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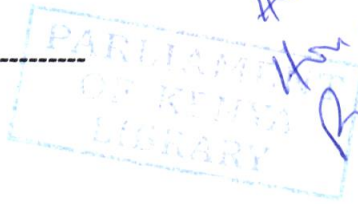
*Ph*  
SNA  
7/7/15



REPUBLIC OF KENYA

THE NATIONAL ASSEMBLY

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*Paper laid*  
*By the Vice*  
*Health committee*  
*Hon. (Dr)*  
*Prokopi*  
*Tuesday*  
*7/7/20*  
*Robert*  
*clampson*

ELEVENTH PARLIAMENT – THIRD SESSION - 2015

THE DEPARTMENTAL COMMITTEE ON HEALTH

REPORT ON THE CONSIDERATION OF THE DIABETES MANAGEMENT BILL,  
2014

CLERK'S CHAMBERS  
DIRECTORATE OF COMMITTEE SERVICES  
PARLIAMENT BUILDINGS  
NAIROBI

JULY, 2015

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## ABBREVIATIONS

CDs	-	Communicable Diseases
NCDs	-	Non Communicable Diseases
NHIF	-	National Hospital Insurance Fund

## 1.0 PREFACE

**Mr. Speaker, Sir**

I wish to table the Report of the Departmental Committee on Health on its consideration of the Diabetes Management Bill, 2014 pursuant to Standing Order 199. The Diabetes Management Bill, 2014 seeks to establish a legal framework to provide for prevention, treatment and control of diabetes.

## 1.1 Committee Mandate

**Mr. Speaker, Sir**

The Committee on Health is one of the Departmental Committees of the National Assembly established under Standing Order 216 and mandated to, inter alia; **'study and review all legislations referred to it'**.

## 1.2 Committee Membership

**Mr. Speaker, Sir**

The Committee Comprises of the following members:

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson)
3. The Hon. David Karithi, M.P.
4. The Hon. Dr. James Murgor, M.P.
5. The Hon. Dr. James Nyikal, M.P.
6. The Hon. Dr. James O. Gesami, M.P.
7. The Hon. Dr. Naomi Shaban, M.P.
8. The Hon. Dr. Stephen Wachira, M.P.
9. The Hon. Dr. Susan Musyoka, M.P.
10. The Hon. Hassan Aden Osman, M.P.
11. The Hon. James Gakuya, M.P.
12. The Hon. John Nyaga Muchiri, M.P.
13. The Hon. Michael Onyura, M.P.
14. The Hon. Paul Koinange, M.P.
15. The Hon. Stephen M. Mule, M.P.
16. The Hon. Zipporah Jesang, M.P.
17. The Hon. Alfred Agoi, M.P.
18. The Hon. Christopher Nakuleu, M.P.
19. The Hon. Dr. Dahir D. Mohamed, M.P.
20. The Hon. Dr. Eseli Simiyu, M.P.
21. The Hon. Dr. Enoch Kibunguchy, M.P.
22. The Hon. Dr. Patrick Musimba, M.P.
23. The Hon. Alfred Outa, M.P.
24. The Hon. Joseph O. Magwanga, M.P.

- 25. The Hon. Kamande Mwangi, M.P.
- 26. The Hon. Leonard Sang, M.P.
- 27. The Hon. Mwashima Masoud, M.P.
- 28. The Hon. Mwinga Gunga, M.P.
- 29. The Hon. Raphael Milkau Otaalo, M.P.

### 1.3 Pre-Publication Scrutiny

**Mr. Speaker, Sir,**

The Diabetes Management Bill, 2014 was forwarded to the Departmental Committee on Health from the Director of Legal Services (National Assembly) for pre-publication scrutiny. The Committee processed the legislative proposal within the provisions of Standing Order 114. However, the Bill was published on 22<sup>nd</sup> April, 2014 before the Committee could table its pre-publication scrutiny report.

### 1.4 Consideration of the Diabetes Management Bill, 2014

**Mr. Speaker, Sir,**

The Diabetes Management Bill, 2014 was read a First Time and thereafter committed to the Departmental Committee on Health for consideration pursuant to Article 118 of the Constitution and Standing Order Number 127. The Committee consequently placed adverts in the Local Dailies calling for views from the general public on the Bill that were to be received on or before Tuesday, 17<sup>th</sup> June, 2014. After the expiry of the period for Submission of views/memoranda from the public, only Messrs Wabuyabo Nicholas and Humphrey T. Khasuke responded.

### 1.5 Public Memoranda/Views

**Mr. Speaker, Sir,**

In their comments, Messrs Wabuyabo Nicholas and Humphrey Khasuke argue that if the prevention of every disease was to have an Act of Parliament, there would be more than 2000 Acts to provide for the prevention, treatment and control of a particular disease and connected purposes. They also argue that the powers and functions of the proposed National Diabetes Management Council are illogical and that the provision on establishment of a diabetes register will not only stigmatize the affected persons but also infringe on his/her right to privacy and that enactment of the Bill shall occasion very large additional expenditure of public funds which would be far better utilized to attain the Millennium Development Goals.

## 1.6 Committee Observations and Recommendations

**Mr. Speaker, Sir,**

Having analyzed the Bill and the comments from stakeholders, the Committee observed that attainment of health for all is the ultimate goal of addressing diseases like diabetes and other NCDs as prescribed in the Health Policy, 2014-2030. The Committee further observed that many NCDs including diabetes that pose public health problems share common behavioral, environmental or genetic risk factors and that the most efficient approaches for the prevention and control of diabetes and other NCDs are those based on comprehensive, multi-sectoral and multi-disciplinary interventions. Equally the Committee observed that the Bill intends to create a National Diabetes Management Council whose mandate would only be focused on diabetes control. This is not strategic but superfluous. Therefore, the Committee recommends that the Diabetes Management Bill, 2014 should be withdrawn to pave way for a more comprehensive Bill on Non-Communicable Diseases.

## 1.7 Adoption List

We, the members of the Departmental Committee on Health have, Pursuant to Standing Order 199, adopted this Report and affix our signatures to affirm our approval and confirm its accuracy, validity and authenticity:

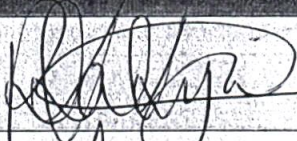

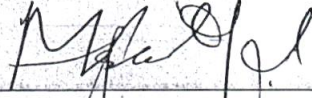
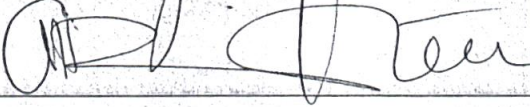

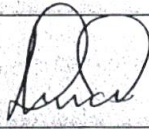
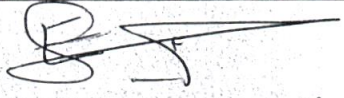

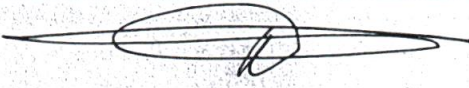


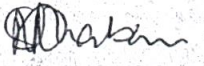
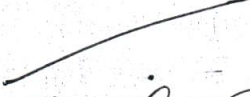

DC-H: DEPARTMENTAL COMMITTEE ON HEALTH






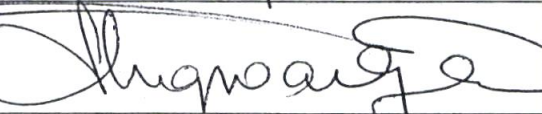


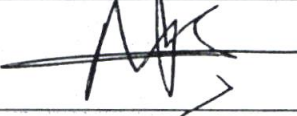
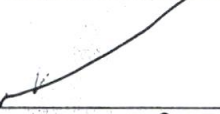



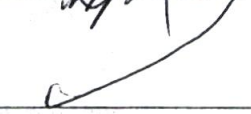
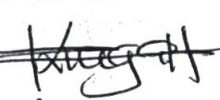
ATTENDANCE REGISTER

8.00 am

DATE: 27/2/15

Venue Whitesands

	HON. MEMBER	SIGNATURE
1.	The Hon. Dr. Rachael Nyamai, M.P. Chairperson	
2.	The Hon. Dr. Robert Pukose, M.P. Vice Chairperson	
3.	The Hon. Alfred Agoi, M.P.	
4.	The Hon. Christopher Nakuleu M.P.	
5.	The Hon. David Karithi, M.P.	
6.	The Hon. Dr. Dahir D. Mohamed, M.P.	
7.	The Hon. Dr. David Eseli, M.P.	
8.	The Hon. Dr. Enoch Kibunguchy, M.P.	
9.	The Hon. Dr. James Murgor, M.P.	
10.	The Hon. Dr. James Nyikal, M.P.	
11.	The Hon. Dr. James O. Gesami, M.P.	
12.	The Hon. Dr. Naomi Shaban, M.P.	
13.	The Hon. Dr. Patrick Musimba, MP	
14.	The Hon. Dr. Stephen Wachira, M.P.	

	HON. MEMBER	SIGNATURE
15.	The Hon. Dr. Susan Musyoka, M.P.	
16.	The Hon. Fred Outa, M.P.	
17.	The Hon. Hassan Aden Osman, M.P.	
18.	The Hon. James Gakuya, M.P.	
19.	The Hon. John Nyaga Muchiri, M.P. <sup>HSC</sup>	
20.	The Hon. Joseph O. Magwanga, M.P.	
21.	The Hon. Kamande Mwangi, M.P.	
22.	The Hon. Leonard Sang, M.P.	
23.	The Hon. Michael Onyura, M.P.	
24.	The Hon. Mwachima Masoud, M.P.	
25.	The Hon. Mwinga Gunga, M.P.	
26.	The Hon. Paul Koinange, M.P.	
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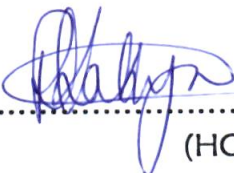
1.8 Acknowledgement

Mr. Speaker, Sir,

The Committee is grateful to the Offices of the Speaker and the Clerk of the National Assembly for the logistical and technical support accorded to it during its Sittings. I also wish to express my appreciation to the Honorable Members of the Committee who sacrificed their time to participate in the activities of the Committee including the preparation of this Report.

Mr. Speaker,

It is therefore my pleasure and privilege, on behalf of the Departmental Committee on Health, to table its Report in the House on the Consideration of the Diabetes Management Bill, 2014 for consideration Pursuant to Standing Order 127 (4).

Signed..........Date.....*27<sup>th</sup> february 2015*.....  
(HON. DR. RACHEAL NYAMAI, M.P.)

CHAIRPERSON,  
DEPARTMENTAL COMMITTEE ON HEALTH

### 2.0 INTRODUCTION

2.1 The objective of the Bill is to establish a legal framework to provide for prevention, treatment and control of diabetes. The Bill further seeks to reduce the prevalence of type 2 diabetes by addressing the lifestyle that people live, regulating the quality and type of products that people consume and promoting awareness about the causes, methods of prevention and cure for diabetes. Further, the Bill seeks to encourage data collection on diabetes by making it mandatory for hospitals to report new cases on detection, a fact that will help the government in healthcare planning.

2.2 The Bill proposes to establish a National Diabetes Management Council whose functions shall be, among others:

- a) Encourage and secure the establishment of diabetes treatment and care centers.
- b) Develop programs for awareness creation on the causes and methods of treatment of diabetes.
- c) Advise the cabinet secretary on matters relating to the treatment and care of persons with diabetes.
- d) Conduct research on the prevention, control and treatment of diabetes.
- e) Liaise with institutions of higher learning to undertake research on matters relevant to diabetes prevention, control and treatment.
- f) Administer the diabetes register.

### 3.0 SITUATIONAL ANALYSIS

3.1 In broad terms, the Constitution provides the legal basis for the prevention and management of Non Communicable Diseases (NCDs) in the country. Article 43(1) (a) provides the “right to health care services” with the government obligated to provide health care services. The Fourth schedule of the Constitution further devolves health service delivery to Counties with the National Government retaining the policy formulation function and the management of the referral hospitals. The implication is that decisions regarding the prevention of NCDs including policy and legislative arrangements will require the active participation of county governments as

they are the key players in primary health service delivery where prevention of NCDs falls.

3.2 *The Kenya Vision 2030* under its social pillar lays emphasis on a shift in focus from curative to preventive health care.

3.3 *The Kenya Health Policy 2011-2030* recognizes the burden of the NCDs on the health sector and strives to reverse the rising burden while strengthening collaboration with other sectors to address social determinants of health in order to improve health outcomes among other strategic outcomes. The policy further outlines the following actions as strategic to prevention and control of NCDs:-

- i. Active surveillance and screening
- ii. Increase universal access to NCDs-related interventions especially for marginalized and indigent populations to maximize utilization of NCDs-related services.
- iii. Increase advocacy for NCD-relevant health promotion programs; improving access to services e.g. alcohol and tobacco use, physical activity, safe and quality food, water, housing, work opportunities and other determinants of well being.

3.4 In terms of policy, the framework guiding the prevention of NCDs is spread across prevention of specific NCDs. This is despite the knowledge that these diseases have similar prevention strategies owing to correlating risk factors. This means there exist no clear policy direction for NCDs thereby hampering a consolidated approach in dealing with the NCDs. For example the Kenya National Diabetic Strategic Plan 2010-2015; the Kenya National Cancer Control Strategic Plan 2011-2016. A consolidated policy intervention is however still in draft form - The Draft Kenya NCDs Prevention and Control Strategic Plan. In addition to these health policies, multi-sectoral health policies also exist and are operational for example tobacco and alcohol control.

3.5 The Health Bill, 2015 in Clause 38 (1) on promotion and advancement of public and environmental health provides that "The national health system shall devise and implement measures to promote health and to counter influences having an adverse effect on the health of the people including:

- a) Interventions to reduce the burden imposed by Communicable Diseases (CDs) and NCDs including cancers, neglected diseases especially among marginalized and indigent populations;
- b) Interventions to promote healthy lifestyle including physical activity, counter the excessive use of alcohol products and the adulteration of such products, reduce use of tobacco and other addictive substances and to counter exposure to children and others to tobacco smoke;
- c) The promotion of supply of food stuffs of sufficient quality in adequate quantities and promotion of nutritional knowledge at all population levels”

3.6 Gaps in NCD control and prevention in Kenya include:

- a) Lack of a national NCD position and policy statement; but for strategies for specific NCDs;
- b) The traditional focus on communicable diseases hence public investment towards NCD prevention and control has been low;
- c) Lack of a comprehensive and integrated NCD risk factor and disease prevention and control programs with health care in Kenya focusing on costly curative services hence no cost effective screening and intervention models;
- d) No primary care packages; and
- e) No health information system and surveillance.

4.0 COMMENTS/ VIEWS FROM THE PUBLIC

Views/memoranda from the public were only received from Messrs Wabuyabo Nicholas and Humphrey T. Khasuke. In their Submission dated 17<sup>th</sup> June 2014, they made the following comments, THAT:-

- a) Legislating on every disease would lead to numerous Acts of Parliament and this would be unsustainable. For example if the prevention of every disease was to have an Act of Parliament, there would be more than 2000 Acts to provide for the prevention, treatment and control of a particular disease and connected purposes.
- b) The powers and functions of the proposed National Diabetes Management Council are illogical. These include, among others: -
  - i. Provision of standard diagnostic equipment to all district hospitals which is too broad a function for which there are already other departments mandated to do the same.

- ii. Provision of advice to the Cabinet Secretary on matters regarding diabetes of which there already are a plethora of professional bodies, doctors pharmacists etc. hence it would be a duplication of roles and a waste of tax payers' funds.
  - iii. On research on prevention, control and treatment of diabetes, already there are various bodies in the country and across the globe conducting expert research. It's not clear how the council would add to the existing body of knowledge.
- c) The provision on establishment of a diabetes register will not only stigmatize the affected persons but also infringe on their right to privacy.
  - d) Enactment of the bill shall occasion additional expenditure of public funds which would be far better utilized to attain the Millennium Development Goals.

## 5.0 COMMITTEE OBSERVATIONS

Having analyzed the Bill and the comments from stakeholders, the Committee observed that:-

- a) Attainment of health for all is the ultimate goal of addressing diseases like diabetes and other NCDs as prescribed in the *Health Policy, 2014-2030*. The four categories of diseases – cardiovascular disease, cancer, chronic respiratory diseases and diabetes make the largest contribution to morbidity and mortality and as such should be the main focus of action. Legislating on one single NCD is likely to pose additional challenges.
- b) Many NCDs including diabetes that pose public health problems share common behavioral, environmental or genetic risk factors like tobacco consumption, obesity, high alcohol consumption, physical inactivity and environmental pollution and as such are amenable to preventive action. The facts remain that the growing epidemic of NCDs in Kenya has been closely linked to demographic and nutritional transition, changing lifestyles as well as the effects of increasing urbanization and globalization. These are not clearly addressed by the bill.
- c) Most efficient approaches for the prevention and control of diabetes and other NCDs are those based on comprehensive, multi-sectoral

and multi-disciplinary interventions implemented through partnerships with all stakeholders. This has not been adequately addressed by the bill.

- d) Public resources are constrained and the health sector continues to be under funded with health systems in dire need of strengthening. As such, comprehensively addressing the issues of NCDs would be the ideal strategy given the common risk factors
- e) The Bill intends to create a National Diabetes Management Council whose mandate would only be focused on diabetes control and whose membership includes persons from various sectors including health, media and academia. This is not strategic but superfluous given that:
  - i. The mandate of the council will be too narrow bearing in mind the multiplicity and scope of work and the nature of diabetes as one of the NCDs its noteworthy that a similar Act of Parliament currently in existence (*The Cancer Prevention and Control Act, 2012*) establishes a similar outfit; *The National Cancer Institute Of Kenya* which up to date has not been operationalized)
  - ii. It would not make economic sense to establish a council with a membership of 11 drawing from the Principal Secretary to only focus on one NCD from a group of four.
  - iii. Implementation of such legislation is likely to cause more confusion in the health sector which is in dire need of streamlining to effectively manage the issues therein. Given the multi-sectorial nature of NCDs including diabetes and in the context of devolution of health services, there is need for a comprehensive approach.
- f) There was need to repeal the Cancer Prevention and Control Act, Cap 246B and replace it with a comprehensive NCDs prevention and control law that will incorporate all NCDs with strategic focus on their related causal risks.
- g) There was need to reform the NHIF and build its capacity to provide universal coverage for all Kenyans particularly the indigents and thus facilitate the provision of promotive, preventive and curative services for NCDs.

- h) There was need for planning and budgetary allocations to the health sector ought to reflect the shift in policy from curative to preventive which will be effective in tackling the issues of NCDs.
- i) There was need to amend certain pieces of existing legislation likely to enforce Article 38 (1) (2) of the Health Bill, 2015 especially with regard to NCDs. These include, among others:
  - i. Alcoholic Drinks Control, Cap 121A
  - ii. Employment Act, Cap 226
  - iii. Food, Drugs and Chemical Substances, Cap 254
  - iv. Environmental Management and Coordination, Cap 387
  - v. Radiation Protection Act – Act 20 of 1982
  - vi. Tobacco Control Act – Cap 254A
  - vii. The Standards Act – Cap 496
- j) There was need to review the national taxation laws (particularly the *Sin Tax and VAT on other unhealthy foods e.g. processed foods*) to fund NCDs prevention and control.

## 6.0 COMMITTEE RECOMMENDATION

Having extensively considered the Bill, the Committee recommends that:

The National Government should fast track the Non Communicable Diseases Policy Framework that will provide the much needed direction to formulate legislation in this area. The policy and legal framework should include mechanisms to:

- i. Integrate communicable and non-communicable disease prevention and control in the existing healthcare infrastructure.
- ii. Coordinate and collaborate the NCD response with health related sectors, regulatory outfits and between national and county governments.
- iii. Promote primary prevention and promotion strategies and interventions for early detection and monitoring of risks.
- iv. Invoke Part 1 (32) of the Fourth Schedule of the Constitution on capacity building and technical assistance to counties.

**The Diabetes Management Bill, 2014 should therefore be withdrawn to pave way for a more comprehensive Bill on Non-Communicable Diseases.**

MINUTES OF THE 70<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN WHITESANDS RESORT, MOMBASA, ON FRIDAY, 22<sup>ND</sup> AUGUST 2014 AT 2.30PM.

**PRESENT:**

1. The Hon. Dr. Rachael Nyamai, MP (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P (V. Chairperson)
3. The Hon Dr. Susan Musyoka, M.P.
4. The Hon Eng. Stephen Mule, M.P
5. The Hon Joseph Magwanga, M.P
6. The Hon Mwinga Gunga, M.P.
7. The Hon. Alfred Agoi, M.P.
8. The Hon. Christopher Nakuleu, MP.
9. The Hon. David Karithi, M.P
10. The Hon. Dr. Dahir Mohamed, M.P
11. The Hon. Dr. David Eseli, M.P.
12. The Hon. Dr. James Gesami, M.P
13. The Hon. Dr. James Murgor, M.P
14. The Hon. Dr. Naomi Shaban, M.P
15. The Hon. Dr. Stephen Wachira, M.P
16. The Hon. Fred Outa, M.P.
17. The Hon. Hassan Osman, M.P
18. The Hon. James Gakuya, M.P.
19. The Hon. John Nyaga Muchiri, M.P.
20. The Hon. Kamande Mwangi, M.P.
21. The Hon. Leonard Sang, M.P
22. The Hon. Michael Onyura, M.P
23. The Hon. Zipporah Jesang, M.P.

**ABSENT WITH APOLOGY:**

24. The Hon. Dr. Enoch Kibunguchy, M.P.
25. The Hon. Dr. James Nyikal, M.P.
26. The Hon. Dr. Patrick Musimba, M.P
27. The Hon. Mwahima Masoud, M.P.
28. The Hon. Paul Koinange, M.P.
29. The Hon. Raphael Otaalo, M.P.

**National Assembly Secretariat**

1. Mrs. Florence Atenyo Abonyo - Director, Committee Services
2. Ms. Leah Mwaura - First clerk assistant
3. Mr. Nebert Ikai - Third Clerk Assistant
4. Mr. Hassan Arale - Third Clerk Assistant
5. Ms. Marale Sande - Senior Researcher
6. Mr. Peter Mwaura - Legal Counsel

**MIN. NO DCH 315/2014:**

**PRELIMINARIES**

The meeting was called to order at 2.30 pm followed by a word of prayer.

**MIN NO DCH 316/2014:**

**CONSIDERATION OF DIABETES MANAGEMENT BILL, 2014**

The Senior Researcher took the Committee through the analysis of the Bill (copy attached).

**Committee Concerns**

The Committee raised the following concerns:

- i. The Committee resolved to sponsor a Non-Communicable Disease Bill that will address concerns and management of NCDs eg Diabetes, HIV/AIDS, Malaria etc. The Committee to hold a one day stakeholder retreat in Naivasha to get input for formulation of Non-Communicable Disease Bill.
- ii. The existing associations/ institutions dealing with diabetes to be strengthened.

### **Way Forward**

The Committee to consult with other stakeholders with the view of coming up with an NCD Bill.

### **MIN. NO. DCH 317/2014**

### **ANY OTHER BUSINESS**

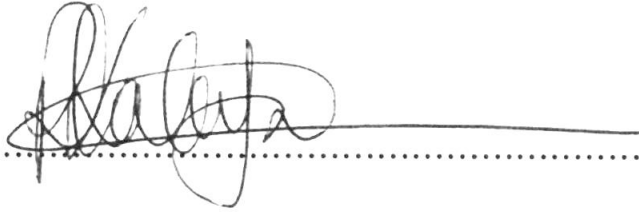
- i. It was reported that the Budget Committee is ceased of the matter of leasing of medical equipment.
- ii. Members resolved and tasked the secretariat to write background information on leasing of equipment to convince the speaker to allow the Committee to move a motion and also address a press conference on the matter.
- iii. The Committee is awaiting the opinion of the Public Procurement Oversight Authority on the matter of MTRH. This will be included in the draft MTRH Report.
- iv. The Chair informed the Committee that MoH, had invited the Chairperson Health Committee and the Delegated Legislation Committee to participate in the 6<sup>th</sup> Session of Conference of Parties to the Framework Convention on Tobacco Control from 13<sup>th</sup> – 18<sup>th</sup> October, 201 in Moscow, Russia.
- v. The Chair further informed the Committee that the Ministry of Health & EAC wrote to the Health Committees of NA & Senate inviting 5 MPs to a meeting dubbed “ Legislative, Policy and Technical Learning Exchanges on Sexual and Reproductive Health Rights and Maternal Newborn and Child Health Commodity Security in the Republic of Burundi, Uganda and Kenya” from 8<sup>th</sup> to 12<sup>th</sup> September, 2014.

MIN. NO. DCH 318/2014

ADJOURNMENT

There being no other business the meeting was adjourned at 5.10 PM

SIGNED.....



HON (DR.) RACHAEL NYAMAI, M.P

CHAIRPERSON

DATE:.....

7<sup>th</sup> October, 2014

**MINUTES OF THE 12<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN SAROVA WHITESANDS BEACH RESORT AND SPA , ON FRIDAY 27<sup>TH</sup> FEBRUARY, 2015, AT 2.00 P.M.**

**PRESENT**

1. The Hon. Dr. Racheal Nyamai, M.P. (Chairperson)
2. The Hon. Dr. Robert Pukose, M.P. (Vice Chairperson)
3. The Hon. Dr. James Murgor, M.P.
4. The Hon. Christopher Nakuleu, M.P.
5. The Hon. Dr. Dahir D. Mohamed, M.P.
6. The Hon. Mwinga Gunga, M.P.
7. The Hon. Dr. Stephen Wachira, M.P.
8. The Hon. Hassan Aden Osman, M.P.
9. The Hon. James Gakuya, M.P.
10. The Hon. Raphael Milkau Otaalo, M.P.
11. The Hon. Kamande Mwangi, M.P.
12. The Hon. Michael Onyura, M.P.
13. The Hon. Zipporah Jesang, M.P.
14. The Hon. John Nyaga Muchiri, M.P.
15. The Hon. Dr. James Nyikal, M.P.
16. The Hon. Joseph O. Magwanga, M.P.
17. The Hon. Paul Koinange, M.P.
18. The Hon. Dr. Naomi Shaban, M.P.
19. The Hon. Dr. Eseli Simiyu, M.P.

**ABSENT WITH APOLOGY**

1. The Hon. Dr. Patrick Musimba, M.P.
2. The Hon. Alfred Outa, M.P.
3. The Hon. Mwahima Masoud, M.P.
4. The Hon. Dr. Enoch Kibunguchy, M.P.
5. The Hon. Dr. Susan Musyoka, M.P.
6. The Hon. Alfred Agoi, M.P.
7. The Hon. David Karithi, M.P.
8. The Hon. Dr. James O. Gesami, M.P.
9. The Hon. Stephen M. Mule, M.P.
10. The Hon. Leonard Sang, M.P.

**IN ATTENDANCE**

**National Assembly Secretariat**

- |                    |   |                        |
|--------------------|---|------------------------|
| 1. Esther Nginyo   | - | Third Clerk Assistant  |
| 2. Dennis Mogare   | - | Third Clerk Assistant. |
| 3. Hassan A. Arale | - | Third Clerk Assistant. |
| 4. Peter Mwaura    | - | Legal Counsel          |
| 5. Reyhan Mohammed | - | Research Officer       |
| 6. Moses Kariuki   | - | Sergeant at Arms.      |

**MIN.NO. DCH 54/2015: PRELIMINARIES.**

The Chairperson called the meeting to order at 2.30 PM and a prayer was said by Hon. Dr. Robert Pukose M.P .The Chairperson then welcomed the Members to the meeting and agenda of the meeting was adopted as proposed and seconded by Hon. Dr. Robert Pukose, MP and Hon. Dr. James Murgor, MP respectively.

**MIN.NO. DCH 55/2015: CONSIDERATION OF DIABETES MANAGEMENT BILL, 2014 REPORT;**

The Committee considered the report on Diabetes Management Bill, 2014 which was unanimously adopted after it was proposed and seconded by Hon Dr. Stephen Wachira, MP and Hon Christopher Nakuleu, MP respectively.

**MIN.DCH 56/2015; CONSIDERATION OF TRADITIONAL HEALTH PRACTITIONERS BILL, 2014 REPORT.**

The Committee considered the report on Traditional Health Practitioners Bill, 2014 and proposed to include information on the traditional Health Practice in China and remove information on Canada. The report was then adopted with amendments as proposed and seconded by Hon. Hassan Aden Osman, MP and Hon. James Gakuya, MP respectively.

**OBSERVATION;**

The Members observed that;

1. The Bill was read for the first time on 24<sup>th</sup> June, 2014 indicating that it was overdue for the second reading. It was agreed that the Chairperson to request the House Business Committee to delay the second reading to allow for more stakeholder consultations.
2. It is important to reach out for public participation to the areas where the traditional health is widely practiced so as to incorporate the views of such stakeholders in the law.
3. There is the need to benchmark with other jurisdictions such as China, India and South Africa with similar laws and practices to improve on the bill.

**MIN.NO. DCH 57/2015: ANY OTHER BUSINESS**

There was no business under this agenda item.

MIN.NO. DCH 58/2015

ADJOURNMENT

There being no other business the meeting was adjourned at 4.05pm.

SIGNED.....



HON (DR.) RACHAEL NYAMAI, M.P

CHAIRPERSON

DATE:.....

26<sup>th</sup> March 2015

MINUTES OF THE 89<sup>TH</sup> SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD ON 4<sup>TH</sup> FLOOR COMMITTEE ROOM, PROTECTION HOUSE, PARLIAMENT BUILDINGS, ON THURSDAY, 30<sup>TH</sup> OCTOBER 2014, AT 10.00A.M.

**PRESENT:**

- |  |                                       |
|--|---------------------------------------|
| 1. The Hon. Dr. Rachael Nyamai, MP     | - Chairperson                         |
| 2. The Hon. Christopher Nakuleu, M.P.  | 11. The Hon. John Nyaga Muchiri, M.P. |
| 3. The Hon. David Karithi, M.P.        | 12. The Hon. Joseph Magwanga, M.P.    |
| 4. The Hon. Dr. Dahir Mohamed, M.P.    | 13. The Hon. Kamande Mwangi, M.P.     |
| 5. The Hon. Dr. Enoch Kibunguchy, M.P. | 14. The Hon. Leonard Sang, M.P.       |
| 6. The Hon. Dr. James Gesami, M.P.     | 15. The Hon. Michael Onyura, M.P.     |
| 7. The Hon. Dr. Stephen Wachira, M.P.  | 16. The Hon. Mwinga Gunga, M.P.       |
| 8. The Hon. Fred Outa, M.P.            | 17. The Hon. Paul Koinange, M.P.      |
| 9. The Hon. Hassan Osman, M.P.         | 18. The Hon. Raphael Otaalo, M.P.     |
| 10. The Hon. James Gakuya, M.P.        | 19. The Hon. Zipporah Jesang, M.P.    |

**ABSENT WITH APOLOGY:**

- |   |  |
|---|--|
| 20. The Hon. Dr. Robert Pukose, M.P -V. Chairperson |  |
| 21. The Hon. Alfred Agoi, M.P.                      | 26. The Hon. Dr. Patrick Musimba, M.P. |
| 22. The Hon. Dr. David Eseli, M.P.                  | 27. The Hon. Dr. Susan Musyoka, M.P.   |
| 23. The Hon. Dr. James Murgor, M.P.                 | 28. The Hon. Eng. Stephen Mule, M.P.   |
| 24. The Hon. Dr. James Nyikal, M.P.                 | 29. The Hon. Mwahima Masoud, M.P.      |
| 25. The Hon. Dr. Naomi Shaban, M.P.                 |  |

**In Attendance**

**National Assembly Secretariat**

- |              |   |                        |
|--------------|---|------------------------|
| Nebert Ikai  | - | Third Clerk Assistant. |
| Hassan Arale | - | Third Clerk Assistant  |

**MIN. NO DCH 404/2014: PRELIMINARIES**

The Chair called the meeting to order at 10.30am and welcomed Members to the meeting.

**MIN. NO DCH 405 /2014: CONFIRMATION OF MINUTES**

Confirmations of Minutes of 76th to 88th Sitting were differed to the next Sitting.

**MIN. NO DCH 406 /2014: CONSIDERATION OF DIABETES MANAGEMENT BILL**

The Committee resolved to withdraw the Diabetes Management Bill and consider introducing a new Bill on non-communicable diseases, which will provide a broader framework for addressing other non-communicable diseases.

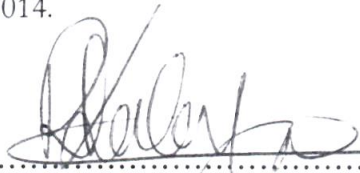
**MIN. NO. DCH 407/2014 ANY OTHER BUSINESS**

1. With regards to the 7<sup>th</sup> Ordinary Meeting of the East Africa Inter-parliamentary Forum on Health Population and Development, the Committee nominated Hon. Dr. Racheal Nyamai, MP, Hon. Dr. James Murgor, MP and Hon. Zipporah Kering, MP to represent the Committee in the said meeting. The meeting will take place from 5<sup>th</sup> – 7<sup>th</sup> November, 2014
2. With regards to the following week's meetings, the Committee resolved to have two meetings on Tuesday and then proceed with a retreat to Mombasa on Wednesday evening.
3. The Committee resolved to conclude the following reports:
  - Report on Moi Teaching and Referral Hospital Upgrading Project
  - Report on Kenya Medical Training College 2014 Admissions
  - Report on the Visit to Athi River Mining Company and Bamburi Cement Ltd.

**MIN. NO. DCH 408/2014 ADJOURNMENT**

There being no other business the meeting was adjourned at 12.30 pm to until Tuesday, 4<sup>th</sup> November, 2014.

SIGNED.....



**HON (DR.) RACHAEL NYAMAI, M.P  
CHAIRPERSON**

DATE:.....

25<sup>th</sup> November 2014