



PARLIAMENT OF UGANDA

PARLIAMENTARY DEBATES

(HANSARD)

OFFICIAL REPORT

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WEDNESDAY, 2 NOVEMBER 2022



PARLIAMENT OF UGANDA

IN THE PARLIAMENT OF UGANDA

Official Report of the Proceedings of Parliament

SECOND SESSION - 2ND SITTING - SECOND MEETING

Wednesday, 2 November 2022

Parliament met at 1.56 p.m. in Parliament House, Kampala.

PRAYERS

(The Speaker, Ms Anita Among, in the Chair.)

The House was called to order.

COMMUNICATION FROM THE CHAIR

THE SPEAKER: Honourable members, I welcome you to today's sitting. We are two days in the House and I get surprised that some Members are already tired of being in the House. I want the public out there to know that the money that is being paid to the Members is taxpayers' money. So, if you cannot be in the House, I have always asked the question; where are you?

Clerk, the rules are very clear - 15 days. If you miss, I want you to start taking a roll call from yesterday - And I am saying start taking a roll call from yesterday. Up to 15 sittings; failure for you to attend those sittings, then an action will be taken. Remember we can have a by-election in your constituencies.

Yesterday, we adjourned the House prematurely due to the absence of the relevant ministers in the House at the time of consideration of the report of PAC (Local Government) and to my surprise, up to now, the ministers- I can see the front desk is still free. I only see the usual faces, like Hon. Bahati. Hon. Bahati, we must really thank you. *(Applause)*

Rule 114(1) of the Rules of Procedure requires ministers to attend sittings of the House and sub-rule (2) of the same rule mandates the Leader of Government Business to ensure attendance. I do not know who the Leader of Government Business for today is.

The absence of the ministers yesterday was therefore a breach of rule 114, which is really fundamental. Honourable ministers and honourable members, the reason I circulate the Order Paper early is because I want the ministers to be aware of what is on the Order Paper and make sure they attend.

Honourable members, I urge you to prepare and be available in the House for the House business. Let people not just come here for leisure; we are not going to allow that.

Yesterday, we met with the Deputy Inspector-General of Police, Maj. Gen. Katsigazi, to express the concerns about the rampant cases of boda boda accidents on the roads. There is a video that has been compiled by police on the accidents and it is circulating around. And, indeed, the accidents are rampant and bad.

One of our Members, Hon. Nantongo, got an accident last night but we thank God she is not in a bad shape. We thank God for her life. The cost of these accidents is really too much. Some of them are because of bad roads. But mostly, they are caused by the *boda boda* cyclists; they need to be very careful and respect other road users. We need to urgently address this issue of the accidents both as Parliament and police

and all the road users. Therefore, we urge the Minister of Works to work together with the police and ensure this is corrected.

Honourable members, I have always heard in the corridors of Parliament and all over that we are seated in a place that is not ours - that has already been mortgaged. We have been following up on the issue of the land belonging to Parliament. Today, I want to tell you officially - where we are, Plot 16-18, all this land belongs to Parliament and I have got the land title today. *(Applause)*

Therefore, I will officially handover the land title to the Clerk - you need a copy *(Laughter)* I will give a copy to everybody who wants because the land belongs to all of you. The land is for Uganda Parliamentary Commission, P.O. Box 7178, Kampala and it is from Plot 16-18.

Honourable members, under Rule 157(3) and Rule 160(4) of the Rules of Procedure, as a Dean of the Independents, I designate the following Independent Members, who are in the Committee on Appointments to other committees:

1. Hon. Margaret Rwabushaija to the Committee on Climate Change;
2. Hon. Margaret Lamwaka to the Committee on Public Accounts (COSASE);
3. Hon. John Musila to the Committee on Public Accounts (Local Government).

I put the question that those Members be designated to the said committees.

(Question put and agreed to.)

THE SPEAKER: The Members have been designated. Honourable members, during recess, I sought public opinion on areas that they would want to be a priority. And I put a question that “As we go back to the House, what does the public expect of us as the leaders of the people?” We got a number of suggestions from the public. One of them was affordable housing to curb the housing deficit. The other one was on the national health insurance for all Ugandans. Then the other one was the cost and quality of education in Uganda; sanitary pads

that were promised to all the girl children at school; to regularise the labour exportation and harmonisation of the remuneration of public servants.

There was an issue on human rights, equity and fairness in taxation. As we embark on the budget process, I urge you to ensure that we allocate money to those issues such that the public gets to know that we do work for them. If it is about laws that should be brought, like the one of the national health insurance - Dr Aceng - that is what the public wants to hear from your sector.

Honourable members, you will allow me to vary the Order Paper to accommodate a motion for reconsideration of the Public Health (Amendment) Bill, 2022 as returned by the President, immediately after the Pensions Bill.

I thank you once more for coming.

2.08

MR JAMES KABERUKA (NRM, Kinkizi County West, Kanungu): Thank you, Madam Speaker for your touching communication, especially on the matters of concern from the public, especially on the matter of cost and quality education. It is true. Your observations are really typical of what the public is concerned about.

I would like to bring it to your attention that the Statehouse Anti-Corruption Unit is in the districts arresting headteachers who have asked for money from the parents. However, last year and this year, there is no budget from the Ministry of Education and Sports that was meant to construct or rehabilitate classrooms for primary schools.

In the event where we do not have classrooms, how does Government expect these children to survive if they do not provide money? We have not provided any money to rehabilitate these primary schools because they are in temporary structures. Some are under trees.

Therefore, I would request that the Statehouse Anti-Corruption Unit should also work hand-in-hand with other technocrats to appreciate

the situation we are all in as Ugandans, but not just making arrests, which are not informed by facts.

Secondly, on the issue of remuneration, we are going to have half-baked students because the Science teachers have taken two months without any payment. The Arts teachers are also grappling with a meagre payment and that imbalance itself is going to cause a very irrational education, which will cost this country in future.

In future, can Government - before you take a decision - make an analysis or study such that you make a decision that is informed by facts, rather than just coming in to pronounce a statement that is going to cost this country?

Madam Speaker, I am a teacher by training. In this recess, I have interacted with the schools. The teachers are not teaching. They do not have morale and we are going to have half-baked results in terms of the quality of education.

Notwithstanding the above, there is an issue of vocational skilling where we say we are going to give a certificate of competence. I am even told that there is a certificate for being an MC. A senior three student will graduate with it. Can we remove these jokes when it comes to education? Thank you.

THE SPEAKER: Honourable members, thank you. Since this is a cry from the public, can we have this put on the Order Paper for us to discuss so that we look at them sector by sector? If they are talking about education, we put it on Education. If it is on health, we put it on Health. Clerk, can we have this on the Order Paper so that we discuss what the public wants to hear. Is that seconded?

HONOURABLE MEMBERS: Yes.

2.13

MR JOSEPH SSEWUNGU (NUP, Kalungu West County, Kalungu): Thank you, Madam Speaker. I would like to thank Hon. Kaberuka for the information he has given. In this very House, I raised issues –

THE SPEAKER: Who has given you information? He was reacting to the information I gave that I did a survey asking the public, “What would you want us to legislate on?”

MR SSEWUNGU: Thank you, Madam Speaker, for that good information and that good survey. However, there are a number of issues I raised here and you directed the Minister of Education and Sports to come and respond to them. I do not know why the ministry is refusing to respond to these issues.

The New Vision last Sunday ran a story that there are 286 secondary schools in Uganda without headteachers. They went on to give the details of these schools. I raised the issue here that teachers have run out of teacher training colleges. Tutors are not teaching and we are not going to have teachers in the near future.

Recently, when the blind children were burnt, the Minister of Education and Sports went there and said that she never knew the school, yet, it is a Government-aided school with teachers on the payroll. Therefore, could we get time to find out why we raise issues here on the Floor of Parliament, you give directives to ministers and they adamantly refuse to come back to respond to the issues we give? If they continue holding these matters, these are the challenges we have.

Madam Speaker, right now, Science and some Arts teachers are getting Shs 4 million. I was talking to Hon. Muruli Mukasa. He recently said that he is going to deduct the money from the Arts teachers who got the Shs 4 million. I raised the matter here inquiring about what was going to be done to Arts teachers who were not given the Shs 4 million. The minister promised to come here and explain but nothing is happening. Headteachers are running out of offices to become blackboard teachers. Schools will no longer get teachers who want to become headteachers.

The issue of education is very serious. In Kalungu alone, we have over 30 primary schools without toilets. Government has released money for only two schools to build

two stances of toilets where I have children ranging from 500 to 600. We are on a time bomb. If you play around with this matter, we are all headed for doom and creating more of these people who hit our heads as we move at night.

The Prime Minister, who is the Leader of Government Business, is failing to make appearance in this Parliament, yet, we have been here - Hon. Obua was here with me.

If the Prime Minister is going to come late, the Speaker should be informed early enough so that the House can handle matters, which do not need the Prime Minister's presence first, and that is within the Speaker's prerogative.

However, here we are - ministers are driving with lead cars full of fuel and police escorts, yet, Police does not have enough vehicles in the districts. So, they are enjoying life - they promise Heaven and earth when they appear before the Parliament Appointments Committee: "...when I am appointed a minister, I will do this..." That kind of business is killing Parliament and we must come out, as Members of Parliament, to fight for these matters. So, you can keep your order until next week, honourable member.

THE SPEAKER: Honourable members, my concern is about the attendance of ministers. Whether you qualify or not - you heard what the President said that we have fisherwomen and men, and I cannot go against what the President said.

Honourable members, I have already said we are going to have a discussion on all these matters. Hon. Dr Aceng has even told me she has a Bill on the national health insurance. Can we have those Bills? Can we have a discussion on quality education and on issues that have been raised in regard to education? Government Chief Whip, there are issues that have been raised *-(Ms Sarah Opendi rose)* yes, Hon. Sarah Opendi, please, say something before the Government Chief Whip comes.

2.18

MS SARAH OPENDI (NRM, Woman Representative, Tororo): Thank you, Madam Speaker. I thank you for reaching out to the public. I am glad that they have touched on issues that some of us have raised on the Floor.

Madam Speaker, education and health concern everybody. When we bring motions here and you refer them to a committee but it takes over six months for the committee to return, what exactly are we doing? For example, I brought a motion here on school fees issues, which affect everybody and I thought that when that report comes here, we would be able to discuss not just the issue of school fees but also the way forward. This was because the Education Act is very clear and it states that Government can actually impose a tax so that we have free quality education, but when the public is making a contribution in a pool, not the current system, where people take their children to the "Buddos" and "Gayaza" and they have to pay millions of shillings. Yet, the Government is also contributing to these private schools or Government-aided schools in general.

Madam Speaker, also regarding health, yesterday, we only talked about the two police officers who were killed but all lives matter. Look at the mothers dying in hospitals while giving birth. I tabled a petition here in March, on International Women's Day, on maternal deaths but it has taken over six months. You referred the matter to the Minister of Health and I thought she would come back with a statement for us to debate this motion and see how to support her sector.

Madam Speaker, you also referred a petition tabled by one of the NGOs to me, but it is still on maternal health and that is why I could not bring it here.

Anyhow, Madam Speaker, all lives matter. Can we discuss all these issues with timelines given to these committees that are sitting on these motions or reports or matters referred to them? There must be a limit.

I want to request you, Madam Speaker, to use your authority to demand that these reports be brought here and if the committees cannot, then you can allow us to proceed and discuss these motions directly on the Floor. Thank you, Madam Speaker.

THE SPEAKER: Honourable members, I have already said that this is going to be handled. Honourable member, is it on the same? Okay.

2.21

MR ENOS ASIIMWE (NRM, Kabula County, Lyantonde): Thank you, Madam Speaker, for your communication. Thank you very much for having given the public a window to express their concerns.

I would have loved to wait for the honourable minister to bring the Bill relating to health but I have a concern that has been bothering me for the last two weeks. I have two of my constituents that have been diagnosed with cancer that cannot be handled locally. One has been referred to India and another to Turkey.

While I was trying to follow up these cases, I realised we have very many other cases of that nature in Mulago that cannot be handled by our local medical system and they are just waiting for their fate because they do not have the resources to go to the medical facilities where they have been referred to.

I would like to seek clarification from the Minister of Health, who is here with us: what happens to Ugandans who have ailments that cannot be handled by our medical system but they do not have the money to be referred or to go to the facilities, where they have been referred in those developed countries? How are we supposed to handle such cases and how can families be supported?

If there is no law, how fast can we have a law in place to support such families? Thank you very much, Madam Speaker.

THE SPEAKER: Thank you. Government Chief Whip - Let him respond to what has been raised.

2.23

THE GOVERNMENT CHIEF WHIP (Mr Hamson Obua): Madam Speaker, I have picked two issues. One is on matters that are normally raised by Members on the Floor and require answers from the honourable ministers from different ministries. The second issue is on attendance by ministers.

On issue number one, the Office of the Leader of Government Business, has always extracted all matters raised by the honourable Members and require responses from individual ministries, and we have always circulated them to the ministers to respond. However, I also know, just like Hon. Sarah Opendi has just raised, that there are matters that are raised and are referred to committees to be scrutinised and report back. So, I want to use this opportunity to call upon the honourable ministers to always comply and respond in time.

On the question of attendance, Madam Speaker, the Office of the Government Chief Whip has always religiously and promptly informed Cabinet through our forum about this concern. Just like when you left yesterday, by 5.00 p.m. the Order Paper for today was already out. By 5.17 p.m., I posted it on the forum. So, we have always informed Members of the Cabinet.

Secondly, when the Order Paper is out, the ministry or my office calls the individual minister who should come to respond to the matter on the Order Paper.

Thirdly, there is a rota that we laid on the Floor of Parliament. These are action areas where Madam Speaker, we have always done our part.

Yesterday, you had to adjourn Parliament because the Minister of Local Government was not here. However, the Minister of State for Local Government was called by my office. At first, she indicated that she was coming. However, towards the end, I think she was caught up upcountry, she called back and indicated that she could not make it.

So, we have always done all this, Madam Speaker. Maybe we will proceed to the last aspect of invoking the provisions of the rules to ensure that we comply with the provisions of the rules.

Therefore, Madam Speaker, we have always done our part on those two issues. Thank you very much.

THE SPEAKER: I actually expected an apology from you. I am not going to take this and say, “We have a rota.” Am I the one supposed to follow up on these? I am not the Government Chief Whip neither am I the Leader of Government Business.

2.23

THE GOVERNMENT CHIEF WHIP (Mr Hamson Obua): Madam Speaker, I wish to take responsibility, on behalf of Cabinet, to extend our apology to your office but also going forward, I would like to put it on record to honourable colleagues that we need to prioritise the business of Parliament. Parliament sits for only three days in a week and in the afternoon.

Every ministry, with the exception of very few ministries, have more than two ministers. It is only the Ministry of Science, Technology and Innovation with only one minister. Therefore, let us prioritise the business of Parliament. Thank you very much.

THE SPEAKER: Thank you very much. Honourable Leader of Government Business, we are going to structure the Order Paper next week in such a way that we capture what the public has asked us to look at. We mentioned them before you came and we will put them on the Order Paper and debate issues that concern the public. We shall give you a copy of what has been talked about.

Honourable members, I know we have matters of national importance. I will only take four for now, so that we hear about Ebola.

2.28

MR FRANCIS MWIJUKYE (FDC, Buhweju County, Buhweju): Thank you, Madam Speaker. During my interaction with

the people of Buhweju during the recess, I have come to realise that whereas learners in candidate classes started final exams and others are yet start, Primary Leaving Examinations (PLE) starts on the 8th and ends on 9th of this month. The Senior Four examinations started on October 17th and will end on November 18th. Senior Six exams will be in November up to 9th December.

What is disturbing is that many candidates were stopped from sitting examinations because they have not completed fees payment. I am perturbed that more candidates will be stopped at primary seven and senior four levels.

Somebody studies for four years, they are completing and they have a balance of only Shs 200,000, but they cannot be allowed to do exams. This is disturbing and my prayers are:

- (i) The Ministry of Education and Sports directs that our candidates be permitted to sit exams because it is unfair that one will study all these years only to be denied exams because of fees arrears.
- (ii) The Ministry of Education and Sports directs that all students and parents be tasked to clear their arrears before they get their results.

I thank you, Madam Speaker.

THE SPEAKER: Are we talking about Government-aided schools or private schools?

MR MWIJUKYE: I am talking about both Government-aided and private schools.

THE SPEAKER: Leader of the Opposition, you own a school. Tell us; are you allowing people to sit? *(Laughter)*

2.31

THE MINISTER OF STATE FOR EDUCATION AND SPORTS (PRIMARY EDUCATION) (Dr Joyce Moriku): Thank you, Madam Speaker. I am just coming from Salama School for the Blind in Mukono District. This morning, the bodies of our learners who got burnt from the fire outbreak that took place

last week were handed over to the relatives and parents. At an appropriate time, we will make a statement on the Floor concerning this matter and we continue to pray for their souls to rest in eternal peace.

I would like to thank my colleague for raising that very sensitive matter. It is a topical issue that affects all of us most especially when our learners have proceeded with the academic cycle in primary and secondary schools and are just at the edge of completion. .

This matter was there; that private schools especially tend to stop learners from sitting examinations because they have not completed school fees payment.

Madam Speaker, we have issued a strong guideline informing parents and school administrators that no single learner should be sent home and fail to sit examinations, especially primary seven, senior four and senior six because of school dues.

We offer guidance for the parents to sit together with the school administrators to plan modalities of how to complete school fees balance as the learners go ahead and complete their academic cycle. It is sad to hear that some schools still continue to send learners painfully home and not allow them to sit examinations. I will take that up, most especially in the forthcoming PLE. We will ensure that no learner will be -

THE SPEAKER: Honourable minister, there is some information here. Maybe you could take it.

DR MORIKU: I take it, with your guidance.

MR BASALIRWA: Thank you, honourable minister. The aspect of barring candidates from sitting exams is not limited to primary and secondary schools. It is also applicable in the universities. Somebody who has done Medicine for five years and is in their final year but because they have not paid the semester fees cannot sit exams.

Therefore, as you look at the primary and secondary level, please, try to consider universities and other tertiary institutions because it is happening there as well.

THE SPEAKER: Thank you. Honourable Leader of Government Business, the guidelines that were given by the Minister of Health in regard to Ebola is that we should wear our masks throughout. We love you very much and we do not want you to get infected.

DR MORIKU: Thank you for that information; I take it up. The main challenge is that technology has made everything a little bit simpler because once a child is registered, results are obtained online and because of that, school administrators want school fees cleared before the children sit examinations.

Nevertheless, we have taken that up and I pledge that we will ensure that all children sit the examinations –(Interruption)

THE SPEAKER: Have you given him an opportunity to give you information?

MR SSASAGA: Thank you, Madam Speaker. The clarification I am seeking from the minister is about the private institutions. Unlike the Government-aided institutions where Government sends grants and supports even the preparation for examinations, for the case of private institutions, the parents have a social contract with the school administrations of those private schools.

These schools also have a contract with Uganda National Examinations Board (UNEB) to allow those children sit examinations from those private institutions and that is the centre number.

There comes a student or a parent who registers in this school, enrolls and studies and reaches Form 4 or Form 6. The day the child registers for exams, of which the funds are remitted to UNEB, this child or the parent absconds from paying the school fees and the child now resurrects during the UNEB examinations and

says “This is my right. I must sit because I paid the UNEB fee.”

Madam Speaker, the clarification I am seeking is: why should private institutions raise funds, yet, they had a contract with these parents to pay fees but for two to three years, they have never paid, yet, the examinations are very expensive, especially the practical examinations? Where should this humble school raise funds to organise the examinations?

Unless you are saying UNEB or the Government should now cater for the examinations; they should send advance information with all the logistics involved to prepare the examinations. If it is a private school to do so, I do not know what your ministry is planning in light of that, to support the private institutions. Thank you.

THE SPEAKER: Honourable members, all we want is for our children to sit exams irrespective of whether they are in Government-aided or private schools. The contract you have with the private school owners is the responsibility of the Government and the Ministry of Education and Sports. All students must sit exams, irrespective of whether they paid fees in the final year or not. *(Applause)*

You cannot waste your seven or four years and not sit exams. That is unfair. Remember, you are supposed to give us free education. Issues of quality education that are supposed to be offered by the Government are things that should come on the Order Paper. That matter is now settled. Therefore, we want you to lay on the Table the circular you have given out such that whoever does not comply with the circular is held accountable.

MR MPUUGA: Thank you, Madam Speaker.

THE SPEAKER: Is it on my ruling?

MR MPUUGA: I beg your pardon.

THE SPEAKER: Is it on my ruling, LOP?

MR MPUUGA: No.

THE SPEAKER: I have already made a ruling on education.

MR MPUUGA: I would like to seek your guidance on the same subject matter before you take leave of it.

THE SPEAKER: I have already ruled, my brother. Thank you. *(A Member rose_)* Is it on the same – what matter? Hon. Iddi Isabirye-

2.39

MR IDDI ISABIRYE (NRM, Bunya County South, Mayuge): Thank you, Madam Speaker. I rise on a matter of national importance regarding the South Busoga Central Forest Reserve and the land titles that are being issued.

As a result of a very long dispute of land ownership between the National Forestry Authority (NFA) and the local community in the South Busoga Central Forest Reserve that culminated in many deaths, His Excellency the President of the Republic of Uganda, on the 22 October 2010, directed as follows:

1. That the local community takes land composed of 48 villages;
2. That the 200 metres to be demarcated off for the conservation of the lake shores;
3. That all settlers within the 200-metre lake shore conservation zone vacate and NFA takes land, planted with trees under 18 villages - that is six villages - for forestry plus 12 villages under forest cover;
4. That the local community currently in the lake shore zone relocate to land covering four villages under NFA, thus leaving NFA with land composed of 14 villages that they said would be secured through Parliament.

Madam Speaker, to our disappointment as leaders, before these directives and land is secured through Parliament as per the law established, mafias are working ahead of these directives and decisions. They have gone ahead to secure land titles in a forest. This is

being done with impunity because the honest and humble people that have tried to wait for these directives to be implemented are waiting but there are people who have gone ahead to secure land titles, working ahead of the implementation.

My prayers, Madam Speaker, are:

- i) The minister responsible should immediately direct the cancellation of the titles that have been issued in the 48 villages of South Busoga Central Forest reserve;
- ii) The same should be investigated and culprits be brought to book;
- iii) The Ministry of Water and Environment should expedite the process of degazettement, bearing in mind the time it has taken and the impact created to the affected people, in terms of development. I beg to submit, Madam Speaker.

THE SPEAKER: Thank you. Leader of Government Business?

2.43

THE PRIME MINISTER AND LEADER OF GOVERNMENT BUSINESS (Ms Robinah Nabbanja): Madam Speaker, allow me to welcome you back from recess. The matter before us is quite delicate and I want to request some time so that I come back next week on Tuesday with a concrete answer. I promise that the culprits will face it rough, if they are trying to –(Interjection)– Yes.

THE SPEAKER: Thank you. Next week on Tuesday, we will get feedback.

2.43

MS BRENDA NABUKENYA (NUP, Woman Representative, Luwero): Thank you, Madam Speaker. Recently, the President gave a directive that public transport should be banned in the Ebola-stricken districts. You are aware that on Monday, primary school pupils will start sitting for PLE, Uganda Certificate of Education (UCE) and Uganda Advanced Certificate of Education (UACE) accordingly.

If students cannot access transport - in some rural schools, you find that centres are not near homesteads. Some have to move far areas to sit for their exams. I think in your communication yesterday, you asked the minister to do something that will ease transport for students who will have to move far areas to sit for exams.

Examiners and teachers were cleared but the students were not. We are aware that people are being beaten, especially those making movements using *boda bodas*. So, I envisage a situation where students are going to miss out and reach late, which is going to affect the whole situation. That is my issue. I request the Minister of Education and Sports or the Prime Minister to come and inform us about the measures they are taking to clear students so they can be able to sit examinations. Thank you.

THE SPEAKER: If I remember very well, that is one of the issues I said should be answered today after a presentation on Ebola. My memory serves me well. Bearing in mind that the Government has restricted public transport, what plans do you have for students who are sitting examinations and did not register in their own schools, but in different centres?

2.46

THE MINISTER OF HEALTH (Dr Jane Aceng): Thank you very much, Madam Speaker. Public transport is only restricted within the districts of Mubende and Kassanda and not any other district.

The schools – the Minister of Education and Sports would speak to this -

THE SPEAKER: Doctor, for clarity, we are also talking about the same districts.

DR ACENG: Madam Speaker, Senior Four students started their exams on the day His Excellency, the President issued the directive to restrict movements and, to-date, they are doing exams. We have not experienced any challenge. Since then, I have gone to the districts of Kassanda and Mubende five times.

The Ministry of Health deployed vans and buses to support the teachers and pupils or learners to reach their schools and they have been using this transport means in both districts. If there are students registered outside Mubende and Kassanda, the Ministry of Education and Sports will reach out to us and we shall find a way. Right now, we have not heard of such cases. I thank you.

THE SPEAKER: Thank you very much. Kindly, ensure that all those students in those districts do examinations. Facilitate them as the ministers of health and education as well as the Leader of Government Business. Hon. Mutiwa?

2.47

MR ERIC MUTIWA (NRM, Bunyole West County, Butaleja): Thank you very much, Madam Speaker. I rise on a matter of urgent attention regarding an upsurge of malaria cases in Butaleja District and many parts of Bukedi subregion. Malaria is claiming the lives of many people on a daily basis in Butaleja. In Bunyole West, we are losing seven to 13 people on a daily basis. The most affected are children aged between five and 15 years.

My prayers are that;

1. The ministry should send a team of experts to do research and assess the situation.
2. The Ministry of Health should increase the supply of antimalarials in the area.
3. The ministry and the Government should distribute mosquito nets in the district as a measure of controlling malaria.

I thank you.

THE SPEAKER: Thank you, Hon. Mutiwa. Members, in such circumstances, where there is a killer disease or where there is a big problem like that, I do not think you should wait for the House. These ministers' numbers are known. You can call Dr Aceng anytime. *(Laughter)* Even Majegerere does not pick. *(Laughter)*

Honourable members, where you have a problem like that – at least I pick my phone.

Don't I pick? I will pick my phone and look for the minister. However, that does not stop the minister from responding. *(Member rose)* Hon. Gorette, I know you have personal issues with Hon. Kasolo. *(Laughter)*

2.50

THE MINISTER OF HEALTH (Dr Ruth Aceng): Madam Speaker, it is not the first time that issue is being raised on this Floor and we have responded several times. However, allow me request my colleague to come and give a response this time.

2.50

THE MINISTER OF STATE FOR HEALTH (PRIMARY HEALTH CARE) (Ms Margaret Muhanga): Thank you, Madam Speaker. I thank the honourable colleague for raising this issue and I also thank my honourable senior colleague. The honourable member from Butaleja is right. In our statistics here, Butaleja has the highest number of malaria cases, but the deaths he has reported are higher than what we have – unless people are dying in homes. However, for those who die in health centres, we always record.

Since this year started, I remember in May, we raised a red flag over the upsurge of malaria cases in many districts. It has come down though, from 65 per cent to about 30 per cent. The places, which are really badly hit are Bukedi, Teso, Lango, Busoga, Karamoja and Acholi.

When we raised the red flag, it was in western Uganda, especially Ankole and Toro. Right now, we have Budaka, Busia, Butaleja, Butebo, Kibuku, Pallisa and Tororo – but Butaleja has the highest number of cases.

Nonetheless, the National Medical Stores has been going around, giving out mosquito nets. Also, the ministry - together with partners – has been putting out a lot of adverts for people to sleep under mosquito nets and to close their houses a little early so that we can, together, fight this malaria.

Thank you, Madam Speaker.

THE SPEAKER: Thank you, honourable minister. What the honourable member is asking for is for antimalarials and mosquito nets to be provided in the district.

DR ACENG: Yes, Madam Speaker, his requests are okay. At the beginning of this year, we distributed nets in his district and we have increased the supply of antimalarials. We shall, again, interact with the district to understand whether what we are providing is not adequate.

He also asked for scientists – the research in your district started two months ago but research takes time. We shall provide you with information as soon as the scientists are done. I thank you.

THE SPEAKER: Thank you. Hon. Ssimbwa -

2.53

MR FRED SSIMBWA (NUP, Nakifuma County, Mukono): Thank you, Madam Speaker. The Issue I am raising is about the escalating prices of sugar and falling prices of sugar cane in my constituency and the entire country. I stand to raise the interest of Parliament on the fast-escalating prices of sugar over the last four months. Earlier, in May, a 50kg bag of sugar was costing Shs 150,000, before escalating to Shs 165,000 in June.

As we speak right now, the price of sugar has shot up four times in September and October from Shs 185,000 to Shs 195,000 – in only nine days – and then from Shs 215,000 to Shs 217,000 in less than a week.

As you are aware, Madam Speaker, my constituency, Nakifuma, is a sugar cane-growing area. However, the farm gate price of sugar cane has instead been falling from Shs 180,000 a tonne down to Shs 130,000 and Shs 90,000 in some areas.

Besides that, Madam Speaker, the above prices, which I am talking about, are factory prices. If you move around town, in some places such as Kikuubo, a 50kg bag of sugar is about Shs 230,000 to Shs 240,000.

Madam Speaker, I seek an explanation from the Minister of Trade, Industry and Cooperatives on the current sugar situation. I beg to submit.

2.56

THE MINISTER OF STATE FOR TRADE, INDUSTRY AND COOPERATIVES (TRADE) (Ms Harriet Ntabazi): Thank you, Madam Speaker. I thank my colleague for raising this issue. Sugar, as an industry, is one of the fastest growing industries in the economy. I wish to inform Parliament that in the manufacturing industry, it has contributed a lot.

Since he has said that I give a little explanation, the industry has contributed around Shs 300 billion in taxes alone. I also wish to inform the House that the sugar industry has employed more than 60,000 of our young people. It has also, through the by-product of bagasse, contributed around 150 megawatts of electricity of which 70 goes to the Mega Bridge -

THE SPEAKER: Honourable minister, the Member is asking about the prices that have risen. Remember, when you pay those high prices, that is what is contributing to the taxes. The taxes are high at the expense of the local people. That is what is happening.

MS NTABAZI: Okay. Let me go direct to the answer. I had thought that this information is important for such a House. First of all, with the background -

THE SPEAKER: By the way, we are not such a House. We are an august House.

MS NTABAZI: Okay, an august House. The issue of rising prices of sugar is a very serious matter. First of all, in the last two years, we had a lot of production of cane and this was the cry of the people of those areas where sugarcane is produced. We had a lot of upcoming factories and they consumed –

THE SPEAKER: There is a procedural matter. Honourable minister, what I expected of you is to tell us what Government is going to do in order to stabilise the cost of sugar.

MR KIMOSHO: Thank you, Madam Speaker. The way the honourable minister is presenting to us seems like she lacks some information. Isn't it procedurally right that you allow her time to go and consult the technocrats so that she can feed us on what we can digest? Thank you.

THE SPEAKER: Honourable members, we have a very able Committee on Trade Tourism and Industry. Can I have that committee handle this matter and report back to the House? Next item.

MS NTABAZI: Most obliged, Madam Speaker.

MINISTERIAL STATEMENT ON THE PROGRESS IN COMBATING THE EBOLA OUTBREAK IN THE COUNTRY

THE SPEAKER: Honourable members, some order. This statement was scheduled to be presented yesterday. However, the senior Minister of Health requested that it should be deferred to today since she was in the field in Mubende. You will recall that on the onset of Ebola, she has become a resident of Mubende. She gives us regular updates on what is happening. Most especially, we must also thank the President because he has been giving us updates and addressing the country on Ebola.

I now invite the Minister of Health to give us an update accordingly. However, before you do that, today, I also have very important visitors in the House. In the Public Gallery, I have the District Executive Council Members of Bukedea. *(Applause)*

We have:

1. Hon. Akol Mary - the Vice-Chairperson, LCV
2. Mr Emong Showan Juma - the Speaker of Bukedea,
3. Madam Tino Hellen Grace - Secretary for production.

You are most welcome. *(Applause)*

They are represented by Hon. Ikojo John Bosco and none other than the Speaker. *(Laughter)* Thank you for voting for the Speaker and the Members of Parliament; Hon. Ikojo and Hon. Isiagi should come back unopposed. *(Laughter)*

2.59

THE MINISTER OF STATE FOR HEALTH (PRIMARY HEALTHCARE) (Ms Margaret Muhanga): Thank you, Madam Speaker. Allow me update this august House on the current Ebola virus disease outbreak in the country and the containment measures taken by the Ministry of Health so far -

THE SPEAKER: Has the report been uploaded?

HONOURABLE MEMBERS: Yes.

MS MUHANGA: On the 20 September 2022, the Ministry of Health declared an outbreak of Ebola Sudan virus -

THE SPEAKER: There is a point of order here.

MR SSEWUNGU: Thank you, Madam Speaker. Yesterday, we had the Minister of State here who rightly stated - and you granted - that she was waiting for the Cabinet minister to come and read the statement. What we are seeing now is that our suspect who was here yesterday - as usual - is reading the statement in front of the senior minister. Has she got permission now? Did she tell us a lie yesterday?

Is the Minister of State in order to confuse this House by informing us that the senior minister was coming to read the statement, yet, she had the ability of doing the same yesterday?

THE SPEAKER: Honourable *Omusomesa; Mukatuliki*, I know you went to Law School of recent and there is an aspect of delegation. What the senior minister is doing is delegating. We must make these junior ministers grow so that we can stop complaining that the ministers are not in the House. *(Applause)*

By the way, I am the Chairperson of the House. The minister told me that I should let her junior read the statement. She is here to respond to all your questions. Junior minister, please, proceed.

MS MUHANGA: Thank you, Madam Speaker, for your right and timely ruling. I actually said that we were collecting data and our technical teams were in Kassanda yesterday to pick information that we needed and that is why we are bringing this today.

Secondly, this lies in my docket of Primary Health Care, and so, we have made no mistake. On the 20th of September 2022, the Ministry of Health declared an outbreak of the Ebola Sudan Virus in Mubende District. The outbreak then spread and now, it is in four districts of Kassanda, Kagadi, Bunyangabu and Kyegegwa within a period of two weeks.

Subsequently, due to movements of contacts and symptomatic individuals for health services, the outbreak spread to Wakiso District and Kampala City, bringing the total number of affected authorities to seven. All the affected local authorities had been categorised as very high risk or high risk based on the assessment done by the Ministry of Health.

Madam Speaker, allow me to give the status of the outbreak. It is 43 days today since the declaration of the Ebola Virus Disease outbreak and the total number of confirmed cases stand at 130 of whom 43 have succumbed to the disease and 45 have been treated and have improved, and 40 are still undergoing treatment.

The table, which we have already uploaded will give you the statistics from Bunyangabu to Kagadi and Kampala, and also give the subcounties that were affected and the number of people who are in those districts.

Kassanda and Mubende will remain the epicentre. And now, we have a new district of Wakiso, specifically in Busiro and Nansana, as you can see in the table.

Among the confirmed cases, there have also been health workers. To-date, 15 health workers have been infected, of whom six have succumbed to the deadly infection. May their souls rest in eternal peace.

Out of the 15, six were from private facilities and nine were from the public health sector. This includes the team of medical students who got infected in Mubende Regional Referral Hospital. We have noted that most of the cases tend to visit several private clinics for care before finally going to the public facility. This exposes the health workers to infection. We have been engaging and appealing to all health workers (public and private) to use appropriate protective gear when in facilities attending to patients. Every Tuesday morning, we do programmes to inform our people.

Madam Speaker, we have been mobilising resources to respond to this outbreak. To guide response to the outbreak, a three-months' response plan costing Shs 75 billion was developed, presented to Cabinet and submitted to the Ministry of Finance, Planning and Economic Development for funding.

To-date, we have not received any response. Several partners have mobilised resources but they are yet to be formally communicated to the Ministry of Health, how each have been mobilising. The partners, however, have been supporting several interventions on the ground, including surveillance, contact tracing, risk communication, case management, transport and safe burials.

We are organising an accountability forum and we expect all partners to declare the resources mobilised towards the epidemic. However, to urgently support the affected districts to carry out response activities, the Ministry of Health through internal re-organisation of resources, disbursed Shs 2.12 billion to the districts as you will see in the table below. Mubende Shs 500 million, Kyegegwa Shs 305 million, Kassanda Shs 305 million, Kagadi Shs 305 million, Bunyangabu Shs 305 million and Mubende Regional Referral Hospital Shs 400 million.

All the above districts accessed the funds and are carrying out interventions and paying their health workers except Kassanda, where the leadership and the entire health system is a little weak. But efforts are being made to strengthen the response in Kassanda District by recruiting health workers on contract to support the district, deploy response teams and all that is required. We also want to construct an Ebola Treatment Unit in Kassanda.

We, however, request more support from you honourable Members and especially Members from Kassanda District.

Ebola treatment facilities

Madam Speaker, the Government and partners have set up three Ebola Treatment Facilities in Mubende District. A forty-two-bed capacity treatment facility at the regional referral hospital. Another 42-bed capacity Ebola Treatment Facility, at the district's works grounds. The third treatment facility is at the original outbreak epicentre in Madudu: an eight-bed capacity facility that is cushioning the main facility at the retention centre for suspected cases under surveillance and investigation.

In Kampala Metropolitan Area, we have two permanent treatment facilities in Mulago National Referral Hospital and Entebbe Municipality. Mulago Ebola Treatment Facility is a 120-bed facility that is co-located but separate from Mulago National Referral Hospital. This facility is currently housing the 22 quarantined contacts from Kampala and Wakiso. They will be evaluated this week to create room for the admission of both suspected and confirmed cases.

Madam Speaker, the second Ebola Treatment Facility is in Entebbe National Isolation Centre. It is a 67-bed capacity facility with eight ICU beds. This is where all the current Kampala Metropolitan confirmed cases are being managed.

The Ministry of Health with support from partners is setting up an additional treatment

facility in Mulago Sports Field. These 64-bed capacity will be built in two phases over a period of four weeks. With the completion of this facility, the ministry will have 351 beds available for the treatment of confirmed cases. Furthermore, open spaces have been identified to set up more tents should the need arise.

Treatment for Sudan Ebola Virus

Madam Speaker, there is no known treatment for this Sudan Ebola Virus Disease. Currently, there are a number of promising treatment options that the ministry is using under trial, including monoclonal antibodies and repurposed drugs like remdesivir donated by the US Government.

However, the doses available are still very few. So far, 13 patients have received these trial drugs with relatively good outcomes. Four patients admitted in critical condition succumbed to death. This is to emphasise the importance of early reporting and hence treatment. Another request has been submitted to the USA Government for more of the trial drugs.

The ministry will evaluate the efficacy of three candidate Ebola Sudan vaccines on contacts in the coming weeks.

The candidate vaccines are Oxford, from the United Kingdom, Sabin from the USA and Merck also from the USA. The main objective is to evaluate their efficacy to protect primary contacts of Ebola patients within 29 days of contact.

We plan to vaccinate contacts of 150 confirmed cases, those make 3,000 people initially. Trial preparation has been done and concluded and we estimate that we may begin the trial in the next two weeks.

Madam Speaker, despite the presence of these promising treatment modalities, the mainstay of control for Ebola Sudan Virus Disease is early detection of the infection, individuals and their contacts, and immediately isolating these contacts. If we can do that, we will reduce the numbers.

The moment you feel any symptoms, please, go for treatment. We are banking on you, honourable members, because when you speak, your people listen. Early treatment, as we have seen in the 45 recovered individuals, is associated with a good outcome.

For most of the individuals that have died, time was lost while running from one clinic to another, including going to shrines to consult witch doctors.

The population understanding the signs and symptoms of Ebola Virus Disease and avoiding exposure to it; especially, contact with the sick persons' body fluids vomit, stool, faeces, blood, saliva, sweat, urine - all these can infect you if you are in close contact with a patient.

This exposure may be through direct handling, deliberate or incidental, or even accidental of linen, surfaces, cleaning, sharing of lavatories, beddings, or through handshaking, hugging, or caring for a confirmed case.

Madam Speaker, I would like to inform this House and the entire population that the symptoms of Ebola in the early phases are similar and consistent with most common febrile illnesses like malaria, where the clinical cause of the disease begins with high-grade fever, headache, sore throat, abdominal pain, in the upper abdomen especially, fatigue, general body weakness, intractable vomiting and diarrhea, plus bleeding manifestations, may not be an early presentation. So, if you feel some fever, please, do not stay at home because you can be helped.

This emphasises the aspect of seeking care early if you had contact with anybody who has Ebola.

The outbreak epicentre remains Mubende and Kassanda specifically. In the Mubende District, the most affected subcounties are Madudu, Kiruma and East Division of Mubende Municipality. While in Kassanda, the subcounties of Kikandwa and Kalwana are the most affected.

At the beginning of the outbreak, the epidemic spread to the three districts of Bunyangabu, Kagadi, Kyegegwa.

Two districts have completed the 21 days of contacts follow up and even individuals have been retired from the contact list. They are back home and do not have the Ebola virus. Since there has been no second retransmission, we believe transmission may have been interrupted.

However, intensified surveillance continues in these districts for another 21 days to complete the 42 days cycle before they can be cleared. A new case appeared in Kyegegwa late last week, and so, we have restarted the countdown afresh.

To stop further exportation of cases into other parts of the country, His Excellency, the President of Uganda directed the restricting of movements into and out of the districts of Mubende and Kassanda.

However, internal movement is allowed and transit vehicles are free to cross through to other districts; if one is going to Kakumiro, Kabarole, Fort Portal, they can cross through but not stop anywhere in Mubende.

The President's directive of restricted movement was based on optimising control effects in the same geographical area and minimising the spread to other areas. The penetration of Ebola in heavily populated areas creates a situation of rapid spread and is associated with sustained and protracted person-to-person transmission.

Urban Ebola transmission is complex and Government will do it takes to ensure control of transmission in the urban settings, especially the Kampala Metropolitan Area, which includes Wakiso.

To illustrate the extent of the spread in urban transmission, a single case can quickly set up several transmission lines. In short, in a very short time, as shown in this graphics, just one person in this congested city can spread Ebola to very many other people.

This is an example of a rapid spread of infection by the case that came from Kassanda to Mulago and later, died in Nansana after running away from hospital. He is responsible for infecting the family of seven, including neighbours and many others.

We were able to get this cluster plus one other because of the ministry's vigilance in contact tracing and field case investigations.

Six of the infected family members are learners, who attended three schools in Rubaga Division. We have listed 170 contacts from these schools that we are following up.

All the schools in Kampala Metropolitan Area have been supported with temperature guns, Jik and chlorine solution. Teachers, non-teaching staff and parents are being sensitised to ensure a safe learning environment.

Madam Speaker, to ensure this rapid spread does not happen, all contacts in Kampala will be quarantined at Government cost at designated places for 21 days to limit further spread through secondary transmission.

I appeal to all of you to sensitise and encourage all Ugandans to understand and appreciate the rationale behind this, and to cooperate to ensure that we bring this outbreak to a speedy end so that we return to our normal ways of life.

Madam Speaker, in the two districts of Mubende and Kassanda, the Ministry of Health is carrying out the following interventions:

1. Intense risk communication to sensitise the communities about the Ebola virus disease, its causes, presentation and prevention;
2. All burials in the community - whether they died of Ebola or not - are carried out by the Safe Dignified Burial Team, with our teams. Samples from all dead bodies are removed and tested to rule out death from Ebola;

3. Surveillance and contact tracing for all listed contacts, aiming at 100 per cent follow up;
4. Surveillance in schools. All schools in Mubende and Kassanda districts have been provided with three temperature guns each to monitor temperature of learners, teachers and support staff. Parents have been counselled not to send sick children to school and teachers have been advised to report any absenteeism immediately for investigation;
5. Treatment of confirmed cases and psycho-socio counselling. The people who have had Ebola in their homes need psycho-socio counseling in order for them to settle their minds;
6. There is also an ecological surveillance that has been concluded, with 189 bats caught in Madudu and Kiruuma subcounties. Over 320 samples have already been extracted for testing to ascertain the actual cause and origin of this Ebola Sudan virus in Mubende.

Laboratory testing

Madam Speaker, the ministry has deployed its first ever mobile Ebola laboratory in Mubende at our regional referral hospital, and this is part of the two mobile PCR laboratories procured by the East African Community Secretariat, under the directives of the Heads of State of the East African Community countries.

The laboratory is currently handling all the samples from Mubende and Kassanda districts. Plans are underway to deploy a mobile laboratory in Kassanda Ebola Treatment Unit after construction and in Mulago Ebola Treatment Unit, should the need arise. The Uganda Virus Research Institute laboratory in Entebbe continues to handle all other samples from the rest of the country.

Madam Speaker, these are the challenges that we face in the fight against Ebola. We have encountered a number of challenges that are currently affecting our response.

- i) Inadequate funding. Since the declaration of the Ebola outbreak, no funding has been provided to support the ministry in their response, in spite of a clear response plan, and this is affecting the speed of the response. Partners usually inquire about Government input before they declare their resources. Furthermore, we are seeing partners declaring resources mobilised on social media, which resources we do not have information about, hence the need for the Ministry of Finance to make a follow up.
- ii) Inadequate human resource for surveillance and treatment. Our structure has not yet been expanded to include epidemiologists and yet this cadre is highly required for purposes of mapping out high risk areas and follow-up of contacts.
- iii) In addition, a large number of health workers are required in the Ebola Treatment Units as one can already wear the PPE for a maximum of 45 minutes and needs to exit. The ETUs, therefore, require a set of three highly trained groups to keep changing and to give time to rest;
- iv) Politicising of the epidemic. Some politicians, including in this august House, are also confusing the public. To quote from one politician, “There is no Ebola epidemic in this country and this is Government propaganda of mobilising resources.”

THE SPEAKER: Honourable minister, I want the name of the person who said that. We need to name and shame these people who say that there is no Ebola. These are the people who are encouraging our people to go to witch doctors.

MS MUHANGA: The extract has been laid on the Table, Madam Speaker, by the minister.

THE SPEAKER: This is not a table. Lay it on that table. *(Laughter)* Read the name and lay it on the Table.

MS MUHANGA: Madam Speaker, the Ministry of Health noted a quote from a talk show of a political leader called Abubaker

Kawalya, honourable member for Rubaga North, on CBS, 1 September 2022. Here is what he said and I lay it on the Table.

THE SPEAKER: Honourable members, we will need evidence to that effect and if it is true, we will refer the Member to a disciplinary committee. *(Applause)*

MS MUHANGA: Thank you very much, Madam Speaker. We do not believe that health workers would sacrifice their lives to treat Ebola infected persons just for money and put their lives and those of their families in danger. This kind of attitude and negative talk is very discouraging and may lead to an explosion of cases where we have made progress.

However, we would like to thank all Members of Parliament from Mubende, Kassanda and Kampala Metropolitan Area, who have been with us on the ground, sensitising the communities and sending encouraging messages of support and the response.

- i) Lack of cooperation by the public due to the negative talk, myths and misconceptions. We also note that there is a lot of misconception and myths about Ebola. Many of our communities are yet to understand the dangers posed by an Ebola epidemic and that it can devastate economies and kill an entire village. The negative propaganda and politicising of the epidemic makes communities undertake dangerous activities, for example:
 - a. Running away to other districts to avoid being isolated. In so doing, they run away with the infection, spread it to their loved ones, spread it to other districts and other people get involved and in the end and end up dead, yet they could have been saved.
 - b. The exhuming of a body in Kikandwa Subcounty, Kassanda District, which has led to the death of six other people from that cluster.
 - c. This could have been avoided but there was a Muslim community that said they cannot bury the person without washing

the body. They exhumed the body and washed it and six more people died.

- d. Spreading of the epidemic to other districts. This stretches the health sector workforce. It causes fatigue and in the end, death, which is very expensive to control.

In conclusion, Madam Speaker, the Ministry of Health appeals to Ugandans to cooperate with the surveillance teams, the contact tracers, the VHTs, and the health workers.

If you have signs and symptoms of the Ebola Virus Disease, please report to the nearest public health facility. If you or your loved one has had contact with an Ebola-infected person, please inform the contact tracers and remain in isolation for at least 21 days, while cooperating with the surveillance teams during this period of follow-up. Running away and hiding exposes you and your loved ones to infection potentially resulting in death that could have been avoided.

The ministry continues to carry out risk communication to the public. We have had a number of community sensitisation meetings in highly affected districts of Kassanda and Mubende, and with the schools in the affected districts. We have also held high-level meetings with district/city task forces of Mubende, Kassanda and Kampala metropolitan area a number of times. We have also engaged local and political leaders in Mubende, Kassanda and Kampala metropolitan area.

I would like to thank Members of Parliament from these districts who actually were at the ministry last week for the meeting. We shared a lot of information with them. Hon. Oshabe, who was not there physically, was on *Zoom*, and he gave us a lot of insights.

Lastly, Madam Speaker, allow me to thank you and all honourable members for the support you have always given to the health sector. Your support has enabled the sector to build systems over time to respond to epidemics and provide quality service to the people of Uganda. I am

also glad that even the international media, especially British Broadcasting Corporation (BBC) has been reporting very well about Uganda and praising Uganda for fighting Ebola and that they trust we shall end it.

We continue to appeal to all of you to support the response to the Ebola epidemic because people in your constituencies listen to you, and your voices may help bring this epidemic to an end. I thank you for your kind attention. I beg to submit. (*Applause*)

THE SPEAKER: Thank you very much, honourable Minister of Health. The report is informative. Honourable members, the report is informing you of what is happening with the SOPs that we are supposed to follow.

As I said yesterday, the ministry gave us SOPs that we should follow. We should be able to put on our masks throughout. We should not allow visitors to the premises of Parliament without checking them and we should have temperature guns to check everyone's temperature.

Field visits - and I want you to be attentive to this. Field visits by committees to areas with Ebola must stop. I am not saying "suspended", but must stop for now. Members from those areas under the lockdown are advised to desist from public outreaches in their constituencies. We know you want to do politics but for now, you should not do it to avoid getting in contact with people who have Ebola. As Parliament, we have issued the SOPs that should be followed.

In the public gallery this afternoon, we have a delegation from the Uganda Human Rights Commission. They saw their item on the Order Paper and they are here to witness the proceedings. We have Mr Crispin Kaheru. You are most welcome. He is a member of the commission. We have Ms Ruth Sekindi. She is the Director of Monitoring and Inspection. You are welcome. We also have Ms Priscilla, a senior human resource officer. They are here to observe our proceedings.

Honourable minister, yesterday, while you were away, there was an issue raised by Hon.

Asuman, who is a colleague to the President. Hon. Asuman raised an issue that needs clarification.

3.32

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): Thank you, Madam Speaker. The issue I raised yesterday - and the Minister, Hon. Margaret Muhanga was here, and I saw her taking note of the legal framework under which the lockdown and rules are being made in Kassanda and other affected areas.

You remember, Minister Dr Ruth Aceng, in the 10th Parliament, issued several statutory instruments when we had COVID-19 to guide the country on a wide range of issues. Now we have Ebola and pronouncements are being made, yet we do not have any statutory instruments on the record.

We had requested just like you did with COVID-19, you table before this House the statutory instruments on Ebola because you need to guide the police in executing its work. When people are arrested, they must be arrested under some law and they must be charged under some law.

I will give you an example: during COVID-19, the regulations you issued under statutory instruments were gazetted. If you were found operating a bar and you were convicted, you could be sentenced to two months imprisonment. But prior to that, there was a very big challenge. So, we ask that you present that document before this House for information.

Otherwise, Madam Speaker, this statement has provided good information on the status of Ebola in the country. Honourable minister, I want to appreciate you for that save for that aspect. Thank you.

THE SPEAKER: Thank you. Members, I have said it is informative. I am not going to allow debate. I am only going to allow one person, Hon. Oshabe, who is on Zoom. Hon. Oshabe, go ahead.

3.44

MR PATRICK OSHABE (NUP, Kassanda North County, Kassanda) (Zoom): Thank you very much, Madam Speaker. I do not know whether I am being heard well.

THE SPEAKER: Yes.

MR OSHABE: Thank you very much, Madam Speaker. I am in the Pan African Parliament, which is in session. However, on this matter of Ebola, I had to create time so that I could participate in it. Therefore, I would like to thank you, Madam Speaker, for creating time for me. I am very glad about that.

I want to begin by thanking the minister for the statement. I also want to, generally, thank the Ministry of Health for the right response towards the Ebola situation, not only in Mubende but also in Kassanda.

If there is any Member of Parliament who does not believe that there is Ebola, I want to inform you that in my hometown, Kikandwa, we have so far lost 13 people in just a week. You can imagine. The entire town is deserted. People have chosen to run away because that is the current situation. Ebola exists and our people are dying. Every day, we record people who are dying from Kikandwa in Kassanda North.

Having said that, I want to thank the Ministry of Health. They began putting out these messages, but people took them lightly. I also want to thank our people – the Ugandans – who are on the frontline in the fight against Ebola. Ebola is a deadly disease. Even many health workers fear it.

We also thank the security personnel and other government agencies, who are doing whatever they can. We also thank development partners who are giving a lot of support, currently, in the country.

I want to thank, specifically, Dr Ruth Aceng, the Minister of Health. Honestly, she has been coming to Kassanda and meeting people herself. While I am away, I have known and been following up the matters of Ebola on a

daily basis. I know who is hospitalised, who has been affected and who has held which meeting. I am glad and happy and I thank her. Despite the fact that the disease is very deadly – everyone fears it – she comes with her team to the ground.

Having said that, I need some clarification; I have noted that in the statistics they give, they indicate Kikandwa and Kalwana as different subcounties in all the ministry's statistics. I want to take this time to say that there is no subcounty in Kassanda called Kikandwa. Kikandwa is a parish in Kalwana Subcounty.

Honourable minister, I also noted that in your statistics, you indicate that we have a subcounty called Gombe in Kassanda District. We do not have a subcounty called Gombe. Please, take note of that. I have been following up how you have been reporting. We have only one subcounty, Kalwana, that is affected by the Ebola virus. In that subcounty, there is only one parish called Kikandwa that is affected currently. I needed to clear that.

The next thing that I need the minister to clarify is the issue of the leaders, as it is stated in the statement. I think it was unfair to say that the leaders in Kassanda are weak. Despite the fact that - I am not on ground - the leadership there is willing to participate and make a contribution; they have been excluded in the process of managing Ebola.

Therefore, it is not right to say that the leaders in Kassanda are weak. Probably, if the ministry said that they have a weak health team, I can agree. However, it is not true that the leaders in Kassanda are weak.

That noted, I also need clarification on the money. When you look at how the money that first came was distributed, you will notice that despite the fact that the two districts are on lockdown – Mubende and Kassanda - they gave out money equally even to those districts, which are not under lockdown. How can Kassanda get the same amount of money as Kagadi, which is not under lockdown? I need the justification for that.

The other issue is that Mubende District has 10 subcounties, while Kassanda has 15. When you look at the money indicated to have been given out, Mubende got Shs 500 million and Kassanda Shs 300 – even in food. I have seen the Prime Minister around. She can also clarify why Mubende, with fewer subcounties, is given much more, even in terms of food, than Kassanda.

Having said that –

THE SPEAKER: I hope it is lastly.

MR OSHABE: Madam Speaker, I am begging the Ministry of Health to handle these issues I am going to highlight. First, we have a problem with communication. The ministry does not communicate to us. We do not know, on a daily basis, what is going on. I am pleading that the communication channels be right so that as a Member of Parliament, when I know what has transpired today, I will communicate to the subcounty leaders and every one.

I will give an example. Honourable minister, I reached out to the permanent secretary when they were saying that there was no proper treatment in Mubende until I spoke and told people that it was not true. I had also believed them, but when we made correspondences, we found out that there was proper treatment and feeding. We informed our people and that helped out.

Therefore, can we create a proper communication channel where we have all the leaders? For us, leaders, our job is to communicate to our people because they know and believe in us.

The other thing is – I am pleading with the minister that the schools in Kikandwa Parish should be closed because children from affected families go to the same classrooms as children who are not affected. We informed the minister. She was like, “It is not necessary”, but I am pleading. In that parish, we can leave the candidates only, but the other classes should go home. Let the parents protect their children from home because the situation is out of hand at the moment.

We also have the issue of trucks, which you have left to move from Kikandwa. They move timber to Kampala and elsewhere. I do not know how you are going to address that. It is necessary that they are stopped so that they do not spread the disease elsewhere.

Like I have said, it is only one parish in the entire Kassanda –

THE SPEAKER: Can you conclude?

MR OSHABE: Madam Speaker, I am concluding. If it is only one subcounty, why can't we reconsider the lockdown for that one subcounty or in the neighbouring subcounties and the rest of the district is left out of the lockdown? At the moment, after almost 20 days, we know where the problem is and even their statistics show where the problem is. Can't we lockdown that specific subcounty - that is my home subcounty - where I come from - Kalwana Subcounty? Can't it be locked down so that all the resources are concentrated on that in terms of security and medical treatment and the rest of the district is left out?

Madam Speaker, the challenge is the people who say they have not seen a dead body of a person who succumbed to Ebola, are outside that subcounty. They are not from Kalwana. The people who do not know that –

THE SPEAKER: Hon. Oshabe, we have got the information.

MROSHABE: Lastly, Rt Hon. Prime Minister, Robinah Nabbanja, my prayer is: This is not the time to play the politics of Opposition and NRM. We know Kassanda is an Opposition area but we are praying to you, to please let us concentrate on the disease; we shall do the politics later on when this is done. Thank you very much, Madam Speaker.

THE SPEAKER: Honourable members, first things first. They asked for a statutory instrument and as I said, this document is informative. I have very many things on the Order Paper that are time-bound: I have the Bills that were returned, that we must go

through today without fail and today is the deadline.

So, can you just answer what has been raised? On the issue of Hon. Nabbanja, I think they just like the name. And of course, when you see Hon. Nabbanja in an area, you know she is NRM and she does her NRM politics. So, what do you expect?

3.57

THE PRIME MINISTER AND LEADER OF GOVERNMENT BUSINESS (Ms Robinah Nabbanja): Madam Speaker, the issue of Ebola is a pertinent issue. And we all want to support our people to get out of this without many people dying.

Mubende District has 19 subcounties and a municipal council. Kassanda District has 15 subcounties with two town councils. The targeted population to be helped is guided by the President. They are the boda boda cyclists, those people who were selling by the roadside and the market vendors.

First of all, the problem came from Mubende. So, we were guided by the technical assessment team that went on site, and gave us how to distribute the food. We followed a technical assessment team that guided our actions. That is all I can tell him. Thank you very much.

THE SPEAKER: Yes, honourable minister, can you summarise?

3.59

THE MINISTER OF HEALTH (Dr Jane Aceng): Thank you, Madam Speaker. Allow me to start by allaying the anxiety of the colleague regarding His Excellency, the President - that I issued a statutory instrument, which was gazetted and it will be laid on the Table tomorrow - like you requested - by Hon. Margaret Muhanga. I did.

THE SPEAKER: Hon. Asuman Basalirwa of Bugiri Municipality, the instrument is available and it is gazetted. It will be laid on the Table tomorrow, Thursday.

DR ACENG: Thank you. Now, I will just summarise the issues raised by Hon. Oshabe. Madam Speaker, when I talked about weak leadership in Kassanda, I beg that you allow me to maintain that statement. And I will clarify.

In my five trips to Kassanda, I only met the chairman of the district yesterday. In all my trips, I only met –

THE SPEAKER: Honourable minister, before you go far, leadership starts from the LCI. If the minister is not able to meet even an LCI chairperson, then are we not weak? Then you are weak.

DR ACENG: Thank you. So, I am not going to explain any further. I am glad that they have started coming one by one to support the response and I do appreciate.

The reason why Mubende has to receive more money than Kassanda is:

- 1) Because Mubende had strong health systems and strong leadership. Mubende is currently handling all the issues of Kassanda, including treating the patients of Kassanda, mobilising them and taking them back to Kassanda. So, definitely Mubende needs more resources.

However, as soon as we set up an ETU in Kassanda and we strengthen the system, then Kassanda will start handling its own issues.

Madam Speaker, I take note of the schools but personally, I engaged the communities in Kikandwa Parish and I thank honourable for correcting me, I am not a native of there. So, if I make a mistake about the names of parishes and subcounties, I beg to be forgiven. I am learning and the more I go there, the more I learn.

But we have engaged the schools, the parents and the communities. Madam Speaker, we lost two years in the COVID-19 pandemic. We cannot afford to allow the communities in Kassanda to lose another year. So, we are working out all modalities to ensure that

the pupils or the learners study in a safe environment.

We have provided gun thermometers, infection prevention, we have sensitised them, the Ministry of Education and Sports is on the ground, and we want to ensure that they finish exams and exit as safe as –

THE SPEAKER: You said you have provided temperature guns but the Member of Parliament of Wakiso says Kampala has not received.

DR ACENG: Distribution is still ongoing and we started last week. You have 1,500 schools; how do I reach all of them in a few minutes? The distribution is ongoing.

MS NALUYIMA: Madam Speaker, we have on the *Hansard* a report that all schools of Greater Kampala Metropolitan Area have been provided with temperature guns; it is a misleading statement.

So, it is better you put it the way you have put.

THE SPEAKER: That all the schools in Kampala are being provided.

DR ACENG: They have been provided and distribution is ongoing. That is what the statement says.

THE SPEAKER: That is what is on the *Hansard* now. It is okay.

DR ACENG: Lastly, Madam Speaker, on the issue of only locking Kikandwa and leaving the other areas, I want to inform the honourable member that many of the contacts in Kikandwa ran away to other subcounties.

So, if we ignore the other subcounties, Ebola will explode from there. Therefore, we need to be allowed to operate in the entire district. I thank you, for the opportunity to share.

4.04

THE CHIEF OPPOSITION WHIP (Mr John Baptist Nambeshe): Thank you, Madam Speaker. The clarification I would like to seek

from the minister pertains to the evaluation that they are conducting on the efficacy of the vaccines.

The vaccines from Oxford, UK and the others from the USA –

THE SPEAKER: You mean you cannot speak with a mask?

MR NAMBESHE: I have complications.

THE SPEAKER: Please, cover your mouth. No, put on a mask, LOP.

MR NAMBESHE: Thank you. Madam Minister, the trial preparations that you are conducting would mean that our people are being subjected to experimental confirmatory tests without going through the normal procedure of consent. And this would definitely mean that you are treating our people as guinea pigs.

That is the clarification I am seeking, because this is all in your statement; it is a mere trial preparation. You are testing the Ebola Sudan vaccine on the people; merely conducting confirmatory tests on them. That would be a violation and absolute breach of the rights of these people.

THE SPEAKER: That is going to be answered in the Bill that is coming in next.

DR ACENG: Madam Speaker, allow me first of all to inform my honourable colleague that the reason today we have an Ebola vaccine for Ebola Zaire is because such trials were conducted in West Africa during that big outbreak. So, it is extremely pertinent that whenever an outbreak takes place, we take the opportunity to quickly conduct such trials so that in future, you have something to protect the population.

And in this regard, Ebola Sudan is only present in South Sudan and in Uganda, and this outbreak provides a very good opportunity to conduct the trials.

Now, the trial preparations include preparing protocols, getting consent, putting in place refrigerators and many other things. Any contact with a confirmed case will consent; nobody will give them a vaccine without consent.

We did the same when we got Ebola Zaire crossing over from the DRC. So, we are not using anybody as a guinea pig. We require consent. Thank you.

THE SPEAKER: If you want to grumble in the House, go to the microphone and talk about the Speaker. I have the powers to suspend you out of this House if you are grumbling because I am not giving you time to speak. Next item.

LAYING OF PAPERS

1) BI-ANNUAL INSPECTORATE OF GOVERNMENT PERFORMANCE REPORT TO PARLIAMENT JANUARY – JUNE 2021

4.07

MR SOLOMON SILWANY (NRM, Bukooli County Central, Bugiri): Madam Speaker, I beg to lay the biannual Inspectorate of Government Performance Report to Parliament dated January to June 2021. I beg to lay.

THE SPEAKER: Thank you. Honourable members, Article 231(1) of the Constitution of Uganda, 1995, requires the Inspectorate of Government to submit to Parliament at least once in every six months a report of its performance and the functions that are embedded in it plus the recommendations.

Here, today, we receive a report from the IGG, which was brought on 20 October 2022. And that was under Article 231(3) of the Constitution, which requires the Speaker of Parliament to report and submit it to the committee within three days after it has been submitted.

I, therefore, refer this report to the Committee on Legal and Parliamentary Affairs.

II) BI-ANNUAL INSPECTORATE OF GOVERNMENT PERFORMANCE REPORT TO PARLIAMENT JULY – DECEMBER 2021

4.09

MR SOLOMON SILWANY (NRM, Bukooli County Central, Bugiri): Madam Speaker. I beg to lay the biannual report of the Inspectorate of Government performance to Parliament dated July to December 2021. I beg to lay.

THE SPEAKER: Still under Article 231(1) of the Constitution, that has been received and referred to the Committee on Legal and Parliamentary Affairs for perusal.

III) SCHEDULE OF QUARTERLY RELEASES FOR QUARTER 1 AND 2 OF THE BUDGET OF FY 2022/2023

4.10

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES) (Mr Henry Musasizi): Madam Speaker, I beg lay on the Table a copy of the releases which we have done since this financial year started. That is quarter one and quarter two for this financial year. I beg lay.

THE SPEAKER: Honourable members, during yesterday's sitting, a matter rose - is that what you are laying now?

MR MUSASIZI: Madam Speaker, I started with all Government votes and now I come to the matter, which was raised yesterday. I committed before this House that I will bring the information regarding releases to Local Government votes and also the Uganda Police Force.

In just one minute, I wish to inform this House that we have so far released Shs 2.54 trillion against the approved budget of Shs 4.805 trillion representing an average release performance of 53 per cent to Local Government votes.

And we have also released to the Uganda Police under vote 114, the total approved budget was

Shs 900,336,000,000 out of which Shs 453.64 billion has been released for the half year, representing 51 per cent.

This is consistent with my submission yesterday that the Uganda Police Vote and other security agencies' Votes are protected, and they do not suffer budget cuts. Also, my submission confirms that for Local Government Votes, we have released up to 100 per cent for this quarterly release. I beg to lay on the Table.

THE SPEAKER: Please lay and we will refer that to the Committee on Budget for scrutiny. The committee will report back to the House and then we will analyse whether what you are saying is the same as what the minister said yesterday, because there is inconsistency between what was said and what you are saying now.

MOTION FOR RECONSIDERATION OF THE PARLIAMENTARY PENSIONS (AMENDMENT) BILL, 2022 AS RETURNED BY THE PRESIDENT

THE SPEAKER: Honourable members, as I communicated yesterday, His Excellency the President of Uganda returned the Parliamentary Pensions (Amendment) Bill, 2022, vide the letter dated 13 October 2022. I referred the Bill to the Committee on Legal and Parliamentary Affairs and the committee is ready to report.

However, before the report, I invite the sponsor of the Bill, Hon. Arinaitwe Rwakajara who is being represented by Hon. Margaret, for reconsideration, pursuant to Rule 143(3) of the Rules of Procedure and thereafter, we shall have the chairperson of the committee.

As you recall, there was only one clause. This Bill should not even take five minutes. Can you go ahead, Hon. Margaret Rwabushaija?

4.14

MS MARGARET RWABUSHAIJA (Independent, Workers Representative): In accordance with Rule 143(3) of the Rules of Procedure of Parliament, I beg to move that the Bill entitled, "The Parliamentary Pensions

(Amendment) Bill, 2002,” returned by His Excellency, the President, be reconsidered by the House.

THE SPEAKER: Thank you so much, Hon. Margaret Rwabushaija. Is the motion seconded? It is seconded by the Minister of Finance this time around –*(Laughter)*– the Leader of Government Business, Hon. Silwany, the Shadow Attorney-General and so, by the whole House. The motion is seconded. Can I now invite the chairperson to say a word about her Bill?

Honourable members, this Bill is very important to this House. *(Laughter)*. That is why you see the Member from Gomba is really preparing for it. *(Laughter)*

4.18

THE CHAIRPERSON, COMMITTEE ON LEGAL AND PARLIAMENTARY AFFAIRS (Ms Robina Rwakoojo): Madam Speaker, I would like to present the report of the sectoral Committee on Legal and Parliamentary Affairs on the Parliamentary Pensions (Amendment) Bill, 2002, as returned by His Excellency, the President.

However, before I proceed, I have documents that I would like to lay on the Table: a copy of the report on the Bill, a set of minutes, a copy of the President’s letter and a copy of the Bill, as returned by His Excellency, the President. I beg to lay.

THE SPEAKER: Please lay.

MS RWAKOOJO: Madam Speaker, before I begin, I would like to recognise the members of my committee. Without them, I would not have done this report and so, I would like them to stand up for recognition.

THE SPEAKER: They are actually on the record. We can read them very well. Take us to the conclusion.

MS RWAKOOJO: This is a nine-page report but the conclusion – maybe, Madam Speaker, if I could read the introduction before I go on to the conclusion. Thank you.

The Parliamentary Pensions (Amendment) Bill, 2002 was read for the first time on 19 July 2002 and was pursuant to Rule 129(1) of the Rules of Procedure of Parliament and referred to the sectoral Committee on Legal and Parliamentary Affairs for scrutiny.

In accordance with Rule 129(2) of the Rules of Procedure of Parliament, the committee examined the Bill and prepared the report on the same. On 7 September 2022, Parliament considered and passed the Parliamentary Pensions (Amendment) Bill, 2022 and the Clerk to Parliament transmitted a presentation copy to the President for assent.

The President, in accordance with Article 91(3)(b) of the Constitution, withheld his assent to the Bill and returned it to Parliament for reconsideration. The President, in a letter addressed to the Rt Hon. Speaker, dated 13 October 2022, expressed reservations about clause 2 of the Bill, which proposes to amend section 6(2) to increase Government’s contribution towards a member from 30 to 40 per cent.

In clause 2, the President objected to the amendment to section 6(2) of the Parliamentary Pensions Act, which proposes to increase contribution of Government towards a member from 30 to 40 per cent, reasoning that the Ministry of Finance, Planning and Economic Development advised that the Bill that was presented to them for assessment of its financial implications did not include amendments to increase Government’s contribution.

The President also reasoned that the appropriate quantum for contribution can only be determined by an actuarial evaluation of the Parliamentary Pension Scheme and therefore, he cannot assent to the Bill and so, he returned it for reconsideration. The recommendation, Madam Speaker, is on Page 7.

In light of the above, the committee recommends that clause 2 of the Parliamentary Pensions (Amendment) Bill 2002 is amended to remove the proposed increase in Government’s contribution.

We then go on to the need for actuarial study - but I will not go into reading that.

(Question put and agreed to.)

Recommendation

BILLS
COMMITTEE STAGE

The committee recommends that the Parliamentary Pension Scheme Board of Trustees, in exercise of the powers granted to it under Section 23 of the Parliamentary Pensions Act, appoints, within six months of adoption of this resolution, a duly accredited actuary to, among other things, review the quantum of Government contribution and make recommendations.

THE PARLIAMENTARY PENSIONS
(AMENDMENT) BILL, 2022

Clause 2

THE CHAIRPERSON: Yes, chairperson of the committee.

In conclusion, Madam Speaker, the committee has examined the Parliamentary Pensions (Amendment) Bill, 2002 and recommends that the reservations by the President be sustained and the Bill be amended, as recommended by the President. I beg to report. *(Applause)*

4.24

THE CHAIRPERSON, COMMITTEE ON LEGAL AND PARLIAMENTARY AFFAIRS (Ms Robina Rwakoojo): Clause 2 - amendment of section 6 of the principal Act. Clause 2 of the Bill is amended by repealing paragraph (B).

THE SPEAKER: Thank you so much, chairperson of the Committee on Legal and Parliamentary Affairs and your team. The floor is now open. Yes, a motion? There is a motion by Hon. Asuman Basalirwa.

The justification is to remove the increment in Government contribution towards the member of the scheme in light of the objection by His Excellency the President, in order for the Board of Trustees of the Parliamentary Pension Scheme to appoint an actuary to carry out a study to determine the appropriate quantum of Government's contribution.

4.22

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): For the record, I sit on the Legal and Parliamentary Affairs Committee but the motion I intend to move is not related to my being a member of that committee; it is outside of that.

THE CHAIRPERSON: Hon. Margaret -

MS RWABUSHAIJA: Madam Chairperson, I concede.

THE SPEAKER: But a beneficiary.

THE CHAIRPERSON: Thank you. Honourable Minister of Finance -

MR BASALIRWA: Yes. Madam Speaker, this is a straightforward report. The letter was read here; it is a one-item referral by the President. I, therefore, move a motion that the House constitutes itself into a Committee of the whole House to discuss and debate this single-item issue. I beg to move.

MR MUSASIZI: Madam Chairperson, I agree with the proposal by the committee.

THE CHAIRPERSON: Thank you. I put the question that clause 2 be amended as proposed.

(Question put and agreed to.)

Clause 2, as amended, agreed to.

THE SPEAKER: Thank you. Is that seconded? Okay, it is seconded. I now put the question that the Parliamentary Pensions (Amendment) Bill, 2022, as returned by His Excellency, the President, be reconsidered by this House.

MOTION FOR THE HOUSE TO RESUME

THE CHAIRPERSON: Mover of the motion

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4.26

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES) (Mr Henry Musasizi): Madam Chairperson, I beg to move that the House do resume and the Committee of the whole House reports thereto.

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

(Question put and agreed to.)

(The House resumed, the Speaker presiding.)

REPORT OF THE COMMITTEE OF THE
WHOLE HOUSE

4.27

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES) (Mr Henry Musasizi): Madam Speaker, I beg to report that the Committee of the whole House has considered the Bill entitled, "The Parliamentary Pensions Bill, 2022" as returned by His Excellency the President, and passed it with his proposed amendments.

THE SPEAKER: Passed it with the amendment of clause 2.

MR MUSASIZI: And passed it with a proposed amendment of clause 2.

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

4.28

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES) (Mr Henry Musasizi): Madam Speaker, I beg to move a motion that the report from the Committee of the whole House be adopted.

THE SPEAKER: I put the question that the House adopts the report of the Committee of the whole House.

(Question put and agreed to.)

Report adopted.

BILLS
THIRD READING

THE PARLIAMENTARY PENSIONS
(AMENDMENT) BILL, 2020

THE SPEAKER: Honourable minister -

4.28

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES) (Mr Henry Musasizi): Madam Speaker, I beg to move that the Parliamentary Pensions (Amendment) Bill, 2022, as returned by the President, be read for the third time and do pass.

THE SPEAKER: I put the question that the Parliamentary Pensions (Amendment) Bill, 2020 to be read the third time and do pass.

(Question put and agreed to.)

A BILL FOR AN ACT ENTITLED,
"THE PARLIAMENTARY PENSIONS
(AMENDMENT) ACT, 2022"

THE SPEAKER: Bill passed and title settled. *(Applause)* Congratulations, all the Members of Parliament, for your Bill. Congratulations, the leadership of the Legal and Parliamentary Affairs committee. Thank you for doing the work and we thank you so much, together with the whole committee and the whole House. Finance, this time defend our Bill. We thank you very much, Finance will be there. Can we go to the next -

4.30

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): I thank you, Madam Speaker and Finance. This Bill that we have just passed is so critical to our welfare that we should not live in pretence about its significance. We want to get assurance from the finance minister on how best we can bring

it back without offending the law and the provisions thereunder and that next time, you don't advise - Because the President's letter was very clear that it is you who advised the President that there was an irregularity.

It is you and you are always coming here for loans and we support them. When it comes to our issues, you are advising the President otherwise. You know what it means to be a Member of Parliament and after leaving office - You see how our colleagues are living. This is not a matter we should beat about the bush. You know how we live after Parliament. Nobody wants to employ a former MP and most of our colleagues are suffering.

Therefore, the issue of pension is very critical. We should not be shy about it. We need some confirmation and assurance that next time a matter of this nature comes, you are really on our side. Don't go and give the President information to the effect that the MPs are seeking for an entitlement which is abstract. There is nobody in the country that is not receiving a pension. I thank you.

THE SPEAKER: Honourable members, this is a moment of brutal truth and honesty and this concerns us. It actually concerns you, not me; mine is secured. If you are asked about your own pension - Minister, just give the Members an assurance that this time round, you will give the President a go ahead to sign the Act. [Member rose] Pardon? Hon. Steven, we are not in a debate again; it is - Expert information (*Laughter*)

Honourable members, I am going to take you to the next item after getting assurance; give us assurance first. Hon. Steven, you will speak on the next item because I know you are an expert in the next one.

MR MUGOLE: The expert information was here, Madam Speaker.

4.33

THE MINISTER OF STATE FOR FINANCE, PLANNING AND ECONOMIC DEVELOPMENT (GENERAL DUTIES)

(Mr Henry Musasizi): Madam Speaker, we are in this together and that is why I agreed with the committee that the Bill passes as proposed. I want to assure this House that I will not put further comments to this Bill.

THE SPEAKER: Honourable members, tomorrow we will send this Bill to the President and I expect the minister to write his letter recommending for assent. Next item -

MOTION FOR RECONSIDERATION OF THE PUBLIC HEALTH (AMENDMENT) BILL, 2022 AS RETURNED BY HIS EXCELLENCY, THE PRESIDENT

THE SPEAKER: Honourable members, you recall that at the start of this sitting, I varied the Order Paper and included these motions for reconsideration and this is the Public Health (Amendment) Bill, 2022, as returned by the President. The items that the President raised are direct items that do not need much explanation.

I referred this Bill to the Committee on Health and the committee has done its work. The minister is here. Under Rule 143(3) of the Rules of Procedure, I now invite the minister to move a motion for reconsideration of the Bill.

4.35

THE MINISTER OF HEALTH (Ms Ruth Aceng):

Madam Speaker, I beg to move a motion that "The Public Health (Amendment) Bill, 2021" as returned by His Excellency the President, be reconsidered by this House.

THE SPEAKER: Is the motion seconded? It is seconded by Hon. Bahati, the honourable Member of Parliament for Gomba, the Minister of Finance, Planning and Economic Development, Hon. Silwany, Hon. Nanyondo Veronica and Hon. Mwijukye - by the whole House. I can see Hon. Fox and Hon. Enos.

Honourable members, the minister spoke about this motion when it was presented the first time. I now invite the chairperson to give us a brief about the Bill.

4.36

THE CHAIRPERSON, COMMITTEE ON HEALTH (Dr Charles Ayume): Thank you, Madam Speaker. I am here to present the report titled, “Report of the Committee on Health on reconsideration of the Public Health (Amendment) Bill, 2021 as returned by His Excellency the President.”

I would like to lay the following documents:

1. Original copy of the report, signed by the committee members.
2. Minutes of the proceedings.

Madam Speaker, with your guidance, I would like to read an abridged version of the introduction and summary. Then, we can proceed to the clauses.

In accordance with Rule 143(1) and (2) of the Rules of Procedure of Parliament, on 1 November 2022, the Rt Hon. Speaker referred the Public Health (Amendment) Bill, 2021, as returned by His Excellency the President to the Committee on Health for reconsideration. The committee reconsidered the Bill, taking into account the President’s concerns and now begs to report.

In summary, the President’s concerns were drawn from four key thematic areas. They were further centered on nomenclature. Most times, we used the words “immunisation” and “vaccination” interchangeably. The President’s concern is that he preferred the use of “vaccination” as opposed to “immunisation”. The committee thinks his preference was right.

Vaccination is the act of giving a vaccine while immunisation is a series of physiological events that take place in the body for one to acquire immunity. The committee feels that His Excellency the President was right in requiring the committee to replace the word

“immunisation” with “vaccination.” That means the clauses were consequential.

Secondly, the President’s concern was about seeking authorisation to destroy infectious beddings, clothes and articles. In the interest of time, when you are faced with an infectious disease like Ebola, there is no need to seek for authorisation from the local councils. It should be at the discretion of the medical officer, in this case, the district health officer.

The third point was again to do with nomenclature, where in the report, the committee had proposed the words, “minister of agriculture.” The President recommends that that is changed either to “Minister of Agriculture, Animal Industry and Fisheries,” or to the “minister responsible for animal health.” The committee thinks that that should be the “minister responsible for animal and plant health” since we could get diseases from both plants and animals.

Finally, the other point of contention is the power of the Director-General of Health Services to appoint. The President thinks that the Director-General should assign because he has no powers to appoint.

Madam Speaker, briefly, those were the four areas of concern. Thank you.

THE SPEAKER: Thank you, Mr Chairperson - Dr Ayume. The Floor is open. The Bill was returned.

4.41

MR ASUMAN BASALIRWA (JEEMA, Bugiri Municipality, Bugiri): Thank you, Madam Speaker. I have listened to the chairperson of the Committee on Health. I am also in possession of the letter referring this Bill to Parliament. In the report of the committee, there is no minority report. The issues that relate to this Bill - one amendment only has a consequential effect on the other provisions. Therefore, I beg to move a motion that we move straight away to Committee Stage to consider the issues raised.

THE SPEAKER: Thank you, Hon. Asuman. Is that seconded? It is seconded by Hon. Ethel, Hon. Anifa and doctor. I now put the question that the Public Health (Amendment) Bill, 2022, as returned by His Excellency the President, be reconsidered by this House.

(Question put and agreed to.)

BILLS
COMMITTEE STAGE

THE PUBLIC HEALTH (AMENDMENT)
BILL, 2022

Clause 2

4.43

THE CHAIRPERSON, COMMITTEE ON HEALTH (Dr Charles Ayume): Madam Speaker, clause 2 of the Bill is amended in paragraph (m) by inserting a new paragraph as follows:

“Vaccination” means the process or act of giving someone a vaccine.

The justification is to ease the interpretation of Part VII of the Act.

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: Thank you. I put the question that clause 2 be amended as proposed.

(Question put and agreed to.)

Clause 2, as amended, agreed to.

Clause 11

DRAYUME: Clause 11 of the Bill is amended—

(a) in the proposed subsection (1) by substituting for the words “seek the permission of the authority or local government authorising the destruction of” the word “destroy”; and

(b) by deleting paragraph (c).

Justification

i) The amendment in the proposed subsection (1) is intended to remove the requirement of seeking the authorisation of the authority or local government before the destruction of beddings, clothing or any other article that are infected with an infectious disease or are exposed to infection from any infectious disease since this will cause delay in curbing the spread of highly infectious diseases such as Ebola. Any delay in destroying such beddings can aggravate the spread of such diseases.

ii) The proposal to delete paragraph (c) is a consequential amendment in light of the amendment made under the proposed subsection (1) of section 14.

Thank you.

THE CHAIRPERSON: Honourable minister?

DR ACENG: I concur.

THE CHAIRPERSON: I put the question that clause 11 be amended as proposed.

(Question put and agreed to.)

Clause 11, as amended, agreed to.

Clause 19

DRAYUME: Clause 19 of the Bill is amended in the proposed subsection (2) by substituting for the words “minister responsible for agriculture” the words “minister responsible for plant and animal health”.

Justification

For clarity to specifically impose the duty of enacting rules to the minister responsible for animal health since the rules envisaged in the proposed subsection (2) are intended to prevent the spread from any animal or the carcass or product of any animal to man or from any plant, part of the plant or product. Thank you.

THE CHAIRPERSON: Honourable minister?

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: I put the question that clause 19 be amended as proposed.

(Question put and agreed to.)

Clause 19, as amended, agreed to.

Clause 29

DR AYUME: Clause 29 is amended by substituting for the word “immunisation” the word “vaccination”.

The justification is that it is a consequential amendment arising from the substitution of the word “immunisation” with the word “vaccination” under Part VII of the Act.

THE CHAIRPERSON: Honourable minister?

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: I put the question that clause 29 be amended as proposed.

(Question put and agreed to.)

Clause 29, as amended, agreed to.

THE CHAIRPERSON: Honourable members, do not get tired. The Minister of Health advised that we should always have the House up to 5.00 p.m. – for health reasons and for everybody. *(Laughter)* So, it is almost 5.00 p.m. and we go. *(Applause)*

Clause 30

DR AYUME: Clause 30 of the Bill is amended in paragraph (a) in the definition of the word “vaccinator” by substituting for the word “appointed” the word “assigned”.

The justification is that the amendment is intended to harmonise the provision with the powers of the Director-General of Health Services since he is not empowered to appoint staff under the law.

THE CHAIRPERSON: Honourable minister?

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: I put the question that clause 30 be amended as proposed.

(Question put and agreed to.)

Clause 30, as amended, agreed to.

THE CHAIRPERSON: Those ones who are saying “no” don’t even know what they are saying. *(Laughter)*

Clause 31

DR AYUME: Clause 31 of the Bill is amended in the proposed section 38–

(a) in the headnote and wherever the word appears in the provision by substituting for the word “immunisation” the word “vaccination”;

(b) by substituting for subsection (1) the following–

“(1) Subject to subsection (2), a parent of a child resident in Uganda shall ensure that a child is vaccinated free of charge against immunisable diseases appropriate for the age and schedule as may be declared as such by the minister, by statutory instrument.”

(c) in subsection (2) by substituting for the word “immunised” the word “vaccinated”; and

(d) in subsections (3), (4) and (5) by substituting for the words “immunisation card” the words “vaccination card”.

Justification

i) In medical terms, the word “vaccination” is not entirely synonymous with immunisation as the two processes may lead to entirely different outcomes. Indeed, vaccination, on one hand, describes the act of receiving a

vaccine while immunisation, on the other hand, describes the process of becoming immune through vaccination.

- ii) The proposed substitution of subsection (1) is intended to remove the timeline with within which vaccines should be administered, since they may be administered even beyond the 12 months prescribed in the provision after birth.

Thank you.

THE CHAIRPERSON: Honourable minister?

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: I put the question that clause 31 be amended as proposed.

(Question put and agreed to.)

Clause 31, as amended, agreed to.

Clause 37

DR AYUME: Clause 37 of the Bill is amended in the proposed section 45 by substituting for the words “immunisation card” and “immunisation” appearing in subsections (1), (2) and (3) the words “vaccination card” and “vaccination” respectively.

Justification

The amendment to the proposed section 45 is a consequential amendment arising from the substitution of the word “immunisation” with the word “vaccination” under Part VII of the Act.

THE CHAIRPERSON: Honourable minister?

DR ACENG: Madam Chairperson, I concur.

THE CHAIRPERSON: Thank you. I put the question that clause 37 be amended as proposed.

(Question put and agreed to.)

Clause 37, as amended, agreed to.

MOTION FOR THE HOUSE TO RESUME

4.53

THE MINISTER OF HEALTH (Dr Jane Aceng): Madam Chairperson, I beg to move that the House do resume and the Committee of the whole House reports thereto.

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

(Question put and agreed to.)

(The House resumed, the Speaker presiding.)

REPORT FROM THE COMMITTEE OF
THE WHOLE HOUSE

4.54

THE MINISTER OF HEALTH (Dr Jane Aceng): Madam Speaker, I beg to report that the Committee of the whole House has reconsidered the Bill entitled, “The Public Health (Amendment) Bill, 2022” as returned by His Excellency, the President and passed the six clauses as recommended.

THE SPEAKER: And the six clauses include clauses 2,11,31,35,37.

DR ACENG: Thank you, Madam Speaker.

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

4.55

THE MINISTER OF HEALTH (Dr Jane Aceng): Madam Speaker, I beg to move that the report from the Committee of the whole House be adopted.

THE SPEAKER: I put the question that the House adopts the report of the Committee of the whole House.

(Question put and agreed to.)

Report adopted.

BILLS
THIRD READING

THE PUBLIC HEALTH (AMENDMENT)
BILL, 2022

4.56

THE MINISTER OF HEALTH (Dr Jane Aceng): Madam Speaker, I beg to move that the Bill titled; “The Public Health (Amendment) Bill, 2022” be read the third time and do pass.

THE SPEAKER: I put the question that the Public Health (Amendment) Bill, 2022 be read the third time and do pass.

(Question put and agreed to.)

A BILL FOR AN ACT TITLED, “THE
PUBLIC HEALTH (AMENDMENT) ACT,
2022”

THE SPEAKER: The Bill is passed and title settled. Congratulations, Dr Ayume with your team of doctors and nurses in your committee - by the way, that is a committee that is comprised of almost all doctors; it is a very powerful committee.

I would like to congratulate you upon this Bill; I congratulate the Minister of Health, with your team. And I thank, in a special way, the Shadow Minister, the other side and the whole House.

You have been here since 2.00 p.m. and since we have been asked by the medical personnel to always be in the House up to 5.00 p.m., we will respect that. You know we have only one Minister of Health - we will respect that.

However, before we adjourn, there was something mentioned about Hon. Kawalya. I will request Hon. Kawalya to bring a written statement tomorrow in response to what has been said about you because we want to know whether it is true, and that would help the whole House.

Honourable members, as I said earlier, we are going to do roll call. Members who think that they were voted to come and just be in Kampala, we are going to make sure that we report you back to your voters.

Members must attend the House; if you are not in the House, you are in the constituency and if you are not in a constituency like Mubende, then we expect you to be here. This is where you are meant to be. This is your workplace. I thank you very much. I adjourn the House to 2.00 p.m. tomorrow.

(The House rose at 4.59 p.m. and adjourned until Thursday, 3 November 2022.)