

NATIONAL ASSEMBLY

OFFICIAL REPORT

Wednesday, 24th June 2015

The House met at 9.30 a.m.

*[The Deputy Speaker
(Hon. (Dr.) Laboso) in the Chair]*

PRAYERS

QUORUM

Hon. Deputy Speaker: Let the Quorum Bell be rung, please.

(The Quorum Bell was rung)

Hon. Members, we are now properly constituted. We can start our business. We have some Members who have notices of Motion.

NOTICES OF MOTIONS

ESTABLISHMENT OF SELECT COMMITTEE TO PROBE YOUTH RADICALIZATION

Hon. Kanini Kega: Hon. Deputy Speaker, I beg to give notice of the following Motion:-

THAT, aware that national security, peace and stability are integral for national development; worried that the stability of Kenya continues to be susceptible to sporadic terror attacks by military groups; further concerned that the escalating incidents of terrorism and violence could attribute to radicalization of young people; alarmed that the number of young persons from across the country being lured or coerced into joining radical terrorist organizations continues to increase; concerned that despite the history of extremism and radicalization in the country little empirical inquiry has been conducted to determine the forces behind youth vulnerability to religious and other forms of radicalization; cognizant of the fact that spontaneous and reactionary Government responses in combating extremism and radicalization has borne little fruit; appreciating the role that comprehensive understanding of factors behind radicalization and extremism can play in overcoming this vice, this House resolves to establish a Select Committee to inquire into and report within ninety (90) days on the circumstances and forces behind vulnerability of young persons

to radicalization, and approves the following Members to constitute the Committee:-

1. Hon. Kanini Kega, MP;
2. Hon. Yusuf Hassan, MP;
3. Hon. Mishi Juma, MP;
4. Hon. Francis Chachu Ganya, MP;
5. Hon. Kimani Ngunjiri, MP;
6. Hon. David Ochieng, MP;
7. Hon. Florence Kajuju, MP;
8. Hon. Elias Bare Shill, MP;
9. Hon. (Eng.) Mohammed Mahamud, MP;
10. Hon. Richard Nyagaka Tongi, MP;
11. Hon. Christopher Nakuleu Doye, MP;
12. Hon. David Pkosing, MP;
13. Hon. David Kangogo, MP;
14. Hon. Sara Korere, MP; and,
15. Hon. Jessica Mbalu, MP.

Hon. Deputy Speaker: Okay; thank you.
Hon. Rachael Shebesh.

TRANSFER OF LEVELS 4/5 HEALTH FACILITIES TO NATIONAL GOVERNMENT

Hon. (Ms.) Shebesh: Hon. Deputy Speaker, I would like to ask for your indulgence. I want to withdraw this Notice of Motion. Looking at the Motion and when I brought it---

Hon. Deputy Speaker: Can you first give the notice then we can listen to your reasons for withdrawing.

Hon. (Ms.) Shebesh: Hon. Deputy Speaker, I beg to give notice of the following Motion:-

THAT, aware that Article 43(1)(a) of the Constitution provides that every person has the right to the highest attainable standards of health, which includes the right to healthcare services; cognizant of the fact that health services and facilities, other than the national referral hospitals, are devolved to county governments; noting that devolution of health services was hastily done to fulfil the requirements of the Fourth Schedule of the Constitution before sufficiently building capacities of counties; concerned that most devolved public health facilities are currently facing serious crisis; deeply concerned that majority of patients across the country continue to lose their lives due to lack of efficient healthcare delivery at county level; appreciating that Article 187 of the Constitution envisages that by way of agreement, services can be transferred from one level to another for effective performance, this House urges the national and county governments to urgently commence negotiations with a view to transferring Levels 4 and 5 health facilities to national Government, and also develop a plan for progressive devolution of health services to county governments.

When I brought this Notice of Motion, it was at the height of the crisis when it seemed that county governments were not ready for the devolution of health services. But as I speak, I believe that this issue has been streamlined and many of the health facilities in county governments are now operating.

So, I would like to withdraw this Notice of Motion.

(Notice of Motion withdrawn)

Hon. Deputy Speaker: I have seen the Chairperson of the Committee on Health. Do you want to say something on this?

Hon. (Ms.) R.K. Nyamai: Thank you very much, Hon. Deputy Speaker, for giving me an opportunity to make a comment on this. I would like to appreciate the initiative by Hon. Shebesh that she had taken to introduce this Motion, and have this matter discussed in the House.

Hon. Deputy Speaker: I hope your comment is based on her withdrawal.

Hon. (Ms.) R.K. Nyamai: It is based on her withdrawal, Hon. Deputy Speaker.

Hon. Deputy Speaker: Do you think it is in order for her to withdraw it, or you think that this Motion can still be discussed in this House? That is what I want to know from you.

Hon. (Ms.) R.K. Nyamai: Hon. Deputy Speaker, I want to make a comment that it would be prudent for this matter to be discussed in this House, but not with a view to reversing the transfer of the facilities to county governments. We all agree that health has been devolved, but the fact is that things are very bad on the ground. This is a matter that should have been discussed in this House. I would encourage her not to withdraw it, but since she has made that decision, I would like to say, as a Chair - I can see some of my Members here - it is a matter of concern. Our health institutions are deteriorating. In this House, we had a problem where the funding for Level 5 hospitals was not properly done. These are matters that need to be discussed.

I thank you, Hon. Deputy Speaker, for giving me the opportunity.

*(Hon. Wakhungu and Hon. Serut
stood up in their places)*

Hon. Deputy Speaker: Okay, I see points of order by Hon. Chris Wamalwa and Hon. Serut

Hon. Wakhungu: On a point of order, Hon. Deputy Speaker. I had raised this issue concerning Hon. Kanini Kega's *ad hoc* committee. I know Standing Order No.1 allows you to exercise discretion. We know again that this House is guided by traditions. Sometime back Hon. Wanga brought a similar Motion to set up an *ad hoc* committee and it was declined. It was declined because *ad hoc* committees come in only if a matter is cross-cutting and does not have a substantive committee to handle.

Hon. Kanini Kega has proposed an *ad hoc* committee to look at the issue of radicalization and insecurity, we have a substantive committee on administration and national security, which should handle that matter. Is it in order to allow the *ad hoc* committee that Hon. Kanini Kega has just brought on board, when we do not see the justification for it? From traditions, such has been rejected. Is it in order? I just wanted your direction on this because we have a substantive committee to look at the issues of radicalization, *Al Shabaab* and insecurity.

Hon. Deputy Speaker: Okay. Thank you Hon. Wamalwa. Let me hear what Hon. Serut has to say.

Hon. Serut: Thank you, Hon. Deputy Speaker. Let me first thank my colleague, Dr. Chris Wamalwa. I am rising to raise the same issue. The issue of *ad hoc* committees in the Tenth and Eleventh Parliaments was for purposes of issues that cut across; this particular one has a substantive committee on security in this House. There is no need, in my opinion, to come up with another committee, because it will undermine the other departmental committee's investigations, unless we are saying that, that particular committee has failed to perform its duties. If there is such evidence, let it be produced in this House before we allow Hon. Kanini's Motion.

*(Hon. Kathuri and Hon. Macharia
stood up in their places)*

Hon. Deputy Speaker: Still on the same matter? I see Hon. Kathuri and Jacob Macharia. Are your points of order on the same? We do not want to repeat. If we are going to say the same things, remember he has just given a notice. We are not at the point of debating. He has just given us a notice that he wants to discuss that Motion. All these things you are saying now could be said during the time it will be on the Order Paper.

It is not yet properly before the House, hon. Members. Remember it is this House that will decide whether this *ad hoc* committee is formed or not. So, do not jump the gun. You will have your time to debate it because it has been presented as a notice. Let us leave the matter there until you find it on the Order Paper.

Hon. (Eng.) Gumbo: Thank you, Hon. Deputy Speaker. I just listened to my sister and good friend, Hon. Shebesh, withdrawing her Motion on healthcare in the counties. I wish to plead with her. Just as the Chair of the Committee has said, health services in the counties are pathetic. Where I come from, what is called the County Referral Hospital is where rats are eating dead bodies. I do not know where my good friend, Hon. Shebesh, got the information that healthcare in the counties has improved - it is getting worse. Honestly, this House needs to be seized of this matter, because we have hospitals in the counties where even basic medication is not there. I plead with her to reintroduce it. I do not know the mechanism for re-introducing a Motion that has been withdrawn, but I plead with her to re-introduce that Motion because things are very bad. We are getting problems that ought to be addressed by the county governments, but for some reason it seems that they do not have the capacity. Their priorities are lopsided and are not working at all. It is just getting worse. You should guide us, but I plead with her to re-introduce her Motion, so that this House is seized of this matter. I am sure most of these Members go through these same problems day in, day out.

I thank you.

Hon. Sang: Thank you, Hon. Deputy Speaker. Mine is also to support my Chairman, Hon. Gumbo, in pleading with my sister, Hon. Shebesh, not to withdraw her particular Motion. What we are seeing back there at home are the many challenges that we have in the Ministry of Health. People are really suffering. I want to plead with Hon. Shebesh not to withdraw it, so that we can discuss it with a view to improving Level 4 and Level 5 hospitals.

Thank you.

Hon. Deputy Speaker: Hon. Members, we need to dispose of this matter because the Member has already withdrawn it. Standing Order No. 51 clearly states:-

“A notice of Motion may be withdrawn by the Member who gave the notice, but notice of the same Motion may be given again either by the same or by any other Member”

Therefore, Hon. Shebesh, you cannot give the notice now because you have already withdrawn it. So, you can use that Standing Order to make a decision based on what you have seen concerning the interest of the Members in the House. Would you want to make a comment? I believe I have guided you sufficiently.

Hon. (Ms.) Shebesh: Yes. Hon. Deputy Speaker, I want to thank my colleagues. I respect them and have heard them. They are the people who are on the ground in their constituencies. They probably have seen what I have not seen. So, I will use your ruling to reinstate the Motion at the earliest convenience.

Thank you.

(Applause)

Hon. Deputy Speaker: Hon. Rose Nyamunga! Hon. Dan Kazungu! They are not present. Next Order!

MOTION

DECENTRALIZATION OF MARRIAGE SERVICES

THAT, aware that the Marriage Act, 2014 was assented to by H.E the President on 29th April 2014 and commenced on the 20th of May, 2014; noting that the act was by and large an amalgamation of the previous Acts, thus amendments relating to the regulations were minimal in effect; deeply concerned that there are only twelve offices of the Registrar of Marriages in the whole country, making it difficult for hopefuls to issue notice of marriages; mindful of the fact that the upward revision of the marriage certificate acquisition fee is not affordable to many Kenyans, thus inhibiting them from registering marriages as envisaged by the new Act, this House urges the Government to review the procedure and the cost of marriage registration, and to decentralize the offices of the Registrar of Marriages to a minimum of all sub-counties so as to reduce bureaucracy and enhance accessibility.

(Hon. Injendi on 10.6.2015)

(Resumption of Debate interrupted on 17.6.2015)

Hon. Deputy Speaker: Hon. Members, this Motion had been debated. What was left was the Question to be put.

(Question put and agreed to)

BILL

Second Reading

THE NATIONAL YOUTH EMPLOYMENT AUTHORITY BILL

(Hon. Sakaja on 17.6.2015- Morning Sitting)

*(Resumption of Debate interrupted
on 17.6.2015 - Morning Sitting)*

Hon. Deputy Speaker: Was there somebody on the Floor? On the list is Hon. Opiyo Wandayi.

Hon. Wandayi: I thank you very much, Hon. Deputy Speaker, for this wonderful opportunity. From the outset, I must say I am very grateful to my friend, Hon. Sakaja, for coming up with this very important Motion which I intended to support our people.

Hon. Deputy Speaker: It is a Bill. Please, note the difference.

Hon. Wandayi: Thank you, Hon. Deputy Speaker, for the correction.

This is a very important Bill. Indeed, it could not have come at a better time. The youth in this country are suffering a lot because they have been forsaken for too long by Government. It is good now that the Bill is proposing to put in place a framework that will address the issue of youth employment. This suffering will be a thing for the past.

It is an obvious fact that the youth form a very significant proportion of the country's population. It is true that the youth are a majority in this country. Any policy that discriminates against a segment of population as significant as the youth can only take us back in terms of development.

No country can aspire to develop if its youth are not involved in all aspects of development of a country. One way the youth can get involved in development is through gainful employment. Therefore, this Bill is going to address an issue that has been of concern to many of us in this country for a long time. In a growing economy such as ours, there is bound to be intense competition for opportunities. Many a time, this competition ends up favouring those who have the capacity to compete. These are, invariably, people who have had the means to acquire resources. For sure, they are not the youth. So, in a sense, we are caught in some vicious cycle that this Bill, I believe, will unlock. That vicious cycle of hopelessness in which the youth have found themselves will be, I believe, broken by this Bill if we pass it.

We have seen attempts made by successive Governments to address the issue of youth unemployment. Many of them have come to nothing, firstly, because of lack of political goodwill, and secondly because of, perhaps, sabotage from within. One clear case I have in mind is the current craze in National Youth Service (NYS), where instead of addressing the issue of youth empowerment in a manner that is structured and sustainable, money is lumped in a department which is only talking about 31,000 youth and is operated in the most opaque manner. What do I mean by saying this?

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Hon. Deputy Speaker, we have funds such as the Youth Enterprise Development Fund (YEDF), Uwezo Fund and Women Enterprise Development Fund (WEDF) because women are sometimes youth. If you want to see how the Government does not take the issue of the youth seriously, in the financial year that we are just about to begin, those three major funds that would go a long way in addressing the issue of youth unemployment have been allocated not more than Kshs1.5billion, yet the National Youth Service (NYS) has been allocated a whopping Kshs25billion. That money is one tenth of the total money allocated to the 47 counties in the coming financial year. Do you see what I am talking about? It is due to lack of priorities that the youth issue is being treated basically as a campaign gimmick. When people go for elections, they say: "We shall do this and that for the youth," but they do not mean it. I say this because two-and-a-half years down the road after elections, what can we say the Government has done for the youth?

(Loud consultations)

I can see someone heckling across the aisle. I am very relevant because I am talking about the issue of employment. This Bill is about creating an authority to address the issue of youth employment.

Hon. Deputy Speaker, if you protect me from the hecklers, I will be very appreciative.

Hon. Deputy Speaker: Order, Members!

Hon. Wandayi: Hon. Deputy Speaker, what do I want to say? The NYS as an institution-

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Hon. Deputy Speaker: There is a Member, Hon. M'eruaki, who is on a point of order.

Hon. M'uthari: On a point of order, Hon. Deputy Speaker. Is it in order for the Member of Parliament to tell other Members that they are heckling while he is also making unsubstantiated claims? He is one of those people who are inciting the people to destroy the infrastructure that has been built like what has happened in Kibera. He is one of the inciters.

(Applause)

Hon. Wandayi: Hon. Deputy Speaker, that cannot go unchallenged. That is most unfortunate because---

Hon. Deputy Speaker: Order, Members! Hon. Wandayi, you are the one who has started it by calling other Members hecklers.

Hon. Wandayi: Two wrongs cannot make a right.

Hon. Deputy Speaker: Hon. Members, please refrain from these comments that are going to cause temperatures to rise for no apparent reason. Stick to your contribution, Hon. Wandayi. Speak to your points and let us provoke Members.

Hon. Wandayi: Hon. Deputy Speaker, I will excuse him for now because of obvious lack of---

Hon. Deputy Speaker: Do not start again. Continue with your contribution.

Hon. Wandayi: I will leave it at that but the point is taken.

I must thank Hon. Sakaja for this Bill. He is one of the forward looking members of that coalition. He is genuine enough in addressing issues of the youth. I wish the entire Government

was concerned with the issue of the youth like Hon. Sakaja is; this Bill is going to make it possible to create a structure that the youth are going to use to access employment opportunities. I say this because in the current set up, we find a situation where when jobs are available, we end up filling positions with people who have retired or are supposed to retire. We find a situation where people are continuously recycled for political expedience at the expense of the youth of this country. No country can develop if the youth are excluded from the mainstream economy.

I want to also urge the Government that even as we await the implementation of this Bill, once assented to by the President - I hope he will do so - the Government uses the current environment to address the issue of unemployment more proactively, because it is a time bomb; if left unaddressed, it is going to explode before our own eyes.

I wish to conclude by saying that a lot of employment opportunities are found in the informal sectors. Yesterday, you saw what happened in Gikomba market. It is one of the informal sectors that employs a big proportion of the youth not only in this city but also from elsewhere. Year in, year out, fire guts down properties and premises of these helpless Kenyans. I hope the national Government, including the County Government of Nairobi, are going to take measures to address the issue of preparedness in terms of disaster management.

With those few remarks, I wish to support.

Hon. Deputy Speaker: Hon. Kathuri Murungi.

Hon. Murungi: Thank you, Hon. Deputy Speaker, for giving me this chance to contribute. From the outset, I want to appreciate the efforts made by Hon. Sakaja by introducing this Bill to this House. I do not want to overemphasise that one of the problems that we are undergoing, as a country, is youth unemployment. That is the reason why Hon. Kanini Kega has brought the Bill touching on radicalisation of the youth. We have very learned youth but then there are no opportunities for employment. So, this authority will sort out all these problems that are happening. We have come up with a database in my constituency and the authority is going to come up with a database, which will be used to know exactly where the people who are seeking employment are. So, this authority, once established, will identify all the youths who have not been able to get placement for jobs.

The Jubilee Government has made a lot of effort, especially to offer direct employment to the youth through the NYS. If you compare what has been achieved through YEDF for the last 12 years, you cannot take to the bank any assistance that has come, because what is happening with YEDF--- My colleague was insinuating that the money under NYS could be taken to YEDF in order to benefit; you must have collateral if you want to take a loan as an individual. Examples are title deeds and logbooks.

However, when the Government is doing direct placement of the youth through the NYS, as it has been happening and is going on, we are able to know that this Government is doing a lot of work. It is completely out of character for people to insinuate that the programme under NYS is a political gimmick. I do not know when Kenyans will start appreciating anything that is initiated by the Government. Tomorrow, I am lucky because I will preside over recruitment of 1,000 youths in my constituency. These people are very happy because they will get direct jobs, and will not go for loans which they do not know even how to use.

We have the Uwezo Fund and most of the youths have not been able to take this money up to now. We are still talking to them to take the loans but they do not know exactly what to do with these loans. So, if there is direct employment like what is happening through the NYS, this

is the way we should go. Because we are the people who are giving budgets to the ministries, let us have Kshs100 billion allocated to NYS and then this programme be rolled out throughout the country. I know that only 63 constituencies will benefit from Phase 1 of this programme, but then if this programme is rolled out throughout the country, we can approve a budget of even Kshs100 billion to the NYS as long as the youth get direct employment across the country. I am happy because Jubilee is not selective in NYS programmes.

I can see that the Government started with Kibera, they went to Kodele in Kisumu and now they are in Mathare where, Hon. Kajwang' comes from. We really appreciate what is happening around. So, this authority is coming at the right time. With the touch of a button, we will be able to know where these people will be. They can even be recruited directly through the database under this authority. They can even be recruited directly through the database under this authority. So, I appreciate this Bill and support it. In about seven years ago, there was another programme called *Kazi kwa Vijana*. If you do a social audit of the Kazi kwa Vijana Programme, you cannot trace even a 10 per cent of it. With the programme under the National Youth Service (NYS), we are heading to the right direction.

I support this Bill in totality.

Hon. Deputy Speaker: Let us have Hon. Harrison Kombe.

Hon. Kombe: Asante, mhe. Naibu Spika, kwa kunipatia fursa hii ili niweze kuuchangia Mswada huu. Kwanza, ningetaka kumpongeza ndugu Sakaja kwa muda aliochukua kuuleta Mswada huu. Mswada huu utawasaidia vijana, hasa kupata kazi na pia kuwaepusha na janga la kuingia kwenye mitego. Kwa wakati mwingi, wakenya wamekuwa wakilalamika kwa sababu ya watu ambao wanawachukua vijana wetu na kuwapeleka Somalia kufanya kazi ya *Al Shabaab*. Wengine wanapelekwa Saudi Arabia. Wale wanaoenda Saudi Arabia, mwisho wanajuta kwa sababu wanaondoka hapa wakijua wanaenda kufanya kazi fulani na wanapofika kule, wanafanyishwa kazi za nyumbani badala ya kazi ambazo zinahitaji ujuzi wao. Wengine wanaondoka hapa wakijua wanaenda kuwa madereva, lakini wakifika kule, wanapewa kazi za nyumbani.

Iwapo tutaupitisha Mswada huu, utawasaidia vijana kwa sababu wote watakuwa wamesajiliwa mahali pamoja. Vile vile, Mswada huu unapendekeza kuwa tuwe na vituo mashinani. Mimi pia, ningependekeza kwamba vituo hivi visambazwe katika maeneo ya Bunge na hata ikiwezekana katika wadi. Tukifanya hivyo, itakuwa rahisi kujua ni nani hana kazi kwa sababu hawa ni vijana ambao tunakutana nao kila tukizunguka.

Nina hakika kuwa hali hii itatupunguzia janga la watoto wetu kupotoshwa. Wakati mwingi, vijana wanajiingiza katika anasa za madawa ya kulevya. Utawapata humo vichochochoni wakivuta *bhangi* na wengine wanaenda “unga.” Wenye kupeana “unga” ni watu ambao wako katika hali nzuri na badala ya kufikiria kama vile mhe Sakaja alivyofikiria na kubuni mbinu hii ya kuona kwamba vijana wa Kenya wanalindwa vilivyo, matajiri wanachukua fursa ya kuuleta “unga” and kufanya ufisadi wa kila aina. Vijana wetu wanakuwa katika hali ambayo hata wao wenyewe hawajielewi.

Huu ni uharibifu mkubwa kwa vijana wetu. Ningewauliza wenzangu tuunge mkono Mswada huu ili tuwaepushe vijana wetu na janga ambalo linawakabidhi kwa wakati huu.

Kwa hayo machache, naunga mkono.

Hon. Deputy Speaker: Let us have Hon. Soipan Tuya.

Hon. (Ms.) Tuya: Thank you, Hon. Deputy Speaker. In support of this Bill, I wish to join my colleagues in congratulating Hon. Sakaja for helping us to move from mere rhetoric to actualising the need to bring our young people into the mainstream development agenda of this country.

A lot has been said in the talk about creating job opportunities for our young people, but this Bill which seeks to establish a Youth Employment Authority, is what will get us to that vision which is held by both young people and the leadership of this country.

When you look at the object of this Bill, it addresses critical issues. Key in these issues is the establishment of a database for all youths who are seeking job opportunities. The Bill seeks to incorporate this strategy, not just at the national level, but within our county governments. The creation of a database which will be open for all to see and accessible by all the youths will ensure that the question of inequity and lack of diversity, which has become a chronic problem in providing job opportunities for our young people, will become a thing of the past.

According to the spirit and letter of the Bill, this database will ensure that every young person who will be seeking a job will put their details in this database. The database then will become the point of reference to any employer, be it private, county governments or the national Government when a job opportunity will arise.

Clause 6 of the Bill speaks to mandatory registration. In line with Article 55(c) of the Constitution, the Bill seeks to make the registration of the youth who will be seeking employment mandatory. It also mandates all the agencies even in the private sector to make sure that this is where they go to when they are recruiting. This will outlaw the excuse which we often hear directed at the young people that they lack experience. We often hear the excuse given that our young people do not have the necessary credentials. This database will deal with that aspect. It will be open for all to see that we have very resourceful young people in this country with the requisite job requirements to be taken on board.

In Clause 9, under the functions of the Authority, there is a requirement for advertising job vacancies in a way that will reach every young person in this country to make sure that they take advantage of the job opportunities. When this Bill becomes law, we hope that implementation of its provisions will be expedited. Noting that it touches on the county governments, it is one of those Bills under which we will ask our friends in the Senate to wake up and push it through within a short time. We need to actualise this law immediately in terms of implementation.

Hon. Deputy Speaker, I would like us to critically look into the issue of job advertisements. Sometimes job advertisements are placed in the daily newspapers. Many of our young people living in the grassroots do not access newspapers. In Clause (9)(d), the Bill calls for circulation of job advertisements at very low levels. I wish Hon. Sakaja could look at other ways of circulation of job advertisements, in addition to the social media or the internet. We have young people who have no access to this particular medium. We can ensure that we pin job advertisements at notice boards of chiefs' offices, in both Kiswahili and English. That way, we can be sure of reaching all the youth across the country, so that individuals can apply for the jobs that they qualify for.

Another important aspect of this Bill is provision for the functions of the authority. The authority will play a critical role in facilitating and counselling the youths. It thus creates an opportunity for us to rehabilitate and bring them back to the right path towards nation building.

We are faced with the serious crisis of radicalization of our young people. This is caused by the high level of unemployment. Statistics show that the unemployment rate in this country stands at 40 per cent. Unemployment is one of the major causes of insecurity in this country. The people involved in acts of insecurity are our young people. They are recruited into crime through radicalization processes because of lack of employment. Therefore, this Bill will take us in the right direction in terms of engaging our young people in gainful activities.

It is also important for us to note that the authority will ensure proper matching of skills taught at institutions of higher learning with the job market requirements. This will in turn ensure that we retain our youths within the Kenyan job market. We have seen many frustrated young people seek what may be called 'greener pastures' in foreign countries, only for them to end up in disastrous situations. We have seen people suffer in the Middle East after running away from this country due to lack of job opportunities. We need to change the situation.

A lot of money is being channelled through the National Treasury, targeting our young people. We have Uwezo Fund and the Youth Enterprise Development Fund, but the truth of the matter is that the people who are benefiting from these Funds are very few. Again, it is because of lack of information and capacity amongst our youth that they do not take advantage of the opportunities provided to them by the Government. The proposed authority will ensure proper dissemination of information, so that our youth can take advantage of the opportunities created for them.

Again, of critical importance is that the implementation of this Bill needs to be devolved to the lowest level of governance to ensure that the youth at the grassroots benefit from the opportunities that will be created. I am happy to see in Clause 8 provision for the headquarters to be based in Nairobi, but the authority must take deliberate action. I propose that we include an express provision for the proposed authority to have offices in all the counties.

With those remarks, I beg to support.

Hon. Deputy Speaker: What is your point of order, Hon. Ndung'u Gethenji.

Hon. Gethenji: On a point of order, Hon. Deputy Speaker. In view of the interest generated by this debate and the big number of Members who want to speak, would I be in order to propose that we reduce the time for each Member speaking to five minutes?

(Question, that speaking time be reduced to five minutes, put and agreed to)

Hon. Deputy Speaker: Members, I have 37 of you requesting to speak yet we have less than 45 minutes left for this Bill. The interest is very high.

Let us hear Hon. Chachu Ganya.

Hon. Ganya: Thank you, Hon. Deputy Speaker, for giving me the opportunity to support this very important Bill. From the outset, let me say that I support the National Youth Employment Authority Bill, 2015. I salute Hon. Sakaja for this great work, which will give the youth of Kenya a bright future. Hon. Sakaja is here to represent the interests of the youth in our Parliament. This Bill will contribute a lot and ensure that our youth get gainful employment in our nation.

This Bill addresses the grave problem of unemployment, which is of concern to this country. Unemployment in Kenya stands at 40 per cent. I am sure that most of the unemployed

in this country are our youths. Many of our youths are well educated and trained, but they are not able to secure gainful employment. For the first time, we will have a structured way through which our youth will access employment in our country. Unemployment in this country is a major security concern. It has made our youth seek greener pastures among extremists like *Al Shabaab* and many other groups, which are causing chaos and insecurity in the world. It is lack of hope, employment and a future that has forced our youth to join these extremist groups; they do not see any hope or future in our nation.

The Bill seeks to create an authority which will create a databank in which all the personal details of our youth will be kept for use by all Government entities and potential employers trying to create employment in our country. In this way a great number of our youth will hopefully get gainful employment. This is a very innovative approach. It happens in other parts of the world. This Bill will also ensure that our students are given career guidance and counselling, so that the skills that they have can be matched with the required skills in the job market.

I hope that the implementation of this Bill will be decentralized to all the 47 counties, and sub-counties. In particular I hope that the Bill will ensure that youth from marginalized counties, including areas like North Horr and others, will be given affirmative action to ensure that they get gainful employment in our country. In reaching out to the youths, we should not only rely on social media or the internet because there are areas where we do not have the internet or mobile phones services, especially in my own constituency of North Horr. I hope that offices of the chiefs and many other structures being created by counties such as wards, will be used in ensuring that information reaches the marginalized youth in the many parts of our country that are not privileged to have social media and the internet.

I also do hope that this Bill will enable the youth to get gainful employment. I know that so many youth are being misused and exploited in the Middle East countries, especially Saudi Arabia. I hope that, for the first time, the proposed authority will enable them to get dignified and gainful employment in establishments where they will be appreciated for their skills, education and experience instead of being exploited simply because they are dying to earn a living, and because they do not have opportunities in their own home country.

I also hope that the Bill will do more than just create a database for employment by enabling our youths to access money from the Youth Enterprise Development Fund, Uwezo Fund and other sources of loans to enable them employ themselves. That way, we will be addressing the issue of unemployment in our country. As I conclude, I plead with our President to assent to this Bill as soon it reaches his desk, and ensure that his Government implements it within a month in order for us to address the issue of unemployment and insecurity in our nation.

I strongly believe that if most of our youths are given a bright future and are gainfully employed, there will be no reason for them to be radicalized, and lose their young and bright lives just because of lack of opportunities in our country. It will really go a long way in addressing not just unemployment but also our insecurity challenge, which is of grave concern facing our nation, especially in areas like northern Kenya.

With those few remarks, I support this Bill very strongly.

Hon. Deputy Speaker: Hon. Patrick Musimba.

Hon. Musimba: Thank you, Hon. Deputy Speaker for this opportunity. This is a Bill whose time has come. I want to commend my colleague and friend, Hon. Sakaja, because it

espouses the very essence of Vision 2030 in terms of its focus on our three pillars, which are the economic, political and social pillars.

What I would want to address in the objectives is that we should not just limit ourselves locally in terms of the database; we should also provide for international placements. Kenya's human capital is well-sought after, especially the youth. The Entrepreneurship Summit which is forthcoming will prove that Kenya's innovation is world class; that is why we are home to great innovations in many sectors. We should look at placements internationally because Kenya's human capital is well-sought after. If you pick any particular profession in Kenya, Kenyans rank at the very top.

When you come back locally, the importance of having job placements coming through is that currently, our tax burden is shouldered by the formal sector of only two million people. The cottage industries cater for another maybe four to five million people. You have unemployment of almost 12 million youths; if you get them into the mainstream economy, you will be looking at a potential of putting Kshs5.1 trillion into the Exchequer a year. This would lessen to a big extent the burden that we already have in terms of our debt levels, which currently stands at US\$14 billion. It would herald a new beginning in terms of giving relief and planning to the long-term competitiveness of this great nation.

We look at harnessing our skills, knowledge and attitudes towards serving Kenya. That is why it is well espoused in the last objective (f) that talks about the ideals of patriotism and entrenching social and economic rights for our people, which only exist in our Constitution, into the world economy and social life.

In looking at these things, the tax incentives that have been proposed in this 2015/2016 Financial Year, and that were ably read out during the Budget--- We entice employers who are going to give apprenticeship programmes to our youths. This Bill will provide a framework for looking at the absorption levels within this. As an extension of it, when you look at the apprenticeship, you should not just look at our retirees and say that they have no role in this economy. We can go further across the board, because the Bill allows for the formation of committees which perpetuate the objectives of this Bill, and take specialist retirees to mentor our youth. That way they can give their rich experience of 30 or 40 years in industry to the youth, harness them and bring them to a fast-forward position at the point that they are already getting employed, as well as provide mechanisms within the county governments so long as you give funding through tax incentives that they will---

I would like to say that with regard to the patriotism aspect, as we move towards the East Africa Community (EAC), we will emerge as a power base with this region and grow our economy to become larger and the home of this great continent of Africa.

*[The Deputy Speaker
(Hon. (Dr.) Laboso) left the Chair]*

*[The Temporary Deputy Speaker
(Hon. (Ms.) Shebesh) took the Chair]*

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. John Kobado.

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Hon. Kobado: Thank you very much, Hon. Temporary Deputy Speaker for this opportunity. First, I would like to congratulate Hon. Sakaja for this very innovative Bill.

Allow me to start by quoting Charles Kettering, who was an American engineer, and whose 140 patents included the electric starter and the car lighting and ignition system. Kettering once stated very eloquently that: "My concern was with the future since I intend to spend the rest of my life there." The future of this nation should be in the hands of the youth. As leaders, we should only be concerned about their future. The youth have the numbers, energy, innovation, resilience and talents that are required to move this nation to the future. The level of youth unemployment in this country is a ticking time-bomb. Unemployment is known to be associated with crime and violence, and will critically destroy the fabric of this nation. Employment is not just about income earning. It is also about dignity and prestige. Unless we address these issues very critically and fast enough, we are headed to very dangerous levels.

If you critically look at what is happening today in this country, we have very weak policies and we need to look at how we can reform the labour market policies. That means that we look at the demand side. If you look at the demand side in the labour market today, you find that employers are not ready to take in the youth. One reason they are doing so is because they claim the youth do not have the experience and necessary skills. That means that we need to look at reforms in terms of our education and training, so that we provide the necessary skills for the youth to be employed. Employability of the youth is one critical aspect that we need to look at.

If you look at the way this country is preparing the youth in terms of training, we need to move away from the knowledge-based training to competence-based training, so that as these youths come out of school, we can shorten the margin between coming out of school and getting employed. That transition has been long. There is need to minimise the transition between learning and earning. That can only be done if the youth are given an opportunity to gain skills as they go through their learning processes, and more so those who go into training. As they train, there is need for them to get an opportunity to gain practical skills. It is critical that reforms be done in aspects of education and movement, in terms of preparing data, so that we know what kind of skills these youth have.

In conclusion, some of the funds and interventions that we have had in this nation are not sustainable. Looking at the Uwezo Fund, the youth do not just need the capital. It is not just about making money. As I said earlier, it is also about skills and appropriate technology. If the youth are skilled, they can use them to make earnings in a sustainable manner. The employment ratio in this country today stands at 40:8, which means that 2 out of---

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. T. G. Ali, I know that you are the Vice-Chair of the Departmental Committee on Labour and Social Welfare. That is why I am giving you the opportunity to contribute.

Hon. (Ms.) T. G. Ali: Thank you, Hon. Temporary Deputy Speaker. I stand to support this Bill, which is crucial to the youth of this country. Youth employment has been done in an *ad hoc* way. For many years, we have not had any sustainable legislation on youth employment. We have so much human resource in this country, but it has not been captured in any database. Many of the youth have been paying anything they can afford to get employment. Unemployment has complicated the issue of corruption in this country because there are no proper ways of employing our youth. Many youth have been trying to bribe their way into employment. Most of

the affected youth are from the ASAL areas, especially those in the hard to reach parts of this country.

The youth in Nairobi and other cities have an advantage because they can access newspapers, watch television and access the internet as they look for jobs. However, many youth in Isiolo, Marsabit and Moyale – collectively referred to as the Upper Eastern region – and those in the North Eastern region, Pokot and Turkana counties, have not had opportunities. Quite a number of our youth from those areas have also gone to school. They have got university education and have acquired skills but, because of lack of opportunities and a proper legislation to ensure that they are all captured in a database to get jobs, it has been difficult for them to get employment. I believe that the proposed database will capture the technical skills of the unemployed human resources of this country with a view to having them employed. I am sure that the proposed database will ensure regional balance when it comes employing the youth.

Hon. Temporary Deputy Speaker, I also support this Bill because the proposed authority will keep a record of all the unemployment youth across country. Upon pressing a button, one will know where our youth are and what technical skills they possess. This country has been under threat due to lack of employment for the youth. We currently have a lot of issues, including radicalization of the youth. This has been attributed to the fact that many of our youth who have technical skills have not been able to get employment. Therefore, they end up looking for anything to do so that they can earn a living, or engage themselves in meaningful activities.

The National Youth Employment Bill will give Kenyan youth equal opportunities in terms of getting jobs. It will help in ensuring that some of the technical skills that we have in this country are well captured. It will also help to identify areas where we need to put more effort in terms of training, to ensure that youth human resource development is captured. Many youth in this country have been exploited because more often than not, they are given jobs which do not match their training background simply because we do not have a legislation of this nature. Therefore, in most cases, the youth are underpaid. So, they end up practising many other things, which can make them get something that is not good for this country.

Hon. Temporary Deputy Speaker, as the Departmental Committee on Labour and Social Welfare, we sat and agreed to support this important Bill. We thank Hon. Sakaja for bringing it to the House.

With those remarks, I beg to support.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Sang, could you press the intervention button, so that I can give you the Floor?

Hon. Sang: Thank you, Hon. Temporary Deputy Speaker, for giving me opportunity to contribute to this very important Bill. First, I congratulate my younger brother, Hon. Sakaja, for coming up with the Bill, which will help so much in regulation of youth employment.

Look at Clause 9, it is clear that Hon. Sakaja has done so well on the functions of the proposed authority. He has indicated that all young Kenyans seeking employment are supposed to be registered. Probably, during the Committee of the whole House, he will bring amendments to provide for the registration of all young Kenyans rather than just those seeking employment. It is indicated in the Bill that it is mandatory for the Government and the private sector to ensure that information on existing vacancies reach the youth wherever they are.

Hon. Temporary Deputy Speaker, the functions of the proposed authority include facilitation, through continuous training and other activities, of possible improvement of the

youths' employment chances and work skills. It is also supposed to advise both the national Government and the county governments on policy matter touching on youth employment, facilitate implementation of national Government and county government policies. It is also supposed to encourage and promote efficiency and responsibility in the employment of the youth as well as encourage equal opportunity practices and benefits of young people.

On Clause 37, I congratulate Hon. Sakaja because a good number of graduates from tertiary colleges have been moving round in search of internship placements, without success. They have been disadvantaged because internship places are limited. Therefore, it is important for this Bill to mention the institutions where young Kenyans are supposed to go for internship. More importantly, most young Kenyans have been doing internships without payment. I know particularly about the medical field, where diploma holders have been doing a lot of work without pay. Therefore, it is important to note that the proposed authority will force the authorities to have young Kenyans paid during their internship.

Hon. Temporary Deputy Speaker, it is more important to note that we have many youth who are going through a number of challenges in this country. Statistics show that at least 28.7 million Kenyans are youth under the age of 30. These young people have a lot of problems and issues. It is sad that the unemployment rate in Kenya is currently 40 per cent. I am made to understand that it is among the leading unemployment rates in Africa. We are supposed to do something so that Kenyans do not rot in the villages. If you go back to the village, you will find many young Kenyans getting wasted by alcoholism because of unemployment. If you look into the issue of insecurity, you will find that it is young people who are involved because they do not have employment.

The Government is trying. In the previous Government, some of us were made to co-ordinate employment of young people. Unfortunately, they bought *pangas* and *jembes* for young people and pocketed huge amounts of money. I hope the Jubilee Government will do something which is more proactive so that young Kenyans can, at least, get employment.

With those remarks, I want to tell my young friend, Hon. Sakaja, that you are doing a very good job. May God bless you. We should come up with this Authority so that young Kenyans get employment opportunities.

Thank you, Hon. Temporary Deputy Speaker.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Memusi Kanchory of Kajiado Central.

Hon. Memusi: Thank you, Hon. Temporary Deputy Speaker. I rise to support this very noble idea by my very good friend, Hon. Sakaja. I would like to tell my friend that it is true when they say great minds think alike. This is because I have established such a database for my constituency.

I would like to talk from first-hand experience on the usefulness of such a database. I have a record of all university graduates, diploma holders and skilled young people in my constituency. When I am seeking jobs for them, the database eases my work. So, I rise to support this very great initiative.

Yesterday, I launched the National Youth Service (NYS) programme in my constituency where 1,350 young people have been given a chance to participate in building my constituency through various initiatives. If you were there you would have seen the crisis of unemployment in this country. I thought 1,350 vacancies might satisfy all the young people in my constituency, but

there was a scramble for those vacancies. So, unemployment among our youth is a challenge. The challenges that this country faces threaten to tear apart its economy. I would like to say that unemployment highly leads to these challenges such as insecurity and youth radicalisation that eventually leads to terrorist activities.

This noble idea will not only give the Government information about how many of our young people are out there, but it will also give employers easy time to select the skills that they want to match the employment opportunities that they have. This idea will also bring out the very important role that the youth in this country play. The youth in this country play a very important role not only in electing quality leaders but also in building it. I am sure that the quality of leaders in this country will change if we empower our leaders.

The desperate situations that our youth face that make them accept handouts whenever we go into campaigns in order to elect leaders who might not have any agenda not only for their people but also for this country will end.

I support this Bill and, again, congratulate my very good friend, Hon. Sakaja. I urge all Members to support this Bill because it is for the good of this country.

Thank you, Hon. Temporary Deputy Speaker.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Onesmus Njuki.

Hon. Njuki: Thank you, Hon. Temporary Deputy Speaker. Let me, first of all, start by congratulating Hon. Sakaja not just because of this Bill. For the days we have been here, this young legislator has brought many Bills on the youth. In fact, if we were in the old dispensation, he could be the Minister for Youth Affairs. But now, he might have to rely on what he has been doing for the youth to vie for a seat. I am sure he will benefit from the votes of those youth because they are for him.

We have talked a lot about the youth and I want to acknowledge the fact that the youth normally grow into men and women. The greatest problem is not unemployment when they are young but what happens when they go through that stage unemployed and become old men and women who are still unemployed. It is a very desperate situation.

You may not be aware that what is contributing to what you hear in Nyeri could be part of that problem. It is because you have no job both as a youth and as an old man. The clock does not stop and wait for you while you go through the life cycle.

A youth who does not have a job still needs to marry and provide for the family. Therefore, all the needs that come with people who have jobs also apply for jobless people. That is what causes the desperate situation of struggling to take care of your family. Such youth go out and start stealing or become radicalised.

I would like to share an experience that I have with friends and neighbours who live around Kibera neighbourhoods. When the Kibera Youth Programme was started--- Many people may not be aware and they think that the NYS went there and made toilets for Kibera people to stop using “the flying toilets”.

Actually, the toilets were meant to create jobs for the youth. The youth normally clean the toilets and people pay to use them. There are also posho mills. They also constructed roads in places where it was not possible to do business and now we have people hawking along those roads. What happened is that the many idle youth who used to hover around and became a nuisance in the neighbourhoods and other estates became busy and the crime rate has reduced. It

has been very good for people who live in that neighbourhood. Those who live there can attest to that fact. That is what creation of jobs can do. That is what this Bill by Hon. Sakaja will do to assist reduce the unemployment rate that currently stands at 40 per cent.

Effective communication is very important in creation of jobs. Hon. Temporary Deputy Speaker, you have campaigned in Nairobi and you know the informal sector. If you want a *fundu*, you wake up in the morning, go to a place in River Road where artisans hawk their skills and you just pick a plumber or carpenter. That is what this Bill is seeking to do but in a formal manner by creating a job centre where one can go and look for a job that matches his or her skills. If that happens in the whole country then it means this Bill will be matching the skills that one has with available jobs. That will be a great opportunity because there are employers looking for the right people to employ but the problem is how they can be connected to the available skills. This Bill can act as a link to sort out this problem.

I would not like to support this Bill without touching on the issue of what is happening at the NYS that may have been misunderstood by many people because of lack of information. What was initiated last week but one by the NYS is a programme where we have one NYS serviceman or woman to ten youth. For example, in my constituency I have 144 NYS service officers who have been brought to do projects. In that case, we are going to have 1,444 jobs. You can imagine what that would do to alleviate the unemployment problem. If that is what this Bill intends to do, I totally support it.

I am sure we will move a few amendments in the Committee stage so that we come up with a lasting solution to the unemployment problem in this country.

With those few remarks, I support the Bill.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Millie Odhiambo.

Hon. (Ms.) Odhiambo-Mabona: Thank you, Hon. Temporary Deputy Speaker for giving me this opportunity. I want to congratulate Hon. Sakaja for this very good Bill. He has not disappointed. Since Hon. Sakaja was nominated he has done an excellent job. It reminds me of the time when we were in the last Parliament. It is good if we read our Terms of Reference (TORs). Sometimes they are not written, but they are implied. I want to congratulate Hon. Sakaja. He has lived true to the youth agenda and his calling as a nominated Member of Parliament.

I also want to congratulate him because he has addressed in the Bill some of the issues that I am very passionate about such as the issues of equalisation of opportunities, intergenerational equity, disabilities and gender.

I would like to encourage that even as we are looking at this Bill that he adds somebody with an eye on gender to do a bit of gender mainstreaming so that he strengthens aspects that have to do with gender. For example, he is taking about international opportunities or jobs and yet we know, at the same time, that many of our women who travel out of the country are subject to violations while others are subject to trafficking when they get those international jobs. You need at the same time to put very strong measures and probably make a linkage with the Counter Trafficking in Persons Act so that you deal with that.

Hon. Temporary Deputy Speaker, I also want you to know that I am very happy that you have also provided a very strong background on better rights approach to programming and making sure that the youths participate in things that concern them.

One of the things or reasons I am very happy about this Bill, even as I was looking through it, is that a lot of what is proposed here was started by some of us informally. By the age of 30, I had already founded an organization and was employing several young people. By the age of 35, I was already employing people in the region and in Africa. I discovered and learnt that there are very many opportunities but the challenge is that people do not have linkages to information.

I remember one of the first trips I made out of the country was to the United States of America. All I was required to do was to write a paper and then I got everything funded. I did not need to know anyone. All I needed was to write a paper on the issue of mainstreaming human rights and women, which I already knew.

I got an air ticket, accommodation in a five star hotel in the US, all my meals were paid and I paid per diem. All this is in the internet but because we are not providing that linkage--- Even yesterday, I saw the same organisation providing the same opportunities for young people, women and people with disabilities next year in Brazil. However, because we do not get that next chance it becomes difficult. That is why for me this is very exciting. I got numerous opportunities by the time I was coming to this Parliament. I think I had travelled to more than 50 countries courtesy of opportunities like this. That is why the issue of internship, incubation and all that in this Bill are very important. I have seen and nurtured very many young people who have gone ahead and got jobs in other areas because we were able to give them opportunities. I am happy that this Bill is providing a platform for young people like these.

I would also like to say, in light of the issue of radicalisation, that this is an answer. I had indicated at some point that even in my own constituency, we found one young man who had been radicalised by the Al-Shaabab. He was given Kshs500,000 to recruit people in Mbita. We nipped that in the bud, we arrested the young man and he is helping the police to get the people who recruited and trained them.

I congratulate Hon. Sakaja for an excellent Bill. I encourage other Members to bring similar Bills that would move this country forward.

Thank you.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Jacob Macharia.

Hon. Macharia: Thank you, Hon. Temporary Deputy Speaker. From the outset, I rise to support the Bill by Hon. Sakaja because the youth in this country, especially those from rural constituencies like Molo have a long way to go in terms of employment and empowerment. I believe that if this Bill becomes law it would help the Government in mainstreaming the problem of the youth.

The youth flocked in large numbers to the ongoing NYS recruitment exercise because of rampant unemployment in the country. Kenyan youth are more often than not misused mainly by politicians. That is why every other time, in political rallies and political mobilisation, we hear politicians and other operatives saying in Kiswahili “*tafuta vijana wafanye kazi*”. The perceptions we have as a country towards the youth is the reason we ended up having the Kazi Kwa Vijana Programme that was mismanaged. This was coined to mean “*kazi kwa vijana, pesa kwa wazee*”.

The creation of a database to map out youths in Kenya will help. We have different categories of youth in this country. We have youth who never went to school; youths who went

to school but did not complete; youths who went to school but are not employed and youths who went to school but are doing jobs they never trained in. That is why we have even PhD holders picking tea in villages out there.

Finally, we have youth who are working in the international employment market and they are more often than not culpable to employment agents who have been coning them simply because they want a job. We have advertisements talking about cargo job placements where our youth are fleeced money which has been provided by parents.

Therefore, creation of this database and incubation or the mentoring of youth will help because more often than not, we find youth who have gone to school and yet some of them do not even know how to write a good CV that can get them employment. The efforts by Hon. Sakaja are commendable. This Bill is timely and it is a major intervention in making sure that the youth in this country are no longer called *viongozi wa kesho*. They should start now.

Hon. Temporary Deputy Speaker, you will realise that we now have youthful Members of Parliament in this House, I included and the number is increasing. It is time, with the creation of the Youth Employment Authority, that the youth took their rightful place in Kenya.

Thank you, Hon. Temporary Deputy Speaker.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Okay. That is our last speaker for today. I now give the Mover time to reply.

Hon. Sakaja, you have 10 minutes.

Hon. Sakaja: Thank you, Hon. Temporary Deputy Speaker. There has been a lot of interest. So, I will give the following Members a minute each because I had moved the Bill before. I agree with the many concerns that have been raised. We will incorporate them in the amendments.

I will give Hon. James Rege, Hon. Iringo, Hon. Gichigi, Hon. Tongi and Hon. Makali one minute each. I will also give Hon. Letimalo, Hon. Wambui and Hon. Mbarire one minute each. I only have 10 minutes unless you give me more time.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): No, you have 10 minutes. You are being very ambitious.

Hon. Sakaja: I have given seven Members one minute each.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Let us start with Hon. Rege.

Hon. Sakaja: I will add Hon. Waititu.

Hon. (Eng.) Rege: Thank you, Hon. Temporary Deputy for giving me one minute to contribute to this good Bill authored by my good friend and able Chairman, Hon. Sakaja. Since time is very short, I just want to add that currently, we have provisions for our youth and women in the country to be allocated 30 per cent of all jobs available but nobody is serious in making sure that this is attained. Therefore, by passing this Bill, we will have an up to date database with servers that will be used at the national and county levels. Let us put this server on the---

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Yes, Hon. Iringo.

Hon. Kubai Iringo: Thank you, Hon. Temporary Deputy Speaker. Let me congratulate my colleague, Hon. Sakaja, for bringing this Bill to this House. I support it because of the empowerment of our youth.

The Government has done a lot to empower the youth. However, this Authority will further strengthen and protect the rights of the youth. Their talents should be exploited collectively. Through this, we shall reduce the problems of our children getting radicalized,

venturing into crime and being drug addicts. It will be helpful if you put their qualifications and needs in a database.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up! Yes, Hon. Gichigi.

Hon. Gichigi: Ninakushukuru Naibu Spika wa Muda. Ninataka kumpongeza Mhe. Sakaja kwa sababu ya kuuleta Mswada huu katika Bunge ili tuwasaidie vijana wetu.

Katika Kamati ya Wafanyikazi na Ustawi wa Jamii, tumeongea na Mhe. Sakaja na tumekubaliana kuwa tutafanya mabadiliko kidogo ili tuweke vipengele ambavyo vitashughulikia walemavu pia ili tusiwe na haja ya kuunda shirika lingine la kuwashughulikia walemavu na kina mama.

Kwa hivyo, tutaarekebisha Mswada huu ili uweze kuwashughulikia hawa watu wote. Pia, tunataka kuwashughulikia wafanyakazi katika nchi za ng'ambo ili wasiendelee kuumia.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up! Yes, Hon. Makali. When I say your time is up, I really mean your time is up.

Hon. Mulu: Thank you, Hon. Temporary Deputy Speaker for giving me this chance. I also want to thank Hon. Sakaja for donating a minute to me. I will be very brief.

I want to support this Bill. Two things are of great interest to me. The issue of having a data bank for the unemployed youth is very important. The other issue which is very important is ensuring that the information which is going to be given by the youth is of high integrity.

We know that there are people in this country who have fake certificates and they provide false information. I like the idea that for somebody to provide this information, he or she must say the truth. If they do not do that, they can be punished under the existing laws.

I support this Bill and thank Hon. Sakaja. As Hon. Millie has said, Hon. Sakaja is one of the Nominated Members of Parliament who seems to know who they represent in this House and in the country.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up! Yes, Hon. Letimalo.

Hon. Letimalo: Thank you, Hon. Temporary Deputy Speaker. I wish to thank Hon. Sakaja for donating one minute to me. I wish he could listen to me.

If you look at Part VII of the Bill, you will find that we are talking about affirmative action. While I agree with the areas that he has touched on, it is important to consider the pastoral areas. As a Chairman, he has visited some of these areas where there are conflicts as a result of rampant cattle rustling. The people who are involved in this conflict are the youth who are illiterate and they should not be discriminated against when it comes to creating employment. We need to discard this old, uncultured habit and behaviour of creating wealth through stealing of livestock.

Secondly, job vacancies should not only be done through the social media because some of our rural areas are not covered by mobile networks. So, it is important for us to use ward administrators and chiefs to pass this information to the youth.

Hon. (Ms.) Munene: Thank you, Hon. Temporary Deputy Speaker. I want to thank Hon. Sakaja for giving me one minute. I want to support this Bill because the youths are the ones who are having a lot of problems. Most of these youth do not have access to formal education and we must think about them. They can be trained in plumbing and masonry. Many youths in this country have not gone to school and we need to see what we can do with them.

We have poor people in our constituencies who cannot afford to take their children to school and we should think how we can help them. We should not allow only children from rich families to get jobs because they have formal education. We should think outside the box. How will we help people in Pokot and Turkana?

I support the Bill.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up! Yes, Hon. Mbarire.

Hon. (Ms.) Mbarire: Thank you, Hon. Temporary Deputy Speaker. I want to congratulate Hon. Sakaja for bring this very important Bill to this House, and for staying true to the reason why he was nominated to this House by TNA as a representative of the youth. On behalf of the women in this Parliament, KEWOPA, we are very glad that this Bill has come to the House.

I do not see any woman in this House who will not support this Bill. Given a chance, we would all have stood up and said something positive about the Bill. However, we register our support for the youth of Kenya. We look forward to our continued partnership with the KYPA as we move along to achieve the not more than two-thirds gender rule. We are happy with the work that is being done by the young Parliamentarians and we support them fully.

With those few remarks, I support

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Lastly, Hon. Waititu.

Hon. Ferdinard Waititu: Thank you, Hon. Temporary Deputy Speaker. I rise to support the Bill. I also want to commend Hon. Sakaja for bringing this Bill, which is timely considering that just a few days ago, the NYS was devolved to some of our constituencies. We have seen the excitement down there with the youths getting employment. The youths in this country have been waiting for a long time to get a chance to enjoy the national cake. Through this Bill, they will get a fair chance to present their CVs after graduation.

I am happy that this Bill considers all the youths namely, the highly skilled and the not highly skilled. It is my considered view that the youths in this country deserve a fair chance like everybody else.

I support the Bill.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up! Hon. Tong'i, you are the last one.

Hon. Tong'i: Thank you, Hon. Temporary Deputy Speaker. I take this opportunity to also appreciate what Hon. Sakaja has done for the youths of Kenya.

I appreciate the fact that we need to have a database for the unemployed youth. In management, that which cannot be measured cannot be rewarded. Therefore, we need to know who are not employed and what levels of education they have so that we are able to plan.

The other thing that needs to be included is the NHIF rates. As we speak, the NHIF rates are beyond the reach of the youth and yet medical service is a basic requirement for everybody. If we can make the NHIF affordable, the beneficiaries will be the youth, some of whom are in the *Jua Kali* businesses. They need to be supported so that they can access quality medical care when need arises. We hope that this concern will be addressed by the Authority.

The other concern is that we need to manage the movement of the youth from rural to urban areas by ensuring that people who are moving to towns are those in critical areas that we need as an economy. If we put structures in place, people will get opportunities at the county

level and they do not have to come to Nairobi. By so doing, we will address the concerns of the youth.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Tong'i, your time is up. Hon. Sakaja, I also give you one minute to complete this debate.

Hon. Sakaja: I am sorry, Hon. Temporary Deputy Speaker. I assumed I had given out all my time. I thank all the hon. Members who have proposed to strengthen this Bill. I spent this entire weekend in the northern part of this country. We are doing this for the young people I met in Baragoi, Samburu, Nanyuki, Loruk. Nginyang, Sidai, Turkwel and Lokwar last evening in Turkana South.

(Applause)

We are doing this so that they shall not, again, think that they have been forgotten. They shall have the same equal opportunity as any other young person in this country to get a job. I beg to reply.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Members, we will not put the Question at this time.

Let us move on to the next Order.

Hon. Members: We have the numbers!

Hon. Ng'ongo: That is why I came here!

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): You might have come in but you might not have met the numbers so we have to check. Let it be confirmed. Please give us a minute to confirm.

(The Clerks-at-the-Table counted Hon. Members)

Hon. Members, I now wish to put the Question.

(Question put and agreed to)

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

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Let us move on to the next Order.

MOTION

ESTABLISHMENT OF ICU/BLOOD TRANSFUSION CENTRES IN CONSTITUENCIES

Hon. Dawood: Hon. Temporary Deputy Speaker, I beg to move the following Motion:-

THAT, aware that the country has been experiencing a series of fatal emergency situations that necessitate the need for urgent medical care and blood

transfusions; deeply concerned that currently the country lacks sufficient blood reserves; noting that health services and blood donations in critical emergency situations are crucial to saving lives; this House urges the Government to consider setting up an Intensive Care Unit (ICU) and a blood transfusion unit in every constituency to provide medical care and blood in emergency situations.

Hon. Temporary Deputy Speaker, Article 43(1)(a) of our Constitution says:

“Every person has a right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care”.

Article 43 (2) says:-

“A person shall not be denied emergency medical treatment”.

My Motion is with regard to ICUs which I believe are lacking in our country. Last week, I spoke with the Chairperson of the Departmental Committee on Health. They were supposed to ask me to move an amendment to change it to counties but I cannot see them here. So, I will just move what I have.

Intensive care medicine is a medical speciality which focusses on the management of critically ill patients. Critical illness is described as a general state which may arise from various medical pathologists. It may lead to impairment of vital and single organ failures. The majority of the critically ill patients in less developed countries, harbouring two-thirds of the world's population, do not have access to intensive care. The ICUs cater for patients with severe life threatening illnesses and injuries which require constant, close and invasive monitoring and support from specialists, equipment and medication in order to ensure normal bodily functions. They are staffed by highly trained doctors and critical care nurses who specialise in caring for seriously ill patients. Common conditions which are treated in the ICUs include trauma, multiple organ failure and sepsis. Patients may be transferred directly to an ICU from an emergency department if required, from a ward if they rapidly deteriorate or immediately after surgery if the surgery is very invasive and the patient is at high risk of complications.

On the other hand, blood transfusion is generally a process of receiving blood products into one's circulation intravenously. Transfusions are mainly used for various medical conditions to replace lost components of blood. Early transfusions used whole blood. However, modern medical practise commonly uses only components of blood such as red blood cells, white blood cells, plasma clotting factors and platelets.

The Blood Donor Day was celebrated on 14th June this year. The motto for the blood donation normally is: “Give freely, give often. Blood donation matters.” The theme for this year was: “Thank you for saving my life.” Blood donors are either voluntary unpaid, family replacements or paid. Blood groups are normally AB and O.

From the forgoing articles of the Constitution, it behoves the National Assembly to make sure that the Government facilitates the setting up of ICUs and blood transfusion units in each and every constituency if not the counties. I am aware that the health function is devolved to the counties and yet many counties lack the capacity.

Hon. Temporary Deputy Speaker, you had brought a Motion to that effect in the morning although you withdrew it. I hope you will bring it again.

The health system in the counties is in a pathetic state and almost grinding to a halt. Lack of funds and the resulting scarcity of drugs and other items as well as shortage of medical personnel together with medical personnel who are chased away because of not being from the

right community has hindered the output of our county hospitals and dispensaries. Another issue is the resignation of doctors opposed to devolution. That is not helping matters.

Hospitals have ICUs that cater for specific medical specialities or patients such as neonatal intensive care, paediatric intensive care, psychiatric intensive care, coronary care units, medical intensive care and neurological intensive care as well as trauma, post anaesthesia and High Dependency Units (HDUs) and surgical intensive care.

Currently, with a population of about 40 million, Kenya only has 37 functional ICUs in the public hospitals out of 52 which are in place. Kenyatta National Hospital (KNH) has only 26 beds, Moi Teaching and Referral Hospital (MTRH) has six beds, the Coast General Hospital has two beds, the Nakuru General Hospital has four beds, the Jaramogi Oginga Odinga Teaching and Referral Hospital has four beds, the Nyeri Level 5 Hospital has three beds and the Kisii Level 5 Referral Hospital has five beds.

There are a further 57 functional ICU beds in private and faith-based hospitals. There is another term which we use for ICUs which are not complete ICUs. The term is HDU. This is a smaller version. Patients from HDUs can be transferred to ICUs but they are not considered ready for the hospital bed.

Patients in the HDU can also be put back into the ICU if their condition deteriorates. The term "ICU" refers to a specialized unit designed for providing the highest level of medical care for patients.

In contrast, the term "critical care" is generally used to denote provision of a high level of medical care but not necessarily from a unit specialized for the same. Thus, critical care can be provided in a transport vehicle like an ambulance, outpatient departments as well as general hospital wards, operating theatres or anywhere one finds the patient. This type of care is considered primary or resuscitation-based. Therefore, it is vital. Primary resuscitation should always be performed before transferring the patient to the definitive ICU for optimum care.

According to the World Health Organization (WHO) recommendations, a general ward should have a ratio of between 25-50 beds to one bed of ICU. From this foregoing, it is noted that there is a serious shortage of ICU beds in Kenya together with equipment and trained human staff. The reality on the ground is such that many ICU beds fall short of the ideal situation. With adequate funding from the relevant Government departments and other non-governmental departments, it would be prudent to have, at least, one functional ICU in each of the 47 counties. It is also prudent that we have, at least, two to serve each and every county.

To that effect, the national Government has proposed and is already equipping 94 hospitals; two per county by the medical scheme which it has rolled out, which grudgingly some of the governors have not accepted though most of them have but there are still some issues with that. While we have two of the equipment each being provided to the county governments or county hospitals, we need to have in place infrastructure to take care of those ICU facilities together with the blood transfusion units.

Probably, the Kenya Medical Practitioners, Dentists and Pharmacist Union estimates that each county hospital should be the same size as the recently opened Mama Lucy Kibaki Hospital in Kayole. That hospital has 112 beds and plans to have four ICU beds and four HDU beds. However, beds only are not enough. Each ICU bed comes with a mechanical ventilator, cardiac monitor and at least two drug infusion pumps and suction operators.

In addition to that, each one of them needs to have, at least, a portable X-ray, ultra sound doper machine, a 12 lead electro-cardiogram machine and hemodialysis machine and a proximity to a CT-Scan machine. Every ICU facility needs to have an inbuilt laboratory with the capacity to do the following investigations; ultra-blood gas analyzers, urea creatinine and electrolyte, full haemogram blood sugars and cardiac enzymes together with inflammatory markers and liver function test. Other specialized tests should be there as well.

A well stocked pharmacy needs to have a complete residential pharmacist specialist and a nutritionist who can liaise with the pharmacist to avail all the necessary special feeds at all times.

Educated staff is always a challenge in an ICU. The “unitard” is usually a highly trained medical doctor or a nurse who works with a team of highly dedicated assistant. The WHO recommends a nurse to patient ratio of 1:1. In addition, the unit should have a resident medical doctor with the relevant specialty training 24 hours a day. Other staff includes physiotherapists, nutritionists, laboratory technicians, biomedical technicians, pharmacists, counselors and support staff.

There is need to have a system in place where all the ICUs will be interconnected via fiber optic internet cables which would then share information about the management of difficult cases in real time via teleconferencing. An added advantage could include saving time and money when referring a patient from one unit to another because all the data would simply be retrieved from the database of the referring institution.

Also, we should plan to have a paperless ICU all over the country by the year 2030. This has already been adopted by the Forces Memorial Hospital’s ICU. Majority of the critically ill in less developed countries harboring about two-thirds of the world’s population still do not have access to ICU facilities and have a shortage of staff due to lack of basic equipment, poor maintenance of equipment and uninterrupted supply.

Little information exists on the current state of intensive care in the less developed countries. There seems to be a wide variance in availability of ICUs in this country ranging from non-existent to sophisticated centres in selected private hospitals catering for few privileged patients.

In addition, the medical profession in less developed countries is not set up to provide formal training in intensive care. The factors inevitably result in lack of recognition of intensive care medicine as a specialty in resource poor settings.

The ICU at the KNH was established in 1972 with the technical assistance of the Government of Japan. The local expertise was trained by them and it is limited. Whereas they currently have 21 Critical Care Unit (CCU) beds with 140 nurses deployed and a staffing ratio of two nurses for every three patients, the ICU is primarily being managed by consultants in anesthesiology. The challenges faced include the equipment shortage as I have already enumerated. Despite the above challenges the CCU is still able to provide satisfactory critical care to patients who are there.

As a result of the provincial or county hospitals not being able to satisfy the demand of the ICU facilities in the counties, they refer patients all the way to the KNH which is overwhelmed and there is a backlog of patients awaiting ICU admission. As you are aware, the ICU cannot wait for anybody.

Faith-based hospitals have few intensive care units that help a bit but mostly we are helped by private hospitals which have a presence in most of the Kenyan towns. However, not all

have ICU wards although the costs are too prohibitive for ordinary Kenyans to go to private hospitals for ICU services.

With this, it is only 11 per cent of hospitals in Kenya which provide ICU care. The WHO recommends that each hospital which performs surgery and anesthesia ought to have and should have an ICU. Comparing that with what we have in Kenya by recommendation from the Society of Critical Care, we need to have between 20-40 per cent of total beds for the ICU. If we count with what we have currently, it is only 0.29 per cent of what we have for 44 million people in Kenya. This leads to critical illnesses not being taken care of. It also means there is a deficit of ICU beds in the country. We also do not have equipment. We need to improve funding to healthcare.

Blood transfusion is essential in the provision of healthcare particularly among the vulnerable people such as women suffering from hemorrhage during or after child birth. Children suffering from severe anaemia due to malaria, malnutrition, victims of trauma, accidents or other disasters, as well as patients suffering from sickle-cell disease require blood transfusion.

Every ten minutes, somebody in Kenya needs blood. A man can donate blood after every three months and a woman can donate blood after every four months. It is a fact that after 120 days, our blood gets spoilt and new blood is required.

Hon. Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Member, you have one more minute. So, try to wrap it up.

Hon. Dawood: Hon. Temporary Deputy Speaker, I request my fellow Members of Parliament to support this Motion. We need 400,000 units of blood every year but the collection is less 180,000 units. Because of that, we should think how we can establish ICUs.

With those many remarks, I request Hon. (Dr.) Musimba to second the Motion.

Thank you.

Hon. Musimba: Thank you, Hon. Temporary Deputy Speaker. From the outset, I want to thank Hon. Dawood for such an extensive job he has done in enumerating this in this House. I want to go further and say that this is a very important Motion because we are talking about the economics of life.

As we discuss ICUs and blood transfusion centres or blood banks, we are talking about the health of our nation. In this regard, the very unity of our country is built on its love. We might disagree at many levels but ultimately, there is nothing like the Kenyan spirit; one which is endearing and unrelenting.

The face of people faced with the possibility of going to the ICU presents twofold challenges. One, is that the costs are prohibitive and they threaten the very fibre of a family unit. I have looked at very many cases of many friends when their loved ones enter a hospital. They never envision bills running into millions of shillings let alone even aspire to try and pull these resources together for their own betterment. When one of their loved ones enters into the ICU or HDU, it leads to complete devastation of the family. That is one, because of the loss of that life and two, that they carry a debt which they had not even planned for. That debt might take them a lifetime to settle or make them end up selling whatever resources that family had saved. This eventually affects the economic status of the affected families.

If more ICU centres are set up, they will bring down the costs because the law of economics says that if you have plenty, there is competition and vibrancy because people spread

these costs over time. Because we have a Fund like the NHIF, we could look at this as a source of funding for these ICUs, HDUs and blood transfusion centres.

When we have had terrorist attacks in the country such as the 1998 bombing, the Westgate attacks and the Garissa attacks, what always follows is an appeal for blood. It is sort of a knee jerk reaction. If we have blood banks spread all over this country, we will simply be saying the blood types and it will be brought. This is because it is stored in a national data centre which mobilises it. We are simply making it possible for the blood banks in this country to keep increasing the stock. This will be like a national grain reserve that we have for food because life is, indeed, precious.

You cannot negate the fact that in Kenya, the dependency ratio is 1:8. We look after a population of not less than 100,000 people; that is, for every loss of one person in Kenya, you are looking at the devastation of eight individuals who are in the family and friends. If you lose a grandfather or a grandmother, you are looking into the eyes of a family unit that is saying bye-bye to their *googoo* or *guuka* who has been very dear to them. This is the case and yet that person will readily say: "It is not worth because I have already lived my life. I want you people to live." So, you will get cases of euthanasia, which is mercy killing rising because the reality is that when they are lying there the bills are mounting by the day, for example, by Kshs100,000 or Kshs200,000 daily. This is, indeed, devastating. That *googoo* or *guuka* has many fire-place stories and heritage stories to tell us. Eventually we lose this because we lack this basic facility called "the ICU".

Since it is well entrenched within our Constitution, the provision of health services is, indeed, not a far-fetched thing to ask the Government and for our populace to put effort into providing these resources to establish these ICUs and blood bank centres.

Finally, in seconding this Motion, I want to talk about the road network and the accidents that we have. Nobody wakes up in the morning and wishes to end up in hospital. We all wake up with aspirations of living to the dream of Kenya which is being the best that we can and uplifting our own livelihoods and nation as it were. Accidents are a reality of life. Anybody can get an accident. It is bad to imagine that if you are, for instance, on the Nairobi-Mombasa Highway which traverses my constituency and God forbid you get an accident, you will ask what your evacuation time to Nairobi is to get healthcare. That is why establishing these facilities in every constituency in Kenya will ensure that wherever you are, as you are engaged in your social or economic endeavours, you need your aspirations be it visiting friends, you rest knowing that medical is an arms-length away from you and its quality will ensure that you live to serve this great nation.

I second this Motion and urge this House to make a momentous turn for Kenya.

I thank you and God bless Kenya.

(Question proposed)

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Members, please, if you know that this is the Motion you want to speak on, you can leave your card, but if it was for the previous one, remove it.

Yes, Hon. Nakara, Turkana Central.

Hon. Nakara: Asante sana Mhe. Naibu wa Spika wa Muda, kwa kunipatia nafasi hii ili nichangie Hoja hii. Kwanza, ningependa kumshukuru Mhe. Abdul Rahim Dawood kwa kuleta Hoja hii ambayo ni muhimu sana katika nchi yetu ya Kenya.

Mheshimiwa Naibu Spika wa Muda, jambo la kwanza, kuwa na kitengo cha watu hali mahututi katika kila hospitali ya eneo la Bunge ni njia moja ya kuokoa maisha ya watu wetu. Nikipeana mfano kwa sehemu ambayo nimetoka kule Turkana, tunasafiri kilomita 800 hadi mji wa Eldoret kuleta mtu ambaye amepata ajali na ni gharama. Ugatuzi nikupeleka huduma karibu na wananchi. Tukiwa na kitengo cha hali mahututi na cha kutoa damu kwa kila eneo la Bunge ni njia moja ya kupeleka huduma karibu na watu ili watu wapate huduma kwa njia iliyo rahisi kuliko tu kusafirisha watu kutoka maeneo mbalimbali hadi katika hospitali moja ya kaunti mahali ambapo huduma hii inapatikana.

Watu wa Kenya ni wafadhili wazuri. Katika nchi yetu ya Kenya tumebarikiwa na watu walio na mioyo safi. Kuna watu ambao wangependa kutoa damu ili kusaidia wenzao lakini shida ni sehemu ya kwenda kutoa damu hiyo. Kwa mfano, katika kaunti ya Turkana, kuna watu wangependa kuchangia damu lakini mahali pa kuelekeza hao wafadhili ambao wangependa kutoa damu yao ni shida. Kwa hivyo, tukiwa na kitengo kama hiki cha kutoa damu katika kila eneo la Bunge itarahisisha wafadhili ambao wangependa kutoa damu yao kuokoa maisha ya wengine na kupeana kwa haraka. Hii ni muhimu kwa sababu hata kama wewe ni mfadhili, kama huna sehemu ya kupeleka ufadhili wako, inakuwa vigumu kujipa moyo.

Ajali nyingi siku hizi zinatendeka kwa sababu ya mambo ya *boda boda*. Sehemu nyingi ambazo tumetoka utakuta kwamba mtu akipata ajali, kwa mfano akiumia goti ama kichwa lazima asafirishwe kutoka Lodwar hadi Eldoret ama Nairobi. Tukiwa na kitengo kama hiki cha watu mahututi kwa kila eneo la Bunge ni rahisi kupeleka huyu mtu mahali pale. Lazima tuhakikishe ya kwamba kwa wakati kama huu ambao vijana wetu wengi wanapata riziki yao kwa *boda boda*, wakati jambo lolote limetokea katika maisha yao, tuko tayari kuwasaidia bila gharama kubwa kwa maana wengine wao wanategemea hiyo *boda boda* kujipatia riziki ya kila siku na wengine wameajiriwa. Hata hizo *boda boda* siyo zao lakini wanapopata ajali, gharama ya kusafirisha huyo mtu mpaka mahali pa kupata matibabu ni kubwa. Unapata kama ameumia mguu inabidi ukatwe na anakuwa kiwete katika maisha yake.

Kuhusu jambo ambalo Mheshimiwa amesema kwamba tuwe katika kila eneo, msongamano mwingi uko katika hospitali ya kaunti kwa sababu ni moja tu. Watu wanasafirishwa kutoka sehemu zote za eneo la Bunge na wanapelekwa katika hospitali moja. Hapo unakuta msongamano katika hospitali hiyo na watu wengine wanapoteza maisha yao kabla hata hawajafikia daktari. Tukiwa na kitengo cha hali ya mahututi katika kila eneo itakuwa rahisi mtu kupata huduma kwa haraka.

Kama vile Mheshimiwa Abdul amesema, hospitali zingine za kaunti hazina vitanda. Utakuta wagonjwa wawili ama watatu wakilala katika kitanda kimoja. Kwa mfano, tuliona hospitali za Chuka na Isiolo ambazo ziko katika hali duni. Hali hii inaongeza ugonjwa mwingine ambao mtu hajatoka nao nyumbani. Tungeomba kila hospitali iwe na kitengo cha watu wa hali mahututi na sehemu ya kutoa damu iwe na vifaa vya kisasa ambavyo vinaweza kuokoa maisha ya mwanadamu maana nchi iliyo na afya ni nchi iliyo nzuri. Wakati nchi iko na matibabu mazuri hata watu wa nchi hiyo wanaishi miaka mingi ya kufurahia.

Mheshimiwa Naibu Spika wa Muda, ningependa pia kushukuru Mheshimiwa Abdul kwa kusema kwamba tunapokuwa na kitengo hicho akina mama wajawazito nao wawe na sehemu

maalum ya kujifungua. Utashangaa kusikia kwamba hospitali zingine hazina sehemu maalum ya kujifungua. Wajawazito wanajifungua katika nyumba ya kawaida ambayo haina malazi mazuri hata sakafu haijatengenezwa. Jambo hili linavunja moyo! Watoto wanazaliwa katika hali iliyo mbaya na hata wanaweza kupata ugonjwa. Kila hospitali iwe na sehemu safi na tena iwekwe vitu ambavyo ni vya kisasa na mazingira yawe ya kupendeza.

Ningependa kumalizia kwa kusema ya kwamba katika hizo hospitali pia ni lazima tuwe na wauguzi maana bila wafanyikazi ambao wamehitimu itakuwa vigumu kuhudumia wagonjwa. Kwa mfano, kuna mambo yalitokea katika hospitali moja. Mwanafunzi aliyemsaidia mama kujifungua aliosha mtoto na maji moto na yakamchoma. Ningependa pia Mheshimiwa Abdul ahakikishe ya kwamba tutakapokuwa na hivi vitengo katika kila eneo la Bunge, pia tutakuwa na wauguzi na madaktari wazuri ambao wamehitimu vizuri ili wasaidie katika kupeana huduma hii.

Mwisho, jambo la kuhuzunisha ni kwamba utapata kwamba madaktari ambao wamehitimu na wamekuwa katika chuo kikuu, wanapopelekwa katika kaunti zingine kufanya kazi, wanakataliwa. Hakuna njia tunaweza kuondoa ukabila katika nchi hii na kuwa na utengamano kama tunafukuza madaktari ambao wamehitimu. Tusihukumu mtu kwa sababu ya ukabila ama eneo. Tuongee kuhusu jambo hili pia kwa sababu kuna sehemu ambazo hawana watu ambao wamehitimu katika njia kama hizo. Lazima tukubali hawa watu wapelekwe katika sehemu hiyo wafanye kazi kama wahitimu ambao wamemaliza masomo yao kwa njia nzuri. Kwa hivyo, ningependa kukashifu kaunti ambazo zinafukuza wafanyikazi ambao wametumwa mahali pale na Serikali.

Kwa hayo machache, Mheshimiwa Naibu Spika wa Muda, napenda kuunga mkono Hoja hili. Asante sana.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Enock Kibunguchy.

Hon. (Dr.) Kibunguchy: Thank you very much. I also want to add my voice on this Motion. First of all, the spirit of the Motion and the intentions of Hon. Abdul are good but the reality on the ground will speak otherwise because healthcare is completely devolved. That is where the problem will come from. Like I said, the spirit is good and the intentions are noble. However, the reality on the ground will dictate otherwise. Let me just point on one, two or three areas that I think will be a problem when it comes to implementation. One area is personnel. I will pick up from *Mheshimiwa* Nakara who has just finished speaking where the intentions of devolution were very good initially but the people who have been given the mandate to midwife devolution in this country have completely misinterpreted it.

So we have a situation where even doctors and medical personnel are being discriminated against when they are transferred or posted to certain counties. Because they do not belong to the main indigenous groups of those counties, they are rejected. Those are the realities. The second reality is that health has been devolved. That is one of the biggest mistakes that we made with the current Constitution. Health should have and must, of necessity, come back to be a national function. Health, just like education and security, must be a national function. If we were at that level, this Motion would make excellent sense. Then, we will be talking to the Government and telling it to set up infrastructure and equipment here and there, but health being a devolved function, it might become very difficult for implementation.

The other problem that I have with this Motion is that it is rather narrow. It is talking about intensive care unit and blood transfusion. I would rather we broadened it up so that we

have well established referral units in every constituency in this country. Those units should obviously have ICU and blood transfusion units, but a lot more things like theatre, good wards especially for children and maternity units. That will be more holistic than just narrowing and zeroing in on just those two aspects of ICU and blood transfusion.

Let me go back to devolution. As representatives of Kenyans and as people who were elected to come to this Parliament, and seeing what is happening to the health sector and we are watching, the health sector is wobbling. When I trained as a doctor, there was never any time when you could see health workers, doctors and nurses going on strike. That is happening in this country. Health is in serious trouble and we need to wake up. If it means changing the Constitution, so let it be so that we can revert the health sector to the national Government. Let us leave the counties to deal with the very primary aspects of healthcare at the community level. When it comes to curative services in terms of personnel and human resources, that must be a national function so that the national Government knows where the shortages are and where they can deploy doctors. As it is happening, you find a county like Lamu does not have a single doctor. I read about it the other day in the newspapers.

We are talking about an issue that, in my view, should be a national disaster as I speak now. We are now handling the Health Bill and we shall try to incorporate some of these suggestions in the Health Bill, but in the long-run, we must get the health sector to become a national function.

With those remarks, I support. If the Member will come up with a Bill, we would like to bring in quite a number of amendments, so that rather than it being so narrow in terms of ICU and blood transfusion, which are noble and excellent things, we expand it. I have no objection to that, but we need to have a referral unit in every constituency that will be able to handle most of the emergencies. Not all, but most of the critical emergencies. Without anticipating debate, in two or three weeks, we will be talking about training of personnel in terms of emergency care. There is a Motion that has been brought here by my friend, Hon. Susan. When we come to the units in each constituency, then we want to ensure that the personnel who are working there, at the very least, have been trained and they know the aspects of emergency care before everything else.

I have talked about personnel. In this country, we have many universities that are now training medical doctors. We have the Kenya Medical Training College (KMTC) that has opened campuses in very many places. In my view, medical personnel should not be a big issue. It is the distribution of these people that is the biggest issue. But in terms of training, we now have universities and colleges, especially the KMTC, that are training some of our people in healthcare, but distribution is the biggest problem. We must find a way of dealing with the issue of distributing these medical workers between urban and rural areas. People are so scared to work in some rural areas these days because of the whole issue of insecurity in the country. I agree with the spirit of the Motion, but the scope needs to be expanded and made more holistic.

With those remarks I support.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Mary Seneta, Member of Kajiado County.

Hon. (Ms.) Seneta: Thank you, Hon. Temporary Deputy Speaker. I want to congratulate my colleague for having thought of this critical requirement within our health sector in this country. Indeed, what is on the ground in our counties is a pathetic situation. This has made

Kenyans pay quite a lot in terms of ICU services. You can only get these services in the big private hospitals. This has made it very costly such that many of our Kenyans are dying because they cannot access ICU.

As has been said by my colleague, indeed, we need to devolve these important facilities, not only to the county level, but also to the constituency and divisional levels. We need to devolve these services because they are needed by most Kenyans. Given the situation of our roads today, most Kenyans who are involved in road accidents die because they cannot access these critical services to save their lives. Therefore, the ICUs need to be devolved to all our hospitals.

We also need other important facilities in our hospitals. For instance, children who are born prematurely cannot access neonatal nurseries where their lives can be saved. These facilities should be devolved not only to the counties and the constituencies, but all the other levels, so that all Kenyans can access them.

I support the Motion.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I give the Floor to Hon. Patrick Makau, Member for Mavoko.

Hon. King'ola: Thank you, Hon. Temporary Deputy Speaker. From the onset, I want to commend Hon. Dawood. One would think that he is a medical doctor. That means that he has put a lot of research into this issue. The health sector in this country is wanting.

Devolution of the health sector has done more harm than good to Kenyans because personally, I have visited many hospitals. When you go to Kajiado, Machakos, Kangundo and Kathiani to just mention a few, Kenyans are suffering because of lack of the basic needs and facilities in these hospitals. In this Motion, as a colleague has said, if we can move it with amendments because I have seen that the Mover has just said "consideration", we need to think of implementation. Right now, there is a lot of money that is going to waste. We are losing lives because of misuse and lack of capacity. We have very advanced machines in this country but we have very few experts. We have persons dying because of poor diagnostics and X-rays. We cannot sit down as leaders and see Kenyans dying like this. It is high time, as someone had said, even if it means changing the Constitution and health being a national function, that we help save Kenyan lives and other lives within the region. In East Africa, all persons within the region look at Kenya as a big brother. If we collapsed the medical facets that we have, then not only is it going to affect Kenyans but a lot of East Africans.

I know he has spoken about blood transfusion. At present, blood donors are only given sodas, bread and biscuits for them to come and donate. It is high time we gave incentives for blood donors and for it to become compulsory for every county and constituency to give incentives to blood donors for us to improve our blood banks. Right now, we have shortages of blood, particularly blood group 'O', which is the universal donor. When I look at this Motion, it is a timely one which needs to be advanced to all Kenyans if it is possible, for every constituency to have an intensive care unit. It is a good story but is it possible? If the county hospitals right now cannot even meet the needs of Kenyans, what are we doing as a nation? It is high time we did something.

If the pillars that the Jubilee Government and its manifesto promised Kenyans would be required to streamline health facilities are there, the time is right now that we put more money

into the health sector otherwise a nation without a healthy population is not a nation that is ready to attain any heights of development.

This is a good Motion. I hope as we debate we are going to bring in amendments that will look at how the national Government can come with interventions and mostly training of staff. From the time health facilities were devolved, we have seen doctors leaving to seek greener pastures not only because of the salaries but because of the structures that are put in place in the counties. Recently, I heard one of the governors saying that these machines can just be used easily. It is like changing from a Probox to a Mercedes. Medical science is not something that just gambles with the lives of our people. We need to train and retrain our staff to handle the machines that are coming. Right now, most of the medical machines require Information and Communications Technology (ICT) knowledge. It is not something you can just train people on overnight. As we debate this Motion, I hope that the professionals in this House will soon come up with a good Bill.

With those few remarks, I want to support the Motion and thank the Mover of the Motion.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Cyprian Iringo.

Hon. Kubai Iringo: Thank you, Hon. Temporary Deputy Speaker for giving me this opportunity to contribute to this Motion. I want to congratulate my colleague and county mate, Hon. Dawood, for having brought this Motion to this House, looking at the plight of our citizens who are in dire need of health services.

This Motion should have come earlier than yesterday because the leadership in Kenya has for a long time seemed to neglect the health sector especially where people who are not able to support themselves or the common *mwananchi* are concerned. Healthcare has become so expensive in this country in that we are losing a lot of lives not only due to lack of equipment, infrastructure or hospitals but also due to the colossal amounts of money required especially when it comes to terminal ailments or serious diseases like cancer, kidney failure and complicated surgeries.

We have lost so many lives especially when we have to transport patients from far places where infrastructure is very poor and one cannot get even a helicopter to land and pick up those people or a vehicle to take people to hospital. We have lost lives which could have been saved. We have lost so many people when they are involved in accidents because of lack of blood. I can give a personal example of when I was shot some seven years ago by thugs. It took over 12 hours to bring me from Maua to Nairobi Hospital. When I came to Nairobi Hospital, it was declared that most of the nerves on my leg which was shot were destroyed and they could not be repaired. However, if there had been a hospital in Meru which could handle such a case or emergency, my leg could have been saved and I could be walking upright like anybody else today. Today I limp because of lack of those medical facilities. I support this Motion in that we need to have these facilities closer to the people as much as possible.

Apart from the ICU and blood banks, even in our local places, as much as we have many schools, you will find one location with three or four schools and all these people who go to these schools fall ill one time or the other. At the end of the day, you will find some are languishing with illnesses at home because they cannot access medical care and there is no infrastructure to even take them to hospital. There is not even a single small health centre where

they can rush for Panadol or any other medicine which should be a common thing in each and every hospital.

A healthy nation is a strong nation and is one which can develop. Without healthy people, we cannot say that we are building any nation. We need hospitals in each and every county equipped with all the facilities which appertain to medical healthcare. Let us not be dependent on private hospitals which are just localised in Nairobi and a few other towns in this country and at the end of the day, they are there to make money. If your pocket is not fat enough, you will never get into those hospitals and if you get in there, to get you out dead or alive will be very expensive for the family. We need the Government to invest strongly in medical health support and each and every county to get all the facilities such as blood banks. We do not need to rush for blood in Embu or Nairobi so that it can be taken to Maua or Voi. We need a blood bank nearby where it can be accessed in case of need.

We are losing so many mothers during childbirth and it is said many of them bleed to death. Nurses and doctors can see it but the nearest bottle of blood which can save this life is 200 or 300 kilometres away. This needs to be as close as possible to the people.

Hon. Temporary Deputy Speaker, we need personnel to do these jobs. We need doctors, nurses and dentists trained. I would also propose that we have medical personnel in this country centralized. Presently, at the county level, each county is holding its own staff to ransom. When the county governments came into being, most of the medical staff were retained in the counties in which they were serving. It is becoming very difficult to transfer individual personnel from one county to another. At the end of the day, some counties are deficient of doctors and technical staff yet other counties have excess of the same.

Hon. Temporary Deputy Speaker, I would support my colleague, Hon. (Dr.) Kibunguchy, that we need to decentralize the health sector, especially at the personnel level, and at serious medical treatment levels. Let counties handle clinics, dispensaries and the small hospitals but the big hospitals should be centralized so that the Ministry of Health can look into each and every hospital across the country uniformly. If we need a dentist in Mandera, we should be able to do so. As it is now, we cannot transfer that dentist from Kisumu to Mandera because he belongs to Kisumu County. Therefore, people in Mandera will continue suffering. Therefore, I support the proposal to centralize medical staff. We should let the Ministry oversee the distribution of doctors and other medical services in our country.

Hon. Temporary Deputy Speaker, on blood banks, we only have six blood banks in this country yet this country is large. Therefore, if there is a person somewhere where there is no blood bank and wants to give a donation, he will have to either give blood donation when there is an emergency or donate blood and have it transferred to that far place. When it is required, it will be sought from there. Therefore, we need more blood banks to store our blood.

Hon. Temporary Deputy Speaker, we have invested so much as far as ambulances are concerned. But if in all devolved hospitals at all Level 5 or 4 hospitals we have an intensive care unit, renal facility and enough beds for that matter, one can just hop from point "A" to point "B" and get the required treatment. But here we have ambulances running up and down and end up in Moi Teaching and Referral Hospital, Eldoret and Kenyatta National Hospital, Nairobi because those are the only referral hospitals we have.

Hon. Temporary Deputy Speaker, cancer patients have to wait for treatment for months, if not years; because of unavailability of beds or chemotherapy equipment and other facilities.

We need these facilities devolved. Due to the peoples' lifestyle and the environment that we live in today, we have so many cancer cases in the country. Some of the cases could have been saved but people are dying. Why? It is because cancer patients have to wait for six months or a year to get chemotherapy services. The procedure is carried out in only a few hospitals in Nairobi. If we had many of them spread across the country, screening and treatment would be much easier. Gone are the days when cancer was said to be untreatable. People are going outside the country to get treated. We need the same here. The money taken out there to treat a single patient could have been invested here to save many lives.

I thank Hon. Dawood for bringing the Motion to the House. Let it be developed further to touch on all spheres of the health sector in this country.

With those remarks, I beg to support.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Alice Chae.

Hon. (Ms.) Chae: Thank you, Hon. Temporary Deputy Speaker, for giving me the opportunity to contribute to this Motion. I would like to thank Hon. Dawood for the good work he has done. This Motion will make us think and look at the direction we are taking our country as far as health issues are concerned.

A healthy nation is a working nation. My brother, Hon. Dawood, has talked about having ICU and blood transfusion units in every constituency. Our population is approaching the 44 million mark. Having only referral hospitals equipped with ICU facilities is alarming. With 44 million people in Kenya, we should expect more patients because of unavoidable circumstances. Therefore, we need to add ICU facilities in order to serve our people more effectively. We now have 47 counties. I neighbour Kisii County which has five beds, as my brother said, for blood transfusion. That means the hospital does not have ICU beds. People in Nyamira go to Kisii Hospital. The relatives of patients who happen to require blood have to entice people to donate blood. That is how people in Nyamira County can donate blood. This is the time we need to emphasize on patriotism in our country because we are brothers and sisters. If I have blood group A positive, it should be used to treat a patient with the same blood group anywhere in Kenya; be it in Mombasa or northern Kenya, because blood is not tribal and it is a necessity to all of us. We use it universally.

We need to create a culture of donating blood where men donate after every three months and women after four months. This is a good chance and it will make us healthy as we move along. If the facilities are far from us, it will be hard for us, as communities, to contribute to the preparedness of this country as far as emergencies are concerned.

Hon. Temporary Deputy Speaker, the other thing I want to add, as we go on with the Motion, is that we need to support it with a lot of amendments because we need to prevent our population from going to ICU. If they receive the right medication at the right time, maybe becoming seriously ill can be prevented. I ask that the Level 4 hospitals in every constituency be equipped with all the necessary facilities to ensure that the population that is there is comfortable with the medication given. When women go to give birth, maternity wards should be ready to receive them. Some of them are not well equipped. There are structures but inside is not like a labour ward; it looks like an ordinary ward. Those are the things we need to look into to ensure that the facilities are there to cater for children, women and men so that we can have a population that is strong and healthier.

Therefore, with amendments, we support the Bill. We should ensure that it trickles down to the dispensaries, where people go for treatment. We are now talking about counties. We should ensure that roads are constructed because at times people die on the way to hospital because of the poor state of roads. Sometimes patients get to hospitals but they are told that a certain facility is not there and, therefore, they need to be referred to, say Nyamira. Getting there is not easy because there is no road. So, our people's lives get wasted. We need to be prepared in all ways possible to ensure health services are well catered for and our people enjoy the fruits of this nation.

With those remarks, I beg to support.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Stephen Karani.

Hon. Karani: Thank you, Hon. Temporary Deputy Speaker. I also stand to support this Motion but with amendments. It is a very noble Motion talking about saving lives and we all appreciate it. However, like Hon. Kibunguchy said, we may land into problems because health services are devolved. I am a member of the Departmental Committee on Health and, without anticipating debate, I know the Health Bill is soon coming to this Parliament. It will address some of these challenges. The mistake we made as Kenyans was to devolve health services in a hurry. That is why we are having a lot of problems. I went to Nyahururu Hospital, a Level 4 hospital in my constituency, which handles an average of about 800 patients in a day and the situation is pathetic. When you see the way patients are suffering, you really feel for them. As Kenyans, we ought to have devolved health services gradually. We would have started with devolving dispensaries then move to health centres instead of just devolving the entire health sector the way we did.

Recently, the Government leased medical equipment to 98 hospitals in this country, to be specific, two hospitals in every county, Moi Teaching and Referral Hospital (MTRH) and Kenyatta National Hospital (KNH). The information I have is that intensive care unit equipment are part of that deal. This Motion by Hon. Dawood may have been overtaken by events because ICU equipment are part of that deal. I do not know whether we will be duplicating the functions. That is why some of us need to sit down with Hon. Dawood and see the amendments we can propose.

I have a problem with putting up blood transfusion units in every constituency. As you know, we have 290 constituencies. The way I understand blood transfusion units is that they are units where you go to donate blood. The blood is screened and stored. What we need are blood banks in constituency hospitals and not blood transfusion units. In fact, I would be happy having mobile blood transfusion units such that if my constituents in Nyahururu want to donate blood, that unit can come to Nyahururu. We can advertise and people can come and donate blood. Storage of the blood is totally a different aspect and it can go to these other hospitals.

With those few remarks, Hon. Temporary Deputy Speaker, I support. Thank you.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Patrick Wangamati.

Hon. Wangamati: Thank you, Hon. Temporary Deputy Speaker, for giving me this opportunity to join other hon. Members to contribute to this very important Motion. I also thank Hon. Dawood for bringing this Motion. It has come at a time when Kenyans are wondering whether leaders see what is happening in our hospitals. As we are talking, many hospitals in this

country have no medicine. The fact is that a country with no healthy people is going down. We are going back to the dark days where medicine could not reach hospitals. Now that healthcare is devolved, we do not see why medicine is not in hospitals. This is the question that most of us should ask, even if it means the national Government sitting down with the county governments to find out why medicine is not in hospitals. Why do we say the national Government is not helping county governments while the national Government blames the county governments for not doing their part? I am worried as an old man because the basic thing in a hospital is medicine. Let medicine be in hospitals so that patients can get them. We must look at why we do not have medicines in hospitals. Is it because we do not have money or is it because we do not have the manpower? Let us look at that.

While I support this Motion because we need to have ICUs, let us also manage what we have. We have certain equipment in most of our hospitals. You will find that hospitals are being run down in the counties. Let us manage what we have before we talk about having more ICUs. As Members of Parliament, we should whip the national Government and the county governments to sit down and solve this problem. We have many doctors and we cannot allow our hospitals to be run down. I am very thankful to the Mover for this Motion. However, let us look at the problem we have in the hospitals at the moment.

Thank you, Hon. Temporary Deputy Speaker, for giving me this chance.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Hon. Ndirangu, can you press the intervention button so that I can give you an opportunity? Go ahead.

Hon. Kariuki Ndirangu: Thank you, Hon. Temporary Deputy Speaker, for giving me this opportunity to add my voice to this important Motion. I want to take this opportunity to thank Hon. Dawood for this very important Motion that he has brought to this House.

Health matters in this country have been taken lightly as if nothing is happening. Sometimes we are losing lives because of negligence and lack of facilities. This Motion is important to all Kenyans. If we take the example of what is happening in our counties, it is a loss because we are not getting the right services. We have so many big hospitals and I would like to give the example of Mama Lucy Hospital in my constituency.

We have huge facility with many big machines that are of importance to health but we do not have the necessary expertise. So, I support this Motion because the number of intensive care units that we have as a country is quite discouraging. By supporting this Motion, we will have access to healthcare as one of the very important services that we require from our Government.

Hon. Temporary Deputy Speaker, Hon. Dawood's Motion is within the aspirations of Vision 2030 and relevant within the framework of the Millennium Development Goals (MDGs) and is consistent with the aims of the Sustainable Development Goals (SDGs). Having these units in every constituency will help us contain many avoidable deaths and save lives across the country. This Motion is a well thought out idea and for that reason I support it.

Thank you, Hon. Temporary Deputy Speaker.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Andrew Mwadime of Mwatate.

Hon. Mwadime: Thank you, Hon. Temporary Deputy Speaker, for this opportunity. Indeed, the country is experiencing a series of fatal emergency situations that necessitate the need for urgent medical care and blood transfusion. Considering behavioral change of people, diseases have also taken a different direction. Some few years back, there were diseases which

were associated with elderly people, but at the moment, they have extended to young people. Therefore, starting these units will augur well for disease outbreak which can be treated at the constituency level.

It is also important to consider some constituencies in terms of infrastructure and the change of mode of transport because we never used to have the *boda bodas* before, but they are all over nowadays. As a result, you cannot miss at least two accidents per day. Therefore, setting up these units will assist the country in curbing this problem.

Considering the infrastructure of some constituencies and their vastness, if we do not set them up, we will lose quite a number of people because they live far. Therefore, setting up these units will really assist our people and save lives.

The goals of Vision 2030 augur well for this idea, which is well thought out by Hon. Abdul. I congratulate him for this idea and for bringing this Motion. If you go to most counties, there is a problem in the health sector. Therefore, if we are going to have such units, it will reduce the current problems that we are facing.

With those few remarks, I support the Motion.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Hon. Samuel Ndiritu of Gilgil.

Hon. Ndiritu: Thank you, Hon. Temporary Deputy Speaker. I would like to start by congratulating Hon. Dawood for thinking outside the box. We are all conditioned that we can only get referral services in Kenyatta National Hospital (KNH) or in Eldoret. It is time we thought wide and took those services closer to the people. I would also like to thank the Government for the initiative they have taken. I also congratulate the governors who have accepted that this equipment is not for the Government but for the purpose of taking services to the people. Those who have accepted them like Nakuru, where I come from, have already been launched. We appreciate and applaud the Government.

For intensive care units in every constituency, we have to admit that it is a bit of a tall order, but it is a very good idea. An intensive care unit especially in my constituency, where we have 60 kilometers of the international trunk road, A104, is essential. That is the only place it crosses in the county because from Nairobi to Naivasha, there is Kinungi and Mai Mahiu but that section of the road is not a dual carriageway but the traffic is very heavy. The topography in that area is flat so, there is a tendency of over speeding. Almost on a weekly basis, if not on a daily basis, we have fatal accidents. The only health facility that is between Naivasha and Nakuru is a faith based hospital. I once took a road accident patient there and the only thing they could do was to give some pain killers. They could not commence any treatment until there was guarantee from somebody. I had to be the insurance for the patient. If we had a facility that would take care of such a person in Gilgil, it would have been easy and the patient would not have undergone a lot stress. It makes a big difference between evacuating a patient 50 kilometres away and 10 kilometres away. It might mean the difference between life and death.

Many Members have talked about devolution of health services. For one, I have been of the opinion that if we are to do a referendum, this is one item we should look at to change the Constitution so that health services remain national. If we were to devolve any of those services then we should be talking about health centres and dispensaries.

Medical personnel are a worried lot because they believe that once counties train their own people, they will not have any job; they will be told to go back to their counties of origin.

We have heard of some counties which have refused to take some interns who have been sent to their hospitals just because they do not originate from there. It is high time we started thinking in terms of lives of our people. Devolution was not meant to alienate some people. There are some counties that do not have trained doctors or enough medical personnel. This is what brings me to my next point.

We might talk about these facilities going to our counties or our constituencies, but they will never have personnel, so they will never be of any help to the people. Maybe what the counties are thinking more about are the ambulances. When they are seen running, there would be that feeling that the county has done something. That is fine. We need to have ambulances, but medical equipment and personnel are more important. I conditionally support this Motion. The condition is that we should first start from the basic and look at the facilities. Somebody has said that as much as we are devolving health facilities, we should have an institution that posts doctors and other medical personnel to different places. I know we cannot have this until we change the Constitution. Otherwise, in some years to come, we will keep crying, we will have these facilities to us, but they will be of no use.

With those few remarks, I support, but we need to add some meat to this Motion, so that when it comes to the House as a Bill, we can have more input.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): I now give the Floor to Ferdinard Wanyonyi.

Hon. F.K. Wanyonyi: Thank you, Hon. Temporary Deputy Speaker, for this opportunity. I also want to add my voice to what has been said. I thank the Member for coming up with this noble idea. As somebody said, a healthy nation is a working nation. I also want to declare to this House that I am fool because every year I donate blood except for the last three years because I have been very busy. I have been donating blood to this nation.

When I was in primary school, on International Labour Day, which is celebrated on 1st of May, there used to be a campaign going round schools for pupils to donate blood. I do not know whether any of the Members can remember this. Some of us remember that on the International Labour Day, we used to donate blood to the Blood Transfusion Unit. We have a problem in the countryside in terms of critical illnesses and accidents. We are a working nation and our people are busy moving from one place to the other and many accidents occur.

When you rush patients to the nearest health centre, you are disappointed. Patients cannot undergo blood transfusion. With the passage of this Motion, I believe the Committee on Implementation will fast-track these provisions to make sure that every health centre has a blood transfusion centre. I am not a medical person, but I know that we need a blood bank other than the transfusion units. That can be done, but the facilities are very expensive. So, every health centre should, at least, have a blood bank, so that they can save the lives of our citizens.

Recently, the governors hired very expensive equipment. I am alive to the fact that most of these equipment are on lease. The biggest problem in this country is that we get equipment which we cannot maintain. You find that very expensive equipment is not maintained. Recently, I had a case at the Bungoma District Hospital where a machine has been lying idle because a small part is broken down. With the hiring and leasing of these machines, the Ministry of Health should quickly train technicians to maintain the equipment, so that when we have accidents, equipment in a district hospital or a dispensary are well maintained.

Thirdly, I am also alive to the fact that we have enough personnel, but because of the low salaries and poor benefits to the health workers, most of the trained personnel find work elsewhere. Some of them find work in southern part Africa. About five well trained medical personnel from my constituency have found their way to Namibia. This is because of better pay. I also want to suggest that much as we are crying about the health facilities, we should also pay our medical personnel well so that we can retain them.

An Hon. Member: Time!

Hon. F.K.Wanyonyi: That is not the Member's problem. Hon. Temporary Deputy Speaker, protect me from the Member sitting in front of me. I have been given the chance. Our personnel should be trained and paid properly, so that we can retain them in our country.

Lastly, but not least, I want to agree with Hon. Kibunguchy and another Member, who have said that we made a mistake in devolving the health sector. The county governments were ill prepared to have this function devolved to them. This function needs to be reverted to the national Government. The health sector is very important and we devolved it prematurely. The county governments were not prepared to have these facilities devolved to them and this is why we are having a lot of problems. From the time I was born, I have never heard a medical doctor going on strike. It is the first time that I am seeing medical doctors going on strike because we are forcing them to work under very difficult circumstances. It is not ethical for a medical staff to go on strike, but this is happening because of the poor pay and the facilities that we have offered them.

With those few remarks, I support the Motion. However, when this matures into a Bill and it gets to the Third Reading, we will move some amendments, so that we can streamline the health sector.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Lastly, I now give the Floor to Leonard Sang. You have two minutes.

Hon. Sang: Thank you, Hon. Temporary Deputy Speaker for giving me this opportunity to contribute to this very important Motion. I want to congratulate my friend, Hon. Abdul Rahim Dawood, for coming up with this very important Motion.

He has captured it as if he is a medic. I want to thank him very much. The issue of fatal emergencies is a real one in our Republic. A good number of patients die because of very minor complications especially in accidents. Hon. Dawood captured it so well and indicated that the country has been experiencing a series of fatal emergency situations that necessitate the need for urgent medical care and blood transfusion. It has been unfortunate. We have lost a good number of people. I wish Hon. Dawood could have come up with statistics showing the number of people who have died because of minor complications. It is also a very big concern that we lack blood reserves. In my constituency, I met an old woman who had a complication of the kidneys. For around three days, she was looking for blood everywhere. We called a good number of hospitals to confirm if they had blood. Fortunately, I called a medical officer at Kapkatet and he told me that they had blood. It is very important for us to establish these centres, not necessarily at the constituency level, but even at the county level, so that we can have blood reserves to assist the patients who require blood transfusion.

The Temporary Deputy Speaker (Hon. (Ms.) Shebesh): Your time is up. Hon. Members, the Motion on the Establishment of Intensive Care and Blood Transfusion Units has a balance of one hour and 37 minutes.

ADJOURNMENT

Hon. Members, the time being 1.00 p.m., this House stands adjourned until this afternoon at 2.30 p.m.

The House rose at 1.00 p.m.