

**SPECIAL ISSUE**

*Kenya Gazette Supplement No. 141 (National Assembly Bills No. 37)*



REPUBLIC OF KENYA

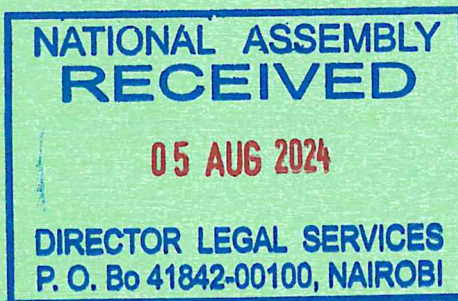
***KENYA GAZETTE SUPPLEMENT***

**NATIONAL ASSEMBLY BILLS, 2024**

**NAIROBI, 15th July, 2024**

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NATIONAL ASSEMBLY  
RECEIVED

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DIRECTOR LEGAL SERVICES  
P. O. Box 41842-00100 NAIROBI

**THE BIRTHS AND DEATHS REGISTRATION  
(AMENDMENT) BILL, 2024**

**A Bill for**

**AN ACT of Parliament to amend the Births and Deaths  
Registration Act and for connected purposes**

**ENACTED** by the Parliament of Kenya as follows—

**1.** This Act may be cited as the Births and Deaths  
Registration (Amendment) Act, 2024.

Short title.

**2.** Section 5 of the Births and Deaths Registration  
Act is amended by inserting the following new subsection  
immediately after subsection (1)—

Amendment of  
section 5 of Cap.  
149.

(1A). The Cabinet Secretary shall appoint at  
least one registration area in each constituency.

## **MEMORANDUM OF OBJECTS AND REASONS**

### **Statement of objects and reasons for the Bill**

The principal object of this Bill is to provide that the Cabinet Secretary shall establish at least one births and deaths registration office in each constituency. Currently there are only one hundred and forty-three (143) births and deaths registration centres in the country and therefore this service may not be reasonably accessible to all parts of the country as required by Article 6 (3) of the Constitution.

### **Statement on the delegation of legislative powers and limitation of fundamental rights and freedoms**

The Bill neither delegates legislative powers nor does it contain provisions limiting fundamental rights and freedoms.

### **Statement on whether the Bill concerns county governments**

This Bill is not a Bill concerning county governments in terms of Article 110 (1) (a) of the Constitution.

### **Statement as to whether the Bill is a money Bill within the meaning of Article 114 of the Constitution**

The enactment of this Bill may occasion additional expenditure of public funds to be provided for in the estimates.

Dated the 25th June, 2024.

MARTHA WANGARI,  
*Member of Parliament.*

*Section 5 of the principal Act which it is proposed to amend –*

**Appointment of registration areas and registrars**

**5.** (1) The Cabinet secretary may, by notice in the Gazette, appoint any area to be a registration area for the purposes of this Act.

(2) The Cabinet Secretary may appoint fit and proper persons to be the registrars and deputy registrars for each registration area and a fit and proper person to be the registrar of births and deaths occurring outside Kenya.

the 1990s, the number of people with a mental health problem has increased in the UK (Mental Health Act 1983, 1990).

There is a growing awareness of the need to improve the lives of people with mental health problems (Mental Health Act 1983, 1990).

## 2. The development of the mental health services in the UK

The development of the mental health services in the UK has been a long and complex process. It has been shaped by a number of factors, including the changing needs of the population, the availability of resources, and the influence of government policy.

In the early years, mental health care was provided in a few large, isolated institutions. These institutions were often located in rural areas and were designed to house and care for people with mental health problems.

Over time, the number of institutions has decreased and the focus has shifted towards community care. This has been driven by a number of factors, including the need to provide care closer to home, the desire to reduce the costs of institutional care, and the growing emphasis on human rights and self-determination.

Today, mental health services in the UK are provided through a mix of community care and institutional care. Community care is the dominant form of care, and it includes a wide range of services, such as day care, residential care, and home care.

Institutional care is still used, but it is now primarily for people who are unable to live in the community. These people are often housed in large, secure hospitals or residential care homes.

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