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ELEVENTH PARLIAMENT – THIRD SESSION

THE DEPARTMENTAL COMMITTEE ON HEALTH

REPORT ON

THE CONSIDERATION OF THE TRADITIONAL HEALTH PRACTITIONERS BILL,
2014

TABLE OF CONTENTS

TABLE OF CONTENTS.....	2
ABBREVIATIONS.....	3
1.0 PREFACE.....	4
2.0 INTRODUCTION.....	7
3.0 SITUATIONAL ANALYSIS	7
4.0 COMPARATIVE ANALYSIS WITH OTHER COUNTRIES	9
5.0 VIEWS FROM STAKEHOLDERS	10
6.0 COMMITTEE OBSERVATIONS.....	12
7.0 COMMITTEE RECOMMENDATION	13

ABBREVIATIONS

WHO World Health Organization

1.0 Preface

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; 'to study and review all legislations referred to it'.

1.1 Committee Membership

Mr. Speaker, Sir

The Committee Health was constituted by the House on Thursday 16th May, 2013 comprising 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. Mwahima Masoud, M.P.
28. The Hon. Mwinga Gunga, M.P.
29. The Hon. Raphael Milkau Otaalo, M.P.

1.2 Consideration of the Traditional Health Practitioners Bill, 2014

Mr. Speaker, Sir,

1.2.1 The Traditional Health Practitioners 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 before the Committee could table its pre-publication scrutiny report. The Bill was published on 22nd April, 2014.

Mr. Speaker, Sir,

1.2.2 On 3rd June, 2014, the Traditional Health Practitioners 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 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, 17th June, 2014. Only the Ministry of Health and one traditional health practitioner responded.

Mr. Speaker, Sir,

1.2.3 In its comments, the Ministry of Health observed that the development of the Bill had not been consultative and that it seriously conflicted with processes that had already been initiated by the Ministry of Health and other stakeholder ministries geared towards addressing the harnessing and regulation of traditional medicine practice and related products. The Ministry recommended that the Bill be withdrawn to allow for consultations to eliminate conflict and avoid jeopardizing the ongoing processes of reviewing and formulating appropriate health related laws and policies. A traditional health practitioner, one Gilbert G. Mahinda while supporting the formulation of the Bill proposed amendments that in effect seek to secure the interests of current practitioners.

Mr. Speaker, Sir,

1.2.4 The main object of the Bill is to provide for the training, registration and licensing of traditional health practitioners and to regulate their practice through the establishment of the Traditional Health Practitioners Council of Kenya.

1.3 Observations and Recommendations

Mr. Speaker, Sir,

The Committee observed that passing the Traditional Practitioners Bill, 2014 will provide the much needed regulatory Authority to streamline the herbal practice and protect the citizens from uncompromised services. However, a lot more will be required if the operationalization of the Act (Once the bill is enacted) is to be realized. These include: The Enactment of the Health Act, 2014 which provides for the overarching framework for the recognition of the traditional and alternative medicine in the broader national health system; Mutual collaboration between National and County Governments (Departments of Health); and Increased budget allocation towards traditional medicine.

Mr. Speaker, Sir,

Having extensively considered the Bill, the Committee recommends that the Sponsor of the Bill allows for more consultation with the stakeholders to ensure that the law that will be passed incorporates their views. This is owing to the fact that very little contribution from the stakeholders was received through memorandum.

1.4 Acknowledgement

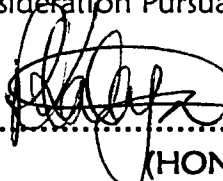
Mr. Speaker, Sir,

The Committee is thankful 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. Finally, I wish to express my appreciation to the Honourable Members of the Committee who sacrificed their time to participate in the activities of the Committee including the preparation of this Report.

Mr. Speaker, Sir,

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 Traditional Health Practitioners Bill, 2014 for Consideration Pursuant to Standing Order 127 (4).

Signed.....



.....Date.....

21/04/2015

(HON. DR. RACHEAL NYAMAI, M.P.)

**CHAIRPERSON,
DEPARTMENTAL COMMITTEE ON HEALTH**

CONSIDERATION OF THE TRADITIONAL HEALTH PRACTITIONERS BILL, 2014

2.0 INTRODUCTION

The objective and purpose of the Bill is to provide for the training, registration and licensing of traditional health practitioners, to regulate their practice, through the establishment of the Traditional Health Practitioners Council of Kenya.

3.0 SITUATIONAL ANALYSIS

- 3.1 Traditional medicine (also known as indigenous or folk medicine) comprises knowledge systems that developed over generations within various societies before the era of modern medicine. The World Health Organization (WHO) defines traditional medicine as "the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness.
- 3.2 Traditional healers and medicines have been part of the Kenyan health system. Reports indicate that conventional system provides for only 30 percent of the population, implying that more than two thirds of Kenyans rely on traditional medicine for their primary health care needs. Their dependence is attributed to lack of access to modern medical services (drugs, health professionals) and general attachment of especially the rural population to traditional plants.
- 3.3 Traditional Medicine in Kenya however flourishes unrecognized and unregulated by the Government. The results being proliferation of herbal practitioners with no safety standards, no knowledge of their efficacy, and even negative consequences
- 3.4 Un-regulation of the industry is also likely to cause a threat to the Country's medicinal plant resource since its widespread use is also likely to increase pressure on medicinal resources owing to exploitation and loss of habitat, resulting from its commercial nature.
- 3.5 There is the risk of the intellectual property rights being eroded since traditional knowledge about diversity is inadequately protected.
- 3.6 There have been ongoing calls for the recognition and regulation of the traditional medicine although this remains insufficient and controversial at times.

- 3.7 The Medical Practitioners and Dentists Board established under Cap 253 of the laws of Kenya, the Nurses Act among other laws only provide for the regulation of certain categories of health practitioners and as such the traditional health practitioners are not included in any of the definition under these Acts. In 2003, a taskforce was constituted to draft the laws to regulate the practice with a view of incorporating the herbal practitioners in mainstream health care, but no consensus was built. Currently the Pharmacy Practitioners Board is involved in the registration of herbal and complementary products (medicinal products formulated in commercial manner- most of them imported from Asia, India, and China.)
- 3.8 In 2007 the Government developed a draft policy on Traditional Medicinal plants. In terms of protection of intellectual rights, the only instrument available for protecting traditional knowledge is the trade secret, the Industrial Property Act, Cap 509 of the Laws of Kenya.
- 3.9 Current registration of herbalists is done by the Ministry of Labour, Social Security and Services but real numbers of practicing herbalists is unknown since majority of them are not registered and fake ones exist.
- 3.10 It is also important to ventilate on the extent to which the Kenyan health system recognizes, accommodates traditional health healers in the broader primary health care system. (Clause 53) -Part X of the Draft Health Bill, 2014 recognizes Traditional and Alternative Medicine. The Bill provides for the formulation of policies to guide the practice while compelling the County Governments to implement them. It further provides for the establishment of a regulatory body to regulate the practice of African Traditional and Alternative Medicine.
- 3.11 Other functions that the regulatory body is expected to undertake in the proposed law include:
- a. Maintain a register at both the national and County levels;
 - b. In consultation with the National Government set minimum standards of practice for African Traditional and alternative Medicine;
 - c. Responsible for registration, licensing and standards compliance of the practice; and
 - d. Approve charges levied on the practice of traditional medicine.

3.12 Additionally, the proposed Bill provides that the National Government shall:

- a. Institute and County Government shall facilitate measures for documentation and mapping of traditional and alternative medicine practice;
- b. In consultation with the key stakeholders, develop policies for standardization of Traditional and Alternative medicine practice; and
- c. Develop policy guidelines for referral mechanisms and a system of referrals from practitioners of traditional and alternative medicine to conventional health facility.

3.13 It is important to therefore assess the extent with which Traditional and Alternative Medicine is likely to be effectively regulated (at national level) in a system where primary health care is devolved (at county level).

4.0 COMPARATIVE ANALYSIS WITH OTHER COUNTRIES

4.1 The World Health Organization (WHO) estimates that 80 percent of the world people especially in developing countries rely on traditional medicines for their primary health needs owing to its accessibility and cost or since it is culturally appropriate. With the upsurge in its use therefore, WHO has recommended its integration into primary health care.

4.2 Countries that have adopted this trend have developed a national policy for traditional or complementary medicine and as such practice it at all levels including public hospitals. Incorporating traditional health care practices into the formal health system is not a unique concept as it is happening in South Africa, China, Canada and Nigeria with some Asian countries incorporating herbal medical practice into their National Drug Policies.

- a. **India:** *(Is considered Proactive and Favorable)* - National policy, laws and regulations introduced in 1940; The Central Council of Indian Medicine Act (1970) governs Traditional Medicine Education and Practitioners in India. The Drugs and Cosmetics Act (1994) regulates the herbal medicine (licensing, inspection and testing); In India there are 4246 registered herbal medicines sold in a special outlets with a Department of Medicine and Homeopathy established under the Ministry of Health and Family Welfare in 1995.

India's National policy provides for the integration of Traditional Medicine practice in to the National health Care system.

- b. **South Africa:** Enacted the Traditional Health practitioners Act in 2007 by establishing a council to regulate the Traditional Health Practice as a profession.
- c. In China, the integration of traditional medicine into the national health care system and the integrated training of health practitioners are both officially promoted. Article 21 of the Constitution of the People's Republic of China promotes both conventional and traditional Chinese medicine. The Bureau of Traditional Medicine was set up as part of the Central Health Administration in 1984.

5.0 VIEWS FROM STAKEHOLDERS

5.1 VIEWS FROM THE MINISTRY OF HEALTH

The Ministry of Health, through its letter dated 16th June, 2014, Reference Number MOH/COMMS/14/1/4 VOL1 made the following comments, that:

- a) The development of the Bill had not been consultative and seriously conflicted with processes that had already been initiated by the Ministry of Health and other stakeholder ministries geared towards addressing the harnessing and regulation of traditional medicine practice and related products;
- b) The Ministry together with relevant stakeholders had developed a draft Health Bill, 2014 which seeks to promote both conventional and traditional/alternative medicine and practice. The Bill specifically and explicitly dedicates section 10 to issues concerning traditional/alternative medicine and its practice. The section proposes the creation of a regulatory board that will address the practice of traditional/alternative medicine. In addition, section 8 addresses the regulation of health products and health technologies which include herbal products;
- c) The Ministry of Sports, Culture and the Arts, working with all relevant stakeholders, had developed a draft Natural Products Industry (NPI) Policy, 2012 which seeks to create an enabling environment for harnessing the natural products sub sector in line with Article 11 of the Constitution of Kenya. This draft policy, which embraces indigenous knowledge and traditional/alternative medicine as a key component, aims at creating capacity for value addition to enable the traditional/alternative medicines meet the required product standards as set out in the draft Health Bill, 2014. The said policy is progressing to its final stages.

- d) The draft NPI policy and the proposed Health Bill, 2014 provide an overarching framework necessary for mainstreaming the natural product sub sector with traditional/alternative medicines being a key component. If allowed to proceed, the proposed Bill will negate the ongoing processes spearheaded by mother ministries mandated to oversee the development of traditional/alternative medicine and its practice in the country.
- e) The Ministry of Health recommends that the Traditional Health Practitioners Bill, 2014 be immediately withdrawn to allow for consultations to eliminate conflict and avoid jeopardizing the ongoing processes of reviewing and formulating appropriate health related laws and policies.

5.2 VIEWS FROM GILBERT GITHAIGA MAHINDA

Mr. Gilbert Githaiga Mahinda, a traditional health practitioner, made his submissions on proposals for amendment as captured in the table below:

Amendment	Rationale	Committee's Comments
That Traditional Medicine should be defined as 'Preparations made from herbs or their extracts'	Currently, the Act does not define Traditional medicine. To demystify definition of THP	Not agreed to
Add a section to provide that the herb to be used in the case of locally prepared traditional medicine should be approved by Kenya Medical Research Institute.	To ensure drug safety.	Agreed to
In the case of imported traditional medicine the medicine should be listed and subsequently registered by the Pharmacy and Poisons Board	To ensure drug safety.	Agreed to

Amend Bill to make provision to ensure that traditional medicine practitioner can prepare and use traditional medicine	Amendment made in the pharmacy and poisons list contained in cap 244 appears to have classified traditional herbal medicine as part 1 poison which means that non-medical herbal practitioners are practicing illegally as it is only registered medical practitioners who are authorized to prescribe part 1 poisons.	Agreed to
Amend Bill to provide for automatic registration of current herbal medicine practitioners.	When a Bill for regulating a profession is to be enacted for the first time it always confers recognition to those experienced and in practice of the profession.	Agreed to
The bill should have a section authorizing the traditional health practitioner to inform the public about his service and his products.	It is necessary for the public to know of the existence of a traditional health practitioner and his products	Not Agreed to

6.0 COMMITTEE OBSERVATIONS

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

Passing the Traditional Practitioners Bill will provide the much needed regulatory Authority to streamline the herbal practice and protect the citizens from uncompromised services. However, a lot more will be required if the operationalization of the Act (Once the bill is enacted) is to be realized. These include:

- a) The Enactment of the Health Act, 2014 which provides for the overarching framework for the recognition of the traditional and alternative medicine in the broader national health system.
- b) Mutual collaboration between National and County Governments (Departments of Health). Primary health care is overwhelmingly devolved

to the county level and as such the place of County Governments in the health referral system must be well thought out.

- c) Increased budget allocation towards traditional medicine.

7.0 COMMITTEE RECOMMENDATION

Having extensively considered the Bill, the Committee recommends that more time be allowed for the Committee to conduct public hearings locally and benchmark with best practices internationally from countries that have a similar legislation in place and are advanced in the practice of traditional medicine. This is in appreciation of the fact that very little contribution from the stakeholders was received by way of memoranda.

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MINUTES OF THE 12TH SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN SAROVA WHITESANDS BEACH RESORT AND SPA , ON FRIDAY 27TH 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 24th 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.

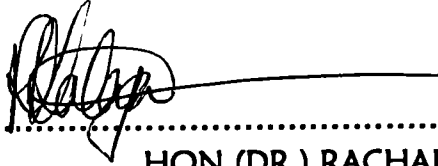
MIN.NO. DCH 57/2015: ANY OTHER BUSINESS

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:.....

26th March, 2015.

MINUTES OF THE 85TH SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN COMMITTEE ROOM ON 5TH FLOOR, CONTINENTAL HOUSE, PARLIAMENT BUILDINGS ON THURSDAY, 16TH OCTOBER, 2014, AT 10.00 AM.

PRESENT:

1. The Hon. Dr. Rachel Nyamai, MP (Chairperson)
2. The Hon. Raphael Otaalo, M.P.
3. The Hon. Christopher Nakuleu, M.P.
13. The Hon. Eng. Stephen Mule, M.P.
4. The Hon. David Karithi, M.P.
14. The Hon. Fred Outa, M.P.
5. The Hon. Dr. Dahir Mohamed, M.P.
15. The Hon. Hassan Osman, M.P.
6. The Hon. Dr. David Eseli, M.P.
16. The Hon. James Gakuya, M.P.
7. The Hon. Dr. James Gesami, M.P.
17. The Hon. John Nyagah Muchiri, M.P.
8. The Hon. Dr. James Murgor, M.P.
18. The Hon. Michael Onyura, M.P.
9. The Hon. Dr. James Nyikal, M.P.
19. The Hon. Mwahima Masoud, M.P.
10. The Hon. Dr. Patrick Musimba, M.P.
20. The Hon. Mwinga Gunga, M.P.
11. The Hon. Dr. Stephen Wachira, M.P.
21. The Hon. Paul Koinange, M.P.
12. The Hon. Dr. Susan Musyoka, M.P.

ABSENT WITH APOLOGY:

22. The Hon. Dr. Robert Pukose, M.P (V. Chairperson)
26. The Hon. Kamande Mwangi, M.P.
23. The Hon. Joseph Magwanga, M.P.
27. The Hon. Zipporah Jesang, M.P.
24. The Hon. Dr. Enoch Kibunguchy, M.P.
28. The Hon. Leonard Sang, M.P.
25. The Hon. Dr. Naomi Shaban, M.P.
29. The Hon. Alfred Agoi, M.P.

In Attendance

The Hon. Daniel Maanzo, M.P - Member, Makueni Constituency

National Assembly Secretariat

1. Susan Maritim - Clerk Assistant I
2. Hassan Arale - Clerk Assistant III
3. Peter Mwaura - Legal Counsel I
4. Mercy Wanyonyi - Legal Counsel II

MIN. NO. DCH 385/2014: PRELIMINARIES

The Chairperson called the meeting to order at order at 10:21am and the prayer said by Hon. Christopher Nakuleu.

MIN. NO. DCH 386/2014: CONFIRMATION OF MINUTES

Confirmation of Minutes was deferred to the next Sitting.

MIN. NO. DCH 387/2014: DELIBERATION ON EBOLA CRISIS

The Committee deliberated at length on the Ebola crisis and made the following observations:- THAT

- i. Kenya should lobby the World Health Organisation and the international community for a proposal to have JKIA designated Africa's Certified Quarantine Centre for Ebola. The direct benefit of doing so will boost Kenya's economy and also safeguard the country against Ebola threat by ensuring that Kenya remains Ebola-free because of the enhanced surveillance system;
- ii. The Committee observed that Kenya ought to take the Ebola threat more seriously and that the Committee should visit various border/entry points eg JKIA, Namanga, Busia, Malaba etc to inspect Kenya's preparedness in screening and tackling the diseases in any eventuality;
- iii. The Committee resolved to request for utilization of funds allocated to manage Ebola;
- iv. Hon. Daniel Maanzo informed the Committee that a Kenyan national from Makueni County working in Seychelles died while undergoing treatment in Seychelles and the authorities quickly poured acid on his corpse because of the fear that he may have died of Ebola. The deceased had just returned from a holiday in Kenya. Efforts to repatriate the body for burial in Kenya have not borne fruit because the Seychelles authorities have ruled it dangerous for transportation. Hon Maanzo and Hon Musimba asked for the Committee's support should their efforts to have the body transported to Kenya for burial fail to bear fruit. They were assured of the support.

Way Forward

1. The Committee resolved to write to the CS Health requesting for the information below:-
 - i. The Committee also resolved to request the Cabinet Secretary, Ministry of Health to submit to the Committee weekly review status of preparedness and challenges encountered in the fight against the Ebola threat in Kenya.
 - ii. Breakdown of utilization of funds allocated to ensure the country is safeguarded against Ebola;
2. On the issue of repatriating the body of the Kenyan patient stuck in Seychelles, the Committee advised the two Hon Members (Hon Maanzo and Hon Musimba) to liaise with the Ministry of Health and W.H.O. Country Office with the aim of establishing the actual cause of death to facilitate release of the body to the relatives.

**MIN. NO. DCH 388/2014: PETITION BY MR BARNABAS BARGORIA
ON IMPORTATION OF SUB-STANDARD
DRUGS**

The Legal Counsel informed the Committee that on scrutiny of documents submitted by the Pharmacy and Poisons Board and the Petitioner, it is evident that the subject matter of the Petition is indeed sub-judice. He further reported that the case was due for hearing on 23rd September 2014 and that he was awaiting the outcome of the proceedings for further scrutiny.

The Committee resolved to finalize its report on the matter for submission to the House.

**MIN. NO. DCH 389/2014: CONSIDERATION OF THE TRADITIONAL
HEALTH PRACTITIONERS BILL, 2014**

The Committee deferred consideration of the Bill to allow for further consultation with the relevant stakeholders (MOH and the traditional/herbal medicines practitioners).

Regarding the proposed amendments by the Ministry, the Committee noted that the Ministry did not involve the Committee during its meeting with stakeholders and further that the proposed amendments lack justification/rationale.

Way Forward

The Committee resolved to request the Ministry to sponsor a retreat that would bring together the Committee, the Ministry and select stakeholders.

The secretariat was also instructed to harmonize the Ministry's proposals and the published Bill.

MIN. NO. DCH 390/2014 ANY OTHER BUSINESS

1. Committee Study Visit to Cuba

The Committee resolved to conduct the study visit from committee members agreed that Cuba trip to be conducted from 22nd -30th November, 2014.

The proposed delegation is as follows:-

- i. Chair or Vice-Chair
- ii. Hon. Alfred Agoi, MP
- iii. Hon. Dr. Enoch Kibunguchy, MP
- iv. Hon. Dr. Naomi Shaban, MP
- v. Hon. James Gakuya, MP
- vi. Hon. Joseph Magwanga, MP
- vii. Hon. Masoud Mwachima, MP

It was further resolved that its important to include doctors in delegations to conferences for more effective participation.

2. Shortage of essential drugs in Kenya

The Committee discussed the shortage of TB drugs in the country and information that MoH recently borrowed the drugs from Uganda.

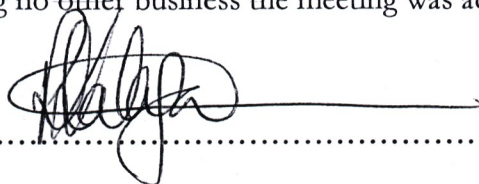
3. The delegation to the 45th Lung Conference will travel to Barcelona Spain on 25th October, 2014 as scheduled.
4. Hon. Dr. Susan Musyoka informed the Committee that the Kenya Women Medical Association had invited her to give a talk to health workers on Saturday, 25 October in Hotel Kempinski. She was asked to present the Committee's position on devolution of health services.
5. The Chair informed the Committee that she would be traveling with Hon. Hassan Osman to Project Cure headquarters, USA from 20 – 24 October, 2014.

MIN. NO. DCH 391/2014

ADJOURNMENT

There being no other business the meeting was adjourned at 12.25pm.——

SIGNED.....



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

CHAIRPERSON

DATE:.....

25th November, 2014

MINUTES OF THE 69TH SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN WHITESANDS RESORT, MOMBASA, ON FRIDAY 22ND AUGUST 2014 AT 10.00 AM.

PRESENT :

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

ABSENT WITH APOLOGY:

24. The Hon. Dr. Patrick Musimba, M.P
25. The Hon. Mwahima Masoud, M.P.
26. The Hon. Raphael Otaalo, M.P.
27. The Hon. Dr. Enoch Kibunguchy, M.P.
28. The Hon. Paul Koinange, M.P.
29. The Hon. Dr. James Nyikal, 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. Mr. Marale Sande - Senior Researcher
6. Mr. Peter Mwaura - Legal Counsel

MIN. NO DCH 312/2014:

PRELIMINARIES

The meeting was called to order at 10.20 am followed by a word of prayer.

MIN NO DCH 313/2014;

CONSIDERATION OF TRADITIONAL HEALTH PRACTITIONERS BILL, 2014

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

Committee Concerns

The Committee raised the following concerns:

1. That the definition of "traditional health practitioner" should be clearly defined.
2. That herbal medicine in the market has not been analyzed in terms of composition and concentration and also correct dosage has not yet been determined.
3. That the accreditation of traditional health practitioners including their qualifications should be clearly determined in the Bill.
4. That the Bill's title is changed from "Traditional Health Practitioner" to "Alternative Medicine".
5. Different communities have different practices of medicines. The Bill should clearly provide for regulation and standardization of the varying differences.

WAY FORWARD

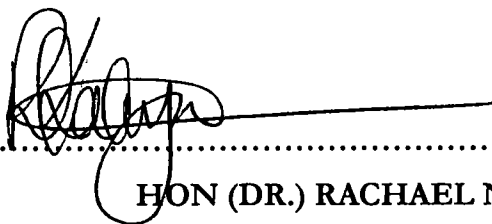
- i. The Committee to consult technical organizations such as the World Health Organization to provide their input concerning traditional medicine.
- ii. On Clause 6 (2)(a), the Committee tasked the Research Department to research and report to the Committee if there is a traditional medicine course offered in any Kenyan curriculum and which colleges offer any training in traditional medicine to guide the Committee on how to amend the clause.

MIN. NO. DCH 314/2014

ADJOURNMENT

There being no other business the meeting was adjourned at 1.00 pm.

SIGNED.....



HON (DR.) RACHAEL NYAMAI, M.P

CHAIRPERSON

DATE:.....

7th October, 2014.

MINUTES OF THE 66TH SITTING OF THE DEPARTMENTAL COMMITTEE ON HEALTH HELD IN THE NEW MEMBERS LOUNGE, MAIN PARLIAMENT BUILDINGS ON THURSDAY, 14TH AUGUST, 2014 AT 10.00 AM.

PRESENT

1. The Hon. Dr. Rachael Nyamai, MP -Chairperson
2. The Hon. Dr. Robert Pukose, M.P -V. Chairperson

3. The Hon. David Karithi, M.P
4. The Hon. Dr. Dahir D Mohamed, M.P
5. The Hon. Dr. James Murgor, M.P
6. The Hon. Dr. James Gesami, M.P
7. The Hon. Dr. Stephen Wachira, M.P
8. The Hon. John Nyaga Muchiri, M.P
9. The Hon Joseph Magwanga, M.P
10. The Hon Mwinga Gunga, M.P.
11. The Hon. Dr. David Eseli, M.P
12. The Hon Zipporah Jesang, M.P.
13. The Hon. Dr. James Nyikal, M.P

14. The Hon. James Gakuya, M.P.
15. The Hon. Leonard Sang, M.P
16. The Hon. Michael Onyura, M.P
17. The Hon Hassan Osman, M.P
18. The Hon Eng. Stephen Mule, M.P
19. The Hon Dr. Susan Musyoka, M.P.
20. The Hon. Kamande Mwangi, M.P.
21. The Hon .Mwahima Masoud, M.P.
22. The Hon. Dr. Enoch Kibunguchy, M.P.
23. The Hon. Fred Outa, M.P.
24. The Hon. Raphael Otaalo, M.P

ABSENT WITH APOLOGY:

25. The Hon Alfred Agoi, M.P.
26. The Hon. Christopher Nakuleu, MP
27. The Hon. Dr. Patrick Musimba, M.P

28. The Hon. Paul Koinange, M.P
29. The Hon. Dr. Naomi Shaban, M.P

National Assembly Secretariat

1. Susan Maritim - First Clerk Assistant
2. Nebert Ikai - Third Clerk Assistant
3. Hassan Arale - Third Clerk Assistant
4. Peter Mwaura - Legal counsel
5. Marale Sande - Senior Researcher

MIN. NO DCH 299/2014:

PRELIMINARIES

The meeting was called to order at 10.20 am followed by a word of prayer from the Hon. Dr. Stephen Wachira, M.P.

MIN NO DCH 300/2014

CONFIRMATION OF THE PREVIOUS MINUTES

Confirmation of previous minutes 62nd, 63rd, 64th and 65thsitting were deferred to the next sitting.

MIN NO DCH 301/2014

**MEETING WITH CABINET SECRETARY,
MINISTRY OF HEALTH TO DISCUSS
LEASING OF MEDICAL EQUIPMENT**

The secretariat informed the Committee that the meeting with the CS was scheduled for Tuesday, 20th August, 2014. Reasons given for the rescheduling was the lateness in sending of the notice to the Ministry.

The Committee was assured that the meeting would take place as scheduled on Tuesday, 20th August, 2014.

A sub- committee on leasing of equipment was scheduled to meet today at 4.00pm with the officers from the Budget Office ahead of Tuesday 19th 2014 meeting with the Cabinet Secretary.

MIN NO DCH 301/2014

**CONSIDERATION OF THE TRADITIONAL
HEALTH PRACTITIONERS BILL, 2014.**

The Committee deferred consideration of the Traditional Health Practitioners Bill, 2014 citing the following concerns:

1. Lack of requisite consultations prior to publication of the Bill: The Committee members observed that they were not consulted in the decision to have the Bill sponsored by the Committee.
2. The Committee also observed that the Ministry of Health had written to the Committee requesting the Committee to withdraw the Bill to allow for further consultations and completion of the proposed Health Bill 2014.
3. Some Committee members are uncomfortable with the title and reference to the term "Traditional Health".
4. The Committee further noted with concern that the Ministry of Health has taken too long to publish the Health Bill.

Way forward

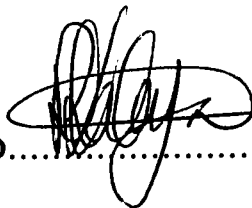
1. The Legal Council was tasked to do a comparative analysis of the draft THP Bill by the Ministry, the published Bill and the proposed Health Bill and advise the Committee accordingly. The analysis should also include comparison with countries eg India & South Africa that have similar legislations.
2. There is need for a one-day stakeholders meeting on the THP Bill.
3. The Committee will consider the Bill during the retreat in Mombasa scheduled for 21-21 August, 2014.

1. The Committee expressed its displeasure with meetings in the Members Lounge. The secretariat was directed to ensure that the Committee gets a better venue for its meetings.
2. Some Committee Members expressed concern over discrepancy between the Printed Estimates for 2013/14 and the Estimates as approved by the House. The Secretariat was tasked to compare the two documents and report back to the Committee.
3. The Committee was informed about breakfast meeting to be hosted by the Tobacco Control Board to brief the Committee on the final Tobacco Regulations before tabling in the House. The breakfast meeting will be held on Thursday, 21st August, 2014 at 7am at Laico Regency Hotel.

MIN. NO. DCH 303/2014

ADJOURNMENT

There being no other business the meeting was adjourned at 12pm until Tuesday, 19th August, 2014 at 10am.



SIGNED.....

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

DATE:..... 4th September, 2014.....

