**CDC Ignores Boys’ Rights**

The Centers for Disease Control requested public comment on draft recommendations for healthcare providers to proactively discuss the benefits and risks of non-therapeutic male circumcision. The recommendations mimic the 2012 report of the American Academy of Pediatrics (AAP), claiming potential benefits of circumcision outweigh the risks, even though the AAP’s report admitted, “...the true incidence of complications after newborn circumcision is unknown.” The CDC, however, goes beyond the AAP by targeting intact teens and young men for “education” about the “benefits” of circumcision.

The majority of the more than 3,000 comments published online criticize the CDC’s irresponsible recommendations. Andrew Delaney, JD, summed it up well: “As a lawyer who has done work on the issue of circumcision, I counsel the CDC to withdraw the proposed recommendations. They are ill-advised from a scientific/medical, ethical and policy standpoint, reflecting 1) an egregious misuse of HIV studies done in a Sub-Saharan African setting, 2) a misrepresentation of the risk/benefit analysis that puts it at direct odds with medical practitioners in other parts of the developed world, and 3) a failure to properly account for the numerous ethical concerns regarding the practice of circumcision, including the potential that circumcision may in fact violate equal protection. Furthermore, there is evidence that non-scientific factors played into the process by which the CDC reached its result. ...For the sake of its own integrity, the CDC must immediately retract its proposed recommendations.”

Jere DeBacker’s comment highlights another aspect to the issue: “The CDC’s statement on circumcision fails to mention the most important benefits of the surgery how much money the medical community makes, the profit they get from selling baby foreskins, and the preservation of a cultural ritual. The committee must feel these benefits outweigh the risks of looking foolish before the eyes of the world.”

An outstanding critique of the CDC’s recommendations by Dr. Robert Van Howe, with more than 1,300 references to journal articles (many of which the CDC failed to include in its considerations), can be found at [www.academia.edu/10553782/A_CDC-requested_Evidence-based_Critique_of_the_Centers_for_Disease_Control_and_Prevention_2014_Draft_on_Male_Circumcision_How_Ideology_and_Selective_Science_Lead_to_Superficial_Culturally-biased_Recommendations_by_the_CDC](http://www.academia.edu/10553782/A_CDC-requested_Evidence-based_Critique_of_the_Centers_for_Disease_Control_and_Prevention_2014_Draft_on_Male_Circumcision_How_Ideology_and_Selective_Science_Lead_to_Superficial_Culturally-biased_Recommendations_by_the_CDC). All published comments can be found at [www.regulations.gov/#!docketDetail;D=CDC-2014-0012](http://www.regulations.gov/#!docketDetail;D=CDC-2014-0012). The CDC’s recommendations will be published later this year.

**NHS Calls Circumcision “Treatment of Last Resort”**

The UK’s National Health Service (NHS), in its 2014 report, says, “[M]ost healthcare professionals now agree that the risks associated with routine circumcision, such as infection and excessive bleeding, outweigh any potential benefits....
NOCIRC celebrates its 30th anniversary this year! During those 30 years, the circumcision rate has dropped about 35% nationally, and is under 20% in western states. Intactivists have fought to lower state Medicaid reimbursement and 18 states no longer reimburse non-therapeutic circumcision. We are moving from saying “No!” to circumcision to saying “Yes!” to an Intact America. We're not done, however, because the stakeholders aren’t going to give up a billion-dollar-a-year industry without a fight.

Following the AAP’s 2012 self-serving report, the CDC copied the AAP “evidence” in its draft recommendations for circumcision and even went a step further by targeting intact boys and young men. These are the males we’ve saved during the past three decades. Their parents were educated by us and the boys were educated by their parents, so they won’t be duped. They are normal and healthy, which should allay any fears. Throughout history, the majority of the world’s males have been and are intact and healthy.

In his comments to the CDC, one man wrote, “My cynical friends, who generally look askance at government and doubt it ever listens to the people, think this ‘seeking public comment’ is just a ruse and an empty formality. They say the powerful circumcising interests in the US already have the CDC in their pockets and the CDC benefits best by standing with them and not the people. So they say, the CDC despite overwhelming public comment, science, anecdotes, pleas, and evidence will ‘conclude’ it knows best and repeat what it said over and over. It’s a collapse of their own dead weight.

We’ve known that the flawed African studies were conducted to promote circumcision worldwide. It was called a voluntary circumcision program, then it became a coerced program when Africans were offered food and money to get circumcised because not enough men were volunteering. Now programs have been initiated to convince African parents to circumcise their baby boys. What about infant circumcision is voluntary? We saw the extent of their plans firsthand on 1/28/15, when.

PEPFAR (President’s Emergency Plan for AIDS Relief) held its 6th VMMC (Voluntary Male Medical Circumcision Within Maternal, Newborn and Child Health). The webinar, sponsored by PEPFAR, UNICEF, USAID, CDC, et al., discussed the African studies without admitting they have been challenged and without addressing the ethical and legal considerations of amputating normal body parts of minors, the short- and long-term risks and harm of genital cutting, and human rights. As when North American researchers began their circumcision agenda in Africa, these people are determined to move forward. The US stands alone in promoting non-therapeutic genital mutilation of infants and children. Instead of listening to their esteemed colleagues in European countries who recognize the importance of the foreskin and do not suffer the adverse consequences suggested by doctors in the US, the AAP called these colleagues “biased” because they do not circumcise. Are we biased, then, because we do not cut the genitals of our daughters? Our medical associations are going so far out on a limb that it won’t be long before the limb and the whole sordid non-therapeutic circumcision practice collapse of their own dead weight.

On another note, we had a wonderful turnout at the Boulder Genital Autonomy symposium, sponsored by NOCIRC, Genital Autonomy, Intact America, and NOCIRC of Colorado. At the start, I had the privilege of introducing many of the movement’s elders to all the young newcomers in attendance from here and abroad. They bring us hope because they are intelligent, articulate, and dedicated to ending genital cutting of minors. We still have work to do but our numbers are growing and we know we have right on our side. We continue because infants and children need us to speak for them. Hopefully, African mothers and fathers will hear our message, too, and speak for and protect their children.

Thank you to all of you who are moved to help in the ways you can. Together, we are making a difference!
In Memorium (cont.)

Elizabeth Noble, PT, (pictured here with Leo Sorger, MD) at the University of Padua, where she spoke about AIDS money in Africa being used inappropriately by government officials. She and Leo authored The Joy of Being a Boy, dedicating it “To the little boys of the future: May your bodily integrity be honored.”

If American physicians and nurses thought they could keep circumcision in the dark, they didn’t count on the power of public protests to bring their horror into the light.

― Elizabeth Noble

Letters to the Editor

“The controversy deepens as do the trenches on either side.... The CDC has jumped into the fray over circumcision, trying to frighten American parents into having, and often paying cash for, a completely unnecessary and potentially risky operation performed on all healthy newborn males. The CDC’s suggestion that, in the name of health, all men should have this part of themselves surgically removed, not only defies rationality, but again completely ignores the intended function of the foreskin as well as some of the reasons men might want to hang on to this very specialized tissue and indeed have a fundamental right to do so. They not only do not even mention the sensitivity studies comparing circumcised and intact penises but also the powerful aesthetic values humans attach to how their bodies appear. Some men care what this body part looks like, want the right to make their own decisions about it, and to be left the way they were born.

Using HIV data from Africa is scientifically and morally corrupt and all studies in the west have shown circumcision does not affect HIV transmission. Listening to the CDC’s litany of claims, one would expect the streets of Europe, Asia, and South America to be besieged with moribund men riddled with STD’s, HIV, penile cancer, urinary infections, and so on. No other medical society in the world supports the CDC’s assertions. If the evidence was really there, why doesn’t the world’s medical community recommend circumcision for their populations? One enduring truism in medicine and science is that major claims require major proof. Claiming that this most important part of the human body is somehow naturally flawed, is a major claim indeed. So where’s the proof?

The CDC’s report offers the groundbreaking observation that there are germs that grow under the foreskin. One wonders, if our government’s most influential health organization were privy to the fact that germs are also found growing in the genital tracts of women, they would propose circumcision of newborn girls as an antidote. Warm water might be a more direct approach. The evidence supporting this major violation of human rights is biased and sloppy science promoted by a few very motivated advocates and certainly not a reason to deprive a male infant of his inalienable right to be left intact.” Dr. Dean Edell, California.

We would like to express our special thanks to Hans-Rüdiger Carlo Struck (1978 - 2013) and his family for his generous bequest to NOCIRC.

We also would like to thank Johnny A. Peterka for his generous contribution to NOCIRC in memory of William Noble Hamilton.

May they rest in peace, knowing that we are able to do all the more in our efforts to secure the birthright of infants and children because of them.

“Thank you for the financial support you sent to protect children and intact men from forced circumcision. I have traveled by motorbike to remote Eastern parts of Uganda, where there is mass circumcision. HIV infection is increasing and there is a growing number of child pregnancies because condoms are never used. Circumcision is said to be the solution to HIV. Government campaigns tell people to go to government clinics for free services so that AIDS can be eradicated in Uganda. After many years of mass circumcision in Louland, Kenya, HIV reports are shocking. Migori County alone has 27% of HIV cases. Education awareness in Eastern Uganda has helped to change the way most people believe circumcision prevents HIV. I wish we had more volunteers to reach more people. There is more to be done here.” Prince Hillary Maloba, Kenya.

“How can people who consider themselves civilized sanction the barbaric deed of circumcision? Routine disfiguring of males became popular in America somewhere near the middle of the 19th century for why? To curtail masturbation (oh, those nasty Victorians!)? We cringe at such, yet we do the same on a smaller scale, albeit on a large stage. What is assumed to be innocuous erogenous tissue is literally amputated. How does one consider even one millimeter of anything erogenous innocuous? Mothers, follow your gut instincts and defend your infants from harm!” Joan Gordon, California.

“Those of us who are victims of surgery know only too well of disfigurement, desensitisation, dissatisfaction, and erectile dysfunction with age. How many mothers know of these consequences when agreeing to that ‘little snip’?” Anthony Forester, Devon, UK.

Ancient historic accounts and recent scientific evidence leave little doubt that during sexual activity the foreskin is a functional and highly sensitive, erogenous structure, capable of providing pleasure to its owner and his potential partners. – Nordic Association for Clinical Sexology, http://nacs.eu/data/press_release001.pdf, 10/.
Laws, Lawsuits, & Legislation

EGYPT
Agga – An appeals court sentenced Raslan Fadl, a doctor and preacher, to two years in prison for manslaughter and three months for performing FGM on Soheir al-Bata’a, 12, who died during the procedure. Soheir’s father, Mohamed al-Bata’a, was sentenced to 3-month house arrest. This is the first time the 2007 law criminalizing FGM was implemented, putting medical practitioners on notice. CRINmail 1413, 1/29/15.

ISRAEL
Attorney-General Yehuda Weinstein told the High Court of Justice that family courts, not rabbinical courts, should decide whether a baby is to be circumcised when divorcing parents disagree. The Rabbinical High Court had ordered the mother of a one-year-old to circumcise her son – the father’s wishes – and fined the mother every day until she did. The mother’s attorney, Avigdor Feldman, told the High Court she opposes circumcision based on the boy’s best interests. www.jpost.com, 6/29/14.

MALAWI
Blantyre – Helton Robin, 28, and Dave James, 19, pleaded guilty to unlawful wounding for forcing a 12-year-old boy into an initiation ceremony where he was circumcised. They were sentenced to 8 months in prison. The boy’s lawyer, Zwelithini Chipembere said, “Those who forced circumcision on the boy have to pay the price. This is total abuse of human rights. No one should be forced to be circumcised.” www.nyasaetimes.com, 9/13/14.

SPAIN
Barcelona – A Spanish court convicted a Gambian couple to 12-year prison sentences for circumcising their two daughters. The Supreme Court rejected an appeal, saying the parents, Binta S. and T. Sekous who have lived in Spain for 20 years, are guilty of FGM as charged. http://en.starafrica.com, 6/1/14.

UNITED KINGDOM
Leicester – Hassan Abdulla, MD, who circumcised 41 boys at a home clinic, was found guilty of misconduct. He performed operations for Muslim and Jewish families. www.bbc.com, 9/11/14.

London – Dr. Dhanuson Dharmasena and Hasan Mohamed were charged with re-closing a woman’s vagina following childbirth at The Whittington Hospital. This is the first criminal action since FGM became illegal in 1985. London Evening Standard, 3/22/14 and www.bbc.com, 1/20/15.

Vernon Quaintance, 71, a former sacristan for the Knights of Malta, pleaded guilty to nine sex offenses occurring during the 1960s and ’70s, including boys as young as 11. Quaintance, who headed the Gilgal Society, a group promoting circumcision for health, sexual satisfaction, and self-image, was also found guilty in 2012 of possessing child pornography. www.thetablet.co.uk, 7/18/14.

Sir James Munby, commented in proceedings brought by a authorities seeking to take into foster care a Muslim brother and sister because the girl was a victim of Type IV FGM. Munby noted that, while subjecting a girl to FGM could result in her being taken into care, male circumcision would not lead to a boy’s removal from his family, even though the procedure is more harmful than at least some forms of Type IV FGM. www.inside-man.co.uk, 1/15/15.

UNITED STATES
New York, NY – In 2008, a 59-year-old man was circumcised by a urologist to relieve inflammation. The man later claimed this resulted in Peyronie’s disease, causing curvature, sexual dysfunction, and emotional distress for him and his wife. They were awarded $1,475,000. Urology Times, 3/18/14.

Moussa Diarra, 48, an African native, forcibly sodomized his 24-year-old wife before attempting to circumcise her with a razor blade. Diarra was indicted on charges of forcible sex act, aggravated sexual assault, attempted assault with intent to disfigure or dismember, and assault with intent to cause physical injury with a weapon. New York Post, New York Daily News, 10/12/14.

Scranton, PA – While the couple’s names are being withheld to protect their child, their attorney, Peter Paul Olszewski, Jr., filed a civil suit on 1/29/15, claiming Maria T. Bigus, DO, disfigured and permanently damaged their son’s penis while circumcising him in 2013. The suit accuses Dr. Bigus and Moses Taylor Hospital of failing to assess the infant’s hypospadias (the urinary opening was not at the tip of the penis) before and during the surgery. The parents later noticed the baby’s split urine stream that will require additional surgery. http://the.times-tribune.com, 1/30/15.

Greenville, SC – The 5th Judicial Circuit Court decided that the case of adoptive parents suing the Department of Social Services, the Medical University of SC, Greenville Health System, and several caregivers for performing unnecessary sex-assignment surgery on an intersex baby will move forward. The penis and testicles were amputated from this now healthy 8-year-old who identifies himself as a boy. “This ruling holds doctors accountable when they recommend such drastic and irreversible procedures for infants but fail to ensure caregivers are fully informed about the risks or options” said Kristi Graunke, Southern Poverty Law Center senior supervising attorney. www.wyff-4.com, 4/10/14.

William Padget, JD (the Finkel firm in Columbia), and David Llewellyn, JD (Johnson & Ward in Atlanta), tried a case in October for a boy who lost his ventral shaft skin in a Gomco circumcision. The jury awarded a combined verdict of $225,000. Urology Times, 3/18/14.

Seattle, WA – Peter Adler and Steven Svoboda (Attorneys for the Rights of the Child) co-authored an open letter to the Bill and Melinda Gates Foundation about that organization’s promotion of circumcision for HIV prevention. The letter highlighted the bias, lack of ethics, and buried results of the African circumcision trials; circumcision’s ineffectiveness in preventing HIV; the adverse effects of male circumcision among African men and women; and the risks, harms, and sexual damage of circumcision. See www.arclaw.org/our-work/.
**YEMEN**

**Taiz** – Abdul Gaher’s penis was burned during circumcision in 2009. The technician wrapped his penis in gauze and told the father, Sultan Al Samee, to remove the dressing in a week. When the father did, the boy’s penis was inflamed and skin was peeling off. In 2010, Al Samee took the case to court. A coroner independently examined the case and blamed the technician. [http://gulfnews.com, 8/24/14](http://gulfnews.com).

**Medical Literature Highlights**

**AUTISM**

“We confirmed our hypothesis that boys who undergo ritual circumcision may run a greater risk of developing ASD [autism spectrum disorder].” This finding, and the unexpected observation of an increased risk of hyperactivity disorder among circumcised boys in non-Muslim families, need attention, particularly because data limitations most likely rendered our HR estimates conservative. Considering the widespread practice of non-therapeutic circumcision in infancy and childhood around the world, confirmatory studies should be given priority. Frisch M, Simonsen, J. Ritual circumcision and the risk of autism spectrum disorder in 0- to 9-year-old boys: national cohort study in Denmark. 2014 J of the Royal Society of Medicine;0(0)-1-14. DOI: 10.1177/0141076814565942.

**CIRCUMCISION BIAS**

“As a physician without a strong opinion about circumcision (MC), I found the article by Morris et al in the May 2014 issue of Mayo Clinic Proceedings initially convincing, but on closer inspection, it is marred by bias. The authors make no mention of position statements against MC or strong international critique of the American Academy of Pediatrics (AAP) position, and they omit the AAP’s own conclusion that ‘health benefits are not great enough to recommend routine circumcision for all male newborns.’ Ignoring this equipoise, they claim that MC benefits ‘vastly exceed’ risks and suggest that parents who do not authorize MC are unethical and violate the rights of children. The bias does not stop there…. Readers may want to consider alternative viewpoints.” Ian Jenkins, MD. Mayo Clinic Proc. November 2014;89(11):1588.

**CIRCUMCISION COMPLICATIONS**

“[E]ven under the most favourable conditions – qualified medical personnel, modern hospitals, the latest equipment, an advanced Western society – circumcision of infants still cannot be performed without an unacceptable incidence of complications and adverse cosmetic outcomes….The structure of the foreskin does not lend itself to neat amputation, but is highly vulnerable to complications and messy cosmetic outcomes.” Darby R. To avoid circumcision complications, avoid circumcision. Can Urol Assoc J. 2014 Jul-Aug; 8(7-8):231.

“In the advent of mass voluntary medical male circumcision for the partial prevention of HIV, previously rare adverse events associated with adult male circumcision are likely to be encountered with higher frequency….Fourrier’s gangrene is a rare occurrence after adult male circumcision with associated high morbidity. Galukande M, Sekavug D, Muganzi A, et al. Fourrier’s gangrene after adult male circumcision. International Journal of Emergency Medicine 2014, 7:37.


“Epidermal inclusion cysts are rare and few cases have been reported worldwide. A five-year-old boy presented with a complaint of a mass located at the dorsal aspect of the penis along the circumcision scar. The mass was…excised under general anaesthesia….Complete total excision is usually curative and prevents recurrence.” Ofaha CG, Dakum NK. Post Circumcision Epidermal Inclusion Cyst: A Case Report. IOSR Journal of Dental and Medical Sciences Oct 2014;13(10):73-75.

**PSYCHOLOGICAL AND EMOTIONAL DAMAGE**

“The purpose of this study was to determine whether the circumcision surgery produced a higher incidence of aggressiveness and a lower incidence of emotional expressiveness in circumcised children versus uncircumcised or intact children…. [C]ircumcised boys compared to intact boys scored higher on…activity/impulsivity, aggression/defiance, and peer aggression…higher on…. depression/withdrawal, general anxiety, separation distress, and inhibition to novelty…higher on….negative emotionality, sleep, eating, and sensory sensitivity…lower on…. compliance, attention, mastery, motivation, imitation/play, empathy, and prosocial peer relations.” Leone-Vespa T. Understanding the relationship between circumcision and emotional development in young boys: measuring aggressiveness and emotional expressiveness. http://gradworks.umi.com, 7/31/14.

“The CDC has completely ignored the psychological effects of genital cutting on male children… Circumcision causes immediate harm… alters the brain… has psychological consequences for men… the majority of boys circumcised as children and adolescents meet diagnostic criteria for Post Traumatic Stress Disorder…. medical professionals are shaming boys’ bodies…. We oppose the CDC’s circumcision recommendation and encourage all parents to do the same in order to protect their children from physical and psychological harm.” O’Connor P, Narvaez.
CIRCUMCISION LITERATURE

“The majority of the literature on circumcision is based on research that is not necessarily applicable to North American populations....Further research is needed to inform policy makers, health-care professionals, and stakeholders (parents and individuals invested in this debate) with regard to the decision to perform routine circumcision on male neonates in North America. Bossio JA, Pukall CF, Steele S. A review of the current state of the male circumcision literature. J Sex Med 2014. doi: 10.1111/jsm.12703.

ETHICS

“The purpose of this article is to give urologists elements of reflection...according to the ethical principles of autonomy, beneficence , non-maleficence and justice....The main pitfall for the surgeon remains in respecting the child's autonomy.” Castagnola C, Faix A. Ethics and ritual circumcision. Prog Uro. 2014 Sep 5. pii: S1166-7087(14)00197-3.

"Medically unnecessary genital surgeries – of whatever degree of severity - will affect different people differently. This is because each individual's relationship to their own body is unique, including what they find aesthetically appealing, what degree of risk they feel comfortable taking on when it comes to elective surgeries on their reproductive organs, and even what degree of sexual sensitivity they prefer (for personal or cultural reasons). That's why ethicists are beginning to argue that individuals should be left to decide what to do with their own genitals when it comes to irreversible surgery, whatever their sex or gender.” Earp B. Boys and girls alike: An un-consenting child, unnecessary, invasive surgery: is there any moral difference between male and female circumcision? http://aeon.co/magazine/philosophy/male-and-female-circumcision-are-equally-wrong, 1/13/14.

"[M]ale and female forms of non-therapeutic genital alteration should no longer be discussed in completely non-overlapping discourses, whether from a legal or moral perspective. Instead, at least to my mind, the relevant framework is one that analyses a child's right to bodily autonomy, and considers how tolerant we are willing to be, in Western societies, of practices which irreversibly alter a person's 'private parts' in a non-trivial fashion, in the absence of medical necessity, and before the person has a chance to say 'no.' Earp B. On the supposed distinction between culture and religion; A brief comment on Sir James Mundy's decision in the matter of B and G (children). http://blog.practicalethics.ox.ac.uk/2015/02/on-the-supposed-distinction-between-culture-and-religion-a-comment-on-sir-james-mundys-decision-in-the-matter-of-b-and-g-children.

HUMAN PAPILLOMA VIRUS


PAIN

“Relief from pain is a human right that should never be violated....We hope that future studies...will include intraoperative and postoperative pain when estimating the risk of adverse effects for neonatal male circumcision.” Bisogni S, Olivini N, Festini F. Undertreated and Untreated Pain Should Be Considered an Adverse Event of Neonatal Circumcision. JAMA Pediatrics, November 2014;168(11):1076.

PARENTAL DECISION MAKING

“If parents lack accurate, up-to-date information regarding both the risks and benefits of circumcision, this calls into question whether the proxy consent they provide is truly informed.” Sardi S and Livingston K. Parental Decision Making in Male Circumcision. MCN in Advance. 2015, page 6.

PENILE SCALD BURNS

“Preputial skin has similar color, texture, and composition to the skin of the penile shaft. The inner preputial skin may be transferred as a flap based upon Darts fascia to resurface full-thickness burns of the penile shaft, providing a gliding and stretchable surface cover unique to the penis....It is advantageous that inner preputial skin is commonly spared.” Fuller, SM, Roughton MD, Gottlieb LJ. The Inner Prepuce Flap for Penile Scald Burns. Journal of Burn Care & Research, May 12, 2014, doi:10.1097/BCR.0000000000000055.

PHIMOSIS AND HIV/AIDS

“...I discuss the parallels between responses to syphilis in nineteenth century Britain and HIV/AIDS in contemporary Africa. In each case, an incurable disease connected with sexual behavior aroused fear, stigmatisation and moralistic responses, as well as a desperate scramble to find an effective means of control. In both cases, circumcision of adult males, and then of children or infants, was proposed as the key tactic....[C]ircumcision played little or no role in the eventual control of syphilis and...nineteenth century debates may assist contemporary policy-makers to avoid the treatment dead-ends and ethical transgressions that marked the war on syphilis.” Darby R. Syphilis 1855 and HIV-AIDS 2007: Historical reflections on the tendency to blame human anatomy for the action of micro-organisms. Global Public Health, 2014, http://dx.doi.org/10.1080/17441692.2014.957231.
VOLUNTARY MEDICAL MALE CIRCUMCISION

“I am concerned about a number of statements in the article on providing economic compensation for voluntary male circumcision in Kenya....The protection of human research participants requires documentation of informed consent and additional safeguards to protect economically disadvantaged persons. Without full disclosure of informed consent information and the additional safeguards taken to protect the rights and welfare of these participants, I am concerned that basic ethical criteria for the involvement of research participants may have been violated.” Adrienne Carmack, MD. Voluntary Medical Male Circumcision in Kenya. JAMA, December 24/31, 2014; 312(24):2686.

WHO AND UNAIDS CONSULTATION

“The technical consultation in Montreux, organised by World Health Organization and UNAIDS in 2007, recommended male circumcision as a method for preventing HIV transmission. This consultation came out of a long process of releasing reports and holding international and regional conferences, a process steered by an informal network. This network’s relations with other parties is analysed along with its way of working and the exchanges during the technical consultation that led up to the formal adoption of a recommendation. Conducted in relation to the concepts of a ‘hybrid forum’ and ‘network’, this article shows that the decision was based on the formation and consolidation of a network of persons. This were active in all phases of this process, ranging from studies of the recommendation’s efficacy, feasibility and acceptability to its adoption and implementation. In this sense, this consultation cannot be described as the constitution of a ‘hybrid forum’, which is characterised by its openness to a debate as well as a plurality of issues formulated by the actors and of resources used by them. On the contrary, little room was allowed for contradictory discussions, as if the decision had already been made before the Montreux consultation.” Giami A, Perrey C, et al. Hybrid forum or network? The social and political construction of an international ‘technical consultation’ male circumcision and HIV prevention. Global Public Health 2015 http://dx.doi.org/10.1080/17441692.2014.998697

AUSTRALIA

Sydney – Norrie May-Welby, a Scot who has lived in Australia since the age of 7, officially became the world’s first non-gender person. Norrie won a four-year legal battle to be recognized as “spansexual” and now has a passport stating “Sex not specified.” Bruce Norrie Watson, was initially raised as a boy who liked playing with dolls. Norrie says ‘Sex non-specific’ is the title we got on my legal documents but that’s clinical. I refer to myself as ‘androgynous.” www.dailyrecord.co.uk, 1/28/15.

October 26th marked International Intersex Awareness Day, celebrating the contribution the intersex community makes to the City of Sydney. The city funded Organisation Intersex International, which raises awareness about issues faced by members, including stigmatization, poorer mental health outcomes, exclusion from services, and the loss of independence over their bodies. www.gaynewsnetwork.com.au, 10/6/14.

CHINA

Jiangsu – Wang Fangli, dissatisfied with the results and the medical expense of his circumcision, stabbed Shan Erhui to death. It was not clear whether Shan was the doctor who performed the surgery or why Wang, 45, was circumcised. http://zeenews.india.com, 1/29/15.

DENMARK

A poll of 1000 people conducted by Metroxpress, a Danish newspaper, showed 64% think circumcision should be restricted or banned, prompting Denmark’s parliament to debate the issue. www.digitaljournal.com, 11/27/14.

GERMANY

NOCIRC Deutschland e.V. (registered association), founded by Bernd Rohlfs and Frank Tschuschke, was officially credited in June with the status of public charity organization.

GHANA

Dr. Kwaku Addai Arhin said the number of penile amputations has risen at Komfo Anokye Teaching Hospital to 86 in less than 3 months and he has called for a national policy on circumcision. www.ghanaweb.com, 10/14/14.

HUNGARY

Budapest – European attempts to ban circumcision are outright anti-semitism, Russian Chief Rabbi, Berel Lazar said. “I think that they dress it up in nice clothing but sadly what they are trying to do is again take away Judaism from the Jews.” The call of the European Rabbinate should be to ensure a circumcision for every Jewish child, calling such an effort the answer to anti-Jewish prejudice. www.jpost.com, 3/14/14.

[Editor’s note: With the harm of genital cutting established, it would be anti-semitic not to protect all children, including Muslims and Jews. Judaism is carried through the maternal line, not by amputation of the foreskin.]

IRAQ

Mosul – An order for all families around the city of Mosul to circumcise their women was reportedly given by ISIS leader, Abu Bakr al-Baghdadi, potentially affecting four million women and girls. www.khaama.com, 7/31/14.

The Tunisia Daily reported ISIS forcefully circumcised Assyrian men in Mosul without anesthesia. ISIS ordered the circumcision of all Christians. The report states that ISIS sold 700 Yazidi women for $150 each in a slave auction. www.aina.org, 8/18/14.
ISRAEL
Holon – A 2-week-old baby, who lost consciousness during his circumcision at Pinhas Lavon synagogue, was taken to a hospital where he died. His death was blamed on a pre-existing condition rather than the circumcision that caused him to stop breathing, become comatose, and die. www.timesofisreal.com, 6/7/14.

KENYA
Kajiado – Rehema Lesale, 13, bled to death following FGM. Two guardians and the circumciser are to be charged with murder. FGM e-Newsletter, 5/7/14.

Kapenguria – A 53-year-old circumciser gave local police her tools after the death of Alvina Noel, 16, who hemorrhaged from recent circumcision wounds that reopened during the birth of her daughter. www.the-star.co.ke, 9/3/14.

Moi’s Bridge – A circumcision ceremony is a festive occasion for the Bukusu tribe, but it’s a time for those from other tribes to flee. At least 12 men were forcibly circumcised, one 13-year-old lost his penis, and others sought refuge in police stations. Toronto Star, 8/25/14.

Nairobi – A campaign was launched to engage global media outlets to improve coverage of the consequences of FGM on women, girls, families, and communities. UN Secretary-General, Ban Ki-moon, said, “Change can happen through sustained media attention on the damaging public health consequences of FGM, as well as on the abuse of the rights of hundreds of thousands of women and girls around the world.” www.unfpa.org, 11/15/14.

LIBERIA
Monrovia – In Profile Daily reported on July 1 that the Chairman of Child Rights Foundation – Children Welfare Foundation International (CRF-CWFI), Leonid Walter Dunn and his three colleagues, campaigning to eliminate FGM, fled for fear of a traditional mob threatening their lives after a newspaper highlighted their work. CRF-CWFI is calling for the government to enact laws that will punish abusers and uphold provisions of the UN Convention on the Rights of the Child, which seeks the protection of children from all forms of dehumanization and harm. Dunn escaped to Sierra Leone, flew to Boulder, CO, and presented at the 13th International Symposium on Genital Autonomy and Children’s Rights. Since then, his colleagues have arrived in the US and they all have applied for asylum, fearing for their lives should they return to their homeland. They are willing but unable to work until they get government approval and documentation. If you’d like to help, NOCIRC has a CRF-CWFI Fund, and you can donate to help these courageous people by sending your check with “CRF-CWFI” on the memo line to NOCIRC.

Phillip Zinna, Sr. 25, took his 19-month-old son, to Dr. Nimley for circumcision but the doctor cut off the boy’s penis. Medical facilities are not capable of providing help for the boy. Zinna is hoping to take his son to another country for help. http://allafrica.com, 3/11/14.

NETHERLANDS
The Hague – Tom Leijte and Matthijs van de Burgwal, leaders of the youth division of the Dutch ruling party, called for a ban on non-medical circumcision of boys. They cite the 1993 banning of FGM. “Religion in the Netherlands cannot serve as an argument for maiming people for life,” they write in an article in Trouw newspaper. “It is high time that, following the banning of circumcision of girls, circumcision of boys under 18 also be forbidden.” www.jta.org/, 3/7/14.

NORWAY
The Norwegian Nurses Organization urged the government to ban non-medical circumcision of boys under 15. Director Astrid Grydeland Ersvik told health ministry officials at a meeting in February, “We need to gain acceptance for setting a minimum age limit of 15-16 years for circumcision, so that the boy himself can decide...If we have a law that allows this in boys while it is illegal in girls, then this is discriminatory.” www.haaretz.com, 3/25/14.

Oslo – Norwegian parliament voted to regulate ritual circumcision of male children, as practiced by Jews and Muslims. It can only be done by public health professionals, according to the Norwegian news agency NTB. The decision was to ensure that the procedure take place in safe conditions. Public opinion polls show 72% of the population is against the practice. www.globalpost.com, 6/17/14.

[Editor’s note: Babies circumcised in hospitals also suffer complications and die.]

Norway’s state-run hospitals, on January 1, 2015, became legally obliged to offer circumcision. A majority of doctors have been refusing to perform the operation that is often part of religious rituals, claiming it’s unnecessary surgery on healthy infants. At one hospital, 13 of 15 urologists submitted written statements against performing circumcision. “The opposition to this emerged before the law on circumcision was approved,” Dr. Anja Løvvik, head of the urology department, said. Her colleague, Dr. Frode Steinar Nilsen called circumcision “a surgical operation with no health advantages and one that, as with all surgery, carries with it a risk and a burden for the child. That’s why we don’t want to perform it.” www.newsinEnglish.no, 1/22/15.

SCOTLAND
Edinburgh – The Scottish Transgender Alliance and Equality Network held Scotland’s largest gathering of trans and intersex people, their families, and allies in October, with more than 240 people attending. The conference provided a place for intersex people to come together to discuss their specific experiences and challenges. www.kaleidoscot.com, 12/5/14.

SOMALIA
Somalia ratified the UN Convention on the Rights of the Child (CRC), becoming the 195th State to do so. Although the country’s children face ongoing challenges posed by disease, malnutrition and child mortality, Somalia’s ratification was unanimously welcomed by UN agencies and NGOs as an impor-

SOUTH AFRICA

Bulawayo – Foreskins are a profitable “business venture” and reportedly sold to local and foreign clinics, who use them as ingredients for bioengineered skin for burn victims, anti-aging creams to prevent wrinkles, and witchcraft. A South African clinic admitted to supplying an American market, including cosmetic companies. One nurse said their biggest buyers were from South Africa's white community and a few black people who have a market in America, which pays large amounts of money. Bulawayo 24 News, 8/3/14.

Cape Town – At least 30 boys died at initiation schools and 23 people face charges. “In separate trials, 4 medical doctors, 18 traditional circumcisers, and 1 circumcision principal will be tried on 24 counts of culpable homicide, 2 counts of assault with intent to do grievous bodily harm, and 12 counts of contravening...the Children's Act,” National Prosecuting Authority spokesman Nathi Mncube said. The Act prohibits circumcision under 16 years and allows circumcision of boys between 16 and 18 only in certain instances. www.iol.co.za, 6/3/14.

Limpopo – Thabo Moatshe, a radio disc jockey, is asking listeners to reject the government’s circumcision campaign, claiming it is flawed and misleading and only serves to promote unsafe sex. He publicly declared he would not get circumcised. Men are being pressured without knowing about the benefits of keeping their foreskins intact. “Your foreskin is there for a reason...to make sex more enjoyable,” he said. "The government should emphasize condom use." www.sowetanlive.co.za, 9/6/14.

Pondoland – Three people were arrested after a 20-year-old initiate was beaten for “shaming the custom” by disclosing his penile amputation and asking traditional leaders what they were going to do about it. During the previous circumcision season, 43 initiates died, 175 were admitted to hospitals, and 25 lost part or all of their penis. “We, as the government, need to ensure initiates who have been injured are supported and perpetrators, including the traditional circumcisers and nurses responsible for penis-related injuries, are severely punished. They’re being allowed to get away with murder,” said Sizwe Kupelo, spokesperson for the Eastern Cape Health Department. http://mg.co.za/article, 3/25/14.

SWEDEN

Norrköping – School health services found 60 cases of FGM among schoolgirls, 28 with the most severe form. Daughters of Somali immigrants are at risk. FGM was outlawed in 1982 and is punishable by up to 4 years in prison. www.breitbart.com, 6/20/14.

SWAZILAND

Churches have agreed to back male circumcision to prevent the spread of HIV, even though there is no concrete proof that the procedure works and attempts to get people to have the operation have failed. The Accelerated Saturation Initiative (ASI) was introduced in 2010 to circumcise 80% of Swazi males between ages 15 and 49 within a year. The program, a partnership between the Swazi Ministry of Health and Social Welfare and the US-based Futures Group, was extended to March 2012, when only about 20% were circumcised. The US spent $15.5 million, $484 per circumcision. The deadline was extended to 2018. The male medical circumcision program was introduced in a number of countries in Africa to help prevent the spread of HIV. However, USAID national survey evidence, which studied 22 developing countries, primarily in sub-Saharan Africa, reported, “There appears no clear pattern of association between male circumcision and HIV prevalence in 8 of 18 countries with data, HIV prevalence is lower among circumcised men, while in the remaining 10 countries it is higher.” The Swaziland Demographic and Health Survey (SDHS) of 2007 reported the infection rate for circumcised males was 22% while for those not circumcised it was 20%. One study found male circumcision had no protective effect for women and another found male circumcision increased risk for women. http://allafrica.com/stories/201501201240.html, 1/20/15.

TAIWAN

Taipei – National Cheng Kung University Hospital Pediatrician, Chen Chau-jing, advised parents against having their sons circumcised to increase their chance of having a large penis in adulthood. “During infancy,” he said, “the foreskin is attached to the glans and is generally not retractable. Forcible retraction of the foreskin may lead to bleeding, scarring, and phimosis.” Chen said two-thirds of boys’ glans and foreskin are not fully separated by age six but nothing need be done. Less than 1% of boys need a circumcision for medical reasons. www.taipeitimes.com, 8/17/14.

TANZANIA

Tarime – Police Commander Benedict Mambosasa ordered parents to stop cutting their girls. Failure to do so will bring punitive action. Some 643 girls escaped FGM by spending two months at Termination of FGM Masanga Centre. www.dailynew.co.tz, 1/8/15.

SRI LANKA

Maligawatte – Mohamed Hamdan, 3 months, died after circumcision at a medical center. A 47-year-old doctor was arrested. www.dailymirror.lk, 6/4/14.

UGANDA

Mutoto – The Ugandan Tourist Board marketed (as a tourist attraction) a traditional ritual circumcision of at least 1,000 teenage boys, with the blessing of President Museveni. Males are told that, if they do not volunteer, they will be captured and circumcised by force. In the Eastern Cape and Limpopo provinces, at least 419 boys have died since 2008, and thousands of initiates have been hospitalized. There are an estimated two penile amputations for every death. The Guardian, 8/25/14.

Makindye – A study by International Health Sciences University of 314 female sex workers found more than half falsely believe that, after circumcision, protection is not necessary for sex. www.observer.ug, 9/3/14.
These, then, are the human genitals. Considering their great delicacy, complexity and sensitivity, one might imagine that an intelligent species like man would leave them alone. Sadly this has never been the case. For thousands of years, in many different cultures, the genitals have fallen victim to an amazing variety of mutilations and restrictions. For organs that are capable of giving us an immense amount of pleasure, they have been given an inordinate amount of pain.

- Desmond Morris, DPhil (Oxon)

Author: The Naked Ape
Announcements

2015 Genital Integrity Awareness Week
22nd Annual Demonstration & March
US Capitol, March 24-30
See www.sicsociety.org.

BirthKeeper Summit
April 30-May 3, 2015
Berkeley City College

Protecting Genital Autonomy
& Children’s Rights
May 1st panel will include
Marilyn Milos, Soraya Miré,
Hida Viloria, J. Steven Svoboda
www.birthkeepersummit.com

2016 GIAW Film Project
During Genital Integrity Awareness Week
(GIAW), films about non-therapeutic
genital cutting of minors will be shown
on college campuses across the USA and
Canada. If you would like to participate
in this project, contact Steve Scott: ste-
vescottis@comcast.net.

Books & More...

Female Circumcision and Clitoridectomy
in the United States: A History of a
Medical Treatment. Sarah B. Rodriguez.
store/viewItem.asp?idProduct=14559.

Great Sex, Naturally by Dr. Laurie
Steelsmith and Alex Steelsmith. Signed
copies available for a $25 donation to
NOCIRC, PO Box 2512, San Anselmo, CA 94979.

Reclaiming My Birth Rights: A Mother’s
Wisdom Triumphs Over the Harmful
Practices of Her Medical Profession.
Adrienne Carmack, MD. 2014. Adrienne

Unspeakable Mutilations: Circumcised
Men Speak Out. Lindsay R. Watson.
2014. Lindsay R. Watson/Ashburton, New

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Informative Websites,
Blogs, & YouTube Sites

Ashley Montagu Resolution and
Petition: Campaign Against the
Torture and Mutilation of Children
www.montagunocircpetition.org

Association contre la Mutilation des
Enfants
http://ame.enfant.org.free.fr/infos.html

Attorneys for the Rights of the Child
www.arclaw.org

Bay Area Intactivists
bayareaintactivists.org

Beyond the Bris
www.beyondthebris.com/

Bonobo3D
www.youtube.com/bonobo3d

Canadian Foreskin Awareness Project
www.can-fap.net

Catholics Against Circumcision
www.catholicsagainstcircumcision.org

Celebrants of Brit Shalom
www.circumstitions.com/Jewish-
shalom.html

Circumcision and HIV
www.dontgetstuck.wordpress.com
www.circumcisionand hiv.com

Circumcision Decision Maker
www.circumcisiondecisionmaker.com

Circumcision Information and
Resource Pages
www.cirp.org

Victorious Babies” by Alex Steelsmith

Circumcision Information Australia
www.circinfo.org

Circumcision Resource Center
www.circumcision.org

Doctors Opposing Circumcision
www.doctorsopposingcircumcision.org

Genital Autonomy
www.genitalautonomy.org

Global Survey of Circumcision Harm
www.circumcisionharm.org/

Intact America
www.IntactAmerica.org

Intact Denmark
www.intactdenmark.wordpress.com/

Intaction
www.intaction.org

Intactivism Pages
www.circumstitions.com

Intact News
www.intactnews.org

Lucky Stiff
www.luckystiff.org

MGM Bill to End MGM in the US
www.mgmbill.org

Men Do Complain
www.mendocomplain.com

NOCIRC
www.nocirc.org
www.youtube.com/nocirc

NOCIRC of Norway
www.nocirc.no/

NOCIRC of South Africa
www.nocirc-sa.co.za/

NOCIRC of South Korea
www.pop119.com

NOHARM (National Organization to
Halt the Routine Mutilation of Males)
www.noharmm.org

NORM (National Organization of
Restoring Men)
www.norm.org

NORM-UK
www.norm-uk.org

Nurses for the Rights of the Child
www.nurses.cirp.org

Taylor’s Ridged Band
http://research.cirp.org
Cologne Annual Demonstration  
7 May 2015 
honoring the Cologne High Court Decision 
protecting boys' rights

Genital Autonomy 2015  
Myths and Multiple Standards
8-9 May 2015 
Frankfurt, Germany

Genital Autonomy 2016 
The 14th International Symposium on 
Genital Autonomy and Children's Rights 
14-16 September 2016 
Keele University 
Keele, Staffordshire, UK

For more information about these events, see:  
www.genitalautonomy.org/events/

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