

## Masculinity and Embodiment in the Practice of Foreskin Restoration

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**Keywords:** embodiment; foreskin; foreskin restoration; male circumcision; masculinity

Male circumcision is one of the most widely practiced surgical procedures in the U.S. Although its prevalence is declining, it is still widely considered normal, even normative in some parts of the country and among certain segments of the population. Thus, it may come as a surprise for some to learn that there is a movement of (mostly) men fighting against the surgery, and a portion of these activists advocate methods of *foreskin restoration*. There are two categories of foreskin restoration: surgical and nonsurgical. Surgical restoration involves grafting skin from another part of the body to the penis as a replacement foreskin. Nonsurgical methods vary, but the basic principle to which they all conform is that by stretching whatever skin remains, one can encourage new skin growth. For men dissatisfied with their circumcised state, foreskin restoration, especially of the do-it-yourself, nonsurgical variety, offers an opportunity to reconstruct the altered body. The aim of this paper is to explore the body politics of men who pursue foreskin restoration, the organizations that support them, and the tools they use. Ultimately, I hope to lay bare what *restoration* really is and does for the men who practice it.

Foreskin restoration is almost as old a practice as circumcision itself. Methods of “de-circumcision” arose nearly alongside circumcision (Gilman, 1997; Money, 1991). At least

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two procedures for foreskin restoration were developed during the Roman Empire. Circumcised Jewish males, culturally Othered by their genital marking, sometimes sought to “pass.” During periods of persecution, this was probably even more important. Even without intense persecution, Jews under Roman rule may have felt pressure to conform to the aesthetic standards of the time. Beginning with Greek culture, male bodily aesthetics demanded not only that the foreskin was intact, but also that it was long enough to fully cover the glans of the penis. Men with exposed glans were forbidden to compete in the Olympics (Gilman, 1997; Money, 1991). So, these ancient techniques developed not only for those individuals whose foreskin had been removed, but also those whose foreskin was deemed insufficient.

Modern foreskin restoration can still involve similar surgical techniques, but foreskin surgery is considered by many restorers, and their supporting organizations, dangerous, aesthetically unappealing, and functionally inadequate. Perhaps because of their connection to the political movement against male circumcision, foreskin restorers are often wary of medical, especially surgical, interventions on their genitals. As such, restorers have turned from wishful thinking to creative ingenuity, developing a number of products for their personal use, and marketing these devices online to others. The questions which remain are: How do restorers envision the final result, the restored foreskin? In other words, is there a normative aesthetics of the foreskin operating among restorers, or is this process as autonomously driven as its proponents might think? And what does the practice of foreskin restoration say about masculinity, sexuality, and the body?

### THE PENIS IN SOCIOLOGY

This paper is situated in the nexus of several sociological literatures—on masculinities, gender, embodiment, and sexualities. Masculinities studies, like women’s studies, takes a political approach to the study of gender, exploring how masculinity is constructed by and in institutions and interactions between individuals. The goal is to understand dominant meanings associated with masculinity, how masculinity is endowed with power and privilege, and how individuals resist or implement masculine values in their daily lives (see, for example, Bird, 1996; Carrigan, Connell, & Lee, 1985; Connell, 1987; Connell & Messerschmidt, 2005; Flood, 2008; Kimmel, 1994, 2006; McCaughey, 2008; Messner, 1993, 1997, 1998; Moore, 2002, 2007; Nagel, 1998; Segal, 1993).

Central to the study of masculinities is the study of the male body. As men are drawn more and more into consumer culture, both as subjects who consume and as objects for consumption, the way we see men’s bodies has changed (Alexander, 2003; Bordo, 1999). The goal of these body studies has been to lay bare the dominant meanings written on the body and how individuals both embrace and challenge these ideals in their bodily practices. ‘The body’ is not taken for granted; rather, it is studied as both a symbol and a lived, material entity (Butler, 1993; Bordo, 1999; Gremillion, 2005).

Here, the penis looms quite large. As a symbol of masculinity—its strength, virility, power—the phallic penis is an ideal which the lived, material penis can never fully match. The phallic penis which dominates our cultural consciousness can be seen in pornography. It literally dominates—literally and symbolically dominating women and other men. It is large, hard, erect, imposing (Lehman, 2007). It is what we expect men to be. And yet, penises, like men, come in many shapes and sizes, most of them not what we see in these representations. Obviously, men’s negative feelings about their bodies and masculinity can have serious ramifications for their self-esteem; for example, men are now being diagnosed

with “small penis syndrome,” a type of body dysmorphic disorder characterized by obsessive concern that one’s penis isn’t long enough (interestingly, this is often suffered by men with penises well within the “normal” length range) (Wylie & Eardley, 2007). Likewise, men whose penises fail them, as with erectile dysfunction (ED), experience shame that is deeply tied to their masculinity. Because the penis has, in many ways, come to stand for the man, it is often central to men’s sense of self-worth. Thus, like women who turn to cosmetic surgery to augment their bodies to match feminine ideals, men are increasingly seeking medical and surgical solutions for their problem penises—penile augmentation surgeries, enlargement pumps, pills and injections for ED (Loe, 2001; Potts, 2000; Tiefer, 1994).

When it comes to cultural ideals of the penis in the U.S., the foreskin is largely absent. In fact, circumcision literally erases the foreskin from our imaginings of the penis. Anti-circumcision activists often complain that even doctors learn nothing about the foreskin except how to remove it.<sup>1</sup> Although circumcision rates have declined dramatically, in many places in the country there are generations of women and men who have never encountered a foreskin. It has been fetishized in some pornographic contexts and in some sexual communities, an anomaly inspiring both desire and revulsion.

The foreskin has been invested with meaning by many institutions, the most significant of which in the U.S. is science/medicine. Darby (2001, 2005) has demonstrated the role of medicine in what he calls the “demonization of the foreskin,” leading to increased circumcision rates in both the U.K. and Australia. Gollaher (1994; also Friedman, 2001; Miller, 2002) documents similar tendencies in the American context. Beyond merely preventing masturbation, which was of course a primary goal, circumcision also fit well into a rational, economic model of the body as purely productive, and aligned with American masculine ideology. Phelan (2001) describes this ideology as a phallic ideal, whereby men’s bodies are imagined in complete and absolute opposition to women’s, which are portrayed as passive, uncontrollable, penetrable and leaky.<sup>2</sup> Men must be virile, always ready to actively defend themselves and others, never willing to be victimized or dominated (Phelan, 2001, pp. 41-43). By removing the foreskin, the only penetrable, potentially leaky, even feminine, component of the penis, this institutionalized masculine body project is realized (see also Fox & Thompson, 2009).

In what follows, I try to make sense of foreskin restoration as a masculine body project—one which in some ways resists the dominant cultural ideals of the penis, yet also exhibits men’s obsession with and lived experience of the penis/phallus. How do restoring men come to value the foreskin in a society which has demonized it? How does the restoration process figure into their sense of self-worth? And what relationship, if any, does this body project have with other masculine values?

### **FORESKIN RESTORATION: THE PERSONAL BECOMES POLITICAL**

Though it has a long history, modern foreskin restoration reemerges with a bit of a vengeance in the late 1980s. The movement against male circumcision, known alternatively

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<sup>1</sup> To address this problem, Doctors Opposing Circumcision, an anti-circumcision group, offers suggested medical school curriculum additions: <http://www.doctorsopposingcircumcision.org/info/foreskin.html>, <http://www.doctorsopposingcircumcision.org/info/materials.html>.

<sup>2</sup> The phallic ideal is not merely gendered, but also racialized and sexualized. Men of color and gay men are differentiated from women, but they seem to lack the rational self-control of the phallic ideal (Phelan, 2001, pp. 44-45).

as the Intactivist Movement or the Genital Integrity Movement, coalesces around 1980 with the publication of Edward Wallerstein's *Circumcision: An American Health Fallacy*. The book was the spark for a nascent movement: Brothers United for Future Foreskins (BUFF) began in 1982; The National Organization of Circumcision Information Resource Centers (NOCIRC) was founded in 1985 by Marilyn Milos; and in 1989, the National Organization of Restoring Men (NORM) (which would first be called RECAP (for RECover A Penis)) began looking for members. It is significant that the first organization to emerge in this growing movement was a restoration organization. Clearly, foreskin restoration and the attendant desire to feel whole again permeated the movement.

BUFF was the first group to advocate nonsurgical, tape-based methods of foreskin restoration. Though it no longer exists, a newer organization arose in San Francisco in 1989 to take its place: the National Organization of Restoring Men, or NORM (originally RECAP) (Griffiths, n.d.<sup>a</sup>). Founders Tim Hammond and R. Wayne Griffiths, both practitioners of BUFF restoration methods, felt isolated in their attempts at restoration and decided to bring together a support group. NORM advocates skin stretching techniques over surgical restoration. Like many restorers, NORM members are suspicious of doctors who want to operate on the penis, and are cautious about further risks to the aesthetics, function, and sensitivity of the penis. Restoring men, or men who are considering restoration, can meet one another to discuss their excitement, concerns, and struggles through the process. Importantly, these meetings are private and for men only. Gender segregation is written into the guidelines for any emerging chapter of NORM. These policies explain: "Due to the woundedness of many of the men who participate in these groups and out of a sense of modesty, women will not be invited to attend the regular meetings" (Griffiths, n.d.<sup>b</sup>). Informational sessions, as opposed to support sessions, may be open to women who participate in the Intactivist movement, or who have specific information on circumcision or restoration.

Hammond and Griffiths started NORM as a support group for others who were interested in foreskin restoration. In 1992, foreskin restoration got a national advertising boost from NORM participants when Jim Bigelow published *The Joy of Uncircumcising!* After interest and membership grew, the two decided that another organization was needed, one which would perform an activist/advocacy function so NORM could focus on its role as support group; they formed the National Organization to Halt the Abuse and Routine Mutilation of Males (NOHARMM) in 1992. NOHARMM was devoted to promoting research into the detrimental effects of circumcision, stimulating awareness, and encouraging litigation for botched circumcisions.

Men need not rely solely on the BUFF method anymore. Beyond providing support, it appears that NORM and organizations that bring restoring men together have inspired a new wave of inventiveness. Men have developed—and some have marketed—assorted devices and styles of manual restoration, using a variety of household objects including: the mouthpieces of brass musical instruments, baby bottle nipples, rubber o-rings (normally used in plumbing), silicone aquarium caulk, paper tape, and clay beads. Men pursuing foreskin restoration sometimes choose to document their progress through online diaries, allowing others to compare and contrast the results of different methods. At the time of writing this, there are approximately fifteen commercially produced restoration devices (for example, Figure 1, the TLC Tugger), two foreskin substitutes (for example, Figure 2, the ManHood), and about ten descriptions available for do-it-yourself methods.



*Figure 1.* TLC Tugger kit including tugging straps. Image courtesy of TLCTugger.com, Inc.



*Figure 2.* Blue ManHood cover, fitted over banana. Image courtesy of ManHood, <http://manhoodcanada.com>

## WHY RESTORE?

Before elaborating the political, psychological, and ethical issues that emerge from the practice of foreskin restoration, one must first understand men's motives when restoring. Why are men unhappy after circumcision? Although many men are circumcised in their childhood, often as newborns or early in infancy, and have no direct experience of the intact penis, through sharing their sexual experiences with one another, they note a pattern—that many have difficulty achieving or maintaining erections, or that there is pain or discomfort during the sexual experience. One goal of the Intactivist movement has been to establish that the self-reported complications are, in fact, caused by circumcision. To that end, Intactivists have collected men's testimonials about circumcision's harms. One man started an internet survey to collect larger samples. Completed in 2012, the Global Survey of Circumcision Harms had more than 1000 respondents. Respondents report numerous harms, most commonly: "Insensitive glans (penile head)" (67%); "Dry, keratinized glans (requires lubricants before sex)" (75%); "Excess stimulation needed to achieve orgasm" (59%); and "Delayed ejaculation (I can't orgasm when I want to)" (41%) (27). Additionally, 62% of men report that circumcision "Impedes my sexual relationships" (44). Regarding their emotional or psychological suffering, men felt anger (71%), frustration (72%), "dissatisfaction with my condition" (77%), and "my human rights were violated" (73%).

There are problems with the design of the survey and the scope of its sample, so it cannot, according to traditional research methods, suggest causation; that is to say, this survey cannot be used as evidence that circumcision *causes* the harms it emphasizes, it can only suggest that these harms may be correlated with circumcision (though, without a representative sample, statisticians would reject even these claims of correlation). Still, surveys like these have been central to the consciousness raising efforts of anti-circumcision activists. They start not with statistical analyses or existing medical knowledge, but with men's experiences, both of their circumcised bodies and of the psychic turmoil they attribute to circumcision, which they hope will influence mainstream research agendas and public discourse. When mainstream scientists ignore or discount Intactivists, which often happens, activists have become scientists and conducted studies of their own. By sharing their research, they reach out to other men who may be dissatisfied with their circumcised penis.

Armed with large surveys suggesting a pattern of physical, sexual, and emotional side effects, Intactivists argue that there are a number of mechanisms by which circumcision impacts men's lives and sexuality (see, for example, Zoske, 1998). First, circumcision may go horribly awry and lead to full or partial amputation. Even minor mistakes may have long lasting impacts, according to Intactivists. For example, because they operate on infants, there is no way of knowing precisely how much skin can be removed without causing problems when the boy is fully grown; the amount of skin to be removed is left to a doctor's subjective assessment. Removing too much skin (a tight circumcision) can produce a number of issues including: painful erections, curvature of the penis when erect, skin tears during erection, or bleeding at the circumcision scar, all of which occur when there is not enough skin to allow for full erectile growth. Tight circumcision can lead to erectile and sexual dysfunction and, because of the pain associated, may severely inhibit sexual pleasure. While foreskin restoration is useless when full penile amputation occurs, it may be able to provide some relief in the case of a too-tight or too-high circumcision.

Second, even when circumcisions go as planned, Intactivists argue that sexual problems may still arise. As a double layered piece of skin with a soft, mucosal inner layer, the foreskin produces a gliding movement during sexual intercourse that is pleasurable to both men

and their partners. This gliding action reduces the need for vigorous pumping (or hard, fast rubbing during masturbation) which may cause injury to the self or partner. Intact, the glans moves in and out of the foreskin, and in and out of the penetrated orifice, doubling the possibility for sensation and reducing the need for hard thrusting (Fleiss et al., 1998). The foreskin also allows for the production of natural lubricants, or smegma, that assist in intercourse. Both the gliding mechanism and lubricant are important as an individual ages and sensation and lubrication diminish. For example, the literature describes how, as women age, they produce less vaginal lubrication; the gliding function of the foreskin may counteract this dryness, and reduce the need for store-bought lubricant. Additionally, during masturbation, the gliding function reduces the need for additional lotions or lube, and makes manual stimulation easier.

Third, Intactivists suggest that circumcision literally removes the most sensitive parts of the penis. There are several components to this argument. Firstly, the foreskin itself is more than just skin; it is an erogenous zone, rife with nerve endings. These nerves appear to be able to detect several types of sensations. The foreskin contains Meissner's corpuscles which are a kind of fine touch receptor, and may play a significant role in the foreskin's sexual sensation (Sorrells et al., 2006; Taylor et al., 1996).<sup>3</sup> Secondly, the glans of the intact penis begins as a mucus membrane. When the foreskin is removed, the glans gradually dries up and becomes more like regular skin through a process called keratinization. The result is a slightly hardened and much dryer exterior, which intactivists argue has a diminished capacity for sensation. Thirdly, circumcision removes more than just the foreskin; it also removes the ridged band, the region where the inner foreskin meets the outer foreskin and which Intactivists claim is the *most* sensitive part of the foreskin and penis, and, often, the frenulum, a connective tissue that attaches the foreskin to the glans.<sup>4</sup> These parts also appear to have a high concentration of fine touch receptors, which are lost to circumcision.

Intactivists do not posit only physical or mechanical explanations for the pattern of sexual dysfunction found among circumcised men. They also suggest a psychological explanation (see Goldman, 1997 for full development of this line of argument; also Bollinger & Van Howe, 2011). The fourth mechanism, then, revolves around the early trauma of circumcision, and the perceived violation the infant experiences, which may adversely affect the way a man eventually comes to think about sex. He may connect the early trauma and pain to the sex act, which can reduce the pleasure he finds in it. His self-esteem and sense of worth may be diminished, leading to sexual complications. He may suffer a kind of PTSD. Or, the interruption of maternal bonding resulting from circumcision pain (which Intactivists argue interferes with breastfeeding), may produce an inability to form intimate relationships, necessary for proper sexual function and satisfaction. Circumcised in infancy, most men do not directly remember these experiences, though some have turned to hypnosis and regression therapy and claim to have re-lived or remembered the trauma (Hennen, 2010). To develop this argument, Intactivists have turned to already existing research on infants' experiences of pain, and infant memory (Goldman, 1997; Stein, 1987; Tinari, n.d.).

Though Intactivists spend much energy investigating the physiological and psychological aspects of male sexuality, very little attention is given to the social construction of male

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<sup>3</sup> Meissner's corpuscles are also dense in the fingertips and are responsible for finger sensitivity (like the ability to read Braille) (Sorrells et al., 2006; Taylor et al., 1996).

<sup>4</sup> The removal of the frenulum may depend on the type of circumcision, and precisely how much skin is removed.

sexuality. Their view of sexuality is a highly individualized one. On this view, culture/society has acted on the male body (through circumcision), altering natural masculinity and male sexuality. What Intactivists and restorers hope for is a return to this supposed natural state, and to some kind of inherent, natural, masculine sex. This is precisely what the term “restoration” implies—that you are regaining, or returning, or reconstructing what already existed. What they fail to note, however, is the extent to which this “natural” masculine sexuality to which they seek a return, is itself socially constructed. And, one of the key communities contributing to the construction of this sexuality is the Intactivist and restoring community(ies).

As I show below, the men have collectively imagined the ideal foreskin—one which is long and full, with redundant length beyond the tip of the penis—and this is the body they hope to attain. Despite knowledge that foreskins vary in size and length, these men seek a particular representation of what then becomes deemed “natural.” Moreover, the sex which they imagine will follow restoration is deeply connected to cultural imagery and masculine norms. Their current dissatisfaction has as much to do with what they expect of sex, because of various gendered representations, as it does with any physiological problems. This is true for all men, intact or circumcised—“sex is in the brain, not between one’s legs” (Adult Circumcision Stories, n.d.).<sup>5</sup>

Though restoring men lack direct experience of the intact anatomy, using tapes, weights, and other homemade devices, men hope to encourage the regrowth of the foreskin from the skin leftover after circumcision. As men restore their foreskins, many find that they begin to regain what they believe circumcision took from them, especially when it comes to the question of sexual sensation. These organizations *teach* circumcised men what is wrong with them and *provide* them with a solution in foreskin restoration.

### RESTORATION = AUGMENTATION

When undertaking the foreskin restoration project all restoring men must consider the question of end goals. What exactly does one imagine when picturing the restored foreskin and penis? Reading the NORM website, or any of the information accompanying restoration devices, one gets the impression that restoration is a rather autonomous process, whereby a man reclaims his genital and bodily autonomy from his parents, his doctors, and his circumcising culture. If circumcision is a one-size-fits-all surgery, then restoration must, if it is to confer a sense of empowerment and autonomy, provide men a variety of options from which they can choose, right? In theory, yes; in practice, conformity seems to beat autonomy.

Intact, or uncircumcised, men may vary dramatically in terms of foreskin coverage. Some intact men have a very small foreskin and appear to be circumcised when flaccid and erect. Others have some coverage of the glans when flaccid, but the foreskin retracts fully to expose the glans during erection. Other men have a long or redundant foreskin that hangs over the glans in both flaccid and erect states. In other words, there is a lot of natural variety among foreskins. This variety is represented by the coverage index (<http://www.newforeskin.biz/CI/CIchart.htm>) which describes 10 different foreskin lengths. The first example I

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<sup>5</sup> Quote from a posting on a pro-circumcision testimonials site. Though many of the men on this site are aggressively pro-circumcision, this one man in particular gave a highly contextualized and social constructivist view of both sexuality and circumcision.

described, where an intact man might appear circumcised, represents CI-1 on the index. The second example would classify as a CI-5 or CI-6, and the final example would be a CI-10. Men circumcised in the U.S., where a tight or high circumcision style is the norm, typically begin the restoration process at a CI-1 or CI-2. The end goal? Often a CI-10 or beyond.

Chuck, avid restorer and inventor of the Dual Tension Restoration (DTR) device, documented his own restoration process through photos and videos on his product website. Chuck began at a CI-2 and within twenty four months had achieved a CI-7. But that did not stop him. Chuck continued for more than 90 months and reaching what I would label a CI-10+, basically off the chart. He continues to “tug” to see what is possible with foreskin restoration. DTR consumers write to Chuck about the device, commenting on its quality and effectiveness, as well as their own personal progress. From these user comments, it becomes clear that many customers are seeking the foreskin abundance that Chuck displays. Jerry, for example, exclaims:

I noticed the foreskin did not retract all the way back and stayed covering about 3/4 of the gland [sic] for an extended period of time. WOW never ever have I had this experience. Eventually it retracted—I can only imagine what it must be like to have full coverage 24/7! Chuck your invention is amazing and I am looking forward to full coverage. (Testimonials, n.d.)

Several men were excited after using the device that they were beginning to appear intact, and others described a desire for full coverage, like Alan, who tells Chuck, “I shall go on with this until I have reached the amazing overhang YOU achieved” (Testimonials, n.d.). Lest the reader think that this is merely characteristic of those who purchase Chuck’s DTR device, here is a comment from a man using the CAT II Q Tugger (Constant Applied Tension), a competitor device:

I am planning to continue until I have a nice overhanging foreskin. Presently, even though I have grown a fair amount of skin, my rather large glans does not remain covered unless the skin is cold from swimming or from the weather. (CAT II Q Device, n.d.)

At work in these online interactions in restoration communities is an element of homosocial masculine performance. Scholars have long suggested that a man’s masculinity is tested and judged by (and for) other men (Bird, 1996; Flood, 2008; Kimmel, 1994). This is usually about distancing oneself from all things feminine. Often the gender policing entails violence, bullying, misogyny, anything necessary to prove one’s manliness. But the comments here, and in most Intactivist communities, strike the reader as different. They are not aggressive or bullying; they are, rather, congratulatory and encouraging. Intactivist and restorer’s spaces are safe spaces. And yet, gender is always a performance. In this support group-like environment, the men still feel the need, very literally, to measure up to one another. Rather than simply seeking simple restoration, to have a bit more than they had before, they up the ante. If Chuck can have a CI-10, then each man hopes to have a CI-10 (or more).

Although these men reject the culturally dominant aesthetics of the penis that continue to value circumcision, this does not mean that they are free to create any look they desire. The restoration community establishes an alternative image which becomes the new measure of their masculinity. This conformity suggests that there is a governing aesthetics of the fore-

skin that operates in the community, and perhaps among Intactivists more generally. It exposes the myth of “natural male sexuality.” This normative aesthetic persists despite Intactivist claims that they hope to replace the natural appearance that was stolen from them; in place of natural variation, they seek a particular look. I believe that this is at least in part due to the importance of penis size, and more specifically, length, to how men view themselves. Some Intactivists construe circumcision as a penile reduction surgery because it removes whatever length the foreskin would have added. A longer foreskin may appear as a longer penis, so restoration works as a kind of enhancement procedure. In many ways, this emphasis on length shows that this alternative is not new; restorers do not fully reject the dominant values, but redefine them in ways that include the foreskin.

It also suggests that restoration, like any consumer product, and almost all cosmetic surgery, is driven by conformity. We may think that we are expressing inner desires, autonomous self-creation, or inventiveness in our product searches, but in fact, our desires are socially constructed. The men who seek out restoration devices and support are influenced in many ways by the community of restoring men, and the products marketed for restoration.

### WHAT IS RESTORED WHEN YOU RESTORE?

The idea to restore one’s foreskin is not one which appears magically in the mind one day. Rather, it is a seed that must be planted. In addition to providing support and strategies to those who desire foreskin restoration, another outcome of organizations like NORM is to produce the desire for restoration. Much like advertisements, which work to produce a sense of emotional connection to, or a need for, a particular brand and product, organizational websites and informational (promotional) materials about foreskin restoration plant the idea in the minds of curious men.

The movement of men against circumcision, including those men who choose to restore, is a media-driven movement; specifically, much of it takes place online. Type “circumcision” into your search engine and you will find yourself in a whole new world. This is the first step for many men who, for curiosity or any other reason, turn to the World Wide Web for information about their genitalia. They are introduced to dozens of websites—biased for or against circumcision—and a wealth of contradictory information. As they weigh the content—the images, the movies, the data, the op-eds and research briefs, the testimonials—they find themselves in one corner or another. Those who turn to the Intactivist side are then led to consider their own circumcision status. They may wonder if they have been harmed by the procedure. And the websites guide their thinking. For example, NORM’s site has a link: “I’m Not Missing Anything by Being Circumcised; Why Should I Restore?” (n.d.). The site offers the following response:

With no accurate means of comparison, the typical circumcised man does not know what he is missing. A man, colorblind from birth and thinking his sight is normal, might also never question his condition. However, as a man ages, he loses sensitivity of the penis. Many men have difficulty achieving sufficient stimulation to reach orgasm. The foreskin is a definite asset in maintaining this sensitivity... While the majority of circumcised men are unconscious of, or deny any negative feelings about circumcision, a significant number in the U.S. and around the world are aware of their feeling of loss, resentment and betrayal by parents and anger over this violation of their bodies.

The reader of this message is led to the conclusion that he is indeed harmed, even if he has not begun to notice, and wonders if restoration might improve his sex life and overall happiness.

This is clear from testimonials written by restoring men. For example, one writes:

I had previously never thought about restoration but while cleaning out the garage last weekend, I heard a doctor on the radio talk about surgical restoration and some non-surgical alternatives. This raised my curiosity and a web search found plenty of information. After hours of reading and looking at products and various methods I thought your DTR [device] was the best approach. (Testimonials, n.d.)

This man may not have even been unhappy about his circumcision until hearing the broadcast and discovering the websites, yet still he intends to tackle the restoration process. And NORM promises big results. According to the site, restoring and restored men may experience increased pleasure and “[f]or most men seeking restoration, this alone is reason enough to restore” (I’m Not Missing Anything, n.d.). Additionally, the foreskin provides protection against clothing, helping a man regain his original sensitivity. The website also promises an aesthetically appealing penis because “85% of the world’s men feel an intact penis is normal, natural and attractive” (I’m Not Missing Anything, n.d.). These benefits are clearly in line with Intactivist research on circumcision’s physical side effects.

But the emotional and personal gains promised are even greater than the physical ones. Restoration offers men the opportunity to feel whole again: “When seeing their circumcision scar, many men sense that part of their body is missing, which is very similar to women who have had a breast removed” (I’m Not Missing Anything, n.d.). Moreover, “[w]hen feeling hopeless over their unchosen circumcised state, men can be helped to manage anger by doing something about a condition which they had always believed was irreversible” (I’m Not Missing Anything, n.d.). Finally, men will decrease their feelings of resentment, while increasing feelings of empowerment. As NORM explains:

Victims of rape, crime and child or spousal abuse typically report a deep sense of helplessness and vulnerability. Who is more helpless and vulnerable than a restrained newborn having part of his penis amputated? Men restore to take back control of their bodies from the damage done by parents, their physicians and our culture. (I’m Not Missing Anything, n.d.)

Spend enough time on these websites and reading the literature, and one finds that circumcision is at the root of almost any problem a man might experience: problems at work, in school, with parents and sexual partners, emotional problems like depression and anxiety, behavioral problems like anger management issues and criminality (see for example, Goldman, 1997). And if lacking a foreskin is the cause of these problems, then foreskin restoration seems a logical solution.

These final promises are, I believe, the sociologically interesting and important ones. Certainly foreskin restoration must offer some aesthetic benefits—it is, after all, partly a cosmetic alteration, like circumcision. Ironically, in spite of the purported “autonomy” of the men pursuing foreskin restoration, the uniformity of the desired end results makes it similar to labiaplasty among women, the outcome of which is reduced labia that resemble the genitalia of airbrushed porn stars (Davis, 2002); and women purchasing this surgical alteration are often very aware of their desire to look like someone else, that it is conformity

that they seek. And like most genital body alterations, it is seen as offering some sexual gratification, either because of the functional change, or at least because of the confidence boost it offers. But of particular import are the supposed psychological and emotional benefits of changing the physical self.

Davis (2002) explains that

Before people will spend enough money on something as expensive and uncomfortable as cosmetic surgery, they need to be motivated not only by desire but also by concern or self-doubt.... Advertisers have always been both matter-of-fact and explicit about delineating and then steadily working to create a sense of deficiency where once there was indifference or even, God forbid, enjoyment, working to incite new arenas of insecurity, new personal anxieties, so that more things can be marketed and sold. (p. 10)

As with most consumer goods, the restoration sales pitch changes curiosity into consumption using a compelling emotional argument, the notion that he is defective, and the possibility of a “quick fix.” To be clear, foreskin restoration is not a quick process; in fact, it may take years of consistent dedication to achieve the desired results. However, when considering the psychological, emotional, sexual, and physical problems restoration is said to cure, it stands as a relatively simple solution. Having trouble connecting emotionally with your partner, or trouble finding one? Restore your foreskin. Having problems with erectile dysfunction? Restore your foreskin. Do you have resentment toward your parents? Restore your foreskin. Feeling sad, angry, out of control, or empty? No need for therapy, surgery, medication, or conversation, just restoration.<sup>6</sup>

Men have been taught to see their bodies as instrumental (Seidler, 2003), to use (and abuse) them to demonstrate sporting ability, fearlessness, fitness, and masculinity (Bonde, 2003; Kimmel, 2003). Previously in U.S. history, when men felt as though their rights were being trampled, that their social power was diminishing, men sought physical power. Kimmel (2006) documents a “nationwide health and athletics craze” at the turn of the twentieth century whereby men “compulsively attempted to develop manly physiques as a way of demonstrating that they possessed the interior virtues of manhood” (82) and again in the 1990s (just as foreskin restoration was debuting nationally), with men turning to steroids and cosmetic surgery (Kimmel, 2006: 223). When men feel that they have lost external control, they demonstrate control through the manipulation of their own bodies. But even this external manipulation is patterned in particular ways. We can see this same pattern in the narrative of foreskin restoration. Men who feel out of control because of circumcision seek a physical fix, in this case, stretching the remaining foreskin. The use of a physical “fix” for men’s emotional problems is relatively well-documented by masculinity scholars. In dealing with erectile dysfunction, a problem which often results from a combination of physical, emotional, and relational factors, many men seek a quick, physiological cure—Viagra (Loe, 2001; Potts, 2000). Rather than see the problem in all its complex dimensions, it is typically reduced to an individual issue, one which can be individually treated. Rather than

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<sup>6</sup> It is important to note that many of the men marketing foreskin restoration devices wholeheartedly believe in their utility, even their necessity. I do not want to suggest that they set out to trick men into purchasing their products (in fact, many of the men make a marginal profit, and give spare parts for free, replace broken pieces, etc.) Nevertheless, their marketing tactics, and the tactics of the support organizations like NORM, work much like traditional advertising.

deal with the messy, complicated relational, communicative, or psychological issues, men have turned to pills, and even to painful penile injections. In this context, the idea of a man tugging, taping, and stretching his foreskin for hours a day, for months or years on end, may make a bit more sense.

What may still seem strange is how open and forthcoming restoring men are about their genital manipulation. Certainly they do not openly advertise what they are doing—in fact, one characteristic that they like about the devices for sale is they are discreet when worn out and about. But they talk candidly, online and face to face in support groups, with one another about the process. This seems to fly in the face of what we know about men and masculinity—namely that independence/autonomy and rationality are defining components of “true” masculinity. How, then, do men undertake this body project, which could be viewed by many as a vain preoccupation with physical appearance?

The answer is relatively simple: the body project of foreskin restoration is framed by men as a kind of autonomous self-expression, and a way of correcting a physical defect. In their revealing study, Gill, Henwood, and McLean (2005) find that men who engage in body projects (including shaving, working out, tattooing and cosmetic surgery) explain their actions as expressions of individual or autonomous desires; individual autonomy is so central that the authors argue that these projects are governed by a grammar of individualism. Yet the men did very different things with their bodies. For example, some believed tattooing expressed their individual identities and differentiated them from the herd. Others saw tattoos as trendy and conformist and thus, rejected them as incompatible with their individual autonomy. The same desire—to appear independent—justifies two diametrically opposed actions. Being independent, in control of one’s body, is a masculine value (Phelan, 2001) that can lead to very different modes of embodiment. The grammar of individualism must structure each action a man takes. In the case of foreskin restoration, we see that men claim bodily autonomy while still taking cues from others in the restoration community and conforming to the governing aesthetic of an overhanging foreskin.

Gill et al. (2005) discuss another important theme that emerged from men’s accounts: the rejection of vanity. Men felt that their body projects (and those of other men) were reasonable so long as they were not rooted in appearance. The use of skin care products, for instance, was justified in terms of health (i.e. sunscreen to protect against skin cancer, not wrinkles). However, the concept of vanity is a negotiated one. Plastic surgery was, therefore, a somewhat contentious issue. Always justifiable to correct physical deformities, like cleft palate, and never ok for purely cosmetic reasons, some men tried to construct a middle ground between disfigurement and superficiality. They argued that psychological suffering resulting from physical appearance issues could justify cosmetic surgery; rhinoplasty could be defended if the man had suffered long-term taunting because of his large nose. Hegemonic masculinity provides men with conflicting rules, further complicating their body projects (Bordo, 1999; Gill et al., 2005). Trained to avoid vain obsession with their bodies, men are also taught that they are lazy if they do not take care of their bodies. They must walk this thin line carefully.

In this context, we can better understand the restoration justifications offered by NORM. If foreskin restoration provides men not just with aesthetically pleasing results, but can correct the physical problems caused by circumcision, and can offer psychological benefits too, then it is not a vain undertaking. It can be seen as a correction for a physical deformity, or as a way of dealing with acute psychological suffering. In this way, foreskin restoration is a kind of panacea for the ills of circumcision. The grammar of individualism and rejection of vanity that are clear in the cases above, and the case of foreskin restoration, give an-

other insight. Foreskin restoration is, above all else, about restoring a man's sense of masculinity and self-worth. Having been victimized, his manhood attacked, he must reclaim his body as his own. In this, he fulfills the demands of phallic masculinity (Phelan, 2001). He begins the process a victim and transforms himself back to a real man.

### CONCLUSION

Embodiment is a complicated and messy project that each of us undertakes. Just as we think about "doing gender," it may be useful to think of "doing embodiment"—that is to say, that our bodies are not just material things, but surfaces upon which society writes and tools that we as social actors use (Butler, 1993; Bordo, 1999; Gremillion, 2005). We cannot understand embodied actions as mere reflections of dominant norms, but rather as a negotiation of structural and individual elements. When we modify our bodies, we challenge the idea that bodies are given and natural. Through our modifications, we can challenge all types of social structures. We can challenge popular aesthetics, as in scarification, tattooing, and piercing, or we can challenge larger ideologies of gender, as in transgender surgeries. However, because our 'creative' alterations are themselves the product of social forces, their transformative power should not be overstated. As Pitts (2000) explains, "body modification proceeds within the context of forces that socially inscribe the body-subject, producing meanings that make new discursive creations possible" (p. 445). In other words, the possibility of creating "new" meanings with our bodies proceeds from the very structures that constrain meaning.

Foreskin restoration can be seen as a challenge to the hegemonic aesthetics of the penis in our society. Rather than the hard, impenetrable male genitalia that circumcision produces, foreskin restorers favor a softness, a suppleness, a sensuality. And yet their project is never free from the constraints of masculinity that, at least partially, govern men's lives. Thus, they describe their body project in patterned terms, and seek a very particular style of foreskin. For example, they emphasize length, though now measured by foreskin overhang, which maintains the value of penis size found in the dominant culture's masculine values. Despite claims of autonomy, their body is still never fully their own. Moreover, though they seek a return to nature, to "restore" what once was, they inadvertently create something new; that is, they are actively constructing, collectively, the very idea of natural masculine bodies and natural sexuality. That soft, supple, sensual masculinity they hope to "regain" is not any more natural or real than the hard, impenetrable tool of circumcised masculinity.

Importantly, too, their focus on the penis as both the cause of and cure for their problems maintains the centrality of the phallus for definitions of masculinity and masculine sexuality. In her insightful essay on hegemonic masculinity and conceptions of erectile dysfunction, Potts (2000) recommends a fundamental change in the meaning of men's and women's sexuality, removing the penis from its exalted position in sexual activity. Because hardness is emphasized in the discourse of erectile dysfunction, Potts contends that we have no conception of pleasures associated with the flaccid or semi-erect penis (99). Likewise, because of the emphasis on impenetrability in pro-circumcision tracts, Americans and others from circumcising cultures have little understanding of the pleasures of the foreskin, and this is a major contention of the anti-circumcision movement. Expanding our understanding of other penile pleasures is certainly an important step in challenging the heterosexism of hegemonic masculinity, and indeed is one of the projects central to Intactivism. Yet rather than creating an alternative that truly challenges the dominant culture, Intactivists and foreskin restorers fall into a masculine trap, prioritizing the penis as central to their self-definitions

and worth, and continuing to encourage other men to measure up to their newly established standards. Instead Potts (2000) calls for

a relinquishment of this “organ’s” executive position in sex... Perhaps, then, those men currently restricted by hegemonic masculinist imperatives might begin to explore the possibilities of no longer struggling with *either* an overpowering physical passion *or* a rational mind and instead enjoy experiencing *both* the emotions *and* the meanings of sex, *and* their bodily responses—a sexual Möbius strip in which mind/body and culture/nature are no longer opposites but come into play across a single eroticized surface that turns continually from one into the other. These male bodies might become differently inscribed, coded for holistic pleasures, for jouissance beyond the phallus/penis. They might enjoy a variety of penile styles: flaccid, erect, and semiflaccid/semierect. Male eroticism would incorporate different sensations connected with the diversity of the penis, as well as, and significantly, the exploration and enticement of other erotogenized regions of the male body in pleasure. (pp. 99-100)

Were we not so intent on preserving the position of the penis in sex, we might feel more comfortable with the variations among penises—some are big and some are small, some are circumcised tightly, some loosely, some not at all, some get harder than others, some are growers, some are show-ers. They do not need to look the same, behave the same, or create the same sensations.

The fact that Intactivism and foreskin restoration, which are both conscious attempts to redefine the masculine body, masculine sexuality, and masculine identity, continue to privilege the penis, and a very particular penis/phallus, as central to men’s lives reveals just how much power the phallus continues to wield in our culture. In some key ways, foreskin restoration opens new possibilities, transgressing the limitations that traditional penile aesthetics offered. Nevertheless, in many other ways, these new aesthetics are just more of the same, for these men are still in and of this culture, unable to fully escape its values, especially when it comes to the values of masculinity. By exposing the normative expectations that govern foreskin restoration, and the constraints that masculinity imposes on even this bodily undertaking, I hope to advance our understanding of men’s embodied experiences. I seek to challenge simple readings of men’s body projects as either conservative or transgressive, and highlight instead the extent to which we are always already “doing” embodiment, struggling with and against the structures which govern identity.

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