

# PARLIAMENT OF KENYA

## THE SENATE

## THE HANSARD

Wednesday 8<sup>th</sup> May, 2024

### Afternoon Sitting

*The House met at the Senate Chamber,  
Parliament Buildings, at 2.30 p.m.*

*[The Speaker (Hon. Kingi) in the Chair]*

### PRAYER

DETERMINATION OF QUORUM  
AT COMMENCEMENT OF SITTING

**The Speaker** (Hon. Kingi): Clerk, do we have quorum?

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

Serjeant-at-Arms, kindly ring the Quorum Bell for 10 minutes.

*(The Quorum Bell was rung)*

Order, hon. Senators. Kindly take your seats. I am informed that we do have quorum now. We shall proceed with the afternoon business. Clerk, kindly proceed to call the first Order.

### MESSAGES FROM THE NATIONAL ASSEMBLY

DECISION OF THE NATIONAL ASSEMBLY ON SENATE  
AMENDMENTS TO THE WATER (AMENDMENT) BILL  
(NATIONAL ASSEMBLY BILLS NO.33 OF 2023)

**The Speaker** (Hon. Kingi): Hon. Senators, I wish to report to the Senate that I have pursuant to Standing Order No.46(3), received the following Message from the

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Speaker of the National Assembly regarding the decision of the National Assembly on the Senate amendments to the Water (Amendment) Bill (National Assembly Bills No. 33 of 2023).

The Message, dated Friday, 3<sup>rd</sup> May, 2024, was received on Tuesday, 7<sup>th</sup> May, 2024, in the office of the Clerk of the Senate.

Pursuant to the Standing Order Standing Order No.46(4), I now report the Message-

PURSUANT to the provisions of Standing Order No.41(1) and No.148(b) of the National Assembly Standing Orders, I hereby convey the following Message from the National Assembly -

WHEREAS, on Wednesday, 23<sup>rd</sup> August, 2023, the National Assembly passed the Water (Amendment) Bill (National Assembly Bills No. 33 of 2023) with amendments, and thereafter referred the Bill to the Senate for consideration in accordance with Article 110(4) of the Constitution.

AND WHEREAS, on Thursday, 7<sup>th</sup> March, 2024, the Senate considered and passed the said Bill with further amendments and referred it back to the National Assembly for concurrence.

FURTHER WHEREAS, on Tuesday, 30<sup>th</sup> April, 2024, the National Assembly considered and rejected the Senate amendments to the Bill, thereby committing it to a mediation Committee in accordance with the provisions of Article 112(2)(b) of the Constitution.

NOW THEREFORE, in accordance with the provisions of Article 112 of the Constitution and Standing Orders No.41(1) and No.148(b) of the National Assembly Standing Orders, I hereby convey the said decision of the National Assembly to the Senate and seek the appointment of seven Senators to a Mediation Committee to consider the Bill in accordance with Article 113 of the Constitution.”

Hon. Senators, consequent to the said decision, the Speaker of the National Assembly appointed the following Members of the National Assembly to the Mediation Committee to consider the Bill in accordance with Article 113 of the Constitution-

1. Hon. David Kangogo Bowen, MP
2. Hon. Maisori Kitayama, MP
3. Hon. Stanley Muthama, MP
4. Hon. Dorothy Ikiara, MP
5. Hon. Paul Nzengu, MP
6. Hon. Hussein Weytan Mohamed, MP
7. Hon. Gertrude Mbeyu, MP

Hon. Senators, pursuant to the provisions of Standing Order No.166(2) of the Senate, and in consultation with the Majority and Minority Leaders, I will, at an appropriate time, appoint Senators to the Mediation Committee.

I thank you.

PASSAGE OF THE COUNTY LICENSING  
(UNIFORM PROCEDURES) BILL  
(SENATE BILLS NO.9 OF 2022)

**The Speaker** (Hon. Kingi): Hon. Senators, I wish to report that, pursuant to Standing Order No.46(3) and (4), I received the following Message from the Speaker of the National Assembly regarding the passage, by the National Assembly, of the County Licensing (Uniform Procedures) Bill (Senate Bills No. 9 of 2022).

The Message, dated Friday 3<sup>rd</sup> May, 2024, was received on Tuesday, 7<sup>th</sup> May, 2024 in the office of the Clerk of the Senate. Pursuant to the said Standing Order, I now report the Message-

PURSUANT to the provisions of Standing Orders No.41(1) and No.142 of the National Assembly Standing Orders, I hereby convey the following Message from the National Assembly -

WHEREAS, the County Licensing (Uniform Procedures) Bill (Senate Bill No.9 of 2022) was passed by the Senate on Wednesday, 21<sup>st</sup> February, 2024 with amendments and referred to the National Assembly for consideration.

AND WHEREAS, the National Assembly, considered and passed the said Bill on Thursday, 2<sup>nd</sup> May, 2024, with further amendments as contained in the Schedule of Amendments attached herewith.

NOW THEREFORE, in accordance with the provisions of Article 110 of the Constitution and Standing Orders Nos.41(1) and 144 of the National Assembly Standing Orders, I hereby convey the said decision of the National Assembly to the Senate.

Hon. Senators, Article 112(1)(b) of the Constitution provides that if one House passes an ordinary Bill concerning counties and the second House passes the Bill in an amended form, it shall be referred back to the originating House for reconsideration.

In this regard, I direct the Standing Committee on Trade, Industrialization and Tourism to deliberate on the National Assembly amendments and report to the Senate. Further, pursuant to Standing Order No.165(1) of the Senate Standing Orders, I direct that the National Assembly amendments to the County Licensing (Uniform Procedures) Bill (Senate Bill No. 9 of 2022) be circulated to all Senators.

At an appointed time, the Senate Business Committee (SBC) will schedule the consideration of the amendments in a Committee of the Whole.

The House is accordingly guided. I thank you.

PASSAGE OF THE INDEPENDENT ELECTORAL AND  
BOUNDARIES COMMISSION (AMENDMENT) BILL  
(NATIONAL ASSEMBLY BILLS NO.10 OF 2024)

**The Speaker** (Hon. Kingi): Hon. Senators, I also wish to report to the Senate that, pursuant to Standing Order No.46 (3) and (4), I received the following Message from the Speaker of the National Assembly regarding the Passage of the Independent

Electoral and Boundaries Commission (Amendment) Bill (National Assembly Bills No. 10 of 2024).

The Message, dated Friday, 3<sup>rd</sup> May, 2024, was received on Tuesday, 7<sup>th</sup> May, 2024, in the office of the Clerk of the Senate. Pursuant to the said Standing Order, I now report the Message-

PURSUANT to the provisions of Standing Order No.41(1) and No.142 of the National Assembly Standing Orders, I hereby convey the following Message from the National Assembly-

WHEREAS the Independent Electoral and Boundaries Commission (Amendment) Bill (National Assembly Bill No.10 of 2024) was published vide Kenya Gazette Supplement No. 46 of 4<sup>th</sup> March, 2024 as a Bill seeking to amend the Independent Electoral and Boundaries Commission Act, No. 9 of 2011 to clean up the Act by deleting obsolete provisions and make consequential amendments to give effect to some of the recommendations and views of the public as submitted to the National Dialogue Committee (NADCO) on the issues of electoral justice and related matters, and for connected purposes.

AND WHEREAS, on 2<sup>nd</sup> May 2024, the National Assembly considered the said Bill and passed it with amendments and in the form attached hereto.

NOW THEREFORE, in accordance with the provisions of Article 110(4) of the Constitution and Standing Orders No.41(1) and 142 of the National Assembly Standing Orders, I hereby refer the Bill to the Senate for consideration.

Hon. Senators, pursuant to Standing Order No.163, which requires that a Bill which originates in the National Assembly be proceeded with by the Senate in the same manner as a Bill introduced in the Senate by way of First Reading in accordance with Standing Order No. 144. I direct that the Independent Electoral and Boundaries Commission (Amendment) Bill (National Assembly Bills No. 10 of 2024) be listed in the Order Paper for tomorrow Wednesday 8<sup>th</sup> May, 2024 for First Reading.

I thank you.

Next order.

### PAPERS LAID

**The Speaker** (Hon. Kingi): The Chairperson, Standing Committee on Land, Environment and Natural Resources.

Where is Sen. Methu or any Member of that Committee?

#### REPORT ON THE NATIONAL RATING BILL (NATIONAL ASSEMBLY BILLS NO. 55 OF 2022)

**Sen. Seki:** Mr. Speaker, Sir, I beg to lay the following papers on the Table of the Senate today, 8<sup>th</sup> May, 2024 -

Report of the Standing Committee on Land, Environment and Natural Resources on its consideration of the National Rating Bill (National Assembly Bills No. 55 of 2022)

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I beg to lay.

*(Sen. Seki laid the document on the Table)*

**The Speaker** (Hon. Kingi): The Chairperson of the Standing Committee on Health.

REPORT ON THE MATERNAL, NEW BORN AND  
CHILD HEALTH BILL (SENATE BILLS NO.17 OF 2023)

**Sen. Mandago:** Mr. Speaker, Sir, I beg to lay the following paper on the Table of the Senate today, 8<sup>th</sup> May, 2024-

Report of the Standing Committee on Health on its consideration of the Maternal, New Born and Child Health Bill (Senate Bills No. 17 of 2023)

*(Sen. Mandago laid the document on the Table)*

**The Speaker** (Hon. Kingi): Clerk, next order.

## QUESTIONS AND STATEMENTS

### STATEMENTS

**The Speaker** (Hon. Kingi): Statements pursuant to Standing Order No. 52.  
Sen. (Prof) Kamar, you may have the Floor.

ECOSOCC-PAP WORKING SESSION ON ADVANCING  
FREE MOVEMENT OF PERSONS IN AFRICA

**Sen. (Prof) Kamar:** Thank you, Mr. Speaker, Sir.

I rise, pursuant to Standing Order No. 52(1), to make a Statement on a matter of general topical concern, namely; the Working Session on Advancing Free Movement of persons in Africa organized by the Economic, Social and Cultural Council (ECOSOCC) in collaboration with the Pan-African Parliament (PAP).

Mr. Speaker, Sir, I am honoured to be a Member of the Trade Committee courtesy of this House sending me to the Pan-African Parliament (PAP).

ECOSOCC-PAP Working Session was held in Victoria, Seychelles and it brought together Members of the PAP Permanent Committee on Trade, Customs and Immigration Matters, of which I am a Member, and ECOSOCC representatives, regional integration and migration experts as well as representatives from civil societies.

The session focused on enhancing understanding and support for the ratification of the Free Movement of Persons (FMP) Protocol through Parliamentary engagement. It

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aimed to build knowledge, assess key issues and formulate actionable strategies for mobilising support for the FMP Protocol.

Mr. Speaker, Sir, the objectives and expected outcomes of the Working Session included-

(1) To educate African Parliamentarians about the FMP Protocol, focusing on its benefits and opportunities;

(2) To engage Member States in assessing key issues affecting the ratification of the FMP Protocol;

(3) To identify and address Parliamentarians' concerns and misconceptions;

(4) To equip Parliamentarians with effective lobbying strategies for ratification;

(5) Improved understanding and support for the FMP among Parliamentarians;

(6) Increased participation of Parliamentarians in FMP-related discussions; and,

(7) Development of an action plan for mobilizing support for the FMP Protocol.

The Working Session followed a comprehensive work programme after the opening remarks that were made by several luminaries, including, Mr. Alvin Lawrence, representing ECOSOCC General Assembly and National Chapter; Mr. William Carew, Head of ECOSOCC Secretariat; Mr. Harou Massa Gali, the Deputy Clerk in charge of Legislative Business and Conferences at the PAP; and myself, representing the Chairperson of the PAP Permanent Committee on Trade, Customs and Immigration Matters, which I opened officially.

Mr. Speaker, Sir, Kenya is an active player in Africa economic integration initiatives. Kenya, alongside Ghana, was the first to ratify and deposit instruments of ratification of the African Continental Free Trade Area (AfCFTA). On 7<sup>th</sup> October, 2022, the AfCFTA Secretariat launched the AfCFTA Guided Trade Initiative in Accra, Ghana, to allow for commercially meaningful trade under the agreement to commence for eight participating countries because the protocol requires that any aid will commence.

The following countries had qualified at that time. They included Egypt, Ghana, Kenya, Mauritius, Rwanda, Tanzania and Tunisia, representing the five regions of Africa. As at August, 2023, 47 of the 54 signatories which is 87 per cent of all the countries in Africa had deposited their instruments of AfCFTA ratification, Kenya included.

While the AfCFTA recognises that free movement of persons is essential for achieving its broader goals of economic integration, prosperity and poverty reduction in Africa, the African Union Commission (AUC) saw the need to develop a protocol on the free movement of persons. This is because you cannot have a free trade area without ensuring that there is free movement of persons.

This, therefore, gave rise to the protocol to the treaty establishing the African Economic Community relating to free movement of persons, right of residence and right to establishment as a key instrument within the AfCFTA framework.

Mr. Speaker, Sir, this protocol provides guidelines for facilitating the movement of people across African countries. It covers aspects such as visa policies, residence rights and establishment rights. It is good to note that Kenya is one of the countries that are way ahead since the declaration by our President that there are no visa requirements

for Africans wishing to enter Kenya. Therefore, as far as that one is concerned, we are way ahead.

Article 29 of the Free Movement of Persons (FMP) Protocol defines the AUC's role in evaluating the implementation of the Protocol through collaboration with Regional Economic Communities (RECs), which include the East African Community (EAC), in order to harmonize free movement policies, migration and border management procedures. The goal is to ensure that member states adopt and implement necessary legislative procedures related to free movement.

The FMP Protocol is expected to have a positive impact on economic empowerment and job creation across the continent. By allowing skilled labour and professionals to move freely, the AfCFTA can enhance trade and investment opportunities across the continent and remove barriers that would create a more interconnected and dynamic continent.

Mr. Speaker, Sir, this to Kenya is a big positive because we have our people already having moved even before these ratifications are done. We have Kenyans in almost every country in the continent. The recommendations that were arrived at during the ECOSOCC-PAP Workshop were-

1. There is need for intensive sensitization campaigns to raise awareness among policy makers, parliamentarians, civil society organizations and the general public about the FMP Protocol focusing on its objectives, principles, benefits and addressing concerns;
2. Capacity building by implementing initiatives to enhance understanding and implementation through training programmes for stakeholders at national and regional levels;
3. Prioritization of parliamentary engagement by involving goodwill ambassadors, influencers and special envoys and to establish a parliamentary network for advocacy to advance this cause. I hope that we will be able to come up with our own parliamentary advocacy for the same.

*(Sen. Cherarkey consulted with the Senate Majority Leader)*

Mr. Speaker, Sir, save me from Sen. Cherarkey who is distracting the Leader of Majority.

The person to spearhead the formation of a Parliamentary network to spearhead the free movement of persons in this continent.

I would like to take this opportunity to entreat my fellow Senators to take up the various roles suggested here in order to make sure that Kenya becomes among the first countries to embrace the Protocol, knowing that Kenya has more than six countries on the borderlines and we need to move freely across borders.

4. There is also need for harmonization of laws through efforts to ensure consistency and smooth implementation in national laws and regulations with provisions of the FMP Protocol, possibly via legislative reforms and collaboration among Member States and RECs. This is a recommendation that has direct bearing on our work and mandate as legislators and it is imperative that we come up with robust laws and

amendment to laws that will enable our people reap maximum benefits from the Protocol that opens our borders in the continent.

Mr. Speaker, Sir, in conclusion, the ECOSOCC-PAP Working Session was pivotal in advancing the discourse on free movement in Africa and the session achieved its objective of enhancing understanding and support for the FMP Protocol; and identifying barriers to ratification and implementation of the Protocol. The session also formulated a comprehensive action plan that recognized the collaborative efforts of parliamentarians, ECOSOCC and other stakeholders in setting a strong foundation for future endeavours in achieving the goal of free movement across Africa.

I thank you for the opportunity to make this Statement.

**The Speaker** (Hon. Kingi): Statements pursuant to Standing Order No. 53(1), the hon. Sen. Alexander Mundigi.

That statement is dropped.

CONVERSION OF SEVEN-FORKS DAMS FROM  
SINGLE-USE TO MULTI-PURPOSE DAMS

The Statement is dropped.

*(Statement dropped)*

The hon. Miraj Abdullahi?

MANAGEMENT OF SHIMO LA TEWA HIGH  
SCHOOL IN MOMBASA COUNTY

The Statement is dropped.

*(Statement dropped)*

The hon. Sen. Mohamed Chute?

The Statement is dropped.

LOSS OF FREE-TO-AIR SIGNAL FOR LICENSED  
BROADCAST SIGNAL DISTRIBUTORS

*(Statement dropped)*

Statements pursuant to Standing Order No.56(1)(a), the Chairperson, Standing Committee on Health.



## THE NATIONWIDE HEALTH WORKERS' STRIKE

**Sen. Mandago:** Thank you, Mr. Speaker, Sir. This is a Statement on the nationwide health workers' strike.

Pursuant to Standing Order No. 56(1)(a), I beg to make a statement on an issue of general topical concern; namely, the nationwide health workers' strike.

Mr. Speaker, Sir, according to the Council of Governors (CoG), there are approximately 4,398 doctors and 31,923 nurses serving in 16,655 county health facilities countrywide. This is up from 874 doctors and 6,620 nurses in 2013. On 13<sup>th</sup> March, 2024, the Kenya Medical Practitioners and Dentists Union (KMPDU) initiated a strike following a notice given on 6<sup>th</sup> March, 2024. Grievances raised include-

1. Posting and Remuneration of medical interns;
2. Provision of comprehensive medical cover for doctors;
3. Involvement of doctors in the Universal Health Coverage (UHC) Initiative;
4. Delayed promotions;
5. Salary arrears arising from the non-implementation of the 2017 Collective Bargaining Agreement (CBA); and,
6. Support for career development by facilitating post-graduate education through fee payments.

On 25<sup>th</sup> March, 2024, the Kenya Union of Clinical Officers (KUCO) issued a strike notice, followed by the commencement of a strike on 1<sup>st</sup> April 2024. Grievances included-

1. Implementation of Kshs15,000 enhanced risk allowance;
2. Finalization of the Collective Bargaining Agreement (CBA) registration following a court order;
3. Issuance of promotion and re-designation letters;
4. Prompt and fair compensation for clinical officer interns;
5. Approval of career progression guidelines by Public Service Commission (PSC), specific to clinical officers;
6. Issuance of permanent and pensionable letters to various categories of clinical officers;
7. Provision of a comprehensive medical cover;
8. Re-instatement of dismissed clinical officers in Kirinyaga County;
9. Employment of 20,000 additional Clinical Officers to address shortages;
10. Immediate payment of withheld salaries by counties; and,
11. Renewal of contracts and employment of health workers contracted under the UHC programme.

Mr. Speaker, Sir, on 26<sup>th</sup> March, 2024, the Kenya National Union of Medical Laboratory Officers (KNUMLO) likewise issued a strike notice and cited several critical grievances that have impacted their profession and working conditions, including-

1. Failure by the Government to establish a recognition agreement with the Union as required by law, despite multiple attempts to resolve this matter;

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2. Confirmation of UHC workers, UHC interns, Covid Health Emergency Response Programme (CHERP) staff and the National TB and Lung Diseases Programme (NTLD-P) employees into permanent and pensionable positions, ensuring job security and benefits.

3. Employment on exploitative terms, particularly by hospital boards;

4. Lack of promotions and re-designations;

5. Exclusion of medical laboratory officers from key decision-making processes;

6. Provision of a comprehensive medical insurance cover; and,

7. Employment of sufficient medical laboratory officers.

Mr. Speaker, Sir, the Government's position on the matter is that -

The National Treasury has released up to Kshs2.5 billion for the placement of interns, however, on different terms of engagement from the 2017 CBA agreement. The implication of this is that newly placed medical officer interns will only receive what the Government refers to as a stipend of Kshs70,000 per month, and not Kshs206,000 as has been the case with the other already placed interns. The Government has argued that the current terms are discriminatory as similar interns across public and private sectors receive amounts lower than Kshs70,000.

(b) Medical doctor interns are not doctors and hence cannot be paid a salary, but they are entitled to a stipend.

(c) The 2017 Collective Bargaining Agreement (CBA) was not adequately negotiated and did not involve the input of the National Treasury for purposes of sustainability in funding.

(d) The 2017 CBA is expensive, considering the ballooning wage bill, which is currently unsustainable.

Mr. Speaker, Sir, the Council of Governors (CoG) has likewise raised several concerns, including-

(a) That senior medical officers are paid double the amount paid to non-health workers in the public service;

(b) That the industrial unrest has paralyzed healthcare services in the counties with conciliation meetings between the two levels of government and the unions yet to bear fruits; and,

(c) That the strikes are unprotected following court orders for health workers to go back to work.

Regarding implementation of the CBA, counties have raised concerns that it will have a ripple effect on the basic pay of all civil servants and will necessitate additional allocation of resources to all counties. Presently, there are 890 doctors, pharmacists and dentists that have been released by counties for postgraduate training. Counties are compelled to pay their salaries during the training period, thus depriving them of much needed resources to recruit additional staff.

Mr. Speaker, Sir, having considered all the issues as indicated above, and taking note of the impact that the strike had on the lives and health of vulnerable Kenyans, on Tuesday, 23<sup>rd</sup> April, 2024, the Standing Committee on Health visited Kiambu County Referral Hospital to assess the impact of the strike on health service delivery.

During the visit, the Committee found that albeit the County Government of Kiambu had put in place admirable steps to mitigate against the strike, health service delivery was still severely impacted with the hospital running on less than 80 per cent of its normal capacity.

In addition, on Thursday, 2<sup>nd</sup> May, 2024, the Standing Committee on Health held a joint meeting with the Departmental Committee on Health of the National Assembly to deliberate on the issues and build consensus towards a way forward.

In view of the varied and complex issues raised by the unions, the meeting hosted different stakeholders including, the Cabinet Secretary for Health, the Cabinet Secretary for Labour and Social Protection, the Executive Committee of the CoG led by the Chairperson, the Chairperson of the Public Service Commission, the Chairperson of the Salaries and Remuneration Commission (SRC) and the relevant healthcare workers' unions.

Following extended deliberations, the joint committee resolved the following way forward-

(1) Concerning the Kenya National Union of Medical Laboratory Officers (KNUMLO), the meeting resolved that-

(a) The KNUMLO to submit Recognition Agreement to the Ministry of Labour and Social Protection for purposes of ensuring that they meet the necessary threshold.

(b) If KNUMLO meets the necessary threshold across the 47 counties, then the 41 county governments that have not signed the Recognition Agreement to do so.

(2) The CoG to hold two meetings on Tuesday, 7<sup>th</sup> May, 2024, as follows-

(a) Meeting with the Kenya Union of Clinical Officers (KUCO) for purposes of finalising negotiations on recognizing the CBA at 10:00 a.m.

(b) Meeting with the Kenya Medical Practitioners, Pharmacists and Dentists Union (KMPDU) for purposes of finding a way forward on pending issues, including promotions and postgraduate training.

(3) Regarding the outstanding issue of harmonization of terms of service, the Kenya Health Human Resource Advisory Council (KHRAC) to make recommendations for implementation in a progressive and phased manner.

(4) The KMPDU to reopen negotiations with the Ministry of Health (MoH) and county governments on issues that were rejected by their Advisory Council, and pending issues other than internship be submitted to a task force for conciliation even as health workers return to work.

(5) The MoH to finalize execution of Memorandums of Understanding (MoUs) between universities and teaching hospitals with regards to matters affecting registrars on postgraduate training.

(6) The MoH and the KMPDU to negotiate on the internship issue with a possibility of adopting a phased approach to the posting of interns, subject to availability of funds.

(7) The Public Service Commission (PSC) to extend contracts of Universal Health Coverage (UHC) and the COVID-19 Health Emergency Response Project (CHERP) staff

by two years in accordance with the Summit Resolutions to extend their contracts by three years.

(8) The joint committee to implement bicameral mechanisms to follow up with the National Treasury on allocation of requisite resources to counties for purposes of implementing the agreements, particularly through the Division of Revenue Act (DORA).

Mr. Speaker, Sir, the resolutions of the joint committee are being followed up by the relevant parties and will be reported back to the House at the earliest opportune time.

As I conclude, I wish to request the Chairperson of the Standing Committee on Labour and Social Welfare to move with speed and act urgently to address the various labour-related issues that have led to the strike. These include, but not limited to, delayed promotions, salary arrears, career progression *et cetera*. I also wish to appeal to the various Government Departments and agencies involved as well as the unions to negotiate in good faith and with utmost speed to alleviate death and suffering of ordinary Kenyans as a result of the strike.

I thank you.

Mr. Speaker, Sir, I have two other Statements on the same. With your permission, I will proceed to---

**The Speaker** (Hon. Kingi): Did you file those Statements?

**Sen. Mandago:** Yes, Mr. Speaker, Sir.

**The Speaker** (Hon. Kingi): Clerk, kindly approach the Chair.

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

The Chairperson Standing Committee on Health, please approach the Chair.

*(Sen. Mandago consulted with the Speaker)*

Hon. Senators, I will allow you to react to the Statement that has just been read by the Chairperson of Standing Committee on Health.

Proceed, Sen. Samson Cherarkey.

**Sen. Cherarkey:** Mr. Speaker, Sir, we have always said that when an issue of national importance comes to our attention, committees should be seized of the matter. I am happy with the Chairperson of the Committee on Health for doing that for the first time. We must provide leadership.

The issue of doctors and other medical practitioners' strikes has become a serious concern in this country. It is my wish as the Senator for Nandi and a leader in this country, that these issues will be resolved amicably.

Last week I had an opportunity to sit in the joint committee meeting comprising the Departmental Health Committee of the National Assembly and that of the Senate led by Sen. Mandago. We were shocked because there are issues that have been resolved, but only two are remaining. However, when we sat in that meeting, it was like we were starting all over again.

Mr. Speaker, Sir, I urge the Senate and National Assembly committees on Health to give us a proper way forward on resolving the health crisis. I also call upon the CoG to be serious because they were supposed to have a meeting on how to resolve this health crisis. However, the CoG conveniently avoided holding that meeting yesterday. Yesterday, our proceedings were almost disrupted because of the noise and protests by medical doctors and other health professionals who were demonstrating. Many Kenyans are suffering, and our hospitals are dysfunctional.

The strike has been there for long enough. The Senate Committee on Health--- I request the Chairperson of the Committee on Health to convene even a Committee of the Whole next week, so that the entire Senate, the Cabinet Secretary for Health, the Permanent Secretaries (PSs), the doctors' union---

I am happy one of the Secretary-Generals of health workers' unions, Dr. Davji Atellah nowadays wears a cap. I hope his brain was not affected when that attack happened. He should be here. Other union officials like Dr. Wachira and Dr. Kibore must also be here, so that we ask them what the problem is. We need a whole of nation approach. The head of public service, Mr. Felix Koskei, said that almost all issues have been resolved except two. However, when you listen to the union officials, they are saying something totally different. The SRC is also saying something else. It is high time we took a position as a House. Let them come before the Committee of the Whole next week led by the Cabinet Secretary for Health and the unions.

Mr. Speaker, Sir, finally, I know there has been a debate on whether intern doctors are as qualified as pupils or other interns. I propose that we have a conversation as a country. I know people like Sen. Maanzo who own law firms will find this uncomfortable. I propose that we harmonize the payment of interns. For some of us who worked in law firms, we used to be given lunch for *githeri* and *mandazi* yet, we were doing matters worth billions of shillings. We need to harmonize, so that we have a standardized fee for intern doctors, law, engineering or any other profession. This will help to deal with issues that might come up.

I know this is a debate that we might have for the longest time possible. We respect doctors and health practitioners, but they must come down. They must adhere to the Hippocratic Oath. It says even if it comes to the wire, their issue is to protect the lives of Kenyans. So, I commend the Committee on Health. Let us be proactive and not reactive, so that we can keep the update. I hope this matter will be resolved as soon as possible.

I assure the country that these issues have the goodwill of His Excellency President Dr. William Ruto and his administration. He has shown the goodwill to ensure that these matters are resolved. Kenyans will continue to have access to the best healthcare in our dispensaries, health centres and referral hospitals across the country.

I thank you, Mr. Speaker, Sir.

**The Speaker** (Hon. Kingi): Sen. Agnes Kavindu.

**Sen. Kavindu Muthama:** Thank you, Mr. Speaker, Sir, for giving me this opportunity to congratulate the Chairperson of the Committee on Health and his team. I hope the Committee on Health will bring together the national, county governments and

governors, to negotiate and agree on issues that are making doctors to not report back to work.

We are losing many people who could have been saved if doctors treated them. They are however dying every day. We are receiving so many calls to contribute money for burials due to the lack of medication and treatment in hospitals.

I support this Statement. I pray that Sen. Mandago, the Chairperson of the Committee on Health, will push both sides; the national Government side and the governors to agree with the doctors and do whatever they are asking for.

I support.

**The Speaker** (Hon. Kingi): Sen. Aaron Cheruiyot.

**The Senate Majority Leader** (Sen. Cheruiyot): Mr. Speaker, Sir, I want to thank the Committee on Health for taking leadership on a very important national issue. Unfortunately, I think today is the 56th day and the country has been unable to find a solution.

This issue of the doctor's strike is not a simple matter. I have taken time to try and be as neutral as I can and listen to what the governors are saying on issues of expenditure. Many of them forward to me clips of yours truly speaking here in the Senate and reminding our county governments to balance recurrent *vis-a-vis* development spend. They ask me, Majority Leader, is this not you who every afternoon reminds us that all our counties are in breach of our regulations on 70-30 divide between recurrent *vis-a-vis* development spend? If we proceed in the manner and the route that the doctors want us to, you may either consider amending or at division of revenue, add us resources for us to be able to take on board the Collective Bargaining Agreement (CBA) that was signed in 2017. Therefore, you listen to them and you realize they have a valid point.

On the other side, I have also taken time to listen and engage the doctors' union, including having a sit-down with them as late as Thursday or Friday last week. I met them somewhere deeply seated and reflecting on the challenges that they are facing. The issues that they speak about also are not matters that you can easily sweep under the carpet. Our health architecture is such that intern doctors are the real doctors who treat and attend to patients in many of our county facilities. The senior doctors and the consultants only show up maybe one afternoon or two or three days a week. However, ordinary citizens that we represent in this House meet interns when they go to our health facilities. Therefore, this issue is about their pay and their ability to live a decent life. Unfortunately, we have a centralized pay structure for all of them. It is being proposed that they be paid Kshs70,000. Yet, in their deployment, many of them are being sent to far-flung counties away from what will be their home areas.

As part of the proposals that they are making, they are saying that if it is impossible to meet the Kshs200,000 that they are asking for, then at least allow them to work in their villages. Many issues come about here because there are villages, which cannot find a trained doctor within that particular region. They say if we strongly feel that because they are still students and are training, they be paid Kshs70,000, but they be allowed to work from their mother's houses to go to the clinic. That Kshs70,000 will be enough. However, so long as we expect them to work in certain parts of this country and

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give their attention--- When all is said and done, a doctor is the only professional whose mistake cannot be accepted, and the world cannot bear. It means it is the difference between life and death. If a lawyer makes a professional mistake, what is the worst that can happen? A breach of contract?

*(Sen. Maanzo consulted loudly)*

There is nothing. How can you die from a poorly drafted agreement? I do not want to say what I said on this Floor another time and I was discussed in all Law Society of Kenya (LSK) forums. We have to be very keen in this discussion.

We must also appreciate what the national Government is telling us. We appreciate the fact that we are still at a debt strain level. Where 70 per cent of our revenue collections never leave Harambee Avenue. They pay debt immediately after they are collected. For every Kshs100 that you collect in taxes, we are still paying Kshs70 to debt that we have already consumed as a country. We are only left with 30 per cent to compete all the things that we need to do. Pay salaries for the military, teachers, keep Parliament, Judiciary and the Executive running. Therefore, we are in a very difficult situation.

I want to laud the Committee for taking the lead to call all these institutions together and try and make sense of this situation that we find ourselves in. It has gotten to a point where people are beginning to ask and they cannot distinguish anymore. You cannot sit comfortably and say, you come from the Minority or the Opposition side. They keep telling you that you are the leaders. That is the word that Kenyans use. All the ordinary kenyans know is that you are a leader. They expect that you have the platform and there is something that you can do about it. Therefore, I want to urge the Committee on Health not to relent. I know they have called for meetings two or three times. The Cabinet Secretary did not either turn up or one time the union officials had another separate meeting. They should not give up. This is something that we must resolve. This institution has the ability to resolve many of these questions save for maybe the monetary issues that stand between doctors and their return to work. There are basic issues that even we as a House, I am embarrassed that we have not been able to address for the last 10-plus years that we have been in this House.

Take for example the issue of standardization of practice. It is not fair that what a doctor earns in Siaya is not similar to what they earn in Homa Bay just next door. The promotion manual and the human resource manual for one county differs from the other yet these are people who trained in the same institution for such an important profession. Therefore, Sen. Mandago and your Health Committee, immediately after you are done with resolving this issue of the strike, bring to the House at least a legislation or policy proposal that will ensure that we standardize practice issues across all our 47 counties, ensuring that our HR manuals; the leave days, promotion, what it takes, what level do you rise at after practicing for how many years, so that there is no competition at least at intra county level.

There are certain counties where we are told that doctors would never wish or want to work there because of how they are being handled in those counties yet, because

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of the difficulty of life and the fact that they must put bread and butter on the table of their families, they are forced to undertake those responsibilities.

Therefore, this issue is not just about the disputed pay of the interns. There are many other things for which this House has a solution to. I hope that once we are done with this phase of trying to mediate and find a solution to this matter, the Committee on Health will lead this House in making a long-standing solution that will ensure that our doctors at least feel that we have listened to them. Therefore, the number of days that they have gone on strike will not be in vain.

I thank you.

**Sen. Maanzo:** Thank you, Mr. Speaker, Sir, for giving me an opportunity to comment on the Statements. I want to comment on the striking doctors and say that every other day, the doctors come to Parliament to strike. A doctor is not trained overnight and is among the most brilliant people in the country who went to medical school and after seven years, I believe these people are qualified to work. However, the requirement is that they have to go through an attachment and then now become fully-fledged doctors. During attachment, this is the time they acquire some of the skills and as they practice what they learned in the classroom. The doctor's strike is very painful to the country and the earlier it is sorted out, the better. Especially during this time, the country has had floods and a very big likelihood of waterborne diseases, there is every need for doctors to go back to work.

I have received reports of the strike, including up to yesterday. I was informed of an incident where a young mother took a child to a hospital and she was told: "We are on strike, please look for a private facility". In the process somebody tried to give oxygen to this six-month-old baby and after one hour, the baby was gone because of the strike. It was very painful to me and I believe that has been duplicated in many parts of the country. It is high time that this House resolves the issues of the people and I believe this is a key issue to be resolved. I thank the Committee for what it has done and for the proper representation of the Senate and Parliament. I believe with the efforts of the Senate a solution should be found as quickly as possible. However, I still urge the Government on the other side to look at the events which are changing daily, the health situation in the country and the doctors.

Although the law requires that what they have already negotiated should be implemented, then the Government should offer something better which is acceptable to the doctors and all other medical practitioners, in the different medical professions, so that they can go back to work and serve Kenyans.

I support what the Senate Committee on Health has done and hope that this will be concluded as soon as possible.

I thank you.

**Sen. Kinyua:** Asante, Bw. Spika. Ningependa kushukuru Kamati ya Afya na niwaambie kuwa kazi wanayoifanya ni nzuri. Wauguzi, madaktari pamoja na maafisa wa afya ni kiungo muhimu sana katika serikali yetu. Lakini sisi wote tunalipa ushuru na ushuru huo ndio unaotumika kulipa madeni tuliyo nayo.



Ningependa kuwasihhi madaktari pamoja na wauuguzi na wahusika wote, wakubali kurudi katika meza wakubaliane. Tunaelewa kuwa wana yale matakwa ambayo wangetaka yazingatiwe. Lakini kulingana na vile ambavyo yale matakwa ya kwanza waliyoyaongea kama wale interns, walisema wangetaka wote kuajiriwa na vile vile kulipwa takriban shilingi elfu sabini na hayo yalikubalika.

Kulingana na vile ambavyo nimesikia ripoti tuliopewa, ni vizuri wale madaktari na wauuguzi wakubali ya kwamba hakuna mtu yeyote amekataa kusikiliza matakwa yao, lakini kwa wakati huu, kwa vile ambavyo hakuna hela; hela ambazo zimepatika tayari serikali imekubali na vile vile wamekubaliana na wale ambao wanawakilisha madaktari haya mambo yatawezekana. Lakini mgomo huu umeendelea na ukitembelea hospitali zetu, utaona kwamba wananchi wanasononeka na wanapata shida. Mimi ninaomba waketi na waweze kukubaliana kwa sababu fahali wawili wapiganapo, nyasi ndizo huumia. Wanaoumia ni wananchi wa Kenya.

Watu wawache kuwa na misimamo migumu. Nimewaona madaktari wakiwa na msimamo mgumu, hawaendi mahali ambapo wanaitwa ili kujadili mambo haya nao magavana wanafanya mikitano na hawawezi kuwaita. Vile vile, kuna mambo muhimu ambayo yameulizwa na hawa madaktari wa mahabara, walikuwa wanaomba waangaliwe na wanapofikisha kiwango fulani wanapaswa kukubalika katika kaunti zetu wajiandikishe kama kikundi. Magavana wetu wametupilia hilo wazo; hawajaliangalia. Kila mtu anapaswa kusikilizwa kwa sababu tukiendelea na misimamo hii ambayo ni mikali wale watakaoumia ni wananchi wa Kenya. Ninawasihhi madaktari kwamba mambo wanayoyasema tumeyakubali na tunayaelewa, lakini waweze kupatiana muda. Wamekuwa wakisema haya maneno lakini ninajua machahe waliyoyasema yamesikizwa. Sasa wao wakubali kurudi kazini ili waweze kuhudumia Wakenya kwa sababu ni dada zao, ndugu zao, wazazi wao na sisi wote tunataka nchi yetu iendelee mbele.

Asante.

**The Speaker** (Hon. Kingi): Asante, Sen. Kinyua, ukichagua kuzungumza Kiswahili, usichanganye lugha na bila shaka unajua sheria hiyo. “Intern” kwa Kiwahili ni daktari mkufunzi.

Sen. Sifuna, you have the Floor.

**Sen. Sifuna:** Thank you, Mr. Speaker, Sir. These days we, lawyers just listen in bemusement when Members whose professions we have no clue stand up here and deride and attack lawyers. These days we just laugh, but it would be interesting if one day you stood up and told us about your profession. Not just attacking lawyers and we do not even know what you do.

My doctor is 28 years old and the last time I went to see her for a routine medical check-up, she expressed to me very serious frustration, when she hears Members of Parliament speaking about doctors, it is as if people have simply refused to listen to these medical professionals or even understand anything about them.

When you hear somebody who claims to be a lawyer embarrassing all lawyers by trying to draw comparisons between a medical intern and a pupil at a law firm who should be paid in terms of *githeri*, it is extremely embarrassing that some of these people share a profession with me.

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When we speak to these doctors, they do not understand how these things are not getting through to people. How can they spend a whole three months explaining to you what a medical intern is, but when you stand up here, you say, "Ooh! we should be standardizing and paying them the way we pay pupils at a law firm." It is extremely frustrating and I am sure even now she is losing her mind where she is and I am hoping that I can channel some of that energy that I am sure she is going through right now. When she sees Members of Parliament saying: "Oh, now the government has no money" and yet we are looking to hire people called Chief Administrative Secretaries (CAS); from which resources are we going to pay these people?

Doctors tell me every day that they have tried to explain what a medical intern is. They have to bend down to some of these low levels and explain what a Collective Bargaining Agreement (CBA) means. They have to explain the continuity of Government, a basic concept. They have to explain basic things, which is frustrating for them.

When I hear people here say that they should sit down and talk, I talk to these doctors, and I can assure you that they have gotten to a place where they have experienced a serious mental block. There is a serious intransigence on the part of the Ministry.

**The Speaker** (Hon. Kingi): Sen. Sifuna, please, address your colleagues as hon. Senators not "when you hear people".

**Sen. Sifuna:** Mr. Speaker, Sir, I wish you would allow these hon. Members to meet these doctors here one day. When those doctors come here you will notice that there are hon. Members who never go and meet those doctors. I am sure they will not address them the way you are directing me to address them. However, since I am a Member of this House, I will address them as you have directed me. It is extremely frustrating that these doctors have sat down, and I applaud the efforts of the Committee by Sen. Mandago because he has given it his all. He has always invited us to his Committee meetings.

The last time I was in the Committee sitting, the Council of Governors refused to show up. We were given information that they were watching the proceedings from the comfort of their offices. Yet we wanted everybody in the building, so that we could try and see what the issue is. I attended the last meeting of the Committee on Health after I heard none other than the Head of State saying that they had agreed on 16 out of 18 issues and only two issues were remaining.

When I went to Sen. Mandago's Committee, I expected that we would start with those two issues that had not been resolved. However, we have members of the Council of Governors sitting in the meeting who say that they did not know who some of the doctors' representatives were and did not have recognition agreements with them. How do you begin from scratch and yet this matter has been going on for a long time?

In light of the fight that has been taken to the door of doctors, Dr. Davji Atallah, the Secretary General of Kenya Medical Practitioners Pharmacists and Dentists Union (KMPDU), was not known for wearing hats on his head. He is trying to hide his scar

from a tear gas canister that a police officer fired during an exercise of his democratic right to picket and protest.

I gave him my advice that that is the reason why Sen. Sifuna wears a sufuria on his head when he goes to maandamano, because that way the damage to the head is lesser. If you are wearing something like a *sufuria* on your head, if you are hit with a tear gas canister, you will not be hospitalized the way he was. I want to express my frustration with the medical practitioners in this House. They are telling me that they do not know what language to employ.

The only appeal I can make to the doctors of this country is that we know the Government will never listen to you. The Government is never going to honor the CBA agreement it signed. The Government will not give you what you want. For the sake of Kenyans, wait this Government out. There is going to be a Government that will come - governments do not last forever - that will implement CBAs that it gets itself into; a government that will understand labor is a right, that you cannot hold people in servitude.

Under Article 30 of the Constitution, you cannot hold somebody under forced labor. You need to pay them for their services. It is not common for me to advise somebody to abandon their right and cause. I know their rights, but they are speaking to a stone; somebody who has deliberately refused to understand their situation and basic terms such as “medic intern.”

My appeal to the doctors is to wait this Government out. It will not be long. We are in 2024. I can assure you that when this side goes to the other side - and I hope you will be there to see it and that you will be sitting there when I address you from that other side - you will not have some of these challenges in this country.

I thank you.

**The Speaker** (Hon. Kingi): Sen. Sifuna, that is a very good campaign piece, but not necessarily appropriate for the debate before us.

Proceed, Sen. Mungatana, MGH.

**Sen. Mungatana, MGH:** Thank you, Mr. Speaker, Sir, for giving me the opportunity. I would like to comment on the Statement that was read by Sen. (Prof.) Kamar on the African Union Economic, Social and Cultural Council (ECOSOCC) and Pan-African Parliament (PAP) working session on advancing the free movement of labor in Africa. Sen. (Prof.) Kamar is a Member of the PAP and a professor who has given us a lot of leadership in the trade committee.

Although I heard that delegation, but Sen. (Prof.) Kamar has been extremely resourceful in the trade committee of PAP. This particular committee of the PAP recently held a session in the Seychelles. The main purpose of that session was to discuss the free movement of professionals and skilled labor across Africa. Although I did not attend, I know that Kenya was very well represented. I wanted to take one minute or two to discuss the Statement that my colleague has filed. African nations filed the African Free Continental Trade Area Agreement and Kenya was the first to sign on 7<sup>th</sup> October, 2022. The reason is that Kenya stands to gain a lot.

If you go to South Africa today you will find people in high positions, like directors in Ministries serving the government of South Africa and they are people from

Kenya. If you go to various States, including our neighbors, the number of Kenyans who have traveled out of this country to go and work, who have applied their skills in these other nations, and make a life out of Kenya are a lot.

Those people who went at that time are facing practical difficulties. Our children, cousins and new generation that wants to explore opportunities within Africa are facing problems especially when it comes to election time.

When electioneering time comes, you will find that ruling parties within the African continent become protectionists. People who are not from their countries tend to bear the brunt.

It is in our interest to push for things like Sen. (Prof.) Kamar was pushing in this meeting that we must have ratification of the protocol for the free movement of persons. This protocol will help establish legal frameworks within the parliaments of African nations to protect the movement of labor from Kenya to other countries and other countries to Kenya.

The idea is to create free movement within the whole continent. Today, you may be working in this country as a teacher, but tomorrow, you may crossover to Somalia and work there. You need to have an easy visa requirement. You need to have an easy and quick residence application process that will allow you to stay there without a problem. You need to have a system that allows you to pay taxes without double taxation; paying taxes at home and in the country, you are in.

This protocol that was discussed in Seychelles as presented by Sen. (Prof.) Kamar makes those kinds of resolutions and awareness. We left there as a country saying that we are coming to bring this matter to our floors of parliament and explain to our parliamentarians so that it will not be difficult when the legal framework is finally developed at the continental level. When it comes to adoption, we are alive and aware of what is happening.

Mr. Speaker, I support that statement and encourage that we, as legislators, be abreast and well informed about matters happening at the continental level. Why? Because Kenya is a large exporter of our labour, especially skilled. If we do not protect our people through the establishment of these legal frameworks, we might end up losing at the continental level. I want to support what the Professor has done. I thank her and acknowledge what we are doing at that level.

I thank you.

**The Speaker** (Hon. Kingi): Proceed, Sen. Olekina.

**Sen. Olekina:** Thank you, Mr. Speaker, Sir. I rise to support this statement by my Chair of the Committee on Health, on this issue of the strike of medical doctors.

I think we are missing the point here. Our committee has done the much that it can do when it comes to the issue of health. We now have the Committee on Labour and Social Welfare, which we hope will take on the other issues that deal with salary delays, promotion and issues relating to labour. Although we took time to call the Cabinet Secretary for Health, the Cabinet Secretary for Labour and Social Protection, and also all these other stakeholders, our scope was limited because of issues associated with the committee.

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It is about time that we ask ourselves serious questions. These are serious issues that are supported by the Constitution. The health function is devolved. Apart from issues of Level 6, all others from Level 1 to Level 5 hospitals and the community health workers' issues are devolved. There is a problem and this is where the governors do not get it right. When the national Government decides to take on a function, which is supposed to be supervised by the county government, for example, the community health workers, it will give an 'x' amount of money. In the small budgets that we send to the county governments, they forget that the national Government, specifically the Ministry of Health, which is led by someone who is not even a doctor so as to understand the pain of doctors gets Kshs141 billion which is equivalent to the shareable allocation of almost 30 counties.

Besides, the governors immediately say, "even us we will pay 50 per cent." So, you will see headlines that the national Government has released Kshs3 billion. It will also affect the county budgets and they will also release an additional Kshs3 billion. Where is that money coming from? You will then hear the governor saying - which is what they said in the meeting - that the Collective Bargaining Agreement (CBA) which was negotiated was not fair. It is discriminatory because other interns should also be getting the same amount, so we can only give them Kshs70,000.

Mr. Speaker, Sir, if the Senate does not take this matter very seriously and deal with it, we will continue failing devolution and our citizens who have brought us here. When we were passing health-related Bills, I remember telling my Chair in the Committee that this is all about the Benjamins. This is all about money. That is why we are rushing to pass these Bills.

These Bills are brought here. We read and literally pass them even before the committee considers them. We seriously need to start thinking. I echo the words of my brother Sen. Sifuna, when he says, "governments come and go, but institutions remain forever."

This institution of the Senate has got to remain and it has to take a futuristic position in terms of defending the rights of our people. If we cannot defend the rights of our people to fight for devolution, then what are we going to be doing here? It is about time, that we now asked ourselves what devolution means in Kenya. In other countries, when it is devolution it is fully devolved. It is devolution. We keep on saying funds follow functions, but yet it does not. I keep on saying and I want to repeat this that what the doctors are asking for is very basic. It is what had been agreed upon. The doctors are simply saying, "give us our Kshs15,000 which you were supposed to give us." That is issue number one.

Issue number two, the doctors are saying, "pay the interns Kshs206,000." Majority Whip, you are a doctor. "When you fall sick, I am the one taking care of you and I do not even have a medical cover. Please, provide me with the medical cover so that I can easily take care of you." These are very basic things.

The doctors are saying that the national Government, the Ministry of Health, must respect court orders. However, when we have meetings they say we have agreed on 13

matters and we have not agreed on two. The two matters that you have not agreed on are the ones that you are mandated by the court for you to agree.

Mr. Speaker, Sir, I am going to ask simple questions and this is a question that we must all ponder. Do we feel great when our people are dying in hospitals? I can say 80 per cent of all the hospitals in this country are closed now. People go to the hospitals and they lose their patients. These are small things, which could be resolved just because of this argument of saying that an intern is not a doctor. The training that an intern doctor gets is different from any other intern. Therefore, if we do not know, let us say we do not know and agree to be told.

*(Applause)*

This is the biggest problem of having someone leading that docket and she has no clue about what doctors go through. Incompetency of the highest order.

Mr. Speaker, Sir, this is a matter that should pain all of us. We are here to defend the interests of our people. We should not defend any individual interest. We defend the interests of all the Kenyans. The truth of the matter is that right now, the people who are in the Ministry of Health have become overnight billionaires. Why? This is because there is a lot of money in the Ministry of Health.

When you are controlling a budget of Kshs141 billion, you are equivalent to about 30 governors. You can easily stand there and say whatever you want to say because you do not give a hooting hell about the lives of Kenyans.

Mr. Speaker, Sir, I request you ---

**The Speaker** (Hon. Kingi): Sen. Olekina, if you are dissatisfied with the conduct of the Cabinet Secretary in charge of Health, you know exactly what to do. You can bring a Motion and prosecute it.

Proceed.

**Sen. Olekina:** Mr. Speaker, Sir, I am guided. It is not that we have not pondered on that. We keep on saying that we let them deal with the first issue that they are dealing with, which is the fake fertilizers, then now we will come back and deal with the other ones to save human lives.

Mr. Speaker, Sir, when you sit there, the people Kilifi are also saying we elevated a speaker from Kilifi to the country. Can we one day suspend the sitting of this House and all match to the Ministry of Health or can we use the powers that we have, because we have a lot of powers? We have the power on the division of revenue. If we just say no, people will listen. However, sometimes we forget the powers that we have.

I do not know whether you go and drink tea in the other House which their budget is increasing to Kshs2 billion. Sometimes we see things and it is good for us to say them here because this is where the truth has no shades of grey. When you look at the allocation of budget being done out there, you will find that one Member of Parliament (MP), who is the Chair of Finance and Budget Committee has decided that he will take Kshs1.5 billion for building roads of his own constituency, when other counties have got no money whatsoever. Then you are saying that we have no money. Where is equity?

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Some of us keep on saying that we rely on the equalization fund when we stand here because of the all the issues of Sessional Paper No.10 of 1965. However, because someone is the Chair of Finance and Budget Committee, he decides to give Kshs1.5 billion to roads in his own constituency. Shame on him. That is ridiculous. That is why we are missing the point here. We need to realign our own existing resources. Yesterday I saw governors and the President going to collect Kshs344 million from the World Bank. By doing this, we are causing problems for the future generations. Why can we not learn to realign our existing resources? If it is true we do not have money to pay doctors, then we should not allocate Kshs1.5 billion to maintain roads in one constituency. I do not intend to put any improper motive on our colleagues, but if you follow closely, you will find that even contracts, ---eh?

Thank you, Mr. Speaker, Sir.

**The Speaker** (Hon. Kingi): Proceed, Sen. Wakili Sigei.

**Sen. Wakili Sigei:** Thank you very much, Mr. Speaker, Sir. I want to appreciate the Chairperson of the Committee on Health for bringing out this very important statement, which has highlighted the importance of the health sector in this country from the hon. Members who contributed this afternoon. We do not mince words when we say that health is a very important need. It is one of the basic rights that Kenyans and every other human being enjoys.

When the Committee on Health reaches out to attempt a resolution to the strike that for the first time, has gone for a very long time--- I note that the previous strike, took longer than this. Even if it were to take a day or two, it is a risky thing to let the people who are responsible for taking care of our sickly brothers and sisters from wherever they are, not to be working. One life lost is as painful as that which has been lost by the failure of the doctors to be present to support them. I commend the committee that has gone out of its way to attempt to bring forth a solution by bringing the doctors back. They are doing a good job.

Mr. Speaker, Sir, the hon. Members have talked about the challenges that we all have. Some of us have taken time to read and understand the challenges within the medical field, from the doctors', the Government's and the union's side. Two things have come out clear. One is the fact that we did not have to wait until it gets to a crisis for all the players and parties to get involved and participate in negotiations or bringing on board the whole Government approach. We did not have to wait for it to get to where it is.

Mr. Speaker, Sir, we have been told about one major aspect of this issue, which is the CBA that people are saying, has not been honoured by the Government. When we look at that document that was signed previously, it was signed noting the continuity of the Government. It was signed by parties where, at times, certain county governments were not involved, especially where services are supposed to be committed by the county government.

As we talk about the crisis that we are in and seek for efforts to resolve this long-standing, very important issue, we should not point fingers. It does not help nor resolve the crisis. However, since the Committee on Health has reached out, it is going to direct

where the blame is to be taken. When we talk about a CBA that was signed, who signed it in the first place? Was it signed by the national Government, the county governments or the union? We appreciate the fact that the rights of the doctors and all employees is enshrined in the Constitution. They are entitled to have it to the extent that they have that CBA. Is it that there was an outright intentional failure to honour that part of the CBA? The question is out there and a concern to all the Kenyans.

The intervention by the national Government, the Council of Governors (CoG) and the goodwill that we desire from among the unions who are exercising their right to fight for the rights of their doctors, whether interns or registrars, is welcome. I believe the hon. Majority Whip can comfortably defend that aspect; the way Sen. Sifuna defended the lawyers in terms of the desire not to compare apples and oranges, or interns and doctors and interns with lawyers.

Mr. Speaker, Sir, the option that the Committee on Health is taking to intervene is something that we all should support, so that we have these doctors back to work. Most of the people who end up suffering are those who would go to public hospitals. None among the Members in this House as one Member stated yesterday, would largely suffer as that villager who entirely depends on services from a public hospital.

It is something that we must call as is and have our own united effort to make sure that the rights of the doctors and those people who entirely depend on doctors for treatment and are protected. I, therefore, support and applaud the Chairperson and the Members of that committee for the effort to seek to intervene and support this cause of bringing the doctors back to work and support the people of Kenya.

I thank you.

**The Speaker** (Hon. Kingi): Sen. Faki, proceed.

**Sen. Faki:** Asante, Bw. Spika, kwa kunipa fursa hii kutoa kauli yangu juu ya ripoti ya Kamati ya Afya iliyowasilishwa na Sen. Mandago, Seneta wa Gatuzi ya Uasin Gishu.

Mgomo wa madaktari umekuwa donda sugu kwa sababu umeendelea zaidi ya mwezi mmoja sasa na hakujakuwa na muafaka wa kuutatua. Tukiangalia sehemu nyingi, wananchi wanapata shida, hususan wakati huu ambapo kumeingia mafuriko na mkurupuko wa magojwa kadhaa yanayosababishwa na maji.

Ipo haja ya Serikali kukubaliana na madaktari kwa sababu wanawatumikia wananchi wa Kenya na pesa zinazolipwa wao ni za Wakenya. Sioni sababu gani Serikali ikae ngumu wakati wale wanaotaka kusaidiwa ni madaktari wanaofanya kazi muhimu katika nchi yetu.

Binafsi nilitembelea hospitali kuu ya mkoa wa Pwani tarehe 1/5/2024 na nikaona kwamba, huduma nyingi zilikuwa zimesitishwa isipokuwa zile muhimu tu au za dhahura. Kwa mfano kama wodi ya watoto ambayo ilikuwa inafanya kazi. Watoto wengi walikuwa wanahudumiwa wakiwa wamelazwa kwa sababu ya magonjwa tofauti. Jambo la kufurahisha ni kuwa madaktari waliokuwa wanahudumia watoto wale walikuwa wamejitolea licha ya kwamba walikuwa na hisia za kushiriki na wenzao katika mgomo ili kuhakikisha kuwa matakwa yao yamepatikana.



Bw. Spika, masuala ambayo yanazungumziwa na madaktari ni ya kimsingi. Haya ni masuala ambayo mfanyakazi yeyote ni lazima awe nayo ili aweze kufanya kazi kwa utulivu akijua kuwa haki zake zimelindwa. Mwaka juzi tulipokuwa na janga la COVID-19, madaktari wengi pamoja na wauguzi walipoteza maisha yao kwa sababu ya kukosa kinga. Mambo ambayo madaktari wanapigania ni mambo ya kimsingi kama ukosefu wa bima ya afya na mishahara ambayo iko chini ya kiwango wanachostahili kulipwa.

Seneta Cherarkey alizungumza kuwa madaktari wanalipwa vizuri kuliko wakili ambao hawajahitimu. Ni kweli kwa sababu *walinegotiate* na Serikali na wakakubaliana kulipwa pesa hizo. Serikali haiwezi kuja baada ya miaka mitatu na kusema kuwa pesa wanazolipwa ni nyingi kwa hivyo zipunguzwe.

Tumeona bajeti ya Serikali imeongezeka maradufu. Tumeone juzi bajeti ya Cabinet Administrative Secretary (CAS) na wengine wanaohusika. Kwa hivyo, hili ni suala la ubadhirifu wa rasilmali. Huu ni mwaka wa pili kutoka Serikali hii ya Kenya Kwanza iingie mamlakani. Waliweza kulipa kile kiwango kwa miaka hivi miwili. Ni jambo gani limefanya wasilipe mwaka huu na kurudi nyuma kuhusiana na mwafaka uliopatikana miaka saba iliyopita?

Bw. Spika ni lazima Serikali irudi nyuma ikubaliane na matakwa ya madaktari kwa sababu wanayoyataka mengine tayari yako. Sio mambo mapya yanatajikana kufanyika.

**The Speaker** (Hon. Kingi): Sen. (Dr.) Khalwale, you were on my dashboard, but your name just disappeared. Should I assume that you no longer want to make any interventions so that I can proceed to your colleague?

Proceed, Senator.

*(Sen. (Dr.) Khalwale microphone switched off)*

**Sen. (Dr.) Khalwale:** Mr. Speaker, Sir, in 1976, a few passengers who were Israeli nationals were kidnapped and landed in Entebbe, Uganda. The Israeli Government, because of the meaning of the life of an Israeli, came to Uganda with the best of the best led by Mr. Jonathan Yoni because an Israeli life matters.

I thought that because of COVID-19 matters, Kenyans would appreciate the role of doctors in our lives. I have watched in this country and listened in this Parliament, including this afternoon, people, our colleagues attempting to use this opportunity to attack doctors.

Be careful, doctors are just as Kenyans as we are. We cannot punish them for being amongst the finest in the country.

*[The Speaker (Hon. Kingi) left the Chair]*

*[The Temporary Speaker (Sen. Wakili Sigei) in the Chair]*

The same doctors you are vilifying, Sen. Cherarkey, where were you in your primary when your classmates beat you and qualified with better grades to become doctors and you could not?

*(Applause)*

Mr. Temporary Speaker, Sir, I request the Senator of Nandi County to be apologetic. In fact, it is a privilege for him that we have introduced a system of adult education “Gumbaru” in degrees. Otherwise, traditionally he would not appear in court at all. It is only because the Gumbaru education which has allowed him to become a lawyer.

He should be told that the people he is berating are the same ones who got a grade A in Mathematics, Physics, Chemistry and everything else when he was struggling with grade C minus, C and those kinds of grades.

We must pay doctors. What is the big deal?

**The Temporary Speaker** (Sen. Wakili Sigei): What is your point or order, Sen. Mandago?

**Sen. Mandago:** Mr. Temporary Speaker, Sir, under Standing Order No.105 - statement of facts, I do not dispute that doctors require A's in grades in order to qualify, but can the Senator of Kakamega County prove that Sen. Cherarkey had C minuses and Cs? Can he provide evidence or withdraw and apologize.

**Sen. (Dr.) Khalwale:** Mr. Temporary Speaker, Sir, if it pleases the Senator of Uasin Gishu, I have withdrawn. However, withdrawing does not change the fact; it simply means the fact has been removed on the menu.

I am very disturbed when I hear a many of voices on the Minority side pushing the correct agenda while on the Majority side defending the wrong agenda. I wonder who told the Members of Parliament (MP) that they were elected to come to Parliament to support the Government even when in its policy, it is wrong. Who told you? It is our responsibility on the Majority and Minority sides to critic Government policy so that we make it better.

Mr. Temporary Speaker, Sir, if we do not correct the problem, do you know it can go on for the rest of the year? For your information colleagues, your child who might have an asthmatic attack tonight - God forbid - is not going to be treated by anybody else apart from the medical interns at the private hospital because we senior doctors do not go on call. The younger doctors; the ones you are calling unqualified people are the ones on the first line. They are on call throughout the night so they moonlight. This case can remain on strike for one year because when they are on moonlighting they are paid better.

Secondly, on the principal of perpetual succession, the CBA that was negotiated between the doctors in the years before was between them and the Cabinet Secretary. I think it was Hon. Mutahi Kagwe. What Hon. Mutahi Kagwe and his fellow Cabinet

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agreed upon is as binding as what Hon. Nakhumicha will agree with the doctors. I want to appeal to Hon. Nakhumicha to relax. You are our kid sister. Relax completely.

You were in Ikolomani a few months ago and you said you were going to demote Iguhu Hospital because you found the mortuary and ambulance services having a problem. That is not your role as Cabinet Secretary. Yours is to correct and improve where things are not working. I appeal to my sister and tell her that, when your day will come, you will be alone, ask Linturi. Today, Linturi is facing the music alone. Accountability is an individual issue. Cabinet Secretary, go all out of your way and help the Government to fix the problem of doctors returning to duty.

It is not difficult. The Chairman of the Standing Committee is not here. I think they are looking for Kshs4.9 billion. If you take the Kshs200 million per consistency times 290, it is Kshs58 billion. If you just remove Kshs4.9 billion so that a Member of Parliament (MPs) gets slightly less National Government Constituencies Development fund (NG-CDF) than they are getting, you will pay the doctors and there will be no noise.

There is a young man called Ndindi Nyoro, the Chairman of the Budget and Appropriations Committee; the committee in the National Assembly that advises Parliament on issues of appropriation. My good brother Ndindi Nyoro, relax and work. Instead of setting your eye on an imaginary year called 2032, where your age mates are telling you that you will be ABCD concentrate and do your work for a few years. Before you, there was Mutava Musyimi and before him, there were others. Do not use that opportunity to deny key players the benefit of support from the common wealth of this country called, the budget.

Mr. Temporary Speaker, Sir, I will continue insisting that doctors should be supported to go back to duty, so that we help President William Ruto succeed. If in his tenure for five years, it will go down in his history that the medical services collapsed, it is the single agenda that will cause the voters not want to re-elect our Government. So, those of us who are supporting that agenda of doctors to be paid, are the ones helping the President get re-elected in 2027. There is no shortcut. It is a question of calling people to the polling station.

I am happy that the Chairperson of the Committee on Health has put in his best. We support you. I know how limited your input can be if you do not enjoy the powers of the Cabinet, but that does not mean that we shall give up. We will only look for better ways of making sure that doctors return to hospital.

Finally, let me allow some people to hate doctors and call them the names they want. Even if you do not like doctors, then like the patients because, it is in the patients that you find your wife, your children and your parents. Therefore, if you do not learn to like your parents, your wife, your children and your friends, when you lose them, the doctors do not come to bury them, you will bury them.

I am glad that the Senator for Nandi has come back. How I wish we could change Standing Orders so that he could be given another chance to apologise to doctors.

**Sen. Cherarkey:** On a point of order, Mr. Temporary Speaker, Sir.

**The Temporary Speaker** (Sen. Wakili Sigei): What is your point of order, Sen. Cherakrey?

**Sen. Cherarkey:** Mr. Temporary Speaker, Sir, in as much as I respect the ranking Member, Senator for Kakamega County, I have two points of order.

One; I do not need to apologise to anybody because my facts are on HANSARD. I said; if there is a way, we can have a conversation about internship payments in this country.

Two; I am rising on Standing Order No. 101. It states-

“No Senator shall impute improper motive to any other Senator or to a Member of the National Assembly, except upon a specific substantive Motion of which at least three days’ notice has been given, calling in question the conduct of that Senator or Member of the Assembly”

Sen. (Dr.) Khalwale cannot be allowed to be making sweeping statements. This is a House of rules and order. Did you listen to him trying to discuss the Member of National Assembly for Kiharu Constituency, Hon. Ndindi Nyoro, without bringing a substantive Motion? Creating a perception among the eyes of Kenyans that instead of doing his job as Chairperson of Budget and Appropriations Committee, he is doing politics. Is it in order?

In as much as he has his opinion about him or whatever, our Standing Orders guide us at any given time. Can the Senator for Kakamega withdraw and apologise because tomorrow, somebody else will come and discuss another Member of National Assembly or the conduct of another person who is not here to defend themselves? I know he has been getting away with many things such as, creating snipes against colleagues. Sen. (Dr.) Khalwale should behave like a Majority Whip unless he is the Majority Whip in Government, but in opposition. He should choose sides. He cannot be having his cake and eat it.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Cherarkey, you have made your point.

Sen. (Dr.) Khalwale.

**Sen. (Dr.) Khalwale:** Thank you, Mr. Temporary Speaker, Sir. It is just that the distinguished Senator for Nandi County came in at the tail end of my contribution. He would have seen that I did not raise anything substantive about the MP for Kiharu Constituency. I know the rules.

Having said that, I do not know why it is occurring to the distinguished Senator that he is the barometer to measure how somebody should serve when he is in the office of the Government Whip. The positions that people have in this country are earned.

Mr. Temporary Speaker, Sir, you are here as a Senator because you won in Bomet. Sen. Cherarkey, you are here as a Senator because you won in Nandi and I am here for the same reason. The fact that I became the Chief Whip, my brother, is because of the contribution I made to form the Government. You did not invite me to the Government. Therefore, if you think my contribution does not meet the position I hold today, then please, go and justify that you contributed more than me. I do not think that there is a single vote you added William Ruto because he was going to get all the votes in Nandi, anyway.

I conclude by telling my brother for the very final time, if we must remind you, be reminded that, for you to become the professional you are, it matched your Intelligence Quotient (IQ). For those doctors who you are belittling, to become doctors, it matched their IQ. For your information, the IQ of a doctor is above 140 if you know what that means.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. (Dr.) Khalwale---

*(Sen. Cherarkey spoke off record)*

Sen. Cherarkey, resume your seat.

Sen. (Dr.) Khalwale, you have concluded your comments. I believe if not, I direct that you conclude them.

*(Sen. Cherarkey spoke off record)*

Sen. Cherarkey, allow Sen. (Dr.) Khalwale to conclude.

*(Loud consultations)*

Order, hon Senators! I believe we all know the emotiveness of the discussion we are having. I am seeing the interest.

*(Sen. Dr.) Khalwale stood up in his place)*

Sen. Boni Khalwale, resume your seat and I will not allow you to speak any further.

I will allow only one more Member from either side to speak to these statements. We have expended over one hour on this statement. Then we will progress to deal with other matters in this sitting.

*(Sen. (Dr.) Khalwale spoke off the record)*

Order, Sen. Bonny. Order! Sen. Maanzo, you already spoke to this.

The next person is Sen. Eddy.

**Sen. Oketch Gicheru:** Mr. Temporary Speaker, Sir, I was protecting Sen. (Dr.) Khalwale. Can he protect me by listening?

*(Loud consultations)*

**The Temporary Speaker** (Sen. Wakili Sigei): Order, Senators. Allow Sen. Eddy to be heard in silence.

Proceed, Sen. Eddy.

**Sen. Oketch Gicheru:** Mr. Temporary Speaker, Sir, since I got into this House, there is no day I have tried to disparage or belittle any report from any committee or individuals who had been given tasks on any issue. However, I must say that the thoughts expressed by the Committee on Health in this document has disappointed me.

Mr. Temporary Speaker, Sir, I need your attention because the noise I am hearing here is interfering with my thought process.

*(Loud consultations)*

**The Temporary Speaker** (Sen. Wakili Sigei): Order, Sen. Omogeni and Sen. Chute! Allow Sen. Eddy to be heard in silence.

**Sen. Oketch Gicheru:** Mr. Temporary Speaker, Sir, what we are talking about is very serious such that if Sen. Omogeni were to get in trouble now and go to Kenyatta Nairobi Hospital (KNH) or Nairobi Hospital, he would suffer and he would have to be taken to Dubai. I do not think he has the money to go to there.

The reason I am saying that I am disappointed by this document is because this document opts to choose the various unions of medical and health practitioners to go and sit again and solve their problems.

*(Sen. Cherarkey consulted loudly)*

Mr. Temporary Speaker, Sir, protect me from Sen. Cherarkey. He is consulting in a loud voice. If you look at the challenges bedeviling the health services today in Kenya where the medical and health care workers in this country are having this strike at the heart of it is the conflicting relationship between county governments and the national Government.

Mr. Temporary Speaker, Sir, when the Senate gets an opportunity to pronounce itself on this matter, then we must pronounce ourselves to the extent of being bold, courageous and make resolutions; not mere recommendations for people to go sit and further negotiate. I have read all the responses here by the different medical unions.

If you look at recommendation No.6, it says that the Ministry of Health and KPMDU should negotiate on the internship issue with a possibility of adopting a phased approach. This is what the KPMDU and the Ministry of Health have been doing for the last few months. Recommendation No.5 is that the Ministry of Health should finalize the execution of MoUs between universities and teaching hospitals with regard to matters affecting registrars. Recommendation No.4 is that the KPMDU should re-open negotiations with the Ministry of Health and county governments. Recommendation No.3 is with regard to the outstanding issues of harmonization of terms of service. The Senate is telling KHRAC to make recommendations for implementing in a progressed and a phased manner. What are saying as a Senate? Are we throwing our hands in the air? Thank God for the communication the CoG had yesterday with different unions that there is a chance they can agree on a few things here and there. In the last few months of these contestations, we have seen all these bodies fail. It is the Senate that must pronounce

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itself on this issue with finality and not recommendations. It has to be resolutions of the Senate.

Secondly, Mr. Temporary Speaker, Sir, if the Senate cannot make a substantive resolution, then we will invite the President of this country to make a pronouncement that is with finality. This is because I look at the issues the doctors are talking about in this country and what they touch on.

Sen. Sifuna said here that it seemed like we do not understand these interns and medical doctors, but we should try understand what they are crying about. That is very well stated in this document. Let us show that we understand what they are talking about. The first issue is that of posting and remuneration of medical interns. They are talking about provision of comprehensive medical cover for doctors. A doctor treats everyone, but they cannot afford the same medicine they are giving other people.

They are talking of involvement of doctors in the UHC. We have a coverage that we want to reach everyone in this country and the doctors have no voice in it. How is this difficult to understand? They are talking about salary arrears that have been there since 2017 that have not been given to them. What is so hard about understanding that?

Mr. Temporary Speaker, Sir, the doctors are talking about support for career development. In other countries, if you were to look at their scheme of service, it would be a clear one and the Senate where I find myself in today would be very elaborate about it. This would be what scheme of service should we give our doctors and health practitioners in this country.

Today, if you look at the doctors' scheme of service, even the most revised one, there is no well-defined career structure for those doctors. A doctor after graduating goes to where they have been given an opportunity to work whether in a public or private hospital, but there is no clear career structure.

Today, in this country, there are no well-defined Job Descriptions (JDs). You have studied very well a specific function as a doctor, but when you are put in a hospital, there are no clearly defined JDs for you. You might find a surgeon being placed to simply provide Panadol.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Eddy, proceed to summarize your contribution.

**Sen. Oketch Gicheru:** I am summarizing, Mr. Temporary Speaker, Sir. I was expecting the Senate to pronounce itself on the scheme of service on the specification of responsibilities for doctors in this country and how those responsibilities are mirrored in the pay that they get. We want to see the standard of recruitment of doctors being looked at in the scheme of service.

We cannot have a country where for those interns to be employed, they must know Sen. Cherarkey, Eddy Oketch or Sen. Mungatana. This should not continue happening in this country.

On the training and re-skilling of doctors, we are in a place where other countries are using *nano-technology* on healthcare advancement and yet in the Senate, we are not speaking about these things. This is what the doctors are crying about.

Mr. Temporary Speaker, Sir, lastly, the doctors are requesting and urging us to look at their scheme of service, in terms of advancement, succession management and career planning. How is it hard for this Senate to develop directive resolutions for the doctors? As a young person, I stand here disappointed that the Senate got an opportunity to pronounce itself on this matter and we lost that opportunity. This is because we did not give directive resolutions that can rethink the entire the healthcare infrastructure of this country, which is devolved entirely under Schedule IV to devolved functions. It is our mandate. Chairpersons of different committees of this House should be bold when it comes to devolved functions. You can make bolder pronouncements than what we have seen here.

Mr. Temporary Speaker, Sir, I hope that the doctors will listen to Sen. Sifuna and I, and go back to work. I hope that one day, sooner than later, a government will come in place to listen to your cries. I also hope that the President has seen how the Senate has failed the doctors. Probably the President will be bolder to endorse some of these schemes of services that the doctors want to dissolve.

I thank you.

**The Temporary Speaker** (Sen. Wakili Sigei): Lastly, I will allow Sen. Orwoba to make her comments on the statement.

**Sen. Orwoba:** Mr. Temporary Speaker, Sir, I have been waiting patiently to add my voice to the report by the Chairperson of the Committee on Health. Before I make my comments, I would like to remind this House that this Government was voted in on the basis that we recognize each and every individual and value them.

I have been listening keenly to our Whip, Sen. Sifuna, the doctors here with Doctor of Philosophy (PhDs,) the lawyers who always remind us that they are smarter than us and all the people who think they are better than other Kenyans.

I have been sitting here wondering whether they understand that all the 47 delegations plus the 20 nominated Senators are here on a platform of equity. Whether you are a doctor, lawyer, *mama mboga*, *mama karanga* like our “Mama Haki”, the nominated Senator from Mombasa, we all sit on the same seats.

Mr. Temporary Speaker, Sir, whenever a conversation is brought to this House and I hear lawyers saying that as a lawyer--- What are you talking about? We are all Senators. We are all elected or nominated to represent the same Kenyans. It is just a reminder to this House. You might think you know everything, but just as Sen. Sifuna pointed out, we do not know everything.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Gloria, do you want to be informed by Sen. Faki?

**Sen. Orwoba:** Mr. Temporary Speaker, Sir, let me just say this. I have a background in architecture, community work and--- I do not want to be informed by a person who does not have three backgrounds with relevant and vast experiences in different industries.

Mr. Temporary Speaker, Sir, I want to remind all Kenyans, particularly our elected leaders from the Orange Democratic Movement (ODM) who campaigned very hard, but failed to convince the electorate because they came with that pride of “we are



lawyers” and “we are people”, that the Kenya Kwanza Government won on the basis of *kazi ni kazi*.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Orwoba, the Chair is reminding you to confine your comments to the statement.

**Sen. Orwoba:** I stand guided, Mr. Temporary Speaker, Sir.

I wanted to put clarity that indeed this Government was voted in by 50 plus one per cent of the Kenyan population on the basis that they were convinced they wanted a leader who recognises all people.

Sen. Sifuna could be right that we do not understand what medical interns are because one thing is clear. This issue of trying to elevate one industry as you demote or denounce others is not how we are going to conclude on how to deal with the crisis that we have with our healthcare sector.

First of all, that attitude we are expressing even in this ‘Upper’ House that some people are higher than others is the reason we have medical representatives walking out every other time. It is because of the attitude of not understanding that, first of all, you are not more special than the other. Our doctors are not in hospital.

Mr. Temporary Speaker, Sir, instead of various Senators telling us what we can do as a Senate to help in the negotiations and open that deadlock that we have, the very Senators said that our Cabinet Secretary should not have been put there because she is not a doctor.

Today we had the Cabinet Secretary for Interior and National Administration. Is he a policeman or was he a member of the Kenya Defence Forces (KDF)? Is he a major general? The answer is no. We have to start understanding that that kind of minute thinking is the reason we are not solving the health crisis. We should focus our engagement on why there is no solution on the issue of interns.

Mr. Temporary Speaker, Sir, as I finalise my---

**Sen. Crystal Asige:** On a point of order.

**The Temporary Speaker** (Sen. Wakili Sigei): What is your point of order, Sen. Asige? Sen. Gloria, there is a point of order.

**Sen. Crystal Asige:** Mr. Temporary Speaker, Sir, I would like to find out if it is in order for the Senator to say that there are Senators in this House with minute thinking. I believe she meant the opposite, that we are all here equitably. Therefore, we all have the same type of thinking that brought her here. So, there should not be segregation of those who have minute thinking and those who have otherwise.

Mr. Temporary Speaker, Sir, I want your direction on the same, so that the Senator can be guided.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Gloria, you may rephrase that reference.

**Sen. Orwoba:** I do not recall having said “minute”. However, let me say this for clarity. I have the privilege of having gone to St. George’s Secondary School. So, my English is very good. I said we should not limit our arguments to simplistic thoughts, simplifying very complex matters. It is in the HANSARD. I heard Sen. (Dr.) Khalwale say that our Cabinet Secretary who is not a doctor does not understand doctors. In that

comparison, I was reminding the House that we have the Cabinet Secretary for Interior and National Administration.

Having belaboured the point---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Gloria, please conclude.

**Sen. Orwoba:** Let me conclude on what I want to say. This Government was voted in by a majority of Kenyans because of the fact that we support equity. Our policies and all things that are in the Kenya Kwanza plan are based on equity. We actually won the election because we said *kazi ni kazi*. In that sense, I implore my fellow Senators that while they are contributing to the issues of doctors, remember that---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Gloria, there is a point of order by Sen. Eddy.

**Sen. Oketch Gicheru:** Mr. Temporary Speaker, Sir, I rise under Standing Order Nos.101 and 105.

Mr. Temporary Speaker, Sir, you have listened to Sen. Gloria executing issues of elections, how elections were won in this country. However, the agenda of the Kenya Kwanza regime are under trial in this particular conversation this afternoon. Where is relevance in this?

I do not even know the statement that Sen. Gloria is talking about that has questioned whether the current regime lost or won the elections and whether the manifesto is being followed or not. What statement is she referring to?

**The Temporary Speaker** (Sen. Wakili Sigei): You have made your point, resume your seat.

Sen. Gloria, conclude as you clarify on the issue of relevance.

**Sen. Orwoba:** Mr. Temporary Speaker, Sir, if you protected me from all these points of order, my thoughts would not have been lost. This issue of *kazi ni kazi* is a basis of the policies of Kenya Kwanza.

I am magnifying that whether you are an intern, a doctor, a lawyer, a flight attendant, a controller of air traffic, a hustler or *mama mboga*, we are not going to debate the crisis that we have in the health sector on the basis that lawyers are the ones who should be allowed to contribute.

Let me conclude by saying that I sit in the Committee on Labour and Social Welfare. The issue of CBAs is an issue that we need to legislate. Just yesterday, we were trying to ensure that a worker from one of the tea factories was compensated their dues properly. Members of the Committee on Labour and Social Welfare who are here can tell you that we found out that CBAs can even exist outside the Constitution. There was even a paragraph of a contractual agreement that can never be justified within our Constitution.

Mr. Temporary Speaker, Sir, I believe that our duty as the Senate, number one, is to legislate around CBAs. Two, is to see how we can add our voice to ensure that the deadlock is open. I welcome the idea of bringing all hands on deck because we cannot be doing the same things. We have had the same stakeholders sitting in boardrooms and they are walking out on each other. Today, it is the healthcare sectors working out of the CoG, tomorrow it is who working out on who. They have even politicised this thing.

If you ask me, the leader of the health workers is now turning into a politician. So, I am saying bring those people to the Senate because whatever they have been trying in those boardrooms with the Cabinet Secretary, is not working. Perhaps it is time that we politicians and the Senate stepped in and have a conversation. Who knows, maybe we might be the solution to whatever is happening in the healthcare sector.

Thank you, Mr Temporary, Speaker, Sir.

**The Temporary Speaker** (Sen. Wakili Sigei): Thank you, Hon. Members. That brings us to a close to the comments on the Statement by the Chairperson of the Committee on Health.

On Statements pursuant to Standing Order No.52, I call upon Sen. Mandago. You have a statement.

Sorry, Sen. Tabitha Keroche will go first.

#### STATUS OF THE MAI MAHIU FLOODS DISASTER

**Sen. Tabitha Keroche:** Thank you, Mr. Temporary Speaker, Sir. I rise pursuant to Standing Order No.52(1) to make a Statement on a matter of national and general topical concern on the current status of the Mai Mahiu flood disaster that has claimed over 62 people.

On Monday, 29<sup>th</sup> April 2024, at about 2.00 a.m. early in morning, the people of Mai Mahiu were awoken by a horrific loud bang of sound that caused a lot of panic. Little did they know it was raging waters from a gully that had built up over a period of time that burst due to ongoing heavy rains.

Before they could wake up and run away, the water had already swept them, causing painful deaths, injuries and destruction of properties, livestock, crops and their livelihoods. The 2.00 a.m. incident happened when all the people were enjoying their sleep in their respective homes.

Little did they know a tragedy was awaiting them. The tragedy claimed 62 lives, left over 100 hospitalized across Nakuru County hospitals, over 120 households destroyed, missing personnel documents, properties and businesses destroyed. Today 36 people are missing. Ninety-eight primary pupils and 36 six high school students are in dire need of moral, social, psychological and basic humanitarian support. As the Senator for Nakuru County, I have had one-on-one interaction with the victims. I confirm to this House that this is one of the worst tragedies that has hit Nakuru County. The victims are traumatized and living in fear. It is written all over their faces.

To count just a few, one family lost eight of its members during the fateful early morning incident. A similar tragedy happened six years ago when Solai Dam burst its banks and killed more than 40 people, destroyed property and left people homeless.

As we talk, victims of Solai Dam are still crying for justice. It is time we implemented the recommendations that were made by the Parliamentary *ad hoc* committee that investigated the cause of the Solai Dam tragedy. It is time that the Nakuru County Government, the Water Resource Management Authority (WARMA) and National Environment Management Authority (NEMA) provided comprehensive

inspection reports for all the dams across the county, indicating the measures taken to avoid further disasters.

I wish to call for speedy investigations into the effectiveness of existing early warning systems and whether they are being heeded by county authorities and the public. We also need, as a House, to question the capacity of personnel and management who are tasked with assessment of risks and safety of our dams. We need to know whether they have the capacity to prepare early warning systems that can be used to prevent future risks. I also call for an honest assessment of the level and magnitude of destruction that occurred in Mai Mahiu to avoid any doubts, bias and underestimations of the actual loss.

The official figures that have been released are low and do not reflect the reality of actual death and anonymous destruction of properties. We cannot appeal for help to assist the affected victims when we are not providing the right assessment of the disaster. I also call for transparency in the allocation and distribution of relief resources to ensure they reach only those affected and in dire need of relief. This will prevent corruption and mismanagement of donations. I call upon the County Government of Nakuru to ensure adequate resources allocated for disaster management in Nakuru County are used to assist the Mai Mahiu victims since they are the most affected, so far.

I wish to sincerely thank His Excellency the President of the Republic of Kenya Dr. William Samoei Ruto for visiting the victims and declaring Friday 10<sup>th</sup> May 2024 a public holiday in their honour. I thank him for ensuring complete resettlement of more than 120 families by promising compensation for the victims. He offered humanitarian support and ordered professional rescue operations led by our able Kenya Defence Forces (KDF), Kenya Red Cross (KRC), the County Government of Nakuru and the Ministry of Interior and National Administration to set up a temporary Huduma Centre. I also thank volunteers, media and local community leaders who have joined hands to assist the victims in various ways and means.

As I conclude, allow me to request all my dear colleague Senators including you, Mr. Temporary Speaker, to join me on Friday, 10<sup>th</sup> May, 2024, to visit the victims and offer moral, social, psychological and humanitarian support to Mai Mahiu flood victims. I pray that no other Kenyan shall lose life due to circumstances that can be avoided. I extend my sincere condolence to the families who have lost their loved ones, speedy recovery to those in hospitals and may the almighty God give them strength, peace, and courage that surpasses all human understanding to bear the loss of their loved ones.

I thank you.

ALLEGATIONS OF UNETHICAL TRANSPLANT  
ACTIVITIES AT MEDIHEAL HOSPITAL, ELDORET

**Sen. Mandago:** Thank you very much, Mr. Temporary Speaker, Sir. Pursuant to Standing Order No.56(1) I beg to make a Statement relating to a matter for which the Standing Committee on Health is responsible, namely the grave allegation of unethical transplant activities at Mediheal Hospital, Eldoret.

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The attention of the Standing Committee on Health has been drawn to a press release by the Kenya Renal Association, dated 3<sup>rd</sup> May 2024, regarding unethical transplant activities at Mediheal Hospital in Eldoret. The statement from the Kenya Renal Association has raised serious concerns about the reported commercialization of transplants and transplant tourism at Mediheal Hospital in Eldoret. The allegations involved the sale of kidneys from vulnerable donors and the importation of patients for transplants; actions that directly violate the Health Act of 2017, which strictly prohibits organ trafficking.

Such unethical practices not only undermine the integrity of the medical profession, but also tarnish the reputation of the Kenyan medical community on an international scale. The unethical trade in organs has led to a decline in voluntary donations and has forced a dangerous black market for organs, posing unprecedented risks to human life. This environment not only encourages trafficking, but also increases the likelihood of violence and exploitation.

In addition to the immediate risk to human life posed by the organ trafficking black market, it is crucial to recognize the broader societal implications of such an ethical practice. It erodes trust in the healthcare system, undermining the principle of medical ethics and perpetuating injustices against vulnerable individuals who are coerced or exploited into donating organs. While Mediheal Hospital has been singled out by the Kenya Renal Association, it is essential to understand that the illegal trafficking of human organs is not isolated to just one institution. Rather, it is indicative of a complex and growing global problem that involves various individual networks and facilities across the nation, region and abroad and thus necessitates a thorough investigation.

This is to inform this House that my committee is well seized of this matter and will be engaging the Cabinet Secretary for Health, the Kenyan Medical Practitioners and Dentists Council, the Kenyan Tissue and Transplant Authority and affected communities with a view of ensuring that robust and immediate action is taken and comprehensive efforts are initiated for purposes of strengthening regulation, promotion of ethical practice and building public awareness.

Mr. Temporary Speaker, Sir, I want to further appeal to the Chairperson of the Standing Committee of the National Security, Defense, and Foreign Relations to engage all necessary government agencies and departments to ensure that these criminal activities are brought to an immediate halt.

I thank you.

Mr. Temporary Speaker, Sir, allow me to also make another statement.

#### REPORTS OF TOXIC BENYLIN PAEDIATRIC COUGH SYRUP IN THE MARKET

Mr. Temporary Speaker, Sir, pursuant to Standing Order No.56(1)(a), I beg to make a statement relating to a matter for which the Standing Committee on Health is responsible, namely the presence of toxic Benylin paediatric cough syrup in the Kenya market.

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The attention of the Standing Committee on Health has been drawn to an alarming press report on the presence of toxic Benylin paediatric cough syrup in the Kenya market. Benylin cough syrup is widely used to alleviate cough, chest congestion, hay fever and allergic reactions in children between the ages of 2 and 12 years old.

On 11<sup>th</sup> April, 2024, the Pharmacy and Poisons Board issued a public alert and announced the recall of Benylin Paediatric 100 ml Cough Syrup, Batch No.329304. The syrup was manufactured by Johnson & Johnson in South Africa. The recall was prompted by an announcement from Nigeria's National Agency for Food, Drug Administration and Control, which revealed unacceptable high levels of diethylene-glycol and ethylene-glycol in the product upon analysis. Both substances are associated with acute toxicity and have been linked to the deaths of numerous children in Gambia, Uzbekistan and Cameroon since 2022. Aside from deaths, ingestion of high levels of this substance can lead to severe side effects, including abdominal pain, vomiting, diarrhoea, altered mental states and acute kidney injury.

It is indeed concerning that the Pharmacy and Poisons Board did not detect the issue with the Benylin cough syrup sooner, especially considering its impending expiration in April, 2024. The lack of clarity regarding the syrup's presence in the market, the number of affected children, the extent of the recall and the potential existence of similar harmful products raises significant concerns about public safety and regulatory oversight.

Urgent action is needed to ensure a thorough investigation into the extent of the issue, achieve a comprehensive recall of the affected product and prevent the circulation of similar harmful substances in the market. Ensuring the safety and well-being of our children is a fundamental responsibility of any society. I want to assure this House that my committee is fully aware of the gravity of this matter and will be actively engaging with the Ministry of Health and the Pharmacy and Poisons Board to gather comprehensive information and establish the facts surrounding the toxic cough syrup issue.

We are further committed to understanding the actions taken by the government to enhance pharmacovigilance and post-marketing surveillance in the country.

I thank you.

**The Temporary Speaker** (Sen. Wakiliu Sigei): Hon. Members, we are way beyond the Statement Hour. As a consequence, I will not allow any comment on these three statements that have just been read out; the first one by Sen. Tabitha Keroche under Standing Order No.52, and two by Senator Mandago, under Standing Order No.56.

I will, therefore, call the Next Order.

## BILL

### *First Reading*

#### THE INTERGOVERNMENTAL RELATIONS (AMENDMENT) BILL (SENATE BILLS NO.12 OF 2024)

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*(Order for First Reading read - Read the First Time and  
ordered to be referred to the relevant  
Senate Committee)*

Next Order, please.

## **BILL**

*First Reading*

THE COUNTY ASSEMBLIES PENSIONS SCHEME BILL  
(SENATE BILLS NO.14 OF 2024)

*(Order for First Readings read - Read the First Time and  
ordered to be referred to the relevant  
Senate Committee)*

Hon. Members, I will rearrange the Order Paper and I will call Order No.24.

## **HOJA**

KUIDHINISHWA KWA RUZUKU YA MASHARTI KWA  
UJENZI WA UWANJA WA MANISPAA YA MOMBASA

KUFAHAMU KWAMBA Sehemu ya 2 ya Ratiba ya Nne ya Katiba ya Kenya inazipa Serikali za Kaunti jukumu la kuendeleza, kuanzisha, kusimamia na kudumisha vifaa vya michezo na kitamaduni ambavyo ni pamoja na viwanja, viwanja vya michezo, vituo vya kitamaduni, na miundombinu mingine inayohusiana;

IKIKUMBUKWA KUWA ukanda mzima wa Pwani Nchini hauna uwanja wa kisasa uliojengwa kwa viwango vya kimataifa, hivyo kuwanyima wananchi manufaa yanayotokana na viwanja na vifaa vya michezo;

WASIWASI kwamba ujenzi wa uwanja wa michezo wa Manispaa ya Mombasa umekumbwa na ucheleweshaji na vikwazo tangu kuanzishwa kwa mradi huo mwaka wa 2019 kutokana na matatizo ya kifedha, ambayo yameathiri utekelezaji wa mradi na kunyima jamii eneo hilo uwanja unohitajika sana;

KWA HIVYO SASA Bunge la Seneti linaazimia kwamba Hazina ya Kitaifa na Wizara ya Masuala ya Vijana, Uchumi Ubunifu na Michezo itengee Serikali ya Kaunti ya Mombasa ruzuku ya masharti ya Shilingi bilioni 1.7 kwa ajili ya kukamilisha ujenzi wa Uwanja wa Manispaa ya Mombasa.

(Sen. Faki mnamo 23.04.2024)

(Kuendelea kwa Mjadala uliokatizwa 23.4.2024)

**The Temporary Speaker** (Sen. Sigei): Sen. (Dr.) Khalwale, you were on the Floor when the debate on the Motion was adjourned, you had a balance of 10 minutes. You may take the Floor and conclude your contribution within 10 minutes.

**Sen. (Dr.) Khalwale:** Asante Bw. Spika wa Muda. Wiki iliyopita nilikuwa nachangia Hoja hii, lakini kwa bahati mbaya nikapitwa na wakati.

Ningependa kuendelea na mchango wangu na kukumbusha ndugu zetu kutoka Pwani kwamba sisi tunawaunga mkono kwenye Hoja hii muhimu, pia kwenye kuimarisha sera ya kandanda nchini. Watu wa Pwani wamechangia kwenye umaarufu wa soka nchini. Nilikuwa napitia orodha ya majina ya wale ambao walifana sana katika uchezaji wa mpira. Nimepata kwamba kwa wale 50 bora nchini, sita wametoka Pwani. Wameongozwa na aliyekuwa mchezaji wa AFC Leopards, Mohamed Abass. Pia tulikuwa na kipa wa kimataifa Bw. Mohamed Magogo aliyekuwa wa Pwani. Bw. Amram Shimba alikuwa mchezaji Hodari. Vile vile Badi Ali, Ahmed Breik na Ali Sungura.

Bw. Spika wa Muda, kwa sababu ya mchango wa wachezaji hawa kwenye kandanda nchini, ni lazima uwanja huu wa michezo ujengwe na ukamilike ili iwe moja ya kumbukumbu. Tunatarajia kwamba ndani ya uwanja huu wataweka *hall of fame* ambapo majina ya wachezaji niliotaja itaweza kuandikwa.

Wachezaji hawa walicheza na wachezaji wengine kutoka kwangu. Babu ya bibi yangu, Elijah Lidonde, alikuwa mmoja wa wale walioshinda *Gossage Cup*, mwaka wa 1962, mashindano ambayo ilichezewa Mombasa. Elijah Lidonde alikuwa na sifa kiasi ya kwamba, kabla astaafu alikuwa amefunga mabao 32 ya kitaifa.

Naunga hii Hoja mkono kwa sababu hii ni njia rasmi ambayo tunaweza tumia kutafutia watoto wetu kule Pwani ajira. Wakati huu vijana wanaocheza kandanda wanalipwa mshahara wa juu kuliko wataalamu wengine wote. Ukilinganisha na mchezaji bora anayelitwa Erling Haaland anayechezea *Manchester City*-- Huyo kijana analipwa Kshs300 milioni kila mwezi. Talanta kama hii ambayo iko na watoto wetu kule Pwani tunataka tuikuze ili wapate ajira. Hii itakuwa njia mwafaka ya kupigana na ufisadi.

Bw. Spika wa Muda, ingawaje ndugu yetu, Sen. Faki, anatuomba tumuunge mkono kwa kuuliza Serikali kuu ijenge uwanja huu wa kitaifa, tuisahau kuwa kupitia pesa za National-Government Constituencies Development Fund (NG-CDF) waheshimiwa wawili katika taifa hili walianzisha ujenzi wa stadia. Wa kwanza alikuwa Mhe. John Michuki aliyetumia CDF kuanzisha ujenzi wa uwanja na wapili na wa mwisho ni mimi, Sen. (Dr.) Khalwale, ambaye nilianzisha ujenzi wa Malinya Stadium. Kwa hivyo, *Members of Parliament* wako na nafasi kubwa ya kuchangia maneno ya spoti.

Serikali ya Kaunti ya Mombasa, kwa sababu ya umuhimu wa spoti kwenye maisha ya watu wa Pwani, sioni kinacho zuia Gavana wa Mombasa kuendelea na ujenzi wa Mombasa Stadium, ambayo aliyekuwa Gavana Mhe. Joho alikuwa amefikiria kuijenga.

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Gavana wa Mombasa sasa hivi ambaye ni rafiki wangu wa karibu, ikiwa atatenga pesa na kujenga uwanja huu atakuwa amemfunika Gavana Joho kwa sababu Gavana Joho amebaki uchi kutokana ya maneno ya Mombasa Stadium.

**The Temporary Speaker** (Sen. Wakili Sigei): What is your point of order, Sen. Oketch Gicheru?

**Sen. Oketch Gicheru:** Bw. Spika wa Muda, nimesimama kwa kufuata Kanuni zetu za Kudumu 101 kuhusu Maudhui ya Hotuba. Sipendi kumsimamisha Seneta wa Kakamega anapoongea kwa sababu mimi huwa napenda maarifa yake kwenye Hoja kama hii.

Lakini je, ni vyema kumuongelea mtu ambaye hayuko kwenye Jumba hili kama Mhe. Joho, aliyekuwa Gavana wa Mombasa, akijaribu kuangalia na kuashiria mambo ambayo Gavana Joho alifanya, ambayo sisi kama Bunge hatuna ushahidi wowote?

Angewachana na Gavana Joho na kuzungumzia uwanja tunaoadili. Ikiwa anataka kumzungumzia Gavana Joho, alete Hoja Bungeni, na tutaongelea hoja ile kwa undani.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Oketch Gicheru, you have made your point.

**Sen. (Dr.) Khalwale:** Asante Bw. Spika wa Muda---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. (Dr.) Khalwale, I did not give you the microphone. I was directing that the point of order he has raised would only be served well if your comments are within the context of the Motion. If you are making reference to previous leaders in office, you know the extent you could name or mention them in the course of your contribution.

Go to the Motion.

**Sen. (Dr.) Khalwale:** Asante Bw. Spika wa Muda, kwa kunionyesha njia. Kwa kupitia tu, ningependa kumkumbusha Seneta wa Migori kwamba kwenye *County Public Accounts Committee*, tayari ripoti ya Mhasibu Mkuu imeonyesha ya kwamba katika ile enzi ya uongozi ya aliyekuwa Gavana wa Mombasa, hii ni ripoti ya nyumba hii---

*(Sen. Oketch Gicheru spoke off record)*

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Eddy, allow Sen. (Dr.) Khalwale to be heard in silence. He is making reference to the Auditor General's Report, which is a public document that has been tabled by the Committee.

Proceed, Sen. (Dr.) Khalwale.

**Sen. (Dr.) Khalwale:** Bw. Spika wa Muda, ningependa ndugu yangu, Sen. Oketch Gicheru, akumbuke Kanuni za Seneti hii kuwa kabla ripoti ya Mhasibu Mkuu iletwe kwa kamati huwa inawasilishwa hapa. *It is tabled* halafu ndio inaenda. Hati yoyote ikishawakilishwa hapa inamaanisha sasa iko katika rekodi ya hii Seneti. Kwa hivyo, kila Seneta ako huru kuzungumzia mambo ambayo iko katika hiyo ripoti.

Hii ndio maana nilikuwa nasema tena kwa heshima kwamba ndugu yangu Gavana wa sasa, Abdulswamad, ikiwa atanzisha ujenzi huu, atakuwa amemufunika uchi ndugu yetu Mhe. Joho. Hii ni kwa sababu, hundi ya Kshs500 milioni aliyotumia kwa huo uwanja wa michezo haijulikani mahali ilienda.

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Kwa hayo machache ninaunga mkono.

**The Temporary Speaker** (Sen. Wakili Sigei): Proceed, Sen. Beth Syengo.

**Sen. Beth Syengo:** Asante, Bw. Spika wa Muda, kwa kunipa nafasi hii kuchangia Hoja ambayo imeletwa na Seneta wa Mombasa kuhusu ujenzi wa uwanja wa kimataifa wa michezo kule Pwani, Mombasa.

Hakika wana Pwani ni wapenda michezo, riadha, mipira na wanahusika sana kwa mambo ya michezo ambayo inapendeza. Tunajua kwamba wana Pwani wanapenda starehe na kwa hivyo ni vyema kupata uwanja wa michezo ambao utawapa hiyo nafasi ya kufurahia, kushangilia, kuhudhuria na kuhusika ndiposa hata wao wausike kwa ujenzi wa taifa.

Tunajua kwamba wakiwa na talanta za michezo kama mipira ama aina zozote zile za michezo, itakuwa inawapa mapato ya kila siku. Wanaweza kupata fedha na watajijenga kibinafsi kama jamii na itakuwa ya maana sana.

Bw. Spika wa Muda, Kenya inatarajiwa mwaka huu kuandaa michezo ya East Africa Legislative Assembly (EALA) games ya wabunge wa Afrika Mashariki. Kwa hivyo, hizo bunge zote zikija pamoja kutoka nchi tofauti tofauti, tunahitaji uwanja kama huo unaopendekezwa hapa. Kwa kweli, tumependekeza kwamba michezo kama hii ifanyike kule Pwani. Huo uwanja ungekuwepo basi ungekuwa ya maana sana. Badala ya kutoa wachezaji kutoka Mombasa na wengine wakacheze kule Kwale, Nyeri ama kaunti tofauti tofauti, yote yangefanyika katika kaunti ya Mombasa.

Kwa hakika itakuwa njia moja ya kuajiri vijana wetu na wanarika kwa kukuza talanta zao na wajitokeze kwa wingi kupata mapato ya maisha yao. Uwanja kama huu ni muhimu hata ninaona kama umechelewa. Ungefanyika mapema. Kama Serikali Kuu imefadhili viwanja kama hivi kwingine, kwa nini isifanyike Pwani?

Tukiangalia kwa orodha ya kaunti vile Mungu alitumia waliohusika kuandika na kuleta Katiba mpya ama katiba iliyoko saa hii, Mombasa inaitwa Kaunti 001, kwa hiyo tunaanzia huko. Hata mambo ya michezo ianze kutoka Pwani ikienda kule kwingine.

Ninamuheshimu sana Seneta wa Kakamega, Sen. (Dr.) Khalwale, na ni rafiki yangu wa karibu. Kama vile, amesema hakika kuna wale wanatalanta kutoka kule Pwani. Tumeona wameletea nchi yetu ya Kenya sifa mara dufu. Kwa hivyo, ni vizuri wawe na uwanja kama huu. Ni vyema wajivunie kwamba waliotangulia kuwa wachezaji kuletea sifa katika nchi ya Kenya, pia wanakotoka kumekuwa na uwanja wa kimataifa. Wako na nafasi ya watoto wao ile talanta ipitie kutoka kwa wazazi, iende kwa watoto hata kwa vitukuu.

Asante, Bw. Spika wa Muda, kwa sababu hili ni jambo la muhimu. Niongeomba pande zote mbile, pande ya Serikali na Upinzani, sisi wote tuunge mkono hii Hoja iliyoletwa na Seneta wa Mombasa, Sen. Faki, ili tujenge Kenya pamoja.

**The Temporary Speaker** (Sen. Wakili Sigei): Proceed, Sen. Mungatana.

**Sen. Mungatana, MGH:** Bw. Spika wa Muda, ningependa kuchukua nafasi hii nami pia nitoe maoni yangu kuhusu Hoja hii iliyoletwa na Sen. Faki, ili kujengwe uwanjwa wa kimataifa sehemu ya Pwani.

Hoja hii ni muhimu kwa sisi sote ambao tunatoka sehemu hiyo. Ukweli wa mambo ni kwamba sisi tulipokuwa watoto tulikuwa tukienda ufukoni kule kuogelea na

lazima pia tungecheza boli. Ni kama ni kawaida yetu mkiwa watoto watu wanaenda ufukoni, wanaongelea na kucheza boli na hiyo ni kitu kinayochofanywa kila siku. Kwa hivyo, ile tamaduni ya kucheza mpira uko sana sehemu za Pwani. Sisi tukiona kwamba sehemu zingine kunajengwa nyuga kubwa kubwa za kimataifa, lakini sehemu yetu ya Pwani haijajengwa uga kama huo, hatusikii vizuri.

Mimi naunga mkono hii Hoja. Pia ninakumbuka nilipochaguliwa mara ya kwanza kama Seneta, kulikuwa na ratiba ya Serikali Kuu ambapo Waziri alisema wana haja ya kujenga viwanja vya kimataifa katika Kenya. Mimi nilienda kuomba mahali ambapo Serikali Kuu waweza kuweka hela ama raslimali ili kujengwe uwanja wa kutosha katika Tana River. Kati ya vitu ambavyo vilikuwa vinatakinana ni mahali pa kujengwa. Nilifuatilia kwa Wizara na walisema kabisa kwamba Munispaa ya Mombasa, ule uwanja ni mdogo na nafasi ni ndogo ilhali wanataka kujenga mahali pakubwa.

Mimi niliweza kuwaambia kwamba Tana River kuna nafasi kubwa. Kaunti yetu ni kubwa na ina nafasi ya kutosha ya kujenga uwanja mkubwa wa kimataifa. Uwanja ambao utatumika, sio kwa michezo tu lakini pia kwa mambo ya *training* na mambo kama hayo.

Watu hufikiria kwamba Tana River ni mbali lakini ukitoka Malindi na utembe tu kwa saa moja unafika Garsen hapo karibu na uto wa bahari. Lakini waliniambia uwanja wa Mombasa uko na shida ingine. Kwamba kuna mradi ambao ulianzishwa pale, pesa zilitumika vibaya. Wasimamizi wa huo mpango waliharibu kwa kufuja pesa za wananchi. Kwa hiyo, wao kama Serikali Kuu hawawezi kuingilia mpaka maswali yajibiwe.

Kwa hivyo, mimi ningesema kwamba sisi kama watu wa Pwani ni kweli tunataka uwanja wa kimataifa wa kisasa ujengwe, lakini tuseme ati sasa pesa zilizowekwa pale zimepotea na hazijulikani ziko wapi. Halafu tena tuseme Serikali Kuu ije iweke hapo. Naona kama hapo hatutaelewana. Kwanza, wale waliohusika wakamatwe ili tujue pesa zile zilienda wapi, halafu baada ya hapo, Serikali kuu inaweza kuingilia kati. Lakini mambo ya kufichiana si mazuri. Ikiwa magavana wengine wa serikali zilizopita wanafuatwa hata wakishamaliza muhula wao, kwa nini wengine wasifutwe? Kama kuna pesa ziliingizwa pale na zimepotea, kwa nini tusiulize maswali? Tunataka ukweli ujulikane kabla ya pesa zengine kuwekwa pale.

Namshukuru Gavana Abdulswamad kwa sababu hajaweka pesa pale mpaka maswali yajibiwe ili tujue ukweli ukoje. Tujue zile pesa zilizowekwa pale mwanzo ziko wapi, halafu tuendele na kujenga. Na sio lazima ijengwe pale Mombasa *Town* kwa sababu hakuna nafasi ya kutosha. Watu wanaweza kuenda nje kama Mtwapa kuelekea Kilifi ambapo mashamba yako ya kutosha na nafasi iko. Watu wajenge uwanja wa kisasa.

Lakini kufichiana kwa kusema Serikali kuu ije iweke pesa, hizi pesa ni zetu. Haiwezi kuwa tunatumia tu ilhali wengine wanajificha na wamepata utajiri ambao haeleweki.

Bw. Spika wa Muda, Hoja hii igeuzwe kidogo. Ni kweli tunakubaliana kwamba tunataka uwanja, lakini isiwe kwamba tunafichiana. Kwanza ukweli ujulikane ndio Serikali kuu iingilie.

Kwa hayo machache, Asante Bw. Spika wa Muda.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Omogeni, proceed.

**Sen. Omogeni:** Bw. Spika wa Muda, pia mimi naomba nizungumze kwa lugha ya taifa. Nasimama kuunga Hoja hii iliyoletwa na rafiki yangu, Seneta wa Mombasa, Sen. Faki.

Wakati tulipokuwa tunaangalia mpira wakati nikiwa mdogo, siku zile ambazo timu yetu ya Harambee stars ilikuwa inawika sana, tulikuwa tunamheshimu *goalkeeper* mmoja aliyeitwa Mohamed Abass. Yeye alianza kucheza mpita akiwa kule Mombasa, akichezea timu iliyokuwa inaitwa Feisal Football Club kule Mombasa, na akaja akajiunga na Club ya AFC Leopards, na akawa *goalkeeper* maarufu sana katika kanda ya Afrika Mashariki na hata Kati. Wakati huo huo kulikuwa na mashindano yanayohusisha nchi za Afrika Mashariki na Kati.

Kwa hivyo, watu wa Mombasa wanapenda sana mpira sana. Ikiwa Seneta wao, ambaye ni mchezaji shupavu sana, ambaye huwa anachezea timu ya Bunge la Kitaifa katika michezo ya Mabunge ya Afrika Mashariki, ameleta Hoja hii kuomba kwamba apewe Kshs1.7 bilioni ili Kaunti ya Mombasa ijenge uwanja wa mpira, namuunga mkono.

Bw. Spika wa Muda, unavyojua michezo katika nchi za ulaya ni kati ya *industries* ambazo zimepatia umaarufu vijana wengi na wameweza kujisimamia kupata hali nzuri ya maisha kupitia michezo. Kwa hivyo, naomba Maseneta wote waunge mkono Hoja hii iliyoletwa na Mhe. Faki. Kenya tumewasilisha maombi ya kufanya ile michezo ya Africa Cup of Nations (AFCON). Kama tunataka kushinda katika ombi letu la kuwa na hiyo michezo katika nchi yetu, sharti tuwe na viwanja vilivyo katika hali ya kimataifa. Miji yetu mikuu kama Kisumu, Nakuru, Mombasa na Kakamega inahitaji viwanja vilivyoko katika viwango vinachokubaliwa kimataifa na lile shinikizo la kandanda la Federation Internatinal de Footbal Association (FIFA). Kwa hiyo, naunga Hoja hii ya Mhe. Faki. Mwaka huu tutakuwa na bahati sana Mungu akitujalia kuwa waandalizi wa michezo ya Mabunge Afrika Mashariki na Mombasa ndio mji utakaohost michezo hiyo.

Tutakuwa tumepeleka ujumbe mzuri kwa watu wa Pwani sisi kama Wabunge tukienda kule kwa hii michezo. Pia tuwapatie zawadi kuonyesha kama Serikali kuu, tumewapatia pesa ya kujenga uwanja wa kimataifa wa mpira kule kaunti ya Mombasa.

Maneno ya kujenga viwanja hivi sio rahisi. Katika kaunti ya Nyamira, tumejaribu kuujenga uwanja kwa miaka 12 sasa na bado hatuna uwanja. Kila wakati tunapomwalika Gavana wetu aje, yeye husema tungoje miezi sita ili uwanja ujengwe. Hadi sasa hivi hatuna uwanja. Hapo awali tulikuwa na wakimbiaji kutoka kaunti yetu ambao walishinda medali ya dhahabu katika michezo ya miaka 1972 kule Munich, Berlin, Nyandika Maiyoro. Kwa hivyo, sisi ni watu wanaopenda michezo sana. Ukitazama michezo ya kukimbia mita 800, anayevunja rekodi sasa ni mtoto wetu kutoka jamii ya Omogusii, Hellen Obiri. Akiingia uwanjani kukimbia mbio za mita 10,000 ama katika *marathon*, wakenya wote wanatazama runinga. Mara nyingi anatuletea dhahabu sisi. Kama Seneta wa kaunti ya Nyamira, ningependa Gavana ambaye naheshimu sana, Mhe. Amos Nyaribo, ajikakamue na amalize ujenzi wa uwanja wa Manga. Hakuna mtu hata gavana mwenyewe anaweza kujenga nyumba yake zaidi ya miaka 12. Ukiamua

kuwafanyia wakaazi wa kaunti kitu, fanya kwa haraka. Huwezi kutumia hizo pesa zote na baada ya miaka 12 haujamaliza uwanja huu. Hili ni jambo ambalo halifai.

Rafiki yetu Gavana wa kaunti ya Mombasa, ambaye ni kijana wa mzee tuliyeenda sana, hon. Sharrif Nassir, akipata hizi pesa kwa kibahati tunamwomba azitumie vizuri na ahakikishe kuwa wakaazi wa Mombasa wamepata uwanjwa wa mpira ambao utakuwa wa kiwango cha kitaifa kama vile vingine.

Sijui kama kuna timu ambayo inacheza kwenye *Kenya Premier League* kutoka Mombasa?

**The Senate Minority Leader** (Sen. Madzayo): Bandari FC

**Sen. Omogeni:** Kuna Bandari FC? Ningependa imenyane na timu yetu kutoka Gusii inayoitwa Shabana pale Mombasa. Tukienda pale tunasema 'turebobe' kwa lugha ya Kisii. Hiyo ndio *slogan* yetu.

Acha tuwasaidie vijana wetu wapate uwanja mzuri. Unaweza amka kesho upate - kama tunaoenda kutazama mechi ya Bayern Munich na Real Madrid FC- kijana kutoka kaunti ya Mombasa akicheza katika European Champions League.

Akicheza kule sisi wote tutakuwa tunajivunia kama Wakenya. Akienda kule pia atakuwa anasaidia kunawirisha uchumi wetu. Ningependa pia kumweleza Seneta rafiki yangu ambaye ameingia. Nilisikia kuwa alichangia maneno ya madaktari na kusema kuwa wanafaa kulipwa kama mawakili ambao hawajahitimu. Namwomba rafiki yangu, Sen. Cherarkey, akumbuke Waswahili husema usitukane mkunga uzazi ungalipo. Siwezi kamtusi daktari kwa sababu ninaweza toka hapa nijipate niko katika mikono ya daktari. Nikienda hospitalini ningependa nipewe huduma na daktari ambaye amelipwa mshahara na serikali yetu na ambaye ana pojo nyumbani, ili atuhudumie vizuri.

Bw. Spika wa Muda wanaoumia sana katika mgomo huu ni---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Omogeni, there is a point of order by Sen. Cherarkey.

**Sen. Omogeni:** Seneta ako na Hoja ya nidhamu?

**The Temporary Speaker** (Sen. Wakili Sigei): Kindly resume your seat.

**Sen. Cherarkey:** Bw. Spika wa Muda, kulingana na Kanuni ya Kudumu ya Seneti 105 lazima Seneta awe na uhakika na yale ambayo anasema na yanayonakiliwa katika rekodi ya Taarifa rasmi ya Seneti.

Je, ni kweli kwa kiongozi, Wakili, Sen. Omogeni, kuonyesha dhana ya kwamba mimi mstahiki na mwenye heshima zangu kama kiongozi, nadhalilisha ama nakosa heshima kwa madaktari? Hiyo ni haki kweli ilhali mimi najulikana kumheshimu kila mtu hata yule hajazaliwa? Naomba aondoe na aombe msamaha mara moja.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Cherarkey, the record is clear that he did not make specific reference to that.

Sen. Omogeni, proceed.

**Sen. Omogeni:** Nafurahi sana kwa sababu rafiki yangu Mhe. Cherarkey sasa amegundua umuhimu wa madaktari na amesimama hapa kuwaomba msamaha. Ingekuwa jambo la kustaajibisha sana kama angerudi nyumbani na alale, ilhali ameongea vibaya kuhusu madaktari. Kwa hivyo, katika kitengo cha uwakili, mimi naitwa mshauri mkuu

ama wakili mwandamizi. Kwa hivyo, nikizungumza lazima unielewe. Nakushukuru sana Mheshimiwa kwa kusimama na kuomba madaktari msamaha.

Bw. Spika wa Muda, nilikuwa nazungumzia hoja ya madaktari---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Omogeni, there was no point of order from Sen. Cherarkey that I directed that you respond to. So, conclude on the Motion by Sen. Faki.

**Sen. Omogeni:** Wacha nimalize. Kuhusu maneno ya madaktari walio kwenye mgomo, kampuni za bima ya afya hazipeani bima kwa walimu waliotufundisha kule nyumbani na wazazi ikiwa wamefika miaka 80 na zaidi. Kwa hivyo, wale wakenya wanaoumia zaidi ni wazazi wetu.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Omogeni, you are contributing to the Motion by Sen. Faki. That debate on the Statement on the ongoing strike by the doctors was concluded.

**Sen. Omogeni:** Naomba msamaha. Ni kwa sababu madaktari wakiwa wamegoma hulali. Ndio maana nikaonelea 'niibe' dakika moja nizungumzie kwa sababu sijui wakati nitahitaji daktari. Naweza kuwa kule Nyamira na niugue homa. Nitakimbia katika Hospitali Kuu ya Nyamira kupata huduma ya dharura. Ndio maana nazungumza kwa dakika moja tu kwamba Serikali yetu ijaribu kutafuta suluhisho. Sisi kama viongozi hatulali.

**The Temporary Speaker** (Sen. Wakili Sigei): Your apology is accepted. Kindly conclude on the Motion by Sen. Faki.

**Sen. Omogeni:** Tunapokea simu nyingi mno kutoka kwa wale ambao tunawakilisha hapa. Sitaki kuzungumza zaidi ya hayo.

Nimesimama kuunga mkono Hoja ya rafiki yangu, Seneta wa Mombasa, Seneta mwenye bidii sana. Sio wengi wanafikiria kuja kuomba pesa kupelekea gavana kujenga uwanja wa mpira. Namshukuru sana Sen. Faki kutoka Mombasa. Na pia, naomba maseneta wenzangu waunge Hoja hii mkono ili tumpe hizi fedha wajenge uwanja wa mpira katika kaunti ya Mombasa.

Asante.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Oketch Gicheru, you may have the Floor.

**Sen. Oketch Gicheru:** Asante sana, Bw. Spika wa Muda. Pia mimi namuunga mkono ndugu yangu Sen. Faki, ambaye ni Seneta maarufu na mwenye bidii katika Bunge; kwa hii hoja ya kuidhinishwa kwa ruzuku ya masharti kwa ujenzi wa uwanja wa manispaa ya Mombasa.

Mombasa ni Jiji la pili katika nchi yetu. Ni aibu kubwa kwa jiji la pili katika nchi yetu kukosa uwanja au vifaa vya kisasa vinavyoashiria mambo ya michezo na kitamaduni. Tunafaa kuwa na vifaa vya kisasa kule Mombasa. Hii ni kwa sababu, utapata Nairobi iko na vifaa kumi kama hivi na Mombasa hamna. Inafaa hivi vifaa visaidie watu ambao wanaenda kule Mombasa na Wapwani pia. Hii Hoja inafaa kuashiriwa kwa undani na sisi kama Seneti.

Ukiangalia kule Pwani, unapata kila saa, sisi huongelea maneno ya vijana kutumia mihadarati. Tumeongea kuhusu janga la mihadarati kule Pwani kwa miaka na

mikaka. Mimi kama kijana anayetoka jamii inayopenda michezo, sikujua kwamba ukienda Pwani hautapata viwanja kule. Vijana wanaweza enda kucheza na pia wafunzwe maneno mazuri ili wajikinge na lile janga la kukaa tu bila michezo au kuhusishwa na mambo ya michezo kila saa. Ni muhimu sana vile Seneta wa Mombasa ameonelea ni vyema Jiji la Mombasa liwe na uwanja kama huu. Sisi kama Seneti tunafaa kuunga hii Hoja mkono ili uwanja ujengwe pale.

Jambo la tatu, ukiangalia historia ya Kenya, kuna jamaa anayeitwa Dennis Oliech. Huyu kijana ni wa pili Kenya hii, nyuma ya kijana anayeitwa Ouma William Chege kwa kuweka mabao katika michezo ya kimataifa. Ouma William Chege alifunga mabao 35 na Dennis Oliech alifunga mabao 34 wakati walikua wanachezea timu ya Harambee Stars.

Bw. Naibu wa Spika, huyo Dennis Oliech mwaka wa 2004, alisimama na nchi yetu wakati tulikuwa tunajaribu kuingia michezo ya African Cup of Nations (AFCON). Yeye ndiye alifunga lile bao lilitupeleka pale ili tucheze mpira kwa hiyo michezo.

Wakati tulipokua tunashiriki mashindano hayo kule Burkina Faso, tulifunga timu ya Burkina Faso mabao matatu kwa nunge na Dennis Oliech ndiye alikua wa kwanza kufunga hayo mabao. Mpaka leo Dennis Oliech hajawahipatiwa ile heshima yake katika nchi yetu.

Ukiangalia kule Mombasa na Pwani yote, kuna vijana wanacheza mpira wa hali ya juu sana, lakini ndoto zao za kwenda mbali au kuchezea vilabu vikubwa nje ya nchi au bara la Africa haziwezi timika kwa sababu hawapati vifaa vya kisasa ili wajiendeleze kimchezo na wasimamie jamii zao. Sisi kama jamii ya Kenya, tunajua wachezaji kama wanariadha, wanasoka na wa michezo ingine iliyo nchi yetu ni watu wanaotelea nchi yetu sifa kubwa sana.

Itakuwa juhudi yetu kama Seneti ili kusaidia Sen. Faki apate hizi pesa na apelekee Ustadh mwenyewe, Sultan wetu pale, Gavana Abdulswamad Nassir, ili atengeneze huu uwanja ili vijana wa Mombasa wapate nafasi ya kucheza soka vilivyo.

Bw. Spika wa Muda, nimeona pia Serikali ya Kitaifa imejaribu kutengenezea vijana kazi. Wabunge wa Jumuiya ya Afrika Mashariki watakakuja huku kushiriki michezo ya kila mwaka. Kwa hivyo, ni vyema watu wa Mombasa wapewe pesa kwa haraka ili Uwanja wa Michezo wa Manispaa ya Mombasa utengenezwe ili vijana wa Pwani wapate kazi.

**The Senate Minority Leader** (Sen. Madzayo): On a point of information, Mr. Temporary Speaker, Sir.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Eddy, uko tayari kupashwa habari na Sen. Madzayo?

**Sen. Oketch Gicheru:** Huyu ni mkubwa wangu na pia anatoka Pwani. Kwa hivyo, Sen. Madzayo anakubaliwa kunipasha habari wakati wowote.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Madzayo, mjulishe tafadhali.

**The Senate Minority Leader** (Sen. Madzayo): Bw. Spika wa Muda, ningependa kumjulisha ndugu yangu kwamba jina la Gavana wa Mombasa ni Abdulswamad Sherrif Nassir. Amesema jina lingine ambalo halipo.

**Sen. Oketch Gicheru:** Nashukuru Sen. Madzayo. Nilidhani nazungumza kwa Kizungu. Hii ni mara yangu ya kwanza kuchangia kwa Kiswahili. Nilidhani kwamba

nimesema jina lake kwa Kiswahili. Inaonekana umesema jina lake kwa Kizungu. Nakubali kwamba jina linafaa kutamkwa sawa katika Kiswahili na Kizungu.

Mwisho ni kwamba kulingana na Kipengele cha Katiba 203, Serikali Kuu ina uwezo kupatia Kaunti ya Mombasa pesa--- Kabla Sen. Stewart azungumze, nilikuwa nasema kwamba Wabunge wa Jumuiya ya Afrika Mashariki watakuja katika nchi yetu kushiri michezo inayofanyika kila mwaka. Ingekuwa vyema kama pesa zingepolekwa---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Eddy, Sen. (Dr.) Khalwale ana Hoja ya nidhamu.

**Sen. (Dr.) Khalwale:** Bw. Spika wa Muda, naomba kumsahihisha Seneta wa Migori, kupitia Kipengele Nambari 105 cha Kanuni za Kudumu. Si haki kupotosha taifa kwamba mchezaji ambaye amefunga mabao mengi ni Dennis Oliech. Ningependa kukufahamisha kwamba Dennis Oliech aliwahi kufungia timu ya taifa mabao tisa. Michael Olunga amefunga mabao 50. Chege Ouma amefunga tisa na Victor Wanyama amefunga 58.

*(Applause)*

**An hon. Senator:** Umetoa wapi hiyo?

**Sen. (Dr.) Khalwale:** Inatoka kwenye mtandao ambao huweka rekodi za kitaifa. Nakuomba utafute kwenye *Google*.

**Sen. Oketch Gicheru:** Bw. Spika wa Muda, nimekuwa katika Bunge hili sasa unaelekea mwaka wa pili. Sijawahi kuona Seneta wa Kakamega akicheza hata mchezo wa akina mama wa kufunga mpira na kamba. Unajulikana kama "*bladii*."

*(Laughter)*

Sijawaji waona wakicheza. Pia sijawaona wakicheza ule wa vikapu. Hata hiyo *bull fighting* ambayo anasema anacheza---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Eddy, you understand the Standing Orders of this House. Should you want to proceed in English, please do so.

**Sen. Oketch Gicheru:** Sasa Bw. Spika wa Muda, alijaribu kunikosoia na nikasema ya kwamba ningependa kumsaidia kwa sababu haelewi mambo ya mpira. Nimesema ya kwamba kabla mchezaji Ouma Chege astaafu alifungia timu yake ya Harambee Stars ambayo ni timu ya Taifa, mabao mengi. Hatuwezi ongea kuhusu Olunga kwa sababu hajastaafu kucheza mpira. Bado anacheza mpira.

Ouma Chege alistaafu akiwa amefungia Harambee Stars mabao 35. Oliech alifungia Harambee Stars mabao 34. Ndiposa nilikuwa nasema kabla ya kustaafu. Na unajua kwa sababu yeye ni daktari ambaye hakustaafu kabla kuingia kwa siasa, hajui maana ya kustaafu.

Sasa nitamwambia maana ya kustaafu nje ya Bunge.

Namalizia kwa kusema, ingekuwa vizuri kwa sababu Katiba, katika Kipengele cha 203 inapatia Serikali ya Kitaifa mamlaka ya kupatia kaunti pesa za ziada wakati wowote ingetaka kufanya hivyo.

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Mwezi huu tunatengeneza bajeti. Ningeomba kwa niaba ya watu wa Pwani na ndugu yangu Sen. Faki, Serikali iende kwa haraka iwape hii pesa ili waanze kutengeneza hivi viwanja mwezi wa saba au wa nane. Wakati Jumuiya ya Wabunge ya Africa Mashariki watakuja Mwezi wa 12, ingekuwa bora zaidi tuwe na ule uwanja pale Mombasa ili watu wajumuike.

Hata wewe Bw. Spika wa Muda Wakili Sigei, juma lililopita nilikuwa kwako. Nilipata umeandaa mchezo mkubwa pale. Uliona vile uwanja ulikuwa umefurika pale Bomet. Vijana, wamama, wazee na jamii yote walikuwa wamekuja kucheza mpira pale Bomet. Hata mimi, nilikuwa niko na furaha zaidi kwa sababu jamii yote ilikuwa imejumuishwa katika mchezo.

Ni vyema watu wa Pwani wangukuwa na ile cheche na mbwembwe, haha na hoihoi wakati watakapo pata uwanja mzuri ulio na vifaa vya kisasa wacheze mpira na wajumuike na Wakenya kufurahia kuwa na uwanja mzuri.

Kwa hivyo, naiunga hii Hoja ya ndugu yangu Sen. Faki. Ningependa kusema kama kijana barubaru ambaye yuko katika Seneti---

**The Temporary Speaker** (Sen. Wakili Sigei): Muda wako wa kuendelea umeisha.

**Sen. Mandago:** Asante Bw. Spika wa Muda. Nachukua nafasi hii pia kuchangia Hoja ya Uwanja wa Manispaa ya Mombasa. Kwanza kabisa niseme mambo ya viwanja katika Taifa la Kenya ni ya muhimu sana.

Nikichangia katika Hoja hii ya Sen. Faki ni kwamba, sio Uwanja wa Manispaa ya Mombasa pekee ambao umecheleweshwa. Katika Kaunti ya Uasin Gishu, tuko na uwanja wa kihistoria wa Kipchoge. Sehemu hiyo ndio imetoa wanariadha wengi waliobobea kwa michezo ya kimataifa na kuleta fahari nchi hii ya Kenya. Kwa hivyo, wakati tunakadiria jinsi Uwanja wa Manispaa wa Mombasa utashughulikiwa, pia viwanja vingine kama Uwanja wa Kipchoge Keino kule Eldoret, Kamarin kule Elgeiyo Marakwet County na pia Uwanja wa Kipchoge Keino kule Kapsabet, ni baadhi ya viwanja ambavyo vinafaa kuwa vimeshughulikiwa na Serikali. Pia isitoshe kuwa Serikali ya Kaunti ya Mombasa itumie pesa iliyopewa kwa ugatuzi wa Mombasa kujaribu kuboresha huo uwanja.

Mambo ya michezo ni ya muhimu sana kwa viwango vyote hasa vijana. Tukiweza kupata nafasi mahali pazuri pa kufanya michezo, vijana wetu watahepukana na mambo ya mihadarati na upotovu wa nidhamu katika muda ambao wangetumia kufanya michezo uwanjani.

Ninaunga mkono Hoja hii na kusema kuwa wanapongojea fedha kutoka kwa Serikali Kuu hata wao kama Serikali ya Ugatuzi ya Mombasa waweze kuiweka kwa orodha ya kwanza kwa baadhi ya mambo ya maendeleo ambayo wanafaa kuyatekeleza kwenye kaunti yao.

Naunga mkono.

**The Temporary Speaker** (Sen. Wakili Sigei): Hon. Senators, that brings us to a close on the contributions to this particular Motion, and there being no other person interested in contributing, I will call upon Sen. Faki, to reply.

**Sen. Faki:** Asante Bw. Spika wa Muda kwa kunipa fursa hii kujibu hoja zilizotolewa na Maseneta kuhusiana na Hoja hii ya Kuidhinishwa kwa Ruzuku ya Masharti kwa Ujenzi wa Uwanja wa Munispaa ya Mombasa.

Kwanza, ningependa kuwashukuru Maseneta wote ambao waliweza kuchangia Hoja hii: Sen. Madzayo, ambaye aliunga mkono wa kwanza, Sen. Maanzo, Sen. Cherarkey, Sen. Olekina, Sen. (Dr.) Khalwale, Sen. Beth Syengo, Sen. Mungatana, Sen. Omogeni, Sen. Oketch Gicheru, na mwisho, Sen. Mandago, ambao walichangia kwa lugha ya Kitaifa ya Kiswahili.

Jambo la kufurahisha ni kwamba Hoja hii tumeizungumzia na kuichangia kwa lugha ya Kitaifa ya Kiswahili. Ni mara ya kwanza kwa Hoja kuletwa katika Bunge hili kwa lugha ya Kiswahili na kujadiliwa kwa Lugha ya Kiswahili mpaka ikakamilika.

Ningependa pia kushukuru mchango wa Maseneta wote ambao wamechangia Hoja hii. Wamesisitiza umuhimu wa kuwepo kwa uwanja wa kimataifa katika eneo ya Mombasa. Kwa mfano, sasa hivi, uwanja unaotumika wa Shirika la Bandari (KPA), lakini kwa sasa, wameufunga kwa sababu wanaufanyia marekebisha. Uwanja mwingine ambao unaweza kutumika na timu ya Bandari ni Uwanja wa Ukunda na Ukunda ni karibu kilomita 40 kutoka Jiji la Mombasa.

Hali hii inaonyesha kwamba ipo dharura ya kukamilishwa kwa uwanja huu ili watu waweze kupata nafasi ya kuona michezo ya kimataifa. Vile vile, kushughulika na maswala mengine kwa sababu, uwanja sio wa mpira peke yake, lakina uwanja huu utakuwa na kidimbwi cha kuogelea, *hall (auditorium)* ya Sanaa. Kwa hivyo, ni uwanja ambao ni kamili kabisa.

Swala lingine ni kwamba, sio kwamba Kaunti ya Mombasa haijaegeza hakika uwanja huu, lakini pesa zile ambazo wanaegeza kwa mfano katika bajeti ya mwaka 2023/24 waliweka Kshs80 milioni peke yake. Shilingi milioni 80 hazitoshi jambo lolote. Milioni 80 inatajikana zilipe askari wanaolinda pale na pia kulipia usafi katika uwanja ule. Hizo ni pesa ambazo itachukua zaidi ya miaka kumi au 20 kukamilisha ujenzi wa uwanja ule.

Ningependa pia kuguzia maswala ambayo Sen. (Dr.) Khalwale ameyaguzia hapa kwamba kulikuwa na ubadhirifu wa pesa Kshs500 milioni. Hakuna ushahidi wowote kuonyesha ya kwamba kulikuwa na ubadhirifu wa fedha zikijumuisha kufikia Kshs500 milioni. Kwa sasa, Serikali kuu imepeleka wahandisi kutoka kwa Idara ya *Public Works* kuangalia na kutathmini ile kazi ambayo imefanyika pale. Wahandisi hawa wote wametoa ripoti ya kwamba kwa sasa hakuna pesa ambazo zimeweza kufujwa.

Kwa hivyo, sio kweli kama alivyosema Sen. (Dr.) Khalwale wakati alipotoa machango wake mara ya kwanza na leo pia alipokuwa akiendelea kutoa mchango wake kusema kwamba kulikuwa na ubadhirifu wa zaidi ya Kshs500 milioni.

Ripoti zote za Mhasibu Mkuu, yaani *Auditor-General*, ambazo zimekuja katika Bunge hili, hakuna ripoti yoyote ambayo imesema ya kwamba kuna pesa Kshs500 milioni ambazo zimepotea katika uwanja wa Manispaa ya Mombasa. Kama Sen. (Dr.) Khalwale ana ripoti hiyo, kesho ailete katika Bunge hii ili tuiangalie na tuone kama pesa hizo zimebadhirishwa, basi tutaondoa Hoja hii ili kwanza tuangalie maswala ya pesa zilizopotea kabla ya kurudi hapa.

Mchango mwingine umetoka kwa Sen. Mungatana. Unajua siku zote jicho linaona lakini jicho pia huingia kitakataka. Nashangaa Sen. Mungatana anazungumzia maswala ya Mombasa akisema kuwa tuangalie tusifuje pesa za serikali. Lakini tukiangalia Kaunti ya Tana River, haina hata uwanja wa *stadium*. Huu ni mchango ambao sio wa Mombasa pekee, lakini Pwani nzima. Uwanja huu utafaidi timu kutoka Tana River, Lamu, Kilifi---

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Madzayo, una Hoja ya nidhamu?

Sen. Faki mpe nafasi Sen. Madzayo.

**The Senate Minority Leader** (Sen. Madzayo): Bw. Spika wa Muda, najua ndugu yangu anakielewa Kiswahili sana, lakini sio sawa alivyosema kuwa “macho huingia takataka”. Macho huingia vumbi ama mchanga. Akisema macho inaingia takataka, makaratasi yataingia kwenye macho? Je, ni sawa kwa ndugu yangu kusema takataka zinaweza kuingia kwenye macho?

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Faki, Kiswahili kinatatiza, lakini rekebishwa maneno yako kama vile Sen. Madzayo amesema.

**Sen. Faki:** Bw. Spika wa Muda, kauli niliyotoa ni kwamba jicho linaingia taka aka. Mhe. Bifwoli atakubaliana na mimi kuwa jicho linaweza kuingia kitakataka usiweze kuona sikusema takataka lakini kitakataka, yaani, *particles* kwa Kiingereza. Sen. Madzayo, fungua masikio wazi kwa sababu saa zingine maneno yataingia huku na kutoka kule.

Uwanja huu hautafaidi Kaunti ya Mombasa pekee lakini utafaidi Pwani na nchi nzima. Hivi sasa tunapozungumza hatujui iwapo michezo ya Wabunge itafanyika wapi Mombasa. Hoteli tuko nazo lakini hatuna viwanja ambazo vinaweza andaa michezo kama hii. Huu ni wakati wa Serikali kunyoosha mkono kwa watu wa Pwani. Hivi sasa kuna maandalizi ya sherehe za Madaraka Day zitakazofanyika kwenye Kaunti ya Bungoma. Wanajenga uwanja ambao utaandaa sherehe hizo. Wanajenga State Lodge ambayo Rais atakaa akienda kuhudhuria sherehe hizi. Hii ni jukumu ya Serikali kwa sababu Serikali ni kama mwavuli mkubwa uliotufunika sote katika Jamhuri ya Kenya. Hatuwezi kuwa sehemu moja ina viwanja vingi.

Hapa Nairobi kuna Nyayo Stadium, Kasarani na kiwanja kinachojengwa Talanta Stadium sehemu za Jamhuri Park. Vile vile, kuna kiwanja cha kibinafsi cha jeshi la Ulinzi wa Kenya ambacho sisi kama wachezaji wa Bunge FC tunatumia kwa mazoezi.

Bw. Spika wa Muda, ni muhimu tupate uwanja huu ili tusaidie talanta kwenye eneo la Pwani. Vijana wengi wamepotea kwa sababu ya mihadarati na itikadi kali, kwa sababu hawana fursa ya kufanya mazoezi na kuweka talanta zao uwanjani.

Tunaomba tunapotamatisha Hoja hii kwa kutumia Kanuni ya Kudumu ya 66(3) ya Kanuni za Bunge hili, naomba tuairishe uamuzi wa kupiga kura hadi siku nyingine.

**The Temporary Speaker** (Sen. Wakili Sigei): Thank you, Sen. Faki. The putting of the question on the Motion is deferred to the next sitting.

*(Putting of the question on the Motion deferred)*

Hon. Senators, earlier on, I had rearranged the Order Paper. I will further rearrange it, so that we go back to Order No.13. We resume debate on The Maternal, Newborn and Child Health Bill (Senate Bills No.17 of 2023).

## BILL

### *Second Reading*

#### THE MATERNAL, NEWBORN AND CHILD HEALTH BILL (SENATE BILLS NO.17 OF 2023)

*(Sen. Ogola on 16.4.24)*

*(Resumption of debate interrupted on 7.5.24)*

**The Temporary Speaker** (Sen. Wakili Sigei): Hon. Senators, when the House last rose, it was Sen. (Prof.) Kamar who was on the Floor. She had 15 minutes out of her time. She is not in the House.

I will call upon Sen. Wambua to contribute to this Bill.

**Sen. Wambua:** Thank you, Mr. Speaker Temporary Speaker, Sir. I was consulting with the promoter of the Bill, so that I know how much time I have to make my contribution.

I would like to begin by congratulating Sen. Ogola for coming up with The Maternal, Newborn and Child Health Bill, 2023.

*(Loud consultations)*

Mr. Temporary Speaker, Sir, I would be happy if you directed that the Senator of Kitui be heard in silence.

*(The Senate Minority Leader (Sen. Madzayo)  
consulted with Sen. Oketch Gicheru)*

Mr. Temporary Speaker, Sir, I am being disturbed by the Senate Minority Leader.

**The Temporary Speaker** (Sen. Wakili Sigei): Order, Sen. Madzayo and Sen. Oketch Gicheru. Allow Sen. Wambua to be heard in silence. Consult in low tones, if you must.

**Sen. Wambua:** Thank you, Mr. Temporary Speaker, Sir. The Senator of Kilifi is developing habits that are not very good. Thank you for protecting me. You can hear he is shouting at me.

I thank Sen. Ogola for sponsoring this very well-thought-out Bill. I also join my colleagues in underlining the fact that access to timely, affordable and appropriate

healthcare, is a right that is enshrined in the Constitution. As the saying goes, a right delayed is a right denied.

**Sen. Methu:** On a point of order, Mr. Temporary Speaker, Sir.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Wambua, there is a point of order. What is your point of order, Sen. Methu?

**Sen. Methu:** Mr. Temporary Speaker, Sir, it would not have been my wish to stop the trail of thought of my leader, Sen. Wambua. However, I am a bit confused with the way these two clocks are working.

On this clock, it is 6.12 p.m. and on the other, it is 6.13 p.m. I do not know which one the House is using at the moment. Therefore, I do not know which side of the hemisphere this Senate is operating from. I want some clarification so that we can time ourselves properly.

**The Temporary Speaker** (Sen. Wakili Sigei): Sen. Wambua, you may continue with your contribution as that aspect that has been brought to the attention of the Speaker is dealt with.

Proceed, Sen. Wambua.

**Sen. Wambua:** Thank you, Mr. Temporary Speaker, Sir. Thank you, Sen. Methu for being so vigilant. I will be guided by the clock that I am facing.

*(Laughter)*

I said that a right delayed is a right denied. I like the drafting of this Bill and the detail there in that both levels of Government have been assigned responsibilities in great detail. This is to ensure that there is proper access to timely and appropriate healthcare for mothers, newborns and our children.

I want to point out a few areas of concern in this Bill beginning with Clause 7 of the Bill, which talks about care to pregnant mothers or women. It will be remembered that a few weeks ago, when the Cabinet Secretary for Health, Hon. Nakhumicha, appeared before this House to respond to matters related to health, she said on record that with the new Social Health Insurance Fund (NHIF), the issue of *Linda Mama* was being scrapped from the system and Government policy.

Clause 7 of this Bill gives women of this country the assurance that even if the Government has since moved from that policy pronouncement position, there is a law that entrenches protection and care of pregnant women.

It would be much better for the women of this country to get protection on medical care from an Act of Parliament than a policy pronouncement, because as we have seen with the *Linda Mama* policy pronouncement, a Government can very easily walk away from a policy. However, it will not be easy to walk away from rights enshrined in an Act of Parliament.

Going down to Clause 8 is where I begin to have problems with the assignment of responsibilities to both levels of government. We say that health is largely a devolved function. As is the case with all the other devolved functions, the roles and responsibilities of the national Government are limited to policy guidelines and standards.

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The national Government, in terms of taking operations, is responsible for the teaching, research and referral hospitals, and should not meddle in the operations of the other health facilities from Level 5 or 6, going down to dispensaries and health centers. However, this law that is proposed by Sen. Ogola, who is my friend, seeks to assign responsibilities to the national Government in Clause 12, which are basically responsibilities to be undertaken by the county or devolved governments.

I am particularly concerned by the provisions of Clause 12 D, that the national Government is required by this Bill, when it becomes law, to put in place necessary infrastructure and collaborate with county governments in establishing an effective system of referral from one level of government to another.

Infrastructural development for county health facilities is the core responsibility of county governments. If this law then makes a provision for the national Government to build dispensaries, health centres and provide equipment and enabling infrastructure to service those health facilities, then there will be a direct conflict of interest. The outcome will be that we shall be acting against the Constitution.

I will be asking the promoter of the Bill to relook at the roles that she has assigned to the national Government, with a view of making amendments to ensure that they are aligned with the Fourth Schedule of the Constitution on the responsibilities of the both levels of government.

Mr. Temporary Speaker, Sir, I want to be guided on how much time I have. I thought I had some more.

*(The Clerk-at-the-Table consulted with Sen. Wambua)*

Okay. So, I can continue. Thank you.

Mr. Temporary Speaker, Sir, the roles when it comes to national policy and strategy are fine. That is in the policy of the national Government, so that we ensure that the standards of healthcare in one county are exactly the same in the other. Therefore, we will not have some counties with very high standards of healthcare and others without.

This Bill gives us an opportunity to align legislation with the provisions of the Constitution. I will be asking the promoter of the Bill to put in black and white that when it comes to the operation of the national Government on matters health, then they are limited to the teaching and referral hospitals such as Kenyatta National Hospital (KNH), Moi Teaching Referral Hospital, (MTRH), together with Coast General Hospital as well.

I have another concern. The Bill seeks to make it mandatory for doctors or healthcare providers who are providing medical care to young children not to do so without the express permissions of a parent or a guardian. Whereas that maybe a good thing to do, we must also be guided by the reality of our time.

There are parents and guardians who believe - and I have no authority to question what people believe - that they should never access medical care even when their children get sick. That, they should just be prayed for and they will get healed. If they die that is the will of God.

Mr. Temporary Speaker, Sir, what do you do with that category of people because they are there and they are many? If you pass a law that says in order for every child to get treated, the doctor must obtain express authorization from a parent or guardian and they do not believe in medical care, what is going to happen to those children? They will then be exposed to suffering. It would be better if that clause is relooked at in a manner that ensures every child within the Kenyan jurisdiction has access to proper medical care when they need it.

Mr. Temporary Speaker, Sir, I have also looked at the same Clause 8 on matters of immunisation. It says that it should be carried out in accordance with the prescribed standards and guidelines. Again, I have no problem with what people believe in, as long as they believe in the right thing. However, there are religious beliefs that speak against immunisation. The wording of any law guiding immunisation should be such that it is facilitative for immunisation to take place without necessarily creating a window for people to latch on and argue that they can either deny children immunization because a law has made such provisions.

As I conclude, it should be remembered that we are debating it at a time that our doctors have been on strike for 56 days, within which time, Kenyans in their majority, have been denied access to a Constitutional right.

We must urge the policy makers and speak to the hearts and minds of welfare societies and unions in pushing forward the agenda of the welfare of their members for both parties. I understand that they have agreed on a return to work formula. However, both parties should realise that the health of this nation is greater and more important than any other conversation. That, a Government and the unions would stick to parallel lines for 56 good days and yet, people are denied access to medical care.

This is the time for those of us in the Senate to begin to think very seriously about making health a fully and truly devolved function. This is so that the agitations and agreements between healthcare providers are properly guided and articulated within the context of counties. If there is need for escalation, then that escalation takes place when and if necessary.

With those remarks, I support the Bill and ask the promoter to think about where he can make amendments on those areas of concern, to make it even a better Bill.

I thank you.

## ADJOURNMENT

**The Temporary Speaker** (Sen. Wakili Sigei): Hon. Senators, it is now 6.30 p.m., time to adjourn the Senate. The Senate, therefore, stands adjourned until tomorrow, Thursday, 9<sup>th</sup> May, 2024, at 2.30 p.m.

The Senate rose at 6.30 p.m.