

NATIONAL ASSEMBLY

OFFICIAL REPORT

Wednesday, 24th April 2013

The House met at 2.30 p.m.

[The Speaker (Hon. Muturi) in the Chair]

PRAYERS

POINT OF ORDER

DELAYED APPOINTMENT OF CABINET SECRETARIES

Hon. Ng'ongo: On a point of order, hon. Speaker. I rise under a point of order to raise a matter of national importance during this time of Communication from the Chair. That is because I believe that this is a matter that you need to give direction on. Looking at our Constitution, this House is mandated to protect the Constitution and uphold its principles. But if you look at Article 22(1) of our Constitution, it talks about submission of Budget Estimates to this Parliament.

(The Speaker consulted with the Clerk-at-the-Table)

Can I continue hon. Speaker, Sir? There is some interruption.

Hon. Speaker: Yes.

Hon. Ng'ongo: So, hon. Speaker, Article 22(1) of the Constitution talks about laying the Budget Estimates, at least, two months before the end of each financial year. The Cabinet Secretary responsible for finance shall submit to the National Assembly estimates of revenue two months before the end of the financial year, which is Tuesday next week. We will be required to be seized of the Budget Estimates in this House. Those estimates must come from none other than the Cabinet Secretary responsible for finance. I am aware that His Excellency the President unveiled four names yesterday. Among the four names is the name of the proposed Cabinet Secretary for Finance. But my concern is the time that is left. You need to give direction to this country on what we are going to do in the event that we are not going to have those Cabinet Secretaries in place. That is because no other officer is allowed to introduce or forward those estimates other than the cabinet secretary.

But, more fundamentally, is the fact that if you read the Public Finance Management Act, before those estimates are brought to the House, they must first be approved by the Cabinet. If you look at the number of the Cabinet Secretaries that His Excellency the President read yesterday, they are just four. According to Article 152 of the Constitution, a Cabinet must have

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not less than 14 members. Therefore, even if the four names are approved before Monday, this country will still not have a Cabinet. That, therefore, means that Parliament cannot be seized of the Budget Estimates until we have 14 members of the Cabinet approved by this House and appointed by the President.

Lastly, I would like you to make a ruling and determine whether this House can proceed to vet the four nominees of the President. That is because if you look at Article 152, it is very clear that the Cabinet--- I would like to very quickly read the Article. It reads as follows:-

“The Cabinet shall consist of the President; the Deputy President; the Attorney-General and not fewer than 14 and not more than 22 Cabinet Secretaries.”

Hon. Speaker, just below that, it reads:-

“The President shall nominate and, with the approval of the National Assembly, appoint Cabinet Secretaries.”

So, the words here are “Cabinet Secretaries”. So, if this House proceeds to deliberate on those four names, are we acting constitutionally? That is because the Constitution provides that this House can only consider a minimum of 14 names. This is not an idle provision in this Constitution. It is very important because in this Constitution, one of the cardinal principles is gender balance. Another cardinal principle is regional balance. There is no way this House will determine whether the President will meet the gender and regional balance unless we have all the 14 or 18 names. Otherwise, what if this House considers four names and approves them, and then we get another four and by the end of it all we realize that we have not met the gender or regional balance principle. What are we going to do at that point? Is it possible or practical that this House, through the hon. Speaker, makes a determination? This is a matter of national importance and it cannot be treated casually. Yesterday, I asked the President and his deputy to come out of excitement, discharge their civic responsibility and give Kenyans the Cabinet that they need. The honeymoon is over. We now need to work. We do not want posturing or the Obama style of walking. What we want is this: Give us the Cabinet so that the activities, functions, programmes and operations of the Government can continue.

Thank you, hon. Speaker.

Hon. Speaker: Hon. Members, hon. Mbadi likes addressing the House on any conceivable issue. There is no Motion before the House for the Speaker to rule on. You cannot anticipate what the President is going to present to the House. Again, you cannot engage the Chair in arguments about this. There is no Motion before the House. In fact, I rule that you are out of order to claim to have stood in your place when the order was Communication from the Chair. You should have waited until we got to the point where there are Statements. If there is any issue you wanted to raise, you could do so at that point. You cannot now rise and claim that the Chair should make a Communication. Certainly not! That is because the arguments you have raised, I am sure, you could have raised them very well during the chance you may have had to contribute to the debate on the President’s Speech. So, please, let us wait and see what it is that is presented before the House and then we can interrogate it. Right now, it is an incorrect position.

STATEMENT

SECURITY SITUATION IN GARISSA

Hon. A.B. Duale: Hon. Speaker, I rise to issue a Statement, on behalf of the Government, on the latest shooting incident in Garissa Town.

On Thursday, 18th April 2013 at around 7.45 p.m., six people suspected to be *Al Shabaab* members, armed with AK47 rifles, attacked a food kiosk commonly referred to as “Kwa Chege”, which is along Jamia Road. Six people died on the spot while seven others were injured and admitted to Garissa General Hospital. Out of the seven who were admitted, three have died. Two are still admitted at Garissa General Hospital and two are admitted at Kenyatta National Hospital.

Hon. Speaker, following the incident, a high level security team led by the Permanent Secretary, Provincial Administration and Internal Security and the Inspector-General of Police of Police, David Kimaiyo, went to Garissa on Saturday, 20th April 2013. This team met with the Governor of Garissa County, area Members of Parliament, the Provincial Security and Intelligence Committee, the District Security and Intelligence Committee and other grassroots leaders; and deliberated on the issue with a view to getting a way forward and agreed on the following:-

(i) Registering of all *boda boda* motorcycles afresh, in addition to their original registration, and limiting their operation hours to between 6.00 am and 6.00 pm;

(ii) Registering all taxis, banning of tinting of windscreens and ascertaining their registration numbers against their logbooks;

(iii) Mounting of mobile and random roadblocks on all the major roads and closing down of all *panya* routes;

(iv) Sensitisation of security officers on the need to be cautious for their own safety while on duty by remaining alert and exuding high levels of professionalism;

(v) Searching of all vehicles, including GK and UN vehicles at all mounted roadblocks to arrest aliens and impound any contraband goods being ferried to Garissa from the border of Kenya with Somalia;

(vi) Keeping an updated residence register in all the 102 villages of Garissa Town and ensuring that, with the help of the community policing committees, landlords and tenants of all the households are registered;

(vii) Transferring security officers who have served in their current stations for over 10 years and taking of disciplinary action against officers who compromise on security intelligence;

(ix) Continuation of registration of customers visiting hotels and lodges through inspection of their luggage and registration of their presence;

(x) Deployment of Rural Border Patrol Unit (RBPU) and General Service Unit (GSU) personnel to carry out joint operations within the confines of the Constitution and the Bill of Rights;

(xi) Offering of reward to members of the public who would provide credible information and support that would lead to the arrest of the most wanted criminals in Garissa;

(xii) Following up with the Governor of Garissa County to facilitate lighting of the town and installation of CCTV cameras at Tana River Bridge and the CBD to enhance surveillance;

(xiii) Arresting of all aliens and arraigning them before court;

(xiv) Stationing of patrol vehicle at Modika barrier to curb movement of contraband goods and aliens to Garissa;

(xv) Completion of ongoing recruitment of Kenya Police Reservists (KPR) exercise to enhance community policing;

(xvi) Establishment of Special Crime Prevention Unit (SCPU) from CID Headquarters in Garissa;

(xvii) Counselling and motivating of officers traumatised by the security operations in Garissa--- (*Technical hitch*)

(xviii)---to be provided with enough equipment to enhance operations, more so in intelligence gathering;

(xix) Immediate transfer of Officer Commanding Police Division (OCPD) and Administration Police Commandant, Garissa, for not being effective in their operations;

(xx) Deployment of a high level team of top investigators to Garissa to fast-track recording of statements from high profile suspects.

Hon. Speaker, the following achievements have so far been made since Sunday:-

(i) Seventy-nine aliens have been arrested, out of whom 19 have been arraigned in court for lack of identification documents;

(ii) Senior Chief of Liboi Location, Mahdi Gedi Gure, has been interdicted and four other chiefs in Dadaab Sub-county, namely, Mohamed H. Bule of Dertu Location, Abdiwahab I. Harun of Liboi Sub-location, Abdi Dekow of Kulan Location and Hussein K. Nure of Sagali Location, are under investigation in connection with the incidents in Garissa Town;

(iii) The District Criminal Investigations Officer (DCIO) of Garissa, Senior Superintendent Gerald Macheche has been interdicted;

(iv) Twenty-four *boda boda* cyclists who flouted the rules have been arrested--- (*Technical hitch*)

(v) Three hundred and fifty suspects have been arrested and are being sorted out;

(vi)The Government has assisted the deceased persons' families and those who are hospitalized. They have made arrangements for financial assistance towards burial preparations for the deceased and payment of bills for those who are hospitalised.

Following the security operation, the security situation in Garissa Town has stabilised and we believe that the measures that have been put in place will sustain peace and security in the country.

Hon. Speaker, the Jubilee Government, led by President Uhuru Kenyatta, among the many pillars of its manifesto is to sustain security. The Government has resolved that whether you are a member of the *Mungiki* sect or whatever terror gang, you have no place in Kenya. You either relocate to another country or you face the full force of the law. That is why the President took a personal initiative in making sure that the killings that have been going on in Garissa come to an end.

Hon. Speaker that is the Government's Statement on the security situation in Garissa Town after the shooting incident on Thursday.

Thank you.

Hon. Shidiye: Hon. Speaker, first, I want to appreciate and thank the Leader of the Majority Party for what he has said. I know that he comes from Garissa, which is our town. That town has been under this kind of threat for the last two years. I can say that about 300 people have been killed in that town, and the most interesting thing is that the Government has done nothing since then. We are hearing of stories of their intention to do one thing or the other but so far, nobody has been arrested. So far, there is a major security operation taking place targeting innocent people in Garissa Town. As we speak, the people in Garissa Town are suffering. I want

to put just one question to him. The issue in Garissa is very fluid in the sense that--- (*Technical hitch*) ---Our security forces are in Kismayu. There cannot be peace in Garissa until and unless the Government of Kenya pulls its troops out of Somalia.

Secondly, we are concerned because right now, the Provincial Security Committee and the District Security Committee are not working together as a team. Every time something happens, we are told that they are coming together and they are having meetings. We are also told that businessmen and local leaders are being consulted. We want answers to these issues because we cannot accept Kenyans to be killed when there is a Government. Unless the Government has gone on adventure and left the people on their own, this is a serious national issue. We are not in Somalia or Congo; we are in Kenya and we want peace and stability in that town.

The Member for Lafey (Hon. Isaack): Thank you, hon. Speaker. Kenya is a country where there is supposed to be law and order. Garissa is not very far from Nairobi. We have security agencies including the NIS and the CID. We would like to know why it has taken more than one year to bring the people who are causing mayhem in Garissa to book. It seems that the security agencies are not doing their work properly. There is lax in matters concerning security. I hope that in this operation, innocent people in Garissa will not be molested unnecessarily and only those who are causing mayhem are brought to book.

The Member for Yatta (Hon. Kilonzo): Thank you, hon. Speaker. We have lost over 300 people in Garissa since we sent out forces to Somalia. This being a national issue, my concern is very simple. What is going to happen to the families that are left behind? Is there any arrangement from the Government to ensure that these families are catered for? We have situations in this country where people are killed by gangs or by police officers and their families are left to suffer. Investigations continue forever. It is my humble request especially to the Leader of Majority Party to ensure that the affected families in Garissa are taken care of by the Government.

Hon. (Ms.) Gure: Hon. Speaker, I want to echo what my colleagues have said. Garissa was once a peaceful town in East Africa. Now, it has become a little Mogadishu. Things changed all of a sudden after the Kenya Government decided to go to Kismayu. As the people of Garissa, we are blaming the Government for going there. That is when the problem started. The operation is going on and we do not want our beautiful ladies to be harassed. We do not want anything to happen to them. So, I am talking for them.

This is a national issue. It is not a joke. People are losing their lives and something needs to be done. I want to congratulate the President for giving us an opportunity to go there with the security agents and say something. Something is happening and change is coming to our people. If this continues, we will lose the whole of northern Kenya namely, Garissa, Wajir and Mandera. We are told that security agents are doing something. Garissa is a small town and if they do this in Garissa, they can also go to Wajir and the other parts. This is a serious matter and we want the Government to deal with it. The people of Garissa are Kenyans and they need to be protected. Action should be taken.

Hon. Speaker: I will give a chance to one more Member. Remember this is Statement time and you seek clarification from the Leader of Majority Party. Maybe after this last one, we will give another five Members a chance to seek further clarifications.

The Member for Tarbaj (Hon. Elmi): Thank you, hon. Speaker. The Statement by hon. Duale is on something that has been on for a long time. There are two words I do not like in his

Statement. During the operation, a church was attacked. In broad daylight, people were killed. We went there, led by none other than the Prime Minister. People were arrested and an operation was carried out but not a single person has since been convicted. Subsequently, more people were killed. The last attack was where three Army officers were killed. An operation was carried out, property was looted and people were killed. In fact, nothing stopped. A week later, more military people were killed.

What is happening in Garissa is not something you can finish using normal swoops and arresting people. A person who can walk during the day to a church that is guarded by police officers and shoot them is not somebody you are going to get through swoops. The second word that I do not like is “aliens”. Aliens have rights. We know what is wrong with Somalia. You do not just go and arrest every alien just because they have fled away from the same terrible people that are doing what is happening in Garissa. So, is being an alien a crime?

Hon. Speaker: Leader of Majority Party, respond to those ones then I will give you another round.

Hon. A.B. Duale: Hon. Speaker, I am here as the Leader of Majority Party under law, to represent the Government including the Head of State. Coincidentally, I am also the Member of Parliament for Garissa. I will start with hon. Shidiye’s concerns. For the new Members, I will seek your indulgence that when a Statement is made, you seek clarification. You do not debate, but I am sure the Speaker has given that guidance, so that more Members can seek clarifications.

I want to assure this House that the operation going on in Garissa is being done within the confines of the Constitution and more specifically, within the confines of the Bill of Rights, Article 37. Two, the Kenya Defence Forces (KDF) are there with the approval of this House. The KDF are not in Somalia for honeymoon. They are there after what happened, namely the same terror networks that are going on in this country. We decided to secure the region in Somalia that is very close to our borders in order to protect our economy and the tourism sector. The history is long including the tourists and foreigners who were hijacked in Lamu.

We worked with the former Prime Minister, the former Vice-President, the persons who served as Ministers in charge of internal security, the former Commissioner of Police and a Parliamentary Committee of this House led by none other than hon. Adan Keynan. I told you, if you are a drug dealer, *Mungiki*, cattle rustler or you do not want to earn your living through hard work then you had better look for a country to live in. This Government will not entertain that.

Hon. Mwangangi talked about families being left behind by--- For now the Government is taking care of our brothers and sisters, that is, the 10 we have lost. I am sure some of them come from the constituencies of some of my best friends in this House. I am talking about Members like hon. Jamleck Kamau and others. There were two people from Murang’a and others from Thika. So, the Government will cater for the burial and it will also cater for those in hospital.

Hon. Shukran said that Garissa has been turned into a little Mogadishu. What happened in Garissa on Thursday was a systematic, serial and heinous act of killing people in broad daylight and only comparable to what is happening in Mogadishu, Afghanistan and other places. However, I am sure that we will not remove our forces from Somalia. They are there for a purpose. They are under a mandate and even now they are under the African Union.

Hon. Elmi said that there are now key security agents that have been deployed in Garissa. The Special Crime Unit and a special team of highly personalized investigators have been taken to Garissa. The General Service Unit has been deployed there to ensure that they take care of the

whole area, including the border areas. We have the Rapid Deployment Unit (RDU) from the Administration Police who are also there.

I said that 90 aliens were arrested and only 19 of them were taken to court. That means that the documents belonging to the other aliens showed that they were in the country legally. (*Technical Hitch*)---whether it is in Garissa, Baringo, or Kisumu, it must be done within a reformed police service and confines of a new Constitution that this country has attained.

Hon. Ganya: Hon. Speaker, it is the sole and primary responsibility of any Government worth its name to protect the lives and property of its people. These operations are well targeted, well calculated and systematic. These things take days. They even assemble very sophisticated weapons to kill and maim Kenyans. This Government has national security intelligence services which are able to gather information necessary to safeguard the lives of Kenyans. Where are our men and women who are serving us in terms of our security intelligence? Is this Government not consuming and using intelligence information to safeguard the lives of Kenyans?

Hon. Shill: Hon. Speaker, it is true that these incidences have been happening in Garissa constantly for two years now. The people who are being maimed and killed are non-Somalis. The place called “Kwa Chege” has been hit many times before. It is only 200 metres away from Garissa Police Station. What difference is the Government going to make now? Sacking and transferring officers is not answer to those issues.

I am seeking another clarification. The police deserted the town. They have refused to mount road blocks and they have refused to patrol simply because they are targeted. When you want to treat somebody you give him medicine. However, when the medicine becomes sick, I do not know how you will treat that medicine. So, we want to know why it happened.

Lastly, must the Government, whenever it fails, because of its anger, do collective punishment?

Hon. (Ms.) Muia: Thank you, Hon. Speaker. I want to comment on this issue of Garissa. It is not an issue we should be--- It has been happening. Last year such a thing happened, I think four times. Policemen and the locals there were killed. I do not understand what happens. Whenever there is a serious issue in the country that is when you see all the Government systems going there instead of making arrangements to protect Kenyans. It is not only people from North Eastern Province who stay in Garissa. We have people from all other tribes there.

The Government needs to be ready and prepared fully. At the Coast Province, they have deployed the GSU and army personnel. If you visit Mombasa during the night you will realize that the ocean is really protected. The arrangements in a place like Garissa are normally that the police go there to do operations. They leave, say, five of their own there and after sometime they are recalled. The police there are working with dangerous people. You cannot take the *Al Shabaab* for granted; they are too sharp. We propose that you deploy army personnel there. As soon as the *Al Shabaab* will be through with that place, they will start moving towards Nairobi. They will come to Mwingi, then Thika. Very soon, in hon. Kamanda’s constituency they will be there. Last year we read of a case where they even tried to penetrate Parliament. We are requesting the Government to take this issue seriously this time by deploying the Kenya Army there permanently. The Government should not wait for people to be killed and then rush there to do operations and investigations.

Hon. Speaker: Seek your clarification. Please, hon. Members, this is not an opportunity for debate. The hon. Member who has just spoken--- (*Technical hitch*) --- not just at Kamanda’s. Hon. Members, I think it is only fair that we regularly ---

Hon. (Ms.) Muia: Hon. Speaker, when you were not around, he welcomed us to this House and said that this is his constituency.

(Laughter)

Hon. Speaker: It is not done that way here! Let me hear from hon. Letimalo.

Hon. Letimalo: Thank you, hon. Speaker. While I appreciate the Statement given by the Leader of the Majority Party with regard to insecurity in Garissa, insecurity is not only confined to that county. The situation in Baragoi is equally bad. The Chair is aware that last year we lost over 40 security personnel and 20 Kenya Police Reservists due to insecurity. I would like to know from the Leader of the Majority Party what plans the Government has to ensure that it contains insecurity in Baragoi and the entire Samburu County.

Hon. Bichage: Thank you, hon. Speaker. The issue of security is contained in the Speech the President made in this House. I would like the Leader of the Majority Party to respond after I finish. In my view, without security you cannot talk about Vision 2030 or taking Kenya to the next level.

Hon. Speaker, we are talking about Garissa, but I would like to bring it to your attention, like the hon. Member has mentioned that insecurity is not only confined to Garissa. We have a serious problem of insecurity in this country. I believe we have several young men and women who are well educated but are jobless. They should be engaged to assist in tackling this problem. The Government should spend money to protect our property and our lives.

I would like to recommend for an integrated security system in Kenya because we are talking about our porous borders which are worrying. I do not see why our borders should be porous because we have the National Intelligence Service (NIS) which is very expensive to run and Kenyans are spending a lot of money on it. We have the General Service Unit (GSU), the regular police and the Administration Police (AP) unit. We also have the community policing system which has been very effective in certain neighbourhoods. What has the Jubilee Government done to institute a clear and an integrated security system to ensure that Kenyans are safe so that we can address other socio-economic sectors of our lives?

Hon. Speaker, you know that we have something called *(Technical hitch)*

Hon. Speaker: Who are you seeking the clarification from?

Hon. Bichage: Hon. Speaker that clarification will come from the Leader of the Majority Party. I would like to get answers from what I have raised.

Wajir County Women Representative (Hon. (Ms.) F. I. Ali): Thank you, Hon. Speaker. My name is Fatuma Ibrahim. I am the Women County Representative for Wajir. It is unfortunate that we are discussing the operation in Wajir this year. It always happens in northern Kenya. It seems as if the Government of Kenya has not understood the complexities of those areas and the kind of security operation that goes on.

The Leader of the Majority Party has said that the State is committed to protecting life and property of Kenyans. We know that the President is new but the people who are carrying out the operation are not new. The security agency officials are not new because they are the same ones. The kind of abuse which has happened throughout will happen again. When the Leader of the Majority Party toured Garissa, the Inspector-General of Police sacked some security officers who were conniving or who were involved in the smuggling of sugar into the town. The impression he created was that the security officers were aware when a kilogramme of sugar was

brought to Garissa Town, but when a lorry full of arms came in, the security officials were not aware. Could he clarify that?

(Applause)

The other issue is that everybody is running away because of the operation. You cannot change the mind of the people because they are used to being tortured, abused and raped. Are the school children going to school or everybody has fled including school children? If the children have fled, what has his new Government done? Let the Leader of the Majority Party clarify that.

Hon. A.B. Duale: Hon. Speaker, I will start with the issues which Hon. F.I. Ali has raised. I want to assure her that as I speak for the Government, I am the area Member of Parliament and there is no excessive operation going on in Garissa.

Secondly, and I have said this earlier on, it is not business as usual. Each and every part of this country is aware of the new Constitution. Article 37 talks about a reformed police and a reformed Judiciary. I think it is the duty of the leadership to be at the forefront in civic education. We are not in the old days when atrocities could be committed by the Government in northern Kenya.

I am sure that the Inspector-General of Police of Police and the top leadership of the security network in this country must have reasons for interdicting particular members of the Provincial Security Intelligence Committee and the District Security Intelligence Committee and leaving out others. That should be an in-house matter. I am sure one way or the other, they must have been collaborating or divulging intelligence information to criminals.

I would like to tell my good friend, hon. Bichage that the Jubilee Government has an integrated security system never seen in this country.

(Laughter)

Why am I saying this? We will increase the number of police officers. The budget that we will draw to increase the ratio of one citizen to a police officer and move closer to the United Nations (UN) standards will be brought to this House.

(Applause)

This is a very serious Government. This is a Government that wants to abide by the rule of law. This is also a Government that makes sure that the lives and property of this country are protected. Secondly, we will equip our police officers with the latest technology. We also want to equip them with vehicles. This is what we have been missing in the previous governments. We will improve our intelligence. I am sure that in a week's time, this House will form the Departmental Committee on Defence and Foreign Relations. This House will also form the Departmental Committee on Administration and National Security. You are at liberty and within the confines of the Constitution to call the Director of the NIS. Parliament has a role to play on this. We will improve on community policing and we will ask the leaders of this country to make sure that they play a role in improving security for economic growth, prosperity and for our children to go to school.

Hon. Letimalo has talked about insecurity in Samburu. The hon. Member is a very good friend of mine. I am sure he had more Questions for the Minister of State for Provincial Administration and Internal Security in the last Parliament. The Questions were more on the killings going along the border between the Samburu, the Pokot and the Turkana. I want to say it from this Floor that communities that engage in cattle rustling should better cross the border and look for another country.

Hon. Members: That is right!

Hon. A.B. Duale: The Government of President Uhuru Kenyatta – the Jubilee Government – will not allow impunity. It will not allow situations where you steal, kill, maim or defraud; whether it is in Tana River, Samburu, Wajir, Baringo or Baragoi. The Members of Parliament for Baringo South and Baringo North have not rested since they were elected. Every day killings are going on. Men and women who want to thrive in the business of cattle rustling and killing innocent Kenyans, we are telling them as the Government: Your days are numbered. You better look for a visa to go to another country.

Finally, hon. Speaker, there was hon. Regina, the Member for Kibwezi. Am I right? I am doing better than many other people. At least, I know most of the Members by name.

Hon. (Ms.) Muia: Can you correct my name? I am the hon. Member for Kilome Constituency. I am Regina Muia.

Hon. Speaker: Member for Kilome, you repeat that and you will be shown the door. You are in august House. You cannot just be rising in your place and making statements.

Hon. A.B. Duale: Thank you, Member for Kilome. She asked about Government systems. She asked: Why are Government security systems not going there? That was during the past Governments. You will see the security systems of the Jubilee Government under the able leadership of Uhuru Kenyatta moving to every corner, village and district in North Eastern, once we have the Cabinet.

Hon. Barre Shill sought for a few clarifications. He asked: Why was the percentage of the people killed in my constituency more on the non-Somalis? That was known. The people who are doing that wanted to create ethnic disharmony. They wanted to win the war on terror using ethnic divisions. They went out and killed innocent worshippers in a church. I think, as a country, we are not going to fall into that trap. We are going to unite our people regardless of their ethnic and religious affiliation. I think the leadership must turn to that. They have played that card in other parts of the world but we cannot embrace that. All other religions will live in harmony in our country.

Hon. Shill also asked: “Why are there more police officers in Garissa now?” That is because there is a new Government in town. With regard to hon. Chachu Ganya’s query, yes, the Constitution that we passed gives the Government the sole responsibility to protect its citizens and their property. We are up to that challenge. You talked about the National Intelligence Service. I think, as a country, we must appreciate that the intelligence services have done a commendable job. You remember when our forces went to Somalia; there were a number of bomb blasts in Nairobi and other main cities. We expect NIS to do more across the country. We expect them to do more in Garissa, Mandera and Wajir. That way, the people of Garissa, Baragoi, Baringo and urban areas will feel safe.

Hon. Speaker that is all I have to say. I think I have covered what my good friends, the late Prof. Saitoti and Orwa Ojode, used to do from this side. With time, I am going to improve.

Thank you.

Hon. Speaker: Very well. Next Order!

MOTIONS

APPROVAL OF HOUSE CALENDAR

Hon. A.B. Duale: Hon. Speaker, I beg to move the following Motion:-

THAT, pursuant to Standing Order No.28, this House approves the Calendar of the House (Regular Sessions) for the First Session of this Assembly as contained in the Schedule attached in the Order Paper.

I would like to speak on behalf of the House Business Committee (HBC) that you chair. This is the law. This is provided for in the Standing Orders. We have to approve this calendar. It is your calendar, time-table and document. Once the House approves it as per the law we need to gazette it, go further and put it in the two dailies and the parliamentary website. If you look at this calendar, we will only have a break of 11 days. I want to make it very clear that those 11 days is the period that Members of Parliament are supposed to undertake public participation in the budget process. You have to go to your different counties and parts of the country and take lead in making sure that the public participates in the budget that this House is going to pass. I am sure the Budget and Appropriations Committee will facilitate that.

This is for those out there who say Members of Parliament in this country do not work. We are telling them: This is our programme. This is our job evaluation. We are going to put it in our papers so that Kenyans, including the good gracious lady Sarah Serem, can see that Members of Parliament work.

Hon. Angwenyi: Is she gracious?

Hon. A.B. Duale: The word “gracious” is very relative and subjective. But this is our calendar and I urge the House to approve it so that the world out there know that Members of Parliament have work-plans on how to move as per the period shown.

I beg to move and ask my able friend, the Deputy Leader of the Minority Party, to second.

Hon. Nyenze: Hon. Speaker, I rise to second.

(Question proposed)

Hon. Cheptumo: Thank you, hon. Speaker. I rise to support the Motion. As I support this Motion, I wish to say that this is the first time for the public to see that Members of this House engage in serious business. If you look at the calendar, we will be having six running weeks. We will have a break for 11 days. We will proceed for the next 15 weeks and then have only 11 days. That is really very serious business for the House.

Hon. Speaker, the new Constitution has introduced very transparent and clear operations in our institutions of governance. This House is now open to the public. Even as we discuss the issue of security--- I had a very serious issue! In fact, the Inspector-General of Police was in my place on Thursday and he promised to undertake an operation this week. I was to ask the Leader of Majority Party when he is going to do that.

Hon. Speaker, this is really nice. Kenyans can now know that you are not here. They will know you are engaged in serious business for our country. I would like also to say that when we are in this august House, there is a general feeling that the public is sometimes misled and does not understand our roles. There is a general feeling by the public that we do nothing; that we are actually here to spend taxpayers' money. But when you look at the calendar, we have very pertinent issues concerning the Budget, where we are going to determine the expenditure of Kenyans. So, I want to support and say: "This is the way to go." The country will be able to see what we do in this House. We are going to demonstrate that we are here to do serious business for our country.

Thank you.

Hon. (Dr.) Munyaka: Hon. Speaker, I thank you very much for giving me the opportunity to support the Motion. I want to tell hon. Members that we remain committed, so that we can cover a lot of business; we are expected to do so much since we were elected by our respective constituents. In fact, even when we go into recess, we are actually working. Members of Parliament do not rest. We work 24 hours, seven days a week.

I want to thank the House Business Committee for coming up with this calendar because first of all, this shows the whole world that the Kenyan Parliament can determine its own legislative calendar without interference from outside Parliament. There are people out there who are purporting to limit the work of Parliament by saying that we should sit three or four times in a week, or once in a week. It is very important that Parliament determines its own calendar of business.

With those remarks, I beg to support.

Hon. Speaker: Yes, Member for Laikipia East.

Hon. Kimaru: Hon. Speaker, I rise to support the Motion. Hon. Members will realise from the Government's policy, as enunciated by the President, that this House has a lot of work to do. There are many Bills to be passed. So, the work of this House is really cut out. It is evident from our legislative calendar that we have our days full. Even when we are not here, as the Leader of Government Business said, we will be in our constituencies discussing the Budget with our constituents. So, I believe that those out there thinking that Parliament is a place for people to come and while time away should realise that Parliament has a lot of work to do. I am sure that when they come here to assess the productivity of Parliament to determine how much Members of Parliament should be paid, this calendar will give Madam Serem and her team quite some work to do.

With those remarks, I beg to support.

Hon. Speaker: Hon. Members, do not press the buttons before I recognise you. I appreciate that there are two ladies standing. Please, proceed, hon. Member.

Hon. (Ms.) Khamisi: Thank you, hon. Speaker. My name is Khamisi Mishi, the County Women Representative for Mombasa. I stand to support the Motion.

Hon. Speaker, I want to tell my colleagues that we need to be committed and attend all sessions of this House as set out in our legislative calendar because we want to pass very many Bills. We want to show Kenyans that we are really reformists. We want to reform this country; we have an agenda for our people. This country should transform from the current level of development to a higher level of development. Everybody in the continent is now looking at Kenya. Since we said that we are digital, we need to demonstrate that we are, indeed, digital. We should not just say that we are digital and then when it comes to attendance, we see scenarios

similar to what we used to see in the last Parliament when most of the time the House did not have quorum.

Thank you, Hon. Speaker.

Hon. Speaker: Yes, hon. Odhiambo-Mabona.

The Member for Mbita (Hon. Odhiambo-Mabona): Thank you, Hon. Speaker, for giving me the opportunity to congratulate you on your election. I also take the opportunity to thank the people of Mbita for electing me as their first *migogo* in the history of Nyanza.

Hon. Speaker, I want to say at the outset that I do not support the Motion, because this is not a legislative calendar but a summary of the Standing Orders. Indeed, I have heard that we are saying that this is a digital government. Looking at the Membership of the House, I appreciate that it is fairly digital. We have very young and dynamic people. Unless we keep them busy, we will have problems.

On this calendar, I would like to give an example of what I mean. On the calendar, it is indicated “morning sitting, afternoon sitting “Majority, Minority and business not sponsored and Majority”. Under week 28, we have the same information copied and pasted.

I expected a digital House to tell us that in week one, we will have before us the Agriculture Bill and the Fisheries Bill that was pending before the last Parliament, the Victim Protection Bill and a Motion on this and that matter. The so-called “calendar” is merely a summary of the Standing Order. It is actually a calendar that is analogue. So, I want to urge the Leader of the Majority Party to, please, conform. Some of us can train him on how to be digital. This is very analogue.

With those few remarks, I beg to oppose.

Hon. Speaker: Yes, hon. Sumra.

Hon. Sumra: Thank you, Hon. Speaker. We are being given a calendar even before we have been allocated offices. Most of us do not have offices. Where will we go and study the calendar? I do not mind supporting it. It is our job but give us offices first.

Thank you, Hon. Speaker.

Hon. Speaker: Finally, may we hear the indomitable hon. John Ng’ongo?

Hon. Ng’ongo: Thank you, Hon. Speaker. I stand to support the Motion. I share the concerns raised by hon. Odhiambo-Mabona, but after adoption of the calendar, we can still go ahead--- (*technical hitch*) ---because I do not think the House has been able--- (*technical hitch*) --to want to transact. So, I would urge the Leader of the Majority Party and the House Business Committee to go and be proactive, look at the Bills that are supposed to be handled during the Session, come up with a breakdown of those Bills and show us exactly when we are likely to debate them, so that whoever may want to even be absent from the House may know on which days he or she must be present in the House.

Hon. Speaker, for those Kenyans who probably do not know why it is necessary for this House to have its own legislative calendar, I would like them to understand that the legislative programme has been to parliamentarians themselves to determine. Previously, the Executive used to determine when Parliament would sit and when it would be prorogued. For the first time in the history of Kenya, we are enjoying the privilege of determining our own calendar. This is a very positive move. It is one of the benefits and fruits of the new constitutional dispensation.

Finally, I heard Sarah Serem, the Chairperson of the Salaries and Remuneration Commission; say that she has not determined the workload of Members of Parliament. I then asked myself how she was able to determine our remuneration. This calendar is an indicator of

the workload of Parliament. She should be given a copy. I would urge that our Clerk takes it to her office. After taking it to her office, we will also give her the kind of Bills we will pass. If she wants, we will tell her how many times we sit. This is not so that she can be our prefect, but rather just appraise her work load, so that she is educated. This is because I have realized that after we put people in charge of commissions, they become bigger than those who employed them.

Hon. Speaker, I am really surprised because when we asked Sarah Serem during her interview what she would do with salaries, she said that it was immoral and criminal to reduce anyone's salary. I was actually perplexed that the lady has become so stubborn. She is now telling us that if you reduce the salary of a Member of Parliament, it is okay but she has increased hers threefold. She has increased her salary from Kshs300,000 to Kshs900,000 per month. This is something that she has not been told. She should justify the improvement of her salary from Kshs300,000 to Kshs900,000; tell us why she made Kenyans view us as greedy and uneducated people. I hear they say that parliamentarians are not educated. They are forgetting that it was actually a court of law which ruled that for an elective post like that of Member of Parliament, a degree qualification was unnecessary. I really wonder if they are more educated than all of us in this House.

At least, majority of us are probably even more educated. So, they should respect us. We are calling upon the Commissioners, as we want to respect their independence to also respect the Members of Parliament. It is very sad that this country, for so many weeks, we can discuss the salaries of the Members of Parliament. It is a big shame and I would urge some tolerance from commissioners before we reduce their number from nine to three. I agree with Eng. Gumbo who made a very passionate statement this morning that we consider whether we need this commission to have nine Members. I am of the view that we must reduce the membership of all commissions to three and we make all of them part time. If you ask me, after Sarah has determined our remuneration and this will stand for about three years, what will she be doing in the office? That is why they have excess energy. They have nothing to do in offices. If you look at Mr. Nyachae; the guy wants to comment on everything and anything at any time because he has a lot of time. Really, what does Mr. Nyachae do at the moment? There are even no Bills to look at. What does he have to do? If you look at Schedule Six of the Constitution, the Bills that are remaining for this commission to give an input on are such insignificant Bills. I think we will deal with them when the right time comes. We will eventually deal with them to save the country unnecessary expenditure and not just to express our anger. I think you will agree with me that there is unnecessary expenditure.

Hon. Angwenyi: Thank you, hon. Speaker. I rise to support this Motion. I want to assure the Members, particularly the new Members, that this is a very positive departure from the business as usual before. These people are educated enough. They are digital. If they are not digital yet, we are going to introduce laptops to our Standard One pupils and they can learn from them, so that they appreciate what we do here.

The Leader of Majority Party should put it to the Government that the budget coming to this Parliament for all commissions must be accompanied by calendars for each one of them showing what they will be doing during this financial year. If they do not bring those calendars, we will not approve their budgets. I also wish to ask the Leader of Majority Party to bring a Motion to reduce the membership of commissions to a maximum of three. We can give them

some special allowances when they sit and when they are not sitting, they can go and do some work elsewhere and develop Kenya.

With those remarks, I support.

Hon. Anyango: Thank you, hon. Speaker, for giving me the opportunity to support this Motion. The matter of our calendar is very critical at this time. Parliament as a whole, namely the National Assembly and the Senate, are being treated with extreme contempt by the members of the public. So, the first thing that we must do is to campaign so that Kenyans understand what we are doing. It is not enough to publish this. Most Kenyans have no access to our website. So, they really do not know what we are doing on a day to day basis. We need a lot of public participation in what we are doing.

I wish to suggest that for the next ten weeks we should, on a weekly basis, have a media support by knowledgeable public relations officer and Members of Parliament, to explain to Kenyans precisely what we are going to be doing in that particular week. We also need to invite Kenyans to submit their contributions to their Members, so that we can capture the interest and imagination of all Kenyans in what we will be doing on a week by week basis. This should continue until Kenyans know what Parliament is doing. They see us in terms of big cars and some calling us greedy, yet children want to come to this House. So, you wonder what they are up to.

They talk of education. The legislation that we made is for all Kenyans, namely, the least and the most endowed intellectually. Every Kenyan must be represented in this House. So, you cannot ask the Members of the National Assembly to account for their education. We are not making laws for PhD holders. We are making laws for hawkers as well. We must have Members who understand Kenyans of every walk of life before we can pass the right laws that apply to them. So, I suggest that for the next ten weeks, we must have an exercise to educate Kenyans on what we will be doing week by week. They need to understand all our activities in committees. We also need to invite them to participate with us until we are satisfied that they understand us before we tackle Serem the second round.

The Member for Central Imenti (Hon. Irea Gideon Mwiti): Hon. Speaker, I rise to support this Motion. I wish to thank my colleagues for electing you Speaker. Out there, people do not understand what Parliamentarians do. They think that Parliamentarians are noise makers. So, I suggest that Parliament forms a public relations committee which will be briefing Kenyans, probably every end of the week, on what Parliamentarians have achieved. We are the watchdog of our constituents and they need to know what we are doing in Parliament. Out there, they are saying that we make noise and we want more salaries. They need to be educated on what Parliamentarians do. This can only be done through a PR committee of this House. Every Friday, through television and radio people can know that Parliamentarians are people of dignity. They are people who support the Government of the day and they are elected to come and do business here for the Government to run.

I support the Motion.

Hon. (Ms.) Ghati: Thank you, hon. Speaker. My name is Ms. Ghati, the lady Member for Migori County. I wish to support the Motion. Even as we try to sensitize the people out there, there are many new things the new Members need learn in-house. Some of us are still grappling with. For example, when to rise on a point of order or when to contribute to other debates-- I wish to suggest that this House, in the next probably five weeks, focuses on internal capacity building, so that we also understand practically how to use the machines that are inside here.

Hon. Kabando wa Kabando: Thank you, hon. Speaker. I rise to support this Motion. (*Technical hitch*) ---packaging the same information, consistently disseminating the same information to the public, so that it is easily understood what loads of work and achievements are attained. I say this with humility and understanding that the majority of the Members in this House now are new; perhaps, because of that, you may appreciate the sort of criticism that went to their predecessors, that is those whom you unseated because of propaganda perpetrated mostly by civil society – I do not mean all of them. They get facilitated by powers that have no undertaking, commitment to the sovereignty of, or patriotism to, this country. Therefore, it is very encouraging to see the Leader of the Majority Party rising to give a summary of a programme which will be followed; it has details of exactly what this Government will achieve. If there is any House that achieved milestones, then it was the Tenth Parliament. For us to match its achievements (*Technical hitch*) will require a lot of synergy, co-operation and even planning.

We are, therefore, supporting this Motion not simply because it has been moved, but because it is going to ease--- (*Technical hitch*) ---by making our constituencies, the Republic of Kenya and all stakeholders be with us in a journey of taking this country to new heights of development.

How many Kenyans know that the Salaries and Remuneration Commission (SRC) has removed pension for individuals who have left other disciplines and professions in order to enter into the very unpredictable arena of politics? This is a simple way of appreciation of a worker. When this country is talking about expanding the National Social Security Fund we are saying that the representatives of the people of Kenya shall not be entitled to a pension, even if they want--- (*Technical hitch*) But we must say that as one House we will appreciate the elected legislators of the Republic of Kenya in the right way.

How many Kenyans really know the professional qualifications of the women elected here? How many appreciate what it took a county woman representative to move from on village to the other in order to come to this House? How many Kenyans know that--- (*Technical hitch*) -- -lawyers, bankers, engineers, philosophers, political scientists and so on? How many Kenyans appreciate that hon. Kajwang was a pioneer of the freedom of the student movement in this country and I succeeded him.

In conclusion, this Motion calls for the strengthening of the Public Relations and Communication Department of this House. Many weeks after the elections the IEBC was still on air telling Kenyans to appreciate the results, and to maintain peace. Every evening we see a State corporation giving one communication or the other. In the last week we have seen every parastatal buying space to congratulate the President and his deputy for winning elections, many weeks after their victory. However, this House does not have a single advert in an FM station, on television station, or in newspaper. We are, therefore, leaving our fate to propaganda and hate. Let me tell you, hon. Members, through hon. Speaker, that a lot of these individuals dominate social media. If it was really social media voting, many guys that you know would have come here with landslide victory, but they did not.

We appreciate ICT, of course, but all we are saying is that busy bodies, political NGOs and even malicious media--- We have witnessed Members of Parliament being subjected to a lot of humiliation. Instead of moderating and facilitating dialogue, as it was last weekend, you see certain individuals in media houses taking positions to mean that if you want to see Satan walking on earth look at a Member of Parliament. We have to be firm, diligent and patriotic. We must tell those individuals at the CIC and SRC that we know when they wanted to be employed

in their current jobs. Those who were here in the last Parliament, when these people were looking for jobs know that they came kneeling. They came and went into supplication as if worshipping. Once they got jobs, they held us in a lot of contempt. Be firm and diligent.

I strongly support and congratulate hon. A.B. Duale.

Hon. Speaker: Hon. Members, as you know this is not a very contentious matter.

(Question put and agreed to)

Hon. Members, before we begin debate on the next Motion, I want to guide the House. Before we proceed, this House passed a Motion on 17th April 2013 in the following terms: That on Wednesday morning, being a day reserved for business not sponsored by the Majority Party or the Minority Party or a Committee, speech time would be limited to a maximum of three hours. The Mover will have a maximum of 20 minutes to move. The Leader of the Majority Party and the Leader of the Minority Party shall have a maximum of 15 minutes each. Any other Member contributing will do so for a maximum of 10 minutes before the expiry of the time the Mover will be called upon to reply.

Hon. Members, priority in speaking shall be accorded to the Leader of the Majority Party, the Leader of the Minority Party and the chairperson of the relevant departmental committee in that order. The last bit will not apply because we have not yet formed the departmental committees. This rule will obtain in any other Motion which may appear on the Order Paper on a day other than Wednesday morning.

PROVISION OF MEDICAL CARE BY HEALTH FACILITIES

Hon. Koinange: Hon. Speaker. I beg to move the following Motion:-

THAT, aware that health facilities in the country invariably decline to attend to patients who are in critical emergency conditions without admission deposits or payment leading to worsening of patients' conditions and sometimes leading to loss of life; concerned that most Kenyans are poor and lack medical insurance cover; noting that Article 43(2) of the Constitution of Kenya states that "a person shall not be denied emergency medical treatment," this House urges the Government to ensure that all health facilities provide emergency medical care to victims of accidents and those in emergency medical condition without denying them admission on grounds that they are not able to pay deposits.

Healthcare is a constitutional right for every Kenyan and this is guaranteed in Article 43 of our Constitution. During the Opening of the 11th Parliament, His Excellency the President also made a bold commitment on behalf of the Government that there will be healthcare for every Kenyan. *(Technical hitch)* While supporting what the Government is doing to support accessibility of healthcare both in programmes and in policies, I would like to mention that one area that needs urgent and immediate attention is the provision of emergency medical treatment, especially to the poor.

Hon. Speaker, in my constituency which is just next door from Nairobi County, indeed, many people cannot access medical treatment or services in the medical centres. The other day a lady went to a clinic and she was turned back and told to go home because she could not pay for the young son whom she had taken to the hospital.

In another case, somebody who had dislocated his arm went to a clinic but could not get an X-Ray done.

The Kenya National Commission on Human Rights (KNCHR) through a report titled “Public Inquiry into Violation of Sexual and Reproductive Health Rights in Kenya” captures the distressing situation in the most graphic manner especially of women and children not accessing healthcare or emergency treatment--- (*Technical hitch*) In some cases, people cannot access emergency transport when they want to go to hospital. They have to cough out from Kshs500 to Kshs3,000 supposedly for fuel.

Hon. Speaker, even the badly needed blood transfusion is sometimes not available for emergency cases. (*Technical hitch*) There is a case in Tana River in which a woman who developed complication after delivering at a dispensary died while waiting to get money for her transportation and that of her family. She passed away while waiting to get to Hola District Hospital. (*Technical hitch*)

The maternal death due to lack of transport between Magarini Dispensary and Malindi District Hospital both in Kilifi County--- (*Technical hitch*) In Lamu County, a report cites that patients who needed to be referred to Coast Provincial Hospital in Mombasa were reportedly required to pay between Kshs8,000 and Kshs10,000. People have to look for very expensive means of transport to access emergency treatment where there are no ambulances, like in northern Kenya. For example, in Wajir and Marsabit, people use very expensive taxes or camels to go to hospitals.

Hon. Speaker, many Kenyans cannot afford the cost of emergency treatment, according to the Kenya Poverty and Inequality Assessment of 2009; that is KPI 2009. Nationally, the poverty index stands at 47 per cent. Poverty figures in the rural areas stand at 49.7 per cent while those in urban areas stand at 34.4 per cent. This means that majority of our people can simply not afford emergency treatment and as a result they find themselves--- (*Technical hitch*) it must be appreciated that access to emergency treatment is a constitutional right in Kenya. It must also be appreciated that the current Government is committed to ensure quality healthcare for our people. To achieve this, we need to formulate a way of getting funding.

Currently, the Government with other development partners have three social protection programmes. That is none profit--- (*Technical hitch*) health, social trust funds, relief and recovery, contributory and the National Hospital Insurance Fund (NHIF).

Hon. Speaker, many people from upcountry cannot access medical healthcare because of poverty. As a matter of fact, many people sell small items in their homes so that they can get money to get to hospitals. Because of this many people lose their lives because they cannot access free medical treatment.

On 9th December, 2004, the Kenya Parliament passed the National Social Health Insurance Scheme Bill whose objective was to enable many poor people access healthcare. However, this Bill did not see the light of the day because the private competitors were not happy. They complained that issues of corruption may arise because of the new Bill. There was also the issue of inefficiency, mismanagement and quality of healthcare.

I have some recommendations. This country has witnessed situations where its citizens have lost lives or suffered disabilities due to lack of resources to access emergency treatment in our health facilities. This must stop. First of all, I recommend the following: There is no doubt that designing and implementing a well run and effective national social health and insurance fund is challenging. It is challenging but, we must try hard and succeed. According to World

Health Organization (WHO), the purpose of health financing is to make funding available and that it goes to the right person and the right provider.

The second recommendation is this: I recommend that, in the meantime, before the future, as we still work out on how best to implement the National Health Insurance Fund (NHIF), the Government should begin exploring how best it could implement schemes where we could provide vouchers for the poor to access medical care or emergency treatment.

Thirdly, to move those recommendations forward, the Departmental Committee on Health in the National Assembly, in consultation with the Ministry of Health, should move with speed and recommend mechanisms of how best these recommendations, including appropriate legislation can be implemented.

Thank you very much, hon. Speaker, for allowing me to speak on this particular Motion. I beg to move the Motion and call upon my brother, hon. (Dr.) Nyikal, to second.

Hon. (Prof.) Nyikal: Thank you, hon. Speaker, for giving me this opportunity to support this Motion. This Motion, hon. Members, touches on life. All of us, whatever we do, wherever we are, what we are pursuing is good life or life at all. It is sad to lose it just because at the time of need, you do not have the money to pay for that service. Good health and, therefore, healthcare, is high up in the rank of human needs. Article 43(1) (a) and Article 43(2) of the Bill of Rights in the Constitution supports that. In fact, it is now a constitutional right of every Kenyan to get better health.

It is common practice in private hospitals and even these days in Government hospitals, since we came up with cost-sharing that eventually moved to full payment for services. Indeed, it is unethical for any professional to turn away somebody in need of emergency care. But what is done in hospitals and other institution is to evade that ethical responsibility by placing non-professionals at the point of admission, and who demand that you pay first before you are attended to. I think we should add in this Motion that non-professionals and non-medical people who are working in health institutions must be bound by the same ethical rules of that profession. So, what happens is that it is left to the clerks to decide. So, you cannot take action against the clerk because they are applying the rules of the institutions. If you were to see a medical person, they are bound to see you.

What we really must do in this Motion is to ensure that anybody who seeks medical attention – and that is what should be done in a critical situation – must, first of all, be attended to, whether he or she can pay or not. Then, when they are in a stable condition, they can be moved to other facilities – whether Government ones – where they can get waivers or where they can afford. Hon. Members, this applies to everybody, even those who can pay. Some of us are on insurance, but if you go to a facility where your insurance does not provide a cover, you will suffer the same consequences. So, through this Motion really, we must support that.

It is also important to realize – and even the President's Speech indicated it – that we are actually taking long term measures that are addressing the needs as we see them. What this country needs is a comprehensive healthcare that has an insurance that covers everybody and where the indigents are paid for by the Government. We have no other way around it. Nobody, including us here, can afford – especially with the salaries that are coming – to pay for healthcare at the point of delivery. Unfortunately, the poorer members of our society are the ones that are forced to pay at the point of delivery. They, therefore, pay a lot and many times, they lose their lives.

Hon. Speaker, this is something that we really must change. As the Mover has said, when we have a health insurance--- I had an opportunity to work on it. Again, it was fought and it did not work. I think this time; this House has to pass a comprehensive healthcare Bill. We really must do that for all Kenyans. Every Kenyan must be able to walk into a hospital and go home without having to pay at that point. It is their right. I know that when we tried before with the NHIF, there was the issue of corruption. People said that it cannot work. That is why I was saying yesterday: "Corruption kills" We should not be afraid to say that. I am repeating it this afternoon; that there are certain levels of corruption where we must be brave enough to apply capital punishment. If corruption kills many people, why are you afraid? We cannot have people going to court and coming out to enjoy the proceeds from corruption. They live well and become heroes to our children! Countries that have progressed have actually applied that. Take the big money but it will be enjoyed when you are in your grave.

I support this Motion. The proposals in His Excellency's Speech the other day must give immediate relief to our people. But we are duty-bound, as Members of this House, to pass this Motion. We should come up with a scheme that is run with integrity and without corruption.

Hon. Speaker, I beg to second.

Hon. Speaker: Hon. Members, I know that this is the first Motion by Private Notice that is being debated and, therefore, not all hon. Members may have looked at the Standing Orders properly to know that it has to be proposed but before I propose it, I want to announce that all Members of the Procedure and House Rules Committee are required to go to Committee Room No.9 at the rise of the House at 6.30 p.m.

(Question proposed)

Hon. Speaker: Yes, hon. Konchella.

The Member for Kilgoris (Hon. Konchella): Hon. Speaker, first and foremost, let me congratulate you and your deputy for assuming high office in our land. I also want to congratulate hon. Members for being elected. We all went through very difficult times but with God's grace, we are here to serve our people.

Hon. Speaker, I want to very strongly support the Motion moved by hon. Paul Koinange, my good friend and brother for many years. I congratulate him more so for being the first hon. Member to bring a Motion by Private Notice. I would also like to thank him for doing so. This particular Motion is very deep in my heart because when I was an Assistant Minister in the Ministry of Health, Dr. Nyikal and I worked very hard to create a comprehensive medical scheme for the people of Kenya. We even went further to ensure that accident prone areas along our highways from Voi to Machakos and all the way to Nakuru and other places, have medical facilities to deal with accident victims and emergencies. However, we have a problem of inconsistency in our medical service provision.

This time round, we do not have so many questions to answer. We are supposed to sit here and address issues critically as they may be and make sure that they are done. I am glad that when the President was here the other day, he said that we must hold his Government to account. It is not a matter of the CORD Coalition. It is about all of us together because failure of the Jubilee Government will be failure of this House, and particularly for hon. Members of the Jubilee fraternity.

Hon. Speaker, we now have a very big problem of maternal deaths. Dr. Nyikal can confirm that fact. In the recent past, we have had many deaths of our young ladies. Commissioner Letangule's wife died the other day. When you look at it, you will see that it was purely due to negligence. The lady had gone to the medical facility to give birth but due to other conditions, on which I am not medically competent to comment on, she passed on. So many other ladies have died in similar circumstances. So, we really have to make sure that our medical practitioners are able to address the issue of maternal healthcare, particularly for young women giving birth for the first time. That is because we are losing very many Kenyans out of this unfortunate situation.

Therefore, this Motion addresses the core problem of when there is an emergency. There is no one who knows when an emergency can occur. We all pray that we do not get diseases but should you have an accident and it happens that you have not carried your medical card; nobody will know that you are a Member of Parliament. If you are denied medical attention, as it has happened to very many people, you will just pass on. So, we must pass a law in this House to ensure that any Kenyan who requires emergency treatment gets it as a matter of priority because the law provides for it. Therefore, we must create a law that--- (*Technical hitch*) ---whether it is a Level 5 hospital or a Level 6 hospital, or whatever hospital it may be, including private hospitals. The biggest hindrance to our efforts to create a comprehensive health scheme for Kenyans--- (*Technical hitch*) ---these people want to continue exploiting Kenyans. They want to charge as much as they want. We have many doctors in public hospitals, each one of whom has his own private clinic. So, if he knows that you are a wealthy client, he will always look after you in his private clinic and, of course, charge you a premium. So, there is no time set aside for poor people. Doctors do not even attend to them. People die due to negligence arising from the fact that doctors who are supposed to take care of them do not attend to them. The doctors privately make money in their own clinics.

Therefore, we must bring a law to provide that if you are a doctor working in a public hospital, you must be paid properly. We cannot expect doctors to work without being paid adequately to enable them to do their work. However, the number of hours they should spend in public hospital in a day should not be less than eight hours. Of course, they will be required to attend to emergency cases. They should spend more time in hospital and be on call for medical conditions that may require their attendance at short notices. These are real issues which we can only address through legislation. Therefore, I call upon hon. Members to consider this Bill very carefully.

Hon. Speaker, I also call upon the Mover of the Motion to actually create a Bill. I hope that he will be in the Committee on Health. Dr. Nyikal is now an hon. Member. You know, he was my doctor. So, I apologise if I do not say "*mheshimiwa*". His status is now up. So, we have him and other hon. Members in this House, who can sit down and create this law. We will address the issue of doctors and lack of medicines. Many Kenyans die of cancer today. The rate of cancer-related deaths in this country is almost surpassing the rate of deaths related to malaria. Why? Because there are so many chemicals.

An hon. Member yesterday said that a lot of run-off water goes into boreholes from which Kenyans drink and then we get a lot of cancer cases. I can say that the causes are probably even more. It could be medicines whose efficacy is not right. We import a lot of generic medicines from countries like India and other countries that I do not want to mention. Whether it is ARV drugs for management of HIV/AIDS or whatever drugs, they only import genuine drugs

to a certain level and then bring useless drugs. So, people are dying because of taking the wrong medicine. Our people are dying because they are not getting quality medicines. It is high time we came up with our own institutions to manufacture medicines in this country. We have Cosmos in Kenya, who are doing some work. The Committee on Health should actually visit any manufacturer of medicines in Kenya to ascertain that they are actually producing quality medicines. We should be able to verify the quality of any medicine.

Hon. Speaker, we have an institution which is supposed to control the quality of medicines coming into this country. But what do they do? Many importers walk there with a couple of pounds or whatever it is and then they are allowed to import drugs whose use has been banned elsewhere in the world. So, our people use such drugs. There are many drugs which have been banned by the World Health Organisation and other health institutions, but which are still being administered to our people in Kenya. That is why our people are dying of cancer. That is why it is our duty, as Members of Parliament, to address this matter very seriously. We should create a law to provide that anybody found selling medicines which have been banned by our statutes should be banned from practising in this country, and that he or she should be jailed for life upon conviction. If we go that way, even if you are a doctor, you will not be able to practise in Kenya again.

That is the kind of law we need to address the issue because we have come to realize that if you do not create serious punishment for people who cause deaths and havoc to our people, they will continue making money and enjoying themselves as our people die. The more the deaths, the more the morgues and the more carpenters make coffins. That should not be the way to go. Therefore, these are issues we need to address just as much as--- (*Technical hitch*) --- expanding our tax bracket to create money to be able to address this issue and provide medical care to our people. It is through our commitment to pay taxes that we can achieve this. How would we do that? By ensuring that institutions like the Kenya Revenue Authority (KRA) and others like those in the transport sector are properly regulated and managed by the right people.

Hon. Speaker: Your time is up, hon. Konchella.

Yes, hon. Member for Meru County.

Hon. (Ms.) Kajuju: Thank you, Hon. Speaker. I rise to support the Motion. While the Constitution is the supreme law of the land as we appreciate, for the letter and the spirit of the Constitution to be achieved, there must be enabling provisions that assist the Constitution to get to ordinary Kenyans. Hon. Koinange has come to this House to help the House and the people of Kenya access medical care that is necessary.

The Constitution allows that once your rights have been infringed, violated or threatened, you can move to court and have your rights ordered through the court. I am imagining of a situation which demands emergency care and you cannot go to court. Even your relatives cannot go to court to order the institution to give you that emergency treatment. So, no matter the circumstance, as long as you are in a situation that demands emergency care, any health facility is under duty, by law, to assist the person who needs that care. As a woman, I know that in terms of reproductive health, women have really suffered. I support this Motion and urge Members to pass it because we know women and the youth have suffered most when they need emergency care.

We are also alive to the fact that our President, in his Speech, referred to issues of healthcare. We are looking forward to our women accessing free maternity healthcare. By

passing this Motion, we are also assisting our President to achieve his vision during the period he will be in office. With a lot of humility, I seek that this House passes this Motion.

The Member for Mwingi West (Hon. Kitungi): Hon. Speaker, my name is Bernard Kitungi, Member for Mwingi West. First, I congratulate you for being elected Speaker of this House. I also want to thank the people of Mwingi West for electing me to represent them in this House for five years.

I rise to support this Motion. Some parts of Mwingi West are very remote and medical facilities are far away and unreachable. Those health facilities do not have drugs. As much as we want our people to access medical facilities, the Government should assist remote areas and see how it can help our people. The Constitution provides for that. There is nothing that those people can do because they are poor. Some people die along the hospital corridors because they do not have money. I have seen cases where people are bitten by snakes and die before they reach a medical facility due to lack of quick means of transport. I support the Motion.

The Member for Naivasha (Hon. Kihagi): Thank you, Hon. Speaker, for noticing me. I had given myself an ultimatum to make my maiden Speech this week. My names are John Karanja Kihagi. I wish to congratulate you on your election and the entire membership of this House for being elected to this prestigious House. I also want to thank the people of Naivasha for honouring and electing me as their Member of Parliament. In the morning, it was wrong for people to say how many votes they received. I realized that none of those who spoke got even a half of what I got. I was elected with almost 60,000 votes. This can only tell you that an injustice was committed to the people of Naivasha when the new constituencies were being created. Naivasha was supposed to get two extra constituencies. The population I currently represent is almost 250,000. I hope, by and large, we will get a way of correcting that injustice. Currently, Naivasha has almost 110,000 registered voters.

Our Constitution recognizes the right to life. Indeed, the moment you are almost losing your life is when you have had an emergency – say an accident. For women, it is at the point of delivery. So, it will be a mockery of the Constitution if we do not guarantee that right. At that point, it is criminal for anybody to deny you the right to treatment and more so, a medical practitioner who should save your life as opposed to endangering it. I also know that in this country the number of accidents, especially road accidents, is unacceptably high. I understand it is a record in the world. Everywhere you walk or drive, you see accidents waiting to happen. Even as this is achieved, we should urge everybody to play their part. I come from a constituency with numerous black spots. But the number of accidents is also increased by careless driving and unmarked roads. Currently, we have the motorcycle phenomenon. It is one of the leading causes of accidents in our country. The enforcement of the use of helmets, especially for the passengers, is non-existent. Those of us who have visited Rwanda can witness that nobody rides on a motorcycle without wearing a helmet. We should entrench that in our culture. That will reduce road accidents and the fatalities that result from them.

We know that most of our places are accident-prone. I have visited flower farms in my area and also Kajiado. I have realized that health and safety rules are totally ignored. We need to ensure that the health and safety of our workers is paramount.

We also know – and Dr. Nyikal said it – that most of the personnel you find in some of the facilities in the remote areas are not actually medical practitioners. I know that the board has been trying to ensure that we have properly trained medical practitioners who understand ethics so that they do not turn away our people who want services, due to ignorance. We want to

encourage the board to continue with that and increase the level of surveillance on medical practitioners and their employees.

Having said that I know there are black spots. Our Government facilities are overwhelmed by the number of accidents that happen around those black spots. So, we expect that action will be taken to facilitate the hospitals in those areas. I have in mind Naivasha District Hospital where I come from. Every day, we hear of accidents. We have to rush there to assist those who are injured.

Hon. Speaker, I would like to raise an issue about mortuary fees and bodies being detained due to non-payment of such fees. That is traumatizing for people who have already lost their loved ones. I have just come from constituting my CDF committees in my eight wards. My constituency has eight wards and it was very difficult for me to move there in the short period that we were given the gracious lady – as she has been referred to – has denied us transportation facilities. In two places, I was told that bodies had been detained in mortuaries. One is detained at the Kenyatta National Hospital for non-payment of Kshs150,000. Of course, they were telling me that, perhaps, expecting me to pay that amount for them so that they can go and bury their loved one, or they expected me to talk to someone. Therefore, I would like to encourage hon. Koinange that, as he comes up with this Bill--- We are still lost as new Members. Where is this leading us? What is the Bill urging the Government to do? Will this translate into a Bill that will be coming to this House? I would suggest that the issue of mortuary fees be looked into.

Hon. Speaker, I beg to support the Motion.

Hon. (Ms.) Chae: Thank you, Hon. Speaker, for “catching my eye”. I am Chae Alice, the County Women Representative for Nyamira County. I stand to support this Motion with regard to healthcare. You will bear with me that any kind of sickness is an emergency. Nobody prepares to be sick in order to go to hospital. So, as long as you are alive, when you get to hospital, there is that commercial aspect. When you see one coming to hospital, you see money. Others look at the caliber of the persons who have come to hospital and their ability to pay. Others want to make millions at the end of the month. What I feel is that they should be served by health facilities, be they public or private. We need to have human feelings and not wanting to enrich ourselves all time. It is unfortunate that one gets sick. We should think about those who are prepared in terms of medical covers. There are those who do not have such facilities because they have not planned for it. Even the NHIF cover that is in place, you will find that some hospitals declare that it will cater for food or bed only. Why then did you go to hospital? Did you go there to sleep or eat or did you go there to get medication? Why can we not change NHIF cover so that when you go to hospital everything is catered for? We expect somebody to get medication when they go to hospital.

We need to widen the scope of health facilities that we are talking about. It is an issue that is in every hospital. I think health service providers need training on how to receive people. A sick person wants you to be perfect. What I feel is that all health facilities should be upgraded. They should have all the basic necessities. Emergency cases should be attended to. A patient who is supposed to go to Nyamira Hospital is unable to get to the place because of poor infrastructure. Most of the people are too poor to get to hospital. The only thing that this House can do to help our people wherever they are is by passing a good Bill that will enable things work.

I support the Motion.

Hon. Speaker: Hon. Moindi! There is a Member called Moindi. Is that not so?

Hon. Serut: On a point of order, Hon. Speaker.

Hon. Speaker: There is nothing out of order!

Hon. Serut: Hon. Speaker, from Wednesday last week, some of us have been standing in this House and when the issues of counties arose--- You know I do not belong to Rift Valley Province; neither do I belong to Western Province. I do not know where I belong. I thought that being an Independent Member, I should be heard.

Hon. Speaker: Hon. John Serut, I am sure that is not a point of order. Most likely, you are trying to draw the Speaker's attention to your presence. Let us listen to the hon. Member for Nyaribari Masaba.

The Member for Nyaribari Masaba (Hon. Moindi): Thank you, Hon. Speaker, for "catching my eye". I have been looking for this opportunity and I feel this is the right time.

An hon. Member: On a point of order, Hon. Speaker. I would like to know whether you are the one who should "catch peoples' eyes" or it is the Members who should "catch your eye".

Hon. Speaker: I am sure you can look at it in the Standing Orders. But, of course, hon. Members read the Standing Orders and apply them as they choose.

The Member for Nyaribari Masaba (Hon. Moindi): Thank you, Hon. Speaker. May I congratulate you for your successful election as the Speaker of this House. May I also thank the people of Nyaribari Masaba for electing me to come here to represent them. May I also thank the hon. Member who tabled this Motion because it is very sensitive.

Hon. Speaker, we talk about insecurity in our borders. People lose lives as a result of that. At the same time, people die when they go to our medical facilities. On my way to Nairobi from Kisii, I found a victim of an accident. I took the guy to hospital even though I did not know him. I tried to plead with the medical team but they wanted--- (*Technical hitch*) I could not afford that because I am not in the business of taking patients to hospitals and the guy passed away. There is no difference in such a case with somebody who is being killed at the border because of insecurity. Those are professionals who vowed to save the lives of Kenyans but somebody--- (*Technical hitch*) ---the hospital while the medical teams were looking. Nobody listened to me even when I pleaded with them that I was a Good Samaritan, I did not have the deposit. I found the guy had been involved in an accident on the road.

My request is to my brother who has brought this Motion to fine tune it so that the Government can put measures in place to enable Kenyans access medical facilities and, as a result, save lives. We cannot look at the medical facilities and expect life to--- (*Technical hitch*) How can professionals who vowed to save lives see somebody dying in the presence of everybody? Let the Government take proper measures to save Kenyans from dying at our medical facilities which are meant to save lives.

Thank you, Hon. Speaker.

Hon. Speaker: I am sure the hon. Member who is holding a copy of the Standing Orders may wish to read something from the Standing Orders.

The Member for Matungulu (Hon. Mule): Thank you, hon. Speaker, for "catching my eye" this afternoon. I rise to support the Motion by hon. Paul Koinange. As an authority within the medical fraternity--- Personally, I am a biomedical engineer by profession. It is high time that this House came up with Health Insurance Bill.

Hon. Speaker: What is your name?

The Member for Matungulu (Hon. Mule): Hon. Speaker, my name is Stephen Mutinda Mule, the Member for Matungulu.

I would like to say that it is criminal--- (*Technical hitch*)

Part IV of our Constitution, Article 26 states very clearly that abortion is not permitted unless in the opinion of a trained health professional--- I do not want to deal with abortion. The article goes ahead to say that there is need for emergency treatment if the life or health of a mother is in danger. It is permitted by any other written law. Who are the people in our health centres who send people away to die? Who are the people in our health centres who commit innocent Kenyans to death? They are not judges. They are supposed to work within the law, which is very clear.

I want to support hon. Koinange. I would like to say that the 11th Parliament has more than 30 fully trained medical doctors. We will be behind the hon. Member. We, Members of Parliament, let the country down in the past when hon. Nyikal did a good job. We have left innocent Kenyans at the mercy of health providers in the private sector. I want to see a Kenyan or an hon. Member, for example, Stephen Mutinda Mule from Matungulu being treated if he falls sick at home, instead of being flown to Nairobi Hospital. I just need to--- (*Technical hitch*)

A health scheme in this country will solve three major fundamental issues in the health sector. One is the procedure followed in the procurement of medical facilities in this country. I would like to say that cartels have been formed to make sure that Kenyans do not get the health scheme, so that they can continue ripping off the Government of Kenya. Hon. Members of the 11th Parliament, we should stop those cartels with immediate effect and have a health scheme in this country. About two weeks ago, when Parliament was opened, we heard that professional bodies working within the law evaluated products to screen Kenyans HIV. The same bodies which are trying to undermine this House are running to the media to mislead the nation that we have fake products being used in the market to screen HIV patients.

The World Health Organization (WHO) has blacklisted some of the products. For the Ministry to go ahead and stop that, it becomes a story. We will not allow people who are not lawmakers to take this country to the goons or people who want to enrich themselves.

Finally, I want to urge this House and all the hon. Members in this House who have trained in the medical profession that we should join hands with hon. Koinange, even if it means engaging consultants within the country, so that we can formulate this Bill as quickly as possible and make sure that the common *mwananchi*, the Wanjiku of the day, the Kalundi of Ukambani and the Otieno of Luoland access healthcare without fear or favour.

It is unfortunate that we have very good policy papers. I want to request - and I wish Dr. Nyikal was in the House to hear this - that we just need to go to the cupboards of the Ministry of Health and--- (*Technical hitch*) I will bring that Bill to this House so that we can pass it. I will make sure that the Jubilee Government led by Uhuru Kenyatta implements it and we do away with this menace of killing Kenyans and innocent people.

Hon. Speaker, I beg to support this Motion.

Thank you.

(*Applause*)

The Member for Kandara (Hon. (Ms.) Wahome): Thank you, hon. Speaker. I have not made my maiden speech. May I take this opportunity to congratulate you as I support this Motion by hon. Paul Koinange.

While we may have admission without charges, you are aware that most of our health facilities do not have medical supplies. Patients are twinned in one bed – man and man, and woman and woman. Those are things that are actually not supposed to happen even in our homes. Even if you were both suffering from the same disease, I think it is improper and unacceptable for patients in our hospitals to continue sharing beds. That is the order of the day if you visit Thika District Hospital and Maragua Sub-District Hospital.

Dr. Nyikal who seconded this Motion needs to tell us what happened to the medical supplies. A patient will be admitted and the next hour, he or she will go for an X-Ray outside the hospital. For a simple lab test, you will be sent out of that medical centre. If you inquire further, you will find out that one of the personnel within the hospital is actually the proprietor of the laboratory outside the fence of that health facility. That practice must stop.

Medicines are carted out of our health facilities. More often than not, you have a prescription of the patient you admitted in the hospital. You give them a bed and because they do not have money, they do not get medication or treatment. From the President's Speech, it is necessary to have well equipped health facilities, well trained personnel and health workers who are well motivated. How many times have we seen our doctors in their white over-coats with stethoscopes carrying twigs, agitating for increased salaries? I believe that issue has not been resolved. It is still on the desk of our Government. Sometime back, I actually rolled in a car because I happened to be carried by a doctor who was running away from the police. If he were to be caught, he would be thrown into jail. The cases affecting doctors and nurses are long overdue. They work for long hours. They work for 24/7 and yet, they have not been treated properly.

There are other support services for the patients that we are seeking to have patients admitted without charges. In Kandara, when patients fall sick at night, I can assure you that because of insecurity, they will not go out. They will stay until morning. Lack of those support services is contributing to death. They are sick but they cannot go to hospitals. They cannot leave their houses. Recently, I lost a young mother in Kandara because the roads are inaccessible. She delivered at home and started bleeding and, within one hour, it started raining heavily. The road is completely inaccessible. In Kandara, 80 per cent of my constituency touches the super highway, but 80 per cent of our roads are inaccessible. The young mother who required urgent treatment died at home because it was raining.

Hon. Speaker, I would like to support the Motion by hon. Koinange. Thank you.

Hon. Speaker: The hon. Member for Wajir North.

The Member for Wajir North (Hon. Saney): Thank you, hon. Speaker. I rise to issue my maiden speech. I have come to terms on two issues in this House. First, size is inability. I have been struggling to catch the Speaker's eye; sometimes standing on my toes and, lastly, I was contemplating standing on the chair for me to get noticed by the Speaker. So, it is a fact that we may not be able to deliver the mandate bestowed on us by the people just because we have to depend on the impulsive eye of the Speaker. This House has grown in proportion and I feel there should be other mechanisms of debating other than relying on the Speaker's eye. I feel it will be a problem.

I would like to bring to your attention that there is a namesake in this House; the hon. Member for Garsen, who is hon. Ibrahim Ahmed Sane. I am Ibrahim Abdi Saney. I have had the opportunity to stand on the Floor and I wish to patent the name "Saney" informally for purposes

of this House. He should adopt any other name. I should be the Saney for the purposes of reference in this House. That is just for your attention.

Thirdly, I am indebted to the people of Wajir North who have stood, against all odds, to elect me to this House. To them out there, I say: "Thank you!"

Let me come to the issue at hand. The cost of emergency medical treatment is borne at two levels. The first is transporting the patient to the referral centres or hospitals and the cost of treatment at the hospital. I feel the cost is most prohibitive in the pastoral communities where referral facilities are not there. In Wajir, particularly in my constituency, there is no one single health facility. All we go through is to transport patients from wherever they are to the nearest medical centre, which is in Garissa. Garissa is about 700 kilometres away from my constituency. So, you can imagine poor patients mobilized from all corners of Wajir North. Those are people who survive on a stipend that they get from the Government under the safety net programme. Most of the dispensaries do not have ambulance services. Those that are there are in a state of disrepair and there are no budgets to cater for their fuel and other services. So, you can imagine if at all there is need for emergency care, it will most be an opportunity for people in northern Kenya. The starting point is to; at least, make sure that those facilities are available in those areas. Wajir, which is one of the biggest counties, does not have a referral centre. Unless referral centres or bigger hospitals are established in the counties, we will not be able to bring down the cost of emergency medical care.

Without taking much of other Members' time, this was my maiden speech, at least, to acquaint myself with the debate. I beg to support the Motion.

Hon. Speaker: Hon. Members, you will appreciate; everybody will have a chance to say their bit. Let me recognize hon. John Serut. He was an independent candidate.

The Member for Mt. Elgon (Hon. Serut): Thank you, hon. Speaker. Let me take this opportunity, at the outset, to congratulate you and your deputy for your election. We participated in lobbying to have you elected because we knew you are up to the task. Secondly, allow me to thank the people of Mt. Elgon for having thought it wise to return me to this House after a leave of five years. They voted for me overwhelmingly without riding on any party. I want to thank them for that honour.

Hon. Speaker, allow me to say a big "thank you" to hon. Koinange for bringing this Bill to the House. This Bill is about emergency services in our health facilities. As much as I support this Bill, I have been thinking aloud while seated here as to whether we should pass it, or call for a comprehensive medical scheme Bill. I say so because if we are going to pass this Bill the way it is, it will mean that we have so many small pieces of legislation on---

Hon. Kang'ata: On a point of information, Hon. Speaker.

Hon. Serut: Hon. Speaker, Sir---

Hon. Kang'ata: On a point of information, Hon. Speaker.

Hon. Speaker: Hon. Member for Kiharu, you do not insist on a point of information. If the Member speaking is not interested in whatever information you have, you just have to remain with it or you give it to him elsewhere.

Hon. Kang'ata: Hon. Speaker, the hon. Member is talking about a Bill. This is not a Bill. It is a Motion.

Hon. Speaker: Hon. Kang'ata, even though that may be the case, that is not the way it should be done. You are a trained lawyer. Please, use our rules.

Continue hon. Serut.

Hon. Serut: Thank you, Hon. Speaker, for protecting me. This Motion will lead to a Bill. There is no way it will become an Act of Parliament without it being transformed into a Bill.

Hon. Speaker, I remember that a medical scheme Bill was in this House during the Ninth Parliament. It was here again during the Tenth Parliament. I think all that the Bill required was panel beating by this House. This House, having been constituted by Kenyans and with the number of doctors and other professionals that we have in here, it is time the same Bill is re-introduced in this House, so that we look at it instead of dealing with this particular Motion, which might end up becoming a Bill and require us to come up with other pieces of legislation on medical care. If you have listened to hon. Members speak, they talked of issues of transport, emergency services in Government hospitals and bodies of deceased persons not being collected from hospital mortuaries. Looking at this Motion, it is very restrictive. It does not touch on those who die. If we have to deal with issues in the medical sector, including lack of drugs, we need to re-introduce the same Bill that was in this House earlier.

Hon. Speaker, there is a lot within the health facilities that is not very good. Part of it is the issue of retention of identity cards by medical facility administrators, including Government facilities, in the name of cost-sharing. The Jubilee Government needs to come up with a good policy regarding what happens to those people who are not able to pay their bills after treatment. I think the best way is not to retain their identity cards, to ask for their land title deeds or to ask for other documents to be held.

Another issue is that of detaining bodies of deceased persons. There is no value in a dead body. To us Africans, especially Kenyan Africans, a dead body is a symbol of many things. If one is poor, unless he is assisted by his or her Member of Parliament, he or she abandons her keen's body to rot in the mortuary. It is high time the Jubilee Government came up with a policy of ensuring that medical institutions release all bodies to relatives for burial, so that the question of detention of bodies by hospitals ceases to arise.

Hon. Speaker, I want to stop at this point and call on this House to re-think the issue of coming up with a comprehensive health scheme Bill, which was in this House earlier, instead of dealing with small pieces of legislation on health matters.

Thank you, Hon. Speaker.

Hon. Speaker: Hon. Members, we will now have to exclude those who spoke on other Motions earlier on. Let us just have those who have not spoken. I will have the lady over there.

Hon. Kedogo: Thank you, Hon. Speaker. I am hon. Dorcas Kedogo, the County Women Representative for Vihiga.

Hon. Speaker, I would like to support the Motion and just say that equipment is very necessary in our hospitals, especially at the dispensaries and health centres. If these facilities are not equipped, it will mean that there is nothing that will happen. Even emergency situations cannot be attended to.

The Government should also do something about nurses and doctors. You find that there are many doctors and nurses at one institution and none at others. At some health facilities, even in times of emergencies you find that there is nobody to attend to patients--- (*Technical hitch*) --- So, it becomes difficult for him or her to operate. Therefore, I would request the Government to ensure that there is enough manpower at dispensaries and health centres.

Sometimes you find that even primary school children going to dispensaries for medical attention have to pay and even after paying, they are told that there are no medicines. Therefore,

I would like the Government to make sure that health facilities have sufficient medicines and other equipment, so that school children can be attended to.

Hon. Speaker, an emergency can happen anywhere, including on the road. Sometimes I feel that we need to equip our hospitals in all areas to take care of all diseases because when people go there for emergency, they are directed to other hospitals. That is why I said it is necessary for our dispensaries and health centres to be equipped and also given medicine--- (*Technical hitch*) --- malaria, you may find that there is no equipment for testing a patient's blood to establish whether he has the malaria parasite. Therefore, doctors end up giving wrong medication to patients. What do they do?

An hon. Member: On a point of order, Hon. Speaker. Is it in order for the Member to mislead the House that doctors will just give you medicine without proper diagnosis? Diagnosis is not just based on laboratory results; it is also based on clinical findings. So, she is not in order to say that doctors prescribe medicines for the sake of it.

Hon. (Ms) Kedogo: Hon. Speaker, maybe because some of us are not doctors, we assume that doctors will just give us medicines (*Technical hitch*).

Hon. Letimalo: On a point of order, hon. Speaker. Is it in order for a Member to interrupt a Member who is making her maiden address?

Hon. Speaker: I have since discovered that she was not making a maiden Address.

Hon. (Ms.) Kedogo: Hon. Speaker, I was just about to finish. I was saying that sometimes you go to hospital and you are given malaria drugs without the proper tests being done and then we assume that doctors have done something wrong. I apologize if I have offended doctors.

I support the Motion.

The Member for Mandera South (Hon. Huka): Hon. Speaker, despite being dressed conspicuously, I did not catch your eye.

I take this opportunity to support the Motion. Before I proceed, I want to thank the people of Mandera South for having given me the opportunity to serve them in the 11th Parliament.

Coming to the Motion, it is timely and very relevant (*Technical hitch*). When I looked at the Motion, it was as if hon. Koinange had read my mind. It is as if he was in my constituency and saw the suffering that the people of Mandera South are going through for lack of medical care. As I speak, Elwak Sub-District Hospital does not have even one clinical officer to attend to the people. In the last one week, nine children have died and two mothers have lost their lives after they were referred to Wajir District Hospital. Expectant mothers, together with the medical personnel who had accompanied them, perished in a road accident as they were being taken to Wajir Sub-District Hospital. As a result of poor services in the hospital and bad roads, we lost three lives on the spot and two other lives later in the hospital. The Motion, therefore, is timely and I support it.

When we talk of medical care, as stated in the Presidential Address, parts of this country are developing at varying rates and northern Kenya, especially the constituency that I represent, is one of the most disadvantaged areas. In the entire constituency, the only hospital that is said to be big is the one that I have referred to. In the adjacent health centres, we have only the community health workers. My colleagues, doctors in this House, can confirm the limitations that the community health workers have in terms of healthcare provision. Therefore, it is high time we put in place measures to help the people of northern Kenya in terms of bringing them at par with other Kenyans.

From my area, when we get to Garissa Town, we say that we are coming to Kenya. I wish to request your protection because I am making my maiden address. This is simply because in that area social amenities are of fourth class, not even third class. The Motion is in line with the Presidential Address and very timely. The cost-sharing arrangement that is in place does not facilitate the people, as it was intended; it has become a hindrance to people accessing the minimal medical facilities that are available. It is high time the Government put an affirmative action in place, so that the people of northern Kenya, especially those of Mandera County and Mandera South Constituency, benefit from Government services like medical care. I, therefore, support the Motion with the emphasis that the people of Mandera South need emergency health services in hospitals and dispensaries.

The Member for Kipkelion East (Hon. Limo): Hon. Speaker, I wish to make my maiden address. I congratulate the Speaker and the Deputy Speaker on their election. I also take this opportunity to thank the people of Kipkelion East for giving me the opportunity to become their first Member of Parliament.

I join my colleagues in supporting this Motion on medical insurance. Some Members have supported an initial comprehensive medical scheme which was debated by the Tenth Parliament. I hereby support it. We should look at ways of reviving it and making it real. Emergencies have become real even in my constituency because the highway around there is currently under construction. In this country, road contractors are doing their work without due respect to safety standards. We have had situations where people fall into depressions which are not covered by the contractors. People need emergency medical facilities because of the state of the roads.

We have had a lot of problems in getting our patients to health centres due to the poor state of our roads in the constituency. I join my colleagues to also support what the President proposed in his Address. He proposed to provide free medical services in dispensaries and health centres. This will help the people in the rural areas. Certain hospitals along the highway have contributed a lot in attending to road accident victims. The Government should come up with a procedure of recognizing those hospitals, so that they are encouraged. Some of them are private hospitals and they treat road accident victims free of charge. That is very good. We should encourage more to do the same. Also, some public hospitals are doing well, but some are doing very poorly.

Unfortunately because of lack of motivation of the staff, you will realize that the situation is not the same at Kericho District Hospital. Many professionals like teachers and doctors have been complaining of poor remuneration. The Government should come up with a way of ensuring that delivery of service in hospitals is sustained. (*Technical hitch*). We need to have the right people on the right jobs. I thank the President and the Deputy President for what they are doing. I hope the names that will be brought to this House for approval will be of people who are ready to deliver services to our people without us chasing them around.

Let us also look at preventive measures, so that we do not waste energy on treatment. We would have prevented emergencies from occurring. In this respect, this House needs to come up with preventive programmes, which will help in preventing many cases getting to hospitals.

I beg to support the Motion.

The Member for Homa Bay Town (Hon. Kaluma): Hon. Speaker, I am Peter Kaluma representing Homa Bay Town Constituency. Permit me to join other hon. Members of this House

in congratulating you on your election as the Speaker of the National Assembly. It was well deserved. Of course, I was amongst those who were whipped by our party to vote against you.

An hon. Member: On a point of order, Hon. Speaker.

Hon. Speaker: He is on a maiden speech!

The Member for Homa Bay Town (Hon. Kaluma): Hon. Speaker, the Deputy Speaker is not here, but my congratulations also go to her. I think hers was a historic win in round one. For a person of the female gender who had never sat on the Speaker's seat, she deserves my congratulations even though she is not here. To all the hon. Members, I say congratulations. I know how difficult it was for you to join me in this House; I know how difficult it has been with activists saying that you should be working for free. Several of you are still struggling to make it, and I hope you will join me in serving the nation in any event.

Hon. Speaker, let me thank the people of Homa Bay Town Constituency for giving me the privilege to stand in this House. Save for, possibly, the Presidential candidates, I am one Member of Parliament who was voted to this House by virtually members of all ethnic communities in this country. I thank the Somali Muslim population in Homa Bay, the Kikuyu and the Meru who made it possible for me to be in this House.

Back to this Motion and very briefly, this is a constitutional right. As a lawyer, you know when a law says that a person shall not be denied emergency treatment the meaning is that anybody who requires emergency treatment gets it as of right. There is a problem in the country. I beg to speak at this juncture because this Motion reminds me of what happened on 2nd March, 2013, when we were doing our last campaigns. One of the lorries we were using to travel around had an accident. Over 40 people had to be rushed to the only district hospitals serving, I think, over four constituencies, that is Homa Bay Town, Ndhiwa, Rangwe and Gwassi. I was told that the people who were injured could not be treated until I made it possible for them to have money for treatment. There is a rugged terrain. We have one highway stretching across the area. We have no roads or bridges around. You can imagine that for four-and-a-half hours I was struggling to reach the people who were to vote for me on 4th March, 2013 at the hospital to help them. When I raised the issue as to this law - as a lawyer I knew that it existed - the response that came was: "What happens if we do not give the treatment any way?" So, I join other Members of this House in urging the hon. Member who moved this important Motion to process a Bill, so that we can provide for consequences in the event of failure to comply with a clear constitutional provision like this one.

Hon. Speaker, it is unfortunate that we are debating a Motion such as this one in this age in this House. This is our fourth day debating the Presidential Address, and we are talking about free medical attention to our mothers at the point of delivery. My grandfather told me that any living thing that wishes to produce a new one must die. So, delivering a baby is death. There is no emergency that is greater than what faces a woman at the point of delivery. We took four days debating on whether really it should be free for them. We are here today debating an existing constitutional provision that we duly promulgated. (*Technical hitch*)--- In fact, you may take it for granted but our medical facilities across the nation today are death cells. You go in not being sure that you will leave the hospital in a good condition. I appreciate those members of the medical fraternity who work diligently and abide by the Hippocratic Oath. People take chances with their lives when they go for treatment in Kenya. India is currently getting a lot of money. I think they have even christened it "medical tourism". People are going there for very basic health needs that we can deal with, as a country.

There is a problem I can share with the House based on my experience as a lawyer. (*Technical hitch*) ---Medical practitioners should also ensure that they keep to the ethics of their profession. In fact any complaint taken there is a chance for them to cover up for the doctor or individual medical practitioner. This is unlike in the legal profession. People have talked about lawyers doing this and that. Do we know that about 25 to 30 members of the legal profession are either suspended or struck off the Roll of Advocates every year for small professional issues like failing to correspond to a client? In the medical profession, the Kenya Medical Practitioners and Dentists Board believe that it is their duty to protect the practitioners, even those whom we should be weeding out.

It becomes even more difficult for individual Kenyans who are intent on taking up cases of medical negligence in our courts. Let me surprise the House. No single medical practitioner in this country is willing - I do not know whether it is in their ethics - to give evidence before a court of law against another to confirm professional negligence. I think these are the issues that we should be dealing with. I add my voice to the contributions already made. Let us come up with a comprehensive Bill that can enforce what we want in the health sector.

I did not have a chance to speak on the Address by the President. This is an area he touched on. We need to have adequate medical facilities in the country. Those facilities need to have medicine and other requisite facilities. We need to have adequate and well motivated personnel. In Homa Bay District Hospital, we do not have an orthopedic--- (*Technical hitch*) --- currently, what people ordinarily call *boda boda*, that is the motor cycles. We have a special ward called Ward 1 for the people who crash on these motorbikes. We do not have a single orthopedic surgeon. People go there and rot over time. They then go traditional. I would tell the President – I am happy this is something we can talk about in a bipartisan way, or without thinking about coalitions or party affiliation – that healthcare is a basic need which is far from many of us. We need to work on health facilities. We need to motivate and facilitate our doctors.

May I join those who recommended that, indeed, there be other support services around the--- (*Technical hitch*).The issue of security--- (*Technical hitch*)

The Members on the other side will be contradicting each another but we will jointly play oversight role on the Government with you to ensure that the country has the best it can have.

Thank you, hon. Speaker. May God bless you.

The Member for Lamu West (Hon. Kariuki Ndegwa): Thank you, hon. Speaker. My name is hon. Julius Ndegwa Kariuki from Lamu West. First and foremost, I would like to congratulate you for being elected the Speaker of the 11th Parliament.

I would also like to congratulate our Deputy Speaker, Hon. (Dr.) Laboso. I want to thank my electorate who elected me to the 11th Parliament. I would like to let my fellow colleagues know that Lamu is Kenya. This is because they normally ask me how I was elected in Lamu West Constituency. Kenyans live in Lamu and everybody has a right to be elected in that constituency.

(*Applause*)

I would like to support the Motion by informing the House that life is a constitutional right in Kenya. It is good to make sure that each and every person accesses medical facilities and services irrespective of the size of his or her pocket or whatever is in his or her pocket.

Secondly, I would like the Government to know that we have a structure in Lamu which can accommodate a modern referral hospital but up to now, it is not in use. It is unfortunate to see taxpayers' money lying idle. This is the case and yet our people could have been referred to that facility because we have sub-district hospitals and other health centres. In fact, we face difficulties when there are referral cases because our roads are pathetic. I really sympathize with the patients who are referred to Malindi and Mombasa because they use very poor roads. I urge the Government to equip that facility which has all the structures required for a referral hospital. That structure has been in place for the last 20 years and it is still not in use.

I understand that our former Prime Minister and the former Minister for Medical Services, Prof. Anyang'-Nyong'o came to Lamu and directed that the hospital should start operating as a referral hospital. It will save our country a lot of revenue if it is opened in good time. We should not waste a lot of money and put human life to risk by transporting a sick person for over 300 kilometres whereas we have the facility within our constituency.

Hon. Speaker, I understand that we have orphans who have no parents to refer to. I request our honourable Government to think about orphans. It should make sure that orphans have the National Hospital Insurance Fund (NHIF) card so that their medical bills can be paid by that Fund. I understand that the Government is making every effort to make sure that we are healthy.

Our hon. President said that maternity services will be free within the next 100 days. It is good in order to make sure that the life we have today is protected and sustained. As we give birth to new babies, we should also make sure that the living--- (*Technical hitch*) ---to our ability. I believe that we have the ability to reduce mortality rate.

Hon. Speaker, I also urge the Government to make sure that we have adequate basic medical facilities. Nobody should wait until the following day before accessing a medical facility. If one feels unwell even if it is at midnight, he or she should access a medical facility within the shortest distance possible. We can start with a dispensary and a health centre so that we reduce our mortality rate. I believe we can reduce our mortality rate if we can have well equipped health facilities.

I would also like to say that it is good to have medical facilities in every learning institution, especially boarding secondary schools. This will ensure that our children access them with ease. Many deaths have occurred in our constituencies due to lack of help within reasonable time.

(Several hon. Members stood up in their places)

Hon. Speaker, I beg to support the Motion because it will improve the health of our people.

Thank you.

Hon. Speaker: Hon. Members, I think it is also not fair that when a Member has not completed his or her contribution, everybody is upstanding. It becomes very difficult.

Hon. Members: We want to catch the Speaker's eye!

Hon. Speaker: You cannot say that you just want to catch my eye.

The Member for Mbooni (Hon. Kisoi): Thank you, hon. Speaker. My names are hon. Michael Kisoi Muniyao, the Member of Parliament for Mbooni Constituency in Makeni County.

I want to thank the Chair for taking note of my presence. The rest is history. I have struggled to catch your eye.

May I take this golden opportunity to make my maiden address in this august House? First and foremost, I would like to start by congratulating you for being elected the Speaker of the 11th Parliament. I also congratulate the Deputy Speaker, hon. (Dr.) Laboso for being elected to that position.

I take this opportunity to thank the people of Mbooni Constituency for finding it appropriate to elect a youthful and energetic hon. Member of Parliament. I also take this opportunity to thank the people of Mbooni for breaking from the old order and giving me the honour to serve in this august House. I would like to support this Motion. I would like to say that, as the first Motion in this category in this House, we have no option other than to actualize what is in the spirit of the new Constitution. The right to life is quite fundamental and non-debatable. One of the most helpless things to watch is someone perish or die at the reception area of a health facility. The 11th Parliament has no choice but to actualize the Constitution that we promulgated and set precedent. This House should start debating other Motions and move forward. We are ready to implement the Constitution the way it is. There are no two ways about it. It is a constitutional right and, therefore, the right to access medical healthcare is not debatable. Therefore, I would like to call upon Members to support this Motion.

Secondly, this Motion is non-discriminatory. It gives an opportunity for all members of the community; either the rich or poor, to access medical healthcare at the time of need. It can happen to any one of us at any given time. Therefore, when you look at the poverty levels and especially the areas that have been quite marginalized in terms of healthcare for some time like Mbooni Constituency, this country will have given the citizens in those areas an opportunity to access healthcare at the hour of need without many problems.

When you look at the broad spectrum of this Motion, there are so many things that are attached to emergencies. There are issues to do with professionalism and the ability of our medical personnel – whom we hold in high regard – adhering to certain principles in their medical profession. This is one of the areas that we really need to look into. We should enforce professionalism in those areas. All personnel that deal with emergency care ought to be trained. They should be professionally and technically equipped so that they can attend to those emergency needs.

Hon. Speaker, we also note that development in this country has been skewed and favours certain areas. I did not get an opportunity to contribute to the President's Speech, but the Government which is headed by His Excellency President Uhuru Kenyatta, should look into the equitable distribution of resources to all the counties. Every county should have an emergency referral centre. Those facilities should be properly and well equipped. That is because as much as we talk about emergency cases and how we are going to handle them, we must also look at the issue of equipment and facilities. Do we have enough facilities to cater for that? There is need to look at this Motion in a broad spectrum. I wish to thank hon. Koinange. This Motion should have come yesterday because many citizens in this country cannot afford healthcare.

When you look into the issue of medical care, you should not forget drugs, professional fees, first-aid and many other things. Therefore, I would like to echo the sentiments of one hon. Member who said that we also need to look into the issue of transport. Those are some of the nitty-gritties that come with emergencies. On that note, I wish this House could consider looking into the issue of healthcare more practically, so that we can be able to address some of the issues,

other than looking at the medical part. We are not looking at the point where the emergencies occur, how they are handled and treated until the time of discharge. When you attend to a person who is in an emergency situation and he or she dies, what provisions should we have in the Bill so that mortuary bills, funeral expenses and other things can be catered for?

So, hon. Speaker, I rise to support this Motion and give our thoughts to this honourable House. It should come up with a comprehensive healthcare scheme that will address most of the needs of the people of this country who, most of them live below poverty line.

I support the Motion.

The Member for Bura Constituency (Hon. Wario): Mhe. Spika, nachukua fursa hii kumshukuru Mwenyezi Mungu. Nakushukuru wewe pia. Natoa kongole kwako na kwa naibu wako. Lakini kwa vile uko hapo leo, wacha niseme kongole kwako kwanza.

Mhe. Spika, nachukua fursa hii kumpongeza Mhe. Koinange kwa kufikiria na kulete Hoja kama hii. Lakini mimi nina tatizo na Hoja hii vile ilivyoandikwa. Ni muhimu kuanzisha matibabu ya dharura kwa Wakenya, hasa wale wanaotoka katika sehemu kame katika nchi hii. Lakini matibabu ya dharura yanaambatana na vitu viwili. Moja ni uchukuzi. Kuna uchukuzi wa ubinafsi na uchukuzi wa umma. Uchukuzi wa umma unaopatikana katika matibabu ya dharura ni ambulensi zinazotolewa national archives Serikali. Hizo ambulensi hupati bure. Mpaka uzilipie. Utaangalia uchukuzi wa umma na uchukue teksu. Kwa sababu ni haki ya kikatiba, tutasema “Beba mgonjwa hapa, upeleke hospitali bure kwa sababu ni haki ya kikatiba?” Hayo yanawezekana? Hayawezekani. Haki ya kikatiba siyo tukio la siku moja. Haki ya Katiba ni mchakato. Ni lazima tupige hatua manake kuna haki nyingi katika Katiba yetu. Hatuwezi kuamka kesho asuhahi na sote tupige laini tuseme: “Twataka haki zetu!” Haiwezekani. Sisi kama viongozi ni lazima tuwaeleze Wakenya ukweli. Yale yanayowezekana yatekelezwe kwa mipangilio. Hoja hii inakosa nini, Mhe. Spika?

Miaka 50 ya Uhuru, nikizungumzia sehemu ninayowakilisha Bungeni ya Bura, ambayo ina eneo la kilomita 16000 mraba, kuna hospitali moja tu. Ukienda kwa hiyo hospitali, utapata dawa aina tatu kila siku, nazo ni Panadol, Aspirin na ORS. Hauwezi ukayapata madawa mengine.

Tuliunda CDF na tukajenga zaidi ya hospitali 10. Wacha hata dawa, kupata daktari hata leo ni ndoto. Zimebaki tupu na zinaishi popo. Sasa tutakapokuja na fikra zakusema tutoe huduma za dharura bure, ikiwa tumeshindwa kwanza na zile hospitali ziko, je, tunazungumza ukweli? Utekelezaji wake uko? Ningemuomba aliyeleta Hoja hii--- (*Technical hitch*) Mhe. Spika, hiki kidude ni kama kimeletwa kutoka Korea. Mtu mrefu kama mimi ni lazima ainame sana. Sijui warefu kama mimi tutapata fursa vipi tupate vyombo ambavyo vitatoa sauti yetu bila kuinama.

Nikirudi kwa Hoja, kinachokosekana ni bima ya kitaifa. Bima ambayo kila Mkenya, popote alipo, akiwa mashambani au mji mkuu ataipata. Serikali itakapotoa bima hiyo, itatoa kwa uchukuzi na matibabu. Lakini hivi ilivyo, Hoja hii haiwezi ikatekelezwa. Ndiyo ni ya kimsingi na ni ya haki ya kikatiba, lakini haki hiyo haina mbinu ya vile tutaitekeleza.

Kwa hayo machache, nasikitika kuipinga. Ahsante.

Hon. Speaker: Hon. Members, let us be magnanimous to those who have not had occasion to say something on the Floor.

The Member for Butula (Hon. Onyura): Hon. Speaker, I have not.

Hon. Speaker: Yes, I have noticed. Please, proceed.

The Member for Butula (Hon. Onyura): Hon. Speaker, my names are Michael Aringo Onyura. I am the Member of Parliament for Butula Constituency, Busia County. I take this opportunity to congratulate you and the entire leadership of this House for their election. I also

take the opportunity to thank my people of Butula Constituency for giving me the opportunity to serve them in this House. I promise to serve them faithfully and diligently.

Hon. Speaker, I will be coming to the Motion shortly. Since I did not have a chance to say something about the Presidential Address, I would just like to say a word or two. I would like to thank His Excellency the President very much for his Address. In my view, he captured the challenges that face this country very well. I personally saw it as his performance contract drafted by himself and delivered to us in this House by himself. We, as citizens of this country and Members of Parliament, shall hold him to his word. In my view, he captured the challenges very well. The bigger challenge is going to be the performance.

What I can say is that if he delivers in excess of 80 per cent of his promises, obviously, all of us will rate him an “A” performer and I am sure that many of us who may not have voted for him in the last elections will find it easier to vote for him next time. The level of unemployment in this country, particularly amongst the youth, is well over 70 per cent. In fact, saying that it is over 70 per cent is an understatement. At least where I come from, that is the impression I get. It must be getting closer to 100 per cent. As it has been said here, that is a major time bomb which we must deal with very seriously and very urgently.

Hon. Speaker, coming to the Motion before the House, I support it fully. However, the issue of emergency is important. I support it but to me, it is a small aspect of the overall medical policy or medical provisions that should have been made. This is because I believe that no sick Kenyan at this time and age – 50 years after Independence – should go to a medical facility and leave without receiving treatment. It does not matter what the patient may be complaining about. It is immoral to let him leave the facility unattended. In fact, we should make it illegal for such a thing to happen. I also believe that it is the delay in dealing with the ailment of, say, headache or some ailment that may not appear to be very serious that eventually turns into an emergency. Therefore, if we can attend to every medical need, we shall prevent some of the cases that end up being emergency cases. This kind of emergency is different from, say, the kind of emergency that arises from accidents and so on.

Therefore, I really want to urge the Government to look into the issue of medical services very urgently. Hon. Members will recall that even when our founding fathers were looking at the major threats to our nation, healthcare was among the three main issues they set out to address. That is why I said that in this time and age, matters of healthcare should have been behind us. So, we expect comprehensive healthcare provision. A comprehensive healthcare legislation should come to this House, so that we can deal with this matter in the way Kenyans expect us to deal with it.

Hon. Speaker, finally, we should look at the various dispensaries that have been constructed in many places in the countryside, which are very much underutilized. Some of them, in fact, are not even furnished. They are not being used. They have become white elephant projects. We need to address this matter and come up with policies and proper programmes to ensure that we do not have dispensaries that have been built but which are not in use. In fact, the closer dispensaries are to the people, the better particularly for addressing the emergency cases that we are talking about.

With those remarks, I beg to support.

Hon. Speaker: I will have the lady over there.

Bomet County Women Representative (Hon. (Ms). Ngetich): Thank you, hon. Speaker. I am hon. Cecilia Ngetich, Member of Parliament for Bomet County. Allow me to join my

colleagues in congratulating you and the Deputy Speaker for having been elected to office, and also congratulate all the hon. Members for making it to the 11th Parliament. I also wish to take this opportunity to thank the people of Bomet County for overwhelmingly voting for me. This morning, I heard an hon. Member say that he had the highest number of votes in his constituency, with 25,000 votes. I do not know what to say when I had 202,120 votes. So, thank you very much, my people of Bomet!

Hon. Speaker, I support the Motion. However, I have numerous questions that I beg to ask for clarification. I am a teacher and I am very critical on words. First, I want these words clarified. It says one should not be denied treatment when he is on “critical emergency condition”. I would have wished to hear from the doctors which category of ailments fall under this “critical emergency condition.”

Two, the Motion mentions that a person should not be denied admission on grounds that he is not able to pay deposit. On the surface, the patient should be treated without deposit when he or she is under critical emergency condition.

So, while the Motion talks about emergency treatment, Members at some point digressed and are talking about the entire health services that are provided in hospitals. We need to look at this and the Mover could reframe the Motion because it is talking about being given emergency treatment without paying the deposit that is required. If we are realistic and honest to one another and also looking at the practical situation, our hospitals, dispensaries and health centres are ill equipped. They are not adequate and do not have medical personnel. So, when we are asking for the entire medical services to be provided, this borders on something that may not be achieved. At one point, I thought the Mover would be saying that he is recommending that every Kenyan should have a medical cover, either in the form of National Hospital Insurance Fund (NHIF) or otherwise. This is happening elsewhere. In the United States of America, you must have a medical cover, either provided partly by the Government or subsidized, so that when you visit a hospital, you get the health services which will be partly covered by the insurance. This does not mean that the Government can pay for all the medical services that we shall require.

This morning, one Member told me that the promised free maternal healthcare might cost the Government Kshs200 billion per year. We are now extending to other services. Is this attainable? You should not take me wrongly. I am not against free emergency medical services, but I wish to recommend that the Bill that had been proposed to make everyone have a health insurance that will cover outpatient and inpatient medical services be revived. It will be asking for too much to ask the Government to pay for everything in our medical care. I support the provision of critical emergency treatment without the deposit, but not necessarily providing the entire healthcare. I propose that this Motion be redrafted to read that Kenyans should have medical insurance cover for outpatient and inpatient services.

The Member for Mathira (Hon. Peter Weru Kinyua): Hon. Speaker, I take this opportunity to thank you for noticing me. My name is hon. Peter Weru Kinyua. I represent Mathira Constituency in this House. This being my maiden speech, I would like to take this opportunity to congratulate you and Dr. Laboso for being elected the Speaker and the Deputy Speaker.

I also want to take this opportunity to thank the people of Mathira who defied all odds and voted for me. I will ably represent them in this august House. I did not get an opportunity to comment on the Presidential Speech and so, I may mix the two as I support this Motion. When we look at the medical industry and all the stakeholders, it would be prudent if we had a

comprehensive medical policy which this House can look at and make sure that we incorporate all the players. We have seen medical insurance providers going down with people's money. We have gone to hospitals and we are denied services simply because certain hospitals do not accept insurance covers from certain providers. With all this, it will be prudent to look at this comprehensively, so that all the players are brought on board. Their input should be considered and brought into one framework to support the entire provision of medical services.

We have talked of a digital Government. Indeed, we have even gone forward and elected digital leaders including myself. I find it a bit disturbing that most of our medical providers do not have any basic information about Kenyan citizens. For effective discharge of any emergency medical services, it would be prudent to have an online central data base that is accessible to the medical providers, so that when a person is taken to a hospital, he is identified by his or her name and the identity card number. The data should include the name, the blood group and other conditions and allergies that one might have, otherwise, the medical providers would not be able to provide proper medical care to patients in critical condition.

We also need to look at the causes of these emergencies. You will realise and appreciate that over 90 per cent of emergencies are road-accident related. It is disturbing to know that we let the people who cause the road accidents go free and we crucify the doctors for not providing emergency service.

The example I want to cite is the road from Sagana to Marwa. This road is a death trap. It has been under construction for the last 10 years. This is unacceptable. As we engage in talk about having value for money for Kenyans; and this was entrenched in the Presidential Address, I think, value for money is not just attained by the end result, rather it is through the process of delivering whatever was envisaged when a project commenced. This particular project is a simple stretch of road to be done as per specifications provided by the engineers. Any prudent project management does not only look at the procurement process, but also the cost at which the project has to be done. It also looks at the time frame within which that project has to be delivered and the quality of what has to be done.

Hon. Speaker, even if we have court cases or any deterrent case that would make the project not to be completed, we have seen our courts act within 14 days and deliver remarkable decisions that have enabled this country move forward. I do not see why we should have a road that would kill our people because it is not marked or it is not done to any specifications. We do not imagine that a Government can be helpless in terms of enforcing the requirement by our contractors. In the reverse, we would expect that the Government would be in a position to enforce what is needed from our contractors. We do not expect to see punishment in form of reward for more jobs to the same contractors.

Hon. Speaker, we have talked about maternity health and the way we expect it to be free in the next 100 days. (*Technical hitch*) In my constituency, we have Karatina District Hospital. Here you will not get patients in the hospital because roads are in a bad state. They are full of pot holes. I am not sure what would happen to expectant mothers as they are delivered to hospital. We are looking at a situation whereby we can partner with learning institutions which have enormous resources. For example, we have Karatina University which is not very far from the Karatina District Hospital. Such partnership could lead to us having a medical school which would help in research and build capacity in terms of what can be provided by the hospital.

We need to appreciate what emergencies are. We need also to have basic understanding of--- (*Technical hitch*) --- The line between life and death is so thin and can be broken by something---

Hon. Speaker: Hon. Mwaura!

Hon. Mwaura: Thank you, hon. Speaker.

An hon. Member: On a point of order, hon. Speaker. Hon. Mwaura has spoken before in this House.

Hon. Mwaura: Hon. Speaker, that was my maiden speech. I would want to contribute on this Motion.

There are two systems of healthcare in Kenya. One is for the poor and the other one is for the rich. It is unfortunate that the poor pay more than the rich people simply because the middle class of this country have medical insurance. This country has undergone a lot of debate on this issue since NARC came into power in 2002. (*Technical hitch*)--- The private sector to ensure that a comprehensive national health service is not implemented.

Hon. Speaker, if you look at developed countries they are able to have higher productivity because of cushioning their citizens from simple ailments. It appears that there is a misconception that emergency treatment is expensive. There could be some life threatening conditions that could be treated using simple medical interventions.

It is also true that some people, especially those with disabilities may require constant medical attention. Most times they languish at home for fear of not being admitted into health facilities. I urge this House, over and above this Motion, that refusal of admittance of anybody who requires emergency treatment be termed as negligence on the side of the medical practitioner and therefore, punishable by law.

One of the most critical elements of health is infrastructure. If you look at the President's Speech, there was indication that this country is only able to construct 50,000 house in a year and yet we require 250,000 houses. One of the most critical elements of housing that has been omitted is the feeder roads from their houses to these other social amenities. It will be important to consider that as these houses are built, the small feeder roads are provided for because they are critical for accessing other services.

Hon. Speaker, I beg to support the Motion.

Hon. Speaker: The Member for Gatanga.

The Member for Gatanga (Hon. H.K. Njuguna): Thank you, hon. Speaker, for noticing me. I have been here all time. I will, however, be brief. I am the Member for Gatanga and I must thank the people of Gatanga for voting me in against all the odds. There was the TNA wave and also the *tunaweza make* wave, but I still managed with NARC although in Jubilee Coalition. I thank them most sincerely.

At Independence, we had noted that the three challenges of our society were disease, ignorance and shelter. However, today we are still discussing diseases. I am a medical practitioner and I would like to share with you some of the experiences that I went through. Indeed, I won the elections because I was in some of those camps. Sometimes the attendance is overwhelming. You have, say, 5,000 patients. This is an indication that the health facilities are lacking in terms of doctor/patient ratio, facilities and drugs. Why would you have such a high attendance in medical camps? At times, patients would be brought on wheelbarrows because of jiggers. There were also so many children being brought to the camp. This is an indication that poverty is a major contributor to these ailments.

My contribution in support of this is to define what “emergency” is. Every medical case is an emergency in its own right because it could be pneumonia, but if not treated at the right time, it could be fatal. It could be meningitis and so if not diagnosed early enough, it would lead to death. So, there is need to define what “emergency” is. Every Kenyan has a right to access healthcare as enshrined in the Constitution. The reality on the ground, however, is that not every Kenyan has access to medicine.

I am of the view that we need to come up with a universal healthcare where we bring all the stakeholders together. This is workable. If you talk of laptops for every child going to Standard One, even a universal healthcare is doable. I noted that in the President’s Address, he talked of prudent management of our public resources. It is anybody’s knowledge that we lose billions of Kenya shillings every year due to corruption.

ADJOURNMENT

Hon. Speaker: Hon. Njuguna, you have a balance of five minutes. Hon. Members, it is now time to interrupt the business of the House. This House, therefore, stands adjourned until tomorrow, Thursday 25th April 2013 at 2.30 p.m.

The House rose at 6.30 p.m.