

THE REGENERATION OF KISUMU

A MANIFESTO

By

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Gubernatorial Aspirant 2022

A Visionary Leader

VISION

A glorious county where every individual feels the presence and essence of a devolved government.

MISSION

To slay the tricephalic dragon of Poverty, Ignorance, and Disease and restore Kisumu's erstwhile glory.

KEY PILLARS

Stewardship

Agriculture

Healthcare

Education

Jobs

SLOGAN

A Visionary Leader

PREFACE

"Who of you is left that saw [Kisumu county] in its former glory? How does it look to you now? Does it not seem to you like nothing?" What happened? Over the past century, and by dint of both force, strategy, and stratagem, Kisumu has been the victim of circumstances—chiefly colonization, political marginalization, and bad governance. It's like Israel during Joel's time after the palmerworm, locust, cankerworm, and caterpillar had devoured it. Ten years have elapsed since devolution, yet the county remains 'a scar on the conscience of the world' as Tony Blair once observed.

And Kisumu continues to punch below her economic weight. The 'Atieno' in Kisumu who thought that upon devolution she would have potable water tapped to her home, still endures endless trips to the river to fetch silty water. The young people in Kisumu who hoped to secure decent jobs in the new constitutional dispensation now have no choice but to worship those who give them wheelbarrows. Indeed, there's a need to decolonize the mind (Ngugi wa Thiong'o). Living from hand to mouth is now the norm; the majority of people survive on less than one dollar a day; farmers are ever lamenting; and insecurity is now nearing a feverish peak. If you asked Jaramogi, he'd tell you that it's *Not yet Uhuru* for a county that still contends with such basic issues.

But in my view, all these challenges are spewed upon us by a giant tricephalic dragon whose three heads are **Poverty, Ignorance, and Disease**. Founding fathers of our nation fought against the giant but with little success. A good tidings is that devolution has pushed the tricephalon into a smaller terrain. However, there is a glaring lack of bold, swift soldiers to deliver the fatal blow. My 'big brothers', who have been in the battlefield for long, have somehow gotten used to the monster's derision. Some of them do not have any visions for the future of Kisumu; so, they see no need to engage this dragon. A number of them have become *comprador bourgeoisies* and fifth columnists. And those who once had realistic dreams have since lost the spirit of God and have acquired the evil spirits of compromise, conformity, conniving and corruption. Others seem to possess rose-colored glasses through which they view Kisumu and marvel, *'What a beautiful county!'*

So, *in whose hands are we safe?* This question shows that Kisumu ‘now recognizes her anomalous state and desires a change’ (Pixley, 1906). And it is ‘for such a time as this’ that the county needs **A Visionary Leader**—a man who is bold enough to face the giant and slay it; one who fears God and eschews all manner of corruption. It’s against this backdrop that I present myself for election as the Governor for Kisumu County.

Having been ‘privileged’ to experience the scourge of both poverty, ignorance, and disease simultaneously, *“I know the feel of thick calluses on the bottom of shoeless feet. I know the bite of the cold breeze that slithers through a draughty house. I know the weight of constant worry over not having enough to fill a belly or fight an illness... and I know how extremely expensive it is to be poor... poverty is brutal, consuming and unforgiving. It strikes at the soul”* (Charles Blow, 2011). Fortunately, many people in Kisumu enjoy this ‘privilege’. That is why I deem it **urgent** that we eliminate these three ills. And who is better positioned to contend against the ‘dragon’ than one who understands its ways wiles so well? Let me submit to us that we are destined to fail if we continue to elect politicians who don’t understand what it means to be poor in this county. Unfortunately, *“all of us will pay a heavy price for that failure”* (Blow 2011).

In this blueprint, I outline the most unconventional, yet the simplest and the most practical method to fell the giant. And I’m certain that the colossus will fall to my stone-sling strategy. I have a clear plan on how to (1) revamp the healthcare sector, (2) revive agriculture, (3) revitalize education, (4) create 11,000 jobs annually, and (5) steward resources. Within the first 1,000 days of my tenure, I shall have eradicated poverty. Elimination of ignorance and diseases will be loading at 85% by that time. As you are about to see in this document, my approaches are feasible, simple, and sustainable. From history, there’s no iota of peradventure on the practicality of these unpopular methods: The late former president of Malawi, Bingu wa Mutharika demonstrated, between 2004 and 2007, that it’s possible to decimate hunger; Thomas Sankara made it clear that Africa

has the wherewithal to eradicate disease and poverty; Tom Mboya showed us the way to follow when we want to eliminate ignorance; Ethiopia's, Meles Zenawi set the precedence for young people to rise and restore sanity in leadership. Emperor Menelik II demonstrated that no enemy can defeat us when we unite; and China has also illustrated that when we know what we want, we can become a force to reckon with on a global pedestal. Just one thing is needed—a **visionary leader**.

So, the 09/08/22 election is an opportunity to choose a *Visionary leader*—one who identifies with our problems; one who knows where we should be; and one who has the willpower to guide us there. Would Kwame Nkrumah have been here; he would have advised us to **act now!**... to choose a *visionary leader* right now! Today, if you hear [Nkrumah's] voice reverberating through the vicissitudes of time saying, "Let us come out of this [election] with a visionary leader, or else [Kisumu county] will never realize her full potential", harden not your heart.

Thank you.

Signed 

Dr. Mandela B. Ogada

A Visionary Leader



REVAMP HEALTHCARE

Background and Current Situation

Right to life, as enshrined in article 26 of the 2010 Constitution of Kenya, is unalienable. According to Professor Lumumba PLO, governments are instituted among men to midwife the process of enjoyment of these rights. And a functional healthcare system is the *conditio sine qua non* in this quest. No wonder the United Nations (UN) in 2015 formulated the SDG 3—Good Health and Well-being—that seeks to “*Ensure healthy lives and promote well-being for all at all ages*”. According to the World Health Organization ([WHO](#)), almost all other SDGs are related to health. Health is also a key sector in the Social Pillar of Kenya’s Vision 2030. Africa’s Agenda 2063 (goals 1&3) also puts a premium on nutrition, health, and wellbeing for all. Cognizant of these, President Uhuru Kenyatta rolled out universal health care (UHC) flagships in various parts of the country, including Kisumu.

However, Kisumu’s healthcare situation remains dire, but tenable. As per the **2019 census**, the county has a **population of 1,155, 574** distributed into **300,745 households**. This population is served by **27 public dispensaries, 16 public health centers, two sub-county hospitals, and one county hospital**. JOOTRH is the nearest referral hospital in the county. Private sector contributes five dispensaries, four nursing homes, and five private hospitals. About two-thirds of the population travel less than five kilometers to the health center, the average distance being six kilometers. Doctor-to-population ratio is 1:44,634 against WHO recommendation of 1:1,000. Similarly, we have fewer nurses in the county (1:2,383) than the 1:120 ratio that WHO recommends. Malaria is the leading cause of morbidity (44.7%), which is normal for a malaria-endemic area. The four leading causes of mortality in Kisumu are HIV/AIDS (23.1%), hypertension (9.3%), and cancer (4.5%)¹. This trend reveals an increase in noncommunicable disease burden. The same study found that noncommunicable diseases contributed a mortality rate of 516/100,000. Communicable diseases, perinatal, maternal, and nutritional causes

¹ Waruru et al. Leading causes of death and high mortality rates in a HIV-endemic setting, Kisumu County, Kenya. Peter Wesley Young. 2021:175.

accounted for 513/100,000. Under-five mortality rate is 74/1000 live births. Two in every 10 children in Kisumu are moderately underweight while 3.3% of this age-set is severely underweight, indicating a degree of malnutrition. Nutritional stunting is at 21.1% and 7.6% for moderate and severe cases respectively, an indicator for long-term nutritional deprivation. Severe wasting affects 2.1% while 13.0% of children show moderate wasting.

To solve these problems, **we need a visionary leader** who understands the nuances of health and healthcare delivery. As a doctor, I'm in a better position to heal Kisumu's health sector. I have it upon valid authority that the most pragmatic approach to healthcare is **from the bottom upwards**. By this I mean that we need to strengthen the lowest level healthcare delivery system instead of focusing only on the referral systems. I studied *Health Systems Management*; so, I understand exactly what should be done with our healthcare system. For some time, I worked at the Kenyatta National Hospital (KNH)— the pinnacle of our Public Healthcare delivery system. This opportunity exposed me to the reality that, no matter how equipped and staffed the referral hospitals are, the healthcare system might collapse if the primary healthcare facilities are inefficient. Hence, the need to strengthen the primary care centers to decongest the referral institutions. I have done a short course on *Patient Safety* at the Institute for Healthcare Improvement (IHI) that has broadened my perspective of healthcare, especially on how the ratio of healthcare professionals to population affects patient safety and other healthcare delivery and outcomes. In campus, I was also a member of the Public Health Committee of the Pharmacy Students of Kenya (KEPhSA) so, and I have a pinpoint focus on public health preservation. I'm enthusiastic about antimicrobial stewardship as the only means to combat antimicrobial resistance. Having been in a number of Multidisciplinary Teams (MDTs); including Pediatric Oncology MDT and Comprehensive Care MDT, I understand the significance of having all cadres at every healthcare delivery unit. I am a herald of the Health Message enshrined in the NEWSTART model. As the Governor, I will use these unique skills, knowledge, and experience to eradicate disease in Kisumu.

My Plan

Preventive and Promotive Health

Individuals: Public Education for All

We have over 1.16 million individuals. These are the atomic levels of our healthcare system. Because knowledge is power, public education is the most promising starting point. Armed with adequate knowledge on their health, individuals will take responsibility for their health by engaging in activities that promote wellbeing and avoiding any activity that's inimical to health. To this end, I will inspire all healthcare professionals within the county to organize barazas where individuals are to be taught how to preserve their health.

Households: Nutrition, Livestock, and SDOHs

Family is the basic unit of every society and Kisumu county has some 300,000 of these units. The impact of SDOHs is greatest in the household. My government will:

- i.* Initiate a housing plan to improve the living conditions of our people;
- ii.* Motivate all households to have at least a pit latrine;
- iii.* Install a sewer system across our villages to eliminate pit latrines;
- iv.* Tap water to every homestead for drinking and other utilities;
- v.* Ensure food security so that our people eat on three plates of balanced diet daily;

Employ competent nutritionists in every dispensary. The nutritionists will educate the people on why we need to eat in three plates instead of one plate and other eating habits to boost immunity and prevent diseases.

- vi.* Educate people on the correct use of medicine to improve outcomes of care and eliminate drug abuse.

- vii.* I will employ competent veterinary officers to treat our livestock and pets. Healthy animals, healthy people.

Livestock and pets are also sources of zoonotic diseases such as hydatidiform diseases caused by Echinococcus granulosus.

Age-specific

UN-SDG 3 seeks to “ensure healthy lives and promote well-being for all **at all ages**”, and in article 26(2) of the 2010 CoK, ‘life begins at conception’. That’s where I shall begin.

Prenatal: Improve prenatal care, which is a very critical developmental stage. In so doing, we shall minimize congenital anomalies and ensured normal birthweight. We also

minimize rates of stillbirths. To this end, I will employ qualified obstetricians/gynecologists, as well as nutritionists. It shall be mandatory for employers to give adequate leave for expectant employees.

0-5 years: Reduced the under-five mortality from 74/1000 at most 24/1000 which is lower than the UN target of 25/1000 by 2030. To achieve this, I will (i) employ pediatric specialists in the dispensaries to optimize care for children, (ii) eliminate mother-to-child transmission of HIV, (iii) vaccinate all children against malaria, (iv) promote breastfeeding for the recommended duration, and ensure early detection of diseases like diabetes, asthma, autism, dyslexia, among other conditions through partnership with relevant organizations such as the [Life for a Child Program](#) driven by my senior colleague Dr Aywak D. of KNH.

5-12 years: Nutrition is of greatest significance during this period. Determinants of sound health at this age include height for age, weight for age, and weight for height. The majority of children at this age live in households. As already highlighted, we will (i) **ensure food security for every family**, consequently eliminating malnutrition. In addition, we will (ii) **provide lunch for all children in public primary schools**. My government will also (iii) **ensure that those in boarding schools get proper nutrition** in three plates daily. We are totally eliminating the unhealthy culture of 'eating in cups'.

13-19 years: At this age, we begin to consider mental health, menstrual health, and sexuality. Again, knowledge is an all-empowering tool. I will (i) **employ counselors and psychologists to educate both parents and teachers** on how to handle the nuances of adolescence. These professionals will also (ii) **educate the teenagers in schools and ensure that the young ones develop the right identities** during this period of identity crisis. I will (iii) **provide sanitary towels to all girls** in this age bracket. Teenagers also struggle with sexuality, which ends up impacting their mental health. My plan is to **have professionals offer sex education during holidays**, focusing on HIV and other venereal diseases. With such guidance, teenagers will be able to embrace the changes that occur in their anatomy, physiology, and psychology.

20-60 years: these are now individual adults who benefit from the public education and household-centered programs already discussed. Additionally, we will **have relationship advisors and professional marriage counselors in every ward to prevent/handle disputes** that occur in relationships and marriages. Human relationships have a significant bearing on the body's immunity. Thus, healthy relationships are essential for elimination of disease.

60 years and older: Older adults are a valuable asset to our societies because they guide the younger generation and preserve our social order. As we tend towards a developed status as a country, our life expectancy has risen to 67 years, and we expect the population of geriatrics to rise steadily. I shall (i) **initiate monthly medical camps for geriatrics at the villages**. The village council will facilitate our efforts to this end. Having strengthened our family units, older adults will be enjoying the unique social connection with their kin. Africa Agenda 2063 aims at restoring African cultural values and social ethos. And studies suggest that such social support systems boost immunity and enhances longevity. *[I remember as a child how happy our grandmother was whenever we gathered around her to listen to stories. We would actually sleep at her house just to hear more tales. Our mother could send us to take food to other elderly people in the village. And sometimes we would be told to just go and visit another elder who was staying alone in his home, and he would be so jolly. We cut their nails, massaged their feet, and fetched water for them whenever necessary].* Such a cohesive social fabric is what I envision for the new Kisumu. We need to (ii) **restore the connection between children and elders** to preserve the wellbeing of both ages. My government, through the village councils, will (iii) **organize cultural events where our senior adults will guide the young** and take us through a historical panorama.

Disease-Specific Plans

Malaria

Malaria remains a major cause of morbidity across all ages, and a cause of mortality in children under five years. A study conducted at the Kisumu County Hospital showed

disparities in malaria-related hospitalizations across the year². **Based on [such evidence], my government will optimize interventions.** I will **ensure that all children under five years are vaccinated against malaria**, and that **all people have access to treated mosquito nets**. My government will also **initiate market surveillance, in conjunction with the PPB and PSK, to weed out counterfeit antimalarials**. *Malaria is one of the deadliest infectious diseases in Africa, and it causes up to 120,000 preventable deaths each year due to counterfeit medicine* ([Wall, 2016](#); Cartwright & Barić, 2018³). For example, in 2012, 33 million doses of counterfeit antimalarial-ACTM were found in Angola in a shipment from China ([WHO, 2017](#)). We will seal all loopholes through which such falsified medicine enters the county.

HIV/AIDS

It's unacceptable for HIV to be among the leading underlying causes of death in Kisumu today⁴. Current aim of the [UNAIDS](#) is to achieve 90% testing, 90% medication, and 90% viral suppression. My government will (i) **intensify campaigns against HIV to achieve these goals**. We will also partner with key stake players to (ii) **eliminate vertical transmission of the infection**. (iii) **Conduct vigorous public education and awareness campaigns to empower people to act against this infection**.

Cancer

Cancer is a preventable noncommunicable disease. For instance, throat cancer, colorectal cancer, and cancer of the cervix are preventable through lifestyle modification. When detected early (stage 1 or 2), all cancers are treatable without much harm to the patient or damage to their pockets. My plan is to **employ physicians and Nutritionists at the dispensaries will help in prevention and early detection of cancers across all ages**. In addition, I will **construct a chemotherapy center for the management of malignant cases**.

² Scheffey, Lauren. "Kisumu County Hospital Patient Demographic Analysis: Looking Toward Universal Health Coverage." (2018).

³ Cartwright, Robin, and Ana Barić. *The rise of counterfeit pharmaceuticals in Africa*. enact, 2018.

⁴ Waruru et al. Leading causes of death and high mortality rates in a HIV-endemic setting, Kisumu County, Kenya. Peter Wesley Young. 2021:175.

Other NCDs

The approaches discussed above will ensure that our people don't develop other NCDs such as diabetes, hypertension, or dyslipidemias.

Curative Health

Healthcare centers

In coordination with the MCAs, we will **construct five more dispensaries in the county**, giving priority to those wards with fewer centers. We will also **revamp the existing dispensaries**.

Community pharmacies are also healthcare centers that can augment dispensaries effectively. So, in conjunction with the PPB and PSK, I will **make it easy for Pharmacists to operate premises in every corner of the county**. To deliver optimum care to the people, my government together with the aforementioned professional and regulatory bodies, will **make it mandatory for every community Pharmacy to employ a registered pharmacist**. Small chemists might have to merge or close down. The President recently assented to a bill barring anyone who is not a pharmacist from selling any medicine. This is for the good of the people; and my government will liaise with the PPB and PSK to ensure that the requirement is implemented to the letter.

Drugs and medical equipment

SDG 3.8 seeks to ensure “access to safe, effective, and affordable essential medicines and vaccines for all.” **Every dispensary will have adequate medicine for all at all times**. At least one MRI machine, X-ray machine, Echo, and all the assortment of diagnostic equipment will be installed in every dispensary.

Healthcare personnel

Every year, I shall **employ 3 physicians, 2 medical officers, 3 pharmacists, 2 pharmaceutical technologists, 2 nutritionists, 2 clinical psychiatrists, and 2 laboratory technologists and 4 nurses (a total of 20 personnel) in each dispensary**. The contract will last for one year, and will be renewable based on achievement of some of the goals discussed earlier in this section. We have 43 centers currently. So, I shall have created 860

jobs for medics every year. In addition, I will **employ one specialist for every two centers to offer consultation, guidance, and special attention.** These specialists will be reimbursed based on either Fee-for-Service, Capitation, or Value-based-service depending on the agreement and the nature of consultation. For example, a physiotherapist is better paid using a value-based approach than the FFS model.

Budget

Annual wages will go up by Ksh. 200,000,000; Medical equipment Ksh. 300,000,000 and will go up by Ksh. 129,000,000 every year to purchase two key equipment for every primary care facility; Medicine Ksh. 250,000,000; and estimated miscellaneous of Ksh. 150,000,000. Veterinary services Ksh. 100,000,000 per year. Piping of clean, safe water to every homestead within 300 days Ksh. 1.0 billion; My government will partner with private investors to facilitate garbage collection from across the county. Environmental conservation efforts such as tree planting and floods management will cost 0.2 billion annually. The current expenditure, which has majored on the KCH and JOOTRH is Ksh. 600,000,000 (Kisumu County Budget 2018) and will be subject to modification based on situation analysis. The total budget for health will be Ksh. 3.0 billion for the first 365 days and 2.0 billion for subsequent years. With this, we shall become the first county to achieve the Abuja Declaration that at least 15% of budget will be spent on health.

Source of Funds

Increase our own source revenue to at least 50% of our capacity of 5 billion, utilize the equitable share from the central government (which we expect to increase in the new regime), and seal loopholes to prevent loss of funds to corruption. For example, our deficit of about 1 billion is less than what the previous governments could not account for in 2015 alone.



REVIVE AGRICULTURE

Background

Agriculture is the backbone of our economy, fact! But the tragedy of Africa, according to [Prof. Ali Mazrui](#), is that Africa produces what it does not consume and consumes what it does not produce⁵. Yet, Agriculture remains our best bet against poverty and hunger. To become a great people, and to be reputed as such, we must invest heavily in all forms of agriculture (cash crop cultivation, food crop farming, livestock rearing, and fisheries). My government shall revive the agriculture sector with the aim of feeding our people. We will only sell our surplus.

My Plan

First, I will **set up a fully-operational agriculture office in each ward**. Every office will have two agricultural economists, three extension officers, five veterinary officers, three aquaculture specialists, and a team of 10 interns. I will also provide five motorbikes for every office. These officers will carry out soil sampling and determining which crops are best suited for each area. Consequently, they will conduct seminars to educate people on how to do smart agriculture.

I will also hire five expatriates from Egypt and Israel to offer consultancy services in the short term. For sustainability, I will sponsor 10 students to Egypt, Israel, and Netherlands to further their studies on agriculture and then render quality services to the county.

Farming

The county government will **supply farmers with seeds, fertilizers, and pesticides as per the professional advice from the agricultural offices**. We will also partner with the private sector to provide tractors for hire.

⁵ Mazrui, Ali Al'Amin, and Hasu H. Patel, eds. *Africa: the next thirty years*. Friedmann, 1974.

Priority areas will include rice farming, sugarcane farming, coffee, maize, and sorghum. Cotton has also done well in the past, and my government will revive it after 3 years. The three years lag period will be necessary to restore the KICOMI industry and to instill the right mindset in our people through public education.

Further my government will **repair the existing feeder roads and construct new ones**. I shall have tarmacked five roads in each ward by the end of 1,500 days in office.

Livestock, Poultry, and Beekeeping

Based on research evidence, our people will specialize in keeping only one type of animal that's best suited for their areas. *Someone who keeps chicken, for example, will not rear goats.* This will ensure that we become our own market for our produce as farmers buy from each other. Alternatively, a region that has specialized in fish farming will not participate in maize cultivation. The maize farmer will buy fish from the fish farmer and vice versa. Consequently, we shall have a ready market for all our produce. Parts of the county which are semi-arid and not possible to irrigate will venture into beekeeping.

Fishing and Aquaculture

Fishing is one of our oldest economic activities. It's engraved in our societal ethos as river-lake Nilotes; so, our people have great passion for it. In countries like Japan, the fishing industry is among the top-five revenue earners. Kisumu county's fishing industry could reach the level of these developed countries if she invests adequately in Lake Victoria. At the moment, the fishermen are grappling with low population of fish, water hyacinth that has significantly hindered sailing, a lack of ready market due to absence of a fish-processing plant in the region, and poor-quality fishing gear. Most people have developed a considerable degree of apathy towards fishing. Here is what my government will do:

- i. **Hire Three experts** (from Japan if we will not find any in Kenya or in Africa) for a period of 5 years. These experts will educate fishermen on the most appropriate and sustainable fishing methods. They will also offer guidance on fish farming, fish processing, and marketing with a global picture in mind. The professionals will work together with the other Agricultural officers at the Agricultural offices across the county. Within the five*

years, Five experts sponsored by my government shall have completed their studies and ready to serve the county.

ii. Permanently solve the issue of water hyacinth. I see this weed, not as a threat, but as a great opportunity with the potential to create thousands of jobs. I shall delve deeper into this matter under the Job creation agenda.

iii. Establish a fish processing industry in the county within the first 3 years in office. This will give an impetus to construct more fish ponds. Improving the quality of our fish in this manner will also make it easier to launch out into markets beyond our borders. Kisumu shall not export raw fish.

Budget

- ❖ Consumables for 7 agricultural offices =Ksh. 7m
- ❖ Hiring 4 experts @ ksh 2.5m per year = 10m
- ❖ Sponsoring 4 students for further studies @ 2.5m per year = 10m
- ❖ Salaries for Agricultural office employees: 10m
- ❖ Seeds and manure subsidy: Ksh. 50m annually
- ❖ Managing water hyacinth to create Jobs (details in the fourth agenda) = Ksh. 2.0 billion in the first one year.
- ❖ Fish processing plant in the second year ksh. 1.5bn
- ❖ Cotton processing plant construction and operationalization in the Third year: Ksh. 1.4 billion

Total: Ksh. 5 billion in first financial year and 3 billion annually for subsequent years

Funding

Increase our own source revenue to at least 50% of our capacity of 5 billion, utilize the equitable share from the central government (which we expect to increase in the new regime), and seal loopholes to prevent loss of funds to corruption.



EDUCATION

Kenyan education sector has had tremendous improvement since 2003 and I must commend the current and past regimes for such an achievement. County government investment in ECD programs have also begun to yield fruits for the sector.

However, there are still some *little foxes* that we must *catch* before they *ruin* our education *vineyard*. These include poor nutrition, motivation for teachers, sheer lack of exercise books, and lack of adequate school fees to facilitate transition from primary school to secondary school. Because “education is the passport to the future, for tomorrow belongs to those who prepare for it today.” ([Malcolm X](#)) we must invest adequately in it. Here is what I will do when I become the governor;

Nutrition and sanitation

My government will **provide quality lunch for all children**. This will eliminate the need of children to buy candies and mandazis over break time, which they usually handle quite unhygienically. Our **mothers** who usually sell candies will be **employed as kitchen staff for the schools**.

For additional sanitation, my government will **eliminate pit latrines from all schools**. The county will procure exhaustor services to manage solid wastes. Schools that don't have water will also receive **tapped water** from the county government as part of the disease-eradication project.

Motivation for teachers

We have had cases of children dropping out of primary school because their parents could not raise the said fees. First, primary school teachers must recognize that it's very wrong to force parents to pay any extra coin when the government has done everything necessary to provide free education. Secondly, we must damage this ignorance through

logic: who motivates doctors to work in hospitals, for example? Finally, my government will **provide adequate lunch for teachers and abolish motivation fees.**

Lack of [adequate] school fees

Kenya has a lot of funds allotted for school fees. However, this money exists in multiple coffers as small portions. At the county level, for example, the office of the governor has a kitty, the office of women rep has a kitty, the office of MCA has a kitty, the MP has a kitty, and senators are also craving a share of the kitty. And the school fees fund has now become a campaign tool.

My government will consult with relevant stakeholders to **establish one central kitty that won't be politicized.** Depending on the parents' income status, students will have 100% or 75% or 50% or 25% or 0% of their fees paid from the kitty. This will be more impactful than the bursary system whereby some students currently get as little as five thousand only.

Tertiary education

My government will lobby for a University College to be established in the county. We will also create an enabling environment for private universities establish branches in the interior parts of the county. Additionally, my government will strengthen the existing TVETs and, where there is need, establish new ones.



CREATE 11,000 JOBS ANNUALLY

Once I become the governor, I will create at least 11,000 jobs every year. Of this figure, 75% will be reserved for *bona fide* members of Kisumu County. The remaining 25% will be for expatriates from neighbouring counties, other African countries, and those from other continents in that order of preference.

Health Sector 3,200 jobs

I will employ **1,000 doctors** (MOs, Pharmacists, and Dentists) every year until we achieve the recommended ratio of doctor/patient ratio.

I will also employ **2,000** nurses, Nutritionists, community health workers, Nutritionists, COs and Phamtechs every year until we achieve the recommended nurse/patient ratio.

Exhauster services will attract **five** companies, each employing at least 20 people. This will contribute **100 jobs**.

Supply of medicine and equipment will be done by qualified pharmacists within the county. This space is large enough to accommodate **100 pharmacists**.

Agriculture Sector 2,200 jobs

About **300** people will participate **in farming** as an economic activity, **150** people will specialize **in fish farming**, **150** will specialize **in livestock rearing**, and **100** will take up **poultry farming**.

Two water hyacinth processing plants will be established. Each plant will employ 250 people, leading to a total of **500 jobs**.

Cotton processing plant will employ **200 factory workers**.

The **fish-processing plant** will employ another **200 people**.

Agriculture specialists will take up **100 jobs** at the Agricultural offices.

About **100** people will specialize in **Fishing** as a viable economic activity.

Tractor services will be provided by 20 companies, each employing five people. This will create a total of **100 jobs**.

Supply of seeds, fertilizers, animal feeds, and veterinary products is a space large enough to create **300 jobs**.

Education Sector 4,500 jobs

Every **primary school** (Kisumu has some 675 primary schools) shall employ five kitchen staff, leading to a total of **3,500 jobs**.

Supply of foodstuff to schools will be done by business people from the immediate community. This space is large enough to accommodate **1,000** people. And they will have to source their supplies from local farmers within the county.

Commerce 1,000 jobs

My government will **level the business landscape for all**. We shall **offer sufficient education and training** to those who wish to do business with on the county. The county government shall also **repair all feeder roads to spur development at the grassroot level**. Such an ease of doing business will attract at least 500 local investors and 10 foreign investors every year. These foreign entrepreneurs shall create some 500 jobs annually.

Miscellaneous Jobs 100 jobs

Another 100 jobs are expected to emerge from any of the above sectors or from other undefined sectors.



STEWARDSHIP

Stewardship entails (1) **protecting** what we have against unnecessary loss; (2) **multiplying** it to fill our coffers; and (3) putting our resources to **profitable** and **accountable** use. *The people whom we have been electing don't understand their roles as stewards.* That's why **Kisumu county currently loses billions to corruption, collects only 20% of her revenue capacity, and undertakes projects that don't profit the people, not to mention the sheer lack of accountability in such projects.** Poor stewardship of the environment has also caused the county to lose her natural biodiversity on both terrestrial and aquatic spaces. Hence, it's clear that *the lack of proper stewardship is the fuel that sustains both poverty, ignorance, and disease.* By electing me as the Governor, you will be putting a competent steward in charge of the county's resources. And this is how I will take care of your resources:

End Corruption

Open tender process will be used to select qualified bidders for each tender. **Payment** for tenders will be settled **within 2 months** of delivery. There will be a central registry for all suppliers in every financial year.

My government, in conjunction with the Judiciary, will **prosecute those suspected of corruption.** All **cases** of corruption filed during my tenure will be **concluded within 3 months** and those convicted and found **guilty will be jailed** without parole. Additionally, their **assets** will be **confiscated** to refund the money they stole and to take care of legal costs incurred.

Environment

My government will set aside **one day every month** when all citizens engage in **general cleaning** of markets and urban centers.

I will **protect forested areas** like Anding'o hills. In addition, my government, through the agriculture sector, will **promote agroforestry** in all regions within the county.

My government will put **strict measures** in place **to curb pollution** of lake Victoria. These include a ban on raw waste from factories, trapping plastic waste at the mouths of all rivers, and the removal of water hyacinth.

Own source Revenue collection

Kisumu has a revenue potential of Ksh. 5.3 billion annually of which only 17% has been harnessed ([UNHABITAT](#) 2019). My government will increase this potential to at least Ksh. 10 billion. I will also increase the exploitation of our revenue potential by 20% every year.