



SIXTH NATIONAL ASSEMBLY

PARLIAMENTARY

DEBATES

(HANSARD)

(UNREVISED)

FIRST SESSION

TUESDAY 22 MAY 2018

CONTENTS

PAPERS LAID

QUESTIONS (*Oral*)

MOTION

STATEMENT BY MINISTER

BILLS (*Public*)

ADJOURNMENT

THE CABINET

(Formed by Hon. Pravind Kumar Jugnauth)

Hon. Pravind Kumar Jugnauth	Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development
Hon. Ivan Leslie Collendavelloo, GCSK, SC	Deputy Prime Minister, Minister of Energy and Public Utilities
Hon. Sir Anerood Jugnauth, GCSK, KCMG, QC	Minister Mentor, Minister of Defence, Minister for Rodrigues
Hon. Mrs Fazila Jeewa-Daureeawoo	Vice-Prime Minister, Minister of Local Government and Outer Islands
Hon. Seetanah Lutchmeenaraidoo, GCSK	Minister of Foreign Affairs, Regional Integration and International Trade
Hon. Yogida Sawmynaden	Minister of Technology, Communication and Innovation
Hon. Nandcoomar Bodha, GCSK	Minister of Public Infrastructure and Land Transport
Hon. Mrs Leela Devi Dookun-Luchoomun	Minister of Education and Human Resources, Tertiary Education and Scientific Research
Hon. Anil Kumarsingh Gayan, SC	Minister of Tourism
Dr. the Hon. Mohammad Anwar Husnoo	Minister of Health and Quality of Life
Hon. Prithvirajsing Roopun	Minister of Arts and Culture
Hon. Marie Joseph Noël Etienne Ghislain Sinatambou	Minister of Social Security, National Solidarity, and Environment and Sustainable Development
Hon. Mahen Kumar Seeruttun	Minister of Agro-Industry and Food Security
Hon. Ashit Kumar Gungah	Minister of Industry, Commerce and Consumer Protection
Hon. Maneesh Gobin	Attorney General, Minister of Justice, Human Rights and Institutional Reforms
Hon. Jean Christophe Stephan Toussaint	Minister of Youth and Sports
Hon. Soomilduth Bholah	Minister of Business, Enterprise and Cooperatives

Hon. Marie Roland Alain Wong Yen Cheong, MSK	Minister of Social Integration and Economic Empowerment
Hon. Premdut Koonjoo	Minister of Ocean Economy, Marine Resources, Fisheries and Shipping
Hon. Soodesh Satkam Callichurn	Minister of Labour, Industrial Relations, Employment and Training
Hon. Purmanund Jhugroo	Minister of Housing and Lands
Hon. Marie Cyril Eddy Boissézon	Minister of Civil Service and Administrative Reforms
Hon. Dharmendar Sesungkur	Minister of Financial Services and Good Governance
Hon. Mrs Roubina Jadoo-Jaunbocus	Minister of Gender Equality, Child Development and Family Welfare

PRINCIPAL OFFICERS AND OFFICIALS

Madam Speaker	Hanoomanjee, Hon. Mrs Santi Bai, GCSK
Deputy Speaker	Teeluckdharry, Hon. Kalidass
Deputy Chairperson of Committees	Jahangeer, Hon. Ahmad Bashir
Clerk of the National Assembly	Lotun, Mrs Bibi Safeena
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Serjeant-at-Arms	Pannoo, Mr Vinod

MAURITIUS

Sixth National Assembly

FIRST SESSION

Debate No. 08 of 2018

Sitting of Tuesday 22 May 2018

The Assembly met in the Assembly House, Port Louis at 11.30 a.m.

The National Anthem was played

(Madam Speaker in the Chair)

PAPERS LAID

The Prime Minister: Madam Speaker, the Papers have been laid on the Table.

A. **Prime Minister's Office**

- (a) Certificate of Urgency in respect of The Use of Pesticides Bill (No. VI of 2018). (In Original)
- (b) The Financial Statements and Annual Report of the Mauritius Ex-Services Trust Fund for the 18-month period 30 June 2017.

B. **Ministry of Energy and Public Utilities**

The Annual Report of the Central Electricity Board for the year 2015.

C. **Ministry of Local Government and Outer Islands**

The Annual Report of the Outer Islands Development Corporation for the year ended 31 December 2015.

D. **Ministry of Public Infrastructure and Land Transport**

The Annual Report of the Bus Industry Employees Welfare Fund (BIEWF) for the 18-month period ended 30 June 2017.

E. **Ministry of Health and Quality of Life**

The Dental Council (Medical Institutions) (Amendment No. 2) Regulations 2018.
(Government Notice No. 51 of 2018)

F. **Ministry of Arts and Culture**

The Annual Reports of Le Morne Heritage Trust Fund for the years ended 31 December 2013 to 31 December 2015.

G. **Ministry of Industry, Commerce and Consumer Protection**

- (a) The Rodrigues Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment No. 11) Regulations 2018.
(Government Notice No. 52 of 2018)

- (b) The Rodrigues Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment No. 12) Regulations 2018. (Government Notice No. 53 of 2018)
- (c) The Rodrigues Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment No. 13) Regulations 2018. (Government Notice No. 54 of 2018)
- (d) The Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment) Regulations 2018. (Government Notice No. 55 of 2018)
- (e) The Rodrigues Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment No. 14) Regulations 2018. (Government Notice No. 56 of 2018)
- (f) The Rodrigues Consumer Protection (Control of Price of Taxable and Non-taxable Goods) (Amendment No. 15) Regulations 2018. (Government Notice No. 57 of 2018)

H. **Ministry of Youth and Sports**

The Annual Report of the National Youth Council for the period 01 January 2016 to 30 June 2017.

ORAL ANSWERS TO QUESTIONS**PETROLEUM PRODUCTS – FUNDS CONTRIBUTION, TAXES & LEVIES**

The Leader of the Opposition (Mr X. L. Duval) (*by Private Notice*) asked the hon. Prime Minister, Minister of Home Affairs, External Communication and National Development Unit, Minister of Finance and Economic Development whether, in regard to petroleum products, he will state –

- (a) the amount of funds contributed to the –
 - (i) Consolidated Fund;
 - (ii) Build Mauritius Fund;
 - (iii) Maurice Ile Durable Fund;
 - (iv) Road Development Authority;
 - (v) Rodrigues Subsidy Fund, and
 - (vi) Subsidy Fund on Rice and Flour, and liquid petroleum gas.

from the sale thereof, since 01 January 2016 to 31 July 2017;

- (b) the total amount of dividends received from the State Trading Corporation since 01 January 2016 to date, and
- (c) if consideration will be given for the reduction of taxes and levies on same.

The Minister of Industry, Commerce and Consumer Protection (Mr A. Gungah):

Madam Speaker, I shall reply to the Private Notice Question.

Madam Speaker, we have witnessed a constant increase in the price of petroleum products since November 2016 when the Organisation of Petroleum Exporting Countries (OPEC) agreed to reduce the production and supply of crude oil. This agreement was renewed in 2017 for a period of one year.

And more recently, it has surged mainly due to the unstable geopolitical situation.

Moreover, following the decision of the USA to withdraw from the nuclear agreement with Iran, the price of petroleum products on the world market flared up by 3USD per barrel in one day to reach on Thursday 17 May 2018 its highest level since 2014.

Regarding the rate of exchange of the dollar, it has been above Rs35/USD for the month of May 2018, as compared to the rate of Rs31/USD in 2014.

There was a constant rise in the price of petroleum products on the world market since end of 2016 which caused the Price Stabilisation Account (PSA) to show losses of Rs45.1 m. as from May...

Mr X. L. Duval: On a Point of order, Madam Speaker, this question has nothing to do with the price of petrol on the world market. Nowhere does it mention that! I do not understand, firstly, why the question has been passed on to the Minister of Industry, Commerce and Consumer Protection and secondly, why he is wasting the time of the House telling us about the price of petrol on the world market.

(Interruptions)

Madam Speaker: Order, please! Order, please!

(Interruptions)

I have taken note of...

(Interruptions)

Hon. Members, I have taken note of the point raised by the hon. Leader of the Opposition, but I fully agree that, with regard to this question, it is broad-based; it says 'whether in regard to petroleum products' and then 'the amount of funds contributed'. So, I believe that the Minister has perfectly the right to show us what is on the world market before he comes...

(Interruptions)

Mr Gungah: Madam Speaker, there was a constant rise in the price of petroleum products on the world market since end of 2016 which caused the Price Stabilisation Account (PSA) to show losses of Rs45.1 m. as from May 2017. These losses have increased up to Rs206.8 m. in August 2017. And as at 15 May 2018, the PSA was in deficit of Rs230.4 m.

All these factors, Madam Speaker, have impacted heavily on the retail prices of Mogas and Gas Oil locally. Taking into consideration the three and a half year peak in the world prices of petroleum products, the PPC, which met on 15 May 2018, had no alternative but to recommend an increase in the price of Mogas and Gas Oil respectively by 9.94% and 9.97%.

Madam Speaker, as a Small Island State we are vulnerable and subjected to fluctuations in the world market price of petroleum products.

Madam Speaker, with regard to part (a) of the question, the amount of funds contributed in regard to petroleum products for the period 01 January 2016 to 31 July 2017 is as follows -

- (i) Consolidated Fund Rs9.067 billion;
- (ii) Road Development Authority, the contribution is Rs1.332 billion;
- (iii) Rodrigues Subsidy Fund, the contribution is Rs303 m., and
- (iv) Contribution for Subsidy Fund on Rice and Flour is Rs2.039 billion.

With regard to the Build Mauritius Fund, an amount of Rs2.962 billion has been contributed for the period 01 January 2016 to 30 June 2017.

The Build Mauritius Fund was closed as from July 2017.

As regards the Maurice Ile Durable Fund, it is no longer operational since October 2015. Instead, the MID levy is credited directly to the Consolidated Fund. For the same period, an amount of Rs369 million was collected and contributed to the Consolidated Fund.

Madam Speaker, with regard to part (b) of the question, since 01 January 2016 to date, dividends to the amount of Rs1.25 billion have been paid by the State Trading Corporation.

With regard to part (c) of the question, as the Budget will be presented soon, it would not be appropriate for Government to reveal its fiscal policies now.

Mr X. L. Duval: Madam Speaker, firstly, I am shocked that the question has not been replied by the Minister of Finance as this question relates to financial policy, fiscal policy, how much money taxes and levies are taken out of petroleum products, not to do at all with the petroleum price, which everybody knows is increasing.

Madam Speaker, the first thing, will the hon. Minister agree that from the figures that he has given, an amount of Rs800 m. is taken monthly from the petroleum sales of the STC? This money *est un fardeau pour la population*; consumers pay Rs800 m. of taxes and levies out of petroleum products per month to the STC which then gives them to the Minister of Finance.

Mr Gungah: Madam Speaker, I think the hon. Leader of the Opposition is speaking of the taxes, levies and contributions that exist in the price structure for calculation of price of Mogas and gas oil. I would like to remind the hon. Leader of the Opposition that these taxes, most of them, have always been there.

(Interruptions)

Madam Speaker: Hon. Shakeel Mohamed!

Mr Gungah: And it does not exist only in Mauritius. Petroleum products have always been taxed, throughout the world. Madam Speaker, I think we have to be responsible. We do not have any natural resources in our country and we have to build Mauritius, we have to construct Mauritius, we have to bring development to the country and we need to have sources of money for that.

(Interruptions)

Madam Speaker: Order! Order!

Mr Gungah: We need to have sources of money for that.

(Interruptions)

Madam Speaker: Order, please!

(Interruptions)

Please, no crosstalking! Please, allow the hon. Minister to reply! Please proceed!

Mr Gungah: Madam Speaker, we need to have sources to fund all these projects. We are not like any other countries having natural resources. People have been comparing price in Italy recently with Mauritius and maybe they do not realise that, in other countries, either they have reserves of petrol or other mineral ores in their country.

Mr X. L. Duval: Madam Speaker, the Minister is wasting time. Rs5 was added to each litre of petrol since the election. And when the Build Mauritius Fund was increased from Rs1 to Rs4, it was discussed and even agreed in Government...

(Interruptions)

Exactly! That when the price of petrol would increase, this Build Mauritius Fund would either disappear or would be reduced to Rs1. Unfortunately, the then Minister of Finance is not there to confirm what I have said. It was agreed that it would be reduced again.

Mr Gungah: Madam Speaker, the hon. Leader of the Opposition, when he was Minister of Finance, introduced the Build Mauritius Fund. And he introduced it for several reasons, which I may cite: for road infrastructure, development in the transport sector, construction of drains and several. He was right because we needed that money to be able to

bring these developments. When we came to power in December 2014, the hon. Leader of the Opposition, at that time, was Deputy Prime Minister...

(Interruptions)

Madam Speaker: Hon. Rutnah!

(Interruptions)

Mr Gungah: ...and he knows very well the dramatical financial situation that we were facing. And he knows very well because he did campaign together with us to bring a better way of life for Mauritians, like water supply and all. He knows very well why the contribution was increased to Rs4. But let me say something, Madam Speaker, the money that has been contributed from the Build Mauritius Fund, most of that has been utilised just to repair the *gabegies* of the previous Government. I have figures with me, Madam Speaker; almost Rs2 billion have been utilised for the Bagatelle Dam, for the repair works of the Terre Rouge-Verdun, for remedial works of...

(Interruptions)

Madam Speaker: Please! No interruptions! Please!

(Interruptions)

I will appeal to both the Leader of the Opposition and Members on this side of the House to keep calm. This is a very important question.

(Interruptions)

Order, please!

(Interruptions)

Order! I am on feet. Can I appeal to the Leader of the Opposition and to the Minister as well to be concise and direct in their questions and answers as well?

Mr Gungah: The increase in the Build Mauritius Fund from Rs1 to Rs4, I must say, was endorsed by the Leader of the Opposition when he was Deputy Prime Minister.

Mr X. L. Duval: Madam Speaker, by not denying, he is confirming that it was meant to be reduced upon a subsequent price increase. Madam Speaker, I am going to come to *un vol* - that's why I said *un crime, un vol* - by the STC and it is good that he is replying because

the STC, Madam Speaker, since September 2016 - I understand why the Prime Minister has run away from the question ...

(Interruptions)

I understand! Because *il y a un vol*, there is a crime, *un arnaque*. Rs2.70 is being charged on every litre of fuel for subsidising rice, Madam Speaker. Rice! Ration rice for poor people!

Madam Speaker: Okay! So, your question is whether ...

Mr X. L. Duval: LPG! Flour! This money is not being used to subsidise, it is being kept by the STC, stolen by the STC ...

Madam Speaker: Hon. Leader of the Opposition!

Mr X. L. Duval: ... and only 70 cents ...

Madam Speaker: Hon. Leader of the Opposition, please sit down! I have just said that this question is a very important question. I am making an appeal once more to the Leader of the Opposition and to the hon. Minister just to be concise. We have the ABCDs of Parliament, you have to be accurate, you have to be brief, you have to be concise and you have to be direct. So, I appeal to you to do that.

Mr Gungah: Madam Speaker, I am really upset by the attitude of the hon. Leader of the Opposition. If subsidising rice, flour is *un crime ou un vol* then, I think, it is quite painful for the population.

(Interruptions)

Madam Speaker: No interruptions from this side!

Mr Gungah: But I must say that the amount of subsidy was increased from Rs1.50 to Rs2.70.

(Interruptions)

Madam Speaker: Hon. Leader of the Opposition, keep your calm!

(Interruptions)

Don't interrupt!

Mr Gungah: Let me say that in November 2014 there was a deficit in the subsidy and we had to increase it so that we could let the population benefit from it. We should remember that it is this Government ...

(Interruptions)

Madam Speaker: Please, don't make much comments! Hon. Leader of the Opposition, I am addressing myself to you! I have just heard you saying that the hon. Minister is a 'thief'. You cannot say that, you have to withdraw.

Mr X. L. Duval: I withdraw that. The STC is a thief!

(Interruptions)

Madam Speaker: No, you have to withdraw. I would not accept!

(Interruptions)

Hon. Leader of the Opposition ...

Order, please!

Mr X. L. Duval: Madam Speaker, I said that the Minister is a chief.

Madam Speaker: No, you did not say that!

(Interruptions)

I cannot see the relation between 'chief' and you are saying he is a thief.

Mr Gungah: I thank the hon. Leader of the Opposition.

(Interruptions)

Madam Speaker, I was saying that we increased, of course, the contribution for subsidy from Rs1.50 to Rs2.70.

(Interruptions)

Madam Speaker: Hon. Bhagwan!

Mr Gungah: But we should not forget that we reduced the price of LPG. One cylinder of 12 kg was reduced from Rs330 to Rs270 and, Madam Speaker, the Estimates for the year 2017/2018 concerning the subsidy on LPG is Rs589.4 m., that is, we are giving almost half a billion rupees to the population.

Mr X. L. Duval: Has the hon. Minister finished?

Madam Speaker: No, he has not finished!

Mr Gungah: The Leader of the Opposition ...

(Interruptions)

No, but the hon. Leader of the Opposition asked the question. The hon. Leader of the Opposition also questioned the reduction in rice and flour. We reduced the price of flour last year from Rs5.85 to Rs4 and from Rs5.85 to Rs4.85 for brown and white.

(Interruptions)

Madam Speaker: Order, please!

Mr X. L. Duval: Madam Speaker, the accounts of the State Trading Corporation are very clear; Rs1.9 billion was stolen from the petroleum account and only Rs700 m. was spent in that period to subsidise rice, flour and LPG. The rest of the money has been pocketed by the State Trading Corporation. Rs1.2 billion! I will table this, Madam Speaker, in case the hon. Minister does not understand. What I am saying is that out of the money charged to the petroleum account, Rs1.2 billion has been stolen from the poor and I would advise the Minister not to mislead the House.

(Interruptions)

Mr Gungah: Madam Speaker, what the Leader of the Opposition is saying is very serious because let me remind him that the accounts of the STC is audited by the National Audit.

Mr X. L. Duval: And these are the figures from there. So, the Director of Audit is confirming that it has been stolen, Madam Speaker. Now, I will come to a question, this is why I had also asked it to the Minister of Finance. The Bank of Mauritius has been using taxpayers' money like nobody's business, never before. Rs10 billion has been spent by the Bank of Mauritius deliberately in February, March and April. The Minister knows that, that is why he is running away. Rs11 billion of taxpayers money has been used by the Bank of Mauritius deliberately to depreciate the Rupee. Madam Speaker, from 01 February when there was a price structure of Rs33, the rupee has fallen to Rs35 out of deliberate action of the Bank of Mauritius. And this, Madam Speaker, what it represents...

Madam Speaker: So, you want an explanation on this? This is the question?

Mr X. L. Duval: ... is that, in fact, consumers are being asked to subsidise exports of sugar, exports of textiles, the financial services sector.

Madam Speaker: So, this is your question.

Mr X. L. Duval: That is again another theft.

Mr Gungah: Madam Speaker, though this question does not relate directly to the PNQ, I must say that the dollar is appreciating. Maybe the hon. Leader of the Opposition has forgotten, when he was in the previous Government, at a time when there was a high in the price of petroleum products, I think, it was in 2013.

(Interruptions)

Madam Speaker: It is not for you to say.

Mr Gungah: At that time, the price of petroleum products was very high, but the dollar was Rs31 something. Right now, the price has increased and the dollar is Rs35 something. So, the dollar is appreciating and definitely when the price of petroleum products is increasing and the dollar is increasing, so we are the one who are vulnerable.

(Interruptions)

Mr X. L. Duval: Madam Speaker, the rupee is being manipulated so that you can have a manipulated economic boom just before the elections and this is what is happening and it can be proven.

(Interruptions)

Madam Speaker: No, this is very serious!

Mr X. L. Duval: Madam Speaker, I will come now to the amount ...

(Interruptions)

Madam Speaker: Hon. Leader of the Opposition, please! If you are making such statements, I would tell you that you take your whole responsibility and that you would be in a position to prove and to show evidence that this is so.

Mr X. L. Duval: You only have to check the reports of the Bank of Mauritius to confirm that 318 million. dollars have been used to depreciate the rupee. Madam Speaker, this issue of the STC giving only Rs1 billion is not true again. The accounts of the STC, at page 7, Madam Speaker – the hon. Minister had to be an idiot not to understand - it says Rs2.15 billion has been paid in that same period, one and half years. And also, if you look at page 44, it says that another Rs900,000 is going to be paid...

(Interruptions)

Non! Rs900,000 is being paid, Madam Speaker.

(Interruptions)

Madam Speaker, the hon. Prime Minister has run away from the question and now...

(Interruptions)

...he wants to answer from a sitting position!

(Interruptions)

Madam Speaker: Please, order!

(Interruptions)

Order, please!

(Interruptions)

Order! Let's waste time if you want time to be wasted....

(Interruptions)

Order, please!

(Interruptions)

Hon. Members! Hon. Leader of the Opposition, please sit down!

(Interruptions)

Hon. Members, I have absolutely no problem - because we are running out of time - if you waste time by making interruptions. You are causing disorder in the House, you are making interruptions, I have absolutely no problem, but this PNQ will be limited to only half an hour.

(Interruptions)

Mr X. L. Duval: The hon. Minister has given the wrong information to the House. STC has confirmed that it has paid Rs2 billion, not Rs1 billion, as the hon. Minister said.

Mr Gungah: The hon. Leader of the Opposition is throwing figures just like that.

(Interruptions)

He should be aware that all amounts that are collected are, of course, sent to the Ministry of Finance and Economic Development. The Ministry of Finance and Economic Development distributes it according to projects and development...

(Interruptions)

...and let me also say that any money that is at the STC...

(Interruptions)

Madam Speaker: Hon. Rutnah, do not make comments!

Mr Gungah:.... is used to subsidise rice, flour and LPG...

(Interruptions)

Madam Speaker: Hon. Baloomoody!

Mr Gungah: ...in case there is rise in the prices. We know right now, the world market like for LPG is increasing. I have been told that Rs1.25 billion which the hon. Leader of the Opposition is saying...

(Interruptions)

Madam Speaker: Please!

Mr Gungah:...is for the period 01 January 2016 to 30 June 2017, that is, 18 months, not one year.

Mr X. L. Duval: 18 months, that's right! This is the question! Have the hon. Minister read the question before answering?

Mr Gungah: Yes.

Mr X. L. Duval: The question is 18 months.

(Interruptions)

So, do not waste my time!

(Interruptions)

Madam Speaker, STC has been going on a spending spree with this money, money from heaven as if, from the poor consumers. Has the hon. Minister looked at the accounts of the STC? Wages and salaries have shot up. Office supplies have trebled, Madam Speaker. This STC now has become a *trou sans fond*, is wasting consumers' money and I would like

eventually to come in detail to explain the spending spree. Expenses have hit the roof. Wages and salaries hit the roof.

Mr Gungah: Madam Speaker, this does not relate to the question, but let me tell the hon. Leader of the Opposition...

(Interruptions)

Let me tell the hon. Leader of the Opposition, due to STC, due to the economies that STC is making, we are able today to feed, *entre parenthèses*, the population.

(Interruptions)

...by bringing subsidies to rice, flour, LPG gas.

Mr X. L. Duval: I just confirmed that only one-third of the amount taken as subsidy is actually spent on rice, flour and LPG. This is a fact, Madam Speaker. Madam Speaker, all these unfair taxes, taxes which were meant to be reduced upon increase in price, all these, Madam Speaker, mean that Mauritius – and I have checked, if you look at the GDP per capita of Mauritius, purchasing power of poor Mauritians, petrol, Mogas - Mogas especially, Madam Speaker, is the highest in the world compared to the purchasing power of Mauritians. It is higher than Luxembourg, Austria and so many other countries, the price of Mogas in Mauritius.

Mr Gungah: No, Madam Speaker.

(Interruptions)

The hon. Leader of the Opposition is not fully right. In fact, we are among the few countries where we can say that our price is affordable up to now.

(Interruptions)

Madam Speaker: Hon. Mohamed!

Mr Gungah: Madam Speaker, I said it at the beginning of my reply, we are not like other countries. The hon. Leader of the Opposition is talking about big countries, Luxembourg and all. But we don't have any natural resources in our country and we need...

(Interruptions)

...to bring development to our country.

(Interruptions)

Madam Speaker: Hon. Shakeel Mohamed, don't interrupt, please!

Mr Gungah: Just try and see!

(Interruptions)

Google it and you will find out! Google it right now, you will find out whether....

Madam Speaker: Hon. Minister, address the Chair!

(Interruptions)

Mr Gungah: Madam Speaker, I think we should all realise that we have a responsibility as a Government. When the hon. Leader of the Opposition mentioned about one-third of subsidy being given to the population - I do not know whether it is one-third or half - let me say that the price on the international market for all these products that are subsidised are increasing. So, there is a risk, if the price continues to increase, that the subsidy amount that we have would not last for long. That is why we have to be very cautious on this.

Madam Speaker: Hon. Leader of the Opposition, I draw your attention to the fact that you have got two minutes to go.

Mr X. L. Duval: Two minutes! It depends on his answer, these two minutes long! Madam Speaker, I am going to ask the hon. Minister this question: whether he finds it normal, acceptable, that for the deliberate depreciation of the rupee, consumers in Mauritius, every consumer, people earning minimum wage and any amount, are subsidising - paying exporters - sugar and textile. Is the Minister of Industry, Commerce and Consumer Protection subsidising exporters? Is the hon. Minister going to accept that or is he going to talk to his boss who has run away from the question to tell the Bank of Mauritius to stop depreciating the rupee because this is killing Mauritians who are consumers?

(Interruptions)

Mr Gungah: Madam Speaker, it is not a question of running away. In this Government, we are all ready to face anybody in the Opposition and being given that the petroleum sector is under my responsibility, I think it was my responsibility to reply to this question. Now, the hon. Leader of the Opposition is talking about depreciation, it is the dollar that is appreciating, Madam Speaker.

(Interruptions)

There is no control from the Bank of Mauritius...

(Interruptions)

Go and check!

(Interruptions)

Madam Speaker: One minute! Finish! We had one more minute to go. Hon. Members, the Table has been advised that PQ B/418, in regard to the guarantee given by Government to the loan contracted for the implementation of the Safe City Project, will be replied by the Rt. hon. Minister Mentor, Minister of Defence, Minister for Rodrigues. Hon. Barbier!

SAFE CITY PROJECT - MAURITIUS TELECOM - LOAN

(No. B/418) Mr Osman Mahomed (Third Member for Port Louis South & Port Louis Central) asked the Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to the guarantee given by Government to the loan contracted by Mauritius Telecom with EXIM Bank of China for the implementation of the Safe City Project of the Mauritius Police Force, he will state the terms and conditions thereof.

(Withdrawn)

ECONOMIC DEVELOPMENT BOARD - MR P. R. M. G – OCCUPATIONAL PERMIT

(No. B/419) Mr J. C. Barbier (Fourth Member for GRNW & Port Louis West) asked Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to one Mr P. R. M. G., a French national, he will –

- (a) for the benefit of the House, obtain from the Economic Development Board, information as to if the latter has been issued with an occupation permit, and
- (b) state if he is aware that the latter has been convicted twice by a French court of justice for swindling to the detriment of *Pôle Emploi*, a French public institution, and, if so, indicate if consideration will be given for the revocation of the occupation permit.

The Prime Minister: Madam Speaker, Section 9A of the Immigration Act provides for the grant of occupation permits to non-citizens to reside and work as investor, self-employed and professional whereas Section 9B of the same Act provides for the grant of residence permits to retired non-citizens.

In regard to part (a) of the question, I am informed by the Economic Development Board that on 23 July 2013, Mr P.R.M.G., a French national, was issued an Occupation Permit valid until 22 July 2016 to stay and work in Mauritius as Sales and Marketing Director with Jacky Diving Ltd based at Pointe Cotton in Rodrigues under the category for Professional.

On 04 July 2016, Mr P.R.M.G. submitted an application for renewal of his Occupation Permit through the then Board of Investment. The application was examined by the Joint Committee comprising representatives from my Office, the Passport and Immigration Office and the Board of Investment. The Joint Committee did not recommend the application for renewal of the permit as the Ministry of Tourism considered that it was not within the scarcity area for the tourism sector.

Subsequently, Jacky Diving Ltd made an appeal for the application of Mr P. R. M. G. to be reconsidered on grounds that the non-citizen was responsible for the development and promotion of diving activities of the company and there was a lack of qualified persons in that field in Rodrigues.

The Ministry of Tourism considered the grounds of appeal and recommended the application in November 2016 to the then Board of Investment. The case was referred to the Joint Committee and the application of Mr P. R. M. G. was recommended favourably. On 09 November 2016, my Office accordingly conveyed to the Passport and Immigration Office and the then Board of Investment the approval for the extension of the occupation permit of Mr P. R. M. G. Thus, on 16 November 2016, the Passport and Immigration Office issued the renewal of the permit to allow Mr P. R. M. G. to continue to work with Jacky Diving Ltd valid until 22 July 2019.

Madam Speaker, in regard to part (b) of the question, I am informed that in a letter dated 19 January 2018, the Chief Commissioner's Office of the Rodrigues Regional Assembly reported to my Office that Mr P. R. M. G. had been accused of fraud in France.

This information was relayed on 24 January 2018 to the Passport and Immigration Office and the Economic Development Board, which were both requested to carry out an enquiry into the matter and submit a report with...

(Interruptions)

Madam Speaker: Hon. Prime Minister, please proceed!

(Interruptions)

The Prime Minister: Where is the problem?

Madam Speaker: No, please proceed! I have not stopped you!

The Prime Minister: *Ena fourmi rouge en bas li?*

(Interruptions)

Impé lente! Al get constitution to parti!

Madam Speaker: No crosstalking! Please proceed!

The Prime Minister: *Obeegadoo mem pe dire...*

(Interruptions)

Obeegadoo mem pe kozé...

(Interruptions)

Madam Speaker: Please, no comment!

(Interruptions)

Hon. Bérenger!

(Interruptions)

Hon. Baloomoody, please!

(Interruptions)

Hon. Bérenger, please!

(Interruptions)

Hon. Bérenger, please calm down! Hon. Prime Minister, please continue!

The Prime Minister: I think the hon. Member needs to cool down a lot. I can understand the heat under him.

(Interruptions)

Madam Speaker: Please continue! Do not make remarks!

The Prime Minister: *Pe sofé!*

(Interruptions)

Amende constitution!

This information was relayed on 24 January 2018 to the Passport and Immigration Office and the Economic Development Board, which were both requested to carry out an enquiry into the matter and submit a report with a view to taking a decision on the Occupation Permit held by Mr P. R. M. G.

The Passport and Immigration Office had, through the Mauritius Police, sought the assistance of its French counterparts to verify the information.

In the meantime, the Passport and Immigration Office had, on 12 April 2018, recorded a statement from Mr P. R. M. G., who indicated that -

- On 09 December 2017, he learned through the internet that a judgement had been delivered by the ‘*Tribunal Correctionnel de Nantes*’ on 07 December 2017 in his absence in France whereby he was convicted on the charges of « *escroquerie faits commis depuis le 6 janvier 2014 et jusqu’au 22 octobre 2015 à Nantes Vigneux de Bretagne* » and « *recel de bien obtenu à l’aide d’une escroquerie faits commis du 6 Janvier 2014 au 14 Juillet 2014 à Nantes Vigneux de Bretagne et sur le territoire de Maurice* ». He was sentenced to one year imprisonment and to refund to ‘*Pôle Emploi Des Pays de la Loire*’ ...

(Interruptions)

Ki arrive twa ?

(Interruptions)

Ki arrive li?

(Interruptions)

Madam Speaker: Hon. Bérenger, several times...

(Interruptions)

Several times, from a sitting position...

(Interruptions)

Order, please!

(Interruptions)

Several times, from a sitting position, you have said ‘shame’ on me. I will ask you to withdraw this word, because I control the number of minutes that each of you give your reply and ask your questions. This is my responsibility, and it is not up to you to say ‘shame’ on me.

Please proceed, hon. Prime Minister!

Mr Bhagwan: Madam Speaker, on a point of order. The way the hon. Prime Minister is giving his reply, he has done it purposely, just to evade the other questions. He is losing time and then half an hour will go! And he is occupying four Ministries! Do you find this normal?

Madam Speaker: Hon. Bhagwan, please sit down!

Mr Bhagwan: Do you find this normal?

Madam Speaker: Please, sit down!

(Interruptions)

Hon. Bhagwan, please, sit down!

(Interruptions)

Hon. Bhagwan, sit down!

(Interruptions)

Third time, hon. Bhagwan, please sit down!

(Interruptions)

Hon. Members...

(Interruptions)

Hon. Members, let me draw your attention to the fact that interruptions can only cause disorder in the House...

(Interruptions)

Hon. Members, if you continue, I suspend...

(Interruptions)

If you continue...

(Interruptions)

Okay, then finish your debate! I suspend the sitting.

(Interruptions)

At 12.13 p.m., the sitting was suspended.

On resuming at 12.22 p.m. with Madam Speaker in the Chair.

Madam Speaker: Hon. Prime Minister, please proceed!

The Prime Minister: Madam Speaker, I was saying that he was sentenced to one year imprisonment and to refund to ‘*Pôle Emploi des Pays de la Loire*’ the sum of one hundred and thirty-eight thousand and six hundred and thirty-eight Euros and ninety-nine centimes (138,638.99 Euros).

On 05 February 2018, he travelled to France to lodge an appeal against the Judgement which had been pronounced in his absence.

The appeal case was heard on 08 February 2018 and the Court found him guilty. However, the imprisonment sentence had been reduced from one year to ten months. In addition, he was imposed a fine of 10,000 Euros. He was also required to pay back to ‘*Pôle Emploi des Pays de la Loire*’ the sum of one hundred and thirty-eight thousand and six-hundred and thirty-six Euros and ninety-nine centimes (138,636.99) which represented the unemployment benefits paid to him and for which he was not entitled.

I am informed by the Passport and Immigration Office that Mr P.R.M.G. has, on 15 February 2018, appealed anew against the Judgement. The outcome of the appeal is awaited. I am also given to understand that the date of the hearing of the appeal has not yet been fixed.

Madam Speaker, I wish to point out that a “*mandat d’arrêt*” had been pronounced by the Tribunal against Mr P.R.M.G. on 07 December 2017, but same was not executed by the French Authorities. In fact, Mr P.R.M.G. travelled to and from France in February 2018 without being arrested.

Madam Speaker, I am informed that Mr P.R.M.G. has since 09 November 2016 become the sole shareholder of Jacky Diving Ltd, an information which he did not communicate to the then Board of Investment in accordance...

Madam Speaker: Hon. Prime Minister, I will just take some time to stop you. We have already taken almost ten minutes on this question. Can you please wrap up on this question because we have got supplementary questions from other hon. Members? Just be brief and concise and wrap up on your reply, please!

(Interruptions)

The Prime Minister: Madam Speaker, I am...

(Interruptions)

Madam Speaker, can I explain? The reason for this answer is to try to give all the details with regard to this case, and all of them are very relevant details to it. So, if you want me to wrap up, then I wish to assure the House that necessary actions will be taken in due course.

(Interruptions)

Madam Speaker: Hon. Baloomoody! You have a question?

Mr Baloomoody: Can I ask the hon. Prime Minister whether the Board of Investment does not make an inquiry before we allow a foreigner to come and stay in our country? Don't they have to provide a Certificate of Morality or a true certificate from the country they are coming before they are allowed to come to our country?

The Prime Minister: The normal process has been followed by the Board of Investment. Nothing wrong was found at the time when the application was being processed, and, in fact, Mr P. R. M. G. had even produced a Certificate of Morality, which was clear at that time.

Madam Speaker: Hon. Barbier!

Mr Barbier: On 09 November 2016, I think the hon. Prime Minister just mentioned that Mr P. R. M. G. became the sole owner of Jacky Diving. On the same date, the Board of Investment informed Mr P. R. M. G. that his application has not been approved and hence, I quote –

“You are therefore kindly requested to make necessary arrangement for you and your spouse to leave Mauritius forthwith.”

Why this has not been executed?

The Prime Minister: Well, Madam Speaker, I am not aware that the Board of Investment has communicated this to my Office, as a result of which, my Office would have

asked Mr P. R. M. G. to leave. Maybe the hon. Member can give me further information on this.

Mr Barbier: What I mean is that the Passport and Immigration Office wrote to Mr P. R. M. G. informing him that, I quote –

“Sir,

The Board of Investment has informed this Office that your application for an occupation permit to stay and work in Mauritius as professional with Jacky Diving Ltd has not been approved.”

This is the first paragraph. It is a letter from the Passport and Immigration Office, Sterling House. And I just read the second paragraph, I will read it again -

“You are therefore kindly requested to make necessary arrangement for you and your spouse to leave Mauritius forthwith.”

And this has never been executed.

The Prime Minister: Well, the hon. Member has not mentioned the date. I assume that it is the first application that was made, and I have answered that the Committee, in fact, looked at the application and we had received views from the Ministry of Tourism. Initially, it was turned down because the Ministry of Tourism indicated that the activity was not in a scarcity area and, therefore, the application was not recommended. As a result, this is when the BoI had written to him to say that ‘your application has not been approved’. But then he appealed afterwards and the matter was again referred with all the grounds of appeal to the Ministry of Tourism for its views. And, subsequently, we were informed by the Ministry of Tourism that the application could be recommended, and that is why, thereafter, he was issued with an occupational permit.

Madam Speaker: Hon. Barbier!

Mr Barbier: The Prime Minister rightly said that he was asked to make a fresh application and he was to bring some modifications perhaps *par rapport* to the scarcity of the job. Then he changed his job title to help as diver the Scuba team. May I ask the hon. Prime Minister whether he is aware that the Jacky Diving Ltd never supported this second application? So, how is it that despite that fact he obtained his permit? Can we at least have a copy of his application form to know what it contains, to know how come...

Madam Speaker: Ok, hon. Barbier, we have understood!

Mr Barbier: ...that they have given the permission despite the company did not support this application?

The Prime Minister: Madam Speaker, first of all, Mr P. R. M. G. did not make a fresh application. He appealed against the decision of the Committee. The matter was again, as I said, referred to the Ministry of Tourism for its views because he had given additional information. And, secondly, with regard to the second part of the question, from what I have in my file, it seems that Jacky Diving Ltd had supported his application. So, if the hon. Member has any specific information that it was not supported, of course, I would like to have a look at it.

Madam Speaker: Next question, hon. Ameer Meea!

(Interruptions)

The Prime Minister: *Ki to lé, Obeegadoo reponn, ou bien Labelle?*

(Interruptions)

Madam Speaker: Hon. Baloomoody!

(Interruptions)

Order, please!

(Interruptions)

Order!

(Interruptions)

Hon. Jhugroo! Please do not make interruptions!

(Interruptions)

And hon. Baloomoody, please! Yes, please proceed!

(Interruptions)

The Prime Minister: *Mo pas le roi Pétaud mwa!*

Madam Speaker: Hon. Prime Minister, no crosstalking, please! Please answer!

(Interruptions)

The Prime Minister: *Mo pas le roi Pétaud!*

(No. B/420) Mr A. Ameer Meea (Second Member for Port Louis Maritime & Port Louis East) asked the Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to the Build Mauritius Fund, he will, for the benefit for the House, obtain therefrom, since April 2017 to date, information as to the –

- (a) amount of funds –
 - (i) contributed thereto from the price of diesel and petrol by the State Trading Corporation, and
 - (ii) disbursed therefrom, indicating the amount thereof available therein as at to date, and
- (b) projects –
 - (i) undertaken, and
 - (ii) earmarked for implementation thereunder.

The Prime Minister: Madam Speaker, as the House is aware, the Build Mauritius Fund was set up in December 2013 as a Special Fund under the Finance and Audit Act. Since then, the Fund has contributed towards the financing of projects in the road, land transport, land drainage and water sectors.

I wish to inform the House that, as announced in the Budget Speech 2017/18, the Build Mauritius Fund has ceased to operate as from December 2017. The contribution of levy from the State Trading Corporation (STC) to the Fund was discontinued as from October 2017.

With regard to part (a) of the question, I am informed that during the period April to October 2017, around Rs1 billion were credited to the Build Mauritius Fund from the State Trading Corporation.

Over the same period, a total amount of Rs556 m. was disbursed from the Fund to contribute towards the financing of the following projects –

Water Sector Projects	Rs218 m.
Road and Land Transport Projects	Rs265 m.
Metro Express Project	Rs24 m.

Land Drainage Projects	Rs35 m.
Water Tank Scheme	Rs12 m.
Bus Modernisation Scheme	Rs2 m.

Madam Speaker, with regard to part (b) of the question, I am informed that, at its closure in December 2017, the Build Mauritius Fund had a closing balance of Rs3.8 billion. This was transferred to the Consolidated Fund, and is being used to partly finance the ongoing infrastructure programme, as follows –

- Rs2.8 billion for water sector projects, including completion of the Bagatelle Dam construction, replacement of water pipes and the water tank scheme.
- Rs1 billion for projects related to the land transport sector, including repairs of the Terre Rouge-Verdun Link Road, implementation of the Road Decongestion Programme, and the Bus Modernisation Scheme.

Over and above the Rs3.8 billion from the Fund, these mega road and water sector projects are being financed from the budget.

Madam Speaker: Yes, hon. Ameer Meea!

Mr Ameer Meea: Madam Speaker, I am trying to reconcile the figures that the hon. Prime Minister just gave to the House. Answering to a PQ by myself last year in April 2017, the hon. Prime Minister gave the information, I quote –

“As at 07 April 2017, the balance of the Fund stood at Rs5.3 billion.”

And now he just stated to the House that in December 2017, that is, at closure of the Fund, the balance stood at Rs3.8 billion despite having earned an amount of Rs1 billion during this period I mentioned and disbursed only Rs556 m. So, according to me, Rs5.3 billion plus the Rs1 billion collected equal to Rs6.3 billion and disbursed only Rs556 m. Can I ask the hon. Prime Minister how can he reconcile these figures?

The Prime Minister: No, the hon. Member is not right. In fact, as I said, there is, in the meantime, a number of projects that have been financed from this Fund and, therefore, money has been drawn from this Fund.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: In his answer, the hon. Prime Minister stated to the House that Rs24 m. has been disbursed for the Metro Express Project. Can I ask the hon. Prime Minister

what is the projection for the whole project because until now only Rs24 million has been disbursed? According to a previous reply, this was supposed to be for consultancy preparatory and advisory services. But, for the whole project, how much is projected to be used from this Fund for the Metro Express Project?

The Prime Minister: Well, I do not have the figure with regard to the amount that is projected. I can certainly get the figure and circulate to the House.

Madam Speaker: Hon. Bhagwan!

Mr Bhagwan: Thank you, Madam Speaker. The Prime Minister has informed the House, the country, the nation and the petrol users that now this Build Mauritius Fund is no longer operational; money is credited to the Consolidated Fund. Can the Prime Minister inform the country whether the Rs15 m. 'cadeau' given to hon. Dayal to shut his mouth comes out of this Consolidated Fund and from money of petrol users...

Madam Speaker: Put your question!

(Interruptions)

Mr Bhagwan: *Ki to emmerder!*

Madam Speaker: Hon. Bhagwan, no crosstalking! You have asked your question. I have allowed you.

Hon. Bhagwan: *La verité fer mal!*

(Interruptions)

I want to know if the Rs15 m. gift given to hon. Dayal to shut his mouth comes from the Consolidated Fund and from the petrol users money?

The Prime Minister: Madam Speaker, I will let the people judge who should shut his mouth.

Madam Speaker: Hon. Dr. Boolell!

(Interruptions)

Who is provoking on this side? I ask hon. Members not to make provocations because this can only cause disorder in the House.

(Interruptions)

Hon. Bhagwan, please! Hon. Dr. Boolell, ask your question!

(Interruptions)

The Prime Minister: *Ki to pe zazer twa.*

(Interruptions)

Madam Speaker: Hon. Bhagwan, this is the third time, I am drawing your attention.

(Interruptions)

Hon. Bhagwan!

(Interruptions)

Hon. Jhugroo!

(Interruptions)

Hon. Jhugroo, you are a Minister, you should be more responsible!

(Interruptions)

Hon. Bhagwan, please. I will kindly request you to calm down! I am calling you several times. I would request you to pay some attention to the Chair also when I call you. Hon. Dr. Boolell, ask your question!

(Interruptions)

No, I have already...

(Interruptions)

Does the hon. Member have a point of order?

(Interruptions)

I have already – please sit down when I am on my feet! Hon. Dr. Boolell, please continue!

Dr. Boolell: Will the Prime Minister state that it is this Fund set up under the previous Government which has been used by him to bring down slightly the public debt?

The Prime Minister: Madam Speaker, let me remind the hon. Member. He is talking about public debt. The projects that have been financed by the former Government, I shall mention three of them because it is good to remind, especially hon. Dr. Boolell, about them. The Bagatelle Dam, initial project value of Rs3.3 billion, and you know how much additional amount had to be spent in order to remedy the incompetence of the former Government? Rs1.4 billion. If I take Terre Rouge/Verdun, a new road which was built and has already

crumbled down. Now, it is still *un trou sans fond*. We are still going to spend more money. So many millions have been spent! Ring Road, *un chemin qu'on tourne en rond - ça c'est l'ancien gouvernement* - that also has crumbled down. We are going to spend money. The hon. Member should understand that, for all these incompetencies, we have to rectify the situation and we need to spend all these billions of rupees and this is from where the population, in fact, is contributing in order to enable us to rectify those *gabegies*.

Madam Speaker: Hon. Ameer Meea, last question!

Hon. Ameer Meea: Thank you, Madam Speaker. Since we have been made aware that there was Rs3.8 billion as at 31 December 2017, my appeal to the hon. Prime Minister, since he is answering to this question, and we did not get it this morning, is, if consideration will be given to reduce this tax because we all know what happens with the heavy increase in prices of Rs52 for fuel, and if this sum could be used so as to reduce this levy of Rs4 and bring it back to where it was originally, that is, to Rs1 per litre?

The Prime Minister: Well, as I said, Madam Speaker, this money is being used to finance a number of projects. Initially, it was earmarked under the Build Mauritius Fund. As a matter of principle, I have decided, and rightly so, as we have been advised by the international organisations that we should not be keeping funds outside the Budget, and for transparency, so, we abolish this Fund. The objectives of the Fund still remains because we still have to finance a number of projects which I won't go and list again, but this is now coming from the Budget.

Madam Speaker: Next question, hon. Lepoigneur!

BEAU BASSIN & PETITE RIVIÈRE – NDU PROJECTS

(No. B/421) Mr G. Lepoigneur (Fifth Member for Beau Bassin & Petite Rivière) asked the Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to the projects implemented and ongoing by the National Development Unit in Constituency No. 20, Beau Bassin and Petite Rivière since March 2016 to date, he will state the –

- (a) names of the -
 - (i) contractors, and
 - (ii) unsuccessful bidders therefor, and
- (b) amount of funds paid for completed works.

The Prime Minister: Madam Speaker, the requested information is being compiled and will be tabled following the completion of the exercise.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: Is there a quality control which is effected before payment for completed works?

The Prime Minister: Well, I believe there must be monitoring of the projects by the NDU, and they have to approve that the works which have been done are up to standard. I believe that this is so.

Mr Lepoigneur: On 17 April 2018, the Deputy Prime Minister tabled a list of all projects which have been carried in Constituency No.20, my Constituency, at an amount of more than Rs50 m. for completed and ongoing work. There are lots of works. I have been around the Constituency to see what has been done. The roads are still in a very bad condition and it is already mentioned 'completed' on that list. Is there a quality control for those who have been paid? For example, there was for Avenue Waterlily, Albion – I have brought some photographs to prove – an amount of more than Rs3 m. The road is in a very bad condition and it is already mentioned 'completed' on that list. I will table the photographs.

(Interruptions)

Madam Speaker: We have understood your question!

The Prime Minister: Which road?

Mr Lepoigneur: Waterlily Road at Albion, item No. 5.

The Prime Minister: Yes, I see upgrading of Avenue Waterlily at Albion, for a projected sum of Rs3 m. and completed. The contractor is....

(Interruptions)

Madam Speaker: Don't interrupt! The hon. Member has already asked his question.

The Prime Minister: Super Builders Co. Ltd. The hon. Member is asking me if that work has been properly done. I need, of course, to have a specific question, and expectedly I shall get the answer from the NDU.

Madam Speaker: Next question, hon. Ramful!

(Interruptions)

The hon. Member has got one more question! Last question then!

Mr Lepoigneur: Item 54 - a bus shelter which has been done at Albion for an amount of Rs860,000 - there are two amounts - and second, Rs798,000 for a bus shelter with some timber and some iron sheets at a cost of more than Rs1.6m.

(Interruptions)

Items 54 and 55. I will table the photographs.

(Interruptions)

Madam Speaker: Hon. Thierry Henry!

Mr Lepoigneur: Can we know who was the contractor?

(Interruptions)

Items 54 and 55!

(Interruptions)

It is about a bus shelter at Mon Plaisir, Albion,

(Interruptions)

The Prime Minister: Well, Madam Speaker, the reason why I said this information is being compiled is that I have obviously been given part of the information. It is not complete. These questions need to be specifically put so that I can find out if indeed there has been any shortcoming as alleged by the hon. Member.

Madam Speaker: I will request the hon. Member if he has additional question on this to come at Adjournment Time and then you can give all your evidence that you have that works have been completed as specified in the document that you have mentioned, but yet, according to you, there is still work to be done. So, next question, hon. Ramful!

SMART CITY SCHEMES - TAX INCENTIVES

(No. B/422) Mr D. Ramful (Third Member for Mahebourg & Plaine Magnien) asked the Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to the Smart City Schemes, he will, for the benefit of the House, obtain from the Mauritius Revenue Authority, information as to the number of tax incentives granted thereto, indicating the

amount of revenue forgone or estimated to be forgone in terms of exemption from the payment of Income Tax, Value Added Tax, Customs Duty and Land Conversion Tax by the companies that have already started construction thereunder.

The Prime Minister: Madam Speaker, so far, a smart city certificate has been issued to 6 projects and a Letter of Intent to 5 projects. Out of the 6 projects that have been issued with a certificate, construction works have started on 4 of them.

At this stage, it is premature to talk of revenue forgone whether actual or estimated in view of the fact that –

- (a) the projects are in an early stage of implementation;
- (b) the projects would not have materialised if these fiscal incentives had not been granted, and
- (c) the implementation of these smart city projects will inevitably entail the collection of additional taxes, mainly on consumption and under PAYE.

Madam Speaker: Hon. Ramful!

Mr Ramful: I understand that for those companies that have not yet started construction, it is difficult to give an estimate. But then, for those 4 companies that have already started construction, I am sure they have already started benefitting from those tax incentives. Is there any figure that has been calculated as regards those incentives?

The Prime Minister: As I said, it is premature, Madam Speaker, because, for example, for Income Tax exemption, it will depend on the profits that have been made by the smart city companies. They have to generate revenue. So, at this stage, we won't know.

Mr Ramful: For example, for Land Conversion Tax, what I am given to understand is that, those companies, what they do, they create SPVs and automatically once they create their SPVs, they transfer the land to those SPVs and they benefit from Land Conversion Tax. Now, is there a figure for all these companies that have benefited from Land Conversion Tax, for example? Has there been an estimate? Has there been a calculation done?

The Prime Minister: Madam Speaker, as I said, if this incentive had not been given to the promoters in terms of Land Conversion Tax, they would not have probably come up with a project to start the smart city project. May I remind the hon. Member that this is not

the first time also that such kind of incentive is being given. Can I remind him that under the previous Government, for example, there have been such...

(Interruptions)

Yes, I was in Parliament ...

Madam Speaker: Don't disturb, please!

The Prime Minister: ...I have been asking the same question before and never has any estimate been given. So, for the same reason that I am stating today, no project would be forthcoming if such an incentive had not been given.

Madam Speaker: Hon. Uteem!

Mr Uteem: The question is very simple. It is on exemption of Land Conversion Tax. This is factual. You don't need to have the project completed to know, today, these were agricultural lands which are being converted into safe city. They were supposed to pay a tax. The question is very simple. How much tax have they not paid as a result of getting the smart city? So, this is the information that is available now. We are not talking about completion of project, we are talking about now!

The Prime Minister: As I said, Madam Speaker, my answer also has been very simple.

Madam Speaker: Yes, last question, hon. Ramful!

Mr Ramful: Well, this scheme was designed to attract future investments and future job creation. Now, I am given to understand that some of those companies are allowed to rope in constructions and development that they have already completed well before the introduction of the scheme. Is that so and is that fair?

The Prime Minister: I do not think so, but I need to check, and if there is any case of which the hon. Member is referring to, obviously I will check.

MBC - STAFF - REPRESENTATION

(No. B/424) Mr R. Bhagwan (First Member for Beau Bassin & Petite Rivière) asked the Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development whether, in regard to the Mauritius Broadcasting Corporation, he will state if he has received representations from

staff members thereof in relation to the recent appointment of the Acting Director General thereof and, if so, indicate the actions taken in relation thereto, if any.

(Withdrawn)

Madam Speaker: Time is over! Hon. Members, I have been informed that the hon. Minister of Foreign Affairs, Regional Integration and International Trade is sick and unable to attend the sitting of the House today. I have further been informed that the hon. Prime Minister has agreed that all questions addressed to the hon. Minister of Foreign Affairs, Regional Integration and International Trade be replied by the hon. Minister of Agro Industry and Food Security. Hon. Osman Mahomed!

Mr Osman Mahomed: Madam Speaker, may I ask for a point of clarification from you for the decision to transfer to the Rt. hon. Minister Mentor, my question that was addressed to the hon. Prime Minister with regard to the guarantee given to Mauritius Telecom for the Safe City Project.

(Interruptions)

This concerns the Minister of Finance and Economic development because guaranteeing of loan is granted by the Minister of Finance and Economic Development which is his remit. Is the Rt. hon. Minister Mentor going to be able to answer my question with respect to the...

(Interruptions)

Can I finish!

Madam Speaker: Hon. Mahomed, I fully understand the point that you have raised, but you will surely agree with me that transfer of questions rests with the Executive, transfer of questions rests with Ministers and the Chair has nothing to do with it. It is according to the Standing Orders. So, there is no debate on this. Ask your question!

Mr Osman Mahomed: The second point, Madam Speaker, is that you did not mention in your transferring of the question whether it is going to be time permitting or can I ask the Rt. hon. Minister Mentor now?

Madam Speaker: There is no debate on this, hon. Osman Mahomed. I have already said that transfer of questions rests with the Executive. There is no debate on this. Please, sit down! There is no debate on this, if you want to go ahead with your first question!

Mr Osman Mahomed: Is it going to be time permitting?

Madam Speaker: I don't have any debate on this issue, hon. Osman Mahomed! Please, sit down!

(Interruptions)

I have already given my ruling on this matter. There is no debate on my ruling. I will ask you to ask your first question. I will not allow any other argument on this issue.

Mr Osman Mahomed: Madam Speaker, is it going to be time permitting or not?

Madam Speaker: It is time permitting as usual!

Mr Osman Mahomed: Okay, in which case, I am going to withdraw my question and rephrase it again. PQ B/430!

SECONDARY SCHOOLS – TABLETS – PROCUREMENT

(No. B/430) Mr Osman Mahomed (Third Member for Port Louis South & Port Louis Central) asked the Minister of Education and Human Resources, Tertiary Education and Scientific Research whether, in regard to the Introduction of Information Technology in Secondary Schools Project, she will state –

- (a) where matters stand as to the proposed procurement of 23,400 tablets initially intended for distribution to Form IV students in 2014 and subsequently postponed for 2016, and
- (b) if any evaluation of WIFI connection in secondary schools has been conducted and, if so, indicate the outcome thereof, including, if the supplier thereof has complied with its contractual obligations.

Mrs Dookun-Luchoomun: Madam Speaker, I am informed that in September 2014, the then Ministry of Education and Human Resources decided to launch a tender exercise for the procurement of 23,400 tablet computers for Form IV students and educators. Owing to the failure of the contractor to comply with the terms and conditions of the offer, the Ministry terminated the contract in January 2016 after having obtained the clearance of the State Law Office. In addition, a court case was initiated against the contractor, again on the basis of advice from the State Law Office. As the matter is still *sub judice*, it would not be proper to provide further information on this issue.

With regard to part (b) of the question, my Ministry has been informed by the Ministry of Technology, Communication and Innovation that the connectivity project is

expected to be completed by end of June 2018 and that a full evaluation of the WiFi connection will be carried out upon completion of the project. I am further informed that the contractor failed to meet its contractual obligations with regard to the time frame for the implementation of the project. An extension of time was given for the commissioning of all the sites and in parallel, liquidated damages have been applied by the Ministry of Technology, Communication and Innovation. Work is still ongoing.

Madam Speaker: Yes, hon. Osman Mahomed!

Mr Osman Mahomed: Thank you. We have lost three precious years because the contract was awarded on 06 May 2015. So, are the liquidated damages going to be claimed, which will account for the precious time that has been lost on this very important project?

Mrs Dookun-Luchoomun: Madam Speaker, just to recall that the contract for tablets has been resiliated. When we are talking about liquidated amount, we are referring to the commissioning of the Wi-Fi and this will be dealt with at the level of the Ministry of Technology, Communication and Innovation.

Madam Speaker: Hon. Osman Mahomed!

Mr Osman Mahomed: The Director of Audit has been very critical about this project; the Minister is fully aware of this. Now, can we know, from what have been the very vehement comments made by the Director of Audit, whether is there any wrong management of this contract? Who is responsible, accountable at the end of the day? Because it is not possible that we award such contract on very strict terms and conditions and then it goes haywire the way it has gone.

Mrs Dookun-Luchoomun: Madam Speaker, as I have just mentioned, at the level of the Ministry, we have noted that the contractor was not capable of supplying and the contract was resiliated.

Mr Osman Mahomed: Notwithstanding the decision that has been taken by the Ministry, an advance payment of Rs54.4 m. have somehow been advanced to that same company, Data Communications Ltd. How is it related to the project in question?

Mrs Dookun-Luchoomun: The information that I have, Madam Speaker, with regard to the tablet, there was an amount of Rs20 m. that was given to the contractor as per the contract requirements. But this is the case that is in Court and this why I do not want to go further in that.

Madam Speaker: Hon. Adrien Duval!

Mr A. Duval: With regard to the whole IT system that was meant to follow the distribution of tablets connecting the students to the teacher, having a whole accompanying system to make use of the tablets, is that still being done? Has it been done? Is it not on the table anymore?

Mrs Dookun-Luchoomun: Madam Speaker, I would like to inform the House that the project for tablets at the level of secondary school is no longer on. As for the tablets of the primary school, everything is being done as programmed.

Madam Speaker: I suspend the sitting for one and a half hours.

At 1.01 p.m., the sitting was suspended.

On resuming at 2.34 p.m. with Madam Speaker in the Chair.

Madam Speaker: Hon. Osman Mahomed.

MES – GRADE 7 STUDENTS – TRANSFERS

(No. B/431) Mr Osman Mahomed (Third Member for Port Louis South & Port Louis Central) asked the Minister of Education and Human Resources, Tertiary Education and Scientific Research whether, in regard to the allocation of seats to Grade 7 in 2018 for pupils of the 2017 Primary School Achievement Certificate, she will, for the benefit of the House, obtain from the Mauritius Examinations Syndicate, information as to the number of applications received for transfer of allocated Regional Secondary School in each educational zone, indicating the percentage of transfers having been effected as per the requests of the respective responsible parties.

Mrs Dookun-Luchoomun: Madam Speaker, I am informed by the Mauritius Examinations Syndicate that following the 2017 PSAC assessment, out of 12,830 students who were offered a seat for admission in Grade 7 in 2018, the total of 1,934 requests for transfer had been received at the syndicate in response with press advertisement issued on 19 December 2017. The number of applications received in respect of each educational zone is as follows –

Zone 1	668
Zone 2	519

Zone 3	336
Zone 4	411

Taking into consideration the availability of seats at the schools requested for and the criteria which are adopted as per the Education Regulations, namely the choice of responsible party, the residential address of the pupil in the geographical zone, in which the regional school is located and the grade aggregate of the pupil in the PSAC assessment. Some 710 applications were entertained representing around 36.71%.

Subsequent to the national transfer exercise carried out by the MES, the Ministry also receives and processes representations made by parents for reconsideration of their applications for the transfer mainly on the basis of hardship, serious medical cases and change in address.

For this second transfer exercise, an additional 172 cases have been favourably received and the overall percentage of cases entertained stands at 46.12%.

Mr Osman Mahomed: Madam Speaker, the hon. Minister has mentioned about 1,934. Can I refer the hon. Minister to an article which appeared in *week-end* newspaper of 17 December 2017, and I quote -

« Mercredi dernier, soit au lendemain des résultats, ils étaient des milliers, environ 4,000, à s'être rendus dans des collèges Catholiques pour inscrire leurs enfants. Ne disposant que 850 places à pourvoir dans ces établissements, le Service Diocésain de l'Education catholique s'est retrouvé submergé par des demandes... »

Madam Speaker: Hon. Osman Mahomed, I will just stop you for one minute to tell you that you are not allowed to quote extensively from the newspaper. You can say what the newspaper had said, but you cannot quote extensively.

Mr Osman Mahomed: Yes. Can I ask the hon. Minister the disparity between the figures and what is it that went so wrong, and what happened to the 2,000 over students who were not satisfied and who only got 700 seats reallocated? What happened?

Mrs Dookun-Luchoomun: Madam Speaker, the confessional schools have a number of seats that they fill on their own and, every year, a number of parents opt to go and ask for a seat in those confessional schools. Obviously, since they have only around 850, they cannot take up all the others, and all the other parents who had opted for a confessional school and

did not get it must have taken their seats offered to them through the MES in the public schools or in other private secondary schools.

Madam Speaker: Yes, hon. Osman, Mahomed!

Mr Osman Mahomed: Many parents whose wards have obtained 4 as aggregate have not been able to secure a seat within their catchment area. Is this a problem inherent to the reform or is it going to be different this year? Because the parents are very anxious.

Mrs Dookun-Luchoomun: Madam Speaker, every student has been allotted a seat in his or her catchment area. It may be that the parents did not like the school that was allotted to his or her child. But, on the other hand, each and every child has been able to secure a seat in a school in the region where he dwells.

Madam Speaker: Hon. Ramful!

Mr Ramful: Madam Speaker, can I ask the hon. Minister whether she can confirm, with regard to the allocation of seats, there is a system of ranking which is based on the aggregates of the students for the allocation of seats in those regional schools?

Mrs Dookun-Luchoomun: Not at all, Madam Speaker. As I have said, as per the education regulations, the seats are allotted according to the parental choice, the proximity of the child's dwelling to the school requested for and, obviously, the aggregate as a whole. Students getting an aggregate of 4 are given priority over others having larger aggregates, but no ranking in any form has been adopted.

Madam Speaker: Last question, hon. Osman Mahomed!

Mr Osman Mahomed: Can I ask the hon. Minister, for those students who could not satisfy the conditions under the National Qualifications Framework and who were to be admitted to pre-voc, now called the extended stream, in regional colleges or other special programmes, what is the figure that falls under this category today?

Mrs Dookun-Luchoomun: I do not have the exact figure with me right now, but I can always give it to the hon. Member. In fact, it should be around 3,000.

Madam Speaker: Next question, hon. Osman Mahomed!

**POLYTECHNICS MAURITIUS LTD – CHIEF EXECUTIVE OFFICER -
RECRUITMENT**

(No. B/432) Mr Osman Mahomed (Third Member for Port Louis South & Port Louis Central) asked the Minister of Education and Human Resources, Tertiary Education and Scientific Research whether, in regard to the post of Executive Director for Polytechnics Mauritius Ltd., she will, for the benefit of the House, obtain from the Company, information as to if the recruitment thereof has been advertised and, if so, when, indicating the –

- (a) number of applications received as at closing date, and
- (b) proposed date for filling thereof.

Mrs Dookun-Luchoomun: Madam Speaker, I take it that the post of Executive Director for Polytechnics Mauritius Ltd refers to that of Chief Executive Officer.

On 12 May 2017, the post of Chief Executive Officer for Polytechnics Mauritius Ltd was advertised and the closing date was set to 01 June 2017. 31 applications were received by the deadline and 13 candidates were shortlisted and convened for the interview.

Following the selection exercise, an offer was made to Dr Arun Patil, Associate Professor in Engineering Management at Deakin University, Australia. However, after considering the terms and conditions of employment, he declined the offer.

In view of the urgency of the situation and given that courses were due to start before the end of the year, Government approved on 06 October 2017 that Mr Bhavit Yamal Matabudul be appointed as Chief Executive Officer of Polytechnics Mauritius Ltd given that he was previously employed as Project Manager for the Tertiary Sector at my Ministry. In that capacity, he was also assigned the responsibility for Polytechnics projects under the Capacity Building Programme, from November 2016 to April 2017. He thereafter resigned and took up the post of Consultant at the World Bank.

Mr Matabudul was offered the post of Chief Executive Officer Polytechnics Ltd on 09 October 2017 for an initial period of one year, renewable, subject to satisfactory performance. He joined the organisation on 16 October 2017.

He is a holder of a BSc in Physics from McGill University in Montreal, Canada, an MSc in Public Policy and Management from the University of London as well as an MSc in Education with specialisation in Higher Education from the University of Oxford.

Madam Speaker: Hon. Osman Mahomed!

Mr Osman Mahomed: Has Mr Yamal Matabudul already assumed duty and how is he faring so far?

Mrs Dookun-Luchoomun: As mentioned in my answer, Madam Speaker, he has assumed duty and joined the organisation on 16 October 2017 and he is working to our satisfaction.

Madam Speaker: Next question, hon. Rughoobur!

FINANCIAL SERVICES COMMISSION – RECRUITMENT

(No. B/433) Mr S. Rughoobur (Second Member for Grand' Baie & Poudre d'Or) asked the Minister of Financial Services and Good Governance whether, in regard to the Financial Services Commission, he will, for the benefit of the House, obtain therefrom, information as to the -

- (a) composition of the Board thereof, and
- (b) number of staff recruited thereat on contract for each of the years 2015, 2016 and 2017.

Mr Sesungkur: Thank you, Madam Speaker. I am tabling the information.

Mr Rughoobur: May I have a look, please?

Madam Speaker: Okay. In the meantime, I will take another question from another hon. Member.

Mr Rughoobur: I will just have a look very quickly, Madam Speaker. I just want to see if the post has been filled.

Madam Speaker: Hon. Rughoobur, you can have a look at the paper. In the meantime, I take the question of hon. Ameer Meea!

Mr Rughoobur: Yes, Madam Speaker, I just wanted to know the second part of the question...

Madam Speaker: Hon. Rughoobur, have a look at the document. I will pass on to hon. Ameer Meea and then I will come back to you!

Mr Ameer Meea: Thank you, Madam Speaker. I just consulted the website of the FSC and it is very strange because according to my information - and also I consulted the website - there are no audited accounts for the FSC for the years ended 30 June 2016 and 30

June 2017 and, according to the FSC Act, the FSC, which is a regulator, is to abide by, to file its accounts within six months of each year end. It is very strange; it is the same coincidence as the NIC. The FSC is not filing its audited accounts. Is the hon. Minister aware of this?

Mr Sesungkur: Madam Speaker, although this question is not directly related, I can confirm to the hon. Member that both years have been audited. Probably, it has not been put on the website.

Madam Speaker: Okay. Hon. Rughoobur!

Mr Rughoobur: Yes, thank you, Madam Speaker. There was an advert for recruitment for the post of Assistant Director to support the strategic team in achieving the FSC's role as an effective financial regulator. This is what was mentioned. For 2018, I do not see any Assistant Director recruited on contract basis. May I know from the hon. Minister if the post has been filled and, if not, why not?

Mr Sesungkur: The post of Assistant Director and other higher-level posts were advertised recently, and I can confirm to the hon. Second Member for Grand' Baie and Poudre d'Or that the procedures for the recruitment have advanced considerably and the recruitment will be done soon.

Madam Speaker: Yes, hon. Rughoobur!

Mr Rughoobur: In relation to recruitment, I just wanted to know from the hon. Minister, since the FSC is a very important organisation, what are the procedures that have been put in place to ensure that all recruitments are transparent and done in strict compliance to the principles of good governance, because from what I see here, they recruited a series of staff from the former Bramer Asset Management?

Mr Sesungkur: Indeed, Madam Speaker, the FSC being an independent regulatory body, it has got rigorous and stringent procedures for recruitment of staff and that includes advertisement in the papers, screening, exams etc. All these procedures have been respected for the past recruitment.

Madam Speaker: Last question!

Mr Rughoobur: A last supplementary, Madam Speaker, it relates to the capacity building, based on the growing importance of the sector for our economy. May I know from the hon. Minister whether a budget has been earmarked for capacity building and for training of staff based on the challenges facing the sector?

Mr Sesungkur: Definitely, Madam Speaker, there is a budget of approximately Rs7.8 m. earmarked for the training of FSC staff in various areas, be it management, technical aspects like money laundering etc.

Madam Speaker: Next question, hon. Rughoobur!

FINANCIAL SERVICES – PROMOTIONAL ACTIVITIES

(No. B/434) Mr S. Rughoobur (Second Member for Grand' Baie & Poudre d'Or) asked the Minister of Financial Services and Good Governance whether, in regard to the financial services sector, he will state the budget earmarked for the promotion thereof for financial year 2017-2018, indicating the institution entrusted with the responsibility therefor.

Mr Sesungkur: Madam Speaker, as the House is aware, prior to January 2018, and as provided in the Financial Services Act 2007, the Financial Services Promotion Agency (FSPA) was responsible to carry out promotional activities for the financial services sector. In this respect, a total amount of Rs73 m. was allocated in financial year 2017/2018 for the FSPA, which also include budgetary provisions for the Financial Services Institute.

I am also informed that as at 31 December 2017, an amount of Rs18,066,014.30 was spent by the Agency, of which Rs7,481,443.17 were expenses related to goods and services, including promotional activities.

Subsequently, the FSPA has been merged with the Economic Development Board (EDB) as from 01 January 2018, and henceforth, the latter has the responsibility to carry out promotional activities for the financial services sector.

Mr Rughoobur: Madam Speaker, with regard to this issue of promotion, since this FSPA has now been diluted with the EDB, may I know from the hon. Minister whether since the last Budget there has been a collaboration between EDB and his Ministry, what is the initiative taken and how has it been beneficial in terms of promoting this sector?

Mr Sesungkur: Indeed, Madam Speaker, despite the merger of the FSPA with the EDB, there is a collaboration between my Ministry and the EDB to try to focus on areas where we need to promote Mauritius, and precisely, there was a common mission that we led in March in the Gulf region, and that was a joint initiative of my Ministry and EDB.

Madam Speaker: Hon. Ameer Meea! No? Hon. Uteem!

Mr Uteem: Thank you, Madam Speaker. The head of the FSPA became the CEO of the FSC. So, may I know from the hon. Minister who is now heading the Directorate for Financial Services Promotion at the Economic Development Board?

Mr Sesungkur: Madam Speaker, EDB does not fall under my Ministry.

(Interruptions)

Yes, but I cannot answer for the EDB.

Mr Rughoobur: Madam Speaker, the fact that now this issue of promotion is under the responsibility of the EDB, does the hon. Minister feel that there is a problem of accountability? If ever this issue of promotion in this sector of financial services fails, how does he contemplate to solve this issue of accountability at his level?

Mr Sesungkur: Madam Speaker, the hon. Member is correct in saying that promotion of our financial services sector, and precisely, the International Financial Centre is a central strategic issue for Mauritius, and the FSPA was a key organisation to promote that objective, to promote the IFC. Since it is a policy decision for Government to centralise all the marketing and promotional activities under one institution, namely the EDB, given the aspect of efficiency, the EDB will have to address this issue at its level but, nevertheless, our Ministry has set up a mechanism in place so that we collaborate with EDB to attain the objective of promotion.

Madam Speaker: Last question, hon. Uteem!

Mr Uteem: Thank you, Madam Speaker. I would like to have a very simple answer from the hon. Minister. Who is responsible for financial services? Does his Ministry has any role, to date, in promoting the financial services and, if so, in what way is his Ministry involved in promoting financial services?

Mr Sesungkur: I just answered to this. My Ministry has a role, but we do it in conjunction with the EDB because of the resources at the level of EDB. My Ministry is generally responsible for the strategic aspect of the promotional activities.

Madam Speaker: Next question, hon. Rughoobur!

**NATIONAL PRODUCTIVITY COMPETITIVENESS COUNCIL –
PRODUCTIVITY IMPROVEMENT PROGRAMMES**

(No. B/435) **Mr S. Rughoobur (Second Member for Grand' Baie & Poudre d'Or)** asked the Minister of Financial Services and Good Governance whether, in regard to the National Productivity Competitiveness Council, he will, for the benefit of the House, obtain therefrom, information as to the –

- (a) composition thereof, and
- (b) initiatives undertaken to enhance the productivity level in Mauritius, since 2016 to date.

Mr Sesungkur: Madam Speaker, the National Productivity and Competitiveness Council (NPCC) is set up under the NPCC Act 1999 with the objective of stimulating productivity with a view to raising national output and achieving sustained growth and international competitiveness.

With regard to part (a) of the question, I am tabling the information.

Madam Speaker, as regard to part (b) of the question, I am informed that since 2016, the NPCC has been carrying out productivity improvement programmes throughout the country. These include:

- (i) capacity building for productivity improvement and competitiveness in enterprises,
- (ii) conducting research and studies to identify constraints and witnesses to the improvement of productivity, quality and competitiveness, and
- (iii) undertaking information and education campaign to inculcate new values and attitudes in the population.

However, despite these initiatives, Madam Speaker, we believe there is a need for a change in our approach to ensure that more is being done to improve productivity level. And here, I wish to highlight that since its setting up in 1999, there has been no evolution either in the structure of the Council or in its mode of operation. The Council was being administered and managed for nearly five years by an Officer-in-charge until a Chief Executive Officer was recruited in January this year.

The NPCC will undergo a complete strategic and institutional review shortly and in this respect, a tender exercise is in the process of being launched. We are confident that with

this exercise, a new strategic approach will be pursued with a view to improving overall productivity and competitiveness.

Madam Speaker: Hon. Rughoobur!

Mr Rughoobur: Madam Speaker, let me thank the hon. Minister for having stated that they are reviewing the overall strategy of the Council. May I inform the hon. Minister, the labour productivity for the economy grew by 2.4% in 2017 as compared to 3.4% in 2016 and for the manufacturing sector *c'est pire*. It grew by only 0.3% in 2017 as compared to, Madam Speaker, 2.7% in 2016.

Madam Speaker: So, what is the question of the hon. Member?

Mr Rughoobur: The question is, Madam Speaker, how is this issue being addressed by the Council and what are the initiatives that are being taken by his Ministry to address this urgent issue?

Mr Sesungkur: Yes, Madam Speaker, we are perfectly aware that there has been certain performance below expectation both in labour productivity and in capital productivity. Precisely, the NPCC will soon be conducting an in-depth study of the whole issue of affecting productivity at national level and this exercise will be done very soon.

Madam Speaker: Hon. Fowdar!

Mr Fowdar: Thank you, Madam Speaker. Given the fact that a Director had not been appointed since long and now that we have a new young dynamic Director, can the hon. Minister tell to the House today what are the highlights for the future project of NPCC?

Mr Sesungkur: I mentioned in my answer that we are looking at the whole institutional aspect of NPCC which was there since 1999. It had not changed. So, we need to have a fresh look as to how NPCC can meet objective of promoting productivity, but currently, I must say that the institutional structure, the approach that they are taking may not be the ideal approach to get the result that is expected in terms of productivity improvement.

Madam Speaker: Hon. Rughoobur!

Mr Rughoobur: Thank you, Madam Speaker. We know that during the recent years, there has been drastic increase in wages of employees, especially with this minimum wage. May I know from the hon. Minister what are the initiatives that have been taken by the stakeholders, unions, employers and employees to ensure that the productivity at the level of enterprises follows this drastic increase in salaries?

Mr Sesungkur: I am informed that the NPCC is already involved in various training programmes in both the private and the public sectors aiming at developing a sense of belonging and accountability with a view to continuously improve performance. With the implementation of the minimum wage policy, the NPCC is strengthening its capacity building programme to foster labour management cooperation and to ensure improved productivity in enterprises. In this respect, the NPCC will work in close collaboration with concerned stakeholders, including the Ministry of Labour, Industrial Relations, Employment and Training, the Ministry of Civil Service and Administrative Reforms and the trade unions.

Madam Speaker: Next question, hon. Uteem!

COMPANIES – MR A. S. - LICENCES

(No. B/436) Mr R. Uteem (First Member for Port Louis South & Port Louis Central) asked the Minister of Financial Services and Good Governance whether, in regard to companies directly or indirectly owned and controlled by Mr A. S., he will, for the benefit of the House, obtain from the Financial Services Commission, information as to the number thereof to which the Commission has issued licences, indicating in each case the –

- (a) type of licence issued, and
- (b) cases in which the licence has been suspended or revoked and the reasons therefor.

Mr Sesungkur: Madam Speaker, I wish to refer the hon. Member to the reply I made to Parliamentary Question B/118 on 04 April 2017 and the Private Notice Question on 14 June 2017 as well as to the replies made by the hon. Prime Minister to Private Notice Questions on 04 April 2017 and 27 March 2018 respectively. I, therefore, consider that the issues concerning the companies owned by Mr A. S. have been abundantly canvassed in this House, including the procedural aspects for the application, obtention, suspension or revocation of licences by the FSC.

With regard to the matter on “fitness and propriety”, the FSC Guidelines and processes have also been explained in length and depth.

Madam Speaker, with regard to part (a) of the question, I am informed by the FSC that there are 5 companies which are directly or indirectly owned and controlled by Mr A. S. These companies among themselves hold 10 licences as follows –

- (i) 3 Category 1 Global Business Licence;

- (ii) 1 Management Licence;
- (iii) 1 Captive Insurance Agent Licence;
- (iv) 1 CIS Manager Licence;
- (v) 1 Investment Adviser (Unrestricted) Licence;
- (vi) 1 Investment Banking Licence;
- (vii) 2 Closed-End Fund Licence.

Madam Speaker, with regard to part (b) of the question, I am informed by the FSC that the Investment Banking Licence held by Alvaro Sobrinho Africa Ltd was suspended on 27 March 2018. The matter has been referred to the Enforcement Committee of the FSC. I am also informed that as at date, no licence has been revoked.

However, 7 licences are currently subject to regulatory actions by the FSC. The sole shareholder of 2 companies having altogether 4 licences, have resolved to be removed from the Register of Companies under section 309(1)(d) of the Companies Act 2001. Procedures for the termination of the CIS Manager licence have also been initiated. The process is ongoing.

Madam Speaker, I wish to inform the House that from time to time, there have been adverse reports against Mr A. S. which so far have happened to be inaccurate or inconsistent. Nonetheless, I am informed that the FSC has constituted a special unit to follow up closely the situation regarding Mr A. S. so as to ensure that any action required, is taken promptly.

Madam Speaker, as Mauritius's financial centre grows in scale and sophistication, we have to be vigilant against the risk of its abuse for illicit financing activities. Indeed, all international financial and business centres face the risk of being used as a conduit for money laundering and terrorist financing activities.

Financial institutions are the critical gatekeepers against the flow of illicit funds. We therefore require financial institutions to comply with strict anti-money laundering regulations, and to have in place robust controls to detect and deter illicit activities.

We are also making organisational changes so as to enhance FSC's supervisory focus and effectiveness at a time of increasing sophistication of illegal money flows globally.

Madam Speaker: Hon. Uteem!

Mr Uteem: Madam Speaker, the hon. Minister referred to various PNQs and PQs. In one of these PQs, the hon. Prime Minister mentioned that the case has been reported to ICAC to investigate on Mr Alvaro Sobrinho (A. S.) and how he got his licences. May I know from

the hon. Minister this being the case, since this gentleman is being investigated and the hon. Prime Minister finds it necessary to refer the matter seriously enough to the ICAC, does not he think that the FSC should have suspended not one, but all of the licences of this gentleman?

Mr Sesungkur: Madam Speaker, I mentioned in my reply that there are several licences which will die down by itself, but in those cases where no actions have been taken, the FSC is seeking legal advice for appropriate action.

Madam Speaker: Hon. Leader of the Opposition!

Mr X. L. Duval: Madam Speaker, apparently this Alvaro Sobrinho and his *clique* failed the test to purchase mere villas in Royal Park and could not prove that the money was clean. That is according to BOI and the banks. How is it then that FSC, which is supposed to be even a higher institution, has passed the money as clean and given all the permits that have been given to this Mr Sobrinho and his *clique* and isn't that clear proof of interference including by himself in the licensing process?

(Interruptions)

Mr Sesungkur: Madam Speaker, the hon. Leader of the Opposition is asking something which is *ex ante*. The licences were already given. The question is: why FSC has not taken any action to date? I have said in my reply, FSC before taking any action, they need to be covered, they need to have legal advice, and this is in process.

Mr X. L. Duval: Madam Speaker, just to finish on that. The FSC must do its due diligence; the management company involved must do its due diligence before giving him the licence, not after. This is what I am asking the hon. Minister, why is it that he didn't do so? And we remember the mail that was sent to the hon. Minister by one Mr Sok Appadu asking for confirmation that the licences can be granted. This is why I am saying that this is pure confirmation of various interferences in the licensing process.

Mr Sesungkur: Madam Speaker, I remember I had answered to that during the PNQ. I couldn't prevent anyone to send me any mail. Okay. And that does not prove, that does not even show that there has been any interference. The issue today is that Mr A. S. and his companies have already got the licences and what FSC is doing now is to take actions. What the hon. Leader of the Opposition is saying is something which we cannot change. A decision was taken at that time and, based on facts and figures, information that were relevant at that time, the application was made. Subsequently, there have been many reports, many

media comments, international Press articles, but, as a regulator, they cannot rely on Press articles; they cannot rely on frivolous comments. They have to rely on factual evidence, on evidence which they can defend themselves in Court.

Madam Speaker: Hon. Rutnah, last question!

Mr Rutnah: Thank you, Madam Speaker! Can the hon. Minister confirm on which date, especially in relation to the Captive Insurance licence, the application was made and on which date the application for licence was approved and granted?

Mr Sesungkur: The Captive Insurance Agent licence was issued on 21 November 2016.

Madam Speaker: Next question, hon. Uteem!

Mr Uteem: One supplementary on this. It is my question, I have only one.

Madam Speaker: You have got only one.

Mr Uteem: Yes. Thank you, Madam Speaker. The hon. Minister, himself, said: “*l’image de notre secteur financier est affectée*”. So, can I ask the hon. Minister how come the FSC still allows Alvaro Sobrinho to operate a management company by the name of Tyson Corporate Services Ltd., that is, giving him a blank cheque to incorporate whatever company he wants and uses and misuses the jurisdiction of Mauritius?

Mr Sesungkur: I just mentioned, Madam Speaker, that FSC has already taken relevant action. They are awaiting legal advice before taking whatever action is needed.

Madam Speaker: Next question, hon. Uteem!

BAI CO. (MTIUS) LIMITED - LIQUIDATOR - APPOINTMENT

(No. B/437) Mr R. Uteem (First Member for Port Louis South & Port Louis Central) asked the Minister of Financial Services and Good Governance whether, in regard to the related companies of the BAI Co. (Mtius) Limited which have been put into liquidation, he will, for the benefit of the House, obtain from the Special Administrator thereof, information as to the –

- (a) name and terms of appointment of the liquidator thereof, indicating if he is in anyway related to the Special Administrator, and
- (b) value of the aggregate assets and liabilities thereof as at to date.

Mr Sesungkur: Madam Speaker, with regard to part (a) of the question, I am informed by the Financial Services Commission that the Court has appointed Mr Georges Chung Ming Kan as the liquidator of the related companies of BAI Co. (Mtius) Limited. I am tabling a list of these companies and the date of appointment as liquidator.

I am further informed that the appointment has been made under the Insolvency Act 2009 and the terms and conditions of this appointment are governed by the provisions of the said legislation. In fact, the main duties of the liquidator are to collect receivables and distribute the available funds in accordance with section 328 of the Insolvency Act 2009.

I am informed that the fixed fees payable to the liquidator as per Court order for all the companies except the Bramer Banking Corporation Ltd. are Rs17,002,500.

As regards the Bramer Banking Corporation Ltd., I am advised that no fixed fee has been ordered by the Court and consequently, the fee payable will be between 5% and 15% of the gross recovery proceeds as per section 111 of the Insolvency Act depending upon the complexity of the case. I am also informed that both the liquidator and the special administrator are partners of BDO and Co.

Madam Speaker, with regard to part (b) of the question, I am informed by the FSC that the value of the total assets/book receivables, excluding those assets already transferred to NPFL and NIC, amount to Rs515,014,866 of which Rs49,716,303 have been realised as at date. The total liabilities in respect of the related companies of BAI Co. (Mtius) Limited stand at Rs13,649,708,787.

Madam Speaker: Hon. Uteem!

Mr Uteem: May I know from the hon. Minister whether any tender exercise had been carried out to recruit a liquidator being given the indecent amount of money that is being paid to them Rs17 m. and 5% to 15% of the asset of Bramer Bank?

Mr Sesungkur: Madam Speaker, I mentioned in my reply that the liquidator was appointed by the Court and the terms and conditions were decided in accordance with the Insolvency Act. So, I don't know who could have intervened in the process, but I agree with the hon. Member and I have asked the FSC to take up the matter with BDO.

Madam Speaker: Hon. Uteem!

Mr Uteem: The Court makes an appointment based on application. The application was made by the Special Administrator who is the partner of Mr Georges Chung, both from

BDO. Doesn't the hon. Minister find it an obvious case of conflict of interest and shouldn't the FSC take immediate action against the Special Administrator?

Mr Sesungkur: I don't know if there has been a conflict of interest, but it was the duty, the responsibility of the Special Administrator to pass to the next stage of liquidation after having realised the assets. So, I will take up the matter with the FSC.

Madam Speaker: Hon. Dr. Boolell! You have a question!

Dr. Boolell: Madam Speaker, will the hon. Minister state whether, in the process of hiving off some of the companies which were lucrative, the value of the assets have been deliberately depressed to allocate those resources to people whom this Government has handpicked?

Mr Sesungkur: I have no answer to this, Madam Speaker.

Madam Speaker: Hon. Uteem, next question!

Mr Uteem: Is the hon. Minister aware that, under section 109 of the Insolvency Act, a person is disqualified from becoming a liquidator if he or his partner has been auditor of a company or related company in the preceding years and BDO was the auditor of Bramer Proper Fund Ltd.? Does he find it normal that BDO should appoint his own partner as liquidator?

Mr Sesungkur: Madam Speaker, this is an old story.

(Interruptions)

The appointment was made at a time when ...

(Interruptions)

No, they audited. When was BDO appointed as special administrator, is it in 2018?

Madam Speaker: Next question, hon. Uteem!

HAJJ PILGRIMS – AIR TRANSPORT & ACCOMODATION

(No. B/438) Mr R. Uteem (First Member for Port Louis South & Port Louis Central) asked the Minister of Arts and Culture whether, in regard to the contracts for air transport and accommodation for Hajj pilgrims this year in Makkah and Madina, he will, for the benefit of the House, obtain from the Islamic Cultural Centre –

(a) information as to the –

- (i) procedures followed for the selection thereof, and
 - (ii) amount paid or to be paid in relation thereto, and
- (b) table copy of the agreements relating thereto.

Mr Roopun: Madam Speaker, with regard to contract for air transportation of pilgrims, I am informed by the Islamic Cultural Centre that -

- (i) an Expression of Interest for the transportation of 1,500 Mauritian pilgrims to Saudi Arabia, was sent to 16 local and international airline companies and general sales agents on 21 December 2017;
- (ii) two offers were received as at the closing date of 12 January 2018, namely from Saudi Arabian Airline and Emirates.
- (iii) the price of air ticket will be finalised shortly.

As regards accommodation for Hajj pilgrims in Makkah and Madina, I am informed by the ICC that -

- (i) the responsibility to secure accommodation of appropriate standard rests with the licensed Hajj operators;
- (ii) in February 2018, the Hajj operators proceeded to Saudi Arabia to identify suitable accommodation;
- (iii) this was followed by a Pre-Hajj Mission of the ICC to validate same, based on a set of criteria established by the centre.

I am tabling a list of the buildings which have been validated by the ICC, together with their respective prices.

Input of all relevant details for the forthcoming Hajj, including accommodation facilities into the e-Hajj system of the Saudi Authorities, is presently being ensured by the ICC.

I am informed by the ICC that agreements with regard to reservation of accommodation rest with the licensed Hajj operators and the building owners.

Madam Speaker: Hon. Uteem!

Mr Uteem: Madam Speaker, the hon. Minister will appreciate how sensitive this issue is. May I know from the hon. Minister whether he has taken cognisance of the statement

made by his colleague, hon. Soodhun, in March of this year, saying that the price of the ticket would be Rs31,000 and then, the same hon. Soodhun, in April, said that the price would be Rs34,500? May I humbly request the hon. Minister to look into this matter and stop making his colleague do a joke of the price of these Hajj tickets?

Mr Roopun: Madam Speaker, in this holy month of Ramadan, let me ask all our hon. Members to have some *sabar* and that very soon we will be fixed on the price that Hajjis will have to pay.

Madam Speaker: Hon. Uteem!

Mr Uteem: Is the hon. Minister aware that there has been an internal audit carried out by the Ministry of Finance? I understand that he was given a copy of the report, and if this is the case, can he enlighten the House as to whether there was any shortcoming or any comment made with regard to the organisation of Hajj, and in particular the accommodations of Hajjis in Makkah and Madina?

Mr Roopun: Madam Speaker, I won't travel outside the ambit of this question for the time being.

Mr Uteem: Then, I will stick to this question, very simple. The hon. Minister just mentioned that the licensees are responsible to choose hotels. So, may I know from the hon. Ministry, why then do the licensees have to pay to the ICC the money and why is there a bank account in Saudi run by the ICC, by not even a member of the Board, but by an officer who deals with those responsible for accommodation?

Mr Roopun: Madam Speaker, I understand that according to arrangements made with the Saudi Authorities, all payments are made through the ICC and through a Bank Account which is opened every year for each Hajj.

Madam Speaker: Last question!

Mr Uteem: The hon. Minister will tell us who is bank signatory of this account and whether the audit has found anything unbecoming about the way this money is being handled by - I repeat - people who are not members of the ICC Board?

Mr Roopun: Madam Speaker, I won't venture outside the ambit of this question.

Madam Speaker: Next question, hon. Uteem!

SEXUAL OFFENCES - LEGISLATION - AMENDMENT

(No. B/439) Mr R. Uteem (First Member for Port Louis South & Port Louis Central) asked the Attorney General, Minister of Justice, Human Rights and Institutional Reforms whether, in regard to the proposed introduction of a Sexual Offences Bill in the House, he will state where matters stand.

Mr Gobin: Madam Speaker, I wish to inform the House that there is no specific reference to a Sexual Offences Bill in the Government Program 2015-2019. However, the House may wish to note at paragraphs 171 and 172 of the Government Program 2015-2019 read as follows. Paragraph 171, I quote –

“Government will make better provision for the rights and interests of victims and, in particular, provide in the law for representations by or on behalf of a victim to be taken into account at sentencing stage.”

Paragraph 172 –

“Government will amend the Criminal Code to provide for a better legal framework for dealing with sexual offences and will enhance the procedural context in which such cases are dealt with.”

In the light of the above, it is not proposed to come up with a Bill with this specific title, the Sexual Offences Bill. However, the House will recall that during the debates in relation to the Judicial and Legal Provisions Bill this year, I had stated that there will be other reforms to be brought in relation to the Criminal Justice System. It is in this context that it is intended to amend the Criminal Code in relation to sexual offences. Appropriate amendments will also be brought to the Criminal Procedure Act, the District and Intermediate Courts (Criminal Jurisdiction) Act and other relevant legislations to ensure that victims of sexual offences may give evidence in a better context than at present. The amendments will also bring about certain changes aiming at fairer criminal justice norms in line with our present day circumstances.

To this end, I will be consulting the Director of Public Prosecutions, the Law Reform Commission and will examine the international best practices and come up with the amendments after they have been approved by Cabinet.

It is anticipated that the amendments will be introduced towards the end of this year or at latest at the beginning of the legislative calendar 2019.

Madam Speaker: Hon. Uteem!

Mr Uteem: Madam Speaker, may I know from the hon. Attorney- General whether in the proposed changes to the Criminal Code, the Government intends to formally criminalise the offence of marital rape?

Mr Gobin: This question has been under examination for a number of years, Madam Speaker, including a Select Committee towards the end of 2007 and 2008. I think my colleague, hon. Bodha, was then in the opposition and had asked a specific question relating to that. I am saying this because there has been a number of works already carried out, including on that specific question. I will have to take into account all the issues raised, including the one of marital rape and other issues as well.

Madam Speaker: Hon. Uteem.

Mr Uteem: In 2007, the Bill did not go through and a Select Committee was put in place because of the introduction of one amendment which would have had the effect of legalising sodomy. So, does the Government intend to keep the *status quo* or is it proposing to amend that section of the law?

Mr Gobin: I can only repeat what I have just stated. All the issues will have to be looked into. I have not made up my mind and it is not for me to make up my mind only, I have to consult as I said. It pertains to the criminal justice system, so, after the consultations, I will go to Cabinet and come to the House at the appropriate stage.

Madam Speaker: Hon. Rutnah!

Mr Rutnah: Madam Speaker, in relation to the principle of sentencing, not only with regard to sexual offences, but all offences, would the hon. Attorney-General consider setting up a Committee comprising of representatives of the Judiciary, the Mauritius Bar Association and the Law Reform Commission to actually see whether we could come up with a sentencing guideline council so that Judges and Magistrates can follow guidelines in relation to specific offences and to deal with sentencing in a manner that reflect and commensurate the type of the offence that has been committed?

Mr Gobin: I am thankful to my hon. colleague for asking this question. The question of sentencing guidelines has been worrying me for a number of years. It is already part of the statutory duty of the existing IJLS to prepare sentencing guidelines. I wonder why it is taking

so long. I will have to take up the matter with the Chairperson and, if need be, come up with the legislative amendments in that regard.

Madam Speaker: Next question, hon. Ameer Meea!

NATIONAL CSR FOUNDATION - FUNDS - BENEFICIARIES

(No. B/440) Mr A. Ameer Meea (Second Member for Port Louis Maritime & Port Louis East) asked the Minister of Social Integration and Economic Empowerment whether, in regard to the Corporate Social Responsibility, he will, for the benefit of the House, obtain from the National Corporate Social Responsibility Foundation, information as to the amount of money collected and disbursed for Financial Year ending 30 June 2016 and 30 June 2017, respectively, giving the list of –

- (a) organisations;
- (b) projects funded, and
- (c) category of the beneficiaries thereof as per the new guidelines.

Mr Wong Yen Cheong: Madam Speaker, I wish to refer the hon. Member to the reply made to the Private Notice Question on 12 August 2016 by the Minister of Finance and Economic Development wherein the House was informed that the unspent CSR money collected by Mauritius Revenue Authority and remitted to the Consolidated Fund for the fiscal year 2015/2016 amounted to Rs147.5 m.

As for the Financial Year ending 30 June 2017, I am informed by the National Corporate Social Responsibility Foundation that an amount of Rs108,864,250.76 has been remitted to the Foundation through the Accountant General. Disbursement of the funds by the National CSR Foundation to a non-governmental organisations started as from July 2017.

Madam Speaker, in my reply made to Parliamentary Question B/694 on 07 November 2017, the House was informed that the list of the non-governmental organisations together with the corresponding approved funding was available on the website of the National CSR Foundation and a list of same was tabled. The guidelines also are available on the website of the Foundation.

With your permission, Madam Speaker, I am tabling the information concerning organisations that have benefited from funding from the National CSR Foundation, together with details of the beneficiaries and the amount of funds disbursed to them as at 17 May 2018.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Madam Speaker, according to the G.N. 52 of 2017, whereas there are 11 priority areas of intervention, I would not mention all the 11, but there are three that I am very much interested with. The first one is field of advocacy, capacity building and research for consideration as prospecting throughout the priority areas of intervention. I would tell you frankly, I do not understand anything in this. The second one is peace and nation building and the third one is the Road Safety Unit. Therefore, can I ask the hon. Minister how much has been disbursed in relation to those three priority areas that I have just mentioned?

Mr Wong Yen Cheong: If I get you right, regarding the peace and nation building there are eight projects to the tune of Rs5,566,965 which represent 2.7% of the amount of the CSR Fund and for the road safety there is none. I did not get the third one.

(Interruptions)

There is none on my list.

Madam Speaker: Hon. Leader of the Opposition!

Mr X. L. Duval: I understood that 25% of the contribution for CSR was meant to be paid now to the MRA. If that is correct, I understand CSR is about Rs800 m. per year. So, we are far below the amounts. The amounts of Rs108 m. or so that the Minister has given are far below the amounts that should have been received, according to me, by the MRA through CSR. Can the hon. Minister account for that?

Mr Wong Yen Cheong: Madam Speaker, I cannot question about the fund that has been given to me by the Accountant-General. I do not question the Accountant-General about the fund that is given to the NCSR Foundation.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Madam Speaker, again, in the G.N., mention is being made that the priority areas specified, that is, the 11 priority areas in this Schedule shall target individuals and families registered under the Social Register for Mauritius. Therefore, can I ask the hon. Minister, in relation to road safety and security, how do you reconcile this issue of road safety and security targeting only people who are registered on the Social Register for Mauritius? How do you target these people only for road safety and security?

Mr Wong Yen Cheong: Madam Speaker, what is said by the hon. Member, there are priority areas that we give money to those who are under the Social Register of Mauritius, we said priority, but it does not mean that we do not fund others.

Madam Speaker: Hon. Armance!

Mr Armance: Thank you, Madam Speaker. It a circular letter dated 2017, one of the priority areas is supporting people with disabilities. I would like to know from the hon. Minister what are the measures that have been put in place by his Ministry to help the poor people, to support the people with disabilities?

Mr Wong Yen Cheong: Madam Speaker, this is not related to the CSR Foundation. Thank you.

Madam Speaker: Next question, hon. Ameer Meea!

MOTORCYCLES & AUTOCYCLES - LEARNER DRIVERS

(No. B/441) Mr A. Ameer Meea (Second Member for Port Louis Maritime & Port Louis East) asked the Minister of Public Infrastructure and Land Transport whether, in regard to holders of the Learner's Licence for motorcycles, he will state if –

- (a) they are subject to roads restriction, and
- (b) consideration will be given for lower tariffs to be applicable to those having failed the exams and needing to follow further courses.

Mr Bodha: Madam Speaker, the Road Traffic (Amendment) Regulations 2018 came into force as from 01 March 2018.

As per these Regulations, a learner driver, including that of a motorcycle or an autocycle, is restricted to drive along motorways M1, M2, M3, ten roads in Port Louis and four roads at Curepipe as specified in the Fifth Schedule.

However, the learner driver is allowed to drive along the roads specified in the Fifth Schedule, when –

- (i) he is performing a driving test under the supervision of an examiner;
- (ii) the route taken by the motor vehicle is crossing such a road at a junction, or
- (iii) he is learning to drive an autocycle or a motorcycle under the supervision of a driving instructor in a dual-controlled car, outside specified restricted hours.

Furthermore, learner drivers of motorcycles and autocycles are allowed to drive along any part of a road classified as a main road when they have passed the oral examination, vehicle safety check test and off-road driving manoeuvres test.

Madam Speaker, with your permission, I am tabling a copy of the Fifth Schedule. These measures relate to the new holders of a provisional learner licence.

Madam Speaker, as regards part (b) of the question, the prescribed fee for each driving test is Rs500 since January 2011.

If a learner driver feels that he or she is not sufficiently prepared to undergo a test anew, he may reschedule the date of the test at no additional cost.

In case of a learner driver who fails the tests, he may make arrangements for refresher courses in related areas with the motorcycle driving school.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Thank you, Madam Speaker. According to my information, we have 200,000 motorcycles in Mauritius and 120,000 of them are learner's licence. I just heard the hon. Minister mention that the rules and regulations apply to only the new learners. So, what will happen to those 120,000 old learners?

Mr Bodha: In fact, there are more than that. These people have been going to work, living with the pattern of driving their motorcycles over the years. So, what we have proposed is that they are given three years to be able to undergo a test, to be able to have their licence. But, we could not have right away forbidden 200,000 people from using their motorcycles on the main roads.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Again, according to my information, if I am not wrong, the new regulation for learner - yes, the hon. Minister mentioned it - will be for 6 months. But another issue is that the test will only be carried out in Curepipe only. Is this information correct?

Mr Bodha: No, the test will be carried out everywhere, where we can do it. We will do it in Port Louis and Curepipe as well.

(Interruptions)

We have not started with the test

Madam Speaker: Next question, hon Ameer Meea!

STRAY DOGS

(No. B/442) Mr A. Ameer Meea (Second Member for Port Louis Maritime & Port Louis East) asked the Minister of Agro-Industry and Food Security whether, in regard to stray dogs, he will, for the benefit of the House, obtain from the Mauritius Society for Animal Welfare, information as to the number of complaints received as to the number thereof on the public roads and places since January 2017 to date, indicating the -

- (a) number of catching exercises carried out and the outcome thereof, and
- (b) additional measures, if any, that will be taken to address the problem.

Mr Seeruttun: Madam Speaker, the Mauritius Society for Animal Welfare and previously known as the Mauritius Society for Prevention of Cruelty to Animals, has been engaged in control of stray dogs activities for decades now. These dog catching activities are carried out in residential and commercial areas, schools, hospitals, local authorities, hotel compounds and public beaches, amongst others. The MSAW has a scheduled region wise calendar for dog catching activities and its six dog catching vans operate on a regular basis so as to ensure that all regions across Mauritius and all complaints are addressed within the least possible delay.

With regard to part (a) of the question, I am informed that the MSAW has since January 2017 to date received 4,925 complaints from across Mauritius with regard to the presence of stray dogs in public places. Out of these complaints, 4,804 related to the presence of stray dogs in public places such as schools, roads and public beaches. I am further informed that the MSAW has conducted 1,294 interventions across the island from January 2017 to date, following which 14,771 dogs have been impounded.

Madam Speaker, I wish to point out that the MSAW has, since 2015, increased its number of interventions in terms of dog catching activities from 7,025 dogs caught in 2015 to 11,333 dogs caught in 2017. The MSAW is also acquiring a new dog catching vehicle, which will enable them to further increase their dog catching activities in the course of the year.

As regards part (b) of the question, my Ministry has already initiated several actions geared at controlling the proliferation of stray dogs on several fronts, namely -

- (i) alongside its dog catching activities, the MSAW also undertakes sterilisation of dogs, and from January 2017 to date, a total of 4,213 dogs have been

sterilised and the sterilisation campaign is being stepped up with the collaboration of H.S.I. and private veterinarians;

- (ii) consultations have also been held with local NGOs and stakeholders involved in the promotion of animal welfare so as to eventually enlist their support in the control of stray dogs in Mauritius. To date, 15 NGOs have registered themselves with the Animal Welfare Unit of the Division of Veterinary Services of my Ministry;
- (iii) the Animal Welfare Act 2013 is also being reviewed by a Committee at my Ministry to make it more effective in controlling the problem of stray dogs in Mauritius;
- (iv) two project proposals for the setting up of dog shelters to rehome stray dogs from the streets have been received at the level of my Ministry and feasibility thereof is currently being assessed, and
- (v) my Ministry is currently in the process of seeking consultancy services for a study to be carried out to assess the actual problem of stray dogs in Mauritius and make appropriate recommendations for addressing this problem based on international best practices.

Madam Speaker: Hon. Ameer Meea!

Mr Ameer Meea: Madam Speaker, can I ask the hon. Minister if he has the figures for dog population in Mauritius, stray dogs more specifically, and also whether he has the statistics for the percentage targeted for sterilisation?

Mr Seeruttun: A study was carried out in the year 2013, where it was estimated that the dog population in the island was about 300,000 and, out of those, there were about 80,000 stray. But when we talk about stray dogs, there are also dogs that are owned, but they are left in nature in the evening and sometimes they do cause problem as much as the stray dogs.

Madam Speaker: Hon. Ms Sewocksingh!

Ms Sewocksingh: Thank you, Madam Speaker. In regard to a signed protocol for sterilisation of stray dogs in the east of the island dated 20 February 2018 between the concerned Ministry and the Humane Society International, costing Rs13 m., which is scheduled for 12 months, starting March 2018 to March 2019, can the hon. Minister indicate to the House whether all equipment and medications are available to start the programme and

if there are foreign collaborators who are presently in Mauritius to conduct the programme and since when they are in Mauritius?

Mr Seeruttun: Madam Speaker, since February 2018, the Ministry has signed a MOU with the Humane Society International, which is an international NGO, which has done similar projects elsewhere and has proposed the services in Mauritius to embark into that sterilisation campaign. They are targeting the region of Flacq and it is going to span over one year, and they are targeting to sterilise some 10,000 dogs over that period. They have to start with the sensitisation campaign in that region first to inform the public that this is going to be carried out in that region, and then they are going to start the sterilisation exercise.

Madam Speaker: Hon. Osman Mahomed!

Mr Osman Mahomed: From the reply of the hon. Minister, I quote the figure of 4,000 plus complaints and 1,000 plus interventions. Therefore, there is a mismatch between the figures. Myself, I have called the MSAW before with respect to problems in my constituency and to no avail. So, what resort can one have because of the under capacity of MSAW to deal with the stray dog problem?

Mr Seeruttun: Madam Speaker, when I mentioned 4,000, sometimes there might be similar calls from the same region. So, they have to intervene in that particular region. That does not mean that, if you have 4,000 calls and you have about 1,300 interventions, we have missed out on the others. You do have calls from similar regions. Then, when they intervene, they cover that whole region. So, in terms of what are we doing to improve on that, like I mentioned in my reply, we are purchasing a new vehicle to improve the capacity to intervene further.

Madam Speaker: Next question, hon. Lepoigneur!

MINISTRY OF YOUTH & SPORTS - MR J. M. S - FORMER ADVISER

(No. B/443) Mr G. Lepoigneur (Fifth Member for Beau Bassin & Petite Rivière) asked the Minister of Youth and Sports whether, in regard to Mr J. M. S., former adviser at his Ministry, he will state the terms and conditions of the contract of appointment, qualifications and experience thereof.

Mr Toussaint: Madam Speaker, I am tabling the terms and conditions of the contract of employment and the CV of Mr J. M. S., former advisor at my Ministry.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: Can the hon. Minister inform the House why did he resign from his post and when did he resign?

Mr Toussaint: Madam Speaker, a renewal of contract as advisor was made to Mr J. M. S. on 02 May of 2018 and he sent a letter to the Permanent Secretary of my Ministry on 10 May, saying that he has decided not to accept the renewal of his contract as advisor in the Ministry of Youth and Sports.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: Before Mr J. M. S. took service at the Ministry, did he produce a clear Certificate of Character and validated by the Police services?

Mr Toussaint: Madam Speaker, I am informed that it is not a normal procedure to submit a Certificate of Character.

(Interruptions)

Madam Speaker: Hon. Bhagwan first, and then I will come back to you.

Mr Bhagwan: We are talking about an advisor who was supposed to work, to advise the Minister on youth matters. Would the hon. Minister and the population and the youth of this country be surprised that, in 2006, he was found guilty by the Court of Curepipe for emission of two cheques of Rs100,000 each without provision and he was sentenced to 100 hours of community service at CEB Rose Hill, unfortunately, in my region? Had I known, I would have taken much care.

Second case, in 2011, he was found guilty by the Intermediate Court for procuring the means in the commission of a crime and he was sentenced to three months jail, and then sentenced to Rs20,000 and also good behaviour for three years.

So, does not the hon. Minister - I am talking to the Senior, to the Rt. hon. Minister Mentor who was Prime Minister - before Government employs, gives a clearance for employing an advisor, especially to work with youth...

Madam Speaker: Your question should be addressed to the Minister concerned.

Mr Bhagwan: He will not be able to reply. So, I am asking the question...

(Interruptions)

Madam Speaker: No, I am sorry hon. Bhagwan. Please, sit down. You know the procedures; you already know the procedures. You have been in this House for a long time.

So, you know that another Minister cannot reply to a question which is on the agenda and addressed to a particular Minister. You ask your question to the Minister.

Mr Bhagwan: Doesn't the hon. Minister think that before recruiting somebody with such a file, and then working as advisor, he should have had him cleared by the Police? Can the hon. Minister confirm to the House that that advisor is a relative of him?

Mr Toussaint: Madam Speaker, I am not in a position to reply; so, I won't reply.

Madam Speaker: Hon. Dr. Boolell, last question!

(Interruptions)

Please!

Dr. Boolell: Can the hon. Minister state whether clearance was not obtained from the Prime Minister before that person is recruited?

Mr Toussaint: The normal procedure is that *la demande est faite et envoyée, bien sûr, au PMO pour être avalisée après.*

Madam Speaker: Hon. Bhagwan, last question!

(Interruptions)

Hon. Adrien Duval, I am sorry!

(Interruptions)

Please, sit down! Several times, I have drawn attention to the fact that according to the Standing Orders, the Speaker has the authority to see as to the number and relevance of questions, and to who catches her eye.

(Interruptions)

Hon. Bhagwan! It is up to me to decide. Please, sit down! When I am on my feet, you have to sit down. I have given my ruling on this.

I have already asked hon. Bhagwan. He had a question last week which he had withdrawn. This is why I am giving him a second question.

(Interruptions)

I have the authority to do so.

(Interruptions)

Unfair or not, I have the authority! Yes, hon. Bhagwan!

Mr Bhagwan: I have one last question, Madam Speaker.

(Interruptions)

Madam Speaker: Now, did the hon. Member make a comment to say that I am arrogant? If you have the guts, stand up and say it! Hon. Bhagwan, please!

(Interruptions)

Order!

Mr Bhagwan: Madam Speaker, I am asking the hon. Minister, am I right to say that had it not been for my Parliamentary Question, and the directive from the PMO, this person would have still been an advisor to his Ministry?

Mr Toussaint: Madame la présidente, il est vraiment navrant ce qui a pu se passer. Je n'ai nullement l'intention de couvrir ou faire quoi que ce soit. Monsieur J.M.S. a soumis sa lettre de démission de *non-renewal of contract* et il est parti. Je dois dire qu'il a été d'une grande aide pour cette année passée au ministère. Donc, je dis à l'honorable membre que ce n'est pas nécessairement par rapport à sa question qu'il est parti.

Madam Speaker: Next question, hon. Lepoigneur!

(Interruptions)

Next question, I have said, hon. Lepoigneur!

(Interruptions)

Now, if the hon. Member does not agree, he does not agree! Hon. Lepoigneur, I have said next question!

METRO EXPRESS PROJECT - TRAFFIC COORDINATION & MANAGEMENT PLANS

(No. B/444) Mr G. Lepoigneur (Fifth Member for Beau Bassin & Petite Rivière) asked the Minister of Public Infrastructure and Land Transport whether, in regard to the Beau Bassin roundabout, he will state if a Traffic Impact Assessment has been carried out to assess the impact of additional traffic likely to be generated thereat in the wake of the implementation of the Metro Express Project.

Mr Bodha: Madam Speaker, I am informed that the Singapore Cooperation Enterprise carried out surveys in 2012 and 2013 of all interfaces between the Metro Express and the traffic when they prepared the Reference Design; on the basis of which, the Request for Proposal for the Design and Build contract of the Metro Express Project was invited in January 2017.

I am also informed that, as part of the Employer's Requirements, the Design and Build Contractor Larsen and Toubro Ltd. is required to propose Traffic Coordination and Management Plans. These plans should be supported by Traffic Data and simulation modelling analysis, demonstrating the negative traffic impacts on the Mauritius road network and that they are minimised during the works.

Madam Speaker, I am further informed that, also as part of the Employer's Requirements, a Traffic Management Liaison Group (TMLG) has been set up to monitor the implementation of the proposed Traffic Coordination and Management Plans.

This Liaison Group is made up of representatives from the TRMSU, the Road Development Authority, the Police Traffic Branch, the Municipality of Beau Bassin/Rose Hill, Larsen and Toubro Ltd, RITES Ltd, Metro Express Limited (MEL) and the Singapore Cooperation Enterprise.

It assesses the Traffic Coordination and Management Plans proposed by the contractor for each area where traffic deviation plans are to be put in place and forwards its technical recommendations to Metro Express. Issues which are raised -

- (i) road user safety;
- (ii) existing and forecasted variations in traffic flow;
- (iii) proposed traffic arrangements to manage users;
- (iv) access arrangements for residents, local businesses;
- (v) impacts on public transport facilities, and
- (vi) parking requirements.

All the Traffic Coordination and Management Plans have to be approved by Metro Express.

Madam Speaker, I am further informed that the alignment of the Metro Express project goes along the ex-railway track, which in the past was along and through the Beau Bassin Roundabout and along Jardin Bijoux. The alignment of the Metro Express project will have the same alignment.

The Beau Bassin Round About will be converted to a signalised junction, similar to the one that we have set up in Rose Hill.

Madam Speaker, traffic being dynamic in nature, surveys need to be updated. The Traffic Modelling Unit of the TRMSU is presently carrying out a drone survey to assess the current situation and update the surveys which have been carried out by Singapore Cooperation Enterprise and consider the proposals of Larsen and Toubro Ltd.

The new signalised junction of Beau Bassin will be re-engineered to the prevailing traffic conditions at this junction to cater for proper traffic flow.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: Can the hon. Minister inform who carry out the Traffic Impact Assessment?

Mr Bodha: At the beginning, we had the surveys which were carried out by Singapore Cooperation Enterprise. Then, we have the proposals of Larsen and Toubro Ltd. in the contract. The Traffic Modelling Unit of the TRMSU is updating the survey, that is, the third survey which is being done now.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: At the moment, from the Meldrum Street up to Intermart at Beau Bassin, there is always a big traffic jam. Can the hon. Minister consider that they put a flyover at the roundabout of Beau Bassin because with the arrival of the Metro Express it will be useful?

Mr Bodha: We cannot have a flyover at a roundabout because it has to be a 100-metre before and 100-metre after. So, it will change the whole structure of the Metro System. In fact, we are going to have a signalised system so that the Metro will have the priority and we will be able to manage the traffic from the different directions.

Madam Speaker: Hon. Bhagwan!

Mr Bhagwan: The hon. Minister has mentioned the traffic lights system. We have seen these days the chaotic situation - although it is temporary, I hope - at Vandermeerch Street.

(Interruptions)

We do not have *motards*, hon. Deputy Prime Minister! We use our cars, we are not like you. You have your priority.

Madam Speaker: Please, ask your question!

Mr Bhagwan: Madam Speaker, there is a real problem. In view of the fact that we have the *Paroisse du Sacré Coeur*, the taxi stand and the market, and what we are experiencing these days in Rose Hill, can the hon. Minister say whether all these experiences will be used for the betterment of the control of traffic at the roundabout of Beau Bassin, and taking into consideration that we also have the college of BPS nearby?

Mr Bodha: Madam Speaker, the hon. Member is giving good suggestions. I went to Rose Hill yesterday at three o'clock, four o'clock and four thirty ...

(Interruptions)

Indeed, it is getting better. I think, it is pattern of people driving on a daily basis.

The solution - we have the Police, but we have also understood one thing, that the most important entrance into Rose Hill, from Ebène and from Terre Rouge/Verdun is that road which has a junction with Vandermeersch and we are taking care of that. The suggestion that all that we are learning from what has been done with the roundabout at the station of Rose Hill will help us to better master the situation in Beau Bassin because in Rose Hill we have six different directions and in Beau Bassin as well, I think, we have six.

Madam Speaker: Hon. Baboo!

Mr Baboo: Thank you, Madam Speaker. Can the hon. Minister inform the House whether any other exercise such as simulation has been carried out besides the traffic assessment to analyse whether that area would be able to bear a huge traffic, and if yes, when and what the report revealed?

Mr Bodha: What I said, Madam Speaker, traffic being very dynamic, a survey you have done in 2012 is no longer valid. So, we did a survey; the SCE did it in 2012-2013; Larsen and Toubro did it before the proposal for the contract and now we are doing it with the drone survey and doing the Traffic Modelling Unit which we have set with an expert from Korea Expressway Corporation.

Madam Speaker: Hon. Osman Mahomed!

Mr Osman Mahomed: Thank you, Madam Speaker. Surely the situation will have been different from 2012 because cars are being imported every year and many of them. Now, can I ask the hon. Minister at grade level from the time the train is announced and the time it leaves the intersection where traffic is going to be blocked; how long is that period?

Mr Bodha: What I can say today is that the train will have priority.

(Interruptions)

No, it is not a trunk!

(Interruptions)

No, it is not!

Madam Speaker: Hon. Minister, don't engage in any conversation!

Mr Bodha: It is a LRV. It is a Light Rail Vehicle with seven compartments.

(Interruptions)

Priority will be given to the train and the synchronisation at the different other roads leading to that junction would depend. I think it will be a technical matter for experts to decide for each and every interface.

Madam Speaker: Hon. Lepoigneur!

Mr Lepoigneur: Merci, Madame la présidente. Déjà, il y a eu un très gros problème au niveau de Beau Bassin pour aller jusqu'à Coromandel. Il y a un très gros trafic. Mais avec les feux de signalisation que l'honorable ministre a annoncé ce sera encore pire. Je pense qu'il sera envisageable de faire comme on fait d'Arab Town pour venir. Il y déjà un *flyover* là-bas. Pourquoi on ne fait pas la même chose à Beau Bassin?

Mr Bodha: At Arab Town in Rose Hill, this segment is on elevated pillars starting near the stadium going the whole way to the station, to the terminal and then coming down at Roland Armand which we cannot do at a roundabout. I would like also to inform my hon. friend and colleague that with the A1M1, traffic coming from Coromandel-Beau Bassin will be able to come to Port Louis through this bridge at Sorèze and under the motorway, and I am sure the fluidity between Beau Bassin and Coromandel will be alleviated to some extent by the A1M1 bridge.

Madam Speaker: Last question, hon. Baboo!

Mr Baboo: Thank you, Madam Speaker. Can the hon. Minister state whether the security of students and pedestrians fall into that as there are three secondary schools there, namely Lorette, Rose Hill; QEC and SSS Ébène?

Mr Bodha: What we are thinking of, in fact, is the possibility that students who are alighting at the terminal should be able to access the schools without going at grade - and we will try to work this out on the urban terminal.

Madam Speaker: Next question, hon. Ramful!

MOLASSES – CONTROL AND ARBITRATION COMMITTEE – PRICE

(No. B/445) Mr D. Ramful (Third Member for Mahebourg & Plaine Magnien) asked the Minister of Agro-Industry and Food Security whether, in regard to the mechanism for the determination of the price of molasses accruing to sugarcane planters for the production of ethanol and other derivatives, he will state the recommendations contained in the Report of the Technical Committee of the Control and Arbitration Department of the Mauritius Cane Industry Authority in relation thereto, indicating if the implementation thereof is being envisaged and, if not, why not and table copy of the said Report.

Mr Seeruttun: Madam Speaker, with your permission, I am herewith tabling a copy of the Report of the Technical Committee of the Control and Arbitration Department on the Determination of Price and Payment Mechanism of Molasses.

This Report was submitted in July 2017 to the Control and Arbitration Committee and as there was no consensus on the recommendations contained therein, the Report could not be approved by the Control and Arbitration Committee and therefore could not be implemented.

However, since there was a need to come up with a final price of molasses, the Control and Arbitration Committee came up with an alternative price of molasses for crop 2016 only.

Madam Speaker, the amendments brought to the Sugar Industry Efficiency Act, in December 2016, made provisions for the price of molasses to be derived from a basket of prices as may be determined by the MCIA.

In the light of the above, the MCIA came up with a mechanism for the determination of the price of molasses for crop 2017 onwards.

The Board of Directors of the MCIA approved the proposed price of molasses for crop 2017. The recommendations were communicated to my Ministry and Government took note of the price of molasses for crop 2017.

The House may wish to note that in the Report, submitted by the Joint Technical Committee on Sugar, to address the difficulties of the industry, the price mechanism for molasses has been included.

Government has set up a Ministerial Steering Committee to consider the recommendations made therein and a holistic approach will be adopted for this purpose.

Mr Ramful: Yes, Madam Speaker. Can it be ensured that the report be tabled? Because on the last occasion, I had put a similar question and the hon. Minister said that he was going to table a copy of the report, but I have checked in the Library, it was not tabled.

(Interruptions)

Ten minutes ago! I have just checked!

I can see from the Cabinet meeting of 26 April 2018 that the FOB price which is being proposed is Rs2,147.14. May I know from the hon. Minister is this the price that was recommended by the Technical Committee?

Mr Seeruttun: Madam Speaker, the Technical Committee came up with three options based on deemed FOB price and the projected price, and also third option was an average of those two options. Unfortunately, the Members could not agree on any of those options and that is why they had to work out another price mechanism to come up with the figure for the payment of the molasses.

Madam Speaker: Hon. Ramful!

Mr Ramful: The hon. Minister said 'they'. Who has taken the decision with regard to the price? Because there was a Technical Committee, the Technical Committee, I take it, had suggested that the FOB price should be at 40% LEI. This was the recommendation that was made by the Technical Committee. Now, who has taken the decision to fix the price at Rs2,147, and also is this the final price?

Mr Seeruttun: The LEI is the reference price to calculate the price to be paid for the molasses that are produced by the growers. All throughout the years when this basis has been used to calculate the price of molasses, I have looked at the average. It has never been over 32% of the LEI. In fact, when you calculate the LEI price, you have to remove all the costs

associated with the shipment of the molasses to that market, and all over since 2006 till now, this average price has never gone over 32% of the LEI price. And if I look at the average, it comes to 32.67. And this time when we computed the price to be paid, we went up to 35% of the LEI price. So, it is much better than it used to be.

Mr Ramful: Well, the context is different. Would the hon. Minister bear in mind that since 2014 those purchasing molasses, they are now paying only Rs2,000, I think, instead of Rs3,500. So, they are getting a benefit of Rs1,500. Now, would the hon. Minister take this into account and reconsider the price of molasses that are being proposed to small planters?

Mr Seeruttun: Madam Speaker, let me remind this House that since we took office, we have been supporting this industry all along. Only for that particular element of revenue that is paid to the growers, if I take 2010, it used to be only Rs2,689.33. Now, for the year 2017, it has gone up to Rs3,601.55, more than 33% increase over that period. So, we are doing all we can to support in whatever way we can. that industry and the growers in particular. So, coming and telling us that we are not doing enough, I think it is not very fair.

Mr Ramful: This price which is being proposed, is it the final price, or will it have to be approved by the Board of MCI?

Mr Seeruttun: The price of the crop 2017 is already final. Now, the fact that we have a technical committee that has been looking at all the difficulties faced by the sugar industry, that element also is being looked at altogether when we are going to come with some recommendations in the very near future.

Madam Speaker: Last question, hon. Osman Mahomed.

Mr Osman Mahomed: Yes, thank you, Madam Speaker. Molasses is used to produce *alcool de bouche*, meaning rum and vinegar, and also ethanol which is being used for exportation. Now, there is a distiller bottle fee of Rs40 per litre that is applied on concentrated alcohol. Are all being subjected to that fee of Rs40 or does it exclude any component of these?

Mr Seeruttun: No, the bottle fee is applied on all alcohol that is produced to make potable alcohol.

Madam Speaker: Next question, hon. Quirin!

IOIG 2019 - VILLAGE DES JEUX

(No. B/446) **Mr F. Quirin (Fourth Member for Beau Bassin & Petite Rivière)** asked the Minister of Youth and Sports whether, in regard to the 10th Indian Ocean Island Games to be held in Mauritius in 2019, he will give a list of the hotels selected to constitute the Village des Jeux in Flic en Flac and Balaclava, indicating the cost thereof, in each case.

Mr Toussaint: Madam Speaker, hotels selected to constitute the Village des Jeux are in Balaclava and Trou-aux-Biches.

I am tabling the list of hotels and related costs.

Madam Speaker: Hon. Quirin!

Mr Quirin: Madame la présidente, puisque je n'ai pas encore pris connaissance du document qui est déposé par l'honorable ministre, peut-il nous dire quel est le coût total de l'hébergement, qui est prévu bien sûr?

Mr Toussaint: Le total arrive à R 133 millions approximativement.

Mr Quirin: R 133 millions, Madame la présidente, peut-on savoir si le Comité d'organisation des Jeux a déjà identifié ou a déjà trouvé les fonds nécessaires pour supporter un tel budget?

Mr Toussaint: Le projet bien sûr, Madame la présidente, est divisé en plusieurs *instalments*. Donc ce n'est pas une somme qui va être versée dans un seul coup. Et de toutes les façons, le comité, le CEO du COJI est en processus de recherche de sponsors, sans oublier toute autre source de financement.

Mr Quirin: Madame la présidente, l'honorable ministre peut-il nous dire pourquoi l'option de construire des appartements, comme ce fût le cas pour les Jeux de 2003, n'a pas été considérée, et qui en même temps cela aurait créé un vrai Village des Jeux, et comme cela a toujours été le cas, depuis la création des Jeux des Iles, et cela aurait aussi permis par la suite de revendre ces appartements et récupérer ne serait-ce en partie ou la totalité de la somme investie. Peut-on savoir pourquoi cette option n'a pas été considérée?

Mr Toussaint: Oui, madame la présidente, donc je comprends totalement la demande de l'honorable le membre. Au fait, le fait de construire un Village des Jeux comporte beaucoup de problèmes d'investissement, déjà pour la construction donc, en 2003 ça été le cas bien sûr, et aussi sans oublier qu'il faut remplir ces appartements avec des lits, des armoires, et tous le mobilier, et aussi le staff, qu'on aura besoin de mettre à travailler. Donc,

la meilleure option a été celui de loger les délégations dans les hôtels, et je puis vous dire que, depuis qu'on a commencé à travailler cette idée, les membres du CIJ, les athlètes des autres pays, et surtout ceux de Maurice aussi, sont totalement contents de cette idée.

Madam Speaker: Hon. Lepoigneur !

Mr Lepoigneur: Merci, Madame la présidente, je ne pense pas que ça fait l'unanimité parmi les athlètes, c'est la première fois que le Jeux des îles vont être dans deux hôtels séparés, ça était tout le temps, une fête fraternelle entre les îles. Moi, je pense que c'est souhaitable d'aller vers la direction de l'honorable Quirin, de créer le Village des Jeux, on dépense même Rs130 millions, donc pourquoi ne pas garder cette même attitude à chaque fois et pour garder cette fraternité qui a tout le temps exister parmi les pays participants.

Madam Speaker: This question has already been replied.

Mr Toussaint: De toutes les façons, Madame la présidente, il y aura l'hôtel Intercontinental qui servira de lieu de rassemblement les après-midis après les compétitions ou bien sûr comme l'honorable membre est en train de dire, les athlètes, les participants pourraient se rencontrer, et il y aura tout l'aspect culturel et artistique qui va se dérouler dans ce centre spécifique.

Madam Speaker: Hon. Baloomoody!

Mr Baloomoody: In fact, on the list, only seven hotels have been selected, can I know from the hon. Minister, what were the procedures used to select these seven hotels?

Mr Toussaint: Je n'ai pas ces renseignements avec moi, mais je puis bien sûr m'enquérir auprès du CEO et déposer après.

Madam Speaker: Next question, hon. Quirin.

MAURITIUS SECONDARY SCHOOL SPORTS ASSOCIATION – GRANT

(No. B/447) **Mr F. Quirin (Fourth Member for Beau Bassin & Petite Rivière)** asked the Minister of Youth and Sports whether, in regard to the Mauritius Secondary School Sports Association, he will state the budget allocated by his Ministry from 2015 to 2017 thereto, indicating if his Ministry is still financing same.

Mr Toussaint: Madam Speaker, the Mauritius Secondary School Sports Association, *plus connue comme* MSSSA, has received Rs3,025,000 as financial grant from my Ministry

for the period 2015 to 2017. A Budget of Rs2 m. has been earmarked for the financial year 2017-2018 as grant from the MSSSA, and only Rs770,000 has been disbursed till date.

Mr Quirin: Madame la présidente, l'honorable ministre peut-il confirmer si, à un certain moment, son ministre avait cessé de financer directement la MSSSA ?

Mr Toussaint: Non, Madame la présidente, et, avec votre permission, je peux éclairer cet état de lieux. Il est arrivé que la MSSSA ait fait des dépenses et ensuite nous a envoyé directement des reçus, c'est que nous n'acceptons pas. Bien sûr, tout comme les autres fédérations qui opèrent, il faut que la MSSSA dépose ses projets et l'accord du ministre, ensuite il peut aller de l'avant.

Madam Speaker: Hon. Quirin!

Mr Quirin: Le ministre peut-il nous dire, quel est le rôle du National Council for Sports in School and Universities et quelle a été la contribution de cette instance pour le développement du sport inter collège à ce jour ?

Mr Toussaint: La NCSSU, Madame la présidente, fait un travail de dialogues et elle essaye de ramener un peu toutes les parties concernées, et je puis vous dire, que depuis, il y a eu plusieurs réunions qui ont été faites par la NCSSU, avec les membres de MSSSA, afin de trouver des solutions aux différents problèmes auxquels la MSSSA est en train de faire face.

Madam Speaker: Next question, hon. Quirin!

BEAU BASSIN AND PETITE RIVIERE – CYCLONE BERGUITTA – FLOODING

(No. B/448) **Mr F. Quirin (Fourth Member for Beau Bassin & Petite Rivière)** asked the Vice-Prime Minister, Minister of Local Government and Outer Islands whether, in regard to Constituency No. 20, Beau Bassin and Petite Rivière, she will give a list of the regions affected by the recent cyclone Berguitta and the heavy ensuing rainfalls, indicating the remedial actions taken in relation thereto in each case.

The Vice-Prime Minister, Minister of Local Government and Outer Islands (Mrs F. Jeewa-Daureeawoo): I am informed by the Municipal Council of Beau Bassin/Rose Hill and the Black River District Council that following cyclone Berguitta and the heavy rainfall, some 28 regions were affected. I am tabling the list of regions affected.

The list also contains details of some remedial actions that the authorities have been able to take immediately, as well as actions that have been planned, over a certain period. The main issues are accumulation of water and flooding.

I wish to inform the House that accumulation of water is a recurrent issue after heavy rainfall, not only in Constituency No. 20 but island wide in some areas.

Immediately after cyclone Berguitta, I chaired a meeting with all Local Authorities, National Development Unit, Road Development Authority, Mauritius Fire and Rescue Service, and other stakeholders in order to address the shortcomings and take remedial action.

As an immediate measure, all drains were cleaned islandwide by the relevant Local Authority. Moreover, as an emergency measure, existing drains are being rehabilitated and new ones are being constructed by the National Development Unit, and all development authorities in some high risk areas island wide. Rehabilitation of existing drains and construction of new drains have also been carried out in Constituency No. 20 in some high risk regions such as at Hortensia Street, Residence Barkly and at Herchenroder street near Barkly Government School. Other construction works in the Constituency are in process, while other works have been planned for next financial year 2018-2019 to address the issue of accumulation of water and flooding.

I table the list of regions affected.

Madam Speaker: Hon. Quirin!

Mr Quirin: Oui, madame la présidente. Peut-on savoir si l'honorable ministre a pris connaissance ou a reçu copie d'un courrier émanant du Barkly Risk Reduction Committee, qui est signé par Bryan Pitchen qui en est le président et qui fait état d'une absence de drains justement qui est à l'origine des inondations dans cette région. Peut-on savoir si l'honorable ministre a pris connaissance et si, à partir de ce courrier, le plan d'action qu'elle vient de déposer a été initié?

Mrs Jeewa-Daureeawoo: Unfortunately, I am not aware of this letter. What I can say is that Government is not only concerned with the development of new projects island-wide, we are very much concerned about the existing infrastructures such as drains and we are doing our best to improve the drain system in Mauritius. As I have said, certain actions have been taken immediately but, certain actions like having new drains need more time.

Madam Speaker: Hon. Bhagwan!

Mr Bhagwan: One of the main problems which has been occurring for the past three or four years is the entrance of Albion which is a fast growing region. Now, during heavy rains and even after a cyclone, Albion *est inaccessible*. There is a sort of rivulet and a bridge

which have to be upgraded. Can the hon. Vice-Prime Minister use her good offices through the District Council and even the NDU - I think the District Council will not be able to do the job but the NDU – to undertake this work as a priority?

Mrs Jeewa-Daureeawoo: Yes, this is one of the major works which has to be done. It will be taken care of.

Madam Speaker: Next question, hon. Quirin!

**PROMENADE ROLAND ARMAND & JARDIN BIJOUX – ALTERNATE
SITES**

(No. B/449) **Mr F. Quirin (Fourth Member for Beau Bassin & Petite Rivière)** asked the Minister of Public Infrastructure and Land Transport whether, in regard to the Metro Express Project, he will state where matters stand as to the –

- (a) proposed construction of a jogging and leisure park in Ebene in replacement of the Promenade Roland Armand, and
- (b) identification of an alternative site for the Jardin Bijoux in Beau Bassin-Rose Hill.

Mr Bodha: Madam Speaker, Government is fully aware that the Promenade Roland Armand and Jardin Bijoux are widely used by local inhabitants of all age groups for leisure and recreation purposes as they serve, *inter alia*, as jogging tracks, green space and pedestrian walkways.

To make up for the loss and provide residents with improved new facilities, the setting up of a new green space/leisure park in the vicinity is viewed as a priority measure to be implemented as a matter of utmost urgency.

In reply to PQ B/923, the House was informed on 05 December 2017, that land to an extent of 8A 52P has been identified near the Trianon-Vandermeersch Link Road, near Ebène for the proposed construction of the new park. The House was also informed that the land belongs to Omnicane Ltd and acquisition procedures, in fact, are being finalised at the notary at the present time for same to be acquired by Government.

In the meantime, Omnicane Limited has granted permission for entry on land and 77 palm trees have been transplanted from the Promenade to the new site.

The House was further informed on 05 December 2017 that Mr Daniel Maestracci, a known Landscape Architect, whose services had been enlisted for the rehabilitation of the Sir Seewoosagur Ramgoolam Botanical Garden in 2017 and for the Landscape Master plan of the Vallée d'Osterlog in 2009, had been approached to submit a proposal for the conception of the park, in view of the urgency and on the basis of his experience.

Madam Speaker, Government subsequently decided on 23 February 2018 that Metro Express Limited, in consultation with the Ministry of Local Government and Outer Islands, will be entrusted with the implementation of the Recreational Park project at Ebène and a budget of Rs100 m. has been approved by Cabinet.

Metro Express Limited accordingly has liaised with the Landscape Architect, Mr Maestracci, who has submitted an updated proposal on 29 March 2018 through a Joint Venture in the name of Land Concept Ltd and Urbanscape Ltd. A Due Diligence Exercise has been carried out to examine the proposal and the Metro Express Board will soon, in the coming days, award the contract for this assignment.

Madam Speaker, as regards part (b) of the question, I wish to inform the House that, at this stage, it is considered that the new park at Ebène will satisfy the needs of the inhabitants currently making use of Jardin Bijoux. However, the setting up of a new green space in the vicinity may be considered depending upon availability of land. In fact, on Sunday I went around just to see whether there is any plot of land which is available. I request the hon. Member to let me know if he has any proposal for same, which may be considered. It is to be noted that the stretch of land between Jardin Bijoux and Barkly will be landscaped and embellished.

Madam Speaker: Hon. Quirin!

Mr Quirin: Madame la présidente, il est indéniable que les premières victimes du passage du métro express à Beau Bassin sont bien sûr ceux et celles qui empruntent régulièrement la Promenade Roland Armand et le Jardin Bijoux et qui soudainement voient disparaître un parcours qu'ils ont utilisé pendant des décennies je dirais pour leur séance de marche à pieds et de jogging quotidien. Donc, est-ce que l'honorable ministre ne trouve-t-il pas inapproprié même si je sais que ce n'est pas facile de trouver un site alternatif mais, l'alternatif qui est proposé aux habitants de Beau Bassin est quand même situé à Ebène et qui est à des kilomètres de leurs résidences. Est-ce qu'il ne serait pas...

(Interruptions)

Pour les habitants de Rose Hill je n'en disconviens pas, c'est tout à fait approprié mais pour les habitants de Beau Bassin c'est quand même assez éloigné. Est-ce qu'on ne peut pas considérer, en même temps, le fait d'aménager le parcours à Ebène, essayer de trouver un autre parcours à Beau Bassin pour les habitants de Beau Bassin ?

Mr Bodha: Je suis très sensible à cette demande. Justement, le problème est la disponibilité sur le plan foncier. Si mon collègue et l'honorable Bhagwan peuvent nous aider à trouver des espaces, nous serons très intéressés à faire l'acquisition et aménager. En attendant nous avons...

(Interruptions)

En attendant nous avons tout fait pour que le Jardin Balfour puisse s'ouvrir davantage aux habitants de Beau Bassin.

(Interruptions)

Madam Speaker: Hon. Bhagwan!

Mr Bhagwan: Madam Speaker, I won't be nasty, I have raised this issue so many times even very recently. The hon. Minister has informed us that land near Ebène SSS has been earmarked, the palm trees have been transferred, some are even dying...

(Interruptions)

I go there every day, so, don't make remarks!

Madam Speaker: No crosstalking!

Mr Bhagwan: Last time, I raised the issue of this plot which has been identified. It has become a dumping ground and is getting more, every day they are coming with lorries. There were even some photographs in a newspaper. Can the hon. Minister, at least, direct the Metro Express, direct the Municipality of Beau Bassin-Rose Hill which is doing nothing? Now, there are rats there and the Ebène SSS is there. So, can I again appeal to the hon. Minister, at least, not to go for site visit but action is needed to prevent the lorries from going there and dumping all these materials on this site which is earmarked for *un espace vert*?

Mr Bodha: In fact, this was raised in the meeting on Monday. It has been raised with the Mayor and I have given instructions for the dumping to be removed. The other thing is as soon as the land will be vested, we have done with the notary for the procedures, we will cordon off the area so that nobody can have access to it.

Madam Speaker: Hon. Osman Mahomed!

Mr Osman Mahomed: Thank you, Madam Speaker. The problem in Ebène is parking and people from kilometers away, like hon. Quirin has said, will come over there. My first question is: is provision being made for parking lots in these 8 acres of land and the hon. Minister has asked for suggestions, if the answer is yes, how would you control people working in Ebène from parking their cars there because of the problem of parking in Ebène?

Mr Bodha: With regard to Ebène, we have a major project now for parking which was launched some time back.

(Interruptions)

Madam Speaker: Hon. Jhugroo, you are the Minister?

Mr Bodha: We will have some parking facilities, but the idea is to make the park accessible from different parts of Rose Hill.

(Interruptions)

Madam Speaker: Please, no interruptions! I have been informed that with regard to Parliamentary Question No. B/448, hon. Quirin has laid a document on the Table of the Assembly, that document is unsigned. So, the Table will not be able to accept that document. So, if the hon. Member could please...

(Interruptions)

No, it is not signed. There is a name but it is not signed. So, this document is not acceptable. If the hon. Member may wish, he can hand it over to the hon. Minister personally. Yes, next question, hon. Armance!

METRO EXPRESS PROJECT - FREE TRAVEL SCHEME

(No. B/450) Mr P. Armance (First Member for GRNW & Port Louis West) asked the Minister of Public Infrastructure and Land Transport whether, in regard to the Free Public Transport Scheme, he will state if consideration is being given for the application thereof to the elderly and to persons with disabilities when travelling in the Metro Express and, if not, indicate if consideration will be given thereto.

Mr Bodha: Madam Speaker, the Metro Express Project is a major infrastructure project that will upgrade and modernise the public transport system in Mauritius. It will

provide a safe, reliable, comfortable means of transport which will also reduce travel time for users.

As I stated in my reply to Parliamentary Question B/134 on 04 April 2017, the Free Travel Scheme was introduced in 2005 with a view to providing free public transport to students of primary, secondary and tertiary for their educational needs as well as to old aged pensioners and disabled persons for their personal needs. This scheme has been maintained since then and today students can travel free of charge on the journey between their residence and their educational institution on school days. Old aged and disabled persons are allowed to travel free of charge without any restriction.

Madam Speaker, I am informed that since its introduction, Government has been compensating bus operators in Mauritius and Rodrigues for the loss of revenue incurred as a result of the implementation of the scheme which cost some Rs1.2 billion to Government annually. The compensatory mechanism is being completely re-engineered to make it more transparent and to make it become more accountable.

Madam Speaker, Government, in line with its philosophy to improve the life of its citizens, will maintain the free travel scheme for the Metro Express Project. Old aged and disabled persons will be allowed to travel free of charge whilst students will be provided with the opportunity of travelling free of charge on the journey between their residence and their educational institution on school days. Special facilities will be considered in the design of stations and urban terminals for the elderly and disabled.

Madam Speaker: Hon. Armance!

Mr Armance: I understand that the Report from PricewaterhouseCoopers dated in 2016. Can the hon. Minister table a copy of this Report? Regarding the free public transport scheme, can I know from the hon. Minister if all the recommendations have been implemented so far and where matter stands with the scheme?

Mr Bodha: I have no issue about tabling a copy of the PricewaterhouseCoopers Report. The Report has a number of recommendations as regards the different players in the industry, that is, the companies, the cooperatives, the individual players and the companies which are going to be affected by the ridership, by the Metro Express. The Singapore Corporation Enterprise is working now on the interface between the bus system and the metro system so that we have, what we call the New National Transport Network, and some of the recommendations will be taken care of in the course of this exercise.

Madam Speaker: Hon. Armance!

Mr Armance: In regard to disabled persons using the public transport, will the hon. Minister let us know whether he is going to provide facilities for them, like loud speakers for blind people, a ramp or the access to ease the life of these people that are suffering from disability?

Mr Bodha: I said so. I said special facilities will be considered in the design of the stations and the urban terminals for the elderly and the disabled.

Mr Armance: Will you let us know whether you are going to have trained staff for the Metro Express when the project is going to come? These people need assistance as well.

Mr Bodha: Yes, we will take care of that, Madam Speaker.

Madam Speaker: The Table has been advised that the following PQs have been withdrawn B/424, B/470, B/471, B/472, B/474, B/453, B/454, B/457, B/476, B/467 and B/468. Time is over!

MOTION

SUSPENSION OF S. O. 10(2)

The Deputy Prime Minister: Madam Speaker, I move that all the business on today's Order Paper be exempted from the provisions of paragraph (2) of Standing Order 10.

Mrs Dookun-Luchoomun rose and seconded.

Question put and agreed to.

Madam Speaker: Hon. Mrs Jadoo-Jaunbocus!

(4.30 p.m.)

STATEMENT BY MINISTER

POINTE AUX SABLES - LA COLOMBE SHELTER - BUGS INFESTATION

The Minister of Gender Equality, Child Development and Family Welfare (Mrs R. Jadoo-Jaunbocus): Thank you, Madam Speaker. With your permission, I wish to make the following statement.

Madam Speaker, in regard to the issue of bugs infestation at La Colombe Shelter at Pointe aux Sables which was raised at the last sitting at Adjournment Time by hon. Mrs Perraud, I had stated that I would enquire. And I am now in a position to inform the House,

Madam Speaker, that the National Children Council which manages the shelter, and I am informed as follows from them: fumigations have been done on three occasions on a one-year contract, which has been entered into with the company Hardy Henry, a pest control company, for monthly pest control interventions, which have started since October 2017.

Moreover, old mattresses of the shelter were destroyed and replaced by new ones. Despite all the measures taken, a few bed bugs have been noted anew in some sections. Therefore, the Ministry of Health and Quality of Life was contacted for advice, the latter recommended that technical advice be sought from a private contractor with respect to the debugging exercise. They also recommended heat treatment for the whole building to kill all the bed bugs and their eggs. Hardy Henry, the current pest control contractor, has submitted its proposal. Now quotations are being sought from two additional pest control companies by the NCC in order to proceed forward.

I thank you, Madam Speaker.

HON. S. RUTNAH – RAISING A MATTER OF PRIVILEGE – STANDING ORDERS

Mr S. Mohamed (First Member for Port Louis Maritime & Port Louis East):

Madam Speaker, thank you very much. I stand today pursuant to Standing Order 17, which is ‘Raising a matter of privilege’.

At the last sitting of the National Assembly, hon. Rutnah raised a matter of privilege. There are two issues that I would like to draw the attention of the House to anew, Madam Speaker –

- (i) whether the motion was procedurally in order or not, and
- (ii) was the motion seconded in line with Standing Order 38 and in the manner provided for by Standing Order 39.

Standing Order 39, Madam Speaker, states, *inter alia*, that a motion is seconded, and I quote –

“(...) by rising in his or her place and bowing to the Chair (...)

Standing Order 31(1) states a motion is not seconded, in the manner provided for by Standing Order 39, it shall lapse. It is my contention, therefore, that the motion was not seconded in the manner provided for according to the Standing Order provided for.

It is, therefore, my contention that since this motion was not seconded in line with our Standing Orders, it has lapsed.

Hon. Hurreeram is reported to have stated on air today, this morning - and I took an immense pleasure listening to him - the following, that in practice, one needs not stand up. But to make matters worse, hon. Hurreeram went further to state that, according to him, the Standing Orders provide that it suffices to signal the Chair.

(Interruptions)

Now, I have perused the Standing Orders with a lot enthusiasm, trying to find out where do the Standing Orders say that the signalling of the Chair is authorised or winking or I do not know what type of signal, maybe the royal hand signalling, I do not know. But I could not find it, Madam Speaker.

Having said so, I have also looked very carefully at the images, the video images, the recording of what exactly happened at the moment. I have sent you a letter, Madam Speaker, where I have detailed every second and minute; when did it start and when did it stop, who stood up at what time and who sat down at what time. I also had the opportunity of viewing hon. Hurreeram sitting down all along, not standing up and not even acquiescing or signalling, as he says he did.

Now, having said so, I have also spoken to journalists who were present here. Every single member of the Press, present here, looked and watched, never saw hon. Hurreeram second the motion in any way whatsoever, be it signalling the Chair or not. I had the opportunity of speaking to Mr Deputy Speaker, Sir, just now, telling him what hon. Hurreeram said, that he, supposedly, signalled the Chair. Mr Deputy Speaker, Sir, never agreed that he was signalled in any way whatsoever. He did not even say no, he did not even say yes. He could easily have confirmed to me earlier on that he had been signalled, he kept quiet.

Therefore, having looked at the video recording, having spoken to journalists, having spoken to my friends, on this side of the House, none of us have ever seen hon. Hurreeram signalled anyone, which anyway, would be in contravention of Standing Order that says you must stand, rise and bow.

What I find worrying, Madam Speaker, is the very fact that the Hansard says that he rose and he seconded. I do not know what rising in his terminology means, but it was on that. Therefore, I would like - in light of this and to make matters very simple and short - you to

rule, to declare that if he did not stand in line with Standing Order 39, the Motion has lapsed. I humbly request that the ruling comes from you, Madam Speaker, that the Motion has lapsed since it has not been seconded in line with the provisions that are mandatory. 'Shall' is the word that is used and cannot be derogated from. It shall be done in line with the Standing Orders and if it has not been done, I ask that you rule that it has lapsed.

Secondly, that the Hansard be amended and to delete the reference that he stood up and rose and seconded because this is not what happened. Not only did we see it did not happen, but the whole population saw that it never happened.

Thank you very much.

Madam Speaker: Hon. Teeluckdharry, since corridor conversations have been mentioned, then I would allow you to say what you have to say.

Mr Teeluckdharry: I hate to interrupt my hon. friend during his speech to the Chair, but I do not agree with the conversation he just mentioned, that allegedly that took place in the corridor. I stand guided by the Hansard on this issue.

Madam Speaker: Hon. Members, in fact, hon. Shakeel Mohamed has given notice this morning, through a letter, of this matter of privilege. I have taken note of the points mentioned therein and viewed the sequence of events as referred to in the said letter. I have also taken cognizance of the minutes of proceedings of the last sitting as well as the unrevised version of the Hansard. I can say that all procedures had been followed.

I, therefore, have to rely on the minutes of proceedings of the Assembly as is, which are recorded and kept by the Clerk. This is stipulated in Standing Order 15(1), which provides as follows -

(Interruptions)

Order!

“The Clerk shall keep the minutes of the proceedings of the Assembly and of Committees of the whole Assembly and shall circulate a copy of such minutes as soon as possible after each sitting of the Assembly.”

Standing Order 15(2) -

“The minutes shall record the names of Members attending and all decisions of the Assembly.”

Standing Order 15(3) -

“In the case of divisions of the Assembly or the Committee of the whole Assembly, the minutes shall include the numbers voting for and against the question, or declining to vote, and the names of the Members so voting or declining to vote.”

So, according to the minutes of proceedings, the Motion of hon. Rutnah was seconded by hon. Hurreeram.

(Interruptions)

Hon. Thierry Henry, stand up and say it!

Mr Henry: Là, je trouve que c'est une honte, Madame la présidente, parce que comme l'honorable Membre a dit, c'est comme ça ...

Madam Speaker: Please, I do not want you to argue.

Mr Henry: Vous me dites de me lever et de dire. Je me lève ! Qu'est-ce que vous voulez que je dise ?

(Interruptions)

Madam Speaker: Stand up and say it! Hon. Henry, you said it is a shame. Please say it in the mic. Can you?

(Interruptions)

Can you please stand up and say it in the mic?

(Interruptions)

So, you see, you cannot.

PUBLIC BILLS

First Reading

On motion made and seconded, the Use of Pesticides Bill (No. VI of 2018) was read a first time.

Second Reading

THE HUMAN TISSUE (REMOVAL, PRESERVATION AND TRANSPLANT) BILL

(NO. V OF 2018)

Order read for resuming adjourned debate on the Second Reading of the Human Tissue (Removal, Preservation and Transplant) Bill (No. V of 2018).

Question again proposed.

(4.41 p.m.)

Dr. Z. Joomaye (Second Member for Rivière des Anguilles & Souillac): Thank you, Madam Speaker, for giving me the opportunity ...

(Interruptions)

Madam Speaker: Hon. Mrs Perraud, what is it? Do not sit down and talk! You are disrupting the work of the National Assembly.

Dr. Joomaye: Thank you, Madam Speaker, for giving me the opportunity to debate on the Human Tissue (Removal, Preservation and Transplant) ...

Madam Speaker: I am sorry, hon. Dr. Joomaye. I heard hon. Mrs Perraud say something which is not acceptable. I would ask her to repeat what she said.

Mrs Perraud: Madam Speaker, I was talking to my friend, hon. Salim Abbas Mamode, which is a private conversation. Thank you.

(Interruptions)

Madam Speaker: Hon. Mrs Perraud, if you have some respect for this Assembly and you have your private conversation, you do not raise your voice. Hon. Dr. Joomaye!

Dr. Joomaye: Thank you, Madam Speaker, for giving me the opportunity to debate on the Human Tissue (Removal, Preservation and Transplant) Bill (No. V of 2018).

Madam Speaker, let me first of all congratulate the Minister for bringing this piece of legislation to the House, a long-awaited Bill which would change the lives of thousands of people in the future, suffering from various organ failures; a Bill that will be remembered as one of the biggest progress in the practice of medicine and healthcare service in our country. It has taken its time to come up till here. The last Bill, we will remember, was presented in 2006 in this House regarding organ transplant and dealt only with living donors. It has never come to reality for various reasons, most probably due to poor comprehension of the whole world of transplantation.

Behind a Bill, there must be a political will. In our case here, bringing this Bill to the House demonstrates the commitment of this Government to modernise our healthcare system and give additional chances to people in distress by proposing new therapeutic avenues.

Organ donation, Madam Speaker, can be considered as the supreme form of solidarity in a society. Since almost 50 years now, this procedure has saved the lives of millions of people worldwide. Progress in surgical techniques together with new immunocompatibility tests and post transplantation in immunosuppressant therapy have proven its safety, its efficacy and usefulness as far as public health is concerned. In one word, organ transplantation saves lives and increases life expectancy. That is why it is more than time to establish the legal framework to make transplantation possible in a practical and realistic way in our country.

I have listened to the speech and comments of the Leader of the Opposition very carefully. I understand his apprehensions and interrogations. Some of them are legitimate and would be the concern of any layperson of the transplantation world. I will try to bring a technical light to some of his questions. The whole process, according to the new setup, will be under the responsibility of the Tissue Donation, Removal and Transplant Board. Some members of the Board will be nominated by the Minister. This fact is causing some worries about political intervention. *Cet argument ne tient pas la route quand il s'agit de traitement médical.* The Chairperson of the Board will be the Director of Health Services. This post is always occupied, Madam Speaker, by a respected, experienced medical practitioner, a professional who is already in charge of all our regional and local hospitals, the mediclinics and dispensaries. The Director of Health Services is leading a team of healthcare providers taking care of more than 35,000 people daily in our public health facilities. Thousands of surgeries are being performed annually; hundreds of deliveries and so many consultations, all under the responsibility of the Director of Health Services.

Our healthcare system might not be perfect but it is ensuring a level of service, internationally recognised and accepted. On this Board, the Director of Health Services will be sitting with other relevant specialists, that means that the Board will be mostly guided by doctors and medical expertise; all this under the supervision of the Medical Council of Mauritius. Medical practitioners in the Public Sector are professionals, who, in Mauritius, have a track record of good service, sense of ethics and dedication to the welfare of patients. There might be a few *brebis égarées*, but it would be the responsibility of the Minister to ensure that those doctors sitting on the Board are respected for their integrity and

professionalism. *Donc, je balaie d'un revers de main les craintes faites à l'encontre de ce Board, qui, pour moi, étant sous la responsabilité des médecins de l'Etat et plus à même de faire le travail.*

All the powers given to the Board are relevant to supervising the operations and they are not undue. However, I would agree that a strict control should be exercised on the Registrar and other officers in the Registrar's office. Registration of data and keeping of patients' records should be monitored closely, because if weaknesses there would be, it is there that wrong things might happen. It would be in the regulations to come up with a comprehensive and practical guideline to prevent external intervention. The regulations should be tight enough and no loophole should be left to ensure that organs are being donated to the most deserving and appropriate recipient.

At some point in his speech, the hon. Leader of the Opposition suggested that there might a risk of political intervention on the waiting list of recipients. In some way, he stipulated that organs available might be given to close ones with political backing. I will explain, as a professional, how the designation of the recipient works technically. There is a need initially to constitute a waiting list of potential recipients which, if we see for Mauritius, we might end up for kidney transplant, some 500 persons on the list. These people have to be fit to fit in pre-established criteria for transplantation, internationally accepted criteria regarding age and medical conditions. The whole world of transplantation is commanded by one word, it is 'immunocompatibility'. This is the key aspect. In the past, we were matching only blood groups, the ABO system. Now, the identity is matched according to the HLA system, which is the Human Leukocyte Antigen. It is a six-item coding system. There is a need for the best match to avoid rejection of the donor organ by the recipient.

Now, matching the HLA between the recipient and the donor is not an easy task. It cannot be done by a committee solely. That means, it cannot be done by people sitting in a committee only. Normally, when the waiting list comprises of hundreds of names, the HLA identity is uploaded in a software and the best match is done by a computer which will propose the five best matches. Then, the committee will have to go through their files and will start calling the top persons of the list considered as best match by the computer. This is not the end of the story. Some candidates, even after being called, might not be found fit to undergo surgery by the surgical team. Then, the next on that list will be called. The committee has to follow established guidelines and all this has to be done in a specific

timeframe because the organ to be donated is viable for not longer than 12 hours, sometimes 16 hours.

The hon. Leader of the Opposition has proposed a Standing Parliamentary Committee to monitor all this. So, we can ask, how can this be possible? Who will sit there? All this is highly technical and it is very high level medicine.

Madam Speaker, we must know that a simple fever or tooth decay can prevent a patient from being transplanted. So, who will verify all this in a Parliamentary Committee? Apart for tooth decay, most probably hon. Dr. Sorefan, but I can't see anyone else go and check what is happening regarding patients.

The risk of organ trafficking is real and should never be underestimated, especially in minors. This Bill has made provision to tackle this issue as well. The Board will have to follow all the international medical guidelines for transplantation. However, there is one question raised by the hon. Leader of the Opposition which, to my opinion, is worthwhile thinking through. It is with regard to commercial agreement tantamount to organ trafficking between donor and recipient. I also believe that, in the first years of implementation, the programme should not to be open to foreigners. I would say precisely, not open to non-residents, so that we do not become a platform or a destination for organ trafficking.

Let me say a word about informed consent, Madam Speaker. If we want things to happen, the system we are implementing, known as the opt-out system, is the best statistically proven one. It means that every person is presumably a potential organ donor after his death unless he explicitly expressed the contrary to the Board. Our objective is to make organ transplantation a reality. And for this, we need organs available. On the other hand, the opt-in system where organs can be removed only from individuals having registered themselves as organ donators, have proven to be a failure. For example, in Belgium, despite intensive communication and awareness campaigns on the necessity for organ transplantation, only 2% people registered themselves as organ donators. They voluntarily registered themselves. So, 2% is very less. With this percentage the whole system will not be viable.

Let me say a few words also about consent from relatives. This helps to appease the family in case of death of close ones. This is a very sensitive issue which gives food for thought. Even if we agree on its necessity for moral reasons, as a professional I am very sceptical. I know that this might be the biggest hindrance to the whole process of organ transplantation. Let me explain myself, Madam Speaker. A few years ago, a survey on organ

donation had been performed in France. Almost 90% people questioned, revealed that they would be agreeable that their organs be removed after their death. But in practice, when the objection clause by relatives is applied, only 50% donation from deceased is possible. That means, in certain situations, the family does not respect the will of the deceased when he was alive. But we have chosen to let the relatives have a say and to have the last word, and we have amended the former version of the Bill.

I will ask all of us here to think over a situation which can arise in the transplantation world. Let us see altogether and I will ask the Leader of the Opposition, who is not here...

(Interruptions)

He is abroad on a mission. So, let us imagine a situation which can arise, let us say, after a road traffic accident, one parent and one child die in a road traffic accident, so there is one surviving parent. Imagine the pain of the surviving parent! We can all imagine that. At this moment, what would you think would be the answer if you ask the surviving parent the right to remove organs from the deceased child? Most probably he will say 'no'. Hon. Dr. Boolell will agree. Then, in another hospital, there is a couple of parents sitting beside a child suffering from terminal cardiac failure due to some congenital cardiac disease. The child can only be saved by cardiac transplantation. So, what do we do as legislators? Where is the responsibility of the State? So, do we save that child or not? If we had to have the authority, do we listen to that bereaved parent who is saying 'no' for transplantation or do we save that other child? This is the kind of dilemma that is faced by transplantation specialist on a daily basis.

(Interruptions)

Madam Speaker: Hon. Rutnah!

Dr. Joomaye: But, Madam Speaker, we have to start somewhere and see how it goes about the transplantation programme. The law that is being presented might need some modification somewhere in the future. We must start somewhere and see how it goes. In case of scarcity of organs, we can always react in the future. This Bill will bring Mauritius *à la pointe de la technologie médicale*. I have no doubt this Government is committed to implement a state-of-the-art organ transplantation programme.

So, before ending, let me, again, congratulate hon. Dr. Anwar Husnoo for bringing this historical piece of legislation to the House.

Thank you, Madam Speaker, for your attention. I have done.

Madam Speaker: Hon. Bérenger, can I know you have for one hour or so?

Mr Bérenger: Around one hour.

Madam Speaker: Okay. Please!

(4.59 p.m.)

Mr P. Bérenger (Third Member for Stanley & Rose Hill): Madam Speaker, when the Minister introduced the Bill a week ago, I found his speech very weak. And, today, I find it totally unacceptable that the Minister is absent from the House when the Bill is being debated one week later.

For my part, let me say, right from the start, that I am for encouraging and facilitating organ donation and transplant in Mauritius in general, but organ donation and transplant must be done *de façon totalement volontaire, pratiqué en pleine connaissance de cause de tous ceux concernés dans la transparence totale et en prenant toutes les précautions nécessaires contre le trafic d'organes.*

I would wish, therefore, to join with the Minister to ask that the whole issue of organ donation and transplant be *dépolitisé* and that no petty politics should be allowed to interfere with the present debate. But let us remember, Madam Speaker, that we have a law since 2006, that was amended in 2013, but never proclaimed and that during all that time, no measure was taken to put into practice the 2006 law from that date until today. That is why *il y a une chose qui m'attriste*, one thing makes me sad, is that the way the Minister himself and others have talked, have raised expectations. It is not fair. It is not fair because the way things have been presented it is as if as soon as we voted this new Act from one day to the next, organ transplantation is going to become a reality. It is unfair. We should treat more than one thousand people who are waiting for a chance to benefit from organ transplantation. We should tell them the truth and I am going to speak the truth, because the fact is that from 2006, and I will quote experts later on. From 2006 until today that we are debating and will be voting the new Bill, nothing has been done! Absolutely nothing to put into practice the 2006 legislation! Whereas because no measures were taken, Madam Speaker, between 2006 and today, because of that, after we will have voted the new Act, two things will be required, some time to put it into practice, but especially *la volonté politique* to apply the law and to put the required financial and other means to make it a success, Madam Speaker.

Above all, time will be needed and *volonté politique* needed to set up the infrastructure. What do I mean? Everywhere across the world it is like that. What do we mean by infrastructure to allow for organ transplantation? It means the required number of specialised doctors; it means a special hospital or at least a transplant centre. It means trained doctors and I will come to that later on, Madam Speaker. Without this infrastructure - and nothing has been done since 2006 to set up that infrastructure - the present Bill that we are debating *restera lettre morte* like the 2006 Bill, Madam Speaker.

It is good to remember here that under the 2006 Act, in fact, measures had started to be taken to set a transplant centre and some transplants were carried out by two specialists, but all that has stopped. These two specialists no longer do any transplant for a number of years. Even what was started has been stopped completely. And let me quote, here, Madam Speaker, one of these two specialists, *le docteur* Rajiv Upadhyaya from India but settled in Mauritius a long time back. Let me quote Dr. Upadhyaya in l'Express of 05 May 2018, only a few days ago. So, the journalist - if you will allow me to quote - puts the question –

« Cette nouvelle loi est donc un coup d'épée dans l'eau ? »

And the specialist replied –

« Si l'État voulait la mettre en pratique il aurait dû le faire plus tôt. Combien d'années se sont écoulées depuis? Aujourd'hui (...) »

These words, I hope, hurt a lot of us –

« Aujourd'hui Maurice aurait dû être positionnée sur la carte mondiale en terme de centre de transplantation mais au contraire nous avons tout arrêté. C'est honteux. »

And he carries on, Madam Speaker –

« Figurez-vous que l'on avait identifié un site à l'hôpital Nehru pour une unité spécialisée. Un architecte avait même conçu les plans de structure. On a fixé la date de la pose de la première pierre mais cela ne s'est jamais fait. »

We should reflect on that, Madam Speaker. Il faudra maintenant rattraper le temps perdu, Madame la présidente. Mieux vaut tard que jamais ! Of course ! Especially when we are talking about organ donation and transplant. Mieux vaut tard que jamais but we have a lot of wasted time to catch up with.

Let me come back à *la loi de 2006* and the new Act that is before us here. What was the key point when the new Bill was circulated? What was the key point? *Quelle est la*

différence fondamentale between the 2006 piece of legislation and the one that we are debating today? The point under section 11(3) and this I blame the Minister that he never explained it. That is why, in a press conference, I said you can't amend laws like that *en catimini*. Somebody else tried that in the past and failed miserably.

The fundamental point is that what was being proposed was *un changement fondamental de système*. *Un changement fondamental* from an opt-in system, what was being proposed because, in the meantime, *en catimini* an amendment has been presented. Good! I will come to that. But, what was originally proposed was a hard opt-out system. As we know, and somebody has just said that before me, in the present opt-in system somebody becomes a donor after his death if he has chosen to become one before his death. You have to opt-in. This is what prevailed until that Bill was circulated.

Alors que dans le opt-out toute personne qui meurt devient automatiquement un donateur à moins qu'avant son décès il ait exprimé son refus de devenir un donateur. It is a fundamental difference and I blame the Minister that such a fundamental difference was not explained at all to the population! I did my duty. I went to the press. *J'ai alerté tous ceux qui doivent être alertés*. But why behave like that? Tell the truth! In fact, what was being proposed was a hard opt-out system. *Et la différence fondamentale le public en général n'était pas du tout conscient de la portée du changement de système proposé que le ministre aurait dû avoir souligné et expliquer à la population*, Madam Speaker.

After I raised the issue, others raised the issue *heureusement* a fundamental amendment, but again *en catimini*, was circulated and I thank the Minister. He sent me an advance copy and now it has been circulated. A fundamental amendment *a été circulé et proposé et maintenant* what is being proposed is a soft opt-out system. It is no longer the hard opt-out system that was proposed initially. Now it is a soft opt-out system *dans la mesure que maintenant il ne pourrait y avoir organ donation and transplant d'une personne décédée que si ses parents ont été consultés et sont tous d'accord*. Again a big difference! But, no explanation to the public and in his speech the hon. Minister did not explain all this at all and now he is absent. I blame him for that.

La définition de 'parents' is very wide if you look at the legislation. At Section 11(b), it is very wide; it includes the spouse, *tous les enfants ou* the living heirs. But, I must say, Madam Speaker, I am not happy with the wording of that amendment and I have said so and I repeat: I am not happy with the wording. The intention, I believe, is good. The intention,

what I understand, is that parents have to be consulted, not may be consulted, Madam Speaker. But, the way the amendment has been drafted and circulated, it should be clearer. I am referring to the amendment which says that any of the persons specified as above, as I said, spouse, living children and so on. So, a transplant will not be possible unless any of the persons whom I have just mentioned have, on being consulted by the Board, not expressed any objection in writing.

You get my point, Madam Speaker, I am sure, 'have on being consulted by the Board'. I agree the intention is that they have to be consulted but the way it is drafted 'on being consulted', it does not say that they have to be consulted, that consultation is obligatory. So, I would suggest that the lawyers – maybe the addition of one word is sufficient - instead of 'on being consulted', 'on being compulsorily consulted'. We will find the legal word but it should be spelt out if that is the intention and I think that indeed that is the intention. It is not 'on being consulted' if they are consulted? No, they must be consulted and therefore, the intention is there I believe. The wording is unsatisfactory and should be improved.

But, also, if that is the intention that the parents must be consulted and the whole list, the definition of 'parents' is in the law. Does that mean that all of the parents must be consulted and all of the parents must be agreeable? I put the question because, in practice, how this would be done if all the parents, as defined in the law, have to be consulted and no one must object otherwise no transplant is permitted, Madam Speaker? Is it really the intention of that piece of legislation and how will that translate itself in practice?

As I said, Madam Speaker, what is now proposed is a soft opt-out system. All the research that I have done, Madam Speaker, tell me that all the countries where there is a successful organ donation and transplant system have started with an opt-in system, and then, taking all the necessary precautions, they have graduated with experience to an opt-out system, Madam Speaker.

I would wish, here, to quote Wikipedia's piece on organ donation. I quote at page 14

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"The National Transplant Organisation of Spain is one of the most successful in the world (Spain has been the world leader in organ donation for decades), but it still cannot meet the demand, as 10% of those needing a transplant die while still on the transplant list. Donations from corpses are anonymous, and a network for

communication and transport allows fast extraction and transplant across the country. Under Spanish law, every corpse can provide organs unless the deceased person had expressly rejected it. Because family members still can forbid the donation, carefully (...)

That is why I mentioned the infrastructure earlier on.

“(...) trained doctors ask the family for permission, making it very similar in practice to the United States system.”

So, that is why I was saying that without the required infrastructure, without the required trained doctors, because that family clearance we are putting it in the law through that amendment that is being circulated. I think, I repeat that the amendment needs to be refined, needs to be clearer. But then, as I said, the infrastructure required is what I am talking about, Madam Speaker.

I would suggest that as in all those countries, we should make a success of an opt-in system. I agree that we will have less organs with the opt-in system, but I believe that, like all the other countries, we should go through that *étape*, that stage before moving to an opt-out system with the required trained doctors, with the required infrastructure that I am talking about, Madam Speaker.

But in the meantime, at the same time, there must be *une campagne d’informations menée dans le public pour encourager organ donations. Et il faudra donner l’exemple, mais il faut une campagne soutenue, et une campagne soutenue d’informations dans le public ne peut pas se faire en catimini*. A change of system cannot be brought about like that in *catimini*; the Minister not explaining at all what we are doing. *Un amendement ne peut pas être introduit en catimini*, the way it has been done. There need to be *une campagne d’informations systématique pour que volontairement donors come forward. Et cela ne peut pas, I repeat, se faire, Madam Speaker, en catimini. Car la vérité - c’est ce que je veux dire avant tout - qu’après que nous aurons voté la nouvelle loi, la vérité est que la priorité devrait être la mise sur pied de l’infrastructure dont j’ai parlé à plusieurs reprises. L’infrastructure étant un Transplant Centre, les spécialistes que n’avons pas à ce stade and trained doctors to make a success of what we are proposing. Otherwise, Madam Speaker, I do not know how many years this will take.*

The Minister is not here, we must not repeat *le précédent du Cancer Centre. Trois ans!* Three years behind us! *Depuis trois ans les malades du cancer attendent ce Cancer*

Centre. And not only, *les travaux n'ont même pas commencé pour le Cancer Centre, 3 ans plus tard*. In the meantime, things have deteriorated terribly, the specialised machines are no longer working, cancer patients have to be sent to India, with their relatives paying for their tickets, for their presence by the sides of the patients. We must not repeat that with this. We must not vote, in the case of the Cancer Centre, it was announced and 3 years later, work has not started. We must not repeat *ce précédent du Centre de Cancer*. We vote this piece of legislation, then we waste time. It will need funds also to get the required specialists, to get the required trained doctors to get that transplant centre that has been referring to. It will cost money. Therefore, not only *volonté politique*, but funds also will need to be available, Madam Speaker.

I believe it should not be difficult for Mauritius to get the help, the assistance of foreign countries, of friends. And I was glad to hear the Minister making reference to very *fructueux* collaboration between *les hôpitaux de Marseille* and Mauritius in the past. Yes, a lot was done and then stopped. I will refer to Spain. I think we should renew this collaboration with Marseille and also get assistance from Spain, which is, as quoted earlier on, one of the most successful organ donation and transplant experience across the world.

Madam Speaker, the second fundamental change that this piece of legislation brings, *comparé à la loi de 2006, c'est que sous la loi de 2006, il ne pouvait y avoir de donation que dans le cas d'un relative, et il y a une définition, enfin pas très précise, mais il y a une définition de relative sous la loi précédente, une longue définition. Mais n'empêche que, il ne pouvait y avoir de transplant que dans le cas d'un relative, très limitatif. Le ministre a présenté ce changement, aujourd'hui this has gone. Now, organ transplant will be legal not just for relatives. Le ministre a présenté cela comme un grand pas en avant. Yes, mais il nous faut, quand même, réaliser qu'en 2006, this was introduced in the law pour empêcher tout trafficking. L'intention était bonne, allons regarder la vérité en face. As soon as you open up au-delà des relatives, le danger d'organ trafficking devient beaucoup plus grand. Let us be aware of that. Let us not do as if it was a mistake in 2006 to limit organ transplant to relatives. It was not. But okay, I agree, I go along. I welcome the opening au-delà des relatives mais à condition que toutes les mesures nécessaires soient prises pour empêcher tout organ trafficking ; à commencer par le danger que le riche malade étranger ne soit mêlé à de tels organ trafficking et que ne se développe ce que le Leader de l'Opposition a décrit comme du Transplant Tourism. L'expression est horrible, mais le risque est réel. Therefore, yes, I agree that we move beyond this restriction to relatives, but il nous faut mesurer les*

dangers que cela amènera et qu'on prenne tous. Pour empêcher tout organ trafficking et faire un succès de l'organ donation and transplant à Maurice, le rôle du Tissue Donation, Removal and Transplant Board sera crucial.

There, I agree with the hon. Leader of the Opposition that I am not satisfied. I do not think that anybody is satisfied and I will make a suggestion later on. Like the hon. Leader of the Opposition, I am not satisfied about its composition, its mode of appointment, its powers and its attributions. The law must be improved, Madam Speaker. I agree that, at least, that Body should be appointed by the President and that its Chairperson should be totally independent and not a civil servant from the Ministry who is at the Head of the Ministry of Health. As we know, the President of the Republic is no rubber stamp. Some have behaved as if the President of the Republic is a rubber stamp. No! I agree fully that, instead of the Minister appointing the Board, it should be the President of the Republic. Of course, he will consult the Minister concerned and all the other people that he feels must be consulted. The Minister should not have the power, I agree fully, to give undefined and unreturned directives to the Board. There again, we must improve on the legislation.

I agree also that allocation of organs for transplants should follow the guiding principles of the World Health Organisation. We are not inventing anything at this point in time. We should go to the World Health Organisation, seek their guidance and, as I said, the guiding principles of the World Health Organisation should be resorted to and should be *complètement dépolitisés et transparents*, Madam Speaker. Of course, the Board must have the means to prevent organs trafficking. All this is easier said than done. Although the *précédent de l'ICAC* is not very encouraging, but I agree with the suggestion that was made by the hon. Leader of the Opposition that there should be parliamentary oversight through a Select Committee or a Standing Committee. Therefore, I am not happy with that section of the new legislation that relates to the Board that is going to make a success or a failure of organ donation and transplant in Mauritius.

The question arises also whether organ transplant will be allowed in private health institutions. The legislation before us does not say much. The Act says that transplants will be allowed only in -

“approved health institutions (...) as may be prescribed.”

C'est très court.

We all know that there is as yet no regulation of payment of services in private health organisations. Therefore, I think the Minister should tell us who will prescribe the health institutions where organ transplant will be allowed and the criteria that will prevail for private health institutions to be defined.

Madam Speaker, I am going to move on to a point which is a bit delicate and it is the question of death. Death as defined in the legislation before us, Madam Speaker. As defined in the Act, section 15(2)(c), it is provided that no organ or tissue removal shall take place unless two specialists certify that the donor is clinically dead. The words used in one part of the legislation 'clinically dead', whereas in the Schedule, it is death as defined brain death, it is brain-stem function. A major point of contention, Madam Speaker, if you will allow me, is when does death occur. I have to find where it is because it varies from country to the other. I am not finding it, Madam Speaker. The difference is between brain death - the specialist will tell that - and respiratory. The coincidence is that only last week, there has been a very interesting article in 'The Economist' entitled 'The Meaning of Mortality'. The point is made, Madam Speaker, that more organs can be used from a donor who is dead according to brain criteria than after cardio-respiratory failure. There is a debate. It must be the whole of the brain...

(Interruptions)

It is no joke! The whole of the brain is dead or part, as I said. It is ambiguous in the piece of legislation that is before us because there is brain death in one part and there is specifically a part of the brain in other parts of the legislation before us. Therefore, this House, I believe, must be clarified, Madam Speaker.

What does disturb me even more is that when we have said all this, what complicates matter further is in the Schedule. It is said, Madam Speaker, that a test - even after death has been declared - must be carried out. In the Schedule it is stated -

“A test to ascertain brain death in a patient shall be performed twice before the pronouncement of death.”

But we are not told what kind of test, to be carried out by whom. Therefore, on that point also, I believe the Minister should come back and there is need to clarify, Madam Speaker.

Madam Speaker, before I conclude, there are two issues I would wish to raise that are not covered in the piece of legislation, but that will arise in the future. If you will give me one minute. This is looking in the future. One is cloning. I read that –

“The issue of cloning to produce organs with a genetic identical to the recipient is a controversial topic, especially considering the possibility for an entire person to be brought into being for the express purpose of being destroyed for organs procurement.”

It is not *politique fiction*. This is looking into the future. It is not covered by the legislation. *Heureusement!* But I think we should look far ahead into the future, Madam Speaker, because, I quote again -

“While the benefit of such a cloned organ would be zero-percent chance of transplant rejection, the ethical issues involved with creating and killing a clone may outweigh these benefits. However, it may be possible in the future to use cloned stem-cells to grow a new organ without creating a new human being.”

It sounds like *politique fiction*, but it is tomorrow. Therefore, I thought it my duty to point this out. But also animal transplant! What has been described as a relatively new field of transplantation is being debated in these days. Transplant of animal organs into human bodies promises to eliminate many of the ethical issues while creating many of its own. So, I leave these two points before concluding, Madam Speaker.

I would wish to conclude, in the absence of the hon. Minister, by suggesting that we vote the Bill and we move forward, but that we do four things in priority once we have voted the Bill.

Firstly, that we keep an open mind as to the need for further amendments. Already, the hon. Minister himself has been wise enough to bring a fundamental amendment. Good! But there is need for a lot of other amendments. This should be *dépolitisé*. I have been in here for years and some Ministers, petty minded, feel that an amendment is a kind of *blâme*. Not at all! In this case, the hon. Minister has been wise enough to bring a fundamental amendment. I think we should move forward, but first keep an open mind as to the need for further amendments and that such further amendments be *dépolitisés complètement*. If we do not keep an open mind, we are going to run - as far as further amendments are concerned - into trouble.

Secondly, I think there should be a free vote on section 11(3). Section 11(3) moves us from an opt-in system to an opt-out system. Albeit it is a soft opt-out system with parental green light having to be obtained and so on, but still I can imagine some people having fundamental objections to this idea of somebody dies and he becomes automatically a donor

if he had not expressed his objection to that before his death. I can understand. It is true that if we stick to the opt-in system, we will not have the required number. We will never have. I quoted Spain earlier on, where there they have a soft opt-out, and even then, there are not enough organs for transplant. Therefore, I think we should keep an open mind and allow those who do not wish to vote in favour of this change from the opt-in to the soft opt-out system; that we should allow a free vote on that.

Thirdly, that we give priority, once the Bill is voted, to the development of the infrastructure that I mentioned earlier; a full-fledged transplant centre, especially trained doctors, specialists, the required communication network, the required transport network. There is a whole infrastructure to be set up. We need *volonté politique*, we need funds, and I suggest the third thing that we must do is move ahead with that and not repeat the cancer centre saga, which has brought us where we are three years later. Otherwise, the new piece of legislation is going to remain *lettre morte* like the 2006 piece of legislation.

Fourthly, Madam Speaker, there should be an ongoing and informed public campaign, inviting, encouraging Mauritians in general to become donors *en toute connaissance de cause*. I believe we, politicians, must take the lead there, but there must be a sustained, informed campaign to encourage Mauritians in general to become donors. And that will bring me to the 2006 legislation.

One good thing has disappeared - and I will end on that, Madam Speaker - in the 2006 Human Tissue (Removal, Preservation and Transplant) Act. There was a paragraph 15 which has disappeared. *C'est tout un symbole!* Section 15 of the 2006 Act, on which we are supposed to improve, read as follows: Duty to inform and educate. In the law, I quote -

“The Minister shall take all reasonable steps to ensure that the essential features of this Act are adequately made known and explained to the public.”

I think *c'est tout un symbole* when this has disappeared. There is no reason. On the contrary, I think it should be reintroduced in the present Act, make it a duty for the Minister, whoever that to be - Yesterday, today, tomorrow - to ensure that the essential features of this Act are adequately made known and explained to the public. This would supplement what I said earlier on, that if we are going to vote this piece of legislation and make a success of organ - which I wish *du fond du cœur* - donation and transplant in Mauritius, there must be this duty to inform, and there must be a commitment on the part of all of us to make of

Mauritius, as Professor Upadhyaya said earlier on, a success and a model - why not - in the years ahead, to make a model of organ donation and transplant in Mauritius.

Thank you, Madam Speaker.

Madam Speaker: I suspend the sitting for half an hour.

At 5.44 p.m., the sitting was suspended.

On resuming at 6.18 p.m. with the Deputy Speaker in the Chair.

The Deputy Speaker: Please be seated! Hon. Gayan!

(6.19 p. m.)

The Minister of Tourism (Mr A. Gayan): M. le président, je vous remercie de me donner la parole sur ce projet de loi qui est très, très important. Le projet de loi qui s'intitule '*The Human Tissue (Removal, Preservation and Transplant) Bill*', n'est pas nouveau devant cette assemblée. On a déjà eu un projet de loi en 2006 qui malheureusement n'a pas été mis en application comme c'était l'entendement des parlementaires à l'époque, et c'est pour cette raison que nous avons, aujourd'hui, devant cette assemblée, ce nouveau projet de loi.

M. le président, ce projet de loi traite de beaucoup de situations, de beaucoup de questions, mais essentiellement ça traite de la vie, de la mort, et de la vie après la mort. C'est très important, M. le président, que nous sachions que ce projet de loi n'a pas surgit comme ça à l'assemblée. Moi-même, quand j'étais ministre de la Santé, j'ai organisé des colloques pour sensibiliser l'opinion publique sur le problème, la problématique de don d'organes, et de transplantation d'organes. Le premier colloque était organisé le jeudi 27 août 2015 et c'était essentiellement sur le prélèvement des tissus d'organes humains. Nous avons eu à ce colloque des interventions de la part des experts de Maurice, de La Réunion et aussi de la France. Maurice est un pays vraiment spécial. Donc, le but de ce colloque était de sensibiliser l'opinion publique, sensibiliser le public, surtout ceux qui sont malades et qui attendent des dons d'organes. Mais il y a eu un article qui a paru dans un journal le 16 août 2015, avec pour titre « Dindons d'organe - Par Qui aime bien ».

Dindons d'organe ! Et avec une caricature qui parle de -

« Mon cœur est à toi ».

« C'est d'un rein dont j'ai besoin ».

M. le président, je vais déposer cette coupure de presse sur la table de l'assemblée, parce que cela démontre que, quand on fait des consultations, on le fait pour le bien du pays. Quand on ne le fait pas, on est critiqué. Mais cette fois-ci, quand j'ai organisé le colloque, voilà ce que la journaliste a écrit. Vous savez que j'ai une mauvaise presse tous le temps, mais cette fois-ci, il est dit « Pour une fois qu'Anil Gayan dit quelque chose de sensé, rendons-lui grâce. »

(Interruptions)

Il est dit dans l'article –

« Pour une fois qu'Anil Gayan dit quelque chose de sensé, rendons-lui grâce. Puisque c'est dans l'air du temps de gracier... Lundi, il nous apprend que le gouvernement veut promulguer la loi sur le don d'organes. »

Ce n'était pas du tout la promulgation de la loi sur les organes, c'était un colloque pour sensibiliser l'opinion publique.

Il est aussi dit -

« Mais suggérons-lui d'abandonner l'idée des consultations publiques, surtout avec les religieux ! Ils vont compliquer les choses.

Imaginez le genre de questions: le foie de quelqu'un qui a mangé du porc peut-il être greffé à un musulman ? Un estomac qui a digéré du bœuf peut-il aller sur un hindou? Les témoins de Jéhovah refusent les transfusions sanguines, cela s'applique-t-il aussi aux organes ? Par exemple, pour une greffe de cornée, l'opération est-elle garantie œil pour œil, 100 % sans sang ? Et puis, tout le monde va commencer à s'imaginer des choses, des enfants enlevés pour leurs organes ou autres rumeurs.

Or, les cas d'enlèvements d'enfants relèvent du mythe urbain... »

Et ça continue -

« Quant au trafic, si l'on autorise uniquement le prélèvement d'organes sur des personnes décédées, ce qui est le cas, avec un cadre strict et une traçabilité imposée dans les centres de santé publics (non, Messieurs les bouchers, vous n'aurez pas le droit de jouer !), il peut parfaitement être contrôlé.

« Ni même un Xavier Duval (pas encore ex du gouvernement) : « Ben quoi, je me suis fait rembourser un foie par la *MTPA*, mais c'était pour mes frais d'*entertainment*, il était sauté aux petits oignons et je l'ai partagé avec des invités de marque. »

I am tabling this article, M. le président.

J'ai tenu à évoquer cette question de l'opinion publique parce que quand nous faisons des consultations, voilà les réactions de la presse. Et cette presse est lue non seulement à Maurice, mais à travers le monde. Ça, c'était au sujet du premier colloque. J'ai organisé un deuxième colloque le 05 décembre 2016, et cette fois-ci, on a invité des experts mauriciens, indiens et *Prof. Joseph Amalorpavanathan* qui est le spécialiste de *Cadaver Transplant Programme* du gouvernement de Tamil Nadu. Mais laissez-moi vous dire, M. le président, que l'honorable Bérenger a parlé d'une situation où on ne fait plus des opérations de transportation d'organes ; c'est vrai. Il y avait le docteur Upadhyaya, qui est retraité depuis des années et qui fut remplacé par le docteur Gigabhoy, mais lui aussi a pris sa retraite. Du temps où j'étais ministre de la Santé, j'ai pris des dispositions pour faire la formation d'un autre médecin. Ce médecin est allé à Marseille mais quand il a été formé, il a démissionné du service. Voilà la réalité ! Alors ce n'est pas vrai de dire qu'on n'a pas fait ce qu'il fallait faire. On a fait la formation pour qu'on ait un suivi, mais cela n'a pas été possible, non pas par manque de volonté politique, mais parce que ceux en qui on a fait confiance trahissent cette confiance. Quelqu'un qui a été formé par les fonds des contribuables mauriciens, qu'on envoie à Marseille pour être formé par les grands chirurgiens, voilà qu'il décide de ne pas retourner au pays ! Nous sommes dans une situation où il nous faut absolument avoir d'autres spécialistes - qui sont en train d'être formés, à ce que je comprends.

A ce colloque, M. le président - et là, je suis d'accord avec l'honorable Bérenger, c'est un sujet qui passionne, qui est passionnant, mais il faut dépassionner les débats, parce que nous traitons de la vie, de la mort. Et nous traitons des situations très dures pour les parents qui ont perdu quelqu'un, pour les parents qui doivent dire oui ou non à un prélèvement d'organes au décès de quelqu'un qui est proche, tout ça ce sont des questions très importantes. Et j'avais dit à ces colloques que ce colloque était destiné pour être une consultation. J'avais dit aucune décision ne sera prise mais j'avais dit qu'il faut qu'on en discute en toute confiance et en toute franchise. J'avais invité tout le monde à faire part de leurs arguments et de leurs critiques, de leurs préjugés et de tout ce qu'ils avaient dans leur cœur et dans leur tête pour qu'on puisse arriver à une situation où on pourrait dire que voilà nous avons un consensus sur la transplantation d'organes et comment on doit le faire. C'était

un exercice de pédagogie, un exercice d'éducation de tout le monde. Et entre la raison et la passion, moi, j'ai toujours préféré la raison.

À ce colloque, nous avons invité le public, la presse, les chefs religieux, les O.N.G. et tout le monde était présent et il y avait un consensus qu'il y avait une nécessité à revoir la loi qu'on avait en 2006 et aussi de faire de quelque chose de différent en ce qui concerne les prélèvements des cadavres. C'est triste de constater, M. le président, mais la réalité c'est que nous avons hérité d'un système de la loi de 2006 qui était très contraignant parce que les dons d'organes étaient uniquement destinés aux *next of kin*. Quelqu'un qui était étranger au *next of kin* n'avait pas le droit de donner son rein ou un autre organe à quelqu'un qui en avait besoin.

Alors on a pensé qu'il fallait élargir, qu'il fallait enlever cette contrainte et permettre à un ami, par exemple, de donner un rein à son ami même s'il n'est pas *next of kin*. Et il faut que je souligne aussi que nous avons à Maurice aujourd'hui, M. le président, presque 1,200 ou 1,250 personnes qui sont dialysées. Chaque personne qui suit le traitement de dialyse doit le faire trois fois par semaine pendant quatre heures par jour. Mais ces personnes peuvent avoir une meilleure qualité de vie si elles arrivent à être transplantées d'un rein.

Au moment où les opérations avaient commencé dans les années 90 à Maurice sur les transplantations des reins, il y avait plus d'opérations mais la raison principale était qu'il n'y avait pas des dialyses gratuites dans les hôpitaux. Une fois que les dialyses ont commencé à être gratuites, les gens ont dit pourquoi donner des reins parce que le traitement est disponible et cela a été un frein sur ce programme de donation d'organes, pour les reins surtout. Quand j'étais ministre de la santé, j'ai toujours dit qu'il faut donner à ceux qui suivent le traitement de dialyse la possibilité d'avoir une transplantation parce que cela va améliorer la qualité de leur vie et cela va réduire les coûts pour l'État en ce qui concerne les dialyses.

Mais, malheureusement, on est confronté à toutes sortes de situations de préjugés. Et c'est bon de dire aussi, M. le président, que nous avons aujourd'hui dans le monde des avancées de médecine extraordinaires. L'honorable Bérenger a parlé de la possibilité de don d'organes d'animal à l'humain. Oui, c'est quelque chose qui est faisable. Le *Stem Cell Research*, avec la possibilité de créer des organes, des *stem cells*, tout cela est possible mais c'est pour l'avenir. Mais la réalité aujourd'hui c'est que nous sommes dans une situation où des gens ont besoin d'organes pour avoir une meilleure qualité de vie mais il y a des contraintes.

J'ai dit qu'il ne faut pas politiser ce débat et il ne faut surtout pas faire de la démagogie en ce qui concerne ce projet de loi. Je n'ai aucune intention de faire de la démagogie mais il faut qu'on comprenne que la transplantation qui réussit est une réparation de l'irréparable. C'est quelque chose d'extraordinaire et ça c'est ce que la médecine moderne arrive à faire et il faut qu'on ait les techniques nécessaires, les spécialistes, les équipements et toute infrastructure pour pouvoir réparer l'irréparable à travers une transplantation d'organes à condition normalement que les organes soient sains et de bonne qualité.

Mais il faut aussi nous mettre à l'évidence que quand il y a une transplantation ce n'est pas nécessairement un succès garanti. Il y a toujours la possibilité que l'organe soit rejeté. Il faut conscientiser les gens. Ce n'est pas un miracle automatique mais il faut le faire. On n'a pas d'autres solutions. Mais la possibilité d'un rejet existe et il faut que le public, surtout les patients, en soient conscients. Mais la science continue à évoluer, la science devient beaucoup plus pointue et j'espère qu'on arrivera à un moment où la science pourra contrôler les méfaits de la nature en ce qui concerne les rejets.

Nous discutons aujourd'hui, M. le président, de la possibilité de sauver des vies à travers des prélèvements d'organes soit des donneurs vivants ou des cadavres. La transplantation d'organes est une opération chirurgicale qui remplace un organe qui n'est pas sain par un autre organe qui est bon. Cela se fait pour les reins, pour les yeux, pour le foie, etc. Mais il est important de savoir, M. le président, que ce projet de loi a tenu en compte les principes directeurs de l'OMS.

L'Organisation Mondiale de la Santé (l'OMS) a certains principes directeurs et je voudrais parce que ce débat est tellement important, parce que ce débat concerne tout le monde, ce débat concerne le public, ce débat concerne notre Assemblée, je vais citer certains de ces principes directeurs parce que l'honorable Bérenger aussi a évoqué les *guidelines* de l'OMS. Mais laissez-moi vous donner lecture de certains de ses principes directeurs.

Principe directeur 1 –

« Des cellules, tissus et organes peuvent être prélevés sur le corps de personnes décédées aux fins de transplantation uniquement :

- a) si tous les consentements prévus par la loi ont été obtenus, et
- b) s'il n'y a pas de raison de croire que la personne décédée s'opposait à ce prélèvement. »

Et je vais venir tout à l'heure à *opting in* et *opting out* et l'OMS en parle également de ce principe directeur. Je cite encore l'OMS –

« Dans un régime de consentement explicite – appelé parfois aussi « *opting in* » – des cellules, tissus ou organes peuvent être prélevés sur le corps d'une personne décédée si cette personne a expressément consenti à ce prélèvement de son vivant ; en fonction du droit interne (...). »

Naturellement, l'OMS, étant une organisation internationale, ne peut pas s'ingérer dans les affaires intérieures d'un pays. Alors tout cela est sujet aux règlements intérieurs du pays.

Principe directeur 2 –

« Les médecins constatant le décès d'un donneur potentiel ne doivent pas participer directement au prélèvement de cellules, de tissus ou d'organes sur le corps du défunt ni aux étapes ultérieures de la transplantation, pas plus qu'ils ne doivent être chargés de soigner les receveurs potentiels de ces cellules, tissus ou organes. »

Pour éviter le conflit d'intérêts, je crois que ça aussi c'est un principe important de l'OMS.

Principe directeur 3 –

« Les dons d'organes prélevés sur des personnes décédées doivent être développés au maximum des possibilités thérapeutiques, mais les adultes vivants peuvent également faire don de leurs organes dans les limites autorisées par la réglementation nationale. »

On revient encore une fois à la réglementation nationale.

Principe directeur 4 traite les organes qui sont prélevés sur le corps d'un mineur vivant aux fins de transplantation et cela aussi c'est prévu dans le projet de loi qui est devant notre Assemblée.

Principe directeur 5 –

« Les cellules, tissus et organes ne peuvent faire l'objet que de dons gratuits, sans aucune contrepartie pécuniaire ou autre récompense ayant une valeur marchande. L'achat ou les offres d'achat de cellules, de tissus ou d'organes aux fins de transplantation, ou leur vente par des personnes vivantes ou par les proches de personnes décédées, doivent être interdits. »

Once again, we are back to the possibility of trafficking in organs.

Principe directeur no 6, il y en a beaucoup mais le point que je veux faire c'est que l'OMS en a discuté et a établi des principes directeurs qui ont influencé la rédaction de ce projet de loi. Mais nous sommes dans une situation où le consentement, que ce soit du donneur vivant ou de la personne avant son décès, est capital. Ce n'est un problème qui concerne seulement Maurice, M. le président. Nous avons, à travers le monde, des discussions sur ce sujet, et je vais citer un article du journal de Times de Londres en date du 22 février 2016. Et cet article a été écrit par Clare Foges, qui était le *chief speechwriter to David Cameron* entre 2011 à 2015. Elle a été au cœur du pouvoir et c'est ce qu'elle dit. Pour les besoins de notre Assemblée, je vais laisser cet article aussi pour être consulté par la postérité. Mais c'est important de voir comment le titre est évocateur, le titre c'est et je cite – *Let's save lives through organ donation opt-out.*

L'article commence avec un américain qui avait besoin d'un *kidney* pour son épouse de 57 ans mais je passe sur cela, je viens sur ce qui est important pour le débat aujourd'hui –

“There are similarly desperate stories on this side of the Atlantic; not all with happy endings. More than 6,500 people are waiting for organ transplants across the UK. Around 1,000 lose their lives each year. The shortage is acute, the situation desperate.

Last week, a couple of solutions were aired from very different sources. A Motion was drawn up for the next meeting of the Church of England's General Synod suggested that churches should encourage the donation of blood and organs as a Christian duty. The Bishop of Carlisle has said that the “sacrificial offering” that Christians are called on to make is not only about time and money but the “organs that are such intrinsic part of our bodies”.

This was followed by the news that scientists in the US have made a breakthrough (...) 3D printing of bones, muscles and organs (...), with off-the-shelf human body parts on the distant horizon.

Both solutions mean a long way for change – but there is another answer that is quicker and already happening in the UK.

Last December, NHS Wales moved an opt-out system for organ donation. Unless people have registered their objection to donating their organs, they are presumed to have given consent. For those who don't like the idea on religious, personal or moral

grounds, it is easy to opt-out. This follows other successful opt-out systems around the world. In Spain, for instance, rates of donation are twice what they are here.

It is an idea we should adopt in the rest of the UK(...)"

Je ne dis pas que c'est la bonne solution, mais je dis que c'est un débat qui se fait à travers le monde.

"Some find the idea dehumanising (...)"

Opt-out.

("...)" When the change was debated in Wales, the campaign group Patient Concern said it would result in "human bodies being treated like clapped-out-cars.

There is also the unease that it would imply state ownership of our bodies; the chilling thought of lungs and livers theoretically stamped as "Property of Her Majesty's Government"

M. le président, l'article continue et fait le cas sur un plaidoyer pour le opt-out. L'honorable Bérenger a parlé longuement sur cette question *d'opt-out* ; le projet de loi que nous avons ne va pas totalement dans cette direction, mais la solution a été trouvée en Espagne. L'Espagne est le *leading country* pour les transplantations d'organes où le *opt-out* system a été beaucoup plus bénéfique que les autres systèmes. Mais que voulez-vous ? La médecine continue à progresser. La médecine aura d'autres sujets sur lesquels les gens auront des opinions totalement divergentes ; je parle, par exemple, de l'euthanasie, des mères porteuses, ce sont débats qu'on aura probablement pas dans le cours du mandat de ce gouvernement mais dans les années à venir. On ne peut pas nous mettre à l'abri de ce qui se passe dans le monde. Nous sommes au cœur du monde et nous sommes condamnés à traiter de ces problèmes.

Le projet de loi, M. le président, établit les critères pour chaque situation; les dispositions, les sauvegardes, mais il y a, comme je l'ai dit, la clause 11 qui prévoit un régime de consentement qui peut être contraignant. Par exemple, dans le cas des enfants, il faut que tout le monde *act jointly*. Cela peut être un frein à ce que nous

voulons faire. Je prends un cas : il y a des problèmes entre frères et sœurs, un dit oui, l'autre dit non et on ne peut rien faire. Je suis d'accord aussi que ce projet de loi *is a work in progress*. Cela ne va pas être la fin de cette loi, il faut amender constamment, il faut revoir ce qui marche, ce qui ne marche pas, comment on va ajuster ce qui n'est pas ajustable. On a

parlé du *Board*. Vous savez, M. le président, quoi qu'on dise, que ce soit le président qui nomme, le ministre qui nomme, à la fin, ce sont des hommes et des femmes qui font partie de ce *Board*, qui auront à décider des cas de conscience. Laissez-moi vous donner quelques cas de conscience. Avant de parler de ces cas de conscience, je voudrais dire que la semaine dernière, Arun Jaitley, le ministre des finances de l'Inde, a été opéré. Il a eu un don de rein d'un donneur vivant, et ils se portent bien, les deux se portent bien.

Allons voir les cas de conscience ; il y a un organe, il y a une mère qui a besoin de cet organe et aussi une personne âgée. A qui donnez-vous cet organe? Allons prendre un autre cas. Il y a un prisonnier qui a beaucoup de crimes dans son sac et une autre personne qui a un *clean record*. Il y a un seul organe, à qui vous le donnez? Il y a des jugements de valeur à chaque fois. Allons prendre un autre cas - une personne aisée, une personne vulnérable et pauvre. Ça je pense que c'est plus facile, on va dire le pauvre. Mais ce n'est pas nécessairement le cas. J'évoque ces questions parce que le *Leader* de l'Opposition, qui a fait un discours démagogique, a évoqué la méritocratie en ce qui concerne le don d'organe. Il n'y a pas de méritocratie, ce n'est pas une course, ce n'est pas un concours de tennis. Je prends un autre cas, M. le président. Une personne qui a déjà bénéficié d'un don d'organe, est-ce qu'il est éligible une deuxième fois ? Pourquoi non ? On dit non mais ce sont des cas de conscience, il faut qu'on évoque ces questions. Est-ce qu'une personne, qui passe sa vie à boire, à fumer, à se droguer et à prendre des risques avec sa santé, pourrait bénéficier d'un organe au détriment d'une autre personne qui a mené une vie saine comme l'honorable *Chief Whip* ? Allons prendre un autre cas. Est-ce qu'une personne, avec des tendances suicidaires, doit bénéficier du système de transplantation d'organe ? Parce que le but de la transplantation c'est de prolonger la vie, de donner une meilleure qualité de vie, et nous traitons d'une personne qui a des tendances suicidaires. Qu'est-ce qu'on fait ? Que fait le *Board* ? Est-ce qu'une personne avec une famille doit avoir priorité sur un célibataire ? Est-ce qu'un jeune doit avoir priorité sur une personne âgée ? Est-ce que les prisonniers généralement doivent être éligibles ?

Allons prendre un cas précis. Un couple fait une sortie de route, et l'homme et la femme ont besoin du seul organe disponible. A qui des deux ? Est-ce qu'il faut faire un tri parmi les receveurs, sur leur vie et les risques qu'ils ont pris ? Est-ce que dans certains pays où il y a des priorités donner aux filles, est-ce que les garçons auront priorité sur les filles ? Est-ce qu'il faut donner priorité à une personne qui, avec le don, aurait une plus longue durée de vie qu'un autre ? J'évoque ces questions, M. le président, parce que nous traitons de la vie

et de la mort, de la qualité de la vie. Il n'y a pas de bonnes raisons, il n'y a pas de mauvaises raisons. Chaque cas est un cas d'espèce. Le *Board* sera appelé à trancher sur ces cas d'espèces à chaque moment et c'est pour cette raison qu'il faut qu'on ait un régime juridique, fiable, prévisible et un régime juridique qui peut répondre à n'importe quelle situation dans les plus brefs délais parce que les organes qu'on prélève sont des organes qui ont une vie limitée.

Il y a eu un cas en Inde où un jeune est décédé à la suite d'un accident de circulation. On a prélevé son cœur, on a été voir sur la banque des données, il n'y avait aucun receveur de ce cœur dans l'État où l'accident a eu lieu. L'État Indien a fait venir un avion pour prendre ce cœur pour aller être transplanté sur quelqu'un d'autre dans un autre État. Je suis d'accord avec l'honorable Bérenger. Il faut qu'on ait l'infrastructure. Si on veut vraiment que ce projet de loi soit un succès, il faut qu'on mobilise non seulement les ambulances, les spécialistes, mais aussi l'hélicoptère probablement parce qu'il y a une durée de vie pendant laquelle la transplantation peut se faire avec succès. Alors, il faut qu'on soit ouvert à tous et c'est pour cette raison que j'ai dit qu'il faut dépassionner le débat. Il faut voir le problème tel qu'il est et non pas tel qu'on imagine.

M. le président, on a parlé de banque qui contiendrait tous ceux qui ont besoin des organes. Mais à la base de toutes transplantations, comme évoqué par l'honorable Dr. Joomaye, il faut voir la condition physique et médicale de la personne qui est en état de recevoir ou pas. Avec une meilleure volonté au monde, si la personne qui doit recevoir selon les données de l'ordinateur, des statistiques, n'est pas capable de recevoir, qu'est-ce qu'on fait ? Est-ce qu'on dit non, c'est la fin, c'est ce qu'a décidé le computer et c'est terminé ou bien on va donner à quelqu'un d'autre ? Et si on donne à quelqu'un d'autre, est-ce qu'on court le risque de dire qu'on a favorisé quelqu'un d'autre ? On n'est pas à l'abri des critiques, mais il faut qu'on soit pragmatique, il faut qu'on soit réaliste aussi sur un projet de loi de cette nature.

M. le président, il y a dans ce projet de loi beaucoup de situations qu'on peut imaginer très difficile. Je voulais dire que quand on parle de transplantation, quand on parle de prélèvement d'organes, nous sommes en train de vivre une situation très, très dure pour les membres de la famille et c'est pour cette raison que le consentement reste central à tout ce qu'on veut faire. Mais dans tout ce qu'on fait, il ne faut pas oublier que nous avons une situation où les médecins sont des professionnels. Les spécialistes sont des gens en qui on doit avoir confiance. Moi, je dis toujours que quand on est professionnel, on doit faire un

travail sur le plan de notre profession et il faut le faire avec toutes les compétences que nous avons.

L'honorable Bérenger a évoqué la question de '*clinical death*' et de '*brain death*.' Moi, je ne suis pas médecin, mais je pense que tous ceux qui ont travaillé sur ce projet de loi ont bien étudié les différentes implications de ce qui est '*clinical death*' et de ce qui est '*brain death*'. Moi aussi, j'ai été rapidement sur Wikipédia et le titre c'est '*Clinically dead ? The Blurred Line Between Life and Death*' et je cite –

“Sometimes, the line between life and death can seem blurred. In one recent case, a woman was erroneously declared dead after having a heart attack and wound up freezing to death in a body bag in the morgue. Another woman gave birth to a baby three months after she technically died.”

Il y aura des situations, mais *the schedule to the Act* qui traite sous la section 12(2) *the procedure for certifying death of a donor*. *Mr Deputy Speaker, Sir, this is what the schedule says -*

“1. Death shall be diagnosed by the irreversible cessation of brain stem function (brain death).”

Après, il y a toute une procédure pour déclarer une personne *dead*. On m'a passé un petit papier qui dit *electroencephalogram* qui est le test pour déterminer si la personne est vraiment décédée. Mais je pense que ce sera bien rare si on va prélever des organes d'une personne qui n'a pas été vraiment *declared fully dead, whether clinically or brain dead or whatever*. *I do not think this is going to ever happen*.

Mr Deputy Speaker, Sir, let me say that this Bill, which is before the House, is an improvement on the previous Bill. I am not saying that the previous Bill was back. I agree with hon. Bérenger that when the law was passed in 2006, the whole idea of transplant, donation of organs was totally new and we had to prepare the ground for people to accept the possibility. I know that because I happened to be the Minister. I tried to get things moving on transplant of organs, but we have all sorts of prejudices and problems and the major problem is the physical infrastructure that we require for this to work. We have so many deaths on our roads. Let us assume that all the procedures according to law with regard to parents' consent etc. are complied with, how do we go on site with the specialist to harvest the organs? We must have the people, the people at the time that we require them, the physical infrastructure in terms of laboratory - I do not know where they keep it, in a fridge or whatever - we need to

have all these. This is going to take time, but this is the beginning of the road. It is not the end of the road.

This is why, Mr Deputy Speaker, Sir, I believe that whatever qualms one may have about this Bill, whatever problems we can have about whether it is the Minister who is going to appoint or whatever, these are secondary matters. What we require is, in fact, what India has done. I am going to quote from the 'Times of India' in August 13, 2015. The title of an Editorial is: 'Life after Death'. This newspaper has organised an organ donation day, and it says –

“Hundreds of thousands of Indians die of organ failure every year. Many of these deaths could be averted by timely organ transplants. However, the country is beset with a monumental deficit of organs available for transplants. According to latest data, as against the demand for 1.75 lakh - it is 175,000 - kidney transplants, only 5,000 are carried out. Similarly, 1,000 liver transplants take place while 50,000 die of end stage liver disease. Statistics are distressingly poor in case of heart or lung transplants too. Indeed, India's organ donation rate stands at an abysmal 0.34 per million population. A country like Spain, on the other hand, has managed to ramp up the rate to 36 per million population and, hence, save many lives.

Today is Organ Donation Day, an initiative of this newspaper. It aims to give a fillip to India's efforts to develop an effective organ donation ecosystem (...)"

I am going to lay this article as well, Mr Deputy Speaker, Sir. But then, they are working on mandatory reporting of brain death. I am talking of India. We must not forget also, Mr Deputy Speaker, Sir, that in India there has been a traffic of organs. We must not be blind to that. Poverty has been exploited by those who have the means to harvest organs for their quality of life to improve. We must make sure, this Bill does provide for prohibiting trafficking in organs, but we can never be 100% sure.

Sometimes, we hear somebody has disappeared and we do not hear about it ever. Not so much in Mauritius, but in India, for example, people disappear and when they are found organs have been harvested from them. I hope this never happens in Mauritius. But we have to be very careful that while we move in a direction of organ transplant, organ donation, we take all necessary measures to control the trafficking in organs. People trafficking for the sake of organs, that is also happening. Not only trafficking of people, but people being trafficked for the sake of their organs and this is what we need to be very careful about. I am

sure that all those who will be called upon to monitor this piece of legislation will make sure that when it comes to the basics, yes, we need to save lives; yes, we need to have full consent for anybody who wants to donate his organs; yes, we need to have the infrastructure ready, and we need to be open to any suggestions, but absolutely we must be against any risk of any trafficking in organs.

I do not want to go in length in the many provisions of the proposed law, but let me conclude by saying, as I said earlier, this is a beginning. A much better beginning than the law of 2006, but it is a beginning that gives hope to the thousands who are waiting for an organ. I agree that we should not give false hope to these people. There will be hurdles, there will be bottlenecks and there will be obstructions. But we need also for the people to understand that this is required if we want to be generous and to have solidarity with those who are suffering.

Once a person is dead, either he is buried, incinerated or, in some cultures, left on tops of the mountains for the birds to devour them. A dead body is useless and a dead body can be the source of life. This is why I am going to end, Mr Deputy Speaker, Sir, by saying this Bill is about life; it is about death, but it is also about life after death.

I thank you very much.

The Deputy Speaker: Hon. Dr. Boolell!

(7.00 p.m.)

Dr. A. Boolell (Second Member for Belle Rose & Quatre Bornes): Mr Deputy Speaker, Sir, if the incumbent Minister was here, I would have asked him to extend a hand of friendship to the present Minister of Tourism. I think he delivered a very good speech like the speech delivered by hon. Paul Bérenger and, of course, the one delivered previously by our good friend, the hon. Leader of the Opposition.

This Bill, Mr Deputy Speaker, Sir, I will call it an early harvest. The bumper crop will come if we put in place the necessary safeguards and we have to err on the principle of caution. If we want to deliver, we have to make sure that we take things at a stride. This is precisely what was done when the issue was raised and discussed in 2003 and 2004 by the then hon. Minister of Health, Minister Ashock Jugnauth. Of course, when we came into power in 2005, the issue was raised, discussed forcefully, but, of course the process was a process which had to be slowed down. Of course, when the Bill was prepared, it was

prepared with the help and expertise of people who had acquired the expertise over the years. We invited and enlisted the services of people from overseas.

But the success and failure of this Bill, Mr Deputy Speaker, Sir, rest on regulations which are going to be prescribed. We must not rush in like fools where angels fear to tread, Mr Deputy Speaker, Sir, and I said take things at a stride. Precisely, this is what has been happening since 2003-2004. When the Bill was introduced in 2006, I think if my memory serves me right, probably, in April 2006, we narrowed the issue and we restricted it only to qualified relatives. The reason was simple. You had to circumscribe, but you had to make sure that we err on the principle of caution for the risks are not becoming in the years to come, a heaven for trafficking of organs or, as the hon. leader of the Opposition stated, a tourism transplant.

So, Mr Deputy Speaker, Sir, the care was taken to safeguard the interests of the donor and the recipient. When we talk of close relatives, the matching, of course, notwithstanding a wife or a living companion who is donating an organ, subject as the good doctor has stated on the other side, that there is a need for compatibility. If you go into the history, you will realise that the first transplant in 1954, if my memory serves me right, was transplant between a donor and a recipient who were *deux frères compatibles* and they were identical twins. From there on, slowly we progressed to qualified relatives and now we have removed that restriction. What we are saying, we remove the restriction to widen the circle of opportunities to make it possible for those who are entitled to an organ to receive the organ. I am not going to narrow the issue simply of attaining self-sufficiency or of saying that time is of an essence. What we have to do is to make sure that we take the time needed, but we deliver on promises made.

Mr Deputy Speaker, Sir, before I come to the main thrust of the Bill, let me make it quite clear that we cannot narrow the appellation of this Bill only to Human Tissue Bill. In so doing, when you narrow it to Human Tissue Bill, you are not making provision for the donation as such because a tissue is not an organ. An organ is a tissue, but a tissue is not an organ. And we have to tread very cautiously, because what we are doing by empowering the Board? For every tissue which is going to be biopsied, the Board has to be informed. What you are doing is that you are narrowing the therapeutic and the diagnostic that has to be made, because you cannot, for every single step, inform the Board. When it comes to a living donor, a recipient, he or she who has volunteered to donate an organ which is going to become effective after death, this is a different situation or different scenario.

But, again, as I have stated earlier, there is a call to achieve self-sufficiency. The only way to do this is through education, education, and education. The people have to be properly educated. We have to make sure that there is an outreach for a better reach out, and we have to reach out to people. It is not a question of asking specialists to come over, to have workshop. This, I agree with you, is an important step, but there is a call, rallying call to sensitise the people at large, to go out and reach out to them, to explain to them the merits of donating an organ. The best natural gift that can take place, and it's a gift that brings people together in the name of unity and solidarity, in the name of true patriotism, and it has to be done, it has to be explained.

Mauritius is not France, where there can be presumed consent. Mauritius is a country, a multi-racial pot with its own specificity, its own diversity; its secularism is clearly circumscribed. We have people of different communities. Our brothers and sisters of Muslim faith like to have their body for burial on the same day. Some may be reluctant to donate an organ. That is why I say, and I totally concur with the Council of Churches. In unison, they have stated very clearly that there is a need to donate organ; the best natural gift that we can do as human beings, because we are all donors and recipients.

Now, if we want to do away with the programme of opt-in, opt-out, we can easily do it. We can make it mandatory. If tomorrow, it is compelling on you to declare whether you want to donate your organ or you do not want to donate your organ, the problem is solved. There is no question of opting in or opting out within the system. The problem of opting out, whether it is hard opting out or soft opting out or opting in, the problem is resolved. But, of course, we are in a democratic country, we have the freedom of choice.

So, mandatory probably maybe challenge. I do not know about the constitutionality of the issue, but, of course, it would have resolved the problem. It's like enrolling on the electoral list or whether it is compelling on you to declare your taxes. So, this will not solve the problem. But I am glad on one issue. The Minister made it a point to listen to those who were willing to dispense advice. At least he lent his ears to those people. And what has been the proposal that has taken the heat out of this Bill? The amendment brought to section 11(3).

What we are having, what has been proposed, and what needs to be done is to sensitise the people in respect of the amendment brought to section 11(3). In fact, the State can appropriate the body and donate it to an institution or donate the organ for transplant. The

State can appropriate, but there is an obligation to inform. You are not asking them, but you are informing them that this is your intention.

If the relatives say no, that's the end of the story. This is the difference between the soft opt-out and, of course, the opt-in system, where you volunteered to donate and, of course, which is to become effective after death, and it's registered; whether it's going to appear on your Biometric Card or on your insurance card, on your driver's license, it's immaterial. But the information has to be available, and there is a call for confidentiality. No one should know, unless, of course, we are talking about a living donor and a recipient who are qualified relatives.

Mr Deputy Speaker, Sir, no law, no provision in any legislation is cast in iron. Even if I am mentally incapacitated - there are circumstances where a person is mentally incapacitated - I can still donate my organ. The Court can so decide. Let me take the case which was highlighted in the speech delivered by the then hon. Yatin Varma. He cited the case of Strunk vs Strunk, the case of an elder brother who had an end stage renal failure. It was a life threatening disease, and the only person who could donate an organ to him was his younger brother, one year younger than he was. But the gentleman had a mental age of six years old, and that man who was in a mental institution depended upon the elder brother for emotional, psychological and financial support. The case was referred to Court. The Court ruled in favour of donation because it was an exceptional situation where life had to be saved.

So, when we talk of legislation, when we talk of consent, the doctor who has taken the Hippocratic Oath knows that he is governed by that law. This is the ultimate law for him. He will not succumb to any pressure if he has taken that oath, Mr Deputy Speaker, Sir.

That's why I say, to win this battle, which transcends all political barriers, we have to sensitise the people at large, we have to disseminate information, we have to do away with taboo, stigma and discrimination. It's a question how well you reach out them. That's why the composition of the Board is important. But what should emanate from the Board is a biomedicine agency. When you have a biomedicine agency, it can be entrusted with the responsibility to address issues which are going to crop up. As we say, the law is an ass, we constantly need to amend the legislation; we constantly need to look at issues which can be very sensitive, the medico legal issues. Evidence has to be gathered.

Let me come to the issue of the Board, because the Board has to play a very prominent role. We have a Board, but the Board has to be above board, and for the Board to

be above board, we need to make sure that it is composed of people who have the acumen, people who can deliver, people who feel that they are fiercely independent and will act very independently. We need a Chairman. The Chairman cannot be subservient or submissive to politicians. The Chairman has to be seen to be above board. I am not in favour of having the Director of Health Services chair that committee. And, it is right that since there is no provision for appointment of the Director of Health Services, we don't know whether he is going to be appointed by the Minister; but I think both the hon. Leader of the Opposition and hon. Paul Bérenger are right, he has to be appointed by the President.

When we talk of a standing committee, we are not saying that a standing committee is going to go to the lab, is going to look at existing facilities. We are talking of oversight, monitoring, calling for papers and persons, very much like the committee which looks at issues relevant to ICAC. This is what we are talking about. When we are talking of a Board we have to make sure that there is a psychiatrist as a member of the Board. Why? Because we have to make sure that those who donate and those who are going to receive have the mental capacity. They are not incapacitated.

We have to enlist the services of a nephrologist because it is essential that there is also due care of the living donor. It is not a question of having set up a Board for the sake of having people appointed by the Minister. When we look at Section 26, it is not a question of public interest. The Minister has to stay as far away as possible from the Board and there is no question of giving directives of a general nature in the name of public interest because public interest is open to all kinds of interpretation.

I agree with what has been said, you may have the best legislation, you intend to implement it, but to implement it you need to have the physical resources, the human resources and the capital resources. As I said, we move at a stride. We have reached a stage where we have to put in place the logistics.

Mr Deputy Speaker, Sir, Jawaharlal Nehru Hospital was identified as the hospital where we could set up a centre of repute. Much groundwork was done by the then Minister of Health, hon. Bundhoo. Much work was done, but it cannot happen overnight. First of all, you need to train people. And I have to pay tribute to one gentleman by the name of Dr. Purgass who has been coming to Mauritius on a regular basis; he was invited by successive Governments. He came free of charge and the thing is, Mr Deputy Speaker, Sir, he has set up a special - together with his peers in Marseille, they are going to run special courses for

Mauritians and when they are trained they will have the *Diplôme d'études supérieures en Neurologie*.

This is one amongst others, one of the greatness of our diaspora and we have to make the most of it. We have to build on existing capacity. We have to set up excellent biolab. We have to make sure that next to this centre there is also a Neurotrauma centre; it is important. I don't think that it is going to happen overnight. We have to make sure that the regulations are properly prescribed. From the due care of the living donor - it is easy to say that tomorrow we are all willing to donate. Of course, most of us would prefer it to become effective after our death, if we so decide. But let me tell you one thing in respect of a living donor, if there is no proper follow-up, if he is not properly explained that he will be taken care of, he would be reluctant. That is why there is a call for a living donor to be certified by two specialists and that is why there is a need to impress upon him that there will be good follow up, and that is very important. So, we have to create that conducive environment. It is not a question of having the donor and the recipient. It is not as easy as that, notwithstanding what our friends have been saying about proper matching. I agree that we need to have the right HLA matching. But one thing is certain, today with the constant breakthrough in medicine, with 30% compatibility - if I refer to an article which was published in British Medical Journal - you can have a good transplant. There is no problem about that. Because of the breakthrough in respect of immuno-suppressant drugs, there will come a time when organs will be made *in vivo in vitro*.

Who has not heard about how Dolly was cloned? Amazing the strides that are being made in the field of medicine! And, as has been said, I think, by every person who has intervened so far, of course, the legislation, irrespective of whether it was the legislation of 2006 or the current legislation, will have to adhere to the guiding principles on human cells, tissue and organ transplantation. Of course, we also have to, at a later stage, subscribe to the Declaration of Istanbul on Organ Trafficking and Transplant Tourism. I am not going to quote extensively from these two reports, but these are facts of life.

On the other hand, Mr Deputy Speaker, Sir, if the safeguards are not put in place, the risks are there. Let me take the case of our friends who travel to India for transplant. You know, when you travel to India for transplant, you appear before the Board. When the living donor, the recipient are there, have to appear before the Board, every information has to be provided for. There is a tight scrutiny. So, I am not too worried about allowing people from overseas to come to Mauritius when the time is right, after we have acquired experience and

when lessons can be shared, lessons which we have acquired. How can you stop somebody from overseas coming to Mauritius if we become a centre of repute to undergo a transplant? In the good old days, we used to call the transplant doctors the 'spare part doctors'. If we have good 'spare part doctors', where is the problem? But it is very important that the person, who is travelling to Mauritius to undergo transplant, has a letter of support or comfort from the equivalent of the Board that we are going to set up. We have to be provided with all the relevant information. It is very important; but that will come at a later stage.

How can you prevent somebody to whom you are emotionally bonded, after a transplant, from not donating him a gift? If you want to buy a house for him, if you want to send his children overseas to study, what stops you? This is not trafficking. There is no monetary issue. It is a question of how emotionally bonded you are and what is it that you want to do. Nothing stops you from doing something which you think is decent and you want to help a person who is in distress, but we have to tread cautiously and monitor those who are going to travel to Mauritius to exploit those who are weak and vulnerable. This is where safeguards are very important and it is easy to find out. We are a small country; we can be sheltered, subject that we put in place the relevant legislative framework. And, as the Leader of the Opposition and hon. Paul Bérenger have said, the law needs to be constantly amended.

Mr Deputy Speaker, Sir, I will rebut some of the points canvassed by the Minister of Health and Quality of Life, hon. Dr. Husnoo, whom I consider to be a man of integrity. I was rather surprised when he gave wrong interpretation to a provision in the 2006 legislation, saying that in section 10(6), a transplant surgeon or a surgeon for that matter - it does not need to be a transplant surgeon - can walk into somebody's place, remove an organ, the eye and then use it for transplant. There is a call for consent. The provision is for exceptional causes because you do not want to transfer a body from residence to hospital. And we are talking of the eye, which is an avascular organ in a way when you remove it. There is no problem when the person is dead, you remove it, it becomes avascular and the transplant can easily be done because our doctors are trained to do corneal transplant. In respect of corneal transplant, I have to pay tribute to the Lions Club, which, over the years, has imported those organs from Sri Lanka or from US, tissues of good quality which have been used for corneal transplant. And let me tell you one thing! Those tissues which we imported from Sri Lanka, do you know that there was a high availability of organs? Sad to say! When there was the Civil War in Sri Lanka! It is a fact. We do not want our people to die on our roads. We have to make sure that it does not happen, but we have to live with facts, people do die. And when

they die, organs can be made available, but you do not remove an organ just for the sake of removing an organ. We have to look upon people as patients. They have basic rights, whether you are living or dead. Every person, living or dead, has a basic right. We cannot use them; we have to treat them with respect.

I will give you another example. A person who passed away from, call it a road traffic accident. If during his lifetime, he had expressed his wish to donate an organ, the problem does not arise, but if he had not expressed, of course we know where the onus is. It is on the parents. Let me take the specific case of somebody who is comatose! We do not know whether he will come out from irreversible damage to his brain, whether he will succumb or not. As has been stated, you cannot, on the spur of the moment, go and ask parents to donate. There is a process; there is some diligence; it has to be done diligently. You need to have psychological support. It is a way of saying things. And, of course, there is the endless debate between clinical - a person is clinically dead - and the legal issue which may arise; the problem between clinical dead and a person who is legally dead. Because when a person has irreversible brain damage and we suspect that he is brain dead, the person, of course, is on a ventilator. The ventilator is being used to keep the organs going. When the ventilator is removed or you switch off the apparatus, the heart can beat for one minute or less. Now, what is the significance of this? All these issues have to be explained to parents.

That is why I say the law, as it stands, is hollow if the regulations are not properly prescribed, from the due care of the living donor to the person who will donate his organ which becomes effective after death. Every step of the way has to be clearly monitored. Every step of the way has to be fully explained, Mr Deputy Speaker, Sir. It is not a simple Bill. Very complex! We are talking of a debate which can be endless on a person who is clinically dead and legally dead. But, of course, in section 15(2)(c), it is self-explanatory, because when a person is brain dead, the two doctors who have certified the person to be brain dead, have to come back within six hours to certify that he is really dead. These are facts, because you cannot beat about the bush here. There is a call for predictability; there is a call for certainty; there is a call for clarity on this matter. There should be no hangover over this issue. That is why, Mr Deputy Speaker, Sir, I agree with what has been said by both the Leader of the Opposition and hon. Paul Bérenger.

Hon. Paul Bérenger has gone as far as to say that there is a call for a free vote in respect of amendment brought to section 11(3). It is a point mooted, but it is a point that needs to be considered. As hon. Gayan has stated, at the end of the day, it is the person at the

helm who delivers. But for the person to deliver we have to make sure that he is far away from the maddening crowd.

I will end by saying, Mr Deputy Speaker, Sir, there is a rallying call; rallying call to press upon the Mauritian community as to the merits and benefits of donating this natural gift. And we have to put in place all the safeguards to make sure that our country never becomes a haven for human trafficking or for transplant tourism. We are too small to fail, but we can become bigger if we deliver on promises. And I am sure we are going to deliver.

Thank you very much.

The Deputy Speaker: Thank you. Hon. Rughoobur!

(7.34 p.m.)

Mr S. Rughoobur (Second Member for Grand’Baie & Poudre d’Or): Thank you, Mr Deputy Speaker, Sir, for giving me the opportunity to say a few words on this Bill. Mr Deputy Speaker, Sir, I have had the opportunity to listen to Members on both sides of the House. There have been very valuable contributions by hon. Members on this very important Human Tissue (Removal, Preservation and Transplant) Bill.

Mr Deputy Speaker, Sir, last year, during adjournment time, and through, I think, two PQs, I had the opportunity following concerns expressed by my mandates to intervene on this important issue of renal transplant. And this is when I came to know the serious problem that we had in terms of shortage of medical professionals and this is when I was briefed by people at the Ministry as to the difficulties they were having for renal transplant on patients with renal failure.

I must say, Mr Deputy, Speaker, Sir, that it is a good thing that we are coming forward with such an important Bill and, as mentioned by hon. Members, we should not do politics on such an important issue.

Mr Deputy Speaker, Sir, I believe that the factor that is most important for us to succeed in this initiative of setting up a structure for the removal, preservation and transplant of human tissue is political will, but I will go a bit further by saying that we need leadership and drive because we tend to forget easily, Mr Deputy Speaker, Sir, what happened in 1985. We have to go down memory lane in 1985. What we are saying today, Mr Deputy Speaker, Sir, is that we have a problem of infrastructure. We are saying that we have got a problem of shortage of medical professionals. We go back down memory lane in 1985; we still

remember Prof. Hassan Raffa. He came to Mauritius and, at that time, concerns were expressed by many people that in Mauritius we are going to do open heart surgery. Impossible! We did not have a single professional, local I mean, to do open heart surgery, but the Government, at that time, took the bold decision to start open heart surgery in Mauritius. What has happened afterwards? We have been able to put in place the required infrastructure and we gradually had local professionals. At that time, we did not even have trained nursing officers. Now, we have the infrastructure including the human resources. *On a relevé ce défi*, Mr Deputy Speaker, Sir, over the years. What was the single factor that contributed for us to achieve what we achieved in the field of cardiac today? That was leadership and drive at that time and this is what is required today.

Mr Deputy Speaker, Sir, I think it is very important that we mention the WHO guidelines, but before that, at the stage where we are, it is important for us, I believe, to address those priorities, those check lists that have been identified by the World Health Organisation. When we looked at this Bill, we have to see whether it sufficiently addresses those checklists. What are those checklists? There are six, Mr Deputy Speaker, Sir: the issue of national oversight - and I will come to this; the issue of education and promotion; the issue safety; then we have the most important issue of quality control; assessment, and lastly clinical use. These are checklists that have to be addressed at this stage when we are debating about this Bill. Gradually, of course, when we are going to implement this important project, we have to come to the guidelines and we have to ensure that we complied with the guidelines of the WHO.

Talking about the first important checklist, the national oversight, Mr Deputy Speaker, Sir, WHO talks about the need for an appropriate, regulatory and structural framework. This is what we are looking at today, Mr Deputy Speaker, Sir, with this Bill. Of course, it is not the most perfect in the world, but I believe, as many hon. Members said before me, that it is a good start this Bill. When we look at the contents of this Bill, Mr Deputy Speaker, Sir, there are many interesting provisions. We have been comparing this Bill to the one that came in front of this House, I think, in 2006. Why am I mentioning it, Mr Deputy Speaker, Sir? It is because in the previous Bill, in 2006 - it was a good Bill there also - there were shortcomings. There was a proposal for the creation of a Board, but when you look at its structure, you had nothing in terms of the executive arm. There is a Board, but there was no provision for the day-to-day functioning of that Board, Mr Deputy Speaker, Sir. This Bill comes and cures this major shortcoming with the creation of a post of the Registrar

and the supporting staff because we need to have an executive arm in the structure to be able to implement whatever policies the Government defines or the Board defines. This Bill cures, Mr Deputy Speaker, Sir.

Coming to the structure again, one issue is not that clear for me in this Bill is the issue of the subcommittee. We have it at page 5, clause 4(5) (b), Mr Deputy Speaker, Sir. Clause 4(5) (b) speaks about the creation of a subcommittee. This is created under delegated powers, but the Bill is silent as to whether this committee has the right to decide and whether the decision of that subcommittee is final. I hope that the hon. Minister is going to clarify this because clause 4(5) (b) talks about the creation of a subcommittee by the Board and that subcommittee will take decisions. Are those decisions taken by the subcommittee final, or are they subject to the approval of the Board? I think this is an important issue that has to be addressed and it can be very dangerous going forward and wrongly interpreted. Again, in that same section, Mr Deputy Speaker, Sir, clause 4(5) (c) and I quote –

“Any person co-opted under paragraph (b) shall have no right to vote on any matter before the Board.”

If these persons were appointed by the Board on a subcommittee, I fail to understand why this part (c). That member is never a member of the Board, so there is no question of this part (c) where you have this issue of right to vote or not. This is a member of a subcommittee. I fail to understand why this part. Maybe we can get some clarifications from the hon. Minister later on.

Mr Deputy Speaker, Sir, this Bill takes care of this national oversight and this is as per the first guideline of the World Health Organisation. You need to have an appropriate legal and structural framework. I believe that we have the structure. Of course, Mr Deputy Speaker, Sir, it has a lot to do about the quality of people that you are going to appoint to ensure that there is effectiveness and that there is efficiency in the structure that you are going to set up. That is the first guideline, Mr Deputy Speaker, Sir.

Secondly, there is the issue of education and promotion. As rightly pointed out by many hon. Members in the House, I believe that it is important that we have a campaign. This Bill speaks about what is prohibited in terms of advertisement, but it does not talk about educating the population. The promotional campaign that we need, I believe that it is important in terms of the second guideline of the WHO. It is extremely important that at this stage there is a proper campaigning and gradually, Mr Deputy Speaker, Sir, we go on

explaining the population the importance of this Bill, what are the procedures; what are the facilities; what are the important provisions in this Bill that the citizens can take advantage of. I think this issue of education and promotion is extremely important.

The third one, Mr Deputy Speaker, Sir, is the issue of safety. The third important checklist of the WHO talks about the issue of safety, the issue of contamination when you are undertaking human tissue transplant. It speaks about the need to ensure that there is adequate infrastructure and that every necessary precautionary measures are taken to ensure that those transplants are undertaken under a set of procedures. This is three, Mr Deputy Speaker, Sir. And I see that in the Bill, clauses 18, 19, and 20 do make provision for this aspect of safety, but, of course, Mr Deputy Speaker, Sir, going forward, we will have to see how these provisions can better improve.

But in regard to quality system and assessment, Mr Deputy Speaker, Sir, I think this is where we will have to make a real effort. We will recall when we were discussing about the Higher Education Bill, when we were debating on this; there was the creation of a structure. I think there was a quality department that was created in order to enable an independent body to have an oversight on the day-to-day functioning of the Tertiary Education Commission.

Now, in this House, Mr Deputy Speaker, Sir, there has been proposal by hon. Members on the other side of the House for the creation of a Standing Committee. In my humble opinion, Mr Deputy Speaker, Sir, I believe that apart from the structure that we are creating, the creation of the board, instead of a Standing Committee, I believe that there is the need rather for the creation of an independent body that is going to take care and manage this whole quality system. This is in the checklist of the World Health Organisation, Mr Deputy Speaker, Sir.

We need to have an appropriate quality system that has to be put in place so that there is an independent body that is going to have an oversight on the procedures that are being followed, not only by the board, but by all those health institutions where tissue transplant is being effected. We need to have an independent body that is going to make an assessment and report on the performance. How are they going to report on the performance, Mr Deputy Speaker, Sir? There is a need to have well documented procedures as to how tissue transplant has to be done, and also there has to be documented procedures on follow-ups once the transplant has been effected. We can see that the Bill is a bit silent on this, but as I am saying,

while going forward, I am sure we will be coming with these important provisions that would ensure that we have a structure that is effective and efficient for tissue transplant.

Mr Deputy Speaker, Sir, I have been talking about quality system. The fifth important checklist talks about the issue of assessment. Everywhere, where there is a quality management system, you need to have auditing. This is where it is also important to have that independent institution that has to be set up which is going to have an oversight through assessment and conducting external audits. Even if we expect the board to conduct internal audits with people appointed inside, we need to have independent auditors to ensure that whatever system has been put in place in terms of quality, set procedures are complied with.

Finally, in terms of the checklist, Mr Deputy Speaker, Sir, we also have this issue of clinical use which talks about the need for traceability, the need for appropriate use and clinical follow-up of transplant recipients. Mr Deputy Speaker, Sir, these checklists come from the WHO. And at this stage, when we are discussing about the setting up of a structure for human tissue removal, preservation and transplant, it is important that we know what our priority should be. Priorities are defined by the WHO.

Now, apart from these five checklists which are, for me, extremely important to study and to ensure that we implement them as a priority, the other important issue also that I am going to raise before concluding, Mr deputy speaker, Sir, is the issue of organ trafficking, and as mentioned by the hon. leader of the Opposition, transplant tourism.

Mr Deputy Speaker, Sir, much have been said already on this issue. I won't come back to the same statement made by my hon. friends, but it is important, at this stage, for people to understand that the role of the civil society is extremely important; the NGOs, the health professionals and the religious bodies. We see lately, Mr Deputy Speaker, Sir, we have had the views of the church on that matter and also *le conseil des religions*. Mr Deputy Speaker, Sir, why I am saying that the role of the civil society is extremely important in the fight against transplant tourism? It is because only last year, Mr Deputy Speaker, Sir, representatives of churches around the world met in Vatican. They have, what they call, the Pontifical Academy of Sciences. They had a summit in Vatican on this important issue of organ trafficking and transplant tourism, and they came up with a series of recommendations, Mr Deputy Speaker, Sir. Of course, I am not going to list all these recommendations, but only a few. It is important that hon. Members in this House understand the importance of the role

that the civil society, going forward, is going to play in this fight against organ trafficking and also transplant tourism.

I agree, that *il faut avoir une période transitoire probablement*. Yes, we need to have some time, but it is important, Mr Deputy Speaker, Sir, that we understand that the civil society increasingly has an important role to play. It is not only the Government, the NGOs, as I said, the religious bodies, people outside, health professionals and all those stakeholders. I am not going to come to all these 11 recommendations, Mr Deputy Speaker, Sir, but there have been some recommendations which are extremely interesting in this. Talking of civil society, one of the recommendations was that religious leaders encourage ethical organ donation and condemn human trafficking for the purpose of organ removal and organ trafficking. This is one of the recommendations, Mr Deputy Speaker, Sir, which means that the civil society has an important role to play. This is one of the recommendations, Mr Deputy Speaker, Sir. This means that, Mr Deputy Speaker, Sir, the civil society has an important role to play. I am happy and we are all delighted in this House that the church has played the role it had to play. *Le Conseil des Religions* also joined into the debate and has supported this House in coming forward with proposals that would in the interest of this country. So, these 11 recommendations - I am not going to list here, Mr Deputy Speaker, Sir - but I would like to table it for the hon. Members, for this House to take note, because I think it is extremely important for the country.

So, Mr Deputy Speaker, Sir, that was all that I had in terms of contribution in this Bill. I am happy that the Government, the hon. Minister is coming forward with this Bill. As I said, I hope it is going forward, it is going to help our country to make of Mauritius a destination of repute for issue relating to human tissue, removal, preservation and transplant.

With these few words, I thank the hon. Members for their attention. Thank you very much.

The Deputy Speaker: Hon. Lepoigneur!

(7.57 p.m.)

Mr G. Lepoigneur (Fifth Member Beau Bassin & Petite Riviere): Thank you, Mr Deputy Speaker, Sir.

Mr Deputy Speaker, Sir, although this Bill makes provision for the removal, preservation and transplant of different organs, we must agree in most cases, it is kidney which mostly concerns our health service. Although, it is not a wish, but patients suffering

from chronic kidney disease, can nevertheless consider themselves as being lucky in a certain way.

In fact, all human beings are born with two kidneys, while they can normally survive with only one. Therefore, without any harm to the health, they can donate the other one to any patient suffering from kidney impairment and both individuals will continue to live normally.

Mr Deputy Speaker, Sir, as I said before, the importance of this Bill is more important for chronic kidney disease, which causes lots of inconvenience to our 1,327 patients, who cannot have a normal life due to their huge dialysis session. If this Bill can be realised in a proper and legal way, Government will be able to save lots of money and offer people suffering from CDK a better way of life.

Mr Deputy Speaker, Sir, I hope that this Bill will bring hope to all people of Mauritius suffering from function of their organs, not only people who can afford to pay. As far as I remember when dialysis was introduced in Mauritius in 1995, it was operated by a private organisation, who had imported second-hand dialysis machines which were put into operation and at that time, it was payable service. About 50 patients were attending treatment and it was payable service. So, people who could not afford to pay, have to stay with their sickness and die with. I remember, Mr Deputy Speaker, Sir, in 1996, the whole nation was shocked by the death of a very young girl named Poupiah whose state of health required dialysis, her parent was so poor that he could not afford to pay and the young girl tragically passed away. It was then, Mr Deputy Speaker, Sir, that the then Government took the decision to offer dialysis in our hospital.

In Mauritius, more than 10,000 people are actually suffering from renal disease. The main causes of kidney disease are diabetes and hypertension. Out of the 10,000 impairment patients, 15% are suffering from chronic kidney disease. As at March 2018, 1,327 were under dialysis in public hospital or private clinic at the cost of Government. Each dialysis patient should undergo three dialysis sessions four hours weekly, which cost a lot of inconvenience to the kind of living and also for those, who still young, which disturb the professional life as well. Each dialysis session costs about Rs1,200 to Government, whereas in private it costs about Rs3,800.

The average cost of dialysis to Government is above Rs20 m. monthly. Additionally, Government spent more than Rs3 m. monthly in EPO administrated to dialysis patient. There

is only two ways which can allow patients suffering CDK to survive, Mr Deputy Speaker, Sir. It is dialysis and renal transplant. Dialysis, Mr Deputy Speaker, Sir, is very important to patients suffering chronic kidney disease, while they are on the waiting list for a compatible donor. It is sad to note that dialysis patients in Mauritius are on the increasing trend, while the death rate is quite high compared to UK and USA, for example. About 10 new dialysis patients are recorded each month in Mauritius. There are 13 dialysis centres operating in Mauritius, six public dialysis centres and seven private dialysis centres.

Regret to observe that Government has not done necessary effort to improve the dialysis services in Mauritius. In 2012, for 900 patients, there were approximately 141 machines and now in 2018, for 1,327 patients, we still have 144 machines in our dialysis centre. With the increased number of patients and the limited number of dialysis machines in service, it has a negative impact on the nursing staff as well as dialysis patients as to satisfy a fourth dialysis session, has to be run in certain public centre, mainly at Riche Mare and Sir Seewoosagur Ramgoolam Hospital.

I would like to add that dialysis is possible on a patient either by a fistula or a catheter. However, dialysis is done with fistula which is implanted in the arm or other part of the body to connect an artery with a vein. This is done by minor operation, but which requires, at least, two months. Unfortunately, until now there are lots of patients who have been placed on the waiting list since months, Mr Deputy Speaker, Sir.

What will happen for transplant of organs concerning waiting list? However, how will the Minister and his Board target the priority? Because, to my information, the waiting list for fistula is not always expected and some people use connection to bypass the ranking of the waiting list. I hope this would not be the same for the waiting list of organs. To enable dialysis on patient, with no implants of fistula, is a catheter, it is inserted in the patient, either in the neck, chin or chest. But during dialysis through catheter it is very risky as patients are exposed to infection, which may finally end with a Septicemia, and has been fatal in various cases. I appeal to the hon. Minister of Health to eliminate the waiting list for implant of fistula, as we know that dialysis is a temporary treatment, in the meantime that the patient finds a donor for a transplant.

Renal transplant, Mr Deputy Speaker, Sir, will enable the Government to avoid huge expenses on dialysis and will allow patient to live a normal live, to enjoy more leisure time with family, to increase life expectancy, to improve his quality of life. Today, about 45% of

dialysis patients between the age of 15 and 60 years old or approximately 600 patients are dreaming of a kidney transplant, but, unfortunately, it is not easy to find a compatible donor. Experience has proved that finding a potential living donor among close relative as per the existing law has brought us to nowhere, because most dialysis patients suffer from diabetes and hypertension. Considering that these two diseases are hereditary, finding living donors among the close relatives was very difficult and rare, as they are themselves potential candidate to prone to renal disease.

Renal transplant was first made in Mauritius in years 1990s and it has continued for a certain period by surgeons coming from South Africa and India. Afterwards, since years 1993, till his retirement in 2015, Dr. Rajiv Upadhyaya has carried out the renal transplant on some 125 patients. Although there have been some cases of reject, but none of them died. Dr. Jiga-Boy who is fully qualified to carry renal transplant has systematically refused to perform transplant in public hospital for personal reason. Nowadays, patients having financial means, who have succeeded to find a compatible donor, with an HLL exceeding 35%, are sent abroad.

M. le président, le docteur Rajiv Upadhyaya a été critique à l'encontre de ce projet de loi dans un de nos quotidiens, au début de ce mois. Je pense qu'une personne de son expérience, qui est l'auteur de transplants à l'île Maurice, sans aucun décès, aurait pu être consulté avec les ONG, tels que Lions Club, qui dans le passé, ont beaucoup fait pour les greffes de cornées. Le Docteur Upadhyaya a été critique à l'encontre de l'ancien ministre, l'honorable Anil Gayan, qui lui avait adressé une lettre pour faire des suggestions concernant les transplants d'organes. Il n'a jamais reçu la moindre réponse même si celle-ci était négative.

Mr Deputy Speaker, Sir, since Dr. Upadhyaya has retired, transplant of organ is being done abroad. Each patient is eligible for a medical aid of Rs500,000 granted by the Ministry of Health and Quality of Life. Very often, the aid is far from being sufficient, as the patient, apart from his own medical and other expenses, has to provide for air tickets, board and lodging to the donor and the person accompanying him. Furthermore, the post-operational follow-up is quite long, nearly three months, people cannot afford to top up the sum and find great difficulties to raise additional funds, sometimes impossible. This is why this project of transplant should not be politically motivated or political nominees for the control of the Board, as explained by the Leader of the Opposition, hon. Xavier-Luc Duval, when the lives of our fellow countrymen are at stake.

Nowadays, the only hope to prolong the life of chronic kidney disease patient and improve his quality of life is transplant, and it is our duty to give our blessing and offer the chance to each patient who is dreaming of a renal transplant. I am of the opinion that the Ministry of Health and Quality of Life should in priority set up a modern and sophisticated Nephrology Unit at Jawaharlal Nehru Hospital where transplant used to be made in the past.

Besides, the hospital should be the only one where renal transplant should be authorised to avoid any illicit transaction. Set up a competent Board as proposed by the hon. Leader of the Opposition with dedicated members for -

- optimum monitoring of every situation in full transparency;
- create high standard infrastructure for the removal, preservation and transplant of organs;
- initiate immediate action for the formation of our doctors to have the best transplant unit in the African region;
- to sensitise public opinion for awareness through talks, radio, TV, seminar, etc.;
- initiate aggressive campaign to attract as many donors for registration;
- to take appropriate measures to eliminate financial transaction with organ transplant;
- identification mark to be worn by potential donor. Would it be a medical card or our NIC? I suggest it be a type of bracelet incorporated with a chip containing all relevant data. Mauritius being a multi-religion society, I make an appeal to all religious bodies to consider the reality of the Mauritian society and support the Bill as a lifesaving instrument.

As for organs from a living or cadaveric will require the prior consent of the donor and will be strictly in compliance with law. Much time has been wasted since many years. It is high time to catch up in as much as the Human Tissue (Removal, Preservation and Transplant) Act was voted in Parliament in 2006 and approved by the State Law Office. Yet, it was never implemented although a few sections were promulgated after consultation with the civil society and religious bodies.

M. le président, le développement de la science et de la technologie ont fait en sorte que la médecine des greffes est passée du statut de traitement expérimental à celui de traitement de routine pour certains patients. Plusieurs d'entre eux se voient maintenant offrir

une chance de survie grâce à la médecine de greffe. Toutefois, le nombre d'organes disponibles pour les greffes est insuffisant. Cette pénurie a d'ailleurs incité plusieurs acteurs de par le monde à envisager des stratégies afin de combler le manque d'organes à des fins de transplantation.

Que doit-on penser de la commercialisation des organes ? Dans les pays sous-développés, il y a un très grand nombre de trafics d'organes, M. le président, et c'est pour cela qu'il faut prendre des mesures appropriées pour parer à cela. Au Caire, le ministère égyptien de l'Intérieur annonçait en 2017 l'arrestation de 12 personnes, dont des médecins, faisant partie d'un grand réseau spécialisé dans le trafic d'organes. Selon les Nations unies, des centaines d'Égyptiens pauvres vendent leurs organes chaque année pour acheter de quoi vivre et rembourser leurs dettes. Le réseau avait conclu un accord avec des Égyptiens pour le transfert de leurs organes à des patients étrangers en échange d'importantes sommes d'argent, a affirmé le ministère. Parmi les personnes arrêtées figurent trois médecins, quatre infirmières, trois employés de l'hôpital et deux intermédiaires, a indiqué le ministère. Certains ont été arrêtés alors qu'ils étaient en train d'opérer un homme pour lui prélever un rein et une partie du foie dans l'hôpital privé en échange de 10,000 dollars, a précisé le ministère.

Je pense qu'il nous faudra être vigilant à l'île Maurice car depuis des années il y a eu beaucoup de disparus qui n'ont jamais été retrouvés. À une certaine époque il y a eu même le doute de trafic d'organes. Les personnes vulnérables risquent de se faire tenter et accepter des sommes d'argent en échange de leurs organes. M. le président, que va-t-il se passer en cas de meurtre de quelqu'un qui avait donné son accord de son vivant pour offrir ces organes lors de son décès ? Il y a la pratique d'autopsie qui rentre en jeu. Qui du médecin légiste ou du spécialiste de prélèvement d'organes aura priorité ? La question reste posée, M. le président.

Before I end, Mr Deputy Speaker, Sir, while I was framing my speech, I paid a visit to Nehru Hospital to understand the reality of the dialysis centre and to talk to patients to have their feelings. I would like to acknowledge the excellent job which is being done by the nursing staff of the dialysis centre. At their arrival at the dialysis centre, after a warm welcome, patients are subject to have their weight and blood pressure checked and recorded before they go on the dialysis bed. But it would be good also if some more comfortable dialysis chairs could be supplied while in the meantime the machines are being cleaned and disinfected as per protocol.

Another important factor in the process of dialysis is the use of water. Water is very important for the cleaning of dialysis machine each time after its use by a patient. Usually, tap water is used after filtration and purification by the water treatment plant at the centre itself to eliminate the following minerals: chlorine, bacteria, chemicals, nitrate, and potassium, etc. For this purpose, each dialysis centre needs to have a functional and reliable water treatment plant. I remember, during the electoral campaign in 2014, the actual Prime Minister declared at Camp Thorel that the quality of water used in dialysis was of bad quality. He mentioned the presence of lime in the water which, according to him, is harmful to dialysis machines. I have furthermore been informed that talking about lime in dialysis is very erroneous. Being totally absent in the process of dialysis, I wonder if this issue still exists in as much as to the best of my knowledge no water treatment plant has been renewed in any of our existing dialysis centres.

I am also aware that dialysis machines have been placed in certain Intensive Care of our main hospitals. Being given that the hospitals are not equipped with any treatment plant, galloons of filtered water from the nearest dialysis centre are sent daily to the ICU. Being given that these dialysis machines are rarely used, the filtered water is thrown away, thus a wastage of money. I recommend that other alternatives be found.

Surely, in the dialysis section itself, the blood pressure of the patient is regularly checked and monitored by the nurse. After the dialysis session, the weight of the patient is taken again to determine the volume of fluid which has been removed from the body. But another thing which needs to change is while the patients are on dialysis sessions, they are very often disturbed with the taking of the blood pressure and now that there are new dialysis machines with automatic checking of blood pressure, I recommend the replacement of these machines by the modern ones.

I would like to mention, like hon. Dr. Boolell just said in his speech, the great and voluntary contribution of Dr. Purgass from France in the field of nephrology for the Government of Mauritius. I am of the opinion that he fully deserves gratitude and would recommend the possibility of a State decoration to Dr. Purgass for his voluntary services.

This Bill, Mr Deputy Speaker, Sir, will bring hope to sick people for a new life as far as priority is given to merits, good faith, equal opportunity and people of all class of our society. Let us give them a chance.

Thank you, Mr Deputy Speaker, Sir.

The Deputy Speaker: Hon. Boissézon!

The Minister of Civil Service and Administrative Reforms (Mr E. Boissézon): M. le président, je vous remercie de me permettre de participer aux débats relatifs au projet de loi The Human Tissue (Removal, Preservation and Transplant) Bill et remercie le ministre de la Santé pour la présentation d'un projet de loi aussi sensible. Je constate qu'il y a un consensus des deux côtés de la Chambre quant à l'idée maîtresse du projet de loi, l'essence même du besoin d'un cadre légal pour faciliter la transplantation des organes. Aussi, je ne m'arrêterai pas sur des petites flèches lancées par le précédent orateur concernant une lettre qui n'a pas été répondue. D'autre part, je note que de l'autre côté de la Chambre, il y a un débat concernant la composition du *Board*.

En regardant les précédents projets de loi, passés depuis 2014 et avant, pendant les 10 années d'avant 2014, je constate que dans la plupart des projets de loi, presque dans tous les projets de loi, le choix des membres est bien souvent guidé par le ministre. Et je pense qu'aujourd'hui nous devons faire confiance. C'est un projet de loi qui demande beaucoup de confiance envers la population, confiance envers le gouvernement, confiance envers les membres qui seront appelés à travailler pour l'avancement de la transplantation à Maurice.

La transplantation représente une avancée importante de la science dans le domaine de la médecine. Ce procédé de haute dextérité et technologie permet à la médecine de sauver des vies et redonner espoir à des êtres humains souffrant d'une insuffisance. Je m'avancerai plus loin en disant que la transplantation est synonyme de don de vie. Au départ, je parlais de sujet sensible. Le don d'organes touche de très près les grands domaines sacrés : vie, mort, générosité, altruisme, croyance et solidarité. Pour pouvoir continuer, j'emprunterai les sentiers de l'histoire. Dans les années 30 eurent lieu les premières transfusions sanguines. Les problèmes de collecte, la distribution, la proximité des donneurs et receveurs, le refus de ce procédé par certaines personnes furent les premiers problèmes liés à l'allogreffe. Dix ans après la découverte de la possibilité de la conversion du sang, il était possible d'avoir des transplantations tout autour du pays. L'Etat a dû intervenir pour en assurer le stockage, la préservation, la distribution et prendre des mesures nécessaires pour proscrire tout trafic et mettre l'emphase sur la gratuité.

Dans les années 50, les premières greffes de reins furent expérimentées en France à partir de reins qui avaient été prélevés sur des condamnés à mort. La mort étant programmée, les prélèvements furent faits dans de bonnes conditions, mais des problèmes de compatibilité

obligèrent les praticiens à choisir des donneurs et receveurs apparentés. Heureusement que les avancées scientifiques furent faites pour développer les greffes. Premièrement, la découverte de médicaments et d'agents immunosuppresseurs capables de surmonter des barrières immunitaires et l'hémodialyse qui permettaient aux patients d'insuffisance rénale d'attendre un greffon compatible. Le 27 avril 1968, le Professeur Christian Barnard réalisait la première greffe cardiaque.

M. le président, chaque progrès, chaque avancée scientifique vers la médecine, en dépit du fait qu'elle améliore les conditions de vie et durée de vie, amène son lot de questions qui doivent être répondues après une prise de conscience et de consultation poussée. Il y a des questions fondamentales. Le Pape Jean-Paul II, en l'an 2000, disait ceci, je cite –

« Dans ce domaine de la science médicale également, le critère fondamental doit être la défense et la promotion du bien intégral de la personne humaine, en harmonie avec la dignité unique qui est la nôtre en vertu de notre humanité. Par conséquent, il est évident que chaque intervention médicale accomplie sur la personne humaine fait l'objet de limites: non seulement les limites de ce qui est techniquement possible, mais également les limites déterminées par le respect pour la nature elle-même, entendue dans son intégralité: "Ce qui est techniquement possible n'est pas pour autant moralement acceptable. »

Oui, M. le président, ce qui est techniquement possible n'est pas pour autant moralement acceptable et c'est là où intervient le législateur. Le projet de loi traduit la volonté du gouvernement d'atténuer la peine de ces patients souffrant d'insuffisance, qui savent que des moyens pour les sauver existent, mais cela ne sera pas le cas pour cause de manque de cadre légal. Combien de fois n'avons-nous pas entendu des personnes charitables qui sont prêts à offrir un rein à un malade, mais qui ne peuvent le faire car n'étant pas apparentées, comme c'est le cas présentement.

Le gouvernement, garant de la bonne santé de la population, se doit d'offrir toutes les possibilités de survie à la population. Dans le passé, des lois furent introduites pour légiférer la transplantation d'organes entre proches. Même si elles n'eurent pas le succès escompté, le gouvernement vient proposer une étape cruciale dans le développement des transplantations d'organes à Maurice. Au fait, le but de ce projet de loi est de lever l'interdiction d'un donneur vivant ou mort, d'offrir un organe à une personne sans lien de parenté. Oui, le gouvernement doit s'assurer de mettre les avancées scientifiques à la portée de la population,

et dans le cas des transplantations, il doit s'assurer que certaines conditions soient respectées, tels que le consentement du donneur, un *Board* intègre, la gratuité, l'anonymat, la capacité et la capabilité, l'allocation des organes, la définition de la mort. Ce présent projet de loi couvre ces conditions.

La section 11 concerne le consentement. C'est un sujet où les opinions divergent d'Etat en Etat. Certains Etats comme l'Angleterre et les Etats-Unis ont opté pour le système *opt-in*, c'est-à-dire, que le donneur informe l'autorité responsable. Dans notre cas, le *Tissue Donation Removal and Transplant Board*, de son intention de faire don d'un organe, ou qu'un parent très proche fasse la demande à la mort d'un proche. Certains Etats, comme la France avec la loi Caillavet de 1976, l'Italie, l'Autriche etc., ont fait le choix de l'*opt-out*, ou qui ne dit mot consent.

Cette deuxième option fut adoptée dans ces Etats pour suppléer au manque de donneurs, qui, dans bien des cas, n'ont pas pris le temps de s'engager comme donneurs. Cette déficience de donneurs est un sujet de préoccupation dans ces Etats. A titre comparatif, je citerai certains chiffres ; les chiffres clefs de l'enquête européenne annuelle sur la transplantation mettent en évidence la terrible situation des milliers de citoyens européens qui souffrent en silence. 143,000 patients répertoriés sur la liste d'attente, soit une augmentation de 5% sur l'année précédente. Tandis que 39,343 personnes ont été transplantées, 47,613 personnes ont été ajoutées aux listes d'attente. Autrement dit, il y a un nouvel inscrit sur la liste d'attente par heure. Le nombre de personnes décédées en attente d'une transplantation a augmenté de 7%, soit 6,702 personnes en un an. En moyenne, 18 personnes meurent chaque jour, faute d'organes disponibles. A Maurice, nous optons pour le *opt-out*, comme l'a dit l'honorable Paul Bérenger. Le gouvernement sensibilisera la population au don d'organes.

Je vous donne un aperçu du besoin d'organes, de rein à Maurice. En 2014, il y a eu 165,649 dialyses qui ont été faites pendant l'année ; en 2015 : 180,276 ; en 2016 : 190,964 ; en 2017 : 198,180 et pour les trois mois jusqu'au 31 mars : 49,000. Nous avons présentement 1,327 patients qui suivent les traitements et nous notons que nous avons 13 centres de dialyse. L'orateur précédent avait fait mention de 144 machines à Maurice. Il s'est trompé parce qu'il n'a pas pris en considération les machines dans le privé. Nous avons 75 machines encore dans le privé. En prenant tout cela en ligne de compte, nous avons besoin d'étudier ce problème de transplantation de rein.

En encourageant le débat sur le sujet, ce gouvernement veut conscientiser les personnes à la transplantation. Nous savons que c'est un sujet qui est difficile à accepter et difficile à admettre dans le monde. Nous savons que nous avons certaines convictions, certaines personnes qui de par leur culture religieuse, leur culture même, voudraient qu'elles soient enterrées intactes. Dès que quelqu'un meurt, nous voyons qu'ils sont très pressés à avoir le corps. Ils viennent nous voir en tant que politiciens pour nous dire de faire le nécessaire et ils refusent l'autopsie et tout un chacun vient nous voir pour nous dire: 'Non, je ne veux pas d'autopsie.' C'est dans notre culture. Il y a certaines cultures religieuses qui demandent que l'enterrement soit fait le plus vite possible.

Nous avons aussi une phase de révolte devant la mort. Bien souvent, au moment où quelqu'un meurt, les proches n'acceptent pas cette mort et ils culpabilisent le médecin traitant. Et comment venir dire à ces personnes qu'on a besoin de certains organes de cette personne qui a disparu pour eux ! Il y a aussi cette idée de profanation. Nous avons entendu de combien de cas dans les cimetières. Il y a eu des profanations où les sorciers prennent des organes. Demain, vous essayez de dire à quelqu'un vous allez prendre un organe pour une transplantation, on croirait, comme on dit dans notre jargon à 'un docteur sans soulier.' Nous parlons de docteur sans souci et là il est très difficile, mais le gouvernement, l'Opposition, tout un chacun à l'île Maurice, nous devons éduquer nos concitoyens sur les bienfaits de la transplantation.

Nous devons rendre hommage aux donneurs d'organes et nous devons aussi rendre hommage aux personnes qui ont reçu des organes. Pas plus tard qu'hier, j'ai rencontré quelqu'un que je ne citerai pas le nom, mais qui avait subi une transplantation fait par le Docteur Modun. Il travaille dans mon ministère et cela fait 20 ans qu'il a un rein transplanté par le Docteur Modun et je peux vous dire qu'il est encore très fort.

Souvent, nous avons un gros problème de procrastination. Nous devons faire attention parce qu'il y a des personnes qui sont sensibles aux besoins de la transplantation, mais qui procrastinent. On remet à demain et nous ne faisons pas notre enregistrement comme donneur volontaire et voilà quand la mort survient, les problèmes se soulèvent. Nous pourrions suggérer que dorénavant sur les licences - je crois que l'honorable Docteur Arvin Boolell en a parlé - les donneurs éventuels s'inscrivent leur volonté de donner leurs organes.

M. le président, des réserves ont été émises concernant la liste d'attente. Des réserves concernant l'assignation des organes prélevés ou préservés dans des éventuelles banques

d'organes soient soumises à des règles d'éthique. Moi, je pense qu'en tant que patriote, nous devons faire confiance à nos concitoyens. Je sais que les greffons sont rares. Pour ces raisons, lorsqu'un organe est prélevé, il doit être attribué selon les règles d'éthique homologuées par le *Board*.

M. le président, il n'est pas facile de faire un choix. Pourquoi adopter ce critère plutôt qu'un autre ? Pourquoi donner un organe à X au lieu de Y ? Quelle est l'urgence d'une intervention sur un patient plutôt qu'un autre ? Pourquoi effectuer des changements de priorité car cette liste, elle est vivante ? Nous devons faire très attention. C'est pourquoi quelqu'un a parlé d'un programme informatique, mais nous devons faire très attention parce que cette liste ne sera pas statique. Cette personne qui aujourd'hui se trouve au bas de la liste d'attente, peut se voir prioritaire après un arrêt, une maladie qu'on n'avait pas prévue et je crois que c'est là toute la responsabilité de ce *Board* de s'assurer que cette liste ne puisse pas être altérée facilement et qu'elle soit imperméable à toute manipulation et le choix à qui donner cette liste.

Nous avons parlé auparavant de l'anonymat des donneurs et des receveurs. Aussi, il sera difficile, voire impossible même, de poser des questions. Je vois mal un membre de cette auguste Assemblée poser une question demandant de soumettre une liste au Parlement de tous les donneurs et de tous les receveurs d'organes. Il faudra aussi faire très, très attention avec cette liste d'attente.

Aujourd'hui, nous savons que les donneurs d'organes sont limités. Il ne faudrait pas avoir des doutes quant à l'intégrité des responsables de la liste d'attente. Cela démotive les donneurs éventuels. Beaucoup de personnes ont parlé des recommandations de l'organisation mondiale de la santé. Il faut que ces recommandations soient respectées c'est-à-dire l'accès à la greffe soit équitable à l'échelon de chaque mention quel que soit la race, les opinions, la religion et les ressources financières des malades.

M. le président, je ne pourrais pas conclure mon discours en laissant sous silence la Section 15(2) sur les procédures pour la certification de la mort du donneur. On entend souvent parler de *dead donor's rule*. C'est un sujet qui divise les Etats. Il y a d'importantes disparités existantes entre les tests cliniques en vue de diagnostiquer la mort encéphalique ou cérébrale sur un patient. Comment l'usager de la santé peut-il concevoir qu'un patient soit déclaré mort dans un pays et non mort dans un autre. Il convient d'informer le public de la signification du *brain death*. Une question est souvent posée ; à quel mort est-ce que je

crois ? Serai-je déclaré mort quand mon cœur cessera de battre et que mes poumons auront cessé de fonctionner ? Il y a toute une polémique relative à la première transplantation cardiaque de France. Serai-je déclaré mort quand mon cerveau sera détruit alors que mes fonctions cardio-vasculaires et pulmonaires sont encore intactes ? Pourrais-je faire mon deuil pendant ce moment si important du passage de la vie active au repos éternel ? Ce sont des questions qui rebutent bien souvent des personnes à offrir des organes de leur corps.

L'honorable ministre qui est un médecin devrait éclairer la population quant aux divers termes utilisés pour déclarer la mort de quelqu'un : mort cadavérique ; mort encéphalique ; mort cérébrale. Malheureusement, des professionnels de la médecine sont très évasifs à ce sujet. Cette politique de *close door medicine* est l'une des causes du refus de certains de faire don de leurs organes.

M. le président, je conclurai en espérant qu'il y ait beaucoup de générosités de la part de la population. Quel acte de foi suprême que de donner la vie à une personne qui avait perdu tout espoir de vie. Je terminerai en citant encore une fois le Pape Jean-Paul II.

« Je suis certain que les responsables sociaux, politiques et éducatifs renouvelleront leur engagement à promouvoir une véritable culture du don et de la solidarité. Il faut insuffler dans le cœur des personnes, et en particulier dans le cœur des jeunes, une reconnaissance authentique et profonde du besoin d'amour fraternel, un amour qui puisse trouver une expression dans la décision de devenir un donneur d'organes. »

Merci, M. le président.

The Deputy Speaker: Hon. Dayal !

(8.39 p.m.)

Mr R. Dayal (First Member for Flacq & Bon Accueil): The Human Tissue (Removal, Preservation and Transplant) Bill (No. V of 2018), Mr Deputy Speaker, Sir, my intervention will be in favour of a legal framework to supplement the Bill triggering within appropriate safeguards and pragmatic consent to muster enough organ donations in the relevant bank to response to emergencies.

Life is a divine boon to mankind, and it is heroic and patriotic to save the lives of our compatriots when it is a question of life and death. Nevertheless, it has to be done expediently under certain safeguards prescribed by the United Nations as befits a democratic Republic, un *Etat de droit* where the fundamental rights and liberties of the average citizen of our nation

are protected. Saving lives through the Human Tissue (Removal, Preservation and Transplant) Bill is commendable and timely indeed and the hon. Minister, Dr. Anwar Husnoo, has to be congratulated.

More so as there is always an urgency for a responsive Government that means business to save human lives by making judicious use of the state-of-the-art technology with available scientific research and development in the medical field, notwithstanding the fact that we are making special efforts to become a medical hub in the region. It is also of vital importance in a Republic where there is the rule of law that the right legal framework is set to ensure that potential donors are given the opportunity to make informed decisions in consultation with the love ones and to prevent that the illegal removal of body organ to negate to the human trafficking which is a crime. And I will be tabling a copy of poster which is already out by our Mauritius Police Force concerning human trafficking where illegal removal of body organ is mentioned clearly. So, sensitisation is on.

I must say, in presence of such a situation, the United Kingdom, more precisely the Home Office, did go for innovative schemes enlisting the consent of all vehicle drivers. In Mauritius, we have about 17,000 applicants who pass the vehicle driving licence every year, and we have some 814,000 licence holders of which 600,000 are active, hence potential donors. In the UK, about 90% of people have expressed their support to organ donation, but only 29% have registered to donate their organs. The Driver and Vehicle Licensing Agency (DVLA) scheme where applicants for a driver vehicle licence are encouraged to sign up to the Organ Donation Scheme. I am tabling a copy of the British application form for a driving licence where specifically the organ donation is spelt out which can be summed up into the opt-in formula. Some 8.5 million signups have been recorded since 1994.

In the US more precisely in Illinois, the percentage of donors who have registered has increased from 38% to 60% since 2008. In view of the success of the DVLA scheme for organ donation overseas and make available a sizeable amount in the relevant bank, also to proactively deter organ trafficking, I suggest that, as a caring Government, we should adopt, in the Mauritian context, the provision of the Organ Donation (Deemed Consent) Act 2018 of the UK. This will no doubt alleviate tremendously the suffering of those in dire need of organ donations, Mr Deputy Speaker, Sir.

We have more than 100 applicants daily. This initiative assumes its validity at the time when we are celebrating the 50th Anniversary of our Independence and the 26th Anniversary of our Republic where national solidarity assumes its importance.

It is also of vital importance specifically in the prevailing worldwide security of environment where terrorist groups are involved together with crime syndicate in human tissue and organ removal from vulnerable communities to foster their heinous agenda. Notwithstanding, it is highly meaningful that the United Nations Convention against Transnational Organised Crime in Palermo, Italy was signed in 2000. The Republic of Mauritius ratified the treaty and legislation. I quote the Combating of Trafficking in Persons Act, July 2009, at paragraph 2, under the heading -

“2. Interpretation

In this Act -

“exploitation” includes -

(d) the illegal removal of body organs;”

So far, a series of cases have been reported, but there has been only one conviction and the accused has been sentenced for three years imprisonment although the law provides for 15 years imprisonment. Here, I must commend the officer at the Central CID who is responsible for that desk. This offence dictates strong penal servitude to detect potential perpetrators as a sentencing policy. Here, I endorse the point of view expressed by hon. Rutnah.

Mauritius is not immune to such threats. We are already recording cases of human trafficking, through migrant workers, and we have to see to it that the three elements of trafficking, namely the act, the means, and the purpose are handled in terms of hardening targets and human factors engineering at the level of law enforcement and the whole process of human tissue removal, preservation and transplant. Hence, at Part II –

“Tissue Donation, Removal and Transplant Board”

I strongly feel that the Board should include a law enforcement Police officer, preferably from the gazetted rank, from the Criminal Investigation Department, conversant with cross-border crimes for all intents and purposes.

Part III – Donation. All applications for donation of tissue and organ within the principle of accountability and trust should be done by way of an affidavit.

Part VI – Offences and Jurisdiction. It should be penal servitude as a strong signal for a shift in sentencing policy in view of tougher penalty. This suggestion should be viewed with the only case of conviction. Combating of Trafficking in Persons Act of 2009 where conviction was secured against accused number two as per Cause No. 674/2017, dated 01 March 2018. It was three years penal servitude, it should have been on the higher side. I am tabling a copy of the judgment.

As far as missing persons are concerned, the trend in the reporting of missing persons is increasing, whether we are dealing with foreign workers or Mauritian nationals. It is taking more time in tracing the missing persons with the inherent risk of personation and organ trafficking. The safeguard provided for at Part I, I quote -

“2. Interpretation

In this Act -

“approved health institution” means such health institutions as may be prescribed to carry out the removal, preservation and transplant of tissue;”

Part IV – Removal, Preservation and Transplant. At section 15 (b) Removal of tissue - care must be taken to establish appropriate standards in terms of infrastructure, equipment and ancillaries together with logistics and supervisory control.

Section 27 - Protection from liability and principle. No one should be above the law. It has to be applied in terms of accountability and transparency for all those involved in the implementation and administration of this Bill. I was never exempted from that and no one should be exempted.

I have all reasons to ask all Members of this Assembly to vote for the Bill and become donors.

Thank you.

The Deputy Speaker: I suspend the sitting for one hour.

At 8.50 p.m., the sitting was suspended.

On resuming at 10.11 p.m. with the Deputy Speaker in the Chair.

The Deputy Speaker: Hon. Uteem!

Mr R. Uteem (First Member for Port Louis South & Port Louis Central): Mr Deputy Speaker, Sir, the Bill before this House deals with one of those topics where emotions

run high. Many of us have a relative, a dear one or even an acquaintance, who is in need of an organ transplant, a transplant that can save his or her life, a transplant that can extend his or her life.

Who can be against a Bill which will enable us to take full advantage of the tremendous breakthrough made in the field of medical science? Who can be against a Bill which will save lives? Who can be against a Bill which maybe will save our own life? For each one of us, Mr Deputy Speaker, Sir, may one day become a recipient and one day become a donor.

But, there is no point having the best of legislation if the legislation is not implemented. We have had the Human Tissue (Removal, Preservation and Transplant) Act since 2006. It was a good piece of legislation, but it was never promulgated save for Section 16 dealing with the constitution of the Board. The law was amended in 2013 but, again, the Act was never promulgated. Why, Mr Deputy Speaker, Sir? And, last week not a single word from the hon. Minister of Health and Quality of Life as to why the Act was never implemented, the Act never came into force.

When he presented the Amendment Bill in 2013, the then Minister of Health stated that the Board made little progress for the following technical reasons, and I quote –

- “(1) difficulties to tap and materialise foreign expertise in this highly specialised field to prepare regulations, and
- (2) lack of capacity in the medical sector in terms of infrastructure and specialised human resources which were not available until recently.”

So, the questions we have to ask ourselves, Mr Deputy Speaker, Sir, are: five years down the road where are we in terms of expertise? Where are we in terms of specialised human resources? Where are we in terms of infrastructure?

In 2013, the then Minister of Health stated that over the period 2008 to 2012, over the four-year period, 144 corneal transplants and 66 renal transplants had been carried out in public hospitals. 144 corneal transplants! I pose here, Mr Deputy Speaker, Sir, to commend the Lions Club for their efforts in facilitating corneal transplants. Through them, we received donations from Sri Lanka and more recently from the United States. Our specialists have been trained and today can perform corneal transplant.

But what about the other organ transplants? What about liver transplant? Do we have the capacity today in Mauritius to remove, preserve and transplant liver? Forget about liver, do we have capacity today to remove, preserve and make renal transplant? Last week, the hon. Minister of Health and Quality of Life informed the House that there were at present around 1,330 patients undergoing dialysis treatment in this country and he stated that statistically 50% of these people were potential candidates for renal transplant. So, 50% gives you roughly around 700 patients who potentially are on the waiting list waiting for renal transplant.

But again, Mr Deputy Speaker, Sir, as at today, do we have the capacity to carry out renal transplant in Government hospitals? Do we have the necessary infrastructure to carry out renal transplant in Government hospitals? We were told in 2013 that over the period of 2008-2012, there had been 66 renal transplants. I would like to know from the hon. Minister of Health and Quality of Life, since 2012 till to date, how many renal transplants have been made in public hospitals. The population has the right to know, since this Government assumed office in 2014 till date, how many renal transplants have been carried out in public hospitals. The population has the right to know, since this Government assumed office in December 2014 till date, how many surgeons who can carry out renal transplants are currently employed in our hospitals. There is an existing protocol; there are existing guidelines. So, please tell us how many renal transplants have been carried out in Mauritius, in public hospitals, since December 2014.

I may be wrong, but according to information that I have gathered, there were two qualified surgeons who used to perform renal transplant in public hospitals. According to my information, both have retired. And according to my information - and I hope I am wrong -, the Ministry has not yet deem it fit to replace either of them. One of those doctors, Dr. Upadhyaya, gave an interview on 05 May. The interview was quoted by hon. Paul Bérenger earlier today. It was a real *cri du coeur*. He stated that the situation is, and I quote, "*honteux*". And he reminded us that there were plans to have a dedicated specialised unit to do the transplant. He reminded us that even the services of an architect were retained to do this special unit, but nothing had been done.

This is why, Mr Deputy Speaker, Sir, the hon. Paul Bérenger is right when he says that by bringing this Bill today in Parliament, we are raising expectations. We are making as if once this Bill is passed through this Assembly, the next day people would be able to give and donate their human tissue. We are making as if once this Bill is voted and passed,

immediately, the next day, we will be able to remove, preserve and transplant human tissue. But this is not the case. This is not the case because as at today, we do not have the capacity to do that. As at today, we do not have specialist surgeons employed in our public hospitals who can do these tissue removal, preservation and transplant. And as at today, we do not have a dedicated hospital to do these operations.

Mr Deputy Speaker, Sir, the Bill is providing for cadaveric donation. We know that human tissue needs to be removed within minutes of death. But, today, do we have capacity and knowhow to preserve human tissue once they are removed? Section 18 of the Bill provides that 'the person who has removed the tissue shall forthwith ensure that it is taken to, and preserved in, such place and under such conditions as maybe prescribed.' So, have we prescribed those regulations? Do we have regulations ready to be approved by the hon. Minister which, as soon as we vote this Bill, can be implemented? Are we ready with regulations? This is what I would like to hear from the hon. Minister because it has been 12 years since the Act was passed in 2006.

Mr Deputy Speaker, Sir, patients in Mauritius have been waiting long enough for renal transplant. So, I would really hope that the hon. Minister, when he sums up the debate, will give us clear indication, clear time frame within which regulations will be passed, within which we will be having fully operational dedicated unit to carry out renal transplant.

Mr Deputy Speaker, Sir, we welcome the removal of the restriction in the 2006 Act which limited donation of human tissues only to relatives. We only have a limited number of donors. And if we can only donate or receive donation from relatives, again, there is a problem of compatibility, there is a problem of a very short pool. So, we welcome the decision to open the gate for donation to non-relatives because we think that this will increase the number of donations and will increase the number of renal transplants and increase lifesaving.

But once we take the decision to extend donation to non-relatives, the issue becomes how do we select the recipient. If we are donating to our relatives, it is very easy; we identify and we know we are giving to him. But if we are giving to non-relatives, how do we select the recipient? Can the donor choose the recipient? Can I, as a father, say 'OK, my child needs renal transplant; I am going to give one of my kidneys to my child'? Will the donor be able to dictate who can receive his organ? And that person may be his relative or may be a third

party designated by him. Unfortunately, the law is not clear. Section 19(5) of the Bill only provides, and I quote -

“The allocation of a donated tissue to a recipient shall be made in accordance with the best match and in the order of priority warranted by the recipient waiting list.”

No mention at all as to the wish of the donor. So, this may be an issue because this may even discourage people from giving their organs if they do not know who is going to receive those organs.

Now, the hon. Member Dr. Joomaye stated that this is done automatically by a computer, it is very objective, the matching is done scientifically. But speaking after him, hon. Gayan, who was the former Minister of Health and Quality of Life, seems to contradict him by saying that there may be ethical issues when you have to choose between recipients, when you have to choose between two competing persons; whether you give someone who is older preference over someone who is younger, you give a non-convict over a convict. He would seem to suggest that it is not automatic; the allocation is not automatic. There is a human interference in the allocation, and this is very dangerous, Mr Deputy Speaker, Sir, because the population must have faith in the allocation of the organ to the recipient. I would suggest, as hon. Dr. Boolell stated before me, that, in the law or in the regulations, we expressly provide that the allocation of the organ will be done strictly in accordance with the guidelines issued by the World Health Organisation, because even the method which hon. Dr. Joomaye mentioned is not in the law. He is just explaining the way he thinks it will operate, but it is not stated. I think that if it is not by way of amendment, but at least by way regulation, if that be made clear, because there must be objective criteria, there must be transparency. There should not be any discrimination and there should, above all, not be any favouritism.

But, Mr Deputy Speaker, Sir, how can we give assurance to the public and to the donor, in particular, that no one will jump the queue? How can we assure them of fairness and transparency when we know, in practice, how the system can be abused? How to assure them that there would be no intervention by Board members to favour any particular recipient? How do we assure them that there would be no intervention by any Minister to favour any particular recipient? Shouldn't it be made an offence to tamper with the waiting list? Maybe, this is a solution. Anyone who interferes with the waiting list will be subject to criminal prosecution. This way you will be deterring the Board members or the Minister from

tampering with the list. So, if we are unduly favouring one patient over the other, that could have been made an offence, but no, Mr Deputy Speaker, Sir, instead of making this an offence, what are we doing in this Act? We are giving immunity to Board members against prosecutions both civil and criminal.

When the law was amended in 2013, Mr Deputy Speaker, Sir, I was in the Opposition, but hon. Mrs Dookun-Luchoomun was also in the Opposition and she intervened in the Bill. Both hon. Dr. Satish Boolell on behalf of the MMM and herself on behalf of the MSM in the Opposition criticised the conferring of immunity to Board members. She said and, I quote –

“Furthermore, the fact that we are ready to give so much immunity to these Board members, have we considered the high-risk that we are facing.”

And she was right because these people are given a lot of responsibility and with responsibility comes accountability. You cannot let them go away scot-free. So, now that the hon. Minister is in Government, now that she has the ability to turn her words to actions, I eagerly wait to hear her speech - because she is on the speaking list - to see how she would react to section 27 of the Bill.

Mr Deputy Speaker, Sir, section 27 of the Bill not only gives immunity against civil and criminal liability to Board members, but shamelessly - and I repeat, shamelessly - extend that immunity to the Minister. Yes, the Minister under this Act wants to have the power to appoint members of the Board, he wants to have the power to give such direction to the Board as he considers in the public interest and the Board has to comply with his direction. This is in section 26 of the Bill. He wants to have the power under section 28 of the Bill to make regulations, to levy fees and to designate health institutions which can carry out the transplant. He wants to have the power by regulation to designate the education institution that can use the organ for scientific research, and he wants to have the power by regulation to do whatever he feels necessary for the implementation of this Bill. He wants so much power, but he wants no accountability. He wants immunity from civil and criminal prosecutions. Is it what we mean by good governance?

Mr Deputy Speaker, Sir, not so long ago, there was a Fact-Finding Committee on the Cardiac Centre. Although that Fact-Finding Committee was financed by public funds, the Government chose not to make its recommendations and its findings public; instead, the hon. Prime Minister referred the case for investigation by ICAC. I do not have any faith in ICAC,

but the fact that the Prime Minister referred the matter to ICAC means that, at least, there were grounds for investigation as to whether there is any corruption offence. So, ICAC was given the power to investigate whether a Minister was suspected of interfering with the running of the Cardiac Centre. And today, with this immunity that it is being proposed to give to the hon. Minister, not the Police, not the ICAC, no one will be able to investigate the Minister for any exercise of his power in good faith. Is that good governance? Is this how we give confidence to a system? Is that how we are going to give confidence to donors to come and donate their organs, when the Minister is not accountable civilly or criminally for any power exercised under the Act, be it in giving direction, be it in appointing members, be it in interfering if he does interfere with the running of the Board? I really hope, especially in the light of the stand which was taken by hon. Mrs Dookun-Luchoomun when she was in the Opposition, that she will convince her colleague to revisit this clause giving immunity to the Minister of Health. The Minister is a politician, he is accountable for his decision and he should not be given any immunity from civil or criminal prosecutions.

Mr Deputy Speaker, Sir, one of the consequences of allowing people to donate their organs to non-relatives is that the risk of organ trafficking not only becomes real but also probable. Once you remove the blood relationship, altruistic donation can easily give way to commercial donation. The Bill makes it an offence under section 21 to make or receive payment for any supply of tissue. How do you enforce this in practice? Surely, you do not expect someone to come forward and say: 'I have received money to donate an organ'. Surely, you do not expect someone to come forward and say: 'I have paid to buy an organ'. So, how does the Government intend to deal with the thorny issue of organ trafficking? How does the Government intend to ensure that human organs do not become commodity for sale? When we have so much poverty around us, how do we prevent people from selling their organs when they are alive or after their death? Will non-Mauritians be allowed to receive human tissue from Mauritian donors? Are we going to allow transplant tourism? Are we going to encourage foreign patients to come to Mauritius and undergo organ transplant?

Mr Deputy Speaker, Sir, as the Bill is currently drafted, there isn't sufficient safeguard to prevent and control organ trafficking and commercialisation of organs. What we need is the full implementation of the Declaration of Istanbul on Organ Trafficking and Transplant Tourism adopted in May 2008. And I hope, as suggested by hon. Paul Bérenger, and concurred by hon. Anil Gayan, this Bill will be subject to further amendments as and

when required. One of the proposed amendments would be to incorporate this principle of Istanbul Declaration.

For instance, Mr Deputy Speaker, Sir, donors should undergo psychological evaluation by mental health professional during screening. It is not enough that two specialists certify that the removal of tissue is not likely to endanger his health as prescribed in section 9. There should also be a report from a psychologist who would have examined the donor, made a psychological profile, let him understand the consequences of his act and have an informed consent. This way, we would be sure that a person is not selling his organ just for money, but he knows what he is doing.

At the same time, Mr Deputy Speaker, Sir, we will need to implement in our law the protocol to prevent, suppress and punish trafficking in person especially women and children, which is part of the United Nations Convention Against Transnational Organised Crime and Protocol adopted on 15 November 2000.

Mr Deputy Speaker, Sir, allow me now to come to what I consider to be the more controversial aspect of this Bill, namely section 11(3). I fully support the suggestion of hon. Paul Bérenger when he requested that there be a free vote when it comes to this Bill.

As rightly pointed out by the hon. Minister of Health and Quality of Life last week, consent is the key for the proper functioning of this legislation. I will go one step further and say that consent is the ethical cornerstone of all medical interventions. In fact, the term 'donation', in itself, presupposes a positive action. If someone takes something from you without your consent, it is not donation. It cannot be called donation. It is the compulsory acquisition. It is coercion. And there may be constitutional issues with presumed consent in section 11(3). If a person dies without having expressed his will to donate his organ and he leaves no relatives, no heirs, no spouse, no parents, then his body automatically becomes public property, and as soon as he dies, his organ can be harvested. Now, is that constitutional? Is that not a breach of section 8 of our Constitution which prevents deprivation of property without compensation? And our body is our most precious property. So, I did not consent for organ removal; I leave no heir, and suddenly my body becomes public property. My body is taken away from me. Isn't that a breach of section 8 of the Constitution?

What about the constitutional freedom to practise the religion of our choice? Last week, the hon. Minister stated with authority that, and I quote –

“And I wish to point out that the removal of a tissue from a dead person’s body is neither immoral nor does it impede on any religious belief (...).”

This is what the hon. Minister said last week: “the removal of tissue from a dead body does not impede on any religious belief”. I beg to differ, Mr Deputy Speaker, Sir.

When I was reading law in England and hon. Members from the Bar, including your good self, will concur, you will remember we studied the case of Regina v. Blaue, a 1975 case. What happened in that case? In that case, a suspect stabbed an 18-year old girl four times. She was taken in hospital. All medical evidence stated that if she had received the appropriate blood transfusion, her life would have been saved. But she refused. She was 18 years old, she knew that blood transfusion would save her life, but she refused. Why? Because she was Jehovah’s Witness and it was against her religion to have a blood transfer. So, if it is against someone’s religion to have a simple blood transfusion, now forget about removal and donation of the tissues. It is a reality. Not all religions are the same. There are certain religions which prevent tampering with body. Even among Muslims, there is no consensus as to what you can do to your body after your death. Some scholars would say that you can remove an organ to save the life of another; some will tell you that it is not possible. This is the reason why most Muslims do not do post-mortem examinations. They do not do what we call here, the autopsy, as was clearly explained by hon. Boissézon.

So, how can we then force someone who, during his lifetime, did not give his consent to the removal of any part of his body; how can this person, who, according to his personal convictions or religious convictions, prohibit him from giving his organ once he is dead, how can the State compulsorily acquire his body after his death?

And then, according to the opt-out formula, you can only take the organ of a dead person if he did not express his objection to his organ being taken. Now, how does he express that objection? Is it enough that he should say so to members of his family, to his wife, to his children? Is it enough that he says it to a friend or are we going to have a register? Is the Government going to come up with a register where people will be encouraged to write positively, like in other countries, like in England, it is on their driving card whether you are a donor or you are not a donor? Again, I would welcome the hon. Minister’s suggestion on how the consent should be expressed.

Mr Deputy Speaker, Sir, the debate about opt-in or opt-out system is a universal one, and is even a live issue right now in England. Following the decision of Wales in 2015 to

move from an opt-in system to an opt-out system, Theresa May, the Prime Minister of Great Britain, at last year's Conservative party's conference expressed the wish to convert even for England the system from an opt-in system to an opt-out system. But the announcement sparked a number of negative reactions.

I was surfing the net, Mr Deputy Speaker, Sir, and I came across an article published in the 'Telegraph' of 15 February 2018 with the heading "'Opt-out' organ donations won't solve waiting lists deaths' says NHS chief". According to that article, a study has been made in December of last year in Wales and that study reveals that there has been no increase in donors in Wales after it converted from an opt-in system to an opt-out system. That article also referred to Brazil and Chili where similar opt-out laws were, in fact, associated with the drop in the number of donations.

So, Mr Deputy Speaker, Sir, having an opt-out system does not automatically mean that you are going to have more donors. In fact, Mr Deputy Speaker, Sir, we, on this side of the House, are fully in favour of donating tissue by deceased, cadaveric donation. But we are not in favour of rushing ahead with the presumed consent of the deceased. Today, Spain is recognised as the model for organ transplant. And although Spain has an opt-out system, again on the internet, I came through an article where the representatives of *Organisation Nationale de Transplant* (ONT), Spain governing transplantation Organisation confers this success not to the opt-out system, but, and I quote –

“(...) to its comprehensive programme of education, communication, public relation, hospital investment and quality improvement.”

So, the package is not the opt-out. The package is comprehensive programme of education, communication, public relation, hospital investment and quality improvement. Education is key, and this is why under section 15 of the 2006 Act, the Minister was required to take all necessary steps to ensure that the essential feature of the Act are adequately made known and explained to the public. Education is key, Mr Deputy Speaker, Sir, and I will again quote what hon. Mrs Dookun-Luchoomun stated in 2013 when intervening on the Amendment Bill. She said, and I quote-

“Mr Deputy Speaker, Sir, we have also to consider that if we did not manage to do what we intended, if we did not achieve much, it is also because we did not give proper attention to the information that had to be given to the public, to the education of the people.”

She was absolutely right. We had not and we still have not given enough education, enough information to the public. And then she went on to state –

“It is worth noting also that in the United States of America, in various States, in Ohio, if I am not mistaken even in Ontario, this is in Canada, the legislation, itself, makes provision for the review of education curriculum to ensure that students in schools following health course be given a module on the importance of organ donation, on the impact of organ donation on quality of life and on procedure for organ procurement.”

Mr Deputy Speaker, Sir, *les paroles s'envolent les écrits restent*, and Hansard bears witness. Now that hon. Dookun-Luchoomun is the Minister, she has been the Minister for the past three years in this Government, I really would to hear what she has been doing in terms of improving the education curriculum to ensure that students be given a module on the importance of organ donation; on the impact of organ donation on quality of life, and if she has done anything for the past three years, whether she would consider now to introduce such a module in the schools so that people from the youngest tender age be sensitised to the need of donating organs; to the advantages of saving life; of being altruistic.

Mr Deputy Speaker, Sir, as I have stated, we are in favour of the Bill, to the extent that it will encourage and facilitate organ transplant, but we are not in favour of cutting corners of *brûler les étapes*. We should follow things. We should allow things to progress naturally start with an opt-in formula where people freely and positively consent to donate their organ while they are alive or after their death. We should also initiate intensive capacity building of our health care personnel in transplantation field, with the help of international partners. We need to have adequate facilities to remove preserve and transplant human tissue. This why Mr Deputy Speaker, Sir, I would therefore make an appeal to the hon. Prime Minister, and Minister of Finance that, in the coming Budget which will come in a few days or weeks to come, he allocates sufficient funds for the setting up of a dedicated unit, in Nehru Hospital or elsewhere to perform transplant, and allocate sufficient funds for the recruitment and training of surgeons and personnel to carry out the organ transplant.

Thank you.

The Deputy Speaker: Hon. Leopold.

(10.48 p.m.)

Mr J. Leopold (Second Member for Rodrigues): Thank you, Mr Deputy Speaker, Sir.

So, right at the beginning, I'll just want to inform the House that I will give full support to the Bill though I have quite a few questions throughout my speech. As we all know here this Bill is about setting a framework for the smooth running of transplantation and donation programme. Here we talking about life, about death, about people who are experiencing like near death experience, and we are talking about dead people where we are going to retrieve organs for donation.

There are a lot of issues which need to be considered because we are dealing with human beings and we have to take into consideration our social institution. So, we need to look after the legal, philosophical, religious and ethical issues in relation to this Bill. We need to be very clear about fairness, when we are dealing with organ donation, consenting and the prevention of trafficking and, as most of the orators have said, the hazards of tourist transplants.

Having said so, Mr Deputy Speaker, Sir, organ transplant has been an old medical idea for so long. It was in early 1900s, where they started to do lots of experimentation, and those experiments have resulted in the conclusion that the closer genetically the donor and recipient are lead to the likelihood of the transplant to live longer. But it was only 1940s that scientists started to understand about the immune system, which exists in human beings. They have been able to elaborate on the mechanism on which higher organism like human are able to recognise foreign body, especially in the fight of infection. But the mechanism also caused the phenomenon of rejection of organ in transplantation. They have also found that the more similar the tissues of the donor and the recipient are, the more likely they will be accepted, and when we talk about organ transplantation, rejection remains one of the main causes of failure in organ transplant.

Mr Deputy Speaker, Sir, today with the availability of new drugs and because of the understanding of immune system, well matched organs of human and improved technology organ transplant are being done on frequent basis, and transplantations such as kidney transplants are done routinely in hospital nowadays.

Since the successful rate of organ transplant is satisfactory, and in some cases like kidney transplant. Kidney transplant is more cost effective, than haemodialysis, and it has improved the length and quality of life. Therefore, this leads to more and more people interested in transplantation. In most situations where a person needs to have an organ transplant it is because of organ failure, and, in most cases, they are life threatening, and patients do not have time to wait longer before tragedy can happen. Most of the vital organs are non-regenerative, therefore, most of the organs which are needed for transplant will come from deceased donors. That is what makes it important to have adequate legislation to address the ethical and legal issues in the procurement of organ and tissue transplants.

All the people, who are consenting to donate their organs, find it deserving, and estimable, as such donations will benefit others who are in real needs. The medical professionals, the law, and people in general need to support them. We are dealing with the Bill today, not only to have the required framework to deal with consenting and the prevention of organ trafficking, but, also, as I have said earlier, transplants are routinely done in hospitals, so requests for human organs are higher in demand than supply. So we have to establish in all fairness because the resources are limited. The basis of who to choose to receive the organ and those decisions cannot be taken lightly as they have serious legal implications. The fact that so many patients are awaiting for transplant, when we are taking decisions it also implies who we choose to have transplant, and who we are choosing to die.

Therefore, I have got a few questions with reference to the Bill as to who will decide in such cases. Is it the transplant team? Is it the treating doctor or is it the Board? So, who will decide especially when decision needs to be taken quickly and promptly especially in cadaveric donation? This is such a serious issue to determine who should benefit from it as per an order of priority. While as criterion, when we say the one who will benefit the most sounds fair, others will argue on the interpretation of benefit in such circumstances. How and who will assess the success of transplant or the outcome of transplant prior to surgical intervention?

Again, how the success of transplant and outcome could be interpreted? Can we select a patient only on the basis of extending his biological life or recipients who are most likely to have a real chance for a healthy life? So, the issue of suitable donors is very important, it goes above medical decisions. Those decisions are legal and ethical too although in transplant, medical criteria are of utmost importance for the success of transplant.

Having said that, how are we going to proceed? Does this Bill provide provision to address it? Will it be a random method selection? Will it be on a first-come, first-served basis based, of course, on suitability or that most people will favour social wealth, merits and demerits? Is it fair to give priority for example, to a young person over a retired person? Is it fair to demerit people who smoke and drink alcohol heavily chances over people who have practised a healthier lifestyle? I think that the law should make provision for that and to be careful in choosing as some criteria may violate the equal dignity of all human beings.

Another issue with organ donation is consenting. Because of the shortage of organs and tissues transplantation, the Board needs to look into different models of consenting so as to encourage people to come forward and register themselves. Consenting must be formulated in such a way that the families of donors do not have the burden of thinking on whether or not the deceased person would have liked to donate his organ. In the case of brain death in accident victims while relatives are busy mourning their loved ones, to go and discuss about donation with them in such painful situation is not proper.

Getting registered is not enough to help potential donors to have opportunities to donate. To be able to increase organ donation, we need good protocol to allow a maximum amount of people to presume their consent, to encourage potential donors to talk to their families about their wish to donate. Donors must always be encouraged to discuss their wish to relatives so as to minimise the risk of their decision to be overruled by relatives in circumstances of sudden death. In such situations, families must be there only to ensure that the donation and removal of organs are done in the most dignified way. For that to happen, increasing public awareness about organ donation is of great importance.

For organ donation to be effected correctly, the general public and the health professionals need to have all the relevant information. All queries which will prevent donors from coming forward need to be addressed. All the procedures of transplantation have to be made available to the public and any change in policy in that regard must always be circulated to the general public. All unfounded fears and confusion about the issues need to be clarified through all means of communication. Information also includes the strict criteria and standards set to determine irreversible brain death where organ removal will be followed after.

Because the issue of organ donation is so complex there must be well established structure at the hospital level, structure that has not been mentioned in this Bill. And, while

we are talking about cadaveric donation, most of the cases you will have them at the Intensive Care Unit and the Accident and Emergency Care Unit. So, a system to make the organ transplant team at hospital level and accident sites to identify and check eligibility and registration or organ donation registry is of paramount importance. So, these are my questions and I hope that during the summing-up of the debate by the hon. Minister I will have some answers.

So, thank you for your attention.

(Interruptions)

The Deputy Speaker: Hon. Mohamed!

(11.02 p.m.)

Mr S. Mohamed (First Member for Port Louis Maritime & Port Louis East): Mr Deputy Speaker, Sir, I have listened to all those who have intervened on this particular piece of proposed legislation and we have heard a lot of experts pronounce themselves on what is the situation in other countries and what would be the best practice. So, I shall not, therefore, repeat what all arguments others have brought forward because it is clear that a lot of our friends, Mr Deputy Speaker, Sir, have researched. They have done a lot of research and they have explained very clearly what the dangers would be, what the advantages would be. Some have tried to play politics with it, but then we can't help it. Some people have to play politics with everything, but you have such people in all countries and, unfortunately, this is the case. But, I shall not do that.

I have tried to go through my research and tried to narrow down issues and that is what I will do. I had a good friend of mine who was asking me, a few moments ago, how long I would be in my intervention and I said to him five minutes and he said that is impossible. So, I will try to restrict myself to those five minutes.

(Interruptions)

I am of the view that there are two issues that I would like to talk about here, only two. I have gone through a piece of legislation, that is, the Human Tissue Act of 2004 as a means of comparison which is the legislation of the United Kingdom and in that legislation of the United Kingdom there is the creation of an Authority which is the Human Tissue Authority. According to the legislation, in the United Kingdom, the Secretary of State is the one who decides who the members are going to be of that particular committee. But, when

one looks at the people who are part of that Authority, clearly one cannot say that those are political appointees. In the United Kingdom, you have the Secretary of State who decides clearly to follow the regulations of this particular statute in the United Kingdom and goes to choose people who are *les érudits*, authorities, experts in the field irrelevant of their political connections.

Unfortunately, in Mauritius whenever a Minister is given this particular power, he more often than not decides to have those nominated who are close to political parties. It has happened when we were in power and it is happening when they are in power. But then, again, at least, I have the courage of admitting that it happened when we were in power. They will continue denying, they say: “No, it is not happening”, while they are doing exactly the same or worse. They do not even have the courage to try to see things from a distance and say: ‘Are we going to continue with the same process of nominating people who are close to one particular philosophy of a political party?’ In other words, even in this, I fail to understand why the Minister in the Mauritian context, should give himself so much power where he is the one who is going to decide who is on that Board. He is the one who is going to appoint people to take decisions regarding the removal or transplant of any tissue which requires specialised knowledge. He is the one who is going to decide who the member is. Each and every time, it is the Minister who will decide. Each and every one of us have been talking about this Bill, but let me just go to the very important issue, apart from him trying to do whatever he decides under the cover of statute. I believe it is wrong and even if we have done it in the past, it should stop.

But here, I have looked at Section 3, Clause 3 of this particular Bill, Subsection (2) –

“This Act shall apply only in cases of donated tissue.”

I have gone to the definition section of Section 2 of this particular Bill, Clause 2, the Interpretation section.

“donated tissue” means a tissue donated in accordance with this Act;”

So, anything that goes outside the ambit of the donation of this Act is not covered by this Act. That is very clear, anything that goes outside the ambit of this Act, which has not been donated within the parameters of this Act, is not applicable, according to this Act. Therein lies the problem because when one goes to Clause 21 of this particular Bill, Commercial dealings in tissue, because we have heard our friends talking about the dangers of organ trafficking, the dangers of people trying to make money off the backs of the poor

people *pour monnayer* organs, for instance, or tissue, tourism around it. And here, I read section 21(1) (a) –

“(1) Subject to subsection (2), no person shall –

- (a) make or receive any payment for the supply of, or for an offer to supply, any tissue;”

‘Payment’ is the word that is used. In my humble view, this is precisely what is wrong. Payment should not have been the word that is used. Why do I say so? Because when you look at the legislation in the United Kingdom, as lawyers would understand and even non-lawyers would understand, because sometimes lawyers do not understand everything and non-lawyers understand faster than we do. And here, when one looks at the legislation in the United Kingdom, when one looks at it and one says: ‘What exactly is the word that is used in the United Kingdom?’ Is the word ‘payment’ that is used? No!

In the United Kingdom, the word ‘reward’ is used and not limited to payment because imagine the situation where someone is not paid and he is given, let us say, a favour. He cannot be prosecuted because payment is very limited in its scope. So, as it stands, as a lawyer, what I have tried to do, Mr Deputy Speaker, Sir, is to try to find the loopholes in this proposed legislation. I have found loopholes and the loophole is that payment would create a situation where those who do not pay would find themselves not liable to any prosecution of any nature. If, for instance, they receive something which is not payment, but something in kind, in the shape of a reward, would be a better word in order to bring in all possibilities of *ceux qui vont* contravene the law. So, my humble suggestion is that this should be reviewed and it should be the word ‘reward’ that is used. When one looks at Section 32 of the Human Tissue Act of the United Kingdom it says –

“(1) A person commits an offence if he -

- (a) gives or receives a reward for the supply of, or for an offer to supply, any controlled material;

Not talking about payment. Here, we are just thinking about the monetary aspect which would limit the offence and would be a way out for any defence lawyer to come forward and then simply submit that there is no case to answer because the prosecution had only gone in statute and provided for payment, which is not advisable in my humble view. But the United Kingdom goes on to say –

“(1) A person commits an offence if he -

- (b) seeks to find a person willing to supply any controlled material for reward;”

Not only is it an offense to give or receive a reward, but to seek, to find a person willing to supply any controlled material. Subsection (c) as well says –

- “(c) offers to supply any controlled material for reward;”

Even the offer, not for payment, but for reward. So, those are my humble contribution to this debate because this very simple thing here could nullify the whole purpose of this legislation. If we are to stick to that particular word ‘payment’, we would be doing a disservice to the whole good intention there may have been in bringing this legislation forward. We would be, on the contrary, encouraging an intelligent form of trafficking in organs. We would be encouraging those who would like to take advantage of this blatant loophole that, unfortunately, no one has paid attention to until now, but then, that is the whole of the debate.

Let me conclude on something else. It reminds me of a little passage that I have read recently in the House of Commons. I do not feel like being nasty here, but I think it is important. I read a little document here, it is called ‘The House of Commons Rules of Behaviour and Courtesies in the House’. The whole purpose of a debate is not to come to this August Assembly to read a written speech. It is a simple exchange of ideas, and I humbly say that when I look at Hansard of the 70’s and 80’s and when I look at the Hansard of even the 50’s and the 60’s, speeches did not go for more than 5-6 minutes, because those stalwarts just stood up, contributed and basically said what they had to say because it was an exchange of ideas. That is the whole purpose of a debate. In the House of Commons, the simple rules of behaviour require that when I am making such a comment, it is not the adviser of the Minister who has to be here, to take a note, to inform the Minister: ‘By the way that’s what was said. So please, try to see whether you could amend’. The Minister should have been present. That is basic elementary courtesy.

The House of Commons, the Speaker there, has reprimanded Ministers who have decided not to be present. Let me go further, the House of Commons Speaker, as he is now, has even said: If you have a busy diary, that is not an excuse. If you presented a Bill, you be here. If you presented a Bill, listen to what we are saying, because you have to react to what we are saying. Otherwise, what would be the point of a summing-up? What will be the point of a summing-up based on what? To be told to you by the officials of your Ministry in your

absence? But, then again, maybe he should just put iPad here and let him talk to us through the Wi-Fi connection. Let him Skype us his summing-up.

(Interruptions)

So, what are you saying? Is that the excuse that you are giving? That is what he was saying? I mean, this is a lack of respect. When you present a piece of legislation, you are here. In the House of Commons...

(Interruptions)

You see, then I am going to have intelligent comments on trying to defend *ce qui ne peut être défendu*. But, then again, courtesy is something which some people have, some people do not have; and the ability to understand, some people have, some people cannot; and the ability to defend *l'indéfendable*, some people do it with art and passion, some people, really, are *lamentables*. We have all of it. I have only said what I had to say.

Thank you very much.

The Deputy Speaker: Hon. Rutnah!

(11.15 p.m.)

Mr S. Rutnah (Third Member for Piton & Rivière du Rempart): Thank you, Mr Deputy Speaker, Sir, for giving me the opportunity to express myself in relation to this Bill.

It is an important Bill. I have heard Members from both sides of the House and I can glean from what has gone on since last week that, in fact, there is consensus in relation to the passing of this Bill, to make it an Act. However, there are some bones of contention from mainly Members of the Opposition parties, which demonstrate that we are living in a very healthy democratic society where Members of the Opposition, Members of Government can come and put their views and points forward.

Mr Deputy Speaker, Sir, no Parliament has ever passed the ultimate law. None in the world! Except where you dictate, you force people and you govern like dictators do. Finding the ultimate law which would be unchallengeable and flawless is yet to be defined by human nature. There is no flawless law. Today, we are debating a Bill which concerns life of human beings and death of human beings. It is a question of life. It is a question of death.

(Interruptions)

And as hon. Dr. Boolell says, about resuscitation. So, if you get resuscitated, you are back in life, but eventually you have got in life two choices: one is either being alive and live in dignity, with respect, or die in dignity and in respect.

When we talk about promoting organ transplantation, there are three basic fundamental issues that one needs to consider -

(i) The social impact.

What a law about transplanting human organs and tissues has on the society at large; the social impact.

(ii) The religious impact.

I agree some of us will justify that their religion disallows them to donate organs. Others will say their religion permits it to do so.

(iii) The political impact.

I agree with my very good friend hon. Mohamed, with hon. Uteem, with the former Leader of the Opposition, hon. Bérenger, with hon. Dr. Boolell, that it is not a question of politics. It is not a question of politics. It is a question of life and death. Those who think that they are going to do politics with such an issue surely must be living in cloud cuckoo land because there is going to be no political mileage on an issue that relates to life and death. It is about either you love it or do not love it. To love, you have to be loved.

(Interruptions)

I will indeed! The hon. Member made the comment that I have to teach the Rt. hon. Minister Mentor, but I can assure him that I have learnt a lot from the Rt. hon. Minister Mentor, him being one of my *colistiers*. I am sure that all of us in the House have come here and we will continue to learn. The more you learn, the more you do not know how much you know. A clever man is he who does not know how much he knows. So, we are always in a learning process.

Coming back to the Bill, Mr Deputy Speaker, Sir, we must not only be guided by legal principle. We should also be guided by moral and ethical principles. Why morality? Every individual owns his or her body. We own our body. There is this Kantian principle. The great philosopher, Immanuel Kant, initiated the concept of unconditional worth. We are as human beings an unconditional worth. Our worth is unconditional. The concept of unconditional worth initiated by Immanuel Kant states that -

“Each individual has the capacity to determine his or her own moral, philosophical and legal destiny.”

Nowhere in this Bill has it been stated that it is compulsory for an individual in this country to donate his or her organ. Nowhere! I will deal with the issue of presumed consent later on because hon. Bérenger spoke about it and hon. Uteem spoke about it, but there is no obligation at all. Whether you opt-in or you opt-out, it does not matter. What matters is whether you can give your consent either way to save life. On the one hand, life, and on the other hand, death.

According to the Kant theory, we are under a duty to save life. We are under a duty to consider the principle of egalitarian. Equality for all. The benefit that organ donation will bring to the society, the principle of communitarianism, the benefit that it will bring to the community at large and what are the benefits is again weighed in relation to life and death.

In Mauritius, organ transplant has been a subject that is donned to us in our medical field since a long time. Back in 1967, the first corneal transplant took place in Mauritius by Dr. Gaya in Candos Hospital, which is now known as Victoria Hospital. Blood transfusion has been taking place for many years. At some point, even corneal transplant stopped in Mauritius. Then, it started again in 1997 at Moka Eye Hospital. And today we are a pioneer, if I can put it this way, of corneal transplant, not only in our public hospitals but also in our private hospitals, in Dr. Agarwal's Eye Hospital, for example.

So, now we have a Bill that is going to assist, to enlarge that idea that was floating since a long time in our political history, in our social history to develop a kind of transplant that is going to be more beneficial to our society: transplant of liver, transplant of kidney, heart transplant. But we know that an Act was passed in 2006 and also an amendment in 2013. And we know that the 2006 Act was never put into practice. It was, in fact, never proclaimed, except for one section...

(Interruptions)

Yes, the skin section. The 2013 amendment has not served its purpose. But in 2006 when the Act was passed, there was a section in relation to the Board there as well, because a lot of criticisms were levelled in relation to the power of the Minister. A lot has been said about the power of the Minister, but let's see and analyse together the 2006 Act. Section 16 of the 2006 Act creates the Board. And the Board, according to that Act, meant the Organ and Tissue Transplant Board constituted in accordance with Section 16.

Let me say a few words about that section 16 (1)(c) -

“There shall be for the purposes of this Act an Organ and Tissue Transplant Board which shall consist of -

- (c) not more than 3 medical practitioners not below the status of specialist, one of whom shall be a medical consultant, to be appointed by the Minister;”

Subsection (d) –

“such other persons, not exceeding 3, as the Minister thinks fit;”

And then Section 16(2) –

“Where it is necessary for the Board to make a decision regarding the removal or transplant of any tissue which requires specialised knowledge or experience in a field of medicine which the members of the Board do not have, the Minister shall appoint one other medical consultant who has the required knowledge or experience to take part in the decision.”

This was back in 2006. The hon. Leader of the Opposition, in 2006, formed part of the Government.

(Interruptions)

Yes! I am glad, and I am very grateful to my very good friend, hon. Dr. Boolell for having drawn my attention that hon. Dr. Husnoo was equally in the Government and he was a backbencher then. Now, he has graduated in this Government...

(Interruptions)

And the hon. Leader of the Opposition had nothing to say about this section of the law. Hon. Bérenger had nothing to say.

(Interruptions)

Yes! Because at that time the Leader of the Opposition, hon. Bérenger, did not say anything. Hon. Uteem did not say anything. In fact, he did not take part in the debate.

(Interruptions)

I am so sorry! I understand that hon. Uteem was not in the House. But I did not see any comments of his on newspapers as someone from outside the Parliament being a Member at the time of the MMM Party.

(Interruptions)

Now, let me come to what the hon. Leader of the Opposition, hon. Xavier-Luc Duval said in the debate last week -

“Madam Speaker, coming to this Board, the Tissue Donation (Removal, Preservation and Transplant) Board is appointed by the Minister, himself, chaired by an employee of the Ministry, the Director of the Health Services with people entirely appointed by the Minister. Now, something as serious, as sensitive as removing organs and as importantly as having a priority list of recipients: ‘Do you want them to be a political appointment of the people there?’ Do you want this Board to be politically motivated, appointed by a Minister who has powers anyway, which I would object to the moment? I do not think so, Madam Speaker. So, the first thing is, I believe, that it should not be the Minister who appoints, at the least, it should be the President of the Republic acting on his own deliberate judgement. I do not believe we need to have political intervention in this.”

The last part of it, I agree there should be no political intervention. But why in a democracy like ours, the Minister cannot appoint? Why? When the Labour Party and the PMSD are in Government, their Ministers can appoint, but why this Government’s Ministers cannot appoint?

(Interruptions)

The principle is, Mr Deputy Speaker, Sir, that we are in a democratic country and this is a democratic institution. The Minister is accountable to the people, to the nation, to the country.

(Interruptions)

My Leader knows it. I am glad hon. Mohamed is saying “*dire ça to Leader*”. But my Leader is aware of the principle of accountability. Besides, he is a Senior Counsel. He is a member of the Bar; he knows about accountability. So, I anticipate you also know about accountability.

(Interruptions)

But we are a democratic institution here, our Ministers are accountable. We have got institutions that keep checks and balances on Ministers' conduct. Those who are not happy with the manner in which a Minister is operating or are not happy with his/her conduct, they must go to the ICAC.

(Interruptions)

15 m.! You want me to talk about it? Okay.

Mr Deputy Speaker, Sir, the comments are coming about the Rs15 m.

The Deputy Speaker: Come to the Bill!

(Interruptions)

Mr Rutnah: Yes. I am going to deal with the Rs15 m. issue when I will be dealing with the commercial transaction, which hon. Mohamed referred to, in section 21 dealing with payment. He said substitute it to the word 'reward'. Let us deal with trafficking straightaway!

A lot of our friends, here, have expressed their fear about trafficking. We have, for example, the Dangerous Drugs Act that prohibits smoking cannabis, prohibits all kinds of drug-related offences. Yet, people are involved in drug trafficking, people are involved in dealing with drugs and drug-related offences. Like this we have got various Statutes that have been passed in this Parliament, colonial time and post-colonial time, prohibiting unauthorised acts, criminal acts. Yet, people do embark on these kinds of acts. But what do we have in this Bill? Those who have been speaking about trafficking have not paid a heed to clause 24 of this Bill.

Let us look what clause 24 of this Bill tells us in relation to offences and jurisdiction. Clause 24 (1) states –

“Any person who contravenes section 8(1), 10(1), 12(1), 15, 16, 17, 18, 19, 20, 21, 22 or 23 shall commit an offence and shall, on conviction, be liable to a fine not exceeding 500,000 rupees and to imprisonment for a term not exceeding 15 years.”

So, there is this *garde-fou*. There is this barrier; there is this creation of the offence; there is a manner in which to deal if someone infringes the law in relation to the donation of human tissue, human organs or removal of organs. But, yet, Mr Deputy Speaker, Sir, there will always be someone who will try to traffic. Trafficking takes place in England, in France, in the United States, in India, in China, in the East, West, North, South and everywhere.

(Interruptions)

Centre as well. Hon. Mohamed wants me to speak about the centre? The centre as well! You want me to talk about the centre of the world? In Estonia, in Ukraine, in Russia, everywhere trafficking exists. Human trafficking, organ trafficking exists and it is notorious in the centre, and we will always have it. But we have to have the laws.

(Interruptions)

I am coming to the payment.

(Interruptions)

My learned friend, hon. Mohamed, is a bit in a hurry. So, let me deal with the part that he really wants me to deal with.

It was section 21 and when dealing with this part of the law, he quite properly referred us to section 3 dealing with the application of this Act, and subsection (2) states –

“This Act shall apply only in cases of donated tissue.”

Then he referred us to the definition section -

“donation” means a donation of tissue made by a person in accordance with this Act.”

And he says whatever falls within or outside the ambit of this Act, cannot be accepted. Then he took us to section 21, and he gave the impression that the word ‘payment’ has been used in an incorrect manner, and even went on to suggest by his reference to the drafting of the law in the United Kingdom.

(Interruptions)

But, let us deal with the issue of whether we should have used the word ‘payment’ or ‘reward’.

Section 21 speaks about commercial dealings in tissue. Whenever there is a commercial transaction, there is a payment. No commercial transaction takes place ever without a payment.

(Interruptions)

No, if you are talking about a commercial transaction, it is about business, it is about economics.

(Interruptions)

Yes, but that is a different matter. If you are speaking about reward, if you are speaking about payment in kind, then...

(Interruptions)

Payment in kind? I think you have to ask – if you ask him what payment in kind means, you better ask your leader, he knows it better.

(Interruptions)

But to be fair to the hon. Member, I have always said that no one in this country monopolises intelligence and leadership. His leader should consider conceding his post either to my hon. friend or to hon. Dr. Arvin Boolell.

(Interruptions)

The day he does that, the political matrix changes in this country, and...

(Interruptions)

...the matrix of the Bill will change as well.

(Interruptions)

The Deputy Speaker: Order!

Mr Rutnah: And you will not only get a reward, you will get compensation as well and that compensation, I can assure you, will be more than the Rs15 m. jackpot you were referring to earlier on.

(Interruptions)

The Deputy Speaker: No crosstalking, please!

Mr Rutnah: If I make public the figure that was proposed to him by his leader, he will be shocked. Anyway! But, Mr Deputy Speaker, Sir, the criticism also about whether we can give presumed consent ...

(Interruptions)

let me quote a document – to violate - earlier on I was referring the House to the Immanuel Kant's principle of our worth, and let me quote this: "to violate a person's autonomy is like treating that person merely as a means without regard to that person's own goals. Example, if a person is dead and his organs are taken from his body without his previous advanced

directives of any such act then it is again considered to be using that body as a means. But what if that organ was so precious in saving the life of a living person who could have benefited humanity if given a chance to live example, a doctor or a well-trained militant etc.? This shows the beneficence over the autonomy and serving the utilitarian ethical principle.”

So, even if someone has not consented but yet through this principle of presumed consent you have managed to save the life of someone, even hon. Mohamed in the 2006 debate...

(Interruptions)

stated the following and he will remember and from his smile I know he will –

“Mr Speaker, Sir, therefore, I have to decide after having looked at all this with the words of the Prophet of Islam, the Prophet Muhammad, may peace be upon him, that stated in the Holy Quran at Chapter 5 Versus 32: whoever saves the life of one person it would be as if he saves the life of all mankind and it is *halal* to do so. It is not a *fitna*.”

So, whether consent presumed or otherwise, if part of your body manages to save life and gives that breathing space between life and death to someone who is clinging by minutes or seconds between life and death then you save humanity and this Bill is what it is all about: saving humanity.

Mr Deputy Speaker, Sir, if I have to speak on this Bill...

(Interruptions)

on a philosophical note...

(Interruptions)

because at the moment I have only referred to Immanuel Kant, I have yet to refer to Dworkin and others...

(Interruptions)

But, Mr Deputy Speaker, Sir...

(Interruptions)

I thank...

(Interruptions)

The hon. Prime Minister is right! This is by way of introduction...

(Interruptions)

...but the full swing will come because the debate on this Bill will not end here after we have voted it and made it an Act. This is a kind of Bill once proclaimed, once gazetted, there will be continuing debate not only in this House and on the newspapers in the columns or editorials but at the University. At all universities where ethics are taught in Mauritius, this Bill will be referred to. Where morals are taught, this Bill will be referred to.

On these notes, Mr Deputy Speaker, Sir, I thank the people of Mauritius for having listened to me live on their TV...

(Interruptions)

...and I thank all hon. Members for having listened to me. Thank you so much.

(Interruptions)

The Deputy Speaker: Hon. Dr. Sorefan!

Dr. Sorefan: Mr Deputy Speaker, Sir, I move for the adjournment of the debate.

Mr Oree rose and seconded.

Question put and agreed to.

Debate adjourned accordingly.

(11.52 p.m.)

ADJOURNMENT

The Prime Minister: Mr Deputy Speaker, Sir, I beg to move that this Assembly do now adjourn to Friday 25 May 2018 at 3.00 p.m.

Mrs Dookun-Luchoomun rose and seconded.

Question put and agreed to.

The Deputy Speaker: The House stands adjourned. Hon. Jhuboo!

MATTER RAISED**SMALL PLANTERS – MACHINERY & EQUIPMENT – VAT & REGISTRATION DUTY**

Mr E. Jhuboo (Third Member for Savanne & Black River): Thank you, Mr Deputy Speaker, Sir. I am going to be very brief at this very late hour.

Mr Deputy Speaker, Sir, the matter I am raising is addressed to the hon. Prime Minister, Minister of Home Affairs, External Communications and National Development Unit, Minister of Finance and Economic Development and it is about waiving the VAT and registration duty on the acquisition of vehicle for the small planters, for the *communauté des petits planteurs*.

Planters, Mr Deputy Speaker, Sir, whether they are vegetable growers or cane growers, are eligible to purchase a double cab and a single cab vehicle. The acquisition is duty-free but they have to pay 15% VAT and registration duty on the vehicle which is a consequential amount that they will not be able to reclaim.

Cette mesure concerne 8,000 petits planteurs qui ne savent plus à quel saint se vouer. En effet les effets du *global warming*, du changement climatique, sont aujourd'hui réels et ceux qui sont familiers au domaine de l'agriculture savent que la saison des pluies qui se résumait à quelques mois il y a quelques temps aujourd'hui se résume à plusieurs mois. Elle était de novembre à janvier mais maintenant elle est étendue désormais jusqu'à avril ce qui restreint la fenêtre dans laquelle les planteurs peuvent mettre leur semence en terre.

Nous avons connu depuis le début de l'année, six *flash floods* et trois cyclones et il pleut toujours. L'idée de cette motion, M. le président, est surtout de corriger une anomalie. Chaque planteur, comme je le disais précédemment, a droit à un *duty-free*, mais il ne récupère pas la taxe à valeur ajoutée bien qu'il paye la taxe à valeur ajoutée sur tous les entrants, c'est-à-dire, les insecticides, les pesticides, les engrais, les équipements et les machines diverses et malheureusement cela il ne peut pas la déduire.

So, hence, my request to the hon. Prime Minister is that he considers exempting, waiving the 15% VAT charge following the purchase of a pickup vehicle by the small planters who are faced with many difficulties in the course of their activities. This will not only help them financially but also encourage and stimulate others into farming.

Thank you, Mr Deputy Speaker, Sir.

The Prime Minister: Mr Deputy Speaker, Sir, regarding VAT, I wish to inform the hon. Member that a number of inputs used by the small planters community are not subject to VAT. In addition, small planters who are not VAT registered are refunded VAT paid on a number of tools, machinery and equipment. In fact, I am informed also that there is no rate of registration duty of 10% for small planters. The highest rate of registration duty is 5%.

Furthermore, in the last Budget, I have abolished registration duty payable by a small planter on an agreement for lease or sub-lease of land for agricultural use of up to 10 hectares.

Mr Deputy Speaker, Sir, I wish to remind the House that, since the coming into office of this Government, a series of measures has been taken to alleviate the burden of the planting community. Amongst others, I wish to lay emphasis on the following -

- 80% advance to sugar planters on their sugar crop to alleviate liquidity problems;
- financing the sugar insurance premium amounting to Rs50 m. for planters producing up to 60 tons of sugar;
- waiving of VAT on fencing and poles to reduce incidence of theft;
- a Fertilizer Subsidy Scheme costing Rs5 m. for boosting the yields, an income of some 2, 200 small tea growers, and
- a subsidy amounting to Rs15 m. on purchase of compost utilised by small growers.

Furthermore, following the submission of a report by the Joint Technical Committee set-up at the level of the Ministry of Agro-Industry and Food Security to consider measures to alleviate the financial difficulties being faced by the cane industry, I will be chairing a Ministerial Committee with a view to examining the recommendations of the Technical Committee, and obviously other additional measures for the benefit of the planting community, and that proposal also will be taken into consideration.

Thank you.

At 11.57 p.m., the Assembly was, on its rising, adjourned to Friday 25 May 2018 at 3.00 p.m.

WRITTEN ANSWERS TO QUESTIONS

BASIC INVALIDITY PENSION - APPLICATIONS

(No. B/451) Mr P. Armance (First Member for GRNW & Port Louis West) asked the Minister of Social Security, National Solidarity, and Environment and Sustainable Development whether, in regard to the Basic Invalidity Pension, he will state -

- (a) since May 2017 to date, the number of applications therefor received and discontinued, respectively, indicating the –
 - (i) reasons therefor, and
 - (ii) number of appeals lodged against discontinuation and/or rejection and the outcome thereof, and
- (b) if consideration will be given for the permanently disabled beneficiaries thereof not to be required to repeatedly having to be assessed by the Medical Board.

Reply: I wish to inform the House that among the various pension schemes, my Ministry administers the Basic Invalidity Pension Scheme for which a medical assessment is required to determine eligibility. By law, an applicant who is found to suffer from a disability which is not less than 60% for a period of not less than twelve months qualifies for the benefit.

With regard to part (a) (i) of the question, seventeen thousand nine hundred and fifty-four (17,954) cases of Basic Invalidity Pension were processed for renewal for the period May 2017 to date, out of which thirteen thousand four hundred and thirty-two cases (13,432) were allowed and four thousand, two hundred and ninety-four (4,294) cases were discontinued. Two hundred and twenty-eight applications for renewal are still under process.

Ten thousand three hundred and ninety-nine applications (10,399) for Basic Invalidity Pension have been received since May 2017 to date, out of which nine thousand and twenty-eight (9,028) applications have been processed. Three thousand three hundred and eighteen (3,318) were awarded the invalid pension and five thousand seven hundred and ten (5,710) were disallowed. The remaining one thousand three hundred and seventy-one (1,371) applications are still under process, awaiting medical boarding.

Concerning part (a) (ii) of the question for the period May 2017 to April 2018, five thousand one hundred and nine (5,109) appeals have been lodged against discontinuation and/or rejection. Out of these, 950 cases were allowed (18.59%) and three thousand and

twelve (3,012) cases have been set aside (58.95%). One thousand one hundred and forty-seven (1,147) appeals are still under process.

As regards part (b) of the question, I wish to inform the House that for persons who are suffering from a permanent incapacity and who, previously, had to be re-assessed every five years, my Ministry reviewed the system during the then Ministership of hon. Mrs Leela Devi Dookun-Luchoomun, the current Minister of Education and Human Resources, Tertiary Education and Scientific Research. Accordingly, a beneficiary who suffers from a permanent incapacity is not, as before, medically re-examined every five years and is instead awarded the Basic Invalidity Pension for life. As at date, there are 736 permanent Basic Invalidity Pension beneficiaries.

JOINT COMMISSIONS – MEMBERS - OVERSEAS MISSIONS

(No. B/453) Mr R. Bhagwan (First Member for Beau Bassin & Petite Rivière) asked the Minister of Foreign Affairs, Regional Integration and International Trade whether, in regard to the Joint Commissions, he will state the number thereof which have been established, indicating in each case, the –

- (a) composition of the Board thereof, including that of the Joint Technical Commission, indicating the capacity in which each member represents Mauritius, and
- (b) number of overseas missions effected by the members thereof over the past two years, indicating in each case the –
 - (i) countries visited;
 - (ii) purpose thereof, and
 - (iii) amount of public fund spent.

(Withdrawn)

OVERSEAS MISSIONS – STAFF - COMPLAINT

(No. B/454) Mr R. Bhagwan (First Member for Beau Bassin & Petite Rivière) asked the Minister of Foreign Affairs, Regional Integration and International whether, he will state if he has received representations from the unions and staff of the Ministry complaining of the behaviour of H.E. Mr G. N., High Commissioner, London, H.E. Dr C. J., High Commissioner, Berlin and H.E. Mr J. G, High Commissioner, New Delhi, for abuse of power and of public funds and poor industrial relations with the staff of the missions and, if so, indicate the actions taken in relation thereto, if any.

(Withdrawn)

METRO EXPRESS PROJECT - AAPRAVASI GHAT - BUFFER ZONES

(No. B/457) Mr S. Baboo (Second Member for Vacoas & Floreal) asked the Minister of Public Infrastructure and Land Transport whether, in regard to the Aapravasi Ghat, he will state if the authorization of UNESCO was sought and obtained prior to the implementation of the Metro Express Project inasmuch as same is close to the buffer zones thereof, and, if so, when.

(Withdrawn)

MISSIONS OVERSEAS - WASHINGTON – MR G. M. - EMPLOYMENT

(No. B/459) Mr P. Armance (First Member for GRNW & Port Louis West) asked the Minister of Foreign Affairs, Regional Integration and International Trade whether, in regard to the case of one Mr G.M. employed at the Mauritius Embassy in Washington who was allegedly asked by the Ambassador to refrain from having his hair worn in dreadlocks style, he will state where matters stand, indicating if the clarifications sought from the said Embassy has been obtained and, if so, give details thereof.

Reply: I refer to my reply made in December 2017 to PQ B/980, where hon. Members were informed that Mr G.M, a Mauritian national, holding a US permanent residence is employed as Temporary Driver/Messenger at the Mauritius Embassy in Washington.

With regard to the comments referred to by the hon. Member, I am informed by the Embassy of Mauritius in Washington D.C. that Mr Merle has sent a correspondence to the Embassy in which he confirmed that there is “no issue about his hairstyle” between the Embassy and himself.

HOSPITALS - ORGAN TRANSPLANT – PATIENTS

(No. B/460) Mr J. Leopold (Second Member for Rodrigues) asked the Minister of Health and Quality of Life whether, in regard to organ transplant, he will state if there exists any list of patients potentially awaiting same.

Reply: I am informed that as at date there is a list of 5 patients awaiting kidney transplant and 30 patients awaiting corneal transplant.

I am further informed that 10 other patients necessitating kidney transplant as well as their potential donors are still undergoing medical/pathological investigations.

HOSPITALS – HUMAN TISSUES - TRANSPLANT

(No. B/461) **Mr J. Leopold (Second Member for Rodrigues)** asked the Minister of Health and Quality of Life whether, in regard to the transplant of human tissues other than blood, he will state if same is presently being practiced in the public hospitals.

Reply: I am informed that only corneal transplants are being carried out in public hospitals. This depends upon the availability of corneas and the foreign team. Usually, the interventions are carried out twice yearly.

I am further informed that with regard to renal transplant, same is being carried out for needy patients at the Apollo Chennai Hospital through the Overseas Treatment Scheme.

DISASTER RISK REDUCTION AND MANAGEMENT ACTIVITIES – MINISTERIAL COMMITTEE

(No. B/462) **Mrs D. Selvon (Second Member for GRNW & Port Louis West)** asked the Minister of Social Security, National Solidarity, and Environment and Sustainable Development whether, in regard to the persons who find refuge in the Refugee Centres during natural disasters and those who incur losses of property as a result thereof, he will state if consideration will be given for a review of the policy in relation to the assistance granted thereto.

Reply: The National Disaster Risk Reduction and Management (NDRRM) Act promulgated in 2016 provides a legal framework to better manage disasters with a view to protecting life and property in an effective manner.

As per Sections 4, 5 and 6 of the Act, there is a National Disaster Risk Reduction and Management Council, which meets at least once every month, to look into disaster risk reduction and management matters at national level. One of the functions of the Council is to oversee the implementation of post-disaster recovery and reconstruction activities and it has so far met on no less than 15 occasions since its establishment in 2016.

In addition, Government has set up a Ministerial Committee since January 2018 under the Chairpersonship of the hon. Vice Prime Minister, Minister of Local Government and Outer Islands to look into the whole issue relating to the organisation, coordination and monitoring of disaster risk reduction and management activities. The Committee has met on 4 occasions, namely on 02, 06 and 27 February and 19 April 2018. The next meeting stands fixed to 24 May 2018.

I would therefore say that the matter is under consideration.

HOSPITALS – BLOOD BANK – CONTAMINATED BLOOD

(No. B/463) Mrs D. Selvon (Second Member for GRNW & Port Louis West) asked the Minister of Health and Quality of Life whether, in regard to the blood bank in public hospitals, he will state the –

- (a) number of cases of contaminated blood having been detected thereat over the past five years, indicating the number of reported cases of transfusion thereof, and
- (b) measures taken to prevent blood contamination thereat.

(Withdrawn)

HIV/AIDS – SENSITISATION CAMPAIGNS

(No. B/464) Mrs D. Selvon (Second Member for GRNW & Port Louis West) asked the Minister of Health and Quality of Life whether, in regard to HIV/AIDS, he will state the number of new cases thereof detected over the past five years, indicating the prevention, awareness and sensitisation campaigns carried out by his Ministry in relation thereto.

Reply: Over the past five years, from 2013 to 2017, 1586 new cases have been detected -

- 271 in 2013;
- 333 in 2014;
- 269 in 2015;
- 329 in 2016, and
- 384 in 2017.

As regards prevention, awareness and sensitisation campaigns, a series of activities have been conducted by the AIDS Unit and the Harm Reduction Unit of my Ministry as follows -

- (i) Awareness campaigns have been carried out with the following groups
 -
 - (a) key affected persons such as commercial sex workers, Men having Sex with Men and People Who Use Drugs;

- (b) youth and the community at large;
- (c) students of the secondary schools and tertiary institutions;
- (d) all pregnant women in antenatal clinics of my ministry;
- (e) prisons inmates, and
- (f) migrant workers.

(ii) Sensitisation programmes have been put in place to encourage the population at large to come forward for HIV testing. Scroll messages are regularly displayed on MBC Television to encourage the population to come forward for testing. Furthermore, since 16 January 2018 my Ministry has started HIV testing around the island through a mobile caravan six full days per week and as at date, 2500 tests have been done. For only last year, a total number of HIV tests carried out was 110,720.

(iii) Officers of my Ministry are also sensitising the population on a regular basis through programmes organised by MBC as well as private radios. Pamphlets, posters and flyers are distributed among the key population and the population at large on the modes of HIV transmission, prevention measures to be taken and services available in our centres.

(iv) A hotline (2123224) is also available to the public every day from 09 a.m. to 10 p.m.

One of our strategies to reduce the transmission of HIV is by encouraging the key population and population at large to use condoms. In this respect, condoms are being distributed to the key population during the sensitisation programmes as well as during testing campaigns and in all our Centres. Condoms are also provided by my Ministry to all NGOs engaged in the fight against HIV to be given to their clients.

I am tabling a document comprising all the prevention, awareness and sensitisations campaigns carried out and the number of persons reached in each group from 2013 to 2017.

VACOAS DETENTION CENTRE – DETAINEE K. L. - INQUIRY

(No. B/466) Mr G. Lepoigneur (Fifth Member for Beau Bassin & Petite Rivière) asked the Rt. Minister Mentor, Minister of Defence, Minister for Rodrigues whether, in regard to the Vacoas Detention Centre, he will, for the benefit of the House, obtain from the Commissioner of Police, information as to if detainee K. L. was allowed to leave same on or about 23 April 2018 and, if so, indicate if –

- (a) an inquiry is being carried out thereinto and, if so, by whom;
- (b) the footage of the CCTV Surveillance System in relation thereto has been secured, and
- (c) consideration is being given for a thorough security audit thereof.

Reply: On 30 March 2018, ADSU arrested K. L. at Triolet in connection with 1.1 kg of synthetic cannabinoid suspected to be used in the manufacturing of synthetic drugs. Several other items comprising among others, green tea, cernal acetone and test benzene, a sum of about Rs300,000 as well as a car of make BMW, model M6 were secured.

On 02 April 2018, the suspect was made to appear before the District Court of Pamplemousses and the under mentioned provisional charges were lodged against him -

- (i) Drug dealing with aggravating circumstances;
- (ii) Holding materials for the purpose of using them for the unlawful production of dangerous drugs, and
- (iii) Money laundering.

He was remanded to Police cell and detained at Vacoas Detention Centre.

As K. L was involved in a high profile drug case, ADSU gave strict instructions to the Police Officers posted thereat that no person, except his legal adviser, should be allowed to visit or communicate with the detainee.

I am informed by the Commissioner of Police that on 23 April 2018, K. L. was not allowed to leave the Vacoas Detention Centre. However, as per CCTV footages secured by Central Criminal Investigation Department (CCID), there is indication that K. L. was wrongfully allowed to leave the detention centre by some officers posted thereat.

In view of the seriousness of the incident, the CCID is carrying out an in-depth enquiry into the matter.

Regarding part (b) of the question, in the course of the enquiry, the CCID has secured the CCTV footages of Vacoas Detention Centre Surveillance System from the date K. L. was detained thereat, that is, as from 31 March 2018 up to 08 May 2018.

With regard to part (c) of the question, a thorough security audit at Vacoas Detention Centre is not warranted as all safety and security aspects as well as the recommendations of National Human Rights Commission have been taken into consideration whilst designing the Centre. The security measures comprise among others, CCTV Cameras which are permanently monitored by operators, access control and physical presence of Police on sentry duties over the detainees. The security in place meets the operational requirement at

Detention Centres. In fact, it is to be pointed out that this unwarranted occurrence has come to light through the viewing of the CCTV footage of the existing security system.

The main factor of this occurrence appears to be related to the integrity of those Police Officers working thereat rather than the security features of the Centre.

As regards the enquiry underway, Police Officers concerned with the incident have been interrogated by the CCID and an interim report was forwarded to the office of the Director of Public Prosecutions (DPP) on 18 May 2018 for advice.

On 21 May 2018, the DPP has advised that the two detainees, namely K.L. and S.D. as well as three Police Officers, namely, PC 8981, PC 2817 and PC 11320 be provisionally charged for the offence of Conspiracy to do a wrongful act in breach of Section 109 (1) of the Criminal Code (Supplementary) Act.

Consequently, the abovenamed persons are appearing in the District Court of Curepipe today on a provisional charge of conspiracy against them.

Moreover, necessary procedures are being initiated for the interdiction of the three abovenamed Police Officers.

LA MARIE TREATMENT PLANT – UPGRADING

(No. B/467) Mr A. Ganoo (First Member for Savanne & Black River) asked the Deputy Prime Minister, Minister of Energy and Public Utilities whether, in regard to La Marie Treatment Plant, he will, for the benefit of the House, obtain from the Central Water Authority, information as to –

- (a) the reasons for the delay in the completion of the upgrading thereof, indicating –
 - (i) the expected completion date thereof;
 - (ii) the contract value thereof;
 - (iii) the estimated cost overrun thereof, and
 - (iv) if the contractor has abandoned the site, and
- (b) if treated water thereat is being blended with raw water from the Mare aux Vacoas Dam and, if so, why.

(Withdrawn)

WATER SUPPLY– UNTREATED WATER

(No. B/468) Mr A. Ganoo (First Member for Savanne & Black River) asked the Deputy Prime Minister, Minister of Energy and Public Utilities whether, in regard to water supply, he will, for the benefit of the House, obtain from the Central Water Authority, information as to if consumers in certain regions are being supplied with untreated water and, if so, indicate the –

- (a) number thereof region-wise, and
- (b) measures being envisaged to address this problem.

(Withdrawn)

**MINISTRY OF HEALTH AND QUALITY OF LIFE – MEDICAL
SUPERINTENDENTS, SPECIALISTS/SENIOR SPECIALISTS – VACANCY**

(No. B/469) Mr S. Abbas Mamode (Fourth Member for Port Louis Maritime & Port Louis East) asked the Minister of Health and Quality of Life whether, in regard to the posts of Medical Superintendents, Specialists/Senior Specialists, known as Consultants and Consultants-in-Charge in his Ministry, he will –

- (a) give a list thereof, indicating in each case the –
 - (i) posting;
 - (ii) field of specialization, and
 - (iii) date of appointment thereof, and
- (b) state the number of existing vacancies therefor, indicating in each case the –
 - (i) field of specialization;
 - (ii) date of vacancy, and
 - (iii) date of filling thereof.

Reply: I am informed that the details sought for are being compiled and will be tabled as soon as possible.

TROU D’EAU DOUCE – COMMUNITY CENTRE

(No. B/470) Mr K. Tarolah (Third Member for Montagne Blanche & GRSE) asked the Minister of Gender Equality, Child Development and Family Welfare whether, in regard to the Community Centre at Trou d’Eau Douce, she will state if –

- (a) it is operational and, if not, why not, and

- (b) her Ministry had provided any alternative venue to the members thereof to carry out their activities.

(Withdrawn)

BEL AIR – OPEN UNIVERSITY CAMPUS – ACTIVITIES

(No. B/471) Mr K. Tarolah (Third Member for Montagne Blanche & GRSE) asked the Minister of Education and Human Resources, Tertiary Education and Scientific Research whether, in regard to the former Open University Campus at Bel Air, she will, for the benefit of the House, obtain therefrom, information as to –

- (a) the institution making use thereof, indicating the type of activities being carried out thereat, and
- (b) if same can accommodate the MITD branch.

(Withdrawn)

**CAMP DE MASQUE – COMMUNITY HEALTH CENTRE –
CONSTRUCTION**

(No. B/472) Mr K. Tarolah (Third Member for Montagne Blanche & GRSE) asked the Minister of Health and Quality of Life whether, in regard to the proposed construction of a new Community Health Centre at Camp de Masque, he will state where matters stand.

(Withdrawn)

**PRISONS – DISCHARGED PERSONS’ AID COMMITTEE –
COMPOSITION**

(No. B/474) Mr V. Baloomoody (Third Member for GRNW & Port Louis West) asked the Rt. hon. Minister Mentor, Minister of Defence, Minister for Rodrigues whether, in regard to the Discharged Persons’ Aid Committee, he will, for the benefit of the House, obtain from the Commissioner of Prisons, information as to the composition thereof, indicating the –

- (a) names and qualifications of the members thereof;
- (b) date on which it last laid a Report on the Table of the Assembly, and
- (c) actions taken to ensure that the discharged detainees are completely rehabilitated and provided with all the required assistance to return to normal life.

(Withdrawn)

CEB - ELECTRICITY TARIFFS

(No. B/476) Mr A. Ganoo (First Member for Savanne & Black River) asked the Deputy Prime Minister, Minister of Energy and Public Utilities whether, in regard to the Central Electricity Board, he will, for the benefit of the House, obtain therefrom, information as to –

- (a) the quantum of profits thereof as at end of year 2016, 2017 and since January to May 2018, and
- (b) if a review of the electricity tariffs is being envisaged.

(Withdrawn)

MAURICE ILE DURABLE FUND – REVOCATION

(No. B/477) Ms M. Sewocksingh (Third Member for Curepipe & Midlands) asked the Minister of Social Security, National Solidarity, and Environment and Sustainable Development whether, in regard to the Maurice Ile Durable Fund, he will state the amount of funds available thereunder as at to date, indicating the amount contributed thereto from the price of diesel and petrol by the State Trading Corporation, since July 2017 to date and disbursed therefrom, indicating the list of projects –

- (a) Undertaken, and
- (b) earmarked for implementation thereunder.

Reply: I wish to refer the hon. Member to the reply I made in this House to PQ B/496 on 04 July 2017.

The Maurice Ile Durable (MID) Fund is no longer operational and has been revoked by the Finance and Audit (Maurice Ile Durable Fund) (revocation) regulations 2017 which was gazetted in GN No. 173 of 2017 on 02 September 2017.

ELECTRICITY PRODUCTION – BAGASSE - PRICE

(No. B/478) Ms M. Sewocksingh (Third Member for Curepipe & Midlands) asked the Minister of Agro-Industry and Food Security whether, in regard to the price of bagasse that goes in the production of electricity, he will state if consideration is being given for an increase thereof.

Reply: I have been informed by the Central Electricity Board that no increase is being envisaged as regards the price of bagasse that goes in the production of electricity, at this point in time.

CITÉ ANOUSKA, 16ÈME MILLE - BUS SHELTER

(No. B/479) Ms M. Sewocksingh (Third Member for Curepipe & Midlands) asked the Minister of Public Infrastructure and Land Transport whether, in regard to the proposed construction of a bus shelter in Cité Anouska, at 16ème Mille, he will state where matters stand.

Reply: I am informed that approval was conveyed to the District Council of Grand Port for the installation of a bus shed at Cité Anouska at 16ème Mille since September 2015.

However, due to unavailability of funds, the Council was not able to proceed with the installation. Negotiations were subsequently held with the Road Development Authority for the provision of a bus shed.

I am informed that the Road Development Authority has recently agreed to provide a bus shed to the District Council and the works for the installation have been completed.

BAGASSE TRANSFER PRICE

(No. B/480) Dr. A. Boolell (Second Member for Belle Rose & Quatre Bornes) asked the Minister of Agro-Industry and Food Security whether, in regard to the Bagasse Transfer Price, he will state if a revision thereof is being envisaged.

Reply: No revision to the Bagasse Transfer Price is envisaged at this stage.