the project. Could the Minister explain to this House what interest it has to be able to undertake this project alone? What interest does the Government have, not to allow tenders in this matter?

Mr. Kirwa: Mr. Deputy Speaker, Sir, initially Tana and Athi Rivers Development Authority (TARDA) had entered into agreement with some company with a view to setting up a factory. But what I have in mind, and what the Question is referring to, is a new advertisement that was placed in the newspapers on 5th November this year. I have a copy of the advertisement here to prove that particular point. So, we are dealing with two different stories.

Mr. Deputy Speaker: Could I hear from Mr. Ligale?

Mr. Ligale: Mr. Deputy Speaker, Sir, Mumias Sugar Company is in western Kenyan. As hon. M.Y.Haji said, recently it expressed interest in the Tana River basin. It wants to set up another factory there. It has also declared an interest in setting up an energy project. Is the Minister satisfied that this company is seeking to divert from its core business? Is it not diversifying too widely to the detriment of the farmers?

Mr. Kirwa: Mr. Deputy Speaker, Sir, under Article 22 and Article 101 of the Articles and Memorandum of Association of the said company, it is at liberty to enter into any enterprise that is, in the opinion of its directors, going to have good returns on its investment.

Mr. Deputy Speaker: Last question, Mr. Osundwa?

Mr. Osundwa: Mr. Deputy Speaker, Sir, I want to clarify this matter. The Minister is just repeating what another Ministry did. Indeed, so far we have pre-qualified for these services and there were West Kenya Sugar Company, Mat International, EGBI Company of South Africa and

Kenana Sugar Company from Sudan. Mr. Minister, Mumias Sugar Company was not among them. You want to load Mumias Sugar Company with Kshs100 million. I do not know where you want to take this money to. Mumias Sugar Company was not among the pre-qualified companies. How did the Minister bring Mumias Sugar Company into this matter? By the way, a feasibility study was done by the Ministry of Environment and Natural Resources in 1985. Another study was done by the Institute for Development Studies, led by Mr. Migot Adhola. All these studies are with the Government. The only reason why the Government wants to do this is to take away Kshs100 million from Mumias Sugar Company.

Mr. Kirwa: Mr. Deputy Speaker, Sir, I do not know whether we can allow a colleague to cast aspersions on the integrity of another colleague without substantive evidence, that I am involved in any imprudent way with this said company. Suffice it to say the following. Whatever the hon. Member is referring to, there are so many studies that are carried out for different reasons throughout the year in different parts of the country. But the information available to me, and I have no reason to doubt it because it is authentic information, is that an advertisement was placed in newspapers in November this year for people to express interest. The closing date for the advertisement was 21st of November. Adjudication of the same will take one week. They will send in requests for proposals by 5th of December. Opening of technical proposals will be 5th of January, next year. Adjudication of the same will be on 11th of January, next year. Opening and awarding will be on 12th January. The process will continue up to the 28th of May, when feasibility studies will commence. So, the feasibility studies the hon. Member is referring to are totally alien from the report that I have.

(Mr. Osundwa stood up in his place)

Mr. Deputy Speaker: Mr. Osundwa, I think I have given you enough time.

Next Question by the hon. Member for Nakuru Town.

Mr. Osundwa: Mr. Deputy Speaker, Sir, I want to give some documents to the Minister, so that he can study them.

Mr. Deputy Speaker: Fine. If they are authentic documents, I am sure the Minister will be interested to see them.

Next Question by the hon. Member for Nakuru Town.

SHORTAGE OF DRUGS IN RIFT VALLEY
PROVINCIAL HOSPITAL

Mr. Mirugi: Mr. Deputy Speaker, Sir, I beg to ask the Minister for Health the following Question By Private Notice.

(a) Is the Minister aware that the Rift Valley Provincial General Hospital is in dire need of drugs, especially insulin for diabetic patients and other medical supplies?

(b) What measures has she taken to streamline the supply of drugs and other equipment to the hospital to avoid fatalities caused by inefficiency?

The Assistant Minister for Health (Dr. Machage): Mr. Deputy Speaker, I beg to reply.

(a) I am aware that Nakuru Provincial General Hospital has adequate drugs at the moment. The Hospital received some essential supply of drugs in November, 2006 from the Kenya Medical Supplies Agency (KEMSA).

(b) My Ministry has now stocked critical items like insulin, injectable antibiotics, such as penicillin, at the regional depot in Nakuru for quick response to the needs of facilities within the region. Indeed, between 1st February and 21st November, 2006, KEMSA supplied Nakuru Provincial General Hospital with insulin and other medical supplies amounting to Kshs34,239,855. I wish to table the details.

(Dr. Machage laid the document on the Table)

In addition to the above measures, Nakuru Provincial General Hospital has utilised its cost-sharing funds to procure essential drugs when the need arises. The Ministry is in the process of dispatching medical equipment worth Kshs10 million to Nakuru Provincial General Hospital. This is an anaesthetic machine, autoclave, a dental unit, an eye unit, laboratory equipment, an occupational therapy machine, an instrument for delivery and a sucking machine. Also included is diagnostic equipment and other items, such as trollies, stretchers and wheelers. Thank you.

Mr. Mirugi: Mr. Deputy Speaker, Sir, I am saddened that the Assistant Minister cannot acknowledge that there is a problem in the Rift Valley provincial general hospital. Patients have approached me to complain that they are not able to purchase drugs from the Hospital's pharmacy. I want the Assistant Minister to acknowledge that there is a problem. He should also tell us specifically what measures they have taken to address the issue of lack of drugs and other medical supplies.

Dr. Machage: Mr. Deputy Speaker, Sir, I have, indeed, acknowledged the hon. Member's concern, and replied that his concerns have been addressed. Indeed, I have gone further to table the details of what we have done about his concerns.

Mr. Angwenyi: Mr. Deputy Speaker, Sir, is the Assistant Minister aware that diabetes is now a major cause of death in this country to the same level as malaria and HIV/AIDS? Could he, therefore, guarantee adequate drugs for diabetic patients throughout the country?

Dr. Machage: Mr. Deputy Speaker, Sir, I am aware that diabetes is of a major concern, but not to the level of malaria and HIV/AIDS. We have about 10 per cent of the population afflicted by diabetes *vis-a-vis* the 25 per cent afflicted by malaria. I am concerned that facilitation of medication for diabetic patients is available. Indeed, the Ministry is supplying adequate equipment and medication to diabetic patients throughout the country in all the district hospitals and some well improved health centres.

Mr. Deputy Speaker: Last question, Mr. Mirugi.

Mr. Mirugi: Mr. Deputy Speaker, Sir, I want the Assistant Minister to assure the House that such a problem will not recur in future.

Dr. Machage: Mr. Deputy Speaker, Sir, I will endeavour to make sure that no problem occurs in any other hospital, or in Nakuru Provincial General Hospital in future.

Mr. Deputy Speaker: Thank you, Mr. Assistant Minister. Next Question by the hon. Member for Mosop, Mr. Sambu.

HIGH CHARGES FOR PATIENTS IN MOI TEACHING/REFERRAL HOSPITAL

Mr. Sambu: Mr. Deputy Speaker, Sir, I beg to ask the Minister for Health the following Question By Private Notice.

(a) Is the Minister aware that Moi Teaching and Referral Hospital (MTRH), Eldoret, charges patients higher fees than the private hospitals?

(b) Is she further aware that the hospital detains patients who are unable to clear bills upon being discharged, and bodies of persons who die while undergoing treatment?

(c) How much money, in form of grants, was disbursed to the hospital by the Government and other donors in the years 2003, 2004 and 2005, and how much was spent on salaries and allowances in the same period.

The Assistant Minister for Health (Dr. Machage): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am, indeed, not aware that Moi Teaching and Referral Hospital charges higher fees than private hospitals. This is because Moi Teaching and Referral Hospital is a Government facility, whose budget is subsidized by the Exchequer. Indeed, when I compare the data that I have, I can give one or two examples. For out patient services, Moi Teaching and Referral Hospital charges Kshs100, while private hospitals in that town charge Kshs500; Kenyatta National Hospital (KNH) charges Kshs350 for the same; consultation fee in Moi Teaching and Referral Hospital is Kshs200 *vis-a-vis* Kshs500 to Kshs1500 in private hospitals and Kshs350 in the KNH.

(b) I am not aware that the hospital detains patients who are unable to clear their bills upon being discharged and after death. This is because the hospital has a waiver committee in place, which identifies patients who are unable to meet their hospital bills. If established that a patient is unable to pay a bill, that bill is waived. For example, in the year 2004/2005, we spent a total of Kshs12.64 million and Kshs17.58 in the year 2005/2006 on waivers alone.

(c) The hospital receives grants from the Government in the form of salaries and allowances for staff. If the details are required, I will produce them.

Mr. Sambu: Mr. Deputy Speaker, Sir, the Assistant Minister denies that this hospital is more expensive than private ones and that it detains bodies. I come from the district in which the hospital is located and was there last Monday. I had a big row with the hospital management. There are more than ten detained bodies. If a patient wants to be released after paying part of a bill, his or her identity card is detained. Detained identity cards at the hospital fill five to six boxes the size of this Dispatch Box. Therefore, Kenyans have been disenfranchised, because they are walking around without identity cards. Nonetheless, could the Assistant Minister confirm or deny that this hospital keeps bodies? The hospital charges differently from the mortuary led by a Russian. Could he confirm or deny that there are bodies---

Mr. Deputy Speaker: Order, Mr. Sambu! You have asked your question; let the Assistant Minister answer it.

Dr. Machage: Mr. Deputy Speaker, Sir, being a hospital, certainly, bodies of the deceased are kept there. So, I confirm that there are some bodies kept in that hospital.

Mr. Deputy Speaker: Mr. Assistant Minister, there is a difference between "detaining" and "keeping". The hon. Member is asking whether there are bodies detained in the hospital.

Dr. Machage: Mr. Deputy Speaker, Sir, you cut me short. I was continuing to answer the hon. Member. With all due respect, the waiver system is a well-defined process. The hospital must get all the information, after an application by the family of the deceased or the patients who have recovered and still stay in the hospital, saying that they are unable to pay. It is only after that application is received that a social worker is sent to the family to confirm that the situation is as described.

We know of some people who have the habit of refusing to pay hospital bills. This is not only in the Moi Teaching and Referral Hospital, Eldoret, but also in other hospitals all over the country. Such people cannot be allowed to continue with the habit. Indeed, when it is confirmed that the family is able to pay, we can invoke the Public Health Act to force them to pay and take the body for burial. So, these cases are handled on merit.

Mr. Muturi: Mr. Deputy Speaker, Sir, I think it is a well acknowledged fact that there is no property in a dead body. You cannot have a lien on a dead body. Mr. Sambu has stated categorically that in the same hospital there are about five boxes the size of this Dispatch Box full of Kenyans' identity cards. Those cards are detained because relatives are either unable to meet the hospital or mortuary bills. Could the Assistant Minister consider issuing a general circular to all hospitals that if a person dies and relatives are not able to pay, within three days, the body should be released for burial without further delay? He acknowledges that this is a problem all over the country. It is not fair for him to say that he can invoke the Public Health Act.

Mr. Deputy Speaker: Mr. Muturi, you have asked a very good question, which also covers my constituency.

Mr. Assistant Minister, please, respond!

Dr. Machage: Mr. Deputy Speaker, Sir, the law is explicit on when a court order can be given for bodies to be forcefully taken away or buried. Some people prefer having the bodies kept in a hospital for three days or one week, depending on the practice of the community. Some other communities keep bodies even for a whole month. Indeed, I cannot issue that circular to order that bodies be taken from hospitals after three days. However, I will issue a circular to give instructions that relatives and guardians have the responsibility to take bodies from hospitals after the demise of patients. If there are any problems, they have the right to write and request for waiver of fees.

Mr. Deputy Speaker: Last question, Mr. Sambu!

Mr. Sambu: Mr. Deputy Speaker, Sir, I wish I had more time to ask further questions. This is a very serious matter. It is so serious that it could degenerate into something else. People pay; it is not that they do not pay their bills. It may be a bill of Kshs50,000, and people pay Kshs40,000. However, when they go to the mortuary, the Russian, who is there, will demand another Kshs30,000 for keeping the body. They want to keep the bodies longer so that they get more money. Furthermore, this hospital is built on Government land; they took the Uasin Gishu District Hospital property and the rest of the buildings were put up by the Chinese as a grant. They have taken the Uasin Gishu Memorial Hospital--

Mr. Deputy Speaker: Mr. Sambu, ask your question!

Mr. Sambu: I am asking the question, Mr. Deputy Speaker, Sir. I know what I am asking. Now, the hospital has been privatised. Look at how the Director, Prof. Mengech, recruits people. Who is his assistant? You take the most beautiful lady there, marry her and make her--

Mr. Deputy Speaker: Order, Mr. Sambu! Will you ask the question?

Mr. Sambu: Mr. Deputy Speaker, Sir, I am asking the question.

Mr. Deputy Speaker: I will stop you if you do not ask a question! Can you ask the question now? You are now moving to beautiful ladies *et cetera*.

Mr. Sambu: But it is a fact!

Mr. Deputy Speaker, Sir, will the Assistant Minister, with immediate effect, send the Kenya Anti-Corruption Commission (KACC) to investigate why there are more than five boxes full of identity cards in that hospital, and whether it is lawful to detain them? Under which Act does it detain identity cards?

Mr. Deputy Speaker: Are you done? Very well; let us hear from the Assistant Minister.

Dr. Machage: Mr. Deputy Speaker, Sir, the policy of the Ministry of Health is to help Kenyans. Indeed, if there is a problem as put on the Floor of this House by the hon. Member on retention of bodies in that hospital, I will investigate and address the issue. I will also investigate, using my systems, the issue of detaining of identity cards. I will not investigate the issue of marriage between people who are above 18 years of age.

Mr. Sambu: On a point of order, Mr. Deputy Speaker, Sir. Is the Assistant Minister in order to refuse to go and investigate a valid case? There is complexity here in the sense that one marries a lady, promotes her and she starts doing her own things as she continue earning from the hospital. Is he in order not to go and investigate the second wife of Prof. Migei?

Dr. Machage: Mr. Deputy Speaker, Sir, the institute of marriage is outside my domain. If there is complexity in the promotion of workers in that hospital, we will investigate that.

ORAL ANSWERS TO QUESTIONS

Question No.567

ADMINISTRATION OF MUKSERO SIDHO FROM
KISII CENTRAL DISTRICT

Mr. Ahenda asked the Minister of State for Administration and National Security if he could inform the House why Muksero Sidho in Muksero North Location in Kasipul Kabondo continues to be administered from Kisii Central District despite the fact that it is in Rachuonyo District.

The Assistant Minister, Office of the President (Mr. Kingi): Mr. Deputy Speaker, Sir, I beg to reply.

Muksero Sidho in Muksero North Location is not in Rachuonyo District. The area falls within Mosoch Division of Kisii Central District and has never been an administration area in Rachuonyo District.

Mr. Ahenda: Mr. Deputy Speaker, Sir, the Assistant Minister is misleading the House. Muksero Sidho has never been in Kisii even before Jesus came. The map of Nyanza shows that it is in Rachuonyo District. I do not know why the Assistant Minister says it is in Kisii.

Could the Assistant Minister inform us why it has continued to be administered from the wrong district?

Mr. Kingi: Mr. Deputy Speaker, Sir, as far as I know, this area has never been administered from the wrong district. It has continued to be administered from Kisii Central District, where it belongs.

Mr. Ahenda: Mr. Deputy Speaker, Sir, I am ready to lay on the Table all the documents pertaining to this location. It is a small stretch just within the border. The confusion arose because Rachuonyo District Headquarters was formerly in Kisii Town. When the district was sub-divided and the headquarters transferred to Homa Bay, that is what brought up the confusion. If the Assistant Minister has time, he can look at the documents that show that Muksero Sidho is actually in Rachuonyo District. I can give him the documents.

Mr. Deputy Speaker: That can be dealt with between you and the Assistant Minister in his office. Mr. Kingi, do you oblige?

Mr. Kingi: Mr. Deputy Speaker, Sir, I wish to invite the hon. Member to come to my office with the documents that he claims to have. I will look at them and advise accordingly.

Question No.278

NON-PAYMENT OF TERMINAL DUES
TO MR. WILLIAM OMWENGA

Mr. Bifwoli, on behalf of, **Mr. Mwanacha**, asked the Minister for Labour and Human Resource Development:-

(a) whether he is aware that Mr. William Mogambi Omwenga's (Personal No.209) of M/S Crescent Construction Company has not been paid his terminal benefits after he was sacked in 1999, having worked for the company from 1994;

(b) if the answer to (a) above is in the affirmative, when Mr. Mogambi will be paid;

(c) what measures the Government has put in place to ensure employees who are retired or have their services terminated without notice are not subjected to such ordeals by unscrupulous employers; and,

(d) whether the Government could consider putting guidelines in place to ensure employers who delay paying employees their terminal benefits, pay with interest.

Mr. Deputy Speaker, Sir, Mr. Mwanacha is in South Africa.

Mr. Deputy Speaker: I will allow you to do so, but I have said before that the Chair should be informed when such arrangements are made. I was not aware of that. Nevertheless, I will allow the Minister for Labour and Human Resource Development to respond.

(Loud consultations)

The Assistant Minister for Labour and Human Resource Development (Mr. Leshore):
Mr. Deputy Speaker, Sir, I am here.

Mr. Deputy Speaker: Then your colleagues should give you an opportunity to respond. I can see you, but you cannot be heard because of the consultations that are taking place on my right.

The Assistant Minister for Labour and Human Resource Development (Mr. Leshore):
Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am aware.

(b) Mr. William Mogambi Omwenga terminal benefits were deposited at the Industrial Area Labour office vide cheque No.000063 for Kshs39,798 drawn in Equity Bank Ltd. on 19th September, 2006. He has since received this full amount which included:- Two months pay in lieu of notice - Kshs14,740; twenty six days leave - Kshs7,370 and four years severance pay at 18 days per each completed year of service - Kshs17,688. This totalled to Kshs39,798.

(c) Several measures have always been in place to ensure that employees who are retired or have their services terminated unlawfully or without notice are not subjected to ordeals by unscrupulous employers such as:-

(i) Guaranteeing of freedom of association as stipulated in our Constitution together with Acts of Parliament like the Trade Unions Act, Cap.233 and the Trade Disputes Act, Cap.234. These instruments facilitate employees in forming or joining trade unions which are mandated to represent workers; rights as well as negotiating and bargaining on their behalf.

(ii) The Government through the Ministry of Labour and Human Resource Development has the powers to enforce the Employment Act, Cap.226 and the Regulation of Wages and Conditions of Employment Act, Cap.229. In enforcing these Acts in conjunction with the Judiciary, we promptly listen to workers' grievances and take remedial measures appropriately.

(d) Currently, our labour laws and regulations do not give provisions that compel employers who delay in paying employees their terminal benefits to pay with interest. However, my Ministry will soon consult the tripartite social partners, namely, employers, workers and the Government with a view to coming up with such guidelines. I, therefore, appeal to hon. Members to support such a move once initiated.

Mr. Bifwoli: Mr. Deputy Speaker, Sir, the Assistant Minister has said that he is aware that Mr. Omwenga' services were terminated unlawfully and he has not been paid his dues. This Ministry is supposed to have labour inspectors who are supposed to inspect employers, especially the Indian contractors. What is the work of the Ministry's inspectors if our people are being molested by employers? What step is the Ministry taking to safeguard workers in this country?

Mr. Leshore: Mr. Deputy Speaker, Sir, when the issue was raised with my Ministry, I appointed an inspector to investigate the matter. He investigated and requested that the parties have a memoranda as required by the law. Again, the union responded, but the employer adamantly refused.

When the employer realised that the matter has been raised in the National Assembly, he agreed to honour the agreement which was signed between the company and the union on 8th September, vide their letter dated 18th July, 2006. The parties were invited for a joint meeting by the investigator and both parties agreed that Mr. Mogambi be paid Kshs39,798 as full and final settlement of the dispute.

Mr. Ndolo: This company is known for sacking and not paying its workers. It has been employing and sacking workers without paying them for five years. Some of the workers have been there for up to 15 years. What is the Minister doing about it? I have been going to his office to talk about the issue. Right now, most companies in the Industrial Area employ people and close down before paying them. The owners of such companies are frustrating Kenyans, and some of them are

sitting right across, on the Government side. What is the Minister doing to make sure that the workers will be paid?

The Minister for Water and Irrigation (Mr. Katuku): On a point of order, Mr. Deputy Speaker, Sir. I do not know if you heard what the hon. Member has said. He said that those people who own some of the companies which are frustrating Kenyans are seated right here. Could he substantiate his claim because that imputes improper motive on the side of the Government? I do not own a company in the Industrial Area, and therefore, he should substantiate.

(Mr. Bifwoli stood up in his place)

Mr. Deputy Speaker: Mr. Bifwoli, will you cool down! An hon. Member has raised a point of order regarding Mr. Ndolo's allegation. Mr. Ndolo, could you point out which hon. Member, seated in front owns Crescent Construction Company?

Mr. Ndolo: Mr. Deputy Speaker, Sir, it is common knowledge. Everybody knows that most of the Ministers have companies in the Industrial Area. Everyone in this country knows that and so, there is no point of me substantiating.

Mr. Deputy Speaker: Mr. Ndolo, that is not how you substantiate. If you do not have the facts regarding the ownership of Crescent Construction Company, all you need to do is withdraw the allegation. You cannot say that everyone knows. I do not know. Who else knows? If you do not have the facts--- The Standing Orders say: "The correctness of the information that an hon. Member supplies is upon him." So, if you do not have the information, please withdraw the allegation so that the Minister can address your Question.

Mr. Ndolo: Thank you, Mr. Deputy Speaker, Sir. I withdraw.

The Minister for Labour and Human Resource Development (Dr. Kulundu): On a point of order, Mr. Deputy Speaker, Sir. Hon. Ndolo made sweeping statements.

Mr. Deputy Speaker: But he withdrew!

The Minister for Labour and Human Resource Development (Dr. Kulundu): On a point of order, Mr. Deputy Speaker, Sir. I appeal to all hon. Members that, when they come across situations such as the one which has been alleged, they bring it to the notice of the Ministry. It must be borne in mind that we have very few inspectors.

Mr. Deputy Speaker: You stood on a point of order and I gave you an opportunity. Now, you are appealing to hon. Members that whenever they discover such cases, they should forward the information to your Ministry. Could I assume that you have now answered the question by Mr. Ndolo, and therefore, there is no need for hon. Leshore to address Mr. Ndolo's question? I request Mr. Bifwoli to ask the last question.

Mr. Bifwoli: The Minister has not answered my Question. I asked him whether he has enough inspectors and that is why hon. Ndolo came up with the allegation, which I presume is true. He has not answered the question. Anyway, let me ask another question.

Mr. Deputy Speaker: Mr. Ndolo made an allegation which he withdrew. Now, you are saying that you presume it could be true. Are you trying to reinstate the allegation? Will you ask a question?

Mr. Bifwoli: Mr. Deputy Speaker, Sir, I said that the Question I asked has not been answered. I will now ask another one. Mr. Deputy Speaker moved a Motion in this House, which we passed. We said that any employer who terminates the employment of his or her employee must pay the worker with interest. The Minister has said that there is no law governing that. What law did we pass here? What is his problem? Could he explain that?

Mr. Deputy Speaker: Mr. Bifwoli, you better familiarise yourself with that law. The law did not address the issue of every employee. It only addressed the issue of public officers or employees of Government.

Mr. Leshore: Mr. Deputy Speaker, Sir, that was a Motion passed and once the Bill which

is pending before the Attorney-General comes to this House, I am appealing that we be given some guidance so that some of these issues are solved within no time.

Mr. Deputy Speaker: Hon. Members, as you can see, it is now 3.30 p.m. We have only 10 minutes to tackle the remaining Questions.

Question No.637

POSTING OF NURSES/
LABORATORY TECHNICIAN TO
KHWISERO HEALTH CENTRE

Mr. Arungah asked the Minister for Health:—

- (a) whether she is aware that Khwisero Health Centre has four nurses serving a community of 15,000 people;
- (b) if she is also aware that the health centre has a fully-fledged laboratory but has no laboratory technician; and,
- (c) what she is doing to ensure adequate nurses and a laboratory technician, are posted to the facility.

The Assistant Minister for Health (Dr. Kibunguchy): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am aware that Khwisero Health Centre had six nurses, one registered clinical officer, one laboratory technologist, one public health technician, three support staff and five casuals.

(b) No, I am not aware.

(c) As stated in (a) above, my Ministry has already deployed one community nurse and one laboratory technologist who reported to the facility in November, 2006. Currently, the staff is adequate to offer essential services in that facility.

Mr. Arungah: Thank you, Mr. Deputy Speaker, Sir. I asked this Question because patients were visiting the facility for up to three days without being attended to. The Assistant Minister said that there are six nurses and has gone ahead to include a public health officer who is never there because he goes to inspect the market. So, in effect, there are four nurses, two of whom are involved in dressing of wounds. The Assistant Minister is a medical doctor. Could he explain to this House how logistically those three people can run a pharmacy, a laboratory, a ward, an antenatal unit and even treat people at the same time, if the facility runs for 24 hours a day?

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, the information we have on the ground is that with the work force we have in the health facility, 50 patients are attended to every month. So, by comparing the workload to the number of workers we have, as an Assistant Minister, and as a medical doctor as the hon. Member referred to me, I am satisfied that the personnel we have can adequately serve the people seeking services from the facility.

Mr. Karaba: Mr. Deputy Speaker, Sir, the Assistant Minister has visited quite a number of dispensaries and health centres in this country. I am sure he has noted that in most of them, there is a serious shortage of laboratory technicians. In fact, most of the dispensaries have closed down the laboratory facility. This means that most of the patients are treated without going through some vital laboratory tests. Could he assure this House that laboratory technicians will be recruited immediately or transferred from other dispensaries, so that they can continue doing laboratory work?

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, we have said time and again in this House that we, as a Ministry, accept that we have certain shortages in critical areas. That includes laboratory technicians and technologists. However, we have embarked on an exercise of recruitment. We will recruit more officers. I am sure within a short time we will have enough people working in various institutions.

Mr. Deputy Speaker: Last question, Mr. Arungah!

Mr. Arungah: Mr. Deputy Speaker, Sir, could the Assistant Minister give the names of the community nurse and the laboratory technologist who were sent to Khwisero Health Centre? Could he also inform this House when they were posted there? As of last Friday, they were not there.

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, I do not have their names because this was not asked. However, the information I have is that the laboratory technologist was posted to Khwisero Health Centre and reported on 6th November, 2006. The nurse reported on 13th November, 2006.

Mr. Deputy Speaker: Next Question, Dr. Ali!

Question No.515

TRAINING/HIRING OF TRADITIONAL
BIRTH ATTENDANTS

Dr. Ali asked the Minister for Health:-

(a) if she is aware that traditional birth attendants do not have basic hygiene techniques for dealing with deliveries;

(b) if she is further aware that most of them are very useful to the communities in the rural areas; and,

(c) what plans are in place to assist in training and hiring of the attendants and their admittance into maternity wards in case their services are required.

The Assistant Minister for Health (Dr. Kibunguchy): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am aware that most traditional birth attendants do not have basic hygiene techniques for dealing with deliveries. The issue, as a priority, is being addressed by my Ministry and in 2006, Wajir District, in collaboration with DANIDA, conducted refresher courses for the traditional birth attendants as follows:-

In the Southern Zone the course started on 17th June, 2006 and lasted five days. The course attracted 30 participants. In the Northern Zone, the course started on 1st June, 2006 and lasted five days. The course attracted 30 participants. In the Western Zone, the course commenced on 23rd June, 2006, lasted for five days and attracted 30 participants. On the Eastern Zone, the course commenced on 24th July, 2006 and lasted for five days. It also attracted 30 participants. In the Central Zone, the course started on 24th July, 2006 and lasted five days. The course attracted 30 participants.

Mr. Deputy Speaker, Sir, the course modules entail all aspects of reproductive health such as ante-natal and post-natal services, HIV/AIDS, diseases in pregnancy, infection prevention, abnormal pregnancies and effects of Female Genital Mutilation (FGM).

(b) I am aware that traditional birth attendants account for a big percentage of deliveries that take place outside health facilities. They are an integral part of the communities and their mid-wifery contribution has been recognized in communities where they live. The Government regards their role as increasing access to rural health services/facilities.

(c) The National Health Sector Strategic Plan (NHSSP) 2005-2010, recognizes the role played by Community Own Resource Persons (CORPs) in health care promotion in the community. The Ministry has allocated funds for training and supervision of the CORPs, including the traditional birth attendants.

Their linkages in the health facilities is also being strengthened. The Ministry will motivate the CORPs through non-monetary ways such as offering regular training updates and providing them with the necessary materials for their work. Currently, my Ministry has no plans to hire traditional birth attendants, but is rather concentrating on hiring more health workers.

Mr. Deputy Speaker, Sir, in this regard, my Ministry further launched the community mid-

wifery strategy as a model of health care in Western Province on 19th October, 2006, which focuses on empowering trained mid-wives living in the community to assist women during pregnancy, child birth and postpartum period in their homes.

Mr. Deputy Speaker, Sir, finally, it is possible to deliver women safely in their homes under the care of the skilled community mid-wives to ensure a healthy mother, baby and the nation as a whole.

Mr. Deputy Speaker: Dr. Ali, please, ask the last question because that was a lengthy answer.

Dr. Ali: Mr. Deputy Speaker, Sir, I wish to thank the Assistant Minister for a very good answer. The traditional birth attendants are very helpful to rural communities. He has indicated that there is need to train them, but he has said the Ministry does not intend to absorb them in hospitals to assist the mid-wives and nurses. In most rural health facilities, there might be only one nurse on duty. Sometimes the nurse is off duty and the dispensary is run by subordinate staff. Why can he not consider absorbing the traditional birth attendants in some of those dispensaries when they are trained on hygiene techniques?

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, if we allowed the traditional attendants into our health facilities, it will negate the whole concept of the work that they do. Traditional birth attendants usually visit patients in their homes. We would like to encourage them to follow that route. Rather than them coming to our facilities, we would like to encourage them to visit pregnant women who are about to deliver in their homes. It is well known that, that is the concept of traditional birth attendants.

Dr. Ali: But Mr. Deputy Speaker, Sir---

Mr. Deputy Speaker: Dr. Ali, I had asked you to ask the last question so that we move on to the last Question.

Dr. Ali: Mr. Deputy Speaker, Sir, it is not a question. I am happy with the answer. Why can the Ministry not allow traditional birth attendants to operate from hospitals? In most cases, the traditional birth attendants follow-up on the expectant mothers from the homes to the hospital or dispensaries where there are no qualified personnel. That was the question I asked, but the Assistant Minister did not answer it. I know they are supposed to attend to expectant mothers in homes, but if they follow-up on them in hospitals what is the problem?

Mr. Deputy Speaker: Dr. Kibunguchy, could you respond to his question?

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, that is what I was trying to explain. If we take up that route, it will negate the whole spirit of traditional birth attendants. The essence of their work is to actually attend to expectant mothers in their homes. It is true we have a shortage of staff, but we are employing health workers. Very soon, we shall have enough staff to serve people within our facilities.

Mr. Deputy Speaker: Last Question on the Order Paper by Archbishop Ondiek!

Is Archbishop Ondiek here? Archbishop, you are just engaging in chatting when I am calling you!

Proceed and ask your Question!

Question No.372

POSTING OF PERSONNEL TO HEALTH
CENTRES IN UGENYA CONSTITUENCY

Archbishop Ondiek asked the Minister for Health what plans she has with regard to health centres constructed in Ugenya Constituency through the Constituencies Development Fund and have no personnel.

The Assistant Minister for Health (Dr. Kibunguchy): Mr. Deputy Speaker, Sir, I beg to

reply.

Simenya and Segga dispensaries are among the 600 dispensaries countrywide constructed through the Constituencies Development Fund (CDF), which my Ministry will gazette and operationalize during the current financial year.

Archbishop Ondiek: Mr. Deputy Speaker, Sir, I am glad that the Assistant Minister has given that answer. However, I did not get a copy of the written reply. I do not know if what he has said is the correct information or not. Could I get a copy of the written reply?

Mr. Deputy Speaker: Archbishop Ondiek, the correctness of what the Assistant Minister has said is already reflected on the HANSARD. Dr. Kibunguchy, please, supply a copy of the written reply to the hon. Member.

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, we had released enough copies to the Leader of Government Business. I do not know why Archbishop Ondiek has not received his copy.

Mr. Deputy Speaker: Archbishop Ondiek, if you could collect a copy from the Clerk-at-the-Table.

Any other question?

Mr. J. Nyagah: Mr. Deputy Speaker, Sir, do I take it that my Mbita and Rugogwe in Gachoka will be supplied immediately with staff and medicine as per that answer so that I can inform them accordingly?

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, I think that is a totally different question from what has been asked. What we have said is that we are going to gazette 600 facilities, and I do not have a list of all the facilities in the country here. So, if somebody were to ask a specific question, I would answer.

Mr. Deputy Speaker: Mr. J. Nyagah, you do appreciate that this Question is related to Ugenya and, therefore, the Minister went and checked the records of Ugenya and supplied an answer. The Assistant Minister does not have the whole list to confirm whether yours is one of them. So, I think, let us be fair to him.

Mr. J. Nyagah: That is all right, Mr. Deputy Speaker, Sir. I will go and get the confirmation from him.

Archbishop Ondiek: Mr. Deputy Speaker, Sir, the Assistant Minister did not include all the health centres that I requested him. He has only mentioned Sumenya and Segga. But I asked him to report about Barndege, Sikalami and Nyang'u health centres.

Dr. Kibunguchy: Mr. Deputy Speaker, Sir, the information we have at our disposal is that these are the only two facilities that have been completed. The rest are at various stages of construction and we cannot register or gazette a facility that is not complete in terms of construction.

COMMUNICATION FROM THE CHAIR

THE SUPPLIES PRACTITIONERS MANAGEMENT BILL TO BE DEFERRED

Mr. Deputy Speaker: Hon. Members, the order in which matters are presented has been altered by the Chair, so that we have moved from Order No.7 to Order No.8. This will be re-arranged at a later date for some reason. So, let us go to the next Order.

Mr. Deputy Speaker: Madam Ojiambo?

Dr. Ojiambo: Thank you, Mr. Deputy Speaker, Sir, but I think the order is the other way round. We do The Nutritionists and Dieticians Bill first.

Mr. Deputy Speaker: That is what I thought. Order! I suppose someone is confusing the Chair. The Chair wishes to inform the House that Order No.8 will be skipped and we will move to Order No.9. Therefore, whatever I said earlier is rescinded and we will now move to Order No.7.

BILLS*Second Reading*

THE NUTRITIONISTS AND DIETICIANS BILL

Dr. Ojiambo: Mr. Deputy Speaker, Sir, I beg to move that The Nutritionists and Dieticians Bill be read a Second Time.

Mr. Deputy Speaker, Sir, I thank the House for granting me leave to bring back this Bill. When we debated the Motion relating to this Bill, we got a lot of information from Members. But above that, I want to thank the Ministries and departments and friends from outside the Government who contributed to the ideas that we have been able to put together to bring this Bill to this House. I want to thank the Ministries of Health, Office of the President, Agriculture, Planning and National Development and the private sector and many other Members of this House who have helped us to put together ideas and constitute this Bill.

Mr. Deputy Speaker, Sir, the position of nutritionists and dieticians in this country is still wanting in that up to now, there has been no law that has regulated any activity in this area. This means that even the workers in this field are lost; they do not know where to go. It is a good thing that today, we can start to debate a Bill that is going to regulate the activities of this profession.

Mr. Deputy Speaker, Sir, this Bill seeks to provide for the training, registration and licensing of nutritionists and dieticians to provide for the regulation of their standards and practice to ensure their effective participation in matters relating to nutrition and dieticians and for connected purposes. To achieve this objective, the Bill has provided for administrative and financial provisions, examination, registration and licensing provisions, disciplinary and miscellaneous provisions to protect the profession from abuse and penalties for breakers of law established by this Bill. There are also Schedule I, that will regulate the conduct of the Institute and Schedule II, that will regulate the conduct of business of the Council.

Finally, there is of course the Memorandum of Objects and Reasons.

Mr. Deputy Speaker, Sir, this Bill establishes an institute called the Nutritionists and Dieticians institute, which will be a body corporate. The Institute will be governed by a council which is established in this Bill at Clause 4. The Council as a body has membership which has been listed in the Bill that includes the professional bodies that subscribe to nutrition and dietetics profession. It brings together professionals who know what this whole field is about.

Up to now, in this country, very few people understand what nutrition and dietetics is about. We want to give these people the opportunity to practise their profession. We also want, through this Institute, for them to be able to subscribe to the welfare of the people of this nation.

Mr. Deputy Speaker, Sir, when we were describing the activities of this body at the Motion level, we touched on various aspects of what is happening in the Kenyan population today. We mentioned that Kenyans today are either hungry or malnourished, or have got plenty to eat, and a lot of them are becoming obese. We also recognised that out of all these, there is a new opportunity for diseases that used to be subscribed to developed nations cropping into Kenya very fast such as obesity, cardiac conditions, diabetes, cancer and many other conditions.

Mr. Deputy Speaker, Sir, we also talked about issues in our environment that we are not able to handle or control. These includes food dumping in our market, introduction of Genetically Modified Organisms (GMOs) and so many other things. As scientists, we know that some of these issues could contribute to a new development in the disease pattern in this country. If we are not going to monitor this new development, then it could turn out to be a problem for our health scientists.

We also mentioned that nutritionists and dieticians have a role to play in the diagnosis of diseases. When we were discussing this Bill in a workshop recently, one of the participants gave us an experience she had gone through in a hospital. Surgeons in that hospital were ready to chop off a patient's thumb because it had become sore and literally rotting. The nutritionist stopped the surgeons from going on with their surgery and told them to give her two weeks to monitor the patient's progress after which she would tell them when to proceed with the surgery.

Mr. Deputy Speaker, Sir, the nutritionist told us that after two weeks she went back to the surgeon with the patient and showed him the patient's thumb. Indeed, the sore thumb had healed and dried up. This means that all that the patient required was a certain intake of vitamins and minerals. This goes to emphasise the point I had mentioned earlier on that it is important to have nutritionists working alongside doctors, especially after doctors have done diagnosis of a patient's disease. If we do that, a lot of suffering can be avoided.

Mr. Deputy Speaker, Sir, to be able to achieve these objectives and implement some of these very important aspects of disease diagnosis and prevention, this Bill intends to give powers to practitioners in this field to practise their knowledge. This will be achieved by the help of this Bill because it establishes an institute called the "Kenya Institute of Nutritionists and Dieticians". This body is going to be run by a council which is meant to enforce and bring all that is good in this profession, but more importantly bring the professionals together and empower them to decide on their direction and control their practice.

With regard to this council, we recognise that nutritionists do not work alone. This is a multi-sectoral area because there are people from the Ministry of Health, Ministry of Agriculture, the private sector and the Government who will come together to form this council. This body must be able to elect its own members so that it is fully mandated to operationalise its work. The people who are elected to work in the council shall work for three years, but can seek re-election for another term of three years. This means that they can only serve for six years so that others are given a chance to serve in the council.

We also realised that we not only need to give an opportunity to people of this country. We know that most Kenyans have travelled far and wide. We have nutritionists and dieticians who are working with us now and have been trained in countries like Canada, India, Australia and other countries in Africa. It will be of interest to note that many countries in Africa have not reached the level of discussion where we are in this House. So, we shall be setting a pace also for a number of countries in Africa to come up with a legal framework that can help us, as a continent, to start developing our own standards. This country, and this region at large, has depended a lot on what is foreign. The African Continent literally depends on what the Europeans have developed and now what Asians have developed. This is because our own standards are wanting. We do not have food tables or knowledge of what is good and can promote health in our own context. We also do not have recommended allowances for various populations in our country. All these areas can only be addressed if we empower practitioners in this field to sit and work together and, therefore, advance the knowledge that they have.

Mr. Deputy Speaker, Sir, we have a lot of institutions in this country that will offer space for this work to continue. We have both private and public universities. We also have a college of nutrition here in Karen. There is the Medical Training College in Nairobi and many other institutions under the Ministry of Education that can carry out research and develop research material, information and language that can be applied to our own people.

We want, through this institute of Kenya Nutritionists and Dieticians which will be run by the council we are establishing in this Bill, to be able to look at examinations and standards of training of practitioners in this Bill so that we can allow our own council to award certificates to people who qualify from this institute. The council will also examine those who are coming from

outside with the knowledge they have and assimilate them into our environment so that they can contribute to this very vital area of national development.

In this Bill, we have sought to establish a disciplinary committee which we felt is very important. Today, anybody can walk on our streets and call themselves nutritionists and dieticians and there will be nobody to question them. This is simply because we do not have a legal framework or rules and regulations that we can fall back to and say, "You have violated this law or you have impinged on the rights of other practitioners." So, in our disciplinary provision, there are penalties that will be meted on those people who are out to practise when they do not have the necessary certificates. The penalties also target those who are out to impersonate dieticians and nutritionists.

Mr. Deputy Speaker, Sir, we also have a provision for registration. We have proposed that men and women who are practising as nutritionists and dieticians, under this law, must be properly registered through the council's committee of registration.

Mr. Deputy Speaker, Sir, all these put together, we are looking at a situation where we can now say that in this country we will be able to find nutritionists who are able to say "no" to what they think is not right whether they work in markets, prisons, hospitals or in institutions like schools. They should be able to pick up things from shelves, and by an established law, analyse and advise the Government that this is not good for our people. We are talking about a cadre of people who will work alongside doctors. For instance, if a doctor prescribes drugs to a patient and then also allows an unqualified dietician in the same hospital to give the wrong type of foods to that same patient, then that doctor's drugs will not be effective. We are looking at a situation where we want to collectively manage our health for Kenyans because a healthy nation is also a wealthy one. A healthy nation can command an effective workforce.

Mr. Deputy Speaker, Sir, this nation spends a lot of time distributing food to the hungry. Nowadays, we also hear from surveys and health practitioners that a lot of our children are malnourished. We are also informed that a lot of our women of child-bearing age are malnourished and sickly. We also know that a large section of our people are suffering from various controllable diseases and these are things that can easily benefit from the knowledge that we have. This knowledge in nutrition has not been tapped, consolidated and utilised to help our people use it to their own self benefit.

Mr. Deputy Speaker, Sir, I want to give an opportunity to this House to debate this Bill because when we were discussing its Motion, there was a lot of interest from the Floor and a lot of hon. Members have a lot of knowledge of what we want to do because for the first time in this country, we are coming up with this legal framework to look into this area that has been neglected. We want to ensure that nutritionists feel that they are also part of the professionals of this nation. Therefore, the institute will work together with other professionals to make sure that dieticians and nutritionists in this country form a workforce of practitioners who are professionals with recognised degrees. Under this law, we are opening opportunities for this country to comfortably award certificates, degrees and diplomas at all levels. We are seeing in the near future, our institutions producing very able dieticians and nutritionists locally with not only under-graduate degrees but also with their master degrees, PhDs and post-doctoral degrees who are able to command the science of nutrition that is very vital to the welfare and health of our nation.

Mr. Deputy Speaker, Sir, I want to emphasise that good nutrition is very important but good nutrition alone, as a knowledge, is not adequate. Dieticians are a big workforce along with nutritionists who must be empowered to control the welfare of our people, not only at home, but also in our institutions like hospitals, schools and hotels.

Mr. Deputy Speaker, Sir, I want to finish by saying that consumer education for our nation is very important. Today, if you go to the supermarkets, you will find our people busy buying

goods that have been brought from countries where they had probably been thrown off the shelves because they were considered not good enough for human consumption. However, we lavish them and you see *mamas*, *babas* and children on those shelves picking up very obsolete items for consumption that are not eaten in other nations.

Mr. Deputy Speaker, Sir, today, our nation consumes a lot of sugar and fat and these are the foodstuffs that have contributed towards our children becoming obese and some of them developing various conditions in early childhood that in a few years back were seen as diseases of adults. We want to ensure that the sanitary conditions of the food eaten not only at home but also in public institutions and even markets is clean. We want a situation where our nutritionists and dieticians can walk into hotels and other service areas and be able to say: "Please, this cannot go on because it is detrimental to the health of our people". We have a lot of diarrhoea, asthmatic conditions and other petty conditions that kill our children alongside tropical diseases that we know and this can also be supervised together with other items that the nutritionists and dieticians can look at from the market shelves and other institutions.

Mr. Deputy Speaker, Sir, in finishing, I just want to thank those that have helped us once more to develop this Bill and thank Parliament for having supported us in hosting workshops where we have sat together to develop the draft that we have. I want to mention that in the draft we have you will find a few words that are obsolete that we are going to mop up as we discuss. For instance, the gender language has not been very sensitive and where we have a word like "Chairman", I want this word to be automatically corrected to mean a "Chairperson" so that we are all properly accommodated. We also have harmonised the arrangements so that what we had called a "board" is now the "council" of the institute. So, where we refer to a "board", it will automatically be referring to the "council" of the institute that I have been making reference to in my remarks.

With those few remarks, I want to move and ask hon. Boit to second.

Mr Boit: Mr. Deputy Speaker, Sir, thank you for this opportunity. I want to second this very important Bill of Nutritionists and Dieticians. I am very glad that at in this point in time in this nation we are focused on the importance of nutrition.

Mr. Deputy Speaker, Sir, during the colonial times, the Government at that time felt it necessary to deploy enrolled nurses to do the work of nutritionists in the field. I think the Mover has just mentioned it very lightly that in most hospitals those days, enrolled nurses were just taken for a small course and they were taught how to treat people as per nutritional values of food in the hospitals and in the field. That shows that essentially there was need for nutritionists and, in fact, when we attained Independence, the Government opened Karen College and started training enrolled nurses who had been introduced to nutrition. We offered them full training to become nutrition technicians and we introduced a certificate course for school leavers who eventually studied for two years and qualified as nutrition technicians. We then made progress and trained also diploma nutrition technologists. Now, most universities in this country are training nutritionists under degree programmes. That indicates that this nation requires nutritionists. Why do we require nutritionists? Food is one of the basic requirements in our lives. Ninety per cent of what we do concerns food; in the establishment of our bodies' metabolism and everything that our bodies need concerns food. Thus, we have to manage the food element in this nation. We need to manage what people eat and plant.

Mr. Deputy Speaker, Sir, as the previous speaker mentioned, there are very many diseases and conditions affecting people, like obesity, diabetes, hypertension, stress, *et cetera*. These conditions can be prevented very easily if we manage people's eating habits. We should not allow this to continue. If you go back to the field, you will find that in some areas, people eat meat continuously, and that affects the health of a person. Others eat rice or other kinds of food

continuously, and that affects their bodies. We need to ensure that people take meals with the correct nutritional value. We should mix the food that people eat, so that it can enable the body mechanism function properly, so that when children go to school, they think properly.

I am sure that the Government is now embarking on production of good food through agriculture as well as provision of clean water and the education part of it. These three sectors are very important on the production of food. We are now serious. We are going to train nutritionists. However, we cannot do so if the basic requirements in the field are not available. We want the Ministry of Agriculture to introduce food crops in areas where such crops cannot be grown.

Mr. Speaker, Sir, some food crops take three months to mature in certain areas. In other areas, they may take even a shorter period. Even in arid areas, with the help of irrigation, we can produce foodstuffs for human consumption and grass for livestock and have plenty of meat. The Ministry of Water and Irrigation can provide plenty of water, so that animals can feed and have plenty of meat. It is very important for these Ministries to be given enough money, so that we can introduce the activities I have mentioned.

We need to include nutrition as a subject in our school curriculum. Children must be taught about nutrition. I remember that when I was in school, we used to have studies on health sciences. We used to do crop rotation in the school farms. Basically, we were being taught that we needed to have the food that we take improved. That is very important. This Bill captures all these aspects, so that this nation can have healthy people. A good nation must have healthy people, who are capable of thinking straight. In this respect, food is essential.

Mr. Deputy Speaker, Sir, the Bill we are introducing captures all these aspects. It seeks to provide for the creation of councils and boards. Once this Bill is passed, these bodies will organise themselves. The Mover has given us a lot of the details in this Bill. I am seconding her because, at this age and time, Kenya cannot be left to lag behind. I have had a chance to visit Japan. That country takes matters of nutrition seriously. There is a whole university which trains nutritionists only, and you cannot be called a nutritionist until you have a doctorate degree.

The students of that university study patients in hospitals, including pregnant mothers. They monitor the nutrition trends in a pregnant woman until she gives birth. Further, they monitor the child's growth, noting the foodstuffs it is fed on and the diseases it suffers from, *et cetera*. They prescribe everything that that child requires. To them, it is serious business. A nutritionist monitors the kind of food you eat, in all the seasons, as well as the exercises you do.

Mr. Deputy Speaker, Sir, in Japan, even veterinary doctors are trained on the nutritional needs of animals. They must study and pass a paper on nutrition. It is high time that Kenya also introduces such elements. We must be all rounders, so that we can have a healthy nation. I am very glad that even the Kenya Bureau of Standards gives a breakdown of nutritional quantities of food commodities as they analyse them for approval. That tells us how much our bodies require. Some unscrupulous businessmen can give us substandard commodities.

Right now, if you take most of the commodities on sale in supermarkets for analysis, they will not meet the required standards. That is why we need a law to protect us in terms of the foodstuffs we buy. Everybody should be educated. We need to train the people in the field to know what they need to eat. University communities, school children, their teachers and everybody else must be aware of what they need to eat. I am very glad that we are now introducing a law on nutrition. I very strongly support the Bill.

With those remarks, I beg to second.

(Question proposed)

The Assistant Minister for Local Government (Mr. Muchiri): Thank you, Mr. Deputy

Speaker, Sir, for giving me the opportunity to contribute to this very important Bill. It is also important that I am, for the first time, speaking from the Dispatch Box. I thank the President for this appointment.

(Applause)

Mr. Temporary Deputy Speaker, Sir, this is an important Bill, particularly because it is geared towards codifying matters relating to nutritionists and dieticians. It is important to ensure that our professionals have legislations to guide their profession. This Bill goes towards achieving that objective. I would like to thank Dr. Ojiambo for the work she has done in putting together the Bill.

[Mr. Deputy Speaker left the Chair]

*[The Temporary Deputy Speaker
(Mr. Waithaka) took the Chair]*

While speaking about nutrition, we must appreciate that it is a very important subject. A healthy nation is an important nation. Health is important to this country more than anything else. I remember reading Mr. Matiba's *Time for Change*. In that book, Mr. Matiba underscores the need for us to look into health as a very important aspect in our lives. While I agree with Dr. Ojiambo with regard to the provisions of this Bill, I think nutritionists and dieticians should come together and regulate their own profession. This Bill seeks to create a board and an institute. I am not sure whether there will not be conflict between the board and the institute. The Mover of this Bill should ensure that the board and the institute will not be on a collision course.

Mr. Temporary Deputy Speaker, Sir, Clause 5 stipulates the number of people who are supposed to be in the Board. I think it would have been better if the Board is also comprised of dieticians and nutritionists. I hope an amendment will be crafted to this effect so that the Board is not comprised of laymen. The universal acceptance is that professionals should regulate themselves. If we have a Board comprising of the Permanent Secretary, the Chairman of the Kenya Nutritionist and Dieticians Institute and the rest of them that are listed under Clause 5, that Board may contain non-dieticians. We want that Board to comprise of more dieticians and a few other people who are not dieticians. The Bill should be amended to include that aspect, so that we do not have only three dieticians who are supposed to be nominated by the Minister under Clause 5(e)(viii).

Mr. Temporary Deputy Speaker, Sir, when we come to the Institute created by Clause 11, I find that it is a very small body comprising of the chairman or the chairperson and four other members. So, the Institute will have fewer members than the Board. I would have wanted to see the Institute being a larger body. The Institute should have more professionals who will be regulated by the Board. I do not want to sound contradictory, but having read Clauses 5 and 11, I think there is something we can do to harmonize these two clauses.

Mr. Temporary Deputy Speaker, Sir, the Bill also proposes the establishment of a disciplinary committee, which is important. But this House should not create legislation that will become a dead letter. We have created laws and regulations in this House, but enforcing them has been a problem. All the Acts that govern professionals in this country, sometimes we find like they are dead letters. For example, there are other qualified professionals--- I would not wish the Nutritionists and Dieticians Act to be like the Estate Agents Act that was created and thereafter, nothing happened! People are masquerading all over as estate agents. We do not want to create a

legislation and then have people masquerading as dieticians and nutritionists, because there is nobody to enforce it. The Ministry of Health has a responsibility to ensure that once this Bill is passed by the House, it is implemented.

Mr. Temporary Deputy Speaker, Sir, we also want the whole issue of nutrition and diet to be propagated to our rural folk. When there are *Barazas* out there in the field, we want to see somebody from the Ministry of Health or from the Ministry of Agriculture standing up to explain to the rural citizens of this country that it is important for them to adhere to the "Rule of Three", as we were taught those many years ago. It is also important for somebody to stand up and say how some of our habits are resulting to a lot of illness. We want somebody to tell Kenyans: "If you eat well, your health is going to be better than when you eat without any particular programme". A lot of ailments that our people are suffering from can be avoided. We want to tell our people that medicine is not necessarily in the bottle. The medicine could be in your kitchen garden! It is important for us to concentrate on preventive medicine rather than curative medicine. If our people can eat well, then we will be able to avoid curative expenses and all the costs that go with curative medicine. This is the kind of information that we want to pass to our people.

Mr. Temporary Deputy Speaker, Sir, this country is endowed with a lot of resources. We have very good soils and, quite often, we have very good rains in a number of areas. It appears as if we are not utilizing the endowment that this country has. Our people are still eating monolithic food, in the sense that, if they are endowed with a lot of maize or rice, they eat too much of maize or rice. They eat too much meat, particularly fried meat, without realizing that these are some of the foods that cause hypertension, diabetes and such other ailments. So, this particular Bill is very important and I urge this House to pass it. I, personally, support it. I also have the benefit of having a very close relative in my house; my wife, who is trained in this particular aspect. I thank Dr. Ojiambo because she has also done a lot of research in these matters.

Without further ado, I beg to support this Bill and urge my colleagues to do the same.

Thank you, Mr. Temporary Deputy Speaker, Sir.

Mr. ole Ntimama: Thank you very much, Mr. Temporary Deputy Speaker, Sir, for giving me this opportunity to contribute to the Bill before the House now.

First of all, I want to thank the Mover of this Bill, Dr. Ojiambo. This is a very important Bill. It is a very well thought idea to bring this Bill to this House in order to get it enacted into law and also to provide a legal framework for the nutritionists and dieticians in this country. I would also like to thank every other institute, department and all professionals who have helped Dr. Ojiambo to put together and bring this Bill to this House. These are some of the ideas that we need in this country. There is a lot of politicking and shouting inside and outside this House. But I think an idea like this, which is absolutely original, to bring this Nutritionists and Dieticians Bill, is very important indeed.

We are told that the kind of food we eat is very important to our bodies. That food must include several ingredients like vitamins, starch, proteins and others. Those are the things that give the body strength to be able to resist some diseases. We are also told that the most important medicine is the ability of one's body to fight diseases. If your body is weak and you have been eating nothing, but junk food, even a common cold could send you to the grave. If you eat good food your body can resist the effects of even the HIV/AIDS virus. You can live with the virus for many years. The virus will not be able to attack you seriously. So, eating good food is medicine that is very important to everybody.

Mr. Temporary Deputy Speaker, Sir, I do not think the nutritionists in this country have an organisation for themselves to be able to project their profession or put it into a legal framework, in such a way they can really be called professionals. Therefore, I think this Bill is very important. I hope the Ministry of Health will recognise this profession and give it support, so that these

professionals can go out of their offices and meet people in the villages.

The other important people in a developing world, although we are not talking about them right now, are those roving doctors with big bags. In India and many other Asian countries, doctors are on the move. They visit people in the villages and treat them right on the ground. The situation is different here because our doctors wait for the patients in urban centres and cities. These nutritionists could do a lot of good work if they visited the villages and talked to women and children. They would organise them into groups and tell them what proteins, vitamins and carbohydrates do to their bodies and those of their children. That would be a very good and important service. Therefore, we should pass this Bill and enact it immediately, so that we can give these professionals the opportunity to go out there and help the people of this country.

Mr. Temporary Deputy Speaker, Sir, I do not know whether the Ministry of Education is really organised in such a way that it would employ dieticians and nutritionists in every school, so that they can advise the management of the schools as to what food they should buy and how to cook it. This would ensure good health for our children. An unhealthy body generates unhealthy mind. We should have a nutritionist in every school and hospital. As Dr. Ojiambo said, the effects of some diseases can be reduced by giving the patient good diet.

We have many children's homes in this country which I do not think are very well organised. They do not give children good food that will protect them from diseases and make them grow healthy. The nutritionists and dieticians are the people who should be employed in such homes, so that they can advise the management on what kind of food to give the children.

It is also important that we integrate the nutritionists and dieticians with the herbalists. This is because there are so many things in the forest, the herbalists know about. I do not know what kind of research has been going on, on this. But I understand that there is a lot of research in our universities on what the herbalists are doing. If we integrated them with the nutritionists, we could definitely develop a system where we could give very good advice to the doctors as to what kind of food they should give to their patients. I say this because there are many people who talk about herbs, soup and many other things. Although there is a bit of research going on, more should be done to integrate it with the food that is being eaten.

Apart from the nutritionists going out with the big bags to advise people on how to eat healthy foods, we have got a lot of good food around the countryside which we are not utilising. For example, we have cassavas, sweet potatoes and other roots. I think the Ministry of Agriculture, along with the nutritionists, should go out and advise people on what foods have the required nutrients. This will ensure that we bring up a very healthy society using the simple crops that we grow.

Mr. Temporary Deputy Speaker, Sir, our people should be fed on simple food that they grow in our villages such as sweet potatoes and beans. It is not only meat which is essential in our diet but also beans. If you cannot afford meat, you can eat some beans.

So, I want to support this Bill and urge this House to pass it, so that we have that group of professionals.

With those few remarks, I beg to support.

The Assistant Minister for Justice and Constitutional Affairs (Mr. Mungatana): Thank you, Mr. Temporary Deputy Speaker, Sir, for giving me the opportunity to also add my support to this Bill and make a few remarks.

First and foremost, I want to congratulate hon. Dr. Ojiambo for bringing this Bill here. I also want to thank people who have supported her to ensure that this Bill reaches where it has reached right now. To me, this is yet another shining star amongst our lady legislators. It is hats off for Dr. Ojiambo from all of us who are watching her efforts from the sides. Congratulations, Dr. Ojiambo! We want you to make sure that this Bill passes as soon as possible.

Having said that, I want to agree with previous speakers, that, indeed, the health consciousness of the Kenyan people has changed. If you wake up in the morning, as I do, and go to the fields, you will find many people in our health clubs jogging and taking long walks with their wives and children. If you go to health clubs you will find many Kenyans in our gymnasiums, exercising and keeping fit both in the mornings and evenings. The Health Club Members of this House are no exception. We have many active hon. Members who exercise their bodies in our common gymnasium here.

The nation's health consciousness has risen. I want to make this point yet again. If you go outside, you will see that we have had the Standard Chartered Bank-sponsored marathon now running for the fourth year. Every Kenyan knows that every year we have a marathon. I want to thank the Standard Chartered Bank for contributing to our health in its own way. We are now looking forward to the "Women Run", which is going to take place on 2nd December, 2006. All these activities point to the fact that Kenyans have seriously become aware of their health and how to take care of themselves. This is combined with the attitude towards our foods and what we eat. I want to congratulate Dr. Ojiambo for bringing this Bill to this House at an absolutely opportune time.

We say many times that prevention is better than cure. There is no better way to prevent diseases than to eat properly. It is crucial for us, as a nation, to invest in the regulation and growth of the dieticians' and nutritionists' profession. We should recognise this profession of dieticians and nutritionists in this country. There is no better way of doing this than to bring a Bill that will specifically deal with it. I think this is a very good thing and we will support it.

As the hon. Member of Parliament for Garsen Constituency, and also a person who is quite interested in health matters, I want to note that when you go to supermarkets today you will see a lot of vitamin tablets. You will see a lot of natural health foods. You will see small shops and some supermarkets selling natural foods that do not have any side effects. But the people who make such multi-vitamin tablets and natural foods have not been registered in this country as nutritionists or dieticians. So, we just depend on faith when we buy such tablets. This is because we have probably read that such tablets can help.

Mr. Temporary Deputy Speaker, Sir, we have the GNLD and Tianshi health products movements. We do not know the qualifications of the people who make these health products that come from outside the country. We are not doubting that they have helped a number of people in this country. However, this country does not have them as registered nutritionists and dieticians. We are just living by faith. I think it is crucial that we pass this Bill as soon as possible. This will discourage those who are not qualified in their own countries from selling to us well labelled placibles. When these products come to this country from some other country, such as the Far East, South Africa or Europe, people just buy them, believing in the marketing gimmicks rather than the facts of the matter.

Mr. Temporary Deputy Speaker, Sir, I think it is crucial that the functions of the proposed Board, as suggested under Clause 6, should be the registration of all nutritionists who will be operating in the market in this country. This should not exclude any products. When this law becomes operational, we should put in it a provision on a serving period. Nutritionists behind the manufacturing and sale of products that are in the country right now must obtain licenses in this country. Then, as a nation, we will know that what we are consuming is proper and acceptable by our standards.

Mr. Temporary Deputy Speaker, Sir, the other function that I think is crucial, but is not reflected in Clause 6, is the propagation of a campaign for nutritional changes in this country. This must be given as a function of this Board, supported by the Government. Why do I say so? I say this because in our country we have different traditions and types of food depending on where you

come from. People need to be told that some of the staple foods they eat need to be mixed with something else for them to be healthy. So, if people are used to eating meat in the morning and in the evening, the Board should do radio campaigns to say that some of these things need to be done this way or that way. When talking about the Pokomo, we like eating certain things. However, we also need to say, "combine that with this or that and that". In this way, people's traditions can start being changed for the health of this nation.

Mr. Temporary Deputy Speaker, Sir, I could not agree more with the suggestion that standards need to be set by this Board, not just in the countryside but even in schools, colleges and institutions of higher learning. When we were in high schools some of our foods were laced with paraffin. We were told it was good because it controlled certain things which normally existed at that time. We want this Board to come out very clearly and set standards. It should say what should be eaten in high schools. The same way we have matrons in boarding schools, we should also have nutritionists employed and paid by the institutions.

Mr. Temporary Deputy Speaker, Sir, even in some of our primary schools, we should have standards because it is not uncommon to have hawkers and vendors selling sweets in schools during break time. We know these sweets create hyper-activity in pupils. We need to have standards set, so that correct foods are sold and correct eating habits are practised even in primary schools. People should not just be allowed to sell chips and chicken every day in our schools. By allowing this, we are not creating a healthy nation. I think setting of standards is one of the functions that need to come under this proposed Board.

Mr. Temporary Deputy Speaker, Sir, if these improvements can be made, I trust that this Bill will be crucial for the nation. It has come at the right time. It is the kind of law that has come at the right time. As a House, we need to support it and take the shortest time possible to pass it unanimously. This is, of course, subject to any other changes that might be brought to improve it. I want to fully support it.

Thank you Mr. Temporary Deputy Speaker, Sir.

Mr. J. Nyagah: Thank you Mr. Temporary Deputy Speaker, Sir, for giving me this opportunity to support this very important Bill. This Bill is important because it is crucial to the lives of Kenyans. Mr. Temporary Deputy Speaker, Sir, let me start by thanking Dr. Ojiambo for introducing such an important Bill to this House. It shows Kenyans the importance of having professionals in Parliament. In addition to non-professionals, it is important to have professionals in Parliament. When you have professionals such as Dr. Ojiambo and others, they come up with bright ideas like this Bill. It is a private Member, who is a professional, who brought this Bill to this House. A whole Government and the Ministry of Health, over the last 43 years, did not find it convenient to give this House a Bill of such importance. It is, therefore, important for Kenyans to see the need for both professionals and non-professionals in Parliament. The professionals will guide the Government from time to time when it ignores important legislations such as this.

Mr. Temporary Deputy Speaker, Sir, I am happy to see that my colleagues on the other side fully support this Bill. This Bill will cater for all Kenyans. Kenyans' eating habits have to change, given environmental changes, expired products being introduced to our market and the sub-standard imported foods. Our eating habits have to improve and be guided by professionals. It is critical to have professionals doing their job.

Mr. Temporary Deputy Speaker, Sir, the area of nutrition is one of the areas which do not have professional representation. These people are as important as engineers, dentists, architects and so on. Yet, all these years they have been left to operate without professional representation. They are perceived to be ordinary people doing a very routine job when, in fact, they do a job that saves our lives. This Bill will go a long way in making them professionals, so that when they stand to talk in meetings, they can be taken seriously.

Mr. Temporary Deputy Speaker, Sir, if you go to a departmental meeting in the Ministry of Agriculture, where I served at one point, when nutritionists speak, nobody takes them seriously, because they are considered to be very junior. However, if these officers become professionals, the Minister, the Permanent Secretary and senior officials of the Ministry will take them very seriously. This is one way of raising their positions in the society, so that they can be listened to and their opinions sought and respected for the good of our country.

I am happy to see that the Board will, among other things, look at the training of our people. I fully agree with my colleague who has just been appointed an Assistant Minister, and I congratulate him, that it is important for the Board to have a major representation of professionals, so that it is not swallowed by people who do not understand its role. It should not be taken over by journalists who are general administrators and who will think in a way which does not fall in line with the purposes for which this Board was created. I support my colleague that, an amendment be introduced, so that we can have professionals taking over more positions in the Board.

Once we have recognised these professionals, we should then, over time, introduce them to our colleges, schools and other public institutions, so that they can help us in looking after our health. As a country advances in development, these things become very important. The fact that we are now introducing such a Bill clearly shows that we have caught up with the rest of the world. It clearly shows that there is need for our country to have people who will assist us to know what to cook, how to cook it and then advise our people accordingly. If we are not advising our people properly, given the fact that the environment is changing and water is becoming dirty, they will easily become ill and they will not live for many years. No wonder our life expectancy is coming down every year. We are told that some of the reasons why our life expectancy has come down is the HIV/AIDS apendemic among others, but people forget that eating habits are a major contributor to the fact that we are living fewer years than people lived before. It is, therefore, important that we have nutritionists in all institutions and in public meetings, so that they can educate Kenyans at all levels.

Mr. Temporary Deputy Speaker, Sir, when the Maendeleo ya Wanawake Organisation was introduced in 1954 before it became politicised, this was one of its main job descriptions. It taught people, particularly, ladies, how to cook and take advantage of our traditional foods, so that we could remain healthy. That original job of Maendeleo ya Wanawake should be re-introduced and expanded. I am, therefore, happy to see young professionals, 60 years later, pursuing that line. We need to ensure that training for nutritionists in our colleges is modernised. I hope that there will be opportunities for certificates, diploma and even degree holders, so that we can expand this field. We should provide appropriate training for people who choose this as a career. It is important that we train them at lower levels, for example, the ones who do not perform very well in high school. The current college of nutritionists should be expanded, so that we can have more people with diplomas in nutritional studies so that they can serve our people better.

I know that a few of these professionals are working in institutions like the Kenya Bureau of Standards (KEBS). I hope that KEBS will expand and employ more of these professionals. If you look at our supermarkets, you will find that there are goods that have been smuggled into Kenya by very corrupt people, who do not care about our health. They then collude with some corrupt officers at the KEBS and we then end up with some expired and substandard goods in our supermarkets, which are killing our industries slowly. There is need for nutritionists to work at KEBS and in the Department of Public Health in the Ministry of Health. These professionals should be inspecting goods on our supermarkets' shelves, to ensure that they have not expired and are not substandard. That way, Kenyans will live longer than they are living today. I hope to see these professionals working in in supermarkets and other places inspecting goods and ensuring that our people are eating the right foods.

Mr. Temporary Deputy Speaker, Sir, by playing that role, these professionals will also fight corruption. People import sub-standard goods through the Port of Mombasa and our airports, for example, the Eldoret International Airport. They then bribe people at the Kenya Revenue Authority (KRA) and the goods find their way into our supermarkets. The professionals will assist us by identifying dangerous goods, so that the importers can be arrested and dealt with.

As I conclude, I again want to thank the Mover of this Bill, for a job well done. I would like to encourage her to take in whatever amendments will be proposed to improve the Bill. I hope that the Bill will be passed quickly by this House.

With those view remarks, I fully support the Bill.

The Assistant Minister for Health (Dr. Kibunguchy): Thank you, Mr. Temporary Deputy Speaker. I rise to give the position of the Ministry, which is that we are supporting this Bill.

Before I go into one or two areas that I wanted to touch on, it will also be prudent, appropriate and proper for me to also congratulate Dr. Ojiambo, for the efforts and the persistence she has put in, so that this Bill has seen the light of day and now it is in its Second Reading Stage. I know that she has received a lot of input from the Ministry of Health and many other professionals out there. I am sure that at the time we come to look at the issue of amendments, we will make what is now a good Bill, even better.

Mr. Temporary Deputy Speaker, Sir, we are what we eat. In this country, you will find that we have two extremes. On one side of the spectrum, you will find Kenyans who are dying slowly from eating junk food, while on the other side of it, we have people who are obese. Right now, obesity *per se* is being looked at as a disease. We know that obesity leads to other diseases such as Diabetes type II. It contributes significantly to hypertension, and is definitely linked to heart diseases that involve blood circulation.

On the other side of the spectrum, we have many Kenyans who are starving and must depend on food donations. We have Kenyans who day in, day out, are eating food that is deficient in the right type of vitamins, minerals and fibre. So, we are faced with those two extremes. I wish a way could be found to bridge the two ends. We know that nutrition plays a role in the management of HIV/AIDS and in the management of most chronic diseases. Nutrition is definitely important at the time of pregnancy and when mothers are breast-feeding. Therefore, as I look at the various clauses of this Bill, I would once again like to congratulate hon. Ojiambo, for the work she has done so far. I know that she will come with a raft of amendments. Therefore, I would like her to consider adjusting some parts of the Bill, as she looks into the amendments. As a Ministry, we might also come up with certain amendments.

One of the areas I would like looked at is this whole concept of the Board. We would like to avoid the pitfall that has now befallen the Laboratory Technicians and Technologists Board because we know very well that nutritionists will be trained at a very low level; at a certificate level. However, I am very sure, and I know that we have nutritionists and dieticians who have degrees. Some have masters degrees and so on. As we look at this Board and its composition, we must be aware of the kind of people it will have. All I am saying is that we must avoid the pitfall and the road that the Laboratory Technicians and Technologists Board has taken because it is giving us a lot of problems. At the time when the Act came into being, we did not envisage a time when we would have laboratory technicians training to have degrees, but now we have them. The Act is rather silent on those kinds of people. So, as we look at the composition of the Board, Dr. Ojiambo should be wary of what has happened to the Laboratory Technicians and Technologists Board.

Clause 5 defines the people who will be in that Board. Obviously, right at the beginning, it is written that the Permanent Secretary is the technical person from the Ministry of Health, and I am sure from other Ministries as well. I will propose, when the time comes that, rather than have

the Permanent Secretary, we have the Director of Medical Services sitting there, or his or her representative.

Right at the bottom of Clause 5(4), I will also propose that it would be good to have a substantive chairperson rather than allowing Board members to assemble and pick one of them as a chairperson. The chairpersons should have some qualifications attached to them so that being a new Board, the chair can direct and define the direction that the Board will take. It is extremely important that we have a substantive chair.

There are people who are mentioned here, and I do not know what value they will add to the Board. Maybe, we need to look at the people who will be coming from the Central Bureau of Statistics, the Kenya Association of Manufacturers and such areas. We need to think twice and know if they really merit to be in the Board or not. As a Ministry, we have seen that there are certain areas which seem to overlap one another. There is the area of the Board, which we are all in agreement and will pass. However, on the area of the institute, I think we might end up creating a lot of bureaucracy when we have on one end a Board and on the other, an institute. I really do not know the functions of the institute because when you look through the functions, they seem to overlap with those of the Board. So, it is the contention of the Ministry that one of them gives way to the other. We feel that the institute has to give way so that we have a Board, and probably a council which is leaner and which can more or less agitate for the welfare of its members. However, the Board will look at the substantive issues like training, discipline, and registration of the institutions which will be training its people so that we do not just have institutions springing up like it is happening in other fields, yet they do not meet the standards. I think that should be left to the Board and then the council takes up the issues of the welfare of its members. That is a bit like what happens in the Medical Practitioners and Dentists Board which takes care of training, registration and disciplining of doctors among other issues.

Mr. Temporary Deputy Speaker, Sir, we also have the Kenya Medical Association (KMA), which is like the trade union arm of doctors that agitates for their rights. That is the route we should take. This is my advice to the Mover of this Bill. In many other areas, the Ministry is in agreement with the Bill. The Ministry would like to encourage, congratulate and support what the hon. Member has done.

Mr. Temporary Deputy Speaker, Sir, as I conclude, we have to look at various aspects of the Bill. We are moving to an area where research becomes extremely important. When I talk about research, I am looking at what we call traditional foods. If you visit many towns, even here in Nairobi, you will find that quite a number of people are eating traditional foods, apart from the other health practices that they are following. These are the foods that our great grandfathers and grandfathers used to eat, which the white man came in this country and said they were not good and we all switched to modern foods. We are now eating fried foods which contain a lot of oil. At the moment, a number of our people are consuming traditional foods. We need to do a lot of research in this area, so that we are able to determine whether these foods truly have nutritional value or this is just a tradition we are trying to follow.

Mr. Temporary Deputy Speaker, Sir, our people need to get proper education at whatever level on issues of nutrition. We need to launch education programmes on television, radio and in the print media. These programmes should be used to inform our people on the right and the wrong foods. Therefore, the areas of research, education and standards are extremely crucial. These are the areas I would like to see the Board getting involved in.

Mr. Temporary Deputy Speaker, Sir, with those few remarks, I beg to support the Bill and urge the Mover to review some sections of this Bill when we get to the Committee Stage.

Dr. Shaaban: Thank you, Mr. Temporary Deputy Speaker, Sir. I also would like to add my voice to what has already been said. I wish to take this opportunity to congratulate Dr. Ojiambo for

a job well done. The Nutritionists and Dieticians Bill is long overdue.

Many diseases affecting the citizens of this country can be avoided if we eat the right foods. We think that the rich have access to a balanced diet. This is not true because all of us can access the right foods. In the rural areas, for example, we find many children suffering from malnutrition, but yet, there are a lot of nutritious foods that are readily available in the farms. People in the rural areas are not trained on what they should feed their children on to avoid such cases of malnutrition.

Mr. Temporary Deputy Speaker, Sir, we are all aware that in traditional societies, expectant mothers were only allowed to eat certain traditional foods. Medically, they are supposed to eat a balanced diet. Many of them would suffer from iron deficiency because of imbibing the wrong foods. That is why many of them would end up consuming soil, so that they can take care of such deficiencies. They should be advised on the importance of a balanced diet as this determines their health and that of their unborn babies. They can also avoid blood transfusion before and after birth by taking a balanced diet.

Mr. Temporary Deputy Speaker, Sir, some of the viral diseases such as Hepatitis can be contained if people avoid eating certain proteins. However, people must be given proper advice, so that they know which foods to eat or avoid. There are many diabetics in this country who have lost their lives because their spouses or families have not been trained on the management of this disease. Most of the dieticians advise that by eating the right diet, we can control the disease. I believe that many diseases can be controlled if patients consulted nutritionists on their food management.

Mr. Temporary Deputy Speaker, Sir, on the registration of the nutritionists and dieticians, I want to agree with Dr. Kibunguchy that we do not want to get into problems, like we are experiencing with some existing boards. It is important for this Bill to come out very clearly on the issue of people who have been trained as certificate, diploma or degree holders. If we peg training to at least a minimum of four years for a degree holder, this is rather unfair because in quite a number of countries people train for degrees for two to three years. This particular Board would leave out important people like those ones who have trained in other countries. Now we have the 8-4-4 system of Education where students get degrees after four years. Prior to it, we had the 7-4-2-3 system where students were getting degrees within three years. It is important for us not to talk about the number of years we take to train. But it is important for people to be registered right from the certificate to the degree level. However, the board needs to come up with ways of upgrading certificate holders to diploma holders and diploma holders to degree holders.

Mr. Temporary Deputy Speaker, Sir, with those few remarks, I beg to support.

The Assistant Minister for Labour and Human Resource Development (Ms. Mwau):

Mr. Temporary Deputy Speaker, Sir, thank you for giving me this opportunity to contribute to this very important Bill. I want to add my voice by congratulating Dr. Ojiambo for bringing this very important Bill.

Mr. Temporary Deputy Speaker, Sir, this Bill has come at an opportune time when the eating habits of Kenyans are not good. Kenyans are not eating healthy foods. Most wealthy Kenyans eat a lot of unhealthy foods such as *nyama choma*. In fact, many Kenyans spend most of their weekends eating a lot of unhealthy foods. We need to change our eating habits. We need to eat foods such as *sukuma wiki*, *ugali* and *githeri*. These are foods that will give our bodies the nutrients that we require. Kenyans need to be educated on the importance of eating nutritious foods.

Mr. Temporary Deputy Speaker, Sir, the proposed Board will have a major task of educating Kenyans on the need to eat healthy foods. I would like to suggest that a herbalist be included as a member of this institute. Many Kenyans are now going the herbal route. They are

consuming products from companies such as Tianshi, which sells purely Chinese herbal products. In Kenya, we have many herbal products which can treat various ailments. These herbal products can also provide our bodies with essential vitamins and nutrients.

Mr. Temporary Deputy Speaker, Sir, growing healthy food is important. We need to have organic farming as a way of helping farmers to grow food that is free from chemicals. A lot of diseases that Kenyans suffer from today have everything to do with what we eat; high blood pressure and diabetes. We know HIV/AIDS can be controlled by eating healthy. We know most of the diseases that children are born with come out from what their mothers eat. So, it is important to have mothers educated on what to eat when they are pregnant.

Mr. Temporary Deputy Speaker, Sir, we need to have, in the institute, education to do with alcoholism. This is because alcoholism is a disease that many Kenyans suffer from. Alcoholics actually do not eat, and when they do, it is after drinking a lot of alcohol. So, they suffer from liver problems. Therefore, it is important to have a person who has knowledge of alcoholism included either in the Board or in the institute.

Mr. Temporary Deputy Speaker, Sir, we need to address the issue of growing traditional foods, because we have gone out of our ways of eating. We need to encourage farmers to grow foods that were traditionally eaten and were very nutritious. We need to go back to the growing of finger millet, cassava, arrow roots and so on. We need to go back to educating Kenyans on eating vegetables that were traditional. The fast food culture of fish and chips or chips and chicken is catching up with Kenyans. It is important that as the institute picks up after we pass this Bill, Kenyans are educated so as to eat healthy.

Mr. Temporary Deputy Speaker, Sir, this Bill is long overdue. We need to pass it and have the institution in place so that we can save Kenyans. Most of the diseases Kenyans suffer from are caused by what we eat.

With those remarks, I beg to support.

Mr. Wamunyinyi: Thank you very much, Mr. Temporary Deputy Speaker, Sir, for giving me the opportunity to contribute to this very important Bill. First of all, I want to join my colleagues in congratulating the hon. Dr. Ojiambo for the work she has done to bring together this very important Bill for enactment.

Mr. Temporary Deputy Speaker, Sir, where I come from, the food that was recommended and people were encouraged to eat was *ugali* made from millet. Children were fed on porridge also from millet. When some little milk is added in the porridge, it is very nutritious and usually, it is very thick and children cannot cry when they are fed with it. The *ugali* made from millet was mixed with dried cassava, which is also ground and it is added to the millet. Usually, the *ugali* that is made from this flour looks black. When it was eaten, there was no meat. Many times, there was either *tsisaka* or *omurere*. The *omurere* is boiled with some milk and no cooking fat. If meat was involved, it had to be dried until it also changed colour and looked like the black *ugali*.

The old men who used to eat this kind of food lived for many years and they were so healthy. They were never sickly. They were never diabetic. There were no such health problems that we experience today. In fact, some of our grandfathers and great grandfathers lived for many years which many of us will not manage. The reason is simple; how they fed, how they lived. The food was also cheap because we just got the millet and cassava from our farms. In fact, there were no posho mills then; they used to grind with stone. So, everything was done traditionally. If our people are encouraged by way of providing regulation and education, and practising what our forefathers did, our lives will improve.

Mr. Temporary Deputy Speaker, Sir, the Bill will put in place statutory regulations and legal framework within which nutritionists and dieticians will operate. It also covers the training and practice. It also provides for any errors, particularly in terms of ethics. The provisions for

corrective measures, be they punitive or retraining, are there depending on the nature of such errors. The number of people suffering from diabetes in Kenya is on the increase to the extent that for every 100 people, about 30 to 40 people are diabetic. This is a very dangerous trend. One of the major causes of this disease is bad lifestyle. It all depends on how we feed; for instance, we eat a lot of *nyama choma*, drink *Tusker* and use a lot of sugar in our tea. Eating food without thinking about the correct diet is something dangerous. The idea of eating *ugali* and *nyama choma* everyday and then drinking *Tusker* somewhere along your way home, say, Kangemi, is quite unhealthy. We must always remember that it is important to eat food on the basis of having a balanced diet.

The only people who can advise us and enable the community to understand what needs to be done, especially with regard to the kind of food that we need to eat so that we can bring our sugar levels to normal, are dieticians. It is for that reason that this Bill is very important. All of us in this House need to support it so that it is operationalised as soon as possible to ensure that our people benefit.

*[The Temporary Deputy Speaker
(Mr. Waithaka) left the Chair]*

[Mr. Deputy Speaker resumed the Chair]

You are aware that there is a lot that we need to do in terms of providing health services to our people. Nutritionists and dieticians should not only be available at the national level or at the headquarters. We need a system that will ensure that majority of Kenyans access the services of these professionals so that they can also benefit. The people in Mwingi, for instance, should be able to understand better what they should eat. They should not only eat *muthokoi*. They should be able to balance it with the black *ugali* prepared from millet flour. All Kenyans must benefit from a balanced diet. I believe that all hon. Members will support this Bill. Indeed, we should pass it and have it operational for our people to get a fair deal.

Mr. Deputy Speaker, Sir, earlier on, I mentioned what our forefathers used to eat. They drank *uji* prepared from millet flour. They did not just enjoy their meals in the form of *ugali* or *uji* prepared from millet flour. They also enjoyed consuming millet in the form of a brew. If you took our beer in Bungoma, which is made from millet alone, you will really enjoy it. The brew is very nutritious and, in fact, it is food. So, you get satisfied after drinking the brew. You will also be assured of doing a good job because when you go home to visit *mama*, things will be very well after having taken a little bit of the *busaa*.

Mr. Deputy Speaker: Have you ever tried it yourself?

Mr. Wamunyinyi: Mr. Deputy Speaker, Sir, do you know how it is made? It is made from pure millet. Nothing extra is added to it, not even sugar. It is so enjoyable when you take it. It is sweet, satisfying and, in fact, improves your wellbeing. So, when our people take *busaa*, it is good for their health. They should not be arrested by policemen. I am happy that hon. Michuki is here and I hope that he is getting my points. The *busaa* that we drink is also healthy because of the manner in which it is prepared. Police officers should not, therefore, arrest people for drinking it.

Mr. Deputy Speaker, Sir, I wish to conclude by saying that we should pass this Bill and have it operational so that the people of Kenya, including the people of Kangema, benefit from the education we will get after eating a balanced diet.

Prof. Mango: Thank you, Mr. Deputy Speaker, Sir, for giving me this opportunity to contribute to this Bill.

What keeps people alive is nutrition. Without proper nutrition, the nation cannot survive. Nutrition plays a very important role from conception to death. Therefore, as a nation, we need to

have proper nutrition if we are to survive. I would like to take this opportunity to congratulate the Mover for this very important Bill. Kenyans will now start taking stock of what they eat.

It is a very well known scientific fact that when children are well-fed, they grow up to be healthy and intelligent. Their brains have to develop. So, nutrition is very important in all aspects of our lives.

In this country, people go to the market to buy whatever they would want to eat. However, most times we do not even know what we are eating. When you go to the market you will find very leafy green kales or spinach. However, these have been grown in the sewerage areas of Mathare or elsewhere. Such leafy green vegetables grown around sewerage areas pick up a lot of heavy metals like lead and others which are detrimental to our health. We, therefore, need to have some standards about what goes to our markets and what we consume. If we continue feeding on what we are feeding on currently, it will prove to be injurious to the population. That, surely, needs to be regulated.

In most of our rural areas there is plenty of food, but it is the combination that matters. You may find a child suffering from nutrition problems, and yet the mother keeps a lot of chicken. The mother, however, does not feed the children on either the chicken or eggs. This could be because of taboos which are meant to bar children from eating eggs. Also, it could be because the mother does not simply know what is good for her children.

Therefore, the institute will go a long way in sensitizing mothers on what they should give their children and the entire family.

Mr. Deputy Speaker, Sir, we need to know how to make concentrates from what we grow. We need to make concentrates for young children and the aged people who have no teeth and cannot eat regular foods. At the end of the day, they suffer a lot from malnutrition because of not getting a proper diet. If we can manufacture concentrates in form of fluids, they would go a long way in helping young children and the old people. Old people waste away because they cannot chew foodstuffs like *githeri* or hard meat. In the end they die of malnutrition. We should, therefore, consider manufacturing concentrates which will give these people good health instead of letting them waste away.

One of the hon. Members mentioned something about drought-resistant crops. We have neglected these crops and that is why famine is everywhere. In most areas of this country, people have turned to growing maize which requires more rainfall than crops like finger millet, sorghum and cassava. If we concentrate on producing drought-resistant crops, we may not have too much famine as is the case presently.

Mr. Deputy Speaker, Sir, our ancestors did not have transport facilities to move food from one area to the other and yet they survived. They survived on traditional crops which we have now neglected and which are healthy. Most of our traditional foodstuffs are also medicinal; like most of our vegetables. They have medicinal values in them and are able to contain malaria and many of the other diseases that plague us now. However, since we have neglected them, we have become susceptible to a lot of diseases.

Mr. Deputy Speaker, Sir, in Kenya, we need to regulate the foodstuffs sold by the roadside, for example, *mandazi*, roast maize and so on. A study carried out a while ago showed that roast maize carries a lot of lead which is caused by pollution from vehicles. As the vehicles pass by the roadside emitting carbon dioxide from their exhaust pipes, it lands on such foodstuffs like *mandazi* and roast maize. People then eat that roast maize without washing it and so they take in a lot of lead and other heavy minerals into their body systems, hence all these diseases we are getting today like cancer of the oesophagus and many others which are linked to what we eat. Therefore, I hope that the Institute will do a lot of research on what is going on and what is causing us a lot of diseases. It is what we are eating that carries all manner of pollutants into our body systems.

Mr. Deputy Speaker, Sir, there is the question of aflatoxin. Aflatoxin has been found in cassava, maize and many of our cereals are affected. The research findings coming out have tended to show that in areas where there is a lot of aflatoxin, many people who are infected by the HIV/AIDS virus succumb and, therefore, there is a close link between aflatoxin and HIV/AIDS. This needs research. It boils down to nutrition again. What we eat and what we have when combined together can do us a lot of harm. Therefore, this institute will go a long way in sensitising the communities on what is good and suitable for our nutrition.

Mr. Deputy Speaker, Sir, recently, we have seen all manner of goods being sold in the markets as food additives. It is not necessary to take those additives if you are eating a balanced diet. However, currently, many Kenyans are not eating balanced diets. We have fallen victims to fish and chips which does us more harm than good. The children become obese. They are not getting a balanced diet and this is due to the fact that we are also ignorant about what the proper diet is all about. We need to reverse this trend if we are to remain a healthy nation.

As one of my colleagues has said, if we continue like this, that is how diabetes and all these other diseases are rising among us. Therefore, we need to have our population sensitised about proper diet to avoid and reduce all these diseases that are occurring which were never there among our people. This has reduced the lifespan of Kenyans to the point that in many areas you can hardly find a wise old man to give advice because we no longer live that long. We die a lot sooner.

So, this Bill has come at the right time so that we can do something to arrest the unhealthy situation we are in. Of course, that also goes for illicit drinks like *kumi kumi* and so on. As long as they are not part of food, they have an impact on the Kenyans' lifestyle. In the old days, in many areas, people drank traditional brews which were more healthy than what we are seeing today. The *chang'aa* and *kumi kumi* combined with poor nutrition causes more harm to the society than otherwise. Therefore, this needs to be addressed. We need to put more money into research on nutrition and foodstuffs.

Above all, we need to have food and drug regulation so that we do not just swallow anything. This is because a lot of things come to our markets. There are now a lot of biological substances that have come into the market as food additives. Many people take them without the doctor's advice. They go to the shelves and buy them. They eat the so-called "multi-vitamins" so as to improve their health while they are not good for them.

Similarly, what we buy from the shops like white bread needs to be enriched. A lot of us love eating white bread but it does not add value to our health at all. So, a lot of these issues can only be regulated when we have the institute as proposed in this Bill.

Mr. Deputy Speaker, Sir, we need a healthy nation which can only come up when we are eating healthy foods. If we eat wrong type of foods, we are going to remain unhealthy and that is to the detriment of the nation. Sick people cannot think and create ideas. It is only healthy people who can sit, think and create knowledge and new ideas. Therefore, this Bill is very appropriate to help this country to start re-organising ourselves.

With those few remarks, I beg to support.

Mr. Sambu: On a point of order, Mr. Deputy Speaker, Sir. Since hon. Members are now repeating over and over what has been said, particularly about food, would I be in order to move that the Mover be now called upon to reply?

*(Question, that the Mover be
now called upon to reply,
put and agreed to)*

Dr. Ojiambo: Mr. Deputy Speaker, Sir, I want to thank hon. Members for their great

support for this Bill. The ideas that have been brought into this Bill this afternoon are very enriching indeed. We are going to use them substantially to improve the final product.

Mr. Deputy Speaker, Sir, I was very happy with the contribution of the Minister and the support the Ministry has given us on this Bill. Indeed, like the Minister has said, we have worked with the Ministry of Health very closely. We have also worked with the Ministry of Agriculture, Office of the President and the Ministry of Planning and National Development closely on this Bill. Therefore, I want to thank the Government Ministries and departments for the great support that they have given us.

We have also worked very closely with hospitals and health workers in this area. District nutritionists have also brought in their input. We have worked with the Chief Nutritionist and her line up in the hospitals and field services.

Mr. Deputy Speaker, Sir, I want to thank the contributors because they have added to our own deliberations and enriched them substantially. I was happy to note that the Minister supports that we strengthen the Board and indeed it is very appropriate that we do so in view of what contributions we have received this afternoon suggesting that we must enhance the level of the standards.

Mr. Deputy Speaker, Sir, as suggested by Mr. Muchiri, we have to look at the proposed board, council and institute, to avoid overlapping. It is, indeed, appropriate that we look at the council as the body that services the institute. Below that, we shall have the committees that will do the registration in the manner that has been suggested by this House. We shall then have the examination and disciplinary committees under the council. That way, we will have a body that is sufficiently empowered to regulate the activities of this profession, and which will satisfy the professionals, whom we seem very closely endeared to, from hon. Members' contributions to this debate this afternoon.

I want to thank hon. Members for the suggestions they have made about training and research, and that we should incorporate in this Bill, the value that research institutions in this country dream about, and the value that the universities that we have bring to this whole profession. I want to assure hon. Members that we are very considerate of even the transitional stage: How we will incorporate our field workers, who over the years, have contributed to the area of food and nutrition in this country, even without recognition. Some of those workers have not even been endowed with great education and degrees as we are now able to offer. We want to find a way of bringing their contribution into this Bill and ensuring that all the other institutions below the university level are netted, so that the contribution that they bring to this profession is harnessed.

Mr. Deputy Speaker, Sir, I was very impressed by the support that traditional crops and foods have been given by the contributors to the Bill this afternoon. This is an area in which the country has lagged behind in appreciating. We want to use this opportunity to ensure that the nutritional value that we have in this country is harnessed. We still have a lot of indigenous crops, food preparation and feeding methods that are very useful, and which can add up very good nutrition for our nation.

Our communities are made up of people of different ages and requirements. Mention has been made of pregnant and lactating mothers of teenagers. We have also a great part of our population who work. Indeed, with our President's emphasis on creation of a working nation, we need to ensure that our workers are properly fed on nutritious food. We should also ensure that vulnerable groups like expectant and lactating mothers, as well as teenage boys and girls, are given adequate nutrition to enable them develop physically and mentally.

Mr. Deputy Speaker, Sir, for that reason, we will ensure that adequate mechanisms are embodied in this Bill to provide for the necessary research, survey and compilation of data to give

this nation reference points and reference material, which they can utilise to benefit the families, the institutions, the sick and others who are in conditions that need nutritional support. We will ensure that at our universities, we employ teaching techniques that will bring together the medics and the nutritionists, so that we can benefit from each other's scientific experiences in terms of disease prevention and cure.

I am happy that although most of the hon. Members who contributed to this Bill are not nutritionists or medical experts, they understand this area very well. Their contributions have shown their understanding and appreciation of this subject and accepted the fact that, as Parliament and Government, we have been slow in providing a legal framework to ensure that practitioners in this area are able to express themselves adequately and, therefore, benefit us.

Mr. Deputy Speaker, Sir, what is remaining now is for us to put together, into amendments, the views that have been expressed here by hon. Members, before enacting this Bill into law. I want to call upon the hon. Members who have contributed to this debate to provide us with suggestions as to what specific amendments they want incorporated, where matters may not be strongly provided for in this Bill. As I said, we intend to harmonise all the views that have been brought up, so that we can have a legal framework that will handle the very critical issues of our very survival; nutrition.

Nutrition scientists talk about optimal standards. The optimal nutrition standards, literally, means optimal health in that there is a threshold at which the human body must reach to be able to ward off diseases, accumulate in its cells enough energy for work and keep itself in a good mental framework. This is the area that, we, as nutritionists, want to look into. We want to encourage our universities to contribute to this profession by training clinical nutritionists as well as public health nutritionists for both curative and preventive services, besides the researchers who work in the laboratories for long hours every day, to ensure that commodities that are not good enough are picked up and researched upon, to enable us understand what it was that was not good in the market.

Mr. Deputy Speaker, Sir, I want to make reference to Prof. Mango's mention of aflatoxin. In this country, aflatoxin has taken many lives. It is an incident that comes periodically. Every year, we come across aflatoxin. We have only been able to recognise aflatoxin, as a nation, because it comes and we see many people dying at a go. As we have said, there are certain areas in the food itself, and the crops that we grow, which contain chemicals that hinder absorption of the food. As legislators, this is something we cannot talk about because we do not know how it works. However, we now have the nutritionists and dieticians, who will analyse these foodstuffs and tell us: "Do not feed patients with this foodstuff. Do not mix this particular foodstuff with this foodstuff, because this mix is not good, not only for palatability but also for absorption." The rest will go back to the drafters to make sure that it is in the interest of this House to bring to this country a legislation that works.

Just before I finish, Mr. Deputy Speaker, Sir, there was an emphasis on the representation of the professionals on the Board. There was also an issue that was raised about the composition of the Board and the Assistant Minister for Health talked about the inadequacy of the current legislation for laboratory technicians. I am very glad that this issue came up, because we had talked about it in one of our sittings when we were drafting this Bill. We were not able to understand how some of these institutions are working. It was good to know that the Assistant Minister also has the same sentiments about this issue. It will strengthen our decision on how we move. I want to thank him for that.

With these few remarks and with gratitude to the House, I beg to move.

(Question put and agreed to)

*(The Bill was read a Second Time
and committed to a Committee
of the whole House tomorrow)*

Second Reading

THE SUPPLIES
PRACTITIONERS MANAGEMENT BILL

Mr. Deputy Speaker: Hon. Members, I had already deferred the Supplies Practitioners Management Bill.

(Bill deferred)

MOTIONS

ADOPTION OF 1998/99 PAC REPORT

THAT, this House adopts the Report of the Public Accounts Committee on the Government of Kenya Accounts for the year 1998/1999 laid on the Table of the House on Thursday, 26th October, 2006.

Mr. Deputy Speaker: Is the Chairman of the Public Accounts Committee (PAC) here? If he is not here, let us proceed to the next Order!

(Motion deferred)

ADOPTION OF 1999/2000 PAC REPORT

THAT, this House adopts the Report of the Public Accounts Committee on the Government of Kenya Accounts for the year 1999/2000 laid on the Table of the House on Thursday, 26th October, 2006.

Mr. Deputy Speaker: Once again, the Chairman of the PAC is not here? If he is not here, let us proceed to the next Order!

(Motion deferred)

ADOPTION OF REPORT AND RESOLUTIONS
OF THE 114TH IPU ASSEMBLY

THAT, this House adopts the Report of the 114th Inter-Parliamentary Union (IPU) Assembly held in Nairobi from 7th to 12th May, 2006, and laid on the Table of the House on Thursday, 27th July, 2006.

Mr. Deputy Speaker: I do not think the Leader of the Kenyan Delegation is here, because I was the leader and I am in the Chair.

(Motion deferred)

ADJOURNMENT

Mr. Deputy Speaker: Hon. Members, we still have 15 minutes, but having finished the business of today, it is now time to adjourn.

The House is, therefore, adjourned until Tuesday, 28th November, 2006, at 2.30 p.m.

The House rose at 6.15 p.m.