



THIRTEENTH PARLIAMENT
THE SENATE
OFFICIAL REPORT



Fifth Session

Wednesday, 18th March, 2026 at 2.30 p.m.

PARLIAMENT OF KENYA

THE SENATE

THE HANSARD

Wednesday, 18th March, 2026

*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. Let us take our seats. Clerk, you may proceed to call the first Order.

PAPERS LAID

The Speaker (Hon. Kingi): The Senate Majority Leader, proceed.

LEGAL NOTICES UNDER VARIOUS CIVIL AVIATION REGULATIONS

Sen. (Dr.) Lelegwe Ltumbesi: Mr. Speaker, Sir, I beg to lay the following Papers on the Table of the Senate today, Wednesday, 18th March, 2026-

The Civil Aviation (Meteorological Service for Air Navigation) Regulations, Legal Notice No.17 of 2025).

The Civil Aviation (Communication Procedures) Regulations, Legal Notice No.18 of 2025).

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The Civil Aviation (Operations of Aircraft - Helicopters) Regulations, Legal Notice No.19 of 2025).

The Civil Aviation (Approved Maintenance Organisation) Regulations, Legal Notice No.20 of 2025).

The Civil Aviation (Environmental Protection-Aircraft Noise) Regulations, Legal Notice No.21 of 2025).

The Civil Aviation (Licensing of Air Services) Regulations, Legal Notice No.22 of 2025).

The Civil Aviation (Aircraft Nationality and Registration Marks) Regulations, Legal Notice No.23 of 2025).

The Civil Aviation (Carbon Offsetting and Reduction Scheme for International Aviation) Regulations, Legal Notice No.24 of 2025).

The Civil Aviation (Radio Navigation Aids) Regulations, Legal Notice No. 25 of 2025).

The Civil Aviation (Certification of Air Navigation Service Providers) Regulations, Legal Notice No.27 of 2025).

The Civil Aviation (Units of Measurement to be used in Air and Ground Operations) Regulations, Legal Notice No.28 of 2025).

The Civil Aviation (Operation of Aircraft for Commercial Air Transport - Aeroplanes) Regulations, Legal Notice No.29 of 2025).

The Civil Aviation (Air Traffic Services) Regulations, Legal Notice No.30 of 2025).

The Civil Aviation (Security) Regulations, Legal Notice No.31 of 2025).

The Civil Aviation (Safety Management) Regulations, Legal Notice No.32 of 2025).

The Civil Aviation (Aeronautical Search and Rescue) Regulations, Legal Notice No.33 of 2025).

The Civil Aviation (Airworthiness) Regulations, Legal Notice No.37 of 2025).

The Civil Aviation (Communications Systems) Regulations, Legal Notice No.38 of 2025).

The Civil Aviation (Unmanned Aircraft Systems) Regulations, Legal Notice No.40 of 2025).

The Civil Aviation (Air Operator Certification and Administration) Regulations, Legal Notice No.42 of 2025).

DRAFT INTERGOVERNMENTAL RELATIONS (SECTOR FORUMS) REGULATIONS

The Draft Intergovernmental Relations (Sector Forums) Regulations, 2026.

REPORT OF THE CoB ON COUNTY GOVERNMENTS BUDGET
IMPLEMENTATION REVIEW FOR FY 2025/2026

Report of the Office of the Controller of Budget (CoB) on County Governments Budget Implementation Review for the first half of the Financial Year 2025/2026.

(Sen. (Dr.) Lelegwe Ltumbesi laid the documents on the Table)

The Speaker (Hon. Kingi): Next Order.

QUESTIONS AND STATEMENTS

STATEMENTS

The Speaker (Hon. Kingi): Statements pursuant to Standing Order No.53(1). Senator for Kitui County, the Hon. Enock Wambua.

USE OF EMERGENCY FUNDS TO PURCHASE SEEDS FOR RESIDENTS IN ASAL COUNTIES

Sen. Wambua: Thank you, Mr. Speaker, Sir. I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on Agriculture, Livestock and Fisheries on a matter of nationwide concern regarding the use of emergency funds by county governments to purchase seeds for residents in Arid and Semi-Arid counties.

Mr. Speaker, Sir, the country is presently experiencing widespread rainfall, offering a critical but limited window for planting, particularly in arid and semi-arid regions. Timely access to appropriate seeds during this period could greatly enhance food production and strengthen food security. It is therefore imperative that county governments prioritise the distribution of drought-resistant and fast-maturing crop varieties suited to local ecological conditions.

In the statement, the committee should address the following-

(1) Measures undertaken by the county governments to urgently utilise emergency and contingency funds for the procurement and distribution of seeds during the ongoing rains.

(2) The plans in place by the county governments to ensure that the seeds distributed are drought-resistant, fast-maturing and appropriate for the specific agro-ecological zones, particularly in arid and semi-arid regions where conventional crops often fail due to climatic conditions.

(3) The mechanisms established to monitor, coordinate and evaluate the effectiveness of seed distribution, ensuring transparency, accountability and maximum impact on food production.

Thank you.

The Speaker (Hon. Kingi): Hon. Sen. Hezena.

REGULATORY OVERSIGHT IN THE PHARMACEUTICAL SECTOR

Sen. Lemaletian: Thank you, Mr. Speaker, Sir. I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on Health on a matter of national concern regarding the state of due diligence, professionalism, regulatory oversight and ethical compliance within Kenya's pharmaceutical sector.

Mr. Speaker, Sir, this follows a grave incident on 27th February, 2026 in Eldoret, Uasin Gishu County, where a child suffered severe complications, including loss of eyesight, after being issued with medication for a skin condition instead of the prescribed eye medication at a pharmacy. This case underscores the systemic gaps in pharmaceutical practise with implications for public health and regulatory accountability.

In the statement, the committee should address the following-

(1) The circumstances under which the wrong medication was issued outlining the dispensing protocols applicable, whether those protocols were compiled with and state the legal, regulatory or administrative action taken against the pharmacy and personnel involved.

(2) The mechanisms by the Pharmacy and Poisons Board, the Pharmaceutical Society of Kenya and any other relevant professional or regulatory bodies to verify the registration, qualifications, licensing status, and continuing professional competence of practitioners, including the date of the last nationwide audit or inspection.

(3) The current compliance status of pharmacies and chemists countrywide, including the number of licensed outlets, recent inspection and enforcement outcomes, and the sector-wide reforms by the Ministry of Health to strengthen oversight and accountability in pharmaceutical practise.

Sen. Hezena Lemaletian

13th of March, 2026.

Thank you.

AVAILABILITY OF ADRENALINE AND SUPPORT FOR
SNAKE BITE VICTIMS IN KITUI COUNTY

Sen. Beth Syengo: Thank you, Mr. Speaker, Sir. This is a request for a statement on the availability of adrenaline and support for snake bite victims in Kitui County.

I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on Health on a matter of countywide concern regarding the availability of adrenaline and support for snake bite victims in Kitui County.

Mr. Speaker, Sir, snake bites remain a major health challenge in Kitui County, with close to 800 cases reported annually and many more likely unrecorded. Despite the efforts to stop adrenaline gaps in availability, species-specific treatment and public awareness continue to leave communities at risk. Victims and families also face systematic barriers to compensation and justice as snake bite cases were excluded from government support schemes. Addressing this crisis requires stronger medical preparedness, fair compensation and widespread community sensitisation.

In the statement, the committee should address the following-

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(1) An updated assessment of Level 4 hospitals, including strategies to ensure consistent stocking of adrenaline across all eight sub-counties within Kitui County, with the priority given to snake-prone regions.

(2) Plans to equip health facilities with species-specific coverage and train healthcare workers for accurate treatment.

(3) Strategies to reinstate and streamline compensation for victims and affected families.

(4) Measures in place to intensify and strengthen public sensitisation on prevention, first aid, response and claims, compensation procedures through Kenya Wildlife Services and other health facilities.

Mr. Speaker, Sir, a victim from my ward was bitten at the *shemu nyeti*.

(Laughter)

The Committee should do the above.

Sen. Beth Syengo, MP, nominated by ODM, *Linda Ground*.

Thank you, Sir.

PLIGHT OF CANCER PATIENTS AT KNH

Sen. Gataya Mo Fire: Thank you, Honourable Speaker. I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on Health on a matter of national concern regarding the plight of cancer patients at the Kenyatta National Hospital (KNH) following the prolonged breakdown of the hospital linear accelerator radiotherapy machine.

Mr. Speaker, Sir, Kenyatta National Hospital remains the primary affordable centre for thousands of cancer patients across the country. The hospital relies on a single linear machine for radiotherapy services, a situation that has long exposed patients to delays whenever the machine experiences technical challenges. The current breakdown, now persisting for approximately two months, has disrupted 10 radiotherapy services entirely. As a result, patients have been forced to seek treatment in alternative facilities, many of which are significantly more expensive.

In the statement, the committee should address the following-

(1) Measures being taken to expedite the repair and maintenance of the linear machine, including the expected timeline for restoring full functionality and alternative treatment pathways available to affected patients.

(2) The Committee should also look at whether there are any budgetary allocations and procurement plans for acquiring additional or backup radiotherapy equipment with a view to preventing service interruptions.

(3) The Committee should also look at the broader structural and operational challenges facing the Kenyatta National Hospital, including steps being taken to address these challenges comprehensively.

Thank you, Hon. Speaker.

This is signed by Sen. Mwenda Gataya Mo Fire, MP, Senator for Tharaka Nithi

SHORTAGE OF BLOOD COLLECTION BAGS AT KNH

Sen. Seki: Thank you, Honourable Speaker. This is a request for a statement on shortage of blood collection bags at the Kenyatta National Hospital (KNH).

I rise, pursuant to Standing Order No.53(1), to seek a statement from the Standing Committee on Health on a matter of nationwide concern regarding the shortage of blood collection bags at the Kenyatta National Hospital, the national referral hospital in the country, which has severely affected blood donation services at the facility.

This shortage has gravely disrupted blood donation services despite the presence of willing donors hereby endangering patients in urgent need of transfusion, including accident victims, mother with childbirth complications, surgical patients and those suffering from chronic conditions.

In the statement, the committee should address the following-

(1) The availability of blood collection bags and related supplies at the Kenyatta National Hospital and other public referral facilities across the country.

(2) The number of potential blood donors turned away at the Kenyatta National Hospital due to unavailability of blood collection bags, and the extent to which patients have been affected.

(3) The factors that contributed to the shortage and when the Ministry of Health was first notified of this crisis.

(4) The immediate steps undertaken by the Ministry of Health and relevant agencies to store supplies at the Kenyatta National Hospital and the long-term safeguards in place to ensure consistent availability of blood collection supplies across all public health facilities.

Thank you, Hon. Speaker.

GOVERNMENT SUPPORT ON REPATRIATION OF
DECEASED KENYANS

Sen. Cherarkey: Thank you, Mr. Speaker, Sir. This is a request for a statement on Government support on the repatriation of deceased Kenyans. I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on National Security, Defence and Foreign Relations on a matter of national concern regarding Government support towards the repatriation of deceased Kenyans.

As you are aware, many families continue to face significant financial and logistical challenges when their loved ones pass away outside the country. In several instances, the families are forced to delay burials, conduct public fundraisers or abandon repatriation all together due to the high costs associated with transporting remains back to Kenya for burial.

In the statement, the committee should address the following-

(1) The existing policy and administrative frameworks that guide Government support towards the repatriation of deceased Kenyans.

(2) The number of times the Government has provided financial support in the repatriation of deceased Kenyans from 2021/2022 Financial Year to date, including details on the total amount of money spent for the purpose over the said period.

(3) Whether the Government should consider establishing a dedicated fund and instituting the necessary protocols to guarantee financial support to bereaved families that are unable to meet the repatriation costs.

(4) The steps taken by the Ministry of Foreign and Diaspora Affairs in collaboration with the Ministry of Labour and Social Protection and other relevant Government institutions to ensure that Kenyan migrant workers are adequately covered under insurance schemes or employer-supported repatriation arrangements so as to reduce the financial burden on families in case of death and eliminate the need for financial support from government.

Mr. Speaker, Sir, with your indulgence I go into my second statement.

IMPACT OF RECENT FLOODS IN THE COUNTRY

I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on National Security, Defense and Foreign Relations on a matter of national concern regarding the devastating impact of the recent floods across the country.

The ongoing heavy rains have led to loss of lives, injuries, displacement of families and destruction of homes, businesses and public infrastructure. While seasonal rains are expected, the scale and recurrence of flooding highlight systemic governance failures, particularly in stormwater drainage management and disaster preparedness. These circumstances raise urgent questions about the adequacy of relief measures and compensation for the affected citizens, where almost 71 Kenyans have died.

In the statement, the committee should address the following-

(1) The confirmed number of fatalities, injuries, displaced persons and the estimated value of property lost since 6th March, 2026, the night of one of the worst floods experienced in the country.

(2) The relief assistance extended to affected families, including emergency shelter, food, medical care and other humanitarian support.

(3) The compensation and support provided or planned for families who lost loved ones and for those whose property was destroyed, including the number of households and businesses that have received compensation or financial assistance following flood-related disasters from 2021 to date, and the total amount disbursed during that period.

(4) The existence and adequacy of a national disaster compensation fund, including eligibility criteria, available resources and disbursement timelines.

(5) The coordination mechanisms between national and county governments to ensure timely compensation, rehabilitation and long-term reforms in disaster response in the country.

The Speaker (Hon. Kingi): Senator of Kisumu County, the hon. (Prof.) Tom Ojienda.

Sen. Maanzo: Mr. Speaker, Sir, I have been requested by the Sen. (Prof.) Ojienda to read on his behalf.

The Speaker (Hon. Kingi): But you know how to be retained.

Sen. Maanzo: I would love to send a fee note for holding brief twice.

The Speaker (Hon. Kingi): Hon. Senator, you are supposed to be retained in writing.

Sen. Maanzo: Yes, I do have on my phone, Mr. Speaker. He sent a message.

The Speaker (Hon. Kingi): Kindly share that with the Speaker. Just approach the Chair. This is out of abundance of caution.

In the meantime, Sen. Kathuri, you may proceed.

ESCALATION OF BANDITRY ATTACKS IN MERU COUNTY

Sen. Kathuri: Mr. Speaker, Sir, I rise pursuant to Standing Order No.53(1) to seek a statement from the Standing Committee on National Security, Defense and Foreign Relations on a matter of countywide concern regarding the renewed and escalating banditry attacks in the northern grazing zone in Meru County.

In the statement, the committee should address the following-

(1) The factors that have contributed to the recurrence and escalation of banditry attacks in the northern grazing zone in Meru County, covering Tigania East, Tigania West, Igembe North, Igembe Central and Buuri constituencies, which have resulted in 21 raids, 22 injuries, three reported cases of rape and the loss of 1,806 livestock since the start of 2026.

(2) The status of the fulfillment of Government promises to deploy a well-equipped multidisciplinary security team along with additional armed personnel carriers, increase investment in security infrastructure and modern technology and recruit national police reservists, among the other proposed measures to address the issue.

(3) The status of ongoing livestock recovery efforts, including whether there exists a mechanism to track livestock and match them to their rightful owners.

(4) The measures being considered to address the challenges being faced in restoring normalcy in the region, as well as long-term strategies to effectively tackle the security challenges in the region.

(5) The immediate steps the Government is taking to ensure provision of necessary assistance to the affected residents, including support from arrangements, settlement of hospital bills and supply of food and other basic necessities.

The Speaker (Hon. Kingi): Sen. Maanzo, you may proceed.

RISE IN DIGITAL FINANCIAL SERVICES SCAMS

Sen. Maanzo: Mr. Speaker, Sir, I rise under Standing Order No.53(1) to seek a statement from the Standing Committee on National Security, Defense and Foreign Relations on a matter of national concern regarding the growing prevalence of mobile money fraud, digital impersonation schemes, and other technology-enabled financial scams affecting citizens across the country.

Kenya's rapid adoption of digital financial services and mobile money platforms has significantly expanded financial inclusion and transformed the country's economic landscape. However, this progress has also been accompanied by an increase in sophisticated cyber-enabled financial crimes, including fraudulent mobile money transactions, SIM swap schemes, digital impersonation and other forms of online fraud that target unsuspecting members of the public.

In the statement, the committee should address the following-

(1) The total number of reported cases of mobile money fraud, SIM swap incidents and other forms of digital financial scams recorded nationally from the year 2023 to date, together with the corresponding financial losses incurred during this period.

(2) The measures currently being undertaken by the National Computer Coordination Committee and Secretariat to investigate, apprehend and prosecute individuals and criminal networks involved in cyber-enabled financial crimes.

(3) The coordination mechanism in place between law enforcement agencies, telecommunications services providers and financial institutions aimed at preventing, detecting and responding effectively to incidents of mobile money fraud and related cyber threats.

(4) Steps being taken by the State Department for Internal Security and National Administration to strengthen consumer protection frameworks and enhance public awareness on digital financial scams, including initiatives intended to educate the public on how to identify, prevent and report such fraudulent activities.

Thank you.

The Speaker (Hon. Kingi): Hon. Senators, I will allow comments for not more than 15 minutes. If you get an opportunity to speak, kindly do so for not more than three minutes.

Sen. Alexander Mundigi, you have the Floor.

Sen. Munyi Mundigi: Asante, Bwana Spika, kwa kunipa nafasi nichangie kauli ya Seneta wa Kaunti ya Kitui, Sen. Wambua, kuhusu kilimo. Siku hizi watu wote, watoto pia na wazee wanafaa kujihusisha na kilimo. Taarifa yake ilihusu kaunti ambazo hazipati mvua ya kutosha.

Ningeomba kama mvua inatarajiwa mwezi wa tatu, magavana wapeane “chakula cha kupanda” mwezi wa kwanza na wa pili kabla ya mvua. Hivi majuzi walijaribu kugawa “chakula cha kupanda”, lakini mvua ilinyesha mapema kabla hawajapeana. Kama mvua inatarajiwa mwezi wa Kumi, basi wapeane mbegu ya kupanda mwezi wa saba na tisa.

Ningeomba magavana wote waliotoka kwa kaunti hizo wapange mambo yao mapema---

The Speaker (Hon. Kingi): What is your point of order, Senator for Meru County?

Sen. Kathuri: Bwana Spika, nimefuatilia kwa umakini maoni ya Seneta wa Kaunti ya Embu. Nashindwa kuelewa hiki “chakula cha kupandwa” ni gani? Sielewi chakula cha kupandwa ni nini?

(Laughter)

Nimefuatilia pia taarifa iliyoletwa na Seneta wa Kaunti ya Kitui kwa sababu ni muhimu sana wakati huu wa kupanda mbegu.

The Speaker (Hon. Kingi): Sen. Mundigi, ni chakula gani hiki kinachopandwa?

Sen. Munyi Mundigi: Asante, Bwana Spika. Chakula kinachopandwa ni mbegu za mahindi na maharagwe.

(Laughter)

Kama Seneta wa Kaunti ya Meru hakunielewa, namujulisha kwamba chakula cha kupandwa ni maharagwe, mahindi na mbegu zinginezo.

Pia, wakimaliza kupeana mbegu, wapeane *fertilizer* mapema ili kila kijiji wapande kwa mbolea. Watu wengi wanateseka. Kwa mfano, saa hii pesa imetumika na mvua imeisha. Kama hawatakuwa makini, watatumia pesa kufanya kazi bure.

Kama Naibu Mwenyekiti wa Kamati ya Kilimo, Mifugo na Uvuvi, naunga mkono kauli iliyoletwa na Seneta wa Kaunti ya Kitui. Kitui ni jirani wa Kaunti ya Embu, Tharaka-Nithi, Meru na North Eastern.

Asante.

The Speaker (Hon. Kingi): Asante sana, Mheshimiwa Mundigi. Kiswahili sanifu ni mbegu za nafaka. Sen. Mundigi, itabidi upate mafunzo kutoka Seneta wa Mombasa ili uzungumze Kiswahili sanifu.

(Sen. Munyi Mundigi spoke off record)

Hakuna haja ya kujibu. Mheshimiwa Mundigi, Kiswahili ni Kiswahili. Hakuna Kiswahili cha Nairobi ama Mombasa.

Proceed, Sen. Eddy Gicheru.

Sen. Oketch Gicheru: Thank you, Mr. Speaker, Sir. English is English, but there is English from the lake. I will keep it with the English from the lake. Sen. Mundigi, English is a good language. You can come and learn it from the lake.

That said, I wish to comment on the statement sought by Sen. Cherarkey on floods. The flood issue is a serious crisis. It needs urgent attention. In fact, it would be important for the Committee to handle this matter urgently. The floods are ongoing. We need a multi-sectoral conversation on the integrated agency dealing with floods in the counties.

I just came from Migori County. I spent last weekend, from Thursday to Sunday, intervening in the flood situation in Migori County. Even where food and non-food items are given, it is not enough. Victims who are given food, blankets and mattresses are still affected by overflowing waters. Dykes and boulders have been destroyed. In Kabuto, Nyatike, the dykes are not working. Food alone is not enough. The prevention mechanism put in place for floods is an ongoing problem.

I was in Budalangi as well. It is also in a crisis. Where can we get recourse when agencies only work on intervention instead of mitigating? This is a yearly problem. We need serious investment in infrastructure. We need dykes and boulders in Nyora, Kabuto,

Budalangi, Angugo in Nyatike, Ochieng' Orwa in Migori and Pandi. These places should have proper infrastructure to prevent floods.

Mr. Speaker, Sir, I am passionate about this. In Migori County, floods are coupled with insecurity. While people suffer from floods, they also suffer at the hands of police in Macalder, Nyatike. There was a confrontation between police and the locals. A police station was burned down by citizens because the police were not responding to the issue of ongoing killing of people in M-Pesa businesses and gold mines.

Now, the police there are terrorising people. There is a double tragedy in Nyatike. People are dying from floods and they are being harassed by the police. I hope that the---

The Speaker (Hon. Kingi): Sen. Kisang.

Sen. Kisang: Thank you, Hon. Speaker. I wish to comment on the Statement by the Senator for Tharaka-Nithi County on the linear incinerator at the Kenyatta National Hospital (KNH). KNH is the first and largest referral hospital in East and Central Africa. It is unfortunate that it has only one radiology machine for cancer patients.

The Committee on Health of this House and the National Assembly should push to allocate resources to buy one or even two additional machines. Cancer patients are lining in long queues, waiting to be attended by doctors at the KNH. This is a serious matter. The management and the Board of KNH should treat it as urgent, so that our people may get attention. The only one that is there has broken down. I also wonder why the suppliers of the machine could not have maintained it. It is unfortunate that the machine has been down for a while now.

I also want to comment on the blood bank and that there is shortage of blood in the country for patients. I remember when we were in school those days, every second term or so, there used to be a campaign going around secondary schools for students to donate blood. I do not know why that exercise has stopped these days.

We have regional banks in Kisumu, Eldoret and the National Blood Bank in Nairobi. So, we want the management of these particular institutions to stop sleeping on the job. They need to do a serious campaign. Students are there; you only need to give them soda and bread. That is what we used to get those days when we were in school. They need to do a serious campaign because people are willing to donate blood to save lives. Those involved in accidents, cancer patients and those who are anaemic will be assisted.

Generally, there has been a systemic failure in the country, especially in the health sector that needs urgent attention. Maybe this House or the Committee on Health should do an inquiry into these small issues that do not need resources. You need minimal resources for people to donate blood.

Sen. Onyonka: Mr. Speaker, Sir, I would like to thank you for giving me this opportunity. I am actually interested in talking about the statement that has been raised by Sen. Hezena on the regulatory oversight and patient safety in pharmaceutical practice in Kenya.

This matter is very weighty. The reason for this is that if you talk to many of the people who run hospitals, including some of our counties, hospitals are essentially running on their own. The problem is that we do not have a very strict standardised approach on how we handle medicine. We do not have a very strict regimen on how the

Pharmacy and Poisons Board handles issues of serum, which is used for treatment of people who have got snakebites.

On top of that, the medicine that help our people most, including malaria tablets, are being attacked by the unscrupulous capitalists that we have in our country, who would like to make fake medicine and sell it to our hospitals. Therefore, this Statement is very weighty. I hope that the committee that will handle it can begin to think.

One, what is the best practice in other countries where they have succeeded in maintaining and controlling the use of drugs and pharmaceuticals? Two, the other issue that this committee should engage in is that in other jurisdictions, and indeed other countries, there are certain basic medicines that the government produces. I do not know why we have never done this in our country.

If you go to certain jurisdictions, as I have said, you will find they make malarial drugs and very simple medicines which help people to treat illness that do not need referrals. So, I hope that we can have a proper way to audit our pharmacies and their geo-locations.

The other thing that has been quite amazing is that when we go out, especially with our Committee on Health, we find individuals who are opening pharmaceuticals right outside hospitals. The reason for that is obvious. The owners of those pharmacies are the ones who are actually dispensing medicine from Government health centres.

Can we agree that we create a standard, so that some of those pharmaceuticals cannot be put or located within a certain radius of where we have those hospitals? I think the committee is seized of this issue. I believe they will come up with a substantive way on how we can manage.

Sen. Cherarkey: Thank you, Mr. Speaker, Sir, for the opportunity. Let me make quick observations on the Statement by the Deputy Speaker and the Senator for Meru. This issue of cattle rustling and banditry is very unfortunate and sad. Since the beginning of the year 2026, close to 2,000 livestock have been lost in that region of Igembe, part of Igembe Central and Tigania West. Almost over 21 deaths have occurred since the beginning of the year and a number of property destroyed.

What is shocking is that after the Deputy Inspector General of Police left the area where this conflict is happening, one person was killed. So, it means the bandits are so emboldened that they no longer fear the police. Even the promises of the Cabinet Secretary for Interior and National Administration have been just wishy-washy. You remember he appeared on a number of occasions when we asked him on the issue of banditry, especially in Meru, Marsabit and Elgeyo-Marakwet. Those promises have just remained so.

I want to propose that the area in Meru must be gazetted as a disturbed area. We should allow Anti-Stock Theft police unit and other special forces to move in, so that we can deal with that criminal lawlessness in that region once and for all. I hope the people of Meru will find peace and solace to graze their animals. We hope that the Deputy Speaker will get our necessary support.

Finally, on the issue of Kenyatta National Hospital (KNH), I do not know what is happening with our referral hospitals. This is because Moi Teaching and Referral Hospital (MTRH) has a similar problem. Can you believe that the Linear Accelerator has

been dysfunctional for a number of months, close to one year? This is an important machine for radiotherapy, especially in treating cancer. We know we lose 36,000 Kenyans annually to cancer. Cancer is the third killer in this country. There are 48,000 new cancer cases in this country and most of them are treated at the KNH. We cannot take it.

I want to challenge the Chief Executive Officer (CEO), the board and the Cabinet Secretary in charge of health to move with speed. What we are seeing in KNH and MTRH is embarrassing. We must ensure that the money that goes to the Ministry of Health is able to fix some of these machines. I saw in the news patients lining up to get cancer treatment. You and I know, if you are not affected by this cancer---

Every weekend, we attend funerals where at least one or two people died because of cancer. While we appreciate that the Social Health Authority (SHA) is covering some of the costs, we must fix the linear accelerator machine that is used to treat cancer patients at the KNH. The Chief Executive Officer (CEO), Dr. Lesiyampe, and the board of KNH must move with speed and address this issue.

Mr. Speaker, Sir, you have to note that I have worn an orange tie which belongs to ODM, in support of the broad-based government. We are *lindaing* the ground.

Sen. Maanzo: Thank you, Mr. Speaker, Sir. I would like to comment on the Statement by Sen. Cherarkey. There are quite a number of Kenyans stuck in the Middle East right now. The situation is so pathetic that there is war in the area and the flights are not even making it. The worst case scenario is Kenyans who travelled to Russia.

I followed the interview for the Cabinet Secretary for Foreign and Diaspora Affairs last night from Moscow and he sounded helpless. There is no mechanism to account for Kenyans who have died there and the ones held hostage at the war front yet, they had a Kenyan passport and somebody pretending or authorised by law sent them to a foreign country. When something like that happens, even with the bilateral treaties that exist between ourselves and Russia, it seems there is no way that these bodies will come back home.

Mr. Speaker, Sir, it is very tough for this House to give directions on this matter. Most of the time, it is the Members of Parliament who have ended up repatriating bodies from abroad. Eventually, families go to their Senator or Member of Parliament and that Member of Parliament has to go to their pocket to bring these bodies home. It has happened to me twice now, from the Middle East and one time from Seychelles. It is extremely challenging. I really had to incur a very big expense to bring somebody from Makueni Constituency home who had died there.

In fact, their policy is that in the Muslim culture, they bury within a day. If it is in a country where they cremate, like Seychelles, they want to cremate within a day. They do not even have the facility to keep a dead body. So, the House needs to come out strongly on this particular issue, so that we have a policy, method and foreign affairs relations that can negotiate, so that a parent in Kenya cannot be told that their son could be dead or is dead, and there is no way the body can be brought back home. This is a matter the House must really take seriously. It is a crisis, especially if this war in the Middle East continues.

I thank you, Mr. Speaker, Sir. I second.

The Speaker (Hon. Kingi): Sen. Chimera.

Sen. Chimera: Asante sana, Bw. Spika, kwa fursa hii. Ningependa tu kupeena changizo zangu fupi kwa kauli ambayo imeletwa na Mheshimiwa, Seneta kutoka Nandi, Sen. Cherarkey, na nimpongeze kwamba leo hii, ameleta kauli muhimu sana katika Bunge letu, sio ile tabia yake ya kubwekabweka tu. Yeye huzungumzia mambo mengine ambayo saa zingine ni---

(Laughter)

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

The Speaker (Hon. Kingi): What is your point of order, Senator for Nandi County?

Sen. Cherarkey: Bw. Spika, ninafahamu ya kwamba hii ni awamu ya kwanza ya Sen. Chimera. Hakuna kubweka katika Seneti; ni kuongea ama kuwakilisha. Iwapo lugha ya Kiswahili imemchanganya, basi atumie lugha ya Kimombo. Ningependa aniombe msamaha na pia ayatoe matamshi hayo katika HANSARD ya Seneti na awajibike. Sitakubali hayo. Ni kweli, ananiharibia jina. Kubweka ni kwa mbwa tu na wala sio kwa binadamu.

(Laughter)

The Speaker (Hon. Kingi): Sen. Chimera, proceed.

Sen. Chimera: Bw. Spika, Sen. Cherarkey hawezi kunifunza lugha ya Kiswahili. Mimi nimetohoa tu na kama haelewi, basi nitaweza kumfunza lugha ya Kiswahili nje ya Seneti. Nilitaka tu kusema kwamba sikuzungumza hayo kwa muktadha wa kuwa ndani ya Bunge hili lakini yale mambo ambayo Sen. Cherarkey---

The Speaker (Hon. Kingi): Sen. Chimera, umezungumza, ukasema kwamba, “Leo, Seneta wa Kaunti ya Nandi amezungumza jambo muhimu, si kama zile siku zingine ambazo huwa anabwekabweka.” Inamaanisha kwamba---

(Laughter)

Inamaanisha kwamba zile siku zingine, hazungumzi mambo ya maana, amezungumza tu jambo la maana hivi leo na hiyo si lugha nzuri ya Bunge. Tafadhali, ondoa maneno yale na umwombe msamaha na uendeleo kuzungumza ili umalize muda wako.

Sen. Chimera: Asante, Bw. Spika kwa mawazo hayo.

Ninachukua fursa hii niombe msamaha na nitoe maneno hayo lakini tu, nimkumbushe Sen. Cherarkey ya kwamba, kuna masuala mengine, akiwa nje ya Bunge hili hafai kuyazungumzia. Wazungu husema kwamba, *certain things are beyond ---*. Anaelewa ni nini ninazungumzia.

Tukirudi kwa mada ya kauli hii, ninachukua nafasi hii nimpongeze sana Sen. Cherarkey. Tunafahamu, wananchi wengi, hususan wananchi wangu kutoka Kaunti ya Kwale, husafiri kwenda nchi za kigeni; Uarabuni, Saudia, wakitafuta ajira ama kwenda

kufanya kazi katika nchi zile. Kama ilivyo hali halisi ya binadamu, wao hupoteza maisha na inakuwa ngumu sana kuletwa nchini Kenya ama Kaunti ya Kwale kuja kuzikwa.

Kauli hii ambayo Sen. Cherarkey ameileta ni muhimu sana na ninajua watu wangu wengi husafiri na wakati wanapofariki, familia zao huwa na changamoto nyingi sana kuleta miili ile nchini Kenya ili kufanyiwa mazishi. Na ninashangaa ni kwa nini mtu ateseke kutafuta ajira, apate ajira na kwa bahati mbaya akifariki katika nchi za ng'ambo, iwe ni vigumu zaidi kuleta mwili wake kusitiriwa nchini Kenya.

Mimi ninampongeza sana Seneta kwa kauli hii na nipatie kamati ile nafasi na maombi kwamba, wakati wanafanya uchunguzi, wahakikishe ya kwamba fedha hizi ambazo zimetangazwa hapa kuwa zitasaidia miili ya watu wetu iletwe kwa haraka iwezekanavyo, iweze kushughulikiwa, ili Serikali yetu hii ya Mheshimiwa Rais William Ruto iweze kuwasaidia wale ambao wanapoteza maisha katika hali ya kutafuta kule nje.

Asante, Bw. Spika, kwa hayo machache.

The Speaker (Hon. Kingi): Sen. Olekina, you may proceed.

Sen. Olekina: Thank you, Mr. Speaker, Sir. I would like to make some brief comments on a very important statement brought by the distinguished Senator from Kisumu on the issue of cybercrime and mobile fraud.

The biggest question that I have today is whether the rapid fintech growth in the country outstrips defenses in terms of our vulnerability. Just last year, our financial institutions lost about 1.5 billion dollars in terms of fraud. When you look at this, it has surged heavily to about 264 per cent when it comes to the issue of mobile fraud. The question is, are we failing as a nation to protect the citizens?

The distinguished Senator has asked the Senate Standing Committee on Information, Communication and Technology (ICT) to interrogate and have a sit-down with this very important institution, which is the National Computer Coordination Committee and the Secretariat. If you know anyone who sits in that Secretariat, you will know that it is a very important issue for security in this country.

The more vulnerable the people we represent are, mostly people who have very limited educational backgrounds, people who, when it comes to an issue of SIM swaps, they just go and swap or other people can swap their SIM. They take the money, which is in their mobile phones. Most families are actually languishing in poverty now because they save money, and then, because of a lack of control, a lack of defenses in this fintech growth, people lose their money.

Besides the committee looking or interrogating this very important institution, I think it is about time that we look at the laws on cybercrime in this country. It is about time that we tighten the controls. Whenever you go to an M-Pesa agent and they have this book from either Safaricom, where you write your ID number, do you ever ask yourself what happens to your ID at that particular time? So, this statement is very important and we should be very keen on statements that are brought that protect our citizens and ourselves.

In this country today, we have very weak identity protection in the sense that anyone can go to a Safaricom agent and swap their SIM cards. It is about time that the Committee on ICT looks at the law and the role that is played by this very important

secretariat and see how we can tighten it, so that we make it difficult for anyone to just get a line.

Today, I dare say, if you take your ID and you check how many lines you have, you will find that there are about 10 or 20. I know county governments that have so many IDs. You will find agents who collect revenue like cess have about 10 SIM cards registered to them.

If you follow the history of it, at some point, you will see that SIM card was lost, and it is now registered to somebody else because they collected a lot of money, which was meant to go to support the community, but now, since that record has been kept for some time, they throw it away.

We need to ensure that we tighten laws that govern our identity. It is also important because, currently, this is a systemic failure caused by our idea to embrace technology without really asking ourselves how do we protect ourselves from this technology. I think Central Bank, telecommunication companies and the Communications Authority of Kenya (CAK) must have a sit-down. This secretariat must pull up its socks to ensure that they protect citizens.

It is not just every Tom, Dick, and Harry comes up and says they want to register a fintech company and they are given a licence. Why can we not do a serious KYC? Look at what they are doing. These companies that are providing financial services, where are they coming from? That is a question that the distinguished Senator is asking, and I think it should worry us that we are losing a lot of resources---

The Speaker (Hon. Kingi): Sen. Kathuri.

Sen. Kathuri: Thank you, Hon. Speaker, for this opportunity again to make a brief comment on the statement requested by the Senator for Kitui County, Sen. Enock Wambua. The issue I was trying to address in his statement is how farmers in the arid and semi-arid areas can get good certified seeds for planting during this season. To attain food security, every farmer should be encouraged to grow crops; maize, beans, sorghum and any other crop that they can be able to produce.

The challenge that farmers have, and I was addressing this matter only to the county governors, is how they can get affordable and certified seeds, especially the seeds that can grow in households. Not forgetting also there is a role that the national Government plays in agriculture, especially in policy formulation. All fertiliser is currently imported by the national Government through the National Cereals and Produce Board (NCPD). The county governments only get to store in the warehouses that are certified.

The national Government has an obligation to ensure that fertiliser is available. Actually, the last mile for fertiliser should be at the ward level. Nowadays, you will find out that fertiliser is only delivered to the county headquarters. The people from far-flung areas are unable to get fertiliser on time, so that they can prepare their land for planting.

The seeds should not only be available for the arid and semi-arid areas, but also to the high-potential areas because that is where we have the green basket. High-potential areas should be supported to produce enough food, so that when the food fails, due to this rainfed agriculture, even when food fails in the marine lands, food will still be available in the high-potential areas and Kenya will be self-sufficient in food production.

We want to support that idea and also to say we really need a policy for those people who die while outside this country. People are now moving a lot through the government programmes to other countries to secure employment and do the work there. When there are calamities and they die, it becomes difficult for them to be repatriated.

Families have suffered, so we really need a policy in the Ministry of Foreign and Diaspora Affairs, so that Kenyans who die outside the country can be repatriated back and with minimum cost. The Government can actually foot those bills for those Kenyans.

The Speaker (Hon. Kingi): Sen. Hezena, please proceed.

Sen. Lemaletian: Mr. Speaker, Sir, I rise to make a comment on the statement by the Deputy Speaker of the Senate and the distinguished Senator for Meru County on the rise of banditry in the northern part of Meru. The magical north has so much potential and room for development.

While we are witnessing flooding in Nairobi because of overcrowding, the northern part is witnessing flooding of banditry. It is very ironical that this particular region is where we have the British Army Training Unit-Kenya (BATU-K), the Kenya Defence Forces (KDF) Unit, and the American forces.

The irony is that the same place where all these forces are confined still has very little security as far as the communities around the region are concerned. I do not know if this is a very well planned agenda to ensure that that area is very hostile for human survival or existence to be able to take away this land. That needs to be investigated thoroughly.

Mr. Speaker, Sir, I want to focus on the issue of compensation. Anytime there is a problem with the farmers in this country, we hear that they have been compensated with immediate effect. However, it looks like whenever our cows or livestock are stolen, or our lives are lost, nobody thinks about compensation, probably because we are people of a lesser God.

It is important that the Principal Secretary for Livestock Development, who appeared before one of our committees of agriculture recently, takes that matter very seriously. It is time for him to quit office if he is unable to do what he was employed to do.

After every banditry attack, our people are impoverished. They are sent back to square one, where they have to begin afresh. They do not have factories, industries or water to be able to partake in agriculture. All they depend on is the livestock. If their cows are taken and lives are lost, definitely, there will be a retaliation. It is high time that the national Government prioritises taking companies and factories from the crowded industrial area to the northern part of Kenya. We have enough land. We are ready to offer land for factories and investors in the manufacturing sector, as long as our people find an alternative.

When we continue coming to this Floor to speak about banditry, that our people are being attacked, when very little is done, nobody is thinking out of the box. It will be a repetitive cycle of criminal activities and a continuation of poverty.

Last but not least, I know that the northern part of Meru borders my county, Isiolo County, and I think Laikipia County. I know I cannot say that the Merus in that region are farmers. They are equally pastoralists like us. So when we talk about

diversification of means of livelihood, we are talking about Kenyan citizens from about four counties.

Thank you.

The Speaker (Hon. Kingi): The Senate Majority Leader, please proceed.

The Senate Majority Leader (Sen. Cheruiyot): Thank you, Mr. Speaker, Sir. I wanted to comment on two statements quickly. One is on the issue of challenges being faced at the Kenyatta National Hospital (KNH). Just put it on record that, perhaps, it is time our Committee on Health paid a visit to this particular health institution.

I know very well that over the years, due to neglect, and it is good because as I say this, the Chairperson of the Committee on Health is here. I am not sure whether he is listening to my comments. I know that as a Senate, we have no powers to do budgetary allocation, but they can surely and certainly plead with our colleagues in the National Assembly that referral hospital, given the number of Kenyans that rely on it for services, it is about time that there is a holistic approach into funding the operations of KNH to ensure that it has the requisite budgetary support to fulfill and meet the request and the demand for services by ordinary Kenyans. While at it, I know there have been conversations about Nairobi Hospital as well.

I have seen some characters, particularly people who do not have any agenda for this country in the opposition, trying to make a mockery of the fact that there is need to rescue that hospital. I agree with those who are arguing that the hospital is equally as important as any other hospital in this country. The last time I took a patient to Nairobi Hospital, I could tell there was a problem. Every person right from the doctors to the nurses--- Unlike in the past where you would make your payments using your health insurance card, everybody was asking for payment in cash and on M-Pesa. That tells you there is a challenge.

Mr. Speaker, Sir, in an institution of that stature, I hope that a quick resolution of the matter is reached, so that the hospital continues to offer services to Kenyans, otherwise, we will find ourselves in a situation where we are squeezing the little space that is already non-existent in other national referral hospitals.

I thank you.

The Speaker (Hon. Kingi): Sen. Omtatah, proceed.

Sen. Okiya Omtatah: Thank you, Mr. Speaker, Sir. I would like to comment on the Statement by Sen. (Prof.) Tom Ojienda on the rise in mobile money fraud. We should have the capacity to deal with this issue on real time. The people who masquerade with fake numbers and con people can be traced. They say they have got the capacity to do so with the IMEIs. Therefore, there should be a mechanism within the police force to seriously take action.

Just the other day, someone was trying to con me. I applied for a new meter back in my village. I do not know how that information got in the hands of fraudsters who called me just as I received a bill of Kshs156,000. No sooner had I received the bill on my phone, somebody called me and said they were from Kenya Power. This was yesterday. They said they could do A, B, C, D and reduce the bill and check the site. However, when I followed up with Kenya Power, they said they had not called me, but had only sent the bill. This looks like a web of people who can be followed up. I

forwarded the number to Safaricom. I hope they will engage the police with the technology we have today and locate that fraudster. So, it is a serious issue which deserves the attention of the Republic.

Mr. Speaker, Sir, I also want to talk on the question of seasonal floods. I come from Busia and Budalangi, which is an area that is plagued with floods. Some of the floods could be mitigated by farming habits. If you go to Western Kenya today, you will find that like in the village I grew up, you could cross the river that used to flow through my village. Today, it is just a trickle. If you look at the farming habits, the coming of sugarcane has resulted in people draining swamps, so we hardly have any wetlands.

Therefore, there is need to have a comprehensive intervention and also to ensure that wetlands are protected. Like for Bunyala area, we need some intervention to desilt the rivers. The rivers cannot flow into the lakes that are full. Sometimes, if you go there, you will see the lake standing like a pillar. We also need to talk to the people in Uganda with the Owen Falls, so that they allow enough water to flow out.

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

[The Deputy Speaker (Sen. Kathuri) in the Chair]

Mr. Deputy Speaker, Sir, I can see the light has lit up, but I would like talk about the issue of snakebites. Snakebites are a serious issue and people die out of snakebites. There is no reason why we should not be able to stock this kind of materials. I went to my hospital in the immediate neighborhood in Koteria on Sunday this past week. I was shocked at the level of understocking of essential medicines for first responders. A snakebite should be like for first responders, and we have lost lives.

Mr. Deputy Speaker, Sir, these are important statements and I support them. I pray that they are addressed by relevant parties.

The Deputy Speaker (Sen. Kathuri): Sen. Nderitu John Kinyua.

Sen. Kinyua: Asante, Bw. Naibu wa Spika, kwa kunipa fursa hii. Kwanza ningetaka kuchangia kauli iliyoletwa na Seneta wa Meru. Wizi wa mifugo umekuwa donda sugu katika kaunti za Laikipia, Meru, Isiolo, Baringo na Elgeyo Marakwet. Kuna polisi wa akiba na wamekuwa wakilipwa hela zao zikiwa zimechelewa. Hizo hela ni kidogo sana. Hawa ndugu zetu, polisi wa akiba, wakilipwa kwa wakati unaofaa, pengine watasaidia kuleta usalama.

Vile vile, huu wizi si wa kawaida. Kunaonekana kuna wale mabwenyenye ambao wamefanya biashara ya wizi wa mifugo kuwa jambo la kawaida. Nimefanya utafiti wa huu wizi wa mifugo na utapata ya kwamba, yule anayefungulia mifugo ama wanaovizia pale malishoni, halafu yule anasukuma wale mifugo na yule anaenda kununua wale mifugo, ni watu wana usemi mkubwa. Ndio maana unaona jambo hili haliishi.

Ni juzi tu, Waziri wa Usalama na Masuala ya Humu Nchini, Mheshimiwa Kipchumba Murkomen alitembelea Kaunti ya Laikipia, mahali kunaitwa Doldol. Hata baada ya kutembea pale, Mheshimiwa Kindiki alikuwa ametembea papo hapo wakati chifu alikuwa ameuwawa. Inakuwa ni kama jambo la kawaida, huu mwizi wa mifugo. Hili jambo linafaa lichukuliwe kwa uzito unaofaa.

Jukumu la serikali ni kulinda mali na maisha ya wananchi. Wale wanaopoteza mifugo yao wanapaswa kupewa fidia na serikali. Pengine hivyo, itasikia ule uzito na wachukulie lile jambo kwa uzito ambao unafaa kwa sababu, pale Laikipia, ukienda El Moran, Eldonyek, Dod na Sosian, tunaishi kila saa kwa hali ya taharuki kwa sababu ya huu wizi wa mifugo. Kwa hivyo, kamati inayohusika inapaswa iangazie hili jambo kwa undani.

Kuna kauli imeletwa na Senata wa Kitui, Enoch Wambua, kuhusu mbegu na mbolea. Kinga ni bora kuliko tiba kwa sababu ni kejeli kusema kwamba utapatia watu wanaoishi katika sehemu kame chakula cha msaada badala ya wakati huu, ambapo tupo katika msimu wa mvua, kuwapatia wakulima pembejeo na mbegu ambazo zinakubalika.

Kama sehemu zile pengine wapewe mtama au wimbi kwa sababu, hizi ndizo mbegu zinaweza kunawiri hata wakati wa ukame. Mbolea haipaswi kuletwa katika miji ila katika zile sehemu watu wanalima. Si kuleta katika maghala kwa mfano, kule Nanyuki---

(Interruption of Statements)

The Deputy Speaker (Sen. Kathuri): Hon. Senators, I have this Communication to make.

COMMUNICATION FROM THE CHAIR

VISITING DELEGATION FROM KUIKUI SENIOR SCHOOL IN BARINGO COUNTY

The Deputy Speaker (Sen. Kathuri): Hon. Senators, I would like to acknowledge the presence in the public gallery this afternoon of visiting teachers and students from Kuikui Senior School in Baringo County. The delegation comprises two teachers and 46 students, who are visiting the Senate for an academic exposition.

Hon. Senators, on behalf of the Senate and on my own behalf, I extend a warm welcome to the delegation and wish them fruitful learning.

Senators, you know that the tradition of the Senate in Parliament is when visitors are around, we applaud them the way you know. You were fast to mention the Senator for Baringo County, but you are not doing your duty.

The Senator of Baringo County, welcome the visitors in one minute.

Sen. Kiprono Chemitei: Thank you, Mr. Deputy Speaker, Sir, for giving me this opportunity to welcome the young learners from my county, Baringo. I know Kuikui Secondary School. It is located in Baringo North, in Baringo County. I would like to welcome the young learners. Kuikui Secondary School performs very well. We, your leaders, are very aware of the school.

Mr. Deputy Speaker, Sir, a long time ago, when I was a student, I happened to visit this House. Today, I stand here again, representing the great County of Baringo. So, I wish the young learners who are here today, good learning in the House. One day, one of them will be the representative of Baringo County once I am done as their Senator.

So, as they go back home, I wish them safe travels. Pass my greetings to your parents and continue working hard in your studies.

Thank you.

(Applause)

The Deputy Speaker (Sen. Kathuri): I do not know whether your colleagues, Sen. Mandago and Sen. Kinyua, have given you enough orientation that you must also see them *nyuma ya tent*.

(Applause)

(Resumption of Statements)

Hon. Senators, we have overshot Statements Hour with more than 40 minutes, yet I can see approximately 10 Senators are lined up with requests. I will give two from this side and two from the other side, then we can conclude that business.

Sen. Tabitha, please, proceed.

Sen. Tabitha Mutinda: Thank you, Mr. Deputy Speaker. I want to briefly comment on the statement by Sen. Cherarkey with regards to the issues of migrant workers.

It is not only repatriation of our beloved Kenyans when demise happens that is needed. It would also be prudent if their loved ones could be facilitated to travel back home. This is because some of them have given birth to children, but when their bodies are brought back to the country, those children are not able to accompany their Kenyan parents back to their original soil.

I am happy and would like to thank this House for supporting my Bill, the Labour Migration and Management (No.2) Bill (Senate Bills No.42 of 2024) that passed and is currently at the National Assembly. I know it will address these issues widely.

Mr. Deputy Speaker, Sir, I would like to also comment on two very key statements that touch on health. I serve in the Senate Committee on Health with a lot of passion. These two statements are from *Mheshimiwa* Gataya and *Mheshimwa* Seki with regards to the issues of the Kenyatta National Hospital (KNH).

Sen. Seki's statement talks about blood bags. The Swahili word is *mifuko*. How, for Christ is sake, can we, in this time and era, be lacking bags for collection of blood? That is basic. This is lack of priority for what is needed. It is a shame.

Mr. Deputy Speaker, Sir, the second statement is on the issue of the disease called cancer. The statement by *Mheshimiwa* Gataya talks about the linear accelerator machine that has issues and has not been repaired, hence having only one machine in a national hospital. It is a shame. Cancer is one of the deadliest diseases in the country. Actually, it should be declared a national disaster. It is high time that cancer is treated for free because it is affecting many people. Almost in each and every homestead there is an issue.

I thank the Social Health Authority (SHA) for increasing the amount allocated to cancer patients from Kshs550,000 to Kshs850,000. However, it is not enough if the same hospitals that Kenyans are depending on, for example, Kenyatta National Hospital, does not have a basic machine. No Kenyan should suffer or die from a disease that can be prevented or treated. It needs early diagnosis. Cancer is a disease that can be addressed.

Radiographers are scarce in this country. The few that are there should be motivated across all the counties and at the national level because they play a critical role. Late diagnosis is what is killing our dear Kenyans.

Mr. Deputy Speaker, Sir, the cost of cancer medication should be lowered significantly. We should be able to pass this. Human Immunodeficiency Virus (HIV) drugs today are free and people who are suffering from HIV have been able to go to hospitals and get these drugs, and are proudly saying that they are on medication. The same should be offered to people with cancer. Radiography machines should be procured in each and every national hospital, especially the national hospital.

How can a national hospital like KNH lack such a machine and people sit comfortably without it? I urge my colleagues that when we will be passing the Division of Revenue Bill, we agree to increase allocation to the health sector. You can do everything right, but when this disease hits you, everything stops. It is high time that we support matters health.

I want to---

The Deputy Speaker (Sen. Kathuri): Sen. Omogeni Erick, please proceed.

(Loud consultations)

Sen. Omogeni: Mr. Deputy Speaker, Sir, I would like to speak on the statement that has been brought to the House by my friend, Sen. Mwenda Gataya. For once, I am doubting whether the contents of this statement are true. If indeed they are, then we have no country.

If it is true, as stated by Sen. Mwenda Gataya, that the only linear accelerator machine at our national referral hospital has been non-functioning, broken, not repaired for two months, then we have no business sitting here as leaders. Cancer is not a disease to joke with. A delay of two months will be a decision to either save or lose a life.

Honestly, if we were serious, we would have requested the Chief Executive Officer (CEO) of this hospital to be here tomorrow to confirm to us whether there are people in those offices taking tea and *mandazi* funded by taxpayers when cancer patients are not getting treatment. This statement is a test on our humanity and leadership. When such a matter is brought to our attention, we should down our tools. What else are we doing as leaders if we cannot fight for the poor? Anybody going to the KNH has nowhere else to go. They are going to a Government hospital where Article 43 of our Constitution can come to their aid.

Denying these Kenyans a chance to be treated in that hospital would be subjecting them to a situation where they may sell their only small portion of land or even deny their children a chance to go to school. This is unacceptable. The Chairperson of the Senate Committee on Health is in the House. Let us get answers on this issue before we even

adjourn our proceedings tomorrow. Cancer can totally push families to financial ruin. If you deny a family a chance to get treatment at the Kenyatta National Hospital and you tell them to take an option of Agha Khan University Hospital (AKUH), you may be driving them to poverty.

I appeal to my good friend, the Senator for Uasin Gishu County, to make an extraordinary step and let us know whether it is, indeed, true that the machine has been broken for the past two months. That is the only way those who are watching these proceedings can say they have a Senate of the Republic of Kenya that cares.

Finally, Mr. Deputy Speaker, Sir, this is a reminder that we need to have a proper Universal Health Coverage (UHC). Families should not be traveling from Meru, Nyamira, Kericho or Nyeri to come and access services at the only referral hospital in Nairobi. That is not the way to go. We are sending a message that devolution does not give hope to Kenyans. Let us have a true UHC where services especially for cancer can be availed to the people we represent at the county level.

I support.

The Deputy Speaker (Sen. Kathuri): Sen. Mandago, you are Chairperson of the Committee on Health and a lot of issues by many speakers have come your way. As the Chairperson, we would like to have that information soonest time possible. I direct that you give us the maximum time you will take as a committee to process this statement as a matter of priority.

Please proceed.

Sen. Mandago: Mr. Deputy Speaker, Sir, indeed, the matter that has been raised concerning Kenyatta National Hospital (KNH) is a critical one. My committee is now seized of that matter. Within a week, we should report to the House on that matter. I want to assure hon. Members that my committee will make a quick visit to KNH to ascertain the status of those machines before we give feedback to the House.

The issue of cancer treatment is a matter of national interest. That should not be limited to KNH only because all our county referral hospitals should be offering those services. Therefore, I agree with my colleague and a Member of my committee that if this honourable House, the Senate, makes sure that any additional resources are taken to counties through the equitable share, we can provide for conditional allocation of funds for health.

When funds go to the counties, the competing priorities of services that are being delivered makes it almost impossible for the health function to receive requisite resources to support matters such as cancer treatment. We also need to increase our human resources.

The oncologists that we have in this country are few. That is why most of the equipment is centralised at the national referral facilities. Therefore, this is a matter of national interest. I urge the House that even as we consider division of revenue for the next financial year in the next budget, let us ensure that we put money as conditional allocation for counties to use.

It should also be noted that there is a concerted effort by the national Government, through the National Equipment Service Programme (NESP), where all national referral facilities have been given the opportunity to get equipment through that arrangement that

will not require immediate capital expenditure on procurement of equipment, but on a placement model, so that we pay for the use. We expect national referral facilities to move with speed and utilise that programme to make sure we have sufficient equipment. We also urge the Ministry to increase the human resource required for that sector.

Regarding the Statement by Sen. Hezena on a matter of interest concerning dispensing of drugs in one of the chemists in Eldoret, we are seized of that matter. However, my committee will crosscheck the facts. There have also been allegations that it was an attempted fraud. Since the statement has been raised, we are going to look into it as a committee.

Finally, Mr. Deputy Speaker, Sir, on the matter of banditry, the national Government is doing a good job. However, we request the Cabinet Secretary for Interior and National Administration to concentrate in Samburu, Meru and parts of Turkana where we are still experiencing that.

We are grateful that Kerio Valley that had become a deathbed is now silent and families have gone back to their farms. Farming is happening there and a lot of economic activities are going on. We only urge the State Department for Internal Security and National Administration to enhance their efforts in areas that are affected, so that our people can go back.

We should not allow people like Sen. Kinyua to mislead citizens of those counties that---

The Deputy Speaker (Sen. Kathuri): Proceed, Senate Majority Leader.

The Senate Majority Leader (Sen. Cheruiyot): Just a concern, Mr. Deputy Speaker, Sir. I heard the instructions that you gave to the Chairperson of the Committee on Health. You were very clear that he is the Chairperson of the Committee on Health. Therefore, he should do a small brief of many issues that are being canvassed. I commend him because he covered quite a number of them. However, he did not cover the most important one, which even I, as the Senate Majority Leader, have raised with him.

Section 43 of the Social Health Authority Act demands that the Cabinet Secretary at the end of one year should file a report with Parliament on the operations of SHA. It is now more than one year since that happened. It will be good to hear from the committee chairperson if they have engaged the Ministry and how far that report is.

Mr. Deputy Speaker, Sir, the reason I want that report to come is to confirm a few statements of information that have been peddled by various Senators in this House. I have heard Senators, including my good neighbour Sen. Omogeni, on many occasions say that there is nobody from Nyamira who has ever gone to a hospital and SHA paid their bill. Why I want that report is so that we can see whether there is anybody from Nyamira that has gone to hospital and have their bills paid or there is absolutely no one.

I thank you.

The Deputy Speaker (Sen. Kathuri): Yes, Sen. Omogeni.

Sen. Omogeni: Mr. Deputy Speaker, Sir, it is not right for my good friend, the Senate Majority Leader, to misquote me. I have never stated that nobody has gone to hospital and SHA---

The Senate Majority Leader (Sen. Cheruiyot): But you said it is not working!

Sen. Omogeni: No, let us have facts clear. I said that under SHA, benefits that are supposed to be enjoyed by people are not properly defined. I have stated here that there are instances where patients have gone to hospitals suffering from the disease we are discussing this afternoon, that is cancer, and incurred bills of over Kshs800,000, but SHA has only paid a portion. That is Kshs146,000, which is about 15 per cent.

I have said here that we cannot pretend that SHA is serving the poor and the vulnerable when it only pays a small portion and leaves patients with a large burden. That is what I have stated in this House. If I am challenged, I am willing to go an extra mile and table those documents before this House. That is what I have stated.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, another continuous line of misinformation by Sen. Omogeni. It would be important if Sen. Omogeni became a bit more diligent in his work and listened to his colleagues when they are speaking.

I have had more than three colleagues speak this afternoon and they have told you. Every insurance, including the one you have given to us, as Members of Parliament (MPs), has a benefits package. For example, in the package you have given us, as MPs, the maximum amount allowed for dental care is Kshs75,000. Beyond that amount, Sen. Omogeni, you have to---

(Sen. Omogeni spoke off record)

Mr. Deputy Speaker, Sir, could he allow me to correct him because he is misinforming the House?

The Deputy Speaker (Sen. Kathuri): Just a minute, Sen. Omogeni.

The Senate Majority Leader (Sen. Cheruiyot): Under cancer, for example, the package was recently reviewed from Kshs550,000 to Kshs850,000. Therefore, he is obviously not telling the truth when he says that a patient from his county was paid for only about Kshs150,000. That is not true because it is not possible.

Sen. Omogeni, the whole point I was trying to say - perhaps why I want you to listen and not get agitated - is that we need that report tabled here in Parliament, so that we debate it and see what SHA has done, what they have got right or wrong, otherwise, we cannot allow this Floor to be used to peddle political statements.

Mr. Deputy Speaker, Sir, I thank you.

The Deputy Speaker (Sen. Kathuri): So, the Chairperson of the Committee on Health, you can give that other commitment or update the House whether you have started engaging the Cabinet Secretary for Health on the SHA annual report.

Sen. Mandago: Thank you very much, hon. Speaker. I want to inform the Majority Leader and hon. Members that on the matter of the annual report for SHA, we are seized of that matter. We have written to the Ministry. We are expecting their response this week. This is the second time we are writing to them. So, if they do not appear, then we shall be issuing summons to the Cabinet Secretary to appear before the committee and provide the report. We have also notified the Board of SHA and the CEO that they are actually in breach of the law because it is a statutory requirement that they are supposed to file their annual reports yearly.

I agree with the Senate Majority Leader and hon. Members here that they need to have those reports, so that we can check where SHA has done exceedingly well, where they are struggling, and if they need any legislative interventions, this House has always been ready to support. So, we do not want them to grapple in the dark or struggle when Parliament and this House has always been ready and able to support them. That is why this House was able to pass the Facilities Improvement Financing (FIF) Act, which is now supporting the facilities, although our weakest link is actually in the county governments because most of the funds for FIF have been withdrawn arbitrarily.

Hon. Speaker, some counties are even failing to budget for health in their main budget on account that the facilities will raise money through FIF. Those are the things the House will consider. However, I want to assure the House that by next week, we shall be giving feedback on how far we have gone with that matter.

Thank you very much, Hon. Speaker.

The Deputy Speaker (Sen. Kathuri): Hon. Senators, remember, we were concluding the statements and I can see that the list is still growing. I opened up more time because of the issues of national importance raised in various statements this afternoon. If we do not transact other business, but sort out the cancer issue in the country, so be it. That is why we have extended that time. That notwithstanding, Sen. Wamatinga, you have two minutes.

Sen. Wamatinga: Thank you very much, Mr. Deputy Speaker, Sir. Allow me to also take this opportunity - you have not made the communication to welcome the two schools in the public gallery, which hail from Nyeri.

Having said that, let me proceed and say that, yes, I have listened to my colleagues, but I must also register my disappointment because I feel that we are doing pretty very little to ensure that we detect cancer at an early stage. I have the advantage of studying and bringing up a family in Germany. Cancer detection starts at a very early stage. If it is noticed that it lands in the genes of the family, it actually starts at childbirth, so that the medication that you are given works. Early detection is what we need in this country.

How I wish, instead of people cramming on top of lorries shouting 'one term' or 'two terms,' that we would be organising cancer screening seminars in schools, public galleries and in markets where people are screened. We will not only save this country a lot of money, but also save many lives.

This is an obligation that we cannot push to one side of the Government. We cannot say it is the county governments or the national Government. It is an obligation that we have as Kenyans to protect our fellow Kenyans, to ensure that those in our families are detected early enough, so that they can get the cure and medication. Most important, the lifestyle that leads to that can be addressed at the right time.

Thank you, Mr. Speaker, for giving me the two minutes.

The Deputy Speaker (Sen. Kathuri): Sen. Mohammed Chute, you have two minutes.

Sen. Chute: Thank you very much, hon. Speaker. Two minutes are not enough, but let me move very fast. First of all, it is in regards to the statement by the distinguished Senator for Meru.

We need to have experience from Marsabit County. The most important thing is to bring our people together, communities from Laikipia, Isiolo, Meru, Marsabit and Samburu. We have committees called peace committees. Under my supervision, my committee can have a programme, so that we can bring these four counties together and see how we can solve the problem which is in Isiolo, Samburu and Marsabit.

On the issue of the Kenyatta National Hospital, today, it is under very good management. You know, the CEO now is Lesiyampe and the chairman is the former CEO of Kenya Red Cross. They are doing very well. I was in that hospital recently and the situation is better than what it was before.

Finally, on the statement by the distinguished Senator from Kitui on the issue of seeds, before they buy seeds, they should have public participation to ask the communities from a particular area, what type of seeds they require. After public participation, they should look at the price of the commodity also.

Three, let them not rush to giving people relief supplies. In northern Kenya and upper Eastern, they are using a tune of up to Kshs1.5 billion to buy relief supplies. Why do you buy relief supplies if you can afford to buy seeds and help our farmers?

Sen. Okiya Omtatah: Mr. Speaker, Sir, I rise on point of order under Standing Order No.105 to demand that my brother and friend, the gentleman from Marsabit, substantiate his claim that Kenyatta National Hospital is now under good management, it is run very well and everything is perfect there. What I know is that it continues to deteriorate. I would like him to substantiate his claims or withdraw them.

Thank you, Mr. Deputy Speaker, Sir.

The Deputy Speaker (Sen. Kathuri): Sen. Chute.

Sen. Chute: I think he was not listening to me very carefully. I repeat again and say, I was at the Kenyatta Hospital recently and the management there of CEO Lesiyampe, and chairman, former CEO of Red Cross, is better than before. That goes to even support from the President himself. That is why you will find today that hospital is doing very well.

I know his hospital in Busia is not doing well. That one I know, but maybe he is thinking I was talking about Busia. No, I am talking about Kenyatta National Hospital. I have said it is doing very well. By the way, even on SHA, recently a patient from Isiolo went to Nyeri and two operations were done. Both operations costing Kshs890,000 were paid for by SHA. So, is it working or not working? It is working. Let us get the annual report and see if counties in Nyamira are not doing well, then we can amend some laws here.

Thank you very much, hon. Speaker.

(Interruption of Statements)

COMMUNICATION FROM THE CHAIRVISITING DELEGATION FROM NYANGARITHI AND NYAKINYUA
COMPREHENSIVE SCHOOLS, NYERI COUNTY

The Deputy Speaker (Sen. Kathuri): Order, hon. Senators. Let me make this communication regarding visiting teachers and students from Nyangarithi and Nyakinyua comprehensive schools in Nyeri County.

Hon. Senators, I would like to acknowledge the presence in the public gallery this afternoon of visiting teachers and students from Nyangarithi and Nyakinyua comprehensive schools in Nyeri County. The delegation comprises 13 teachers and 96 students who are visiting the Senate for an academic exposition.

Hon. Senators, on behalf of the Senate and on my own behalf, I extend a warm welcome to the delegation and wish them a fruitful learning.

Thank you.

Hon. Senators, let us now close that order, stop that business completely.

Senator for Nyeri, as I reorganise myself, you can welcome them in under one minute.

Sen. Wamatinga: Indeed, thank you very much, Mr. Deputy Speaker, Sir. Let me take this opportunity to welcome once more, the pupils of Nyangarithi and Nyakinyua. We had lunch together and shared a lot. I inspired them and told them that their destiny is in their own hands. I recall that I gave them the analogy of a butterfly in your fist. I told them that it was their choice whether they want to let it fly or squeeze it dead. It is indeed very important that we, in the leadership, take the opportunity to inspire the young generation because when we are long gone, they will be the ones who will take this country forward.

I promised these two schools that I would bring them to the Senate, so that they could see how we debate. I am happy that they have had an opportunity of sitting here with us and listening to the debate. I am happy that the topic that was being discussed was very important since it affects almost every household. I am happy that they will take home something positive from here.

I wish them journey mercies as they embark on their journey back home, but in the tradition of this House, I will see them out there.

(Resumption of Statements)

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, just on the point of procedure, I know you want to go to the next Order, but I have just remembered that in the morning we had a situation here where Sen. Chute made a very wild allegation and claimed that somewhere in Burkina Faso, a road the size of the Expressway has been built for Kshs100 million or a certain ridiculous figure. When challenged, he said today in the afternoon he would bring the evidence.

Out of public interest, I would wish to get to know also how they do it in Burkina Faso, so that we can help even counties and the country. I believe this, I do not know

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what time you are planning for him to do that, because the promise was that he will do that this afternoon.

The Deputy Speaker (Sen. Kathuri): I will be finding out what happened to that substantiation in due course.

Sen. Omogeni: Mr. Deputy Speaker, Sir, just following the same line, I made a statement this afternoon while contributing that there are instances where SHA has failed to clear bills for patients. I want to table an invoice from Nairobi Hospital where the patient incurred a bill of Kshs1,119,414 and SHA paid a total of Kshs218,994. This was a cancer patient on 19th September, 2025.

I want to tell my friend, my neighbour, Senator of Kericho, the Majority Leader, that I do not make these statements wildly. I make these statements with a deep concern on the poor of their poorest in this country. I know families in Nyamira, who have sold land to pay bills for their relatives who have incurred---

The Deputy Speaker (Sen. Kathuri): What is your point of order? How will you table your phone?

Sen. Omogeni: My point of order is to table this invoice as proof that SHA--- It is allowed. I will forward it to the Clerk. It is allowed.

(Sen. Cheruiyot spoke off record)

Sen. Cheruiyot, this is not---

The Deputy Speaker (Sen. Kathuri): Sen. Omogeni, can you resume your seat?

Sen. Omogeni: Mr. Deputy Speaker, Sir, I am not---

The Deputy Speaker (Sen. Kathuri): I must give guidance to this House.

Sen. Omogeni: But guidance, Mr. Deputy Speaker, Sir--- I have been challenged and I am tabling a document.

The Deputy Speaker (Sen. Kathuri): How are you tabling the document?

Sen. Omogeni: I want to forward it to the clerks here. I have done it before; there is precedent. Let us not have this culture of not wanting the truth to come to the fore. Let the truth speak. It is here.

The Deputy Speaker (Sen. Kathuri): Sen. Omogeni---

Sen. Omogeni: Mr. Deputy Speaker, Sir, if you are here in this House to---

The Deputy Speaker (Sen. Kathuri): I am giving guidance to you. What type---

Sen. Omogeni: Mr. Deputy Speaker, Sir, we cannot have a country where people are dying and when we say it, you block us. It is not right. We must speak for the poor. That is why we have people's representatives. When people die, it is not a joke. Nobody is happy when their relatives die. You must allow us to tell Kenyans the truth and the---

The Deputy Speaker (Sen. Kathuri): Sen. Omogeni, have your seat.

Sen. Omogeni: What is wrong with tabling a document?

The Deputy Speaker (Sen. Kathuri): Which document are you tabling?

Sen. Omogeni: I have said I am tabling an invoice and I have given reference.

The Deputy Speaker (Sen. Kathuri): The guidance we give this House is that the Chairperson of the committee on Health will bring a comprehensive report to this Floor within seven days. Now we are waiting for his report, the SHA annual report.

Sen. Omogeni: You are diverting the debate from the point; even God Almighty knows.

The Deputy Speaker (Sen. Kathuri): You know we are not debating, but giving comments on the statements.

Sen. Omogeni: Even from the bottom of your heart, you are diverting us from---

The Deputy Speaker (Sen. Kathuri): No, I am not. You are the one who is---

Sen. Omogeni: Even God knows that this afternoon you are trying to block the truth.

The Deputy Speaker (Sen. Kathuri): Ah! No. Now, you know you are intimidating the Chair, but you know your blood and mine cannot be intimidated by anyone. You know very well. So, just follow the right procedures.

Next Order.

BILL

First Reading

THE DIVISION OF REVENUE BILL
(NATIONAL ASSEMBLY BILLS NO.2 OF 2026)

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

Next Order.

BILL

Second Reading

THE AGRICULTURE PRODUCE (MINIMUM GUARANTEED RETURNS)
BILL (SENATE BILLS NO.17 OF 2025)

(Sen. Veronica Maina on 26.2.2026)

(Resumption of debate interrupted on 10.3.2026)

The Deputy Speaker (Sen. Kathuri): On this business, Sen. Veronica Maina is not in the House, so this business is deferred.

(Bill deferred)

Next Order.

BILL*Second Reading*THE PUBLIC AUDIT (AMENDMENT) BILL
(NATIONAL ASSEMBLY BILLS NO.4 OF 2024)*(Sen. Cheruiyot on 10.03.2026)**(Resumption of debate interrupted on 12.03.2026)***The Senator Majority Leader** (Sen. Cheruiyot) You, guys, have a bad habit---**The Deputy Speaker** (Sen. Kathuri): Majority Leader.**The Senate Majority Leader** (Sen. Cheruiyot): Sorry, sorry, Mr. Deputy Speaker, Sir.**The Deputy Speaker** (Sen. Kathuri): I am here to manage the House. You cannot be the Majority Leader and the Chair.**An. Hon. Senator:** That is what he is doing.**The Deputy Speaker** (Sen. Kathuri): So, you proceed and reply.**The Senate Majority Leader** (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, it is Sen. Wambua who mentioned my name, so I ended up responding to him, but I am sorry. You know, I am a gentleman unlike--- I do not want to say.

I want to do things procedurally because I have realised in this House sometimes people want to devise new procedures, including doing things which have never been done in this House. We know what the procedure is. When you are told, 'Mover to reply', you come and give comments based on what colleagues have said about the Bill, respond to some of the issues that they have raised on that Bill and give assurances and the comfort.

What will happen if I came and devised new ways of 'Mover to reply' and insist and start arguing back with you saying that I am replying? Then we do not have Parliament anymore.

A total of 22 colleagues spoke on this Bill; the Public Audit (Amendment) Bill (National Assembly Bills No.4 of 2024), many in support. Nearly everybody on the need, particularly those that understood what this Bill was about. Following debate, you could tell that there were Members who maybe met this Bill on the Floor of this House and had not taken time to read because of many of the allegations that were being made about it.

I am glad none of them cited any clause in the Bill that would mention those things that they were talking about, but there were very serious and weighty matters that were raised by diligent Senators, who took time to read the Bill. They felt that certain things being done in a certain way--- We will be guided by our Committee. I believe it is the Committee on Finance and Budget that will consider this Bill.

There was a very weighty matter of the advisory board. Many felt that having an advisory board, despite being chaired by the Auditor-General, may undermine her powers. I also listened to those who argued in favour of the proposal. They noted that no

institution by design of the Constitution, common sense or global practice should equate independence with individual tendencies. Independence does not mean that a single individual should hold all powers in an institution.

Those who opposed this clause raised concern about the presence of certain individuals, particularly the Attorney-General, who is the chief legal officer of the Government. Since the Auditor-General audits public institutions, they argued that this raises a conflict of interest. Sitting in the advisory board, such individuals may undermine, influence or guide the audit process differently.

It will be of interest to see how the committee guides us and what comments we receive. I have not seen the report yet, but I know it will come later. It will show whether the Auditor-General supports or opposes the provision or how she wishes it to be amended.

Mr. Deputy Speaker, Members also raised concern about whether this matter has anything to do with recent stories about the Auditor-General. In my moving notes, I mentioned that we have a culture in this country, particularly in the media, of misrepresenting audit processes.

During an audit, the Auditor-General issues a management letter to institutions. If one picks that letter and runs with it, it may appear as though the institution has collapsed. Newspapers often present management letters as final verdicts.

In reality, the audit process of public institutions or corporate bodies in this Republic ends at the floor of the House. After the Auditor-General writes to the institution, the institution responds with justifications. The Auditor-General then gives a verdict. That report is brought to Parliament. Oversight committees, such as the County Public Accounts (CPAC) and County Public Investments and Special Funds Committee (CPISFC), invite leaders of public institutions to explain. They retreat, draft a report and present their verdict. Once the House makes a resolution, the audit process is complete.

Unfortunately, today, the process is cheapened. Questions are raised on the Floor about inflated figures or project costs. If we use audits for cheap political goals, we miss the constitutional intent. Audit is meant to raise alarm on possible loss of public funds, governance issues or poor practices. It ensures accountability in recruitment, policy and management.

I hope we can strengthen the office of the Auditor-General. It is a key gain of the Constitution of Kenya, 2010. It provides checks and balances and exposes misuse of public resources. The sanctity of the audit process must be respected by Parliament, the media and all in public space. Otherwise, it will lose purpose.

I appreciate colleagues who spoke to this Bill. I hope the Committee on Finance and Budget will furnish us with a report and guide us, especially on controversial issues. Eventually, amendments may be necessary.

Mr. Deputy Speaker, Sir, with those remarks, I beg to reply in the proper way of doing business in the House. I am not trying to introduce any new style of doing it. I conclude at---

Sen. Osotsi: On a point of clarification, Mr. Deputy Speaker, Sir.

The Deputy Speaker (Sen. Kathuri): Yes, Sen. Osotsi.

Sen. Osotsi: Mr. Deputy Speaker, I know this Bill has been committed to the Committee on Finance and Budget. I also know that the oversight committees of CPAC and CPISFC interact with audit processes daily. I request, through your office, that the two committees also consider this Bill alongside the Committee on Finance and Budget. We deal with these matters daily and we are better placed to make recommendations. If you can give that direction, it will allow these two committees to operate jointly.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, I am not very sure how that will work. We all interact with audit reports. I know you are very busy. There are serious matters you are considering at this point. While what you are saying is important, I do not think the only value this House can draw from your two committees is by you interacting with the said Bill. Maybe you could furnish the committee with your memorandum after reading the Bill and giving your comments. At that point, we would benefit from the wisdom of interacting with audit reports daily.

I had concluded my comments before the intervention by Sen. Osotsi. I beg to reply. Pursuant to Standing Order No.66 (3), because I am a stickler for Standing Orders and I do not want to introduce any new way of doing things the way we have witnessed this afternoon, I request that the putting of the Question be deferred until a later date.

I thank you.

The Deputy Speaker (Sen. Kathuri): Yes, the putting of the Question is deferred until a later date.

(Putting of the question on the Bill deferred)

Sen. Osotsi, you can interact with the Chairperson of the Committee on Finance and Budget and work together to see how you can give some input into the Bill.

Let us move to the next Order.

The Deputy Speaker (Sen. Kathuri): The business appearing as Order No.11 is deferred. We move on to the next Order.

BILL

Second Reading

THE CULTURE BILL (NATIONAL ASSEMBLY
BILLS NO. 12 OF 2024)

(Sen. Cheruiyot on 24.02.2026)

(Resumption of debate interrupted on 10.3.2026)

(Bill deferred)

BILL*Second Reading*THE HEALTH (AMENDMENT) BILL
(SENATE BILLS NO. 12 OF 2025)*(Sen. Omogeni on 17.03.2026)**(Resumption of debate interrupted on 17.03.2026)*

The Deputy Speaker (Sen. Kathuri): This is where the road meets the rubber. We are on the Health (Amendment) Bill. You now have time to debate all the issues that Sen. Omogeni was raising and all these matters. This is because procedurally, that is how the House moves. I understand Sen. Cherakey had eight minutes to conclude his contribution.

Sen. Cherarkey: I wanted to deal with Sen. Omogeni, but that one is beside the point.

Let me continue to make my comments on the Health (Amendment) Bill (Senate Bills No.12 of 2025). There is an introduction of Section 7A, where it is illegal, unconstitutional, immoral and abuse of human dignity to detain a patient or corpse by hospitals, which is very predominant.

I want to go on record again to insist that courts have gone ahead of us and ruled before that detention of bodies or patients is illegal and unconstitutional.

I indicated that I have cited a number of precedents that have been developed by the jurisdiction of court. The latest was on 29th September, 2025, where my lecturer of litigation, Prof. Nixon Sifuna, made a remarkable decision that has been borrowed by this jurisdiction of Moses Mutua vs another and Mater Hospital, of over Kshs3.3 million. Prof. Nixon Sifuna, the judge of the High Court, ruled that it is illegal, unconstitutional, inhuman and abuse of dignity to detain a dead body.

In fact, in that advice, medical bills can be approached through small claims courts and a civil recovery process. Therefore, what Senior Counsel, Sen. Okong'o Omogeni, is trying to achieve is what courts have already pronounced themselves on.

If you look at Section 137 of the Penal Code, it is illegal and a criminal offence to detain a dead body or a patient that has already recovered. Even in Harun Mwau's case vs KNH, similar matters were raised, that the issue of detaining dead bodies or patients who have recovered is illegal and unconstitutional. Therefore, apart from what Sen. Omogeni tried to achieve today on the issue of SHA, at least, he has become innovative and has brought his wisdom.

When you look at the Health Act of 2017, KMTC---

(Sen. Madzayo and Sen. Wambua consulted loudly)

I wish both the Minority Leader and Deputy Minority Leader would allow the distinguished senior counsel to listen to the solomonic statements that I am making.

If you look at the Kenya Medical Practitioners and Dentists (KMPD) regulations, it is illegal to detain a dead body and a patient.

We should stop this habit of philanthropy. We say Ramadhan Mubarak and Ramadhan Kareem. As we approach Ramadhan, you will see politicians, for example, the Governor of Nairobi City County, going to hospitals, like Mbagathi and say, “I release you”, as if he is Jesus Christ. Why are we subjecting patients to philanthropy?

We look nice on the cameras, we do social media videos, for example, on *Tik Tok*, saying the Senator or governor so and so has released detained patients, yet it is illegal and unconstitutional to detain them in the first place. This is because it contravenes Article 43(2) of the Constitution, Section 107 of the Penal Code, KMPDC regulations and the precedents of the court cases that have been ruled. So, the introduction of the New Section 7A on the Health Act of 2017 is welcome. I want to thank Sen. Omogeni for standing with the poor. This is because most of the people---

If you are a practising politician in this country, every weekend, you must do a harambee of a medical bill. They detain and then make sure before you bury, you must clear all the bills, yet this is illegal. I think even if this Senate will never be known for anything in this session, let it be known that they passed a law that stops detainment of dead bodies or patients who have recovered in hospitals.

When you go to the KNH, MTRH and most of the private hospitals, including Nairobi Hospital, which is facing turbulence in terms of its management, somebody has recovered fully, but when they are detained, they become sick, depressed, get high blood pressure and become diabetic. We saw in Malindi Sub-County Hospital, where a patient had recovered, but saw the container that contained Shakahola bodies that were evacuated and they just ‘smelt’ death.

I want to point out that the issue that Sen. Omogeni has brought is within the law. I want to thank him for following the footsteps of my law lecturer, Prof. Nixon Sifuna. I want to thank Moses Mutua, the petitioner and litigant in that matter. He was just a *boda boda* rider. He had paid almost Kshs1 million, yet the Mater Hospital was still insisting on the Kshs3.3 million. This matter is a straightforward and we must agree with it.

I know I am spent for minutes. We must also look at the staff who work in our hospitals. Speaking from where the Majority Leader left, it is so sad that in the report of the office of the Auditor-General, Rift Valley counties in the Financial Year 2024/2025, lost Kshs1 billion to ghost workers.

In Migori, they are called *sangwenyas*. They have lost over Kshs1 billion to ghost workers. Nandi has lost Kshs66 million, Samburu lost Kshs75.8 million, Elgeyo Marakwet - Kshs66.8 million, Uasin Gishu County and Kericho counties have lost over Kshs100 million. This is in the report of the office of the Auditor-General for 2024/2025 Financial Year.

You ask yourself when you go to Meru, Kericho, Nyamira, Nandi, Kitui, Kilifi sub-county hospitals, for example, you do not get staff. It is because governors are busy paying ghost workers who are the ones carrying the chair of a governor, as if the chair will change anything. They are the ones carrying mobile toilets and phones. They are

called *sangwenyas*. They are the cheering squad who are used to heckle people yet most of our hospitals are understaffed. I have only pointed Rift Valley counties that have lost over Kshs1 billion to ghost workers. So, this amendment is well-timed.

I remember I met the governor of the Senate Majority Leader and he was wondering why the Senate is overlooking Kericho County. He was wondering why Sen. Cherarkey is talking about Kericho County Referral Hospital. He does not understand the law that a Senator can oversight all the counties. I could forgive him because he looked like he had taken something that is not water, nor juice. So, that confusion was understandable. I had to forgive him as a good Christian.

I want to call upon the Majority Leader, who has a social function on Friday or Saturday, to teach him about the role of a Senator; that a Senator can oversight each and every governor. That is why I can oversight the governors of Kilifi and Nyamira. We also oversighted Governor Malombe over sand. We can even oversight my friend who used Kshs5 million on house warming in Vihiga. We can also oversight Governor Abdulswamad.

I met the Chairperson of the Council of Governors (CoG) and he told me it is not *halal* to eat pig, but I asked him whether it is *halal* to steal from the public.

With those many remarks, I support the amendment.

The Deputy Speaker (Sen. Kathuri): Next is the Senate Majority Leader.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, why are these three gentlemen protesting? I want to support Sen. Omogeni, but he still wants to complain. Surely, what do these three people want?

The Deputy Speaker (Sen. Kathuri): Senator, proceed and make your contributions.

The Senate Majority Leader (Sen. Cheruiyot): Thank you, Mr. Deputy Speaker, Sir. I support this Bill by Sen. Okong’o Omogeni. It is a very important amendment, with the challenges that lie ahead notwithstanding. This is a very noble initiative. Now this is a proper representation of the poor because you have thought about a particular problem that the poor struggle with.

Sen. Omogeni, maybe you will have to think more deeply about this and the House has to help you with the practical implementation of this particular Bill in private entities. We may have levers of control in public hospitals, but remember, some of these institutions are private and we may end up exposing citizens to danger or otherwise.

This problem is serious. Mr. Deputy Speaker, Sir, let me give you a story. In my county, at a place called Kaptoboit, there is a very famous hospital in Eldoret where many people go to seek treatment because we do not have a Level 6 hospital in Kericho County. We continue to remind the President that it is one of the campaign promises that was made to the people of Kericho and it is now one-and-a-half years to the elections.

Sen. Cherarkey: On a point of information, Mr. Deputy Speaker, Sir.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, how can Sen. Cherarkey inform me about Kericho County? I suspect that he will misinform me.

(Laughter)

Mr. Deputy Speaker, Sir, let me not lose track of the story that I was telling. This family had a patient in that hospital, which I do not want to mention now. Unfortunately, he died. The bill was about Kshs8 million. Those were the days when the Social Health Authority (SHA) had not even been rolled out. We did a fundraiser in the village, once, twice, we had *Proboxes* going around the county, trying to ask people to help this family bring their kin's body back home. It became impossible for about three months.

After five months of being harassed, one time together with a Member of Parliament for Belgut Constituency, because the deceased came from his constituency, we sent a team of elders to visit the hospital and plead our case, because we had done everything humanly possible. When they arrived at the gate of the hospital and explained their predicament to the security people, the security people pulled them aside and asked what they wanted. They said that they wanted their kin's body. The security personnel said, "Come, let us show you". The security people took them to a back door and told them to give them Kshs20,000 and disappear with the body.

Mr. Deputy Speaker, Sir, I do not want to say where the money came from and what happened, but we eventually buried that person. It is not out of lack of good morals, but sometimes, as we are told, "Man must live." That family had to do what they had to do.

This is a problem that somehow must be addressed and I see what Sen. Omogeni is leading us to think and reflect on. I have mentioned to you that we have to reflect a bit more deeply on this topic bearing in mind that some of these hospitals are private businesses, just like you have your law firm. It is like passing an amendment saying that a poor person must be represented by senior counsel free of charge and it does not matter and yet, you have bills to pay and things like that.

We must set the criteria---

Sen. Cherarkey: On a point of information, Mr. Deputy Speaker, Sir.

The Deputy Speaker (Sen. Kathuri): Sen. Cheruiyot, Sen. Cherarkey has really insisted on informing you, now this is the second time. Please, let him---

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, he is a wise man. I know the clan where Sen. Cherarkey comes from, particularly at this hour of the day; they have very good information. Let me allow him.

The Deputy Speaker (Sen. Kathuri): Proceed, Sen. Cherarkey.

Sen. Cherarkey: Thank, you, my leader, for allowing me to inform you.

Mr. Deputy Speaker, Sir, I wanted to inform the Senate Majority Leader that for advocates, there is what we call the Advocates (Remuneration) Order, where we do our costing and there is availability of what we call *pro bono* services. What the Senate Majority Leader should be proposing is that hospitals, even if they are private, there should be a particular way in which they cost.

[The Deputy Speaker Sen. Kathuri) left the Chair]

[The Temporary Speaker (Sen. Mungatana, MGH) in the Chair]

Mr. Temporary Speaker, Sir, you remember our former friend, who is a former MP, who used to own hospitals. You could find a syringe that is used for injection, which could indicate that you have used Kshs10,000 per syringe. For the advocate, there is the Advocates (Remuneration) Order, which gives us how the costing is done and many include other things.

I thank you, Mr. Deputy Speaker, Sir.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Deputy Speaker, Sir, that is useful information, but I still think it will not have solved the challenge---

Sen. Wambua: On a point of information, Mr. Temporary Speaker, Sir.

The Temporary Speaker (Sen. Mungatana, MGH): Senate Majority Leader, do you want to be informed by Sen. Enock Wambua?

The Senate Majority Leader (Sen. Cheruiyot): Sorry?

The Temporary Speaker (Sen. Mungatana, MGH): Do you want to be informed by Sen. Enock Wambua?

The Senate Majority Leader (Sen. Cheruiyot): Mr. Temporary Speaker, Sir, the Bishop has not been in a very good mood this afternoon, but because of our long-standing relationship and because I respect the people of Kitui County, let me allow the people of Kitui to inform me.

The Temporary Speaker (Sen. Mungatana, MGH): Sure, Sen. Wambua, you have the Floor.

Sen. Wambua: Thank you, Mr. Temporary Speaker, Sir. I started by saying that perhaps the Senate Majority Leader needed a little more time to go through the proposed amendments because, where he has started, he clearly has not looked through the entire three parts of the proposed amendments.

The proposed amendment did not say that people who cannot afford treatment should just walk into a hospital and be treated for free. It says that when people demonstrate that they are unable to pay, then there is no need to detain them in hospitals; release them, but there is a mechanism provided there for the hospitals to recover their debts. So, it is not like a free service where people walk in and out.

I thank you, Mr. Temporary Speaker, Sir.

The Temporary Speaker (Sen. Mungatana, MGH): Yes, Senate Majority Leader, you may proceed.

The Senate Majority Leader (Sen. Cheruiyot): Mr. Temporary Speaker, Sir, I do not think Sen. Wambua has listened to my presentation because that is not what I am suggesting. I have said it is the obvious challenges of enforcing what you are trying to pass.

Allow me to read Section 7A of the Health Act, because this amendment is before me-

“That a health facility shall not detain a patient or the corpse of a patient as a lien over an outstanding fee incurred in relation to access of services in the health facility.”

It is not everybody who is detained. People are detained when they are unable to meet their bills. I do not think anybody would willingly walk to a hospital and pretend that they do not want to pay.

What I am arguing, Sen. Wambua, is that this is a noble initiative. It is a conversation that we must have as a country. If you go to Kenyatta National Hospital today, you will find a good number of patients, I do not know how many, but there is a time I engage a social worker, because as a representative of people, sometimes people come, they get treatment, then they are not able to pay the bills when they are told the bill is a figure over and above what they can afford even as an individual. So many times, I engage social workers. Sen. Omogeni also does this a lot.

In fact, the CEO of Tenwek sent me to Sen. Omogeni and said, ‘tell him to stop threatening me.’ I have so many IDs of people from Nyamira and many times Sen. Omogeni calls me and says, “no, do not keep those IDs,” but what do I do because I must keep this hospital? I know it is a mission hospital, but there are bills to pay. What do I do? I believe it is out of that act of actually representing his constituents that Sen. Omogeni has come up with this noble initiative.

I was giving the example of the Kenyatta National Hospital. If you go there today - there is one time I was engaging the social workers there, trying to intervene for a constituent who was stuck there with a serious bill and they told me at the hospital we have almost 300 people who we have discharged, but because they have no way of paying their bills, we cannot release them and they have no family, there is nobody who is reaching out for them. It poses a serious threat to the institution.

In fact, at the onset of SHA, I visited the Kericho County Referral Hospital. After about three or four months of the rollout of SHA, I just wanted to interact with the people who have employed me and see the level of services they are offering. One of the things that the medical superintendent in charge of the hospital told me is that sometimes some of these patients come with an ailment, after they have been treated, they cannot pay. Of course, given that they are human beings, you have to continue feeding them. That gets to a point where it becomes even more expensive to keep them in the hospital than the initial bill for the treatment. This happens in public institutions; forget the private ones.

This is a serious challenge that our public institutions continue to struggle with. We must be able to figure out, because this amendment on its own, without explaining how you will be able to foot that bill eventually.

Unfortunately, whether we like it or not, good people, the bill has to be paid. We are trying to shift who pays. The question that must be answered is from where that payment has to come from. That is an obvious challenge which I have told my colleague, Sen. Omogeni, that we must reflect upon and think that as we try to resolve this particular problem, it will not be wholly resolved until we reach a point where we have said that perhaps after meeting certain stringent requirements, for people to evaluate and consider you are actually eligible for this consideration, then there is set up either a fund or a particular way through which the hospital can be compensated.

This is because I mentioned that hospitals offer a service. At the end of the day, once a service has been consumed, it is a cost to that particular institution. What we are dealing with is the obvious challenge that arises from either a family that has lost a loved one and cannot pay for the treatment that they received, or somebody who has received treatment and has been discharged but cannot meet that particular bill.

This amendment will not be complete until such a time that we are able to guide the providers of care and these hospital services with ways through which they can get some form of compensation, even if it is not to the full amount, but even at the bare minimum.

(Loud consultations)

I have said we must provide the mechanisms through which, remember the Cabinet Secretary (CS) will push back and say, from which particular kitty. We have said the CS will make the necessary regulation for recovery of fees paid to access services in a health facility. Remember the Cabinet Secretary is a public officer. The only till or kitty that is available to me are the taxes you and I pay, which, living in a country such as ours, you appreciate that there is competition for resources. Therefore, while they may do some, it may not be possible to do everything as required.

The challenge that we will eventually have to respond to is how that particular challenge is met. However, like I have already mentioned, this is a step in the right direction, because it is a problem that we must confront as a leadership. I know that there are people who, for the obvious challenge of situations in life, find themselves in this particular situation.

Who knows, maybe when it gets to the National Assembly, because this Bill, once we pass it, our colleagues in the National Assembly will have to look at it, they may devise the mechanisms, because they hold the key to the national purse, because there are certain savings that can be made. Sen. Omogeni, you may want to know, for example, that even as you debate this particular Bill, there are steps similar to this that have already been made. The Social Health Authority (SHA) today pays for two million indigents.

Remember when we passed the law here, and we certified the various Kenyans and their ability to pay, we were fully aware that there are people who, even if you made it Kshs50 or 100, they would still not be able to pay, and we classified them as indigents. As it is today, SHA pays for two million of the fellow citizens across. When they go to hospitals, they can access service just like you and I, because up to the limit, of course, of coverage for that particular package, two million of them. That is why I continue to push on Sen. Mandago to push the Ministry of Health to file this report with us, so that we can assess.

Maybe, because we are told there are significant savings that have been made out of the use of technology that is not possible anymore to game the system, as used to happen back in the days with NHIF. There may be savings that are being made there, and it might be possible to cover these individuals and compensate them over and above, that you need to push now beyond the cover, what we call *ex-gratia*.

What many people do not know, for example, is that I know this for a fact because I served in the Parliamentary Service Commission (PSC) in the last five years. I know when Members of Parliament, when we exhaust our limit covers, you apply for something they call the *ex-gratia*, which is payment over and above what you are covered for in simple English. I do not want to say the amounts we pay, but it is a good amount.

Obviously, these indigents that are covered under this programme will want to qualify for such an arrangement. It may require something beyond legislative intervention and some material studies, so that you do not overburden the fund and collapse it in its entirety. This is important, and it is something that we need to resolve before we can progress and say we have concluded on it.

Therefore, with those few remarks, if in the course of debate, maybe colleagues who understand these things better than us may suggest ways in which we, from where we pay for that cover, will guide us, we will appreciate and learn more. Nonetheless, I appreciate what Sen. Omogeni has done by pricking our conscience and reminding us to think about those that are not able to meet their bills.

I thank you.

The Temporary Speaker (Sen. Mungatana, MGH): Majority Leader, so for the record, are you supporting the Bill or?

The Senate Majority Leader (Sen. Cheruiyot): I said it from the onset. It is only that Sen. Wambua is not listening. He was disrupting the Mover of the Bill.

The Temporary Speaker (Sen. Mungatana, MGH): Thank you very much. Next, we have the Sen. Osotsi Godfrey, you have the Floor. From my screen, it is Hon. Osotsi, but Minority Leader, you can take it. I think he has yielded to you.

The Senate Minority Leader (Sen. Madzayo): Asante, Bw. Spika, kwa kunipa nafasi hii kuweza kusema yanayojiri. Naunga mkono mageuzi juu ya *Bill* hii ya Afya ya mwaka 2025, ili kufanyiwa mageuzi, kupinga au kuzuia kwa wagonjwa waliopona na wanatakikana kutoka ama waliopoteza maisha yao.

Mara nyingi, tunaona familia ziko na shida mbali mbali. Hii unaweza kujua wakati umeenda kwa nyumba za wanasiasa. Ikifika ijumaa wao wenyewe wanataka kutoroka kwa nyumba zao lakini hawawezi kwa sababu huwa wana majukumu ya kuwahudumia wale ambao waliwapigia kura na wanataka kuwasaidia.

Nikiwa kama mmoja wao ambao ninafikiria kama kuna matanga au harusi kwa nyumba kwa sababu huwa wengi wanakuja na dalili zile wanakuja nazo ni kwamba hawawezi kutoa wapendwa wao waliolala kule *mortuary* ama pia kuweza kuwatoa wale ambao wamepona na wanataka kuenda kuishi katika nyumba zao.

Katika hii *Bill* ambayo tumesema ifanyiwe mageuzi kidogo, ninaunga mkono kwa sababu itaweza kuleta afueni kwa zile familia ambazo hazina uwezo. Familia ambayo haina uwezo hata ukiwaambia wajaribu kutafuta kivyao, wataenda, na baada ya siku kadhaa, wakirudi, wako vile vile. Inabidi wewe kama mwanasiasa uanze kutafuta. Hata chako cha nyumbani ambacho ulikuwa utumie kwa chakula ama kitu kingine, unakitaa kwa sababu unataka kusaidia watu, wachukue mpendwa ambaye walimpoteza na yuko hospitalini. Kuna *bill* na hawawezi kulipa lakini, siku ya kuzika wameiweka na imekaribia na hawawezi kupata nguvu za kumtoa yule mtu.

Bw. Spika wa Muda, ninaunga mkono Mswada huu. Mswada huu ni muhimu sana kwa sababu, tukishaupitisha, utaleta afueni na kuwapea wananchi nguvu, kuona ya kwamba, Serikali yao imeangalia maslahi yao.

Ikiwa wewe umeshindwa kutoa mtu wako aliyefariki, utaangalia serikali yako itakufanyia nini. Mara nyingi wanakuja kwetu kama wanasiasa. Mtu anakuambia; hebu piga simu kwa gavana kwa sababu mnajuana na yeye ama kwa waziri anayehusika na

mambo ya afya kwa ile hospitali, ili wapewe mwili au asamehewe *bill* yake na kuchukua mwili na kulipa pole pole ama pengine asilipe kabisa.

Sasa, tunataka iwe sheria. Isiwe mambo ya kupiga magoti, kuomba na kuwa na biashara tofauti. Nimesikia wengine wetu wakisema, wamekwenda hospitalini kutafuta mwili wa mpendwa aliyefariki na wameshindwa. Sasa inabidi baada ya miezi kadhaa iliyopita., ukienda kule, unaambiwa, njoo huku nyuma kidogo. Ukinipatia kiasi fulani, ile maiti yenu nitaitoa. Ni jambo la kusikitisha kwamba itafika wakati watu wetu wanalazimishwa kutumia njia kama hizo ili kupata wapendwa wao. Ni jambo la kusikitisha na kukemewa vilivyo.

Kwa hivyo, sheria kama itafanyiwa mageuzi na ambayo ndiyo nia yetu, ni kwamba, ikiwa umefariki, hauna haja ya kuweka mwili ndani ya hospitali kuliko zile siku zilizokamilishwa. Nikilinganisha hii, ninalinganisha wale watu waliokufa kule Shakahola na ni wengi. Kuna miili zaidi ya 300.

Ukiangalia, iko pale karibu na hospitali ya Malindi, ambayo ndio hospitali kubwa hapo Malindi ya kila mwananchi. Lakini, jambo la kusikitisha ni kwamba, wale wapendwa waliolala pale, wamewekwa katika hali mbaya kwa *container*. Hiyo ni madharau. Pili, ni madharau kwa familia kwa sababu, unawakataza watu wao, mumewaweka pale, hawako makaburini wala kwenye ardhi. Na, ilikuwa jukumu lenyu mlipowatoa kwa ardhi, ilikuwa muwafanyie *DNA testing* na uchunguzi wenyu, mkimaliza, muwapatie wale waliofiwa.

Bw. Spika wa Muda, lakini utaona, hivi sasa, ile miili ilioko pale, zaidi ya 300 ndani ya *container*, mbele ya hospitali, mbele ya mlango, ukiingia, kitu cha kwanza unachokutana nacho ni maiti 300 mbele yako. Ni jambo la kusikitisha.

Ndio maana tunasema, kungekuwa na sheria kama hii, ambayo inawezapeana ruhusa, kama serikali haiwezi kuzika, basi, wapatie serikali ya kaunti iwachukue na kufanya ile tunaita *mass graves* - kaburi la wengi, wawekwe kule kwa njia ya heshima, waletewe padre na waombewe. Hatujui mwisilamu wala mkristo sababu hatukuambiwa wakati walitolewa kama kuna mwisilamu au mkristo.

Lakini, wapewe nafasi watoke pale ndani hospitali. Wasikue *detained* na sheria yeyote. Wanakuwa *detained* pale kwa sababu, serikali inatafakari itafanya nini na zile maiti ziko pale ama uangaliaji wa zile maiti ziko pale. Kwa serikali ya Kaunti ya Kilifi, ninaona hilo ni suala ngumu sana kwa wao kusema, kama hamuwezi kuchukua hii miili yenu, tutaitoa hapa, tuiweke barabarani. Itakuwa si jukumu wala si heshima ya *county government*. Lakini, ni jukumu la serikali kuona ya kwamba zile miili zimetolewa pale. Tunasema sheria kama hii ikifanyiwa mageuzi yale mazuri ambayo yanasema; ikiwa mgonjwa atakuwa pale na hatimaye apoteze maisha yake, basi mwili ule usiwekwe pale ndani ya hospitali kama unampatia adhabu ile familia kwa sababu ni masikini, hawawezi kulipa, ama sivyo. Huu mwili uwachiliwe ili wenyewe waende wakazike watu wao kwa amani. Wapendwa wao walale mahali walipowaweka pema na palipo watu wema walipolala, kule wanazikana ili ile shida waliokuwa na shida maisha yao. Unajua mtu anaishi, anakuwa sawa. Anaishi anakuwa mgonjwa. Akiteseka kabla hajakufa, akifa, anatakikana mara moja apelekwe alale pahali palipo lala wema.

Bw. Spika wa Muda, ninaunga mkono na kumpea kongole huyu wakili mkubwa katika nchi yetu ya Kenya, ndugu yangu, Okong'o, ambaye ni Seneta wetu tunayejiyunia

sana hapa ndani, akiwa kama Kamishna na mtu aliyetoka kule Kaunti ya Nyamira. Kaunti ya Nyamira walizaa kiongozi ambaye ninampa kongole sana. Na hii sheria ambayo tunaitarajia tutaigeuza, tuko na nia itasaidia wengi katika Kenya.

Asante, Bw. Spika wa Muda, kwa kunipa nafasi hii.

The Temporary Speaker (Sen. Mungatana, MGH): Thank you Minority Leader. Next on the list is the hon. Osotsi Godfrey. You have the Floor.

Sen. Osotsi: Thank you, Mr. Temporary Speaker, Sir, for giving me the opportunity to make my contribution to this Health (Amendment) Bill (Senate Bills No.4 of 2024) by Sen. Omogeni which is seeking to amend the Health Act so that we manage this escalating problem of health facilities detaining bodies and even patients for failure to pay the bills in the hospital.

This is a very serious problem. It is not just in private health facilities but even in our public health facilities. This is a problem that even as we are seated here, I am sure many of us have received requests for support from their constituents with this problem; either seeking to get help to release bodies of their relatives from the morgue or patients who are held in the hospital because of non-payment.

It is progressive in the sense that some of these patients who recover and cannot pay end up being a major nuisance in the hospitals. We have had cases where even criminal activities have been reported in some of these hospitals, arising from patients who have recovered, patients who are idle and they cannot do any other thing. Therefore, they will engage in crime within the health facility.

Mr. Temporary Speaker, Sir, you remember we had a very serious incident at the Kenyatta National Hospital (KNH), where someone went and killed a patient in the ward and the matter has not been resolved. Some of these incidences could be arising from the people who have recovered and they are idle. So, they will start even getting links to criminals to do criminal activity. This will deal with that problem.

Coming to the dead, it is very unfair to detain someone in his death. You cannot punish a dead body because that dead body is poor. It is really unreasonable. I think this Bill will help deal with that problem.

Mr. Temporary Speaker, Sir, we must come up with very specific measures on how we are going to implement this provision in law. The Senate Majority Leader has raised concern and I know the owner of this Bill has stated that the Cabinet Secretary for Health will come up with the regulations. I hope that this is where that problem will be resolved, where the Cabinet Secretary (CS) will provide regulations on how this will be dealt with.

Mr. Temporary Speaker, Sir, however, this is now again where the problem is - we cannot legislate everything. That is why we always provide for regulations to be done by the Cabinet Secretary. However, this affects the implementation of the Act once it comes in force because some of these Cabinet Secretaries delay to formulate these regulations, hence delayed implementation.

In this House, we have just signed a Petition calling for regulations on sugar. We passed the Sugar Act here and allowed the CS to do regulations. However, he has not done regulations. As a result, some important provisions of the law cannot be implemented.

How I wish we could be providing a timeframe in which the regulations need to be enacted. I propose that we amend so that we give a timeframe. If you do not give a timeframe, and the government or the CS is not happy with the Bill, he or she will simply sit on regulations and nothing happens. So, however, good the law is, if the Executive is not happy with it, it will sit on the regulations and nothing will happen. That is my only concern as far as the implementation of this progressive law is concerned.

Mr. Temporary Speaker, Sir, in my Committee, we examine audit reports for public hospitals in our counties and one of the major audit queries that keeps on coming is misuse of waivers in our public hospitals, where you find the hospital management has been giving waivers, running into millions of shillings. These waivers given to mortuaries and hospitals have been misused, yet the law is clear on how waivers are supposed to be done. There must be a committee to process the waivers. They must be approved by the County Executive Committee Member (CECM) for Finance and Economic Planning. That process must be clear with minutes and assessment of the waiver request.

Mr. Temporary Speaker, Sir, that does not happen in most of our public hospitals, yet this is the easiest way to steal money from our referral and Level 4 hospitals. That is a matter that we are dealing with. We have made recommendations and soon, we are going to submit our reports here, recommending on how this will be handled.

Even as we do that, this amendment is directly related to that, because most of these waivers are given to patients who have passed on. However, most of them are able to pay. A waiver is just a corrupt way of trying to reduce the bill, and then on the other side receive the cash benefit.

Mr. Temporary Speaker, Sir, even as we talk about inability to pay, which results into this problem, we must also look at the cost of our medical services, especially in our private hospitals. It is annoying that nowadays you go to some hospitals and after being there for two days, your bill is like a booklet of a long list of things they have charged you on. In my opinion, an amendment needs to be done to the Health Act so that we have some form of regulation on the cost of medication because our people are being overcharged. One goes to a hospital for a few days and pays millions of shillings, yet whatever service that they were given could have been cheaper. This is another important problem that is linked to this.

If you give an ordinary folk a bill of Kshs5 million and he is not able to pay, because of the high-rate card, that becomes a problem. So, even as we try to look at this problem, we have to look at the causes. What are the key causes of this problem and deal with those causes as well, even as we deal with this problem?

Mr. Temporary Speaker, Sir, this is a very progressive piece of legislation which we support. However, there must be clarity on the timeframe for regulations and the specific regulations that will be enacted. For example, what are the specific regulations for private hospitals? What are the specific regulations for a public hospital? There is a difference between the two, because in public hospitals, you could be having Social Health Authority (SHA) insurance, unlike private hospitals where you might not have that. So, there is some difference that has to be handled differently.

Otherwise, this is a very important piece of legislation and it will help us, politicians, to manage the challenges that we face with our poor people who cannot

afford medication. It will also help the poor people that we have who cannot afford insurance and who want to get quality medical services.

Mr. Temporary Speaker, Sir, we have also to look at ways of using technology to get better medication. The government has been talking about telemedicine, but very little has been done to take advantage of that, so that our people do not have to travel miles and miles away to India for something that can be handled through technology. That is also going to save a lot and eventually reduce the cost of medication for having to travel miles and miles away.

Mr. Temporary Speaker, Sir, I support with the amendments.

The Temporary Speaker (Sen. Mungatana, MGH): Thank you Sen. Osotsi.

Sen. Olekina, you have the Floor.

Sen. Olekina: Thank you, Mr. Temporary Speaker, Sir. I must say it is very interesting to see you sitting there as a Temporary Speaker. I wonder how you are going to be able to juggle all your duties, but I wish you all the best.

Mr. Temporary Speaker, Sir, I rise to make some brief comments on this Bill.

This is a Bill brought by a very able legal mind, a senior counsel. I would like to have a serious conversation with the senior counsel with regards to this Bill. I have looked at the realistic aspect of this Bill. I know that the senior counsel has taken the Constitution and based his reasoning in this narrow Bill, on Article 28 of the Constitution, which I will read: -

“Every person has inherent dignity and the right to have that dignity respected and protected.”

That is number one and that is the reason he came up with the Bill that prohibits hospitals from detaining corpses. He also looked at Article 43(1)(a) of the Constitution which states every person has the right to the highest attainable standard of health, which includes the right to health care services, including reproductive health care.

In this day and age, there are a couple of things that determine whether these two rights which are enshrined in the Constitution can effectively be granted to the citizens. I can see a big challenge in this Bill.

I listened carefully to the Senate Majority Leader when he was making his submissions and to some extent, I agree with him. Unless we establish an Emergency Medical Treatment Fund under SHA to reimburse all facilities that will adhere to the implementation, this Bill will not succeed.

There is a penalty of Kshs3 million to any facility that will violate this Act. That in itself does two things. This Bill in its intent excludes all faith-based hospitals. In its practicality aspect of it, if a patient dies in a faith-based hospital or a private facility, this Act will apply. It is important that the distinguished Senator broadens the definition in this Bill.

Secondly, Mr. Temporary Speaker, Sir, from where I sit, I have tried to think thoroughly on the practicality of this Bill. This Bill does two things which are very clear. The first one is that it tries to balance humanity and the reality; financial obligations and the responsibility of institutions. Secondly, it tries to make sure that everyone respects the Constitution.

There are bodies out there like the Rural and Urban Private Hospitals Association of Kenya (RUPHA) which have got major concerns with this Bill. They are concerned that this Bill will cripple healthcare in the country. If you have a small facility with a lot of consumables like paying for medicine, then you have a patient who goes there, from a humanity, political and legislation point of view, I will be the first one to say that hospital must provide that patient with the treatment that they deserve, whether that patient has got money or not.

What happens if that hospital does not have money because it has done so for 10 or 20 other patients who have consumed all their stock? That hospital will end being bankrupt and it will reduce services. It will even be difficult for them to open because they will be afraid of being charged Kshs3 million as a penalty if they fail to provide services.

Therefore, the distinguished Senator has got to balance and make sure that he takes care of their interests since this is not just a pedestrian association because it has got over 500 hospitals. For that matter, their voice should be heard. We always talk about public participation and coming up with laws that can be implemented.

One of my pet peeves is when we, legislators, narrow the scope of the amendments. Maybe the best thing would have been to overhaul the entire Health Act. In the last Parliament, we mutilated the Health Act. Come to this Parliament again, we have mutilated it. We created SHA, changing from the National Hospital Insurance Fund (NHIF), but there are still deaths associated with SHA just like NHIF.

Most private and faith-based facilities are still owed billions of shillings by SHA. Unless you tell me that you are going to pay all the debts owed to hospitals by SHA and the defunct NHIF, there is no way you can convince me that even if you do not, in terms of the intent, capture these hospitals, the broader wording of the Bill covers them because you have got to look at the Constitution.

In literature, we were taught not just to read what is written there. You have got to understand the meaning of the text. In college, we studied critical writing. One of the things that you do is to try to analyse the context so that you deduce the meaning of the law. In this case, I am concerned. I would like to persuade my colleague that instead of waiting for regulations from the Cabinet Secretary, why not at the Committee of the Whole bring in further amendments to the amendment and do the following?

Firstly, you should require county governments to set up 10 per cent of their health budgets to cover emergency treatment. Secondly, you should have a broader conversation with the national Government and the Ministry of Health to set up an Emergency Medical Fund that will reimburse all facilities, including faith-based initiatives and rural health facilities up to at least a minimum of 50 per cent of their expenditures. Number three, which is the most important one, we are all talking about---

I am sure this is why the distinguished Senator brought this amendment. Everyone is talking about Universal Health Coverage (UHC) and everyone wants UHC in Kenya. We all clap our hands saying that we are going to achieve UHC.

The other day when we were seated somewhere, one governor said that SHA is not working. That was a governor of a county but here we are saying that SHA is

working because all of us want to achieve UHC. Maybe this is one of the things that the distinguished Senator can add in his Bill to make it practical.

Number one, pair nationwide registration of SHA with this law in the sense that the only time any facility will give you treatment and not detain a deceased body is when you have taken the responsibility of registering yourself with SHA. You have to pair that, so that you also make it conditional.

The challenge we have is that people tend to forget that my rights begins where yours end. In this case, those institutions have rights because it is their businesses. Unless you show me how you are going to make sure that that business does not collapse, it will be very difficult for anybody to support this. Therefore, it is important that we pair all SHA enrolments with the intent of this Bill. I will leave that to the distinguished Senator to find out how he is going to make sure that it is done like that.

It should be a prerequisite that when you go to a health facility, the first thing they should ask you is to provide them with your SHA registration. If you do not have, even if it is a faith-based facility, you should be registered there, so that we achieve UHC. If we do not do that, many hospitals will close shop and go to other places. Remember, whatever legislation you draft, there are people out there who will ask how best they can survive. They may bypass this Act and carry out other services.

People might say that tomorrow they are just going to open a lab and in that lab, buy a dental x-ray machine for Kshs3.5 million. I will wait for the patient to go to the hospital, come to me, they will pay me say, Kshs20,000, I carry out the x-ray. I will have a CT scan. There are so many ways in which people can be able to go around this piece of legislation, to remain in business.

So, to avoid that, I believe that this RUPHA, their concerns must well be taken into consideration in this Bill, so that when this Bill leaves this House and goes to the National Assembly, our brothers in the National Assembly might welcome the idea of setting up this emergency fund, which can also be funded by the Consolidated Fund. It can also be funded by the county revenue fund. If you look at Section 109 of the PFM Act, it talks about the county revenue fund. So, with my earlier submission that let us take about 10 per cent of the health budget and put it into this fund, you know, it can help to ensure that we achieve this universal healthcare.

If you look at the Public Financial Management Reforms (PFMR) again and I always like to take different pieces of legislation, to try and see how they can come together and how they help one another. Just like the other day we were arguing here on the Public Audit Act, if you juxtapose it with the PFMR, you will see where it collides and where it needs to be aligned. So, the same case applies here. It is all about money. It is all about how do we fund this.

I feel like the distinguished Senator did not focus a lot on how we will fund this Bill. The biggest focus, and I want to repeat, he looks at it, he looks at the Articles 28 and 43 of the Constitution.

Finally, there is also another very beautiful way where you can be able to make sure that this Bill, once it is signed, and I really hope that the distinguished Senator will make those adjustments and then go to the National Assembly and we push it and it

becomes a piece of law is to introduce a conversation of tax incentives. A hospital is a business.

If today you ask Sen. Kajwang' or Sen. Osotsi a question of own-source revenue, they will tell you that in every county, the biggest chunk of own-source revenue is from hospitals. The hospitals collect more money than any other revenue stream. So why do we not then now say that we give hospitals a tax incentive?

We have very many big private hospitals in this country. The biggest debate, of course, was about the Nairobi Hospital, which to be honest with you, I think the team that has been put there, you know, I know the chairperson, Dr. Buckley, is very intelligent and these are people who I am sure will be able to do a good job to preserve the dignity of that hospital. The reason why we got into that quagmire or that problem is because of the bylaws where anybody can become a member of the circle. Then they come in and appoint a chairman who does not really understand things to do with the law. So, I appreciate what the President did in making sure that he got that institution because it is a pride of our country. So, give those institutions tax incentives.

Therefore, Senator, Senior Counsel Omogeni, through the Speaker, offer tax incentives or even better, the importance of this House is normally the division of revenue, number one. Number two is the issue of the County Allocation of Revenue Act and then number three, conditional grants. Why not set up conditional grants specifically to take care of this problem that we have in our country?

I have sat with this gentleman here for the last eight years and there were conditional grants that were given to that Medical Equipment Scheme. Why not set up conditional grants to guarantee this universal health care and to guarantee if a relative dies, the hospital will not detain the body before they are paid their money? This is because the hospital will know there is a conditional grant which they can get, a tax incentive or an emergency fund. Those are practical things that would help us implement this piece of legislation.

Mr. Temporary Speaker, Sir, I think it is also important for the distinguished Senator to relook at this very punitive penalty of Kshs3 million. You can reduce that so that we have a conversation with these health facilities. Remember you might be the director of a health facility and then one of your staff makes a decision to deny someone treatment maybe because they follow the protocols and they are not able to get a hold of you. By the time they find you, Kshs3 million has already been charged against you. That is not pocket change.

We are charging a governor Kshs500,000 for not appearing before the committee because accountability for the resources is a must and this includes resources also that take care of these health institutions. Why do you not reduce this Kshs3 million to Kshs500,000 or something like that?

I know this Bill is a balancing act between humanity and financial obligations. However, I think the submissions that we have made; from both sides of the aisle, they will help the senior counsel enrich this Bill so that it can become practical and implementable.

We do not want a situation where people go to court. This Rural Urban Private Hospitals Association of Kenya (RUPHA) I guarantee you, if the Bill passes the way it is,

they will move to court to protect themselves because there is no way one can set a business and then someone tells you how to run it.

I rest my case. I will support it when those amendments have been made.

The Temporary Speaker (Sen. Mungatana, MGH.): Hon. Olekina, may you go on record. Are you supporting, opposing or supporting with amendments?

Sen. Olekina: I was very clear that I can only support with those enriched amendments.

The Temporary Speaker (Sen. Mungatana, MGH.): From my list there is not other request to speak, so I call the Mover to reply.

Sen. Omogeni: Mr. Temporary Speaker, Sir, I think I can reply from here.

I, first, thank all the hon. Senators who have taken interest to read this Bill and to make their contributions. I am glad that all the Senators who have made contributions to this Bill are in support though a few of us have made proposals to improve it. That is a very good thing.

In a special way, I thank the following Senators who have made their contributions: Sen. Wambua who was gracious enough to second the Bill. I thank you, hon. Temporary Speaker; the Senator of Tana River County and my former classmate, Sen. Mungatana.

I also thank the Senator of Nandi, hon. Cherarkey; the Majority Leader, hon. Cheruiyot; the Minority Leader, hon. Madzayo; and Sen. Osotsi, Senator of Vihiga. Finally, my good friend the Senator of Narok, Sen. Olekina who has made very good contributions and a proposal for amendment.

From the onset, I want to state that I welcome any initiative from any of my colleagues who wish to make an amendment to improve this Bill. I am a very firm believer that when we support the vulnerable in society, we are strengthening our workforce. That is a fundamental issue in our politics. When you improve health outcomes for our population, we reduce heavy future public expenditure on health.

Mr. Temporary Speaker, Sir, you were a very strong Christian in university. We were student leaders together. You were my Vice-Chairman. I was your Treasurer. In moments of stress, I have never forgotten that we used to turn to you for prayer. I had lunch today with Hon. Peter Munya, who was our Chairman at the Kenya Law Students Society. We remembered the challenges we went through those days. Often times, it was your faith that gave us the strength to push on.

There was a time we were summoned to the main campus by Prof. Gichaga. We thought that was the day we were going to face expulsion. Before we were put into a Land Rover from Parklands Campus, you said, "Let us pray, we will overcome," When we went to the main campus, it turned out that those prayers had been answered. The meeting we expected to end our stay at the university became a very nice conversation with Prof. Gichaga. We need to find out where Prof. Gichaga is and pay him a visit.

Sen. Olekina, if you read the book of Proverbs 21:13, it says that whoever shuts their ears to the cry of the poor will also cry out and will not be answered. As the Senator for Nyamira County, I have seen the cries of our people on this matter. I listened to the contribution of Sen. Cheruiyot, the Senate Majority Leader. You heard the case he gave us of a family trying to retrieve their body from a mortuary in Eldoret. They sat, raised

money, but at the end of the day, they could not raise the amount required to clear the bill. They ended up using unorthodox means through the watchman to sneak out the body.

We cannot ignore this reality in our society. Every afternoon when we rise to begin our business here, we pray to the Almighty God. Therefore, we acknowledge what the Bible and the Quran says about the poor. The book of Proverbs 19:17 says that whoever is kind to the poor lends to the Lord. If we pass this legislation to respond to the plight of the poor, we are lending to God the Almighty.

In the book of Isaiah 1:17, the Bible says, “Defend the oppressed. Plead the case for the widows.” This Bill is trying to speak to the widow in Narok and Tana River counties, who are poor and hardworking, but our economy only allows her to make less than a dollar in a day.

Unfortunately, they get some of the diseases that are so expensive to treat in this country, like cancer. They take their relatives to hospital, they get treatment but at the end of the day, they lose the battle. When they lose the battle, they are told, you will not bring that pain to an end, because burials, in my own community of Kisii, bring to an end that pain. That is why when people come to burials, they view the body, so that they bring to an end that pain.

Mr. Temporary Speaker, Sir, I was moved to tears when you rose to speak yesterday. You spoke about what you went through when your wife was unwell. You put that picture of what you and your children were going through.

Just imagine having gone through that, somebody keeps you, in waiting, not to bury your dear wife for three or four months. I mean, it is an agonising thing that you do not wish even on your worst of enemies. So, this Bill is trying to respond to a problem that is bedeviling our society everywhere.

I listened to the contributions. I remember when you made your contribution, you cited a case from the High Court. I listened and was taking notes. You said that the court has decreed that it is illegal to detain a dead body *in lieu* of recovering a debt.

We went to the law school and we were told there is no property in a dead body. So, instead of detaining a dead person, the CS can set regulations. You can be told to acknowledge that you have incurred this debt, you sign off then the hospital can file a civil recovery debt or use debt collectors to collect that debt. They cannot tell you, we know you are crying and mourning for losing a loved one but we have another case with you here. We are detaining this body. No.

You heard Sen. Cheruiyot tell you that I have done many interventions on behalf of my people in Tenwek Hospital and in MTRH. Often times, I am dealing with people who to afford a vehicle to transport that body, is a struggle. Then on top of that, they are told, your relative was involved in an accident, brought here under emergency, we admitted them in the hospital because that is what Article 43 says, but on top of that, you must clear this bill of Kshs2.7 million before we release the body. No. That is not the way to go.

I am happy with the proposals that Sen. Olekina has made about us creating a fund. We want to take our country to Singapore. That is what the President has said. Sen.

Olekina, if you go to Singapore, no establishment can detain a body in hospital as *lien* for a debt. Do not talk about private or public hospitals. It is not allowed.

I agree that there is something we can do separately maybe through the Health Act, to borrow what happens in Australia which runs three funds. MedSave is a personal saving for those who are wealthy. Medicare is a personal saving for those in the middle income. The one that is most important is what they call MedFund. It takes care of those who cannot afford.

That is why we are proposing in subsection 3 of this amendment - I hope Sen. Olekina can listen to me on this - that is why we are proposing to give the Cabinet Secretary the discretion, the leeway to come up with regulations on how the government will respond to paying off debts for those who cannot afford. There is that window, because that should be an obligation.

Sen. Olekina: Mr. Temporary Speaker, Sir, just on a point of information?

Sen. Omogeni: Mr. Temporary Speaker, Sir, I can be informed. It is okay.

The Temporary Speaker (Sen. Mungatana, MGH): Yes, Sen. Olekina, you have the Floor.

Sen. Olekina: Mr. Temporary Speaker, Sir, I am listening to my good friend and I just want to inform him that in most cases, it is better when the Bill is completely clear instead of leaving the responsibility of regulations to the Cabinet Secretary. Just indicating here clearly that a fund should be established, because sometimes when you leave that to the Cabinet Secretary, the Cabinet Secretary might be limited to what the National Assembly will allocate to him. If you look at it, these regulations will require money to be provided.

I am listening to your very sentimental submissions, but if we leave everything to the Cabinet Secretary, you might get someone who does not care, who does not give a hoot in hell and just say: "I am not going to do that". We already have problems with certain regulations.

My point is that I would just like to inform the distinguished Senator that our submissions are that we make this as descriptive as possible so that it does not become the responsibility of one individual to make sure that we provide what the Constitution clearly says.

Sen. Omogeni: Thank you, Mr. Temporary Speaker, Sir. I think that is a very useful contribution. I am glad that Sen. Olekina seems to have taken a very keen interest on how we shall implement these amendments. If we are all in agreement, this legislation can lead to another amendment of our health laws, so that we make it obligatory. I mean, we actually put it specifically in an amendment that the Government will set aside money to take care of hospital bills for those who cannot afford them in society.

There is a time I was in Australia with somebody - I think you know a lady called Rosa. She used to be the chair of CU. I was visiting my sister-in-law in Australia. That good friend of ours fell ill in Australia and she needed an urgent admission in hospital. That is when I learned that there are societies that care about saving human life. Those are the days when the National Hospital Insurance Fund (NHIF) was a true medical insurance cover issued by an insurance body run by the government.

She was working under the office of the Deputy President then, the current President. I remember we made frantic calls to headquarters here and a Kisii boy assisted us and the NHIF wrote a letter guaranteeing that they would pay the bills incurred by Rosa to the tune of Kshs2 million, but then there was another balance because the bill was huge.

The hospital there said they would treat the patient. Our approach is that we save lives first. If there is any debt, the law of this country commands us that the moment a patient is declared fit for discharge, we discharge. Then, other issues of debt, that person will have signed a document that we can use to follow that patient for recovery.

Now imagine if what is prevailing was to be applied and you detain that Kenyan in Australia for God knows how long, what would have happened?

I even learned - Sen. Olekina, you may listen to this - that in Australia, if you go to a government hospital, they write a prescription for you to get certain medicine and you go to that hospital's pharmacy, a government hospital and you do not get the medicine, you walk into a private pharmacy, they will give you the medicine and then they will follow up the payment from the government, because you have been given a Medicare card. That Medicare is supposed to ensure that you receive quality health care.

We almost copied that to Article 43 of our Constitution. If, as a country, we have decreed that we will have universal health coverage, then we must ensure that every Kenyan must enjoy that right. I want to state, as I reply, that I did not bring this Bill to speak to myself. I brought this Bill to the floor to speak on behalf of the people of Nyamira I represent, and to the Kenyans at large, because we are a Senate that represents Kenyans. We want the voice of the poor, of the poorest, to be heard through us. That is why I started by thanking all the seven Senators who have made their contribution to this Bill, who have acknowledged that this is a wonderful initiative in terms of protecting the poor and vulnerable.

In terms of this Bill having challenges on implementation, remember that Sen. Cherarkey made reference to a High Court decision where judgment was given by our former college-mate, now justice, Prof. Nixon Sifuna. Nixon Sifuna said and I quote: "It is immoral, unconstitutional and illegal to detain a dead body as a *lien* for debt recovery. The high court has ruled."

This Bill is actually trying to breathe life to that decision of Justice Sifuna. Once the High Court has ruled, we were told when we were in school, the sources of law could be our Constitution, or our statutes, or it could be through court decisions. Here, the court has looked at the law and it has made pronouncements.

What we want to demonstrate is that we also care for these poor Kenyans by putting this thing into law and policy. We do not live in an island, we know what the courts have said on certain matters, like this pronouncement. It has enacted into law so that this matter can now be a matter that is in our laws and is in our policy.

I listened to Sen. Osotsi. You heard him say that even as he was making his contribution, he is aware that there are a number of people from his constituency who are facing this challenge, even as we speak this afternoon. I can tell you even from my own county of Nyamira, it is only that we respect the privacy of the people we represent. I do

not want to give names of families because I care about my people and I respect their privacy. I do not want to expose them without their permission.

There are many, many families whom as we speak, who are undergoing some agony because either their relative who has recovered in hospital is being detained because they are not able to pay their bills, or they have lost a loved one and they are not able to settle their bills so that they get the body and take it home for burial.

Remember what the Senate Majority Leader told us. He said that when he was trying to help a family from Kericho and he sent social workers to Kenyatta National Hospital, he was shocked to discover that there were more than 300 detained patients who had fully recovered but who could not be released to go home by the Kenyatta National Hospital. That is a government hospital. If we went around all the private hospitals, I do not know the number of Kenyans who are detained nationally. It might go to over a thousand. We must do something and respond to this problem.

Mr. Temporary Speaker, Sir, on the proposal by Sen. Olekina that we allow our governors to set 10 percent aside for the poor, I could not agree more. Just look at the audit reports from the Auditor General; not from us because we are politicians. If I brought a report about expenditure in the County Government of Nyamira, my Governor will start crying from tomorrow that the Senator is fighting me or the Senator wants my seat of government. However, if you read the report from the Auditor General, a professional, that very bold and courageous lady Nancy Githungu, you will be shocked at how resources are plundered. Remember what you heard about Vihiga. Money is removed from the Facility Improvement Fund, given to the Speaker to do housewarming, to open the Speaker's house, Kshs10 million. That money can be pumped into this 10 percent that Sen. Olekina is talking about. You saw what we were told about the Governor for Embu, that she withdrew Kshs10 million to do a public rally for *boda bodas*.

So, if we are really interested in showing love for the poor and the vulnerable, listening to the contributions of the Senators who have contributed this afternoon, we are spoiled for choice. I have also heard that we should be careful not to donate power to the Cabinet Secretary to come up with the regulations. I listened very carefully.

It may be wise to rethink that Clause 3 because I have listened to Sen. Olekina and Sen. Osotsi and they said we may have very good intention but you could get a PS or a Cabinet Secretary who does not care about the plight of the poor in society. So, I have listened to the contribution of my colleague Senators and I agree that there is wisdom in maybe, taking away that power from the Cabinet Secretary coming up with regulations.

Mr. Temporary Speaker, Sir, maybe we need to go the full hog, improve the Bill and make it a stand-alone amendment that will not be implemented at the whims of the Cabinet Secretary. On that one, I am in full support and I will sit down with my colleagues and see what can be done.

I have also listened to what Sen. Olekina has said. He says that we pair this benefit of bodies not being retained with registration as a member of SHA. Very good because if the only way you will access this service is by you demonstrating that you are taking the steps of becoming a member of SHA, why not? This is because, we were told when we were in Naivasha by the Cabinet Secretary for Health that all Kenyans who are

under the Social Protection Programme get government support for registration as SHA members.

Maybe, what we should do is to make it very clear that indigents, because we passed a law here that said indigents will not pay anything and so, we need to say, if any person is an indigent, should within a specific timeline be allowed to become a member of SHA. This is so that, when it comes to enjoying the fruits of this amendment, that does not become a problem.

Finally, Mr. Temporary Speaker, Sir, let us encourage our hospitals. I have heard Sen. Olekina speak on behalf of an association of private doctors. It is good we also educate them because we are lawyers.

As the courts have said, we are not saying that those who are able should run away with medical bills that they incur in hospitals. There should be a way you can enforce recovery. One way is through a civil suit, where you can sue for the debt. Sen. Olekina, we need to be clear that you cannot use the tool of detaining a corpse or patient as a way of pressurizing a poor Kenyan to pay what he does not have.

You heard Sen. Madzayo say that there are people who, even if you send them away three or four days, they will come back and tell you, I cannot raise the money. So, let us also speak to our private hospitals. We are not saying do not pursue those who refuse to pay. Do so, but through proper channels. The court is saying you can even garnish their salary or their businesses if you know that they are trying to evade meeting an obligation that their financial status supports. Do so, but through a civil suit.

So, in conclusion, Mr. Temporary Speaker, Sir, I beg to move and with your permission, pursuant to Standing Order 66(3), I kindly request that you defer putting the question to a later date.

I thank you.

The Temporary Speaker (Sen. Mungatana, MGH): Thank you, Sen. Omogeni. It is so ordered.

(The putting of the Question on the Bill deferred)

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

Hon. Members, in exercise of the powers on this Chair, and for the convenience of the House, I would like to direct that we defer the Order of the business in the House, from Order No.13 all the way to Order No. 29, because it is not practical to get started on any other business.

MOTION

ADOPTION OF REPORT ON PETITION ON PROPOSED AMENDMENTS TO THE COUNTY GOVERNMENTS ACT (CAP. 265)

THAT, the Senate adopts the, Report of the Standing Committee on Justice, Legal Affairs and Human Rights on a Petition to the Senate by Hon. Isaiah Maina, a Member of

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the County Assembly (MCA) of Nandi County representing Ol'lessos Ward on proposed amendments to the County Governments Act (CAP. 265), laid on the Table of the Senate on Wednesday, 11th March, 2026.

(Motion deferred)

MOTION

NOTING OF REPORT ON THE ACTIVITIES AND OPERATIONS OF SELECT COMMITTEES DURING THE THIRD SESSION (2024)

THAT, the Senate notes the Report of the Liaison Committee on the activities and operations of Select Committees during the Third Session (2024) pursuant to Standing Order 224 (2), laid on the Table of the Senate on Wednesday, 28th May, 2025.

(Motion deferred)

COMMITTEE OF THE WHOLE

THE NUTS AND OIL CROPS DEVELOPMENT BILL (SENATE BILLS NO.47 OF 2023)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE HERITAGE AND MUSEUMS BILL (SENATE BILLS NO.8 OF 2023)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE STATUTORY INSTRUMENTS (AMENDMENT) BILL (SENATE BILLS NO.10 OF 2024)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE COUNTY HALL OF FAME BILL (SENATE BILLS NO.18 OF 2023)

(Committee of the Whole deferred)

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COMMITTEE OF THE WHOLE

THE PUBLIC FUNDRAISING APPEALS BILL
(SENATE BILLS NO.36 OF 2024)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE ENVIRONMENT LAWS (AMENDMENT) BILL
(SENATE BILLS NO.23 OF 2025)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE SPORTS (AMENDMENT) (NO.2) BILL
(SENATE BILLS NO.45 OF 2024)

(Committee of the Whole deferred)

COMMITTEE OF THE WHOLE

THE KENYA NATIONAL COUNCIL FOR POPULATION AND DEVELOPMENT
BILL (NATIONAL ASSEMBLY BILLS NO.72 OF 2023)

(Committee of the Whole deferred)

BILL

Second Reading

THE COUNTY GOVERNMENTS (AMENDMENT) BILL
(SENATE BILLS NO.39 OF 2025)

(Bill deferred)

BILL

Second Reading

THE STREET NAMING AND PROPERTY ADDRESSING
SYSTEM BILL (SENATE BILLS NO.43 OF 2024)

(Bill deferred)

BILL

Second Reading

THE COUNTY GOVERNMENTS LAWS (AMENDMENT) BILL
(SENATE BILLS NO.52 OF 2024)

(Bill deferred)

BILL

Second Reading

THE COUNTY GOVERNMENTS LAWS (AMENDMENT) BILL
(SENATE BILLS NO.14 OF 2025)

(Bill deferred)

BILL

Second Reading

THE NATIONAL CONSTRUCTION AUTHORITY (AMENDMENT)
BILL (SENATE BILLS NO.14 OF 2025)

(Bill deferred)

MOTION

PROVISION OF COUNTY GOVERNMENTS'
IFMIS REPORTS TO THE SENATE

THAT, AWARE that, Article 96 of the Constitution provides that the Senate represents the counties, and serves to protect their interests, determines the allocation of national revenue among counties, as provided in Article 217, and exercises oversight over national revenue allocated to the County Governments;

FURTHER AWARE THAT, in the case of *Senate v Council of Governors and 6 others* (Petition 24 and 27 of 2019 (consolidated) 2022) KESC 57(KLR), the Supreme Court affirmed that the Senate's oversight authority extends to both nationally allocated and locally generated revenue;

CONCERNED THAT, that Senators are constrained by lack of access to real time to data from the IFMIS system for the respective counties they represent, thus affecting effective oversight of County Governments;

FURTHER CONCERNED THAT, in some instances data and information presented to the Senate by the Auditor-General and the Controller of Budget are received and considered late as a result of the backlog resulting into too much information not getting properly reviewed by Senators;

NOTING THAT, as a result of unchecked financial information and systems, County Governments have continued to accumulate pending bills resulting from unplanned expenditures, unaccounted for and inflated cost of projects;

NOW THEREFORE, the Senate resolves, that the Cabinet Secretary in charge of the National Treasury shall on a monthly basis forward to the Clerk of the Senate all IFMIS transactions and reports for each County Government for onward transmission to the respective Senator for information on accountability and transparency, in order to strengthen their constitutional oversight and promote good governance in the management of public finances.

(Motion deferred)

MOTION

DELINK JSS FROM PRIMARY SCHOOLS

THAT, AWARE that, the Ministry of Education in Kenya, introduced Junior Secondary Schools (JSS) as part of the Competency-Based Curriculum (CBC) implementation marking a major milestone for the country's education system, and a key opportunity to improve the quality of education available to students;

APPRECIATING THAT, the Junior Secondary Schools program play a vital role in shaping the academic trajectory of learners by providing students with a strong foundation in core subjects, helping them develop essential skills and offering them opportunities to participate in extracurricular activities promoting greater social inclusion;

CONCERNED THAT, the integration of Junior Secondary Schools within primary school setups has posed major challenges for Junior Secondary teachers, including inadequate training on the new competency-based curriculum, limited opportunities for career advancement, conflict in leadership, decision-making and resource allocation leading to strained relationships with head teachers;

FURTHER CONCERNED THAT, Junior Secondary Schools (JSS) face critical shortages in essential infrastructure such as laboratories, libraries, ICT hubs, and science equipment necessary for the implementation of the JSS curriculum, coupled with inadequate access to approved learning materials and teaching resources, resulting in inconsistencies in curriculum delivery hindering effective teaching, learning, and overall student development;

NOW THEREFORE, the Senate resolves that the Ministry of Education, the Teachers Service Commission and the Kenya Institute of Curriculum Development should -

- i) Provide for an independent administrative and operational framework for Junior Secondary Schools to enhance governance, streamline management, and create a more focused learning environment for the learners;
- ii) Allocate adequate funds for the construction and equipping of Junior Secondary Schools with essential facilities such as science labs, libraries and ICT rooms, and provide adequate learning materials relevant with the curriculum;
- iii) Offer professional development programs for Junior Secondary School teachers to help them specialize in specific subjects to effectively implement the JSS curriculum;
- iv) Develop a clear career progression framework for Junior Secondary School teachers, including opportunities for promotions and additional responsibility allowances;
- v) Formulate clear policies and guidelines outlining the structure, curriculum, and management of Junior Secondary Schools; and
- vi) Ensure an optimal teacher-student ratio to facilitate personalized student attention and effective learning.

(Motion deferred)

ADJOURNMENT

The Temporary Speaker (Sen. Mungatana, MGH): Hon. Members, let us be upstanding. There being no other business on the Order Paper, the Senate stands adjourned until tomorrow, Thursday, 19th March, 2026, at 2.30 p.m.

The Senate rose at 6.28 p.m.