# NATIONAL ASSEMBLY

# OFFICIAL REPORT

### Tuesday, 23rd September, 1997

The House met at 2.30. p.m.

[Mr. Deputy Speaker in the Chair]

# PRAYERS

# ORAL ANSWERS TO QUESTIONS

### Question No.611

### FRUSTRATION OF KENYANS BY AMREF'S Administration Director

Mr. Obwocha asked a Minister of State, Office of the President:-

(a) if he is aware that an Ethiopian refugee, a Mr. Habtom, who is the Finance and Administration Director with AMREF, is frustrating Kenyans by undermining the policy of Kenyanisation; and,(b) if he could consider revoking his work permit to allow a truly and fully qualified Kenyan to take over his duties at AMREF.

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

(a) No, I am not aware.

(b) AMREF, as a regional organisation, has the mandate to retain top level expatriate employees as they deem suitable in accordance with the standing agreement with the Government. The issue of revoking Mr. Habtom's entry or work permit does not, therefore, arise.

**Mr. Obwocha:** Mr. Deputy Speaker, Sir, this is an unfortunate reply from the Assistant Minister. This man has frustrated qualified African accountants; Mr. Simon Imbo who was the chief accountant, Mr. Naftali Mogere, holder of Bachelor of Commerce, fellow of the Chartered Accountants and CPA, Mr. Ngugi Thiong'o, the project accountant, Mr. Samuel Omondi and Bernard Mwangi, financial accountants. I have a letter here from the Immigration Department dated 19th January, 1993, Ref.No.R546341/SAP110/A/37 to the AMREF saying, according to their records, this person should be in employment with the Githonga & Co. as senior audit manager. The letter states in part.

"I want to take this opportunity to inform you that when Mr. Habtom's entry work permit expires on 2nd January, 1993, it will not be renewed and should cease to work for AMREF". Signed by Mr. H.A. Odongo, the Principal Immigration Officer. That is a letter---

Mr. Deputy Speaker: Why do you not table it?

**Mr. Obwocha:** Mr. Deputy Speaker, Sir, let me table this letter. If Immigration Department said that this man should go because we have qualified Kenyan Africans, why is he still in employment with AMREF?

# (Mr. Obwocha laid the letter on the Table)

**Mr. Sunkuli:** Mr. Deputy Speaker, Sir, I would like just to draw the attention of the hon. Member that Mr. Habtom is actually an Ethiopian. So he is an African.

But what the hon. Member has said, and very correctly, is that complaints have been received by the Government about the conduct of Mr. Habtom that, in fact, he has been trying to frustrate some Kenyans. The Government has investigated these claims and what I found out is that many of these complainants had also contravened the terms of their own agreements; the terms and conditions of their work. But I want to assure the hon. Member that in view of this letter, I am going to investigate this matter and draw it to the attention of the AMREF and make sure that AMREF do know that some Kenyans are complaining about this particular matter.

Mr. Farah: Mr. Deputy Speaker, Sir, whereas we do not want our own Kenyans to be frustrated here, it is

also cardinal for us to understand that there are many Kenyans who are working for the Economic Commission of Africa in Addis Ababa and for many other organisations that are based in Ethiopia. We have to be very careful in not frustrating other workers from a country like that lest we suffer also a reciprocal position by those governments. Can the Assistant Minister tell us that he is not going to try and jeopardise the job of this person, if there is no adequate evidence or other adequate grounds for that?

Mr. Deputy Speaker: That is a hostile question, Mr. Farah!

**Mr. Sunkuli:** Mr. Deputy Speaker, Sir, indeed, it is not a hostile question; it is a very friendly question. I want to thank hon. Farah for affirming this particular position of the Government, that we are not unnecessarily going to frustrate a person. But we are going to ensure that we bring to the attention of AMREF the fact that some Kenyans are complaining so that Mr. Habtom himself can see that there is room for improving his own conduct.

**Mrs. Nyamato:** Mr. Deputy Speaker, Sir, it is against Kenyan policy and Kenyanisation to employ a non-citizen when there is a Kenyan who can perform the job. The AMREF and OAU cannot be compared. So, it has nothing to do with the victimisation of Kenyans who could be working with the OAU because those ones will be working as international civil servants. But this is a clear case where a foreigner is holding a job that could be done by a Kenyan and his permit should be cancelled as demanded.

**Mr. Farah:** On a point of order, Mr. Deputy Speaker, Sir. For the benefit of everybody in this House, AMREF is a regional body that is based in Ethiopia and other countries in the region.

**Mr. Sunkuli:** Mr. Deputy Speaker, Sir, in addition to what hon. Farah has said, the Government policy is that where there is a Kenyan who can do the job, then the company or foreign body must not be allowed to bring in their expatriates. However, AMREF is a regional body and it is only based here in Kenya. It serves the region. It is not really an investor as such and, therefore, the policy of bringing in people does not strictly apply. It is like the UNO which is based here. It can bring people from any part of the world because this is just a headquarters.

**Mr. Obwocha:** Mr. Deputy Speaker, Sir, I take great exception to what hon. Farah has said. It is wrong for Members to be lobbied on questions we are asking for the benefit of Kenyans. This man is a refugee! Hon. Farah should declare his interests! This man, Habtom is an Ethiopia refugee and there are qualified Kenyan Africans below him in AMREF whom he has been frustrating. Why did they violate this letter from the Immigration Department? Why did they re-employ him when his permit expired, if you are not compromised?

**Mr. Sunkuli:** Mr. Deputy Speaker, Sir, indeed, Mr. Habtom, as I said, is an Ethiopian who came in as a refugee and he was employed by the AMREF in 1991. Ever since then, AMREF has continued to apply for a work permit for Mr. Habtom. The Government of Kenya and AMREF have an agreement and it will be in contravention of that agreement for the Kenya Government to do anything towards the removal of Habtom or otherwise.

Mr. Deputy Speaker: Next Question, Mr. Nyagah.

### Question No.591

### MEASURES TO BOOST CIVIL SERVANTS' MORALE

Mr. Nyagah asked a Minister of State, Office of the President:-

(a) if he is aware that civil servants' morale is at the lowest ebb, since the promised salary increases have not been effected;

(b) why the Government relies on donors to pay civil servants who work tirelessly to provide essential services for this Republic; and,

(c) what immediate measures the Minister intends to take to boost the morale of the servants.

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

(a) I am not aware that the civil servants' morale is at the lowest ebb because the promised salary increases have not been effected.

(b) It is not true that the Government relies on donors to pay civil servants.

(c) The hon. Members are aware that the matter of terms and conditions of service for civil servants has been subject to a commission of inquiry appointed by the President on 12th December, 1996. Since we received those recommendations, the Government has now, as an interim relief measure, announced salary increases of between 28 per cent and 10 per cent for the lowest to the highest cadre of the civil servants. These increases are backdated to 1st July, 1997, and are due to be paid with arrears along with their September, 1997, salary.

**Mr. Nyagah:** Mr. Deputy Speaker, Sir, I have great respect for hon. Koech, but that will diminish him because of the answer he has given in part "a". I brought a Motion here questioning the morale of the civil servants and it was passed. However, be that as it may, could the Minister tell us why the Munene Commission, the one he refers to as having been instituted on 12th December, 1996, only approved salary increments not by between 28 per cent and

10 per cent, but by between 202 per cent and 100 per cent, plus a house allowance increase of up to Kshs40,000 per month for those on Job Groups between A and S?

**Mr. Koech:** Mr. Deputy Speaker, Sir, I am aware of the recommendations of the Munene Commission, but as a Government, we must pay what the Exchequer can afford.

**Mr. Mulusya:** Mr. Deputy Speaker, Sir, could the Minister tell this House what was the purpose of setting up the Munene Commission which the Government paid so much money to carry out that exercise and at the end of the day, they made recommendations which this Government declined to implement in full? What was the purpose of setting up the Commission, if at the end of the day, they were going to use arbitrary means of arriving at the salary increases for the civil servants?

**Mr. Koech:** Mr. Deputy Speaker, Sir, as I said before, I am aware of the recommendations of the Munene Commission. The Commission was set up with very good intentions, but it does not mean that once the Commission has finalised its work, the Government cannot go into the details of the report and see the possibility of paying the salaries. We cannot pay what we do not have.

**Mr. Nyagah:** Mr. Deputy Speaker, Sir, it does, honestly, beat the purpose of the creation of this Commission. The 10 per cent increment is peanuts! The Commission recommended, as I said, a salary increment of 202 per cent, and the Minister has not even mentioned how much increment he has given the civil servants in the current recommendation. An Under-Secretary is being paid a house allowance of Kshs3,612 per month. That person can only live in Dandora. He cannot give an eight-hour day job to the Government; he must create other methods of stealing and running away from the Government services. When will the Government consider that the backbone of it being called a Government is because of the Civil Service that it has in place? When will it be in a position to adequately pay them and not to suck their blood as is the current position?

**Mr. Koech:** Mr. Deputy Speaker, Sir, I do sympathise with the sentiments of the hon. Member. A Sessional Paper is being prepared which is exploring ways and means of how best we can handle the issue of house allowance for civil servants. As to the finances---

**Mr. Mulusya:** On a point of order, Mr. Deputy Speaker, Sir. There is the Munene Commission which was set up by the same Government---

Mr. Deputy Speaker: Order! Order! It is a disorderly point of order.

### (Laughter)

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

**Mr. Deputy Speaker:** Order! I have disallowed your point of order. Why do you not have the courtesy of listening to the Minister until he has finished replying before you rise on a point of order which turns out to be a supplementary question? It is very obvious.

Mr. Mulusya: It is not a supplementary question---

**Mr. Deputy Speaker:** Order! From your opening remarks, it is very obvious to me, that you are just speaking in a cheeky manner to ask another supplementary question before he has even finished the first one.

Mr. Mulusya: Mr. Deputy Speaker, Sir, I did not bring any other matter into this House.

Mr. Deputy Speaker: Mr. Minister, would you finish?

**Mr. Koech:** Mr. Deputy Speaker, Sir, I wish the hon. Member could be patient. We need to be patient and a little more mature in this House.

Mr. Mak'Onyango: On a point of order, Mr. Deputy Speaker, Sir.

Mr. Deputy Speaker: Disallowed!

**Mr. Ndicho:** The Minister has insulted the hon. Member.

Mr. Deputy Speaker: Order! Next Question, Mr. Mwangi Gichuki?

Question No.570

# PAYMENT OF TERMINAL BENEFITS

# TO MR. WAIBOCHI

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

Mr. Deputy Speaker: I have ruled out any point of order at this stage.

Mr. Mwangi Gichuki not here? The Question is stood over for the moment.

Mr. Mulusya: Is the Chair in order to (inaudible)?

Mr. Deputy Speaker: Order! Order, Mr. Mulusya!

Mr. Mulusya: Mr. Deputy Speaker, Sir, I have been insulted.

Mr. Deputy Speaker: Order! Who insulted you, Mr. Mulusya?

Hon. Members: Hon. Koech!

Mr. Deputy Speaker: I did not hear that.

**Mr. Mulusya:** On a point of order, Mr. Deputy Speaker, Sir. The HANSARD will bear me witness that the Minister said that I am "immature" by pursuing a point of order. Is the Chair satisfied that the hon. Minister is in order to insult me, that I am "immature", when he just resigned the other day in the evening and then in the morning, he rescinded his decision and was back in the Cabinet? Who is more immature than the other?

# (Laughter)

**Mr. Deputy Speaker:** Order! I suppose you have revenged and you do not need any further comment! I want to state for the avoidance of doubt that I did not hear that word, and the word "immature" in reference to an hon. Member is unparliamentary. I hope, Mr. Minister, you did not say that?

Hon. Members: He said so!

Mr. Deputy Speaker: If you did, you will have to withdraw. Otherwise, the HANSARD will bring you

out!

Next Question, Mr. Njoka Mutani.

# Question No.500

# CONSTRUCTION OF IRIGU BRIDGE

Mr. Mutani asked the Minister for Public Works and Housing:-

(a) if he is aware that one side of Irigu Bridge in Kithangani Location, near Weru Market, Chuka

Division, is being constructed by wananchi on Harambee basis; and,

(b) if so, what financial assistance he is considering to give to these residents in order to complete

the bridge and ease communication between Kithangani and Gitareni Locations.

The Assistant Minister for Public Works and Housing (Col. Kiluta): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am not aware that wananchi are constructing Irigu Bridge in Kithangani Location, Chuka Division, near Weru Market on Harambee basis. Further, there is no bridge at this site. However, I am aware that the local residents had commenced raising funds for construction of a bridge on this site in question.

(b) The construction of the bridge has been included in this financial year's bridging programme so that the project can benefit from the Ministry's funding and technical advice. Kshs1 million will be spent on this project in this financial year.

**Mr. Mutani:** Mr. Deputy Speaker, Sir, when I asked this Question the first time, I was given an answer in which the Minister said he was aware that the bridge was constructed on Harambee basis. Today, he has given a different answer, that he is not aware. If I had known that the Question would appear on the Order Paper, I would have brought that answer because I have got it.

Mr. Deputy Speaker, Sir, this bridge is in a semi-arid area of Nithi Constituency. Wananchi started collecting money in two Harambee meetings and in consultation with the Ministry, they bought the required materials and the Ministry constructed one side of the bridge. Since we are in the first quarter of this financial year, would the Ministry, therefore, release the funds to complete this bridge? I will bring the first answer because I have it.

**Col. Kiluta:** Mr. Deputy Speaker, Sir, I do not really see the problem here. We have already set aside Kshs1 million to assist in the construction of that bridge this financial year. The total cost of the bridge is Kshs3 million which was not budgeted for. The remaining money will be provided for during the next financial year.

**Mr. Mutani:** Mr. Deputy Speaker, Sir, the Assistant Minister has not answered the question. Will he release the money this financial year to complete the bridge? The bridge is not as big as he thinks.

Col. Kiluta: Mr. Deputy Speaker, Sir, I said that Kshs1 million has been budgeted for that bridge this financial year.

# Question No.309 DISMISSAL OF MIBISCO LIMITED WORKERS

Mr. Ruhiu asked the Minister for Labour and Manpower Development:-

(a) whether he is aware that Mibisco Limited of P.O. Box 17592, Nairobi, unlawfully terminated the

services of the following employees in January, 1997: Messrs Sebestian Musungu, Zedekiel Karogu, Reuben Muli, Philis Chikuku, Kioko Matheka, Onesmus Mwikya, Moses Amboye, Kisilu Musyoka, Pius Maina, Juma Nzuki, Musembi Mutua, Ensali Samson, Patrick Muinde, Stephen Kyalo, Gideon Nyabondo, Francis Mwite and Charles Wambaa;

(b) whether he is further aware that this company has not yet paid the complainants their terminal benefits; and,

(c) if the answers in "a" and "b" above are in the affirmative, what action he is going to take to ensure that they are paid their benefits.

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

(a) I am aware of the termination of services of the above persons.

(b) I am also aware of the failure by the company to pay the named persons their terminal benefits.

(c) The Ministry submitted a formal claim of terminal benefits to the company on 1st April, 1997 for settlement. Negotiations are going on and court action will be invoked against the employer if the claims are not settled within 14 days.

**Mr. Ruhiu:** Mr. Deputy Speaker, Sir, this is a very clear case of exploitation of indigenous workers by Asians in this country. This factory is situated along Kangundo Road in my constituency. These workers were dismissed early this year and the Assistant Minister is telling us that they are going to invoke court proceedings within 14 days. These people have been living without any means of livelihood. They have got families to feed and yet, the Ministry waits for a year before it invokes court proceedings. Can the Assistant Minister tell this House why they have taken so long when they know that this is a clear case of Asians exploiting indigenous workers? That is the reason why we are saying that Asians must go!

**Mr. Ali:** Mr. Deputy Speaker, the issue here is the time factor. The Ministry has not taken long. In fact, it has moved very fast from April to date, and it has given 14 days notice from 19th September, 1997. This notice will end on 2nd October, 1997.

**Mr. Ruhiu:** Mr. Deputy Speaker, Sir, he has said that the Ministry has taken a very short time. May I ask him what time is "short time"? Is January to October this year, according to him, a short time? What time is "short time", according to your Ministry?

**Mr. Ali:** Mr. Deputy Speaker, Sir, the Member should understand that there is a procedure to be followed and this was not properly followed. Here, the employer recognised the union which covered the workers but the workers did not recognise the same union. So, in that confrontation, the matter has actually taken time.

**Mr. Ndicho:** Mr. Deputy Speaker, Sir, the Members of Parliament who represent factory workers in this House are suffering a lot because African workers, who are work in Asian-owned factories are subjected to a lot of frustrations. They are not paid salaries and when they are paid, such salaries are delayed. What is the Assistant Minister going to do with field labour officers who are notorious for making the workers suffer because they are bribed by Asians in every factory where Africans are involved in trade disputes, for instance, in Embakasi and Thika where I am suffering a lot?

**Mr. Ali:** Mr. Deputy Speaker, Sir, bribery and corruption is a very serious matter and the Government does not condone such action. If anybody is found being bribed, serious action will be taken against him, unless hon. Ndicho has specific persons in mind.

**Mr. Ndicho:** On a point of order, Mr. Deputy Speaker, Sir. I have asked the Assistant Minister a specific question and he has generalised it. I have asked him what he is going to do with corruption as practised by labour officers in the field. I have given examples in Thika and Embakasi. You have admitted that it is there, but what are you going to do about it?

**Mr. Ali:** Mr. Deputy Speaker, Sir, it is not only the duty of the Ministry to do that, but the entire Government will take serious action against any person found being involved in corruption. Hon. Ndicho should substantiate and give us the names of those people in Embakasi and Thika.

**Mr. P.N. Ndwiga:** Mr. Deputy Speaker, Sir, can the Assistant Minister confirm or deny that the reason why we have these mass sackings of Africans in Asian dominated firms is because we have got so many immigrant Indians and Pakistanis who have come into this country and have been given work permits because they provide cheap labour? Our children have no jobs and yet, others are being sacked in this manner. Can he confirm or deny knowledge of these immigrants who provide cheap labour in the Asian-owned factories?

**Mr. Ali:** Mr. Deputy Speaker, Sir, he has not asked a specific question. I am not aware of such harassment in Asian-owned firms.

#### Question No.175

#### ALLEGATIONS AGAINST SOTIK TEA COMPANY

Mr. Anyona asked the Minister for Labour and Manpower Development:-

(a) whether he is aware that Sotik Tea Company does not provide its employees with protective gloves, ambulance services, light duties for expectant mothers, co-operative society facilities and workman's compensation benefits;

(b) whether he is further aware that weighing scales are manipulated to defraud workers; service charges are not standard for employees of the same grade and women are not promoted to supervisory grades; and,

(c) if the answers to "a" and "b" above are in the affirmative, whether he will institute urgent investigations into these allegations against the Company, and take appropriate remedial measures.

### (Mr. Ali remained seated)

**Mr. Anyona:** On a point of order, Mr. Deputy Speaker, Sir. You called me to ask my Question and I did ask my Question, but the Assistant Minister is just sitting there!

Mr. Deputy Speaker: Hon. Ali, can you respond to Question No.175 by hon. Anyona?

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

(a) I am not aware.

(b) I am not aware of the manipulation of weighing scales by the management, to underpay and exploit workers. The weighing scales are inspected on quarterly basis. As for the promotions, supervisory grades are not gender-discriminative, and service charges are not based on standard rates, but are instead paid according to salary scales.

(c) Investigations have established that the allegations under parts "a" and "b" above do not obtain at Sotik Tea Company. However, my officers will continue to carry out routine inspections.

**Mr. Anyona:** As we said before, this Ministry is really an enemy of the workers. Right now, the Ministry is involved in undermining the welfare and the interests of the workers. In his answer to part "a" of the Question, he said that he is not aware. Part "a" of the Question asks: "Is he aware that Sotik Tea Company does not provide employees with protective gloves, ambulance services, light duties for expectant mothers, co-operative society facilities and workman's compensation benefits?" Can he confirm or deny that these things are provided? What is he saying? Is he saying that they are provided? Is he saying that they are not provided? Is he saying that he does not know, or what is he saying?

**Mr. Ali:** Mr. Deputy Speaker, Sir, the recent inspection, which was carried out on 24th April, 1997, ascertained that all these things were provided. However, as I said earlier, our inspection is carried out quarterly. We will carry out further investigations if the same are not implemented.

**Mr. Anyona:** Mr. Deputy Speaker, Sir, the answer he has given is different from what he said earlier. I want to put it in another way to him. In his answer to part "b" of the Question, he said: "Promotion to supervisory grades is not gender discriminative". Part "b" of the Question is asking why the women are not promoted to supervisory grades. Can he confirm or deny that women are promoted, and give us the names of the women and the grades to which they have been promoted?

**Mr. Ali:** Mr. Deputy Speaker, Sir, they are not gender discriminative because there are 474 women employees out of 3,800, and ten of them are holding supervisory posts.

**Dr. Lwali-Oyondi:** Mr. Deputy Speaker, Sir, the Assistant Minister has stated that he inspects factories quarterly. Is he aware that at the moment, the chemical factories, including the tobacco factories, are not giving any facilities at all? As a result, many people are now dying of nicotine poisoning and diatomite and asbestos inhalation? If he is aware, could they conduct the inspections weekly?

**Mr. Ali:** Mr. Deputy Speaker, Sir, right now, we are dealing with tea companies and not tobacco companies. So, the hon. Member should bring a Question on that. However, when there is a demand, inspections are even done daily and not weekly.

#### Question No.508

#### BOTTLING OF WATER FOR SALE

**Mr. Deputy Speaker:** Is Mr. Munyasia not here? We will leave his Question until the end. Let us move on to Question No.570 for the second time, by hon. Gichuki.

Question No.570

# PAYMENT OF TERMINAL BENEFITS TO MR. WAIBOCHI

Is hon. Gichuki still not here? His Question is dropped.

(*Question dropped*)

For the second time, Question No.508 by hon. Munyasia.

Question No.508

### BOTTLING OF WATER FOR SALE

**Mr. Kapten:** Mr. Deputy Speaker, Sir, hon. Munyasia requested me to request you to defer this Question to tomorrow.

Mr. Deputy Speaker: Why did you not communicate to me earlier than now? It looks like---

**Mr. Kapten:** He told me that if he does not come in time, I should ask his Question to be deferred. I can see he is not here on time. So, can you defer the Question to tomorrow?

Mr. Deputy Speaker: I will accede to that. Question No.508 is deferred.

(Question deferred)

# QUESTIONS BY PRIVATE NOTICE

TENSION IN KIBERA ESTATE

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

(a) Is the Minister aware that tension is rife at Kibera Estate and that following reports that violence similar to the Likoni incident is imminent, some residents are fleeing the area?

(b) If the answer to "a" above is in the affirmative, could the Minister investigate and take appropriate action to avert any occurrence of such violence in this area?

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

(a) I am aware that there were rumours that violence may erupt in Kibera. These rumours have since ceased following a series of barazas held by the Provincial Administration to reassure the wananchi of their safety. However, I am not aware of any persons who have fled the area of late.

(b) The Government is closely monitoring the situation with a view to pre-empting any flare-up of violence.

**Mr. Raila:** Mr. Deputy Speaker, Sir, I did not get a written answer. But arising from the Assistant Minister's reply, there is information to the effect that the same people who have been responsible for the violence in Likoni have been holding meetings with people around Langata area, and that there are some people who are camping at Ngong Forest, in readiness to attack the residents of Kibera, and make it appear as if it is ethnic clashes between the Nubians, Kikuyus and Luos living at Kibera.

If the Government has heard about these rumours, what concrete steps is it taking to deal with the people who are camping at Ngong Forest, in order to defuse the tension that is building up in the area?

**Mr. Ndicho:** On a point of order, Mr. Deputy Speaker, Sir. The Chair has ruled before that this House does not go by rumours, yet, the Assistant Minister is saying that he has heard rumours. Is that in order?

Mr. Deputy Speaker: In fact, he did not say that he had heard rumours!

**Mr. Ndicho:** He said that "rumour has it"! How can a whole Government say that rumour has it? He should investigate the matter to avoid using the word "rumour". These things are real; they are not rumours as he said.

**Mr. Manga:** Mr. Deputy Speaker, Sir, a rumour is a rumour, and you cannot avoid hearing a rumour. So, I do not know what hon. Ndicho wants. However, I want to beseech hon. Raila that he should not make the situation worse by increasing the rumours. If he is sure of the rumour of Nubians and other people hiding somewhere, he has the right to give such information to the security people, so that the problem can be dealt with, rather than just bringing it up. I think he is creating it himself!

**Mr. Ojode:** Mr. Deputy Speaker, Sir, the Assistant Minister is misleading this House. This is a very sensitive issue, and he should not just say that it is a rumour. Already, there are leaflets which have been circulated in Kibera and he is aware of it.

#### An hon. Member: Aware of what?

**Mr. Ojode:** You ask the Assistant Minister! As I am talking to you, there is a lot of tension at Kibera. Can he confirm or deny that there are leaflets which are being circulated in Kibera? He should tell the House the origin of these leaflets.

**Mr. Manga:** Mr. Deputy Speaker, Sir, I have said that these are rumours. I also want to say that the leaflets are also coming from the rumours. Therefore, the Government has taken steps to hold barazas. If the hon. Member says that the leaflets are actual, and he knows where they are coming from, we will be very happy to be informed, and I will deal with the matter.

**Mr. Wamalwa:** Mr. Deputy Speaker, Sir, rumours in Kenya have a habit of turning out to be true. Apart from the barazas that chiefs have been addressing in that area, what other contingency plans has the Government got in case this rumour turns out to be true? For example, is the Government beefing up security in the area?

**Mr. Manga:** Mr. Deputy Speaker, Sir, I answered that question in part "b" of my reply. The Government is closely monitoring the situation with a view to pre-empt any type of violence.

**Prof. Mzee:** Mr. Deputy Speaker, Sir, the chaos being experienced in Likoni started with similar rumours. You will notice that the target group in Kibera is the same as that being targeted in Likoni. I fear that the Government is scaring Luos in Langata so that they remove hon. Raila from his parliamentary seat. I would like the Assistant Minister to assure us that this will not happen, and if it happens, the Government is to blame.

**Mr. Manga:** Mr. Deputy Speaker, Sir, Prof. Mzee has just made a very serious allegation. We would be very happy if he could be asked to substantiate that allegation.

**Mr. Raila:** Mr. Deputy Speaker, Sir, it is true that the violence in Likoni was preceded by similar rumours. In Likoni, the people who have been arrested for being in possession of the weapons which were used to kill policemen at the Likoni Police Station have not been charged with murder in a court of law. Instead, Maitha and Masumbuko are charged with possessing illegal firearms. This in itself is a clear confirmation that the Government is behind the violence in Likoni. Can the Assistant Minister give this House assurance that the very same people who are unleashing terror in Likoni are not going to be allowed to kill innocent Kenyans with impunity at Kibera so that the Government can rig itself back into power during the forthcoming General Elections?

**Mr. Manga:** Mr. Deputy Speaker, Sir, I am not an expert in court matters, but I know that people have been arrested and investigations are being carried out. I want to say that if hon. Raila is an expert in court matters, he should not have interfered in the case involving the people who killed a policeman in his presence at Nairobi's City Park.

Mr. Raila: On a point of order, Mr. Deputy Speaker, Sir. No one condones violence in this country.

# Hon. Members: Except KANU!

**Mr. Raila:** Mr. Deputy Speaker, Sir, no one condones killings in this country except those who have not sent condolences to the families of the 14 people who were brutally murdered by the policemen on the Saba Saba Day. We condemn the people who carried out the killings during the Saba Saba and Nane Nane violence where a police officer died. Two civilians were also killed on that day. Is the Assistant Minister in order to insinuate that we, on this side, condone violence when we know that it is the Government which does that? The Government failed to send messages of condolences to the families of the people who were brutally murdered by the policemen on Saba Saba Day including a schoolboy in Thika and a university student. Is he is order to say that?

**Mr. Manga:** The Assistant Minister is quite in order to say that the Government has no intentions of killing its own people. He is also quite in order to say that all these acts are instigated by people like hon. Raila who incite wananchi to cause chaos.

Mr. Deputy Speaker: We will move on to the next Question by Private Notice.

### ASSISTANCE TO KENYAN STUDENTS OVERSEAS

(Mr. Nthenge) to ask the Minister for Education:-

(a) Why has the Ministry declined to assist parents in bringing back students who go overseas for

further studies, and for unforseen reasons, are unable to complete their studies and are required to return back by host countries?

(b) Could the Ministry consider, on humanitarian grounds, assisting the affected students to return home whenever they fail to successfully complete their studies?

Mr. Deputy Speaker: Mr. George Nthenge is not in and, therefore, the Question is dropped.

### (Question dropped)

### DEATH OF MR. KIMOTHO

Ms. Karua: Mr. Deputy Speaker, Sir, I beg to ask the Attorney-General the following Question by Private Notice.

(a) Is the Attorney-General aware that on 22nd July, 1997, police from Ithareiini Police Post in company of youth wingers from Ithareiini travelled to Ndomba, some 10 kilometres away, and allegedly murdered Mr. Samson Muchiri Kimotho?

(b) Is he further aware that, although the police and youth wingers have been identified by eye witnesses, no arrests have been made and further that the body of the late Kimotho has been secretly buried?

(c) What arrangements is the Attorney-General making for the body to be exhumed for postmortem and eventual release to the mother for burial?

The Attorney-General (Mr. Wako): Mr. Deputy Speaker, Sir, I beg to reply.

(a) I am aware that one Samson Muchiri Kimotho was killed on 22nd July, 1997. I am ascertaining whether investigations into the murder are being carried out. If not, I will direct the Commissioner of Police to investigate and in any event the Commissioner of Police is directed to submit the investigations file to me.

(b) I am not aware that the police and the youth wingers have been identified by eye witnesses. However, the eye witnesses can make statements to the police or to my office to enable further investigations to be carried out. The body of the late Samson Muchiri Kimotho was buried after an order for its disposal was given by the Medical Officer Health, Kerugoya District Hospital.

(c) The Senior Resident Magistrate at Kerugoya issued an order to exhume the body for postmortem on 17th September, 1997. This is yet to be executed and I would urge the family of the deceased to co-operate.

**Ms. Karua:** Mr. Deputy Speaker, Sir, it appears that the hon. Attorney-General is answering the Question without sufficient information. It is not only that the youth wingers and police officers murdered the late Samson Muchiri Kimotho; they were arrested on the same day and detained overnight. Eye witnesses made statements to that effect. Could the Attorney-General tell us why the suspects were released and what happened to the statements the eye witnesses recorded and also why the police buried the body while I had talked to the OCS, a Mr. Kephyr Mbote, and informed him that the mother was going with a doctor and the Kenya Human Rights Commission officials to have a postmortem performed on the body?

**Mr. Wako:** Mr. Deputy Speaker, Sir, I did state in my answer that I am currently ascertaining whether investigations into the murder are being carried out. Obviously, that would indicate that I do not have all the information and I do agree with the hon. Member to that effect. As I stated, if it is true that they have made statements to the police then, obviously, investigations are being carried out. If that is true, I have directed that the investigations file be brought to me for further action.

**Ms. Karua**: Mr. Deputy Speaker, Sir, I want two assurances from the Attorney-General. The same police officers who are guilty of a cover-up, by burying the body of the deceased without a postmortem, cannot be expected to investigate themselves. Could the Attorney-General assure this House that a new team of police officers will investigate this case and possibly the officers involved in this matter at Kerugoya, especially the OCS, will either be transferred or suspended pending this investigation? Secondly, could the Attorney-General give a date, possibly this week, when the body can be exhumed and a family doctor be present for purposes of identification and postmortem? Any time we lose, the body is decomposing and evidence is being destroyed.

**Mr. Wako**: Mr. Deputy Speaker, Sir, obviously, from what the hon. Member is saying, the investigation on the part of Kerugoya Police Station may not be seen to be independent, fair and objective in the eyes of the public. Therefore, I will be ordering the Commissioner of Police to send an independent team from outside Kerugoya, maybe from Nairobi, to carry out proper investigations into this matter.

As to the date of exhumation, I can definitely give Friday 26th September, this year. Therefore, the family of the deceased are expected to co-operate.

**Prof. Ouma**: Thank you, Mr. Deputy Speaker, Sir. The Question which has been asked by hon. Karua is not isolated. Very frequently, we hear from the Floor of this House, Questions asked on cases where the police have

arrested people and released them or other people who have been held as suspects are later released. I have a private belief that, for every case here, there must be tens of others not mentioned. That is a dangerous trend! What is the Attorney-General going to do to ensure that this type of negligence or cover-up does not go on? It does reflect very badly on the judicial system and on the work of the police. What is he going to do to ensure that this does not go on and wananchi can receive justice without Questions being asked in Parliament?

**Mr. Wako**: Mr. Deputy Speaker, Sir, obviously, in this particular case, if as a result of these independent investigations, it is found that the police officers in question, either infringed or participated in the murder, then the due process of the law will take place. Any allegation against the police that is brought to our attention is looked into, investigated and action taken.

Secondly, when we shall be debating the Statutes Law (Repeals and Miscellaneous Amendments) Bill, you will find that the Inter-Parties Parliamentary Group (IPPG) has introduced new clauses to the Police Act on these very matters, and that will give added statutory basis for taking effective action against the police in regard to this. On the issue of long-term steps taken, I can assure this House that my office, the Commissioner of Police together with the Department of International Co-operation of the Government of the United Kingdom will soon be mounting a crash programme to train all the senior officers in matters relating to human rights, so that they must give due respect to the rights of the people as they execute their duties. That programme is due to start very soon.

**Ms. Karua**: Mr. Deputy Speaker, Sir, in view of the seriousness of this matter, where human life has been lost, could the Attorney-General assure this House and the mother of the deceased, who is in the Speaker's Gallery, that since he has inadequate information today, in a week's time, perhaps next week, he can tell this House what action his office has taken concerning bringing the culprits to book?

**Mr. Wako**: Mr. Deputy Speaker, Sir, I did not realise that the mother of the deceased was in the Speaker's Gallery. I would like to convey my condolences to her and assure her that the Government will do whatever it can to ensure that the culprits are brought to book. One week may be too soon because if an independent team is going there, it may take more than one week. But what I can assure this House is that I will ask them to expeditiously investigate, and I will inform the mother through the hon. Member, as to what action I am taking on this matter.

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

Mr. Deputy Speaker: Order! I had said "the last question by hon. Karua" and she asked the question.

Next Order.

### MINISTERIAL STATEMENT

### CHOLERA OUTBREAK IN NYANZA

The Minister for Health (Gen. Mulinge): Mr. Deputy Speaker, Sir, last week, I promised the House that I will give a Ministerial Statement on cholera outbreak in Migori, Homa Bay, Rachuonyo, Suba, and Kisumu districts. We have had an outbreak of cholera in the above districts and the first case which was investigated has revealed that it originated from a neighbouring country. This was confirmed on 26th June, 1997, at Macalder Health Centre in Migori District. Since then, the disease has spread progressively to other districts and a total of 1,122 cases of infection and 65 deaths have so far been reported. Immediately the first case was diagnosed, the Ministry of Health, through the District Health Management Team at Migori, swung into action and; surveillance and control activities were set into motion. All the other neighbouring districts' health management teams were advised to institute similar steps to contain the situation. The teams have been carrying out the following functions:

Treating the cholera patients; tracing those who have been in contact with the cholera patients; treatment of those contacted and conducting health education regarding the disease and its preventive measures.

Attached are the details of the problems encountered during the exercise and the Ministry of Health has disbursed funds to the area:-

- 1. Extremely low latrine coverage and unwillingness by the community to construct latrines and use them.
- 2. Bathing and collecting water for domestic use from the same spot.
- 3. Feasting at funerals without bothering about the possible disease spread through food contamination.
- 4. Very poor sanitation in the towns and markets.
- 5. Unhygienic litter disposal.
- 6. Negative Press coverage of the outbreak.

Mr. Deputy Speaker, Sir, the Ministry has distributed some funds totalling to Kshs1,480,000 to various districts in the affected area. There is a long list here and I am going to lay it on the Table.

The Ministry of Health has strongly supported the activities of our field officers by continuously providing

them with required equipment, drugs and supply of other logistics when required. Although we are still receiving new cases, we have set up an executive machinery to put the situation under control. Cholera is a disease of poor personal hygiene, and inadequate basic environmental situation. While the Ministry will do all that it can to control the outbreak, there is a lot that the community can do to supplement our efforts. I take this opportunity to appeal to the people in the area to take all those with diarrhoea and other cholera symptoms to the nearest health facilities and follow the advice given to them by our field health personnel on personal hygiene. More emphasis should be put on construction and use of pit latrines, boiling of drinking water, while eating food and feasting in funerals should be completely avoided.

Mr. Deputy Speaker, Sir, all those who have been so far affected in various districts, including those who have died are listed here. I therefore table the list here for scrutiny.

(Gen. Mulinge laid the list on the Table)

Mr. Ojode: On a point of order, Mr. Deputy Speaker, Sir.Mr. Deputy Speaker: I beg your pardon. Was this statement in response to a request for a point of order?

(Prof. Ouma stood up in his place)

Mr. Ojode: (Inaudible)

Mr. Deputy Speaker: Who had requested for the Ministerial Statement?

Mr. Ojode: Mr. Deputy Speaker, Sir, I did.

**Mr. Deputy Speaker:** Mr. Ojode did request for the Ministerial Statement. Well, there is no hard fast rule about this, but I think we have a practice that we should tolerate one or two attempts to elicit further elucidation. I will, on that account, recognise hon. Ojode to ask a question.

**Mr. Ojode:** Thank you, Mr. Deputy Speaker, Sir. The statement given by the Minister is quite misleading. Our people are not dying simply because of lack of latrines, but they are dying because of lack of drugs. The drugs which had already been given out get their way to other places and do not reach the people. Lack of transport within the affected areas makes it difficult to combat this epidemic. Could the Minister avail some money--- I heard him talking of Kshs1.4 million which has been used. Could he tell us in which areas this money was spent? In Ndhiwa alone, we have never seen the drugs he is talking about.

Last week, I requested the Minister to issue an Authority to Incur Expenditure (AIE) for only Kshs34,000 for the repair of Magina ambulance. To date, he has not done anything to that vehicle. I would request the Minister to, at least, investigate whether these drugs which are released from the Central Medical Stores find their way to the right place. He should also find out whether the Kshs1.4 million he has talked about gets to the right people. The Minister also spoke of drugs in general. Could he also tell us what kind of drugs he supplied to these various health centres and where?

The Minister for Health (Gen. Mulinge): Mr. Deputy Speaker, Sir, the very day that the hon. Member asked me to issue a Ministerial Statement here, I sent the Director of Medical Services to Nyanza and he was there for two days. The information I have given here is the information he got on the ground. This information was not passed on to him; he was there himself and saw these things. The fact of the matter is that drugs are available and money is there for the purchase of more drugs. But I agree the problem of transport is there, because there is no money to purchase the vehicles.

# (Mr. Ojode interjected)

Just a minute, Mr. Ojode. I am waiting to get some money from somewhere which I will use on transport. But as things are today, we are aware that it is not only the Ministry of Health which is faced with the problem of transport. But we have no problems with drugs as they are available. If the drugs are exhausted out there in the field, we have drugs in the medical stores here in Nairobi.

### POINT OF ORDER

MINISTERIAL STATEMENT SOUGHT: SALE OF DANGEROUS BREW **Mr. Maundu:** Thank you, Mr Deputy Speaker, Sir. I rise to seek a Ministerial Statement from the Office of the President with regard to a matter which has been brought to the attention of the Provincial Administration, on account of a brew which is---

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

Mr. Deputy Speaker: He is on a point of order. You know the rules of the House.

**Mr. Maundu:** Mr. Deputy Speaker, Sir, I rise to seek a Ministerial Statement from the Office of the President with regard to a matter which has been brought to the attention of the Provincial Administration, on account of a brew which is being distributed and sold in the Ukambani region of Kenya by Kuguru Food Products. This brew is sold under the name of "sorghum" or *sake* or even, as locally described, *furuta*. This brew is being distributed in lorries, open jerricans and contaminated bottles. It is a dangerous brew because its consumers will never get to their destination when drunk. They move one step forward and three steps backwards. What has happened seriously is the fact that many homes have been broken, children abandoned and many children will miss going to school. It is a dangerous brew and can only be likened---

Mr. Deputy Speaker: Will you, please, complete your statement?

Mr. Maundu: Mr. Deputy Speaker, Sir, I am completing my statement now. I am only making two more statements.

**Mr. Deputy Speaker:** You asked for an opportunity to raise a matter of an urgent nature on a point of order. But you are engaging in debating a matter which is not before the House. Why do you not raise it before the House?

Mr. Maundu: Thank you, Mr. Deputy Speaker, Sir. I am concluding now.

This brew can only be likened to the Mexican Tonardo, which is distributed to people to incapacitate them. I am asking the Minister in charge to give us the chemical analysis of this particular brew and, as quickly as possible, undertake to see that it is banned forthwith, failure to which I think Kenyans in that part of Kenya might be forced to take the law into their own hands.

Mr. Deputy Speaker: You know that it is not a point of order you are asking for; you are asking a question. Order! Before I call the next speaker, under Order No.7, let me say that after Order No.7, we will proceed to

Order No.10, the Motion on the Ministry of Health. We will skip Orders No.8 and No.9.

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

Mr. Deputy Speaker: What is your point of order, Mr. Michuki?

**Mr. Michuki:** Mr. Deputy Speaker, Sir, my point of order is that the matter which has been raised by hon. Maundu was dealt with here, when hon. Mrs. Ndetei raised that Question in this House.

Mr. Deputy Speaker: When?

**Mr. Michuki:** Mr. Deputy Speaker, Sir, this was in 1993. The Government then promised to stop the distribution of this drink, which has ruined people. In my own constituency, a lot of people have died and we are now gathering statistics.

It was undertaken here in February, and hon. Sunkuli, who answered the Question, said that the brewing of this drink had been stopped. Mr. Kuguru then arranged with his distributors, and went and delivered a number of---

**Mr. Deputy Speaker:** Hon. Michuki, without prejudice to the veracity of what you are submitting, I want to state that the manner in which you want to debate the matter is out of order. Hon. Maundu came to me and said that he wanted to rise on a point of order to seek a Ministerial Statement on a matter which he thought was sufficiently urgent and worrying. Frankly, I was not aware that the question had already been raised three or four years ago. Even if a question was raised three of four years ago and the matter has been persisting, it will be quite in order for him to rise on a point of order again, or for that matter, him, you or anybody else to raise a question before the House including a private Member's Question, when I think, you will have more time to debate or to express your opinions on it. I do not think it is proper that you rise under the guise of a point of order, subsequent to another point of order, to make those submissions.

Mr. Michuki: I was just reinforcing that point of order.

**Mr. Deputy Speaker:** I think everybody understands that it is insufficiently reinforced. Next Order!

### BILL

#### Second Reading

#### THE ELECTRIC POWER BILL

### (The Minister for Energy on 10.9.97)

### (Resumption of Debate interrupted on 18.9.97)

**The Minister for Energy** (Mr. M'Mukindia): Thank you, Mr. Deputy Speaker, Sir. I will not take much of the hon. Members' time. I am proceeding on to reply to the Electric Power Bill, 1997.

Mr. Deputy Speaker, Sir, on Thursday last week, I dealt broadly with the views that were raised in this House. Many hon. Members raised some specific issues which I would like to deal with fairly quickly.

Mr. Deputy Speaker, Sir, the key one which was mentioned by Messrs Munyi, Keah, Kiraitu, Munyasia and Dr. Lwali-Oyondi, was the Rural Electrification Programme. This has been a concern of hon. Members and wananchi in general. Under Clause 130, a fund, which will benefit from the 5 per cent levy, will be set up as proposed in Clause 129. We shall also be seeking annual Exchequer budgetary support and donations from both local and external resources. This is a major area because we are now moving away from *ad hoc* implementation of rural electrification, to one where we have money, plan for it and implement it. It is my Ministry's commitment to ensure that we carry out rural electrification in a manner that is transparent and known in advance, that wananchi can actually check against what we have planned.

Mr. Deputy Speaker, Sir, the rural electrification master-plan is being finalised at the moment and it will be made available to the public as well as the DDCs and any other interested parties. The rural electrification master-plan will take account of the various problems that are faced by wananchi in all parts of the country. The key objective is to assess the needs and the possible costs of supplying electricity to the rural areas. For that reason, I think we are now embarking on the right path in so far as rural electrification is concerned.

Mr. Deputy Speaker, Sir, hon. Members also expressed concern about the fact that power lines pass over market centres but wananchi are not supplied with this power. The reason is lack of finance. Once we set up this fund, that will be sorted out. Nevertheless, we also have to assess the economic viability of each of these supply points. That will always be an important part of supply and distribution of electricity.

Mr. Deputy Speaker, Sir, another issue of concern to Members was the fact that customers pay 10 per cent deposit to the Kenya Power and Lighting company which tends to stay for a long time in the Company's coffers without any work being done. We are compiling a list of all that money that has been paid as deposits, and will try to ensure that we supply electricity to some of these points. Nevertheless, it is a requirement that customers pay the balance of 90 per cent, because, again, there is a shortage of money.

Mr. Deputy Speaker, Sir, one of the major constraints that has prevented more investments by individuals and companies in distribution infrastructure is the fact that once customers pay money, any subsequent customer is not required to contribute anything to that initial investment. This has now changed. With the new changes, if somebody invests in certain infrastructure, any subsequent customers hooking onto that grid will be compensated for initial investment. In other words, the costs will be shared by any subsequent customers using the same lines or facilities. That should encourage more people who are able to invest in these distribution facilities.

Mr. Deputy Speaker, Sir, the other concern was the question of supplying electricity to coffee factories under the STABEX Fund. Phase I of this Coffee Factories Electrification Programme, which is financed by the European Union through the STABEX Fund, will cover 168 factories. Subsequent phases will follow after the initial phase has started. This has already started and we hope to complete this programme in the next three to four years with the support of the European Union.

Mr. Deputy Speaker, Sir, there is also the implementation of mini and micro hydros. There was a request that the Ministry undertakes to do some studies on where these may be viable. We will be setting up an energy secretariat within the Ministry to ensure that we analyze or study all kinds of possibilities. Not only the mini and micro hydros, but also other areas like renewable energies such as solar, wind, biogas and so on. That will be done with the aim of defining which areas can be utilised, perhaps by private developers to generate electricity either through mini and micro hydros or solar, wind and biogas sources.

Mr. Deputy Speaker, Sir, the other item that was of major concern was the format of licensing power generation facilities or plants. This will be looked at, to see whether it can be simplified in future, especially where a standardized format is required.

Mr. Deputy Speaker, Sir, on the question of the establishment of the Electricity Regulatory Board, I would like to assure Members that people who will be appointed to the Board will be people of integrity with a long experience in industry, engineering, energy, finance, law and so on. For that reason, this is something that we have to be very careful about, because they will be charged with very heavy responsibilities to look after the electric power energy in this country. For that reason, we would like to have people of unquestionable integrity, committed to ensuring that electric power is available at the cheapest possible costs to consumers in this country and also in the widest possible scope across the country.

Mr. Deputy Speaker, Sir, there was another query regarding whether we are really serious about liberalization. I would like to assure Members that, in fact, this Bill stresses the need for liberalization to ensure that the private sector plays a major role in the future power generation in this country as well as in transmission and distribution.

Mr. Deputy Speaker, Sir, the question of ownership was raised by Members, and I would like to assure them that it is the Government policy to encourage Kenyans to participate in whatever investments there are in the energy sector.

For that reason, hon. Members may visit their constituents and see what they can do solely or in joint ventures to make proposals in future on how to invest in power generating facilities all over the country. For that reason, that is the Government policy that we are encouraging. In fact, we shall give some additional marks when we are looking at the tenders from those companies that have entered into joint ventures with locals. The guidelines are going to be organised by the Ministry, so that everybody is aware of what we are talking about and again I can assure hon. Members that this exercise will be transparent. It will be available to everybody to see, read and follow it whenever they are making any investment proposals.

Mr. Deputy Speaker, Sir, there are other specific cases which were raised about investment in certain areas. I want to assure Members that we are trying the best that we can to ensure that all these areas are covered. The question of the power barge in Mombasa was raised as far as the question of siting is concerned. This question was raised by hon. Keah. I think it was felt that maybe it may cost safety or security problems because it is too near the Shimanzi Oil Jetty as well as near the KPA headquarters. I have had the chance to visit the power barge myself and, in fact, it is working very, very well. The safety aspect has been taken care of very well and, therefore, there is really no problem. I want to assure hon. Members that I think it is one of the safest power generating plants I have ever visited and, I think, it is going to be a very good investment. As I speak, it is producing around 43 to 44 megawatts of electricity per day. So we are okay. This electricity is going to the national grid.

Mr. Deputy Speaker, Sir, finally the other question that has been raised by those communities that live in both the Tana River basin as well as the Kerio Valley basin is: "What will happen to Tana and Athi Rivers Development Authority and Kerio Valley Development Authority once the assets of TARDA and KVDA are transferred to the Kenya Power Company?" We are going to value all the assets owned by TARDA and KVDA before these assets are transferred to Kenya Power Company and obviously, there will be a balancing of books. But after that, TARDA and KVDA will re-negotiate with the Kenya Power Company as to how much they should be paying every year to these regional authorities to ensure that the regional authorities carry out their duties as was envisaged when they invested in these facilities. In other words, we believe that TARDA and KVDA, in fact, might be more effective after the separation and transfer of assets to the Kenya Power Company. TARDA should be able to concentrate more on development projects in the basin as well as in areas under the KVDA. For that reason, there will be no loss to the communities living within those basins. Nevertheless, all the other assets of generation must be concentrated in one company that is the Kenya Power Company and all the transmission and

distribution assets will be concentrated in one distribution company which is KPLC, but the regional authorities that is TARDA and KVDA should not be the end losers. They will have to negotiate for a yearly or annual payment from the Kenya Power Company for using the basin to generate power and then that money will be used for development.

Mr. Deputy Speaker, Sir, one of the clauses in the Bill says that:

"Any natural resources that have not been invested in the Government through other Acts are now vested in Government through this Bill."

This has the effect of ensuring that even water is treated as a natural resource. Geothermal steam is also a natural resource. So, those resources are now invested in Government through this Bill which means then that whoever uses that resource has to pay for its usage because somebody else has to look after it and so on and so forth.

**Mr. Michuki:** On a point of order, Mr. Deputy Speaker, Sir. The Minister says that all the assets which have not been vested in the Government will be invested under this Act. Is it in order that this Act should provide for what the Treasury Act actually provides where it states quite clearly that:

"All Government properties are vested in the Office of the Permanent Secretary to the Treasury".

Is it in order to duplicate the laws?

The Minister for Energy (Mr. M'Mukindia): Mr. Deputy Speaker, Sir, I think the Bill is quite clear. It says

that:

"All those natural resources that are not vested through any other Acts and specifically related to the energy sector are now vested in the Government."

Mr. Deputy Speaker, Sir, I do not know the details of what hon. Michuki is saying specifically, but I do not

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know whether water, for example, is one of the natural resources that is vested in Government through the Treasury Act. I am not sure. How about geothermal steam? Again, I do not know. However, in the event that they are not covered by any other Act, then they will be covered by this Act. For those ones that relate specifically to the energy sector, it is important because how else can you ask the user of such a resource to pay some royalty to the Government or to a regional authority? We would have no way really of doing it and that is why we put in that clause. But, I take hon. Michuki's point. I think it is very valid. It should not be duplicated and that is why the clause is worded the way it is.

Mr. Deputy Speaker, Sir, I want to thank hon. Members for the major support that they have given us. I want to assure them that we are flexible. We want to be absolutely sure that we can attract private investments into the energy sector and that we are willing in the future, to look at ways and means of improving this area. We also want to be absolutely sure that we do not run short of power in the future and, therefore, we will continue to assess our needs and to create the necessary environment for both public and private investment in this sector.

With those remarks, I beg to move.

(Question put and agreed to)

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

Mr. Deputy Speaker: Next order.

### MOTION

#### Adoption of Sessional Paper No.4 of 1997

The Assistant Minister for Health (Mr. Criticos): Mr. Deputy Speaker, Sir, I beg to move the following Motion:-

THAT, this House adopts Sessional Paper No.4 of 1997 on AIDS in Kenya laid on the Table on 17th June, 1997.

Mr. Deputy Speaker, Sir, AIDS is the leading public health problem responsible for the highest number of deaths in our country, especially amongst the young people between the ages of 15 to 39 years. This has come after long and lengthy studies in the Ministry of Health and we have discovered that this is the most dangerous age bracket. Deaths from AIDS are expected to continue to increase over the number of years and already, we have over 1.3 million Kenyans infected with the AIDS virus and it is going to continue increasing. Most of those infected still look healthy and have not experienced any unhealthy symptoms whatsoever and they are not even aware that they are infected. The Ministry of Health expects the total deaths from AIDS to reach 1 million by the year 2000, unless prevention activities are intensified and people change their sexual behaviour.

**Mr. Shikuku:** On a point of order, Mr. Deputy Speaker, Sir. I thought the Assistant Minister has informed the House that those already infected with HIV were 1.3 million and yet, he is now talking of 1 million deaths?

**The Assistant Minister for Health** (Mr. Criticos): Mr. Deputy Speaker, Sir, we are expecting over one million people to pass away or die by the year 2000. We are also estimating that over 1.3 million Kenyans are already infected by the AIDS scourge but they themselves are not even aware they are carrying the AIDS virus.

Already, 210,000 Kenyans, mostly adults, between the ages of 20-39 years have died from AIDS. The Government has developed a Sessional Paper on AIDS to provide the policy framework, appropriate leadership, strategies and interventions for use in tackling the scourge for the next 15 years and beyond. Mr. Deputy Speaker, Sir, the preparation of this Paper drew expertise from our various universities, Government departments and involved a broad cross-section of public leaders in Kenya and general public.

Mr. Deputy Speaker, Sir, the key issue contained in this Sessional Paper is the establishment of a National AIDS Council with sufficient legal powers and resources to provide a practical leadership and to ensure co-ordination of multi-sectional response against AIDS in Kenya. The existing institutional arrangements in the Ministry of Health where AIDS control is a department cannot muzzle other sectors to ensure effective response against AIDS.

Mr. Deputy Speaker, Sir, this Paper, therefore, proposes for legislation on three separate sections: (a) To enforce further notification when a first partner has AIDS infection. In other words, it is your duty to tell your partner that you suffer from HIV, so that you do not infect him or her.

Mr. Deputy Speaker, Sir, last year, we had a very serious problem in the Ministry of Health which was the dispute concerning the Pearl Omega which was produced by Prof. Obel. At least, this is what we call to regulate para-medical research involving human beings and provide for penalties for people who are involved in unethical research, peddling, put up for sale drugs and other substances which cannot cure AIDS after he has gone through the normal research procedures and our Ministry or national laboratories have proven that this particular drug, I am not referring to Pearl Omega, but I am just using it as an example, cures AIDS. We do encourage people to do research, as long as we, in the Ministry of Health, are aware of the formulation of that particular drug and its effect with all the proper research documentations that we require.

Thirdly, Mr. Deputy Speaker, Sir, it is to provide criminal sanctions against people who deliberately and irresponsibly infect others with the AIDS virus. For example, maybe you have heard it. When I was driving my car last June, on the Capital FM radio station, there was somebody explaining how he got AIDS and how he actually went out infecting other people because of his psychological problems of being infected by others. This, personally, I would say, would be "a manslaughter charge" when you knowingly know that you are going to kill someone else.

The Paper also proposes the development for national---

**Dr. Lwali-Oyondi:** On a point of order, Mr. Deputy Speaker, Sir. Is the Assistant Minister in order to define manslaughter as "knowingly going to kill somebody", while we know that is murder?

**The Assistant Minister for Health** (Mr. Criticos): Mr. Deputy Speaker, Sir, I do not want to split hairs, but I think the hon. Member understands what I am trying to put across to this hon. House.

Mr. Deputy Speaker, Sir, we also propose that we form a national social policy on socio-cultural practices which influence the spread of HIV and its containment. On the issue of youth education, the Paper provides for education and skills, development of parents to enable them to educate children about AIDS and sexually transmitted diseases (STD) and in general, human sexual behaviour.

In conclusion, Mr. Deputy Speaker, Sir, we, in the Ministry, strongly recommend the Government to declare AIDS a national disaster and increase funding substantially to enable the Ministry to cope with the increasing number of people with AIDS and which are in dire need for care. The Ministry has already found that between 40 per cent and 70 per cent of our hospital medical beds at Kenyatta National Hospital, Nyanza, Rift Valley, Coast Provincial Hospital, Busia, Kisii district hospitals and so on are occupied by people with AIDS. This is just the tip of the iceberg. This is information that is readily available in our hospitals. We do not know the other cases where people have passed away thinking it is pneumonia, malaria or other complicated ailments.

Mr. Deputy Speaker, Sir, these are just the figures and that is what we recommend as an honourable House, to pass the Sessional Paper on AIDS in Kenya.

The Minister for Co-operative Development (Mr. Munyi): Mr. Deputy Speaker, Sir, I am going to second this Motion.

Mr. Deputy Speaker, Sir, back in 1994, I did distribute in this House through hon. Angatia, copies of a report about contamination of AIDS. There was a case which had happened in Cameroon. A beautiful lady contaminated more than 1,200 people and she went on spreading it. I did distribute a copy of that report to every hon. Member of Parliament in 1994. Therefore, I want to remind them that in Britain today, if a person is found moving from one place to another spreading AIDS--- This is a very deadly disease. I want the hon. Members to know that we are dealing with a very serious matter and it can finish the entire nation, if we are not careful.

Mr. Deputy Speaker, Sir, the latest report which was given by the Director of Medical Services shows that there are over two million people who have already been proved to be HIV-positive. This is a matter that should be dealt with seriously. With poverty and a lot of problems facing our country and the world at large, I am appealing to advanced countries of the world, because even the World Bank has forgotten much about the poor people and nobody cares about them. Every time, we reduce the number of employed people because of stringent economic reforms. Every time, the number of employed people is being decreased. The world has never considered what will happen to the poor people. This is very serious because nobody seems to be remembering the poor people in the rural areas in the "reform process". The price of land and other resources in rural areas has gone up. Do we think about the ordinary people living in the rural areas? Who will help them? Nobody is talking about that. We only talk about reforms without taking into account the plight of ordinary people in the rural areas.

When we talk about the Rural Electrification Programme, we want electricity to be supplied to every area so that the majority of our people will benefit. But are our people going to benefit from this clamour for reforms? No! Therefore, this booklet on AIDS should be distributed to every part of Kenya. I am appealing to the Minister to ensure that this Sessional Paper No.4 of 1997, on AIDS in Kenya, as the Assistant Minister said, is translated in all the languages, including Kiswahili, Kiluhya, Kikikuyu, Kiembu *et cetera*, so that all people will read it. It is very important because it is only advanced countries of the world who are thinking about their citizens, and with the spread of AIDS in this country, we are in danger. Therefore, they should all follow what our President has been

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telling us "to be mindful of other peoples' welfare".

Mr. Deputy Speaker, Sir, those who are telling people to burn their voters' cards are committing a criminal act and it cannot be allowed. I can see an hon. Member on the opposite side who was telling the people to burn their voters' cards, and I wish to tell him that he should be very careful when dealing with the human race. He is the one who will be hunted by the people because he fighting against the wishes of the masses.

**Prof. Mzee:** On a point of order, Mr. Deputy Speaker, Sir. Is the Minister in order to change the subject from AIDS into burning of voters' cards? Could he tell us the relationship between AIDS and the burning of voters' cards?

**The Minister for Co-operative Development** (Mr. Munyi): Mr. Deputy Speaker, Sir, there is nothing wrong in that. Even hon. Nthenge has agreed. I am telling the other hon. Member who was telling people to burn their voters cards that it is wrong. Did he burn his own voter's card?

**Mr. Nyanja:** On a point of order, Mr. Deputy Speaker, Sir. I want it to be on record because the hon. Minister is misleading the House and the whole world, I stood single handedly telling people not to burn their cards, yet he is saying that I told the people to burn their cards. It was a very sensitive issue and I was ready to be lynched for the truth, but now he is telling an untruth.

Mr. Deputy Speaker: Would you, please, address the Chair?

**Mr. Nyanja:** Is the Minister in order to maliciously malign my name, which is scandalous, untruthful and dishonest because he knows the truth? The Daily Nation reported properly on that incident, but the *East African Standard* decided to do otherwise. I ignore that because that is propaganda. They thought they would sell more. The truth of the matter is that I stood even against my Chairman, because the truth will one day prevail that I told voters not to burn their electors' cards. That is what I said. Let that be on record and the Minister should not mislead the House.

**The Minister for Co-operative Development** (Mr. Munyi): Mr. Deputy Speaker, Sir, I am sorry. I did not even mention the hon. Member, but that is how he was reported. But if he told the people not to burn their cards and he was even against his Chairman, we are very grateful for that. The world has known that the hon. Member is against his Chairman. That is the truth.

With those few remarks, Mr. Deputy Speaker, Sir, I beg to second.

(Question proposed)

# (Mr. Nthenge stood between the Chair and Mr. Shikuku)

**Mr. Shikuku:** On a point of order, Mr. Deputy Speaker, Sir. Is it in order for hon. Nthenge to stand between the Chair and me, thereby blocking me?

# (Laughter)

Mr. Deputy Speaker: Order! It is always out of order for an hon. Member to stand between the Chair and another hon. Member.

**Mr. Nthenge:** On a point of order, Mr. Deputy Speaker, Sir. I beg to apologise. I was impatient and I started walking assuming I had been called. I am sorry to have blocked my colleague.

**Prof. Mzee:** Thank you very much, Mr. Deputy Speaker, Sir, for giving me this opportunity to speak on this important Motion on Sessional Paper No.4 of 1997 on AIDS in Kenya.

I think there is no disease in the present time in the whole world which is as serious as AIDS. As this Paper says, AIDS is a recent disease. It was diagnosed in Kenya in 1985, but when I was in the United States of America in 1970, they were already talking about AIDS. They did not know what caused it. They had a lot of theories on how AIDS is caused. At that time in San Francisco, where I went to school, they thought that it was completely restricted to homosexuals, and they thought that it was immunological in origin; caused by rejection of immunological response of sperms deposited during a homosexual act. At the present time, we know exactly how it is caused and, as the Sessional Paper put it, in Kenya, the principal and main spread of AIDS is through heterosexual contact. The key word here is "sexual behaviour" as indicated in this report.

Mr. Deputy Speaker, Sir, AIDS is a recent disease which appears as if God has been angry against the human race and He devised this disease, which hits right at the centre of the human pleasure.

This disease is very strange. It is a disease which is so deadly and cumbersome, and you can live with it for

so many years, spreading it without your knowledge. The end product of this disease is a very painful suffering. It has no treatment and eventually, it ends up in a very painful death. It is something like a miracle of some sort with a very bad effect and we have to look at it that way. It is a disease transmitted through sexual intercourse. It is as if we have been told by God to change our sexual behaviours. We should pay attention to that and become like the Americans who have advertisements on the televisions saying: "We Americans cannot change our sex habits. So, the answer is: Use condoms and prevent the spread of AIDS." It has been shown, to a certain extent, that condoms can do that, but they have not been successful here as such. We have to look at our sexual behaviour in Africa afresh in order to address this very serious problem, especially when we are told that in the year 2000, the number of people who will die from AIDS between the ages of 15 years and 40 years will be three times more than people killed by other diseases combined. We know that here in Africa, there are a number of diseases which kill many people. We have been told, for example, that in Kwale District at the present time, there are more pre-school children dying from malaria than from any other disease and more than anywhere else in the world.

Mr. Deputy Speaker, Sir, when we are told that in the year 2000, which is less three years away, AIDS will kill three times more people than all other diseases combined, it means that if we are very serious--- And we know that in three years' time, we are going to have a disaster like this. I strongly support the Assistant Minister, who has done his job and walked away, that it is time now that this Government makes AIDS a national disaster so that we can have as much money as possible put into the prevention and control of AIDS. We are told that it is a disease which cannot be cured. So, the cure for the disease is to prevent it. If it is going to kill three times more people than all other diseases combined, we should have more than half of the money allocated to the Ministry of Health, used in the prevention of AIDS. We have been told that the Ministry of Health is second to the Ministry of Education in terms of the amount of money which is allocated in the annual Budget. So, there should be absolutely no other item in subsequent years which is approved by this Parliament which will have more money than the money to prevent and control AIDS.

Mr. Deputy Speaker, Sir, AIDS as this Paper shows, and I believe that it does not exaggerate, threatens the existence of the human species on this earth. In actual fact, we are being told that there are more people now in this country dying from AIDS than those increasing through population explosion. So, there may be no need to spend more money on controlling population growth because AIDS does it. We have been told that it is killing more and more people. Surprisingly enough, in the United States of America, where AIDS was diagnosed first, they have been able to put the figures pretty low. But we have been told that Sub-Saharan Africa alone, has 70 per cent of AIDS cases at the present time and we are even threatening to reach 90 per cent in the year 2000. These are very astonishing figures. If this is true, and that East Africa is leading, we have to look at East Africa first, because we have a large number of AIDS patients. We in East Africa, and Kenya in particular, where research is organised, should do more in research by putting more money into it. We should be more serious in research in order to control AIDS. AIDS in Kenya, as this report shows, is all over the country and this is a fact. People must be told that there is no community which will be spared. Every community has its share of AIDS patients. If we say that there are far less cases in Mandera and Wajir, it might give the impression that those people should relax. But there should be no question of relaxing. If we say that hon. Godana's area has less AIDS cases, that should not make him happy because it will make people in that area relax and yet, we know that AIDS is all over this country. But it is a fact that AIDS is more concentrated in some regions than the others.

We have been told that Nyanza, Western and Rift Valley provinces and probably Coast Province, are leading in incidents of HIV and full blown AIDS. More research should be carried out in those areas and it should be absolutely open to show what makes those areas have more AIDS cases than the others. It is also contained in this report that AIDS fighting could not be uni-directional. It has to be attacked from different angles. One angle might reduce it by 2 per cent, another by 5 per cent and another by 6 per cent and when you combine all of them, we can have AIDS reduced significantly. We need to be told from the research information available, why AIDS is prevalent in certain areas. If it because of the cultural practices of any kind, we should not be afraid to point it out. We should come out, for the sake of humanity, and tell the whole world that a particular cultural practice enhances the spread of AIDS, and should be stopped. But this has to be supported by undisputed research findings. It should not be something which is just thought. It should be proven beyond reasonable doubts, and it should be the real case.

I do not want to go into scientific aspects of AIDS because I have not read much about AIDS. But the AIDS virus is a very funny virus. You have antibodies in the blood, and if they want to diagnose AIDS, they look for the antibodies. These antibodies are unable to protect you from having AIDS. This tells me one thing; that immunization prompts production of antibodies. The antibodies in circulation prevent you from getting a disease. If you already have antibodies and yet you get AIDS, I think more emphasis in research should go into cultural practices than the development of a vaccine. In Africa, we should concentrate more on cultural practices, and spend less money on vaccine production. There are indications that show that one might be circulating antibodies and yet the antibodies

do nothing to protect him from AIDS.

At one time or the other, it was said that AIDS in America and developed countries in Europe is less because of the easy availability of water, that washing is significant in prevention of AIDS. We have been told so, and we would like the researchers in the Ministry of Health, the Kenya Medical Research Institute (KEMRI) and others to show whether this is a factor; that AIDS is less prevalent now in the developed countries, where it was first diagnosed, and it is not spreading because they use plenty of water to wash themselves. If that is true, then we should be told. It should be said that water can reduce the effect of AIDS by a certain percentage. This can be done only by research. I am going to concentrate mainly on cultural practices. This is probably the field where the Government is very much afraid of going into, because it fears insulting certain communities. Time has come for us not to shy away from saying the truth, if the truth would help to prevent a disaster. If it can be proven at a high level scientifically that there are cultural practices which can significantly reduce the spread of AIDS, we would like to see them propagated elsewhere.

We have been told that circumcision - and I believe that the "total man" is circumcised - does reduce the chances of getting AIDS. If it does, we would like the scientists to quantify this. This is what they do. They should tell us the percentage by which circumcision reduces the spread of AIDS. If it does so significantly, we should sell this idea to our friends, colleagues and countrymen who do not circumcise, to do so.

**Dr. Lwali-Oyondi:** On a point of order, Mr. Deputy Speaker, Sir. Prof. Mzee is wondering whether there has been any research on whether or not circumcision reduces the chances of getting AIDS infection. As a matter of fact, and for his information, research has been done and papers have been written, even within Kenya, and they have proved that those who are uncircumcised are more likely to get AIDS than those who are circumcised. I will bring that paper to the House tomorrow.

**Mr. Shikuku:** On a point of information, Mr. Deputy Speaker, Sir. At one time - I do not recall the time - hon. Dr. Wameyo told this House that one is likely not to be infected immediately--- If two men, one who is circumcised and the other one uncircumcised, went to the same infected lady, the gentleman who is uncircumcised will get the disease before the circumcised one. He went further and said before this House that cancer of the penis is very prevalent amongst those who are not circumcised. Circumcised people do not get the cancer of the penis. It is only those who are not circumcised.

Prof. Mzee: Thank you, hon. Shikuku.

The reason why I am saying this is: If we really want to solve the problem of AIDS, we have to use various methods which are available. I would like to hear the scientists say that if you are circumcised, you stand 10 per cent less chance of getting AIDS. Then, we can say circumcision does this and that. That becomes one important aspect and the people are left with a choice.

Also, amongst others, there is the tradition of wife inheritance which makes sense. Wife inheritance can spread AIDS very effectively because it is likely that the inherited wife's husband died of AIDS. If you keep on inheriting, one wife might be inherited by ten men because as they inherit, they die. The scientists have to tell us the percentage and the significance of wife inheritance, ritual bathing of the dead and other things. We should not hide behind cultural shyness or something of the sort.

Mr. Deputy Speaker, Sir, after giving the examples above, I would like to defend polygamy. In defending polygamy, I do not believe it plays any part in spreading AIDS.

Men are polygamous by nature and if we discourage polygamy, we are encouraging the spread of AIDS. If a man and his wives---

**Mr. Muite:** On a point of order, Mr. Deputy Speaker, Sir. Is it in order for hon. Prof. Mzee to generalize that men are polygamous by nature when some of us are monogamous by nature? He should talk about himself and not about men generally.

**Prof. Mzee:** Mr. Deputy Speaker, Sir, I did not say that men are polygamous by practice, but by nature. Hon. Muite is monogamous by practice, but polygamous by nature. I will ask him to challenge me on that.

Both the man and his five wives have to be faithful to one another. The key word is "faithful". A man has to be faithful to his wives and the wives have to be faithful to their husband and in this way AIDS will be contained. This is the truth of the matter as KANU puts it. Huu ni ukweli wa mambo. If the polygamous group remains faithful to each other, then there is no way they can be infected by AIDS. If we confuse polygamy with other forms of practices that contribute to the spread of AIDS, we are not doing the right thing and we have to be very careful.

[Mr. Deputy Speaker left the Chair]

[The Temporary Deputy Speaker (Mr. Kariuki) took the Chair] I would like to talk about the new-born babies. I stand to be corrected, but I believe that there can never be intrauterine AIDS transmission during gestation period. The virus does not cross the placental barrier to the foetus. The infection comes in during delivery. The mother's infected blood can only find its way into the baby during delivery time.

Mr. Temporary Deputy Speaker, Sir, the other mode of AIDS transmission is through breast-feeding. There is another added complication in this case of antibodies in the colostrum during the first few days of birth. This milk contains high levels of antibodies against AIDS and this makes it difficult for doctors to diagnose the disease in new-born babies. I would like to request the Minister to make it mandatory for every pregnant mother to undergo AIDS test in their clinics, whether they are private or public. All private gynaecologists and obstetricians, like hon. Dr. Wameyo, should be forced to carry out AIDS tests on their expectant patients. Prevention measures should then be undertaken to prevent the unborn children. It is possible to do that because for the nine months that the baby is in the mother's womb, it is protected from the virus.

We are told that there are 10 to 20 per cent cases of AIDS spread from the mother to the child. This percentage is going up year after year because of the high rate of the spread of AIDS among young people. This mode of transmission, combined with that of exposure to infected blood, accounts to about 10 to 20 per cent of AIDS cases in Kenya. If we claim to love our children and the Head of State too claims to love our children, then our love should be demonstrated through the prevention of this deadly disease from reaching our children at any cost. This can be done through prevention and control. Prevention and control of the disease starts with diagnosis. Expecting mothers should be diagnosed and if they are found to be infected with the disease, prevention measures should be undertaken almost immediately.

We are told that up to 90 per cent of AIDS cases in Kenya are transmitted through heterosexual contact.

Mr. Nthenge: What is that?

**Prof. Mzee:** And that there is a significant percentage being spread through homosexual contact. This is increasing at a high rate. We have been told that young people in prisons are at the risk of being raped. **Hon. Members:** By who?

**Prof. Mzee:** By other inmates. This is something that many people in this country do not like to talk about. The prisons are crowded. People are sleeping on top of one another and there are very bad practices going on in there. AIDS stands to be spread inside those prisons. I am sure the Assistant Minister will agree with me that this is something that occurs in prisons. There is a higher number of AIDS patients in prisons than outside prisons. Hon. Lotodo is here to confirm that. He was a Minister in charge of prisons and is very much aware of what I am saying. At one time, he was an inmate. So, he knows what I am talking about and when he contributes here---

An hon. Member: Was he raped?

Mr. Nthenge: He was too old!

The Assistant Minister, Office of the Vice-President and Ministry of Planning and National **Development** (Dr. Misoi): On a point of order, Mr. Temporary Deputy Speaker, Sir. Prof. Mzee has made a very serious allegation. He has said that a lot of evil things happen inside prisons and that the Minister was in prison at one time and he knew this, but he is doing nothing about it. Is he in order to mislead this House when the Minister has been working hard?

Prof. Mzee: Mr. Temporary Deputy Speaker, Sir, I challenge the Minister to stand here and deny that fact.

The Temporary Deputy Speaker (Mr. Kariuki): Order! That is not a point of order, and Mr. Minister, there is nothing to explain.

**Mr. Gatabaki:** On a point of information, Mr. Temporary Deputy Speaker, Sir. When I was detained by this Government in Nairobi Industrial Area, I witnessed at least ten such cases and I published them. I was horrified that the Government of the Republic of Kenya can allow these things to go on. And the Minister was also an inmate and was also detained by his own Government. If he stands here, he can tell us why this Government, which detained him, allowed these things to go on.

**Prof. Mzee:** Mr. Temporary Deputy Speaker, Sir, I would like to see that the prisons are less congested. If they are less congested, there will be less chances of abuse of prisoners by other prisoners, and that this Government facilitates, as fast as possible, non-custodial sentences outside the prisons so that people can do communal work. When it comes to the imprisonment of young men between the ages of 15 and 30 years, the judges should think twice before sending these people to prison. They should take them to prison only if it is necessary, because there are problems in prisons.

Mr. Temporary Deputy Speaker, Sir, I am not exaggerating, it is in the report here. On page two of the report, it states that:

"However, bisexual contacts have been reported in some parts of the country particularly Coast

Province and among confined groups like prisons."

I would like somebody to challenge this report. AIDS is a national disaster and it should be declared a national disaster as soon as possible. The Ministry of Health is the second biggest spender after the Ministry of Education in this country. If we were told by the Minister that 40 to 70 per cent of the bed occupancy in the Coast, Nyanza, Western, Nairobi provincial hospitals and elsewhere is occupied by AIDS patients who, eventually, are going to die because there is no cure for AIDS, this means that 40 to 70 per cent of the in-patient money is spent on those who have AIDS. It is significant. If the Ministry of Health is the second biggest spender and 40 to 70 per cent is spent in trying to treat AIDS patients, then, even though our Budget shows that a very small amount is spent on AIDS, indirectly, probably, 40 to 70 per cent of what we vote here is eventually spent on treating AIDS patients as in-patients or out-patients in beds both in private and Government hospitals.

Mr. Temporary Deputy Speaker, Sir, this becomes a very important issue. If we are spending such an amount of money indirectly and directly, then if this country declares AIDS a national disaster so that we can pump in as much money as we can in its prevention, we will save a lot of money for other things.

Mr. Temporary Deputy Speaker, Sir, one important issue which has to be addressed is, what other policies the Government has on doctors who are HIV-positive. Do they have to continue to be in practice? We are told that among the people who are in the high risk groups, second to long distance truck drivers, are doctors. Doctors are a high risk group. The Minister would have to agree with me that they are a high-risk group. If they are a high risk group, do we have any programme for making it mandatory for doctors to undergo HIV tests for their licences to be renewed? If they are HIV-positive, what are we going to do about them? I am not saying that they should not be allowed to practise, but the patient should be made to know that such-and-such a doctor is HIV-positive and that, that doctor can do certain things and there are others he cannot do, so that we have a choice whether to go to those doctors or not.

Mr. Temporary Deputy Speaker, Sir, the dentists are another high risk group because they handle open wounds all the time. Most of us go to a dentist, at least, once in a year for cleaning up and for checking. Once every year we go to a dentist for removing of tatar, stains, or for normal check-up and fill-up. There is absolutely a very close contact with the dentists. Wherever the dentists use their instruments, there is a chance that there will be a break of the skin somewhere along the line because they use very sharp instruments when they are working on one's mouth. What is being done in this country to screen the dentists as well, so that the general public is protected very much from getting infected? It is not that, when a doctor or a dentist is found to be HIV-positive, he is going to be stopped from practising, but there should be obvious precautions instituted, to see that AIDS does not spread at all.

Mr. Temporary Deputy Speaker, Sir, I come from an area where we have high incidents of sickle-cell anaemia among young children; for instance, in the Coast, Nyanza and Western Provinces and, these young people receive blood transfusion more often than not because of their problem. It is not only blood transfusion, but all blood derived products have a chance of being infected with the HIV virus. We would like to know if all these blood derived products in this country, and the blood which is being used for transfusion, do undergo mandatory tests to check the presence of the virus. We would like to get an assurance that these products are never used if they are found positive, and that they are never used unless they are tested. We have a problem. We are told that Sub-Saharan Africa has 70 per cent of the AIDS cases, and we know that Kenya, Uganda and Tanzania are somewhere on the top of the list, having a high percentage. And day after day, we have new cases. It is a very serious thing, and I hope the newspaper people will not misquote me and make a joke out of this serious presentation; it is very serious and it should be reported very seriously. HIV is a very serious problem. It should be reported correctly because it is very serious in our country, and should be treated with all the seriousness it deserves.

We need to develop a fast, accurate and cheap diagnostic method. We need to have a system where one can go and in a few minutes, it is diagnosed. Better still, we should come up with something that you can take home and carry out the test yourself, privately. But it has to be fast, accurate, simple and availed freely, so that if you have a partner you can have him or her tested fast and accurately. This should be like the "do it yourself pregnancy diagnosis" kits which have been made available at all the chemists. You can carry this to the privacy of your room, assemble the liquids, follow the directions, stir the liquid with your blood or saliva and instantly, you have the results, that, "Prof. Mzee is HIV negative." You can do this yourself without having to go to a doctor. This would help a great deal. In America, at one time, it was mandatory to have a blood test done to know whether you are rhesus positive or rhesus negative before you could be given a licence to get married. The reason is that the mothers who are rhesus negative are likely to get a child who is rhesus positive, but who suffers from an immunological disease, which may result in the child's death. If that was done for a disease which was rare for the sake of preventing its occurrence, then I think we should do it for a disease with high incidence, morbidity and mortality rates like AIDS. We should have a law stating that before anybody gets married, he or she should undergo a HIV test and the results be made known. I can assure you that no courting couple will take the risk of going ahead and getting married after knowing

that one them has tested HIV positive because it would be suicidal. No matter how strong the love or the instinct of being married is, you will change your mind when you know that your partner is HIV positive. The love will fly away immediately, totally and absolutely!

Mr. Shikuku: What about the leaders?

Prof. Mzee: They should also undergo the HIV test.

Mr. Shikuku: And all the Presidential hopefuls!

**Prof. Mzee:** Mr. Temporary Deputy Speaker, Sir, I hope you heard what Mr. Shikuku said. He said that not only prospective brides and bridegrooms should undergo the HIV test, but also all the Presidential hopefuls and all Members of Parliament.

Here, there is a statement which reads: "high level political involvement". I think there is a point there. Politicians who want to vie for civic, parliamentary and presidential seats should undergo that test. If that is the case, then we will have some of them eliminated by that test. But we should think seriously on how to prevent AIDS from spreading. I am suggesting that one way of preventing it from spreading is by making testing mandatory for the would be couples before they get a licence to get married, especially if it is going to be a civil, church or Kadhi's marriage. The kadhi, district commissioner, district officer or magistrate who conduct civil marriages, and the clergy who conduct church marriages should be satisfied that they are enjoining clean people together, and that the future children that will be born out of that marriage will be free from this disease. That is a very good basis to start from. We should say: "zero grazing for our youth"; that there should be no sexual contact of any kind until they get married. They should undergo this test to prove that they have kept themselves pure until they are about to get married. If they pass this test, then they are allowed to get married. They should then continue with that purity, and in that way, we can change our cultural habits to ensure that AIDS is contained and does not spread.

Mr. Temporary Deputy Speaker, Sir, I would like to suggest that before certain groups of people are admitted as doctors and lawyers, they should undergo this test as well. In this way, we can contribute a lot in preventing the spread of AIDS. If it is true as we have been told here that 20-30 million people will be infected with AIDS by the year 2005, then it is a very serious matter which we should approach even in the way we did not anticipate before. We should instill in our youth the old practices that we used to have. There should be no sexual contact between unmarried people until they are married. If we become strict on these practices, then I can assure you, we shall reduce cases of this disease very significantly.

Religious and cultural issues are very sensitive, but I can say here that if most religions are practised faithfully and sincerely, they cannot contribute to the spread of AIDS.

Mr. Temporary Deputy Speaker, Sir, we should be ready to change some cultural practices if they are proven beyond any reasonable doubt, to be bad. We should be prepared to change them. When we declare a national disaster, we should ensure that there are certain legal---

# QUORUM

**Mr. Muite:** On a point of order, Mr. Temporary Deputy Speaker, Sir. It appears that the majority of the Members of the IPPG have already left for State House. So, the House does not have a quorum. Is it not in order to adjourn, so as to give all of them the opportunity to go to State House?

The Temporary Deputy Speaker (Mr. Kariuki): Can you ring the Division Bell!

# (The Division Bell was rung)

The Temporary Deputy Speaker (Mr. Kariuki): Order! We now have a quorum. Proceed, hon. Prof. Mzee.

**Prof. Mzee:** Mr. Temporary Deputy Speaker, Sir, to continue with my contribution, as I was saying there is not a single religious practice which seems to contribute to the spread of AIDS, but there are a number of cultural practices which seem to do that. If we were very serious in the prevention of AIDS and other sexually transmitted diseases which go hand-in-hand with AIDS, then we should be prepared to change some of these practices.

Mr. Temporary Deputy Speaker, Sir, I do support the Assistant Minister very much when he talked about legal and ethical issues which must be effected in our statutory law so that we should have, if possible, mandatory testing under certain circumstances and voluntary testing of individuals under other circumstances. I do support the enforcement of ethical codes for confidentiality, but this should not prevent the doctors who have diagnosed AIDS from advising those people who are at the highest risk that they stand the risk of getting AIDS. For example, if the hospital knows that Mr. So-and-so is HIV positive and that Mr. So-and-so does such a thing often, then it is up to the authority to advise those at risk that such-and-such person is HIV positive so that they can take care. The confidentiality should stop at a certain point. When other lives are at risk, the confidentiality should stop. So, a law

should be formulated which will preserve confidentiality to a certain extent, but beyond that point, the confidentiality should not be enforced and the groups at risk should be informed.

Mr. Temporary Deputy Speaker, Sir, we should handle AIDS patients with compassion. This is a very important thing. We should not think of them as if they are undergoing punishment. They are victims and I can tell you that 50 per cent of those who get AIDS are totally innocent. For example, a wife or husband might bring AIDS to his or her partner who is totally faithful and 100 per cent innocent. So, we should never treat any AIDS patients with cruelty or make them feel that they have done something bad. This is very, very, important. We should be very compassionate to AIDS patients and we should never mention that they definitely did something wrong to get it.

I can say that the people who suffer most are the children of the AIDS patients. They suffer quite a lot. So, counselling should not only end with the patient. It should be extended to the children. The children suffer quite a lot and because of this suffering, they may grow into adults and thus put themselves at bigger risks of suffering from the same disease. I think we should spend more and more money on counselling.

Even though, probably, the entire nation of Kenya knows that AIDS exists and it is principally transmitted through heterosexual contacts, the researchers should ask themselves this question: "Why do people who are aware of the existence of this disease continue to take risks?" More research should go into that direction. It is not a question of awareness anymore. Everybody is aware of the existence of this disease and what is the next step? Why is it that these people who are aware of the existence of AIDS choose to ignore the obvious? There must be a reason and if we come to that reason and hammer it, then awareness will bear fruits by being effective in the prevention of AIDS. It is not only sufficient that the people should be aware, but those people who are aware of the disease should take an effort to prevent the spread of AIDS.

Mr. Temporary Deputy Speaker, Sir, to summarise, I want to say that we are dealing with a very, very serious issue and we should not be shy of anything. We should call a spade a spade. If we are serious in our approach and do exactly effective things to stop this disease; and know that it is being spread because it hits at the pleasure of the men; and find ways and means, not of reducing the pleasure, but of making sex safe, then the only way of doing so is to say: "Sex should only be legalised in marriage whether monogamous or polygamous."

With these few remarks, I do support this Sessional Paper No.4 of 1997 on AIDS in Kenya.

Thank you.

Dr. Lwali-Oyondi: Thank you very much, Mr. Temporary Deputy Speaker, Sir.

I would like to contribute just a little bit on this very, very serious disease AIDS. I think the idea of being aware is one thing and the idea of the effect of awareness is our problem. As has been said before, funny enough, people do not die of AIDS, but die of opportunistic diseases that have been enabled by AIDS to infect a person. This is one thing that people might be surprised to hear of. AIDS, as has been said, finds its way into the body of the human being. Instead of dealing with the ordinary cells like malaria which goes into the blood and "eats" up the red blood corpuscles and so on and leaves the others, this particular disease goes on to attack the very soldiers that keep as it were the body safe.

Mr. Temporary Deputy Speaker, Sir, under normal circumstances, if you remember when you were a little child and you were walking barefooted and you stepped on a nail or hit your toe against a stone, there used to be an infection spot through which germs travel from to your leg, but they had to be prevented from getting into the general system by what they call lymph nodes which are just below the place where the thigh ends and you will see a big swelling there and that is the swelling of the lymph nodes trying to prevent germs from going into the general system. These are what we would compare with the army barracks which prevent the enemy from entering the country.

Mr. Temporary Deputy Speaker, Sir, instead of attacking the enemy, they attack actual soldiers. For example, if such an enemy enters Kenya and chooses to hit only our army barracks wherever they are the police and GSU, then we will remain vulnerable and even ordinary cattle rustlers will attack the country and take over. Put it in another way: When somebody breaks a door, and since he is not a thief, he leaves it open, even an ordinary innocent man or woman will be tempted to take whatever is in that house. This is exactly what AIDS does. It gets into the "barracks" of the body as it were, knocks out all the "soldiers" and then it is left open for any bacteria to enter. People do not die of AIDS infections, but they die of "opportunistic infections" that comes about as a result of having knocked out the disease fighting mechanism of the body. At the moment, Mr. Temporary Deputy Speaker, Sir, many people are dying of Tuberculosis (TB); a disease that we had almost eradicated. Once you had your TB vaccination done, you were almost safe from any TB infection. The AIDS knocks out the immune system and that is why it is called AIDS: Acquired - that is something artificially acquired - Immune Deficiency Syndrome. You have acquired an inability to be immune to diseases. "Syndrome" is a scientific word meaning "a group of symptoms", very many symptoms. You can never really put your hand on symptoms of AIDS because it will depend on the actual disease that has got the opportunity after AIDS has weakened your immune system. So, at the moment, many people are

dying of TB. TB now is the killer. When AIDS was coming in, we had a certain diarrhoea or cancer which killed people. Today, more or less, it has changed to TB because once the body is weakened, you get infected with TB and it eats up your lungs and you die from it.

Apart from that, Mr. Temporary Deputy Speaker, Sir, other diseases like malaria and so on will kill somebody because AIDS has weakened your body. But the AIDS does not eat you to death. This should be understood.

Secondly, there are things that make HIV infect people. We would like the Minister to look into that. One of the reason, Probably, if I give the background, it will be better. AIDS virus cannot penetrate into a normal skin. It has no such mechanism. Somebody must weaken a place or open up the skin so that the AIDS virus can find its way into the body. The reason why there was too much AIDS among homosexuality was that the act is unnatural. It is being done at a place that cannot stand rough handling. Therefore, there are bruises which results into quick infection. Under normal circumstances, the normal way of doing sex, the female is well equipped for that act. They have a bacilli and the hands are equipped with the same. For example, I can handle this microphone without failing, but if I did it with my mouth, I will have it torn.

So, Mr. Temporary Deputy Speaker, Sir, it is the point of entry. Normally, in heterosexual in Africa, and research should be done, most wananchi, particularly the young people or the primary and early secondary young people, are vulnerable to venereal diseases. The normal venereal diseases like the gonorrhoea or the herpes virus. These make a corrosion which results into a focus through which, if a virus is available, will penetrate into the body and cause infection.

Mr. Temporary Deputy Speaker, Sir, therefore, it is very important that we have to deal with normal venereal diseases. It may be a bit costly, but I think there should be massive treatment of people who are infected with gonorrhoea because it corrodes the normal covering of a sexual organ, makes wounds which make it easy for AIDS virus to go through into the body. Therefore, people should look into that.

Mr. Temporary Deputy Speaker, Sir, we cannot over-emphasise cleanliness. Our medical people should ask why is it that heterosexuals in Africa are more vulnerable to HIV than heterosexuals in Europe? I mentioned this in Parliament here: one of the reasons why and it could be proved scientifically is that there is very little water among our people. Apart from what I have said about venereal diseases, we should also have water for personal hygiene. It pays for people to clean up themselves after sex. In fact, it could prevent even ordinary diseases like gonorrhoea. The idea is to lessen the chances. This is the reason why even doctors and nurses have to wash themselves each time they perform any action.

So, Mr. Temporary Deputy Sir, the Ministry of Health, in conjunction with the Ministry of Land Reclamation, Regional and Water Development, should do a lot to make sure that we have enough water, apart from doing research to confirm this theory that there is difference between heterosexual people in Europe not getting as much AIDS as we, in the developing countries. We should have enough water. One can compare AIDS infections in areas where religious norms insist that people should wash with soap after sex, going for a long call and so on. We may find that in such areas, the infection is less.

Mr. Temporary Deputy Speaker, Sir, why are people still getting AIDS despite the supply of condoms? Most people, both male and female, hate condoms.

I think an inquiry should be made into the population, and the people I have spoken to on this matter do not like condoms, even women do not like condoms. We have to find out why they do not like them. We might have to go back and tell our children that virginity pays. Both the girl and the boy should be virgin. I remember, in our school days, those of us who learnt a little long time ago, that both men and women who went around running ended up being school dropouts. By then the examinations were too many; for instance, the Common Entrance Examination in Standard IV; KAPE in Standard VIII; KJSE in Form II; KCE in Form IV, plus the normal university examinations which were very strict. Therefore, we needed a calm mind. Most of the people who ever went up to university level, I am almost certain, all of them stayed virgins. We were virgins up to the time we were in the university. It is possible, since it was done before, it can be done now because this is a matter of life and death.

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

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

We have to tell our children that the time of running around is over and if they have to survive at all, they have to keep off. Then at the day of marriage, as Prof. Mzee said, an AIDS test can be done and the two will get married and hopefully, they will keep to themselves. If the question of polygamy can solve it, then let us accept it. In

Europe, people talk about polygamy and unfaithfulness as being very serious since it leads to divorce. The truth of the matter is that all those people are hypocrites. Almost 90 per cent of the people in Europe are unfaithful, and everybody has got a mistress down the road. So, it is all hypocrisy. If polygamy can solve it, let us accept it. If there are fewer men than women, and then we say that we will not have polygamy and, at the same time, expect men to be faithful, what will happen to those women who will remain without a partner? Are they going to exist in a vacuum and never want any man at all? That is hypocrisy and untruth.

Let us accept things as they are. If polygamy can work with the present family planning systems, then people can have two to three wives, and still have three children only. If that can solve this problem, it is okay, because people will have to go round and they will be infected.

Mr. Temporary Deputy Speaker, Sir, the last speaker has talked about doctors. The doctors are in great danger. Personally, I have practised operative medicine, surgery, for over 20 years. When you do abdominal operation, be it in human being or animals, you have to go in with a needle and bite whatever you wanted to tie up. The needle must enter into your fingers so that it comes out without hooking the intestines and other abdominal organs. You cannot do it otherwise. For a small operation, you cannot open up a person from the abdomen to the neck in order to do the operation. You must have a small hole which you will use while operating. I have yet to see a doctor

whose hands can never be pierced by a needle. Otherwise, they will have to invent gloves which are needle-proof, but then you will loose your touch. The surgeons are in great danger of being infected, and they have no way out.

On the other hand, surgeons who are HIV positive are likely to infect the patients. I do not know how they can practise medicine without a possibility of infecting their patients because at one time or another, by accident, they might nick themselves with the blade. Once you nick yourself, any little blood coming from an HIV positive person and pouring into the abdominal or chest cavity of a patient, will make him get AIDS because there are no protective means. It will be absorbed quickly into the lymph nodes.

Mr. Temporary Deputy Speaker, Sir, the question of finding a vaccine, as Prof. Mzee said, is very difficult because this particular virus has no mechanism of its own reproduction. Immediately it gets into the body, it diffuses into the cells and takes over the reproduction of---

# QUORUM

Mr. Muite: On a point of order, Mr. Temporary Deputy Speaker, Sir. This is a very important Paper that is being debated in the House and it should be debated when there is a quorum. We do not have a quorum. The Temporary Deputy Speaker (Mr. Moiben): Yes, indeed, there is no quorum in the

House. Ring the Division Bell.

(The Division Bell was rung)

#### ADJOURNMENT

**The Temporary Deputy Speaker** (Mr. Moiben): Order, hon. Members. Due to lack of quorum, the House stands adjourned till tomorrow, Wednesday, 24th September, 1997 at 9.00 a.m.

The House rose at 5.55 p.m.