

Witness statement by Distinguished Professor Wendy Rogers to the Tom Lantos Human Rights Commission Congressional Hearing on the issue of forced organ harvesting in China

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I am a Distinguished Professor at Macquarie University, Sydney, Australia, in the Philosophy Department and in the School of Medicine. I have qualifications in medicine, family practice and philosophy, with a PhD in medical ethics. I have been a fulltime academic since 1998. My area of expertise is bioethics. This is a broad field within which I have wide-ranging research interests. Of relevance here is my expertise in the ethics of organ donation and transplantation. I became engaged in the ethics of organ donation in 2003 when I was appointed to the Australian Health Ethics Committee (AHEC), which is a principal committee of Australia's National Health and Medical Research Council (NHMRC). In my capacity as an AHEC member, I took a leading role in the development and drafting of the 2007 [national ethical guidelines on organ and tissue donation](#) in Australia. I then spent a number of years working on various State and National committees developing the ethical and practice guidelines for organ donation after declaration of death on circulatory grounds (non-heart beating donation).

In 2015 I attended a screening of "[Hard to Believe](#)", which brought home to me the extent and horror of forced organ harvesting in China from prisoners of conscience. I engaged with all material in the public domain to that point, including "[Bloody Harvest](#)", "[The Slaughter](#)", and "[An Update](#)" and joined what was then the International Coalition to End Organ Pillaging in China, now the [International Coalition to End Transplant Abuse in China](#) (ETAC). I am the Chair of ETAC's International Advisory Committee and in that capacity, working closely with Executive Director Susie Hughes, chaired the ETAC committee that engaged Sir Geoffrey Nice QC and established the [China Tribunal](#). The China Tribunal operated from 2018-2020, during which time the 7-member panel, chaired by Sir Geoffrey Nice, examined a large body of written material and heard evidence from witnesses in hearings held in December 2018 and April 2019. The China Tribunal operated independently from ETAC; ETAC was responsible for managing the logistics for the public hearings and an event in London when the Judgment was announced. ETAC was at no time privy to the China Tribunal's deliberations or final decision making discussions. The China Tribunal's [Final Judgment](#) was delivered in March 2020. Based on detailed evidence and reasoning, the China Tribunal found that there is a "*long-term practice in the PRC of forced organ harvesting*" in which "*Falun Gong practitioners ...were used as source – probably the principal source – of organs for forced organ harvesting*" (China Tribunal 461). In addition, the Tribunal noted "*There is no evidence of the practice having been stopped and the Tribunal is satisfied that it is continuing*"(467) and that Uyghurs were also highly vulnerable to forced organ harvesting from 2020.

I wish to bring two major points to the attention of this Congressional Hearing, concerning first, the evidence of forced organ harvesting; and second, the lack of action by the medical profession.

First, the ***evidence that forced organ harvesting is occurring is substantial, robust and has not been challenged or shown to be incorrect.*** Here I present key points from my longer analysis of the evidence, "[What is Forced Organ Harvesting in China: Understanding the evidence](#)" (see original for all sources and citations).

## *Timeline of forced organ harvesting*

This timeline illustrates key events in the history of forced organ harvesting in China.

<b>Year</b>	<b>Event</b>
pre-1999	Little transplant activity
1996	Human Rights Watch reports forced organ harvesting from executed prisoners including political offenders and other non-violent criminals
1999	Persecution of Falun Gong practitioners begins
2000	Rapid increase in transplant numbers Denial of using prisoners' organs
2005	Official admission about using organs from executed prisoners
2006	First investigation into forced organ harvesting in China: <i>Bloody Harvest: The Killing of Falun Gong for their Organs</i> (Matas and Kilgour)
2010	Start of pilot volunteer donor program
2014	Investigation released: <i>The Slaughter: Mass Killings, Organ Harvesting and China's Secret Solution to its Dissident Problem</i> (Gutmann)
2015	Official claim that all organs now sourced from volunteers
2016	Analysis of Chinese data in the <i>Update</i> shows 60,000–100,000 transplants performed each year (Kilgour, Matas and Gutmann)
2017	President Xi issues directive to repress Uyghur religious practices and inter large numbers of Uyghurs in camps
2019	Statistical analysis shows China's official transplant data is falsified
2019	China Tribunal Judgment: Forced organ harvesting has occurred at scale and continues

There are two key lines of evidence about forced organ harvesting in China: direct and indirect evidence.

### Direct Evidence

Direct evidence comes from people who were personally involved in forced organ harvesting. China Tribunal Witness 26 (name withheld) described being ordered to participate in forced organ harvesting in the 1990s, from an incompletely executed prisoner.

In 1995, Enver Tohti was ordered to remove organs from a prisoner who was not dead:

*The victim was a man in his 30s, unshaved with long hair and civilian clothes. The bullet gone through his right chest. The man seems already dead anyway, so I start my incision ... cutting his skin, blood could be seen, it implies that his heart was still beating, he was alive! My chief surgeon whispered to me 'Hurry up'.*

Wang Gouqi gave evidence in 2001 about his work at the Paramilitary Police General Brigade Hospital in Tianjin in 1990 and 1995. He removed skin and corneas from the corpses of over 100 executed prisoners. In 2006, ‘Annie’ reported that her ex-husband removed corneas from 2,000 Falun Gong practitioners in 2001–2003. Dr Li gave evidence to the China Tribunal about four methods of live organ harvesting practiced in China between 2003 and 2015.

Since the conclusion of the China Tribunal, detailed research has found evidence of doctors acting as executioners in China: “[Execution by organ procurement: Breaching the dead donor rule in China](#)”. The relevance of this research is that it shows the extent and normalization of harvesting organs from victims who have not been judicially executed by state executioners, but who are killed by extraction of their organs by surgeons.

### Indirect Evidence

In addition to direct evidence, multiple types of indirect evidence confirm the historical and continued practice of forced organ harvesting in China.

#### Witness accounts

Multiple witnesses have described incidents and conversations indicating that forced organ harvesting took place. The following are several examples of this evidence. Prisoners were threatened with organ harvesting if they did not comply with various orders or were told that, if they resist, their ‘heart, liver, spleen and lungs will be taken’. An Israeli heart surgeon, Dr Jacob Lavee, reported that a patient of his went to China in 2005 for a heart transplant booked in advance. This could only happen if a prisoner was killed to order on the agreed date. In 2006, a Chinese doctor at the World Transplant Congress in Boston explained that all the organs for transplant came from Falun Gong practitioners. In 2018, a Japanese journalist interviewed three Japanese patients who had travelled to China for transplants. The recipients waited only two weeks for liver or kidney transplants, and they paid for these.

*George Karimi, in prison for matters not related to Falun Gong, gave an account of executions and of conversations about organ harvesting from executed prisoners, specifically about ‘prisoners not needing organs after death’. He gave one account of a guard, who knew of or dealt with 24 or 25 Falun Gong prisoners being executed and only one being spared, and explained that the one spared was unwell—‘if sick, organs are of no use’.*

#### Medical testing of prisoners

Medical tests conducted on prisoners provide indirect evidence of forced organ harvesting. [Many witnesses have described having blood taken for unknown purposes](#). Medical tests, including ultrasounds, x-rays and physical examinations, were performed on prisoners who did not consent to the tests. No reason was provided for the tests, and prisoners were not given any results. Only prisoners of conscience, including Falun Gong practitioners, Uyghurs, Tibetans and some House Christians, were tested. The tests were consistent with the type of tests performed in advance of organ transplantation, ascertaining the health status of the donor and their organs. This information can be stored in a databank to be matched to potential recipients in a process known as reverse matching. This is the opposite of a matching process in a voluntary organ donation system, in which potential recipients are matched to the organs available from the dead donor. In China, blood and other medical tests mean that donors can be selected to match the recipients and killed to order.

### Torture of prisoners of conscience

The China Tribunal received evidence of the torture of prisoners of conscience. This evidence is important because it provides context about the overall treatment of prisoners of conscience and helps in understanding the full range of crimes that may have been committed. The fact that prisoners were tortured reveals the widespread and systematic nature of the persecution. It shows that the prison authorities were not concerned about the health and welfare of prisoners, and hence that any medical tests were not for prisoners' healthcare needs. Evidence about torture came from Falun Gong practitioners and Uyghurs.

Incarceration of prisoners of conscience including Falun Gong practitioners and Uyghurs. As with evidence of torture, evidence of incarceration provides context for forced organ harvesting and demonstrates the systematic nature of the repression of Falun Gong practitioners and Uyghurs. In 1999, the Chinese president, Jiang Zemin, ordered the establishment of the 610 Office for the persecution of Falun Gong practitioners. There are multiple accounts from Falun Gong practitioners of being imprisoned and tortured for their beliefs. Since 2017, mass incarceration of Uyghurs has also occurred. Uyghur witnesses to the China Tribunal described their imprisonment in Laogai camps, including being required to sing 'red' songs and speak only Mandarin, witnessing and suffering torture and undergoing blood and medical tests. Mass blood and DNA testing in Xinxiang has been reported. Credible reports of Uyghur forced organ harvesting have been supplied by Dolkun Isa, Erkin Sidick and Ethan Gutmann.

### Hospital phone calls

Since 2006, various investigators have made calls to Chinese hospitals posing as patients needing organs. Doctors in these hospitals have admitted using Falun Gong practitioners as organ sources, offered Falun Gong practitioners as organ suppliers, stated they use live organs from prisoners and refused to divulge the source of organs. For example, on 26 May 2017, in a call verified by the China Tribunal, Director Wang of Yaasntai Yuhuangdong Hospital made these comments about a kidney transplant:

Wang: ... *it will be within half a month, within two weeks.*

Investigator: *So you can still find that kind from the prison?*

Wang: *You need to find the ones under 30 years old.*

Wang confirmed that the hospital circumvents the official Red Cross organ distribution system, performs hundreds of procedures and has its own channels to source organs. For example, young person kidneys are available within 10 days.

In one forensically verified phone call, Bai Shuzhong, the former People's Liberation Army (PLA) Minister for Health, confirms that a direct order to harvest organs from Falun Gong was issued by former Chinese president, Jiang Zemin:

Investigator: ... *regarding taking organs from the detained Falun Gong people for organ transplantation, was it an order from the director of the PLA General Logistics Department?*

Bai Shuzhong: *Back then, it was Chairman Jiang. There was an order. It instructed to carry out this thing, that is, organ transplantation.*

[Further calls made in 2019](#) continue to indicate that organs are readily available and that they are from healthy young sources.

#### Scale of transplant activity

Evidence regarding the scale of transplant activity is vital because it indicates that there was and is a plentiful supply of organs. Evidence about transplant volumes in China was compiled in the 2016 *Update*. This report provides a very detailed examination of the transplant programs of hundreds of hospitals in China. The *Update* draws on media reports, official propaganda, medical journals, hospital websites and a large number of deleted websites found in archives. The report analyses hospital revenue, bed counts, bed utilisation rates, surgical personnel, training programs, state funding and more. This evidence shows that China is performing 60,000–100,000 transplants per year, as opposed to the much smaller numbers (10,000–20,000) that are officially reported, and for which China has no credible account of where the organs come from.

#### Short waiting times

Short waiting times provide further indirect evidence about forced organ harvesting in China. The China Tribunal heard evidence from the 2000s to 2018 of pre-scheduled operations (including heart transplants) and short wait times. The average kidney wait time in China is close to several days or weeks, compared to 1000–1,500 days in the UK and USA. This is a critical piece of evidence because short waiting times and pre-booked transplants cannot occur in voluntary systems, which rely on the accidental or unpredictable deaths of donors. Short waiting times and pre-booked transplants show that organs are available on demand. This is evidence of a group of living people who can be killed to order for their organs. Numerous undercover phone calls confirm waiting times as short as two weeks.

#### False official Chinese data

Since 2015, China has published data about the numbers of donors and transplants performed each year, claiming that all organs come from volunteers. However, these figures are not reliable. In 2019, a detailed statistical analysis of official Chinese data found evidence of systematic falsification and manipulation of official organ transplant datasets. This study is important because it shows that official Chinese claims about the numbers of transplants performed in China cannot be trusted.

#### Transplant tourism

Finally, transplant tourism is another key source of indirect evidence. Evidence of historic transplant tourism includes archived websites advertising organs for sale and the experience of Dr Lavee's patient who had a heart transplant in China in 2005. Websites promote or have promoted organ transplantation in China and Japanese and Korean organ tourism to China.

In 2017, a Korean TV station conducted an investigation at Tianjin Central Hospital. The transplant centre staff quoted wait times for organs ranging from days to weeks and solicited monetary 'donations' from patients in exchange for scheduling transplants even more quickly. Although China claims to have stopped performing transplants for foreign patients, the international department performed eight transplants the day before the visit.

In summary, the evidence regarding forced organ harvesting in China is complicated. However, central questions demand answers:

- How can China perform so many transplants?
- Where do all the organs come from?

As noted above, there is relatively little direct evidence to answer these questions. First hand testimony of organ harvesting from the victims themselves is impossible because the victims die in the process. Further, whistleblowers such as surgeons are rare. However, there are multiple lines of indirect evidence for forced organ harvesting, including the personal testimony of fellow internees and relatives of deceased victims, the short waiting times, the gaps in the medical statistics, the conversations with government officials, the advertisements and the admissions of university and military hospital personnel.

*The overall value of the collective body of evidence is greater than the mere sum of its parts. Individual lines of evidence, when brought together, paint a backdrop of planned, systematic, institutional and intentional organ harvesting.*

(Andrew Khoo, China Tribunal Member, June 2020)

### Responses to the evidence

This compelling and damning evidence has been considered by nine United Nations Special Rapporteurs and three human rights experts, on the basis of which the United Nations [issued a correspondence to China](#) regarding allegations of forced organ harvesting from Falun Gong practitioners, Uyghurs, Tibetans, Muslims and Christians in China. The response by China has done nothing to address the specific allegations raised in the UN correspondence. A [joint open letter](#) signed by 65 NGOs has been sent to the 12 UN Special Rapporteurs and human rights experts, outlining the reasons why the Chinese Government's response was inadequate and misleading and urging further action from the UN Special Rapporteurs.

On 5 May 2022, the European Parliament passed Resolution P9\_TA(2022)0200 [Reports of continued organ harvesting in China](#), which “*Expresses its serious concerns about the reports of persistent, systematic, inhumane and state-sanctioned organ harvesting from prisoners in the People’s Republic of China, and, more specifically, from Falun Gong practitioners and other minorities such as Uyghurs, Tibetans and Christians*”.

As the United Nations and the European Parliament demonstrate, at this point in time, the answer to the question “Is forced organ harvesting occurring in China” is emphatically “Yes”.

The crucial question now is “***What actions will the international community take in response to forced organ harvesting in China?***”

The second point I wish to draw to the attention of the Congressional Hearing is that of the ***complicity and/or wilful ignorance of much of the transplant community, both as individuals and as organisations***. With a few notable exceptions, such as that of Professor Jacob Lavee and Dr James Shapiro, the majority of transplantation clinicians have remained silent on this shameful matter, while some have actively supported China’s transplant activities (see for example paragraph 2.7 in the 2018 Report of the Australian Joint Standing Committee on Foreign Affairs, Defence and Trade, “[Compassion, Not Commerce: An Inquiry into Human Organ Trafficking and Organ Transplant Tourism](#)”).

I presented [detailed evidence](#) on this point to the China Tribunal in 2018, in which I noted “that prominent members of the transplant community, two of whom reside in Sydney (Jeremy Chapman and Philip O’Connell) seem unwilling to make themselves familiar with evidence about forced organ harvesting from prisoners of conscience. Instead, their attitude is

one of dismissal, repetition of official Chinese denials and claims that allegations of forced organ harvesting are a political strategy by what they describe as “the Falun Gong”.”

A second piece of evidence concerning the lack of engagement by the transplant community concerns the publication of Chinese transplant research in which transplanted organs were procured from executed prisoners, in breach of international ethical guidelines on organ donation. I led a team in a scoping review of published transplant research from China, “[Compliance with ethical standards in the reporting of donor sources and ethics review in peer-reviewed publications involving organ transplantation in China: a scoping review](#)”. This review of 445 studies reported on outcomes of 85,477 transplants. 412 (92.5%) studies failed to report whether or not organs were sourced from executed prisoners; and 439 (99%) failed to report that organ sources gave consent for transplantation. Of the papers claiming that no prisoners’ organs were involved in the transplants, 19 of them involved 2688 transplants that took place prior to 2010, when there was no volunteer donor programme in China.

This research shows that the academic transplant community, including journal editors, have failed to take seriously the human rights abuses occurring in transplantation medicine China and that prestigious journals, including *Transplantation*, have published research regardless of the human rights abuses performed in procuring the transplanted organs. This research has led [journals to flag or retract over 40 articles](#).

Attitudes within the transplant community may be slowly changing, especially when faced with incontrovertible evidence of doctors acting as executioners in China, as shown in the recent publication by Roberston and Lavee: “[Execution by organ procurement: Breaching the dead donor rule in China](#)”.

The broader medical community is now starting to engage on this issue, led by the British Medical Association (BMA) who co-sponsored the launch of “[Do No Harm: Mitigating Human Rights Risks when Interacting with International Medical Institutions & Professionals in Transplantation Medicine](#)”, prepared by Global Rights Compliance. The Canadian Medical Association (CMA) also supported the launch. The involvement of the BMA, CMA and Global Rights Compliance further demonstrates of the robustness of the evidence about forced organ harvesting, as, like the United Nations and the European Parliament, these bodies would not publicly support efforts to halt forced organ harvesting unless they were convinced of its occurrence.

I offer these observations and comments in the hope that they will assist the very important work of the Tom Lantos Human Rights Commission in its Congressional Hearing on the issue of forced organ harvesting in China. I regret that, due to the time differences, I am unable to appear in person at the Hearing, but would be willing to meet with members of the Commission at a mutually suitable time to answer any questions.

Yours sincerely,



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