THE "NINE POINTS" MEMO: CHINA'S FORCED ORGAN HARVESTING IN XINJIANG/EAST TURKESTAN

DECEMBER 9 2020

PREPARED AND PRESENTED BY
ETHAN GUTMANN
THE INTERNATIONAL COALITION TO END TRANSPLANT ABUSE IN CHINA (ETAC)
info@endtransplantabuse.org | endtransplantabuse.org
OVERVIEW

This confidential memo was written for a carefully selected group of Uyghur activists, Falun Gong researchers, Western policymakers, and reporters. It’s a snapshot of what we know - and what we don’t know - about forced organ harvesting in Xinjiang/East Turkestan.

While our understanding of Beijing’s state-sponsored organ harvesting of Falun Gong (and to a lesser extent, Tibetans, and House Christians) has grown over the last twenty years, the CCP has continued to use Xinjiang/East Turkestan as a secret laboratory: total suppression of Uyghur, Kazakh, Kyrgyz and Hui voices. A trickle of Uyghur witnesses from the camps. Major television networks reduced to taping scripted events at CCP-selected camps.

In 2019, this memo could have only raised a series of provocative questions. Yet 2020 was the year that we “made contact” - where several pieces of evidence came together. Thanks to highly dedicated individuals operating around the world - Gulchehra Hoja at Radio Free Asia, Sir Geoffrey Nice and the China Tribunal, Uyghur and Kazakh activist groups, and several independent researchers (some cannot be named) - a comprehensive picture of Uyghur forced organ harvesting is coming into focus.
1) Live organ harvesting of political and religious prisoners began with the Uyghurs

1994: Local PSB units on Xinjiang execution grounds began shooting not to kill, but to send the prisoner’s body into shock. Doctors were ordered to remove the liver and kidneys as the victim died [1].

1997: In the wake of the Ghulja Incident, Uyghur medical staff were quarantined while the PSB purged Uyghurs from the police force, executed local Uyghur activists, wrapped and sealed their bodies, and patrolled the cemeteries to prevent family members from examining the corpses [2].

1998: Chinese Communist Party cadres began flying into Urumqi to receive transplanted organs extracted from Uyghur political prisoners [3].
2) CHINA'S TRANSPLANT INDUSTRY BECOMES A HUNGRY BEAST

From 2000 to 2016, with an estimated 450,000 to 1,000,000 Falun Gong practitioners in detention at any given time [4], the Chinese transplant industry quickly surpassed the transplant volume of all other countries in the world. By 2012, China was transplanting over 60,000 organs per year, some to foreign “organ tourists” [5].

In most countries, the wait-time for an organ is about two years. In China, with a stable of Falun Gong tissue types ready to be harvested, the wait-time became two weeks. “Killing on demand” reached its peak in certain hospitals which specialized in “emergency liver transplants” with a wait-time of four hours [6].

All Falun Gong practitioners in detention after 2001 were subject to organ scanning and blood tests for tissue typing (or “cross matching”) with potential organ recipients. From 2001 to 2016, the author estimates between 125,000 to 250,000 Falun Gong were harvested [7].

New victim groups were exploited for organs: House Christians in 2002, and Tibetans in 2003 [8].

Go west: in Qinghai, a hospital was built into a prison [9]. In Xinjiang, there were sporadic reports of young Uyghur men, and even a 12-year-old girl, subject to organ scanning and blood tests [10].

In 2013-2014, police forces in several provinces entered Falun Gong homes to take blood samples and DNA cheek swabs (a highly accurate method of cross matching an organ for potential transplant). One possible interpretation is that China’s transplant industry had grown so relentlessly, and the CCP had so aggressively carried out the attrition of Falun Gong, that demand for organs was beginning to outstrip Falun Gong in detention [11].
3) BEIJING FORCES 10 MILLION UYGHURS TO GIVE BLOOD SAMPLES COMPATIBLE WITH TISSUE MATCHING

In 2016, provincial health authorities enforced mandatory “health checks” on all Uyghurs above the age of 12. Ultimately the tests would incorporate Kazakh, Kyrgyz and possibly, Hui [12].

Nearly half the population of Xinjiang/East Turkestan, the Han Chinese were exempt from the tests - thus ruling out the possibility that Beijing was concerned about infectious disease [13].

None of the Uyghurs/Kazakhs reported receiving medical results or follow-ups from the health checks - in short, the tests were not aimed at improving individual health [14].

According to the Uyghurs/Kazakhs, the one universal feature of the tests, was not a DNA test, but a large blood test compatible with cross matching for organ transplantation - thus ruling out theories by human rights organizations that the health-checks were solely given for surveillance/anti-terrorism purposes. A blood test can also be exploited as a DNA sample, so - in essence - approximately 10 million Uyghurs received the same combined cross matching test used on select Falun Gong practitioners three years previously [15].
4) THE NET CLOSES, THE CAMPS ARE CONSTRUCTED, AND THE TESTING BEGINS

Beginning in 2015, CCP authorities ordered construction of camps across the Xinjiang/East Turkestan region and a mass surveillance structure – using human checkpoints and electronic readers to determine race and stress levels – became standard across the region [16].

The claim that by the end of 2016 at least one million had been arrested, tricked into entering, or otherwise detained in the camps [17] was initially met with Western media skepticism [18]. The scale was initially validated by local PSB chapters bragging about the percentage of males in their prefectures they had incarcerated [19], then by witness accounts [20], and finally by camp construction activity captured by satellite imagery over time [21].

All prisoners were given a comprehensive health check entering the camps, including blood tests, EKGs and scans of their lungs and other retail organs. These tests became a regular occurrence, approximately every two months [22].
5) THE CREMATORIUMS FOLLOW

From 2016 to 2018, Uyghur and Kazakh witnesses describe several mass executions of male camp prisoners – we don’t know the reason for the killings – which overloaded local disposal systems, such as crematoriums [23].

Local crematoriums also acknowledged occasionally burning bodies from the camps [24], while Uyghur cemeteries were routinely bulldozed [25].

As early as 2017, local authorities put out a directive to construct nine new crematoriums across Xinjiang/East Turkestan [26].

To give a sense of scale: the first completed crematorium, located in Urumqi, placed an ad in the Chinese press to fill 50 security guard positions with a salary of 1200 USD per month [27].
6) THE APPEARANCE OF THE "GREEN PASSAGE" AIRPORT FAST LANES FOR HUMAN ORGAN TRANSPORT

The first “Green Passage” lanes were initiated in Eastern China in 2016 by China’s most prolific heart surgeon: Dr. Chen Jingyu of Wuxi People’s Hospital and China Southern Airlines [28].

While the Xinjiang/East Turkestan crematoriums were constructed, the first “Green Passages” appeared in the Kashgar and Urumqi airports [29]. There was initial incredulity surrounding the lanes’ existence because the population using these airports are, by Chinese standards, ridiculously small. The channels were openly labeled “Special Passengers, Human Organ Exportation Lane” – i.e. outgoing only [30].

The Green Passages were built as part of the solution to two specific problems: first, the hospitals of Xinjiang/East Turkestan were traditionally not considered to be an attractive destination for wealthy foreign organ tourists [31].

The second problem was that human organs traditionally have a short period of transplant viability, as little as 4 hours. However, advances in technology over the last twenty years - specifically the use of extracorporeal membrane oxygenation techniques, organ perfusion systems and associated portable devices - can be exploited both for live organ harvesting and for long-distance transport, increasing a human organ’s window of transplant viability to well over 20 hours, more than enough time to transport organs from Xinjiang/East Turkestan to a coastal Chinese hospital [32].

Sales of foreign extracorporeal membrane oxygenation devices to Chinese transplant hospitals soared from 2016 to 2019 [33].
7) THE LOGISTICS OF HARVESTING FROM AKSU TO THE EAST COAST

All these elements – the hospital, the camps, a crematorium – come together in a single square kilometer in a northwest corner of Xinjiang/East Turkestan: Aksu prefecture [34].

There could be several end-users, but we think we have found one. In Hangzhou, not far from Shanghai, the First Hospital of Zhejiang Province has a formal “big brother” relationship with Aksu’s doctors and medical apparatus [35].

First Hospital is one of China’s ten certified extracorporeal membrane oxygenation training centers. Beginning in 2017, liver transplants increased by 90% while kidney transplants increased by over 200% [36].

On March 1, 2020, First Hospital successfully performed the first double lung transplant on a Covid-19 patient, an advertisement for foreign organ tourists that even during the Covid-19 health crisis First Hospital was open for business [37].

TWO CAMPS. TO THE WEST, A CAMP CONTAINING 16,000 PEOPLE. 500 METERS TO THE EAST, A CAMP CONTAINING 33,000 PEOPLE. IN THE NORTH, WITHIN THE EASTERN CAMP’S PERIMETERS, AKSU INFECTION HOSPITAL. FORMING THE NORTHERN POINT OF THE TRIANGLE, NINE HUNDRED METERS FROM BOTH CAMPS, LIES A HUGE CREMATORIUM [35].

FROM AKSU INFECTION HOSPITAL, IT’S A TWENTY-MINUTE DRIVE TO THE AIRPORT – AND A “GREEN CHANNEL” ESTABLISHED BY SOUTHERN CHINA AIRLINES [36].
8) WITNESSES TO GENOCIDE

When Sayragul Sauytbay was teaching Chinese in her camp, she had access to a makeshift faculty lounge. Following a camp-wide “health check” – they held them every two to three months – a list with the health results would come back a couple of days later. Next to three of the names, was a pink check mark. Over the next ten days, those people with a check mark would disappear in the middle of the night. I asked her why.

“Organ harvesting” she said [40].

Kazakhstan has the largest amount of camp survivors in the world. If the CCP’s main goal is to suppress and destroy the Uyghurs, the Kazakhs can be seen as “accidental witnesses” – and in general, most Kazakhs who were in the camps simply want to put the experience behind them. Yet this also means that if they agree to interview, they are highly objective and observant witnesses. This is what they saw: [41]

THERE ARE TWO KINDS OF PEOPLE WHO LEAVE THE CAMP: THE FIRST ARE YOUNG PEOPLE, ABOUT 18 YEARS OLD ON AVERAGE. THE ANNOUNCEMENT THAT THEY ARE “GRADUATING” IS USUALLY MADE DURING LUNCH. THEY ARE GOING TO BE EXPLOITED FOR THEIR LABOR AT A FACTORY OUT EAST [42].

THE SECOND GROUP IS AGED BETWEEN 25 TO 35. IN FACT, THE AVERAGE AGE IS OFTEN 28 – THE STAGE OF PHYSICAL DEVELOPMENT THAT THE CHINESE MEDICAL ESTABLISHMENT PREFERENCES FOR ORGAN HARVESTING [43]. THESE PEOPLE ARE TAKEN IN THE MIDDLE OF THE NIGHT. THE AVERAGE ESTIMATE TENDED TO SPLIT BETWEEN 2.5% TO 5% ANNUAL DISAPPEARANCES FOR THIS AGE GROUP [44].

SOME SAY THERE ARE ONE MILLION IN THE CAMPS, SOME SAY THERE ARE THREE MILLION. MY BEST ESTIMATE FOR MINIMUM DISAPPEARANCES: 1,000,000 IN THE CAMPS, 2.5% ANNUAL DISAPPEARANCES. IN OTHER WORDS, AT A MINIMUM, 25,000 HUMAN BEINGS DISAPPEAR FROM THE CAMPS ANNUALLY. 68 PEOPLE A DAY [45].

AND EVERY ONE OF THE PEOPLE WHO DISAPPEARED, IF THE ORGANS ARE EXTRACTED CORRECTLY AND SOLD TO FOREIGN ORGAN TOURISTS, IS WORTH BETWEEN 500,000 TO 750,000 USD [46].
9) THESE FINDINGS SIMPLY CAN'T BE EXPLAINED BY OTHER THEORIES

Beijing’s claim that the transplant system reformed in 2015 cannot explain the fact that they were caught making up the numbers of voluntary donations based on an equation, the proven persistence of short waiting times for organs, a perceptible increase in hospital transplant capacity across China [47], and continued Chinese hospital promotions aimed at foreigners, particularly from the Gulf States [48].

The overall picture of transplant activity is one of continuity, a gradual hand-off from Falun Gong-practicing victims to Uyghur victims (although it is worth noting that Falun Gong are still being harvested and some Falun Gong practitioners have even been incarcerated in the Uyghur and Kazakh camps according to Kazakh witnesses).

Surveillance cannot explain both the intrusive health checks given to the Uyghur population and the repetitive health checks inside the camps. DNA only needs a single sample. Tissue typing, and particularly the screening of diseases such as hepatitis, require repetitive testing.

Beijing’s counter-terrorism initiative cannot explain the scale of the crematoriums, the “green lanes” for human organs in the airports, the brisk purchase of extracorporeal membrane oxygenation devices, or the mass disappearances of camp detainees in their late twenties.

Beijing’s anti-radicalization measures and “vocational training” cannot explain the persistence of the camps. The CCP publicly claimed that 100% of the Uyghurs, Kazakhs, Kyrgyz and Hui had graduated by the end of 2019. As any recent camp refugee, or anyone studying camp activity on Google can confirm, the camps did not empty out in 2020.

Why? Because there are two financial pillars supporting the repression throughout Xinjiang/East Turkestan: forced labor and forced organ harvesting. Both have become self-perpetuating systems. And without the West’s active resistance, both are likely to continue for years to come.
[10] Author’s interview with confidential witness. Turkey, October 2019.
[16] Author’s interview with software engineer. Turkey, October 2019.
[27] Ibid.
[31] Author’s interview with Enver Tohti, United Kingdom. 2019.
[33] Author’s interview with intelligence operative, United States. October 2020.
[34] Culchehra Hoja, Radio Free Asia, Aksu Internment Camp Was Former Hospital, Raising Fears Uyghur Detainees Are Used in OrganTrade. November 11, 2018.

[36] Ibid. See also Gulchehra Hoja, Radio Free Asia, Internment Camps in Xinjiang’s Aksu Separated by Crematorium, November 13, 2020.

[37] Author’s research team, preliminary findings on The First Hospital of Zhejiang Province, November 2020.

[38] Author’s research team, preliminary findings on The First Hospital of Zhejiang Province, November 2020.

[39] Author’s research team, preliminary findings on The First Hospital of Zhejiang Province, November 2020; see also China Daily, Zhejiang performs world’s first lung transplant surgery for elderly, March 3, 2020.

[40] Author’s interview with Sayragul Sauytbay, Sweden, September 2019.

[41] A short video explaining the author’s methods and interviews in his 2020 research trip to Kazakhstan will be found on YouTube: Ethan Cutmann/VOC - Searching for “The Disappeared”, April 27, 2020.

[42] Author’s interviews with camp refugees, Kazakhstan, January 2020.

[43] Author’s interviews with Dr. Charles Lee of the World Organization to Investigate the Persecution of Falun Gong, United States, 2016.


[45] Author’s estimate based on interviews with camp refugees, Kazakhstan, January 2020.

[46] Author’s press conference, Timecode 1:00:00 to 1:01:30, Taiwan, October 2, 2018. See also David Kilgour, Ethan Cutmann, David Matas, Bloody Harvest/The Slaughter: An Update.
