Circumcision
A Violent Ritual in Search of a Rationale

By J. Steven Svoboda

The fact that infant circumcision still happens today is astounding. (This article is principally concerned with non-religious circumcision.) If we are male, when we are just hours or days old, doctors cut off one of the most sensitive parts of our body. The operation is violent, usually performed without anesthesia, and unspeakably painful to the infant. The screams, the shaking, the frantic attempt by the newborn to escape this unexpected and unbearable pain can be truly horrible to watch - let alone experience. Concrete medical evidence demonstrates that relative to an adult, the circumcision experience is significantly more traumatizing to an infant, who has not yet developed methods to cope with pain and whose neurological pathways are not yet fully developed. The pain permanently and irreversibly alters portions of the developing brain responsible for pain perception and memory. Researchers found that boys who had been circumcised, four to six months after their circumcisions, displayed heightened physiological pain responses to inoculative shots as compared to girls and boys who had not had the experience of circumcision. In some, the procedure also causes a broad range of documented traumas including learned helplessness, disruption of maternal-infant bonding, suppression of empathy, and damage to self-esteem and body image. Societies tend to be blind to the horrors they create themselves. And so are we regarding male circumcision.

American beliefs that circumcision destroys only a small amount of tissue, and that the tissue lost is of no particular value, are not confirmed by medical research. Medical researchers recently documented that the average circumcision removes over half of the surface tissue on the shaft of the penis and many specialized nerve endings, substantially curtailing sexual sensitivity. Somewhat remarkably, given their constituencies, even the American Medical Association and the American Academies of Pediatrics have admitted that there is no justification for routine circumcision.

Circumcision as a medical (as opposed to religious) procedure was born in this country in the 19th century as a technique aimed at stopping young boys from masturbating by reducing their ability to feel genital pleasure. The pain of the procedure was explicitly cited by doctors as a "positive" by product of the operation. John Harvey Kellogg, M.D., creator of Kellogg's Corn Flakes, said of circumcision, "The operation should be performed without anesthetic, as the pain attending the operation will have a salutary effect upon the mind, especially if it be connected with the idea of punishment." Many doctors also recommended circumcision of girls for similar reasons. By reducing masturbation, male circumcision would supposedly cure a range of conditions including epilepsy, hip trouble, "imbecility," asthma, paralysis, and alcoholism. As time went on, whenever any new disease would become a subject of social concern, circumcision would be proposed as a panacea.

Examples of problems which circumcision was later claimed to cure include sexually transmitted diseases (with blacks being particularly scapegoated for circumcision), penile cancer, prostate cancer, cervical cancer in women, and urinary tract infections.

We should instead be guided by the sort of abhorrence we would have to a suggestion that, for example, a newborn baby girl's breast tissue be removed to guard against the high incidence of breast cancer in adults. Under standard medical practice, amputation is a treatment of last resort.

Circumcision, like any medical procedure, has complications. These occur at a rate of two to ten percent depending on the definition of "complication" - and include a number of deaths each year. At least dozens of baby boys die in the U.S. every year from this needless procedure. Circumcision destroys a male's capacity for certain sexual sensations and dulls other sensations. The "triple whammy" of lost sexual sensitivity resulting from circumcision includes: loss of the foreskin nerves, damage to and exposure of the glands, and loss of skin mobility.

Men circumcised in adulthood have summed up the overall difference in sensation as similar to the contrast between seeing in color and in black and white. There is reason to think that the loss may be even greater for men circumcised as infants, as most men are. Sexual pleasure continues to be reduced as circumcised men age until, in many cases, we are left with relatively little sensation. Like many circumcised men in their late thirties or early forties, I have noticed a dramatic loss of sensitivity in recent years, due to the continuing buildup of layers of keratin over the mucous membrane which remains exposed on our penises after the foreskin is removed.

Some men who understand themselves to be harmed by their circumcisions report being depressed to the point of feeling suicidal or feeling deep rage at their parents and/or physicians. Men experiencing these profound feelings of loss and anger generally have little social support. Some men, upon revealing their distress at having lost a body part they value, have received cruel responses from their counselors.
Male and societal denial regarding harm does not negate the harm. There are at least two reasons we have not heard a great deal from men angry about or physically damaged by their circumcision. First, the millions of circumcised men who hate what was done to them do not speak out for fear of ridicule. The second reason is that most men are unaware of what they lost. It is important to remember that not only the male victims, but society as a whole is denying the existence of harm.

J. Steven Svoboda is a performance artist, a former astrophysicist, a poet, and a Harvard-educated human rights lawyer who is Executive Director of Attorneys for the Rights of the Child, which he founded in 1997. He likes his job a lot because he gets to do his very small part to try to make the world a slightly fairer and nicer place for all of us to live in. Activists are working to stop this act of violence against our children. For information, contact NOCIRC (www.nocirc.org; <nocirc@concentric.net>) or (www.arclaw.org; <arc@post.harvard.edu>.

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