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Chair

Mr. Scott Reid

Subcommittee on International Human Rights of the Standing Committee on Foreign Affairs and International Development

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• (1305)

[Translation]

The Chair (Mr. Scott Reid (Lanark—Frontenac—Lennox and Addington, CPC)): Order, please.

Fellow members, welcome to the Subcommittee on International Human Rights of the Standing Committee on Foreign Affairs and International Development. Today is October 21, 2014, and we are holding our 39th hearing.

[English]

We're televised today, first of all, so act accordingly. We are discussing a subject that has come before this committee in the past, the issue of forced harvesting and trafficking of human organs.

Today we have two individuals with us. Damon Noto is spokesperson for Doctors Against Forced Organ Harvesting. He will be speaking first. Then Ethan Gutmann will be speaking.

That said, I have been asked by one of our members to deal with a procedural matter first.

Mr. Sweet, you have the floor.

Mr. David Sweet (Ancaster—Dundas—Flamborough—Westdale, CPC): Mr. Chair, I've had a conversation with the other members in regard to our schedule for October 30. I apologize to the members, as we generally do business in a different way, but because of the nature of our schedule, on October 30 the UN special rapporteur on the human rights situation in Iran will be in town. I think if you seek it, you'll see that there's unanimous consent to have this person testify before the committee because they will be in Ottawa on that date.

The Chair: Colleagues, is there agreement?

Some hon. members: Agreed.

The Chair: All right. That will be done.

We'll have to reschedule the witness we had for October 30 in order to accommodate that.

My understanding is that you are going first, Dr. Noto, so I'll turn the floor over to you. Once you're finished, we'll go to Mr. Gutmann.

Feel free to begin.

Dr. Damon Noto (Spokesperson, Doctors Against Forced Organ Harvesting): Honourable members of Parliament, thank you

for your invitation to come and speak today. It truly is an honour and a pleasure to be here.

As the chair said, I am a member of an NGO called Doctors Against Forced Organ Harvesting, which is an organization that consists of medical professionals, mostly transplant surgeons, from around the world.

In the 1990s and early 2000s evidence continued to mount that China's transplant practices were completely unethical. As early as 2001, the first solid evidence surfaced when a Chinese transplant surgeon named Wang Guoqi came to the United States to testify in front of a United States congressional hearing that China was using organs from executed prisoners.

Medical doctors were further alarmed by the rapid exponential increase in transplantations that occurred in China from 1999 onward. China went from performing a few hundred transplants each year to performing transplants on thousands of patients each year by 2004. This situation plus the tremendous increase in the number of transplant centres across China was very concerning, since no other country's transplantation program had ever grown so fast. China had done in five years what the United States took decades to accomplish.

According to China's own official numbers, the number of transplants performed each year went from several hundred in 1999 to well over 10,000 in 2008. According to the *China Daily* newspaper, the actual number was closer to 20,000. It's now recognized by the international transplant community that China performs the second-highest number of transplants a year, behind only the United States, and that it will possibly overtake them in the next year or two. China, at one point, seemed to have an overabundance of organs, and its medical tourism for organs was booming.

Chinese hospitals were all over the Internet advertising that they could guarantee patients organs within a time frame of weeks and that transplantations could be scheduled in advance. This was shocking to medical professionals since the time frame to receive organs is typically years and not weeks. And the ability to schedule a transplant surgery in advance was simply unheard of.

Some hospital websites were bold enough to state that their transplants were superior because they were able to test the living donor's organ function prior to the harvesting. It became very apparent that organ transplantation was an extremely profitable business in China, with some hospitals stating that their organ transplant programs were their number one source of revenue. On the Internet they were quoting prices as follows: kidneys, \$60,000; livers, \$100,000; and hearts and lungs, \$170,000.

On the surface it might make sense, since China is such a big country, that they would be transplanting in such large numbers, but a few factors really need to be taken into consideration. First, there is no effective formal public organ donation system in China. This means that the hospitals rely on local situations and they have their own waiting times and organ supply. According to the Red Cross, there are only several hundred people who have registered to become organ donors in China. This is in stark contrast to the situation in other countries, such as the United States, which has over 100 million organ donors.

In 2010 China's own Vice-Minister of Health, Dr. Huang Jiefu, admitted that between 1997 and 2008 China had performed more than 100,000 transplants, with over 90% of the organs coming from executed prisoners. China's own people stated that.

The Chinese government does not provide an official count of people executed each year; however, most experts put the number of executions anywhere between 2,000 and 5,000. Obviously this number falls far short of the 10,000 organ transplants that occur every year. Furthermore, even if the numbers were to add up, there would still be a large discrepancy for the simple reason that it's impossible, given all the variables that go into transplantation, that all these people would be suitable candidates for organ donation and that they would match the people needing an organ transplant.

There was also a major problem in that the prison population has a very high percentage of people who have hepatitis B or hepatitis C, which would not make them candidates for organ donation.

Then you have the factor and the issue of timing. Since an organ, such as a liver, once harvested lasts outside the body only several hours, you cannot stockpile organs after execution for future use. That's just not possible.

● (1310)

China's own laws state that prisoners, once sentenced to execution, must be executed within seven days. All of this suggests that convicted felons sentenced to death could not fully account for all the large numbers of transplantations occurring every year in China, especially when you talk about the type of advanced, scheduled transplantations that occur with medical tourism.

The question from the medical community is the following: how is China able to have such an on-demand transplant system, capable of extremely short wait times compared with every other country around the world, including the United States, where the average wait time for a kidney is over two years, Canada being over three years? The only possible way China is able to do this is to have another source of donors that is available and that can be utilized on demand.

Several investigations have been performed—including by Ethan Gutmann, sitting next to me—and they have all pointed to the use of prisoners of conscience as the main source of organs, with practitioners of Falun Gong comprising the vast majority. If you follow the timeline of China's transplant boom and you compare it with the start of the persecution of Falun Gong, which occurred in 1999, the timelines correspond almost exactly. It's estimated that two million Falun Gong practitioners were arrested nationwide and placed in detention during the first year alone of the persecution, in 1999.

China has an extremely vast prison system. According to an NGO, the Laogai foundation, it's estimated that between three million to five million people sit in these prisons at any given time. Many experts now believe that Falun Gong practitioners comprise the largest population of prisoners of conscience in China today, with up to 500,000 to a million practitioners being held at any given time. Falun Gong practitioners are also persecuted nationwide, not just in one region, making these organs available to hospitals across the entire country.

One reason this may all be possible is that China has a very unique situation: the military controls the prison system. They control the forced labour camps. They control the majority of the hospitals that are performing transplantations. When patients who go to China for organs come back, they often state that they were performed secretly by military doctors in military hospitals, often in the middle of the night.

The persecution against Falun Gong is an officially state-sanctioned policy. Falun Gong practitioners are considered enemies of the state, without the right to have any legal representation. According to my knowledge, not a single person, since the start of the persecution, has ever faced criminal charges for either the torture or murder of practitioners. The lack of legal repercussions for the murdering of Falun Gong practitioners has made them a particularly vulnerable group. Falun Gong practitioners are often unwilling to give up their true identities in order to protect their families and friends, so they sit in these jails unidentified. Furthermore, a systematic propaganda campaign against this group has demonized them to the public.

An investigation in 2007 by Canada's own David Kilgour and David Matas compiled 52 verifiable forms of proof that Falun Gong practitioners were being killed for their organs. They estimated that 41,500 organ transplants that occurred in China from the years 2000 to 2004 alone had no verifiable source other than practitioners of Falun Gong. There have also been other investigators, including European Parliament member Edward McMillan-Scott.

Falun Gong practitioners who've escaped from China often testify that they underwent serial blood and urine testing, and had physical exams, X-rays, and ultrasound testing multiple times while in prison, while their fellow inmates didn't. It's hard to believe that they were doing these expensive tests to benefit the health of these people who were being tortured in prison camps.

There have also been interviews of fellow prisoners and prison staff who witnessed Falun Gong practitioners having their organs harvested. There have been several high-level Chinese officials admitting during taped phone conversations that they are aware that Falun Gong practitioners are being used as a source for organ donation. China's own vice-minister of health, Huang Jiefu, who's often quoted, has performed hundreds of transplants using organs from prisoners. He stated in an interview with China's *People's Daily* that the struggle against Falun Gong is a serious political campaign; we must not be merciful.

• (1315)

The two foremost international transplant organizations issued a letter this year to Xi Jinping, the leader of the Chinese Communist Party. In that letter, they called China's system of organ transplantation corrupt and "scorned by the international community".

In April of this year, the director of the China organ transplant system, Wang Haibo, stated that the Chinese regime had no intention of announcing the schedule for weaning itself off the use of organs from executed prisoners, thus stating that the practice of using prisoners and prisoners of conscience as the main source of organs continues to this day, with no end in sight.

If we go by the statistics, we can estimate that every day a few dozen people are executed for their organs. If we wait another five years, there's a possibility that another 50,000 innocent lives may be taken. If we do nothing, we really run a serious risk of becoming accomplices to a great tragedy that we are witnessing in our own time.

Thank you for allowing me to be here today.

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

We go now to our second witness, Mr. Ethan Gutmann.

Mr. Ethan Gutmann (Author, As an Individual): Thank you.

For those who engage in primary research on the organ harvesting of prisoners of conscience in China, this hearing comes at the end of a particularly ominous year.

Winter saw the fatal collapse of two years of medical engagement with Chinese medical authorities. Spring brought new evidence that the mass harvesting of prisoners of conscience was not only continuing but accelerating. Fall carried with it the first reports—unconfirmed, yet surprisingly consistent across China's provinces—that the Chinese authorities are no longer taking DNA swabs and blood tests consistent with tissue-matching from Falun Gong just in prisons and labour camps, but in their homes.

In short, the history that I'm going to condense for you today is still being written.

Let's begin the slides in the mid-1990s with one of these men who have just carried out an execution. The enlisted armed policeman on the left of the screen tries to look official. In the foreground, a supreme procuratorate officer, wearing a white rag against back splatter, meets our gaze defiantly. These are the eternal faces of routine execution. Blur the racial features and we see the same uneasy postures in many authoritarian states. In fact, the man in the

front is actually wearing a white rag to protect against back splatter as he fires the gun.

Yet from an official Chinese perspective, there is nothing surreptitious taking place in this photograph. The signs on the executed prisoners indicate that they were duly convicted of capital crimes: murder, rape, drug sales, etc. Their bodies will be gathered into medical vans and harvested for their kidneys and livers. That's not secret either. Since 2006, Beijing has admitted that the vast majority of the organs that Chinese hospitals transplant into aging western organ tourists and rich Chinese are from death row prisoners.

Twenty years later—now—most executions are carried out in secret by surgeons. In the photograph shown here, they carry freshly extracted organs. The critical change since the mid-1990s is that the majority of retail organs in China are not extracted from death row convicts, but from prisoners of conscience—again, political and religious prisoners—who cannot be sentenced to death even under the vagaries of Chinese law: Tibetan monks, or a Uyghur activist who openly shook his fist in a demonstration, or a Falun Gong woman who passed out leaflets on the street.

The Chinese medical system is said to generate approximately 10,000 transplants per year. As Damon said, the number of legally executed prisoners is well below 5,000. Voluntary organ donations are negligible, and this suggests another source, but the fact is that we don't have to rely solely on mysterious numerical gaps. We can bracket this 20-year transformation through reliable medical witnesses such as this one.

I've supplied a map to you—I think you have it in your hands—that includes major police and medical installations throughout China that were involved in organ harvesting. It's not a comprehensive map; the sites are the ones that I established through personal interviews in my new book, *The Slaughter*. At the northwest corner of the map, you'll find Urumqi Railway Central Hospital.

In 1995, one of the hospital's surgeons, Dr. Enver Tohti, shown on the screen here, was driven to the Western Mountain Execution Grounds. Following an apparently routine mass execution, a prisoner was singled out for harvesting. The man was alive. The gunshot was deliberately aimed to the left of the side of the chest to produce shock that could act as a natural anesthesia. Dr. Tohti was told to remove the man's kidneys and liver. Following the prisoner's single reflexive contraction, Dr. Tohti performed the extraction. Based on the pulsing blood, the man's heart was beating until that. Now, this was a medical advance. Live organ harvesting promotes a lower rate of rejection by the new host.

Hard-core criminals also have a lot of health problems, particularly hepatitis. Two years later, Xinjiang was the staging point for a second change in medical ethics. The first organ harvesting of Uyghur political prisoners was carried out in Urumqi on behalf of five high-ranking Communist Party officials who had come in search of healthy young organs. Live organ harvesting would become routine through China, but the harvesting of prisoners of conscience who had not been convicted of capital crimes was initially confined to Xinjiang.

In 1999 the Chinese state security launched its largest action of scale since the cultural revolution: the eradication of Falun Gong. Yet by 2001, the blitzkrieg had become trench war, and Chinese military hospitals began targeting select Falun Gong prisoners for harvesting.

• (1320)

There are many points of evidence for this. As Damon said, Kilgour and Matas list 52 of them. I'll present just one: Dr. Ko Wen-je, chairman of the Traumatology Department, National Taiwan University Hospital. Ten years ago Dr. Ko went to a mainland hospital to negotiate reduced kidney and liver prices for his department's elderly patients. After a friendly banquet, Dr. Ko was given the Chinese price, which was about half of what a foreigner pays. In response to Dr. Ko's concerns about unhealthy criminal organs, the Chinese surgeons assured Dr. Ko all the organs would come from Falun Gong: these people don't drink; they don't smoke; they practise very healthy qigong. We appreciate your discretion.

Dr. Ko is now the leading candidate to be mayor of Taipei, largely due to the perception that he is a man of integrity. I'll go further. Dr. Ko's testimony has done more for this investigation than all the world's health organizations put together.

The larger point is that the organ harvesting of prisoners of conscience did not begin with Falun Gong. It evolved organically. The central decision to exploit prisoners of conscience on a mass scale was little more than a legal blurring around the edges. Yet why would the Chinese Communist Party, so rich in resources and power, so eager for international acclaim, take such a risk? Thus the investigative problem becomes one of motive, of plausibility. It is not just the how, it is the why, and that question dominates six out of ten chapters in my book. I'll just touch on it here.

You may have heard it said that the party's decision to crush Falun Gong was driven by its size. At 70 million, there were five million more practitioners than party members. That's true, but it is also germane that Falun Gong came from the Chinese heartland with no western intellectual or foreign trappings. So the party's fears had more to do with that little boy in the picture in the front.

That boy could grow up to be a man and perhaps a soldier of the People's Liberation Army like this one, and most of all they feared this woman Ding Jing. She lives in Toronto. She's in the hospital, I believe. As a Falun Gong coordinator, she taught the exercises. She carried plastic garbage bags around to make sure that practice sites stayed tidy, and she looked after three sites. The first was for China Central Television. The second was for the Public Security Bureau, the secret police of China. The third was for the high-ranking Communist Party officials and their wives.

For the party, Ding Jing's tidy sites seemed to spring out of the Marxist template for seizing power. Start up in the heartland, infiltrate the intellectuals, then the military, and the leadership itself. For the nationalist elements of the party who believe this is China's century, Falun Gong's belief in truth, compassion, and forbearance suggested an earlier China: passive, weak, easily dominated.

Their theory was wrong. Falun Gong's resistance in the labour camps and indeed globally was not passive. It was extraordinary, as was the party's ferocious response. I won't show you pictures of labour camps and atrocities, but I will show you this picture of Falun Gong refugees, because if you take out this guy in the middle, this is a pretty good numerical representation of my findings. All these women were in labour camps. All were tortured. One of them was sexually abused. And the woman on the left was given a series of physical examinations aimed exclusively at assessing the health of her retail organs and tissue matching.

From a sample of 50 refugees, I conclude that half a million to one million Falun Gong are incarcerated at any given time. By 2008, approximately 65,000 Falun Gong practitioners had been harvested for their organs. My calculations are published in two books, *The Slaughter* and also *State Organs*, and my estimate is used as a baseline calculation in the text of U.S. Congress House Resolution 281. Your own Kilgour and Matas study, extrapolating from official Chinese numbers, estimate that approximately 60,000 Falun Gong organs were harvested by 2008. That's an apples and oranges comparison, but clearly we are looking at fatalities above 50,000.

Although the numbers are much smaller, many Tibetans, Uyghurs, and even some house Christians received the same testing as Falun Gong. Enforced disappearances of Uyghurs are particularly dramatic. I won't estimate that fatalities at this time. I can only say that two Tibetans came back alive.

I have some brief, final points. Any pretense that harvesting was not state controlled evaporated with this discovery that in 2012 these photographs of Wang Lijun are of the protege of former politburo member Bo Xilai. In fact Wang Lijun is directing live organ harvesting. Wang was given a public award for using a new lethal injection method on thousands of harvested prisoners. That discovery led the Chinese medical establishment to attempt to create a public picture of a rapidly reforming transplant system. Perhaps some of you have heard of these promises. In the west, the Transplantation Society played along by politely refusing to acknowledge the harvesting of prisoners of conscience, even if many members privately believe the allegations to be true.

•(1325)

Earlier this year the Chinese explicitly reneged on those promises of reform, leading the Transplantation Society with nothing but this now-embarrassing snapshot. We, in turn, have been left with a policy vacuum.

One component of that aborted reform was a supposed ban on western organ tourism. Actually, it never ended. Three months ago these Chinese organ brokers were still advertising openly on the Web.

The harvesting of Falun Gong did not end either. At this time I can't supply a Falun Gong fatality count after 2008, but this Falun Gong labour camp refugee was tested for her organs, along with 500 other prisoners, mainly practitioners, one year ago.

What should Canada do? I urge you to read my book with a critical eye. I am confident in my conclusions, in part because I don't go much beyond the findings that I've just presented. I did not write my book to tell you how you should think about the Chinese state.

If you believe that China is a good investment, well, perhaps it is. Yet the history I've described is also true, and that history is still being written even in this hearing today. I do not ask you to follow the path of divestment or trade war. I ask that you follow your own values. How can any Canadian citizen be complicit in a scheme where an innocent person will be killed so that a Canadian might live?

Canada has the power to stop this. The basic mechanism of criminalizing organ tourism is straightforward. If you go to China and you come back with a new organ, you will be incarcerated. Until the Chinese authorities provide a full accounting of this crime against humanity, I believe this is precisely the model that Canada should follow.

Thank you.

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

Colleagues, in order to accommodate six questioners, we're going to have to keep each round of questions and answers down to five minutes, so I urge you to be as concise as possible in your questions.

We begin, as usual, with Mr. Sweet.

Mr. David Sweet: Thank you very much, Chair.

Thank you to both of our witnesses for your testimony.

Whether it's Dr. Noto or Mr. Gutmann, I am okay with either responding.

I want to make it clear that the average Chinese citizen is much different from the People's Republic of China and the regime there. Is the average Chinese citizen suppressed in their protest due to the fact that they'll be lumped in with Falun Gong, and their fear of imprisonment in protesting this kind of behaviour of their own government?

Mr. Ethan Gutmann: I'm not sure that we know at this time what the ordinary Chinese citizen knows about organ harvesting. There are certainly rumours. This is widely suppressed on the Web.

There is one interesting factoid, though. Just three days before the Chinese medical establishment made its widely trumpeted claims of reform—they were on the front pages of Canadian newspapers, and in my home country of America in *The Wall Street Journal* and *The New York Times*—they did open up the Internet to search the term “Wang Lijun live organ harvesting” for 24 hours. This was clearly a factional play. It was as if one faction was saying to another, “How far do you want to go here?”

During this time a lot of the things that people consider rumours were suddenly verified precisely by establishments such as this. They looked at congressional hearings in America, they looked at EU hearings, and they said, “My God, there's something here.”

So as much as I gave a very harsh testimony earlier, I want to say that just the fact that you're holding this hearing is a huge step forward for the Chinese people; it really is.

•(1330)

Dr. Damon Noto: I would say that in my experience the ordinary Chinese person is somewhat suppressed by what is taking place with Falun Gong, because when I see Chinese people coming abroad to Canada or the U.S., sometimes if you simply talk with them or discuss with them the issue of organ harvesting or the persecution of Falun Gong, they're afraid. They avoid the topic; they don't want to take a flyer; they don't want to look at the material. I believe that fear is not because they don't want to know; it's because they fear they will be subject to some type of persecution when they return. So I do believe it's having the effect of suppressing their own people.

Mr. David Sweet: If you visit Yad Vashem in Israel, you'll see that there's been a sizeable attempt to catalogue all those who were killed in the Holocaust. Is there any attempt within the Falun Gong, Uyghur, and Tibetan communities to try to assemble the names of those missing so we have an idea of those people who have been killed in this forced organ harvesting?

Mr. Ethan Gutmann: I think what Damon just said is applicable to that as well. There are two problems. One is that families, of course, are afraid at a certain point to go any further in looking for a missing family member. The second point is that many Falun Gong practitioners simply remained nameless after a certain point because they were sick of their families losing their jobs, getting in trouble, and so forth. So when they were asked their name, they would just say Falun Gong practitioner. When they were asked where are you from, what province, they'd say the cosmos. Of these, the nameless ones, there were thousands, tens of thousands possibly. Out of interviewing over 100 people, 100 practitioners, I've only met one who made it out of China alive—one.

Mr. David Sweet: I think Dr. Noto mentioned that there are only a couple of hundred people on the list in China as far as legitimate donors for organ harvesting are concerned. But yet there must be a very sophisticated system within the military to be able to do this number. You're talking about a minimum of 10,000 up to 20,000, and maybe even more, per year. Do you have any idea about how that system is constructed, how that infrastructure actually plays out?

Dr. Damon Noto: We do have a theory that within these prison camps there must be some categorizing of these people's blood types, tissue types, and they must have some type of data bank that makes it easily accessible. Whether that's happening regionally or locally, we do know that when medical tourism happens and someone comes, they are able to rapidly find a person who matches them. So there must be some type of categorizing for this to occur. We don't know exactly how it takes place, but we do theorize that it is happening.

Mr. Ethan Gutmann: Dr. Ko Wen-je claimed—I asked him this question—that it's done on an informal e-based system between doctors. In other words, if somebody's looking for something and says, I need this blood type, it's passed around through that. There are some fantastic dissident hackers who have wanted to hack into sort of a central database. We're not sure it exists.

The Chair: Mr. Marston, please.

Mr. Wayne Marston (Hamilton East—Stoney Creek, NDP): Thank you, Mr. Chair.

I just want to note that when I first arrived here in 2006—I won't name them—there were a number of MPs who said to me, the Falun Gong, stay away from them, they're crazy. I stopped and listened to them and I realized why these MPs were saying it was because of their disbelief of the facts, the horrific facts, of the people being murdered for their organs. I and others in this room have stood with the Falun Gong for a number of years, and Matas and Kilgour have come here at least three times that I can recall presenting the information. I'm really pleased with your testimony here today because it's added to the level of understanding, which is so important. Recently I met with some Falun Gong practitioners, who were, I would say, slightly optimistic that the change of leadership that's happening in China was an opening for them. Listening to you today now I doubt that. In your efforts to study this, did you look at the leadership change and what that impact might be?

•(1335)

Mr. Ethan Gutmann: I'm not a Falun Gong practitioner, but Falun Gong practitioners have obviously taken a strong interest in my work over the years and I've often been an embedded reporter with them. They'd often say to me, Ethan, you have to hurry up on your research. Why is that, I asked? It's because the leadership's changing, Xi Jinping is coming in, and this kind of thing. They used to say this about Hu Jintao. That was quite a while ago when we was coming in. I didn't have to hurry my research it turns out, because this has remained as a problem. In fact, when I thought I was writing it, I thought I was probably writing history because I wondered how the Chinese, given this level of exposure, could continue to do this. But to my complete surprise, they are.

Mr. Wayne Marston: It sounds to me, listening to your report, that there is a far more sophisticated system at work here than people anticipated. When you start talking about the number of victims, I don't think we've ever heard the numbers you related to us today and the scale of this, which means there's a tremendous number of people involved beyond the leadership and a whole system dependent on sourcing Uyghurs and Tibetans. It's really tragic.

I don't know whether you're aware or not, but our Prime Minister is scheduled to go to China. I don't know whether you could measure this or not, but do you think there's an opening for any kind of

influence with this government? You alluded to trade. Of course, going back a number of years, we were one of the first countries to start going to China. We have an opportunity, I think, to utilize our sensibilities around human rights issues to raise this, but do you think that there would be a sympathetic ear there at all?

Mr. Ethan Gutmann: I do and I will take a shot at that question.

The interesting thing is that Israel—and basically half of its software and IT industry has Chinese investment—chose to simply end organ tourism. They just turned around and did it without caring about any economic repercussions. It turned out there were no economic repercussions.

That's one case. I'm not saying it changes everything.

I'd like to deal with the political, if possible. It's hard for me to imagine that Canada would actually use trade as a weapon in this situation, which is why I asked for what I think is possible, which is to control the medical procedures here.

Mr. Wayne Marston: Nexen purchased \$15 billion in the oil sands, so the door is open that way already.

Going back to your thoughts around criminalization of the organ transplant tourist, that sounds to me like it's something reasonable. Have they done this in Europe?

Dr. Damon Noto: Europe has not, but a very reasonable thing to do, at least, would be to have a medical advisory that patients travelling outside the country—

Mr. Wayne Marston: We've already done something about sexual predators from Canada going to other countries. To me this is at the same level. We should be reacting to it.

How's my time, Mr. Chair?

The Chair: You have one minute.

Mr. Wayne Marston: I'm not that quick.

Thank you, Mr. Chair.

The Chair: I wonder if I could follow up on one point before I go to the next questioner?

You said Israel shut this down. Did Israel adopt a regime similar to what you suggested: a statute saying that it is an offence to go to China for this purpose?

Dr. Damon Noto: The answer is yes. The first thing they enacted was that no medical insurance within Israel could pay for any type of organ transplantation abroad. Then they put policies in place to make it illegal to travel for medical tourism, especially transplantation, to China. So the answer is yes.

The Chair: Thank you.

Ms. Grewal, please.

Mrs. Nina Grewal (Fleetwood—Port Kells, CPC): Thank you, Chair, and thank you to our witnesses today for their time and presentations.

When we look at the Kilgour/Matas report and the actions of the European Parliament and the UN, have they caused any real change on the ground in China? Did China slow organ trafficking at all because of this international attention?

• (1340)

Dr. Damon Noto: There has been some effect. One is that a lot of it went underground. There were a lot of things that we had access to before the Kilgour/Matas report. They had an open public register that we could actually look at in Hong Kong. That closed after the Kilgour/Matas report. The information became harder to get, but as for whether this mass system slowed, we don't feel that it did. The only thing that might have slowed it was the Olympics in Beijing. I don't really think the Kilgour/Matas report had an effect. The fact that they made it open to the public, and made it more widely known, had ripples, but did not really slow the amount of transplants that were occurring.

Mr. Ethan Gutmann: I think there is another aspect, which is that it slowed the rate of public executions in China. Again, these are prisoners who are on death row. It appears to have had an effect on slowing down that rate. Supposedly they are closing some of the labour camps, although we don't actually see a sign of a lessening of the overall population in Laogai if you put together everything: prisons, labour camps, black jails, mental hospitals, and detention centres. So in fact it's a kind of reorganization.

But these clearly seem to be oriented towards western consumption. One of the problems we've had in this—if you think of it as an activist struggle of some kind—is that some doctors look at this and just say, “Well, nobody should be executed for their organs, period”. Others are looking—and I guess I'd put myself in with Kilgour and Matas, who are much more concerned with prisoners of conscience. We really think this steps over a very serious line.

In Europe, because they're very against the death penalty, they often equate Liaoning province and Texas as being practically the same thing.

Mrs. Nina Grewal: Regarding organ transplant tourism, how many so-called international tourists are there annually, and do you have the number of Canadians travelling to China for this each year?

Dr. Damon Noto: There are thousands of tourists. I don't know the number of Canadians. I can say that there are over 100 from the U.S. a year. I know those numbers; I don't know Canadian numbers. But by far for America the number one place to go for organs is China, and it's increasing every year. I don't know the Canadian numbers, but if you look at all the countries, there are thousands of people going to China for organs.

Mr. Ethan Gutmann: Anecdotally—and I hate to plug another author's book—Daniel Asa Rose wrote a book called *Larry's Kidney*, a very humorous account of his getting a kidney for his ne'er-do-well cousin in China.

Mrs. Nina Grewal: Can one of you expand on the demand for organs in China? Is legislation against organ trafficking enough to stop the demand for organs? How does this demand get addressed in a healthy way?

Dr. Damon Noto: Do you mean the demand to get organs? That demand is huge worldwide, and I don't think enacting laws is going to stop the demand. I do believe that it would stop Canadian citizens on a large scale from going over to China, but that demand we're looking at is going to be there for years to come.

Mr. Ethan Gutmann: I don't want to say that the revenue stream is really the significant thing. If you were stopping organ tourism coming from Canada, perhaps that's not the most salient point. But it is true that there are cases, at least unverified, of people having paid up to \$2 million for one of these organs. If you're talking about some extremely wealthy person, the kind of person who could easily exist in Japan, Canada, or the United States, it's very possible that some people have paid these sorts of figures. That is an incentive.

It is true that the Chinese pay half the foreigner price. They pay sometimes much less than the foreigner price. For example, if we take the \$62,000 U.S. wanted for a kidney back in 2004, the Chinese were paying sometimes as low as \$2,000 for that same kidney, so there is a monetary point.

But I think the larger point is this, that China has great ambitions in the medical field. They see this as what they call a pillar industry—pharmaceuticals. They see themselves as the new Rome, the new FDA, where people will go to do their experiments and go for drug approval. Any message that this body can send them saying, “No, you're not there yet” is very important. It does have a massive impact, far beyond what you might recognize.

• (1345)

Mrs. Nina Grewal: My last question goes to Mr. Gutmann. It seems that China's criminal system has an incentive to kill its prisoners in order to supply the health care system with new organs, so how do you break that connection between China's criminal justice system and its health care system?

Mr. Ethan Gutmann: What we hear not so anecdotally from World Organization to Investigate the Persecution of Falun Gong, which actually has a very strong investigative team of native Chinese who go in and make phone calls and get to know people who are involved in this business, is what they describe as a bidding system, almost a bidding war for judges between the armed police on the one side and the military hospitals on the other.

In other words, the military hospitals were always given carte blanche to do organ harvesting of prisoners of conscience. The armed police are trying to move into the action, and that's where we're at. The legal system, I'm afraid, is totally corrupt and of course that is the larger tragedy of this whole thing, that you've taken the two most respected professions in any society—well, perhaps not the legal one in our society—but certainly doctors are number one in any society, and it has been deeply corrupted.

The Chair: Professor Cotler, go ahead, please.

Hon. Irwin Cotler (Mount Royal, Lib.): Thank you, Mr. Chair.

As has been said, we've had witness testimony on these matters more than once, principally from David Kilgour and David Matas.

I have to say that I feel that today is a tipping point in this whole matter because a number of considerations have emerged from your joint testimony today, which I think really are the basis for what needs to be done at this point, and that is to sound the alarm.

First, there is an ongoing crime against humanity being committed. There has been some sense—and maybe this has been part of what the Chinese authorities have managed to accomplish—that somehow there has been an abatement or that they have turned away from it, etc. I think the first thing that emerges is that there are ongoing crimes against humanity.

Second, these are state-sanctioned. I think that's an important dimension to it.

The third is that it is targeting political prisoners—mainly Falun Gong but not only Falun Gong—in the manner in which it is targeting minorities and the vulnerable in China.

The fourth thing is that there is an ongoing culture of impunity, and nobody has been held responsible.

The final thing—and this is where it becomes the responsibility of us as parliamentarians—is that if we remain silent, we effectively are complicit in all of the above things that I mentioned.

I've introduced a private member's bill to do what you've suggested, Dr. Gutmann, which is to criminalize organ tourism. It has been seconded by my colleague here Judy Sgro. But since I am a member of the Liberal party, the third party, it will not go anywhere. I'm also low on the totem pole, etc. in terms of getting a private member's bill considered.

This to me is something we have to get the government onside with, because unless we have governmental backing for it, it will go nowhere. That's what I think makes your comments propitious for the Prime Minister and the foreign minister, who will be visiting China shortly. I'm not saying that their bringing it up will have an impact; I'm saying that their not bringing it up would have an impact, because then China could therefore infer that we don't take it seriously.

So I think, therefore, number one, the representations in China have to be made by our leadership. Number two, we have to push that private member's bill to try to get it to be a governmental bill.

Finally—and this is what I wanted to put as a question on this—how can we internationalize the advocacy? How can we create a

critical mass of advocacy around the points you mentioned, so that there will end up being a mobilization of shame against the human rights violated, in this instance in China, that will have some effect?

Dr. Damon Noto: I can talk only from a medical perspective. Our goal has always been to have the international medical community make it very difficult for China.

I'll give you an example. These Chinese transplant surgeons and the Chinese Medical Association are still members of the international transplant society. Their memberships have not been revoked even though they don't comply with any of the international standards for ethical transplantation. They continue to want to engage with China, to keep them in, to keep talking with them, instead of actually forcing them and saying, "Listen, you can't be a member and you can't join our meetings and you can't give presentations unless you can abide by these standards".

We keep having different types of standards for China, whether we're interacting with it economically or medically. If different countries could put pressure on their own organizations—for instance, we are working on the American Medical Association—and their transplant societies and say, "Listen, we really need to do something about China being a member of any of these organizations", that would put pressure on them, from at least a medical aspect, to say, "Listen, you have to knock this off. You can't be a member of our international community and continue to do these unethical crimes against humanity".

• (1350)

Mr. Ethan Gutmann: I'd just add that there are several states certainly—I've testified in Scotland—that have shown a huge interest. Whether they're independent or not, they control their health policy, and they control their education policy. They've shown a lot of interest in stopping organ tourism, and they've seriously considered it.

In New South Wales in Australia, the Greens wrote up a very intricate and beautifully designed bill that would have stopped organ tourism. They even did it without actually mentioning China. This was their very clever way of doing it, but they apparently had a fair amount of bipartisan support, even though they're Greens.

I think there are other states. I live in London, and I don't expect Westminster to move quickly on this. It's the world's bank, and London is the world's banker, but it is interesting to note this sort of strange confluence of Scotland, Australia, and potentially Canada. These are the countries that could really change everything, because they could put that kind of pressure on Westminster. So even to consider it, or even to have some kind of cooperation with these other parties out there, some sort of coordination, could make a major change. If Westminster were to change its mind, if Westminster were to feel a lot of pressure—the Irish too, by the way, have shown a lot of interest—one can imagine that Berlin could change its mind too.

Hon. Irwin Cotler: I might add that I borrowed from the Australian model and did not mention China specifically for the purposes of mobilizing more support.

The Chair: Thank you.

We go now to Mr. Schellenberger.

Mr. Gary Schellenberger (Perth—Wellington, CPC): Thank you.

Thank you for your presentation today.

I've heard in this committee about many tragic occurrences, about things that you just wouldn't realize would still happen in this world today.

A very good friend of mine donated a kidney to his sister quite a number of years ago. She survived for 26 years, I think, as a live transplant recipient. She just passed away a couple of years ago.

I know you can't transplant hearts and have two people living at the end, but with kidneys, some liver transplants, or partial liver transplants, is that part of what goes on in China now?

Dr. Damon Noto: We believe it occurs in very small numbers. It's almost insignificant, when you look at the total number of transplants being performed every year, that those are taking place. Typically, if it's from the prisoner system, obviously they are executed and cremated. There are very few people coming forward to donate for a relative or a friend in that type of perspective. There has been an increase over the past couple years in the Chinese literature, but it's been small.

Mr. Ethan Gutmann: It's not terribly well verified, either. I mean, one of the reasons we have that picture of the three surgeons is that it was one of the very rare occasions where somebody actually donated their organs. It was released for that reason. Even so, the surgeons still look awfully nervous about the whole thing.

Dr. Damon Noto: Just one further point here is that one of the big problems we have is that the international standard for transplantation means you should be open to scrutiny, which means the public should have the ability to go in and look at your transplant numbers, where they're coming from, and if it's being done ethically. China fails on this completely. There are no third parties that can look at or verify anything that takes place within China.

That's a big part of the problem that the transplant community has with China. We can't verify all these things. They won't let you. They just don't give you access to any of this.

Mr. Gary Schellenberger: Given the aging population and demographic reality in China, will there be even greater demand for organ transplants in the coming decades? Or is it the international community that's keeping the demand high?

• (1355)

Dr. Damon Noto: I think it will be both. China's mean income is coming up, and the demand worldwide for organs is just going to increase over the next five to ten years. So in my opinion, the demand will go higher.

Mr. Gary Schellenberger: You stressed earlier, or I think you were suggesting, that putting pressure on the medical community would be more beneficial than a direct push on the Chinese government. I think this should probably be double-barrelled, but at the same time, is it your feeling that putting pressure on the international medical community would be more beneficial to try to reach a resolve?

Dr. Damon Noto: Actually, I was just saying that I know more about the medical community, but I think it needs to be double-effect. I know that in the U.S. a lot of medical doctors are working on a resolution, which is going through Congress right now and hopefully will be passed this year, that pretty much has a very strong stance against organ harvesting in China, possibly banning people being able to go to China for organs.

I think the medical community feels that we need to do it definitely from both angles, but the problem with us is that I feel the medical community is being somewhat hypocritical saying "Yes, we should be doing something" when we still allow them in all our organizations. When we talk about being complicit in a crime against humanity, it's very sad that in this day in age our own medical community might be being very complicit in a crime against humanity.

Mr. Ethan Gutmann: I think Damon has really hit on it here. The dilemma is that if you push the medical community to go out there and talk to their Chinese counterparts and try to influence them, you enter a process of engagement. We just went through that for two years, and it led to exactly that—the feeling of, well, the medical community kind of has this under control and the problem is sort of ending. Look, I felt that too when I was writing my book, but the fact was that of course it was not true.

So you have a choice. You may have to actually take more punitive measures to make the point, so engagement in this case may not be a pleasant thing. I think that would be a great starting point for the medical community. They don't have a lot of experience in doing this kind of negotiation.

I used to live in Beijing. I used to do a lot of business negotiations. I mean, you never come in saying I'm not going to verify what happens here.

Mr. Gary Schellenberger: I have just one point. I know Mr. Cotler said he had brought in a private member's bill and that he's way down on the totem pole and so it probably won't make it to the floor.

Lots of times we hear devastating testimony at this particular committee, and then we keep it in this room more or less, and by the time we bring out a report, it could be six months or a year down the road, and it's already history.

I suggest to this committee that after we hear your testimony—and I think there's more—we at least put out a statement of what we feel as a committee now, not six months from now. It might fall on some ears that will listen.

Thank you, Chair.

The Chair: Thank you, Mr. Schellenberger.

Mr. Benskin, please.

Mr. Tyrone Benskin (Jeanne-Le Ber, NDP): Thank you.

We do indeed hear some pretty horrific stories from around the world of what we as human beings do to each other, and how ingenious we can be at times in finding new ways or refurbishing old ways of hurting each other.

I have a quick question and then a question and comment. I'm assuming the largest part of the organ tourism, which is a rather creepy name if you forgive my colloquialism, is that people can afford it, and I assume the largest recipients in the Chinese population are people who can afford it.

But you said earlier the average Chinese person pays significantly less than what a foreigner would pay. Would you comment on whether or not you believe that's a means of keeping the average Chinese public on side with what's going on. You said before as far as the average Chinese person's concerned there's not a lot of outcry against what's happening to the Falun Gong practitioners.

Could it be because it allows them to have access to these organs if they should need them?

• (1400)

Mr. Ethan Gutmann: How is the average Chinese organ tourist different from a western organ tourist? There's not a "single" western organ tourist, because we know there are plenty. Not one has written anything. It's very difficult to interview them. Hospitals of course are very protective, but I've recently scored an interview with a Chinese fellow in the U.K. and am expecting to interview him when I get back.

No. The organ tourists do not complain. First of all they are kept away from the process, so they are allowed a level of plausible deniability about what is going on. They are desperate people. They are undergoing a miracle in their lives. These are people who are very sick and suddenly rise out of a hospital bed and go on to live another 25 years.

I don't see a huge difference in that. Everybody's allowed to pretend this isn't going on, and they are no different. The only person who has written about this is Daniel Asa Rose, a nice humorist from Massachusetts

Dr. Damon Noto: I think part of it is doing business as usual in China. What I mean by that is if a westerner goes to a hotel in China, they are paying approximately 50% more than the average Chinese person. It's standard business.

But I think the other aspect of it is it's highly possible that members within the Communist Party enjoy this as a privilege, and if they needed an organ transplant they have easy access to organs.

Mr. Tyrone Benskin: Okay, thank you.

Also, Mr. Gutmann, you mentioned before that the economic aspect of this—I can't remember the words you used—is not as much of an issue as.... I would ask you to comment, or I'm going to challenge that a bit, for the simple reason that throughout history we've seen how various dominant cultures have used one form or another of inhumanity toward humans—for example, slavery in America—as an economic driver for their countries.

It seems to me that the skill set—if you'll forgive—that the Chinese are building, even in the experimentation of drugs, pharmaceuticals, and things of this nature, is tantamount to what the Nazis did in the concentration camps, to the economic boon of what slavery was to America, and to what's happening in various other countries right now in terms of cheap or no-paid labour.

So to have this literal treasure trove of organs available on demand is a massive economic storehouse. The economics of this can't be overlooked. I think, first and foremost, cutting down on economic tourism, drying up that aspect of the economic boon to China, is something we can do in the west. We can say that our people cannot go there and contribute to this situation by bypassing our laws and going to China to get organs.

Would you comment on that?

Mr. Ethan Gutmann: Yes, I think what you just said is incredibly persuasive.

I would only add that China has a propensity to do its dirty work through entrepreneurial work if possible. In other words, Deng Xiaoping, as an old army guy, said to the military that they'd have to start paying some of their own freight because they cost too much, and to do whatever they needed to do to make money. That ended up including prostitution and all kinds of bad hotels, and in some cases drugs. In fact, when the AIDS crisis came to China, the army solved it pretty much by cleaning up the drug situation and the prostitution.

So I think the military has certainly used this in their own way to make money, and it probably means a lot to them. This probably has all sorts of kickbacks to other officials. I think those officials would miss some of that money, even if it were a small change in the money.

I really do agree with your point. I'm just saying that we can't look at the money alone. This is an attempt to destroy a people. I don't really care if it falls under the exact definition of genocide; it's certainly mass murder. This is an attempt to wipe out Falun Gong, which became a troublesome group—more than troublesome, a group that absolutely stubbornly refused to go away. They were supposed to be beaten in three months, and they're still around, as you know.

So I think that part of it...that the leadership.... This became an issue of face. This has become an issue of national pride or party pride for the Chinese. These two things are unfortunately closely interlinked at this point.

• (1405)

Dr. Damon Noto: I have just a quick comment. Economically it's been estimated that this industry is easily over one billion dollars a year. One person, if done well, could be worth close to \$500,000 if you extracted multiple organs.

But I think, going to Ethan's point, you had a perfect storm here. You had a group of people the government wanted to get rid of. They were troublesome to the government, a very vulnerable group, and the government had a way to make a lot of money off them. And I agree, this a hard system to stop.

Mr. Tyrone Benskin: And that perfect storm has repeated itself throughout history. In all those cases it's been a perfect storm of accessibility, projected need, and some sort of uniqueness that could be pulled out of a group of people to demonize them, to make it easier and more palatable for the general public to accept what was going on and thereby isolate those groups.

Mr. Ethan Gutmann: There's one other factor that I think people neglect sometimes. One of the ideas of the anti-Falun Gong campaign was to make everybody in society complicit. That meant you went down to the lowest party level, the old women with the arm bands who walked around the *hutong* making sure it was clean. Everybody had to get involved. Everybody had to make statements against Falun Gong, from dog catcher all the way up to the top.

So it becomes a sort of "thick as thieves" situation for the entire society. This is, of course, is the great problem and the great tragedy for China, because this ultimately makes democracy impossible, when everybody is guilty.

The Chair: Thank you.

Mr. Tyrone Benskin: Thank you for indulging me.

The Chair: I did indulge you a wee bit. It's up to nine minutes right now.

That's okay, it was largely very fulsome answers.

I have a couple of questions that actually come out of Mr. Benskin's questions, and then we'll wrap up here.

Dr. Noto, you said that in your estimate this is about a \$1 billion industry right now, and that a person is worth about \$500,000. I assume that means if a person's organs are harvested and more than one organ is used. Just to be clear with the economics, which ultimately drives this whole thing, that is to say, if it weren't profitable it would stop. Therefore, it would be helpful to me to understand that when you say a person is worth \$500,000, is that in profit or volume of sales?

Dr. Damon Noto: Volume of sales.

The Chair: Right, the profits involved are not \$1 billion, but substantially below those.

Dr. Damon Noto: Correct.

The Chair: Okay, that's helpful.

This raises a question. Given China's size and influence and the fact that other countries, the entire world community, are not going to be as confrontational with China over this or any other abuse that the PRC regime engages in, as they would be vis-à-vis virtually any country in the world, we can only influence them by causing them to see that it is not in their interest and making them voluntarily decide to change their practices. So this raises the question: is this whole organ harvesting industry seen, in your view, as a key state interest by the people in the regime itself who are capable of making change? Is it what we would assume they would regard as a key state interest that can't be changed, such as the one China policy for example, or is it a peripheral activity that would be judged non-essential under the right circumstances?

I'd actually be interested in both your answers, but I see, Mr. Gutmann, you'd like to start.

Mr. Ethan Gutmann: I do have a point about that.

I'm afraid I don't think it's quite either. I think the problem....

Let us assume, just for the sake of argument, that there are many in the Chinese leadership who wish this had never happened and wished we had never gotten to this point. The problem is that there are two factions always fighting within China. I don't even say which one is better than the other; I don't have a side. They might as well be the Bloods and Crips for all I care. The point is that neither of them can stop it because, among the ones who stop it, somebody will get blamed and one faction will take the brunt of the guilt for this. For that reason, like a game of musical chairs, this must continue.

That is more the way I see it, that they are stuck in this situation. They really don't know how to stop it. There may have been even an honest attempt within the medical community to do that, but it was believed that it would open up too many cans of worms, that once you started exposing this thing there would be a problem.

I may be wrong in that. That's just my interpretation of the events.

• (1410)

The Chair: Just before you leave that point though, that assumes both stopping and exposing. Is it possible to stop without an actual forensic investigation as to who is responsible and without prosecution of past practices, that kind of thing?

Mr. Ethan Gutmann: The problem is that if you have two factions and they're both gunning for each other, once you start admitting anything it becomes a slippery slope to some kind of prosecution, investigation, and so forth. That's my understanding of this. I don't have absolute proof for what I'm saying; this is just my interpretation.

The Chair: Thank you.

Dr. Noto, do you have any comments?

Dr. Damon Noto: Further to his point, I think a lot of the hope among the Falun Gong community and also the transplant community is that once Xi Jinping, the new president, came in.... It was largely Jiang Zemin's regime that started the organ harvesting and there was the hope that once that regime left, there would be the possibility of really talking to this new regime about stopping it. But that hasn't seemed to take place and I believe it's probably because, as he's saying, once you start exposing or admitting any of it, it's like a little piece that's open and it just spirals. So I don't think they've been able to get a handle on how to deal with this issue.

The Chair: Thank you very much, that's very helpful.

We've gone a little over time. I'll just mention before I gavel the session shut that Mr. Gutmann and Dr. Noto will be appearing tomorrow at a public meeting at 12:15 p.m. at 268 La Promenade building, or as we now call it, the Valour building. That's a meeting co-hosted by Mr. Marston, Professor Cotler, and me. I look forward to seeing as many of you there as possible. This has been a very informative session. We're very grateful indeed that you could be here.

Thank you.

The meeting is adjourned.

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