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PARLIAMENTARY DEBATES

OFFICIAL REPORT

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THE
PARLIAMENT OF THE REPUBLIC
OF GHANA

FIRST MEETING, 2025

Thursday, 6th February, 2025

The House met at 1.04 p.m.

[MR FIRST DEPUTY SPEAKER IN
THE CHAIR]

[PRAYERS]

Mr First Deputy Speaker: Hon Members, correction of *Votes and Proceedings* and the *Official Report* of Wednesday, 5th February, 2025.

**VOTES AND PROCEEDINGS AND
THE OFFICIAL REPORT**

Mr First Deputy Speaker: Hon Members, correction of *Votes and Proceedings* of Wednesday, 5th February, 2025—[Pause]

[No correction was made to the Votes and Proceedings of Wednesday, 5th February, 2025]

Mr First Deputy Speaker: Hon Members, [Pause]—Just be patient. That is what we are coming to do.

Hon Members, the *Official Report* of Thursday, 23rd January, 2025. Any corrections?

Hon Members—Dr Sandaare, do you want to make any correction?

Dr Sebastian Ngmenenso Sandaare: No, Mr Speaker.

[No correction was made to the Official Report of Thursday, 23rd January, 2025]

Mr First Deputy Speaker: Hon Members, the *Official Report* of Thursday, 30th January, 2025 is also ready and I would open the floor for any corrections.

[No correction was made to the Official Report of Thursday, 30th January, 2025]

Mr First Deputy Speaker: Hon Members, the *Official Report* of Friday, 31st January, 2025, any corrections?

Minority Chief Whip, are you on your feet to do corrections?

Mr Frank Annoh-Dompreh: Mr Speaker, earlier on, I tried to catch your attention but since you have banged the gavel, we would move ahead.

On the *Official Report*, the agreement we had come to tentatively was that, because the IT systems are completely done and they have to load these reports on the IT system, we would use the hardcopies together with the soft copies when the IT load them.

1.15 p.m.

Mr Speaker, I have only one copy of the *Official Report* which is Thursday, 30th January, 2025, but I have heard you mention about three or more *Official Reports*, and I do not know what the difficulty is. The Table may have to—I have only one, 30th January, 2025, and it

would be difficult for us to follow up on the corrections. So, I do not know what your pleasure would be if we should still proceed without it.

Mr First Deputy Speaker: I would want that particular agreement to be communicated to the Table to the effect that, until our IT system is put in order, we should continue to distribute hard copies. In the meantime, can we conclude similarly, that of Friday, 31st January, 2025, using the console?

Mr Annoh-Dompreh: Mr Speaker, interestingly, I have just received the full complement, and it is as a result of my complaint. I am grateful to the Table Office.

Mr First Deputy Speaker: The *Official Reports* of 23rd and 30th January, 2025 were even supposed to be taken yesterday. The one scheduled for today is 21st January, 2025, but because we did not correct them yesterday, we had to take them today.

Thank you very much.

Any correction on the *Official Report* for 31st January, 2025?

Yes, Hon Member for Afadjato South?

Mr Frank Afriyie: Thank you, Mr Speaker.

Mr Speaker, I wish to invite you to page 1 of the *Official Report* and seek your guidance:

“THE
PARLIAMENT OF THE REPUBLIC
OF GHANA

FIRST MEETING, 2024”

Mr Speaker, I think we are in 2025, and I do not know—

Mr First Deputy Speaker: Hon Member, which column are you referring to?

Mr Afriyie: Mr Speaker, page 1, column 1: First Meeting, the year indicated there is 2024, and I guess it should reflect 2025.

Mr First Deputy Speaker: Hon Member, you are right; Table take note.

Any further correction?

Hon Members, the *Official Report* of Friday, 31st January, 2025, as corrected, represents the true record of proceedings.

Leadership, any indication?

Minority Chief Whip (Mr Frank Annoh-Dompreh): I was actually waiting on the respected Majority Leader, and I see him signal what we agreed on yesterday: the need for us to have a Committee of the Whole, so without adding more, if he finds favour, I would suggest to him that we break into a Committee of the Whole.

Mr Speaker, before that, I cannot find the Majority Chief Whip. Yesterday, he displayed two big files as evidence. I am referring to my boss, the Majority Chief

Whip. He displayed two big files that he is done with his—

Mr Speaker, if you would indulge me for a second.

Mr First Deputy Speaker: Minority Chief Whip, is that the indication?

Mr Annoh-Dompreh: No, Mr Speaker. I have already said that the indication is that we break into a Committee of the Whole.

Mr First Deputy Speaker: So, I would want to hear the Majority Leader.

Mr Annoh-Dompreh: Mr Speaker, before the Majority Leader—When he speaks that should be the end.

Mr Speaker, you have to listen to me.

Mr First Deputy Speaker: Thank you very much.

The indication is for me to listen to the Majority Leader.

Mr Annoh-Dompreh: Mr Speaker, I know you are very friendly, but, this morning, you are not being too friendly to me. Majority Leader, may I just conclude, so that when you speak, it ends the matter. He is a very friendly Majority Leader.

Mr First Deputy Speaker: Hon Minority Chief Whip, I recognise the Majority Leader.

Mr Annoh-Dompreh: Mr Speaker, he has yielded to me. He has gladly

yielded to me; he is my friend. So, Hon Leader, may I?

Majority Leader (Mr Mahama Ayariga): Mr Speaker, if only I were convinced that he would not engage in mischief, I would have yielded some more time to him. You know that the Chairman of the Committee on Selection is not in town, and that is the Rt Hon Speaker, so when he returns, we would meet over the two fat files that his counterpart displayed to him yesterday. So, he should not be in a hurry.

Mr Speaker, we agree that we would have a Committee of the Whole, so if we could just take some time to clear the Gallery to have the Committee of the Whole meeting, after that, we can return to take some Statements.

Mr First Deputy Speaker: Yes, Minority Chief Whip?

Mr Annoh-Dompreh: Mr Speaker, I am on my feet to gladly support the application made by our respected Leader; safe to add that, yesterday, the Clerk to Parliament announced to us, under Standing Order 12, that the First Deputy Speaker would take charge, back and forth. Basically, it was to confirm that the Speaker is unavoidably absent or out of the jurisdiction, and I heard my Leader say that the Speaker is out of town. Yes, the Speaker is out of town, but the First Deputy Speaker has assumed duties. Unless the Majority Leader is challenging the powers of the First Deputy Speaker, he has assumed full responsibility.

In the absence of the Speaker, the First Deputy can initiate a meeting of the Committee of Selection; the First Deputy Speaker would sit. Members are not happy; the composition of the Committees is dragging.

Mr Speaker, I want to further plead that we should not go beyond today. Let us have a Committee of Selection now that there is evidence that our Colleagues on the other Side—Now that the names are out for the Deputies—Those who have lost out have lost out; clearly, my good friend has lost out. Mr Adongo has lost out—

Mr First Deputy Speaker: Hon Minority Chief Whip, I had a discussion with you this morning; is that not so?

Mr Annoh-Dompreh: Yes, Mr Speaker and I am just confirming that, indeed, you had a discussion with me, and it is important that we do not go beyond today. We can have a Committee of Selection meeting chaired by the First Deputy Speaker; then we can give finality to these Committee matters. It is dragging—[*Hear! Hear!*].

Mr Speaker, you can get the sense of the House.

Mr First Deputy Speaker: Hon Minority Chief Whip, in what capacity did I have the discussion with you?

Mr Annoh-Dompreh: Mr Speaker, I would not like to have a banter with you. I always defer to you, but on this matter related to the Committees, we should not allow it to delay further. Let us put

finality to it, and Parliament can assume its real oversight; we cannot be at the beck and call of the Executive. The lists are out, so that we can put an end to this.

Mr Speaker, I trust in your wisdom and wise judgement. We want to hear your wise counsel.

Mr First Deputy Speaker: Hon Members, the sense of the House is for us to have Committee of the Whole. Accordingly, the House is constituted into a Committee of the Whole.

I direct the Marshal to clear the Gallery.

1.24 p.m. — [The House constituted into a Committee of the Whole]

2.49 p.m. — Sitting resumed

Mr First Deputy Speaker: Hon Members, can you humbly get seated? Hon Members, The Hon Member for Buem, Mr Kofi Iddie Adams raised, an issue which is really true. We have to take a look at the *Votes and Proceedings* dated, 30th January, 2025. Those who can have access to the console, the *Votes and Proceedings* is there. We can quickly do the correction of it and move to take Statements.

VOTES AND PROCEEDINGS AND THE OFFICIAL REPORT

Hon Members, page 1...10.

Hon Minority Chief Whip?

Mr Annoh-Dompreh: If you may indulge me, earlier I tried to catch your attention, unfortunately I could not. Mr Speaker, yesterday, a matter that I raised concerning—And I conceive that there is the *Official Report* which would capture the details of that. The *Votes and Proceedings* is to capture highlights as I understand and I see highlights of Businesses that were prosecuted captured.

Yesterday, a matter which I consider important on the composition of our Committees—The Committees are so important. I raised it and we got a response from our Colleagues in the Majority. I thought it should find expression in the *Votes and Proceedings* because it is a significant matter. Apparently, I cannot find it captured in the *Votes and Proceedings*. Mr Speaker, I think it should be captured. You can rule on this matter, but I think it is a matter that is important.

Mr First Deputy Speaker: Hon Member, the *Votes and Proceedings* under reference is 30th January, 2025.

Mr Annoh-Dompreh: Mr Speaker, bear with me. I thought you came back to the one we were correcting earlier.

Mr First Deputy Speaker: No.

Mr Annoh-Dompreh: I am sorry.

Mr First Deputy Speaker: Page 11...12.

Hon Members, in the absence of any corrections, the *Votes and Proceedings*

of Thursday, 30th January, 2025 is hereby adopted as the true record of proceedings.

Hon Members, item numbered 6 at page 2 on the Order Paper—Statements.

Hon Members, we have admitted Statements on urgent call for action, addressing the conflict between Ashanti Gold and the people of Bibiani. It is a Statement by the Member of Parliament for Bibiani-Anhwiaso-Bekwai Constituency, Mr Bright Asamoah Brefo. Hon Member, the floor is yours.

[Pause]

Yes, Hon Minority Whip?

Mr Annoh-Dompreh: Mr Speaker, if you may indulge me, I am aware you have admitted a number of Statements. There are number of Statements on our Side, if you may communicate to the House the number we are going to consider. Mr Speaker, you have already indicated that you wish we adjourn as and when appropriate. So, we can apportion ourselves in terms of the time.

Mr First Deputy Speaker: Hon Member, we will take two Statements.

Mr Annoh-Dompreh: Two on each Side?

Mr First Deputy Speaker: Two.

Mr Annoh-Dompreh: One on each Side?

Mr First Deputy Speaker: Well, are you talking about the contributors or the number of Statements to be taken?

Mr Annoh-Dompreh: Mr Speaker, I am talking about the number of Statements to be admitted.

Mr First Deputy Speaker: Yes, two.

Mr Annoh-Dompreh: Mr Speaker, may I pray you to communicate those you have admitted?

Mr First Deputy Speaker: Well, the one I have just mentioned and then a Statement by Alhaji Muhammad Bawah Braimah, the Member of Parliament for Ejura Sekyeredumase.

Mr Annoh-Dompreh: Mr speaker, I want to further pray you, if it finds favour because of the nature of Business we have for the day. There are number of Statements on our Side. I have just transmitted one to you. If it finds pleasure, we should do two on each Side so that tomorrow we can round it up, please.

Mr First Deputy Speaker: Well, unfortunately, the Statements that I am having here do not depict the picture being painted. I have just been given one which I intend to add to, to make it three.

Majority Whip?

Mr Rockson-Nelson Etse Kwami Dafeamekpor: Mr Speaker, thank you very much. Yesterday, the Hon Member for Daffiama/Bussie/Issa raised a very important matter on an outbreak of

meningitis in his Constituency, so the Second Deputy Speaker in the Chair directed that he could therefore make a Statement today. Unfortunately, he brought it but because we were at the Committee of the Whole, he could not approach you. He has just produced a copy, so I would want to join my Brother so that we take two additional Statements, one from each Side to make it four.

Mr First Deputy Speaker: Has that Statement been admitted already? You know the process.

Mr Dafeamekpor: Mr Speaker, I know. So, with your leave, if I may quickly forward same to you for approval so it could be made because it is proceeding under Standing Order 93. I want you to support me in this matter.

Mr First Deputy Speaker: Hon Majority Whip, you may find a better way of doing it.

Mr Dafeamekpor: Very well.

Mr First Deputy Speaker: Hon Member for Bibiani-Anhwiaso-Bekwai, you have the floor.

Mr Bright Asamoah Brefo (NDC — Bibiani-Anhwiaso-Bekwai): Mr Speaker, I am grateful for the opportunity. Last week, I went to my Constituency and solved the problem because I presented the Statement about two to three weeks ago and the issue has been resolved. So, there is no need for me to make the Statement on the Floor anymore, so Mr Speaker, I am most grateful.

Mr Mahama Ayariga — *rose* —

Mr First Deputy Speaker: Hon Majority Leader, I saw you on your feet.

2.59 p.m.

Mr Ayariga: Mr Speaker, the Hon Member intimated to me that he did not want to make the Statement anymore because he had rushed to his constituency a week ago to resolve the issue; so, he did not think that it would advance the cause of the resolution on the ground for a Statement to be made on the Floor. So, you could substitute that with another Statement from the left Side if any Member is available to make a Statement.

Mr First Deputy Speaker: That should have been communicated to us earlier; nevertheless, I proceed to give the floor to Mr Samuel Awuku, the Hon Member of Parliament for Akuapim North, to make a Statement on enhancing lottery proceeds and addressing challenges in Ghana's lottery sector.

Hon Member, you have the floor.

STATEMENT

Enhancing Lottery Proceeds and Addressing Challenges in Ghana's Lottery Sector

Mr Samuel Awuku (NPP — Akuapim North): Mr Speaker, this is a Statement on enhancing the lottery proceeds while addressing the challenges

in Ghana's lottery sector. I thank you for the opportunity to address this House on this matter.

As the immediate past Director General of the National Lottery Authority (NLA), I would like to bring to our attention the significant; yet, overlooked ways the Government can optimise the use of lottery proceeds, implement stricter measures against illegal lottery operations, and maximise revenue through innovative fiscal strategies, including tax incentives. This Statement is also to highlight the best practices around the world that I believe Ghana could also learn from.

Mr Speaker, NLA was established by the National Lotto Act, 2006 (Act 722) with the primary objective of conducting national lotto to raise revenue for the nation and other purposes stated in the Act. The NLA, today, generates revenue in excess of over GHC300 million annually; however, proceeds and profits are expected to be funnelled into the Consolidated Fund. This contribution is often lost in the country's general expenditure, limiting the impact these funds may have had on targeted development.

Mr Speaker, allow me to propose ways these funds can be utilised for the benefit of the State. According to the World Lottery Association (WLA), WLA members, lotteries, and betting operators contributed over US\$91 billion to fund good causes in the fiscal year of 2023. Since 1999, member bodies have raised an estimated total of US\$1.7 trillion for the public good. This

contribution supports education, health, restoration of the environmental sector, children with special needs, and sports development. The European Lotteries also indicate that without their national lotteries, European societies, culture, and welfare would be €21 billion poorer.

Mr Speaker, examples of contributions of member countries include Spain and the Spanish National Organisation of the Blind (ONCE), which established the lottery in 1998. ONCE supports 71,000 jobs, that is 57 per cent of these people are persons with disabilities, and provides €230million annually in dedicated funding for social support for people with disabilities.

Mr Speaker, in Greece, the Greek Organisation of Football Prognostics S.A (OPAP) has renovated 64 per cent of the two largest children's hospitals, investing €12 million, and sharing smiles with 200,000 children. The project which was launched in 2014 is still ongoing.

Since its inception, Poland's Totalizator Sportowy, that is their lottery form, has spent more than €2.8 billion on sports development and sports infrastructure,

Since its inception, Poland's Totalizator Sportowy, that is their lottery form, has spent more than €2.8 billion on sports development and sports infrastructure, while the Australia National Lottery has contributed €2 billion to sports in its 33-year history

History has it that the famous Great Wall of China, built to protect the Chinese states and empires from invasion by groups from the north, was primarily sponsored by lottery proceeds. I am sure the Hon Member of Parliament for Bosomtwe would agree with me that in California, United States of America (USA), 95 cents from every dollar spent on the lottery goes to funding public elementary, middle, and high schools to support classroom services and educational programs.

Mr Speaker, the United Kingdom (UK) National Lottery contributed over £80 million to support more than 1,300 athletes in preparation for the Rio 2016 Olympics. Their lottery also supports their National Health Service (NHS) and health charities, including mental health programmes.

In South Africa, a portion of lottery proceeds funds healthcare for underserved communities and supports HIV/AIDS programmes. At the same time, our next door neighbour, Ivory Coast, has a project supported by its lottery body, Loterie Nationale de Côte d'Ivoire (LONACI), in every community. In Ghana, under my tenure as Director General of NLA, we launched the Good Causes Foundation which has, over the past four years, touched over 2 million lives by supporting individuals, institutions, and communities in the areas of health, education, youth and sports development, and arts and culture.

Mr Speaker, given the lottery's essential contribution to society globally, I believe that if properly streamlined, we can do more with lottery proceeds in Ghana. Therefore, I propose that the current National Lotto Act, 2006 (ACT 722) be amended with the guidance of the Ministry of Finance to allow lottery proceeds meant for the Consolidated Fund to be used to support specific projects in critical sectors like health, education, youth and sports development, and other areas as directed by this august House. Funds can also be directed toward social interventions for persons with disabilities, elderly citizens, and marginalised communities to improve livelihoods.

Mr Speaker, I also propose that part of the proceeds should be added to the District Assemblies Common Fund (DACF) to assist Hon Members of Parliament in developing their constituencies. It is essential to demystify the lottery by promoting it as not just a tool for entertainment, but also, as a significant source of national revenue. We can generate more revenue by implementing transparent processes, while educating the public on the social benefits of lottery proceeds. The European Lotteries captures it in simple terms, "A sustainable model for the benefit of society".

Mr Speaker, I cannot discuss the operational challenges facing the NLA without addressing the issue of responsible gaming. Lottery, though a source of revenue for the Government, can negatively impact the lives of people who become addicted to it, particularly

minors who are most vulnerable. I am advocating for the establishment of social centres across our communities to help both the young and old deal with their anxieties, addictions, and social problems. I also urge the NLA and its third-party collaborators to establish advisory bureau centres in all their district and regional offices. This will be in line with the standards set by the WLA.

Illegal operations are arguably the bane of the lottery industry in Ghana. In 2022, \$1.8 trillion was lost to illicit operations globally; Ghana is no exception. It is estimated that about 60 per cent of Ghana's lottery market is held by illegal lottery operators. The proliferation of unlicensed operations denies the state millions of revenues annually. Unfortunately, the National Lotto Act, 2006 (Act 722), section 4(2), limits an offender's penalties to a fine of not more than 2,500 penalty units or imprisonment for a term of not more than three years or both.

3.09 p.m.

The trend in sentencing in Ghana especially in the area of illegal operations has been the imposition of fines which has not been deterrent enough because these illegal operators have deep pockets and can easily afford to pay the fines and return to their illegal operations. I therefore urge this House to consider amending the current National Lotto Act, 722 to impose stricter punishment including higher fines and longer jail terms as it is done in Ivory Coast and elsewhere. This would deter

these illegal operators from also continuing with that journey.

Further, the assets acquired through unlawful lottery activities should be forfeited to the National Lottery Authority (NLA) for operational activities.

According to an article from the Worldfolio:

“Governments realize that if you try to block gaming, people are going to play or gamble anyway with the high probability that they will play within unregulated or illegal sites, where the player is not protected,”... “The argument is: if you want to control online gambling, even land-based gambling, you need to regulate it well and only then will you manage to control and protect consumers and prevent organized crime and money laundering.”

Online Gaming is Malta's second-biggest contributor to their GDP, with more than 12 percent of its annual income coming through online gaming services. I am confident that Ghana can make such gains if the illegal lottery space is appropriately controlled.

Mr Speaker, in terms of tax incentives many companies in Ghana receive tax incentives on terms that call for members of both sides of this House and the public to raise legitimate questions about these tax incentives. I am calling for a clear-cut policy to stimulate tangible growth in the lottery industry through tax incentives. These incentives will stimulate growth,

improve efficiency in the lottery industry and encourage illegally operated companies to register with the NLA so that the State can take advantage of these benefits. To an extent, this will help the NLA address the issue of illegal operators that have taken about 60 per cent of the lottery market in Ghana. Additionally, these measures will encourage compliance and discourage underreporting taxes. Should the issue of illegal operators and inefficiency be resolved, the NLA could rake in revenues of over six hundred million Ghana cedis (GH¢ 600,000,000) annually.

Mr Speaker, in conclusion, Ghana will benefit immensely if we reform the management of lottery proceeds, strengthen regulations against illegal operations, and implement strategic incentives for the sector. These measures will not only boost revenue but also ensure that the lottery proceeds serve their intended purpose — improving the lives of Ghanaians.

Let us take this opportunity to enact the necessary reforms that will leave a lasting impact on our society.

Mr Speaker, thank you for the opportunity and your attention.

Mr First Deputy Speaker: Hon Members, I would therefore open the floor to take contributions subject to Order 93(5).

Mr Rockson-Nelson Etse Dafeamekpor, the Majority Chief Whip?

Mr Dafeamekpor: Mr Speaker, just for clarity, because of the number of Statements we have, we would like to pray you, if we can take two each from each Side of the House and also to limit the duration so that Members can make their comments in a matter of five minutes.

Mr First Deputy Speaker: Thank you very much. Hon Member, you have the Floor. You have five minutes.

Nana Agyei Baffour Awuah (NPP — Manhyia South): Mr Speaker, I am extremely grateful for this opportunity and I would like to commend Mr Samuel Awuku for this very insightful Statement. Indeed, lottery is a received learning, a learning that we received from Malta, about 62 years ago when the then Finance Minister of this country visited that country and discovered the usefulness of lottery. He borrowed it for the purposes of implementation in this country.

Mr Speaker, historically, we have been apprised of the significance of lottery to even the budget of the Republic of Ghana and so I am not surprised that Mr Awuku is making such brilliant recommendations. Indeed, he deserves to be commended, not only for his demonstrated authority in the sector but also the fact that about two years ago, he celebrated 60 years of lotto in Ghana.

Mr Speaker, the challenges that he has enumerated are things that are worthy of focus by this House and also the Minister for Finance. Because of the historical usefulness of lotto and how important it

has served to the budget of this country, not only in terms of the economic side of it, but also in terms of employment. That is why we need to address all the issues that he has raised.

Mr Speaker, in this Statement, he highlighted how external or foreign countries have resolved this problem. Given that lottery itself is a foreign learning, I do not think we should shy from borrowing these foreign experiences to resolve the challenges that are inherent in its practices in the Republic of Ghana.

Mr Speaker, where I would encourage us to give a very thoughtful consideration is the fact that we should be identifying sectors where the funds can be applied. However, in doing so, we have to consider whether or not there is a fiscal space for it; given that most of the revenues of this country are tied to sector specific. Therefore, we need to commend the Hon Member for such an insightful Statement.

Thank you very much.

Mr First Deputy Speaker: Hon Member, you have the Floor. Please mention your constituency so that over time, we would get used to it.

Mr Emmanuel Kwaku Boam (NDC — Pru East): Mr Speaker, I would want to comment briefly on the Statement made by the Hon Member. It is such an intriguing one and I would like to seize this opportunity to tell my Colleagues and the House that if we look into this Statement, it would go a long way to help

us bridge most of the financial gaps we have in the economy. I would want to focus on a few of the challenges he mentioned and I think it is something we need to critically look at.

Mr Speaker, it would interest one to know that, out of the many lottery operators, there are others who are operating without being registered and that is why the Hon Member spoke about illegal operators. These people happen to do the table top ones we call, “Banker-to-Banker”. It would also interest the House to know that most of the people who do this are unable to account to Government because it does not come through what we know to be the procedure or the normal way of accounting their revenue so once anybody who operates is registered and able to get an operating license, that would enable them to go digital. So, most of the operators are using the Post of Sale (POS) device and it is easier to account for the proceeds one has, upon which one also pays taxes to Government.

Yesterday, we belaboured the point on using technology to solve the gap in generating revenue for the Government. This issue, as we spoke about yesterday, has also manifested today. The countries that have been successful in this did not go using lottery as the only means of doing that but they employed technology to make sure they increase revenue from operators.

3.19 p.m.

As I said earlier, it would interest you to know that most of the people in the villages, areas where they think they are

too far to be scouted and exposed, do not go through the normal use of this POS. As a House, this is something we should take upon ourselves to consider because lottery is another avenue to generate so much money for us. So, I would want to seize this opportunity to thank the Hon Member for having brought light to this issue.

I believe, as a House, we should take a closer look at it because it would help us increase the revenue base for Government.

Mr Speaker, thank you very much.

Mr First Deputy Speaker: Yes, Hon Member for Atwima Kwanwoma Constituency?

Mr Kofi Amankwa-Manu (NPP — Atwima Kwanwoma): Mr Speaker, thank you for the opportunity to add my voice to the Statement made by the Hon Member for Akuapim North, Mr Samuel Awuku, who happened to be a former Director General of the National Lottery Authority (NLA).

Mr Speaker, listening to the maker of the Statement, it is obvious that if lottery is properly managed and targeted, this country would stand to benefit more than we are doing now. We live in a country where soccer is something that is dear to our hearts. Almost every Ghanaian loves soccer. If you listen to his Statement, countries have applied millions of dollars to improve on soccer in their various countries. If we are able to do that by targeting revenue from lottery into soccer, I believe that we can

improve our soccer and the Black Stars would make us happy. We can also create employment for the teeming youth.

As a former Deputy Minister for Defence, there were a number of times I went to see my Brother, Mr Samuel Awuku, to assist the Ghana Armed Forces (GAF). In fact, most of the times, they gave some assistance to the Veterans Association of Ghana (VAG). But how much was given to VAG was at the discretion of the Director General. If we are to streamline and know exactly how much is supposed to go where, I believe that that would go a long way to help us.

Mr Speaker, it is sad that we live in a country where, at the end of the day, as a Member of Parliament (MP), when I work and earn something, I pay taxes. However, in this country, betting taxes are introduced. Yet, when people are made to pay taxes on the earnings for playing the game, it is seen as an offence. Sadly, those of us in this House have been able to politicise this issue. I think this would not augur well for the revenue we are looking for to develop our country. If people earn, they must learn to pay taxes on their earnings; it is very important. If we fail to do that, then how do we get the revenue from such earnings to develop our nation?

Also, he made mention of people who have deep pockets, so whenever they engage in illegalities in operating this lottery system, the only punishment that is meted out to them is just to pay a simple fine. If I have a deep pocket and I am only fined, I can easily pay; then the

next day, I would be back in business. We must have stricter punishment for such people, so that, in the long run, this country can make the money that we so need to develop our country. I believe that if we are able to do so, we would develop the country, create employment and Ghana would do better at the end of the day.

Mr Speaker, thank you very much for the opportunity to add my voice.

Mr First Deputy Speaker: Hon Member, thank you.

Yes, Hon Member for Kintampo North, Mr Joseph Kwame Kumah, let us hear you.

Mr Joseph Kwame Kumah (NDC — Kintampo North): Mr Speaker, thank you for the opportunity to give a bite to this Statement.

Mr Speaker, as much as we are talking about the revenue that we generate from lottery, people stake and they contribute income. So, if we are talking about taxing them from their earnings, would that not be double taxation? We are encouraging people to stake the lottery, and that is enough at that point to encourage them to stake. But if we want to concentrate on taxing them from their earnings, we are just indirectly discouraging them from staking. This is where some of us think that, if a policy is being introduced that taxing lottery should be stopped, then we are rather helping and encouraging them to do more staking for the nation to have money.

Mr Speaker, as much as I am saying this, I side with him for the various support lottery gives to the various civil society organisations (CSOs), especially when we talk of the physically challenged receiving it as a source of income, support our various health facilities and other development. It is fair; it is a very good thing.

Mr Speaker, the maker of this Statement stated that, “NLA generates significant revenue, amounting to over 300 million cedis annually”.

I am not to ask a question within this period because he is within the system. I do not know if all that money is usually paid into the Consolidated Fund Account before it is utilised, so that we can be sure of it in future. After this, I would like to meet him to confirm the figure that is normally paid into the Consolidated Fund Account.

I thank you for the opportunity.

Mr First Deputy Speaker: Thank you very much.

Leadership?

Minority Chief Whip (Frank Annoh-Dompreh): Mr Speaker, let me start off by commending the maker of the Statement, who was the Director General of the NLA some time back. I am happy he has carried his experience on and is making very good recommendations on how we can rake in the necessary revenue to prosecute public business, and to move this country forward.

Mr Speaker, I, oftentimes, think we have not averted our minds to this opportunity, and people tend to be too religious about it. But it is a very good opportunity we can look at and be able to increase revenue from this area. I think, in this House, we have had occasions where such important Statements are read and we are unable to follow through to its logical conclusion. I think this is an important Statement. We cannot just comment about it and let it go, particularly to the fact that it is going to help the country raise revenue through internally generated funds (IGF) to help the Government prosecute all the good things they have promised.

Mr Speaker, to that end, I would pray you to make some consequential directives relative to the Statement our Colleague made for us to pry further into it and appropriate it in a manner that can add on to the revenue that we could generate as a nation.

I, once again, want to commend Mr Awuku for the good Statement put out and to, again, pray you to ensure that we get to the bottom of it. I want to suggest if, pending the formation of our Committees—I used the word “pending” because I am choosing my words carefully. Pending the formation of our Committees, if it finds favour with you, this may have to be looked at either by the Committee on Finance, the Budget Committee or any other Committee the Speaker deems appropriate. It is an important matter, especially when it goes to the core of issues of revenue generation.

Mr Speaker, revenue generation has been a problem for this country for a very long time, and it is often said that we overtax the formal sector. Experts have said that it is a lazy way of raising revenue to prosecute public agenda and public business. So, this might also be one of the opportunities that we can look at how we can increase our revenue.

3.29 p.m.

Mr Speaker, I would humbly conclude and suggest that you make some directives so that we do not leave this Statement only with the commentaries but, that it would ultimately lead to something significant in terms of the revenue generation of this country.

I thank you, Mr Speaker, for recognising me.

Mr First Deputy Speaker: Hon Majority Chief Whip?

Mr Dafeamekpor: Mr Speaker, thank you for the opportunity to make some comments in respect of the Statement ably made by Mr Samuel Awuku. Indeed, in addition to the orthodox lottery system that we know, the online lottery system is fast catching up with the people who patronise it. Mr Awuku was able to give some statistics to back the essence of making the Statement on the Floor and indeed, it is founded. We are a Government seeking to enlarge our sources of revenue and online business is a veritable one.

Indeed, if we take Kenya for instance, it is projected that this year, the online lottery system alone would give them about US\$5million. In 2022, Tanzania got as much as TZS96 billion paid to the Government by the Gaming Board of Tanzania. It is a remarkable source of revenue generation. This year, in Nigeria, it is projected that the online gaming industry will give them US\$100.3 million. So, in addition to the statistics that he and other Hon Colleagues have given, the indicators from Nigeria, Tanzania and Kenya clearly point to the fact that it is an area that we should pay attention to by way of revenue generation.

I agree with my Colleague, the Hon Minority Chief Whip that, maybe as a House, we should refer this to the appropriate Committee to look into it and advise the House in a report, so that when the agencies appear before us—in addition to exercising our oversight duty, you know that we also offer some performance enhancement indicators so, we can direct them to where they should look to.

Mr Speaker, with these words, I thank you for the opportunity to make my comments in support of the Statement made.

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

Let me add my voice in commending the maker of the Statement for bringing his work experience in the National Lottery Authority to bear on how as a nation, we could reform and regulate the sector for the benefit of our dear nation.

Hon Members, the Statement touches on the strategic use of lottery proceeds, protecting minors and fighting addictions to staking lotto, activities of illegal lotto operators and issues relating to tax. Hon Members, I would urge upon the Ministry of Finance and the National Lottery Authority to collaborate in promoting responsible lottery practices and research into innovative and responsible lottery products which would enhance the industry's contribution to Ghana's economy. Once again, I thank the maker of the Statement.

Hon Members, I proceed to take the second Statement standing in the name of Alhaji Muhammed Bawah Braimah, Member of Parliament (MP) for Ejura Sekyeredumase Constituency, on the destruction of Ejura Police Station by rampaging youth on the 11th January, 2025.

Mr Dafeamekpor: Mr Speaker, unfortunately, the Hon Member—So, with your leave—

Mr First Deputy Speaker: Hon Members, in his absence I will proceed to give the Floor to Dr Sebastian Ngmenenso Sandaare, MP for Daffiama/Bussie/Issa Constituency. He has a Statement on meningitis.

Meningitis Outbreak in the Upper West Region

Dr Sebastian Ngmenenso Sandaare (NDC — Daffiama/Bussie/Issa): Thank you very much, Mr Speaker, for giving me the opportunity.

Mr Speaker, Meningitis remains a significant public health concern in Ghana, particularly in the northern regions where periodic outbreaks occur. The disease, caused by the inflammation of the meninges due to bacterial, viral, fungal, or parasitic infections, often leads to severe complications, including neurological damage and death if not promptly treated. The northern part of Ghana is located within the African meningitis belt, which stretches from Senegal to Ethiopia, making it highly susceptible to recurrent epidemics.

The disease is characterised by sudden onset of fever, headache, stiff neck, nausea, vomiting, and in severe cases, seizures and coma. Despite efforts to control and prevent outbreaks, meningitis continues to pose a major health threat, especially in rural communities where healthcare access is limited

Mr Speaker, several factors contribute to the spread of meningitis in Ghana, making the disease difficult to control in certain regions. Some of these factors include:

Climatic Conditions — Meningitis outbreaks are more frequent during the dry Harmattan season that is, November to April, when dust, low humidity, and strong winds irritate the respiratory tract, making it easier for bacteria to invade the bloodstream and reach the meninges.

Overcrowding — High population density in schools, prisons, refugee camps, and poorly ventilated homes facilitates the transmission of meningitis, as the disease is spread through respiratory tract.

Poor Healthcare Access — Many rural communities lack adequate healthcare infrastructure, making early detection and treatment of meningitis cases difficult. Delayed medical intervention increases mortality rates.

Socioeconomic Conditions — Malnutrition, poverty, and inadequate sanitation weaken the individuals' immune system and increase susceptibility to infections. Poor hygiene and lack of clean water also contribute to the spread of meningitis.

Limited Vaccine Coverage — While vaccines such as MenAfriVac have reduced cases of serogroup A meningitis, other serogroups like W135 and X remain a concern. The emergence of new strains poses challenges in achieving full protection against the disease.

Cross-Border Movement — Ghana shares borders with Burkina Faso, Togo, and Côte d'Ivoire, all of which experience periodic meningitis outbreaks. Movement of people across these borders increases the risk of transmission.

Mr Speaker, the Upper West Region is one of the most affected areas in Ghana, with meningitis outbreaks occurring frequently. The region's geographical location, climatic conditions, and limited healthcare infrastructure contribute to the high burden of the disease. The Upper West Region remains one of the most affected areas in Ghana, experiencing frequent meningitis outbreaks over the years.

3.39 p.m.

The region's geographical location within the African Meningitis Belt, coupled with harsh climatic conditions and limited healthcare infrastructure, contributes significantly to the high disease burden.

Data from 2012 to 2025 highlights the fluctuating nature of meningitis outbreaks in the region. The number of suspected cases peaked in 2016, with 734 cases reported, followed by 425 cases in 2017, and 428 cases in 2018. In 2020, a severe outbreak recorded 421 suspected cases, with 50 deaths, resulting in a case fatality rate of 13.3 per cent. Although the number of suspected cases significantly declined in 2022, which was 131 cases, and 2023, with 97 cases, the case fatality rates remained concerning, with 10.3 per cent in 2023. The year 2025 has seen a significant rise in suspected cases.

Mr Speaker, we are in epidemiological week 6 and the region has recorded 60 suspected cases and 14 deaths, giving a very high case fatality rate of 23.33 per cent.

This calls for urgent enhanced disease control measures. I, therefore, appeal to the Government, Ministry of Health (MOH), World Health Organization (WHO), United Nations Children's Fund (UNICEF), and other stakeholders to mobilise technical, financial, and logistical support as a matter of urgency to enable the region to control and prevent the outbreak.

Mr Speaker, meningitis outbreaks in Ghana often results in high mortality rates due to several key factors including, delayed health-seeking behaviour, emergence of new stereotypes, shortage of essential medicines, limited laboratory capacity, and overburdened health staff due to inadequate distribution of health workers across the country, especially in the Upper West Region.

Mr Speaker, strengthening the overall health systems in epidemic-prone regions is urgently needed to address the negative impact of perennial meningitis outbreaks. In this regard, I make the following proposals: there should be meningitis outbreak preparedness; MOH should identify innovative ways of ensuring equitable distribution of health workers and other resources. Public health education should be implemented and enforced; and improved healthcare infrastructure to enhance case management, investments in healthcare facilities, laboratory diagnostics, and the training of healthcare workers should be prioritised. Also, there should be cross-border collaboration with other countries; and the Government should establish a Public Health Emergency Fund, which would ensure sustained funding for current and future outbreaks.

Mr Speaker, in conclusion, the meningitis situation in the Upper West Region has resulted in high mortalities, and needs urgent intervention by Government and other stakeholders.

I thank you for the opportunity.

Mr First Deputy Speaker: Thank you very much, Hon Member. The floor is now opened for contributions, subject to Order 93(5) and the agreed time limitation.

Yes, Dr Mark Kurt Nawaane?

Dr Mark Kurt Nawaane (NDC — Nabdam): Mr Speaker, I thank you for the opportunity to contribute to this important Statement, and I thank Dr Sandaare for the Statement.

Mr Speaker, I am from the Upper East Region; the Upper East and Upper West Regions are neighbours. It is said that when one's neighbour's beard is burning, it is advisable to fetch water and put it by one's own. So, what is happening in the Upper West Region, most often, would happen in the Upper East, North East, and Northern Regions. We are all together in this fight.

Mr Speaker, meningitis is a serious and potentially fatal disease, and worldwide, up to 500 million people are at risk of being infected, and we have about 1.2 million cases in a year. That is, 20 cases per 100,000 of the population and indeed, this sickness can cause severe brain damage. Mr Speaker, if we go to the first paragraph of the Statement, and with your permission, I quote: "The disease is characterised by sudden onset of fever, headache, stiff neck, nausea, vomiting, and in severe cases, seizures and coma."

In other words, the disease starts like any other febrile illness and when one goes to the hospital, it could be mistaken

for malaria or typhoid and usually, the patients do not even want to stay. When they are asked to stay at the hospital, they do not want to stay; they want to go home. Then they come with late presentation.

I would advise practitioners that whenever they meet such cases, they should, please, try to detain the patient because by evening, other symptoms like the neck-stiffness, seizures, and coma would join. They would show up later or in 24 hours. If the practitioners do not detain the patient, some of them would go home and would not come back to them. The patients would say they went to the hospital and even with that, the situation is very bad.

Now in the management of these cases, the problem we have as a nation and the world is that we produce vaccines to treat or prevent the cases, but the bacteria continues to change its nature, and that is what we call the new stereotypes that come up. Those stereotypes do not respond to the vaccines that were previously used. So, in one or two years, we would produce a vaccine which works for some time, then new stereotypes come, and it would no longer work. For so long, we have continued to talk about outbreaks and we continue to have outbreaks; so, we should take notice of it.

Now, the infectivity and severity depend on the social conditions. In other words, malnutrition, poverty, poor hygiene, and even poor accommodation are factors that lead to an exacerbation of the cause. If one goes to our own

settlements, “the Zongo”, where we build our houses to face different directions, the windows are very small, and there is no or poor ventilation; we would have this case spreading very fast. So, we should advise ourselves about how we build our houses and plan our settlements.

3.49 p.m.

The other issue at hand is the late reporting at the hospitals by the patients. Just like I said earlier, most of the patients do not report early; they sit in the house and carry out self-medication. But even when they have reported at the hospital, let me confess that we sometimes spend so much time trying to diagnose the disease. We go to the lab and do other things, and before we know it, there are complications. But from the clinical symptoms or signs of meningitis; neck stiffness, coma, especially neck stiffness, when it comes with vomiting and headache, then my good friend practitioner, should better start the treatment of meningitis; and the drugs are quite effective.

Another problem we face as a nation is that after one starts the treatment for most of the patients, they cannot afford the medication. So, I am calling on the Government of the day that whenever we suspect that there is an outbreak of meningitis, we should declare free treatment for such patients and treat them as such.

Mr Speaker, the last but not least is my advice to parents. This sickness affects many children and most of us

have children or have heard neighbours who say that they have three children, two of them are very good in school, but one is very bad and sometimes, wants to beat them. That behaviour is not normal; please, check back and see whether in his childhood, he did not encounter meningitis. So, the complications are hearing loss, seizures and learning difficulties.

Thank you, Mr Speaker for the opportunity.

Mr First Deputy Speaker: Thank you. Yes, Mr Cletus Seidu Dapilah?

Mr Cletus Seidu Dapilah (NDC — Jirapa): Thank you, Mr Speaker for the opportunity to contribute to the Statement ably made by the venerable MP for Daffiama/Bussie/Issa, Dr Sebastian Ngmenenso Sandaare.

Mr Speaker, this well researched Statement is what we need to combat this menace as far as this issue is concerned. CSM as it is popularly called, or meningitis, mostly raises its ugly head in the Upper West Region every year, and I want to associate myself with the maker of the Statement. I am particularly worried about the over-populated Senior High Schools (SHS), many of the classrooms, dormitories and dining halls are over-populated and I want to call or use this august House to call on the Government; particularly the Ministry of Health, the Ministry of Education, the law enforcement agencies and the Ministry of Finance to collaborate.

Mr Speaker, we are talking about inadequate logistics here. So I think these agencies should collaborate, so that we can get the necessary logistics to combat this menace, so that it does not raise its ugly head in the Upper West Region.

Mr Speaker, I was a District Chief Executive for the Jirapa constituency in the year 2015/2016, when there was a meningitis outbreak in the district. I was told then that the virus kept changing. You would hear of CSM today, then another year, it is a different CSM. So, the World Health Organisation (WHO) that is responsible for manufacturing the vaccines usually do not manufacture the vaccines beforehand. I am sure there is no vaccine for the current one in the Upper West Region because they would have to know which type of CSM or meningitis it is before they start producing the vaccine, and airlift it to the region in order to give it out to the victims.

Mr Speaker, I want to also say that the security agencies need to be empowered or provided with the necessary logistics so that they can do surveillance within the border regions. This is because we share borders with Côte d'Ivoire and other countries. Mostly, those who are affected can bring it in. So we need the security agencies and the Ghana Health Service to collaborate in order to deal with these issues too at the borders.

Mr Speaker, on this note, I thank you for the opportunity.

Mr First Deputy Speaker: Thank you very much. I recognise Dr Fred Kyei Asamoah.

Dr Fred Kyei Asamoah (NPP — Offinso North): Thank you, Mr Speaker, and thanks to the maker of the Statement regarding meningitis. Meningitis outbreak remains a public health challenge in Ghana, especially in the northern regions. These regions lie in what we call the meningitis belt, and it covers almost 25 countries in Africa and it looks like almost 450 million people that can be affected. Meningitis outbreak is usually seen within the dry seasons; that is from November to May each year. That means we should be expecting that people would be affected with this outbreak; and we know that during the COVID-19 outbreak, what we call the Global Fund established some response for COVID-19.

As a country that knows we would experience meningitis outbreak, we can establish a response, so that we get ourselves ready; we do not get to wait till there is an outbreak. In the western world where they tend to have an annual infection with flu, they tend to vaccinate people two to three months before the flu outbreak each year. So, we as a country can also establish a response, so we do not wait till the outbreak before we start talking about it. But a month or two before the expected outbreak, we can kick in our response system. We also ought to look at the treatment that has to be done immediately one identifies such an outbreak or is infected.

Mr Speaker, I think the other time I spoke about the fact that a declaration in Abuja requires us to allocate 15 per cent of our National Budget towards health. This is a serious issue, because every

healthy nation is a developed nation, and if we are not healthy, we cannot do anything. As such, we need to have some consequential orders to make sure that enough funds are allocated to this outbreak. Not only meningitis but also, all other health issues and epidemics that we expect to experience within the year.

Thank you, Mr Speaker.

Mr First Deputy Speaker: Thank you. Yes, Supt Rtd Peter Lanchene Toobu?

Supt Rtd Peter Lanchene Toobu (NDC — Wa West): Thank you, Mr Speaker for the opportunity to contribute to this Statement ably made by the Hon Member for Daffiama/Bussie/Issa, Dr Sebastian Ngmenenso Sandaare. A three term MP who is in the Chamber serving as a motivation for those of us who survived CSM. It is this motivation that is giving me the energy to rise to speak.

Mr Speaker, the Hon Member who presented the Statement survived CSM, and when he lived through it, he decided to become a medical doctor and today, I am excited that he is in the Chamber reading a Statement about CSM.

Mr Speaker, Meningitis is a 65-year-old disease that we discovered affected the northern Ghana. Mr Speaker, 65 years ago, we started to realise that CSM could kill and has been killing. Sixty-five years down the line, all we do is to make Statements year upon year and people would continue to die. I have survived it; many of the MPs in this Chamber from northern Ghana have survived it, and we

thank God we have found ourselves in a law-making institution like Parliament, and are speaking to make sure that Ghanaians would listen.

Mr Speaker, there are many things involved in CSM; the prevalent rate is from November to April.

3.59 p.m.

That is just about half of the year; six months, from November to April every year. What is surprising is that there is not a single year that you would not hear the story of CSM; but in 1960, the story was really a very horrific one and the next ones that followed was in 1997, 2010, 2016. We are in 2025, and the story is not different.

Mr Speaker, if you go up north, we talk about the fact that CSM is a climate change-related disease; and you would still find people living in house that are poorly ventilated. I think that we should be challenged as a people to begin to talk to our engineers to craft out better housing schemes, better architecture such that one can even sleep in his or her room at even a temperature of 40 degrees and above without being exposed to CSM.

Mr Speaker, poor health care is another challenge as rightly elucidated by the maker of the Statement, and I am so happy that the past Government under President John Dramani Mahama, introduced Community-based Health Planning and Services (CHPS) compound concept. Primary health care is a challenge to many communities in

Ghana, and I want to believe that now that he is back as the President, we would go back to that policy to ensure that every village in this country would have at least a CHPS compound to deal with primary health care issues.

Mr Speaker, research must be continuous; the disease is changing name and image day in and day out. Vaccines are developed and they become useless within a year. What it means is that we should continue to research and develop relevant vaccines to ensure that any time a new strain emerges, we would have the medical capacity to deal with it.

Mr Speaker, if I would want to conclude, I would talk about funding. Public health emergencies are serious issues facing all countries in Africa, particularly Ghana; but when it comes to funding, we seem not to be having the money enough to deal with funding issues.

COVID-19 came, and we had the COVID-19 Trust Fund. We are still paying for the levy when the emergency is far gone. What would be wrong, if we repurpose, as he stated, that fund into a public health fund? When issues like CSM emerge, people do not even have money to go to the hospital to receive primary care. Such people should be treated free and discharged without any cost; but where is the money? Can we continue to borrow to fund our expenses? How can we continue to borrow to consume as a country? Let us do the best that we can to repurpose this particular COVID-19 Trust Fund to serve a purpose that would save lives.

On this note, Mr Speaker, I am so grateful.

Thank you.

Mr First Deputy Speaker: Thank you very much.

Leadership, any direction?

Minority Chief Whip (Mr Frank Annoh-Dompreh): Mr Speaker, I am grateful.

Mr Speaker, let me commend the maker of the Statement who, as I listened to Colleagues, is a proud survival of CSM, and I am very proud about that. We are grateful to the Hon Member, and we doff our hat to him.

Mr speaker, in this time and age, it is quite surprising that this is coming to us as nation. We are all aware about the pronouncements and resolutions taken by the World Health Organization (WHO) on such basic diseases that have been affecting the world. The global public health template that Ghana has signed unto—I am saddened that we have lost 14 lives or so as the maker of the Statement intimated to, and it gets sadder when one comes face-to-face with the fact that it is a repeated cycle. It is something that we cannot pretend about. It has been happening; it happens in the particular month of the year, so it is known. Ghana Health Service (GHS) cannot pretend about it, and it is worrying that this matter appears to be getting out of hand.

I do not wish to rehash what the maker of the Statement have said but just to solidarise with him and to particularly make a call that we have a Minister of Health who has been nominated, vetted and been sworn in by the President.

Mr First Deputy Speaker: Hon Member, I think the Minister-designate is yet to be sworn in.

Mr Annoh-Dompreh: All right.

Mr Speaker, be it as it may, we still have the Ghana Health Service. President Barrack Obama came to these shores of this country and told us that we must make institutions work in this country, so we do not have the Minister-designate sworn in, but we have the Ghana Health Service. We cannot always be waiting on the politicians and, oftentimes, we lazily put the blame on the politicians. We have dedicated public health service, and people who are paid by the tax payers' money, and it cannot be the case—I would have zeroed in on the Minister, but, to the extent that he has not be sworn in, I would want to be fair to him.

Mr Speaker, there must be a way—The Ghana Health Service should come and explain to us. Is it the case that we are lacking vaccines? Is it the case that they never knew about this? Are they sleeping on the job? What is happening? They must come and give us some reasons, and we can make the argument that, well, we should wait for the Minister to be sworn in, but I would differ. The leadership of the Ghana Health Service should come and tell us why this matter is at where it is.

Mr Speaker, in this time and age, we cannot be allowing such basic ailments to be taking lives. Interestingly, Upper East shares border with Upper West, and if we are not careful, it would result into a calamity, so I want to humbly suggest that—Earlier, I had prayed you—I do not know if this prayer would find favour with you, in the face of the fact that we do not have the Minister sworn in. Can we invite the Ghana Health Service? If for nothing at all, they should—This is an ailment that is taking the lives of innocent Ghanaians, and, in part of the world, statistics have shown that poverty is so pronounced there, so they may not even have the wherewithal to procure the vaccines, so, necessarily, the Ghana Health Service must go to the aid of the poor people at the Upper West; otherwise, the matter would get out of hands.

Mr Speaker, to that end, I want to pray you that you allow or direct the Ghana Health Service to come and brief this House, that is Committee of the Whole. We do not have our Committees; I would have said that the Committee on Health should meet with them and, probably, present a small Report to us. They should come and tell Parliament or the Committee of the Whole what the case is. Are they on top of the situation? Why is it that even though they know this matter is seasonal, and it happens in a particular month of the year. Is it the case that we slept or we lack vaccines?

What are the issues, so that this House can exert our powers and ensure we bring some control to this? I am very saddened that lives have been lost as a result of

this, and something has to be done. One can see sadness all over the Hon Member. Let us go to his aid—*[Interruption]*—He is sad, and I can see it. This House must go to his aid, and we must invite the Ghana Health Service to do the needful.

Mr Speaker, I thank you.

Mr First Deputy Speaker: Thank you very much.

Majority Chief Whip?

Mr Dafeamekpor: Mr Speaker, may I, with your leave, yield my time to Prof Beyuo?

Mr First Deputy Speaker: Very well

Mr Dafeamekpor: Thank you.

Mr First Deputy Speaker: Yes, Hon Member?

Prof Titus Kofi Beyuo (NDC — Lambussie): Thank you very much, Mr Speaker, and I would like to thank the Majority Chief Whip for yielding to me, and I want to commend the maker of the Statement and the earlier contributors.

Mr Speaker, my constituency, Lambussie, is also affected; we fall within the meningitis belt and, in Africa, it moves all the way from Senegal to Ethiopia, so several countries, as have been mentioned earlier, are affected.
4.09 p.m.

Mr Speaker, I just want to draw the attention of my Colleague doctors to the

fact that, the dominant causative organism for this current outbreak appears to be strep pneumonia, which is streptococcus pneumonia, and this organism is slightly different from the *Neisseria meningitidis* that have always been the cause of this condition. The difference in this also affects the clinical spectrum; earlier speakers alluded to the presentation of neck stiffeners, hearing loss and fever, but this organism has an atypical presentation. So, if clinicians are waiting to see these symptoms, unfortunately, they may pick it up very late. Unfortunately, this strain is also very virulent and quite fatal, unlike the common organism that we know which would present with the early symptoms and does not kill as much, strep pneumonia appears to be very fatal. But the good news is that it does not spread as rapidly as the earlier organism I mentioned.

Mr Speaker, it is therefore important that clinicians are aware of these differences and people in the affected areas must report early. There is an effective treatment for it, and when the appropriate antibiotic is given, people can be cured, but if not given early, then the long-term effect of cognitive problems, nerve problems, deformities and hearing loss would persist. But I want to commend the Ghana Health Service and inform this House that I have become aware that the Acting Director-General of the Ghana Health Service has declared free treatment for the current outbreak in the affected districts where persons who do not have even the National Health Insurance—The

treatment is covered by the National Health Insurance Scheme, but persons who do not have the Health Insurance would still get treated for free and I think that the Government needs to be commended for that action.

Mr Speaker, it is expected each year, and preparations have been far advanced; but this current strain, unfortunately, cannot be prevented by the existing vaccines. This would then call into focus the National Vaccine Institute that was established by the previous administration, which I think is a sensitive national institution that should come into action in situations like this and develop vaccines which are suitable to our local context.

Mr Speaker, before I wrap up, I want to plead with you and join the plea of the Minority Chief Whip but slightly in a different direction, that in the absence of a health committee, if it would please the Speaker, this House would constitute a committee to go to the site and see what is happening because we do not have a Minister for Health yet and the Director-General for the Ghana Health Service is in an acting capacity. I know they have assembled a team of epidemiologists to handle this, but if it pleases the House, then a smaller committee can be constituted in the interim to visit the affected districts, see what is on the ground, and report back to the House so that we can still play some oversight role to ensure that we are a voice for the voiceless.

Thank you very much.

Mr First Deputy Speaker: Thank you very much, and let me thank the maker of the Statement for ably bringing to the Floor, the outbreak of meningitis in the Upper West Region.

Hon Members, the causes, effects and some recommendations as to how the disease can be combated are suggested in the Statement. Consequently, I would direct that the Statement be referred to the Ministry of Health. They are to take immediate action to create awareness, conduct contact tracing, intensify the provision of medical care to the affected victims and consider the establishment of the Public Health Emergency Fund. I so direct.

Hon Members, we have come to the end of Statement time. Any indication?

Mr Dafeamekpor: Mr Speaker, we were hoping that you would have given the Ghana Health Service some indications as to the timeline on when they should come to the House to brief us on this matter.

Mr First Deputy Speaker: Hon Member, I chose my words very carefully; I would have done that if the Minister for Health had been sworn in, but as we speak, he is yet to be sworn in. That is why I am hesitant to give timelines within which he should report. There may be consequential directives after the Minister for Health is sworn in.

Mr Dafeamekpor: Very well, Mr Speaker. We are guided. In view of the fact that we have come to the end of Statement time, we are entirely in your

hands and we pray that we adjourn the House.

Mr First Deputy Speaker: Hon Member, are you moving a Motion? We have not gone beyond five hours.

Mr Annoh-Dompreh: Mr Speaker, ordinarily, I would have agreed with my Colleague, but it is safe to say that the Second Deputy Speaker had admitted a Statement in the name of Dr Stephen Amoah. Unfortunately, he could not transmit same to you—I just had a word with him, and he said he had sent an usher to bring a copy. Fortunately, I have a copy, so I have just minuted it and forwarded same to you. With your pleasure—

Mr First Deputy Speaker: Hon Member, we will do that tomorrow.

Mr Annoh-Dompreh: Thank you.

Majority Chief Whip (Mr Rockson-Nelson Etse Kwami Dafeamekpor): Mr Speaker, considering that it is past 2 p.m., we are entirely in your hands, but the mood of the House is we adjourn to tomorrow. Thank you.

Minority Chief Whip (Mr Frank Annoh-Dompreh): Mr Speaker, I beg to second the Motion.

Question put and Motion agreed to.

ADJOURNMENT

The House was accordingly adjourned at 4.17 p.m. till Friday, 7th February 2025 at 10.00 a.m.

Editor's Note

This *Official Report* was corrected by the House on 20th February, 2025, as follows:

- a) Column 30, paragraph 2, line 1
“colleagues” was corrected to
“colleague”
- b) Column 45, paragraph 5, line 3
“surviva” was corrected to
“survival”