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Chair

Mr. Michael Levitt

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•(1305)

[English]

The Chair (Mr. Michael Levitt (York Centre, Lib.)): I call the meeting to order.

Good afternoon, everyone.

Before we get started and I do an introduction, I want to acknowledge the Honourable Irwin Cotler, the chair of the Raoul Wallenberg Centre for Human Rights, a former member of this subcommittee, and a true hero of human rights in the Canadian Parliament.

Today's meeting of the Subcommittee on International Human Rights is a special briefing on allegations of forced harvesting and trafficking of organs in China. This is not a new topic for this committee, as we have heard about it in previous Parliaments, but we look forward to an update here today.

I'd like to welcome our witnesses: the Honourable David Kilgour, former MP, minister of state, and colleague, and an occupant of this particular subcommittee chair in past Parliaments. David Matas, lawyer and human rights activist, will be joining him to testify here today.

Both witnesses have spent 10 years working on this subject, testifying before numerous legislative bodies and committees, including this subcommittee on several occasions. They have released multiple reports on organ harvesting, the most recent earlier this year.

I'd like to invite our witnesses to begin with their opening statements, and from there we can move on to questioning.

Thank you very much.

[Translation]

Hon. David Kilgour (As an Individual): Thank you, Mr. Chair.

My thanks to all your colleagues for inviting us to appear before you.

I am going to make my remarks in French, but I would like to start with a bit of humour.

[English]

I asked all the members around the table if Irwin could join us, and I think all of you said yes, but he refused to come. Can you cite him for contempt or something, Mr. Chair?

This is a very unfunny topic, so forgive me for trying to bring in a bit of humour.

As you alluded to, Mr. Chair, the two of us were asked by the coalition to investigate the persecution of Falun Gong in 2006—a long time ago—as volunteers, and to look into some seemingly preposterous allegations that were coming out of China about Falun Gong.

We did two reports. The third one was a book published in 2009 called *Bloody Harvest*.

I hope you have the book. I think we could get you one, Mr. Chair, if you don't.

•(1310)

We concluded that for 41,500 transplants done in the years 2000 to 2005 alone, the only plausible explanation for sourcing was Falun Gong. My colleague, David Matas, can perhaps tell you more about Falun Gong. I'm just trying to skim through this by giving you some of the presumed highlights.

Here are three of the 32 kinds of evidence we found that this was happening. Investigators made calls to many hospitals and detention centres across China claiming to be relatives of patients. We discovered that in about 15 facilities across China, they had Falun Gong organs for transplant available. A number of Falun Gong practitioners who later got out of China told us that they were systematically blood tested in forced labour camps. We knew this couldn't be for their health, because they were being tortured and forced to work under hideous conditions, as I'll mention in a few minutes. We interviewed the ex-wife of a surgeon from Sujiatun District, China, who had told his wife that he had removed the corneas from 2,000 Falun Gong practitioners during a two-year period, 2001 to 2003. He also told her that none of the “donors” survived because the surgeons removed other organs and their bodies were then burned. I know the lawyers here would know that's hearsay evidence, but I still think it's persuasive.

Unfortunately, Ethan Gutmann can't be with us today, but he wrote the book called *The Slaughter*, which he spent seven years researching and writing. He looked at the Falun Gong, Tibetan, Uighur, and house Christian communities, and his best estimate was that the organs of about 60,000 to 65,000 Falun Gong, and 2,000 to 4,000 Uighur, Tibetans, and house Christians were harvested in the 2000 to 2008 period.

A recent update to our books came out in June of this year. It was launched in Washington, Brussels, and Ottawa. It provides an exhaustive examination of hundreds of hospitals in China, looking at records, websites, the beds available, and a whole bunch of things. We concluded that industrial-scale organ harvesting is going on across China.

We conclude that a minimum of 60,000 transplants a year are being done across the country. As you probably all know, the Government of China claims they're doing about 10,000. We provide a lot of evidence—740 pages, depending on the size of the font, and 2,400 footnotes—documenting what we call a “state-directed transplant network”, controlled through national policies and funding, and implicating both the military and the civilian health care systems.

Our update has a number of conclusions, but I'll just give you four. Perhaps Davis Matas will talk about the others.

First of all, organ pillaging in China is a crime in which the Communist Party, state institutions, the health system, hospitals, and the transplant professions are all complicit.

The global intergovernmental community should establish an institution-based, independent investigation into organ transplant abuse in China. Perhaps the Government of Canada could do it. We are well placed to do that, and I think all of us who've worked on this issue are convinced you'd come to the same conclusions we've come to.

Organ tourism to China should not be shielded by medical confidentiality, but openly monitored. We think that Canada should enact laws that would ban Canadians for going to China for organs, as Israel, Spain, and Taiwan have now done. No nation, including ours, should allow its citizens to go for organs until China has stopped killing their own prisoners of conscience for their organs.

So what can the Parliament of Canada or the Government of Canada, do?

In early 2015, this committee...I have the highest respect for this committee, and I think you probably all know the motion you passed expressing concern. You encouraged the medical professionals to do something about this. You called on medical and scientific regulatory bodies to name and shame and ostracize individuals involved in this hideous practice. You called on the Government of Canada to consider ways to discourage and prevent Canadians from taking part in transplant tourism.

DAFOH, Doctors Against Forced Organ Harvesting, which was nominated for the Nobel Peace Prize this year and has professionals across the world who are against forced organ transplants, has put out a number of documents, including a press statement. One point they made in their press conference was that China is not ready to

join the world's ethical, values-based transplant community as an equal and trusted partner. In order to take the Chinese government's claim seriously, monitoring groups and ethical organizations should demand full disclosure of the use of prisoners of conscience as organ sources, transparency of organ sources, and access to China's organ procurement pathways.

Permit me a word about forced labour camps. People will tell you they don't exist anymore, and I certainly hope they don't. They've been renamed. They were called detoxification centres for a while, but I'm very much afraid that these camps still exist across China. One estimate we got was that there are about 350 of these camps in China. You may not know this, but you can be sent to one of these camps on a police signature only. There's no appeal. There's no hearing. The policemen can send you there for up to three years, and you work 16 hours a day for no pay, under very bad conditions.

We've been told by people who've got out of these camps and out of China that they make things like Christmas decorations, McDonald's toys, and all manner of other things for use by multinational companies outside of China.

Charles Lee was actually an American. He got out of one of these camps after, I think, three years, thanks to pressure from the U.S. Congress. He'd been making *Simpsons* slippers in this camp. He went back to New Jersey and found that he was able to buy these slippers in a store near his house. Jennifer Zang and Charles Lee were both in a movie called *Free China* that talked about their experiences in these camps. As you can imagine, these experiences are hideous.

In conclusion, I'd like to refer to Dr. Jacob Lavee. He just retired. He was a member of the Transplantation Society's Ethics Committee, and he was a key figure in reforming Israel's legislation about transplants. Previously insurance companies in Israel would pay for people to go to China, and they would pay for the organs. One day Dr. Lavee discovered that one of his heart patients was going to China to get a heart, and he realized what was going on. To his enormous credit, he got Israel to stop this process and basically made it an offence to be a broker for going to China for organs.

● (1315)

He gave an interview just before the transportation conference in Hong Kong a few months ago—which is quoted in the piece you have—and he said to *New York Times* reporter Didi Kirsten Tatlow, “I'm a simple Jewish heart transplant surgeon and the son of a Holocaust survivor, and the reason I spend so much time on this is that I can't keep silent in the face of a new crime against humanity”.

I'll just cite one other person, Professor Maria Fiatarone Singh of Sydney University Medical School. She said, “... individuals who are not free to consent can never be used as organ donors, as this not only prevents them from achieving their human potential, it completely dehumanizes them, and should be thus unacceptable to any society in the twenty-first century....”

Finally, DAFOH recently put out a response to a conference that was held in Beijing a few months ago about supposed reforms in China's transplant system. They put out a longer statement, but let me quote to you a bit from its press release, which I believe is also attached to your statement:

There has been extensive Chinese media coverage of a recent Beijing conference on Chinese organ donation processes. The conference was reportedly held with the support of the China National Organ Donation & Transplant Committee (CNODTC), the International Society for Organ Donation and Procurement (ISODP), The Transplantation Society (TTS),

You may not know that TTS is a very large organization that represents all of the transplant surgeons around the world, and they are the ones who had the meeting in Hong Kong that David and I both were at as well.

and the World Health Organization (WHO). Various eminent international doctors involved in the conference allegedly made statements in praise of China's reforms. Despite the rhetoric, there is no evidence that China now sources organs for transplantation in an ethical or transparent way.

Then comes this paragraph:

Serious concerns remain. First, there is no actual law prohibiting the use of organs from executed prisoners. The widely proclaimed ban is nothing more than an announcement reported in the media. Second, the semantic trick of re-classifying executed prisoners' donations as voluntary citizen donations makes it impossible to identify the true source of organs within the allegedly voluntary system.

The last from my statements is this final paragraph from the press release:

Finally, it is difficult to see this situation as anything more than another propaganda event designed to distract attention from actual practices in China. The onus is on those who champion China's reforms to now demand accurate, auditable data, independent access to practitioners and relatives, unscheduled visits to hospitals (including military hospitals) and open access to financial records regarding organ transplantation.

Thank you, Mr. Chair.

• (1320)

The Chair: Thank you very much, Mr. Kilgour.

Mr. Matas, if you're ready, please deliver your statement as well.

Mr. David Matas (Lawyer, As an Individual): Thank you for inviting us both.

Let me start off by saying a bit about Falun Gong.

Falun Gong is a set of exercises with a spiritual foundation, a Chinese equivalent of yoga. It began in 1992 with the teachings of Li Hongzhi. It was initially promoted by the Government of China as beneficial to health. It grew to 70 million to 100 million practitioners by 1999, by the government's own estimates.

The Communist Party then decided to ban the practice for the following reasons. First, it has a large number of practitioners. Second, Falun Gong is not political, but it is also not Communist. Third, Falun Gong is spiritual, and the Communist Party is atheist. Fourth, Falun Gong is not an organization, but, through cellphones and the Internet, it has a mobilizing capacity.

The party began a propaganda and repression campaign against Falun Gong. Practitioners of Falun Gong were arrested in the hundreds of thousands. Those who recanted were released. Those who did not recant were tortured. Those who did not recant after torture were held in indefinite arbitrary detention.

Parallel with the growth of Falun Gong, China developed an organ transplant industry. The first source of organs for transplants was prisoners sentenced to death and then executed. A second source of organs was prisoners of conscience. The earliest of these were Uighurs in Xinjiang province.

A third parallel development was the shift from socialism to capitalism. The shift meant that the Government of China withdrew funding from many public services, including the health sector, and expected these services to raise funding privately. This combination of events—the vilification and mass detention of Falun Gong, the sourcing of organs from prisoners, and the need for funding for hospitals—led, with other factors, to the mass killing of Falun Gong for their organs.

Falun Gong practitioners in prison became a ready, inexhaustible source of organs that could be sold to transplant tourists at exorbitant prices. The fact that this was happening became readily apparent, and we heard from David Kilgour about a number of the evidentiary factors that showed that this was happening.

The official Chinese explanation for sourcing at that time was donations, but China didn't have a donation system or an organ distribution system. China then switched its explanation to say that all organs were coming from prisoners sentenced to death and then executed, but, by law, prisoners sentenced to death had to be executed within seven days of sentence. There's a high rate of hepatitis B in the criminally detained population, making many criminal prisoner organs unusable. The absence of any organ distribution system and the need for blood type, size, and ideally tissue-type compatibility meant that the claim of sourcing from death-penalty prisoners for the high volume of transplants was implausible.

China has now switched back to saying that all organs are coming from donations. They have set up donation centres, but the donation centres, according to our own investigations, are producing tiny, statistically insignificant numbers. China has also set up a purchase-and-sale system, which it calls donations, that buys organs from poor relatives of patients near death in hospitals. This purchase-and-sale system is likely generating numbers to compensate for the fall in the numbers from the death penalty, but no more.

Chinese statistics are propaganda by other means. David Kilgour, Ethan Gutmann, and I originally accepted the Chinese official volume of 10,000 a year and tried to figure out where the 10,000 were coming from. The Chinese, as far as we can tell, produced that 10,000 figure as a form of boasting to show how advanced they were in transplant technology. They realized belatedly they had no explanation for the 10,000, so even though transplant volumes grew considerably since they first generated the 10,000 volume, they stayed with the 10,000 figure.

With our latest update, we decided to look beyond the official statistics and make our own calculations. Again, you heard from David Kilgour on that. There is a lot of detail on that, and I certainly invite you to look at it, but you can see very easily that our high figures have to be right. The Chinese government, after we came out with our report, set up a registration for hospitals. There were originally 1,000 hospitals doing transplants. Eight hundred applied for registration. They registered 146 for liver and kidney and 23 for heart and lung. They had minimum bed requirements and minimum staff requirements for this registration.

• (1325)

If we look just at liver and kidney transplants, and if we look at only the minimum bed requirements and assume a length of stay that is substantially beyond the average stay for transplant patients in hospitals, and if we look at a 100% capacity, because there is tremendous demand, we get a figure of over 60,000 transplants a year in China: 69,300. That's the minimum.

If we look at the staff at the hospitals and if we assume that these hospitals have only one transplant team—and many of them have more—and they're just working days, we get almost 54,000 transplants a year.

Let's look at just a couple of hospitals.

The Tianjin hospital, according to their statistics, is producing 8,000 transplants a year. Beijing No. 309 Hospital is producing 4,000 transplants a year. Just a couple of hospitals get us beyond the 10,000 figure.

Again, we've heard from David Kilgour on recommendations about what should be done, and of course I support them all. I welcome the fact that this committee has already passed a resolution, a motion, on this subject, which was a good one. I would say that we see a lot of interest, a lot of willingness, a lot of activity, and a lot of awareness of this problem in Canada, but I think we have to move beyond that and do something practical to combat this vice. I think the recommendations of David Kilgour, whom you've already heard from, really need to be acted on.

That's what I would say. Thank you very much.

The Chair: Thank you very much, Mr. Matas.

We will now move on to the questions.

I believe, MP Anderson, that you're first up.

Mr. David Anderson (Cypress Hills—Grasslands, CPC): Thank you, Mr. Chairman.

I want to thank our witnesses.

It's also good to see Mr. Cotler back here again. This is an old home of his.

Mr. Kilgour, you referred to the Chinese government's declaring In December 2014 that after the beginning of January 2015 they would stop using executed prisoners' organs and would go to a voluntary system of donations from citizens. Is your assessment that they don't have the ability or willingness to do that?

Hon. David Kilgour: Indeed, yes. In fact, if you want to have some interesting reading, David Matas has written a report on Jiang Zemin, who speaks for them on these issues.

David has traced his contradictions and his—I'm looking for a polite way of saying it—inexactitudes, of which there are many. You are almost laughing by the time you finish reading his piece, because he just contradicts himself and says anything to anybody that will protect the medical regime in China and the Government of China.

• (1330)

Mr. David Anderson: I want to take a couple of minutes for this. We don't have a lot of time, but can you lay out—

Mr. David Matas: I wonder if I could just add to that. That was an interesting question.

On the willingness, obviously not, but the question is whether they have the ability. I'm not so sure that in the current situation they're even able to do so, because they've become so dependent on the sourcing of organs and there are so many people complicit in this abuse now that in the current system it's simply almost impossible to unravel.

Mr. David Anderson: You're talking about so many people being complicit. Can you give us a bit of a breakdown of the involvement of national and local private interests? What role do local medical authorities play? Is there a structure that starts somewhere? What are the levels of responsibility that come in at different areas?

Mr. David Matas: In terms of the persecution of Falun Gong, that's the Central Committee of the Communist Party. That was decided at a meeting in June 1999. In terms of killing Falun Gong, that was decided at a party gathering at the 610 Office, which was set up to persecute the Falun Gong in November 1999.

Because organ-sourcing from prisoners had started before the persecution of Falun Gong, the system of organ distributions was originally run through the prisons and the courts, and they were dealing with death-penalty prisoners. It's all institutionally geared. The party also has five-year plans, and in them they've given a high priority to developing the organ transplantation industry.

It's not just that it's there, but it's growing. It's been growing throughout this whole period. They've been building hospitals or wings of hospitals dealing only with transplants. This is institutionalized. This is not corruption. This is not profit-seeking. This is not criminalization. This is a state-run and state-directed industry.

Hon. David Kilgour: By the way, the 610 Office comes from June 10, and that's why they call it the 610 Office. It's all over China. There's an office in Hong Kong, actually, too, which we encountered when we were there. They were trying to disrupt our meeting. I can maybe drive it home with an example.

By the way, we've been in about 50 countries now talking about this. I guess it was in Melbourne where I ran into a former policeman from China who told me that he'd worked for 610, and that if, as David mentioned, somebody was being forced to give up their Falun Gong beliefs, he told me that the police were authorized to shoot the person if they thought he or she might go back to being a Falun Gong practitioner.

That gives you a sense of how totalitarian, how corrupt, and how appalling this whole system is, and it's hard for us as Canadians or for anybody to understand how the 610 Office works, but it's in every university, city, village, business. It's throughout the country. It was started by Jiang Zemin, who came out of the party headquarters in Beijing and saw, as David mentioned, about 10,000 people protesting. He could see people from the party, people from the army, diplomats, academics: it was right across all walks of life. He went back and he wrote a ridiculous letter asking who was going to prevail, Falun Gong or the Communist Party? Since that day, basically, the war has been going on against Falun Gong.

I'm happy to tell you that I don't think either of us has seen a case of a Falun Gong practitioner responding with violence to the incredible violence that they suffer 24/7, and of course, there's the demonization that goes on in the media 24/7.

Here's one more tiny anecdote. A friend of mine went to Tiananmen Square a couple of years ago with her mother. They were looking around and had a guide. Somehow the Falun Gong came up in discussion, and the guide said, "Oh, Falun Gong. They eat their children." That's the level of demonization.

David has written about the Holocaust and has said that genocides don't start with acts: they start with words.

Mr. David Anderson: I'm running out of time here quickly, but we'll have one detour. You're the experts on this. Are there other countries that are concerning you right now on this issue as well?

Mr. David Matas: We're not an NGO; we're individuals, and we have been focusing only within China and only on organ transplant abuse, and in the case of organ transplant abuse, only on Falun Gong. Ethan Gutmann has said it's also Uighurs, Tibetans, and house Christians. We've read his research and we agree with it, but it's not our own.

There is organ transplant abuse in other countries, of course, but it's different from China because the organ transplant abuse in other countries is underground. It's black market. It's criminal. It's not state-run.

• (1335)

Mr. David Anderson: Okay, here's one last question. Market conditions exist. Often supply reflects demand. What should the Canadian government be doing to interfere, if you want to call it interfere, or to limit transplant tourism?

Hon. David Kilgour: It's a very good question. We are strongly in favour, as I am sure all of you are, of encouraging voluntary donation. What Israel did when they stopped people from going to China was to say that if someone signed a card giving a donation, they would have priority for donations if they needed them.

There are all kinds of things we should do. You probably know that Spain is the most successful country in Europe in encouraging

people to give organs, and I wish Canada could be one of them. However, you're absolutely right, and we're strongly in favour of encouraging people to give organs voluntarily.

The Chair: Thank you very much.

The next question is going to be from MP Miller.

Mr. Marc Miller (Ville-Marie—Le Sud-Ouest—Île-des-Soeurs, Lib.): Thank you, gentlemen, for your testimony.

I'm interested in the numbers in and of themselves, and far be it from me to question them. It's just the multipliers that you apply can at times appear to be random, and it isn't just a question as to whether a donation is voluntary or not. Obviously involuntary donation, whether it's one or a million, is unacceptable and should be called out.

I'm simply interested in trying to figure out how you can assess the progression, or at least if there is any improvement in the way the Chinese state is behaving. How can you document that if arbitrary numbers and multipliers are applied? Certainly when you see the numbers, you start to scratch your head as to whether they can be accurate. One would indicate a much higher execution rate, for example, if this were the case, than is publicized, and then in other cases there's the cause. As well, David, you mentioned that it didn't have so much to do with the black market, but attributed it to Falun Gong, house Christians, and so forth.

I'm just trying to get to the bottom of all this and figure out how you address some of the criticisms of the numbers and the black market implementation capacity issues that are often thrown back at you.

Mr. David Matas: First of all, in terms of our update, we haven't really had any criticism of the content of the report. The Government of China has said that it's anti-China. Obviously, if we didn't care about China, we wouldn't care about this. The Government of China said that the figures must be wrong because their percentage of anti-rejection drugs is the same as the percentage of transplants worldwide. Of course, that doesn't account for transplant tourists. Their statistics about anti-rejection drugs are as hard to fathom as their statistics about transplant volumes.

I admittedly used some multipliers in trying to give you a shortcut to figure out where the totals come from. If you look at the actual report, we don't do it that way. What we do is go hospital by hospital and look at the actual numbers at each hospital using their websites, their newsletters, their bed counts, their staff counts, their research grants, their research publications, and media reports. We do not take one hospital and multiply it by 146 or 1,000. We do it for every single hospital and add up the figures. That's why there are 2,400 footnotes; 2,200 of them come from the individual hospitals.

I'm glad you're not persuaded by the shortcuts, because I invite you to read the whole report.

Mr. Marc Miller: The next question is about the black market and implementation issues that may be thrown back as a counter-weight to say that it doesn't exclusively address the Falun Gong and other religious minorities or practitioners.

Hon. David Kilgour: We run into this all the time. People say, "What about someone who got a kidney in country X?" This happens, and I'm sure you know it happens. You sell one kidney hoping you can get your child through university or something, but there's only one country in the world where it's state run from top to bottom, and that's China.

There may be black market organ transplants in China, but they don't need them, because they have a huge system run by the government from top to bottom.

Here is one example we sometimes use. You remember I mentioned the case of the person who removed 2,000 corneas. Her husband was paid the equivalent of hundreds of thousands of U.S. dollars for doing those 2,000 operations. The doctors are very well paid, and they're not going to talk about it.

It's a whole system that can only exist with a totalitarian government. We can't stop the government of China from killing its people, unfortunately, although I honestly believe that naming and shaming has helped. I think they're at a tipping point because they're getting so much bad publicity now. There was a hearing, for example, in Germany yesterday. There's so much bad publicity for them from this that I think they may stop.

It's a small number of Canadians, probably, who are going to China, but we can at least say that Canadians are not allowed to go. You don't even have to mention China. What we can do is say that you cannot go and buy an organ somewhere outside of Canada.

Taiwan has the best legislation now. If Taiwan can do it, being so close to China and having so many people....

• (1340)

Mr. David Matas: I was wondering about your question about the black market. Are you suggesting that maybe the numbers come from the black market rather than from official activity?

Mr. Marc Miller: Correct, or it is corruption.

Mr. David Matas: As I indicated, 800 hospitals applied for registration, and 169 were registered. As far as we can tell, some of them are still doing transplants. There is that form of a black market. We didn't include that in our calculations, because it's hard to get hold of.

The reality is that like everywhere else, there is a much bigger demand for transplants, even in China, than there is supply. Even in doing 100,000 transplants a year, they're not exhausting the demand, and they are charging high prices.

In addition to all this official stuff, sure, there is a black market in China. What that would do is produce figures even beyond what we've produced.

Mr. Marc Miller: I have a final small question. What is your capacity to verify whether there has been any incremental change since December 2014 and the beginning of 2015?

Mr. David Matas: Our report came out in June of this year. We started doing it in September of last year. All of it is subsequent to the changes for the update. We have archived everything we saw, so you can see everything we saw.

The Chair: There's a little bit of time left.

I was interested in asking about multilateral action and what Canada perhaps can do in the international community with allies. I know there was the Istanbul declaration, and 2008 seems to be the last thing that took place in terms of international activity on this.

Is there other work being done multilaterally, anything you can suggest or shed light on?

Hon. David Kilgour: Can we both have a go at that?

Nothing is effectively being done. As you know, China has a veto in the UN, but some of the committees of the UN have.... The UN Committee Against Torture, which is a group of non-UN employees, experts, has been very helpful. The UN rapporteur on torture has been very helpful in the past. It's hard to get a multilateral organization like the UN or.... The European Union passed a very good resolution that we are fond of, but not much has been done, except in Spain. It seems when you get a large number of governments involved, this is not an issue that you can....

One country we know about, which I agreed not to name, was finding that a lot of their people were going to China for organs. Rather recently they have agreed they will stop their people from going to China. We won't name the country. We'll see how they do in stopping that.

What I'm really saying—and David may have a different view—is we're trying to get countries like Canada...and it's a little embarrassing when these two Canadians have been running all over the world, yet Taiwan and Spain and Israel are really way ahead of us. It would be very nice if one of you or all of you would get this new Government of Canada to bring in a bill that would simply do what Taiwan has done. If Taiwan can do it, it should be relatively easy for this country to do it on an all-party basis.

David may have a completely different answer.

Mr. David Matas: Yes. I certainly agree with what he said, but I do have a couple of additional suggestions.

One is the universal periodic review by the United Nations Human Rights Council. I've been to both of them since the review has started, when China has been up for consideration, and I've listened to all the statements. Canada distinguished itself, I think, and was alone in mentioning the persecution of Falun Gong, and it should continue to do so, but I also think it should deal with organ transplant abuse directly. It shouldn't be just the persecution of Falun Gong, but persecution of Falun Gong and transplant abuse.

Another multilateral body I draw your attention to is the Council of Europe. The Council of Europe has approved and opened for signature a treaty on organ trafficking that allows non-Council of Europe member states to sign. Canada should sign and ratify that treaty, and implement it through legislation. Canada is an observer at the Council of Europe. David Kilgour and I, when we were in Sweden, met with the Swedish parliamentarian who is planning to mobilize the parliamentarians of the Council of Europe to endorse a resolution and investigation on this issue. Canada, although it can't vote, can speak at the Council of Europe, and it should speak and support this initiative.

I also say, and I second this with David Kilgour, that I don't think we have to wait for a multilateral institution to act. I don't think we have to wait for others to do something before we do something. This is an area where Canada, on its own, can take some leadership, particularly on the issue of investigation. The European Union has called for an investigation and hasn't done it. The U.S. House of Representatives has called for an investigation, but that hasn't happened. Of course I would like Parliament to call for an investigation, but I would like Canada to do it, and not just in the way David Kilgour and I have done it as civil society, but as a governmental thing.

• (1345)

The Chair: Thank you.

MP Hardcastle is next.

Ms. Cheryl Hardcastle (Windsor—Tecumseh, NDP): Thank you, Mr. Chair.

Thank you, gentlemen, for the hard work you're doing. I've been intrigued by your answers. I'll just present a little package, and then you go ahead and talk for as long as the chair allows you under the time allocation, because it's very intriguing to hear you.

I don't know where to start except to say those were excellent suggestions with regard to tangible ways that we can tighten up and strengthen the recommendations of this subcommittee. I can tell you that just from reading some of the text and having the updates and the evidence.

Mr. Miller did ask about the numbers. I find it intriguing that you went to local hospitals to get numbers, and that they are more willing to give you those numbers because they're oblivious to the issues that the state is facing, right? You can riff a little bit more on that if you want to.

All of us were briefed on some on this, and I just want you to hear the question. Is the potential to extract organs after the execution of prisoners a primary factor in the decision to execute the prisoners, or merely an incidental benefit?

That's the crux of it and part of our role in the investigation and in the international human rights stance, so take it away.

Hon. David Kilgour: Thank goodness the number of executions in China is starting to go down, but the problem is that as the executions go down—and they have to be done within seven days, as David mentioned—the demand for organs from prisoners of conscience who have no hearing, no appeal, nothing—

The way it works, as I'm sure a lot of you know, is that if David needs an organ, he goes to Shanghai and pays a lot of money for an organ at People's No. 1 Hospital. They then do the blood test and tissue tests and find a match for him out in one of these work camps. The person who unluckily happens to be a match for David Matas is taken in. Their liver is taken out and is flown to Shanghai in a People's Liberation Army aircraft, and he is told he's getting a liver from a murderer or something, they would probably say.

One of the reasons the Falun Gong are so sought after is that they don't smoke or drink. They often tend to be very healthy people.

Mr. David Matas: In terms of primary and incidental, it depends on the type of prisoner. If it's a prisoner sentenced to death, then it would be incidental. They're going to be executed anyway. To a certain extent, it started off as incidental and then became primary, partly because the system had already been set up; it's just a matter of shifting.

The Falun Gong and the other prisoners of conscience, but particularly Falun Gong, were very heavily vilified with this incitement to hatred, which depersonalized them, particularly in the eyes of the people in the state system, the jailers, who tended to buy into this propaganda.

The Falun Gong are normally not sentenced to anything. They're certainly not sentenced to death. Some of them are sentenced for disrupting social order and get a three-year sentence, but a lot of them aren't even sentenced to that. Falun Gong, although it was repressed by a Communist Party decision, was never legally officially banned. You don't violate a law by practising Falun Gong. You just violate party policy, which of course is above the law.

When it came to the killing of Falun Gong for their organs, that wasn't incidental. That was primary. Otherwise, they would still be alive, and many of them are still alive in arbitrary detention in China as a vast forced organ donor bank.

• (1350)

Ms. Cheryl Hardcastle: How do we investigate that if there's no record?

Hon. David Kilgour: A number of Falun Gong practitioners have managed to get out of these camps and out of China. We've talked to them. Some of them are in Toronto, I believe. You can talk to them and hear stories that just make you sick.

They have family members. That's why you have placards all over the country and over much of the world: it's because this war against Falun Gong has been going on since July of 1999, and it continues. We call it a new crime against humanity. What's happening to Falun Gong practitioners is inhuman.

Mr. David Matas: I can answer that. First, that's a good question. That's a problem we had to grapple with, because we start with no corpses. The body is cremated. There are no witnesses because everything happens in a closed place. It's either perpetrators or victims. There's no crime scene. The operating room is cleaned up afterwards. There are no documents except official party documents that are not going to be released to us, so what do we do? How do we look at it?

When we started, we were asked to investigate this. We weren't given any money, any data, or any direction. Our view was we didn't know. We didn't want to come to this conclusion. My preference would have been the opposite, that this wasn't happening. We walked around it. We talked to people who got out of prison and out of China, patients who went into China, doctors. We looked at hospital websites. We looked at anything that came out of China that we could.

Of course, what made it even more difficult was that as we were going through this research, any time we cited something from an official Chinese source, it would disappear. We would archive everything. This is a rolling cover-up. I don't know if David Kilgour likes this example, but I ask myself what we would know about the Holocaust today if the Nazis had won World War II. That's the sort of situation we're faced with. It's a matter of piecing together what evidence we can.

Since we've done that, you'll get denials and rejections from people out of interest, like the Communist Party of China, but nobody who's done the research independently and doesn't have a vested interest in the outcome has contradicted our research, or even questioned it, which is how Ethan Gutmann came about his work, and Kirk Allison, Arne Schwarz, Jay Lavee, and so on.

The Chair: Thank you, MP Hardcastle.

Hon. David Kilgour: He's cutting you off.

Ms. Cheryl Hardcastle: Can I just add one little point?

The Chair: Sure.

Ms. Cheryl Hardcastle: What happened in Taiwan? It's kind of shocking that they're the vanguard leaders in this. Who knew, right?

Hon. David Kilgour: Mr. Chairman, I didn't mean to make fun of you. I used to have your job a long time ago, as you mentioned. You're doing a great job.

Taiwan is a fascinating case. There's a lot of hepatitis in Taiwan, as you probably know, and a lot of people from Taiwan I think used to go to China. The mayor of Taipei right now is Mayor Ko, and he's

a transplant surgeon. He won in an absolute landslide. It was about a year and a half ago. He went over to China and made inquiries about where they could get organs in China. In one hospital in one city he went to, they told him they only had Falun Gong organs available for transplants, so he came back and gave an interview with Ethan Gutmann about this, and Ethan's book came out just in the middle of the election campaign in Taipei.

We were travelling in a car in B.C. together and there were phone calls every five minutes, because this was getting to be very embarrassing. Ethan has a very high opinion of Mayor Ko, and Mayor Ko won in a landslide with 700,000 votes or something. He's a good guy on this, believe me.

If Taiwan can do it with both parties' support, why on earth can't we in Canada, with all-party support, do a similar type of measure?

• (1355)

Mr. David Matas: I wonder if I might add to that just a bit. I think there's a tendency, at least in some quarters, for people to say, "Oh, we shouldn't confront China, because it may be against our economic interests." I think Taiwan is a good answer to that, because they have had, at various times, a lot of confrontation with China politically, yet economically they have thrived in their relations with China.

The Chair: Thank you. I see that it's now just a couple of minutes before the end, so I'm going to cut off the questions there.

Would it be possible for you to please send a copy of the full, updated report to the clerk so she can distribute it to all members of this committee and to anybody else who's sitting here today who would like it?

Hon. David Kilgour: It's about that thick.

The Chair: Digitally, it's not that thick.

Hon. David Kilgour: It takes 20 minutes to download the PDF, but we of course will do it.

The Chair: I would like to thank you both for coming and once again bringing our attention to this very important issue. I know you were here last year and I really appreciate your being here today. It's an important issue. I know many interested parties came to listen to this testimony today. I want to thank them for coming.

Again, Professor Cotler, thank you for being here today as well.

Thank you very much.

The meeting is adjourned.

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