

NATIONAL ASSEMBLY

OFFICIAL REPORT

Wednesday, 5th March, 2003

The House met at 9.00 a.m.

[Mr. Deputy Speaker in the Chair]

PRAYERS

QUESTIONS BY PRIVATE NOTICE

MURDER OF MR. MUHIA TUBE

Mr. M. Kariuki: Mr. Deputy Speaker, Sir, I beg to ask the Minister of State, Office of the President, the following Question by Private Notice.

(a) Is the Minister aware that Mr. Samuel Muhia Tube was killed on 15th January, 2003, at Kambyamet Scheme Naishi, Njoro, by a person or persons known to the family?

(b) Is he further aware that a report was made at Naishi Police Station by the members of the family on 16th January, 2003, and on 20th January 2003, and the police failed to take action to apprehend the known suspects?

(c) What is he doing to ensure that the murder suspects are brought to book?

Mr. Deputy Speaker: Is the Minister of State, Office of the President here?

An hon. Member: Not here!

Mr. Deputy Speaker: This is very strange, we thought we voted for change! What we are seeing is what we used to see and---

Hon. Members: It is worse!

Mr. Deputy Speaker: I hope the Minister will be here to answer the Question because the Chair will not continue asking Ministers to be in Parliament when they should. They should know their work! So, I will come back to that Question, although, normally, we should not be coming back to Questions by Private Notice.

Next Question, Mr. Muiruri!

MANUFACTURE OF UNHYGIENIC BREWS

Mr. Muiruri: Mr. Deputy Speaker, Sir, I beg to ask the Minister for Trade and Industry the following Question by Private Notice.

(a) Is the Minister aware that Kiroche Industries situated in Naivasha, is manufacturing and selling various types of unhygienic brews which are poisonous and contain very high percentage of alcohol?

(b) Could the Minister take urgent action to close down the factory and prosecute the management?

Mr. Deputy Speaker: Is the Minister for Trade and Industry not here?

Hon. Members: It is the same case! He is not in!

Mr. Deputy Speaker: Again?

Next Question, Mr. Sambu!

GRAVELLING OF ROAD D288

Mr. Sambu: Mr. Deputy Speaker, Sir, I beg to ask the Minister for Roads, Public Works and Housing the following Question by Private Notice.

(a) Is the Minister aware that Road D288, section between Eldoret (Rivatex) and Simat Centre, was recently gravelled?

(b) Is he aware that the contractor used silt and red soil rather than murrum to gravel the road and, as a result, the road has been rendered impassable?

(c) Who is this contractor and how much was he/she paid?

(d) Could the Minister take immediate steps to ensure that the road is gravelled according to the laid-down specifications?

Mr. Deputy Speaker: Is the Minister for Roads, Public Works and Housing not here?

Now, this is really serious and the Chair takes a very grave view of this. I would rather, perhaps, the Leader of Government Business was here. He is not here either! So, I think the Chair will later take up this matter with the Leader of Government Business because, certainly, we cannot run the House this way. Ministers must be in the House to answer Questions.

Mr. Muiruri: On a point of order, Mr. Deputy Speaker, Sir. I want to draw the attention of the Chair to the fact that this Question is before this House for the third time now, and each time the Minister has given unsatisfactory answers, and in every case the Chair has ruled that the Question be **[Mr. Muiruri]** deferred. So, this is the third time the Question has appeared on the Order Paper. This a much more serious matter and the Question is a very important one. People are dying because of the manufacture of illicit drinks. Could the Chair go ahead and use its powers?

Mr. Deputy Speaker: Mr. Muiruri, I do not think there is anything the Chair can do at this moment. I know this Question was deferred last time, and now the Minister is not in the House. What the Chair can do now is to defer the three Questions on the Order Paper.

But then, I would like the Front Bench and even hon. Members, to know that when we defer Questions, it creates a backlog of Questions coming on the Order Paper. I would like to appeal especially to Ministers, to ensure that this does not happen again.

MURDER OF MR. MUHIA TUBE

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- (a) Is the Minister aware that Mr. Samuel Muhia Tube was killed on 15th January, 2003, at Kambyamet Scheme Naishi, Njoro, by a person or persons known to the family?
- (b) Is he further aware that a report was made at Naishi Police Station by the members of the family on 16th January, 2003 and on 20th January 2003 and, the police failed to take action to apprehend the known suspects?
- (c) What is he doing to ensure that the murder suspects are brought to book?

(Question deferred)

MANUFACTURE OF UNHYGIENIC BREWS

(Mr. Muiruri) to ask the Minister for Trade and Industry:-

- (a) Is the Minister aware that Kiroche Industries situated in Naivasha, is manufacturing and selling various types of unhygienic brews which are poisonous and, contain very high percentage of alcohol?
- (b) Could the Minister take urgent action to close down the factory and prosecute the management?

(Question deferred)

GRAVELLING OF ROAD D288

(Mr. Sambu) to ask the Minister for Roads, Public Works and Housing:-

- (a) Is the Minister aware that Road D288, section between Eldoret (Rivatex) and Simat Centre was recently gravelled?
- (b) Is he aware that the contractor used silt and red soil rather than murrum to gravel the road and, as a result, the road has been rendered impassable?
- (c) Who is this contractor and how much was he/she paid?
- (d) Could the Minister take immediate steps to ensure that the road is gravelled according to the laid-down specifications?

(Question deferred)

Mr. Ndambuki: What are your powers?

Mr. Deputy Speaker: Order! Mr. Ndambuki, you just cannot address the Chair while sitting down?

Mr. Ndambuki: On a point of order, Mr. Deputy Speaker, Sir. It is very interesting, we have not even finished a month, only to see the Government side just getting tired, and we have so much work which we need to deliberate on in this House! Could the Chair give a warning to Ministers to be coming to the House in good time? This is not the first time and we have a long way to go!

Mr. Deputy Speaker: The Chair has already given a warning. I do not think there is anything else I need to do. I have said, and I want to repeat, that I want to take it up personally with the Leader of Government Business. Certainly, there must be a change, at least, on this issue. We cannot allow it to continue

Mr. Wamwere: On a point of order, Mr. Deputy Speaker, Sir. I am wondering whether, while the Chair has cautioned Ministers to be present to answer Questions--- The Chair should also point out to them that, in fact, in answering Questions, they need to depart from the "KANU culture" which motivated Ministers to answer Questions as if they were at war with the people, and as if the purpose of answering Questions is to counter people's interests? Let Ministers answer Questions in a manner that can help the country to move forward, rather than block its progress. I think this is very important.

Mr. Deputy Speaker: Mr. Wamwere, you see, the issue here is not how Questions are being answered. The issue here is that those who are supposed to answer Questions are not there. So, we are addressing the issue of absenteeism, not the manner in which Questions are supposed to be answered.

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

Mr. Deputy Speaker: Order! Mr. Wamwere, your point has been taken! Please, sit down.

Mr. Sambu: On a point of order, Mr. Deputy Speaker, Sir. I would like to request you to rescind your earlier decision that we move to the next Order. Given that the Minister has come in, particularly with regard to the first Question, could I kindly request you to rescind your earlier ruling that we move to the next Order?

(Several hon. Members stood up in their places)

Mr. Deputy Speaker: There is a point of order. Let me respond to the point order raised. Mr. Muiruri, when a point of order is raised, you wait until the Chair responds. You do not just put two points of order at a time.

You said that the Minister responsible for Question No.1 by Private Notice has come. Who is that Minister?

Hon. Members: He is there!

Mr. Deputy Speaker: Which one?

An hon. Member: He is unknown!

(Mr. Tarus stood up in his place)

Mr. Deputy Speaker: Order! Mr. Tarus, are you coming to answer Questions?

The Assistant Minister, Office of the President (Mr. Tarus): Mr. Deputy Speaker, Sir, I would like to apologise for the delay---

Mr. Deputy Speaker: Order, Mr. Tarus! You are not answering any Question because I have already moved to the next Order. So, you cannot answer the Question.

The Assistant Minister, Office of the President (Mr. Tarus): Mr. Deputy Speaker, Sir, the answer for Question No.1 by Private Notice is not ready---

Mr. Deputy Speaker: No, Mr. Tarus!

(Several hon. Members stood up in their places)

Order! Order! You are starting very badly, Mr. Tarus. I am telling Mr. Tarus that, as an Assistant Minister, to come and answer Questions at 9.10 a.m., he is starting very badly. He is late and we are not going to have that Question back because I have already moved to the next Order.

Next Order!

MOTIONS

REVIEW OF DOCTORS' AND NURSES' SALARIES

Mr. Rotino: Mr. Deputy Speaker, Sir, I beg to move the following Motion:-

THAT, while appreciating the critical role played by the nurses and doctors in the provision of medical services to wananchi; aware of the difficult and poor working conditions prevailing in all public health institutions and noting with concern that salaries for health workers have not been reviewed for more than ten years; this House urges the Government to appoint a Salaries Review Commission to review the salaries, allowances and other benefits for the nurses and doctors; and that the findings and report thereon be tabled before this House within three months after the appointment of the Commission.

Mr. Deputy Speaker, Sir, I am moving this Motion with a lot of concern because our health institutions are in a very poor state and bearing in mind that we cannot rule people who are not healthy. I am very concerned because we post doctors, nurses and clinical officers in remote areas where there are no facilities at all. We spend a lot of money training these doctors and yet no professional can deliver if he is not given the facilities that he requires to be able to deliver the services, or to show his professionalism. In the rural areas, where most of us who are pastoralists come from, the health services are very poor. At the end of the month, we pay doctors and then we complain that they are not doing a good job, and yet the facilities there are not very good.

Mr. Deputy Speaker, Sir, the salaries of doctors are very poor and yet they spend more years in the university than lawyers, teachers and economists. We spend a lot of money training these doctors and nurses and yet we do not remunerate them well. They play a key role in our health institutions and we need to consider this very much. This Motion seeks the permission of this House to set up a special salary review commission so that they can go round the country and look at the conditions of the facilities in our health institutions, and then come up with recommendations of how we are going to improve the infrastructure and the institutions to allow the doctors and nurses do their work comfortably.

Mr. Deputy Speaker, Sir, if you go to the rural areas, there are no vehicles in those institutions. For example, Kapenguria District Hospital in West Pokot District has only one doctor, and the hospital is supposed to serve more than 200,000 people. It is the only big hospital in the district. There is no vehicle there. The ambulance which was sent there two years ago had an accident. When the doctor who is on call is supposed to be picked, there is no vehicle to bring him. During the night, maybe, when he comes for operations or for emergency services, he cannot even be taken back to his house because the vehicles are not there, and yet, if you go to the Ministry headquarters, Afya House, there are many vehicles lying there. A Minister has three vehicles and his assistant Minister has two vehicles to use. In the district hospitals where doctors are supposed to serve, there are no medical facilities.

Mr. Deputy Speaker, Sir, I remember a case where we lost a very qualified person because our medical institution did not have the facility to do the right diagnosis for malaria or meningitis. We lost that officer because she was suffering from meningitis and yet they were treating something else. These are facilities that the doctors are supposed to be given to be able to deliver these services.

Mr. Deputy Speaker, Sir, we have, at least, 50 or 100 doctors leaving this country every year, going to other countries like Botswana, South Africa, the United States of America (USA) or the United Kingdom (UK). First of all, in those countries, they are given facilities. When a doctor moves from this country, for example, to South Africa, first of all, he is given a well furnished house, a car of his own, and he can drive himself around. He is given all the facilities that he requires to do his work. As I have said, we spend a lot of money training these professionals, and yet we cannot retain them here. We have what we call brain-drain from this country and yet we have qualified personnel. They do very well in South Africa, Botswana and the UK. We should be able to retain them here, and there is no way we can retain them if we do not give them good facilities and remuneration. This is the concern of everybody in this country.

Mr. Deputy Speaker, Sir, there has been a periodic increase of doctors' salaries. For the last ten years, there have been about three periodic erratic increases of salaries and allowances, like the one which was there in 2000 to 2002. This has been executed only when there is a threat of strike by doctors and nurses. It has not been what is supposed to be there. When there is a threat that the doctors or nurses or clinical officers are going on strike, then the Government is forced to act. There should be a system in place to effect this increase so that these people can know that after some time, they will benefit from another salary increase. If that is done, then doctors will be encouraged to work hard. As you are aware, the medical profession is very delicate and important.

Mr. Deputy Speaker, Sir, we also know that doctors and nurses work under very difficult conditions, especially when it comes to treating contagious diseases such as tuberculosis. The nurses work in such environment and get infected with those diseases and spend a lot of money on treatment. The Government should

motivate them by providing them with, for example, medical insurance covers, so that when something of this nature occurs, they and their families are able to get treatment.

Mr. Deputy Speaker, Sir, medical insurance covers for many doctors are not very good. The envisaged commission will look into this issue and ensure that the medical insurance cover given to them is adequate. The doctors could, for example, have the same medical insurance cover that hon. Members of Parliament have. We have many professional medical doctors in this august House who have stopped practising because they are able to get good remuneration and good medical insurance covers for their families, as hon. Members of Parliament, which they could not afford to get in their clinics. I would like to commend the Government for opening the private wings in hospitals. For example, in Kenyatta National Hospital, there is a private wing for consultancy. This is good motivation for doctors, so that they do not spend a lot of time outside in their private clinics. This enables them to get extra amounts of money in order to meet their daily responsibilities.

Mr. Deputy Speaker, Sir, many of the private hospitals in this country are very expensive. As was mentioned yesterday during Question Time, the Minister said that the Ministry will try as much as possible to ensure that drugs are available in hospitals. In our district hospitals and dispensaries, drugs are not available. The Minister told the House that he will ensure that drugs are available in the hospitals so that patients are not referred to private clinics and pharmacists who charge very expensively.

In remote areas like Turkana District, West Pokot and North Eastern Province, the distance between one health centre and another one is about 40 kilometres away. In those dispensaries there are only nurses and no clinical officers, whereas district hospitals are congested with clinical officers. The Ministry has put many clinical officers in one district hospital, while in the remote areas there are no clinical officers. There are also no houses for the clinical officers in those areas. The President in his Speech mentioned that the Government is going to ensure that there is proper infrastructure in the country and provide doctors with fully furnished houses.

Mr. Deputy Speaker, Sir, the training of clinical officers is very expensive. As I speak now, to train one clinical officer costs Kshs67,000. This is very expensive bearing in mind that those clinical officers come from very remote areas and cannot afford to pay that amount of money. I would like to request the Minister to look into this issue so that the training costs for clinical officers is reduced in order to be affordable to everybody. The training of nurses is also very expensive and should be reduced, even in private hospitals.

Mr. Deputy Speaker, Sir, Ortum Hospital trains nurses to the cost of Kshs120,000 per year. This is very expensive, yet that hospital was put up to train the Pokots who cannot afford the Kshs120,000. Now, that hospital is not training the Pokots, but people from other districts because the Pokots cannot afford this fee. I would like to request the Ministry to consider subsidising training costs for those people who come from that area. It is extremely important that the Ministry considers this and motivates our health workers.

Mr. Deputy Speaker, Sir, this is a year of transparency because we want to eliminate corruption in our institutions. I would like to request the Minister to look into the issue of the tendering system so that when they tender for drugs to be supplied in hospitals, they use the proper tendering system. The cost-sharing system has been misused. For example, when a health board in a particular district wants to procure some essential drugs, they do it through the District Tender Board in order to get the lowest bidder. But in many cases, the lowest bidder does not get the tender because many of the doctors and pharmacists have opened their own private pharmacies and clinics. So they ensure that they clinch those tenders. This has happened very many times and we end up not getting the best drugs for our institutions. The Ministry should look into this issue. If this commission is set up, it will assess the tendering system to ensure that our health institutions get the best facilities.

Mr. Deputy Speaker, Sir, I would also like to talk about the preventive services. It is apparent that we concentrate so much on the curative measures and forget about the preventive services. We should be able to train community health workers, post them in the rural areas and provide them with the necessary facilities like motorbikes and bicycles in order to reach the rural communities. Many of the diseases that our people suffer from are diseases that can be prevented at an early stage so that our people do not spend a lot of money on the curative services which they cannot afford in the first place. Since we do not have maternity services in the rural areas, I would like to request the Ministry to train traditional birth attendants to assist our women the way the missionaries did and NGOs are doing. Many women die when they are giving birth because the facilities are not there. I would like to ask the Ministry to Budget for this item in the next financial year. This will enable them carry out health services in view of the increased spread of the HIV/AIDS scourge. There are many of these women who could be trained.

Secondly, we can assist NGOs like the World Vision, in their endeavour to curb the practice of genital mutilation by giving them some funds to assist in sensitizing these communities to stop this practice or to carry out circumcision in a hygienic manner. There are many NGOs that do health related work in those remote areas. Many of them do not have the facilities that they need and yet the Government has enough facilities in district and

provincial hospitals. I would request the Ministry of Health to work together with these NGOs in remote areas and stop concentrating its activities in the urban areas. I would also like to request the Ministry of Health to provide many vehicles for---

Mr. Deputy Speaker: Mr. Rotino, your time is up.

Mr. Rotino: Mr. Speaker, Sir, I beg to move the Motion.

Mr. Deputy Speaker: Very well. Is there a Seconder for the Motion?

Mr. Bahari: Thank you, Mr. Deputy Speaker, Sir. I would like to second this Motion. The Motion before the House is very important because it touches on the health of this nation. Health is a very important aspect of the economic development of the country. I would like to thank the Government for declaring the policy of affordable health care. This cannot be possible without looking into the welfare of the personnel who are responsible for the delivery of that service. For any function to be performed, we know very well that we need the right qualified personnel who are well motivated and in possession of the right tools.

I think this Motion has come at the right time and it is imperative that we support it. Other than salaries and allowances, other terms and conditions of service need to be reviewed in *toto* so that we have a motivated workforce. Health workers are exposed to a lot of risks, and this is a delicate exercise. There are highly skilled people in Kenya who do this job. We train the health personnel very well and as such, we must remunerate them properly. We must make their terms and conditions of service commensurate with the job required of them. While we focus on other terms and conditions of service, I would like to emphasise on the issue of staff development in the Ministry of Health. Some employees start at very low levels as technicians. I would like the Ministry or the proposed commission to seriously consider staff development so that those who start at the lower levels can be developed further, and the sky should be the limit. We would not want to see a situation where staff start at lower levels and retire at those levels. The proposed commission should seriously look into the issue of staff development so that a technician can rise to the level of a doctor through the channels and avenues that will be opened up by a well-thought-out scheme of service for the medical personnel.

The issue of brain drain cannot be overemphasised. Sometime in the year 2000, the Ministry advertised 100 vacancies for doctors. Out of the 100 vacancies advertised, they were only able to attract four applicants. Out of those four applicants, only one of them qualified. This is a serious matter. I am not surprised that this Motion has come at this early stage in this House. As much as we try to avoid this issue of improving remuneration for doctors, nurses and other health professionals, we cannot avoid it in terms of costs. This is because if we do not provide health services to our citizens wherever they are, be it in the rural or urban areas, our productivity will go down. If our productivity goes down, this is a loss to our economy. So, whatever we have declined to pay through the wage bill will be lost by the economy through caring for an unproductive and unhealthy workforce.

Health service delivery in the remote areas will continue to be a dream for sometime because of the distance between the villages and the dispensary, which is quite inhibiting. It is only under serious conditions that people in the villages will struggle to get to the dispensaries. Even then, they will not get proper medical care because most of the facilities are not there. For example, most of the health centres do not even have a laboratory facility. Therefore, the clinical officer or whoever is in charge will just have to do guesswork as pertains to diagnosis. That is part of the reason for the high cost of health care. Without facilities to make a proper diagnosis at once, the health personnel have to prescribe different drugs before they discover what the problem is. As a result, we end up incurring a lot of costs. If all these facilities were put in place we would be cutting down on costs in those areas. If we cut the costs involved in training and provision of proper medical care, then we will be able to sustain the salaries, allowances and other benefits for health workers.

The issue of institutions which are related to this Ministry, like the National Hospital Insurance Fund (NHIF), cannot go unmentioned. We need to restructure those institutions properly. I understand that they have surplus funds when we have shortages all over. Those surplus funds must be utilised properly. They should not stay somewhere in a bank account because those funds are vulnerable to corruption. If left in the bank, people with hawk eyes will go for them. It is important that institutions like the NHIF work in concert with the rest of the health institutions and move forward.

I appreciate the fact that some effort has been made to restructure these institutions, but I must hasten to add that we are not yet there. We can improve. We know very well that most of our health workers have their own private clinics and laboratories where they spend most of their time. This has been necessitated by the poor working conditions and terms and conditions of service. These health workers are forced to do this because they are not paid salaries that can keep them going. So, they have to resort to other means. In the process, you find the health workers directing the patients to their own pharmacies and clinics so that they can benefit from that. Equipment in public hospitals has been vandalised.

Mr. Deputy Speaker, Sir, initially, Isiolo District Hospital was a referral hospital for the upper Eastern

Province and North Eastern Province. It was built according to the standards of a hospital in London. However, if you go there now, you will only see the buildings. Services have deteriorated to the level of a health centre because all workers are demoralised. This is not an exception, since most medical personnel in Government hospitals and health centres are demoralised. Therefore, it is imperative that this issue be taken with the seriousness it deserves.

Mr. Deputy Speaker, Sir, we know in the remote areas, the nearest district hospital could be between 300 and 400 kilometres from the dispensaries and other health centres, and yet we have expectant mothers, old people and children who need urgent medical attention. It is sad that those dispensaries and health centres do not have means of transport to take their patients to the nearest district hospitals. As a result, many Kenyans have lost their lives. In the process, most health workers are demoralised because they are helpless and cannot save the lives of their patients. Since they cannot get their patients to the nearest district hospital, there is very little they can do.

Mr. Deputy Speaker, Sir, with those few remarks, I beg to second the Motion.

(Question proposed)

The Minister for Health (Mrs. Ngilu): Mr. Deputy Speaker, Sir, first of all, I would like to thank Mr. Rotino for bringing this Motion to this House. It is very timely. However, I would like to inform the House that immediately I was appointed the Minister for Health by His Excellency the President, I realised these problems and set up a committee to review the salaries, allowances and other benefits of the medical personnel. I have here with me a draft of the report produced by that committee. Therefore, I would like to ask this House to amend this Motion so that the Government only tables the report of the committee. I would like to propose that this Motion be amended as follows:-

By deleting all the words after the word "to" in the fifth line, and inserting in place thereof the following words:

"expedite the work of the salaries review committee appointed by the Ministry to review all the salaries, allowances and other benefits for the nurses, doctors and all other health workers."

Mr. Deputy Speaker, Sir, I beg to move.

The Minister for Education, Science and Technology (Prof. Saitoti): Mr. Deputy Speaker, Sir, the Minister has said there is no problem at all with the content of the Motion by Mr. Rotino. We all do agree that there is a very great need to review salaries and allowances of the medical personnel. These are the people who take care of health of Kenyans. Indeed, if they are not well motivated, it will be extremely difficult for them to take care of our people. As the Minister said, she had already, even long before this Motion was formulated, appointed a task force to look into terms and conditions of service for the medical personnel, with a view to improving their emoluments. Therefore, it is for that reason that there will be no need for the Government to set up another review team when the Minister has already done so. Therefore, it is important for the House to ensure that the work of that task force is expedited as soon as possible. It is in that spirit that I now second this proposed amendment.

Mr. Deputy Speaker: Hon. Members, I would like us to be very clear on what we are doing. There is a proposed amendment, to first, delete some words and then insert others in place thereof. Therefore, I would request you to look at your Order Paper carefully. The Minister has already proposed the amendment and it has already been seconded by Prof. Saitoti. It says we delete all the words appearing after the word "to" and we insert the following: "expedite the work of the salaries review committee appointed by the Ministry to review all the salaries, allowances and other benefits for the nurses, doctors and all other health workers." Therefore, the amended Motion will read as follows:

THAT, while appreciating the critical role played the nurses and doctors in the provision of medical services to wananchi; aware of the difficult and poor working conditions prevailing in all public health institutions and noting with concern that salaries for the health workers have not been reviewed for more than ten years; this House urges the Government to expedite the work of the salaries review committee appointed by the Ministry to review all the salaries, allowances and other benefits for the nurses, doctors and all other health workers.

*(Question of the first part of the amendment,
that the words to be left out be left out, proposed)*

Mr. Sambu: Mr. Deputy Speaker, Sir, I rise to support the Motion as amended. I think it is long

overdue. In fact, we should have reviewed the salaries of medical personnel a long time ago. The medical profession is one of the most difficult professions because we train personnel that will deal with the health of human beings. It is more of a calling than a job. It is a very difficult profession. So, I thank the Minister for setting up this committee to review not only the salaries, but also the terms and conditions of service for these staff.

Mr. Deputy Speaker, Sir, most of our hospitals and health centres are in a very bad state because the support staff are not there. As I watched news on television last night, I saw the Mayor of Nairobi visit some health facilities. Half-way through the news bulletin, I felt like putting off the television set. Some of the scenes that were captured were abhorable. Really, one cannot expect trained health workers to operate under those conditions. So, the review should include increasing the number of support staff, particularly cleaners. As it is now, apart from supporting the doctors, nurses are also forced to do the cleaning work, which should be done by subordinate staff. The committee, therefore, should look into ways of increasing the support staff and equipment. Most of our hospitals and health centres are in a very poor state of management, and that makes it very difficult for staff to work.

If we do not do something to motivate our medical personnel; they will be tempted to open private clinics. The Government has time and again said that it was not legal for certain cadres of medical personnel, for instance clinical officers, to run private clinics. However, such officers have been forced to run private clinics to supplement the meagre earnings they get from the Government. Once one has opened a private clinic, one's soul and mind is more in that clinic than it is in the Government institution. That is one of the reasons as to why service delivery at public health institutions is poor. That is also why our doctors, nurses and other medical personnel flee the country in search of greener pastures. The remuneration they get is not commensurate to the training they got.

Mr. Deputy Speaker, Sir, another issue relating to medical health care in this country is the recruitment of young people to medical training colleges. In the past, there has been a tendency to concentrate on certain areas. When these people graduated and were posted to certain areas, they would run away; they would want to be posted near their homes and major towns. If medical trainees were recruited and trained from all constituencies and then fairly distributed, they would be devoted to work in certain areas. When Chepterwai Sub-District Hospital, which is in my constituency, was opened in June, 2000, 11 nurses, some of whom were Kenya Registered Nurses, were posted there. However, that institution is now running with only three Kenya Registered Nurses. The others have moved away because they do not come from that area. That is why I propose that the Committee that has been appointed by the Minister should also look into the issue of spreading medical training vacancies to all the constituencies equitably. It may not be tenable to allocate an equal number of chances to all the constituencies since the population varies from one constituency to another. However, training chances should be distributed equitably, so that each district or constituency can have a good number of trained medical personnel.

There has been a big problem in the supply of medicine to public health institutions from what used to be called the "Central Medical Stores". Distribution of medical kits to health facilities in the country has not been equitable. Therefore, I urge the Minister to look into this matter and ensure that each registered health centre in the Republic gets its fair share of medicines, so that medical personnel working there do not get frustrated.

Mr. Deputy Speaker, Sir, as the Government looks into the salaries and terms and conditions of service of the medical staff, it should also supervise health facilities to ensure that Government medicines do not end up being sold in privately-owned health clinics. Currently, that is what is happening. You find pharmacists working at Government hospitals running their own pharmacies in towns. How can you tell whether medicines being sold in such pharmacies are not medicines stolen from Government hospitals? These days, it is very difficult to imprint the "GoK" label on medicines. Some drugs are sold as loose tablets or in liquid form. So, the Minister should look into ways of curbing this problem. However, the important thing is to ensure that medicines are supplied to all district and sub-district hospitals and health centres equitably. Medicines should also be distributed to dispensaries as well. Dispensaries take care of the majority of medical cases before they are referred to district and referral hospitals.

I would now like to talk about Moi Teaching and Referral Hospital, Eldoret. The hospital serves the entire North Rift and some districts of Western Province. District hospitals in Western Province refer their patients to Moi Teaching and Referral Hospital. However, the annual budget for Moi Teaching and Referral Hospital is only Kshs450 million. This sum is equivalent to what Kenyatta National Hospital called "surplus" and put in Euro Bank, which went under. I am surprised that Prof. Meme has not yet resigned.

(Applause)

Messrs. Munge and Nyagah, who have been implicated in the Euro Bank scandal, have resigned from the Kenya Revenue Authority (KRA) and the Central Bank of Kenya (CBK) respectively. However, Prof. Meme, who deposited some public funds in that bank, is still in office. Should he not be ashamed?

Hon. Members: He should!

Mr. Sambu: It is a shame that we collect money only for it to be deposited in unstable financial institutions such as the just-collapsed Euro Bank. So, as I insist that the Directors of Euro Bank should be arrested, I request my friend, Prof. Meme, in very good faith, to resign immediately.

(Applause)

Finally, I would like to request the Government to restructure the National Hospital Insurance Fund (NHIF). The NHIF collects so much money. In the recent past, the NHIF even bought ambulances for public hospitals. However, that is not the Fund's core function; its core function is to finance the treatment of patients. So, I hope that the Minister will do something to streamline the operations of the NHIF.

Mr. Deputy Speaker, Sir, I beg to support the amendment.

*(Question of the first part of the amendment,
that the words to be left out be left out,
put and agreed to)*

*(Question of the second part of the amendment,
that the words to be inserted in place
thereof be inserted, proposed)*

*(Question of the second part of the amendment,
that the words to be inserted in place
thereof be inserted, put and agreed to)*

(Question of the Motion as amended proposed)

The Member for Central Imenti (Mr. M'Mukindia): Mr. Deputy Speaker, Sir, I rise to support the Motion as amended, and before I do that, I must congratulate the Minister for moving very expeditiously to improve the health services in this country. In her amendment, she has struck out part of the original Motion which tied her to bringing the results of her findings within three months. I would have opposed that amendment but because she has shown us that she is ahead of us as far as this Motion is concerned, I think we will give her the benefit of doubt and assume that the word "expeditious" will not mean six months. Rather, we hope that it will remain within the three months' period that was in the original Motion.

Mr. Deputy Speaker, Sir, it is a Government policy to provide affordable health services for all Kenyans. Once again, I must congratulate the Minister because she has moved very fast in that direction. That policy cannot be achieved if we do not have sufficient number of health workers; doctors, nurses, clinical officers and other health workers who are properly motivated to do their job and actually give service to the *wananchi*. In the past, successive governments have virtually ignored the pleas by all the health workers in this country to the extent that today, several hundred doctors from Kenya are operating in South Africa, Botswana, Europe and America. Increasingly, there is an exodus of nurses from Kenya to North America and Europe, specifically because Europe and America have the problem of an ageing population. Therefore, they need more nurses in their countries to look after their old people. For that reason, Kenyans are increasingly being lured to go to Europe and America to work there, especially those in the nursing profession.

Mr. Deputy Speaker, Sir, if we do not improve the remuneration and working environment of our doctors and nurses, that brain drain will continue to increase rather than decrease. That is because the problem in America and Europe is increasing and not decreasing. Therefore, in future, we may have a very lopsided situation, whereby we need the facilities and people here whom we have trained using our own money, but we are actually re-exporting them to serve North America and Europe.

Mr. Deputy Speaker, Sir, Kenyans have to accept to pay the proper salaries and remuneration for doctors if we are ever to achieve the goal of providing adequate and affordable medical services in this country. It is not just the remuneration of nurses, doctors and other health workers. If we do not improve the working conditions and the physical facilities within which doctors, nurses and other health workers work, they will not feel comfortable and motivated. If we do not give them the tools to do their jobs, those people will not feel

comfortable. So, the Minister has got a big job ahead of her. She does not only need to remunerate them, but also to provide the physical facilities, equipment and tools to actually do their jobs.

Mr. Deputy Speaker, Sir, we are all aware of the difficult situation that our country is in, in so far as finances are concerned. We do not expect that domestically, we can raise the amount of money that we need to put in health and even in education. I would, therefore, urge the Minister to work very hard to see how she can raise funding through grants. That is because raising the money locally is going to be virtually next to impossible. The only way is to try to tap international funding, to put it into the health sector in this country. That will have two effects. First, we would not have any debts to pay. Secondly, it will revive our own economy because the funding will go into building hospitals, clinics and health centres. That will help to kick-start our economy and put some money in our pockets.

Mr. Deputy Speaker, Sir, there are many nurses in this country who have been trained using public funds and who are not employed. Yet, we find that we do not have enough nurses in our hospitals and clinics. I would urge the Minister to look at the possibility of absorbing all the nurses that are being trained in this country. As it is today, Kenya has one of the worst doctor-to-patient ratios in the world. It has also got the worst nurse-to-patient ratio in the world and yet, we have qualified nurses sitting at home doing nothing! We need to improve that ratio. In other words, it is another way of improving the working environment for doctors and nurses. If we do not reduce that ratio, the workload for the doctors and nurses who are already employed in the Government will be such that they may not be able to discharge their duties properly, and the motivation that we want to create for them will not be achieved.

Mr. Deputy Speaker, Sir, Mr. Sambu mentioned that one of the biggest problems that we have today is the fact that the doctors and nurses have to actually moonlight to make ends meet. They either create their own clinics or they are employed by people who already have their own private clinics. That is obvious because if the people do not have enough money to feed their children, they will do whatever is possible to do that. It is a fact of life and, therefore, we must recognise and build our policy to ensure that doctors and nurses who are employed in the Government actually work for the Government. We should not pay them so little that they are forced to go moonlighting, taking shortcuts and leaving Government hospitals unmanned. Therefore, the policy of the Government must be very clear as to how doctors and nurses will behave in so far as private clinics are concerned.

Mr. Deputy Speaker, Sir, on the training of nurses and doctors, the number of doctors that we are training in this country is not enough. The number of doctors who are trained as specialists is not enough. We urge the Minister to see how best she can increase the number of specialists in our training facilities and ensure that all the nurses that are trained in this country are absorbed in Government hospitals and clinics.

Mr. Deputy Speaker, Sir, the health centres that we have in this country are not enough, while the ones that we have are not properly manned and equipped. We still need more dispensaries, health centres and district hospitals. That, again, is a big burden to this country. Again, while the issue of Harambees is still clouded - we are not quite sure which way to go - I think the Minister for Health should come out clearly and say what we need to do as far as the Harambees are concerned. That is because in some areas, the Government will not be able to provide those facilities. She should come out clearly and tell Kenyans whether the Government will supply them with manpower and required equipment if they put up a clinic, a health centre or a dispensary, so that the *wananchi*, if they are able, can build those facilities.

Mr. Deputy Speaker, Sir, I have a case in my own constituency where we have several dispensaries, and we have planned several more for the next five years--- If we wait for the Government to build them--- We need an assurance that the Government will actually build them. Otherwise, the *wananchi* themselves are ready to conduct Harambees and build dispensaries and health centres. We should have a clear policy to ensure that once health centres and dispensaries are built, they are equipped and manned properly.

With those few remarks, I beg to support.

Prof. Oniang'o: Thank you, Mr. Deputy Speaker, Sir. First, I want to congratulate hon. Rotino for the Motion he has brought to this House, which really concerns an issue that affects all of us. Secondly, I wish to congratulate my good friend, Mrs. Ngilu. She truly is an excellent performer. There is no doubt about that. She has been in the House all through answering Questions when her colleagues have not been present. I want to tell hon. Ngilu to keep it up.

The issue at hand is crucial. It points to the need for us to appreciate our professionals. Doctors are some of the top brains we have in this country like other professionals. For some reason, we seem to relegate professionals to the bottom, and do not realise that many of the nations which have developed have done so because they tap their top brains. We produce doctors in this country, and many of them leave the country because their conditions of work are not conducive enough for them to stay. At the same time, we produce other doctors who decide to work in towns, and our rural areas suffer from a "drought" of doctors. Also, doctors suffer from lack

of tools of trade to perform their job. It is not just enough to train doctors, but we need to have the proper support staff. We realise that nursing requires a different calibre of professionals. It requires people who are sympathetic, patient and have the stamina to work under very difficult conditions. We find that many times, a conducive environment does not exist. So, if we are talking about improving the conditions of service for members of the medical profession, we have to look at it from top to bottom, and at the same time, look into the environment under which the professionals will operate.

Mr. Deputy Speaker, Sir, I want to touch on the issue of expectant mothers. All of us are familiar with this issue. You can imagine a woman going into labour after her first or a difficult pregnancy and the health centre is 20 kilometres away. The only means to take her to the nearest health clinic is probably on a bicycle. No wonder we have so much maternal and infant mortality. This is completely unacceptable. We have to do something about it. If we do not provide our medical professionals with the necessary facilities for them to go beyond the call of duty and address these issues, then we will not be doing justice to this country. Much as I support what the Minister has said about a committee that she has set up to look into this issue, I hope we have some non-medical professionals in that committee. Health issues affect all of us, and chances are that if the committee is composed of only doctors, they will probably not be looking broadly into other aspects that need to be improved. At the same time, I hope the Minister will give us a time frame within which the report of the committee will be implemented, so that it will not become just another report that will remain on office shelves.

I want to talk about medical insurance covers. Falling ill is everybody's nightmare. But it is a nightmare mostly for the poor. For those of us who have tried to get medical insurance cover, we have realised that many of the health insurance providers are foreign. This is an area which needs to be reviewed. For people aged over 50 years like myself, it really does not make sense to even take medical insurance cover. Health insurance providers do not cover so many conditions, such as hypertension and heart problems. Our lifespan has now been reduced to 46 years. Getting a medical insurance cover which is user-friendly should be a matter of priority because it is part of the wider package of providing medical health care. I hope the Minister, being sensitive as she is, will look into the issue of medical insurance cover for everybody.

I believe also the poor need to have medical insurance because they are unable to access specialised services. The poor cannot be treated as if all the diseases they suffer from require to be treated only with drugs. They also need X-ray facilities. I am aware of health centres where X-ray equipment is defective but has not been serviced. In other cases, the equipment is not used because we do not have the right people to operate it. So, we should be serious about supporting the poor to access proper medical care, so that they do not have to travel many kilometres to go to Kenyatta National Hospital. You will find a mother travelling with a small baby to get a simple surgery at the Kenyatta National Hospital, which she can hardly afford. We need to do something about that. I hope that when we implement this Motion, we will look not only into the welfare of medical doctors and support staff, but also into the welfare of other professionals and ensure that we give them the relevance and importance they deserve.

With those few remarks, I beg to support.

(Several hon. Members raised their hands)

Mr. Omingo: On a point of order, Mr. Deputy Speaker, Sir. Have you allowed hon. Members to raise their hands in the House? It appears as if that is the trend you have introduced today.

Mr. Deputy Speaker: Order, Mr. Omingo! Some hon. Members raised their hands, but I did not look at them. That is a good point of order.

Hon. Members, you are supposed to just stand up in your place and catch the Chair's eye. You should not raise your hands.

Member for Tigania East (Mr. Munya): Thank you, Mr. Deputy Speaker, Sir. This is my maiden speech. I have been trying to catch the Speaker's eye since the first day, but I have not been able to. I thank you for giving me this opportunity. Therefore, I do not expect any interruptions.

There is a lot of posturing from the KANU side, and within a very short time, we have seen KANU transforming itself from a villain to the protector of people's rights. With regard to this Motion on medical professionals, KANU has a lot to answer for and explain in relation to the management of the health care system in this country. We have some hon. Members sitting on the opposite side whom we would like to explain some issues about health care services, especially on the management of the Kenya Medical Training College (KMTC). We have Mr. Boit, who was the Director of the KMTC for so long. It is common knowledge that before students were admitted to the KMTC when Mr. Boit was the Director, they had to pay bribes ranging from Kshs35,000 to Kshs50,000. During Mr. Boit's time as the Director of the KMTC, most of the students who were admitted to the

institution had the lowest grades. That is why we are experiencing a professionalism crisis in hospitals. Most laboratory technicians are unqualified. I have information from Moi Teaching and Referral Hospital, Eldoret, that laboratory technicians cannot conduct a correct pregnancy test. At one point, they tested a man's urine for pregnancy and found him to be pregnant. This is the level we have fallen to because of mismanagement of our health care system.

I would like to propose that we should have a transparent system of admitting students to the KMTC.

Member for Baringo North (Mr. Boit): On a point of order, Mr. Deputy Speaker, Sir.

Mr. Deputy Speaker: Overruled! Mr. Munya is making his maiden speech.

Member for Tigania East (Mr. Munya): Mr. Deputy Speaker, Sir, everyone is aware that Mr. Boit managed to come to this august House because he admitted all the young men and women in his village to the KMTC.

We are asking the Government to look into the disparities in the distribution of medical personnel, so that the best Kenyan brains are admitted to medical training colleges. This can only be done if we have a transparent system that enables the best students to be admitted to the KMTC. Right now, people have to pay bribes to be admitted.

[Mr. Deputy Speaker left the Chair]

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

I would like to ask the Minister for Health to come up with a system where the best Kenyan students join the Medical Training Colleges. It should be a system where the person who can produce money to buy places at the MTC must stop. This should apply across the board. This should apply, especially, to all the middle-level colleges. We have been talking about basic education, but we have forgotten about corruption which is rampant in the middle-level colleges. I would like to propose that an admission board for the middle-level colleges be established, to consider taking the best students every year after graduating from high school. The best students should find their way into those colleges. This board should publish the results of the students they have taken so that every Kenyan would know who has been taken. This would ensure that corruption in middle-level colleges comes to an end.

Mr. Temporary Deputy Speaker, Sir, the other big problem we have is that the Government has been encouraging communities to build health centres for themselves, and it has been promising them that once they build a health centre, it will assist them with personnel and medicine. In my constituency, we have three health centres which we have struggled to build. We built those centres with money got from poor people, but there are no medical personnel. We have a dispensary in Kunati market which people raised money to build, but there are no medical personnel. We also have another health centre at Karama Location, which also struggled to build, but, again, there are no health personnel. We are still waiting for these medical officers to be posted there.

We have another health centre at Chalulu, which we built with our money, and we are still waiting for the Ministry to post health personnel there. I am raising these issues because even though there is a shortage of medical personnel, and everyone agrees that there is a shortage, there are disparities in distribution of these personnel. No one ever bothers about certain areas. Most of the medical personnel are concentrated in Nairobi and urban centres, when the rural areas have problems. Even in terms of transfers, most people want to concentrate in the urban centres, and yet the rural people have also a right to better health care. These people have to be taken care of. We expect the Ministry to look into that issue. The Minister should sit down and ensure that there is a fair distribution of medical personnel all over the country. We do not want medical officers to be concentrated in urban areas. If it means giving them hardship allowances so that they can go to hardship areas, the Government should do that. I support the Motion, especially, in terms of trying to improve salaries and allowances for health personnel.

We spend a lot of money to train doctors and nurses and after they have been trained they go to other countries to work there. This brain-drain must be stopped.

The problem emanates from the other side of the House. The previous Government did not care about people, training and proper usage of public funds. Whenever doctors would complain that they were not paid well, all the President would do was to tell them to find what they wanted to do with themselves. That is the reason why we have had this exodus of doctors to other countries. Some of our doctors went to North America, while others went to other countries in Africa, where people care about their personnel. We do not want the same trend to continue with the NARC Government. We would like to see the NARC Government caring about people

who are trained. It should show that it cares about its people. Even if they are not paid well, they can understand when they are treated well. When you treat them casually or treat them as if you do not care about them, their morale and the services go down. You will also find patients in hospitals not being attended to. We want to come up with a culture of care, where everyone cares for everyone else.

The other issue which should be addressed in relation to health care is the hospital management boards. These boards are dens of corruption. We thought when the Government introduced cost-sharing, it would make the situation better. Most of the money which is realised from cost-sharing goes into the pockets of the board members. We know this. Mr. Kariuki will tell you about Nakuru General Hospital, where a lot of revenue is generated through cost-sharing, but most of it is pocketed. The problem is the manner in which the members of those boards are selected. These members are not selected on the basis of integrity, honesty and competency, but on the basis of who-knows-who. We want this to change. We want Kenyans who care about people to be elected to those boards.

Thank you, Mr. Temporary Deputy Speaker, Sir. I support the Motion.

The Temporary Deputy Speaker (Mr. Wetangula): Let the Member of Parliament standing in front of Mr. Omingo contribute.

Mr. Obwocha: On a point of order, Mr. Temporary Deputy Speaker, Sir. I would like to draw the attention of the Chair to the fact that FORD(P) and small parties exist in this House. When you have given four or five chances to KANU Members to speak, for example, on this side of the House, we are entitled to one chance. I would like to draw the attention of the Chair to that fact.

The Temporary Deputy Speaker (Mr. Wetangula): Thank you, Mr. Obwocha. That has been noted.

The Member for Manderu West (Mr. A.H. Mohamed): Thank you, Mr. Temporary Deputy Speaker, Sir. I did not get an opportunity to contribute to the Presidential Speech. I would like to contribute and support this amended Motion.

Salaries of our medical personnel should be reviewed. These people should be remunerated well because we have had a problem. We spend a lot of time training doctors and nurses and at the end of the day, because they are not well remunerated, they end up working for other countries, especially the Southern African countries and our neighbouring countries. Our doctors, nurses, clinical officers and physiotherapists have started to go to smaller countries, whose economies cannot be compared to the Kenyan economy, like Rwanda.

Our medical personnel are not only demoralised because of the low salaries they are paid, but they also lack training avenues to further their education. A person who was trained as a clinical officer ten years ago cannot be accepted at our public universities to further his studies. This also applies to the pharmacists. This is the case when in other areas, for example, agriculture, somebody can start from a certificate course, get a diploma, a degree and a doctorate. In medical institutions, somebody is trained, especially, the certificate and diploma holders, and rots there. I would like to ask the Ministry and our universities to take care of that issue.

Mr. Temporary Deputy Speaker, Sir, the kits which are delivered to our health centres and dispensaries are obsolete. For example, we have chloroquine as one of the drugs which are taken to our health centres and dispensaries, but it has been banned because it is not effective in the treatment of malaria. We have other drugs which are also ineffective in the treatment of malaria. So, the people who designed these kits should go back to the drawing board and supply health centres with drugs which are effective in the treatment of malaria.

On personnel, for example, in North Eastern and the constituency which I represent, we have got three rudimentary health services. These are a health centre and two dispensaries which exist by name. These health facilities do not have nurses, clinical officers and any other medical personnel. This is because Kenyans find it a big problem to work in North Eastern Province because it is a hardship area.

Mr. Temporary Deputy Speaker, Sir, I want to propose that people who are in charge of medical centres and universities should take note of North Eastern Province and give people from this area special admission chances because they are Kenyans who deserve to be served. People find it difficult to go to North Eastern Province to work. For example, in North Eastern Province, we have only DCs and some civil servants who are willing to go and work there. For specialised services like medical services, you will find that if a doctor is posted to Manderu District Hospital from Nairobi; because he can open his clinic in Nairobi, he will refuse to go there and there is nothing the Ministry can do about it. So, the only solution that can be given to the people of North Eastern Province as other Kenyans, is to train their own personnel.

Thank you, Mr. Temporary Deputy Speaker, Sir.

Mr. Kagwe: Mr. Temporary Deputy Speaker, Sir, I support the amendment but there are a number of issues I hear in this House that seem to be taken as problems which, really, are opportunities. I have in mind the issue of our nurses and doctors going to work overseas. The only reason why these people are working overseas is

because there is a demand for them there. Yes, it is true that we should take care that these people should not go and work there at the expense of Kenyans.

However, we are also looking at a huge opportunity here. Because of the fact that there is a demand for our nurses and doctors overseas, what we should be doing is boosting our training capabilities and capacities so that we train them not only for Kenya, but also for Rwanda and elsewhere.

Mr. Temporary Deputy Speaker, Sir, it is the NARC Government's policy that we are supposed to be creating jobs, but let us not forget that jobs do not have to be necessarily created just for Kenya; jobs can be created for our people overseas too. If you look at some of the nations in the world including countries like Pakistan, you will find that Pakistan exports huge quantities of bankers. The Philippines exports a large number of house maids, cooks and so on. The fact that our doctors are in demand overseas should be looked at as an opportunity and, therefore, what we should be doing is to increase the intake of doctors in our universities and boosting training capabilities in our universities, so that we have as many doctors as we can employ here, and have some more for export overseas.

Mr. Temporary Deputy Speaker, Sir, the same case applies for nurses. There are opportunities for our nurses overseas and, therefore, what we should again be looking at is the possibility of training our nurses, even at the district hospital levels so that we can have enough nurses for the districts, North Eastern Province and other areas that the Members are complaining about, as well as exporting them overseas. To do so, it is important for us to train these people to worldwide standards so that they are international nurses and doctors. Therefore, I propose that it is good for us to examine and look at the possibilities of working jointly with overseas institutions so that our nurses are trained to those levels and, therefore, are capable of getting good jobs overseas.

This is because it is not enough that our people go to work overseas especially in the nursing sector. A lot of qualified Kenyan nurses are going overseas to work as simple care people. These are people who are simply taking care of old men and women; basically cleaning them up, and sorting their toiletry and those sort of bad jobs that our people should not be doing, given the fact that they are capable of doing better jobs. Therefore, their training should be one that is recognised not only in Kenya but internationally.

Mr. Temporary Deputy Speaker, Sir, in the area of nurses and doctors, there is need to decentralise medical care. We have got a lot of people who are within Kenyatta National Hospital and other referral hospitals who can easily be treated at the locational and divisional levels if we decentralise the facilities that we have got, so that we leave the referral hospitals for doing exactly that, referral cases. Therefore, I propose the upgrading of the divisional level hospitals, and I am pleased and happy that the Minister for Health has already started this process. Within Mukurweini Division, we are already in the process of upgrading the hospital so that we can ease the human traffic and the pressure on the Central Province General Hospital. I congratulate the Minister and urge her to continue with her obviously very good work.

Mr. Temporary Deputy Speaker, Sir, I would also like to urge that the building of clinics be rationalised, lest we continue building clinics to the level where we have got so many clinics and they do not have enough patients and it is not possible to post doctors and nurses to all those places.

I beg to support.

Mr. Omingo: Thank you, Mr. Temporary Deputy Speaker, Sir, for having rewarded me for using me as a reference material in the previous sessions.

The Temporary Deputy Speaker (Mr. Wetangula): You have only four minutes!

Mr. Omingo: Mr. Temporary Deputy Speaker, Sir, thank you for giving me a chance to contribute to this very important Motion. First, I want to congratulate the Minister for Health for having acted before we provoked her. For that, we want to congratulate her and support her most sincerely.

Mr. Temporary Deputy Speaker, Sir, I want to say something in the short time that I have been given. Medical training is so essential. It takes time, requires precision and brains, in which case, results are actually supposed to be almost instant. I am drawing a parallel with some other professionals. When a managing director in a particular institution makes a mistake on paper, it is rectified and life goes on, but if a medical doctor makes a mistake in the theatre, life is lost and that is quite expensive.

Mr. Temporary Deputy Speaker, Sir, I must state here that the mistakes some of us commit in executive positions are the ones just mentioned by my colleague who spoke earlier, hon. Sambu. It is pointless for some technocrats to make technical mistakes and think life must continue and sit in their offices. The Permanent Secretary in the Ministry of Health has outlived his usefulness and he should have left yesterday because some of the predicaments affecting the Ministry of Health are because of rampant corruption. We are stuffing money in some irregular banks when we should have even improved the housing facilities for the medical staff in our institutions.

Mr. Temporary Deputy Speaker, Sir, we are saying we want to curb the brain drain. We want to retain

our best because we know we have the best. Kenyan doctors are practising in South Africa and Botswana. We want to attract them back and give service to our people. How do we do it? By curbing corruption and eliminating those who are just a bottleneck to the smooth movement of this economy.

Mr. Temporary Deputy Speaker, Sir, I said last week, and I am coming in here with a bombshell and time is running out for some of them. They should wake up and disappear before we catch up with them. Time is up and we must do what is supposed to be done for the Government to move forward. We have all the goodwill of the NARC Government. We want to support them and we will support them to remove any bottleneck that comes their way.

Mr. Temporary Deputy Speaker, Sir, we are talking about facilities in our institutions. It is pointless to reward medical practitioners and staff if they have no facilities. We have structures standing in the name of city council clinics but they have no medicine! We shall be able to reward and motivate medical staff, but there are no facilities for them to work. You pay a surgeon expensively but, unfortunately, he has no theatre to operate from. We need to also think positively in line with improving the facilities required in our hospitals.

Mr. Temporary Deputy Speaker, Sir, we have had some people trained in medical institutions and the number is still on the rise. There are no prospects for them to get jobs, yet we cry that we do not have enough medical staff in our institutions. Three dispensaries in my area, have not been opened because of lack of staff, yet we have spent money on training people. These people have actually taken money for training from the Government kitty and, yet they cannot be given opportunity to deliver and pay tax in terms of returns after training. We need to balance out, let us take inventory of our staff which we have trained.

With those few remarks, I wish to support.

The Temporary Deputy Speaker (Mr. Wetangula): It is now time for the Government responder to reply, but the Minister has indicated that, out of her 20 minutes, she will donate five minutes each to Mr. Boit, Dr. Julia Ojiambo and five to another Member who is not here.

The Member for Baringo North (Mr. Boit): Mr. Temporary Deputy Speaker, Sir, my names are: William Kiplumbei Algut Boit, Member of Parliament for Baringo North.

First of all, I would like to correct an issue on which an hon. Member spoke earlier about payments for students attending Kenya Medical Training College (KMTC). People impersonated me [**The Member for Baringo North**] many times and collected money in various provinces and they were arrested and charged; including my own staff at KMTC. That does not mean it was William Boit. It is not correct for an hon. Member to say that it was Mr. Boit.

I am a born again Christian and I am as clean as snow!

(Laughter)

Mr. Temporary Deputy Speaker, Sir, I wish to support this amendment and, in fact, congratulate Mr. Rotino for bringing this Motion to this House. I also wish to thank the Minister for Health for making that amendment and, for that committee which has been formed to look at the conditions of workers in the health sector. I have worked in the Ministry of Health for over 30 years and, I agree with those proposals which have been made. We have several cadres in the Ministry, for example, drug inspectors, whose role, I think, should be spelt out clearly by that Health Committee.

Mr. Temporary Deputy Speaker, Sir, the role of workers in the health sector is very important. I think it is an opportune time that we have given a committee an opportunity to do that. For example, we need more health workers in my constituency. It is wrong to say that many people were trained from Baringo District. Honestly, if you go there, you will find that we have some health centres without staff and, those ones we have are ungraded. If, for example, you go to a dispensary in Kaption, Loruk, you will find that they are very busy dispensaries but, unfortunately, we do not have qualified staff there, although one or two people are idle somewhere because they have not been employed. I want to agree with the previous speaker that trained medical personnel should be employed immediately.

Mr. Temporary Deputy Speaker, Sir, with regard to trained personnel who have gone out of this country to look for job opportunities, I think we have very qualified nurses and that is why they have attracted the international community to employ them. I agree that their conditions of service must be improved, but still I want to agree with the other hon. Member that, we produce highly-qualified staff in this country; the doctors and other staff in the medical fraternity. We have clinical officers whom we require to employ because some of these health centres I mentioned really require their services.

With regard to the issue of private clinics, I think it is time that committee spelt out the role of these

clinics, particularly those which have been opened by clinical officers, nurses and laboratory technicians. We need to spell out the role of these cadres, because you will find that there are very many people who are impersonating these nurses and clinical officers and some have been arrested in many cases.

Mr. Temporary Deputy Speaker, Sir, the training institutions in this country, as they stand now, require a lot of improvement. We need to produce more staff and, to do that, training institutions in this country should be improved. For example, on the side of infrastructure, we need more tuition classes and for clinical staff in areas like hospitals so that we can produce quality staff.

Mr. Temporary Deputy Speaker, Sir, we have about eight provincial hospitals. Once upon a time, we used to have the referral system. Instead of all the people going to Eldoret Moi Referral Hospital and Kenyatta National Hospital, we need to improve our eight provincial hospitals so that we can treat complicated conditions of our patients. We also need to introduce the national public health laboratory staff, so that they can do a lot of work for them, instead of concentrating those services only at Nairobi. In fact, we need to open up more facilities for these public health laboratories, even in some big district hospitals like Machakos, Embu, and Nakuru.

With those few remarks, I beg to support.

Nominated Member (Dr. Ojiambo): Thank you, Mr. Temporary Deputy Speaker, Sir, for giving me this opportunity to contribute. I would like to congratulate the Minister for Health for amending this Motion the way she did. I would like to support the Motion as amended.

Mr. Temporary Deputy Speaker, Sir, I would like to congratulate the Minister for Health on the manner she has conducted the affairs in the Ministry in a professional way, so that the administration of health services in this country is taken with the seriousness it deserves. I would like to request the Minister for Health to help this country get rid of the vocabulary "Nyayo Wards" out of the minds of the people in the health services.

(Applause)

Mr. Temporary Deputy Speaker, Sir, the Nyayo Wards have left a stigma in the minds of families because, when they were introduced, people thought that things were going to work in the right way, particularly for mothers of this nation. Women were lined up in front of administration and Harambees, collecting money in order for the Nyayo Wards to be put up and nothing good has come out of it.

Mr. Temporary Deputy Speaker, Sir, the Minister for Health is talking about reproductive rights of women in this country. That includes pre-natal, maternal and post-natal services. Those are the services that the Nyayo Wards were supposed to have provided for this nation. That programme owes apologies to women in this country! We want to ask the Minister for Health to intensify activities for health services for women in this country and particularly, she should lay emphasis on women's rights.

Mr. Temporary Deputy Speaker, Sir, I am sure the reporters in the newspapers today got the Minister's language wrong. This is because women in this country are asking for their rights for reproductive health so that they can provide services to contribute towards the development of this nation. This should not be hampered by illnesses that arise from them being mothers and attending to their families.

Mr. Temporary Deputy Speaker, Sir, I want to emphasise the need for the speedy implementation of the findings of the committee that is supposed to review the terms and conditions of service for doctors, nurses and other health workers who are providing essential services in this country.

Mr. Temporary Deputy Speaker, Sir, the Minister for Health should take into consideration the views expressed by the people with regard to the health committees. The health committees should be on the front line to ensure that health institutions in the villages offer good services to the public. I think the composition of those committees need to be looked at. Also, the committees should ensure that essential drugs are available on the shelves all the time and that people can access health services when they need them whether at the dispensaries, or health centres.

Mr. Temporary Deputy Speaker, Sir, I want to urge that with the increased cases of rape and incest among our communities, our girl child requires a lot of health assistance like counselling. These services can only be provided if the community is made to be close where the health services are. In addition to that, we are emphasizing that trained nurses must be available at village level so that they can help the villagers to access good health services. Today, in the countryside, we have quack doctors, who call themselves health professionals and are injecting our people at will. Some of them may not have medicine that is for human consumption. We would like to ask the Minister for Health to check on that.

The Temporary Deputy Speaker (Mr. Wetangula): Time up!

Nominated Member (Dr. Ojiambo): With those few remarks, I beg to support.

Dr. Galgallo: Thank you, Mr. Temporary Deputy Speaker, Sir. Without wasting time, I would like to

thank---

The Temporary Deputy Speaker (Mr. Wetangula): Dr. Galgallo, you have only three minutes.

Dr. Galgallo: Mr. Temporary Deputy Speaker, Sir, I would like to thank the Mover and the Minister also for being kind enough to give me these few minutes. It is worth to note that there was a similar Motion in this House in the last Parliament and it got support from both sides of the House, but implementation, as usual, is always the problem. We hope that, if we pass this Motion, the Government will take it up seriously and it goes to bear fruits for people whose welfare we want looked after.

Again, Mr. Temporary Deputy Speaker, Sir, it is worth to note that if the Ministry goes into its records, it will find that there are many reports about health workers' pay packages and how to improve their terms of service. Maybe we need to look at them afresh, and in view of the changing circumstances, marry that with what we are now going to work on. The Ministry of Health is under a lot of stress. It has so many services to deliver, but it also has a very lean budget. I think it is incumbent upon this House to give the Ministry of Health a better package to enable them perform what they are supposed to do. Right now, I know they pay about 70 per cent of their budget to personnel emoluments. I think we need to give them better support and a better budget line than they are getting now.

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

[Mr. Deputy Speaker resumed the Chair]

Mr. Deputy Speaker, Sir, our health staff are one of the best trained in Africa. They go through rigorous training at great cost to the taxpayers and because of lack of good pay package, we lose these superior quality staff to other countries. I know many of our doctors have been going to southern African countries. I know now there is a brain drain of our nurses and other cadres going to Western countries. We need to pass this Motion---

Mr. Deputy Speaker: Order! Order, Dr. Galgallo!

Dr. Galgallo: I beg to support.

The Minister for Health (Mrs. Ngilu): Thank you, Mr. Deputy Speaker, Sir. First of all, I want to thank all those hon. Members who have contributed in support of this Motion. I want to assure the House that I have already travelled very widely in the country since I was appointed. I have been to Central, Coast, Nairobi and Rift Valley Provinces, and I have seen for myself the problems that are affecting this Ministry. I want to assure the House that together, we are going to do everything we can to make sure that health problems are solved.

I also want to assure the House that, in fact, one of the things that we have already done is to ensure that we send vehicles to every district hospital. We have already been given financial support by the World Bank (WB) for our HIV/AIDS and Reproductive Health Programme amounting to US\$2 million, which we are going to use to put water in every district hospital and almost in every health centre. That is in place now. This was not there.

(Applause)

But, Mr. Deputy Speaker, Sir, one of the things that I did not hear most of the hon. Members contribute on is the area of reproductive health. This morning, one of the newspapers has quoted me as saying that I am going to crusade for legalisation of abortion. I want to state clearly here that I will not crusade for abortion, but I am going to crusade for safe motherhood. We need all to crusade for the reproductive health rights of every woman. Kenyans may not know that, but it is true and we have doctors here in this House who know it, that we are losing 8,000 women in this country due to pregnancy related complications. This is unacceptable! A third of this, or 3,000 of these cases, are those that occur due to botched up abortion by young school girls. So, this is a problem that has got to be attended to by all of us in this House. It can be your daughter, it may be your wife. I think it is something that we all need to attend to. I have even learnt that the ones that come to our hospitals, like Kenyatta and elsewhere, are more than this. For instance, I was told that doctors have found knitting needles---

Dr. Khalwale: On a point of order, Mr. Deputy Speaker, Sir. Is the Minister in order to confuse the newspapers when, in fact, all she is doing is using consumer-friendly language by saying that she wants safe motherhood, and she sympathises with the girls who die during abortion?

Mr. Deputy Speaker: Order! You are making a point, but that would have been better done if you caught the Speaker's eye and expressed your view. Certainly, it is not a point of order.

Proceed, Minister!

The Minister for Health (Mrs. Ngilu): Thank you, Mr. Deputy Speaker, Sir. You can imagine what doctors feel when, during the process of operating on these girls so as to save their lives, they find needles inserted in their wombs. They are all getting into serious problems with these doctors. I think it is an issue that all of us in this House need to attend to.

Mr. Deputy Speaker, Sir, I would also like to say that we are going to ask to be given a little more allocation of the Budget. We have been getting 7.5 per cent of the total Budget and I thank Dr. Galgalo for saying that the Ministry needs to be supported. We could do with 15 per cent of the national Budget. If we got it, obviously, we are going to give health care facilities to every health centre, district hospital and provincial hospital.

Mr. Deputy Speaker, Sir, we also want to ensure that health care facilities are made available to all and especially the poor. In the rural areas---

Mr. Deputy Speaker: Time up, Minister!

The Minister for Health (Mrs. Ngilu): I thank you very much and I promise to bring this report into this House in the next three months.

Mr. Deputy Speaker: Very well!

(Mr. Billow moved to the Front Bench)

Mr. Deputy Speaker: Why do you not speak from where you are? I think there is a microphone there. Well, I hope very soon the Leader of the Official Opposition is going to let us know his Shadow Cabinet so that we restrict the Front Bench and Dispatch Box to them.

Mr. Sasura: On a point of order, Mr. Deputy Speaker, Sir. A precedent seems to have been set in this House lately. Only the other day about three hon. Members; Mr. G.G. Kariuki, Mr. Boit and Mrs. Ojiambo were allowed to speak from the Dispatch Box because of their height and not on the basis of party. Would I be in order to kindly ask the Chair to create a corridor for short people and build a platform for them to stand on?

Mr. Deputy Speaker: Well, I do not know about that, but proceed for now.

Mr. Billow: Thank you, Mr. Deputy Speaker, Sir. I would also like to thank Mr. Rotino for giving me these few minutes. While not opposing the Motion, I want to bring the attention of the House to the fact that in terms of implementation of this Motion, it should be in the context of harmonising the terms and conditions of the entire Public Service. If you look at the public servants who have the same level of education, the same academic and professional training and the same experience, it would create disparities if you would address only the terms and conditions of service of particular Ministries and not others. So, when implementing, I would like to appeal to the Government to do it in the context of reviewing the terms and conditions of all those in the public sector, so that it does not create resentment or unhappiness within the sector.

In 1998/99 there was a Commission headed by Mr. Benjamin Kipkulei which looked at harmonisation of the terms and conditions of service of public servants in this country and they recommended that there was a wide disparity in the terms and conditions of service for employees in the public sector. While it is understood and underscored that the doctors, nurses and other health workers are critical in service delivery, we should not ignore the fact that if we only address their terms and conditions of service, it would create resentment and cause disparities in the terms and conditions of service for the rest of the public servants.

Mr. Deputy Speaker, Sir, I also wish to note that the President's Speech covered the issue of reviewing the terms and conditions of service for all public servants, and I hope the Ministry will also take that opportunity to review the terms of service for public servants, so that it is not done in isolation.

With regard to the health status in the country, it is not just that the employees are underpaid. I think the reason why the public health sector in this country is in bad shape is largely due to mismanagement at the district level as well as corruption within the district health management boards. I think that fact has been mentioned, but I wish to reiterate that the district health management boards are part of the reasons why we have serious problems in the district hospitals. They connive with those who run those hospitals to siphon out the little money that is spent under the pretext of providing services. Those who have been contracted to deliver food and all kinds of services to hospitals are the ones, together with the district health boards and those workers in the district hospitals, that clear all the little money that would have been used to provide services.

Thank you.

Mr. Rotino: Thank you, very much Mr. Deputy Speaker, Sir. I would like to thank all the hon. Members who have taken their time to contribute and support this Motion. I would also like to support the amendment made by the Minister and congratulate her for supporting the Motion. This being the first Private Members' Motion in

the Ninth Parliament, it is in good taste for us to support it and pass it. I wish to request this Government not to be like the last Government. Previously, we passed many Motions and none of them was implemented. I remember I brought very many Motions here and none of them was implemented. It is my plea that this is a national cry for all the professionals in the medical field that, that committee which will be set up takes up all the recommendations, so that they are implemented in the shortest time possible, so that our doctors are given that support.

Mr. Deputy Speaker, Sir, secondly, I would like to support the reproductive health services that the Minister talked about, because our women are the ones who are vulnerable to these problems. Most of our women die because of these problems. It is them we really have to support.

The Minister also mentioned that she has sent vehicles to all district hospitals, but I would like to inform her that West Pokot does not have a vehicle. I was there over the weekend, and as I speak now, the hospital has no vehicle. The vehicles that are at the West Pokot District Hospital are grounded. I would like to request the Minister to send one vehicle to Sigor Health Centre. With regard to water provision that the Minister talked about, I would like to inform her that Sigor Health Centre has no water and fridge for keeping blood donations. Kindly send a fridge there immediately.

Mr. Deputy Speaker, Sir, malaria is prevalent in my area, and the community built Lomut Anti-malarial Clinic. I would like to request the Minister to help us with some money to complete that facility. Hon. Members also talked about the recruitment of students to MTCs. I would like to request that this be distributed equitably so that students are recruited from areas where there are no staff and admitted in the MTCs. Many nurses were trained last year but they have not been employed. In areas like West Pokot, there are many nurses who have been trained but they have not been employed. I would like to request the Minister to kindly employ those nurses, especially from remote areas like Turkana and North Eastern Province so that they can be posted to those areas and are not transferred to other areas.

Mr. Deputy Speaker, Sir, with regard to the NHIF, many people who work qualify to be members of this Fund, although there are many people who are not working. I would like to recommend that the committee, which will be set up, looks into how they can help people who are not employed and those who are running private businesses so that they can be included in that Fund. At the moment, this Fund only assists those who are in employment.

I would also like to recommend that only professionals should be appointed to the district health management boards so that they can be useful. Previously, many board members were appointed just because they knew the area hon. Member of Parliament and other senior Government officials. Could professionals be appointed so that they can help them?

Mr. Deputy Speaker, Sir, with regard to the transfer of members of staff, I would like to say that when a member of staff is employed, certain agreements should be entered into so that a staff member does not just stay at a station for one year and then gets transferred or gets employed and sent to a remote area and then after one year, he gets transferred. There should be an agreement for nurses and doctors; that they work in a specific area for either two, five or ten years before they are transferred, so that there is continuity of service.

There was a training college which was built in Kapenguria District Hospital to train nurses. It has never been opened for the last ten years since 1992. Now, it is being used as a lodging for nurses and doctors. Since the Minister has not yet toured Rift Valley Province, I am requesting her to start with West Pokot. When she comes to Kapenguria, I will take her round and she will enjoy her trip.

(Question of the Motion as amended put and agreed to)

Resolved accordingly:

THAT, while appreciating the critical role played by the nurses and doctors in the provision of medical services to *wananchi*; aware of the difficult and poor working conditions prevailing in all public health institutions, and noting with concern that the salaries for health workers have not been reviewed for more than ten years; this House urges the Government to expedite the work of the Salaries Review Committee appointed by the Minister for Health to review salaries, allowances and other benefits for nurses, doctors and all other health workers.

INTRODUCTION OF PARLIAMENTARY
BUDGET OFFICE BILL

Mr. Oloo-Aringo: Mr. Deputy Speaker, Sir, I beg to move the following Motion:-
THAT, this House do grant leave to introduce a Bill for an Act of Parliament entitled the

Parliamentary Budget Office Bill to establish a Budget Office in the National Assembly to provide Members of the Assembly with information to facilitate their participation in the making of the Budget and in the monitoring, evaluation and implementation of public expenditure and programmes so as to strengthen the role of Parliament in the budgetary process and for matters connected therewith and incidental thereto.

Mr. Deputy Speaker, Sir, you will recall that when this particular Motion was debated, it had the largest support of the Members of Parliament. However, as things were at that time, some forces who were afraid of transparency and accountability in the management of public finance in our country, blocked this particular Motion. I say so because I was surprised when the Finance Minister at that time, Mr. Chris Obure, opposed the Motion. Soon after that, he and I who are great friends because we were in college together - he was doing commerce and we shared classes in economics - came and whispered to me: "Mr. Oloo-Aringo, I agree with you fully that Parliament should have a Parliamentary Budget Office, but I was under pressure not to support this Motion." One week after that the Ministry of Finance organised a major seminar in Mombasa for us to discuss the budgetary process. At that point in Mombasa, nearly every Member of the Government at the time quietly came to support what we had already decided, that we should create a budget office.

My pleasure today is that we have a new Parliament. The Ninth Parliament is a new Parliament in every sense of the word; in its composition and in greater freedom that we had in the Eighth Parliament. We shall be guided here by what is the greater interest of this country and not by authority "from above." We have transcended that role. We must be the engine of development of our country. Parliament is the engine of the country. If Parliament is strong and effective, then we shall have a responsible Government because the purpose of Parliament is not only to create that Government, but to also make sure that it is responsible. There is no area that demands greater responsibility like the management of public finance. Since Independence there has not been any change in the management of public finance in this country.

In the colonial times, the Budget was shrouded in mystery and secrecy. People were not supposed to know. So, the colonial government thrived because it was able to conceal the facts of the economy of this country. If the Ninth Parliament is to be the engine of the transformation of our country, then it must take the initiative in providing leadership in areas such as public finance management. Throughout this period there has been an enormous imbalance in the Legislative-Executive relation because the Constitution and the Standing Orders gave power over the Budget to the President and the Executive Government at the expense of Parliament. Parliamentarians were supposed to be ignorant of the Budget, and Government officers played on this to cause havoc and literally mismanage the economy and abuse their offices.

The purpose of this legislative Motion is to bring a Bill to this House. Let me distinguish here between what we call in this House a legislative Motion which we bring under Standing Order No.95(2) and a Petitionary Motion. We have just passed a Petitionary Motion brought by our good friend. A Petitionary Motion is a petition to the Government to take action. The purpose of this Legislative Motion under Standing Order No.95(2) is to bring a Bill which will be the initiation of the private Member. This Bill becomes a public Bill. When it is passed we shall create, in the National Assembly, the Budget Office. The ambushing of the Legislature by the Executive is persisting up to today. Members will find out about the contents of the Budget on the eve of the Budget Day. So, you do not have a chance to look at the estimates of expenditure and revenue. How do you then play the role of oversight and you were not there when the estimates were being drawn? What has happened year in year out is that the Government has ambushed Parliament. I know that NARC stands for transparency. NARC is a revolution which stands for a new approach, a new beginning, a new vision and a new Kenya. Therefore, we have to show by example that we want this country to be managed properly. We want to establish a responsible Government. This can only be done if we have a responsible Parliament.

When this Budget Office Bill is enacted into law, Parliament will demand periodic reports from the Government. For example, it will be necessary for the Minister for Finance to table the estimates of revenue and expenditure early in April before he lays the Budget on the Table. The Parliament Planning and Budget Committee will then look at the provisions in the estimates and refer them to various Departmental Committees. These Departmental Committees will scrutinise the proposals of the Minister. These departmental committees will then bring back the proposals to the Parliament Planning and Budget Committee so that hon. Members can have a say on the budget of this country.

The purpose of this is to involve Members in the budget-making process and not for hon. Members to draft the Budget. That initiative is for the Government, but hon. Members must interrogate that Budget. They must be involved in giving their priority. They can only do so if they look at the estimates early enough and include the priorities of their constituents. The hon. Members here represent their constituents who must be involved in the Budget. However, if the Budget is a secret in the Treasury, how will the ordinary person participate

in it? They can only participate through hon. Members making amendments to the Budget. In turn, hon. Members can only do so if the Budget is scrutinised by the relevant committees of this House. These committees should be backed by a technical committee called the Budget Office. The Budget Office will consist of trained economists, financial analysts and budgeters who will then work with hon. Members to understand the Budget. The difference between Ministers and the Members is that Ministers already have that capacity in their Ministries.

The Treasury has large numbers of technically trained people who actually make the Budget. Sometimes it is these people who actually determine the Budget of this country. As I said before, I know of a Minister who was reading the Budget here for the first time so that if you removed a page from the Budget Speech, he was at a loss. This is because he was not involved in the making of the Budget. The Budget was the work of bureaucrats in the Treasury. However, the Budget is a political document and, therefore, we, as politicians, must have an input in it. Consequently, we need to create capacity. I am very familiar with this work. Our role here is to build the capacity for hon. Members to interrogate the Budget by giving them technically qualified people in the Budget Office, who will assist them to understand the Budget.

Mr. Deputy Speaker, Sir, Parliament is the gateway of the public in the budget making process. The empowering of Parliament will, therefore, encourage broader public debate and meaningful participation in Budget-making by the business community, members of the public, the private sector, NGOs, marginalised groups like women, people with disabilities and youths. All these groups in our society should participate in the Budget. At the moment, there is so much secrecy that even Members of Parliament year in, year out, receive Estimates here on the eve of the Budget Day. We are supposed to pass it by 26th June, so that the Government can spend 50 per cent of the Budgeted amount. We are supposed to complete the whole Budget by October and yet we do not take part in its making, in the first place.

Mr. Deputy Speaker, Sir, the part of the Constitution that we are talking about and which has made this possible relates Sections 99 and 101. To some extent, it restricts hon. Members from amending the Budget. In fact, we are not even allowed to amend the Budget. All we can do is to reduce it by a token K£1. Parliament must have the power to amend the Budget. To make a meaningful amendment of the Budget, we must have an office of experts and economists, finance analysts, and Budgeters who will help us in bringing amendments, not just to the Budget, but also to Bills and Motions. This is because every Motion or Bill we bring to this House has monetary implications. Who will work on those details? It is the experts in the Budget Office who will assist hon. Members with this sort of information.

The Budget Office, therefore, will be the organic law to implement the provisions of the Constitution. It will provide a detailed set of rules for public finance management for both Parliament and the Executive Government. In other words, I anticipate a situation where the expertise in the Budget Office will work closely with the expertise in the Treasury. In doing so, we shall be able to help the Treasury with matters of taxation, debts and how to solve them because we shall have access to people who are as qualified, if not more qualified, as those ones in the Executive.

Mr. Deputy Speaker, Sir, the modern Budget process, therefore, in the public sector is divided into four distinct areas. First, there is the drafting of the Budget. Secondly, there is the legislation which we pass here through the Appropriation Bill and the Finance Bill.

Mr. Deputy Speaker, you as the Chairman of the Committee of Ways and Means, know how vital this is. We also have the next stage which is the implementation and, finally, we have the audit. We have participated in scrutinising the Budget during the debates, but we do not take part in the drafting. We are saying we are not going to take over the drafting. The initiative will still remain with the Minister for Finance under the present Constitution. But if the Minister for Finance can bring the estimates here early, he will take into account the suggestions which Members of Parliament will make so that the Budget is owned by the people of this country. So, we are leaving the duty to prepare the Budget to the Minister for Finance. The principle of the financial initiative of the Executive is entrenched in the Constitution. In Kenya, therefore, this function is assigned to the Minister for Finance who tables the Estimates of revenue and expenditure either one week earlier or just on the eve of the Budget day without giving us enough time to look at the provisions of the Budget. The Constitution, for example, omitted to provide for adequate time for the National Assembly to interrogate the Budget and the estimates of expenditure.

Also, here we have a ritual. As we all know, the Committee of Supply is a ritual. It was instituted in 1963 and no change has been brought to this section of the Standing Orders. When we enact the proposed Bill into law, it will make sure that the estimates are sent straight to the Departmental Committees. The Departmental Committees will interrogate the Budget, establish dialogue with the Minister and make suggestions about various amendments that should be brought into the Budget. They will then bring it back to this House and our Planning and Budget Committee will then hand it over to the Minister who, in drafting the final Budget, will have the input

of hon. Members and that of the people of Kenya.

Mr. Deputy Speaker, Sir, you know very well, this House has made a decision that Committees will go, to a large extent, public. We shall now solicit evidence from the public and we want to involve the public. This Committee will be a very powerful Committee because it will listen to the people and make sure that what they want is included in the Budget. It will take into account gender issues and even those challenged persons who have been ignored in the past. By doing so, we will involve more and more people in making the Budget. We are trying to marry democracy and technicality. We are saying that while the technical branch of our Government can draft the Budget, we must have an input as to what the priorities of the people should be. This can only be decided by the people themselves.

The Budget law will provide that the Minister gives quarterly reports on Budget implementing to the Departmental Committees. The Departmental Committees will have power. If the Minister is not performing, it is up to the Departmental Committees to recommend to this House that the Minister be removed because he has failed to perform his functions. That will give Parliament teeth. Parliament cannot have teeth until we ourselves take this responsibility seriously.

I am very happy that the Draft Constitution has already recognised this. The new draft Constitution which we will debate at the National Constitutional Conference has already provided for the creation of the Planning and Budget Committee. So, what this Motion will do is to give what is called the organic law which will implement the provisions of the Constitution. This is because the Draft Constitution has already provided that Parliament must have more say in the financial management of this country. It can only do so, if we strengthen the committee systems. One way of doing this is to have a Planning and Budget Committee which will co-ordinate the interrogation of the Budget.

Mr. Deputy Speaker, Sir, many countries have the Budget office. In the neighbouring country of Uganda, they have already enacted the Budget law similar to what we are providing for here. That will ensure that, indeed, the implementation of the Budget is supervised at all stages by Parliament. What had gone wrong in this country and the reason why things went haywire is because the Ministers and, indeed, the President did not want accountability. That is why we have landed where we are. There were many loopholes which were allowed to exist and people were not allowed to ask questions. This country belongs to us. It is our right to demand that the Government be accountable. I am very pleased because I have seen the Minister for Finance who has just arrived. He has been one of the enlightened people in terms of scrutinising Government proposals. What we are saying is that Government and Parliament must work together. It is a symbiotic relationship. In a symbiosis we actually share and we feed into each other. It is not hostility as was being seen during the imperial Presidency or the authoritarian President that we had in this country. We have liberated this country from authoritarianism. We must now democratize. Democracy starts with a democratic Budget; a Budget in which we participate. The people of Kenya will then ask questions about us. They will find out whether we understand their priorities and whether these can be reflected in the Budget.

Mr. Deputy Speaker, Sir, it is for this reason that I am asking this House to approve this particular legislative Motion so that we can bring the Bill. We already had a draft Bill in the last Parliament. This draft Bill will be made available to hon. Members so that they can make their input as to what role Parliament should play in the making of the Budget, the implementation of programmes so that we can create genuine transparency and accountability in the management of public finance in this country.

Mr. Deputy Speaker, Sir, with those remarks, may I request Mr. Angwenyi to second this Motion.

Mr. Angwenyi: Mr. Deputy Speaker, Sir, I am grateful to Mr. Oloo-Aringo for bringing this Motion.

Mr. Deputy Speaker, Sir, we did discuss this issue in the last Parliament. There was support from all over the country that we must establish a Budget Office at Parliament. One of the outstanding remarks made by our President when he assumed office at the end of last year was that he would like Parliament to be empowered, so that it can deliver on its mandate.

As we all know, the function of mobilising and allocating public resources in this country lies in this House. We are elected so that we can tax our people and apply that tax money to the benefit of our people. However, as of now, we only tax our people but we do not control how that money is utilised. We are actually a rubber stamp Parliament as far as budgetary matters are concerned. None of us gives input towards the preparation of the Budget. None of us has a chance to forward, to those who prepare the Budget, information given to us by our constituents as to how they would like to be taxed.

Every year, while presenting the Budget before this House, the Minister for Finance comes up with proposals to tax certain goods and services and exempt certain goods and services from taxation. We accept all his proposals because we do not have a constitutional mandate to amend Budget proposals on the Floor of the House. Also, there has never been a precedent where the Budget of this country has been amended on the Floor of the

House. Even if we had the mandate to amend the Budget on the Floor of the House, most of us are not knowledgeable enough on budgetary matters to enable one contribute effectively to the process of amending a Budget.

Year in, year out, we approve the Budget as presented by the Minister for Finance but we are never told, except through Public Accounts Committee (PAC) reports, how that Budget performs. That is why we have cases of projects, to which we have allocated resources, not being implemented. I can give the case of the Kisii-Chemosit Road. Records show that this road has been tarmacked five times in the last 20 years. However, there is no single inch of tarmac on that road. Parliament approved budgetary allocations for that road to be tarmacked, but it never followed up to establish whether work on the road was done or not.

Mr. Deputy Speaker, Sir, I am glad that the National Rainbow Coalition (NARC) Government is committed to accountability and transparency in the management of the resources of this country. We, in the Forum for the Restoration of Democracy for the People (FORD (P)), are also committed to transparency and accountability in the management of the affairs of this country. So, we will support the Government. However, in order for us to support the Government from within Parliament in managing transparently and accountably the affairs of this country, we must establish a Parliament Budget Office to educate all hon. Members on budgetary matters and take views from members of the public as to how they would like their resources mobilised and allocated.

We have our external donors who support us in various ways, but the only people who know, who are going to support us and in which areas, are the Minister for Finance and his officers. Why should Parliament, which is the representative of the people, not know whether we will be receiving financial assistance from, say, Iraq or the United States of America (USA)? Why should we not know whether those funds will be used for the construction of hospitals or a bullet factory in Eldoret?

So, the establishment of a Parliamentary Budget Office will enable hon. Members to control the mobilisation and allocation of public resources for the benefit of our people. Parliaments the world over have a budget offices. In the last Parliament, I sat in the Departmental Committee on Finance, Planning and Trade, and we did travel widely, throughout the world. In all civilised countries - Kenya is supposed to be one of them - parliaments have budget offices, which work in conjunction with the Ministers for Finance to establish the Estimates and Budgets for the nation, and ensure equity in the allocation of resources. If we had equity in the allocation of resources, everybody would not be struggling to be appointed to the Cabinet. Even if one remains a Back-bencher, one would be sure that his constituents will get a fair share of the taxes they pay to the Government.

(Applause)

Mr. Deputy Speaker, Sir, whenever we discuss the Budget, our debate is determined by the Minister for Finance, because our Standing Orders and the Constitution have given a lot of power to the Minister and the President to determine the course of debate on the Budget. That is why sometimes we are forced to approve part of the Budget through the guillotine procedure. The former President, Mr. Moi, was a good man, but he did not understand budgetary matters. He had crooks in his Government, who used to misadvise him. For instance, he was advised to put the National Aids Control Council and the *El Nino* Emergency Road Project under his office simply because the kitties of these bodies had a lot of money. These people were set to plunder the resources of this country. If Parliament had a Budget Office, we would have advised the former President and told him: "Mr. President, we will work with you. You are a colleague of ours in Parliament", and he would have understood us. We would have advised him to, for instance, put the management of Kenya's wildlife under the Ministry responsible for tourism, the National Aids Control Council under the Ministry of Health, and the *El Nino* Emergency Roads Project under the Ministry of Roads, Public Works and Housing. However, he used to get advice from crooked individuals, who have brought this country's economy to its knees.

Therefore, let us come out of this state of affairs by establishing a Parliamentary Budget Office. The establishment of such an office will enable hon. Members to be enriched in their knowledge of budgetary affairs. If you understand the budgeting process, and how the money you demand should be spent in the constituency has been raised, you will become a better Member of Parliament. So, we encourage the indomitable Mr. Oloo-Aringo to keep on coming up with this kind of Motions. So, I hope that this House will take it upon itself to fulfil the pronouncement by the President on empowerment of Parliament by empowering itself, so that hon. Members can contribute to the budgeting process. That way, our Committee will be informing us where to spend our money on various Items and Votes. We had the Poverty Reduction Strategy Paper (PRSP) last year. It identified the priorities of every area. It identified what the people wanted; either roads, water, food and others. But we were not able to implement the views and opinions of those people. That is because we were not in charge of the

Budget. We were not putting any input in the Budget.

With those few remarks, I beg to second the Motion.

(Question proposed)

Mr. ole Ntimama: Mr. Deputy Speaker, Sir, I stand to support the establishment of a Parliamentary Budget Office. I think the principle is that we hope the Parliamentary Budget Office will oversee how the public resources of this country are distributed. The most important thing in an established Government like ours, with an established Parliament, is to make sure that there is a fair and equitable distribution of public resources. It has not been the case for many years. Some of us have watched the distribution of resources in this Parliament for nearly 20 years. The distribution has been very unfair. There have been areas which have been favoured and others which have been traditionally relegated to the borders of development. Some of us left KANU because, for 40 years, some of our communities have been relegated to the periphery in development of any sort. It is in the hope that the NARC Government will see to it that there is a fair distribution of resources in this country. Without that, we will not be doing anything. That is why I support this Motion. That is why I, originally, and all the time - although it was nearly subverted - supported the independence of Parliament. That Parliamentary Budget Office is going to make sure that there is fair and equitable distribution of public resources, both financial and human.

It is a fact that certain areas have been favoured and others have been neglected and discriminated against. I think it is a crime when other people do share the resources of this country, which we have contributed to, in way of taxes and other means. That is why I think it is true - and I have no grudge against my friends on the other side of the Floor--- That is why KANU will never be forgiven by some of us! That is why we left; because of unfairness which was done for years.

Mr. Deputy Speaker, Sir, if we take education, for example, if a certain section of the people is not assisted to come up and educate their own children, they are made permanent slaves of the other people for many years. I know I have been here for a long time. I know where textbooks have been given by the donors. They only went to certain areas and certain districts. The Maasai people never got a single textbook to help their children. But donors like the Swede, Polish, Germans, English and others have been giving textbooks. But the Ministry of Education, Science and Technology made sure the textbooks went to certain areas and certain schools, especially where the big men wanted them to go. It is very unfair!

Mr. Deputy Speaker, Sir, with regard to medical services, in some areas, we walk hundreds of miles to reach health centres to get health care. Like everybody has said here just now, it is true that the Kenya Medical Training College--- I do not know why somebody would deny, stand up here and say he is as white as snow when, as a matter of fact, I know personally that business was done across the table of that individual, whom I hear is here now! You had either to pay Kshs40,000 for your kid to be admitted or you get off and disappear! That is actually what has been happening and I have experienced it myself. We have experienced it in our own areas. Our children have never got the right share of the training opportunities. That is where we need to raise the health of the people. A Government that does not take care of the health of its own people is not worth ruling.

That is what has happened all that time! That is why I support the Parliamentary Budget Office. Indeed, even in the HANSARD, I spoke about the Budgetary Office, because we think that is where we will get fairness, especially on the total distribution of resources. I do not want to mention those areas, but we know very well who are in those areas. We know very well which communities are in those areas. We know very well that they have not been served properly.

This is the time the Government should consider accepting this Motion, to bring a Bill later, so that we can look at it properly. We need to go out to those areas and bring them up, instead of discriminating against them, stepping upon them and not letting them come up again. That is because we have the talent in some of those areas. We have people who are very intelligent; only that they lack the opportunity. That is why we are asking the Government to distribute the resources fairly and equitably; both financial and human, so that we have a proper spread of the resources of the country. We do not want anybody to be discriminated against. I know we have a very able and efficient person in the name of Mr. Mwiraria in the Ministry of Finance. I have known him for very many years on the other side of the House as an Opposition Member. He is a very able and stable person and I am sure that he will edge off all those little discriminatory things which amount to favouritism and so forth, so that the people who were left out by the British and the KANU regime will get an opportunity to be served and given the opportunity to rise up and develop as the other people have done.

If you look at the HANSARD reports for previous years, you will find that I have spoken about 17 times about a road in Narok District, where we produce wheat and barley. The construction of this road was proposed

during the late Mzee Kenyatta's Government. It has been in our Development Estimates during all this period, but nothing has ever happened. The other day, a company which was favoured by the former Government visited the area and scooped Ksh420 million, and ran away. So, we were left with no road and the money from the donors has been embezzled. I support the formation of the Parliamentary Budget Office, because through it, we will get fairness. We will be able to stand up in this House and ask what has happened to specific development projects. Unless we do this, people will be discriminated against. Resources must be distributed properly so that every human being, and every area, will be seen to be part of the development process in this country.

Mr. Deputy Speaker, Sir, by extension, I really support total independence of Parliament, so that some of the House Committees can have the weight, the credibility and the support not only of Parliament, but also of the people and that way earn respect. I know this will be covered in the next constitutional dispensation, but we need a committee of Parliament to vet and scrutinise every senior Government appointment, so that we can know who the appointees are. This will enable us to look at the appointees in the face and ask them what they have done for this country, or what their qualifications are. We can also ask them: "Have you been involved in corrupt practices?" I want to say very clearly that I support the establishment of the proposed Parliamentary Budget Office.

With those few remarks, I beg to support the Motion.

The Member for Githunguri (Mr. Magugu): Mr. Deputy Speaker, Sir, my names are Mr. Arthur Magugu, Member of Parliament for Githunguri Constituency.

I rise to strongly support this Motion, which has been moved by my friend, Mr. Oloo-Aringo, for it is long overdue. A Parliamentary Budget Office would be a very strong watchdog to check and control the misuse of public funds. We are here because we are elected by Kenyans, but we hear about Budget proposals when the Budget is read in this House. Creation of this office will mean that the people who elected us will be involved in making sure that the money they require in their constituents for development and other purposes will be provided. We, as the people's representatives in Parliament, will involve the people in discussing the kind of Budget they want. They will bring in their priorities and requests through us.

The most unfortunate thing is that this institution is one of the institutions that we have created at Independence. The Parliament which took over from the colonial Legislative Council should have started with the formation of a Parliamentary Budget Office. This was not the case. What we need to do at this stage, therefore, is for the Government and the Opposition to support this Motion. It is a very clear-cut way of preventing mismanagement and misuse of public funds. Unfortunately, when we became Independent, institutions which were as old as even 5,00 years continued to express their interests through that very young Parliament, although we could not understand some of them. We started doing away with institutions which we knew could not be useful to us as a country. We need to revolutionise some of our institutions. We need to base our approaches to difficult matters on our traditions, so that we understand them; we have been with our traditions for generations and generations. Unfortunately, we have been very successful as Kenyans in copying cultures of other countries. That is well known. In our schools, churches and social habits, we have been copying everything that you can think of. This means that our morals have collapsed. Our national outlook has gone. No wonder, we are talking about corruption, bad diseases which we never used to hear of and immoral behaviour such as men behaving like women; our educational standards have declined.

(There was power failure)

(Power was restored at 12.05 p.m.)

Mr. Deputy Speaker: Mr. Magugu, you were on the Floor, did you finish your contribution? There is still time for you to finish your contribution.

The Member for Githunguri (Mr. Magugu): Thank you, Mr. Deputy Speaker, Sir. I was going to say that the institutions which are involved in development activities within the country will access public funds from the Treasury. This is because Treasury is the arm of those funds.

Once we establish this office, we shall be fairly sure of who needs what. Unfortunately, as we sit here, we are very ignorant of our country. An hon. Member will only know every corner of his constituency, but not any other. I believe that this is one way of giving the hon. Members an opportunity to visit other constituencies. It is also one way of making sure that the money we have voted is properly spent. That is the reason why I said that this will take us an extra mile to become involved in the development of every part of every constituency. That will revolutionise the development process of this country. I thank the NARC Government, the Mover and the people who are in support of this very important Motion.

Mr. Deputy Speaker, Sir, I beg to support.

Mr. Muite: Thank you, Mr. Speaker, Sir. This is a very welcome development. I am also happy to contribute immediately after the Member for Githunguri. I do not know whether the Chair is aware that when the Member for Githunguri was the Minister for Finance, he was late in presenting his Budget. He holds a record, since Independence time and in the entire history of this country, as the only Minister who has ever presented his Budget late. If we had this sort of office in place, that eventuality would never have occurred. The only time the Budget was late, was when the Member for Githunguri was the Minister for Finance. I am happy that he has supported the establishment of this office so that we can ensure that, that does not happen again.

The second benefit is that we want fair, transparent and equitable distribution of the tax resources of this nation. We want to know how much money is being spent in each constituency in terms of schools and health. It is not good enough to say so much money has been allocated to a particular district. We want to know how much of that money is being spent in each constituency. I want people to know what has been spent in my constituency.

Again, the Chair knows, when the Member for Githunguri was the Minister for Finance - I am not discussing him, and I have every respect for the good people of Githunguri - he was able to tarmack every road in Githunguri Constituency. Even the feeder roads were all tarmacked, which is very good for the Githunguri people, but the other constituencies in Kiambu---

(Laughter)

The Member for Githunguri (Mr. Magugu): On a point of order, Mr. Deputy Speaker, Sir. Every Member of Parliament in this House has a duty to work for his electorate!

Mr. Deputy Speaker: Mr. Magugu, you are now contributing! What is your point of order?

The Member for Githunguri (Mr. Magugu): Mr. Deputy Speaker, Sir, is the hon. Member for Kabete right to say that every road in Githunguri was tarmacked when I was the Minister for Finance? Could he tell us the number of roads we have in Githunguri?

Mr. Deputy Speaker: Continue, Mr. Muite!

Mr. Muite: Mr. Deputy Speaker, Sir, the Member of Parliament for Githunguri is hinting at retirement. I have gone round every road and I was envying Githunguri Constituency. However, I am saying that we have got to be more transparent and equitable. We should tarmack one road in Githunguri, one in Kiambaa, another in Kikuyu and other roads in the 210 constituencies. That is all I am saying.

The Member for Githunguri (Mr. Magugu): On a point of order, Mr. Deputy Speaker, Sir.

Mr. Deputy Speaker: Mr. Magugu, let it be a point of order this time round!

The Member for Githunguri (Mr. Magugu): Mr. Deputy Speaker, Sir, could the hon. Member for Kabete confine himself within the meaning of "tarmacking every road in Githunguri Constituency" and yet he expects me to have tarmacked every other road?

Hon. Members: That is not a point of order! That is a question! What is your point of order?

The Member for Githunguri (Mr. Magugu): Mr. Deputy Speaker, Sir, I would like him to really clarify further what he means by "tarmacking every other road?"

Mr. Muite: Mr. Deputy Speaker, Sir, imagine a senior Member who has been in this House before not knowing what a point of order is. I do hope that the people of Githunguri will return hon. Gatabaki in 2007!

(Mr. Magugu stood up in his place)

Mr. Deputy Speaker: Order, Mr. Muite! Mr. Magugu, do sit down! I think what Mr. Magugu wants to do is to respond to what Mr. Muite is saying but that will be done at another time.

Proceed, Mr. Muite!

Mr. Muite: Mr. Deputy Speaker, Sir, I am supporting this development. It is not just in Githunguri Constituency. We have seen other areas where the economic activities do not justify tarmacking of roads. I am saying that we should pass this Motion because it is going to make the House effective in ensuring equitable distribution of this country's resources in every constituency. That is the point I am making and I think this is something that I think we should all support.

Mr. Deputy Speaker, Sir, one of the most fundamental duties of Parliament in the Constitution is to supervise expenditure of public money. We have faced frustration in the past when we wait in this House to read the reports of PAC and PIC. These reports are very much like a pathologist who is a doctor, who examines and

tells you why the patient died. What we want are physicians who will give medicine to the patient to stop the patient from dying. Therefore, I am supporting this by saying Parliament will now monitor the implementation of the Budget.

Mr. Deputy Speaker, Sir, they do it in India. Once a Vote of a particular Ministry is passed, a committee of Parliament in India sees to the implementation of expenditure and sees that the money voted for a particular purpose is actually being spent. They monitor on an ongoing basis so as to ensure that the money is going to be spent for that particular project instead of waiting, like we do here as Parliament, for two years in order to be told that the money we voted for a particular purpose was never spent for that purpose but it was spent for another purpose altogether. This will now become a thing of the past. This should be seen as supplementing the Government; it should not be seen as if it is antagonistic to the Government. We want to work together. We will work together in order to ensure that there is going to be development of the economy.

Mr. Deputy Speaker, Sir, I want to say that this is something that we must all support. It should be put in place as quickly as possible. Of course, when it comes to the exact provisions, we need to guard against people who may benefit from disclosure as to what amount is going to be raised. For example, if the Government of the day intends to raise the price of beer in terms of taxation and one had enough money, then one can stock a lot of beer in order to make a windfall. However, I am sure that when the Bill comes to be enacted, sufficient safeguard measures will be incorporated in the Bill in order to safeguard against that sort of thing.

Mr. Deputy Speaker, Sir, nothing could be more timely than this Bill and I trust that the Government is going to welcome this development so that the authority and effectiveness of Parliament can be enhanced in every area. We want to monitor each Ministry. We are not suggesting that the present Ministers or Ministries are doing anything untoward but power corrupts and absolute power corrupts absolutely.

We want to continue living in the age of transparency and if we are going to do so, then the Ministries must be prepared to be transparent in the manner in which they are going to spend money which we are going to vote. We want to be satisfied. We want to debate how much money we should give to the Department of Defence (DOD). We want to debate the priorities of the health and education sectors.

Mr. Deputy Speaker, Sir, we, of course, realise that the bottomline is economic development. We want to create enough wealth so that we can have enough to share. However, even with the little we have, that is when it is most acute. Even when we wait for the economy to improve, it is most acute that the little we have should be shared as justly and equitably as possible. When we enact this law, this Parliament will have the legal framework within which to be effective in seeing that the priorities of our people are, indeed, prioritised in terms of raising the revenue and how it is going to be spent.

I beg to support as strongly as possible.

Mr. Wario: Thank you, Mr. Deputy Speaker, Sir. I sometimes wonder what are the priorities of this country. Why all this misappropriation of public funds? Sometime back, billions of money were invested in the construction of a bullet factory in Eldoret. Why do we need this particular facility? Whom are we fighting? I wish this Bill had been passed by that time. Parliament could have told the people concerned: "Look here guys, do not go for the bullet factory since we are fighting nobody." Misappropriation of public funds can only stop if Parliament will be given the authority and ability to monitor the budgetary process as far as allocation of funds is concerned.

Mr. Deputy Speaker, Sir, some airports have been built and some have only two aeroplanes that land on them in a day. They incurred a very huge amount of money to construct them. Such a thing can only be curbed if this Motion is passed in order to address that irregularity. If this Motion is passed, the budgetary process is going to reduce poverty by a very big margin. If the money used to build the Eldoret Airport and the bullet factory could have been pumped into the revival of Bura Irrigation and Settlement Project, it could have reduced the poverty levels in that particular area. The same amount of money used for those two facilities could also have been used to revive Kenya Meat Commission (KMC) and encourage livestock production in this country. So, we did not have the ability to air our grievances simply because Parliament was not empowered. We were only there to pass what had been planned by some other people elsewhere.

Mr. Deputy Speaker, Sir, look at the contribution of the Ministry of Agriculture and Livestock Development as far as Gross Domestic Product (GDP) is concerned. What are the crops and livestock contributing to the economy of this country? What is the input that the Government is giving back to this Ministry? What amount of money is the Government using to encourage agricultural and livestock production in this country? The output is too much but the input from the Government is too little. So, we can only monitor such a thing if this Motion is passed.

Mr. Deputy Speaker, Sir, a focus on the budgetary allocation has been given to the district, but if this Motion is going to be passed, the focus will shift because we will have authority to advise the people concerned so

that they focus the budgetary allocation to the constituency level.

With these few remarks, I beg to support.

Prof. Kibwana: Thank you, Mr. Deputy Speaker, Sir, for giving me this opportunity to talk on Mr. Oloo-Aringo's Motion.

From the outset, I must congratulate the "Prince of Parliament" for undertaking a very important crusade in terms of strengthening Parliament. It is true to say that in the past, the budget process was used as a very important avenue for patronage. That is why, in many ways, the budget was what one could call a "midnight Budget". It was called a "midnight budget" because it started at midnight and it was also done in the dark. Therefore, what this Motion is seeking is to introduce transparency in the way in which we share the national cake, or *irio*, if you would like to call it so.

Mr. Deputy Speaker, Sir, in many ways, the Budget is the policy of monetary allocation. It is really a legislation of policy. This Motion will allow Parliament to have oversight over policy in ways which have not happened before.

Many hon. Members, particularly those of us who are new, do not really know how you eventually get a demand of your constituency into the Budget. When the District Development Committee (DDC) makes certain decisions, it is not clear how those decisions come into the Budget. I think one important thing that this Motion, and later the Bill, seeks to establish is to make sure that constituencies and, therefore, hon. Members are able to get their priorities reflected in the budget process.

Mr. Deputy Speaker, Sir, it is actually important to look also at the functions of the Controller and Auditor-General because, in a way, hon. Members are seeking to supplement the work of the Controller and Auditor-General, in terms of oversight over public expenditure. I hope that all the reports of the Controller and Auditor-General will be implemented. I hope there will be an avenue to do so because there have been very fine reports that have not been implemented whatsoever.

Mr. Deputy Speaker, Sir, one hopes that we will look at the Local Government Budgetary system. This is because it is true that funds are allocated to the Local Government and the budgets are not also clearly looked at. Although this is a Bill for Parliament, there will be some provisions for Local Government budgeting.

One important area that also requires to be harmonised is the assistance which we get from international NGOs, both bilateral and multilateral. It is not clear how that assistance is co-ordinated within our Budget and, sometimes, some of the assistance is not necessarily in consonant with our own development goals so that, one also hopes that this process of the Parliamentary Budget Office, will also seek harmonization of our development priorities with the assistance that we get from international NGOs, both bilateral and multilateral.

This process of Budget scrutiny has been embarked upon by some NGOs. We are aware of the work of the Institute of Economic Affairs which very regularly is able to examine what should be a budget even before there is a parliamentary budget. Also, the Centre for Collaborative Gender Studies in terms of the input of the Budget *vis-a-viz* the female gender and so on. So, this is work which has been embarked upon. I think what Mr. Oloo-Aringo is seeking is to strengthen this work so that it is clear how hon. Members can impact on what becomes finally the Budget and how they can monitor implementation of such a budget. So, it is my view that this Motion seeks to really assist us in terms of eliminating lopsided development. When we discussed the Presidential Speech, we saw how some areas, particularly in North Eastern Province and even my own district of Makueni, which is the second poorest district in the country after Homa Bay, have been marginalised because the Executive decided where the money was going to go. Because the budget process was not transparent, it was not possible to have even development. Therefore, I think in terms of strengthening *vis-a-viz* the important roles of legislation and oversight of Government expenditure, this Motion is going to be very critical.

Mr. Deputy Speaker, Sir, perhaps, it might not be possible to realise the Parliamentary Budget Office Bill before we conclude this financial year. I would request the Minister for Finance to organise a seminar for all hon. Members, particularly the new ones, to tell them in advance of what is being done in this Budget - I am told a lot of work is done around March - so that the new hon. Members are able to understand how they get their priorities into the Budget so that we are not left out.

Mr. Deputy Speaker, Sir, with your permission and if I am in order, I would like to suggest that this Motion, which I fully support be amended in a technical way so that we say: THAT, this House do grant leave to introduce a Bill for an Act of Parliament---

Mr. Deputy Speaker: Order! Order, Prof. Kibwana! You are out of order. If you wish to amend a Motion, you propose an amendment, write it down and then we will put it properly. You cannot just stand there and then start moving the amendment. So, please, continue with the debate on the Motion as it is.

Prof. Kibwana: I understand that I am out of order in terms of the amendment I wanted to move. It was a technical one in terms of just wording, but if I have to do that. Normally, when you make a budget, you

implement it, then you monitor and evaluate it. You do not monitor and evaluate before you implement it. So, the thrust will be that. I will appropriately write it down, because we are learning in the process.

To conclude, it is my expectation that the Minister for Justice and Constitutional Affairs, as well as the Attorney-General, will take over this very important Motion and the appropriate Bill will be brought before the House. Then, we will begin to get the NARC Government, which I am party of, implementing this Motion because research that we have done in the past has revealed that most of these Motions were for cosmetic purposes. They were passed and never implemented as such. I am happy to be part of the process of making a people-friendly Budget in terms of people debating it even from the village level, the NGOs and finally, Parliament. Truly, it is not possible to make Parliament perform its oversight role *vis-a-viz*--

Mr. Deputy Speaker: Order, Prof. Kibwana! Your time is up! Since you are still in the learning process, I would like you to consult Mr. Oloo-Aringo and see how you can introduce your amendment in due course.

Prof. Kibwana: Thank you.

ADJOURNMENT

Mr. Deputy Speaker: Hon. Members, the debate on this Motion will continue next Wednesday. The House stands adjourned now until this afternoon at 2.30 p.m.

The House rose at 12.30 p.m.