



PARLIAMENT OF UGANDA

PARLIAMENTARY DEBATES

(HANSARD)

OFFICIAL REPORT

SECOND SESSION - FIRST MEETING

WEDNESDAY, 28 SEPTEMBER 2022



IN THE PARLIAMENT OF UGANDA

Official Report of the Proceedings of Parliament

SECOND SESSION - 35TH SITTING - FIRST MEETING

Wednesday, 28 September 2022

Parliament met at 2.22 p.m. in Parliament House, Kampala.

PRAYERS

(The Deputy Speaker, Mr Thomas Tayebwa, in the Chair.)

The House was called to order.

COMMUNICATION FROM THE CHAIR

THE DEPUTY SPEAKER: Thank you, honourable colleagues. Welcome to today's sitting, where we have a very tight Order Paper. I want us to focus and ensure that we finish it.

However, I will be allowing matters of national importance after I have finished the Bills because I have noted most of you come, raise matters of national importance, get media attention and run away. *(Laughter)* I will allow matters of national importance after I have finished critical business of this House. With that, I want, straightaway, to go to the Order Paper.

Yes, the Leader of the Opposition – *(Hon. Macho rose)* No, Hon. Macho, I am only allowing the LOP. I will only go to your issues – whether procedure or what – later, because there are shortcuts. I will handle matters of national importance after we have finished Bills. Your major work is to process Bills. You usually bring matters of national importance, move out with the media and leave us here. Let us do business.

2.25

THE LEADER OF THE OPPOSITION (Mr Mathias Mpuuga): Thank you, Mr Speaker, for the special dispensation accorded to me; not in any way intended to impeach your guidance to Members but because I sought your indulgence to raise, once again, a red flag to the House and to the country on a very critical matter that I thought should not go without being on record in a few minutes.

Mr Speaker, for the bulk of the First Session and Second Session of the 11th Parliament, the most critical matter from our side - not that others are any less important - has been human rights abuses, in particular, enforced disappearances and torture.

As we speak now, despite the commitment from Government; namely, that the abductions and enforced disappearances are under control, the devil is back. We have reports from families of a number of people abducted either from places of work or waylaid by people in uniform and non-uniformed in the infamous “drones.”

Around May this year, this House instructed the ministers of Security and Internal Affairs to account for the citizens whose names I tabled here as “disappeared”. I did not only table their names but included contacts of their families for Government to follow up and account.

To-date, no accountability has ever been given but instead, more people are being abducted and kept incommunicado. Those who have resurfaced - in one way or another – resurface

tortured and bruised. Others are dumped at police stations. It is a big problem.

I would like to tell our friends at the frontbench that the record of this country is that while you are in Government, citizens were being abducted, and you were the ministers. That while you were Prime Minister, you instructed “drones” to go and abduct people and they disappeared; it will go on your record.

Mr Speaker, this House pronounced itself. The orders given then were never followed. The Minister of Security did not report back. The minister of Internal Affairs is home comfortable and there is no record of reporting.

And we made a very simple request: If they are dead, they should declare them dead and avail bodies for decent burial by their families. (*Hon. Macho rose*)

THE DEPUTY SPEAKER: Colleagues, I do not want to open this up. Leader of the Opposition, please, conclude.

MR MPUUGA: Yes, Mr Speaker. Early this week, the President of the Republic of Uganda was Chief Guest at the commemoration of the disappearance and eventual murder of the first Chief Justice of Uganda, Benedicto Kiwanuka. He was very serious about murders and disappearances. I am wondering whether he is aware or has since lost control; and that some other people are in charge, and he is not the same President who condemned the killers of Kiwanuka. They are the same killers or their off-springs killing and abducting citizens now, under his watch.

Mr Speaker, as I take leave, I am resubmitting the names, for the attention of this House, of those citizens I tabled as “disappeared” and have never been seen again. In fact, for some of them, the security minister conceded that actually, they have them but we have never seen them. So, is it safe to say that the internal affairs minister and by extension, the State is aware of these disappearances and they are not about to account?

The decent thing to do is for them to go and inform their families, now that they have the contacts, that these people are dead or probably their bodies were eaten. Short of that, they should present them for decent burial, Mr Speaker.

I would like to, once again, resubmit these names for the attention of the House and for the attention of all and sundry, although we will re-follow this House of Parliament and the country in the future that this happened and nothing was done. Thank you. (*Applause*)

THE DEPUTY SPEAKER: Thank you, Leader of the Opposition. Colleagues, we extensively discussed this matter. This was around a month ago - because we handled two critical reports; the report on human rights, which the committee presented and it was very detailed. We also had a report on the state of prisons, which touched on some of these issues.

There was a commitment here that, indeed, some of these issues were glaring and were making us look ugly. This report was signed by Members from both sides. We never even had a minority report on this issue. So, we gave – (*Hon. Macho rose*)

When the Speaker is speaking, you do not stand up. As per Rule 220 of the Rules of Procedure, we gave the minister three months to come back and submit an action-taken report on the recommendations of the House on both reports. However, these new – You know, what I have seen in the *Daily Monitor* - Government, what is going on? The Leader of the Opposition has raised issues I cannot answer for you.

2.32

THE THIRD DEPUTY PRIME MINISTER AND MINISTER WITHOUT PORTFOLIO (Ms Rukia Nakadama): Mr Speaker, of course, it is absurd. We have seen what has been put before Parliament by the Leader of the Opposition and it is not good. I request that we give the security minister time to come and make a statement because the Leader of the Opposition was giving a statement – (*Mr Amos Okot rose*)

THE DEPUTY SPEAKER: Which order can you raise on someone saying, “I give a statement?” Please, go on, Rt Hon. Prime Minister.

MS NAKADAMA: - a comprehensive statement on this since there are new abductions that we have seen in the newspapers. I so request.

THE DEPUTY SPEAKER: Thank you. Colleagues, I know those are issues for which we shall quarrel and become – no, it is important. That is why the Leader of the Opposition has raised it - colleagues, your leader has spoken. If you had this issue, you would have taken it to him. He is your leader; please, respect him.

I know how we conduct business in this House. There is nothing we can resolve from here on this matter. What we shall do is to appear in the press saying, “We raised it.” In the end, we may even never help the victims, the way the Leader of the Opposition has done it. He has structured his presentation very well.

Please, Rt Hon. Prime Minister, tomorrow is Thursday. On Friday, let us have a meeting comprising of the Prime Minister, Leader of the Opposition, shadow minister for security, Government Chief Whip, the Chief Opposition Whip, Minister of Internal Affairs and the Minister of Security so that we first tackle these issues. What you are doing is trying to challenge my ruling and hope you know the procedure.

Colleagues, you cannot pretend to know this issue better than the Leader of the Opposition. I have been in office – Minister for Justice and Constitutional Affairs, let him come - but none of you brought this issue to my office. You have been bringing up other issues but now that the Leader of the Opposition has raised this, you want to jump on it as if you know it better. I will not allow that.

MOTION FOR A RESOLUTION OF
PARLIAMENT TO COMMEMORATE ONE
HUNDRED YEARS OF THE EXISTENCE
OF MAKERERE UNIVERSITY

THE DEPUTY SPEAKER: Colleagues, let us listen to the professor. While some of you go around quoting others, he quotes his own books, so you had better respect him. *(Laughter)*

2.37

PROF. ELIJAH MUSHEMEZA (Independent, Sheema County South, Sheema): Mr Speaker, I move under Rule 56 of the Rules of Procedure. This is a motion for a Resolution of Parliament to Commemorate 100 years of the Existence of Makerere University. *(Applause)*

“WHEREAS Makerere University was established on 01 August 1922 as the Uganda Technical College and offered courses in Carpentry, Building Construction, Mechanics, Arts, Education, Agriculture and Medicine;

AND WHEREAS in 1923, Uganda Technical College was renamed Makerere College and began offering various programmes in Medical Care, Agriculture, Veterinary Sciences and Teacher Training and by 1935, the College had been expanded to become a Centre for Higher Education in East Africa;

AWARE THAT in 1937, Makerere College began offering post-secondary education certificate courses and later became affiliated to the University College of London, allowing it to offer programmes leading to the award of degrees of the University College of London;

RECALLING THAT in 1949, the British Protectorate Government granted Makerere College a university status and later, in 1963, the College was renamed Makerere College University of East Africa, following the establishment of the East African Community;

NOTING THAT on 01 July 1970, Makerere College University of East Africa became a national university under the name, Makerere University, offering undergraduate and

postgraduate programmes leading to the award of degrees on its own accord;

RECOGNISING THAT Makerere University has over the years developed into a collegiate-based university with 10 constituent colleges, all operating as semi-autonomous units of the University and an ever increasing student population, which currently stands at about 35,000 undergraduates and 3,000 postgraduates, both Ugandan and foreigners, with over 300,000 alumni spread across the world;

APPRECIATING THAT Makerere University has actively participated in the political transformation of Uganda and other African countries through imparting students with knowledge, which encouraged self-awareness and self-determination and the rise of nationalism, which students, upon graduating, provided national leadership during the pre and post-colonial political struggles of Uganda and other African nations;

FURTHER APPRECIATING THAT Makerere University has also been instrumental in the social and economic transformation of Uganda through innovating and creating programmes, which have increased the employability of Ugandan citizens and provided the necessary workforce for a developing Uganda and has conducted research, which focuses on urgent and contemporary problems faced by the country;

COGNISANT THAT Makerere University has been continuously recognised among the best universities in the world and is currently ranked by the US News & World Report, 2022, as the 15th best University in Africa, the 712th best university worldwide, the third best university in Sub-Saharan Africa outside South Africa and the best University in East Africa;

FURTHER COGNISANT THAT this year, 2022, marks 100 years of the existence of Makerere University, making it Uganda's largest and oldest institution of higher learning;

NOW, THEREFORE, be it resolved that Parliament –

1. *Collectively honours Makerere University for its contribution to the social-economic development and transformation of Uganda;*
2. *Collectively appreciates the various Chancellors, Vice-Chancellors, heads of Colleges and other employees of Makerere University for their excellent stewardship, service and immense contribution to the development of Makerere University;*
3. *Collectively appreciates all persons of goodwill, who have over the years, donated financial and other resources to Makerere University for their contribution to the development of Makerere University;*
4. *Congratulate the students' body of Makerere University and Makerere University alumni on this auspicious occasion." I beg to move.*

THE DEPUTY SPEAKER: Thank you. Is the motion seconded? (*Members rose*) It is seconded by Hon. Bahati, Hon. Afidra, Member for Arua and many other Members.

Hon. Mushemeza, before you speak to your motion, in the VIP Gallery this afternoon, we have a delegation from Makerere University comprising members of the University Council and top management. They include the following:

1. Ms Lorna Magara- Chairperson of Council; Women are at the helm again (*Applause*)
2. Rt Hon. Dan Kidega - Vice Chairperson of Council;
3. Prof. Barnabas Nawangwe – Vice-Chancellor;
4. Prof. Umar Kakumba - Deputy Vice-Chancellor, Academic Affairs;
5. Prof. Henry Alinaitwe - Ag. Deputy Vice Chancellor, Finance
6. Dr Eng. Charles Wana-Etyem - Former Chairperson of Council;
7. Hon. Prof. Tickodri-Togboa - CEO Kira Motors and Former Deputy Vice-Chancellor, Makerere University;
8. Prof. Helen Nkabala - Chairperson

- Students' Affairs;
9. Mr Innocent Kihika - Chairperson Appointments Board;
 10. Dr Fredrick Kitoogo - Chairperson ICT Committee;
 11. Mrs Jolly Uzamukunda - Chairperson, Staff Development;
 12. Eng. Kagoda - Former Permanent Secretary of the Ministry of Internal Affairs and Chairperson Estates and Works Committee;
 13. Mr Yusuf Kiranda - Former Guild President Makerere University and University Secretary;
 14. Dr Tanga Odoi - Chairperson Makerere University Convocation;
 15. Prof. Muhwezi - Deputy Principal, Makerere University Business School (MUBS);
 16. Prof. Winston Ireeta - Chairperson Committee on Legal and Rules;
 17. Mr Chris Ninsiima - the representative of National Union of Disabled Persons of Uganda (NUDIPU) on Makerere University Council;

There are several members of staff of Makerere University who have accompanied the team. Please, join me in welcoming them. Thank you.

Colleagues, also in the Public Gallery this afternoon, we have members of Obongi Students' Association. They are here to observe the proceedings of the House. They are represented by Hon. Bhoka George Didi and Hon. Maneno Zumura. *(Applause)* Join me in welcoming them. Thank you.

Honourable member, would you like to speak to your motion? You have three minutes. Is that a procedural matter?

MR ACON: Thank you, Mr Speaker. The procedural matter I would like to raise is that we are aware that some of our colleagues went to Makerere University. Therefore, would it be procedurally right that we also recognise them so that if there is a trophy, in form of a gold medal, we also give them. *(Laughter)* Otherwise, we would like to see them.

THE DEPUTY SPEAKER: Can I request all Members of Parliament that have gone through Makerere University to stand up for recognition? *(Several Members rose)* Thank you. Hon. Acon, that was a good one.

Prof. Mushemeza, please, speak to your motion. Before that, can I request Members of Parliament who have been guild presidents at Makerere University to stand up for recognition; Hon. Kibalya, Hon. Adeke and Hon. Basalirwa. *(Applause)*

Can I also request Members of Parliament, who have been lecturers and staff of Makerere to stand up, led by my senior lecturer, Dr Nsibambi, Prof. Mushemeza, Maj. Gen. Masiko and Dr Florence Akiiki? *(Applause)* I have seen some people appointing themselves as lectures from nowhere. *(Laughter)* Colleagues, that is when you know the value of lecturing at Makerere. I have seen Hon. Kayemba leading the team of lecturers.

Prof. Mushemeza, speak to your motion.

MR KIBLAYA: Mr Speaker, since we are celebrating 100 years and 95 per cent of the Members of Parliament here went through Makerere University, wouldn't it be procedurally right to just sing one stanza of the anthem of Makerere University so that we recognise and-

THE DEPUTY SPEAKER: Honourable member, I will allow you to do that in the corridor after the session - *(Laughter)* - Or you can cross to the canteen, do it and then come back here. *(Laughter)* Prof. Mushemeza, speak to your motion.

PROF. MUSHEMEZA: Mr Speaker, Makerere University is celebrating 100 years but what are we celebrating? In which context did Makerere University emerge? And what should we be looking forward to in the next decades?

Worldwide, institutions of higher learning trace their roots as early as the third century AD, with some of the features of the time, surviving up to the present day.

Until recently, Eurocentric History professors thought that it was the Europeans who brought higher education to the African continent. While the Europeans have, indeed, influenced African education for quite some time, there is vital information that most history books leave out. For centuries, before the arrival of Europeans, the vast and advanced native African civilisations already had sophisticated universities and other institutions of higher learning to boast about.

Mr Speaker, indeed, Africa has had institutions of higher learning for centuries, including those of indigenous, Islamic and later, Western origins. The earliest recorded universities appear in the northern part of the continent, most notably in Egypt and Morocco. The University of Al-Karaouine was established in Fez-Morocco in AD 859, and considered one of the oldest continuously operating universities in the world. It played a leading role in relations between the Islamic world and Europe in the middle ages.

Mr Speaker, when the colonial era set in, more universities were established on the African continent, although these were not independent. They were semi-autonomous affiliated to other universities found in the mother countries of the colonial masters. It was through linkages with universities in Europe that issues of quality assurance, quality staff development and funding were boosted.

Mr Speaker, in the period that followed independence, that is 1960s and 1970s, higher education was limited with one university per country in most cases. Although the quality of graduates and research output was high, higher education was, indeed, a privilege of the few.

The situation, however, changed in the 1980s and 1990s. African states realised the need to have an educated mass in various fields – Engineering, Medicine, Agriculture, Economics, Public Administration and Management, Development Studies – for a multi-disciplinary approach to support economic growth and development. This was a time of increased population growth.

More secondary schools were built and they produced large numbers that yearned for university education. As a result, governments established more public universities, institutes and colleges in their respective societies, but with the majority of institutions located in cities and urban centres. Mr Speaker, this is the context that produced Makerere University.

Although, in broader terms, globalisation has created new challenges to the university and the delivery of higher education in general, Makerere University has stood the test of time. World over, universities agree that the core function centres around four areas; teaching, research, publishing and outreach. This is possible when universities recruit, train and retain quality academic staff. Makerere University has been able to recruit, train and retain quality staff, although with some challenges.

This is observed in terms of the ability of staff in designing relevant programmes and courses, teaching, examination and supervision of students' research. There is evidence of published books and articles in recognised academic journals, monographs, working papers and policy papers. This is important for dissemination to the wider society for utilisation.

Mr Speaker, the other important core function of a university, where Makerere University has excelled, is the academic staff contribution in community outreach. Modern universities are supposed to be leaders in the social and economic development of their communities and nations; and this raises the question of the relevance of their programmes and research. The academic staff at Makerere University has been able to design programmes and projects that focus on the community needs and aspirations, the market and general society.

Mr Speaker, Makerere University is known for academic productivity and initiating processes towards the development of a strong university in Africa. We all know that the African university has been undergoing rapid changes, some being negative. However, we

see Makerere University making strides to study the challenges and prepare appropriate responses in time for both the present and the future. We also see admission of quality students and academic staff and providing an enabling environment for academic productivity.

Mr Speaker, we should celebrate the leadership of Makerere University over the decades. One scholar, Hsiu-Hsia, observes, and correctly so, that the intellectual depth, elegance, vision and most of all courage of the president – in our case, the Vice-Chancellor – are direct reflections of the heart, soul and quality of the university. He further observes that the quality of any university's leadership reflects that of the university. If one excels, so would the other; if one falters, so will the other.

A Vice-Chancellor, for instance, or any other senior administrator in higher institutions of learning, must be aware and cognisant of the optimisation principle articulated in the field of economics. Such an administrator needs to be aware of the dichotomy that often arises between the interests of the proprietors or the institution (such as its survival, growth and development) on one hand and the interests, needs and demands of staff and students on the other. He or she needs to be constantly aware of the possible implications and consequences of his or her decisions and actions as some of these will be positive and others negative. Makerere University leaders, over the years, have been good optimisers.

Mr Speaker, I am aware that at the centre of the institutional planning for the future, the leadership is shaping Makerere to be a research-led university by 2030. This is possible with a focus on reinforcement of an enabling environment that fosters innovative teaching and learning that responds to the changing national needs and environment. I am also aware that Makerere University has a vision with a package that entails establishing a fully-fledged science and technology centre; increased number of research publications; research output translated into commercial products; enhancing partnerships with industry, community and national institutions; engender

an engaged, motivated and highly productive workforce.

We should, however, be cognisant of the challenges that face universities in the 21st century and the strategic interventions necessary to build a strong and well-functioning university in Africa.

Mr Speaker, one of the outstanding challenges is the factor of funding higher education. There is a debate on whether the State should meet the bulk of financing higher education in Africa. There is also the view of encouraging Private-Public Partnerships in financing higher education.

While supporting Private-Public Partnerships, Prof. Mamdani warns us of the danger or tendency to change the academic curriculum in response to market demands, uncritically and across the board, thus failing to distinguish between privatisation and commercialisation. He argues, and correctly so, that commercialisation of higher education undermines the efforts of building a research university, the only entity that can provide the institutional framework for sustaining intellectual thought.

The issue of funding and, particularly the welfare of staff at various universities in Africa, has been at the centre of a series of strikes since 1990s. Inadequate remuneration in form of salaries has resulted into several unfortunate consequences, particularly;

- a) Low morale and self-esteem;
- b) Resignation to join better-paying institutions after being sponsored for advanced degrees;
- c) Low productivity and poor outputs, especially in research and innovations;
- d) Limited time allocation to research and publication, resulting into stagnation of staff in posts; and
- e) Inability to pay household utility, food, school fees and health care bills regularly.

Mr Speaker, as we celebrate the achievements of Makerere University in academic growth,

infrastructural developments, organisation of public lecture series named after significant members of society, who made considerable contributions to the university, let me point out two strategic interventions that Makerere University needs to ponder over.

Over the years, I have observed, at Makerere University, the issue of high enrolment of students with few academic staff in some departments. As a result, most academic staff are engaged in teaching undergraduates with little time to engage in research and professional development. There is evidence that universities in Africa contribute less than one per cent in international referred journals.

The contribution of African universities to world's scientific publications is only 1.4 per cent, with more than half of these coming from Egypt and South Africa. Yet, for a university to be relevant, its academic intellectuals must engage in quality teaching and research that reflect the scientific and technological needs of the society.

THE DEPUTY SPEAKER: Honourable member, please, conclude.

MR MUSHEMEZA: It is prudent for universities to insist on optimum level of student intake under current circumstances and to address workload problems and release some energy to both basic and applied research.

Universities should provide support for mentoring programmes, institute starter grants and innovation grants for junior scholars, et cetera.

Lastly, the second strategic intervention, which I propose Makerere University to consider is the triangular partnership. This is the role of Government, the private sector and international partners. In a globalised world, the private sector and international development partners like the African Development Bank, Infectious Diseases Research Collaboration and Sida-SAREC, are increasingly becoming important in financing and supporting higher education programmes.

Although African governments are urged to increase financial support to universities, it is those institutions with private-sourced components that are likely to achieve the dream of a strong and well-functioning university and be among the top ones in the continent.

In conclusion, in this regard, international and private sector efforts at strengthening material resources and institutional capacity, ICT skills, training and research capacities in leadership and governance in African countries, should be mobilised.

Networking among African universities, including mobilisation of African scholars in the diaspora, to support the rebuilding of the African university is urgent. Such support would be but not limited to areas of programme and course designing, quality assurance and quality enhancement, publications, sandwich doctoral training, website designing and development, library acquisitions, information sharing on scholarships and research.

Mr Speaker, with these few intellectual doses – (*Laughter*)- I beg the House to wholeheartedly support this motion. Thank you. (*Applause*)

THE DEPUTY SPEAKER: Thank you. Colleagues, let us appreciate the professor for the intellectual dose. (*Laughter*)

Hon. Florence Akiiki - Now, because Hon. Mushemeza has really broadly spoken, I will allow the seconders only three minutes each.

3.04

DR FLORENCE ASIIMWE (NRM, Woman Representative, Masindi): Thank you, Mr Speaker. I rise to support the motion for the resolution of Parliament to commemorate 100 years of the existence of Makerere University.

The role of Parliament in the Makerere University journey

Through the transition of Makerere University, Parliament has been part and parcel of its journey, especially in the formulation of policies and laws. For example, Parliament

passed the Universities and Other Tertiary Institutions Act, 2001; The Higher Education Students Financing Act, 2015 and; the National Curriculum Development Centre Act, 1973.

We also have laws that govern gender relations. There is Gender in Education Policy, the Education Sector HIV/AIDS Workplace Policy, and in all these, Parliament has been part and parcel of Makerere University.

Achievements

Mr Speaker, Makerere University has made strides. Makerere University has registered the following achievements especially in human resource development:

The university boasts of prominent alumni that include former heads of Government, former Speakers of this Parliament and current, including our Deputy Speaker and heads of international agencies - *(Applause)*

THE DEPUTY SPEAKER: And the Speaker. *(Applause)*

DR FLORENCE ASIIMWE: And the Speaker, Cabinet ministers in various governments, Justices of national, regional and international courts of judicature, including those at The Hague, over 90 per cent of Uganda's current Members of Parliament have gone through the gates of Makerere University –*(Member timed out.)*

THE DEPUTY SPEAKER: Honourable member, switch on the microphone and conclude.

DR FLORENCE ASIIMWE: Corporate executives, high-calibre professionals and experts in health, science and technology; the legal fraternity; prominent writers and poets; vice-chancellors and professors in universities across the world as well as key leaders with several portfolios in the public and private sector.

Mr Speaker, Makerere University is recognised for the various teaching programmes – I will not go into details about that. Makerere University

has also made tremendous contribution to the body of knowledge through research and whose research findings have led to various innovations. Areas of research include areas of infectious diseases, maternal health, crop improvement, climate change, energy conservation, transport technology and others.

The university has also been able to attract highly trained teaching personnel with 90 per cent of the academic staff having PhDs.

THE DEPUTY SPEAKER: Conclude, honourable colleague. We need time for Members to contribute to the debate.

DR FLORENCE ASIIMWE: Mr Speaker, as I conclude, with the above tremendous achievements of Makerere University, I second the motion for a resolution of Parliament to commemorate 100 years of existence of Makerere University. Parliament joins Makerere University in the celebrations to mark a century of excellent service under the theme: "Leverage the 100 Years of Excellence in Building a Transformed Society." I, therefore, ask Parliament to support the motion. I submit. *(Applause)*

THE DEPUTY SPEAKER: Thank you. We will have Hon. Basalirwa, former Guild President of Makerere University. Dr Florence Akiiki, you should have told us your role at Makerere University; let it go on record.

DR FLORENCE ASIIMWE: Thank you, Mr Speaker. I was a student at Makerere University from 1982 to 1985. After that, I was taken on as a Teaching Assistant in the Department of Sociology, Makerere University, and I have been a lecturer there since 1993 until 2015 when I applied for early retirement. I then acquired my PhD in Sociology at the University of Cape Town. *(Applause)*

THE DEPUTY SPEAKER: You can see that she is important, colleagues.

3.11

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): Thank you, Mr Speaker. I also rise to second the motion to commemorate 100 years of Makerere University.

Unlike Dr Florence Asiimwe, I joined Makerere University in 1998 and I left in 2002. I went back for my Masters degree in Law; I was a resident of Lumumba Hall. On 17 April 2000, I was elected Guild President. My two wives are also alumni of Makerere University. For us, Mr Speaker, the family is Makerere.

THE DEPUTY SPEAKER: I think that is equivalent to a PhD. *(Laughter)*

MR BASALIRWA: Mr Speaker, after the doctors had spoken, I was wondering what I could say to match them. Then I remembered we are three from Makerere University, my two wives and I.

As we commemorate 100 years of Makerere University – Prof. Nawangwe, Prof. Kakumba, Prof. Togbowa, Hon. Dan Kidega - what do they expect from us as Parliament? The institution, as it stands, Mr Speaker, needs support, because Makerere University is bleeding. When you go to Makerere University now, the way I go to Mecca every year - I visit Makerere University every year.

Look at my former hall, the great Lumumba empire, it is now a shell. As we commemorate 100 years of Makerere University, this Parliament should consider, when it comes to a discussion of the budget, to commit resources to help that institution.

The structure of education in this country is such that when things go wrong at Makerere University, higher education is affected. All the lecturers, doctors and professors in other universities, were all educated at Makerere University. We must understand that Makerere University sets the standards and others follow. If things go wrong at Makerere, we are in trouble.

I want to propose, Mr Speaker, that as I second this motion, as a takeaway for that delegation in the Gallery, we should consider committing enough resources to help that institution.

As I conclude, Makerere University also needs freedom. I recall during our time, I used to invite MPs to come and speak to students. The late Hon. Ekulo Epak, the late Rt Hon. Jacob Oulanyah, the late Hon. Aggrey Awori, Hon. Cecilia Ogwal, the Hon. Nobert Mao and others. I would invite them almost every week for debates and discussions.

Prof. Mushemeza knows that when I was Guild President, I used to give him a platform almost every week. He would debate with Prof. Afuna Adula, Prof. Akiiki Mujaju, the late Adonia Tiberondwa and others. That is no longer happening in the university, Mr Speaker.

If we are building for the future, we should build an institution that promotes intellectual freedom and intellectual thought. Those days, when we were Guild presidents, we used to set the national agenda. I remember almost every week, I would make headlines. Now, guild presidents cannot talk; the lecturers need freedom.

Mr Speaker, where is MUASA? Prof. Mushemeza knows very well that the MUASA of then and the current MUASA are completely different. Our guild and the current guild are completely different. Therefore, as we commemorate 100 years, Makerere University needs intellectual freedom for both the lecturers and the students. I beg to submit, Mr Speaker.

THE DEPUTY SPEAKER: Thank you, Hon. Basalirwa. I think Hon. Basalirwa has gone back to a state of nostalgia, when he used to address people in Makerere. That is the Basalirwa I know. I was happy with the time of Basalirwa as Guild President because during that time we used not to have people dying during guild campaigns. The moment students start killing each other, then they also find that they are limiting themselves.

If you are a manager of a university, you have to take action. These are things you must do. They might not be popular but you have to take decisions as a leader.

Hon. Florence Akiki, someone complained that you forgot to mention party presidents as former students of Makerere University. Someone whispered to me and I said I will put it on record to make people satisfied. The Attorney-General needs to guide us.

3.17

THE ATTORNEY-GENERAL (Mr Kiryowa Kiwanuka): Thank you, Mr Speaker. I am a proud student of Makerere University, 1993 to 1996, where I was privileged to study Law as a first degree. I was a resident of Nkrumah Hall, unlike my learned friend who was in Lumumba. I was privileged to serve later on as a member of the University Council of Makerere University, and I speak from great experience both as a student and as a leader in Makerere.

Mr Speaker, you have said it, there is always going to be a balance. It is very easy when you are on the student side to look at the leadership side and say, “you are wrong.” Like you have said, we need to balance this.

Makerere University is transitioning into a research-led university. We will need to support Makerere in every way possible to achieve that dream of finding a home-bred solution to our problems.

Makerere must start doing research to find solutions, which are made for us and by us. In order to achieve this, it will be very important for us, Mr Speaker and Members of Parliament, to review the University and other Tertiary Institutions legislation. When it comes here, I pray that you will support its growth.

Makerere was the first university in Uganda. Like any firstborn, Makerere has made us proud. We are proud of you and, indeed, we continue to build for the future. I support the motion.

THE DEPUTY SPEAKER: Thank you.

3.19

MR JOHN MUSILA (Independent, Bubulo East County, Namisindwa): Mr Speaker. I thank you for the privilege that I should speak as one of the alumni of Makerere University of the 20th congregation.

Mr Speaker, I am a *Rasta* and the influence is from Makerere University. I want those who have come and who are in the Public Gallery to know that Makerere University has produced a *Rasta* man in this Parliament. *(Laughter)* I am overwhelmingly and in full support of this motion as moved by my O.B, Prof. Mushemeza - we were there at the same time. I know he spoke about social, economic transformation - Mr Speaker, I want to add that Makerere University has done political transformation of the region and the whole of Africa. We have produced presidents, two in Kenya, - Jomo Kenyatta and Kibaki, both of them are alumni of Makerere University. In Tanzania, there was Mwalimu Nyerere, and many others.

It is now a fashion – *(Member timed out.)*

THE DEPUTY SPEAKER: Thank you.

3.21

MS ANNA ADEKE (FDC, Woman Representative, Soroti): Thank you, Mr Speaker. There are no roses coming from my mouth. As Makerere celebrates 100 years, it is a moment of reflection for us in this House as the political elite, and also for Uganda as a country, in light of Article 29 of the Constitution and the freedom of expression.

Makerere as a centre of excellence thrives on academic free expression. In my view, this space has been closed. The gunmen came and took over the country; they captured the spaces in Makerere University; it is no longer an area of free expression. We have criminalisation of free expression in the highest institution of learning in our country. For me, that requires all of us here to self-reflect about our need to – *(Member timed out.)*

THE DEPUTY SPEAKER: Prof. Nsibambi?

MS ADEKE: Mr Speaker, I was in Makerere –

THE DEPUTY SPEAKER: Honourable member, I have not allowed you time. I want to allow other colleagues to speak. Prof. Nsibambi?

3.22

PROF. YUSUF NSIBAMBI (FDC, Mawokota County South, Mpigi): Thank you very much, Mr Speaker. I am speaking on a passionate note, as a former staff. I taught at Makerere for 27 years. I am also a student of Makerere University. The mover of this motion, “Field Marshall” Mushemeza was my boss at the Northcote State and I was the chief *Kadhi*.

I taught at Makerere Universality for over 27 years without leave. I did not get leave, which was illegal, irregular and a stupid experience; not because I wanted. At the Faculty of Law, now a college – *(Member timed out.)*

THE DEPUTY SPEAKER: Conclude, honourable member. Colleagues, since all of you want to speak, I am going to give each of you one minute.

MR NSIBAMBI: On another sad note, I got a heart attack and surgery in Makerere because I taught four classes back to back. So, I think it is important to ensure that we provide funds to retain good staff to teach. I had no option because I had to teach. I was passionate but it was a very bad experience.

I am actually here because of what happened; I taught back to back. I do not want my colleagues to go through what we went through. This business of harassing staff when they raise issues, as if they are enemies of the State, must be addressed by this House. Thank you. *(Applause)*

THE DEPUTY SPEAKER: Thank you. Prof. Nsibambi raises the issue of funding, which Hon. Mushemeza talked about. If we gave the university management funds to recruit sufficient staff, they would do it. That is an issue we have to look into. I remember the

staff structure still has a lot of gaps. This is not the design of management, but let us give them funding to recruit staff. That is very important to note.

3.25

MR YONA MUSINGUZI (NRM, Ntungamo Municipality, Ntungamo): Thank you, Mr Speaker. I am not a student of Makerere; I studied at Kyambogo. Kyambogo *oyee*. *(Laughter)* I bring a congratulatory message from Kyambogo University, where I am a University Council member because my lecturers were all from Makerere – the likes of Prof. Bazilake and the rest.

Mr Speaker, as we commemorate this day, I move that we look at the halls and lecture rooms. They are all dilapidated. I think we should move that next time, in this House, we come here and pass a budget – *(Member timed out.)*

3.26

MR ALEX RUHUNDA (NRM, Fort Portal Central Division, Fort Portal City): Thank you, Mr Speaker. I am a product of Makerere University from Livingstone Hall; the gentlemen. I also used to run for the university in athletics and marathons, 1993 to 1996.

During our time, Makerere produced firebrands and I am one of those who benefitted from Makerere Institute of Social Research. I gained research skills, went back to Fort Portal and started the Kabarole Research and Resource Centre, which has contributed greatly to the think tanks of this country. *(Applause)*

The system that used to nurture us to go to the library, make research, engage with the lecturers intellectually and engage with other universities has really gone down.

Makerere – *(Member timed out.)*

3.27

MR ODRIA ALIONI (NRM, Aringa South County, Yumbe): Thank you very much, Mr Speaker. I am a product of Makerere University. Above all, throughout, I was a leader in the

Guild Representative Council (GRC) and a minister also -

THE DEPUTY SPEAKER: We said we do not want GRCs today. *(Laughter)* he was the chief elder.

MR ODRIA: When I was the minister, you were doing your masters degree. We were together; you remember that very well.

Last month, I decided to go with two of my daughters. One is in year four and the other one is in year three, in an international school. I decided to take them to the university to have lunch; I got lost. There is no Guild Canteen anymore.

The university –*(Interjection)*– Hon. Kibalya, I was with you in your –

THE DEPUTY SPEAKER: Please, honourable member. *(Laughter)* Order, colleagues. The country is watching. Yesterday, we had a long debate on mental health and you know the issues. *(Laughter)* Someone said all of us are potential cases but it depends on the time. *(Laughter)*

Now, we are provoking each other. Why are you provoking Hon. Alioni? All I know is Hon. Alioni and Hon. Kibalya are very good friends.

3.29

THE MINISTER OF STATE, OFFICE OF THE PRIME MINISTER (BUNYORO AFFAIRS) (Ms Jenipher Namuyangu): Thank you, Mr Speaker. I salute the men and women, the lecturers of Makerere University. I was a student in Makerere University for six years doing a Bachelors of Science in Forestry for four years, and a Masters in Forestry for two years.

Hon. Mao was the Guild President when I was a fresher. I agree that we need to support Makerere University to rehabilitate the halls of residence. *(Applause)* I am told that Lumumba Hall is apparently closed. For the next two years, they are going to rehabilitate it and I am happy about that. I am a lady and I know halls

like Mary Stuart really need rehabilitation. *(Applause)*

We need to support research so that students that graduate have hands-on –*(Member timed out.)*

3.31

MR PAULSON LUTTAMAGUZI (DP, Nakaseke South County, Nakaseke): Thank you, Mr Speaker, for my one minute. Since one of our own is the one chairing the commemoration of the 100 years of Makerere University, I suggest that we rename one of the halls “Tayebwa”. *(Laughter)*

THE DEPUTY SPEAKER: Honourable member, please, go on.

MR LUTTAMAGUZI: Thank you. Mr Speaker, everyone here is singing “Makerere University.” Most of us have gone through the university but the question arises: what have we done for Makerere University? I submit.

3.32

MR THEMBO MUJUNGU (NRM, Busongora County South, Kasese): Mr Speaker, I have been called a fresh kid. I am not an alumnus but a friend of Makerere. It is important that Parliament draws a resolution to commemorate 100 years of the university.

Makerere University, as a centre of higher learning, has been a centre of inspiration for many young people in Uganda and beyond. As a young person, I aspired to speak good – *(Member timed out.)*

3.33

MS SYLVIA NAYEBALE (NRM, Woman Representative, Gomba): Thank you, Mr Speaker. I am a proud alumnus of Makerere University and a strong consumer of *kikumi-kikumi* - for those who have been there. *(Laughter)*

The world is going into an economic revolution. The fourth industrial revolution should not leave Makerere University behind. I, therefore, implore Makerere lecturers and administrators

to engage in the struggle and strategically position themselves in the fourth industrial revolution so that Makerere is not left behind. Thank you.

3.34

MS CHRISTINE AKELLO (NRM, Erute County North, Lira): Thank you, Mr Speaker. I am also a product of Makerere University. I rise to support the motion but the lecturers should take note of missing marks. When I was a student, I also experienced it. Up to now, some of the students have left the university and gone back home without completing their courses.

Therefore, as we celebrate, they should take note of the issue of missing marks. I beg to submit.

THE DEPUTY SPEAKER: Thank you. The honourable colleague has raised an important issue. Some of you, honourable members, have never gone back to Makerere to pick your transcripts. Some of you have not even cleared with the university. *(Laughter)* They still demand money from you, yet you are using documents of the university to become Members of Parliament and CEOs. *(Laughter)* I think if you continue like this, I am going to ask for the transcripts and certificates so that you can be forced to go back.

However, on a serious note, very many people have not gone back to pick their academic documents. You need to do that. The Vice-Chancellor has been emphasising it.

3.35

MS RUTH LEMATIA (NRM, Maracha East County, Maracha): Thank you, Mr Speaker, for giving me this opportunity. I am not an alumnus of Makerere but a close associate of the university. I am a nurse by profession.

When nurses did not have degrees in this country, I sat down and prepared a proposal to introduce a nursing degree in Uganda. At first, it was proposed to be offered in Mbarara University but because of politics – we had Cubans there, so, the Americans who were to assist me could not go there.

Therefore, I went to Makerere asking if they could take over this course. I am very grateful that they took it up but asked me –*(Member timed out.)*

THE DEPUTY SPEAKER: Honourable member, conclude.

MS LEMATIA: I am very happy that nurses are now getting degrees and even PhDs here in Uganda. Makerere should be helped to progress further. Thank you.

THE DEPUTY SPEAKER: Hon. Kibalya, the former Guild President -

3.37

MR HENRY KIBALYA (NRM, Bugabula County South, Kamuli): Thank you, Mr Speaker. I was in Mitchel Hall. My issue is one. We left after setting up the whole plan for Makerere Students' Guild Mall. Everything was in place but up to now, the mall is not there. That is my interest and, since the whole university is here –*(Laughter.) (Member timed out.)*

THE DEPUTY SPEAKER: Colleagues, in the Public Gallery this afternoon, we have constituents of Bufumbira South in Kisoro District. They are represented by Hon. Alex Niyonsaba. They are 30 in number and they are tourist guides from Mgahinga Forest Reserve. Yesterday, they were celebrating International Tourism Day. They are represented by both Hon. Alex Niyonsaba and Hon. Sarah Mateke. Please, join me in welcoming them. *(Applause)*

3.38

THE MINISTER OF STATE FOR EDUCATION AND SPORTS (HIGHER EDUCATION) (Dr John Muyingo): Thank you, Mr Speaker.

First of all, I am a very proud product of Makerere University and I would like to thank all the colleagues who have made a contribution to this motion. Thank you for appreciating and loving Makerere University.

As a country, we have very many good reasons to celebrate 100 years of Makerere University.

Many of those reasons have been presented here, but I would like to add only three.

One, Makerere University has produced seven presidents for our region. I think that is something – *(Member timed out.)*

THE DEPUTY SPEAKER: Honourable minister, please, switch it on.

DR MUYINGO: It has produced seven presidents for our region and one Prime Minister for the Caribbean region. It is a university that started in 1922 with only 14 students but it is now over 40,000. I think we need to celebrate that also.

Secondly, something that I have not heard, yet it is really great, is that Makerere University produced the first electric car – fully built by Africans. We need to celebrate that. *(Applause)*

Thirdly, Makerere University, at 100 years, is repositioning itself to become a research innovation-led university. Colleagues, we need to support Makerere in this endeavour for the next 100 years. Of course, they need the resources.

Government has planned to put in a lot of resources to support Makerere University so that for the next 100 years, it becomes a research-led university – innovation-led university. Of course, Members of Parliament, you have a stake in this. I hope you will do the most needful.

We are using these celebrations also to solicit support from Government, Parliament and other stakeholders to support Makerere University in its effort to rehabilitate the dilapidated infrastructure, which you know, some of them have been in existence for over 100 years. We need all your support, Members of Parliament. When we come up with our budget, please, support us for the sake of what you want Makerere to be.

We are also using these celebrations to solicit support so that Makerere University comes up with its own hospital; you are aware, Makerere University has been training medical doctors

from Mulago. You know what it is. We should support this and very soon, I will be coming here to present a request; I hope you will support me.

Otherwise, Mr Speaker and colleagues, I thank you very much for supporting the motion. I beg to submit.

THE DEPUTY SPEAKER: Thank you, honourable minister. Now, honourable minister, whereas we have debated and you have listened to the current challenges, we have the issue of amending the Universities and Other Tertiary Institutions Act so that it conforms to the requirements of today.

That amendment process, from what I have read was started in 2007 up to now. I have had private Members bringing proposals for that amendment. Please, work on it with the Attorney-General, bring the amendment so that we can update and modernise our higher education. That is extremely important and I hope this financial year - because I think it was part of the legislative agenda for this financial year.

So, Rt Hon. Prime Minister, that is a Bill we need. Do you want to update us on that? You should go back and ensure that you work on this. Committee on Education and Sports, please, follow up.

DR MUYINGO: Most obliged, Mr Speaker.

THE DEPUTY SPEAKER: Number two, colleagues, issues of funding and support to our universities are very important. The issue of research; if we want our universities to be relevant - to not only produce products that will go on the market to look for jobs and all that, we need to give them money for research so that they can design solutions to our problems.

If we leave the research agenda to foreigners - last time, we gave Makerere Shs 30 billion, and other public universities, Shs 3 billion each. We need to increase research funding. I am happy we have started but we need to increase research funding for public universities.

But also, private universities are playing a critical role. I do not know why we cannot support private universities, because in other parts of the world, they support private universities that are playing a very critical role in higher education.

Issues about the image of Makerere in terms of infrastructure; I am happy the Government has taken an initiative. I understand now they have committed to working on the halls of residence but we still have issues of funding. For example, how much do we give each student for food per day? You know, per day, the money we give cannot even buy what they call *kikomando* on the street.

Now, you do not expect Prof. Nawangwe, Madam Lorna Magara and the team to sell their cows to finance students' welfare; these are our children.

In addition, the issue I talked about, - which I assigned to the committee and which we have to start looking at - the issue of Government sponsorship, where most of our children are the ones who benefit because they go to the best schools in this country, and we can afford the tuition; these are issues we need to dialogue on.

Otherwise, congratulations Makerere University. We are going to support you. Please, continue contributing to not only the development of Uganda but also the world and Africa.

With that, I now put the question that the motion for a Resolution of Parliament to Commemorate 100 years of the Existence of Makerere University be adopted.

(Question put and agreed to.)

THE DEPUTY SPEAKER: Congratulations Vice-Chancellor, Chairperson Council, and honourable colleagues. I direct the Clerk to extract a copy of the resolution and a copy of the *Hansard* and forward them to Makerere University for further management and sharing with the public. Next item.

BILLS FIRST READING

THE NATIONAL LEGAL AID BILL, 2022

3.47

MR SILAS AOGON (Independent, Kumi Municipality, Kumi): Thank you, Mr Speaker. I beg to move that the Bill titled, "The National Legal Aid Bill, 2022" be read for the first time.

THE DEPUTY SPEAKER: Thank you, Hon. Aogon. In line with Rule 118 of our Rules of Procedure, I refer the Bill to the Committee on Legal and Parliamentary Affairs.

MR AOGON: Mr Speaker, I beg to lay the Certificate of Financial Implications together with a draft copy of the Bill. I beg to lay.

THE DEPUTY SPEAKER: Thank you. The Bill is referred to the Committee on Legal and Parliamentary Affairs. Chairperson, please, ensure that you process it in time. Next item -

MOTION FOR RECONSIDERATION OF THE FISHERIES AND AQUACULTURE BILL, 2021 AS RETURNED BY HIS EXCELLENCY THE PRESIDENT

THE DEPUTY SPEAKER: Colleagues, I want us to first do these Bills quickly and then we go back to item No.5.

Honourable minister - if the minister is not around, someone can help him. Prime Minister, you are a minister. Is the agriculture minister around? I had seen him around.

3.48

THE GOVERNMENT CHIEF WHIP (Mr Hamson Obua): Mr Speaker, I beg to move that a Bill entitled, "The Fisheries and Aquaculture Bill, 2021" returned by His Excellency the President be reconsidered.

THE DEPUTY SPEAKER: Thank you. Is the motion seconded? *(Members rose.)* Yes, it is seconded by Hon. Tebandeke, Hajji Idd, Hon. Namuyangu, Hon. Okeyoh and Hon. Olanya.

Honourable minister, this being a Bill, which was returned by the President, is not something for which we would need more justification for you to come and talk about it. When you are talking about such a Bill in the presentation, we usually focus on the principles and objectives of the Bill, which were already covered.

The Rt Hon. Speaker presented the President's letter last time, clearly justifying why the Bill had been returned. Therefore, we do not need fresh justification on why this Bill was returned because it is the President's right under Article 91.

Colleagues, when we are looking at this Bill, we shall be guided by Rule 143 of our Rules of Procedure. I want you to take that seriously so that we have a well-structured handling of the Bill.

3.51

THE CHAIRPERSON, COMMITTEE ON AGRICULTURE, ANIMAL INDUSTRY AND FISHERIES (Ms Janet Okori-Moe): Thank you, Mr Speaker. I beg to lay on Table, the report of the Committee on Agriculture, Animal Industry and Fisheries on the Fisheries and Aquaculture Bill, 2021.

I also beg to lay the minutes of the meetings of the committee on Table.

And now, I beg to present the report of the committee.

Mr Speaker, Parliament of Uganda passed the Fisheries and Aquaculture Bill, 2021 on 3rd May 2022 with amendments and forwarded it to His Excellency, the President, for assent.

However, the President did not assent to the Bill and in a letter dated 18 August 2022, he returned it to Parliament for reconsideration in accordance with Article 91(3)(b). The letter is attached and marked as "B."

The President's letter was laid on the Table on 7 September 2022, and subsequently, the Rt Hon. Speaker referred it to the Committee on Agriculture, Animal Industry and Fisheries for

consideration and thereafter, report back to the House.

The issues that were raised by His Excellency, the President concerned clause 4 on the definition of "a licensing officer." The "licensing officer" is defined in the Bill as the "Chief Fisheries Officer or District Fisheries Officer." The President argued that this would cause confusion and could be a recipe for malpractices. He said that the "licensing officer" should be the "Chief Fisheries Officer;"

Secondly, Mr Speaker –

THE DEPUTY SPEAKER: Sorry honourable colleague. Government Chief Whip, your Members are at it again. I do not know how we shall continue doing business in this House, when Members come and go to the corridors and start making noise for Members who are here. You know, the other day, Members were the ones who even raised it; it is too much.

MS OKORI-MOE: Thank you, Mr Speaker. In clause 13(2) and (3)- on the Surveillance Unit, the Bill domiciles the Surveillance Unit Organisation, Command, Control and Training under the Uganda Police Force. The Surveillance Unit Organisation, Command, Control and Training need to be domiciled under the Uganda People's Defence Forces (UPDF) and the Uganda Police Force (UPF).

The rationale is that, given the need for continuous surveillance and sophisticated ways employed by people involved in illegal fishing, the support of both the UPDF and the UPF are required.

The committee held an in-house meeting to discuss the matters raised by the President in his letter and also met the state minister for fisheries together with the staff from the Directorate of Fisheries, to consider the President's position.

During the meetings, the committee considered the President's letter and deliberated on it in accordance with rule 143(4), which states that: "*Debate on a motion under this rule shall be*

confined to consideration of matters referred to it in the message of the President or to any suggestion relevant to the subject matter of the amendment recommended by the President.”

Observations and recommendations

In clause 4, on the definition of “licensing officer” the President recommended that the definition of the “licensing officer” be reviewed to refer to only the “Chief Fisheries Officer.”

The proposal by the committee, which was captured in the assent copy referred to the “licensing officer” to mean the “Chief Fisheries Officer” or a “District Fisheries Officer.” The committee agrees with the President’s guidance. However, the guidance will have effect on the following provisions, which will require amendment to align them to the proposal:

(a) The definition of “licensing officer” will be deleted since the “Chief Fisheries Officer” in whom the licensing mandate is fully-vested is defined under clause 4 and clause 7(d), which stipulates the mandate of the directorate in relation to the issuance of licences and permits.

Accordingly, the phrase “licensing officer” should be replaced with “Chief Fisheries Officer” wherever it appears. The clauses that are going to be affected are:

- (a) Clause 33 (2),(4),(5),(6) and (7); and clause 48(1) and (2); clause 53; clause 54; clause 55; clause 62(3),(4) and(6); clauses 63 and 64.
- (b) Clause 24(1)(c) will have to be deleted to ensure consistency.
- (c) The phrase “District Fisheries Officer” under clauses 39(1) and 84(1) should be replaced with the phrase “Chief Fisheries Officer.”
- (d) Clause 84(3) should be deleted since it will be covered under clause 56(1).

(e) Clause 62(1) should be amended by inserting, immediately after the word, “issued” the words “by the Chief Fisheries Officer.”

(f) Clause 62(2) should be deleted since it is taken care of by the amendment under clause 62(1).

In clause 13 on the establishment of Fisheries Monitoring, Control and Surveillance Unit, the President expressed concern that given the need for continuous surveillance and the sophisticated ways employed by people involved in illegal fishing, the support of both the UPDF and the UPF is required.

The committee, however, takes cognisance of the President’s concern and recognises the fact that one of the functions of the UPDF is to preserve and defend the sovereignty and interior integrity of Uganda, including engaging in productive activities for the development of Uganda.

The committee also notes that the President as Commander-in-Chief of the UPDF and Fountain of Honour, has the prerogative to deploy the Forces whenever need arises as mandated by the Constitution. The committee appreciates the role played by the UPDF in other sectors in the country like health, disaster and roads.

Furthermore, the committee notes that the Uganda Police Act, Cap 303 mandates the Police Force to: protect the life, property and other rights of individuals; to maintain security within Uganda; to enforce the laws of Uganda; to ensure public safety and order; and to prevent and detect crime in the society.

The committee is, therefore, of the opinion that the earlier position as passed by Parliament be maintained. *(Applause)* In the event of any sophisticated ways employed by people involved in illegal fishing as cited by the President, the UPDF may be deployed in accordance with the provisions of the UPDF Act and the Constitution of the Republic of Uganda. *(Applause)*

Mr Speaker, the rest are proposed amendments to the returned Bills. I do not know whether I should read it or it will be handled at Committee Stage.

THE DEPUTY SPEAKER: Honourable member, those are consequential amendments. We shall first handle the two clauses the President returned and then go to consequential amendments as a result of the other amendments that would have been made.

Colleagues, this is a short one and as I guided earlier, the debate on any Bill's report is always on the principles and objectives. I open debate for 10 minutes and then we move. I will allow Hon. Silas, Hon. Teira, the Member for Kioga, Hon. Nandala-Mafabi and Hon. Okeyoh.

3.02

MR SILAS AOGON (Independent, Kumi Municipality, Kumi): Thank you very much, Mr Speaker. Indeed, we will observe the rules; we will only dwell on matters to deal with what the President is not in agreement with.

I want to applaud the committee on the position they have taken. On the first position, to deal with licensing, I am in agreement with the President's position and I think the committee agrees. That is a good one and so, we should take that direction.

The second one is on the issue of UPDF. We are all aware about what has happened in this country before, in terms of the operations of the UPDF in the waters. This time around, it is very important that UPDF is led by the UPF, if that is the case. The position is very clear. Therefore, the position of the committee is a position we should be able to adopt without wasting time. Let us agree that the committee has done a good job and we adopt this position and move on, Mr Speaker. Thank you very much.

THE DEPUTY SPEAKER: Thank you. Hon. Teira?

4.04

MR JOHN TEIRA (NRM, Bugabula County North, Kamuli): Thank you, Mr Speaker. Looking at the atrocities that the people in the fishing community have suffered at the hands of our brothers and sisters in army uniform, an inclusion of UPDF in the Act will be legitimising the very unfortunate acts that have happened to those people.

I stand here to support the position of the committee that we adopt UPF to take the lead in the surveillance of the waters. Thank you.

4.05

MR PETER OKEYOH (NRM, Bukooli Island County, Namayingo): Thank you, Mr Speaker. I rise to thank the committee for the report. I represent the fishermen and I am a real fisherman. *(Laughter)* Therefore, this Bill is the core of my being here. I thank the committee for being bold and stating that the UPDF should be left out of surveillance.

Mr Speaker, we have forces like Anti-Stock Theft Unit and the Environment Protection Police Unit. What is unique with the fishermen? I am a fisherman and I do not think I am very hostile to the extent that people should be under the UPDF. Fishermen are very amiable people; friendly and law-abiding.

THE DEPUTY SPEAKER: Thank you. Member for Kioga -

4.05

MR MOSES OKOT (FDC, Kioga County, Amolatar): Thank you very much, Mr Speaker. My constituency is a peninsular in Amolatar; I purely represent the fishing community. I appreciate the committee very much for what they have done to the Bill. There is no better justice that could be done to this Bill than what they have done.

Mr Speaker, I am in a "vegetative" state because of the brutality of the UPDF. There is no better empirical evidence that could be brought to the House than bringing myself to show the country the extent of the exigencies of the UPDF in the lake. *(Applause)*

[Mr Okot]

In furthering the operation of the UPDF in the House, we would be condoning persons whose natural training – prima facie is to deal with external aggression –(Member timed out.)

THE DEPUTY SPEAKER: Member for Jonam?

4.07

MR EMMANUEL ONGIERTHO (FDC, Jonam County, Pakwach): Thank you, Mr Speaker. I also support the position of my colleagues that we should exclude our brothers and sisters in the UPDF from supervision of lakes. My point is on why we mistrust the police on this. I want to believe that the police is also able to do what we think the UPDF should do.

Moreover, Mr Speaker, we already have some of the commanders of the police who are coming from the army. So, if they think they want to sharpen the police, let those commanders do so, within the police and allow the police to do their work. Thank you.

THE DEPUTY SPEAKER: Thank you. Hon. Namuyangu?

4.08

THE MINISTER OF STATE, OFFICE OF THE PRIME MINISTER (BUNYORO AFFAIRS) (Ms Jenipher Namuyangu): Thank you, Mr Speaker. I had the opportunity to be on a committee that was sent out to investigate allegations against the UPDF. I covered Lake Kioga, the districts of Kayunga, Buyende; I went to Serere, Kaliro, Amolatar and Nakasongola. I also went to Bunyoro, Lake Albert, although the activities had not started.

I want to tell you that the fishermen and women who are natives have no problem but the criminals who had moved from other areas had even made plots in the lake –(Member timed out.)

THE DEPUTY SPEAKER: Honourable member, conclude.

MS NAMUYANGU: They had made plots in the lake and it is only the UPDF that managed to restore order in those areas. (Interjections) Therefore, for us to forget and say that the UPDF has not done a good job is a disservice and yet all the lakes had been destroyed.

I disagree, but I support the idea that both Forces can take care of our lakes. After all, they have taken care of our security.

THE DEPUTY SPEAKER: Thank you. Hon. Nekesa, would you like to say something? Then Hon. Nandala-Mafabi and Hon. Naomi. (Member rose) There is no one on the Floor so you cannot raise a point of order. This is a Member of Parliament in her own right.

4.10

COL VICTOR NEKESA (UPDF Representative): Thank you, Mr Speaker, for the opportunity. Honourable members, I stand here to give insight; a perspective that we all need to know. We have a national economic enterprise called the waters of Lake Victoria and other water bodies with a lot of fish and other lives in there. This is a national enterprise that helps Uganda achieve some of its economic goals.

The UPDF, as a military instrument, can be used to help the Government or a nation achieve its economic enterprises to get the economy higher. I do not understand –(Interjection)- No, let us look at it this way. We can get our objectives of transforming the country using the marine – the fish and the lake waters – with the UPDF being an instrument and rightly so. In the last three years, we have achieved it. I thank you.

4.11

MR NATHAN NANDALA-MAFABI (FDC, Budadiri County West, Sironko): Thank you, Mr Speaker. I want to ask Members to have time to go to Katosi and Kiyindi. They will discover what is happening there. I can tell you that anybody who is near the lake is supposed to utilise the lake. For me, who is from Bugisu, I will talk about coffee. These

people cannot even eat *mukene*, which is meant for children. These people cannot even touch *mputa* because if they arrest you with *mputa*, you are dead meat.

We must come here and utilise our resources for the benefit of the people of Uganda. The plots, which Minister Namuyangu is talking about, are owned by the Chinese. Non-Ugandans are the ones who have taken over Lake Victoria in the management of fish. We must fight this. In fact, the UPDF is protecting the non –(*Member timed out.*)

Mr Speaker, just one minute. They are protecting the Chinese, Indians and the mafias. The UPDF is supposed to protect us at the borders from people who are attacking us but not to come and make the people of Uganda suffer.

Mr Speaker, the issue of the police is allowed. That is why we have Uganda police for NEMA, Uganda police for fisheries and Uganda police for forests. So, I would say the committee did a good job and they did it under the Constitution of Uganda.

The moment you bring the UPDF, you are going against the Constitution of Uganda.

THE DEPUTY SPEAKER: Thank you.

4.13

MS NAOME KABASHARIRA (Independent, Rushenyi County, Ntungamo): Mr Speaker, President Yoweri Museveni, by the time he thought of bringing the army, must have realised that maybe the police - because even the police are his – had failed. I remember most of the factories that were exporting and processing fish had closed. By the time they brought the army in, they were to protect our export of fish.

I know that fish is one of the country's source of income. If we just leave it – it is not actually killing the *wananchi* not to get fish. Maybe, what they can do is to sit with this army and let even the *wananchi* –(*Member timed out.*)

4.14

MS ROSEMARY NYAKIKONGORO (NRM, Woman Representative, Sheema):

Thank you, Mr Speaker. I thank the committee for the report. My concern is about them saying that they can use the police force but call upon other forces when the police has failed. Whom will you hold accountable when you call the UPDF to join the police, without regulating it in the law?

Therefore, if there is a bad apple within UPDF, it can be dealt with. Why should we generalise, debate and come up with a law that is bad because of one bad apple that has tainted the image of the UPDF?

THE DEPUTY SPEAKER: You see, colleagues, what you are doing is debating amendments. We would rather go to Committee Stage and debate from there.

4.15

THE LEADER OF THE OPPOSITION (Mr Mathias Mpuuga): Thank you, Mr Speaker. One of our duties, as Parliament, is to ensure that institutions of Government do not collapse. By this very amendment, we can collapse the UPF as an institution of Government. There is a reason Article 208 of the Constitution is distinct from Article 211. The roles are very clear. The roles of the UPDF, in the UPDF Act, are very unequivocal.

I would like to ask Members of Parliament, sometimes, to have the courage to do the right thing. (*Applause*) It is very important that sometimes, even when you feel very cowed by the overbearing principal, you should do the right thing for the sake of posterity.

The fisheries sector is not just for export. To some communities, it is what they have known as life and livelihood. (*Applause*) Before even thinking about exporting, that is what they have known for the entirety of their life.

Therefore, we as Parliament, in what we do in policy and legislation, owe them a duty of care. We are not going to wake up in a single day and enlist all committees into commercialisation.

So, marketisation of legislation, without enabling communities to migrate progressively, is dangerous.

I can assure you, honourable members, that the UPF needs support and protection. Already, its territory has been encroached on by the UPDF, by way of deployment and recruitment. We can inform the President, indirectly, that this institution matters by the way we choose to legislate today.

Mr Speaker, I would like to invite Members to think beyond what, probably, the President thinks. The President can be advised. Forget his name. *(Laughter)* He can be advised and the advice can actually be justified.

So, can we close in and do the right thing and protect and grow institutions? Mr Speaker, I thank you.

THE DEPUTY SPEAKER: Honourable colleagues – you see, when we are here, we do not want to make laws that are going to create winners and losers or institutions that we believe in and institutions that we do not believe in. Who brought this clause and what was the purpose?

The other day, we passed the Markets Bill. We have riots in the market. Did we create a force to go and quell riots in the markets? Some of these clauses – I do not know why they come. Some of them are redundant and they come to cause us problems. I am really concerned.

You have your Executive powers and you bring us clauses that are going to cause us trouble. It means that for every Bill that we pass, we shall create a Force. What kind of precedent are we setting? *(Applause)*

My fear is that if you pass a clause and say we indict the UPDF because they are brutal or we indict the police because they are weak - The argument from one side is saying the police were weak and they could not handle. Then, the argument from the other side is that the UPDF is brutal.

You are inviting us to enter into your work. This is not our work. You cannot legislate this way. These are some of the clauses, which are not needed in laws. You already have your powers.

Do not make Parliament look bad. Whoever will be reading the law – for every Bill, we need a Force to operationalise it. That would be wrong, colleagues. I am not supposed to engage in the debate, but I am only guiding on this. *(Applause)*

Honourable minister?

4.20

THE MINISTER OF AGRICULTURE, ANIMAL INDUSTRY AND FISHERIES (Mr Frank Tumwebaze): Mr Speaker, I thank the committee for taking time to reconsider the Bill, as returned. I have listened to the arguments and I have listened to your very important counsel. I am really struggling to get your attention, Mr Speaker.

THE DEPUTY SPEAKER: Sorry about that.

MR TUMWEBAZE: I have listened to your guidance; it is logical and instructive. The argument is that the Executive has powers to deploy - be it the police, the UPDF or a hybrid force. Based on that, I would also recommend that we do not promote a debate that portrays one force against the other. *(Applause)*

So, from your guidance, Mr Speaker, I would concede to the deletion of the entire clause. *(Applause)* We should not provide for the police and we do not provide for the UPDF either. Let us allow the Commander-in-Chief to deploy as he deems fit.

THE DEPUTY SPEAKER: Thank you. - Colleagues, listen. Colleagues, first of all, listen. All forces in this country, under the Constitution, are regulated under the laws made by you. They are regulated by laws made by Parliament; no one else makes laws. If there is anyone who is abusing any of those laws or there is a gap, we have power, as Parliament, to come and amend those laws.

It will be absurd for this Parliament to be the one to choose to say, “We love this Force against the other Force.” It would be a wrong precedent for us here to sit, when we are supposed to allocate money to all and we say we love this Force against the other. That would be wrong.

Colleagues, let us take this debate to the next stage. I now put the question that the motion for reconsideration of the Fisheries and Aquaculture Bill, 2021 be adopted by this House.

(Question put and agreed to.)

Motion adopted.

**BILLS
COMMITTEE STAGE**

**THE FISHERIES AND AQUACULTURE
BILL, 2021**

Clause 4

THE CHAIRPERSON, COMMITTEE ON AGRICULTURE, ANIMAL INDUSTRY AND FISHERIES (Ms Janet Okori-Moe): Mr Chairperson, the proposal is that on clause 4, we delete the definition of “Licensing Officer” and thereafter, substitute for the words “Licensing Officer” wherever the words appear with the words “Chief Fisheries Officer”.

The justification is to ensure that there is only one centralised office mandated to issue licences relating to fisheries activities for proper coordination and regulation. I beg to move.

MR OLANYA: Mr Chairperson, I am seeing a problem here. The committee is proposing that we substitute the definition to “Chief Fisheries Officer”. The known position in the district, which is approved by the Ministry of Public Service, is “District Fisheries Officer” and now, we are changing.

I would like to find out whether we are going to employ another officer called “Chief Fisheries

Officer”, in addition to the District Fisheries Officer. My view is we need to maintain the position of the District Fisheries Officer. The moment we change it, it means we need to employ another officer, in addition to the District Fisheries Officer.

THE DEPUTY CHAIRPERSON: Honourable colleague, when the chairperson was presenting, what I picked was that they want to have only one licensing officer.

So, if the district can maybe - I do not know whether you allowed regulations, where the district would now be making recommendations and all that. *(Hon. Olanya rose.)* Wait a bit. Let the Attorney-General help us.

MR KIRYOWA KIWANUKA: Mr Chairperson, what we are trying to achieve here is to hold someone accountable. This person is accountable. He will not be the one in Busia, Jinja and wherever but when it comes to the licensing function, the person who is accountable is an office. It is actually an office – the Chief Licensing Officer. Yes.

MR OLANYA: Mr Chairperson, on that point, I see that we are going to render the position of the District Fisheries Officer in that district jobless because we shall be having two people in that particular district.

DR BWANIKA: Mr Chairperson, the Licensing Officer is one; it is an office. He can delegate to the District Fisheries Officer. That is how it is done. You cannot fragment licensing to everyone.

THE DEPUTY CHAIRPERSON: Does that satisfy you, Hon. Olanya? Let the minister add on. Hon. Silas Aogon?

MR AOGON: Mr Chairperson, we do not need to waste time on this. When you look at the rest of the entities, there must be a centre of responsibility. There is no way we can ask for accountability from everybody. Ultimately, Government knows how to institute mechanisms for operation and coordination.

Therefore, I would like to stand with the position of the President. I think it is very clear. Thank you.

MR TUMWEBAZE: Mr Chairperson, the shadow minister put it right. The Ministry of Agriculture, Animal Industry and Fisheries has officers in the districts who carry on delegated functions – a DVO, a fisheries officer and an agricultural officer. The same applies to the subcounty. They implement policies of Government.

Therefore, the role of policy direction comes from the centre. Therefore, it is important that you have a commissioner or director at the centre, who is responsible for policy implementation and the other officers in the districts only help to execute a given position. So, if you create multiple centres of decision-making, then nobody is accountable. I hope that is clear. Thank you.

THE DEPUTY CHAIRPERSON: Colleagues, remember, we have another Bill.

MR BASALIRWA: Thank you, Mr Chairperson. Maybe, for the comfort of our colleague, a minister would clarify what the licensing officer will be doing, which is different from what the district fisheries officer does. The concern is that, perhaps, he is coming to take away roles. If that is clarified, I think there will be comfort to some with concerns in that respect.

MR KIROOWA: The role is the same as it is set out in clause 24. It is just that the person who holds this role is the Chief Fisheries Officer. Everyone else who carries out that function carries out a delegated function but it is the same.

THE DEPUTY CHAIRPERSON: Thank you. Colleagues, I now put the question that clause 24 be amended as proposed.

(Question put and agreed to.)

THE DEPUTY CHAIRPERSON: Colleagues, I want to repeat the question because

I read clause 24 instead of clause 4. I am sorry about that. I want us to be systematic. I now put the question that clause 4 be amended as proposed.

(Question put and agreed to.)

Clause 4, as amended, agreed to.

THE DEPUTY CHAIRPERSON: There are colleagues who might be having the Bill and are saying that it is not amended. The Bill we are handling is the one we passed here and sent to the President. It is the one we are amending. If you are following the Bill, which is on our system or you are having the old copy that is an old Bill. That is why we are amending it instead of saying it should stand part of the Bill.

Clause 13

MS OKORI-MOE: Mr Chairperson, the view of the committee is that clauses 13(2) and (3) be maintained as passed by Parliament as follows:

1. There is established a Fisheries Monitoring Control and Surveillance Unit within the directorate;
2. The surveillance unit shall comprise persons with qualifications in fisheries sciences appointed by the Public Service Commission and trained by the Uganda Police Force;
3. The Minister may, in consultation with the minister responsible for internal affairs, by statutory instrument, make regulations for;
 - a. The organisation and deployment of the surveillance unit;
 - b. The functions and duties of officers of the surveillance unit;
 - c. The terms and conditions of service, grades, ranks and appointment and discipline of officers of the surveillance unit;
 - d. The description and issue of arms, ammunition, accoutrements, uniforms, authority cards and other necessary supplies to officers of the surveillance unit; and

e. Matters relating generally to the good order and administration of the surveillance unit.

4. That whereas the terms and conditions of service of an officer of the surveillance unit, authorise him or her to possess firearms in the course of his or her duties, the officer shall, in addition to any other terms and conditions that may be imposed by the standards section, wear a uniform and be governed by regulations made under this section regarding powers of search and arrest, training, discipline and use of firearms.

The reasons that were given earlier on when this clause was passed, still stand. I beg to move.

THE DEPUTY CHAIRPERSON: Thank you. This is a clause, which we have been debating; and it was causing a lot of commotion.

MR ARIKO: Thank you, Mr Chairman. I would like to borrow the wisdom of the minister. We are in a state where we know that the President, who is also the Commander-in-Chief, has powers to direct and order all armed forces in the country.

In order for us to make a law that does not create clusters of doubt, I want us to go with the proposal that the honourable minister had mentioned here that we simply delete the entire clause. Mr Chairman, that is my view. Thank you.

THE DEPUTY CHAIRPERSON: Colleagues, I still repeat what I had said at the beginning. It will be a wrong precedent for this House to pit one Force against the other. You might trust the police but the next day, you are the ones who will be here castigating the Police.

In clause 13(1), there is “Established a fisheries monitoring, control and surveillance unit within the directorate. The surveillance unit shall comprise persons with qualifications of fisheries sciences, appointed by the Public

Service Commission and trained by the Uganda Police.” Do you know where Uganda Police trains from? *(Laughter)*

MR BASALIRWA: Thank you, Mr Chairperson. That statement, in my view, “trained by” could be omitted. But to say that we remove the entire clause is dangerous. The fisheries sector should have a monitoring and surveillance unit. The issue of the training and the rest, in my view, is administrative.

Also, the clause that empowers the Minister for Internal Affairs, and the Minister for Agriculture, to make regulations is in itself sufficient. We could actually remove the aspect of “trained by Uganda Police Force” but maintain the clause on surveillance and monitoring. That is very important, in my view.

THE DEPUTY CHAIRPERSON: But I am even seeing the people in it.

MR MPUUGA: Mr Chairperson, with your indulgence, I would like to encourage my brother the Minister to speak last, to allow him to listen to Members; we can do a good law – I am just inviting you to –

THE DEPUTY CHAIRPERSON: Colleagues, you are having your own *tete-a-tete* in my time.

MR MPUUGA: He is a good sparring friend. Mr Chairperson, I would like to again invite Parliament not to be timid while enacting these laws. First, the intention of establishing a surveillance unit is not for defence, but for enforcing law and order, which is a preserve of the police.

Secondly, the rationale by the President to the effect that we need to enforce surveillance, including following the sophisticated people in the lake is different from what the Bill is saying. The Bill is clearly talking about establishing a surveillance unit, which is actually under the marine police; surveillance on the water is a preserve of the marine police. We should not really be timid to know that that is what the law says. That is what Cap. 303 says, Mr Chairperson.

I would like to encourage the minister to take this in good faith; we are helping each other to make a good law. Surveillance per se, under the repealed law - because we said the law was weak, but it was a question of facilitation.

Mr Speaker, if you facilitate the marine police, they will do the same job you want another group to do. However, facilitate and enable them to do their work. If funds are adequately provided, there is no reason we should run away from a very simple matter. In fact, we should avoid pitting these Forces against each other, as long as we are very clear about the intention. Otherwise, the intention of the Bill is different.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, I do not want us to take a lot of time here. Hon. Basalirwa had raised - how can this House go into issues of training? It is as if we know where people are trained from. Do you, actually, know where I was trained? *(Laughter)*

MR BASALIRWA: Mr Chairperson, when you look at the way the clause is phrased, you ask a question: what comes first? He says, "appointed by the Public Service Commission and trained by Uganda Police Force." So, you ask: "Do I first get trained to be recruited?" Or, are you recruited first, and then you are trained? Otherwise, the phraseology is not very clear. Therefore, I would rather, Mr Chairperson, with your permission, move an amendment to that clause to the effect that we retain clause 13 as follows:

Clause 13(1), we establish a Fisheries Monitoring Control and Surveillance Unit within the directorate.

Clause 13(2), the surveillance unit shall comprise persons with qualifications in fisheries sciences appointed by the Public Service Commission.

The issue of skills now becomes part of the regulations made by the minister for fisheries, in consultation with the Minister of Internal Affairs.

I get comfort in the phrase "the Minister of Internal Affairs," because then, I will know we are dealing with the police. If it were the minister responsible for defence, there would be a problem. Here, it is talking about the Minister of Internal Affairs, which is really the ministry that supervises the police.

I think the comfort is that we collapse the idea of the Uganda Police Force to take away this feeling that we are pitting one Force against the other and leave the details to the issue of the regulations to be made by the two ministries. I beg to move.

THE DEPUTY CHAIRPERSON: Attorney-General, would you guide on that? Colleagues, I have the Organ Transplant Bill. We must handle it and go for our function. So, I want to conclude.

MR KIRYOWA KIWANUKA: Thank you, Mr Chairperson. I think what the honourable member has stated is what has been going through my mind.

I want to make a further amendment to clause 13(2) to say "The surveillance unit shall comprise persons appointed by the Public Service Commission." Mr Speaker, it could be different - I keep telling people that when you over-restrict this to fisheries sciences, what if they have to recruit a boat rider who is not a fisheries scientist? You can create a problem.

THE DEPUTY CHAIRPERSON: Thank you, colleagues. I now put the question that the clause be amended as proposed.

(Question put and agreed to.)

Clause 13(2), as amended, agreed to.

Clause 24

THE DEPUTY CHAIRPERSON: Colleagues, as a result of this amendment, we should be having consequential amendments. Chairperson, this is different from what the committee had proposed. Do you have any consequential amendments?

MS OKORI-MOE: Thank you, Mr Chairperson. In clause 24, it is suggested that it is amended in subclause (1) by deleting paragraph (c). This is a consequential amendment arising from vesting the licensing mandate to only the Directorate of Fisheries Resources headed by the Chief Fisheries Officer. I beg to move.

THE DEPUTY CHAIRPERSON: Honourable colleagues, we are now on consequential amendments as a result of amending clause 4. In clause 13, we do not have any consequential amendment.

With consequential amendments, we do not have any debate. I only need your response because consequentially, they are already amended. I put the question that clause 24 be amended as proposed by the committee.

(Question put and agreed to.)

Clause 24, as amended, agreed to.

Clause 62

MS OKORI-MOE: Mr Chairperson, the proposal is that clause 62 is amended in clause 1, by inserting immediately after the word “issued” the words “by the Chief Fisheries Officer” and by deleting subclause (2), because it is a consequential amendment arising from centralising the licencing mandate. I beg to submit.

THE DEPUTY CHAIRPERSON: Honourable colleagues, I put the question that clause 62 be amended as proposed.

(Question put and agreed to.)

Clause 62, as amended, agreed to.

Clause 84

MS OKORI-MOE: Mr Chairperson, the proposal is that clause 84 is amended in subclause (1) by substituting the words “a District Fisheries Officer” with the words

“the Chief Fisheries Officer” and by deleting subclause (3).

The justification is that it is a consequential amendment arising from centralising the licensing mandate.

The deletion of subclause (3) is to ensure consistency with clause 56(1) following the centralisation of the licensing mandate. The register of all licenced artisanal processing facilities will be kept by the Chief Fisheries Officer under clause 56(1). I beg to move.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, I put the question that clause 84 be amended as proposed.

(Question put and agreed to.)

Clause 84, as amended, agreed to.

MOTION FOR THE HOUSE TO RESUME

4.50

THE MINISTER OF AGRICULTURE, ANIMAL INDUSTRY AND FISHERIES (Mr Frank Tumwebaze): Mr Chairperson, I beg to move that the House do resume and the Committee of the whole House do report thereto.

THE DEPUTY CHAIRPERSON: Honourable colleagues, I put the question that the House do resume and the Committee of the whole House reports thereto.

(The House resumed, the Deputy Speaker presiding.)

REPORT FROM THE COMMITTEE OF THE WHOLE HOUSE

4.51

THE MINISTER OF AGRICULTURE, ANIMAL INDUSTRY AND FISHERIES (Mr Frank Tumwebaze): Mr Speaker, I beg to report that the Committee of the whole House has considered the Bill entitled, “The Fisheries and Aquaculture Bill, 2021” and amended clauses 4 and 13. I beg to move.

MOTION FOR ADOPTION OF THE
REPORT OF THE COMMITTEE OF THE
WHOLE HOUSE

4.51

**THE MINISTER OF AGRICULTURE,
ANIMAL INDUSTRY AND FISHERIES
(Mr Frank Tumwebaze):** Mr Speaker, I beg
to move that the House adopts the report of the
Committee of the whole House.

THE DEPUTY SPEAKER: Honourable
colleagues, I put the question that the report of
the Committee of the whole House be adopted.

(Question put and agreed to.)

Report adopted.

BILLS
THIRD READING

THE FISHERIES AND AQUACULTURE
BILL, 2021

4.52

**THE MINISTER OF AGRICULTURE,
ANIMAL INDUSTRY AND FISHERIES
(Mr Frank Tumwebaze):** Mr Speaker, I beg
to move that the Bill entitled, “The Fisheries
and Aquaculture Bill, 2021” be read for the
third time and do pass into law.

THE DEPUTY SPEAKER: Thank you.
Honourable colleagues, I put the question that
“The Fisheries and Aquaculture Bill, 2021” be
read for the third time and do pass.

(Question put and agreed to.)

A BILL FOR AN ACT ENTITLED, “THE
FISHERIES AND AQUACULTURE ACT,
2022”

THE DEPUTY SPEAKER: Honourable
members, I thank you for considering this Bill.
We have done our noble duty. This is part of
ensuring that, indeed, we do conform to the
rules.

Congratulations honourable minister,
honourable chairperson and honourable
colleagues. *(Applause)* I hope we have
managed to get a win-win situation so that we
do not set a precedent that this House favours
Force A against Force B. This is very important
if we are to remain a House that is trusted by
all.

I direct the Clerk to expeditiously transmit the
Bill for Presidential assent in line with Rule
143(8) of our Rules of Procedure.

BILLS
SECOND READING

THE UGANDA HUMAN ORGAN
DONATION AND TRANSPLANT BILL,
2021

THE DEPUTY SPEAKER: Colleagues, on
this Bill, I want to report that today, we had a
meeting where we were reconciling positions.
Some of these laws – these are not Bills of
politics; this is a human organ. There should
not be contention based on A, B, C and D.

Those of you who came to see me today, I was
very busy because we were in that meeting
with the Leader of the Opposition, the shadow
minister, the Attorney-General, the committee
chairperson and the Minister of Health. We
were trying to come up with a position so that
we could guide the House very well because
human organs are not issues, where you will
just stand up to debate and say “I propose that
A, B, C and D be amended” – although it is
your right as a Member of Parliament. So, I
call upon the honourable minister.

BILLS
SECOND READING

THE UGANDA HUMAN ORGAN
DONATION AND TRANSPLANT BILL,
2021

4.54

**THE MINISTER OF HEALTH (Dr Jane
Aceng):** Mr Speaker, I beg to move that the
Bill entitled, “The Uganda Human Organ

Donation and Transplant Bill, 2021” be read for the second time.

THE DEPUTY SPEAKER: Is the motion seconded? (*Members rose*) It is seconded by Hon. Felix Okot Ogong, Hon. Silas, Hon. Nancy – by the whole House.

Colleagues, we uploaded this Bill last week and I urged you to read it. So, the chairperson is going to be given only 15 minutes for presenting the summary. If you wanted to read by listening to the chairperson, you are going to be in trouble.

4.56

THE CHAIRPERSON, COMMITTEE ON HEALTH (Dr Charles Ayume): Thank you, Mr Speaker. I would like to lay the report of the Committee on Health on, “The Uganda Human Organ Donation and Transplant Bill, 2021”. I would also like to lay the minutes of the committee meetings on “The Uganda Human Organ Donation and Transplant Bill, 2021”. I would further like to lay the report of the Committee on Health on a benchmarking visit to Istanbul, Turkey by three members of the committee –

THE DEPUTY SPEAKER: Let us legislate for them. Some colleagues prefer shouting in the Chamber and in the corridors. So, let us do work for them. It will be attributed to all of us. (*Laughter*)

DR AYUME: “The Human Organ Donation and Transplant Bill, 2021” was read for the first time on 5 July 2022 and referred to the Committee on Health, in accordance with Rule 129(1) of the Rules of Procedure of Parliament.

The Committee on Health scrutinised the Bill in accordance with rules 129(2), (3) and (4) and now begs to report. The report is being presented in compliance with rule 130(2), which states: “*The Chairperson of the Committee to which the Bill is referred or a Member of the Committee designated by the Committee or the Speaker shall, after the Motion for the Second Reading has been moved under sub rule (1)*

and seconded, present to the House the report of the Committee on the Bill.”

The background to the Bill

Transplantation of human organs, tissues and cells has become a worldwide practice, which has extended and greatly enhanced the quality of hundreds of lives in patients affected by terminal organ failures. In 1954, the kidney was the first human organ to be transplanted successfully from one identical twin to another and then between siblings, who were not twins.

In 1967, the first successful liver and human-to-human heart transplant was carried out. In 1968, several important developments took place, including the first successful pancreas transplant. In 1977, the first computer-assisted organ matching system was successfully done.

In 1991, at the World Health Assembly in Geneva, World Health Organisation, through Resolution WHA 40.13, adopted guiding principles for human transplant, which have had a great influence on professional codes and legislations. The principles emphasised voluntary donation, non-commercialisation and preference for deceased donors over living donors and for genetically-related donors over non-related donors.

In 2004, the World Health Organization’s 57th World Health Assembly adopted another resolution concerning human organ and tissue transplantation, recommending the use of living donors in addition to deceased donors and to take measures to protect the poorest and vulnerable groups from transplant tourism and the sale of tissues and organs, including attention to the wider problem of international trafficking in human tissues and organs.

Data on the unmet need for organ transplants in Uganda and the entire African region is scanty. In 2016, a total number of 643 organ transplants were performed in Africa. This is lower compared to other WHO regions. In the United States of America, approximately 120,000 people, including children, need an

organ transplant to live. In 2009, they were able to carry out more than 38,000 transplants.

Mr Speaker, in the interest of time, I propose we go to object of the Bill. I will also, in the interest of time, ask to skip that and go to the justification of the Bill. Worldwide, there is a sharp rise in human -

THE DEPUTY SPEAKER: That one was done by the minister. Then when you go to committee observations and recommendations, honourable member, this is what you handle at Committee Stage because you repeat it here, and then when we go to the committee stage, you again will repeat it. Yet we also allow debate at committee stage.

DR AYUME: Thank you, Mr Speaker. Well guided. Bullet No.6, Mr Speaker: Compliance with Gender and Equity Human Rights and Sustainable Development Goals. The Bill speaks to the above. So, I would also recommend that I skip it and go straight to bullet No.7, which is: committee observations and recommendations.

THE DEPUTY SPEAKER: That is where I was saying that we are going to be repeating ourselves, which is usually unnecessary. What is important is to capture the whole report because when you go to the committee stage, what you are saying in your observations - since it is clause by clause; on the clauses you are going to amend - then we shall repeat it at committee stage; it is double work although the format of the report is always like that.

Just give a summary to Members, and the major salient issues you have picked out as a committee in about three minutes, and then you call your colleague.

DR AYUME: Thank you very much, Mr Speaker. In summary, this is a very important Bill. I had given the statistics globally, then coming to the African region that in organ transplant - we are really about two decades behind. The need is there. There are very many people on dialysis, especially for the kidney, which is the most transplanted solid organ.

As a country, we have a backlog of a number of patients who are on dialysis but long-term would benefit from kidney transplant.

When we go to the skin; in the Burns Unit, the plastic surgeons are grappling with a lot of mortality - patients we could have saved. Third-degree burns: more than 50 per cent area coverage; we lose them because we do not have an enabling law to allow us to transplant skin, for example, from a mother to a child.

In novel areas such as the placenta; science has shown that we could also transplant the placentas onto people with more than 50 degrees burns. Mr Speaker, the point I am trying to allude to here is that this is a very important Bill; we need it as soon as yesterday.

However, a very important Bill like this is under a lot of threat. One of our biggest threats is organ trafficking. A lot of safety nets have been captured in this Bill to cater for that - from punitive measures to deterrent fines; these fines do not only go to those involved in trafficking but also to the medical workers who are involved and the health facilities where some of these vices occur. Mr Speaker, thank you very much. I beg to submit.

THE DEPUTY SPEAKER: Thank you, Chairperson. Clerk, capture the whole report on the *Hansard*. I understand there is a Minority Report; so Dr Batuwa, use five minutes. Today, we spent about three hours with the Leader of the Opposition; it was a hectic day but we managed at least to come to a consensus on very many aspects.

(The report is appended hereto.)

5.00

DR TIMOTHY BATUWA (FDC, Jinja South Division West, Jinja City): Thank you, Mr Speaker. I present the minority report on "The Uganda Human Organ Donation and Transplant Bill, 2021." The members that signed this report were Dr Opio, Dr Lulume Bayigga, and myself. We signed it because we ideally agreed with the majority report in certain areas but we had a few areas where we

dissented and these are the areas I am sharing with you:

1. We found a need to establish how consent is arrived at. In the draft, it talked of a close relation. In normal practice, when you are sick in hospital, that person who is by your bedside is normally consulted and takes decisions on your behalf, if you are unconscious. So, we abandoned that position knowing that the people who could be close and the circumstances and the need for consent under donation and we went on for next of kin.
2. Next of kin is not defined in the Bill. We rely on the definitions, which are in other laws of the land and one of the laws is the Administrator-General's Act where next of kin includes a widower or widow of a deceased person or any other person who by law would be entitled to Letters of Administration in preference to a creditor or legatee.

So, we found the need of defining "next of kin" in this law. If we do not do that, it is very ambiguous and if you go to a hospital and fail to pay the bill, that hospital to which its creditor could be your next of kin and take a decision on whether you should donate an organ or not.

3. We dissented on the powers of the minister -

THE DEPUTY SPEAKER: Honourable colleague, in a meeting where you had your Leader of the Opposition, can you also update from the discussion - because people spent around three hours engaging; conceding on some and insisting on some. Can you also update us because you are going to take us back as if we spent the whole morning doing nothing?

DR BATUWA: Thank you, Mr Speaker. The position I got from my LOP – how to proceed is that we present the way we were before such that Members get the mind we had, but when it comes to the Committee of the whole House

where we have reached consensus, we shall not deviate.

THE DEPUTY SPEAKER: Then what I will do – when we go to the Committee of the Whole House – it would be a repetition to present, then go to the Committee of the whole House, you again repeat the same. So, when he stands up to present, you will be standing up to give your view as a dissenting view and then we guide properly.

DR BATUWA: The guidance I need, Mr Speaker - the tradition is, in the Committee of the whole House, you give your view; you do not debate.

THE DEPUTY SPEAKER: I will allow you. You will explain. Here we are not doing a debate. A debate on Bills is on principles and objectives, not on clauses. But an explanation can be on a clause. So, you will explain.

DR BATUWA: Mr Chairperson, with your assurance that I will be given an opportunity to explain, thereby laying the foundation to which my mind is addressing that point, I am obliged to go by your counsel.

THE DEPUTY SPEAKER: Thank you.

DR BATUWA: Thank you, Mr Speaker.

THE DEPUTY SPEAKER: Thank you, Dr Batuwa. Colleagues, I am going to open up the debate. I do not know if you want to debate. Or we can go to the second reading because these are things, which are clear. We can have more time at Committee Stage.

DR BATUWA: Mr Speaker, the procedural matter I am rising on is that the essence of the debate is to look at the observations in the majority and then the observations in the minority such that we reach a consensus.

In a situation where the minority has not yet been stated, I want to seek your guidance, on whether it would be prudent to do a debate at this stage. Maybe we could do it in the Committee of the Whole House also. Thank you.

THE DEPUTY SPEAKER: That is what I guided on and now you are again misleading the House. A debate on a Bill is on principles and objectives. The observations in a Bill are on clauses; that is the difference. Now, just go into generalities. Colleagues, let us go to the next item.

Colleagues, I now put the question that the Bill entitled, “The Uganda Human Organ Donation and Transplant Bill, 2021,” be read the second time.

(Question put and agreed to.)

BILLS
COMMITTEE STAGE

THE UGANDA HUMAN ORGAN
DONATION AND TRANSPLANT BILL,
2021

THE DEPUTY CHAIRPERSON: Thank you. While I directed that you capture both reports in full, I want us to go clause by clause. I will be giving the mover of the minority report and the chairperson a chance, so that we all submit clause by clause to help us come up to a consensus and we move.

Clause 1.

THE DEPUTY CHAIRPERSON: I put the question that clause 1 stands part of the Bill.

(Question put and agreed to.)

Clause 1, agreed to.

Clause 2

5.13

THE CHAIRPERSON COMMITTEE ON HEALTH (Dr Charles Ayume): In clause 2, we propose that we delete paragraph (c). The justification is that the clause would create an assumption that Mulago is already and has met the standard criteria for accreditation and designation.

Secondly, different types of organs can be harvested yet Mulago may not be in position to

offer the entire spectrum of transplant services yet the bill under clause 3 provides for over 19 services to be offered and implemented and other centres may be ready to commence operation before Mulago.

Further, we propose to insert the word “accreditation” before the word “designation.” The justification is to allow due process for accreditation and designation to take place.

c) Insert a new provision after, paragraph (i), to read: “to provide for a framework for research and development.” The justification is that research is a repository for knowledge and can be used for teaching purposes and for the development of new techniques, prevention and policy development.

DRACENG: I concur.

THE DEPUTY CHAIRPERSON: Honourable colleagues, I put the question that clause 2 be amended as proposed.

(Question put and agreed to.)

Clause 2, as amended, agreed to.

Clause 3

DR AYUME: We propose to amend clause 3 by deleting paragraph (c), and deleting reference to blood wherever it appears in the Bill. The justification is that the regulation of blood transfusion, which is already going on in hospitals and other health centres would affect the operations of health centres. The current facilities where blood donation has been going on will fall short of the criteria for accreditation and this will affect the current supply of blood.

Therefore, it would be proper for blood to be regulated under a separate legal framework.

b) In paragraph (n), by substituting “cells” with “hair.”

c) By substituting paragraph (s) with the following: “Any other organ cell or tissue

for the purpose of transplantation.” The justification is to be all-inclusive and accommodate emerging developments in science.

DR ACENG: I concur.

THE DEPUTY CHAIRPERSON: Honourable colleagues, I put the question that clause 3 be amended as proposed – yes, honourable member -

DR NOAH MUSA: Thank you. I want to thank the chairperson of the committee and the Minister. However, I have not seen the reason for deleting subclause (n) on the cells. I think what we would do is to include “hair” on the list. We can do cell transplants independently. If you look at the last clause, which is inserted, they say, “...any other organ cells and tissues,” which means we need to maintain the word “cells” in the least. Thank you.

DR AYUME: Mr Speaker, all the organs listed here are made up of cells. Cells constitute tissues, tissues constitute organs. So, mentioning cells, here again, would be a repetition. We decided to delete it and replace (n) with “hair.”

THE DEPUTY CHAIRPERSON: Dr Musa, is that okay?

DR NOAH MUSA: It then says by substituting paragraph (s) with the following: “...any other organ, cell or tissue for the purpose of transplantation.” Now here we are contradicting.

DR ACENG: Mr Chairperson, this Act applies to the donation and transplantation of human organs, tissues and cells. We do not need to list cells again, under the organs or tissues or cells that we are donating. It is already implied in clause 3.

THE DEPUTY CHAIRPERSON: Thank you. Hon. Musa. Do you concede on that?

DR NOAH MUSA: Yes, I concede.

THE DEPUTY CHAIRPERSON: Honourable, are you on the same page?

DR NOAH MUSA: Thank you, Chairperson. All that has been listed as part of the organs to be recommended in this Bill – “cells” constitute even other parts of the body, which have not been mentioned here. I think leaving the word “cells” does not cause us any harm. The word “cells” will appear even under the word “hair.” It does not contradict anything to make the word “cells” appear there also.

DR ACENG: Mr Chairperson, I will be repeating myself if I state this again. Clause 3, the Act is referring to the donation and transplantation of organs, tissues and cells. And paragraph (s) again captures that and says, “...other related organ cells and tissues.”

THE DEPUTY CHAIRPERSON: Honourable colleagues, I put the question that clause 3 be amended as proposed.

(Question put and agreed to.)

Clause 3, as amended, agreed to.

Clause 4

DR AYUME: In clause 4 –

a. Substitute the definition of “tissue evaluation” with the following:

“Tissue evaluation” means the analysis of tissue for viability, abnormality, contaminants, compatibility and micro-organisms to determine its fitness for purpose.”

The justification is the current definition in the Bill is narrow.

b. Insert the following new definitions:

i) “Autograft” means tissue which is transplanted within the same person;

ii) “Allograft” means tissue that is transplanted from one person to the other;

- iii) “Brain dead” means a condition where a person is on an artificial life support machine with irreversible cessation of all functions of the entire brain, including the brainstem, confined by electro-encephalogram and an independent team, and the person has no chance of revival;
- iv) “Bone marrow” means the soft, spongy, gelatinous tissue that fills the medullary cavities or the centres of bones, which is responsible for the production of red blood cells, white blood cells and platelets;
- v) “A retrieval team” means an intensive care team that is capable of handling a patient on life support;
- vi) “Stem cells” mean undifferentiated cells originating from adult or embryonic tissue that can turn into specific cells, as the body may need them;
- vii) “Stem cell transplant” means a medical procedure performed to replace a bone marrow that has been damaged or destroyed by disease, infection or chemotherapy.

The justification is for clarity.

THE DEPUTY CHAIRPERSON: Honourable minister?

DR ACENG: Mr Chairperson, I concur. However, I would like to propose an amendment to the definition of “bank” under the same clause. It states:

“Bank” means an entity within the designated transplant centre that provides or engages in one or more services involving the storage of organs, tissues or cells from the living or deceased individuals for transplantation and assessing donor suitability, including screening, recovery, processing, evaluation, testing, quarantine, labelling, storage, distribution, tracking, disposition and recall of tissue.”

I propose that we delete the last three words “*Including blood banks*”, as proposed in clause 3. Thank you.

THE DEPUTY CHAIRPERSON: Thank you. Honourable chairperson?

DR AYUME: Mr Chairperson, I concur with the honourable minister.

DR NOAH MUSA: Thank you, Mr Chairperson. I just want the House to look again at the definition of “autograft” and “allograft”. I think it is a bit narrow if you limit it to tissue. We can say:

- i) “Autograft” means tissue or organ, which is transplanted within the same person.
- ii) “Allograft” means *tissue or organ that is transplanted from one person to another*. Thank you.

THE DEPUTY CHAIRPERSON: Thank you. So, do you want us to add the words “tissue or organ”? Honourable minister, what would that imply because he is saying you add the words? Aren’t organs made of tissues because it is cells, tissues and then organs? Wouldn’t that be a repetition?

Colleagues, there is what is clear for you and what is clear in the drafting terms. Drafting and legislative language is very clear. That is why we have the draft teams; the First Parliamentary Council and the Attorney-General. After the minister has proposed, they have to go - so that we try to avoid repetitions to ensure our laws do not look dirty. The moment it is captured - yet you just want to say “It has to be clear”; Hon. Musa, wouldn’t that be a repetition? You are the one who asked.

DR NOAH MUSA: In my view, it would not be because you can transplant tissue or a whole organ. If you are transplanting an organ from one person to another that becomes “allograft”.

MR KIRYOWA KIWANUKA: I think what the definition is saying is transplantation. As you said, transplantation can mean tissue,

cell or organ. If we draft it that way, then in every clause where we have the word “transplantation”, we shall need to add tissue, blood or cell.

Once you define “transplantation” to mean this, then you start using that word. You do not continue repeating what you defined.

THE DEPUTY CHAIRPERSON: We shall also allow drafters to – Honourable colleague, this is now beyond science; it is legal to some extent.

Honourable colleagues, I put the question – (*Dr Batuwa rose*) - Dr Batuwa, listen. You are a member of the committee. This is not one of the issues you captured in your minority report. I have your clauses from clause 8 in your minority report. Just use the microphone.

DR BATUWA: Mr Chairperson, on page 2 of my minority report, item (a) should be addressed in clause 4. First and foremost, the majority report abandoned the word “close relation” when we were discussing how to derive consent from:

1. A dead person;
2. A person who is unconscious;
3. A child because legally, he or she is below 18. So, how do we derive consent from those people?

What came to us is getting consent from close relations. In the meeting, we abandoned this because we had fear, as the committee in the majority report, on who a close relation could be. We had fears of a co-wife giving consent in such a situation or a stepmother giving consent where a mother exists. So, we went for the next of kin.

Having gone for the next of kin, it is important, under interpretation, to define in this clause who the next of kin will be in the context of this law, not in the context of any other law of the land. So, let us define “next of kin”.

We know there are people here you would expect that the spouse can take decisions on

their behalf, yet they trust their own children more than the spouse.

THE DEPUTY CHAIRPERSON: Honourable colleague, when you had that long debate on close relation versus the next of kin, what did you agree on? Just tell us after you changed it again.

DR BATUWA: We agreed to use the words “next of kin” but I am worried about us speeding off and leaving clause 4 before interpreting it. The concern is that –

THE DEPUTY CHAIRPERSON: No. I am not speeding off. I am allowing you. If I was speeding off, I would not have allowed you.

DR BATUWA: Mr Chairperson, we agreed to use the words “next of kin”.

THE DEPUTY CHAIRPERSON: Attorney-General?

MR KIRYOWA KIWANUKA: I think we are using the Bill and the report that has been presented by the committee. The committee has not proposed, from what I have, to drop “close relative” and replace it with “next of kin”. So, I do not know which clause we are talking about.

DR BATUWA: Mr Chairperson, our worries still subsist. This law is deliberating for Uganda. The Uganda we know has men who have two wives – I do not know whether we also have women who have two husbands. However, in this kind of scenario, the law is not clear on who should take the consenting decision.

We wanted the person to be affected by the law; to have an option or a way of deciding who should take these decisions on his or her behalf.

THE DEPUTY CHAIRPERSON: Honourable colleague, make my work easy. I am reading your report. You are a member of the committee. Your first amendment is on clause 5(1) – that is your own report. You also know, under rule 134, that you are limited. That is why I emphasised it.

Why didn't you raise this as one of the issues in your report?

DR BATUWA: Mr Chairperson, the environment in which this report was done - it was a very hurriedly done report but you can clearly see on page two -

THE DEPUTY CHAIRPERSON: Honourable member, first, take your seat. You will not work with colleagues – and in your report, you say you have agreed on majority of the issues; and that you have a few issues. You came to the Floor to ask for an extension of time and we even extended it to you, as a committee. You, again, consumed all of it and needed more time. You have sat today, we spent the whole day.

One of the things I am concerned about – I do not know why leaders sit; then come and battle it on the Floor. You are bringing up issues, which you did not bring up in your report and I am saying the rules do not allow that.

MR BASALIRWA: Thank you, Mr Chairperson. Maybe to help my colleague, we should just try to place it in context. Is it his view that he wants “next of kin” to be included in the interpretation clause? If so, let him say so and follow the procedure. I think it would lessen the burden.

THE DEPUTY CHAIRPERSON: If it is you, honourable member, I will allow you. Why? He is a member of the committee. When you are a member and the committee writes a report, you have a chance to write a minority report and you write that minority report, but do not raise an issue as one of the issues in your minority report. You reach here and want to bring - maybe you can take it up for him. I will allow you, but not him.

MR BASALIRWA: Mr Chairperson, now that I am seated near him –(Laughter)- and we were together in Mwiri – he is my younger brother - I am going to ask him. With his indulgence, I will move at the appropriate time.

THE DEPUTY CHAIRPERSON: Also, colleagues, if you know that you are bringing

any amendment, I will not allow you, reason being that I warned you last week. I said: “We have uploaded this report.” Rule 134 is very clear. You need to give notice to proposed amendments. You went and sat. If you never saw any amendment, I will not be gagged by your failure to comply with the rules.

That is why I have emphasised to you that when we give you reports, read them. You do not read on the Floor when they are presenting. Therefore, I will not give you the opportunity and inculcate a culture of impunity of us not reading and then come to cause confusion on the Floor.

Where I can allow it, it will be at my discretion. However, since I gave you a whole week, I will not allow that.

MR BASALIRWA: Mr Chairperson, I want to support you on that. The rule you cite is very clear on amendments, where amendments are major. Again, the discretion is yours. The notice has to be given. Those amendments must be discussed in the committee. It cannot be an ambush.

However, there are amendments that are minor. Those could be accommodated –

THE DEPUTY CHAIRPERSON: It is me who chooses what is minor.

MR BASALIRWA: Yes, I am just amplifying your point that, maybe, for purposes of understanding each other, you do not completely close out amendments. Give colleagues an opportunity and then you decide.

THE DEPUTY CHAIRPERSON: For purposes of clarity, for such an important Bill – I gave you a whole week; I did not receive any notice of an amendment – whether major or minor – yet you know I am the one who will determine whether it is major or minor. (Laughter) It shows me that you are satisfied with the Bill.

What I want to emphasise is a simple point: where we are required to read, let us read. I have seen it: we do not read. We read from

here. When a minister does not read the whole statement, you do not debate. We have to stop it.

DR BATUWA: Mr Chairperson, before I sit down, on this issue, allow me - because I have also been very cooperative where need be. The mind we had was that in many Ugandan families, you find that the person does not rhyme well with the brothers, maybe because of issues of land or the person has many spouses.

Therefore, we cannot derive consent from any of the listed people. We know that there is preference. Somebody may want a particular family member to be the one consulted on matters of consent.

As such, it was our considered view that for consent – and it being a major issue in organ donation and transplant – we thought that we should now address ourselves to the word “next of kin”. This name can be got from historical documents. There are very many documents we interact with and we are required to state the next of kin. Even when the person is unconscious, we can consult historical documents to get the next of kin.

We can also get next of kin from consulting that very person prior to them being unconscious. The proposal and the way we are moving forward is that consent should be derived from the next of kin.

THE DEPUTY CHAIRPERSON: Colleagues, something funny happened in today’s meeting. You are going to force me to formalise what we had informally.

Hon. Batuwa gave us a very good example. We were tired and he made us laugh and relax. He said, “You see, the problem with next of kin is that it might mean one of your creditors.” *(Laughter)* The Leader of the Opposition was there. He said: “You could be doing badly, and you are on your death bed. If someone has your money he may sign for your organ to be harvested so that he gets the money; he pays his loan and you are declared dead.” *(Laughter)*

That was Hon. Batuwa. The way you have laughed is how he made us laugh. That is why he agreed with “a close relative”. He said “next of kin” would be dangerous because when some of us are taking loans, we include our creditors as next of kin.

Attorney-General, can you help us with this?

MR KIRYOOWA KIWANUKA: Thank you, Mr Chairperson. I think as you have stated, this is a serious Bill – dealing with matters of life and death. If we leave these legal definitions - next of kin - we use them in so many different cases, so many different scenarios, for so many different purposes; you can have a next of kin for different things. That is why we thought that “close relation”, which means a spouse, son, daughter, father, mother, brother or sister; it cannot include your debtor, your neighbour or any next of kin that you may have.

By the way, honourable colleagues, once your decision to donate is voluntary, that means you are there and you are conscious. So, whatever you are doing is also provided for on how you exhibit your personal consent; no one else can consent for you.

THE DEPUTY CHAIRPERSON: And this is for the living donor because for the already dead donor, you would have given your consent before dying. But, for the living donor, this is where we need this. Colleagues, I do not want us to go far; we are going to open a long debate on something, which is very clear. This is a Bill that we are trying to tighten as much as possible.

Hon. Batuwa, the way the Attorney-General has put “close relation” –

DR BATUWA: Mr Chairperson, now that “close relation” has been defined the way it is, it is ambiguous and unless we define “next of kin” in the context of this Bill - unless we define it, but if we take it the way it is, next of kin is also ambiguous. So, we can go with what the Attorney-General has given.

THE DEPUTY CHAIRPERSON: But let me ask you colleagues - You see, whatever you are talking about, “next of kin” is not in the Bill.

So, Attorney-General, what the Members are saying is that in cases where you have the next of kin - I think the two clauses, we change them to “close relation”.

MR BASALIRWA: The concern of the shadow minister is clarity. My brother the learned Attorney-General and senior counsel, clarity because you see, you run a risk of interchangeably using the word “close relation” and “next of kin”; because, for example, it appears in clause 64.

So, just to clarify; if we adopt one statement, we move, because if you do not, then even the implementation of the Bill becomes particularly difficult.

MR KIRYOWA KIWANUKA: I think that is what the Chairperson was reporting. In the meeting today, we said that wherever “next of kin” appears because it is used in many different places in different ways, we use “close relations”.

THE DEPUTY CHAIRPERSON: That would sort out issues of clause 64 and clause 66, which we shall be coming to. So, I put the question that clause 4 be amended as proposed.

(Question put and agreed to.)

Clause 4, as amended, agreed to.

THE DEPUTY CHAIRPERSON: Colleagues, just go back, read clause 4, and look at “close relations”. I have told you, if you refused to read, this is not a debate. You spent the whole week with the report but you never sent in a single comment; are you getting me? Now, a debate does not mean resolutions. And the debate of any Bill - if I repeat myself for the last time - is on principles and objectives, not clauses.

I am implementing your rules; I am not inventing any rules. These are your rules.

Procedure? Though in our rules, the Committee Stage is closed to procedure but I will allow you.

MS AISHA KABANDA: Thank you, Mr Chairperson, for your guidance. I just want to seek your guidance on when we speak to these clauses. Because if we seek to speak to them and you say there is no debate at this time, when do we speak to them to give our ideas about them? For example, some of us did not understand the “close relations” - what it was. We disagreed, and you said there is no debate at this time; when do we speak to the particular clauses?

THE DEPUTY CHAIRPERSON: Honourable member, did you read the report? When you read the report, which report did not talk about “next of kin” because in the committee report, they did not talk about “next of kin”. It is not part of the definitions. Why didn’t you bring it as an amendment if you wanted it?

Therefore, colleagues, I will not allow reading of reports here and then you derail us. This is going to be your learning curve. I will not allow it.

MS AISHA KABANDA: Mr Chairperson, the learning curve is on a very serious Bill; this is life, Sir.

THE DEPUTY CHAIRPERSON: I put the question - if it was life, you should have taken it as a matter of life and death.

MS AISHA KABANDA: Mr Chairperson, I wanted to speak on the “close relation” not “next of kin”-

THE DEPUTY CHAIRPERSON: Honourable member, under our rules, you are allowed to recommit any clause.

MS AISHA KABANDA: Most obliged.

THE DEPUTY CHAIRPERSON: I put the question that clause 5 stands part of the Bill - sorry; the shadow minister had an issue.

DR BATUWA: Thank you, Mr Chairperson. We have an issue on clause 5. Clause 5(2) gives this council an opportunity to be an independent council. Again, in the very subclause (1), this very clause withdraws that independence.

How? Clause 1 reads, “The minister may give directions in writing to the council with respect to the policy to be observed and implemented by the council under this Act and the council shall” the word is “shall”- we should underline it – “...shall comply with those directions.”

Therefore, in law, the word “shall” coming before a verb leaves you with no option but to comply.

Now, in subclause (2), it reads, “The directions given by the minister under subsection (1) shall not adversely affect or interfere with the independence of the council, or the performance of the functions and exercise of the powers of the council under this Act.”

Mr Chairperson, it is our view that we delete from the words, “and the council shall comply with those directions” because when you look at the functions of this council, among many, is that one of the waiting list and regulating the allocation of organs.

In this very Bill, there is no policy on how people on the waiting list are going to access organs. It is not clear, whether it is first come, first served; it is not clear whether preference is given to somebody who has donated before; it is not clear whether we are giving organs to people who are critically ill.

Therefore, we see a situation where the council takes a decision to allocate an organ to somebody, who, in their view deserves and then the minister comes out contrary - and we know in our land here, that for the first time, we have a minister who is a doctor by profession.

So, it is our considered view that “and the council shall comply with those directions” is deleted. We can hold the statement that the minister may give directions in writing to the council with respect to the policy to be observed and implemented by the council under this Act.

DR AYUME: Mr Chairperson, I think we had a long debate on that in the morning and the shadow minister seemed to have conceded. I am not sure what transpired during lunch that he has taken steps back.

Anyhow, the minister is not going to work in isolation. The council is going to give technical guidance. Even if the minister is not technical, it will be on the recommendations of the council. However, I would also want to draw your attention to the fact that the issue being discussed here is policy. The minister may give direction in writing to the council with respect to the policy. Removing the word “shall” means the council can usurp its powers and decline the quality direction –

THE DEPUTY CHAIRPERSON: Honourable colleague, I have learnt a lesson. Next time, I will use my time very well other than spending it with colleagues who later on do not respect what was agreed.

First, on this issue, the minister will only give policy direction and it shall be gazetted. So, tell me really, which kind of day-to-day interference would the minister make that would require to be gazetted? Every day, I want the council to change A, B, C, and D so, I issue a gazette. Then the minister will be issuing a gazette every day. Whatever policy direction the minister gives to the council, it must be gazetted. This is a clear safety net and it is under this clause, honourable member. The clause says, “the minister shall cause a copy of any directions given to the council under subsection (1) to be published in the gazette” and they are limited to only policy, not the day-to-day operations.

DR BATUWA: Mr Chairperson, for the avoidance of doubt, maybe I should be clear. I thought that the way we are proceeding is that I should share the mind I had before the meeting we were in for consensus such that – (*Interjection*)– we conceded on certain points but some of these issues exist in the minority report. And the Members who signed the minority report, were not in that meeting –

THE DEPUTY CHAIRPERSON: Then you should have told me; I would not have called that meeting.

DR BATUWA: I should have stated my minority at the right time but do you remember the request I made, Mr Speaker? The request I made before agreeing to the arrangement we have now - because this arrangement is new - I requested that unless I abreast the House with the mind we had while making the minority report - do you get it?

Otherwise, I was not given an opportunity to –

THE DEPUTY CHAIRPERSON: Leader of the Opposition, can you guide us? Colleagues, let the Leader of the Opposition guide us.

MR MPUUGA: Thank you, Mr Chairperson. You know, this meeting took us from 10.30 a.m. to 1.30 p.m. And we tried to cover a lot of ground but we were also circumspect as to some of the issues that could arise when the plenary sits finally.

Mr Chairperson, I would like to advise that the committee chairperson presents the position as taken in the meeting. And if the honourable shadow minister feels that the position has been probably migrated, he would rise and return us to the centre. That would help us to go over this matter better.

THE DEPUTY CHAIRPERSON: Is the honourable colleague satisfied with that?

DR BATUWA: Mr Chairperson, how else can I fail to be satisfied by the directive of my Leader of the Opposition? I am very satisfied.

THE DEPUTY CHAIRPERSON: Thank you, Leader of the Opposition, for guiding the House. Otherwise, I was really getting shocked. I kept looking at my colleague, Dr Batuwa, to see whether this was the colleague I was with in the meeting. And I supported many issues in the meeting.

Attorney-General, you can guide because we captured it very well.

MR KIRYOWA KIWANUKA: Mr Chairperson, clause 5, from my record, it was agreed that it should be kept as it is because sufficient safeguards are being put in place to ensure that the minister cannot misuse that authority.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, I put the question that clause 5 stands part of the Bill.

(Question put and agreed to.)

Clause 5, agreed to.

Clause 6

DR AYUME: Thank you, Mr Chairperson. Delete clause 6.

The justification is that the type of assistance and support, which the minister is supposed to offer, is not clear. The ambiguity posed by the provision can, therefore, easily be subjected to abuse by wrong elements.

DR ACENG: Mr Chairperson, I concur.

THE DEPUTY CHAIRPERSON: Thank you - [Dr Batuwa: "We also concur."] You did not raise any matter on it. Dr Batuwa, I have your clauses here: they are 5, 8, 10, 28, 29, 30 and 34. I have them well listed, where you raised issues. On the rest, you agreed with the committee.

Colleagues, I put the question that clause 6 be deleted.

(Question put and agreed to.)

Clause 6, deleted.

Clause 7

DR AYUME: Amend the provision as follows –

- a) Amend the crossheading and the headnote to read "Uganda Human Organ Donation and Transplant Council."

The justification is that this is for clarity and uniformity.

- b) Amend clause 7(5) by substituting the words “Uganda Medical and Dental Practitioners Council” with the words “Relevant Health Professional Council.”

The justification is to accommodate all other professional bodies.

DR ACENG: I concur.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, I put the question that clause 7 be amended as proposed.

(Question put and agreed to.)

Clause 7, as amended, agreed to.

Clause 8

DRAYUME: Clause 8 is amended by inserting the words “sociology, pharmacy, IT, surgery and medicine” after the words “financial management.”

The justification is to accommodate the transitioning of medicine in the near future.

THE DEPUTY CHAIRPERSON: Let the Attorney-General capture before then Hon. Dr Batuwa can explain something if he is not satisfied. This is because he had raised a minority opinion on clause 8.

MR KIRYOWA KIWANUKA: Mr Chairperson, we took the considerations given by the majority and the minority reports. The minority report talked about including certain qualifications for the board, while the majority report had a request to add Director-General, because this looks like a fulltime job. They cannot have two jobs because the council is going to be very busy. So, we proposed that clause 8 gets two clauses:

- a) That there shall be a council of seven members.

- b) That members of the council shall be persons of high moral character and proven integrity who are qualified and have experience in specified fields such as medicine, surgery, intensive care, law, anaesthesia, financial management, bioethics and investigative specialists, sociology, pharmacy and IT.

The justification was that the council’s needs may change from time to time and therefore, it may be difficult to prescribe today, the kind of qualifications they will specifically need at any point on the council. So, we thought this was inclusive; but the minister had to explain why they would deviate from these kinds of qualifications. I beg to submit.

THE CHAIRPERSON: Let me first get it. He had a minority opinion -

DR BATUWA: I had a minority opinion, though it should not be mistaken that we did not arrive at a consensus on this issue.

The minority opinion we had is that the qualifications that were listed come with bias on the recipient or the patient on the council. We thought that we should include – because these are all doctors; generally, for a doctor, what is important is the wellbeing of the patient. All the decisions you make should be decisions that help the patient. We, therefore, believed that there should also be people who have a bias of the donor such that there is consensus arrived at.

This is why we came up with a social scientist who has knowledge and can interpret, understand and relate or help in formulating policies that relate with society because this is where donors come from. This was the mind we had and the consensus we reached is what the Attorney-General has given that we open it up as and when the minister sees relevancy, so that those various professions can be brought on board. So, I concede to the position we took in the meeting.

THE CHAIRPERSON: Hon. Cecilia Ogwal?

MS CECILIA OGWAL: Mr Chairperson, on the composition, where they said the membership of the council should be seven, I propose that 50 per cent must be women because many of the medical challenges are women-related. I would like to know how many women are in this council.

Mr Chairperson, I would be comfortable with 50 per cent because many of the challenges are women-related. I would like to know this because I was not in this private meeting our LoP attended. *(Laughter)*

THE CHAIRPERSON: Honourable colleague, the issue of gender is a constitutional matter. The Constitution settles it and the Constitution is supreme. So, it is covered under the Constitution.

MS CECILIA OGWAL: Mr Chairperson, the Constitution stipulates 30 per cent, and you know that Parliament now has adopted 40 per cent. Since health is extremely important, we can adopt 50 per cent.

THE CHAIRPERSON: Honourable member, the Constitution says "...at least a third." It can even be 100 per cent. So, on issues which are clear within the Constitution, I would say we do not – *Mama*, we have never forgotten you.

MR KATUSABE: Thank you very much, Mr Chairperson. I also thank the shadow minister and Attorney-General.

Mr Chairperson, we are like in a theatre attending to a patient on life support. You have served on the university committee including search committees identifying the best brains that we have in the country. That is the Presiding Officer that we have.

Mr Chairperson, legislation requires clarity and precision. I am struggling to recognise why we cannot be clear on the element of qualifications. We are leaving it open-ended; a mark dispelling the fact that this should be opened wide to different academic and scientific fields. But in legislation, we have to be very clear as far as qualifications are concerned.

In conclusion, I ask that with this particular Bill, the duty falls upon every one of us to give the opportunity to the best brains we have in Uganda.

THE CHAIRPERSON: Honourable member, you are now handling the principles.

MR KATUSABE: Mr Chairperson, I would even go to the extent that the head of this council should be a professor in the relevant field; a medical professor because I see social scientists or political scientists like me, coming on board. I do not see myself qualified to head that council, and I think this particular Bill should really be very clear as far as guiding us is concerned.

Mr Chairperson, a head of such a council must be of a particular qualification. In this case, he or she must be a professor, particularly one with a PhD – *(Member timed out.)*

THE CHAIRPERSON: Thank you. Honourable colleagues, if you heard the Attorney-General properly, he said the world is evolving at a very fast rate. For example, today, we discussed the issue of the Petroleum Authority where we formed a law and specified who should be on the Petroleum Authority board. At that time, we were looking at qualifications in petroleum. That is where all our eyes were.

In the process, just hardly four years, we have gone into commercialisation of our oil. At that time, Parliament had not looked at economists; now they need economists. So, what are they doing? They are looking around and proposing to come here and amend the law so that they can have economists on the board.

When you just bring somebody from outside, it becomes difficult; that person cannot have a say like a substantive member of the board. Instead of tying down the minister - we gave examples and we included sociologists and pharmacists as they had brought it.

We felt that whenever there is a big transformation in society, new trends emerge

– the minister should be able to bring on board all those changes without referring back to the law or spending a lot of money on consultants.

MS NYAKIKONGORO: Mr Chairperson, going by the -

THE CHAIRPERSON: Switch on the microphone.

MS NYAKIKONGORO: Thank you, Mr Chairperson. Going by the amendment of the Attorney-General -

THE CHAIRPERSON: We do not deal with small things here. *(Laughter)*

MS NYAKIKONGORO: Going by the amendment of the Attorney-General, I think the title of the clause should change to “Composition and Qualifications.”

THE CHAIRPERSON: Composition is provided under clause 7. Clause 8 is qualifications. That is why I want to give room to people when they are cleaning up because when the Attorney-General was submitting on the *Hansard*, he said “There shall be a council of seven people” which would be a repetition because it is already covered under clause 7.

DR BWANIKA: Thank you, Mr Chairman. I still have reservations on these qualifications – the many disciplines that we have mentioned. It should be “have had experience in a relevant field”. There is no need for us to mention all these disciplines in the law. It should be “someone who has had experience in a relevant field”. That should be enough.

When we start talking about – now, I am going to start asking why you put financial management. Why do you put it? A relevant field should be enough.

MR KIRYOWA: Mr Chairman, what the Member is saying is the most ideal because it allows the authority to make - however, in order to keep some degree of control, as to how far the minister can go, when we list these – when you are interpreting a clause like this,

we use what they call *ejusdem generis* rule: you must appoint people who are similar or near these kinds of areas. There must be some similarity, meaning, here, you cannot go and bring a trader and tell us they are going to be here because they are not *ejusdem generis* to this kind of group.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, why this helped – for example, to the minister, a pharmacist and sociologist were not important but to Dr Batuwa, they were important – and even to me, because I was supporting Dr Batuwa. We widened but also controlled it a little bit.

Colleagues, I now put the question that clause 8 be amended as proposed by the committee and modified by the Attorney-General.

(Question put and agreed to.)

Clause 8, as amended, agreed to.

Clause 9, agreed to.

THE DEPUTY CHAIRPERSON: (Dr Ayume rose_) Did you have an amendment on clause 9?

DR AYUME: Clause 9 (d) –

THE DEPUTY CHAIRPERSON: No. We shall recommit it because we have already voted on it.

Clause 10

DR AYUME: Clause 10 is amended by redrafting to read: “A member of the Council shall hold office for three years and is eligible for reappointment.”

THE DEPUTY CHAIRPERSON: Honourable minister?

DR ACENG: I concur.

THE DEPUTY CHAIRPERSON: No, there was an opinion. Attorney-General?

MR KIRYOWA KIWANUKA: The minority report was proposing that we have a six-year term, while the majority was saying that we have three years. The minority had a justifiable reason that you lose a resource that is still useful to you in a very short time, yet you may spend a lot of time training and preparing them.

However, the majority was also very careful to say that if the person becomes a problem, getting rid of them becomes a problem because we give them independence and a certain degree of security and protection. The middle ground was that let it be three years and they can be reappointed as many times as they remain useful. I beg submit.

THE DEPUTY CHAIRPERSON: Hon Batuwa?

DR BATUWA: We concede to that new version.

THE DEPUTY CHAIRPERSON: Thank you.

MS CECILIA OGWAL: Mr Chairperson, I remember we looked at one of the Bills recently and decided that if there is to be renewal, it should not be more than once. If you have given three years, and a person serves for another three years, those are six years. We should not make an individual a permanent member of that organisation because anything can happen.

I would rather if the Attorney-General could reconsider – based on the precedents that we have already made – that we should not just leave this renewal open but make it once only.

MS OBIGAH: Thank you, Mr Chairperson. It is very crucial and imperative to always have a term limit because some people become “permanent and pensionable”. Thank you. I request that there must be an insertion of one term.

THE DEPUTY CHAIRPERSON: This was the only opportunity we had where Dr Batuwa supported the removal of term limits. *(Laughter)*

MR KIRYOWA KIWANUKA: Mr Chairman, this kind of thing, like *Mama Cecilia* is saying, is correct. We should have control. However, specialists and consultants of this nature – *(Interjection)*- no, they are there. I will give you an example of what we were struggling with when we were in Makerere. Makerere has an age limit of 70 years for professors. However, a 70-year-old is still useful and vibrant.

Even here, you may want to give the minister the opportunity to use those who are still useful. However, because they are coming up for renewal every so often – six years is a long time and that is why we are saying three years, with regular –*(Interjection)*- the problem with once, colleagues, is that this skill that we are dealing with, of organ transplants, is not highly available to us here.

Restricting it may help now, but it may become a problem in a very short time and we need an amendment.

MS AISHA KABANDA: Thank you, Mr Chairperson. We are speaking about highly professional tasks. In my opinion, actually, three years is too short a time. Five years is good time. If we made it five years renewable once, that would make 10 years of service. It is good time for someone to serve.

Whereas I hear *Mama Cecelia*, who wants term limits over that – in my opinion, I would say we would open forever because they are highly professional but we should say “five years renewable once” so that someone has sufficient time to serve.

It takes away the tension of renewal all the time.

THE DEPUTY CHAIRPERSON: Seconded?

MS NALUYIMA: Yes, I am here to second the five years, renewable once. Thank you.

DR ACENG: Mr Chairperson, we had a long discussion on this. Let us not forget that you may appoint a board and you end up with people with misconduct, bad behaviour and

so on. You do not want to get stuck with such people –

THE DEPUTY CHAIRPERSON: You have the process of removing them.

DR ACENG: Yes. That is why we said that whereas this is a highly specialised board and we are going to spend resources training them, it is nice to have a three-year limit and you reappoint them if you are happy with them – *(Interjection)*– no, we are not saying once because you are spending resources. If they are good, you continue reappointing them. If they are not good, you drop them.

THE DEPUTY CHAIRPERSON: Colleagues, for example, today, one of the specialists we had, Dr Frank from Mulago - I think he was - Dr Batuwa, the Dr Frank whom we had? He is a young person – Oh! He is there. He is one of the few specialists we have in the country. They are not even five in the country; I am told they are three.

So, if you put him on the board, how can you say in six years that he must go away when you have not even trained another one? Even if you train – training does not guarantee you such a specialist. You can train and go through that process but you do not get them.

Colleagues, since we put a very stringent regime on qualifications, performance and monitoring, and since, for the first time, Dr Batuwa has supported the removal of term limits – *(Laughter)*– why don't we really work on this?

Colleagues, allow me to put the question because we shall not finish this. There is a proposal from Hon. Aisha Kabanda and it is seconded. It is the first one I will put - here is a question.

DR BATUWA: Mr Chairperson, I did not accept the removal of term limits but I conceded to the view – *(Interjection)* yes, it can be politically misunderstood. I conceded to the view of the Attorney-General that we are going to invest a lot of money in training these

doctors. I know that to get somebody to the level we wish could take 30 years of training, including the time he or she has been trained. So, we cannot give up such talent by putting a restriction.

THE DEPUTY CHAIRPERSON: Thank you. Colleagues, I want to make a clarification. Someone might misunderstand Hon. Batuwa that he has supported the removal of political term limits. No, that is not what we mean. It was just on a lighter note. This Bill is not political at all. So, I want it to go on record. I do not want someone to go and use it in Jinja that Hon. Batuwa supported the removal of term limits.

Colleagues, we have two issues at hand. Let me first put the question on the first amendment – no, we shall not sleep here, colleagues.

I put the question that clause 10 be amended, as proposed by the Attorney-General.

(Question put and agreed to.)

Clause 10, as amended, agreed to.

Clause 11, agreed to.

Clause 12, agreed to.

Clause 13, agreed to.

Clause 14, agreed to.

Clause 15, agreed to.

Clause 16, agreed to.

Clause 17, agreed to.

Clause 18, agreed to.

Clause 19, agreed to.

Clause 20, agreed to.

Clause 21, agreed to.

Clause 22, agreed to.

Clause 23, agreed to.

Clause 24, agreed to.

Clause 25, agreed to.

Clause 26, agreed to.

Clause 27, agreed to.

Clause 28

DRAYUME: Amend the provision as follows:

- a) By deleting subclause (1);
- b) In subclause (2) by deleting the words “notwithstanding subsection (1)”. Redraft the provision to read, “The Minister may, in consultation with the Council, by statutory instrument, designate a hospital as an organ, tissue or cell donation transplant centre.”

The justification is consequential. Subclause (1), to which the provision makes reference, was deleted.

DRACENG: I concur.

THE DEPUTY CHAIRPERSON: Honourable Attorney-General? The shadow minister had a contrary view on that but it is now a consequential amendment, meaning we cannot do much about it.

DR BATUWA: Mr Chairperson, on clause 28, which is in part six and deals with designating transplant centres; we departed from the majority report and were of the view that the activity of harvesting organs should strictly be done by Government. Our fear was of a patient in intensive care unit being looked at as an imminent donor.

You could be a patient and you are badly off, and because that very hospital, where you are a patient in their intensive care, has a patient on the waiting list and perhaps, you are having challenges paying your bills - we were fearing that the hospital could start looking at you as a donor and process you that way.

The other fear was arising from this activity of donation and transplant being a business venture. While in Turkey, we discovered that investment could go to the extent of US\$150 million; that is investing Shs 400 billion in a centre to do these kinds of activities.

We know, world over, the cost of these. For example, kidney transplant is about US\$80,000 dollars. In developed countries, many people need these services but they cannot access donors. So, we were worried that we could have medical tourism. Somebody comes; you have clients ready to pay US \$80,000. You have an investment, by way of a loan, in excess of Shs 400 billion. What is missing are the donors, and they have to be Ugandans.

We were worried about the Ugandans who drink and sleep on the road. We were worried about Ugandans who walk alone at night; that these could actually be potential donors and that mafia kind of activity could surface. We were worried and brought our concern and the meeting advised that our concern could be taken care of in clause 54.

So, Mr Chairperson, I pray that much as clause 54 is not in my report, when we get to that clause, you allow me to rise such that we fix that loophole and save Ugandans under this law. I beg to move.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues, I put the question that clause 28 be amended, as proposed.

(Question put and agreed to.)

Clause 28, as amended, agreed to.

Clause 29

DRAYUME: Amend the provision as follows:

- a) By substituting subclause (1) to read as:

“A hospital that wishes to be designated as a transplant centre, under section 28, shall apply to the Council for accreditation and designation”.

b) By inserting three new subclauses after subclause (4) to read as follows:

“(5) A hospital designated as a transplant centre shall be accredited annually for suitability to offer services and issued an accreditation certificate which expires by 31st of December of every calendar year.

6. Notwithstanding the provisions of subsection (iii), the person aggrieved by the decision of the Council may appeal to the minister within 30 days from the date of the decision of the Council” - there was no timeline. Thank you.

THE DEPUTY CHAIRPERSON: Mr Chairperson, is that all? In your report, there is “seven” as part of the amendment.

DR AYUME: “The minister shall dispose of the appeal within 30 days from the date of receipt of the appeal.

The justification is for justice to be served to the applicant after all due process is considered.

THE DEPUTY CHAIRPERSON: Yes, honourable minister.

DR ACENG: Mr Chairperson, I concur.

THE DEPUTY CHAIRPERSON: Honourable Attorney-General, what is your take on this matter?

MR KIRYOOWA KIWANUKA: We looked at it; these are okay.

THE DEPUTY CHAIRPERSON: Hon. Dr Batuwa, do you have an issue on this?

DR BATUWA: I concur.

MR KATUSABE: Mr Chairperson, while I recognise the sensitivity of this process and this particular Bill, my concern is about accreditation in a sense that we are making it to take place every year. I want to know the process, procedure and the mechanism. How often does the accreditation committee sit in a year? I do not want to see a minister struggle on

the issues to execute her mandate just because we put it to one year.

I am wondering whether it would offend our medical system if we opened this a little to cover two years for accreditation.

DR ACENG: Mr Chairperson, first of all, to allay the colleague’s anxiety, all hospitals and clinics are subject to licensing annually. All these hospitals you go to are licenced by the Uganda Medical and Dental Practitioners’ Council every year.

For the case of the transplant centres, it is the Transplant Council to accredit them. It is imperative that they do it annually because you want to make sure that the transplant centre is fit to carry out transplant in terms of equipment, human resources and otherwise. Some of the equipment becomes obsolete. Would you like to be worked on with obsolete equipment or a missing surgeon?

Therefore, it is important that every year they are accredited, just to make sure that everything on the checklist is available. Thank you.

MR KATUSABE: I am comfortable with the minister’s clarification. I think it has the precision and the clarity required.

THE DEPUTY CHAIRPERSON: Thank you. Honourable colleagues. I put the question that clause 29 be amended as proposed.

(Question put and agreed to.)

Clause 29, as amended, agreed to.

THE DEPUTY CHAIRPERSON: Point of procedure, Hon. Basalirwa.

MR BASALIRWA: Thank you, Mr Chairperson. Yesterday, you communicated that we shall be having a dinner today. When I look at the wall clock, the time is 6.30 p.m. This is the right time for dinner. I am meant to understand that my colleague is addressing the country at 8.00 p.m. today.

THE DEPUTY CHAIRPERSON: Your fellow party President?

MR BASALIRWA: Yes *-(Laughter)* – my fellow party President. Yesterday, I did raise health concerns, especially in regard to you. You are over sitting yet you are still a young man, still energetic, still producing and you are not moving.

In the circumstances, I move a motion that the House do resume, we go for dinner and wait for tomorrow to finish this business.

THE DEPUTY CHAIRPERSON: Honourable member, let your motion be very clear; let us eliminate the dinner issue.

6.34

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): Mr Chairperson, I move a motion that the House do resume.

THE DEPUTY CHAIRPERSON: Is the motion seconded? Okay, it is seconded by Hon. Lulume Bayigga, Hon. Mushemeza, Hon. Rauben, Hon. Otingiw – now, I have seen the people I have been holding here. *(Laughter)*

Honourable colleagues, I put the question that the House resumes.

(Question put and agreed to.)

(The House resumed, the Deputy Speaker, presiding.)

REPORT FROM THE COMMITTEE OF
THE WHOLE HOUSE

6.35

THE MINISTER OF HEALTH (DR JANE ACENG): Mr Speaker, I beg to report that the House has considered the Uganda Human Organ Donation and Transplant Bill, 2021 and passed clauses 1 to 29 with amendments.

MOTION FOR ADOPTION OF THE
REPORT OF THE COMMITTEE OF THE
WHOLE HOUSE

6.36

THE MINISTER OF HEALTH (DR JANE ACENG): Mr Speaker, I beg to move that the report of the Committee of the whole House be adopted.

THE DEPUTY SPEAKER: Honourable members, I put the question that the report of the Committee of the whole House be adopted.

(Question put and agreed to.)

Report adopted.

THE DEPUTY SPEAKER: Thank you, honourable members. House adjourned to tomorrow at 8.30 a.m.

(The House rose at 6.37 p.m. and adjourned until Thursday, 29 September 2022 at 8.30 a.m.)

PARLIAMENT OF UGANDA



**REPORT OF THE COMMITTEE ON HEALTH ON THE
UGANDA HUMAN ORGAN DONATION AND
TRANSPLANT BILL, 2021**

SEPTEMBER, 2022

OFFICE OF THE CLERK TO PARLIAMENT

[Handwritten signatures and initials]

[Handwritten signature: Kuntumata]

[Handwritten signature: Bebone]

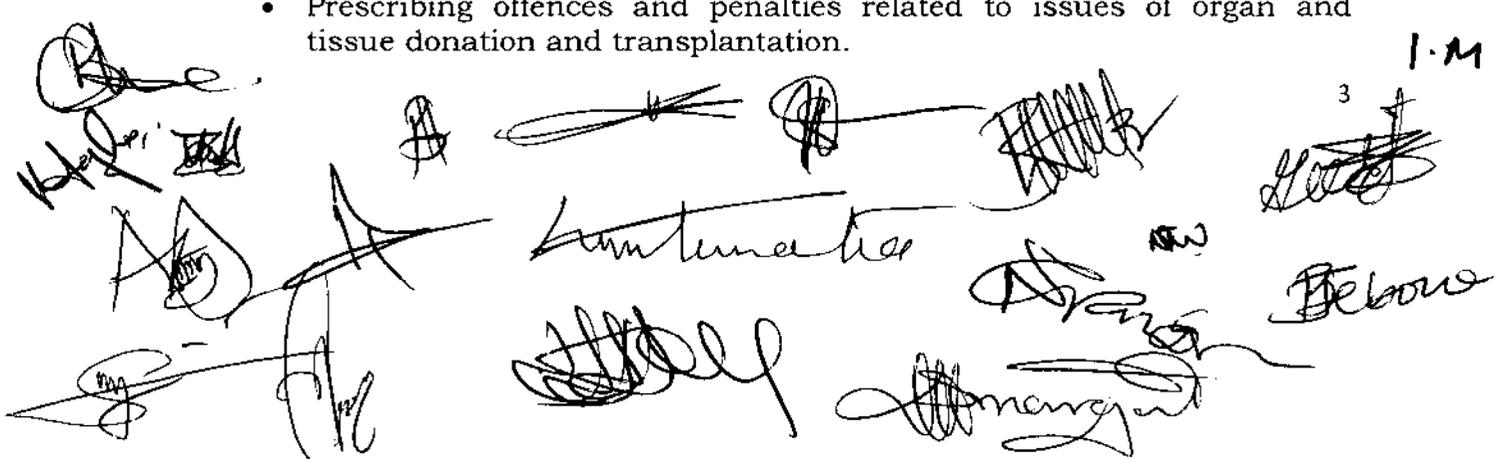
[Handwritten signature: Mungard]

[Handwritten initials: I-M]

3.0 OBJECT OF THE BILL

The object of the Bill is to establish a legal framework for the regulation of organ, cell and tissue donation and transplantation in Uganda by:

- Establishing the Uganda Organ Donation and Transplant Council to oversee and regulate organ, cell and tissue donation and transplantation in Uganda;
- Designating Mulago National Referral Hospital as the pioneering transplant centre;
- Prescribing a criteria to be followed when designating a hospital/institution as an organ, tissue or cell donation and transplant centre;
- Regulating the conduct of donation and transplant activities;
- Establishing policies and procedures for designated transplant centres and approved banks, including ethical standards and educational services to the public;
- Establishing a donation and transplant system which ensures equitable access to quality donation and transplantation services to donors and potential recipients;
- Establishing standards for storage of harvested organs, tissues and cells;
- Establishing a system of distribution of organs, tissues and cells;
- Providing for the transplant of organs, tissues and cells;
- Establishing and maintaining a national waiting list for potential organ, tissue and cell donors and recipients drawn from designated transplant centres and other hospitals and health facilities;
- Creating a database of information of donors and recipients to be retained by the transplant centres, hospitals and health facilities;
- Establishing procedures for the transplantation of organs and tissue from living donors including due diligence;
- Establishing procedures for the transplantation of organs and tissue harvested from cadavers;
- Prescribing appropriate consent to be given by donors;
- Prescribing requirements to be fulfilled before carrying out a post-mortem examination of a confirmed brain dead donor;
- Establishing a human organ and tissue database and reporting requirements;
- Prescribing offences and penalties related to issues of organ and tissue donation and transplantation.



Handwritten signatures and scribbles at the bottom of the page, including the name 'Belove' and the number '3'.

4.0 JUSTIFICATION FOR THE BILL

Worldwide, there is a sharp rise in trafficking of human organs with the poor and other vulnerable groups in society facing a high risk. Organs are unlawfully donated, transplanted and even stolen courtesy of a complex network of buyers, sellers and brokers at the international level. The forceful donations start with inhumane and illegal activities like human trafficking, kidnap and murder.

Uganda does not have a legal framework to regulate organ, tissue and cell donation and transplantation, yet it is increasingly becoming an area of health care used to cure infectious, genetic and non-communicable diseases.

There is need to protect the dignity and identity of every person and guarantee, without discrimination, respect for his or her integrity and other rights and fundamental freedoms with regard to donation and transplantation of organs, tissues and cells of human origin.

Annually, Ugandans spend a lot of money on medical tourism to countries like India, Turkey, UK and the USA through out of pocket expenditure. This upsets the country's balance of payments. Those who cannot afford have a poor quality of life which may result into death.

5.0 METHODOLOGY

While considering the Uganda Human Organ Donation and Transplant Bill, 2021; the Committee applied the following methods:

5.1 Meetings

Physical meetings

The Committee held meetings with the following entities:

- Ministry of Health (MoH)
- Uganda Medical Association (UMA)
- Uganda Human Rights Commission (UHRC)
- Uganda Law Society (ULS)
- Uganda Blood Transfusion Services (UBTS)
- Centre for Policy Analysis (CEPA)
- Association of Funeral Service Providers of Uganda (AFSPUL)
- Joint Clinical Research Centre (JCRC)

The bottom of the page contains several handwritten signatures and initials. On the right side, there is a large signature that appears to be 'I. M.' with a long vertical stroke extending upwards. Below it, there are several other signatures, some of which are crossed out with a large 'X'. On the left side, there are more signatures, including one that looks like 'Bebe' and another that looks like 'Kisho'. In the center, there is a signature that looks like 'Amuntemba'. At the bottom right, there is a signature that looks like 'Bebe' and another that looks like 'Kisho'. There is also a small number '4' written near the bottom right.

- Lubaga Hospital
- Coalition of 43 civil society organisations specialising in health rights advocacy
- Pharmaceutical Society Uganda (PSU)
- Uganda Medical and Dental Practitioners Council (UMDPC)
- Plastic Surgeons (skin grafting specialists)

Zoom meetings

- Dr Guarav Kharay, a bone marrow specialist from Apollo Hospitals in India
- Officials from the University of Derby, United Kingdom

5.2 Written memoranda

The Committee received written memoranda from the following:

- Uganda Law Reform Commission
- Laboratory technology students from Clarke International University, Institute of Allied Health Sciences and Makerere University College of Health Sciences

5.3 Document review

The Committee reviewed and made reference to the following documents:

- The Declaration of Istanbul on Organ Trafficking and Transplant Tourism (2018 edition)
- Status of Human Organ and Tissue Donation and Transplantation in the WHO African Region
- Applicable laws

5.4 Workshop

The Committee held a workshop with medical specialists in various fields of organ, tissue and cell therapy like kidney, heart, lung, liver, cornea, stem cells, plastic surgery (skin) and a post-operative care nurse.

6.0 COMPLIANCE WITH GENDER AND EQUITY, HUMAN RIGHTS AND SUSTAINABLE DEVELOPMENT GOALS

HUMAN RIGHTS

Prohibition of children as potential donors

Clause 72 explicitly prohibits any donation from a living child. Children are vulnerable and are never in position to consent to such procedures. This is important in protecting children from exploitation and abuse. However, this provision only applies to living children.

Protection of poor and vulnerable persons

The risk of exploitation of vulnerable and poor persons is high. Guiding principle 5 of WHO Guiding Principles on Human Cells, Tissue and Organ Transplantation states that, "The human body and its parts cannot be the subject of commercial transactions." In order to protect persons from exploitation, the bill under Clause 86 prohibits commercial dealings in human material for transplantation. This means that monetary or any other form of compensation for organs, tissues or cells other than reimbursement of donation related expenses is prohibited. The sale of one pair of organs such as eyes or kidney by a living donor for financial or other form of compensation is also prohibited.

The success of transplantation as a lifesaving treatment should not require nor justify victimising of the poor or vulnerable people as the source of organs for the rich.

Requirement for registered practitioners to obtain authority and consent before harvesting any organ, tissue or cell

Clauses 61 and 67 require all registered medical practitioners in transplant centres to obtain consent before harvesting of any tissue, cell or organ from a donor. Clause 71 also provides for authority for removal of human organs, tissue and cells. The process of obtaining the consent shall be written or spoken in a language that is understandable to the donor or the recipient

Handwritten signatures and scribbles at the bottom of the page, including names like 'Anurag' and 'Bebas'.

next of kin under sub clause 61(6). Obtaining consent from any donor before harvesting is necessary to ensure that the right to health is respected and protected.

GENDER AND EQUITY

Fair and equitable system

Clause 53 describes organ, tissue and cell donation and transplant as a fair and equitable system. Subsection (5) that access to organs, cells and tissues shall be provided without regard to recipient sex, age, religion, race, colour or financial standing. In other words, access to transplant of organs, cells or tissues is based on the principle of non-discrimination. This is further galvanised by Clause 52 which provides for a national waiting list for potential recipients that promotes equity and national solidarity.

Informed Consent

Any intervention in the health field can only be carried out after the person concerned has given free and informed consent to the procedure. Clause 67 (4) (b) and (c) includes the responsibility of the Council to inform the donor of the long-term benefits and risks related to the procedure. This will enable donors to make informed decisions about the donation. In accordance with the WHO guiding principles on human cell, tissue and organ transplantation, there needs to be an adequate balance of interests of recipients and donors. Benefits to both parties should outweigh the risks associated with the donation and transplantation.

A collection of approximately 15 handwritten signatures and initials in black ink, scattered across the bottom half of the page. Some are simple scribbles, while others are more legible, including one that appears to say "Lumina" and another that says "Mangant".

SUSTAINABLE DEVELOPMENT GOALS (SDGs)

SDG – 3 Good health and well being

The Bill is in line with SDG number 3- Good health and well being which aims at ensuring healthy lives and promoting well-being at all ages.

Transplantation of an organ, tissue or cell is a life-saving procedure which gives patients with mal or non-functioning organs to have a better quality of life and live longer. The patients can be children or adults.

7.0 COMMITTEE OBSERVATIONS AND RECOMMENDATIONS

PART I – PRELIMINARY

PURPOSE OF THE ACT

Clause 2(c)

Clause 2 of the Bill lists the purpose of the Bill. Clause 2 (c) designates Mulago National Referral Hospital as a pioneer transplant centre.

The Committee observed that:

Designating Mulago as a pioneer transplant centre may prevent other facilities that are ready for organ, tissue and cell harvesting and transplantation from commencing. Different types of organs can be harvested and this clause presumes that Mulago will have to pioneer in transplantation of all the different organs, tissues and cells.

The provision also presumes that Mulago meets all the standards and is ready for transplant activities.

The Committee recommends that Clause 2(c) be deleted.

Clause 2(d)

Clause 2(d) provides for designation of hospitals as organ, tissue and cell transplant centres.

The Committee observed that a hospital should be accredited before designation.

The Committee recommends that the word accreditation be inserted in Clause 2(d).

A collection of handwritten signatures and initials in black ink, including names like 'H. M.', 'Bebona', and 'Margaret', along with various scribbles and initials such as 'I.M.', '8', and '100'.

The Committee further observed that the amount of data generated from organ, cell and tissue harvesting and transplantation is a repository for knowledge and research for teaching purposes and development of medicines, new transplant techniques, prevention and policy development.

The Committee recommends that a new paragraph (j) be inserted to provide for a framework for scientific research and development in organ, cell and tissue donation and transplantation.

CLAUSE 3 - APPLICATION

Clause 3 lists organs, tissues and cells which can be donated and transplanted.

Clause 3(c)

The Committee observed that blood is among the list of organs, tissues and cells yet facilities like hospitals and health centres where blood transfusion is ongoing, will fall short of the criteria for accreditation for organ, tissue and cell transplant centres. This means that hospitals and health centre IVs where blood transfusion is taking place will have to shut down blood transfusion services.

The Committee recommends that paragraph (c) of Clause 3 be deleted.

Clause 3(n)

The Committee observed that cells constitute organs and therefore, there is no need to make a separate mention of them in (n).

The Committee recommends that the word cells is deleted from the list.

The Committee observed that hair has not been listed yet it is a tissue for transplant.

The Committee recommends that the word cells is replaced with hair in paragraph (n).

Clause 3(s)

The Committee observed that paragraph (s) is restrictive and does not envisage emerging developments in the field of organ, tissue and cell donation and transplantation.

The Committee recommends that paragraph (s) be amended to delete the words, "related to those in paragraphs (a) to (r)"

I.M.

Bebona

A.M.

Margaret

PART II – THE MINISTER AND THE HUMAN ORGAN TRANSPLANT COUNCIL

ASSISTANCE AND SUPPORT

According to Clause 6, the Minister can provide assistance and support to any person providing or proposing to provide a service relating to human organ, cell or tissue donation or transplantation.

The Committee observed that the assistance and support referred to is ambiguous and can be exploited.

The Committee recommends that Clause 6 be deleted.

UGANDA HUMAN ORGAN DONATION AND TRANSPLANT COUNCIL

Clause 7(5) states that, “The Council shall be independent but shall work in collaboration with the Uganda Medical and Dental Practitioners Council, especially in relation to disciplinary cases against registered medical practitioners certified by the Council under this Act to undertake organ, tissue and cell donation and transplant activities.”

The Committee observed that Uganda Medical and Dental Practitioners Council is one of the four professional bodies of health workers. The others are Uganda Nurses and Midwives Council, Allied Health Professionals Council and the Pharmacy Board.

The Committee recommends that Clause 7(5) of the Bill is amended to replace Uganda Medical and Dental Practitioners Council with the relevant professional bodies.

COMPOSITION OF THE COUNCIL

The Committee observed that the Bill does not have a provision on composition of the Council.

The Committee recommends that a new clause be inserted after Clause 7 to provide for composition of the Council.

A collection of approximately 15 handwritten signatures and initials in black ink, scattered across the bottom half of the page. The signatures vary in style, with some being highly stylized and others more legible. One signature on the right side clearly reads "Bebane". Another signature on the far right includes the number "1.4". There are also several scribbled-out or less distinct signatures.

Clause 29 (3) states that, "Where, after the due diligence carried out under subsection (2) and after giving an opportunity to the applicant to be heard, the Council is satisfied that the applicant does not meet the requirements of this Act and the regulations made under this Act, the Council shall, reject the application giving reasons for the refusal in writing.

The Committee observed that a hospital should be accredited before designation to ensure compliance with approved standards.

The Committee recommends that Clause 29(1) be amended to include the word accredited.

The Committee observed that the timeframe within which to communicate the Council's decision is not stated.

The Committee recommends that Clause 29(3) be amended to include 30 days as the timeframe within which to communicate the Council's decision to the applicant.

The Committee further observed that quality assurance and control is a continuous process and as such, transplant hospitals need annual accreditation and designation so as to ensure that they continuously adhere to standards.

The Committee recommends that a new paragraph (5) be added to provide for a hospital designated as a transplant center to be accredited annually for suitability to offer services and issued an accreditation certificate which expires by the 31st of December of every calendar year.

QUALIFICATION FOR DESIGNATION AS A TRANSPLANT CENTRE

Clause 30 lists qualifications for designation as a transplant centre.

Clause 30(a) states that a designated transplant centre shall have, "Intensive Care Unit and High Dependent Unit beds dedicated to the transplant programme connected to the theatre by a sterile corridor or interconnectivity with dialysis capability;

Clause 30(b) states, "specialised medical professionals, including a transplant surgeon, physician, anaesthesiologist, intensivist and transplant nurse qualified and experienced in the type of organ, tissue or cells to be harvested and the transplant activities to be carried out;"

Clause 30 (c) states that a transplant centre should have two adjacent theatres; one for the donor and another for the recipient.

H. H.
P. D.
A. S.
G. J.
W. M.
12
1-M
Bebow.
M. J.

Clause 30(g) states that, "any other requirement that the Minister may prescribe by regulations or standards issued by the Minister."

The Committee observed that:

- *Clinical pharmacists and counsellors are missing from the list of key professionals needed. Clinical pharmacists trained in organ transplant understand the medicine requirements and in the event of adverse reactions, they are capable of responding. Professional counselling is needed before the procedure to avoid cases of depression.*
- *The requirements for an intensive care unit and adjacent theatre apply to donation and transplant of solid organs;*
- *The need for therapeutic drug monitoring facilities is not indicated among the requirements.*
- *The need for a well-stocked pharmacy is missing from the list of requirements.*
- *The provision caters for solid organ transplants and ignores cells and tissues.*

The Committee recommends that:

- **Clause 30(a) and 30(c) be amended to state that the provisions qualify for solid organ transplants.**
- **A new sub-clause be inserted after (f) to provide for a requirement for therapeutic drug monitoring facilities.**
- **A new sub-clause be inserted after (g) to provide for a requirement for a pharmacy stocked with relevant medicines and supplies.**
- **A new sub-clause be inserted after (h) to cater for cell and cornea transplant centres whose requirements will be prescribed by the Minister.**

DESIGNATION BY A MINISTER

Clause 31 (1) states that, "The Council shall, after being satisfied that a hospital meets all the requirements of this Act, regulations made under this Act, standards issued by the Minister and any other applicable law, recommend the hospital to the Minister for designation as a transplant centre."

The bottom of the page contains numerous handwritten signatures and initials in black ink. Some legible names include 'Antematis', 'Bebone', and 'Mergat'. There are also several scribbled-out signatures and initials. A handwritten '1. M' is visible on the right side, and the number '13' is written near the center-right.

The Committee observed that different institutions are qualified in different in different areas of transplantation.

The Committee recommends that the sub-clause be amended by inserting the requirement by an institution to offer specific transplant services for which the facility is qualified to do so.

REGULATION OF CONDUCT OF DONATION AND TRANSPLANT ACTIVITIES

Clause 33(4) states that, "The Council shall, in a manner prescribed by regulations, approve local and expatriate transplant surgeons before they can undertake transplantation activities under this Act."

Clause 33(5) states that, "A transplant surgeon shall not be approved under subsection (4) unless he or she is registered by the respective professional Councils."

The Committee observed that the mandate mentioned in 33(4) and 33(5) is for Uganda Medical and Dental Practitioners' Council.

The Committee recommends that Clause 33(4) and 33(5) be deleted.

APPROVAL OF BANKS

Clause 34(7) states that, "the national blood bank shall be accredited by the Council, but shall in its day to day activities report to the Minister."

The Committee observed that Uganda Blood Transfusion Services has a system in place for the collecting, processing, storage and distribution of blood countrywide. The Committee was informed by the Minister that a separate law will be developed to regulate blood and its products.

The Committee recommends that Clause 34(7) be deleted.

POLICIES AND PROCEDURES FOR DESIGNATED TRANSPLANT CENTRES AND APPROVED BANKS

Clause 35 (1) of the Bill states that, "Designated transplant centres and approved banks shall maintain policies and procedures which shall detail all aspects of retrieval, processing, testing and storage and practices for organs, tissues and cells."

[Handwritten signatures and scribbles covering the bottom half of the page, including names like 'Amtematu', 'Bebare', and '1-M'.]

Clause 35(3) states that, "Modifications of standard procedures and development of new procedures shall be approved by the registered medical practitioner."

The Committee observed that there will be no consistency and standardisation if each designated transplant centre develops their own policies and procedures.

The Committee further observed that there will be no independent review of these policies and regulations developed by the designated transplant centre.

The Committee recommends that Clause 33(1) be amended to provide that all policies developed by the designated transplant centres shall be approved by the Council and should conform to the regulations.

EDUCATIONAL STANDARDS TO THE PUBLIC

Clause 37(1) states that, "Each designated transplant centre shall assist hospitals and health centres in establishing and implementing protocols for making routine inquiries regarding organ, cell and tissue donations by potential donors."

Clause 37(4) states that, "Every designated transplant centre shall produce or have available literature and media items that provide education and awareness creation for donation of organs, tissues or cells."

Clause 37 (5) states that, "A designated transplant centre shall be responsible for establishing and assisting in the dissemination of the materials referred to in subsection

The Committee observed that:

- *The word "protocols" is not consistent with other laws.*
- *There will be no consistency and standardisation if each designated transplant centre develops their own education and awareness literature and media items.*
- *There will be no independent review of education and awareness literature and media items developed by the designated transplant centre.*

15

The Committee recommends that the word protocols in Clause 37(1) be replaced with guidelines.

The Committee further recommends that Clause 37(4) and 37(5) be amended to provide that all education and awareness literature and media items developed by the designated transplant centres shall be approved by the Council.

PART VII-STORAGE OF ORGANS, TISSUES AND CELLS OUTSIDE THE BODY

FRAUDULENT ACTIVITY

Clause 51 (1) states that, "Where a designated transplant centre or approved Bank discovers that a fraudulent activity has occurred in the distribution, shipping or labelling of any organ, tissue or cell imported or exported by the designated transplant centre or Bank, an investigation shall be conducted to identify the root cause of the fraudulent activity.

The Committee observed that scope of fraudulent activities in organ, tissue and cell donation and transplant goes beyond distribution, shipping or labelling.

The Committee recommends that Clause 51(1) be amended by expanding the scope for fraudulent activity to harvesting, transplanting, returning or recall.

NATIONAL WAITING LIST

Clause 52 states that, "The Council shall establish and maintain a national waiting list for potential organ, tissue and cell donors and recipients drawn from designated transplant centres; hospitals and health centres."

The Committee observed that the procedure for people who donate is done real time, hence no need for waiting.

The Committee recommends that Clause 52 is amended by removing the word donors.

FAIR AND EQUITABLE SYSTEM

Clause 53(3) states that, "The Council may also authorise the importation of organs, tissues and cells from an international transplant organisation referred to in subsection (2)."

The bottom of the page is filled with various handwritten signatures and scribbles. On the right side, there is a tall, thin signature. Below it, the number '16' is written. To the right of '16' is the signature 'I.M'. In the center, there is a large, stylized signature that appears to be 'Supernatural'. Below this, there are several other signatures, some of which are heavily scribbled over. On the left side, there are several smaller signatures and scribbles. The overall appearance is that of a document that has been signed and possibly annotated by multiple individuals.

The Committee observed that use of the word importation may be misinterpreted to mean commercialisation of organs, tissues and cells yet the Bill prohibits the sale of organs, tissues and cells.

The Committee recommends that Clause 53 is amended by replacing the word, "importation" with "sharing" where sharing means medically sanctioned transboundary movement of organs, tissues or cells from one organ bank to another in cases where there are agreements approved by the Minister.

TRANSPLANTATION ACTIVITY

Clause 54 (1) states that, "The retrieval and preservation of human organs, tissues and cells for transplantation shall only be performed by a registered health professionals approved by the Council and in accordance with this Act, regulations made under this Act, any other applicable law and standards issued by the Minister.

The Committee observed that the retrieval team includes various health professionals who are not only licensed by their respective professional bodies. Subjecting them to approval by the Council may constitute double licensing.

The Committee recommend that relevant professional bodies should replace the Council appearing in Clause 54(1).

Clause 54(4) states that, "All transplant activity shall be performed to the highest professional and ethical standards."

The Committee observed that ethical standards are set by the professional bodies.

The Committee recommends that Clause 54(4) should be amended by putting a provision for all transplant activities to be prescribed by the relevant professional bodies.

Clause 54(5)

Clause 54(5) states that, "When a person has been confirmed brain dead by the team in care, the Council shall immediately be notified to send an independent neurological team to confirm the death for purposes of donation."

The bottom of the page contains numerous handwritten signatures and scribbles. On the right side, there is a large, vertical signature. Below it, the number '17' is written. To the left of '17', there are several scribbled-out signatures. Below these, the word 'Lunternia' is written in cursive. Further down, there are more signatures, including one that appears to be 'Bebo' and another that looks like 'Morgan'. There are also some illegible scribbles and marks scattered across the bottom.

The Committee observed that the team which confirms brain death includes other professionals like neuro surgeon, neuro physician, anaesthesiologist and intensivist.

The Committee recommends that the word neurological be deleted.

Clause 54(8) states that, "The independent team in (5) shall consist of a neuro surgeon, neuro physician, and an anaesthesiologist or intensivist."

Clause 54(9) states that, "The independent team and organ retrieval team shall be self-sufficient and shall not require anesthetic, theatre or surgical staff from the donor hospital and shall be available 24 hours a day without other elective commitments during their time on call and able to respond appropriately if there is more than one donor on the same day."

The Committee recommends that the two clauses be merged.

Insertion of a new sub-clause (9)

The Committee observed that no provision has not been made for a brain dead potential donor who is in an intensive care unit in a hospital that does not provide organ, tissue and cell transplant services.

The Committee recommends that a new sub-clause (9) be inserted to cater for brain death in an intensive care unit of a hospital.

DONATION AND TRANSPLANT OF ORGANS, TISSUES AND CELLS REMOVED FROM LIVING DONORS

Clause 67 (4) states that, "The Council shall ensure that the donation is legal and justified by ensuring that the proposed donor—

- (d) understands that it is illegal to accept any financial or other inducement for the donation but that he or she may have any expenses or loss of earnings reimbursed.
- (e) understands that he or she may be compensated for any unanticipated harm resulting from the donation."

The Committee observed that the organs, tissues and cells are donated free of charge. Reimbursement for loss of earnings and compensation for any unanticipated harm resulting from donation may be construed to mean a payment for the organ, tissue or cell.

A collection of handwritten signatures and initials in black ink, including names like 'Kuntanata', 'Bebas', and 'Dhe', along with various scribbles and initials.

The Committee recommends that:

Clause 67(4) (d) be amended to remove a provision for any expenses or loss of earnings reimbursed.

Clause 67(4) (e) should be changed to put a provision to the effect that a living donor understands that he or she may be compensated for justifiable expenses which should be approved by the Council.

AUTHORITY FOR REMOVAL OF HUMAN ORGANS, TISSUES AND CELLS

Clause 71 (4) states that, "The authority given under subsection (1) or subsection (2) or, as the case may be, subsection (3) shall be sufficient warrant for the removal, for therapeutic purposes, of the human organ, tissue or cell but no such removal shall be made by any person other than a registered medical practitioner from a designated transplant centre".

The Committee recommends that, if a potential donor dies without giving his/her consent, and the next of kin cannot be contacted, that body should not be used for donation purposes.

PROHIBITION OF DONATION FROM LIVING CHILD

Clause 72 prohibits donation of an organ, tissue or cell from a living child.

The Committee noted that medically, stem cells are drawn from bone marrow and peripheral blood, which regenerate and they do not cause any harm.

The Committee recommends that the clause be redrafted to cater for the following:

Prohibition of donation from a living child save for exceptional circumstances approved by the Council with the consent of parent/guardian.

Put provisions under which a living child may donate. The provisions include: stem cell therapy for minors who are twins or close siblings after approval by the Council

Prescribe a penalty of life imprisonment for a person who contravenes the provision .

Clause 79 is about authority for removal of human organ, cell or tissue from a body sent for post-mortem examination for certain purposes.

The Committee noted that Clause 78(1) requires that a post-mortem shall be carried out on all cadaveric donors and shall be conducted at the same time as the harvesting of the organs to determine the cause of death and the suitability of the donor.

The Committee observed that harvesting organs, tissues and cells sent for post mortem could be abused and in cases of medico-legal nature, it may destroy evidence that might be needed at a later date. For instance, in cases of exhumation.

The Committee further observed that there is no requirement for certification of death by the Council before a post mortem is carried out. This could create a possibility of a person alleging that the organs are harvested from donors who are still alive. In addition, Clause 75 already takes care of how organs are harvested from the dead.

The Committee recommends that Clause 78 and Clause 79 be deleted.

PART XI-OFFENCES AND PENALTIES

PREVENTION OF ORGAN, TISSUE OR CELL TRAFFICKING

Clause 88 (2) (a) states that, "The prohibition under subsection (1) shall not prevent payments which do not constitute a financial gain or comparable advantage, in particular—

- (a) compensation for living donors of loss of earnings and any other justifiable expenses caused by the removal or by related medical examinations;

The Committee observed that the provision is silent on who approves the justifiable expenses. Compensation for loss of earnings can be abused and commercialised. It may be construed as payment for the organs, tissues or cells provided by the donor.

The Committee recommends that Clause 88(2) (a) should be amended to allow only justifiable expenses which should be approved by the Council.

The bottom of the page contains numerous handwritten signatures and initials in black ink. Some legible names include 'Lunternato', 'Belone', and 'Mergu'. There are also several scribbled-out signatures and initials, including 'I-M' and 'R'. The signatures are scattered across the bottom half of the page, some overlapping the page number '21'.

CODE OF PRACTICE

Clause 97 (2)(k) authorises the Minister to issue a code of practice in relation to the import or the export of the body of a brain-dead person or organ, tissue or cell from a human body for use for a scheduled purpose.

The Committee observed that use of the words import and export may be misinterpreted to mean commercialisation of organs, tissues and cells yet the Bill prohibits the sale of organs, tissues and cells.

The Committee recommends that Clause 97 (2) (k) is amended by replacing the word, "import and export" with "sharing" where sharing means medically sanctioned transboundary movement of organs, tissues or cells from one organ bank to another in cases where there are agreements approved by the Minister.

AUTHORISED TRANSPLANTATION ACTIVITIES

Schedule 2 of the Bill lists authorised transplantation activities and they include: donation, transplantation, harvesting organs, tissues and cells.

The Committee observed that storage and distribution which are part of the organ, tissue and cell transplant activities were not provided for in Schedule 2.

The Committee recommends that storage and distribution be added to Schedule 2 of the Bill.

GENERAL OBSERVATIONS

INADEQUATE FUNDS PROVIDED UNDER CERTIFICATE OF FINANCIAL IMPLICATIONS

Rule 118 (1) of the Rules of Procedure of the Parliament of Uganda requires that a Bill introduced in the House shall be accompanied by a Certificate of Financial Implications (CFI) issued by the Minister responsible for Finance.

(2) The Certificate of Financial Implication issued under sub-rule (1) shall indicate the estimates of revenue and expenditure over the period of not less than 2 years after coming into effect of the Bill when passed.

(3) In addition to sub-rule (2) above, the Certificate of Financial Implications shall indicate the impact of the Bill on the economy.

The Certificate of Financial Implications tabled with the Uganda Human Organ Donation and Transplant Bill complied with the requirements of Rule

118. It was tabled with the Bill, contained planned expenditure for a period of 5 years and included a statement on expected savings to Government.

However, the Committee noted that the funds proposed may not be adequate for implementation of human organ, tissue and cell transplant programmes. During the interface of the Committee on Health with the medical specialists, the Committee was informed that the following pillars are required for a functional organ, tissue and cell transplant programme:

- Skilled medical experts
- Infrastructure where transplant is done (sterile theatre, corridors and wards)
- Enabling legal framework
- Adequate funding for medicines and supplies required

The medical experts expressed concerns over the gaps in human resources and facilities (infrastructure and equipment) for functional organ, tissue and cell transplant in the country.

According to Clause 28 of the Bill, transplant is to be pioneered at Mulago National Referral Hospital. During the preparation of the budget for FY2022/23, the Director General of Health Services reported that Mulago National Referral Hospital has a gap of 86 super specialists of which 23 are for surgery. He said Ministry of Health requires Shs 15.72 billion to recruit specialists to fill all the vacant posts in the referral hospital. However, only Shs 2.658 billion has been provided in the CFI for regional transplant centres for a period of five years. Furthermore, only Shs 911 million has been provided for capacity building for a period of 5 years.

This will not be adequate for putting in place the requisite infrastructure, hire and train the required specialists.

This programme requires a lot of publicity and communication for people to understand and be willing to donate their organs to those who are in need. However, only Shs 202 million has been provided for this activity for a period of 5 years.

The Committee recommends that Ministry of Finance, Planning and Economic Development should provide additional funding for successful implementation of the Uganda Human Organ Donation and Transplant programme once the Bill is passed.

8.0 CONCLUSION

The Organ Donation and Transplant Bill when enacted into law will cover a specialised part of medical care in the country which has hitherto been unregulated. The Bill presents an opportunity to streamline and strengthen the regulatory framework of medical practice in Uganda in matters of ethics and discipline in this sensitive and vital areas of medical practice.

Rt. Hon. Speaker and Hon. Members, I beg to move that the report of the Committee on the Uganda Human Organ Donation and Transplant Bill be adopted.



26

PROPOSED AMENDMENTS TO THE HUMAN ORGAN DONATION AND TRANSPLANT BILL, 2021

1. CLAUSE 2: PURPOSE

a) Delete paragraph (c)

Justification

- *The clause would create an assumption that Mulago is ready and has met the standard criteria for accreditation and designation.*
- *Different types of organs can be harvested and yet Mulago may not be in position to offer the entire spectrum of transplant services yet the bill under clause 3 provides over 19 services to be offered and implemented, and other centers might be ready to commence operation before Mulago.*

b) Insert the word “accreditation” before the word “designation”

Justification:

- *To allow due process of accreditation and designation to take place*

c) Insert a new provision after paragraph (i) to read as-

“To provide for a framework for research and development.”

Justification:

- *Research is a repository for knowledge and can be used for teaching purposes and for the development of new techniques, prevention and policy development.*

I.M.
27
Bebo

2. CLAUSE 3

Amend the provision-

- a) By deleting paragraph (c); and deleting reference to "blood" wherever it appears in the bill.

Justification:

- *Regulation of blood transfusion which is already on going in hospitals and health centers would affect the operations of the health centres. The current facilities where blood donation has been going on will fall short of the criteria for accreditation and this will affect current supply of blood. Therefore, it would be proper for "blood" to be regulated under a separate legal framework.*

- b) in paragraph (n), by substituting "cells" with "hair"

- c) by substituting paragraph "(s)" with the following-
"(s) any other organ, cell or tissue for the purpose of transplantation."

Justification:

- *To be all inclusive and accommodate emerging developments in science.*

3. CLAUSE 4 INTERPRETATION

- a) Substitute the definition of "tissue evaluation" with the following-

"Tissue evaluation" means the analysis of tissue for viability, abnormality, contaminants, compatibility and micro-organisms to determine its fitness for purpose"

Justification:

- *The current definition in the bill is narrow.*

- b) Insert the following new definitions:

"autograft" means tissue which is transplanted within the same person;

"allograft" means tissue that is transplanted from one person to another;

28

1-M

Bebo

Mangant

“brain dead” means a condition where a person is on an artificial life support machine, with irreversible cessation of all functions of the entire brain, including the brain stem, confirmed by Electro-encephalogram (EEG) and independent team, and the person has no chance of revival;

“bone marrow” means the soft, spongy, gelatinous tissue that fills the medullary cavities, or the centers of bones, which is responsible for the production of red blood cells, white blood cells and platelets;

“A retrieval team” means an intensive care team that is capable of handling a patient on life support;

“stem cells” means undifferentiated cells originating from adult or embryonic tissue that can turn into specific cells, as the body needs them;

“stem cell transplant” means a medical procedure performed to replace bone marrow that has been damaged or destroyed by disease, infection, or chemotherapy”.

Justification:

- for clarity

4. CLAUSE 6:

Delete clause 6

Justification:

- The type of assistance and support which the Minister is supposed to offer is not clear. The ambiguity posed by the provision can therefore be easily subject to abuse by wrong elements.

5. CLAUSE 7.

Amend the provision as follows-

- a) Amend the cross heading and the headnote to read as-
“Uganda Human Organ Donation and Transplant Council”

Justification:

- For clarity and uniformity

1-M
Bebone Amanya
29

- b) Amend sub clause (5) by substitution the words "Uganda Medical and Dental Practitioner Council" with the words "**relevant health professional councils**"

Justification:

- To accommodate all the other professional bodies.

6. INSERTION OF A NEW CLAUSE AFTER CLAUSE 7.

Insert a new clause after clause 7 as follows-

"Composition of the Council"

The Council shall compose of-

- (1) The Director General
- (2) Persons who are qualified in, and have had experience and shown capacity, and are representatives in the following specialized fields;
 - (i) Surgery;
 - (ii) Law;
 - (iii) Intensive Care;
 - (iv) Anesthesia;
 - (v) Financial Management;
 - (vi) Bioethics; and
 - (vii) Investigative Specialist.
- (3) The chairperson who shall be appointed by the Minister from among the members.
- (4) The Executive Director, who shall be, the secretary to the council and shall be an ex-officio member of the council, without a right to vote.

Justification:

- To establish the governing body of the council.

7. CLAUSE 9 DISQUALIFICATION FROM APPOINTMENT TO THE COUNCIL

Amend the provision as follows-

- a) Redraft paragraph (d) to read as-

"(d) is serving on any other statutory council or Board in the health sector"

A collection of handwritten signatures and initials in black ink, including names like "Sunkemata", "Bebone", and "Margaret", along with various scribbles and initials.

Justification:

- *To avoid conflict of interest.*
- b) Insert a new paragraph after Paragraph (d) to read as follows-

“(e) is directly involved in the organ, cell or tissue transplant service.”

Justification:

- *to avoid conflict of interest.*

8. CLAUSE 11.

Delete sub clause (4)

Justification:

- *To avoid unfairness and possible abuse of powers by the appointing authority.*

9. CLAUSE 28. DESIGNATION OF TRANSPLANT CENTRES.

Amend the provision as follows –

- a) By deleting sub clause (1)

Justification:

- *Consequential amendment*
- b) In sub clause (2) by deleting the words “Notwithstanding sub section (1)”
Redraft the provision to read-

“The Minister may, in consultation with the Council, by statutory instrument, designate a hospital as an organ, tissue or cell donation and transplant centre.”

Justification:

- *Consequential. Sub clause (1) which the provision makes reference to was deleted.*

A collection of handwritten signatures and initials, including 'Babe', 'Hfm', 'Antemata', 'Belone', 'Margaret', and '31'. There are also some scribbled-out marks and a vertical line on the right side.

10. CLAUSE 29. APPLICATION FOR DESIGNATION AS A TRANSPLANT CENTRE.

Amend the provision as follows-

a) By substituting sub clause (1) to read as-

“A hospital that wishes to be designated as a transplant center under section 28 shall apply to the council for accreditation and designation.”

Justification:

- *For quality assurance before the transplant centres are designation.*

b) by inserting 3 new sub clauses after sub clause (4) to read as follows-

“(5) A hospital designated as a transplant center shall be accredited annually for suitability to offer services and issue an accreditation certificate which expires by 31st of December of every Calendar Year.”

Justification:

- *To ensure compliance and for quality assurance.*

“(6) Notwithstanding the provisions of sub section (3), the person aggrieved by the decision of the Council may appeal to the Minister within 30 days from the date of decision of the Council.

Justification:

- *To provide for timeline*

“(7) The Minister shall dispose of the appeal within 30 days for the date of receipt of the appeal”

Justification:

- *For Justice to be served to the applicant after all due process is considered.*

11. CLAUSE 30. QUALIFICATION FOR DESIGNATION AS A TRANSPLANT CENTRE.

Amend the provision as follows-

a) In paragraph (a) by deleting the words "and high dependent unit beds"

Justification:

- For clarity

b) In paragraph "(b)" by inserting after the words "anesthesiologist" the words "clinical pharmacist"

Justification:

- It is necessary to have a clinical pharmacist on the team.

c) Insert at the beginning of paragraph (c) the words "at least"

Justification:

- To give room for flexibility depending on the category of center being established.

d) insert "two new paragraphs" after "paragraph (f)" to read as-

" a licensed pharmacy stocked with necessary medicines and related supplies for organ donation and transplant services;

"a valid operating licence of the facility from Uganda Medical and Dental Practitioners Council."

Justification:

- This list of services lacks critical components which should not be blanketed among the "others". A transplant center should be licensed. It is also necessary for it to have a Pharmacy stocked with relevant medicines and supplies necessary for a successful transplant process.

12. CLAUSE 31. DESIGNATION BY A MINISTER.

Amend sub clause (1) by inserting at the end of the provision the following words-

The bottom of the page is filled with numerous handwritten signatures and scribbles in black ink. Some legible words include "Beber", "Amlemator", "Beber", and "Beber". There are also some initials and numbers like "1-M" and "100". The signatures are written in various styles, some appearing to be official or professional.

“to operate specific transplant service for which the Hospital is qualified”.

Justification:

- Each hospital should be assessed against standards by the council. The Minister therefore should designate a Hospital for example as a Renal Transplant Center, or a Multi- organ Transplant center for Renal and Liver if it meets both requirements. A blanket designation as a “Transplant center” should be avoided.

13. CLAUSE 32. EXISTING CENTERS

- a) Amend sub clause (2) (a) by inserting the word “accreditation” before the word “designation”

Justification:

- Consequential

14. CLAUSE 33.

- a) Delete sub clause (4) and (5)

Justification:

- It usurps the powers of the Medical Council

- b) Delete the second sub clause (2)

Justification:

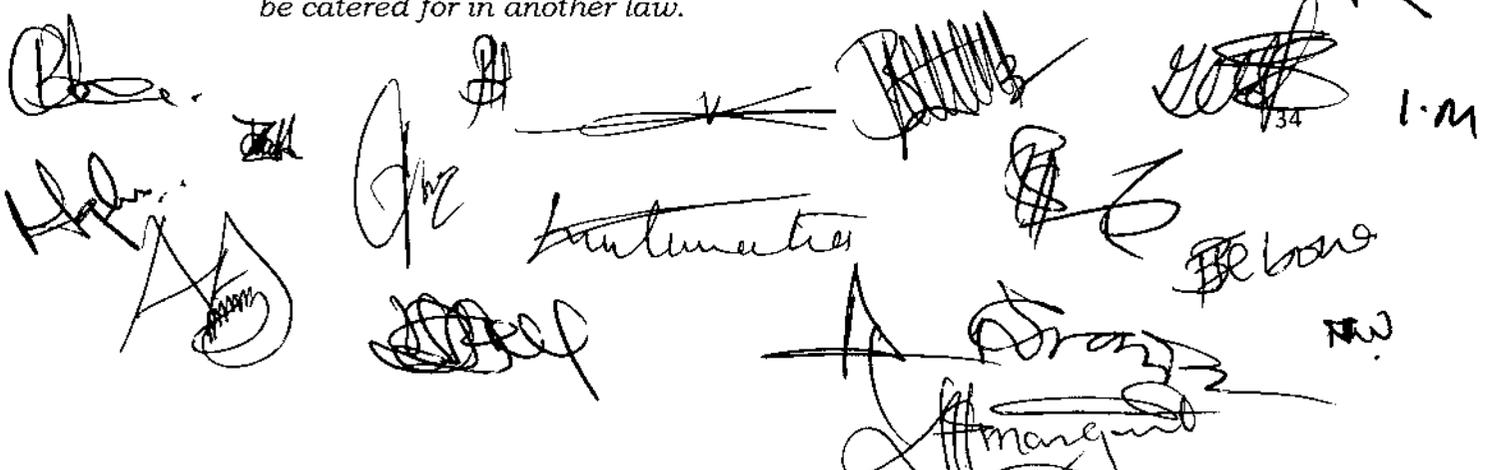
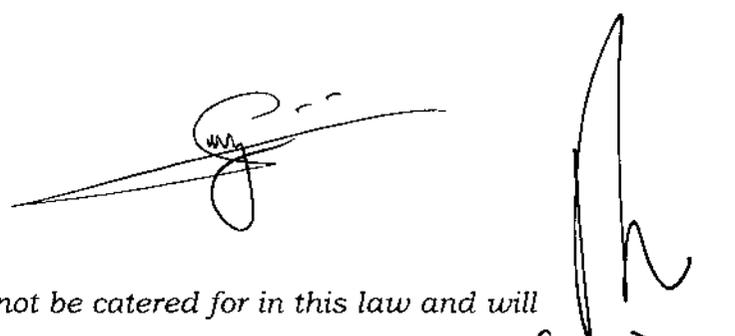
- To avoid repetition.

15. CLAUSE 34

Delete sub clause (7)

Justification

- Accreditation of blood services cannot be catered for in this law and will be catered for in another law.



16. CLAUSE 35

Clause 35 is amended-

(a) in sub clause (1), by inserting immediately after the word "procedures" the words "and shall conform to regulations made under this Act";

(b) In sub clause (3), by inserting immediately after the word "shall", the following words "in consultation with the Council".

Justification

- For standardization of policies and procedures
- To provide for checks and balances.

17. CLAUSE 37

Amend the provision as follows-

a) In sub clause (1) by substituting the word "protocols" with the word "guidelines"

Justification:

- For uniformity and consistency with other piece of legislation.
- b) In sub clause (4) by inserting at the end of the provision the words "as may be approved by the council"

Justification:

- To act as quality control measures

18. CLAUSE 40.

Substitute "Transport" with "Transplant"

Justification:

- To correct a typing error

19. CLAUSE 42

Substitute sub clause (3) with the following-

"The Minister may, in consultation with the council, by regulation, prescribe additional requirements for recall procedures."

Handwritten signature and initials, possibly 'UM' and 'h'.

Handwritten signatures and notes, including 'Bee.', 'Santamaria', 'Management', 'Bebone.', and '35 1.14'.

Justification:

- *To cater for any eventualities that might arise*

20. CLAUSE 53

Clause 53 of the Bill is amended in sub clause (3) by substituting the word "importation", the word "sharing";

Justification

- *To change the terminology used to refer to exchange of organs with other international transplant organizations rather than export of organs which connotes commercialization of organs, tissues and cells.*

21. CLAUSE 54. TRANSPLANTATION ACTIVITY

Amend the provision as follows-

- a) **In sub clause (1) by** deleting the words 'approved by the council'

Justification:

- *This is a function of Uganda Medical and Dental Practitioner Council.*

- b) In sub clause (4) by inserting at the end of provision the words "as may be prescribed by their respective professional bodies"

Justification:

- *The provision should clearly provide for the person who determines the professional and ethical standards.*

- c) in sub clause (5) by deleting the word "neurological" appearing before the word "team"

Justification:

- *The independent team is inclusive of other professionals*

- d) Amend sub clause (8) by substituting the cross reference "(6)" with "(5)"

Justification:

- *To streamline the cross referencing*

The bottom of the page contains numerous handwritten signatures and scribbles in black ink. Some legible names include 'Kuntumata', 'Bebone', and 'I.M'. There are also several large, illegible scribbles and initials scattered across the bottom half of the page.

e) Redraft sub clause (9) to read as follows-

“(9) where a person has been declared and confirmed brain dead in accordance with sub section (5), in an Intensive Care Unit of a hospital which is not a designated transplant centre, a retrieval team shall be dispatched by the Council to retrieve the potential donor to a transplant centre.”

Justification:

- for clarity

22. CLAUSE 67

Amend the provision as follows-

a) In sub clause (4)(d) by deleting all the words appearing after the word “donation” and

Redrafting sub clause (4) (d) as follows-

“understands that it is illegal to accept any financial or other inducement for the donation **of the organ**,”

b) In sub clause (4) (e) to read as follows-

“understands that he or she may be compensated for justifiable expenses which should be declared to and cleared by the Council within reasonable time.”

Justification:

- To guard against commercialization of organs, tissues or cells

23. CLAUSE 71

Amend the provision as follows-

a) In sub clause (3) by delete the words “of the removal”;

b) In sub clause (6) by deleting the word “the” appearing at the beginning of line three.

Justification:

- To correct grammatical error

c) In sub clause (7) by-

The bottom half of the page is filled with numerous handwritten signatures and initials in black ink. Some are clearly legible, such as 'Be', 'A', 'Kuntawata', 'Margaret', 'Bebone', and '1.11'. Others are scribbled or partially obscured. There are also some numbers like '37' and '1.11' written near the signatures.

By deleting the words "of age" appearing after the words "eighteen years"

Justification:

- *To correct grammatical error*
- d) substituting the words "any of the parents" with the words "any close relations"

Justification:

- *To avoid creating a lacuna in the law.*

24. CLAUSE 72.

Substitute the provision with the following-

"72. Prohibition of donation from a living child

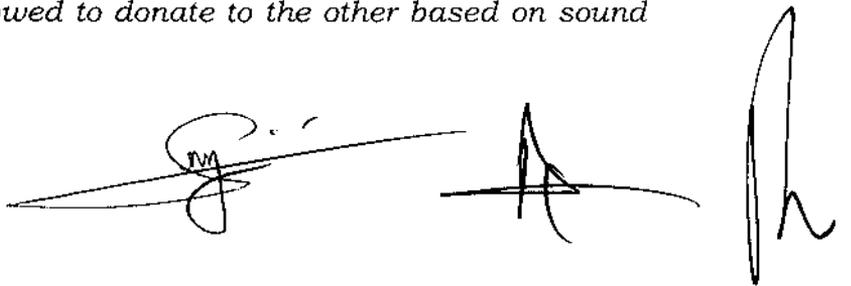
- (a) Donation from a living child is prohibited save for exceptional circumstances approved by the Council, with the consent of a parent or guardian.
- (b) A person who contravenes the provision of this section commits an offence and is liable on conviction to imprisonment for life.
- (c) For the purpose of this section, exceptional circumstances mean haematopoietic stem cell, allograft and autograph to a twin or sibling."

Justification:

- *There are circumstances that warrant donation by a living child such as donation for bone marrow transplant for conjoined or identical twins where one twin can be allowed to donate to the other based on sound medical assessment.*

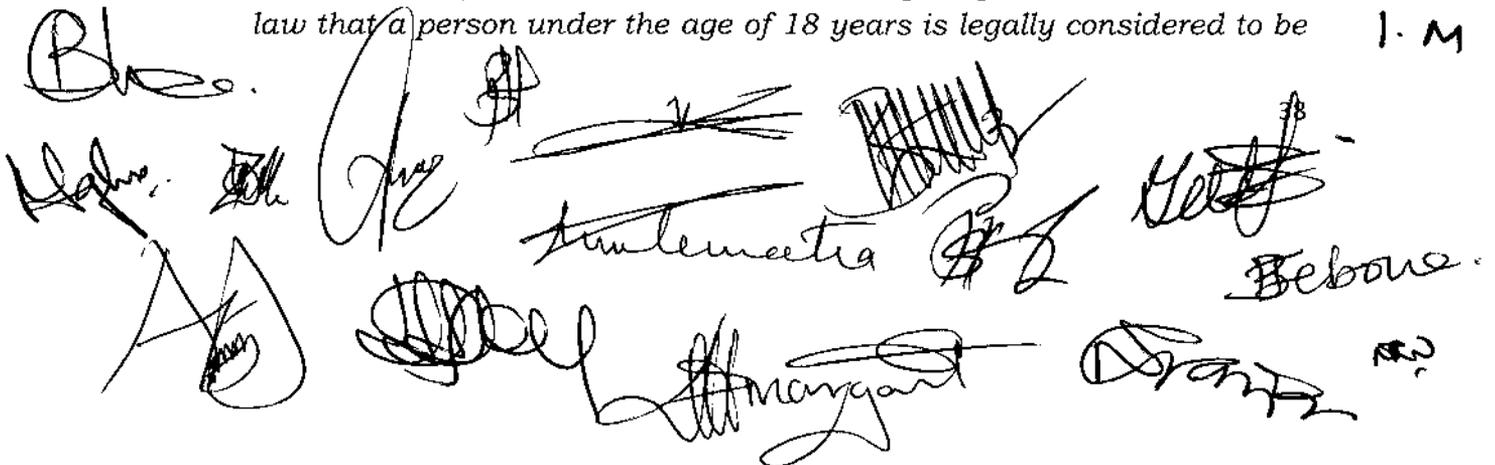
25. CLAUSE 73.

Delete clause 73



Justification:

- *The provision presumes that a child has capacity to consent. It is trite law that a person under the age of 18 years is legally considered to be*



a child and that as a child he or she automatically does not have the capacity to consent.

26. CLAUSE 74.

Amend the provision as follows-

- a) In sub clause (1) by substituting the words "sound mind" with the words "mental capacity";

Justification:

- For consistency with the terminology used in the Mental Health Act, 2018, which outlawed the use of the word "unsound mind" and instead adopted the use of the words "mental incapacity".

- b) Delete sub clause (2)

Justification:

- The Provision lacks clarity, and besides the content of sub clause (2) is catered for under sub clause (1)

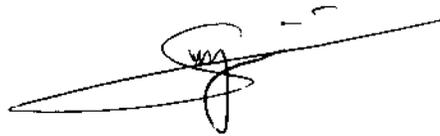
27. CLAUSE 75

- a) Amend sub clause (1) by deleting the words "brain dead or"

Justification:

- For clarity

- b) Delete sub clause (4)



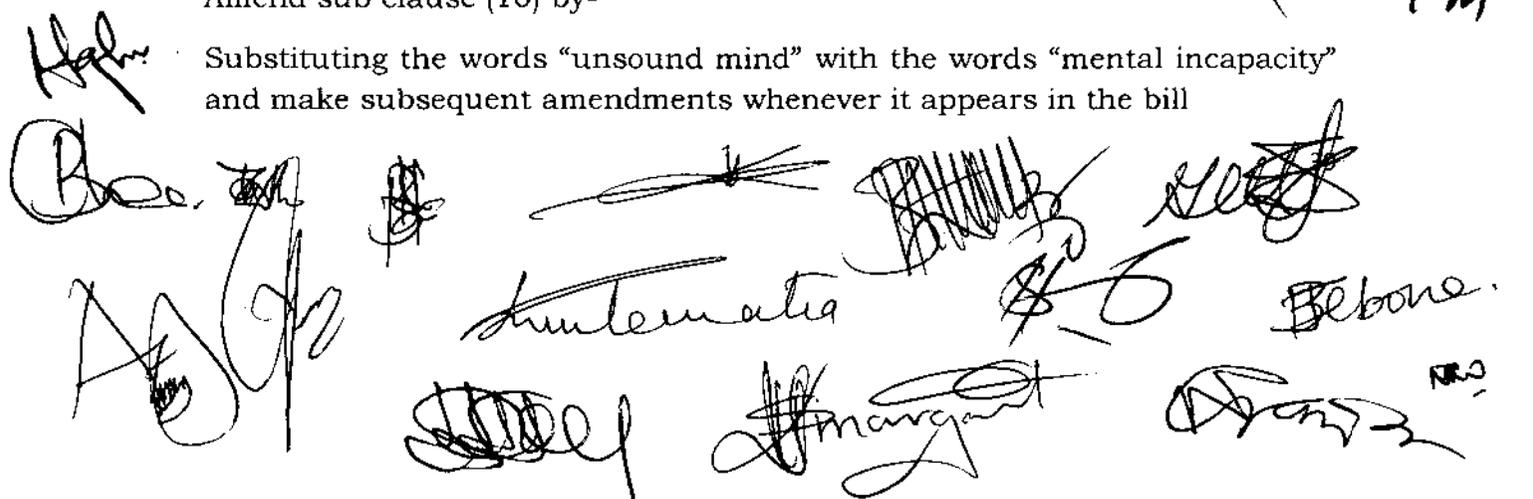
Justification:

- It is likely to be manipulated/abused. The time taken to secure a court order may go beyond the time of viability of the organ, tissue or cell.

28. CLAUSE 76. NOMINATED REPRESENTATIVES.

Amend sub clause (10) by-

Substituting the words "unsound mind" with the words "mental incapacity" and make subsequent amendments whenever it appears in the bill



Justification:

- *Consequential amendment.*

29. CLAUSE 78

Delete sub clauses (3), (4), and (5)

Justification:

- *harvesting organs, tissues and cells sent for post mortem could be abused and in cases of medico-legal nature, it may destroy evidence that might be needed at a later day; for example, in cases of exhumation.*

30. CLAUSE 79.

Delete

Justification:

- *Because there is no requirement for certification of death before post-mortem by the council, which would create a possibility of persons alleging that organs were harvested from a patient who was still alive, and in any case, clause 75 already takes care of how organs are harvested from the dead.*

31. CLAUSE 88

- a) Amend sub clause (1)(c) by inserting the word “unjustifiable” immediately before the word “financial”

Justification:

- *Sometimes use of money is required for purposes of organ, cell or tissue transplant.*
- b) Amend sub clause (2) as follows-
- *in paragraph (a) by deleting the words “loss of earnings” and inserting the words “as may be approved by the council” at the end of the provision.*

Justification:

The bottom section of the page contains numerous handwritten signatures and scribbles. Some legible words include "Amendment" and "Bebone". There are also some numbers like "40" and "1-11" and a small "RSO" at the bottom right.

- Use of the words "loss of earnings" can easily be abused and commercialized; and use of the words "as may be approved by the Council" is to ensure quality control.

(c) Delete paragraphs (b) and (c)

Justification:

- Paragraph (b) shall be catered for in the regulations, and paragraph (c) is delated because Consent is sought before going for any surgical procedure and the consent explains ay eventualities may arise.

(d) Redraft sub clause (6) as follows-

"(6) A person who contravenes this section commits an offence and is liable to life imprisonment."

Justification:

- To provide for a more deterrent penalty.

32. CLAUSE 91.

Amend the provision by inserting a new sub clause after sub clause (4) to read as follows-

"(5) A body corporate that commits an offence under subsection (1) is liable, on conviction, to a fine not exceeding **five hundred thousand currency points.**"

Justification:

- Body corporates should be prescribed a more stringent penalty

33. CLAUSE 92. GENERAL PENALTY.

Amend the provision by substituting for the words "ten thousand currency points" with "one hundred thousand currency points or imprisonment not exceeding twelve years, or both"

Justification:

- To prescribe a more deterrent penalty.

34. CLAUSE 96. REGULATIONS

Amend sub clause (2) as follows-

Handwritten signatures and scribbles:
 - "mutualita" (top right)
 - "1.9" (top right)
 - "41" (middle right)
 - "Belone" (bottom right)
 - "Margaret" (bottom center)
 - "Dane" (middle left)
 - "A" (bottom left)
 - "J" (middle left)
 - "K" (middle left)
 - "L" (middle left)
 - "M" (middle left)
 - "N" (middle left)
 - "O" (middle left)
 - "P" (middle left)
 - "Q" (middle left)
 - "R" (middle left)
 - "S" (middle left)
 - "T" (middle left)
 - "U" (middle left)
 - "V" (middle left)
 - "W" (middle left)
 - "X" (middle left)
 - "Y" (middle left)
 - "Z" (middle left)

- a) In paragraph (a) by inserting the words "accreditation and" before the word "designation"

Justification:

- *The transplant center must first be accredited before designation.*
- b) In paragraph (f) by inserting the word "National" before the word "waiting list";
- c) By deleting paragraph (s);
- d) By inserting four new paragraphs after (o) to read as follows-
- "fees to be charged by the council"
 - "recall procedures"
 - "look back procedures"
 - "procedure for sharing of organs"

Justification:

- *To be more inclusive*
- e) Inserting a new provision after sub clause (3) to read as
- "For the purpose of this section, "Sharing of organs" means medically sanctioned movements of a body organs, tissues or cells from one organ bank to another.

Justification:

- *for clarity*

35. SCHEDULE 2.

Insert number (4) after "(3)" to read as-

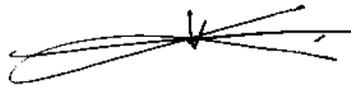
"4. Storage"

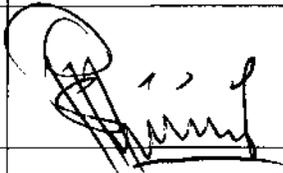
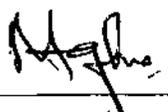
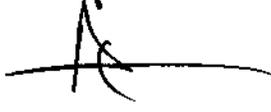
Justification:

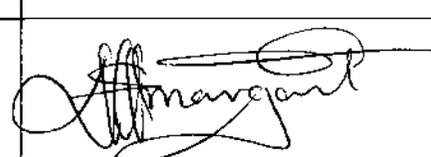
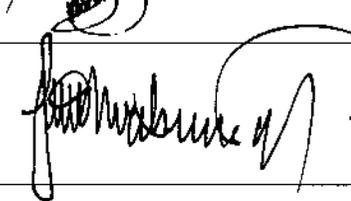
- *To be all inclusive. Storage is one of the components of transplant activities*

The bottom of the page is filled with various handwritten signatures and scribbles. Some legible words include "Luntemata", "Belone", and "42". There are also some numbers like "1.11" and "150". The signatures are in black ink and vary in style, some being very stylized and others more legible.

**COMMITTEE ON HEALTH - ENDORSEMENT OF THE REPORT ON THE
UGANDA HUMAN ORGAN DONATION AND TRANSPLANT BILL, 2021**

S/NO	NAME	SIGNATURE
1.	Hon. Dr Charles Ayume - Chairperson	
2.	Hon. Ssebikaali Yoweri - Vice-chairperson	
3.	Hon. Ninkusiima John Paul	
4.	Hon. Namukuta Brenda	
5.	Hon. Nakazibwe Hope Grania	
6.	Hon. Lematia Ruth Molly Ondon	
7.	Hon. Laker Sharon Balmoyi	
8.	Hon. Bebona Babungi Josephine	
9.	Hon. Chelain Betty Louke	
10.	Hon. Dr Bhoka Didi George	
11.	Hon. Atwijukire Dan Kimosho	

12.	Hon. Otingiw Isaac Ismail	
13.	Hon. Ayebare Margaret	
14.	Hon. Rutahigwa Elisa	
15.	Hon. Dr Ruyonga Joseph	
16.	Hon. Sekyanzi Benard Kirya	
17.	Hon. Eng. Irene Muloni Nafuna	
18.	Hon. Mbayo Esther	
19.	Hon. Dr Nandagire Christine Ndiwalana	
20.	Hon. Dr Kagabo Twaha Mzee	
21.	Hon. Zaake Francis	
22.	Hon. Nanyondo Veronicah	
23.	Hon. Dr Kamara Nicholas	

24.	Hon. Dr Lulume Bayiga Michael	
25.	Hon. Col. Dr Victoria Nekesa	
26.	Hon. Auma Kenny	
27.	Hon. Makokha Margaret	
28.	Hon. Nakato Mary Annet	
29.	Hon. Dr Opio Samuel Acuti	
30.	Hon. Bahireira Tumwekwatse B Sylvia	
31.	Hon. Zawedde Victorious	
32.	Hon. Nebanda Florence Andiru	
33.	Hon. Rwaburindore Tarsis	
34.	Hon. Batuwa Timothy Lusaala	

[Handwritten signature]

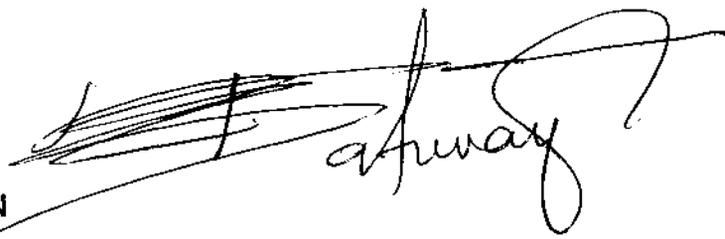


MINORITY REPORT ON THE HUMAN ORGAN DONATION AND TRANSPLANT BILL, 2021

SEPTEMBER, 2022

[Handwritten scribble]

[Handwritten scribble]



1. INTRODUCTION

Rt. Hon. Speaker and colleague Members of Parliament, on behalf of members of the committee on Health who have signed on to this Minority Report, I would like to state from the onset that we are proud of the immense effort and work that went into the majority report which took care of many of our views and positions and indeed the law is timely to enable Ugandans take advantage of advancement in human science and medicine and will go a long way to save lives and prolong living.

On 5th July 2022, the Minister of Health tabled in Parliament the Uganda Human Organ Donation and Transplant Bill, 2021, and the same was referred to the Committee on Health in accordance with Rule 129(1) of the Rules of Procedure of Parliament.

The Bill intends to provide a legal framework that would enable carrying out of organ transplants in Uganda. The object of this Bill is to establish a legal framework for the regulation of organ, cell and tissue donation and transplantation in Uganda. The law aims at protecting the dignity and identity of every person and guarantee, without discrimination, respect for his or her integrity and other rights and fundamental freedoms with regard to donation and transplantation of organs, tissues and cells of human origin.

Pursuant to Rule 205 of the Rules of Procedure of the Parliament of Uganda, we hereby present dissenting opinion from the opinion of majority of the Committee.

1. AREAS OF DISSENT

We dissented with majority of the Committee on the following:

- a) Need to arrange close relations in order of ascendance for purposes of establishing who should be contacted first where consent is needed.
- b) Powers of the Minister over the Council which compromises the independence of the Council;
- c) Proposed competencies for members of the Council that leaves out critical professions and cadres that should be on the Council
- d) Tenure of the Human Organ Donation and Transplant Council
- e) Accreditation and licensing of multiple centers for organ harvesting
- f) Accreditation and licensing of multiple centers as organ banks
- g) Exporting organs
- h) Inclusion of a mechanism to protect vulnerable populations and migrant workers





3.0: DISSENTING OBSERVATIONS

3.3: Powers of the Minister over the Council which compromises the independence of the Council.

We disagreed with the majority committee on the powers of the Minister to direct the Council and the requirement as provided in the Bill to have the Council comply with the directives as a must, yet the same law provides for the independence of the Council.

Recommendation: Amend Clause 5(1) to give room to the Council to consider the directives and guidance of the Minister without talking them up by force.

3.4: Proposed competencies for members of the Council

Clause 8 of the Bill guides on the key qualifications and competencies of the people who should be members of the Council. The key competencies listed excludes a Pharmacist who are persons with expertise on drugs to guide on policy and oversight matters at the council level. Drug supply and management, drug costs, drug safety, drug interaction, drug dosing are highly technical aspects of organ transplant that need oversight and policy frameworks. Transplant patients have to take immunosuppressant medications for life which come at costs that need to be managed and currently estimated at UGX 36,000,000 per year, are exposed to drug safety concerns arising from organ replacement even where cross matched, dose adjustments due to organ variations and drug interactions for recipients with multiple ailments on a cocktail of drugs. The structure further excludes a Social Scientist on the committee, a resource needed to address the strong socio-cultural issues in Uganda's setting. The council as prescribed in the bill is a full time council with day to day responsibilities.

Recommendation: Amend Clause 8 to include a person trained as a social scientist and a pharmacist to be part of the Council.

3.5: Tenure of the Human Organ Donation and Transplant Council

We disagreed with the majority of the members on the issue of the tenure of the Council. The Bill, in Clause 10, proposes that the tenure of the Council shall be three years renewable once. We are convinced, guided by evidence available, that independence of council members is affected when they have to work for renewal of their appointments.





Recommendation: Amend Clause 10 to provide for the tenure of office to be one term of six years non-renewable.

3.6: Accreditation and licensing of multiple centers for organ harvesting

Clause 28 provides for the Council to designate a hospital as an organ transplant or donation center. We disagreed with the majority report in as far as the majority agree with the proposed law seeking to liberalize the harvesting of organs to various centers that would have satisfied certain criteria as shall be provided for by the Minister on advice of the Council. We maintain that the harvesting and banking of organs should be under the direct management and control of the Council in the different approved centers and hospitals should only be accredited to do transplanting.

Recommendation: Amend provisions of the Bill to ensure that organ harvesting is under the direct control of the Council. Specifically, Clause 28 (1) should be amended as suggested under the recommended amendments on Page 7.

3.8 Qualification for designation as transplant centres

Clause 30 provides for the qualification for designation as transplant centres. We disagreed with the majority in regard to the need for the provision of a Pharmacy and a blood storage unit as one of the requirements for the transplant centre. The transplant centre will need drugs for immunosuppression during and post organ transplant. It will also require blood and other medical supplies. Whereas the clause provides for other requirements prescribed by regulation by the minister it is imperative that the minimum requirements is stipulated in the principal Act for the avoidance of doubt.

Recommendation: Amend clause 30 to include a Pharmacy and blood storage unit.

3.3 Prevention of organ, tissue or cell trafficking

Clause 88 provides for the prevention of organ, tissue or cell trafficking. Cases of vulnerable persons who have been exported abroad for labor are awash with allegations that their organs are harvested without their consent. There have been media reports of persons who are mentally incapacitated and street children being taken abroad for illegal harvesting of their organs under the disguise of medical treatment and adoption respectively. Provisions under this cause do not cater for illegal organ harvesting that is done on vulnerable Ugandan citizens and investigations being medical in nature maybe out of reach of the affected victims.

Recommendations: amend clause 88 to provide for the Minister to prescribe regulations to safeguard vulnerable persons exiting the country from exploitation and medical investigation assistance for victims of illegal organ donation.





Proposed amendments to the Uganda Human Organ Donation and Transplant Bill, 2021.

Proposed Amendment 1

Clause 5(1): Amend Clause 5 (1) by deleting the words, "... **and the council shall comply with those directions**" at the end of the clause sentence.

Justification: Clause 5(1) seems to be in conflict with clause 5(2) in as far as sub-clause 1 gives powers to the Minister to give directions and mandates the council to comply and sub clause 2 purports to guide that the directions shall not adversely affect or interfere with the independence of the council.

Proposed Amendment 2

Clause 8: Amend Clause 8 by adding the words, "**Pharmacist and social scientist**" after the word "management" at the end of the clause sentence.

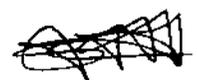
Justification: The processes surrounding organ harvest and transplant, both before, during and after involve a lot to do with social behaviors and cultural adjustment. There is a lot of work to do around sensitization of the community, counselling of the donors and **donees** and cultural re-adjustment. If indeed the reasoning behind the listing of competencies required for members on the Council is to ensure successful organ donations and transplants, then the input of a social scientist on that Council is of much value.

Secondly, Drug supply and management, drug costs, drug safety, drug interaction, drug dosing are highly technical aspects of organ transplant that need oversight and policy frameworks. Transplant patients have to take immunosuppressant medications for life which come at costs that need to be managed and currently estimated at Ugx 36,000,000 per year, are exposed to drug safety concerns arising from organ replacement even where cross matched, dose adjustments due to organ variations and drug interactions for recipients with multiple ailments on a cocktail of drugs. A Pharmacist, who is an expert on drugs therefore needs to be included.

Proposed Amendment 3

Clause 10: Amend Clause 10 by replacing the text with the following text, "**A member of the Council shall hold office for a non-renewable one term of six years.**"

Justification: The Organ Council can only play their role if independent. Clause 10 proposes the tenure of office for the council members to be three years renewable once. The period of three years is too short to guarantee the independence of the chairperson and the council members. The fact that they are eligible for reappointment makes it worse arguably because some of them could execute





their duties not necessarily in a manner that ensures justice, but in a way that pleases the appointing authority so as to secure a reappointment. This is exacerbated by the provision to have the members of the Council appointed by the Minister. The experience in other related bodies like Human Rights Commissions has shown that short and renewable tenures of such bodies compromise their independence. In the case of *Incal v Turkey*, the European Court held that among the concerns that made the independence of the judges in issues questionable was that their term of office was only four years and subject to renewal.

The argument that giving members of the Council a long term of six years presents challenges as they may behave any way, they want does not hold water since Clause 11 provides for termination of appointment of a Council Member.

Proposed Amendment 4

PART IV: Change title of Part IV as suggested thus; **DESIGNATION OF ORGAN, TISSUE AND CELLS DONATION, TRANSPLANT CENTERS AND APPROVAL OF BANKS**

Justification: The title does not capture the organ harvesting and donation bit.

Proposed Amendment 5

Clause 28 (1): Replace Clause 28(1) with the following text, "***The Council shall establish and run organ, tissue and cells donation and harvesting centers in areas and regions as the council shall deem it necessary.***"

Justification: The Committee agreed to delete Clause 28(1) since it would be discriminatory to legislate Mulago in the law, it should also apply like others. We therefore propose to have that clause provide for the provision to create organ donation and harvesting as preserve of government. Whereas organ, cells and tissue transplant can be liberalized and left to hospitals and other health care facilities, harvesting of the same should be the preserve and control of the government. This is because having multiple harvesting centers creates challenges of quality control and may fuel trafficking in organs which this law intends to curb.

Secondly, the law and World Health Organization (WHO) guiding principles emphasize that there should be no trade in organs and organs should be given to recipients free of charge which implies that governments should be in control of these organs. Unless the Council harvest these organs, it will be difficult to have control over the same yet Clause 53 of the same Bill suggests that it's the Council that shall have powers to allocate organs, tissues and cells to people on the waiting list. How shall the Council ensure allocation of organs it does not own? It will also create challenges where an organ harvested by one health facility/hospital is





required by a recipient in another hospital. What would be the motivation of private health care facilities and hospitals to invest in harvesting organs which they don't own?

Further, when hospitals both private and public are designated by the Minister as Human Organ Donation and Transplant facilities, there in lies a risk of conflict of interest. This conflict of interest envisaged to manifest in a way that; a patient in the Intensive Care Unit (UCU), on ventilation, is looked at as in imminent death rather than critically sick. Under the presumption that death is about to happen, focus may be shifted to addressing the demand of the organon recipients waiting list.

The law is liberalizing organ donation and transplant programs to include private hospitals. In the face of internationally recognized challenges of organ trafficking and transplant tourism as pronounced in the Istanbul Declaration, 2008; we should not only rely on restraining provisions in this proposed law but have systems and mechanisms that compel compliance and avert the above challenges. We therefore contend that all harvesting programs should be done by Government through the Council, and the harvested organs be distributed to designated hospitals whether public or private, in accordance with the waiting list provided for in Clause 53, for the purpose of transplanting.

We also note that this proposed law pronounces itself through many provisions on donations programs and transplant programs being nearly free of charge. However, the law does not expressly state whether the surgical procedures to effect harvesting and the consequent transplant will be free as well. We are alive to the subsisting financial burden of undergoing a surgical procedure in the premium private hospitals in this country. Unfortunately, these will be two surgical procedures (harvest and transplant) to address the therapeutic benefit of the recipient. The cost is foreseen to be discriminative. Yet, healthcare should be one of the benefits to be derived from the tax citizens pay. When government takes on the responsibility of harvesting; the hospital bill will to a great extent be manageable especially in private facilities; among other benefits of ensuring that whoever is on the waiting list gets a desired organ, tissue or regardless of his or her financial status. Since citizens are willing to donate their organs free of charge, in a cost sharing arrangement, let the Government also take over the responsibility of investing in harvesting of the organs for the benefit of all.

Proposed Amendment 6

Clause 28 (2): Delete the words "**donation and**" in the clause

Justification: This is to make it clear that designation of hospitals can only be in respect of transplanting not donation and harvesting.





Justification: The sub-clauses were drafted from the angle of organ, tissue and cells banks being managed by various hospitals. Where the banks are being managed by the Council, these provisions are redundant and not necessary.

Proposed Amendment 13

Clause 38(1): Amend Clause 38(1) by substituting the words "approved by the Minister" with "created."

Justification: This is to align with the change to have organ, tissue and cells banks established by the Council not as approved by the Minister.

Proposed Amendment 14

Clause 38 (4): Delete the clause

Justification: This is to align with the change to have organ, tissue and cells banks established by the Council.

Proposed Amendment 15

Clause 38 (5): Amend the text by substituting the word "approved" with "establishment of"

Justification: This is to align with the change to have organs, tissue and cells banks established by the Council and provide guidelines for the establishment of banks as shall be managed by the Council.

Proposed Amendment 16

Clause 46: Amend the clause by substituting the word "approved" with the word "established."

Justification: This is to align with the change to have organ, tissue and cells banks established by the Council.

Proposed Amendment 17

Clause 47: Amend the clause by substituting the word "approved" with the word "established."

Justification: This is to align with the change to have organ, tissue and cells banks established by the Council.

Proposed Amendment 21

Clause 49(2): Amend the clause by substituting the word "approved" with the word "established."





Justification: This is to align with the change to have organ, tissue and cells banks established by the Council.

Proposed Amendment 22

Clause 51 (1): Amend the clause by substituting the word "approved" with the word "established."

Justification: This is to align with the change to have organ, tissue and cells banks established by the Council.

Proposed Amendment 23

Clause 53(2): Delete clause 53(2).

Justification: Whereas the spirit of provision 53(2) is logical, and humane; and aware of our weaknesses in ensuring compliance, we are convinced that the need to protect our law from provisions that can be exploited to benefit organ traffickers; by far outweighs the need to pay attention to international relations.

Proposed Amendment 24

Clause 53 (5): Amend Clause 53(5) to add, "...or any other discriminatory ground" after "financial standing" to cater for discrimination on any other basis that may not be envisaged now.

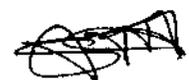
Justification: Clause 53 (5) attempts to lay down grounds upon which one should not be discriminated. The list seems to be exhaustive as it does not provide room for any other ground that may not be foreseen by the law. Amending as proposed will ensure that any other form of discrimination is taken into consideration and it would be up to courts to interpret whether the act or omission qualifies to be branded as discriminatory.

Proposed Amendment 27

Clause 86 (1): Amend the clause and delete the words, "**other than reimbursement of donation related expenses...**"

Justification: Clause 86(1) creates a window for monetary compensation or any other form of compensation for donation-related expenses. Leaving any opening for monetary compensation is likely to be abused and commercial dealings in organs and tissues will be disguised as reimbursements. The provision should be amended to completely prohibit any form of monetary or any other reimbursement. The only support a donor should expect is medical facilitation to ensure they have recovered fully to function normally.

Proposed Amendment 28





Clause 88(2): Delete Clause 88(2).

Justification: Just like in Clause 86(1), it should be clear to all donors that no monetary compensation is expected beyond medical treatment to re-instate them into a situation they were in before the operation. In short, at no single point in time should a living donor expect payment into his or her account for donating an organ.

Proposed Amendment 29

Clause 88: Insert two new sub-clauses immediately after clause (5) as follows:

New Sub-clause 1

"The Minister may by regulations prescribe measures to safeguard and protect vulnerable persons including the mentally incapacitated, street children, the unemployed, and others; from being exploited through the illegal removal of their organs as they exit the country for labor, adoption, medical treatment or other purposes."

New Sub-clause 2

"The Council shall make provisions for handling of medical complaints from victims or persons affected by organ trafficking including medical care such as rehabilitation services in a designated facility and medical investigations in an approved facility"

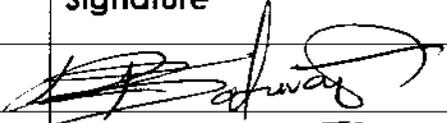
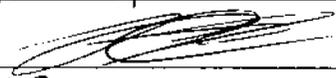
Justification: Cases of people who have been exported abroad for labor are awash with allegations that their organs are harvested without their consent. There have been media reports of persons who are mentally incapacitated and street children being taken abroad for illegal harvesting of their organs under the disguise of medical treatment and adoption respectively. This law should therefore make provisions to strengthen screening at the ports of entry via the port health facilities for any specified group of persons before exiting the country and upon return and put in other measures to safeguard them. This will help prevent but also improve detection. It will also ensure that persons affected by organ trafficking or the victims whether happening within or abroad have access to medical care for various purposes including rehabilitation or investigations due to the trauma they have undergone. Investigations should further be done only in approved facilities to avoid falsification of evidence considering syndicated nature of this crime. The human body in organ trafficking serves as the scene of crime.



CONCLUSION.

Rt. Hon. Speaker, resources have been allocated to the Committee members and two benchmarking trips to Turkey and India have been arranged this month. Our suggestion is that the committee report would be enriched with knowledge and experiences derived from the exposure from those two countries where such a law and practice is in place. Undertaking the bench marking trips after we have passed the law is like putting the cart before the horse. We therefore request you, Rt. Hon. Speaker and Honourable Colleagues, to consider and support the Minority Report.

MEMBERS OF THE COMMITTEE ON HEALTH WHO SIGNED THE MINORITY REPORT ON THE HUMAN ORGAN DONATION AND TRANSPLANT BILL, 2021.

SN	Name	Signature
01	Batuwa Timothy Lusaly	
02	Dr/bayissa Michael Kaleme	
02	Dr Samuel Opio Aziti	