

FOURTH SERIES
VOL. 128
No. 20



TUESDAY
18TH FEBRUARY, 2025

PARLIAMENTARY DEBATES

OFFICIAL REPORT

CONTENTS

VOTES AND PROCEEDINGS AND THE OFFICIAL REPORT— [Col.1]

STATEMENTS—

- a) Update on the Outbreak of Cholera and CSM in Ghana— [Col. 19]
- b) Sustainable Funding for Outbreaks and Pandemics— [Col. 79]
- c) Addressing Sanitation Challenges, Homelessness and Slum Proliferation in Ghana: A Comprehensive Approach to Sustainable Outcomes— [Col. 98]
- d) Electric Cooking and Promoting Clean Cooking Solutions in Ghana— [Col. 118]
- e) The Inefficient Use of Pedestrian Footbridges and its Impact on Road Users in Ghana— [Col. 125]

MOTION—

Establishment of a Committee to Advise the Speaker on the Appointment of Four other Members of the Parliamentary Service Board— [Col. 87]

ADJOURNMENT— [Col. 160]

Correction of errors of substance may be made only on the floor of the House with the permission of the Speaker. However, correction of typographical or grammatical errors which Members suggest for the Bound Volumes which will be compiled at the end of the Meeting may be clearly marked in the Daily Report, and the copy containing the corrections submitted at the Editor's Office, Parliament House, not later than four clear days after the publication of the Daily Report.

BOUND VOLUMES of the Official Report (each with a comprehensive Index) are published periodically during the Session. There is no fixed subscription rate, but prices will be quoted on each publication.

*Published by the Office of Chamber Reporting
Parliament House, Osu, Accra.*

*Designed and Printed by the Publishing Department
Parliament House, Osu, Accra.*

THE
PARLIAMENT OF THE REPUBLIC
OF GHANA

FIRST MEETING, 2025

Tuesday, 18th February, 2025

The House met at 11.12 a.m.

[MR FIRST DEPUTY SPEAKER IN
THE CHAIR]

PRAYERS

Mr First Deputy Speaker: Hon Members, with there being no message from His Excellency the President and no formal communication from the Speaker, we will proceed to take item numbered 6, *Correction of Votes and Proceedings and the Official Report*.

**VOTES AND PROCEEDINGS AND
THE OFFICIAL REPORT**

Mr First Deputy Speaker: Hon Members, the *Votes and Proceedings* dated 14th February, 2025 under consideration.

Page 1...2—

Hon Member, are you on your feet to correct the *Votes and Proceedings*? If not, please take your seat. That is Mr Second Deputy Speaker [*Laughter*].

Page 3...6—

First Deputy Minority Whip (Alhaji Habib Iddrisu): Mr Speaker, on page 6, under Members who were

absent, there is no numbering from 1 to 5 and then on page 7, item numbered 11 and 28, the Members had leave of absence and it was duly transmitted. So, I want to draw your attention to it—The Deputy Minority Leader numbered item 11 on page 7 and item numbered 1 on page 6. I assume it is number 1 even though it is not numbered. Thank you, Mr Speaker.

Mr First Deputy Speaker: Table Office, take note of the numberings and the indication that the Hon Member was absent with permission.

Page 8...9—

11.22 a.m.

Majority Chief Whip (Mr Rockson-Nelson Etse Kwami Dafeamekpor): Mr Speaker, thank you for the opportunity. This is just to seek your guidance regarding the three separate Statements that the Hon Ministers for Tourism, Culture and Creative Arts; Trade, Agribusiness and Industry, as well as the Hon Member for Ada, the First Deputy Majority Whip delivered.

Mr Speaker, even though it is in commemoration of the same event, it was captured that they were individually delivered. I thought that even though that was how you admitted it, the Table Office could have captured it as a joint Statement—It is just for your guide because it appears repetitive for me.

Mr First Deputy Speaker: I am not really getting the concern that you are raising.

Mr Dafeamekpor: All right.

There were three separate Statements to commemorate the same event.

Mr First Deputy Speaker: Yes, they were taken jointly.

Mr Dafeamakor: I thought that it could be captured so, but it has been stated that they were separately delivered, and Members got opportunity to contribute to them separately even though the event is the same.

Mr First Deputy Speaker: Well, the delivery was separate, but the comment was joint comment, so it is really not a problem the way it is captured.

Mr Dafeamekpor: Very well, Mr Speaker, I am guided.

Mr First Deputy Speaker: Thank you very much.

Yes, Prof Kingsley Nyarko?

Prof Kingsley Nyarko: Mr Speaker, this is a minor observation. It can be overlooked, but I just want us to be a bit specific. So, the last sentence under the item 9(i) Statement reads, "...reversed to directive to protect the rights of affected citizens". I do not have issue about that, but if it could be made a bit specific, "...to protect the rights of the affected citizens".

Thank you.

Mr First Deputy Speaker: Thank you very much.

Table Office, take note.

Mr Frank Afriyie: Mr Speaker thank you as always.

I would like to, with your kind permission, invite you to the item numbered 4 on page 9. I think the proper designation of Ms Comfort Doyoe Cudjoe has not been captured per the record I have here. She is supposed to be the First Deputy Majority Whip.

Mr First Deputy Speaker: You are correct.

Thank you very much; Table Office, take note.

Hon Members, in the absence—Hon Habib Iddrisu, are you on correction of *Votes and Proceedings*?

Alhaji Habib Iddrisu: Yes, Mr Speaker, I just wanted to seek clarification on the same item he mentioned, whether the Hon Comfort Doyoe is the First Deputy Majority Whip or the Second Deputy Majority Whip because it is captured as Second Deputy Majority Whip.

Mr First Deputy Speaker: Hon Habib Iddrisu, that is exactly Hon Frank Afriyie has corrected that it should read, "First Deputy Majority Whip", instead of Second Deputy Majority Whip, and we heard him loud and clear.

Alhaji Habib Idrisu: Then I did not hear him.

Mr First Deputy Speaker: Did you not hear him? Then we may, probably, have to get you a cotton bud—
[Laughter]

Thank you very much.

Hon Members in the absence of any further correction, the *Votes and Proceedings* of—

Yes, Prof Kingsley Nyarko?

Prof Nyarko: Mr Speaker, with respect, I need your guidance on page 10 on the Statement of the Hon Member for Assin North.

Mr Speaker, if you come to the last sentence, it reads:

“He further called on the House to expedite action on the amendment to the citizenship laws of the country to enhance the participation of dual citizens in the governance framework of the country”.

Mr Speaker, I was not here on Friday, but I think I read the report last year where the Supreme Court ruled that there are certain positions in this country that can be occupied by persons who hold dual nationalities, unless I am wrong. You are a respected lawyer. My point is that if we say, “to enhance the participation”, already my understanding is that that privilege is there. To enhance means that you need to promote it, so

why then do we make it “to deepen the participation of”—

Mr First Deputy Speaker: To do what?

Prof Nyarko: “...to deepen the participation of dual citizens in the governance framework of the country”.

Since you are lawyer, I need your guidance on that.

Thank you.

Mr First Deputy Speaker: Prof Kingsley Nyarko, it is just a matter of semantics.

Prof Nyarko: Mr Speaker, thank you very much.

Mr First Deputy Speaker: The fact that there was a judgement of the Supreme Court in respect of judges, that does not apply to Members of Parliament, Ministers of State and other key positions. So, the Statement is in the right direction, having regard to even Article 94 of the Constitution of the Republic of Ghana, which talks about the qualification of Parliament, and it will also affect Article 78 of the Constitution, which talks about the qualification of one becoming a Minister of State. I believe the Statement is in the right direction, so that we can take steps to amend the relevant laws to allow people with dual citizenships to hold certain key positions in our governance structure.

Prof Nyarko: Hon Speaker, you are a lawyer of repute, and I am none, but I

also know that per the Article 94(2), one cannot be a Member of Parliament if he or she holds dual nationality because of the way it is captured. My point is that, already, certain individuals with dual nationality can participate in our governance process. It is there. It is only in some instances where they cannot, but how it is couched, my understanding is that it seems we are now going to enhance or promote it, but already there is some form of participation in certain regard. That is my point, and that is why I am saying that it is not just to enhance it, but if we say we have to deepen it, then it underscores the fact that those who are excluded and the areas of exclusions could be brought on board.

Mr First Deputy Speaker: Prof Kingsley Nyarko, by applying the *expressio unius* rule, those who are not included and those who are not barred from holding a position as a dual citizen cannot be in the contemplation of the maker of the Statement in making this particular Statement, so we cannot interpret the Statement to include those who, by law, are not barred from holding the position as a result of the dual citizenship.

Yes, Hon Majority Chief Whip?

Mr Dafeamekpor: Mr Speaker, thank you very much.

Mr Speaker, indeed, at this stage, the corrections of *Votes and Proceedings* is actually in respect of matters that transpired on the Floor of the day, regarding whether or not the information is accurate or not. This was the essence

of the Statement the Hon Member made because I recall that, Mr Speaker, the former Chairman for the Committee on Roads and Transportation introduced a constitutional amendment, and we passed it before—It was as regards status of dual citizens holding some public offices, so we can advert the mind of the Hon Member to that Bill that was passed by this House whether it has been accented to or not, I am not aware.

11.42 a.m.

But regarding the correction of the *Votes and Proceedings*, it was what the Hon Member said. So, the Table did not make a mistake in capturing it the way they did. We can draw the Hon Member's attention to that. Thank you very much, Mr Speaker.

Mr First Deputy Speaker: Well, Hon Majority Chief Whip, I think I was part of the people who debated the Second Reading of the Bill, and then it got to the Consideration Stage, but it was not passed.

Mr Dafeamekpor: And it got stuck. Very well, Mr Speaker, I am guided but my point is that the Table captured the essence of the Statement the way it was made and it was accurate.

Mr First Deputy Speaker: On that note, you are right, but Prof Kingsley Nyarko is trying to introduce some semantics based on his interpretation. That is why we are bringing it to the fore that the Statement is talking about positions one cannot hold by virtue of holding dual citizenship. The maker of

the Statement does not have in contemplation, positions that one can hold when they have a dual citizenship. So, we should limit the understanding of the Statement only to positions one cannot hold by virtue of having dual citizenship.

Prof Nyarko: Mr Speaker, I yield to your expert explanation and guidance. I began by saying that I was not here on Friday, however, I thought that the narration had a problem but I am happy to have been told that the right rendition is what the Clerks-at-Table had captured. I have no problems with that, thank you.

Mr First Deputy Speaker: Hon Members, the *Votes and Proceedings* of the 18th Sitting, dated Friday, 14th February, 2025 as corrected is adopted as the true records of proceedings.

Hon Members, we have the *Official Report* of Wednesday, 5th February 2025. Any corrections? Yes, Prof Kingsley Nyarko?

Prof Nyarko: Rt Hon Speaker, thank you for indulging me. In column 9, under Mr Ayariga, on the seventh line, “I assumed that he was speaking on behalf of his Backbench who had raised the issue of quorum”. If I remember correctly, it was the Hon Member for Manhyia South, who raised the issue of quorum. I think that if he was making reference to the person who made the application for quorum, then it should be “Backbencher” because it was not the entire Back Bench that brought the application for quorum; it was an

individual, so if we could make it “...of his Backbencher who had raised the issue of quorum”. That is the first observation that I have made.

Then, in the third paragraph of column 12, we have “Mr Speaker, I am not against the application of Order 64, but as you can see, we have the numbers, and Mr Speaker, if you read...they are the one insisting on quorum”. If we could make it “...they are the ones insisting on quorum”. Then in the next paragraph “Mr First Deputy Speaker: Hon Members, fortified by Order 64, marginal note, quorum in Parliament. Article 102 of the 1992 Constitution” here it is stated “1992 of Constitution” So if we could delete the “of” so it reads “1992 Constitution”.

Mr Speaker, in column 17, on the 17th line, “I think that my nephew is completely out of order”. If we go to the Standing Orders, Order 115, how we refer to our Colleague Members of Parliament—Hon Member for Kwadaso, Hon Friend, Hon Lady and Hon Gentleman. My worry is the title “my nephew” —Such renditions are not captured in our Standing Orders as to how we address our Colleagues. I am just bringing this to your attention on whether it is appropriate or we should go strictly by how we are supposed to refer to our Colleagues.

Mr First Deputy Speaker: Hon Member, let us engage on column 17, the issue regarding “my nephew”. “My nephew” is not known to the Standing Orders but that was what the Hon

Member said and that is what the *Hansard* has captured. The situation would have been different if an Hon Member took objection to it and the appropriate corrections were made. But since that was what happened on the floor of Parliament and the *Official Report* has captured it exactly the way it happened; the *Official Report* cannot be at fault.

But I agree with you that the correct designation should not have been “my nephew”.

Prof Nyarko: Thank you, Mr Speaker, for your guidance. Then let me take us to column 19—I would skip that for some obvious reason. I would take the last one in column 23, line 11—

Mr First Deputy Speaker: Which paragraph?

Prof Nyarko: Column 23—The 11th line says that “the record for Friday would show that instead of the news out there that we adjourned because we did not have the numbers”. The Office of Chamber Reporting can also make some errors and that is understandable. If we say “instead of the news”—I am not sure whether that was what the Hon Member said, but “in spite of the news” would be more appropriate. “In spite of the news” is different from “instead of the news”.

The point is that we have been in this Chamber and at times certain renditions by Members are written differently based on what they hear so if I see it and bring it to the attention of Members, I am not saying that I am right but let us look

at the context. We were in this House when Mr Joseph Osei-Owusu ruled that even though we are talking about verbatim reportage, we must also look at whether the context would make the sentence more sensible or otherwise.

Mr Speaker, my duty is to bring this to our attention as to whether it is “instead of” or “in spite of”. So, I am saying that it should be “in spite of” instead of “instead of” because “instead of” is a bit weird. Look at the context and come again—Who says it does not matter? Context matters. Let us allow the Speaker to make his judgement on that. Thank you.

11.42 am

Mr First Deputy Speaker: Hon Member, you are once again reminded that you address the Chair. Any further corrections?

Yes, Hon Chief Whip?

Mr Dafeamekpor: Mr Speaker, we have a provision on *Votes and Proceedings* and the correction of the *Hansard*. An Hon Member cannot be correcting the verbatim recording of another Member. If there are typographical errors, the Member can do that but words uttered by a Member and having been recorded by *Hansard* as having been uttered so, cannot as it were, be amended by another Member for purposes of grammatical corrections. With all due respect, Mr Speaker, typographical errors are fine but even if there are grammatical errors, *Hansard*

says this is what the person said. So, the essence of *Hansard*, which is the memory of the House, is supposed to capture that as it was uttered.

Mr First Deputy Speaker: Majority Chief Whip, you are right in the sense that whatever the Member said is what the *Official Report* would capture. Sometimes, if one wants to correct what a Member said, it would contextually put a different meaning on what the Member had said so we need to be careful in trying to correct what a Member has said. If one puts another word there and the recording is played, it would be different from the corrected word. So, they have the opportunity of listening to the voice of the Member and capturing it the way the Hon Member delivered it in his or her submission. So, with all due respect, once that is what the Member said, let us be guided accordingly.

Prof Nyarko: Mr Speaker, but in this case, with respect, we cannot assume that that is what the person said unless—
[Interruptions]

Mr First Deputy Speaker: Hon Members, Order!

Prof Nyarko: I am saying that we cannot make that assumption.

Mr First Deputy Speaker: Prof Kingsley Nyarko, the difficulty was that you indicated that you were not even here. Because you were not here—

Prof Nyarko: No, that was the *Votes and Proceedings*. This is *Official Report*

and, in this case, I was here but I am saying—

Mr First Deputy Speaker: So, you were here. Are you saying that was not what the Hon Member said?

Prof Nyarko: The point I am making is that, we have been in this Chamber where some statements, contextually—I was here when Mr Joseph Owusu said that Hon Members cannot correct verbatim report but if the context suggest otherwise, that is different. I am not saying that what I am saying is right but the context is what is suggesting otherwise. All of us can make comments and debate but the Hansard Department, in recording, can make a mistake. I was here last week and I realised that Rev Ntim Fordjour in making a commentary wanted to say “fore” but the Hansard Department captured it as “fall”. This would indict the comments based on the context. So, if one looks at the context, the person’s import might not be what the Hansard Department captured. We are all human beings and we can make mistakes when it comes to recording; that is my point. So, my Hon Friend—

Mr First Deputy Speaker: Prof Kingsley Nyarko, what should have properly happened was that, having realised that, you could have moved to the Hon Member who made the statement and asked if he meant “fall” or “fore”? Do you understand? Then you would have cleared with the Hon Member on what he was talking about. We would have avoided a situation where the maker of the Statement is

saying this is what I said and you are saying that is not correct.

Prof Nyarko: I agree with you for your direction. At least you brought a different perspective to how this House should be handled and that is the essence of parliamentary democracy. When a Member has issues, he or she raises them and a better understanding would help us to navigate our way better moving forward.

Mr First Deputy Speaker: Any further corrections?

Mr Jerry Ahmed Shaib?

Mr Jerry Ahmed Shaib: Mr Speaker, for the notes to be considered, I am looking at page 108.

Mr First Deputy Speaker: Is it column 108?

Mr Shaib: Page 108 of the 11th version of the *Official Report*.

Mr First Deputy Speaker: Hon Members, I guess he is referring to column 108.

Mr Shaib: Mr Speaker, it is page 108, unless I am not too sure? — *[Interruption]*—column?

Mr Speaker, thank you for the education on that one. So, column 108, on the sixth line, it is supposed to be “fiscal” angle but what we have here is “physical”. I do not know if the Table Office have sighted that.

Mr First Deputy Speaker: Very well. Table Office take note and also take note of the corrections made by Prof Kingsley Nyarko at columns 9 and 12.

Yes, Mr Ahmed?

Mr Shaib: Mr Speaker, also, at column 109, on the second paragraph, it is “concept of Say’s Law which states that supply creates its own demand.” I do not know if Hon Members have sighted it. And then—Mr Speaker, I do not know if I am minded to proceed.

Mr First Deputy Speaker: Yes, Table Office, take note.

Mr Shaib: Also at column 109, it is “demand pull” but not “demand push”.

Mr First Deputy Speaker: Which paragraph are you talking about?

Mr Shaib: That would be about the 8th or 9th line.

Mr First Deputy Speaker: Is it on the first paragraph?

Mr Shaib: Yes. Have you sighted it?

Mr First Deputy Speaker: Very well.

Mr Shaib: On column 110, just to be on the same line, I am trying to get the exact paragraph so maybe the Table Office can help. Instead of “proffered” it was captured as “profiled.” Please do you have that?

Mr First Deputy Speaker: Yes, Hon Member, that is a spelling mistake.

Mr Shaib: Still on that paragraph, it is “macro” not “micro”

Mr First Deputy Speaker: Very well, Table Office, take note.

Mr Shaib: Very well, Mr Speaker, thank you.

Mr First Deputy Speaker: Hon Members, any further corrections? The *Official Report* of Wednesday 5th February, 2025 as corrected, represents the true record of proceedings.

Hon Members, the next item is Statements.

Mr Nyindam — rose —

Are you on *Votes and Proceedings*?

Mr Matthew Nyindam: Mr Speaker, I just want some guidance from you. I want to come under Order 5(2) because an incident happened in this House and you gave some directives. We all know that the front line (the first four seats) belongs to the Leadership of this House. In the event that any of the Leaders are not available, can any of us sit in for them? This is because some Members are gearing up to retaliate your ruling and I want some clear guidance from you as to whether if any of the Leaders are not around during the start of proceedings, any of us can be elected to sit in for the Leadership.

Mr First Deputy Speaker: Thank you very much.

I think the direction is that every Member should speak from his seat. In the absence of the Leadership, the alternative is an available leader. So, in the event that any of the Leaders are not available, it is then that we have an available leader. But when a Leader among them is available, an Hon Member cannot be the available leader. So, in the absence of the Majority Leader, the Deputy Majority Leader is there. In his absence, the Majority Chief Whip is there and, in his absence, Deputy Whips are there. In the absence of all of them, then there would be an available leader. The same thing applies to the Speakership. In the absence of the Speaker, the First Deputy Speaker is there. In the absence of the First Deputy Speaker and the Speaker, the Second Deputy Speaker is there. In the absence of the Speaker and the Deputy Speakers, then the House would elect a Member to preside and that is the Member Presiding.

Hon Members, the next item is Statements and Hon Members, in doing so, there were Statements delivered in this House in relation to which a direction was given that the Minister for Health be invited to come and brief the House particularly on the outbreak of Cerebrospinal Meningitis (CSM) and cholera.

Hon Members, the Minister for Health is in the House accordingly to brief Members so, Hon Minister, you are hereby invited to brief the House.

11.52 p.m.

STATEMENT

Update on the Outbreak of Cholera and CSM in Ghana

Minister for Health (Mr Kwabena Mintah Akandoh) (MP): Mr Speaker, I appear before you today to brief the House and the people of Ghana on the ongoing outbreak of cholera and Cerebrospinal Meningitis (CSM), and more importantly, to provide an update on measures being taken by Government to contain the spread of these diseases.

Mr Speaker, as you are aware, Ghana is currently facing an outbreak of cholera and meningitis. Additionally, a single case of Human Metapneumovirus (HMPV) has also been detected in the country.

Mr Speaker, before I go further, I want to express my sincere gratitude to all our health workers for their unwavering dedication and resilience. In the past week, I had the privilege to interact with health care workers in health facilities and communities in the Upper West, Greater Accra, and Central Regions. Their tireless efforts on the front lines of these outbreaks are truly commendable and as a nation, we are deeply indebted to them.

Mr Speaker, the Government of H. E. John Dramani Mahama, in the face of limited resources, came to office with a pledge to build a more robust healthcare system that, among other objectives, will prevent diseases and promote good

health. We remain fully committed to this, and in the past few weeks, the leadership and support for the outbreaks of these diseases is a clear demonstration of the commitment of Government.

Mr Speaker, I will now share the updates on the specific diseases and the measures taken to bring these outbreaks under control.

Cholera Outbreak

Mr Speaker, cholera is caused by the bacterium, *vibrio cholerae*. Affected individuals may experience a sudden onset of profuse watery diarrhoea, often accompanied by vomiting. This can lead to rapid dehydration and further complications if not treated promptly. The time between exposure to the bacterium and the appearance of symptoms, called the incubation period, ranges from 12 to 48 hours, within an average of two to three days.

Mr Speaker, the transmission of cholera occurs primarily through the consumption of water or food contaminated with faecal matter. This contamination can happen in various ways, including:

- i. Direct contamination of drinking water sources with sewage.
- ii. Consumption of raw fruits and vegetables that have been irrigated with contaminated water.
- iii. Poor food handling practices that allow for cross-contamination.

Mr Speaker, several factors contribute to the persistence of cholera in our communities. These include:

- i. Poor sanitation and hygiene practices, particularly open defecation which, unfortunately, is still prevalent in many areas.
- ii. Inadequate access to safe drinking water, especially in rural and peri-urban communities, as well as erratic water supply, which compels people to rely on unsafe sources.
- iii. The presence of street food vendors who may not adhere to proper hygiene standards.

Mr Speaker, I must put on record that the current cholera outbreak began over five months ago in October 2024 in Ada West in the Greater Accra Region. Since the outset in October 2024, it has unfortunately spread to other districts in the Greater Accra Region and four other regions namely Central, Western, Ashanti, and Eastern Regions. As at 13th February, 2025, we had recorded 6,145 cases, confirmed 719 cases, and, unfortunately, recorded 49 deaths. In all, five regions have reported cases since the outbreak began. These are: Greater Accra, Central, Western, Ashanti, and Eastern Regions.

It is worth noting that the situation is improving, with active cases now concentrated in the Central Region only. Mr Speaker, allow me to elaborate on the situation in the Central Region. This Region has been particularly affected by

the current outbreak with a significant number of cases reported in recent weeks. The districts of Agona West and Effutu have been particularly hard-hit. In the past week alone, these two districts reported 133 cases, 23 admissions, and, unfortunately, two deaths.

Mr Speaker, despite the worrying situation in the Central Region, I bring encouraging news. New cholera cases are decreasing, and the districts of Agona West and Effutu, which were initially hard-hit, are now showing a decline in new cases. As at 16th February, 2025, only the Central Region had active cases. The Region reported a total of 28 active cases on admission.

- i. Effutu - 18 cases
- ii. Cape Coast - 6 cases, and
- iii. Agona West - 4 cases,

Mr Speaker, this positive shift is a testament to the relentless efforts of our healthcare workers and partners who are diligently implementing a robust response plan. This plan includes, heightened surveillance to swiftly identify and manage cases, strengthened laboratory capacity for accurate and timely diagnosis, and environmental assessments to pinpoint and address risk factors. We have also established cholera treatment centres, and conducting public awareness campaigns to educate communities. The strategic deployment of oral cholera vaccines in high-risk areas is further contributing to this positive trend

Mr Speaker, please, permit me to now highlight the measures that have been taken to respond to this outbreak in order to bring it under control. In doing this, I must add that the response to cholera is multisectoral. The Ministry of Health, in collaboration with various partners, has a comprehensive response plan in motion. The action plans are as follows:

- i. Coordination: We have activated Regional and District Public Health Emergency Committees in all affected regions to ensure a coordinated response.
- ii. Surveillance: We have heightened surveillance in all districts, with active community case search and contact tracing to identify and manage cases promptly.
- iii. Laboratory: We have strengthened laboratory capacity to test and confirm suspected cases, ensuring accurate diagnosis and timely treatment.
- iv. Environmental Assessment: We have conducted environmental assessments in all affected districts to identify and address risk factors, such as poor sanitation and water supply.
- v. Case Management: We have set up cholera treatment centres in affected districts and provided training to healthcare workers on case management, infection prevention, and control.

- vi. Risk Communication and Community Engagement: We have launched public awareness campaigns to educate communities about cholera prevention and control measures.
- vii. Vaccination: We have deployed oral cholera vaccines in high-risk areas to protect vulnerable population and prevent further spread.

Mr Speaker, permit me to provide additional details on the cholera vaccination. Phase 1 and 2 subnational Oral Cholera Vaccine (OCV) Campaigns were completed in five districts in the Central and Western Regions: Awutu Senya East, Sekondi-Takoradi, Effia Kwesimintsim, Shama, and Ahanta West. A total of 596,205 people, representing 92 per cent of the target population, were vaccinated.

Subsequent to the Phase 1 and 2 vaccinations, OCVs were approved for Accra Metro and vaccination just ended; the period was from 14th to 17th February. As at Sunday, 17th February, a total of 257,370 people had been vaccinated in the Ablekuma, Ashiedu Keteke, Okaikwei, and Accra Metro areas. Also, we have secured approval for vaccination for Agona West and submitted an application for Effutu.

Mr Speaker, despite our efforts, we continue to face challenges in our response to the cholera outbreak. These challenges include, poor sanitation and hygiene practices, and limited access to safe water. As you can see, cholera persists in our country for a reason. It persists because of the poor sanitation,

including open defecation, unsafe water, and unhygienic food. As a result, cholera requires a multisectoral approach in our efforts to bring it under control. I take this opportunity to thank our local authorities, who have been supporting the response, and call on them to do more.

Mr Speaker, most importantly, in the long term, we will need to improve our sanitation situation, food and water safety, and personal hygiene to rid our environment of cholera, and to ensure that even when there is an outbreak, it does not have suitable conditions to facilitate spread.

Meningitis Outbreak

Mr Speaker, meningitis is an inflammation of the meninges: the protective membranes that surround the brain and spinal cord. It is characterised by a range of symptoms, including fever, headache, nausea, vomiting, neck stiffness, confusion, convulsions, and in severe cases, coma.

12.02 p.m.

Mr Speaker, meningitis outbreaks in Ghana typically occur in the northern regions and neighbouring districts in the Bono and Oti regions. These areas lie within the meningitis belt of Africa - which stretches from Senegal and Gambia in the West to Ethiopia in the East. The meningitis belt experiences seasonal outbreaks during the dry and hot weather conditions, often referred to as the "meningitis season". In Ghana,

this meningitis season extends over the harmattan months from October up to March.

Mr Speaker, it is worth noting the following which informs the response to the meningitis outbreak: there are a number of organisms that may cause meningitis including viruses, bacteria, *et cetera*, and some of these can be prevented by vaccination. In Ghana, two main types of pathogens cause outbreaks: *Neisseria* and *Streptococcus*. Based on the type of *Neisseria*, the population can be vaccinated. However, vaccination does not apply to *Streptococcus* which is the strain currently causing havoc in the Upper West Region. This means that, currently, vaccination is not one of the measures we can use to control the ongoing outbreak. It is worth noting, Mr Speaker, that *Streptococcus* is fatal and usually starts early in the meningitis season only to be followed by *Neisseria*, which is less fatal but spreads wider, and responds to vaccination.

Mr Speaker, I must put on record that the current meningitis outbreak in the Upper West Region is rightly a cause for serious concern. This concern is not just because of the current outbreak, but because the Upper West Region has consistently recorded high numbers of meningitis cases during the dry season in recent years. In the current season, as of Sunday, 16th February, we had recorded over 129 cases and unfortunately (16) deaths while 29 people are currently on admission. The districts most affected, Mr Speaker, are Wa Municipal, Nadowli, Wa West, Jirapa and Nandom.

Mr Speaker, despite the substantial number of cases and unfortunate deaths, I wish to assure the House and the good people of Ghana that we have made considerable efforts to keep the outbreak under control. Our efforts are paying off. Already, a wave of improvement is evident in the Upper West Region, where new meningitis cases are decreasing.

This positive change follows the Ministry of Health's swift and decisive actions, which included deploying experts to support local health teams, conducting a high-level visit to assess the situation and providing support, and ensuring free treatment for all affected individuals. We also activated the Emergency Operations Centre for coordinated response efforts and engaged in consultations with international experts. The mobilisation of essential antibiotics and targeted public awareness campaigns have further bolstered our efforts in controlling the outbreak.

Mr Speaker, please permit me to highlight some of the specific measures by the Ministry of Health and its partners in response to the meningitis outbreak:

Deployment of Experts: We have dispatched a team of experts from the national level to support the regional and district health teams in managing the outbreak.

Free Treatment: We have exempted all individuals affected by meningitis from paying for treatment, ensuring that everyone has access to the care they need.

Emergency Operations Centre: We have activated the Emergency Operations Centre at the national and regional levels to coordinate the response efforts.

Coordination Meetings: We are holding weekly coordination meetings with meningitis experts from the World Health Organization (WHO) to ensure that our response is aligned with international best practices.

Mobilisation of Antibiotics: We have mobilised additional antibiotics to support the Regional Medical Stores while the International Crisis Group (ICG) has also approved 10,000 vials of Ceftriaxone, the antibiotic used in treating meningitis, to ensure that there is no shortage of essential medicines.

Public Awareness: We have launched intensive public education campaigns to raise awareness about the signs and symptoms of meningitis and encourage early reporting to health facilities.

Community Engagement: We have engaged with community leaders and opinion leaders to solicit their support in raising awareness and encouraging community participation in the response.

High-Level Visit: The Minister responsible for Health and the Director-General of the Ghana Health Service have conducted a high-level visit to the affected communities to assess the situation and provide support.

International Assistance: We have also secured technical assistance from

the WHO through the delegation of an expert to help us improve on our management of the Meningitis outbreak in the Upper West Region.

Mr Speaker, we have also identified a single case of Human Metapneumovirus (HMPV) in the country. HMPV is a respiratory virus that can cause a range of respiratory illnesses, from mild cold-like symptoms to severe pneumonia. While it can affect people of all ages, it is most commonly seen in young children, older adults, and those with weakened immune systems.

In response to recent increases in respiratory cases in China and some temperate countries in December 2024, as part of our routine surveillance, we commenced testing for HMPV this year, January 2025. So far, a total of 90 samples have been selected for testing, and only one positive case has been detected for HMPV. This was detected in an elderly person.

Mr Speaker, I want to assure the House that the risk of HMPV in Ghana remains low. As you can see, we have robust surveillance systems in place to monitor for respiratory viruses, including HMPV. In fact, these systems have been strengthened in recent years, particularly following the COVID-19 pandemic. We therefore assure the country that any case of HMPV will be quickly identified and managed to prevent spread.

Mr Speaker, the Ministry of Health is fully committed to working with our partners to control these ongoing

outbreaks and to protect the health of all Ghanaians. We have implemented a range of measures to address these challenges, including: Strengthening surveillance to detect and track cases, providing timely and effective treatment to those affected, raising public awareness about prevention and control measures and; collaborating with local and international partners to coordinate our response.

In addition to these technical interventions, in line with the aspirations of His Excellency, President John Mahama's Government, I would like to emphasise that effective control of these outbreaks is of utmost importance to my office. It is for this reason that in the past week alone, I joined health workers at health facilities and in communities to better appreciate the issues on the ground in order to provide a more informed support.

Mr Speaker, together with my team we have been to the following places: Upper West (Meningitis Response), Regional Health Directorate, Wa Na's Palace, Nadowli District Hospital, Queen of Peace Senior High School (S.H.S.), Wa Regional Hospital, Greater Accra and Central Regions (Cholera Response), Mamprobi hospital, Martyrs of Uganda School, Winneba Municipal Hospital, Winneba Township, Winneba Beach front and Swedru Municipal Hospital.

Mr Speaker, at this juncture, I would like to encourage all health workers - especially those in the hard-hit districts to support the ongoing response to the

outbreak. Similarly, I would like to call on the Municipal/District Assemblies including local authorities responsible for water, sanitation, and food safety, to actively play their part in enforcing local bye-laws, ensuring access to safe water and food, and supporting awareness creation. In addition, I also appeal to our friends in the media to support the public education and awareness some more to fully prevent any further spread of these outbreaks.

12.12 p.m.

Mr Speaker, as I end, permit me to call on my fellow Members of Parliament to support the local authorities and health workers to educate our fellow country men and women on how to prevent these diseases and the important need to report early to the health facilities when they have symptoms suggestive of any of these diseases. This helps to prevent further spread and complications, including unfortunate loss of lives.

Mr Speaker, finally, I want to reassure the House that we are doing everything in our power to contain these outbreaks and safeguard the health of our nation. We would continue to monitor the situation closely and provide regular updates to the House and the public.

Mr Speaker, before I end, let me use this opportunity to acknowledge some of the assistance and donations some Hon Members have also made in this direction. The Rt Hon Speaker has made significant donations to the Upper West Region in the fight against meningitis. Equally, the Minority Leader, Hon

Afenyo-Markin, has also contributed to the fight against cholera in Effutu. *[Hear! Hear!]*

Mr Speaker, thank you very much for the opportunity.

Mr First Deputy Speaker: Hon Members, that is the briefing Statement by the Hon Minister for Health.

Hon Members, I would open the floor for comments, but let me remind ourselves about Standing Order 91(3) and (4).

Dr Mark Kurt Nawaane (NDC — Nabdam): Mr Speaker, thank you very much.

Mr Speaker, mine is a question to the Minister for Health—*[Interruption]*—It is related to—

Mr Speaker, I want to acknowledge the very good work that the Minister for Health has done. The presentation is complete and very good. In fact, he has detailed all the steps that have been taken to fight these two situations: one at the coastal area and then the other at the northern part of the country. And all throughout, we still see that if you take cholera for example, year upon year, we still have cholera coming. Practically, every year, we have an outbreak of cholera. The only time that I still remember we did not get cholera was when we had COVID-19. When we had COVID-19, we did not get cholera that year. That, probably, should give us some information, and that is, when we

had COVID-19, we started hand washing, our environment was very clean, so we did not get this outbreak of cholera during that year.

Mr Speaker, so, I would advise the Minister for Health to collaborate with the other Ministries like Local Government, Chieftaincy and Religious Affairs; and Environment, Science, and Technology such that we bring back this age old—We call them *tankas* or sanitary inspectors. I do not remember those who might be as old as I am, but they used to come to our houses, and when your house is not clean, they can take you to court or they can arrest you. We should bring the sanitary inspectors back; they are products of the School of Hygiene, and I believe that this is the time to bring a number of them and create employment for the youth of this country. So, we should do something of the sort to ensure that we keep our environment very clean.

Apart from that, Hon Minister—I do not know, but with meningitis, we should be very careful because there can be what we call nosocomial infections. That is infection of those who are also working at the hospital. That is the staff: the nurses and the doctors, so they need a lot of protection. They need to take very good care of themselves and make sure that the people who are taking care of the sick do not fall sick themselves and reduce the workforce.

Mr Speaker, thank you for the opportunity, and thank you, Minister, for your good presentation.

Mr First Deputy Speaker: Thank you, Dr Nawaane.

Dr Fred Kyei Asamoah (NPP — Offinso North): Mr Speaker, thank you and thanks to the Hon Minister for Health for his response to the three issues that were raised by Hon Members on the Floor.

Mr Speaker, as we appreciate the Hon Minister, we also want to see some trends, especially when it comes to the meningitis. I realised he talked about over 100 cases, 16 deaths that have been recorded, and over 20 patients who are hospitalised. So, we do not know whether the number of deaths would increase at the end of the meningitis period. We raised this issue of the meningitis belt, and where Ghana is placed, we are not going to be away.

Mr Speaker, so, we want to see a more robust approach as to how this meningitis issue would be covered. The Hon Member who just spoke talked about other Ministries, and I have noted here the multi-sectorial approach. If you look at what the New Patriotic Party (NPP) Government did during the COVID-19 time, it brought various Ministries together to have a task force. And if we are dealing with cholera, which we know that is as a result of sanitation and water issues, we would have expected to see more of an approach which is bringing in the Ministry of Works, Housing and Water Resources; and the Ministry of Education. Then, of course, we have Environmental Protection Agency (EPA). We know EPA deals with some

approvals and how our environment is taken care of, so we want to see from the Hon Minister for Health a very strong inter-ministerial committee, as was put out by the NPP Government during its time when we had the issue of COVID-19. This would be a better approach, and we believe it could help us.

Mr Speaker, in addition, we realised that we have huge private sector health providers, and most people tend to benefit or go to the private sector, about 52 per cent. But how are we incorporating the private sector in our approach in terms of curbing this issue of cholera, meningitis and HMPV? So, we want to also see how best the private sector would be brought in.

Then, maybe this one I want to bring in: we have a huge backlog of health professionals staying at home. As a pharmacist myself, we have a huge backlog of health professionals staying at home, and the majority of them were employed by the just outgone Government. We wanted to see how best we could bring in all these health professionals so we do not get them to stay home.

12.22 p.m.

Each amount of backlog of prior professionals staying at home and majority of them were employed by the immediate past government. We wanted to see how best we can bring in all these health professionals so we do not get them to stay home.

Mr Speaker, especially when this issue is being treated, we tend to have pharmacists or pharmacy technicians that are supposed to help administer these medications. We have a huge backlog of pharmacists who are staying home and have not been brought on and there are processes that the outgone government was bringing on board. So, we want to see if the Minister can also take this issue into consideration.

Thank you, Mr Speaker.

Mr First Deputy Speaker: Thank you very much. Hon Member, we would open the floor and I would at least take about four comments each from both Sides, but before doing that, permit me to acknowledge the presence of our pupils from Nima Cluster of Schools. They are led by Portia Ajankrah, the Municipal Director of National Commission for Civic Education (NCCE). They are from Ayawaso East and their total number is 258. I believe their Member of Parliament is here.

Hon Members, the second school is Life Seed Montessori School led by Evelyn Bruce Tagoe, Headmistress of the school. They are from Okaikwei North and they are 69 in number. You are welcome and may you have a fruitful visit to the Parliament of Ghana.

[Pupils of Nima Cluster of Schools and Life Seed Montessori School were acknowledged.]

Dr Sebastian Ngmenenso Sandaare, you have the floor.

Dr Sebastian Ngmenenso Sandaare (NDC — Daffiama/Bussie/Issa): Thank you very much, Mr Speaker, for the opportunity. I was one of those who made a Statement, especially on meningitis, and you gave a directive for the Minister to come before the House. I would say that I am indeed very grateful to the Hon Minister for Health for the swift response and measures taken to control these diseases.

I see the situation as a test case for him, but he has demonstrated the capacity to deliver. I mean, responding to three major infectious diseases within a week is very commendable. So, I thank the Minister for Health and his technical team for the response to cholera, meningitis, and the HMPV.

Mr Speaker, listening to the Minister, there is hope re-emerging. He has demonstrated the standards of practice; international standards, when it comes to response to emergencies like these outbreaks: cholera, meningitis, and the HMPV.

Mr Speaker, what we need, and like he clearly demonstrated, is a multi-sectoral approach when it comes to outbreaks. Therefore, all the other sectors must come on board and bring their support to ensure that these diseases are controlled. I also want to say thank you to the Rt Hon Speaker for responding to the meningitis outbreak in the Upper West Region with a donation of over GH¢300,000.00 in terms of drugs and logistics. Likewise, the National Lotteries Authority (NLA)—The National Democratic Congress

(NDC) Upper West MP's Caucus also responded with support of GH¢10,000.00. To all those who have supported, I want to say that we are grateful. We are especially grateful to the Rt Hon Speaker.

Mr Speaker in conclusion, I want to add my voice to the Minister by saying that there is a need for community engagement and public education. With all these diseases, when the patients report early, the chances of survival is high because treatments are available. But when they report late, then not much can be done to save these lives. So, I encourage all patients, anybody with signs and symptoms of these diseases, whether cholera, meningitis or HMPV, to report early to the nearest health facility for medication.

Thank you, Mr Speaker, for giving me the opportunity. Thanks to the Minister for Health and his technical team, and thanks to the Rt Hon Speaker for coming to the aid of our people.

Mr First Deputy Speaker: Thank you very much, Hon Dr Sandaare.

Mr Nana Agyei Baffour Awuah (NPP — Manhyia South): Thank you very much, Mr Speaker, for the opportunity given me.

Mr Speaker, while commenting on the Hon Minister for Health's Statement, I want to particularly commend you for being a pillar of encouragement for fresh women and men in this House. God bless you for that, Mr Speaker.

Mr Speaker, in proceeding, the statistics show that, there is a link between our economic status and the disease called cholera.

Mr Speaker, the statistics by the WHO shows that out of the about 1.3 million to 4 million people that suffer from cholera annually, about 1.3 million of them come from Africa.

Mr Speaker, out of between 21,000 to 143,000 people that die out of cholera annually, about 57 per cent of them come from Africa. So, Mr Speaker, there is a link between development status, very respectfully, and the disease.

Mr Speaker, the learning is that education reduces or increases wealth. Indeed, when we say health is wealth, then, of course, the level of education should have a bearing on disease control and protection. In that regard, Mr Speaker, I would want to pray that the Hon Minister for Health makes it his objective that during his tenure, we are going to have a robust fight against malaria, cholera, and meningitis. So that, Mr Speaker, we free ourselves from the consequences that come with it annually.

Thank you very much.

Mr First Deputy Speaker: Thank you. I proceed to give the floor to Hon Hajia Laadi Ayii Ayamba?

12.32p.m.

Hajia Laadi Ayii Ayamba (NDC — Pusiga): Thank you, Mr Speaker, for the opportunity to contribute to the

Statement ably made by the Minister for Health. I really appreciate his effort in coming fast to respond to the demand for a Statement and give what clarity there is.

Mr Speaker, somewhere last week we extensively discussed the issue of cholera, especially. Today, we have got a lot of in-depth information on cholera and how the Ministry of Health and its associates intend to handle it.

Mr Speaker, I believe that most of us, especially those within the communities and for that matter, the health sector, especially the community health nurses, should be involved in the education about cholera. It is quite a difficult situation. Sometimes, one might think that it is an issue of just talking and then leaving but it needs follow-ups.

Mr Speaker, we should not forget that there is still open defecation in the villages, and this comes with a lot flies, all types of flies. We have the green fly; we have the tsetse fly. All these flies run back into the houses and sit on food. When they do so, it may be eaten without being heated. Children go to ease themselves, come back, and eat without washing their hands. So, we are quite aware of that. I will also suggest to the Minister for Health that, transportation is a very big problem for community health nurses who are supposed to get to the hinterlands. I made this point last week and I would continue to make it.

Transportation is a very big problem. How long can they walk and how many houses or communities can they visit in

a week, if at all they can get the people to talk to them. So, I would first of all talk about the issue of transportation for our health workers, especially the community health nurses.

Secondly, we should be able to get those we used to call *saman-saman* in those days. They were the people who would go round as early as possible to see to it that all houses were properly cleaned. They even checked where people put their water and made sure that the pots were clean and that people had good drinking water. We have thrown off all these people and we believe that what we are doing today is the best. We have grown; we have gone digital so we do not care. We can get pipe borne water. We need these people to help us.

I appreciate the fact that—I tried to find out from the Minister about free health care for those with cholera and for communities where there is an outbreak of cholera. He has made it clear to me that places that are affected can have free treatment. This would go a long way. Let us get to the community radios, the radio stations, the various health care centres, and the services to let them understand. This is because most people, as we sit here and talk, might for more than a year now not heard a word from the radio or from any other person educating them on this issue so they do not even know that it is for free. They would not know. They think they do not have money so there is little they can do. They think they will not be able to go to the hospital so they remain there until the inevitable happens, and death comes. Cholera is killing us

because there is a lot of ignorance so, I would say let us get communities to give the education.

Meningitis is what he mentioned and it is going to become more serious because during March and April, the sun becomes so hot, especially in the five regions of the North, to the extent that many are not able to sleep in their rooms. While it is hot, there are also mosquitoes so they are compelled to go into the rooms and most of the rooms in our villages do not even have windows. Even if there are windows, they would not be opened because mosquitoes would surely go in. So, I am suggesting that we ensure that every household gets enough of the mosquito nets that used to be given because prevention is better than cure. We should not go to a house and give it to only three or four people and say we saved the house.

Let us also educate them and make them understand that it is dangerous for them to sleep in large numbers inside their rooms. When we are able to do this, it will go a long way to help.

The Minister also made me understand that the treatment for meningitis is free when I asked him. Again, we need the education. We need the message to go. We need our people to understand. We should put ourselves in it. Mr Speaker, with this one, it will help us a lot. I would appreciate and wish to tell or suggest to my Colleagues here that we should not leave this to be a nine-day wonder as we have discussed here but we should take it out there and ensure that we help in the

education so that at least our people will be better informed.

I thank you very much, Mr Speaker. Congratulations and bye-bye.

Mr First Deputy Speaker: Order! Hon former Minister?

Mr Kwabena Okyere Darko-Mensah (NPP — Takoradi): Thank you, Mr Speaker, for calling me to add my voice to the Statement made by the Minister for Health.

Mr Speaker, I am very happy this issue has come back, full circle to this House. Mr Speaker, I believe that first and foremost, prevention is always better than cure and I believe that for cholera, it is not the first time that is happening in Ghana; it has been recurring maybe in the last 50 years. It seems to re-occur and re-occur and re-occur. Unfortunately, when it occurs, public officers bear the brunt as if they are the people causing the problem. But from all the speakers and from literature and practice, one would realise that the issue of sanitation is number one.

Mr Speaker, how can we have a country where people build houses without toilets in them? How can we? How can we have people use the washrooms, do not wash their hands and go and eat? How can we get food vendors to prepare food without cooking them well or washing them well and still blame somebody outside the vicinity? So, I believe that it is time we educate our people that prevention is always better than cure. During the COVID-19

period, we did not record any cholera cases because we were practicing safe hygiene, using sanitisers, washing our hands and all that. I believe that we have to bring focus back on that safety hygienic practices again so that Ghanaians understand that cholera can be prevented.

When I was a child, what I realised was that any time mangoes started booming in town, cholera also reared its ugly head. So ever since I was a child, any time there were mangoes in town, I never ate them. I wait for the mango— To prevent cholera and it has worked for me up to today. So, I believe that this business of toilets not being in homes is something that the Minister for Local Government, Chieftaincy and Religious Affairs should have to take on seriously.

12.42p.m.

At least, there should be one toilet to one family. Even if it is a compound house and there are three different families, they should have three different toilets. This is because we all know that public toilets are not safe. We know of emergency cases that could happen in schools or maybe at lorry parks, but in the communities, we should do whatever it takes to make sure that we put toilets in every home. That should be the strategy. Otherwise, we would come back to talk about these things all the time.

The Hon Minister also made mention of the town council people who used to come around when we were children. We called them “*tankas*”. In fact, in those

days, when we were kids, when we heard that the *tankas* were coming to the area, every household got cleaned up because we knew that we would be charged. Recently, in my region, we introduced what we call the “e-*tankas*”, where we tried to digitalise the town council programme. We got the environmental officers, in virtually all the district assemblies, to use technology to monitor homes and the rest, and we could see a trend that people were trying to come up to speed. Along the line, they even started using it as propaganda that it is the Regional Minister who has sent people to check their homes. But the fact of the matter is that cleanliness is next to godliness, and I believe that if we are able to do more of these, it will help us to do better.

Mr Speaker, while the Minister was speaking, he was very bold to thank the nurses, and I am very happy, but we have seen a circular also sacking nurses. So, I am wondering if he is using the letter to thank them or he is really thanking them because they have done a yeoman’s job. How can he sack the people he is thanking for getting employment to help the health sector improve and sustain itself?

Mr Speaker, I believe this issue is as simple as ABC. We should continue to preach prevention, show people what they should do when they get it, and attend to the health facilities. This is because it is a fact that those who do not report within the first 24 hours of visible symptoms of cholera, especially those who are dehydrating, die. So, it is always good that they go there as quickly as possible.

We know Oral Rehydration Solution (ORS) and others can be used, but if one is not careful and does not apply it properly, they would lose a lot of water and dehydrate; to the extent that cholera is sometimes called the “Blue Death”. I believe that reporting as quickly as possible to the health facility is important. And since most people also do not show their symptoms, it is very dangerous; that is why prevention is key to the progress of this disease.

On meningitis, as we all know, it is basically a disease of inflammation of tissues around the brain and it is caused by a lot of different agents. There is medicine for a lot of them, and people should report quickly to the health facilities for check-up and treatment, so that we can save more lives and save this country.

With these few words, Mr Speaker, I thank you very much for giving me the opportunity to add my voice.

Mr First Deputy Speaker: Thank you very much. It is now the turn of the Hon Member for Garu.

Dr Thomas Winsum Anabah (NDC — Garu): Mr Speaker, thank you very much for the opportunity, and I would like to thank the Minister for responding so quickly to the Statement made by Hon Sanja Nanja last week, and for the very elaborate response he has brought to Parliament that is consistent with what is expected of him, as a Minister, and his Ministry.

He elaborated how the Ministry has set up so many steps from a multi-sectoral approach and coordination, including environmental assessment of areas that are affected; contact tracing to ensure that those who are affected do not disseminate the disease, especially the cholera cases; vaccination, and training of staff. These are all commendable. In fact, I think that we would continue to treat cholera in this country for years and it will never end, unless the right things are done.

If I recollect, on 9th October, 2016, one gentleman in this country made a statement, which I think we have to go back and embrace in order to end cholera and some infectious diseases in this country. The person said, no village will have water and toilet problems in his first two years when we are in Government. I picked it back because I think that is the long-term solution that would end cholera in Ghana. If we check the whole world, cholera is in Africa, the Caribbean, and Asia. It means that there is something wrong. A serious outbreak of cholera in the United Kingdom (UK) was recorded about 300 years ago; they have not experienced it again. This is because sanitation is given priority.

We have seen so much spent on sanitation in this country; yet, we have typhoid and cholera killing people every year. Let us continue to educate our people and treat the current acute cases. I would call on the multi-sectoral approach the Minister talked of that it should involve medium and long-term measures.

Mr Speaker, just like some of the contributors have said, we must ensure that no one builds a house without a toilet and there should not be a public space without a toilet. No one should sell food that he or she has properly cooked in his or her house and, ironically, sell it on top of a gutter. It shows that even though the food was properly cooked, we are going to eat it with the stench from the gutter which may cause typhoid or cholera. So, district assemblies should play a role in regulating this. As regards to that of the cholera, I think we would never get it stopped if we do not take measures to implement what somebody prophesied in October 2016.

Coming to the meningitis, I know the Ghana Health Service (GHS) and the Minister have done a good job by providing free care and education to the communities, and that is ongoing and people are reporting. But one thing that is striking is that when I checked current reports, none of the countries in the meningitis belt have suffered from meningitis for the past two years, from Senegal to Ethiopia. In Ghana, the pathogen that normally causes meningitis is not the same this time. It is a different one which does not respond to the vaccine that is used for the one that we know.

It shows there is something wrong, and that is why we need epidemiologists, together with the GHS and the Ministry of Health, to investigate. Could it be that we have abused antibiotics, which is why this particular strain is so virulent and causing more meningitis? Let us research into it because if Burkina Faso,

which had the harshest conditions of the Harmattan, this year is not experiencing meningitis, and Senegal, Mali, and Ethiopia are not experiencing it, why should Ghana experience it? Even in Ghana, the Upper East is not experiencing this.

There is something we need to investigate, and I leave that to the Minister for Health and his team to look into it. Let us make sure our epidemiologists and laboratories research into it to see whether we could identify the reason we have repeated meningitis in Ghana every year, while countries in the meningitis belt are free from it. Burkina Faso has used the vaccine that is good for the pneumococcal to work very well for them and they have not experienced meningitis for the past three years. So, let us research into it.

Mr Speaker, I would end here by thanking the Minister for a good job, and I would also like to thank the Speaker of Parliament for his sumptuous contribution to the people in the Upper West Region to help the fight against the meningitis outbreak that has taken about 18 lives over there. Mr Speaker, I thank you for the opportunity.

Mr First Deputy Speaker: Thank you, Dr Anabah.

12.52 p.m.

Minority Leader (Osahen Alexander Kwamena Afenyo-Markin): Mr Speaker, thank you for the opportunity and let me thank the

Minister for responding to the call by this House to make a Statement on this important matter affecting our people. The Minister took us through some interventions that the Ministry has made so far, but I just want to point out some few things for his further consideration. In his Statement, he said that Effutu is topping the infection rate in the Central Region, which is true. However, in terms of vaccination, his submission points to the fact that they are yet to get approval for Effutu. I felt that that should rather be prioritised, because if Agona West is recording just six cases and Effutu has 18 cases and they are rather vaccinating people in Agona West, they may have to look at it instead of the Minister saying that they are now seeking approval to vaccinate people in Effutu.

Mr Speaker, he again talks about the sudden rise of the situation in Winneba since January. It is so, because sometimes when there is change in power, the way our locals react, all public toilets in the Effutu at the *Nshona* to wit seashore have now been seized and locked. Fortunately, the Minister, went to Winneba and met the fisher folks at the *Nshona*. That is where the problem is. They have no place to ease themselves and it is a problem given the history of this situation, and we know how people contract it. If a party comes into Government and somebody thinks that he or she can lock up a toilet—When there is cholera outbreak, it does not know party colours, whether one is a Convention People's Party (CPP), New Patriotic Party (NPP) or National Democratic Congress (NDC). So, I believe that is a matter that has to be

looked at critically and I am sure that upon that, we would be able to deal with the situation and contain it.

Mr Speaker, the Minister called on local government authorities to support the Ministry. It is true that to enable the Ministry to function well, they need the support of the Local Government institutions, led by political leaders. Fortunately, I have seen Alhaji Ahmed Ibrahim, the Minister of Local Government, Chieftaincy and Religious Affairs. We know that when Prof Mills, of blessed memory, assumed the reins of Government, his policy was for those who were appointed by the former President Kuffour's Administration to continue until a smooth transition took place. That helped in a seamless governance at the local level, where some new appointments were made and there was a formal handing over. Unfortunately, this time around, the posture or the policy was different. Almost on the second day into the Administration, all appointments were revoked. As we speak, there is no leadership at the local level—

Mr First Deputy Speaker: Hon Minority Leader, we are taking comments on the briefing of the Hon Minister for Health on meningitis and cholera.

Osahen Afenyo-Markin: Mr Speaker, the Minister invited us to assist at the local level and he talked about governance at the local level. I need to lay a foundation in respect of the comment. The point is that there is no political leadership at the local

government level. I am calling on the Minister of Local Government, Chieftaincy and Religious Affairs to expedite the process, because all the policies of Government; Ministry of Education and Ministry of Health, the implementation authority, is given to the Metropolitan, Municipal, and District Chief Executives (MMDCEs). Everything would end there. Without the MMDCE, Government policy cannot be implemented at the local level, as it is today, we only have the Coordinating Directors acting. They are unable to even call assembly meetings. So, as part of the call by the Minister of Health, I believe that to enable him to roll out these interventions effectively, the Minister of Local Government, Chieftaincy and Religious Affairs may also have to support by expediting action on the appointment of MMDCEs, so that together they can roll this out. Our people are suffering and without political leadership, it would be difficult.

Mr Speaker, secondly and finally, he also called for support from the healthcare professionals. He, in fact, commended their industry thus far. But the only way we can have adequate support for intervention would be to have sufficient staff levels. As we speak, the Minister is aware that appointments of healthcare professionals are being revoked. He is calling for intervention. He is calling for more healthcare professionals to support.

Mr Speaker, I heard Hajia Laadi Ayamba talk about the community health nurses. They are the people who undertake the education at the local level.

We speak here, but many of our people, do not get the information. The basics are always handled by the community health nurses. This is a situation where community health nurses who have been employed have been given termination letters, and this is the very time that the Minister of Health needs their support.

Mr First Deputy Speaker: Hon Minority Leader, I recognise the Majority Chief Whip. Majority Chief Whip, are you on point of order?

Mr Dafeamekpor: Mr Speaker, I rise pursuant to Order 122(1a). My point is that, one, there was no indication in the Minister's Statement that without the MMDCEs, his ministry is not making interventions. So, it is mostly inaccurate for the Minority Leader to suggest that the absence of MMDCEs is hampering and affecting remediable measures being deployed by the Ministry in dealing with the problem at hand.

Mr Speaker, two, the Minority Leader is on record for stating emphatically that the President needs not appoint or nominate an MCE for his constituency or district. He is on record to have said that. He has not rebutted that reportage. So, today, I am surprised that he is crying for an MCE to be appointed for Effutu.

Mr Speaker, number three, there is no relevance or connection between the directive to terminate employments done by public agencies ex post facto 7th December and the remediable measures deployed by the Ministry of Health to deal with this matter.

Mr Speaker, the Minister has not recounted the inadequacy of staff in dealing with the problem.

1.02 p.m.

We are in the process of terminating appointments of health personnel who have been deployed unto the field to deal with the problem.

Mr Speaker, I want to urge the Minority Leader to avert his mind to the fact that rendering of health services is decentralised to the very communities. He should make his submissions and praise the Minister for the alacrity with which he has moved to deal with the problem and not to be political.

I thank you for the opportunity.

Mr First Deputy Speaker: Hon Members, I indicated right from the beginning before giving the floor to Members that we should be guided by Standing Orders 91(3) and (4).

Hon Members, let me read:

“(3) A Member may comment on the statement and the comment shall not provoke debates.

(4) A Member commenting on the Statement shall not take more than five minutes except otherwise permitted by the Speaker.”

So, Hon Minority Leader, proceed and conclude, limiting it to the briefing of the Minister for Health.

Osahen Afenyo-Markin: Mr Speaker, let me first make an observation and then comply with your order.

Mr Speaker, this is the umpteenth time that I have made this observation that if we are setting a certain precedence, which is anew, I would take note. But I know that there is always a tomorrow in this House.

Mr Speaker, my respected Colleague, whom I listened to in silence, made an intervention, a supposed point of order, and spoke for seven minutes. I quietly checked the time. If there must be silence—*[Interruption]*—I listened. We are in this Chamber; Members have made their contributions, and I took notes. I would want Hon Akandoh's Statement to be made available again to him. I took notes. MMDCEs—Hon Akandoh made a call on us that the Local Government authority would have to be up and doing, and he needs the authorities to be in place.

Mr Speaker, all I am saying is that we need to have—*[Interruption]*—The impatience and intolerance must be dealt with, so that we can have a very decent debate. The point I am making is that we need to have the political heads to be in office to assist in the implementation of Government policies, and I am happy that the Minister for Local Government, Chieftaincy and Religious Affairs is in the Chamber, so that he takes it up and expedites it.

Mr Speaker, the Minority Chief Whip, in his intervention, also made the point that I am on record to have said—

Mr First Deputy Speaker: He is not the Minority Chief Whip; he is the Majority Chief Whip.

Osahen Afenyo-Markin: Mr Speaker, well, I slipped. You even called him the "Majority Leader". You also made a mistake earlier—*[Laughter]*—So, no problem. He is the Majority Chief Whip and not the Majority Leader, and neither is he the Minority Chief Whip. I would accord the Chair with respect. Let us treat each other that way.

Mr Speaker, he said I am on record to have said I do not need an MCE in Winneba. It is not true. He should quote me and do it right. This is *Hansard*, so, when he wants to quote me, he should quote me right.

Mr Speaker, on the issue of healthcare professionals, the call by the Minister for Health was for support to the healthcare professionals. When the Hon Laadi Ayii Ayamba contributed, her contention was that we need to have more of these Community Health nurses because they are the people who do the direct interface to educate our people. That was the call made by Hon Ayamba. I add my voice to that call by urging the Minister to ensure that more healthcare professionals are employed.

Mr Speaker, the Hon Minister is aware that termination letters have been issued out to healthcare professionals who have just been employed, and I am making a call on him that, considering the fact that we need more nurses to address this matter, he re-look at the situation.

Mr Speaker, here is a situation where a Member of Parliament for Pusiga is calling on us to engage more community health nurses at the local level to educate our people. She has expressed frustration on the CSM in the north, and I also know that when it comes to preventive healthcare, we need more healthcare professionals. In a situation where the Minister needs such support to roll out Government policy, it is only far right to call on the Hon Minister to ensure that no healthcare professional loses a job, and that the Government ensures expedited steps in employing the backlog of healthcare professionals who have graduated and are at home.

We know the Budget would come in, and it is a call on the Minister for Health to engage the Minister for Finance to make adequate provisions, so that there would be clearance for more nurses and other healthcare professionals to be employed. By this, the situation would be handy because those who have been trained would be there in the communities to support our people. Our people are suffering, and he knows so.

Mr Speaker, on social intervention, I support the call by Hon Ayamba, Member of Parliament for Pusiga, that there should be more social intervention like the mosquito nets she talked about. If we do not get social interventions evenly and fairly distributed to the most vulnerable groups, how would we deal with the situation as the Minister has briefed us on? We need to have a transparent system where the vulnerable in our communities would get the support, and this, I believe, if the Minister is able to do this, there would be relief at the local level.

Mr Speaker, in conclusion, I want to thank the Hon Minister, who is a very respected Colleague, for acknowledging my contribution in the fight against this menace. Unfortunately, suffice to say that he made a general acknowledgement, but just for the record and for *Hansard*, I have released a brand-new pickup, which he knows about, and I have also given a cash donation of GH¢100,000, which he acknowledges.

Mr Speaker, I also thank him for making it to Winneba over the weekend. It was a promise he made that he would in Winneba, and he was in Winneba. As much as we are here to critique the Government, when the man does it well too, it is important that he is showing leadership. At least when he was there, those healthcare professionals were inspired, particularly the Director of the Municipal Health Directorate, Dr Paulette Brown. I want to take this opportunity to commend all of them. They have not slept on this matter. They have been disturbing me with it, getting me to reach out to the Minister, and they have been very collective. So far, all the health facilities have been made available.

Mr Speaker, it is important that I point out that of the 21 health centres in Effutu, 17 were constructed by me with my own pocket money.

1.12 p.m.

[*Hear! Hear!*] and all these facilities, yes, Mr Speaker, the Papa Kow Damptse CHPS, the Akosua Village Health Centre, Penkye CHPS, Nii Ephraim

CHPS, Gyahadze CHPS, the Dr Pra CHPS, George Kwame Quansah health facility and the Samuel Owusu Agyei Health Centre. These are health facilities that I have constructed and furnished and they are providing support to our people. We will continue to serve the people and rely on the Hon Minister for his support.

There is a new children's hospital coming up at Gyangyanadze. It is a 150-bed children's hospital and it will be an intervention as both a primary and secondary support facility. I am sure with that cooperation, in future, we would be able to address some of these things adequately. Mr Speaker, I would want to assure the Hon Minister that just as we have been doing in the past, there will be cooperation to enable our people benefit but, he should remember that in terms of support to the health sector, Effutu must get its fair share.

Mr Speaker, without more, I would like to thank you for this treasured space. God bless you.

Mr First Deputy Speaker: Hon Members, because you have brought the Minister for Local Government, Chieftaincy and Religious Affairs into the debate, I intend giving him the floor.

Minister for Local Government, Chieftaincy and Religious Affairs (Mr Ahmed Ibrahim) (MP): Thank you Mr Speaker for giving me the opportunity. To begin with, I must take this opportunity to commend the maker of the Statement, Mr Kwabena Mintah Akandoh. In fact, having metamorphosed from the Ranking Member of the

Committee on Health to the Minister responsible for Health, he has started on a good note and, I think, everybody admires that.

But, Mr Speaker, it is on record, and as the maker of the Statement has stated, that the cholera outbreak was inherited from the previous administration. Mr Speaker, may I read for you bullet 10 of the Statement. It reads:

“Mr Speaker, I must put on record that the current cholera outbreak, began over 5 months ago – in October 2024 in Ada West in the Greater Accra Region.”

Mr Speaker, how can the Minority Leader blame the absence of MMDCEs from post for this? If there is cholera outbreak, it is a health problem. And the Minority Leader is attributing a political problem to a health problem. How can that be? He is giving a political solution for a health problem. Oh Leader!

But, Mr Speaker, to proceed, yes, it is true that Former President, Prof John Evans Atta-Mills, when he took the baton from Former President John Agyekum Kufuor, allowed the MMDCEs to be at post for over five months. That was a good example. But that opportunity too was eroded by his successor. [Some Hon Members: Yes] When Former President, Nana Addo Dankwa Akufo-Addo took the baton from President John Dramani Mahama, on 13th January, 2017, he issued a directive and all MMDCEs were to vacate post. When they came for the swearing-in ceremony, by the time they

returned to their districts they had been vacated from their positions.

Mr Speaker, to proceed, even Former President Nana Addo Dankwa Akufo-Addo, when he was succeeding himself, 134 MMDCEs who were perceived to be affiliated to Mr Alan Kyerematen, were sacked. The Minority Leader is aware of this. In the same administration, 134 MMDCEs were sacked so, why does the Minority blame us for this?

Mr Speaker, I wanted to raise a point of order to clear this and you said you would give me the opportunity to state it and that is why I am stating this. That is not the solution. To continue, the Minority Leader who is blaming us is on record to have said that—

Mr First Deputy Speaker: Hon Member, conclude.

Mr Ibrahim: The Minority said that he will ensure that no DCE is approved in his constituency. So, what is he saying? He is on record as Minority Leader to have said that he will not allow a DCE to be approved in Effutu. If we do not approve it, how will he get a DCE? Meanwhile there is a cholera outbreak and he knows the DCE will solve it but he is saying that he will not allow them to have a DCE so, he does not want the problem to be solved.

Mr Speaker, to proceed—

Mr First Deputy Speaker: Hon Member, conclude.

Mr Ibrahim: Mr Speaker, I was mentioned. The Minority Leader called for it, let me give it to him—

Mr First Deputy Speaker: Hon Minister responsible for Local Government, Chieftaincy and Religious Affairs, conclude.

Mr Ibrahim: Why? This is a response to the Minority Leader's call.

Mr First Deputy Speaker: Hon Minister responsible for Local Government, Chieftaincy and Religious Affairs? Yes, Hon Minority Leader?

Mr Ibrahim: Mr Speaker?

Mr First Deputy Speaker: I have given the floor to the Hon Minority Leader.

Osahen Afenyo-Markin: Mr Speaker, my Colleagues are creating the impression that it is one Afenyo-Markin against a thousand National Democratic Congress (NDC) Members. [**Some Hon Members:** No!] Yes. When Afenyo-Markin speaks a thousand NDC Members are on their feet.

Mr Speaker, with the greatest of respect, this is not the time for us to debate. I believe that the Hon Minister for Local Government, Chieftaincy and Religious Affairs has misconstrued my comments and mis-appreciated same. I would respond to him with two points.

Firstly, the maker of the Statement made a call on us. Mr Speaker, my style is always to take notes so, I took notes on

all the points he made. I have here “the need to have MMDCEs in place”. It was the Hon Minister for Health’s call. Check his Statement again. I am not making a political statement. He himself made the call so, I said that to the extent that the Hon Minister for Local Government, Chieftaincy and Religious Affairs is in the Chamber, he should take this on board so that he would facilitate the appointment of MMDCEs.

Secondly, on the issue of Former President Akufo-Addo, Nana Addo Dankwa Akufo-Addo does not come in, in this matter. It is the NDC Government in office and all we are saying is that there is a cholera outbreak and the Minister for Health wants the Local Government Authority to be properly constituted to take this matter up. What he is supposed to do as the Minister for Local Government, Chieftaincy and Religious Affairs is to expedite action. It is not to take an issue with me [*Uproar*] but to urge on government to speed up the nomination of MMDCEs—

Mr Ibrahim — rose —

Mr Michael Baafi Okyere: Sit down.

Mr First Deputy Speaker: Hon Members, Order!

Hon Okyere, I am watching your disorderly conduct.

Osahen Afenyo-Markin: We need the nominations to be done as quickly as possible and when they are done, we would be able to go through the

confirmation process. As to what is happening in Winneba, Mr Speaker, if we want to bring constituency matters to this Floor, I do not think that it would be appropriate to bring partisan rally comments to this Floor.

Mr Speaker, Mr Ibrahim knows that we have one republic which is the Republic of Ghana—

Mr First Deputy Speaker: Hon Minority Leader?

Osahen Afenyo-Markin: Mr Speaker, with respect, I need to finish. Hon Dafeamekpor was allowed to finish so, Mr Speaker, let me finish. He called in on a point of order against me and I quietly listened to him, so let me conclude, respectfully, I need to conclude.

Mr First Deputy Speaker: Then conclude.

Osahen Afenyo-Markin: I will, Mr Speaker. What happens in Winneba at a rally where we say republic of Effutu, those are matters for political excitement.

1.22 p.m.

Mr Speaker, if I go and meet my local foot soldiers and I say the Republic of Effutu, when we all know, by law, there is one Republic. It is a matter that the presiding elder of the Pentecost Church, who has now been elevated to the status of Minister for Local Government, Chieftaincy and Religious Affairs—and he knows that I was part of the approval

process. Is it a matter for him to come and raise here?

Mr Speaker, what is a notorious fact is that in Effutu, all the assembly-members are NPP members—

Mr First Deputy Speaker: Hon Minority Leader, I think your time is up.

Osahen Afenyo-Markin: So, we want the Majority Side to plead with us. Then when they bring a good nominee or candidate, we are going to support them. But if they do not bring a good candidate, it would be difficult. This is not about Winneba but the nation. It is a matter for the nation.

Mr First Deputy Speaker: Hon Minority Leader, please conclude.

Osahen Afenyo-Markin: Mr Speaker, they have to tolerate us on this matter. —[Interruption]—Yes, I say so. That is true—

Mr First Deputy Speaker: Hon Members, please, if you do not have the floor, resume your seats.

Osahen Afenyo-Markin: Mr Speaker, that is true. All the assembly Members are NPP members.

Mr First Deputy Speaker: Hon Members, sometimes, out of respect for the Leadership of the House, we normally do not rule them out of order. But if that is what the Leadership is expecting from the Chair, I would not hesitate to do so. I had the cause to admonish that the Statement and the

briefing made by the Hon Minister for Health is on cholera and meningitis, indicative of the fact that we are moving into matters not relevant to the issue at stake. What other indication can I give to a Leader apart from what I have said? But when it happens, and that cue is not being taken from the guide being given by the Chair, then we have to go strictly and apply the rules.

In that case, the Leadership must take it in good faith. Ordinarily, I was not going to recognise the Minister for Local Government, Chieftaincy and Religious Affairs. But his name has been mentioned multiple times. That is why I have decided to hear him.

So, Hon Minister, please conclude.

Mr Ibrahim: Mr Speaker, thank you.

Mr Speaker, in conclusion, I want to use this opportunity to also remind this very House that the disease we are all talking about has no political colours. And therefore, it behoves all of us to make sure that we take appropriate steps to help cure the disease.

Mr Speaker, it is only good to hear from the Hon Minister that the situation is improving, which means the Minister and his Ministry are on course. However, Mr Speaker, there needs to be an inter-ministerial and inter-sectoral approach. Because in terms of sanitation, part falls under the Minister for Youth Development and Empowerment and part also falls under the Minister for Local Government, Chieftaincy and Religious Affairs. However, on the area

of water, that also falls under the Minister for Works and Housing. So, the four of us need to come together. The Minister for Health, the Minister for Local Government, Chieftaincy and Religious Affairs, the Minister for Works and Housing, and the Minister for Environment, Science and Technology, and the Minister for Youth Development and Empowerment. The five of us have a role to play.

Mr Speaker, if we play this well, we can help improve our hygiene, water, and our environment, and we may be able to end up improving the cholera outbreak that we are talking about.

Mr Speaker, I must thank the maker of the Statement and also fall upon this House. The President has promised a National Sanitation Day. The Budget is yet to come and we must budget for it before we can implement it. Mr Speaker, we would bring the District Assembly Common Fund formula before you, when that comes, we must make provision for sanitation and make sure that our sanitation workers are paid. In the Budget too, the sanitary inspector that we are all calling for has also been promised in our manifesto. It would be translated in the Budget. So, when the time for approval comes, we must take all the submissions that have been made on this Floor into approving the Budget. By so doing, Mr Speaker, we may be able to help build Mother Ghana together.

Thank you for the opportunity.

Mr First Deputy Speaker: Thank you very much. Majority Leadership?

Ms Comfort Doyoe Cudjoe: Thank you, Mr Speaker for the opportunity to add my voice to the Statement—

Mr Dafeamekpor — *rose* —

Mr Dafeamekpor: Mr Speaker, with your leave, the Hon Minister for Roads and Highways wants to provide very quick information.

Why? Why? Why? [*Uproar*]

What is wrong? I have been recognised by the—

Mr First Deputy Speaker: Hon Majority Whip.

Mr Dafeamekpor: I am seeking the leave of the Speaker. It is up to the Speaker to grant it or not to grant it.

Mr First Deputy Speaker: Hon Majority Whip.

Mr Dafeamekpor: Yes, Mr Speaker.

Mr First Deputy Speaker: If the Majority Leadership wants to cede to the Minister for Roads and Highways.

I would allow that.

Mr Dafeamekpor: Mr Speaker, that is not my request. With all due respect, if you may hear me, he says he has an information to give to the House.

Osahen Afenyo-Markin and Alhaji Habib Iddrisu — *rose* —

Mr Dafeamekpor: Sit down!

Mr First Deputy Speaker: Hon Majority Whip.

Mr Dafeamekpor: Why? What is wrong with you?

Mr First Deputy Speaker: Hon Majority Whip, would you listen for a minute?

Mr Dafeamekpor: Mr Speaker, I am listening.

Mr First Deputy Speaker: Yes, I know exactly what I am doing. I am engaging the Hon Minister in a negotiation. So, I am making a sign between him and me. Therefore, I know exactly what I am doing.

1.32 p.m.

Mr Dafeamekpor: Mr Speaker, I yield—[*Uproar*]

Mr Speaker, with all due respect, I give due regard to my Brother on the other Side; he should return the courtesy.

Mr Speaker, I thank you for the opportunity.

Mr First Deputy Speaker: Hon Comfort Doyoe Cudjoe, you have the floor.

Ms Comfort Doyoe Cudjoe (NDC — Ada): Mr Speaker, I thank you for the opportunity to add my voice to the Statement made by the Minister for Health.

Mr Speaker, it is about time that we speak the truth to ourselves. The whole Statement was about cholera and this year, it started from Ada. If one wants to understand what cholera means—It means somebody has eaten faeces. What brings about all these things is sanitation and whether we keep proper sanitation.

Mr Speaker, just two months ago, there was a whole Ministry for sanitation, and if we look at the budget for that Ministry and, yet, sanitation does not go down to the people, then, I beg to differ that we are not speaking the truth to ourselves. Companies are paid for sanitation, but when we go to our villages and other places, we can see that the containers are there and are full; yet, nobody is taking care of it.

Mr Speaker, those moneys we spend, especially the budget we spend on sanitation, why do we not give it to the chiefs who would take care of the village and the environment? This is because when a chief is assigned to take care of his environment and he is paid for that, he has the people who would do it and would ensure that the whole place would be neat.

Just this Sunday, I visited a village called Kwalakpoyom in my constituency. They had swept everywhere and every corner of the village was clean and neat. Mr Speaker, if we could encourage them, I think they would do a proper work than what we, who tell our mothers and fathers that we have been educated and we would take care of them, could not do. They would do it for themselves.

Mr Speaker, let us be honest; eating faeces is what brings about cholera. Where do we get it from to eat? From insects, flies, vendors, and the latest one, which we are not watching, the bedroom, because people are now eating faeces there. We should check all those areas because if we are not careful, we will be pointing to the vendors; meanwhile, they are innocent when it comes to those things.

Mr Speaker, let us revisit how we manage sanitation. We have chiefs in every area, so even if we detail them and Government issues an instruction that every chief should make sure his environment is clean, we will get a solution to this problem. We should not deceive ourselves and beat around the bush as if we are working, but we are not.

Mr Speaker, we need to sit down, do proper planning, and work around these issues well, so that we will get the right results. In every electoral area, consisting of villages, there is an assembly member. The assembly members should work with their chiefs, and instead of leaving the budget at the Ministry, at least, a small budget could be allocated to the chief and let us see whether we will get results or not. Also, they have a way of burning their refuse, and they could even use it as manure in their farms.

Mr Speaker, since how we started it is not working, let us change the style now and use our traditional council, chiefs, assembly members, and unit committee members. We have unit committee members who we are not using because

we are not giving them small allowances to go about their work in their villages.

Mr Speaker, so, those budgets should go to the unit committee members, the assembly members, and the chiefs, and let us see whether we will not get the proper results.

I thank you, Mr Speaker, for the opportunity. [*Hear! Hear!*]

Mr First Deputy Speaker: Thank you. Before I give the floor to the Hon Minister to wind up, I recognise Hon Governs Kwame Agbodza on a point of information.

Mr Governs Kwame Agbodza: Mr Speaker, I thank you for the opportunity. I am not making a contribution to the Statement, though I must commend the Minister and the Hon Colleagues who have contributed.

Mr Speaker, in this House, we have different people with different backgrounds. In this Chamber, Hon Gizella Akushika Tetteh-Agbotui and myself are the only architects in this House. If a Colleague makes a Statement—Of course, if I make a Statement which borders on law and is completely inappropriate, we expect that the lawyers here to correct me.

There is something the respected Minority Leader said; that he is building a 150-bed children's hospital. Mr Speaker, many people make this mistake. It is not his fault and this is the reason. Mr Speaker, in our country, by the health planning standards, district

hospitals are facilities with beds between 60 to 120. When there are between 120 to 400 beds, it is a regional hospital. The fact that one can fit 100 beds in this Chamber does not make it a district hospital.

So, it is important that when we are making interventions, and, indeed, the interventions of the Minority Leader, in terms of provision of healthcare facilities, is known and Colleagues have done that. For instance, to build a district hospital, even for 60 beds, one is getting close to almost US\$19 million and it comes with 20 different departments. When one speaks in Parliament and makes this Statement and we let it go, somebody will hear that MPs are capable of building district hospitals, and ask why the other MP is not able to build it. So, it is important we make this—

Mr Speaker, my point is that it will be good if the Minister for Health, who is one of us, to one day take the opportunity to read out to us what the standards of a Community-Based Health Planning Services (CHPS) compound, a health facility, a polyclinic, a district hospital, and a regional hospital are. It will guide us, so that when we are making interventions, we would just not say that because we built a space that can take 100 beds, we built a district hospital. It is not as simple as that.

Mr Speaker, that is all the information I wanted to provide. [*Hear! Hear!*]

Mr First Deputy Speaker: Thank you very much.

Yes, Hon Minority Leader?

Osahen Afenyo-Markin: Mr Speaker, I thank you for the opportunity. I would like to thank Mr Governor Kwame Agbodza for his intervention and for putting the matter in the professional perspective.

I do not just speak. I wish he would get the opportunity to visit that children's hospital. It was properly designed by a professional architect, professionals are involved in the construction, and it has all the departments to make it a secondary referral facility. He needs to see it with his eyes. Do not worry.

I would want to have an hour ride with Mr Agbodza, who also doubles as an architect, to Winneba, which is just 45 minutes' drive from Accra—*[Interruption]*—No. At least, we would get a dispatch. He has a dispatch rider, so we can take 45 minutes—Do not worry, Mr Yussif, you do not have a dispatch rider; it is all right—*[Laughter]*—I have one; we would go with mine. Mr Speaker, within 45 minutes, he can go and see for himself what is happening at Gyangyanadzie in Winneba.

1.42p.m.

Mr Speaker, I am not making a submission on the Floor of the House out of ignorance. The professionals have indeed determined the capacity of the facility. It is not just a primary facility; it is a secondary facility. So, Mr Speaker, I know what I am saying that it is a 150 bed children's hospital and it coming from the professionals so, I think that

clarification has to be emphasised so that he knows that indeed, it is not just a District facility that I am referring to. If it were to be a health care centre, I would say that it is a health care centre or a CHPS compound, it is not and it is not—

Mr First Deputy Speaker: The Hon Minority Leader is raising a second part of the programme which pose danger to all of us, probably he has the means, he was a Deputy Majority Leader, became a Majority Leader and is now the Minority Leader, therefore what he can do, most of the Members behind him may not be able to do it. When the public begin to measure us.

Osahen Afenyo-Markin: Mr Speaker, I keep saying that the precedence we are setting, let us be guided. He got up on a point of information, and you granted him that special leave. As to an intervention by a Member in his Constituency. It is his *bona fide*, we know that as a fact. So, it depends on your Constituency, the things that you would want to do and the personal efforts, we all know. We come here as law makers but our people do not see us as law makers, they see us as agents for development. I do not think that it is right for him to now bake up the second matter. The issue he raised was that he is an architect and as an architect, there is a certain essential qualification to designate a facility as a 150-bed facility or 60 bed facility so he wanted to put that on record—

Mr First Deputy Speaker: Hon Minority Leader, are we really agent for development?

Osahen Afenyo-Markin: I said our people see us as such and practically that is the work we do. We pay school fees, we are required to build hospitals, we are required to aid in the construction of roads—

Mr First Deputy Speaker: So, our actions and statements should not confirm the fact that we are agents of developments?

Osahen Afenyo-Markin: I am saying that we are seen as agents of development. Although our constitutional mandate is to enact laws, but we are seen as agents of development therefore we take up that extra role.

Mr Speaker, when are campaigning, do we even talk about law making? When we are campaigning, we do not tell the people we are going to make laws for them. We tell them that we would bring development to them; that is what we tell the people. It is a fact.

Mr First Deputy Speaker: Thank you very much, Hon Minister, you may wind up.

Mr Akandoh: Thank you Mr Speaker. Let me use this opportunity to thank my Colleagues for their various contributions. Mr Speaker, as I thank them, let me put on record that a lot of misinformation has gone into the *Hansard* and I need to correct same.

Mr Speaker, we in the Ministry of Health have not revoked any health workers appointment. They are part of the Ministry and they fall under the

Ministry of Health, so we in the Ministry of Health whether—

Mr First Deputy Speaker: Hon Minister, please address the Chair.

Mr Akandoh: Very well, Mr Speaker.

Mr Speaker, whether Ghana Health Service or any agency under the Health Ministry, I have not revoked anybody's appointment. Mr Speaker, I therefore put it on record that any health professional who has gone through the right processes, who is covered by the clearance which ended on 31st December, 2024 and has been posted would never be sacked and this is a House of record —*[Hear! Hear!]* Mr Speaker, I was exceedingly surprised when my own good Friend, the Minority Leader was trying hard to link the cholera outbreak to change of Government. For his information Mr Speaker, we started recording cases of cholera as far back in October, 2024. *[Uproar]* Yes, that is the record. If you do not know, please keep quiet.

Mr Speaker, in October 2024, District Chief Executives (DCEs) and Municipal Chief Executives (MCEs) were at post but we recorded cases and so let us not try to politicise the disease. — *[Interruption]*—

Mr Speaker again, he also made—

Mr First Deputy Speaker: Hon Members, can we have some Order.

Mr Akandoh: Mr Speaker, he also sought to clarify why the vaccination has delayed in Effutu. Mr Speaker, the practice is that we have a threshold that when we get there we then put in the request for vaccination. Although Effutu has recorded cases in recent times, they got there very late and so as and when you get there, then we put in the application. We cannot use vaccination for one area for other areas and therefore I can assure him that by the end of next week, we may get consignment for Effutu.

Mr Speaker, based on the deliberations on the floor of the House, we have all agreed that cholera is sanitation and water problems and we all need to come on board to fight against any kind of outbreak in this country.

I thank you for the opportunity.

Mr First Deputy Speaker: Hon Members, let me add my voice in extending our appreciation to the Minister for Health for coming timeously to brief the House on the outbreak of meningitis and cholera. So, Hon Minister, thank you very much for coming to brief the House.

Hon Members, Statement time. We have admitted a Statement in the name of Mr Duke William Allen Kwame Amoako-Atta Ofori-Atta, Hon Member for Fanteakwa South on Sustainable Funding for Outbreak and Pandemics

Hon Member, you have the floor.

STATEMENT

Sustainable Funding for Outbreaks and Pandemics

Mr Duke William Allen Kwame Amoako-Atta Ofori-Atta (NPP — Fanteakwa South): Mr Speaker, thank you for the opportunity. This is my maiden Statement in the House.

The subject matter is Sustainable Funding for outbreaks and Pandemics, which is becoming a national disaster.

Mr Speaker, recently we have had the discussion on this Floor about outbreaks and pandemics, beginning in January 2025, with a specific reference to Human Metapneumovirus (HMPV). The issue was first raised by our Colleague, the Hon Member for Suhum. Mr Speaker, there is a next step or position that we as a nation must take to make sure our safety, protection and safety of our people is a reality.

Mr Speaker, the GHS, along with the National Vaccine Institute, earlier last year and into this year, gave us assurances on the state of affairs of outbreaks and pandemics in Ghana. They have been very vigilant in doing this. In their lingua, they assured us that no unusual pathogens were in any reports from the screening schedules across the 16 regions.

We are grateful for their work. Mr Speaker, the Minister for Health in the House today has reported one case of HMPV in Ghana. The need to reassess our position as a nation on how we

prepare for such matters, whether as an outbreak or a pandemic, is key.

How prepared are we if there were an outbreak or pandemic as we do? Mr Speaker, the solution is to have a fund dedicated to this cause, especially so in the absence of USAID funding, which was greatly beneficial to the health sector.

The purpose of the new fund would be;

1. Maintain financial support for disease and virus prevention activities by the Ghana Health Service, the National Vaccine Institute and other related agencies.
2. Ensure year-round preparation for prevention and combating outbreaks and pandemics identified by Ghana Health Service and its related agencies.
3. To assure and ensure continued research into the prevention mechanisms, including education and awareness and vaccine manufacturing.

Mr Speaker, our responsibility as lawmakers and representatives of the people, especially those of Fanteakwa South, is first and foremost to ensure their well-being and safety. That is why they have employed us to this August House. Mr Speaker, the nation must be ahead in matters of this nature at all times.

Mr Speaker, I would like to thank you for the opportunity.

[1.41 P.M. — MR SECOND DEPUTY SPEAKER IN THE CHAIR]

Mr Second Deputy Speaker: Very well

Hon Members, our Brother from Fanteakwa South has raised a very fundamental issue regarding funding, so it is now time for comments on the statement.

Yes, Hon Member for Suhum?

Mr Frank Asiedu Bekoe (NPP — Suhum): Thank you, Mr Speaker.

Mr Speaker, I rise to comment on the Statement, and I think that on 21st January, 2025, I raised a statement on HMPV, and I rise to support the Statement that has been made by the Hon Member for Fanteakwa South that the state should have an alternative source of funding to be able to curb some of these diseases. Thank you.

1.52p.m.

Mr Second Deputy Speaker: Thank you very much.

Mr Anthony Mwinkaara Sumah (NDC — Nadowli/Kaleo): Thank you, Mr Speaker, for the opportunity to contribute to the Statement ably made by my Colleague on the setting up of an emergency health fund.

Mr Speaker, one indication on how we are prepared to take up emergencies in this country is what my Colleague is suggesting. The good thing is that we are aware that emergencies would always come, but we never know when the emergencies would come. And, as a country, we do not have any source of funding to fall on other than the Consolidated Fund to deal with emergencies. The call for the setting up of an emergency fund did not start today.

Mr Speaker, I recall that there was an opportunity in this House when we suggested that the COVID-19 levy that was placed on Ghanaians, be changed into a fund that would be used to finance emergencies in this country. The call has not been heeded to, but once a Colleague has raised this matter again, I think that we have to go back to the drawing board and look at how we are going to set up a fund. Several of these have come up, even in legislation.

The other time I had the opportunity to comment on the setting up of a fund for the Mental Health Authority. That did not find expression and, again, we questioned the then Minister for Health, and he indicated that they were working on the technicalities and other details to see how they could establish the Mental Health Authority fund. But as a fact, we will always deal with emergencies, and when emergencies come and we are not prepared for them, especially with funding and logistics, we would be firefighting. It is a good call, and I think that we should look at this dispassionately and think of setting up a fund to deal with health emergencies.

Today, we are talking about meningitis, as well as cholera. One of the challenges in fighting meningitis, particularly in my constituency, is that we have logistical and funding constraints. We are aware that virtually every year around October, we would have a meningitis outbreak in the Upper West Region, and my constituency is usually the hardest hit. As I speak to you, in week two of the meningitis, in my constituency, five people died out of 30 cases, and the case fatality was about 17 per cent.

Mr Speaker, the District Health authority did not have adequate logistics to go around and do the education. We need logistics, but we usually wait until we are midway through the emergency before we pour in logistics, but if we plan adequately, we know that by October, these emergencies would occur; the outbreaks would occur and we would deploy the logistics. They would need the lumbar puncture needles to be able to extract the samples to go for the testing to understand if it is really meningitis we are fighting with. Medications—Even logistics, such as fuel, for people to go around the communities and educate the people on the emergencies and outbreaks is a challenge.

So, we are waiting and depending on the mainstream funding that goes to these health facilities and authorities to be able to deal with this. I think that it is a good call, and it is something we should pay attention to such that in this country, beyond the statutory funds that we have, we have a fund dedicated to fighting emergencies because we know that health emergencies are with us, and they would always come.

Thank you very much for the opportunity.

Mr Second Deputy Speaker: Thank you very much.

Yes, Hon James Agalga?

Mr James Agalga (NDC — Builsa North): Mr Speaker, I thank you for the opportunity.

Mr Speaker, I would like to draw the attention of this House to the existence of a fund: a National Disaster Management Fund established under the National Disaster Management Organisation (NADMO) Act 2016 (Act 927). We have not paid particular attention to the existence of that particular Fund.

Mr Speaker, in fact, when the COVID-19 pandemic broke, a special Fund was created, and donations were received. I recall that at the time, I made it known that it was unnecessary for that particular Fund to have been established because already in existence is a National Disaster Management Fund, established under Section 38 of the NADMO Act 2016.

With your kind permission, Mr Speaker, I would like to refer you to Sections 37 and 38 of the said law.

“37. Establishment of National Disaster Management Fund

There is established by this Act, a National Disaster Management Fund for the Organisation.

38. Object of the Fund

(1) The object of the Fund is to provide finances for the development and operation of disaster prevention, disaster risk reduction, climate change risk reduction, and other disaster management programmes.

(2) To achieve the objective of the Fund, the moneys from the Fund shall be applied to relevant activities determined by the Council.”

Mr Speaker, most importantly—

Mr Second Deputy Speaker: Hon Member, how is that Fund related to an outbreak of pandemics? I think the Fund you are talking about is generic, but this one is talking about the pandemic and the previous contributor was relating it to the COVID-19 Fund; the COVID-19 Fund was more or less specific, so how do you relate the specific pandemics to the NADMO laws?

Mr Agalga: Mr Speaker, the mandate of NADMO is very broad. A pandemic is also a disaster, so the COVID-19 pandemic was a disaster. The mandate of NADMO is broad enough to cover all those exigencies that is why I argued, at the time the COVID-19 Fund was established, and inaugurated by the President, that it was unnecessary because if they had taken particular notice of what this House created under Section 37 of the NADMO law, we would not have found it necessary to establish such an *ad hoc* Fund. This is statutory, and the source of funding for this particular Fund includes 3 per cent

of the District Assemblies Common Fund (DACF); we draw 3 per cent from the DACF as a source for that particular Fund; then we have donations and contributions from the public, *et cetera*.

2.02 p.m.

Mr Speaker, we have a Fund for the management of disasters which includes pandemics such as cholera, cerebrospinal meningitis (CSM), COVID-19 among others, but the fund itself is starved because payments are not made regularly into the fund. The former NADMO Director General is here with us. I cannot see him today, but Mr Speaker, if you talk to him, he will tell you. Ever since we established this fund, deductions were made from the District Assembly Common Fund on only two occasions, amounting to about GH¢21 million only. We filed several Questions in this House directed at the Minister for Finance at the time to respond and give us indication as to why deductions were not made as prescribed under the Act. The same applies to the establishment of disaster-related committees. When the Akosombo Dam was spilled, an inter-ministerial committee was hurriedly set up. But if you look at the NADMO law, such a committee already exists — an inter-ministerial committee for dealing with all kinds of disasters.

Mr Speaker, maybe it is high time we took stock of the laws we have passed in this House and implement them, rather than taking ad hoc measures when we are confronted with challenges. I thank you for the opportunity.

Mr Second Deputy Speaker: Thank you very much.

Hon Members, we would revisit Statements. Let me hold on and invite Leadership to intervene.

So, Majority Leader, let us hear you.

MOTION

Establishment of a Committee to Advise the Speaker on the Appointment of Four other Members of the Parliamentary Service Board

Majority Leader (Mr Mahama Ayariga): Mr Speaker, I beg to *move*:

That this honorable House approves the membership of a committee to advise the Speaker on the appointment of four other members of the Parliamentary Service Board.

Mr Speaker, there is a Motion advertised as item number 13 on today's Order Paper. Mr Speaker, you know that under Article 124 of the Constitution, the Parliamentary Service is required to be established as one of the public services of Ghana and it is supposed to have a board, a Parliamentary Service Board, under Article 124(2). Article 124 (2b) says that:

“four other members all of whom shall be appointed by the Speaker, acting in accordance with the advice of a committee of Parliament”

So, this Constitutional provision mandates that this House establishes a Committee of Parliament to advise the

Speaker in composing the membership of the Parliamentary Service Board.

Mr Speaker, pursuant to this Constitutional provision, I so move. Mr Speaker, the proposed Members of the board include myself, Mr Mahama Ayariga; my Colleague, the Minority Leader, Osahen Alexander Afenyo-Markin; the Deputy Majority Leader, Mr George Kweku Ricketts-Hagan; the Deputy Minority Leader, Mrs Patricia Appiagyei; and the Member of Parliament for Kasoa, Mrs Phillis Naa Koryoo Okunor.

Mr Speaker, these are the five people that we are proposing; three from this Side and two from the other Side, to advise the Speaker in order to enable him constitute the Parliamentary Service Board pursuant to Article 124 (2) of the Constitution.

Mr Second Deputy Speaker: Thank you very much, Hon Leader of the House. Now, let me invite the Minority Leader to second the motion.

Osahen Afenyo-Markin: Mr Speaker, there is nothing useful to add, save that the other Hon Member that Hon Majority Leader proposed as the MP for Kasoa. Mr Speaker, I am sure he meant the Member for Awutu Senya East. Of course, the capital of the constituency without doubt is Kasoa. So, with that, I want to second the motion without any further point.

Question Proposed.

Mr Second Deputy Speaker: Yes, Mr James Agalga?

Mr James Agalga (NDC—Bulsa North): Mr Speaker, I think the exercise is statutory in nature. Names have been proposed. All the names proposed are worthy of note, so we support the Motion without much ado. Thank you for the opportunity.

Mr Second Deputy Speaker: Yes, Hon Member for Kwadaso, Prof Kingsley Nyarko?

Prof Kingsley Nyarko (NPP — Kwadaso): Mr Speaker, as the Hon Member just said, these are distinguished Members of this House, at least the ones that I know, and I think that is a step in the right direction. However, I am surprised because during the 8th Parliament, I realised that some of the Members came from outside Parliament so —

Mr Second Deputy Speaker: Prof Nyarko, I am not cutting you short. It is a different thing. They are now going to approve those Members. This is the committee that is going to advise the Speaker.

Prof Nyarko: These are brilliant and intelligent individuals and I support them 120 per cent.

Mr Second Deputy Speaker: Very well. Hon Member for New Juaben South?

Mr Michael Baafi Okyere (NPP—New Juaben South): Mr Speaker, I think the proposal made by the Hon Majority Leader is something that we all

have to embrace and I guess nobody can confidently say that these noble men and women have no reputation. So, then we fully support the proposal made by the Hon Majority Leader and I call on the House to approve the Committee. Thanks so much for the opportunity.

Mr Second Deputy Speaker: I will take the last one from the Hon Member for Afadjato.

Mr Maxwell Kwame Lukutor (NDC— Afadjato South): Mr Speaker, I am exceedingly grateful and I think that the record speaks for itself. These are men and women of calibre, substance and timber. Their footprints are well-known and highly respected and with this, I wish to fully second the Motion. Thank you.

Mr Second Deputy Speaker: Thank you very much. Did you say substance and timber? Very good expression

Question put and Motion agreed to

Yes?

Osahen Afenyo-Markin: Mr Speaker, thank you for the opportunity. Further to a Statement made in respect of some actions at the residence of former Minister for Finance, Mr Ken Ofori-Atta, there were comments —

Mr Second Deputy Speaker: Respected Hon Minority Leader, are you coming under Order 93(1)?

Osahen Afenyo-Markin: That is so. Rightly so.

Mr Second Deputy Speaker: All right and I understand you have conferred with your Colleague.

Osahen Afenyo-Markin: That is so.

Mr Second Deputy Speaker: Very well, carry on.

2.12 p.m.

Osahen Afenyo-Markin: Mr Speaker, so again fortified by Order 93(1), I rise to bring to your attention that as a result of the issue I raised on the Floor which led to further comments and all that, I had given assurances to the House that in the interests of democracy and the rule of law, and to assure the nation that this Side of the House would do all it can to ensure that Mr Ken Ofori-Atta avails himself to attend upon the Special Prosecutor. Indeed, I pursued it. I engaged him extensively and today, his lawyers in a letter dated 18th February, 2025, have written to the Office of the Special Prosecutor (OSP) and for the avoidance of doubt, I shall read the contents aloud. It is addressed to the Special Prosecutor. It reads:

“RE: Direction to attend to the Office of Special Prosecutor.

We acknowledge receipt of your letter dated the 17th February, 2025. We respectfully indicate that our client's post-match date for his return cannot be any time before six to eight weeks after the possible surgical

intervention in March stated in the Mayo Clinic Letter.

Our client hopes that taking into account the surgery dated the 20th to 21st March and recuperation period, he should be able to get back to this jurisdiction between 14th May and 30th May, 2025.

We hope that you find this date reasonable and same can guide your office in fixing a date for the in-person attendance of our client to your office for investigation. Having clarified the purpose and length of our client's absence, we hope that the tag of a wanted person...”

Mr Second Deputy Speaker: Hold on, please. Yes, Majority Leader?

Mr Mahama Ayariga; Mr Speaker, what the Minority Leader is doing is conveying a communication from the lawyers of Mr Ofori-Atta to this House. The rules of this House are clear on communications. If one turns to Order 65, it is clear on communications to the House. Who qualifies to communicate to the House? Who qualifies to convey the communication to the House? They are clearly spelled out in Order 65. I think that what he is attempting to do is to convey a communication by the lawyers of Mr Ken Ofori-Atta to this House, which is clearly wrong.

Mr Speaker, it is clearly wrong to attempt to be the conveyor of communication from Mr Ken Ofori-Atta's lawyers to this House. I think that it is not acceptable and we cannot accept

communication from the lawyers of Mr Ken Ofori-Atta to this House. He is not a Member of this House neither is he a Minister of State. So, there is no basis for this House to receive communication from the lawyers of Mr Ken Ofori-Atta. We have not summoned him before any of our Committees, neither is he to appear before a Committee. We are not investigating him. So, on what basis is his lawyers communicating to us on when he would or would not come to Ghana.

Mr Speaker, there is no basis for the communication to this House on the whereabouts of Mr Ken Ofori-Atta. He is not qualified to convey that message to this House and this House cannot properly receive that message. So, I object to that communication being made to this House about the whereabouts of Mr Ofori-Atta and when he would come to Ghana. I think the matter is between him and the OSP; let him deal with them. This House is not interested in when he would or would not come. So, I object to this communication being made. He can step out and organise a press conference to tell the whole country what Mr Ofori-Atta is saying but not to this House. [*Hear! Hear!*]

Mr Speaker, our Orders are very clear and I object.

Mr Second Deputy Speaker: Well, I understand he conferred with you. Probably, the Majority Leader did not get to know the details. But that is the understanding.

Osahen Afenyo-Markin: Mr Speaker, I agree to the terms of his objection. I wanted to do what we call an elucidation. But when it comes to the jurisprudence of the House, I think he is a champion and I would not take his title away from him.

Mr Speaker, I believe that the gravamen of my submission is basically to say that, pursuant to the matters that I raised on the Floor—then indeed, again, I stood in the dispatch box to give assurance to the nation that I was engaging the man. So, I was basically informing this House again that indeed, the right thing has been done. The communication has been made and I only felt that I should at least bring to the fore the content of that.

Mr Speaker, I agree with him. I just want to rest my case by reiterating that further to my assurance, the gentleman would be in the jurisdiction in the appointed time as communicated to the Special Prosecutor for the in-person interview. However, he again assures his countrymen and women that should it be that they would need him via technology, he would also be available.

Mr Speaker, I say this because this matter came to the Floor and we discussed it at length. So, if the Majority Leader does not want me to tender in the letter, that is fine. I agree with him. I would not do that. But I will like to re-echo my point and assure the House and the Special Prosecutor that the man would come into the jurisdiction to avail himself for investigation and all other things that the Special Prosecutor may require of him.

Thank you very much.

Mr Second Deputy Speaker: Leader, I believe we could have done it in such a way that—

Osahen Afenyo-Markin: I only wanted— As lawyers, we would always be asked to lay a foundation. But it is all right. I am not litigating it; I would still address the matter. It is because I assured the House in the dispatch box. So, I will just end it.

Mr Second Deputy Speaker: Very well.

Mr Ayariga: Mr Speaker, just for our understanding of the practice, procedure and what we do in this House, if one refers to our Standing Orders, independent constitutional bodies are defined and it says that:

“Independent Constitutional Bodies include the Electoral Commission, Commission on Human Rights and Administrative Justice, National Commission for Civic Education, National Media Commission, Office of the Administrator of the District Assemblies Common Fund, Office of the Auditor-General, Bank of Ghana, and other bodies established to have exclusive jurisdiction in the performance of assigned functions.”

Just for our education, the Office of Special Prosecutor is established and conferred with exclusive jurisdiction to deal with certain assigned functions.

Then, when one comes to Order 121(1) and (2) of our Standing Orders, it says:

“(1) The Head of an Independent Constitutional Body may be summoned or granted audience at Committee of the Whole to brief the House on a matter of national importance. (2) The Head of an Independent Constitutional Body shall not participate in debate at plenary.”

So, there is a framework.

02.22 p.m.

If we really want this matter to come before this House, it can come by way of us summoning the Special Prosecutor to this House. Then we can ask him questions about the matter and where it has reached, and if we want to engage him, we can engage him at that level. So, I am not saying that nothing about it can happen, but there are procedures. That is why I am urging the Minority Leader that if he wants to really do that he should go through those laid-down procedures, but he does not have the capacity to convey communications to this House.

Mr Second Deputy Speaker: Very well. Hon Members, we learn each day. I think it is good that we are having this.

Yes, let me listen to the Hon Member for Madina.

Mr Francis-Xavier Kojo Sosu (NDC — Madina): Mr Speaker, I thank you very much.

I believe that as a matter of practice and procedure, once the Hon Minority Leader has accepted the objection in the terms that came from the Majority Leader, it would be appropriate that I would pray, Mr Speaker, to expunge from the records of Parliament and the *Hansard* the part of the letter that was earlier read. Actually, it is void *ab initio*. Mr Speaker, I pray that you would order that that part of the letter read be expunged from the record.

Mr Second Deputy Speaker: Hon Member, I was so magnanimous to have even extended the invitation to you. After the Leaders have spoken, I think that has been concluded, so the matter has been concluded. Let us move on to our Statement. *[Pause]*

Hon Minister, I beg of you; I will give you another time. Let me invite the Member for Ahanta West constituency. Hon Member for Ahanta West, are you ready to read your Statement? Are you not ready to read your Statement? All right, do you want to do that today?

Ms Mavis Kuukua Bissie: Mr Speaker, I was told tomorrow, but I can do it today.

[Pause]

Mr Second Deputy Speaker: Very well. I believe you have shared the Statement with your Colleagues, so that they will be able to contribute at the end of it.

Ms Bissie: Yes, some of my Colleagues have it.

Mr Second Deputy Speaker: Very well. The Minority Leader is confirming that he has shared it, so let us hear you.

STATEMENT

Addressing Sanitation Challenges, Homelessness and Slum Proliferation in Ghana: A Comprehensive Approach to Sustainable Outcomes

Ms Mavis Kuukua Bissie (NDC — Ahanta West): Mr Speaker, my Statement is addressing sanitation issues in Ghana and in my constituency. Mr Speaker, I am grateful for this opportunity to address this august House on a matter of utmost national significance.

Sanitation issues, homelessness, and the proliferation of slums remain critical challenges undermining the health, dignity, and economic potential of our citizens, particularly the youth. It is essential that we adopt a comprehensive approach to tackling these issues, utilising existing laws, formulating new ones, and engaging innovative strategies to develop sustainable solutions, while leveraging on same to create meaningful employment opportunities for our youth.

Mr Speaker, the state of sanitation in Ghana continues to be a source of grave concern. According to the 2021 population and housing census by the Ghana Statistical Service (GSS), only 51.4 per cent of urban households have their solid waste collected, leaving 48.6 per cent without access to such services. This lack of access often leads to improper waste disposal methods.

Additionally, 65.9 per cent of urban households have access to household toilet facilities, which means 34.1 per cent are deprived of this essential service.

It is worthy of note that approximately, 17.22 per cent of urban dwellers practise open defecation. In fact, a more recent survey by the Ghana Statistical Service of February 2024 puts the percentage at 25 per cent of households in Ghana practising open defecation. This situation is even dire in rural areas, where the lack of provision of safe sanitation facilities is more pronounced.

In 2017, the Government launched a national sanitation campaign through the Ministry of Sanitation and Water Resources to address the sanitation challenges of the country. Mr Speaker, Government-led initiatives such as this should ordinarily, translate into formidable achievements or outcomes. But cast your eyes around, and it is almost as if we never did anything at all. Despite the invaluable time and resources expended on this initiative, we continue to grapple with these same unsustainable, unproductive, and unhealthy situations of sanitation in the country. Perhaps it is a very good example of how not to tackle these issues of sanitation of a country.

It goes without saying that after 67 years of independence, one thing that profoundly highlights the urgent need for very rigorous efforts to improve waste management infrastructure and policies would be that, as at March 2023, only a

paltry 25 per cent households in Ghana have access to basic, safe sanitation infrastructure.

The recent cholera outbreak in Ghana has had a devastating impact, particularly in my constituency, Ahanta West. Between October and December 2024, 345 of my people were affected, and sadly, four lives were lost. Communities that depend on fishing, such as Adjoa, Funko, Amanfrom, Dixcove, and others, face significant challenges, including lack of waste management, limited access to clean drinking water, and inadequate public toilets. In towns like Agona Nkwanta, Abura, and Apowa, improper waste disposal is rampant, with refuse being dumped in areas like Damtsi, Miemia, and the Apowa Cemetery. This not only creates severe environmental risks, but also poses a serious threat to public health.

Unfortunately, despite the urgency of these issues, both duty-bearers and citizens alike seem nonchalant about it. These sanitation issues do not only impact negatively on our health and general well-being as a people; it also tarnishes our image internationally, hinders the growth of tourism in my constituency, as well as stifles the economic potential of Ahanta West.

Mr Speaker, I know that the Ministry of Sanitation and Water Resources has had some budgetary allocations over the years towards addressing the sanitation challenges of the nation. From the Ministry of Finance's Budget Statement 2020-2023, the Ministry was allocated GH¢360 million in 2020, GH¢362

million in 2021, GHC360 million in 2022, and GHC374 million in 2023, indicating a steady increase of funding.

Notwithstanding, our sanitation does not appear to be improving, highlighting the need for more targeted and effective utilisation of resources to achieve meaningful outcomes. Mr Speaker, any approach to solving sanitation challenges without carefully considering homelessness, “street-ism”, and slum proliferation will not succeed. I am afraid we cannot win the sanitation war until we purposefully and pragmatically begin to tackle homelessness, “street-ism”, and slum proliferation in the urban and peri-urban communities as a nation.

2.32 p.m.

It is not lost on us that inadequate housing across the country, economic hardship, unemployment, poverty, rapid rural-urban migration *et cetera*, have all contributed to the expansion of slums, homelessness and streetism, giving rise to improper and indiscriminate waste disposal practices and the poor sanitation situation we have on our hands. We cannot continue to downplay the severity of this challenge, seeing the very danger it poses to our survival as people. To effectively address these interconnected challenges, I propose the following measures.

One, national dialogue on rural urban migration and economic empowerment. There should be such government-led national dialogue once a year, involving all stakeholders, which includes civil society organisations, chiefs, clergy,

academia, business community, state institutions, members of public, *et cetera*. This dialogue would crystallise or help to bring to the fore the real causative factors of rural-urban migration and propose immediate practical and pragmatic solutions towards stemming it and promote economic empowerment in rural areas.

Two, deliberate housing and urbanisation strategy for rural communities. This strategy should see the provision of decent low-cost housing with basic social amenities on higher purchase for rural community dwellers.

Three, national drive on proper waste segregation and disposal. There must be a sustained roadblock, educational and enforcement campaign on proper waste segregation and disposal. This would immediately give a boost to and expand the waste recycling and collection industry, thereby creating job opportunities for our teeming unemployed youth and keeping our environment clean and healthy.

Four, public-private partnerships. Collaborate with the private sector to mobilise resource and expertise for large-scale sanitation infrastructure projects, ensuring efficiency and sustainability.

Five, strengthening enforcement of sanitation laws. District Assemblies and all relevant agencies must strictly enforce the existing sanitation laws and regulations and apply appropriate sanctions and penalties in the event of any violations.

Six, youth employment in sanitation services. Encourage the youth to consider the business opportunities inherent in the various branches of the sanitation management industry.

Seven, provision of labelled litter bins at designated areas and public spaces. This should serve as a clear signal of a new era where indiscriminate waste disposal shall not be countenanced.

In conclusion, Mr Speaker, addressing the sanitation challenge as occasioned by improper waste disposal practices, homelessness, streetism and slum proliferation, *et cetera*, obviously demands a coordinated and sustained effort by duty-bearers and public alike. With education, enforcement of existing laws, investing in infrastructure and economically empowering our youth, our people, wherever they are, we can achieve a cleaner, healthier and more prosperous Ghana. Let us commit to these measures and work together to transform our urban and rural landscapes for the betterment of all citizens.

2.42 p.m.

I thank you, Mr Speaker, for this opportunity. [*Hear! Hear!*]

Mr Second Deputy Speaker: Thank you very much.

From Ahanta to Kwesimintsim, so, you would be the first person to comment. I would come to you.

Mr Buckman —*rose*—

Mr Second Deputy Speaker: No, from Kwesimintsim, I would come to you.

Mr Boamah-Nyarko: Mr Speaker, it is Effia, not Kwesimintsim, so when he heard Kwesimintsim, he had to stand up. Please, sit down and let me—

Mr Second Deputy Speaker: Are you ready to comment? All right Let me deal with Effia; then I come to Kwesimintsim.

Mr Isaac Boamah-Nyarko (NPP — Effia): Thank you very much, Mr Speaker, for the opportunity to comment on the Statement ably made by my Sister from Ahanta West on sanitation and its situation and effects in this country.

Mr Speaker, the data regarding sanitation situation in Ghana is very alarming. From just about 25 per cent of our people having access to basic services to over 57 per cent of our population sharing public services, to the extent that almost 20 per cent of our population still go into open defecation in this country in 2025, is very worrying and alarming. The issue about our sanitation—We have had Ministries set up, Ministry of Sanitation and Water Resources, yet we have never been able to properly address the issue of sanitation in this country. When you take our water situation in Ghana, the adverse effect of *galamsey* has affected our water resources to the extent that even the ability of Ghana Water Company to treat water and make it affordable and accessible to Ghana is under threat.

Mr Speaker, I visited my Hon Sister's constituency this weekend. I had an invitation to Dixcove to participate in an inauguration of a reverend minister, and between Agona Nkwanta and Dixcove, I had this alarming situation where bushfires or burning of trash was ongoing at some areas. When you look at the electricity poles and the wires around where the bush was being burnt, I was very concerned because if there should be a fire outbreak along that stretch, you can imagine when Ghana National Fire Service (GNFS) would be called upon to get into that community and quench those fires. All of these are threats to our sanitation situation in this country.

Mr Speaker, I would wish that we take a serious look at some of the recommendations. I would like to add to some of the recommendations made by my Sister that we embark on education and raise awareness on the devastating effect of sanitation concerns in this country. Where does the waste that we make in this country go to? How well have we concerned ourselves in encouraging recycling of waste in this country? This morning, watching Cable News Network (CNN), one country—I missed that country, but they have been able to decompose or work on their waste management to the extent that the power that is generated out of it is able to power over 165,000 households. Yet in this country, we are generating a lot of waste, and there is no end to how well we are going to recycle the waste. So, I think we should be looking towards recycling of waste.

Mr Speaker, finally, the issue about open defecation, I think we need to have a national discourse, and I call upon the Minister for Works, Housing and Water Resources to come to this House with appropriate policy direction on how to end open defecation in this country because it is very bad, and it is un-Ghanaian, and we should be able to bring solutions to some of these matters.

Mr Speaker, without more, I want to commend my Hon Lady from Ahanta West for this issue that has been brought to the floor of the House, and I think that we all, as Members of Parliament, should speak and make sure that the sanitation situation improves in this country.

Thank you very much, Mr Speaker.

Mr Second Deputy Speaker: Thank you.

I promised to call the Hon Member from Kwesimintsim, so let me hear you Hon Member.

Mr Fiifi Philip Buckman (NDC — Kwesimintsim): Mr Speaker, I am very grateful for the opportunity. First, I would want to humbly commend my Hon Sister for making the Statement.

Mr Speaker, respectfully, I would want to add to the recommendations made, especially, reiterating the point on education. I have always believed that if we are able to educate ourselves, especially if sanitation education is carried out in schools, we would be able to have that idea imbued in the minds of the children.

Mr Speaker, you can see that in our culture or tradition, children believe that anything that is not good should be thrown into the gutter. We do not segregate it: that waste water should go into the gutter and solid ones should go somewhere. We put all together. If it is not good, it should be put in the gutter. So, if we educate and indoctrinate ourselves—Because health is everything, and sanitation is the basis for improving the health of the people.

Mr Speaker, I had the opportunity to meet with the heads of the various departments in my constituency, Kwesimintsim, yesterday to prepare ourselves for the upcoming rains. It would baffle you that whatever came out from the engineers was about choked gutters, which needed to be desilted. Huge sums of money would have to be used in desilting those gutters.

2.52p.m.

Mr Speaker, I am of the humble view that there should also be that symbiotic relationship between the chiefs, assemblies, assemblymen, and the youth leaders of the various communities to tell themselves that they would live in a community that is free of filth.

We are going to live in a community that is free of filth. I am happy that my sister dovetailed the fact about people walking around. Any person who loiters litters; those who loiter litter. So, we should be able to curb that, especially, providing the opportunity for our youth who live in slums, providing jobs for them, even using them to solve the same

sanitation problem while we pay them. We should try as much as possible to make them see that if we put ourselves in that situation of helping solve the problem of sanitation, we would live a healthy life.

Also, I would humbly suggest that Government should be able—And I am happy that the NDC had the youth manifesto where many things were outlined including, using sanitation to employ many youths. I would just implore the Minister over there to ensure that whatever was written in that manifesto is carried out for the betterment of ourselves, to ensure that we live in a healthy environment and also use it to provide job avenues for the youth.

Thank you, Mr Speaker, for the opportunity.

Mr Second Deputy Speaker: Thank you very much. Hon Members, let us try to be brief so that we could get other Members to also contribute.

Yes, Hon Member for Offinso North.

Dr Fred Kyei Asamoah (NPP — Offinso North): Hon Speaker, thank you very much for the opportunity and also to appreciate the maker of the Statement regarding sanitation. Mr Speaker, if you come to my Constituency, Offinso North, it has grown to the extent that the major towns in Offinso North; Afrancho, Akumadan, and Nkenkaasu had majority of their refuse dumping place located at the centre of the main towns.

Mr Speaker, when it rains, it is an eyesore. I think it is high time we created more jobs by relocating this refuse dump to a far place. Of course, in addition, we can turn this waste into energy generation. So, as we are thanking the maker of the Statement, we believe that the Ministry of Local Government, Chieftaincy and Religious Affairs in collaboration with the Ministry for Works and Housing can come out with a strategy and a plan so that we can make sure that all these major refuse dumping places are not seen within the main towns where, when it rains, it tends to choke all the gutters and leads to other issues.

In addition, as we are talking about sanitation, one major issue that tends to cause more disease is health waste management. With health waste, one can look at both infectious waste and non-infectious waste. Many times, how do we see our hospitals and our healthcare facilities managing this waste? If not properly managed, it tends to cause more diseases than we expect. So, as we are looking at sanitation issues, we should not only consider what is happening within our communities, which we know is a major problem, but in addition, we should have a critical look at health waste management which has led to a lot of diseases across the country.

Thank you, Mr Speaker.

Mr Second Deputy Speaker: Very well. Let me give the floor to the Hon Member for Salaga South.

Ms Zuwera Mohammed Ibrahimah (NDC — Salaga South): Thank you

very much, Mr Speaker. Let me start by commending my Hon Colleague for such a deep Statement. It is all-encompassing. She touched on almost everything that relates to the main subject matter of sanitation, and I think that she deserves to be highly commended.

Mr Speaker, in the Chamber this morning, we started with sanitation, the environment and health, thanks to a Statement by the Hon Minority Leader which necessitated the presence of the Hon Minister for Health to throw some light on the current outbreak of cholera and meningitis in the country. In every single contribution, we touched on the issue of the environment and sanitation. So, we could as well maybe declare today the day of sanitation in the Parliament of Ghana.

Mr Speaker, sanitation becomes the center stage of our very livelihoods. We cannot continue as a human race without paying attention to our environment and sanitation. I have heard speaker over speaker reiterate the importance of education and how the society must be educated on managing sanitation, waste disposal, and their attendant challenges. But Mr Speaker, one thing I have not heard is that it all starts with us. No one can educate us better than our own environment. The home where you and I are parents, where you and I are guardians, must be the starting point of this education and orientation towards proper hygienic and sanitation practices. Mr Speaker, I say this because hand washing is something that should just come to us naturally, depending on how we were taught to do it at home. No

teacher can force us to wash our hands because how long do we stay in the schools? All of us spend more time at home than anywhere else. So, if we start at home and we teach our children proper hygienic practices, as parents, as adults in the house, if we undertake proper waste disposal, that becomes the experience of the children and that is how the children will live their lives.

Mr Speaker, I insist that it starts with us. In this Parliament, Mr Speaker, our washrooms are areas that we should be paying attention to before we can go and tell anyone else how to manage hygiene and sanitation in their various places. In our washrooms, it is either the sinks are broken or sometimes when you go there beyond 4:00 p.m., the water will not be flowing. I have had occasion to buy water from the canteen to go and wash my hands. Sometimes there is no soap.

This is where it starts and this is where we then have the authority to tell the Minister for Health, the Minister for Environment, Science and Technology, and the Minister for Works, Housing and Water Resources that this is how we grow a society in an effort to keep everybody well, first of all; and secondly to reduce the health bill.

So, Mr Speaker, I want to charge all of us in this room that we make it a priority to ensure that we practise good hygiene from here, pass it on to our children and dependents and the multiplying effect is the larger society out there.

Mr Speaker, the rains are coming and already in my Constituency of Salaga South, there is no water. Now, without running water, without potable water, how do you insist that people must wash their hands? Open gutters have become the place where refuse and waste are dumped, especially when it starts to rain. As soon as it starts to rain, everybody brings the waste from their homes and dumps them into the gutter. So, no matter the number of times you desilt the gutter, the gutter will always be choked. Mr Speaker, once again, it starts from us.

Thank you very much for the opportunity.

Mr Second Deputy Speaker: Thank you very much. Yes, it is now the turn of the Member of Parliament for Akwatia.

Mr Ernest Kumi (NPP — Akwatia): Thank you, Mr Speaker. The issue of addressing sanitation in this country is one that requires a comprehensive approach which involves the Government, Non-Governmental Organisations (NGOs), the communities themselves, and companies.

Mr Speaker, we have been talking about reducing open defecation in certain communities, but a question that mostly we need to avert our minds to is that whether there has been access to these sanitation facilities that people are refusing to use them. So, one major issue that we need to address is to increase access to sanitation and toilet facilities. By increasing access to sanitation and toilet facilities, basically, we would end up reducing this open defecation. So, this

is where we urge NGOs, companies and other organisations to augment what Government is doing or what successive governments have done in the past for us to be able to eliminate this entirely.

Mr Speaker, solid waste disposal or management has also been a problem to us in this country. Throughout my campaign in Akwatia Constituency, there are certain communities that their basic request to me throughout the campaign was for me to provide the containers for disposal of waste. So, the problem is the people actually want to do the right thing but even where to put their waste is a problem to them. So, even when the containers are not available for them to dispose their waste, what do we expect them to do? So, various entities and assemblies and organisations that are responsible for providing these container bins for disposal must also be up to their task and make sure that these containers are available in their communities to access.

3.02 p.m.

Increasingly, we are losing our communal sense as well; we are becoming too individualistic in this country. So, most of the time, people are concerned with what happens and what they can actually afford. When we come to where I live, we have challenges as well, but because maybe I can afford to pay *abobo yaa* riders and other people that randomly come out to pick my bin, I, as well as most of the people in my community, are not much concerned about what is happening to the others. This is where I urge all of us to be very

communal-minded so that increasingly, we speak to ourselves, and urge ourselves to help in organising such communal labours to eliminate such waste issues that confront us in our communities. Thank you, Mr Speaker.

Mr Second Deputy Speaker: Thank you very much.

Yes, is this your maiden statement? Yeah, let me hear you. I want to encourage those people.

Mr Nikyema Billa Alamzy (NDC — Chiana-Paga): Thank you, Mr Speaker. This is my maiden statement that I am going to make. I am very grateful to you and I would not forget this day because this is going to be the first time I am clearing my throat in Parliament.

I want to commend the maker of the Statement. She talked about sanitation and we all know sanitation is very important because it is about everyday life. What I can say is that when we are talking about sanitation, the major role we play is the disposal of urine and faeces. This morning has been about cholera. We can give different definitions of cholera. Different scholars might have different definitions but the simple truth is that cholera means one is eating someone's faeces. That is the plain truth. Today, one is eating somebody's faeces by either taking in water or eating food that contains the cholera bacteria. That is how one contracts it. We all understand the pain one goes through when one contracts cholera and the way it can cause life-threatening watery diarrhoea and vomiting. But the question

is, are we educating our people enough? The education that we are giving, is it adequate? That is the question. Are we telling our people that we can prevent it in a way? That is a question we are yet to answer.

But I can tell the House that educating our people on drinking more water and safe water, of course, can prevent cholera. Taking in either boiled water, filtered water, or natural mineral water, which goes through reverse osmosis, can prevent cholera drastically. What I would add is, how do we go to toilet in Ghana? Is it all of us that have access to proper toilet facilities? No. How do we get rid of our poop? That is a problem. So, education must go on very well so that we can do away with cholera, just like we have been talking about it since morning. But I would add that waste management is the way to go. Either personal hygiene or community hygiene. And I want to say—I do not know how many might feel, but the two parties are all guilty of it—is that we do not try to decentralise our waste management system. We have a single company in Ghana managing every district's waste. That is a problem.

So, I will advise and plead with the House to look into it and try to decentralise it so that we can have companies in the districts that will be managing the districts' waste. It will be better than centralising it for one company to manage it in Ghana.

Mr Speaker, I once again want to say thank you very much for giving me this

opportunity to clear my throat and I will always be grateful for it.

Mr Second Deputy Speaker: Thank you very much. Hon Members, we will take another Statement. We have two more Statements to take. Do not worry.

Hajia Laadi Ayii Ayamba — *rose*—

Mr Second Deputy Speaker: You have spoken this morning.

Hajia Ayamba: Mr Speaker, thank you for your understanding. And congratulations to all those who were praying for me, but it is not bye-bye yet because I have not finished. Let me also congratulate the lady. The issue of sanitation has long been discussed. Year in, year out, we continuously talk about it. We have had talks on having cleaner cities and cleaner towns. That has not happened but we still hope for the best.

When it comes to items or things that cause much disaster, Mr Speaker, we need to be looking at the plastics that are being used; it is an eyesore. When one goes to our beaches and look at the way the sea continuously brings back the plastics, it is a shame and yet we continue to throw plastics in it. We need to also make efforts to ensure that even where plastics, bottles and papers are gathered, there should be separation.

Mr Speaker, in this country, we have someone who is supposed to be taking care of our sanitation problems in all the districts with loads of moneys being paid directly to that company and yet we see very little. I think we need to re-look at

that issue. But let me come to homelessness. When one goes out there, I do not know, but I think we have so much to do and I would plead with the Ministry for Gender, Children and Social Protection to look into that issue; the children are so many. Even if they are not Ghanaians, let us find a way of handling the issue of homelessness and those that are Ghanaians, let us also try to find a way of finding their relatives. Mr Speaker, not only that, some of them that have got mental problems and they need to be supported. Please, now, we hear about fire outbreaks in the slums and when we get there, because it is a slum, there are so many kiosks that are burnt. Can we look at that issue and ensure that even if there is an issue of fire outbreak and our fire service people go there to support, they are able to put off fire because it is becoming too much.

Mr Speaker, I think that you have done me a favour. I am grateful and then I will congratulate, especially, my Brothers and Sisters on the other Side who always want to hear from me, bye-bye.

Mr Second Deputy Speaker: Well, please, I will give you the opportunity to comment on other statements. Let me invite Hon Member for Asene/Akroso/Manso, Constituency, Hon George Kwame Aboagye, to also make his Statement.

Mr Aboagye: Mr Speaker, please, it is Asene/Akroso/Manso.

Mr Second Deputy Speaker: Is it one town?

Mr Aboagye: No, Asene is one town, Akroso is another town.

Mr Second Deputy Speaker: All right, then it should be Asene, Akroso, Manso.

STATEMENT

Electric Cooking and Promoting Clean Cooking Solutions in Ghana

Mr George Kwame Aboagye (NPP — Asene/Akroso/Manso): Mr Speaker, I rise to make a Statement on electric cooking and promoting clean cooking solutions in Ghana.

Mr Speaker, energy drives all human activities, and world leaders have committed to sustainable clean energy for all. The use of electric appliances, also referred to as e-cooking devices presents a practical sustainable solution for achieving universal access to clean cooking facilities by 2030.

3.12 p.m.

Over 3.8 million people, most of which are women and children, die prematurely in a year from illnesses attributed to the household energy pollution caused by the inefficient use of solid fuels and kerosene for cooking. Though there have been numerous advancements and progressive developments in e-cooking, the concept is yet to gain widespread popularity in Ghana. As per Boateng et al (2023), and Sarpong et al (2020), a meagre proportion of the population of Ghana, thus less than 2 per cent, employ e-cooking.

Mr Speaker, the International Energy Agency (IEA) reports that 2.6 billion individuals depend on solid biomass for their cooking needs despite its severe health consequences. Approximately, 87 per cent of households in Ghana still rely on solid fuels, such as biomass, as their primary cooking fuel. This exposes them to smoke and open fires. Smoke produced from indoor biomass cooking has been linked to acute respiratory illness, cataracts, heart disease and cancer, according to Ahmad et al., 2022; Balmes, 2015; and Leary et al., 2019. Exposure to smoke impacts over 20 million people, leading to over 4700 fatalities in children and more than 6,500 deaths each year. It also contributes to forest degradation, climate change, and biodiversity loss (Bouniol et al., 2023; Guizar-Coutino et al., 2022).

Mr Speaker, e-cooking is a sustainable alternative for housing, and has the potential to address the issues associated with unclean fuel alternatives (Atela et al., 2021). According to research, electric cooking methods can be financially efficient and have positive impact on humans and the environment (C. Zhang et al. 2021).

When compared to wood-based cooking, it is evident that e-cooking equipment has a relatively low marginal cost of energy. E-cookers also offer higher efficiency and reduced energy expenditures (Batchelor 2020). Clean cooking has a positive impact on the climate, and Ghana's forests will be safeguard from further degradation and reduce black carbon emissions contributing to global climate change goals.

Reducing indoor air pollution could prevent millions of premature deaths, particularly among women and children, and this will improve health massively.

Mr Speaker, the advancement of e-cooking in Ghana is largely the responsibility of the Government in order to meet global objective of clean cooking by 2030. Several measures should be taken into consideration by the Government and policymakers to achieve this goal. They depend on shifting governance patterns, building new coalitions, public private actors, and integrating cooking into energy planning to accelerate e-cooking.

Incentives: Offering tax credits and subsidies could lower the cost of e-cooking appliances for households, while also encouraging sustainable value for suppliers.

Enhancing accessibility: Improving accessibility to e-cooking in remote areas through off-grid solar power systems. Photovoltaic (PV) technologies are experiencing a significant decrease in cost, and can serve as a dual strategy to enhance the rate of rural electrification and increase the share of renewable energy within the generation mix.

Research and Development: Enhance the research and development of PV-based stoves to expedite their adoption and utilisation.

Public Awareness: Promotes demand and supply channels by raising awareness through various channels, including educative programs and public

campaigns. This will help individuals to make informed decisions about their cooking practices.

On-bill Finance and Pay as You Go (PAYG) Models: Provide on-bill financing mechanisms that enable electricity service providers to sell appliances on credit to their existing customers. Alternatively, appliances with locking mechanisms can be implemented for PAYG business models to reach lower-income consumers.

Initiate small-scale renewable energy projects in Ghana, which can consist of solar and wind power generation, battery storage, and distribution systems.

Mr Speaker, in conclusion, e-cooking has the potential to significantly improve public health, reduce environmental degradation, and stimulate economic growth in Ghana. However, to achieve widespread adoption, it is essential to address challenges such as affordability, infrastructure and cultural practices. With the right government policies, financial mechanisms and public awareness efforts, e-cooking can be an effective solution to the cooking needs of the country and help to achieve the global goal of universal access to clean cooking by 2030.

Mr Second Deputy Speaker: Thank you very much Hon Member for Asene/Akroso/Manso

Hon Members, the Statement on e-cooking and promoting clean cooking solutions has been read, so I will now invite comments.

Yes, Hon Member for Oforikrom?

Mr Micheal Kwasi Aidoo (NPP — Oforikrom): Mr Speaker, I would want to take this opportunity to comment on the Statement ably made by the Hon Member.

E-cooking is an important field that we should look at today, as we all embrace the Sustainable Development Goals (SDGs), especially SDG 7, which is on affordable and clean energy. Quite interestingly, we have made inroads in supporting our rural areas to embrace e-cooking by providing access to cleaner energy, but we have not been able to develop as fast as we can because of cost.

When I talk about cost, I am talking about the cost of Liquefied Petroleum Gas (LPG). This is because there is little infrastructure; we have not developed so much infrastructure in LPG. Apart from this, we import almost all our LPG, about 90 per cent of our LPG, into the country, and there are factors such as forex that affects the price of LPG on our market. Based on this, it limits the patronage of LPG within our rural areas and it has then limited it to just the urban cities.

As urbanisation continues, what happens is that people who have higher incomes tend to use e-cooking and clean energies, but those in the rural areas are still limited to using biomass, like wood and other things, to cook. It is alarming that in Ghana, we still have about 80 per cent of our population using biomass. I believe if we support the cylinder recirculation module very well, where people will have access to LPG in our

rural areas, this will support the quest for e-cooking.

Mr Speaker, I will also reiterate that the Ministry of Energy, which has become the Ministry of Energy and Green Transitions today, will support this cause by helping the private sector to be able to invest more infrastructure in providing affordable LPG for rural areas. Apart from that the Ministry should also put in place policies that will help to bring down the cost of pricing for our various energies within the country.

Mr Speaker, thank you very much.

Mr Kwame Twumasi Ampofo (NDC— Sene West): Mr Speaker, I thank you, and I would also like to thank the maker of the Statement.

3.22 p.m.

Mr Speaker, like the maker of the Statement has said, for instance, if somebody is cooking with a bag of charcoal for about a week or a month and somebody is able to invent a coal pot that is able to help one use the same amount of charcoal to cook for about six months— It means that gradually we are—Instead of having to cut down and burn a lot of trees to get one bag of charcoal to be used in a month, we would not depend on that this time around, but are rather use it for six months. This is what we call energy transition. Gradually, when we pay attention to some of these things, we believe that the country would make a lot of exchanges and money when it comes to carbon credit.

When we want to talk of these green gases, we have to also ensure that all the Ministries responsible for some of these things come together to work. As it stands now, we have the Ministry of Environment, Science, Technology and Innovation, which is a key stakeholder in making these things when it comes to carbon credit. When we look at the Ministry of Energy and Green Transition and the Ministry of Environment, Science, Technology and Innovation, all these ministries come together—

We believe that when we get a few of these sections of the policy or of people to work within the Ministries, it will also become very easy for people who have had knowledge in trying to transfer and help us transition gradually to the electronic cooking. I think it will help us as a country.

Mr Speaker, I am grateful for this opportunity and to thank the Hon Member as well for the making this Statement.

Mr Second Deputy Speaker: Do we bring the making of Statements to a close?

Mr Jerry Ahmed Shaib — rose —

Mr Second Deputy Speaker: Does Leadership want to contribute?

Mr Shaib: Mr Speaker, it is not about my contribution but my Statement which has been admitted. It is the one on footbridges.

Mr Second Deputy Speaker: The one on footbridges?

Mr Shaib: It has actually been loaded on the system.

Mr Second Deputy Speaker: I do not have it here.

Mr Shaib: Mr Speaker, I can share my copy with you.

Mr Second Deputy Speaker: So, let us hear you.

STATEMENT

The Inefficient Use of Pedestrian Footbridges and its Impact on Road Users in Ghana

Second Deputy Minority Whip (Mr Jerry Ahmed Shaib) (NPP — Weija-Gbawe): Mr Speaker, thank you very much.

Mr Speaker, this is a Statement written by me on the impact of pedestrian footbridges and its impact on road safety and failure of road users in effectively utilising pedestrian footbridges in Ghana.

Mr Speaker, with your permission, I rise to address a critical issue that continues to affect road safety in our beloved nation, Ghana, particularly in our urban areas. This issue concerns the provision of pedestrian footbridges, their impact on road safety and the unfortunate failure of some members of the public to make use of this vital infrastructural element.

Mr Speaker, pedestrian footbridges were introduced in Ghana as part of the

government's efforts to ensure the safety of pedestrians, particularly in high-traffic areas. These footbridges serve as safe passageways over busy roads, protecting pedestrians from the dangers of crossing busy highways where vehicles travel at high speeds.

Mr Speaker, despite the significant investments made in the construction of these footbridges, we continue to witness a disturbing trend where pedestrians often, for reasons of convenience or impatience, fail to utilise these bridges. This failure to use footbridges not only jeopardizes the safety of individuals but also results in the loss of lives and serious injuries. It is an undeniable fact that Ghana, like many other nations, continues to grapple with alarming statistics regarding pedestrian accidents and this is directly linked to the failure of some citizens to utilise the footbridges provided for their safety.

Mr Speaker, the implications for road safety are dire. Accidents involving pedestrians who attempt to cross the roads at non-designated points often result in fatalities. It is particularly worrying that many of these incidents could have been avoided if pedestrians simply adhered to the safer option of using the footbridges. While government has made significant strides in providing pedestrian footbridges, such as the ones located in major cities like Accra, Kumasi, and Takoradi, the issue of non-compliance continues to undermine the intended safety benefits of these structures. We are very much aware of the notorious ones especially in Kaneshie and Madina.

Mr Speaker, public education campaigns are crucial to changing this behaviour, but it is also important that we look into enforcing the use of these footbridges through more effective means.

Mr Speaker, I propose that we adopt a multi-pronged approach together with the Ministry of Roads and Highways, the National Road Safety Authority, and the Motor Traffic and Transport Directorate of the Ghana Police Service to tackle this issue:

First of all, we need to consider public awareness campaigns. We need to step up public education efforts through mass media, community outreach, and educational programmes in schools. Pedestrians must be made aware of the dangers of jaywalking and the importance of using footbridges for their own safety.

The second is enforcement of road safety regulations. It is critical that we implement stronger enforcement of traffic laws, particularly those related to pedestrian safety. This can include the use of fines for pedestrians who fail to use footbridges and for drivers who disregard pedestrian safety.

The third one is on design and accessibility improvements. We must also ensure that the footbridges are designed and constructed in ways that are accessible to all, including the elderly, persons with disabilities, and children. Adequate lighting and signage should be placed around these structures to encourage their use, especially during

the night. We are also very aware that these footbridges have become extensions of markets.

Mr Speaker, my final recommendation is that we also need a collaboration with traffic authorities. We must work closely with the Ghana Police Service and the National Road Safety Authority to monitor pedestrian behaviour and ensure compliance. Traffic wardens or officers under the Youth Employment Agency (YEA) and Community Police Assistants should be stationed in high-risk areas to guide and educate pedestrians, particularly during peak hours.

Mr Speaker, we must remember that road safety is a shared responsibility. While the government continues to invest in infrastructure, it is equally important that we all take responsibility for our actions. The failure of pedestrians to use footbridges is not just an individual issue, but a societal one that impacts the well-being of all Ghanaians.

I humbly call on the Minister for Roads and Highways to take a critical look at the ongoing footbridge construction in Tetegu, a town in my Constituency, Weija-Gbawe, to see to its completion and commission for use by pedestrians. The emphasis is again on the words, “unused by pedestrians”. Because we have often times seen pedestrians running across highways without even looking either to their left or right before they do so.

Mr Speaker, we pray that we work together as government, road safety authorities and citizens to ensure that

these footbridges, which were designed for our safety, serve their intended purpose. It is only through collective effort that we can reduce the number of avoidable pedestrian accidents and fatalities on our roads. Let us save lives and save everyone. Let us have safety roads and environment.

Mr Speaker, I thank you, for letting me make this Statement.

Mr Second Deputy Speaker: Thank you very much.

Hon Asenso Boakye, let me begin with you. You are the immediate past Minister for Road and Highways.

Mr Francis Asenso-Boakye (NPP — Bantama): Mr Speaker, thank you.

Mr Speaker, I rise to commend the maker of the Statement, Mr Jerry Ahmed Shaib for these insightful points regarding the issue of footbridges and their impact on road safety in the country.

3.32 p.m.

Mr Speaker, as a former Minister for Roads and Highways, and also a planner, I am acutely aware of the challenges that we face regarding the use of footbridges and pedestrian safety in our country. In fact, pedestrian fatality is one of the main issues associated with road accidents and road deaths in our country. In fact, studies indicate that over 40 per cent of road accidents are associated with pedestrians. It is for this reason that the successive governments, especially the

last Administration, and the Ministry of Roads and Highways, emphasised that construction of footbridges become an integral part of the major highways, especially the trunk roads linking major cities in high-volume areas.

Mr Speaker, if you would recall, currently, the Accra-Tema Motorway reconstruction has lots of footbridges as part of the design. On the Kasoa–Winneba Road, there are lots of footbridges. The Adenta–Dodowa, Anwia Nkwanta–Ahenema Kokoben roads are part of many of these trunk roads that are being constructed.

Mr Speaker, just as the maker of the Statement mentioned, the effectiveness of these footbridges and structures are hugely undermined because pedestrians decide not to use these footbridges. Studies have indicated that many pedestrians do not find these footbridges convenient, and as a result, they decide not to use them.

Also, the length of some of the footbridges are too much for them, especially the steepness; therefore, they find a way of avoiding it. Many of these footbridges do not also have lights and security measures. In fact, there are reports of criminal activities along these footbridges; therefore, pedestrians do not find it attractive to patronise and use them.

Mr Speaker, the maker of the Statement went ahead to put across important measures to address these challenges. Among them, of course, is the public education by the National

Road Safety Authority, which is important, and also, making sure that the police enforce all laws associated with road safety and the use of these footbridges.

There is one thing that he mentioned, but I dwell on the issue of design, which I will call design optimisation. It is important that we make these footbridges user-friendly, create shorter access points, and also make provision for people with disabilities. When we make it friendly, then it would be attractive for people to use. I also want to re-echo the point made by the maker of the Statement regarding the footbridge at Tetegu. I worked on it when I was a Minister, and I know it is important, but the new Administration should work hard to expedite the process of completion. Indeed, the Government must make sure that it completes all these footbridges that were started by the previous Administration, so that they can ensure enhanced pedestrian safety.

Mr Speaker, in conclusion, I would like to say that while infrastructure development is essential, its success largely depends on public cooperation and adherence to safety measures. Let us all help in protecting the lives of citizens by making sure that we have enhanced safety measures on our roads.

With these few remarks, Mr Speaker, I want to, once again, thank the maker of the Statement.

Mr Second Deputy Speaker: Thank you very much.

Yes, Hon Member for Binduri?

Mr Mahmoud Issifu (NDC — Binduri): Thank you very much, Mr Speaker, for giving me this opportunity. Let me first and foremost thank my Hon Colleague for bringing this important Statement to this Floor.

Mr Speaker, you would realise that before successive governments would construct a footbridge in any part of our road, there would be that understanding that several people have lost their lives on that part of the road. After the construction of the footbridge, governments will also construct either a strong wall or, in some cases, a kind of wired mesh to support or to protect pedestrians, and to that extent, encourage road users or pedestrians to make good use of the footbridge.

Notwithstanding all this, pedestrians would ignore it and either jump across the walls or find ways and means to cut off the mesh or whatever is put there to prevent them from using the footbridge and still walk across the road at their own peril.

Mr Speaker, the maker of this Statement spoke about jaywalking. It will interest you to note that both our Road Traffic Act, 2004 (Act 283) and Legislative Instrument (L. I.) 2180 have made it an offence for jaywalking. It appears that our law enforcement agencies do not pay attention to this. If a person slaps somebody, he or she is likely to be detained in police custody or find himself or herself before a law court the next moment. However, this law on

jaywalking is very clear and punishable, but if one would care to know, I do not think that, from the time this honourable House made engaging in jaywalking on any part of our street an offence, any person has ever been prosecuted to that effect.

My emphasis on this Statement is that the best way that we can achieve so much, as far as the prevention of deaths on our roads is concerned, is to educate the public and make sure that our security agencies begin to enforce this aspect of our law, that is jaywalking. This can be done by making sure that people are taken to court, and where possible, this House can review the punishment on jaywalking and make it a bit minimal, so that, at least, the more they are able to continuously take them to the law courts and ensure that they are fined, the more it would go a long way to encourage people to use the footbridges. This would then reduce the level of carnage, as far as pedestrians are concerned, on our streets.

Mr Speaker, thank you very much for giving me the opportunity to add my voice as far as this subject matter is concerned.

Mr Second Deputy Speaker: Yes, let me go to the Minority Side.

Hon Member for Suhum?

Mr Frank Asiedu Bekoe (NPP — Suhum): Thank you, Mr Speaker, for the opportunity, and I thank the maker of the Statement for bringing this jaywalking menace to the fore.

Mr Speaker, in fact, I use the Adenta–Legon Road every day, and it is so sickening.

3.42 p.m.

I remember when these footbridges were not there, citizens from Shiashie, Madina and Adenta organised countless demonstrations that they needed the footbridges. So, it forced Government to construct these footbridges. Now, these footbridges have been constructed and pedestrians still go back to their old ways. I think that apart from employing education and the security agencies in checking this attitude, our engineers should also look at a way to redesign the footbridges so that certain structures that would prevent pedestrians from jaywalking can be incorporated in the bridges so this jaywalking can be prevented.

I thank you for the opportunity, Mr Speaker.

Mr Second Deputy Speaker: Have you spoken before?

Let me give you the opportunity.

Mr Sedem Kweku Afenyo (NDC — Amasaman): Mr Speaker, thank you very much. Let me take this opportunity to thank the maker of the Statement. The issue of footbridge when it comes to my Constituency is a major problem. The road construction between Ofankor to Nsawam has a lot of footbridges that are supposed to be constructed. But since December, it looks as if the contractor has abandoned the construction works on

that road. There are children who live on one side of the road who happen to attend school on the other side of the road. It has become very difficult. Early in the morning, you see children trying to scale the concrete walls that have been built to divide the road to try and get to school.

Mr Second Deputy Speaker: Are you the Hon Member of Parliament for Amasaman?

Mr Afenyo: Yes, please.

Mr Second Deputy Speaker: All right.

Mr Afenyo: Mr Speaker, this is a plea to the sector Minister to try and get in touch with the road contractor who is in charge of the construction of Ofankor-Nsawam road to speed up the work. When it rains, the condition on that road is so bad. And when there is no rain, the issue of dust is a problem. So, we would plead with the sector Minister to try and see this matter as an urgent matter so the contractor can get back on the road and get this thing taken care of.

Thank you very much, Mr Speaker, for the opportunity.

Mr Second Deputy Speaker: Very well. So, you used the Statement to call on the Hon Minister.

Yes, Hon Member for Tafo?

Mr Vincent Ekow Assafuah (NPP — Old Tafo): Thank you very much, Mr Speaker. Let me congratulate my

brother, the Hon Ahmed, for this wonderful Statement on this Floor.

First and foremost, Mr Speaker, let me indicate that there is a legal underpinning as far as the footbridges are concerned and how they are supposed to be used, whether there are also punitive measures, and what have you. If you check the Road Traffic Regulations 2012, (L.I. 2180), it makes it mandatory for pedestrians to use footbridges that have been provided at designated sections of highways to prevent road crashes.

Mr Speaker, it is interesting to note that when one checks the same L.I. 154 (10), it also indicates that failure to use these footbridges amounts to an offense and one is supposed to be punished for that. Until recently, I used to use the Lapaz main road very well. Mr Speaker, the disregard that pedestrians give to some of these rules as far as the footbridges are concerned, is an eyesore. My brother, the Hon Jerry Ahmed, mentioned about four things that we can do to make sure that we can deal with this challenge.

One thing that I want to add is that this challenge would have to be dealt with by the various municipal and district assemblies. They are supposed to be capacitated. They are supposed to take optimum interest in dealing with some of these issues, especially because when there are accidents, normally, the people who have their properties and other things being destroyed are people living in their own communities, people living in their own districts and their municipalities. And so, if the district

assemblies and the municipals do not take keen interest in how some of this public awareness will have to be done, for them to know that failure to obey these laws under the Road Safety Authority can lead to an offence that may be punishable, whether by imprisonment or a fine—In the absence of that, I do not see how we are going to deal with this issue. And so, I am adding to the points that were made by the Hon Jerry Ahmed that the municipal and district assemblies should take keen interest in dealing with this menace.

Mr Speaker, one key thing that I may also want to mention is with respect to design and accessibility improvement. The way these footbridges, or if you like, highways have been designed and constructed in ways that are accessible to all, especially to people who are disabled, is also very key. Because if one checks the one at Lapaz, clearly it is not friendly to persons with disability. So, it becomes very difficult for persons who are living with disability to be able to climb some of these footbridges.

And so, Mr Speaker, without adding much, I want to send a strong signal to the municipal assemblies to take keen interest in dealing with footbridges and the challenges that come with them.

Thank you so much for the opportunity granted me.

Mr Second Deputy Speaker: Obviously, I would give it to the lady—Prof Ayensu-Danquah.

Prof Grace Ayensu-Danquah (NDC — Essikado-Ketan): Mr Speaker, thank you for allowing me to make a comment on this Statement on footbridges.

First, I would like to commend the maker of the Statement in bringing up this very important topic. Mr Speaker, when you look at footbridges in Ghana, I think that we need to do public education on jaywalking. But the real issue, I believe, is the design of the footbridges. Oftentimes, the footbridges are not in the right place. They are not in the area where there is heavy traffic. Secondly, they are too complicated. When one looks at the Madina-Adenta footbridge, it is almost as if—

Mr Second Deputy Speaker: Hold on. Are you speaking from your own experience or from the way the public is speaking? Mind you, these are done by experts.

Prof Ayensu-Danquah: Mr Speaker, I believe I am calling on experts to re-look at the design. I am also calling on experts to re-look at the construction, and that is why I am making that specific statement. So, if we re-look at the design, I believe that will make the footbridges less complicated. So that, one, the handicapped people will be able to access these footbridges. Two, that these footbridges will actually be in places where there is heavy traffic, so that people will not be forced to jaywalk.

Mr Speaker, I truly believe that there should be public education on jaywalking. But I also believe that sometimes design can also push

attitudinal changes, so we can use the design to change attitudes. That is what I am talking about.

Mr Speaker, I would like to commend the maker of the Statement again, and I would also like to call on the Minister for Roads and Highways to also take look at the Kojokrom Bridge in Essikado-Ketan Constituency. It has been a bridge that has been in existence since the colonial days. It is on a major highway. There is no footpath to that bridge and so there is a lot of accidents on the road. So, I would like to take this unique opportunity to call on the Minister for Roads and Highways to really look at the Kojokrom Bridge and see if we can give them a footpath to prevent the major accidents, morbidity and mortality that is happening on that road.

Thank you again, Mr Speaker, for allowing me to make this comment.

Mr Second Deputy Speaker: Thank you very much. Let me come to you, Ing Surv Maxwell Kwame Lukutor.

Ing Surv Maxwell Kwame Lukutor (NDC — South Tongu): Thank you, Mr Speaker, for the opportunity. Let me also thank my Colleague, Ahmed Shaib, for the Statement ably made.

3.52 p.m.

First of all, let me say that about the issue of jaywalking, as an engineer, I would not agree that we have not designed footbridges at places where there is heavy traffic. A lot of things go into the design of these structures.

People believe that everywhere there is a bus stop, there should be a footbridge. It would be too difficult and too clumsy for us engineers to consider these issues. People also believe that footbridges should be by the bus stop. Sometimes we give space for people to walk a little bit before they can use the footbridges. It is unfortunate that, like my Hon Colleague from Suhum said, there were a lot of demonstrations on this Adenta stretch of road when it was being constructed and there were no footbridges, but as soon as footbridges were constructed, we still saw a lot of people crossing over and being hit by vehicles, resulting in fatalities.

Mr Speaker, I am sure that if we can just take a little bit of our time in considering our lives and the hazards that are associated with this jaywalking, we would be more considerate in the acts we take in crossing the road. It is unfortunate that after investing so much—The maker of the Statement stated in the penultimate paragraph that:

“Mr Speaker, we must remember that road safety is a shared responsibility. While the Government continues to invest in infrastructure, it is equally important that we all take responsibility for our actions.”

It is true that we invest so much in getting these things done. But after it is done, it becomes a home for the destitute and also for hawkers who rather use the footbridges as marketplaces. Sometimes, it discourages people from meandering their way through all these hawkers on the bridges, and it forces them to rather

use the roads. So, we have to educate the public to know we have invested so much in the footbridges for their use and comfort.

Mr Speaker, another issue that plagues us is the issue of these *okada* riders. On the bridges in Sogakope, Sokpoe, Tefle, and all other environs, we have a lot of issues with knockdowns on these bridges. Sometimes because people are hydrophobia or acrophobia, they fear to use the sides of the bridge between the road itself and then the rails. So, sometimes, this also results in vehicular knockdowns of pedestrians. Yes, maybe that bridge is so old that new designs will take cognisance of some of these things and then do them to help.

Mr Speaker, the last issue I want to talk about is the use of the motorway by motorcycles. It is so bad that these days we have to be shuffling between motorbikes and tricycles on the motorway. Meanwhile, Section 98 of the Road Traffic Act, 2004 (Act 683), says that: “no person shall ride a motorcycle or tricycle on the motorway.”

The Regulation 23 of that same Road Traffic Regulations of 2012, L.I.2180, also says that, but it is unfortunate that these days, one would see tricycles loaded with garbage using the motorway. Meanwhile, that is a high-speed highway. So let us educate these people to understand that motorcycles cannot use the motorway. Sometimes, if one tries to educate them, they will ask sarcastically: “Are you not buying fuel? Are we also not buying fuel?” It is not the issue of who buys fuel into his

vehicle or his motorbike, but it is about whether one is allowed to use it or not. I am sure that when we continue to educate people on these things, people will come to understand what they can do and what they cannot do, so that we can save a lot of lives.

On this note, I want to appreciate my Hon Colleague, Mr Jerry Ahmed Shaib again for the Statement ably made by him. I thank you, Mr Speaker, for giving me the opportunity to have a bite on this Statement.

Mr Second Deputy Speaker: Thank you very much.

Yes, Hon Member for Suaman?

Mr Frederick Addy (NPP — Suaman): Thank you, Mr Speaker, for the opportunity to contribute to the Statement made by my Hon Colleague, Mr Jerry Ahmed Shaib.

Mr Speaker, this Statement has come in good faith and as Members of Parliament, we have to take a critical look at this Statement. Pedestrians are not using these footpaths because they think they do not want to go to the extent of climbing it. But what I see is, there are some places that are in need of these footbridges, but they are not getting it. So, what I want to bring on board is, we should engage our security. When they see a pedestrian using the road instead of the footbridge, they have to deal with the person. In a way, we should all come together so that we can manage this issue.

Mr Speaker, on the issue of traffic on the road at times, these are the same people who have been causing that traffic. Instead of them to use the pedestrian bridge, they would rather want to use the road. On the Lapaz issue that my Brother, Hon Member for Tafo mentioned, sometimes when we are using a car by road and we see a pedestrian, instead of the pedestrian to use the bridge, he or she would want to use a shortcut by crossing the road. We have to wait. Although the green light may be on, we have to wait for the pedestrian to cross before we can also pass. So, I want to bring it to the House that, we all have to take a critical look at that so that such a thing will be a thing of the past.

Thank you, Mr Speaker, for the opportunity.

Mr Second Deputy Speaker: Yes, Hon Dr Mohammed Sherif Abdul-Khaliq?

Dr Mohammed Sherif Abdul-Khaliq (NDC — Nanton): Thank you, Mr Speaker. It has been a very long road trying to catch your eye. It looks like Mr Speaker is either looking on the left or on the right, never in the middle. But I am grateful for the opportunity to contribute to the Statement made by—

Mr Second Deputy Speaker: Is this the first time you are speaking?

Dr Abdul-Khaliq: Yes, Mr Speaker.

Mr Second Deputy Speaker: Go ahead.

Dr Abdul-Khaliq: Thank you very much, Mr Speaker. I am grateful for the opportunity. I would want to associate myself with the Statement made by my Hon Colleague from Weija Gbawe.

Mr Speaker, I want us to look at it this way. It is said, do not cross the Mediterranean Sea; it is dangerous, but we find people crossing it to find greener pastures. It is the same thing we must look at when we are talking about these footbridges. It is very easy for us to say there is a footbridge, so why are people looking for a shortcut? The first thing we must ask ourselves is, how many are the footbridges are there? How accessible are they? As human as we are, we will always find an easy way out. How are the bridges like?

I am crossing over to Mr Speaker. The bridge stands there. I am looking at Mr Speaker and then there is a snake that is moving all around and I am asking myself—Let us be honest with ourselves in this House. Sometimes we see the yellow light and we tell ourselves that we can cross the yellow light quickly. We decide to cross before it turns red. That is the way we must see human beings. So, as engineers, when we are designing things, we must take the sociology and the psyche of the people into consideration. We must understand that these are human beings, and there is no human being who would want to put his or her life at stake to cross a busy road.

Mr Speaker, having said all this, we need to look at the burden such a situation has on our health system. Between January and August of 2024,

we had close to 14,000 road traffic accidents. If one looks at the Korle-Bu Teaching Hospital, 60 per cent of the mortalities that were seen in the emergency unit were from road traffic accidents. Out of that 60 per cent, 50 per cent of those were pedestrians.

So, we are looking—the burden. One can look at the cost that comes with keeping one patient in an Intensive Care Unit (ICU) in a day. Mr Speaker, all I am saying is that let us look at the design of our footbridges and educate the people.

4.02p.m.

If we educate the people and make the designs accessible and better for the people, our people are going to use those footbridges.

On this note, I thank you for helping me clear my throat, and I am hoping that you would look towards this street more often. *[Laughter] [Hear! Hear!]*

Mr Second Deputy Speaker: Thank you very much. Hon Member, which constituency are you from?

Dr Abdul-Khaliq: Mr Speaker, I am from the constituency of your good Friend, Hon Mohammed Hardi Tufeiru, Nanton.

Mr Second Deputy Speaker: Nanton, very well. But, Hon Members, you just came in. Yes, so from him, I will come to you.

Yes, Hon Member for Manhyia South?

Nana Agyei Baffour Awuah (NPP — Manhyia South): Mr Speaker, permit me to commend my Brother, Mr Jerry Shaib, for bringing to the fore such an important matter.

Mr Speaker, considering the investments we make in the construction of footbridges, it therefore necessitates serious education, so that there is no fatality resulting from refusal to use footbridges. So, while commending him and encouraging education, very respectfully, I want to commend the contractor, Cymain, who is constructing the road-linking CPC in my constituency to Asante Newtown, downtown to be specific, and to encourage him to expedite work on the construction of the bridge linking the two electoral areas.

Mr Speaker, while at it, I also very respectfully, call on the Minister for Local Government, Chieftaincy, and Religious Affairs to pay attention to the Krofrom market, which has stalled for many years. Because of the delay in the construction of the Krofrom market, it sometimes becomes necessary for people to cross from Krofrom to Moro market. That sometimes results in fatalities because there is no footbridge. It is very necessary that the Krofrom market is completed.

Mr Speaker, as far back as 2004 when the contract was signed, the cost of construction was GH¢15 million. The delay has resulted in the ballooning of the contract price. It is going to cause a lot of loss to the taxpayer. I recognise the effort of my predecessor, Dr Matthew Opoku Prempeh, in pushing for the

completion of the Krofrom market. While commending him for the Krofrom market, I want to also commend him for the work he did for the construction of the CPC road. So, this afternoon, wherever Dr Matthew Opoku Prempeh is, I want to commend him—*[Hear! Hear!]*—and to also invite the Minister for Local Government, Chieftaincy, and Religious Affairs, very respectfully, to complete the construction of the Krofrom market.

Mr Speaker, this is my humble prayer. I thank you for indulging me.

Mr Second Deputy Speaker: My Brother wants to portray the usual bird issue. Yes, the tree and the bird. Why are you raising—I am not calling you. *[Laughter]*

Hon Member for Manhyia South, in 2004, I was working at the Kumasi Municipal Assembly (KMA), so I know the genesis of the Krofrom Market. Incidentally, the Deputy Minority Leader was then the mayor for Kumasi, and the market has been there up till now. Anyway, that is another topic.

So, let me come to my Brother.

Mr Charles Bawaduah (NDC — Bongo): Mr Speaker, I am most grateful for the opportunity to comment on the Statement made by the Hon Member, Mr Jerry Ahmed Shaib.

Mr Speaker, there is no gainsaying the fact that many Ghanaian lives have been lost through accidents caused, particularly at footbridges when pedestrians, instead

of using such footbridges, attempt to cross the road under the footbridges. As a country, we have tried many things to stop them. First is the provision of the foot bridge. Second is the promulgation of laws, the Road Traffic Regulations, 2012 (L. I. 2180), which makes it a criminal offense for anybody to attempt to cross where a footbridge is provided, with a punishment of at least, one to seven days imprisonment or a fine.

Mr Speaker, as a country, we have not by any indication demonstrated any seriousness at enforcing those laws; so, since I passed out as a lawyer, I have never heard that anybody has been prosecuted for not using a footbridge where it has been provided. Clearly, it has become one of those laws that we have made to put on the beautiful shelves where they gather dust.

I think the best way to resolve this is to use the engineering bit of it. I believe that the reason most pedestrians find it difficult to use the footbridges is because of the height, and Some also, because of the effort they have to make to climb the footbridge. So, I want to propose that we place more emphasis on underpasses and tunnels.

Mr Speaker, if one goes towards Kasoa and gets to the Kasoa overpass, one would see that there is a tunnel crossing from one side to the old market. Nobody tells a pedestrian to use it, but invariably, almost everybody will use it because it is easier to access effortlessly. One does not need to climb to get there and so, as a country, not only should we talk about pedestrians having a duty to

save their own lives, but we also have a duty to protect lives.

I want to urge the Ministry of Roads and Highways that the engineers should endeavour, where possible, to let us have the underpasses and the tunnels rather than the foot bridge.

I thank you, Mr Speaker, for giving me the opportunity.

Mr Second Deputy Speaker: Thank you very much. Which constituency are you from?

Mr Bawaduah: Mr. Speaker, I am the Hon Member for Bongo, Charles Bawaduah.

Mr Second Deputy Speaker: Bongo, very well.

Hon Member, what are you holding? Once you are holding that I would not call you—*[Laughter]*— Yes, my Brother. All right, then I will come back. I have already called him.

Mr Yakubu Mohammed (NDC — Ahafo Ano South East): Mr Speaker, first of all, I want to thank my Brother, Mr Jerry Ahmed Shaib, for such a wonderful Statement, and to also contribute to the Statement he made.

Mr Speaker, first of all, I think the issue of foot bridges and the effect it has on individuals is very paramount. Some of us who are from the rural communities, come to the city, and then we do not even know the importance of

these footbridges. So, I suggest that there should be more education to the people. It should not just be on the road signs alone because someone who does not have formal education would not be able to read and understand that he is supposed to cross it this thing standing there. I think if we are able to educate our people through the radio and the television, telling them that these are the number of foot bridges we have, their possible locations, and in case they are using that road at this time, they do not have to use other means to cross, I think it would help to save lives.

4.12 p.m.

And again, I would use this opportunity to make a point on roads that do not really have footbridges. For instance, my Constituency, Ahafo Ano Southeast—The capital is Adugyama which is located along the Kumasi-Sunyani highway, after the road is constructed, there is no speed ramp. We could get up one morning and hear that somebody who was crossing the road had been knocked down by a car. So while we talk about footbridges in the cities, I think that we should be concerned about the speed ramps along the highways. Recently in Adugyama, when I went during the weekends, I realised that there was an accident involving a former District Chief Executive (DCE), who was knocked down because of the high speed that the drivers use on the road. In my hometown, Abesewa, which happens to be along the main road as well, people keep complaining.

So, Mr Speaker, I would plead with the House and with the Ministry of Roads to look at the speed ramps. We go and they tell us it is a highway, but lives are being lost every day and I think that the lives of these individuals are more important than the speed at which these drivers are made to drive. If we are going to consider the lives, then I think that we should look at the speed ramps so that the lives of these individuals can be saved.

I would like to use this opportunity again to thank my people, the good people of Ahafo Ano Southeast for electing me to represent them in Parliament.

Thank you very much, Mr Speaker.

Mr Second Deputy Speaker: The people of Sabronomu. Yes, Hon Member for Bosome Freho?

Nana Asafo-Adjei Ayeh: Mr Speaker, thank you very much. I humbly seek your guidance and I come at the back of Order 52. This morning, there was a consequential order that was sought from the First Deputy Speaker that had to do with when the Leadership in the front line is empty. Is anybody at all allowed to sit by the Speaker? And there was a guidance that was given. I want to ask if it has to do with only the First Deputy Speaker because I see a dangerous thing that there are two Cape Coasters who are sitting there and it is very dangerous when you see two Cape Coasters —[Laughter] sitting there. So, I want to ask if it is allowed so that the consequential order can transcend from

Speaker to Speaker. I am just seeking your guidance, please.

Mr Second Deputy Speaker: Yes, Deputy Majority Leader, before I even speak.

Mr Shaib: Mr Speaker, just so you would appreciate that my Friend here is testing the law, but respectfully leave my friend, Hon Nyarku, just for the purposes of people not being around. I know he understands. He wants to test the law.

Mr Speaker, please. Let us proceed.

Mr Ricketts-Hagan: Mr Speaker, from what my Hon Friend has just said, I will just leave it like that.

Mr Second Deputy Speaker: Very well. Hon Members, I believe this morning the First Deputy Speaker, at least explained that when the seats are empty—Obviously we cannot have the Chamber running without the Leadership Side empty so Members can just fill in the gap, and consider themselves as available Leaders. So that one is allowed, yes.

But when we have a Leader and another Member sitting by him, I may construe that to mean that the Member is coming to confer for certain information or to discuss certain matters. And that is also allowed. As it stands now, I would not construe that to mean that he is coming to occupy the seat. Probably he is coming to discuss one or two matters and afterwards, leaves back to his seat.

Mr Ricketts-Hagan: Mr Speaker, rightly so.

Mr Second Deputy Speaker: So I think we put this matter to rest. When the seats are empty, Members can fill in and be considered as available Leaders, but that does not also mean that if you want to discuss matters with your Leader, you cannot come forward to discuss with him. I think we have to rest this matter.

Yes, my Friend. Let me take the two of you and we will conclude. Yes, you succeeded Dr Augustine Tawiah. I am calling people who succeeded my friends. You can take the floor now.

Mr Mustapha Tanko Amadu (NDC — Bia West): Thank you, Mr Speaker. I want to first seek your guidance on Order 93(5) before I proceed to comment on the Statement. Order 93(5) reads that, “a Member may comment on the statement for a period not exceeding five minutes, and the comment shall not provoke debate.” Mr Speaker, my question is, does this Order apply to Leadership or is it only for the Backbenchers?

Mr Second Deputy Speaker: It is applied to every Member of the House, including Leadership.

Mr Amadu: Mr Speaker, I thank you for the guidance. Our Hon Minority Leader, although he is not around, any time he gets the opportunity—

Mr Second Deputy Speaker: Please, he is not around. Normally, for the Leadership, even though they are inclusive, at times we give them leeway

for one or two reasons, but the law is applicable to all of us. So please do not relate yourself to a Leader.

Mr Amadu: So back to the Statement, Mr Speaker, I want us to look at it in a different direction. All the comments so far are good, but then how often do we see people with meaningful jobs or income get involved in pedestrian accidents? I think the economic hardship that we have in this country is very poor. They want to do things fast all the time “*kpakpakpa*”. So if we really want to reduce these pedestrian accidents, I think we have to look at that angle. We need to look at that angle to create meaningful jobs for our people because I do not think we have ever heard that a Member of Parliament or maybe a Minister of State is involved in a pedestrian accident. Has it happened before?

The maker of the Statement, Mr Speaker, also mentioned that some are even comfortable selling on some of these footbridges. What is causing this? I do not know. Whoever is selling there wants to make ends meet. So as leaders, we are able to create jobs, good ones that is able to give our people good income. At the end of the day, we can reduce these accidents on our roads.

Thank you, Mr Speaker.

4.22 p.m.

Mr Second Deputy Speaker: Thank you very much. Yes, I would take the last one.

Mr Emmanuel Dra (NDC — Upper West Akim): Thank you, Mr Speaker, for the opportunity.

Mr Speaker, I am interested in the engineering and design aspect of our roads and bridges. Not to prolong my comment, I would like to take you to Upper West Akyem where, two weeks ago, we all saw a video of two little boys cross a river from one community to the other on their way to school. It does not mean that there is no existing bridge; there is, but the design is such that two major vehicles, such as tipper trucks and other earthmoving machines cannot find it convenient, at the same time, on that stretch of the road.

Mr Speaker, that is the reason these little ones, in their own wisdom, thought it wise and safer to use the bush road by crossing the Ayensu River to school. This is a bridge that links two major cities such as Oda, Asamankese, Akwatia, Kade, Bodua and others. Even though the Government has taken keen interest in solving the problem, I think I have also started my own investigation, and it is revealing that the existing bridge would need expansion. The engineers are in the House, and they would agree with me that a bridge that is six metres wide would not be all right for two major vehicles to use at the same time. So, I am just using the opportunity to appeal to the Minister for Roads and Highways that even though the 48 Engineering Regiment team were there to assess the situation, I am sure that if they would do something, it would have to go through the supervision of the Ministry of Roads and Highways. So, I would like to use the opportunity to appeal to the Minister for Road and Highways that constructing a new pedestrian walk for the children to go to school would not be all that

necessary, but if the existing bridge is given some facelift, it would solve the problem of children trying to cross the Ayensu River, using a bush road.

On this note, I would like to commend the maker of the Statement; it has come at the right time for me. I also thank you, Mr Speaker, for giving me the opportunity.

Mr Second Deputy Speaker: Thank you very much.

Let me come to the Leader—No, he made the Statement, so you can.

Deputy Majority Leader (Mr George Kweku Ricketts-Hagan): Thank you, Mr Speaker, and I would also like to thank the maker of the Statement, Mr Jerry Shaib, for a very important Statement.

Mr Speaker, we have become a country with laws, but some of our citizens do not actually obey the law. We have some pedestrians who basically do not obey the laws of crossing roads or using footbridges, and then we have drivers who do not seem to either know the rules or just decide to flout the rules. Sadly, this results in unnecessary loss of lives. People lose their life in circumstances that they should not have, especially when one is just a pedestrian who lives in a town that is on two sides of the road, and he or she has to cross to do his or her business on the other side.

Mr Speaker, the issue is not only about pedestrian footbridges but also to do with zebra crossings. Sometimes,

people do not know when to cross, and sometimes, cars do not know when to stop. I have, on countless times, seen vehicles standing right on top of the zebra crossing, and the drivers are wondering why people are crossing. A lot of education is needed in the usage of our roads, in terms of the footbridges that are poorly designed, as others have said. They are poorly designed and placed in wrong places as well.

Mr Speaker, as my Hon Friend said earlier, people go for the easy option. They think about why they have to go that far to cross a road or to use a footbridge when they can just cross here, thinking that they are faster than the cars. Many of them, unfortunately, get involved in being knocked down by the cars. Not only on the issue of footbridges but also to do with what you call speed ramps or humps. Because of the lack of either a footbridge or the foot bridge being too far away, you have instances where a lot of issues have occurred on roads in terms of deaths that the township takes it upon themselves to build their own speed ramps, and these speed ramps are done to no measure. They are built the way they want to build it; they want it to be as high as a car would not be able to climb, so they can get people to cross easily. That itself causes a lot of accidents, especially in the night. When people are crossing roads that they do not know much about, they will come at a full speed and realise that there is actually a wall, not a speed ramp, before them and get into all forms of accident.

Mr Speaker, we need to work on our design of this pedestrian footbridges and

make sure that they are placed at where they should be. These things should be done alongside the construction of some of these roads. Having the roads before somebody, as an afterthought, decides many years later that they should put a foot bridge or put a speed ramp does not help anyone—After many accidents have occurred on that particular road—Or for the citizens or the community to take upon themselves to build their own speed ramps, which itself endangers a lot of lives, is also something that we need to fight against.

Mr Speaker, the issue is not about laws. We have a lot of laws in this country, and it is about enforcement of laws. There are some citizens who do not obey the law, and there is the Government, which is governing the citizens, also not enforcing the law. So, that creates a lawless kind of situation, and in a lawless situation, where things are not planned, accidents are things that would happen—And realise that we have unnecessary and preventable accidents on our roads that add to our road statistics; that is not good for us as a country.

Mr Speaker, I hope that, by Parliament talking about these things and having Members raise this issue, we would create a kind of awareness that we need to be able to educate our people and for the people responsible for road safety to educate our citizens what some of these things mean. One does not really have to be educated to drive on the roads; he or she just needs to understand road signs. One does not have to be an educated to cross a road; the person really needs to know where he or she has to cross the road from.

Mr Speaker, that kind of awareness is what we need because we have people who have not been to school before driving vehicles on our roads, but they are able to navigate their way around town and get back home safely. There are others who are educated, but they are either impatient or are always rushing somewhere before everyone else gets there.

4.32 p.m.

So, it is important that we are discussing this, and I hope it does not end here and become one of the things that we talk about; then eventually, we live another year to have to talk about the same things over and over, and nothing absolutely gets done.

Mr Speaker, I think this is a very important Statement made by the Hon Member, and I congratulate him for bringing this important Statement up. I hope that something follows after this.

Mr Speaker, with these few words, I want to thank you very much for these comments.

Mr Second Deputy Speaker: Thank you very much.

Hon Members, we would bring Statement time to a close, and let me thank all of you, the makers and contributors of the Statements, for your contributions. I think we have all done well; we have contributed devoid of politics, and that is what we all expect.

Leadership, I think we can bring the curtains down.

Mr Ricketts-Hagan: Mr Speaker, thank you.

I think I would like to move that we bring the curtains down.

Mr Second Deputy Speaker: I think it is 4.30 p.m., and it means we have spent more than five hours.

Mr Ricketts-Hagan: Well, then we are in your hands.

Mr Second Deputy Speaker: Mr Speaker, obviously, you would be in my hands.

Once again, let me thank you. Tomorrow, are we coming at 10 a.m.? Leadership, is 10 a.m. all right? I learnt the Speaker insists that we come at 10 a.m.—[Pause]

Mr Ricketts-Hagan: Mr Speaker, I think our attention has been drawn to the fact that tomorrow there would be a lot of Statements to be taken. So, 10 o'clock should be fine.

Mr Second Deputy Speaker: Very well

Hon Members, I would, accordingly, adjourn the House to tomorrow, 10 o'clock in the forenoon. The House stands adjourned.

ADJOURNMENT

The House was adjourned at 4.35 p.m. till Wednesday, 19th February, 2025, at 10.00 a.m.

