Harm Survey Launched

(left to right) Steven Svoboda, filmmaker Cassie Jaye, Warren Farrell, and Fred Hayward, taken at a red carpet ceremony that preceded the showing.

Interview with Activist Tim Hammond

James Chegwidden
At the Keele Symposium
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Message from the Executive Director

So here we are near the end of another year. Right now, among many other things, we somewhat astonishingly find ourselves preparing for the arrival in 2017 of the twentieth anniversary of Attorneys for the Rights of the Child. When I started ARC, I vowed that I would stay in this work for no longer than the approximately seven-year active life of our predecessor organization, Tim Hammond’s National Organization to Halt the Abuse and Routine Mutilation of Males (NOHARMM).

Nearly two decades in, I continue to be amazed and awestruck and refreshed by this work and by my amazing colleagues. ARC has grown from what frankly was in the early years a one-man organization to now be a non-profit that truly is the sum of several key players’ contributions, including our Legal Advisor Peter Adler, our new Webmaster/Newsletter Editor Aubrey Terrón Taylor, our board, and several other important behind-the-scenes contributors, not to mention our truly invaluable financial supporters.

In July 2016, the Journal of Law, Medicine and Ethics (JLME) finally published the paper by ARC Executive Director Steven Svoboda, ARC Legal Advisor Peter Adler, and Bob Van Howe entitled, “Circumcision is Unethical and Unlawful.” The paper is part of a JLME special issue stemming from our unofficial debate victory over the American Academy of Pediatrics (AAP) at the Twentieth Annual Thomas A. Pitts Lectureship in Medical Ethics, held at the Medical University of South Carolina in October 2013. This is the longest and most comprehensive general article I have ever published and we are very happy to finally see it in print.

I accepted an invitation from the American Medical Association Journal of Ethics to write a paper about male circumcision as iatrogenic (doctor-caused) harm.

I am also currently hard at work writing a paper with Bob Van Howe about the ethics of male circumcision for the journal Medicolegal and Bioethics. We have a draft article that I am very happy with that addresses the topic from a fresh perspective, getting back to basics and addressing some fundamental yet often neglected issues. Peter and I are also finalizing a paper on burden of proof.


Steven and his children Eli (14) and Sarita (11)
We are delighted that Aubrey Terrón, who helped us win the debate with the American Academy of Pediatrics' (AAP's) Michael Brady in Charleston in 2013, is our new webmaster and newsletter editor. She will be producing a newsletter for us, to be published in the coming weeks.

Genital autonomy continues to make strides as it enters more vibrantly into mainstream dialogue. An important new legal decision has been handed down in the UK upholding children's rights. While the judgment is not perfect, the judge’s primary reasoning protects the child's best interests and his right to personal autonomy.

A French court awarded 32,000 euros (approximately US $35,500) to a man for his circumcision as an adult. The court acknowledged sexual harm and ethical harm to the man by the surgeon who circumcised him due in part to a lack of information provided on alternatives to circumcision. Both the UK and French developments are presented in this issue.

As also outlined in this newsletter, the Danish Medical Association is calling for protection of all children's genital autonomy. Young scholars continue to join forces with us and new grassroots organizations offering creative and in some cases radical approaches have entered the mix in recent years. Continuing the work started in 2001 by our delegation to the United Nations that for the first time enrolled into the official UN record the concept of male circumcision as a human rights, exciting work is going on with the UN and we are part of it, along with our European colleagues and one American colleague. I wish I could say more but there should be some exciting updates over the next two years.

We hope you enjoy this newsletter, which includes: 1) a photo report by Tim Hammond about the symposium held at the University of Keele in the UK; 2) and 3) profiles of longtime activists Chelo Jacob and Tim Hammond; 4) memories of activist Jonathon Conte; 5) an article by Lisa Braver Moss about some recent heartening developments relating to Judaism and genital autonomy; 6) a story by Tim Hammond about his important survey regarding the harm of circumcision; 7) a photoreport on ARC's participation in the Palm Springs (California) Pride Festival; 8) reviews; 9) news reports; and more.

We were saddened by activist Jonathon Conte's demise.

ARC released the full audio from the Charleston debate as well as audio clips showing that the AAP doesn't know the functions of the foreskin and believes children do not have human rights. The video from the first day is being edited for release in early 2017.

Last month, I also participated in two question and answer sessions following showings November 1, 2016 in Berkeley and November 6, 2016 in San Rafael, of Cassie Jaye's excellent new film about the men's movement including activism for genital integrity, "The Red Pill." (www.imdb.com/title/tt3686998/)

In April, I did an hour-long review of ARC's activities and of the movement for the Maria Sanchez show, one of the longest shows we have ever done, and one of my better shows, I have to say.

ARC staffed an information booth at the 30th Annual Palm Springs (California) Pride Festival, which took place on November 6, 2016. A short report appears in this issue.

We recently also celebrated the five-year anniversary of our release of our "Know Your Rights" brochure. ARC continues to make the brochure available on our website to provide information for potential litigants on how to seek legal compensation for the wrong of circumcision.

For the past sixteen years, we have been put out the newsletter so as to keep intactivists and their supporters updated on pertinent events throughout the movement to protect children.
from genital cutting and frankly, so as to keep spirits high through this often challenging work. Our newsletter continues to be carried by all three of the top content providers that electronically provide journals to libraries throughout the world! These three are ProQuest, EBSCO and Cengage (formerly Gale).

ARC is proud to announce that we have passed the three-year anniversary of our release of a list we have been painstakingly compiling since our founding in 1997 of all known significant legal awards and settlements in circumcision-related lawsuits. Prior to the release of this list, we believe that a substantial majority of the cases included in this list were unknown to the intactivist community.

We are well into ARC's 19th year, as well as my 21st year of intactivism.

Personally, it is the children who inspire me to continue dedicating our intellect, and spirit to this work. We deeply appreciate the support each of you offers us, be it financial, emotional, logistical, as colleagues, or a combination of these roles. We could not do it without you!

I retrospectively wish all the happiest of merriest of Christmases and wish everyone the happiest of Hanukkahs, and I hope everyone has a most joyous New Year.

Thanks ever so much to everyone for your generous and truly irreplaceable support over the years, whether it be financial, emotional, logistical, as colleagues, or a combination of these roles. Each of you literally makes it possible for us to do this work.

Fully tax-deductible donations that are entirely applied to protecting children can be sent to J. Steven Svoboda, ARC, 2961 Ashby Avenue, Berkeley, CA 94707, or made through paypal at our website (www.arclaw.org/arc_donate) or using the paypal address sarah@arclaw.org for payments from a credit card and arc@arclaw.org for payments from a bank account. Also please note that if you buy anything from amazon and bookmark your starting page as http://www.amazon.com/?&tag=arc-20&camp=14721&creative=385805&linkCode=hom&adid=11CYB7JHVS05VPZ0AJCS& (this URL can also be accessed from our donations page at www.arclaw.org by clicking on the box labeled "Amazon.com" (not "Amazon Smile"), ARC will receive a hefty 4-6% of all your purchases, which can add up very quickly to substantial support for our work to protect children. Finally, there is a new way to support ARC through two affinity credit cards. Further information is available at www.charitycharge.com/ein/?npoKeyword=94-3391556 and http://www.halocardproject.com/attorneys-for-the-rights-of-the-child.html).

Steven Svoboda
Attorneys for the Rights of the Child
Highlights from the Keele Symposium

By Tim Hammond

The 14th International Symposium on Genital Autonomy and Children's Rights took place on September 14-16, 2016 at Keele University in England. The theme was Changing Global Perceptions: Child Protection and Bodily Integrity. Approximately 77 professionals and human rights campaigners attended the event, 23 of whom were presenters.

DAY ONE of the conference, September 14, 2016 was devoted to Child Protection, Law and Ethics. In her talk about Child Protection, Dr. Jackie Kilding (University Hospital of North Midland) stressed, "Parents only have such rights as are necessary to fulfill their responsibility towards their child." This theme was echoed by attorney Michael Thomson, speaking on Legal Developments and Strategies for Change, in which he noted that understanding the shared rights of children leads to understanding shared harm and helps to build political alliances. Michael reviewed the groundbreaking 2015 legal decision by respected family court judge Sir James Munby in which Munby noted that Type IV female genital mutilation (FGM) (nicking or scratching the female prepuce) is less invasive than typical male circumcision, and that Type 1a FGM (removing the female prepuce) is "physiologically somewhat analogous to male circumcision." Munby's holding that male circumcision constitutes "significant harm" represents an important first step upon which subsequent court decisions can build to ultimately recognize the damage done by genital cutting of boys.

An insightful presentation titled Genital Alteration: Towards More Empirical, Ethical and Effective Policies by the University of London's Rebecca Steinfeld addressed the current double standard by which FGM is targeted for elimination as a human rights violation while male genital mutilation (MGM) is tolerated or even promoted as a measure to promote global health. Steinfeld asked, What if instead of framing the argument as an issue of male vs. female, or as religion vs. culture, we focused on consensual vs. non-consensual genital modifications? She proposed four possible alternative approaches to overcome the current inequities involving childhood genital cutting policies by either increasing protection for boys or decreasing protection for girls.

Later in the day, Barrister James Chegwidden presented his talk titled Not Drowning, Paddling: The English Court's Slow Row Towards Genital Autonomy. He discussed several High Court cases, including the now famous judgment of Sir James Munby. James warned that we can't expect massive changes, but can strive for incremental changes that reflect changing social mores. He sounded a hopeful note by citing a judge in one case.
who used a modern, autonomy-based approach to children's rights.

**DAY TWO** of the conference, September 15, 2016, focused on **Politics and Activism**. For this reporter, the most useful information came from the Intersex presentations. Kitty Anderson, Chair of Intersex Iceland (I.I.), spoke on the topic of **Activism, Media and Change in Iceland**. She began with a very helpful definition of the term 'intersex'. Kitty defines intersex as anyone 'born with non-normative sex characteristics'. An intersex person can have any gender identity or sexual orientation. To the amazement and delight of most attendees, she stated that in 2016 Intersex Iceland is pushing for legislation based on the concept of the universal human right to bodily integrity, which would outlaw surgical alteration of any non-consenting child's sex characteristics, thereby protecting the child's physical integrity and bodily autonomy. The Icelandic law is being promoted under the theme of 'You shall not cut healthy children' and 'My body belongs to me'. It will apply to genital surgeries done for cosmetic, social, or religious reasons. To accomplish this, I.I. formed alliances with the Icelandic LGBTI community and the women's and disability rights movements.

Despite MGM and IGM being entrenched medical procedures, Kitty insisted that they are 'harmful traditional practices' as defined under Article 24.3 of the U.N. Convention on the Rights of the Child. Because the medical community is not willing to listen to intersex persons or circumcised men, we need to get the society to parrot what we are all saying and to tell the medical community the same message: don’t cut healthy children’s genitals! [Editor’s Note: such a tactic cannot yet be used with regard to the U.S. since the U.S. is the only nation that has still not ratified the Convention on the Rights of the Child.]

Dr. Mitchell Travis and Dr. Fae Garland presented on the topic of **State Responses to Intersex Embodiment**, **Challenges and Opportunities**. They noted the all too common failure of states to protect individuals from the medical profession. Dr. Clare Chambers from the Faculty of Philosophy at University of Cambridge gave a fascinating talk titled **Cultural v. Cosmetic Surgery: Challenging the Distinction**. She differentiated genital surgeries as cultural (such as FGM and religious MGM) as compared to those that are cosmetic (done for beautification or normalization). She cited examples of Western social pressure on women to attain aesthetically pleasing genitals. Dr. Chambers posited that all cosmetic surgery is a subset of cultural surgery because beauty norms are cultural. As one example, she contrasted Western horror at FGM practices – that can adversely affect sexual pleasure and which many African women accept unquestioningly – with the horror expressed by some African women upon learning of the West’s casual acceptance of breast implants.

Before breaking for lunch, a panel presentation involving the morning speakers and titled **The Way Forward** was moderated by Professor Michael Thomson. Of particular note was
discussion on bringing circumcision test cases to court to advance boys' rights to genital autonomy.

Perhaps most disappointing for this observer – and other attendees with whom I spoke – was the afternoon presentation by Dr. Ann-Marie Wilson, Founder and Executive Director of 28 Too Many, a London-based anti-FGM organization whose talk was titled FGM: Can it Ever be Acceptable? Dr. Wilson spoke at the 2015 Frankfurt symposium, a presentation that seemed to parrot what Western media and women's groups – led mostly by uncircumcised women – have spoon-fed the public. This year's presentation seemed to be a repeat presentation geared more for newcomers to the issue and, as such, offered most Keele attendees no new information.

In contrast to anti-FGM organizations that have staked out political positions that refuse taking a public position in support of genital autonomy for boys, it was encouraging to hear a courageous and straightforward presentation on Developments in Finland and Nordic Countries by Tuomas Kurttila, Children's Ombudsman of Finland. Mr. Kurttila drew an extended analogy between past, successful work to stop corporal punishment and the current struggle to protect children's genital autonomy in Finland. Mr. Kurttila acknowledged that change is happening in religious communities, consistent with the belief that circumcision cannot be justified before the age of reason and consent. He suggested that families cannot always be trusted to do what's in the best interests of the child, especially in cases involving genital cutting. Mr. Kurttila asserted very clearly that 'It is not proper upbringing to cut children'.

The day continued with Maryam Namazie, a political activist from the Council of Ex-Muslims speaking on the topic of Council of ex-Muslims and their Role in Changing Minds. Ms. Namazie stated that respect for religion or religious freedom should not be used as an excuse for not criticizing religious practices. She urged that our main concern should be for the rights of the child.

Dr. Antony Lempert from the Secular Medical Forum rounded out the day with an excellent talk titled First Do No Harm: Variations on a Theme. In it, he reviewed the principles of medical ethics that recognize, among others, autonomy, beneficence, non-maleficence and justice. He reminded attendees that, with regard to male circumcision, 'No evidence of
harm does not mean evidence of no harm.

The day closed with a special screening of a teaser trailer from Brendon Marotta’s documentary "American Circumcision" currently in production.


Margaret Green presented an insightful paper prepared by Glen Poole titled **Understanding the Pathways to Male Suicide.** Globally, men are 3 to 4 times more likely than women to take their lives (one man every minute). According to Poole, we live in a world where the dominant paradigm says: "Women HAVE problems and men ARE problems." When men face problems they can no longer fix or cope with, they choose suicide as the only remaining option. Poole’s paper suggested that the ability to cope with problems is shaped by early childhood experiences (e.g., trauma, violence, abuse).

Next up was John Dalton's presentation **Genital Cutting and Suicide: Is There a Relationship?** Dalton asked if the higher suicide rate among males has any relation to male genital cutting. Can it be empirically proven that suicide is in any way associated with genital cutting?

Tommi Paalanen, Chair of the Committee on Sexual Ethics of the Finnish Association of Sexology, and Advisory Co-Chair of the Sexual Rights Committee for the World Association for Sexual Health, then spoke regarding **Professional Ethics in Health Care: What is Harm?** Paalanen began by asserting that 'freedom' means that the individual has the right to direct one's own life, and that all interventions against such freedom must be reasonably justified. He added that when one's actions harm other people, such actions cannot be justified and prohibitions against such harm must be enacted.

Holly Greenberry from Intersex UK then spoke about **Moving Towards a Psycho-Social Framework.** Parents and caregivers need more education to realize that their children are eventually going to want to make their own fully informed decisions. Children do not need to be irreversibly sex assigned, mutilated, sterilized, hormonally infused and left with physical and emotional scarring. These amount to torture as defined by the United Nations.

Dr. Comfort Momoh spoke on the topic of **Consequences of FGM and Deinflation** and began with a basic review of the types of FGM. She warned that all forms of FGM produce harm. This observer notes that if this is correct (e.g. removal of the female prepuce), then by definition, so too must male circumcision be harmful. Next Dr. H. Eli Joubert spoke to the issue of **Considering the Psychosexual Impact of Circumcision.** Through his work at the University of Surrey, Dr. Joubert works with men experiencing sexual dysfunction, including those affected by circumcision. He asserted that sex happens in the mind AND
with the body and that if we are to be activists for genital autonomy, we need to be activists for the creation of care services for affected individuals.

Comfort Momoh

Finally, Tiina Vilponen from Finland’s Sexpo Foundation spoke about *Counseling and Psychological Damage*. In terms of effective counseling, Tiina offered the following guidance: Believe what your client says, be present, persist with your client, ask questions directly, see the person as a whole human, empower your client, be on your client’s side, and uphold your client’s rights. Tiina closed her talk by reminding the audience that even if a government acts tomorrow for the sake of future children (e.g., by banning genital cutting), there are still victims from yesterday and today for which we need to develop services.

The Keele symposium offered the opportunity for old friends to renew acquaintances and for new activists to meet. Like most symposia, some presentations were definitely better than others. This particular symposium was more or less marketed as primarily focused on Europe, and thus many usual attendees were not present from North America. Still it offered rewarding talks and useful connections.

**ARC Activities**

*Downloadable Hourlong Interview with Steven Overviews Movement*

On April 3, 2016, Steven Svoboda appeared on the "Maria Sanchez Show." Maria is a longtime friend of ARC and intactivism; Steven and Maria did their first show together way back in the year 2003. Their last previous show aired in July 2014. In this hour-long show, one of Steven’s longest ever media appearances, released by Maria as a downloadable podcast available at http://bbsradio.com/podcast/shadow-politics-april-3-2016/, Steven overviewed some recent achievements by ARC in the 1.75 years since his last show with Maria as well as developments relating to the struggle to protect children’s right to bodily integrity:

1) ARC has several articles coming out shortly, including one jointly written by Steven and ARC Legal Advisor Peter Adler, along with Bob Van Howe. Steven believes it will be
the longest general article he has published on the topic. The Journal of Law, Medicine and Ethics will be publishing it along with the other proceedings from the October 2013 pediatric ethics conference in Charleston, South Carolina, where our arguments convinced two physicians on the panel to switch positions to our side and where we left our debate opponent, Michael Brady of the American Academy of Pediatrics (AAP), unable to respond to our arguments. Steven and Bob Van Howe also have an article taking a new approach to analyzing the ethics of circumcision whose publication is also imminent. More details on both papers soon.

2) Steven discussed "the rights of the child vs. the rights of the parents" at the Genital Autonomy conference held in Frankfurt, Germany in May 2015. Groundbreaking panel discussions of genital autonomy featured Steven along with Soraya Mire, Marilyn Milos, and (at the first event) Hida Viloria, in enthusiastically received events in Berkeley, California in May 2015 and December 2015. ARC was also represented by Tim Hammond at the 29th Palm Springs Pride Festival in November 2015, and Steven appeared in December 2015 on Linda Gross’ Men’s Advocate radio show.

3) December 2014 marked the appearance of the draft regulations of the Centers for Disease Prevention and Control (CDC), to which ARC issued a press release on the same day the regulations were released. In January 2015, ARC and Intact America published a joint response to the CDC draft regulations.arclaw.org/our-work/letters/response-intact-american-attorneys-rights-child-centers-disease-control-and-prev

Peter published an important article on the CDC draft regulations in the International Journal of Children’s Rights.

4) In July 2014, ARC’s "know your rights" video was filmed by James Loewen, starring ARC Board Member David Llewellyn with an introduction of David by Steven, and in September 2014 it was released on our website.

5) Along with many other organizations, ARC helped push through the US' first human rights accountability law, California’s AB 15. In other legislative activity, ARC Legal Advisor Peter Adler testified in February 2015 at a hearing on a New Hampshire bill introduced to stop Medicaid funding for male circumcision.

6) In November 2014, Steven was honored by Intact America as "Intactivist of the Month" and shortly thereafter, in February 2015, ARC Webmaster Jonathan Friedman received the same honor.

7) ARC published several newsletter during this period, summarizing important news from throughout the world of activism to protect genital autonomy.

8) In September 2015, the Canadian Paediatric Society issued its position statement on circumcision, and ARC again issued a press release that same day responding to this development.

Generally, Steven discussed the continuing process by which the movement is broadening and deepening and diversifying and gaining new soldiers. The radio show was conducted before the latest good news, the UK legal case upholding children's rights that came down earlier this month thanks to James Chegwidden's hard work. We are winning!

ARC Participates in Palm Springs Pride

Palm Springs Pride was celebrated on Sunday, November 6th with a morning parade and an afternoon festival. At Last year's Pride, ARC had an information booth organized and funded by Tim Hammond and staffed be a few local volunteers. Lacking the funds for a booth this year, two-thirds of the local intactivist group took to the streets to leaflet the festival-goers; that is to say two of the three members were there. Tim and Joe wore the traditional black and white 'Intact Genitals are a Human Right' t-shirt and stood in a shaded but busy corner of downtown Palm Springs handing out general
information cards, as well as flyers supporting the Kickstarter program of the new documentary 'American Circumcision.'

Departing from our previously aggressive technique of handing out as many cards as we could, we decided that our t-shirt messages were enough to draw the people who needed to be drawn to us. Tim also sneakily fanned himself with a card in one hand to beat the desert heat while with the other hand he offered cards to passersby with the question 'would you like a little fan?'. Festival-goers appreciatively accepted the cards.

What we lacked in high volume distribution of cards we more than made up for in high quality connections. Tim spent 20 minutes talking with Louanne and Gerry, Louanne admitting that she was a physician at the local hospital and who does do some circumcisions, but she spends a lot of time counseling and deterring parents from the practice (with a high degree of success). Tim mentioned that Doctors Opposing Circumcision's new website has very valuable information and resources for physicians like her. She's also involved with the local medical school and residency programs and said she was interested to have someone talk to medical students on this issue.

One resident, originally from Britain and wearing a 'Che Guevara’ t-shirt, pronounced how barbaric he found the American custom of infant circumcision to be. He admitted that it was not until he met his Jewish husband that he had ever encountered a circumcised penis. He seemed adamant that people need to work harder to eradicate the custom. Tim gave him one of our local intactivist business cards and invited him to join our monthly planning meetings.

Later, both Tim and Joe scored important connections with local high school students. On Tim's side of the street, a group of students wearing rainbow tie-dyed G.S.A. (Gay Straight Alliance) t-shirts accepted cards from him. When he asked them if they ever have outside groups come to speak to the group, they said yes, so Tim discussed the issue of children's genital autonomy with them. They seemed quite interested and gave him the information he needed to talk to the group's organizer about scheduling a speaking engagement. Meanwhile, on Joe's side of the street, a woman from the Desert Sands Unified School District approached him to discuss his t-shirt. She seemed very interested and passionate about the issue and gave Joe her business card and asked us to get in touch with her about making a presentation on the issue to local high schools.

All of this wonderful interaction occurred in the brief space of two hours on one intersection in a city in the middle of a desert. This day was a strong reminder that we don't always need large groups of intactivists to have a big impact. Sometimes it's the quality of our connections, rather than quantity of leaflets we distribute, that can be the true measure of a successful intactivist presence.

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ARC's Peter Adler Publishes CDC Article

ARC is proud to announce that our Legal Advisor, Peter Adler, has published his article critiquing the December 2014 draft circumcision regulations...

Surprisingly, the IJCR violated accepted ethical standards for journals by also publishing in the same issue a response to Peter's article that is actually longer than Peter's article without informing him the reply was coming and without giving him an opportunity to respond to it. The response is titled, "Critical Evaluation of Adler's Challenge to the CDC's Male Circumcision Recommendations," and is authored by Beth E. Rivin, Douglas S. Diekema, Anna C. Mastroianni, John N. Krieger, Jeffrey D. Klaussner, and Brian J. Morris. Morris is of course the Australian author who is notorious for self-citation and for bullying journals and authors with whom he disagrees. Diekema is the ethicist associated with the American Academy of Pediatrics who was an unofficial second opponent of Steven's at the 2013 pediatric debate in Charleston, South Carolina, the paper from which (written by Steven, Peter, passion kept us going. I also remember being at the first International Symposium on Circumcision, where we came and Bob Van Howe) was published in July 2016 by the Journal of Law, Medicine, and Ethics. Both Peter's paper and the Rivin reply can be found at http://arclaw.org/announcements/arcs-peter-adler-publishes-article-cdc-guidelines.

Red Pill Film Release

ARC Executive Director Steven Svoboda participated in a question and answer session following a showing on November 1, 2016 of Cassie Jaye's excellent new film about the men's movement including activism for genital integrity, "The Red Pill." www.imdb.com/title/tt3686998/ Steven appears briefly in the film prior to a very effective showing of a portion of a video of an infant circumcision. The men's movement's leading author Warren Farrell, who is prominently featured in the film, Cassie Jaye and Steven answered audience questions for about a half hour following the film, which was shown by Berkeley's Shattuck Cinemas.

Fred Hayward, who are also both prominently featured in "The Red Pill," at the Smith Theater (http://rafaelfilm.cafilm.org) in San Rafael, California. Cassie Jaye and Steven answered audience questions for about an hour afterward.

Charleston Debate Audio Leaked to the Public
Task Force Members reveal their bias

Filmmaker Brendon Marotta, director of the upcoming movie "American Circumcision," has very generously worked with ARC this fall to prepare releases by Gotnews.com of audio clips in part, and the full audio recording from the second day of a debate in Charleston, South Carolina between ARC's J. Steven Svoboda and Dr. Michael Brady of The American Academy of Pediatrics (AAP) Circumcision task force. The event was the Twentieth Pitts Lectureship in Medical Ethics, held on October 18-19, 2013 at the Medical University of South Carolina.

A special issue of the Journal of Law, Medicine and Ethics earlier in 2016 published the proceedings of the event, including an article by Svoboda, Peter W. Adler, and Robert S. Van Howe, titled, "Circumcision is Unethical and Unlawful" which can be found here: http://arclaw.org/resources/articles/circumcision-unethical-and-unlawful.
The two day forum was successful in engaging students and other attendees in this much needed conversation. They asked for themselves, and were witness to others’ important questions about how we decide where we draw our ethical lines. Two physicians on the Charleston panel (there to debate other issues) even told Svoboda that they changed their positions to pro-intact based on the evidence argued by Svoboda and other human rights activists present.

The audio also demonstrates that the AAP may have lied in the past when claiming that circumcision does not reduce sexual sensation in the penis. Event organizer and editor of the JLME special issue, Dr. Robert Sade, stated that the reduction in sensation is beneficial and preferred by men, and this statement was not challenged by Task Force members Brady and Diekema.

The sad reality revealed by the recording is that doctors in charge of circumcision policy at the AAP use their bias to inform their work, and cannot see the issue in the light of the best interest of the children they are supposed to serve because they believe such absurdities as “men do not value their foreskins”. A simple phrase uttered after a long point was made about the inappropriateness of using the risk benefit analysis when no action is actually necessary shows us that they will continue to use their own conditioned opinions in place of objective reasoning: “it’s better”. Hear the full audio release here: http://arclaw.org/sites/default/files/qurt3dnk.mp3

New Credit Cards Will Donate With Every Purchase!

ARC has partnered with the Charity Charge World MasterCard and with Halo Card Visa, two credit cards that donate 1% of every purchase you make to help in the fight for children’s genital autonomy. Both cards work like any other credit card, the only difference is that you’ll feel great knowing that you’re doing good by giving back 1% of every purchase.

There's no annual fee to the cardholder, low introductory interest rates, cash back rewards are tax deductible to the cardholder, and the rewards are automatically donated to ARC.

Bonus: Charity Charge will donate $10 to Attorneys for the Rights of the Child on your behalf after your first purchase.

We hope you’ll decide to make giving back to ARC part of everyday life by signing up for the Charity Charge World MasterCard or the Halo Card Visa (or both) today. Visit the Donate tab on ARC's website to learn more and to apply. Thank you for supporting Attorneys for the Rights of the Child!
Chelo Jacob is a 66 year old activist who lives in San Rafael, California. Here's a short reflection on witnessing the early years of genital integrity activism:

I became interested in the genital integrity movement early, as I have known Marilyn Milos (Executive Director of it Genital Autonomy America, fka NOCIRC) since 1972, quite a while before NOCIRC was started. I remember that she first called the organization "Informed Consent", as she thought that parents just needed to be informed about what circumcision really is and it would stop as simply as that. I wasn't especially active in the early days, as I was living in Southern California and raising my young son. Unfortunately, the movement was too late to save him; it was before Marilyn's and my awakening. No one told me about the horror of circumcision, I had to read it in my newborn son's face when they handed him back to me after his surgery.

Later, my son and I helped Marilyn organize a mass mailing by zip code, which took hours. We sent NOCIRC pamphlets to Senators, Congressmen, and people on an ever growing mailing list, but Marilyn's infectious enthusiasm and passion kept us going. I also remember being at the first International Symposium on Circumcision, where we came together officially for the first time to discuss elements of the issue, and hear from doctors such as the late Paul Fleiss.

I also remember protesting at the AAP early on and one of the doctors asked Marilyn if she was trying to cause violence and she said "No, I am trying to prevent violence!" I remember walking with a group of the California Medical Association headquarters in San Francisco, along with moms and babies in strollers and being stopped from going up to their offices. The march in Washington on the Capitol was also memorable; we received a lot of interest from school children passing by as they toured the grounds.

Most recently I went to stand alongside other intactivists at the American Academy of Pediatrics conference in San Francisco. I was with Jonathan Conte and others at the ferry building to honor the anniversary of the Cologne court decision in favor of banning circumcision.

I know that we are making a difference. Before I could even talk to my younger stepbrother 14 years ago about the upcoming birth of his son, he said he could never even think of circumcising his son and that all of his friends felt the same way. It was music to my ears.

I am so proud to be a part of this heart-centered work to protect children and I feel that everyone involved is a part of my family.

Thank you again everyone, for all that you do!

With Love and Appreciation, Chelo Jacob
Activists Remember Conte, Try to Deliver Petitions to AAP
The Bay Area Reporter
October 27, 2016

Intact America, a group that advocates for the end of circumcision for male infants, held a news conference outside the meeting of the American Academy of Pediatrics in San Francisco, where it had tried to present a petition but was rebuffed ahead of the meeting.

The group also remembered longtime intactivist Jonathon Conte, a gay San Francisco man who killed himself in May.

As the October 22 rally got underway, some passersby stopped to talk to protesters and read their handouts, though most people entering Moscone Center for the conference avoided looking at the demonstrators. Rally organizers had hoped to deliver a petition with 10,000 signatures to the AAP. The protest was organized when reps from AAP refused to meet with Intact America, the organization behind the petition.

According to Intact America, in the past year researchers and experts have published articles and studies that contradict the 2012 AAP statement that "the benefits of circumcision outweigh the risks." Conte was remembered by the small group of about 25 protesters, who gathered to speak out against forced and medically recommended circumcisions.

"He then devoted himself full time to speaking out, so that others would not have to endure the physical and psychological pain that he did. Eventually the lies, myths, and denial perpetrated by those at the AAP who practice, promote and profit from genitally mutilating healthy children were too much to bear and he took his own life in May."

Niki Sawyers traveled from her home in Philadelphia to attend the rally. She said that she was a "regret mom," someone who had allowed doctors to circumcise her son.

"Circumcision doesn't just hurt the baby, it hurts the mother," she said. "It keeps on hurting. Most mothers I speak to would never have allowed it had they known the facts. Why are parents not being given the facts?" According to a flier handed out by Intact America, foreskin is a natural part of the penis. Removing it removes a layer of protection which the penis needs and also reduces the pleasure of sexual sensation.

Georganne Chapin, executive director of Intact America, told the Bay Area Reporter that circumcisions were medically unnecessary.
Agency Details SF Activist's Death
The Bay Area Reporter
August 11, 2016

The suicide of a gay San Francisco man who'd campaigned for years against circumcision is detailed in a report released by the medical examiner's office.

Jonathon Conte, 34, was found by his partner May 9 in their Alamo Square apartment with a plastic bag over his head and a helium tank by his side. The report lists the cause of death as asphyxia.

Since Conte's death, Holden has been faced with a rent increase on the apartment they shared in the 1200 block of Grove Street. The two weren't registered domestic partners, and Holden hadn't been able to get his name on the lease.

In an interview Saturday, just after the medical examiner's report was released, Holden didn't want to share details of his housing situation, but he said, "It's been a difficult transition going from [Conte's] death into having to make quick changes in my life. ... His absence is ever present."

Holden, who's described Conte as "caring and vulnerable," has said that Conte had never indicated he was thinking of killing himself. He didn't leave a note.

The medical examiner's office said in its report that when the helium tank arrived with Conte's body, it was empty, but the report indicates Conte died solely from having the bag over his head.

For those who knew him personally, he was a bright and friendly person. But on the inside, he was tormented by many things, and circumcision was near or at the top of this list of grievances.

Conte accomplished many things during his life. First and foremost, he was the lead organizer of Bay Area Intactivists. Conte was instrumental in the 2011 San Francisco MGM Bill initiative to extend the female genital mutilation law to protect children of all sexes. He also spurred me on to become more active and start the NYC Intactivists group. Conte and I kept in touch frequently and shared strategies and had ongoing projects together at the time of his death, including maintaining the events listings on IntactNews.

When people asked Conte about his sexual orientation, "Are you gay or straight?" he would coyly reply, "I'm an intactivist." He was a very private person. We both went to the Genital Autonomy Symposium at the University of Colorado at Boulder in the summer of 2014. Conte and I climbed onto a rooftop overlooking the campus under a starry night. It was his idea. I laid bare my inner workings to Conte and he barely talked personal details about himself. But he did mention his family back in Florida whom he cut off all contact from, a very difficult thing to do. We shared our concerns with the intactivist

In Memoriam: On the Passing of My Personal Hero and Friend Jonathon Conte
By Jonathan Friedman
IntactNews
May 15, 2016

It is with deep sadness that I write this. Last Monday, May 9, I lost a dear friend and fellow activist, Jonathon Conte.
movement, expressed our common frustrations and talked strategy. I’m really grateful we shared that moment together.

In the recent past, I’ve become concerned about Conte. I watched as he took to the streets to do more and more unplanned solo protests against circumcision, seemingly without break. I recognized outward signs of sadness that were growing. Just before his death, Conte shared his mother’s day photo on Facebook that he’d shared years previously, his face wearing an expression of deep torment. His face in that photo expresses how he constantly felt about what was done to him, what was done to many of his friends, what was done to millions of boys and girls and intersex children, and what is and continues to be done. Conte frequently hid these feelings behind a smile. But it is these feelings that drove him out into the streets to act. And he often bravely shouldered so much weight all by himself.

Jonathon Conte killed himself on Monday, May 9, 2016 at his home in San Francisco. I’ve been feeling so devastated since hearing this news early the next morning. But I also feel so fortunate for having counted him as a friend, and will carry forth his legacy for the rest of my days.

Jonathon Conte Riding for Genital Integrity

News

Legal Victory in France as Surgeon Fined for Circumcision
Droit au Corps June 24, 2016

A French man has won a conviction against the surgeon who circumcised him as an adult. The court acknowledged sexual harm and ethical harm following the lack of information on alternatives to circumcision.

In early 2016, the Tribunal de Grande Instance (TGI) in Paris ruled on a dispute between a patient and his surgeon, a member of the French Association of Urology. In 2007, then aged 26, the patient was circumcised by his surgeon for an indication of a phimosis. Not only did the surgeon not inform him about the risks and
consequences associated with this action, but he failed to propose less invasive alternative therapies.

Deeply affected by the injury, especially by a loss of sensation following the removal of his foreskin, the victim of this procedure decided to sue the surgeon in court and won the case.

After an investigation which revealed that the recommendation to circumcise was made "arbitrarily", and further that the operation had not been carried out properly, the Paris Court fined the surgeon almost 32,000 euros in compensation:

- € 5000 for moral damage resulting from the lack of information given;
- € 3000 for physical and mental suffering;
- € 250 for temporary functional deficit and € 3,560 for permanent functional deficit;
- € 20,000 for sexual harm because, inter alia, "a partial loss of the ability to access pleasure."

Essentially, what can we learn from this judgment?

- Justice means that foreskin removal can cause a loss of sexual pleasure; and
- Justice recognizes that circumcision, practiced even in a medical setting, can cause considerable and currently irreparable damage.

This is a landmark judgment: the time has come for circumcision victims not to hesitate to prosecute those responsible for their mutilation.

There's been a policy of covering-up, and medical insurance, public or private, will have to take a 180 degree turn: in France, circumcision simply has no place in health care practices, except in extremely rare exceptions. How many circumcisions are performed each year on infants or children under the guise of "phimosis" in order to receive a refund by the social security? * This fraud is all the more immoral considering it generates great suffering, as illustrated by the testimony of victims, among others.

This judgment confirms the position of the organization Droit du Corps; namely, that we need to have a public debate surrounding consent to circumcision.

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* In Belgium in 2014, 25,698 circumcisions were performed at a cost of 2.6 million euros (from among 11 million inhabitants).

House Passes Bill Protecting Circumcision, Ritual Slaughter as Religious Freedoms
Jewish Telegraphic Agency
May 18, 2016

A bill unanimously approved by the U.S. House of Representatives would extend religious protections to advocates of circumcision and ritual slaughter as well as atheists, addressing what its sponsors describe as an increase in religious persecution in recent years.

The bill, passed Monday, would broaden the definition of “violations of religious freedom” in the International Religious Freedom Act of 1998 to include the persecution of advocates of male circumcision or ritual animal slaughter. Atheists would become a new protected class.

The measure, which moves to the Senate for consideration, was named for retired Rep. Frank Wolf, R-Va., a longtime champion of human rights who authored the 1998 law.

“...crisis of international religious freedom, a crisis that continues to create millions of victims; a crisis that undermines liberty, prosperity and peace; a crisis that poses a direct challenge to the U.S. interests in the Middle East, Russia, China and sub-Saharan Africa and elsewhere.” Rep. Chris Smith, R-N.J., who
authored the bill, said in a statement.

There have been increasing calls in recent years in northern European countries for an end to circumcision and ritual slaughter, spurred in part by anti-Muslim hostility, U.S. government and European Jewish officials have said.

The bill’s tier system for how well or poorly countries protect religious freedom would be similar to the one used in the annual State Department report on human trafficking. That report is influential, and countries seeking the good graces of the United States strive to improve their ranking by cracking down on the practice.

Smith is the chairman of the House subcommittee on human rights, and as a co-chairman of the Helsinki Committee, the congressional panel that monitors human rights overseas, has made the resurgence of anti-Semitism in Europe a focus.

Smith’s office, announcing the passage of the bill, headlined the statement “Combating Persecution of Christians and Anti-Semitism,” although many of its protections would extend in the current climate to moderate Sunni Muslims and non-Sunni Muslim sects in the Middle East, Afghanistan, Pakistan and Myanmar.

Rep. Anna Eshoo, D-Calif., the bill’s lead Democratic sponsor, said in the same statement that the bill would “better address the religious freedom and violent extremism problems being experienced in the 21st century.”

The bill integrates the 1998 law’s protections into U.S. national security priorities, mandating that the ambassador at large for religious freedom – currently Rabbi David Saperstein, a veteran Reform movement leader – report directly to the secretary of state. It also adds new requirements for presidential reporting to Congress on religious freedom violations and training for diplomats in identifying violations of religious freedoms.

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Danish Doctors’ Group Wants to End Circumcision for Boys
The New York Times
December 8, 2016

A major doctors association in Denmark has recommended ending circumcisions for boys, saying the procedure should be “an informed personal choice” that young men make for themselves when they reach adulthood.

But the Danish Medical Association stopped short of calling for a legal ban, saying it would be difficult to predict the consequences.

“This area is ethically, culturally and religiously complex, and we worry whether a legal ban might result in unauthorized circumcisions,” said Lisa Moller, the president of the association’s ethics committee, which released the new policy statement last week. “Therefore, we have decided not to take a position on whether male circumcision should be banned by law.”

The largely symbolic recommendation, which Ms. Moller said was “intended as a statement of medical ethics,” says that because circumcision alters a child’s body permanently and involves “pain and discomfort,” it is ethically unacceptable to perform one unless the person can provide informed consent.

Ms. Moller said in an email on Thursday that more than 300 of the association’s members had signed an open letter urging the group “to be more visibly critical towards the practice of ritual circumcision.”

In drafting the policy, she said, the committee consulted experts on ethics and law from the University of Copenhagen, as well as “a substantial white paper on ritual male circumcision authored by the Jewish community in Denmark.” A “bilateral meeting” with representatives of the Jewish community was scheduled, she said, but ultimately canceled. The Local, an English-language news site in Denmark, citing the Danish Health and Medicines...
Authority, in 2014 said that approximately 1,000 to 2,000 circumcisions are performed annually, mostly among the country’s Muslim and Jewish populations.

In Denmark, physicians perform circumcisions, although a “competent assistant,” may do so with a doctor present, Ms. Moller said.

In recent years, Danes in public surveys have opposed circumcisions as standard practice. One poll in 2014 found that nearly three-fourths of the population favored banning the practice.

According to a 2007 World Health Organization report, approximately 30 percent of men globally have been circumcised. The rates in the United States have fluctuated through the years as advice from medical associations has changed. Statistics from the past decade suggest a sharp decline.

The American Academy of Pediatrics in 2012 said the benefits of circumcising boys outweighed the risks. That decision replaced an earlier, neutral position on the procedure, but it also stopped short of recommending circumcision routinely for all baby boys.

In 2014, the Centers for Disease Control and Prevention agreed with the academy, citing a decreased risk of some sexually transmitted infections.

Critics of the procedure, however, say that it is rarely medically necessary, that surgical complications can permanently harm boys, and that it can lead to decreased sensitivity.

French Court Recognizes Third Gender Option In Landmark Victory For Intersex Rights
International Business Times
October 15, 2016

A high court in France has officially recognized a third gender option in a case that’s being described in the country as a crucial victory for intersex rights. The intersex individual, who was born with both male and female genitalia, has won the right to register as gender neutral.

The landmark case was brought before the court in the city of Tours, the capital of the Indre-et-Loire department in France, by a 64-year-old person who has requested to remain anonymous. The person was assigned male at birth despite having ambiguous genitalia and realized during puberty that they didn't feel right with the classification.

"For 64 years I've lived with both sexes," the plaintiff told the French media outlet 20 Minutes. “Today, I finally have the feeling of being recognized for what I am.”

Now, the plaintiff can change their gender status from "male" to "neutral." The ruling has established legal precedent for people born with ambiguous genitalia. It does not cover transgender or genderqueer French citizens who do not identify as male or female. About two in every 100 babies are born with bodies that differ from standard male or female, according to research by Brown University.

In the ruling, the presiding judge wrote that the sex assigned at birth "appears as a pure fiction," according to documents that 20 Minutes obtained. "It was imposed upon him for his entire existence without him ever being able to express his deepest feelings."

The ruling has been labeled as a small but important win for the intersex community and other nonbinary groups like the transgender community.

But state prosecutors have filed to appeal the ruling, seeking to establish that the court's decision did not equate to de facto national recognition of a third gender. According to 20 Minutes, the deputy attorney of Tours said, "We're not in the role of the legislator to create the law where it does not exist yet or to change the points that already exist."

However, he said he did sympathize with the person who has won the gender-neutral
“[Gender assignment surgery] is not being done in the child's best interests, but in the interest of the parents and the society that has provided two boxes to check, a male and a female,” said Mila Petkova, the lawyer who brought the case to court in Tours, said. The decision comes just days before Intersex Awareness Day, Oct. 26.

At least 10 other countries recognize non-binary gender or sex options in some official capacity: Germany, Bangladesh, India, Pakistan, Nepal, New Zealand, Australia, Ireland, Denmark and Malta.

Rabbi Jacqueline Mates-Muchin’s remarks may be the first of their kind, publicly acknowledging the importance of making Jewish families feel welcome in congregational life when they have made a different choice about circumcision. The rabbi’s remarks precede a talk given by Lisa Braver Moss at her synagogue, Temple Sinai, in Oakland California.

Interview with Tim Hammond
By Aubrey Terrón and Steven Svoboda

1. How old were you when you realized that circumcision was something about which a male should decide for himself?

In 1988, at age 32, I embarked on my personal foreskin restoration efforts after watching an episode of the Phil Donahue show when Phil interviewed Marilyn Milos along with Richard Steiner, who talked about his surgical foreskin restoration. See it on youtube.

Marilyn and Dr. Dean Edell articulated the belief that circumcision should be something about which the owner of the penis himself should decide. That was a concept that really resonated with me at a time when I was becoming more aware of how I had been violated by my circumcision.

2. What was the nature of your very first act as an activist for genital autonomy?

After seeing the Donahue program, I contacted Marilyn, who put me in touch with Wayne Griffiths, who she said could talk to me about his own manual foreskin restoration methods. After discussing this subject
with Wayne, I suggested that he and I begin a support group in San Francisco. We initially called it ReCAP (Re-Cover a Penis) [Note by Steven: a summer 1990 ReCAP meeting at Wayne’s place in Concord, California was my very first exposure to activism], an organization that later evolved into the National Organization of Restoring Men (NORM). Any interest I had in restoration was based on my own quest for personal healing from circumcision. My activism for children grew out of my frustrations with foreskin restoration and my discovery of very strong emotions of sadness and anger about my own circumcision that, up to that point, I never knew I had. In 1992 I founded the National Organization to Halt the Abuse and Routine Mutilation of Males (NOHARMM), a non-violent, educational and direct-action network of men working together to end routine infant circumcision through a model of education and empowerment of other men.

3. Your video Whose Body, Whose Rights? (WBWR?) is now a classic for the movement. Is there a way new activists can see it or share it?

The idea for creating WBWR? began after I researched existing parent-oriented videos about circumcision and found that they were not giving parents the full picture. They all talked about the “pros” and cons of circumcision. Unfortunately, they did not include any discussion of the practice’s anti-sexual history, of foreskin functions, of harm caused by circumcision, of foreskin restoration, nor of legal, ethical and human rights considerations. I wanted to make a video primarily directed at men, especially new fathers, to wake them up and to break the cycle of abuse of boys. The original working title of WBWR? was ‘And Suddenly Men Began to Scream’, after a quote from Marilyn Milos, "I began my work to stop the screams of babies and then men began to scream.”

A great deal of time and talent was volunteered on WBWR? by videographer Lawrence Dillon and by voice talents Wayne Griffiths and Troy Christian, who is Marilyn’s son. There were still a lot of unavoidable expenses. Through a tedious and time-consuming appeal to movement supporters (remember, this was decades before Kickstarter and GoFundMe existed), I was able to raise half of the approximately $25,000 that it ultimately cost to produce WBWR? Hanny Lightfoot-Klein (author of Prisoners of Ritual) graciously introduced my film to her friend and philanthropist Lawrence Rockefeller, who indicated that he was willing to fund my project. Rockefeller also expressed some displeasure with the working title and asked me to consider a different title before he would fund my project. I must have come up with over a dozen different alternative titles. I ran many of them by my friend, videographer James Loewen. After much consideration, we agreed that the title ‘Whose Body, Whose Rights?’ captured the essence of the documentary. Because there was so much content to WBWR? and because we received feedback from childbirth educators that a shorter video was needed for use with parents, I chose to break the video into two parts. Part One outlines the problem, while Part Two explores what’s being done to address solutions.

I completed WBWR? in early 1995 and it won several film festival awards and was sold in VHS format to the home and educational markets (schools and libraries) through the University of California/Berkeley...
It was also picked up and aired by numerous PBS stations and community access stations around the country, including KQED in San Francisco, who aired it twice (1995 and 1996). KQED was kind enough to share with me their telephone logs and letters from the public that they received after each airing. The response was overwhelmingly positive, with the general feedback being along the lines of, ‘Finally, someone is talking sensibly about this issue!’ I still remember, however, one letter in particular from a viewer in Oakland, California. He railed against the film’s ‘stridency’ and rather prophetically asked KQED’s General Manager, “Can you imagine this becoming a political issue?” See it on youtube.

A DVD of the program can be purchased at www.circumcisionvideos.com. The same site also carries a DVD that contains ‘Whose Body, Whose Rights?’ along with the groundbreaking mini-documentaries ‘They Cut Babies Don’t They?’ (a profile of Canadian intactivist James Loewen), ‘Nurses of St. Vincent’ (profiling the courageous Santa Fe nurses who took a collective stand against newborn circumcision), and ‘Facing Circumcision: Eight Physicians Tell Their Stories’.

4. Do you have a favorite “saved a baby” moment?

I’ve never spent much time trying to save individual babies. My net was always cast much wider, as I strove to empower others to speak out, to form groups and to create events to make this a legitimate social issue and political cause. I did, however, save the son of two friends, a lesbian couple with whom I worked on LGBT issues in my hometown of Rochester, NY. I appealed to their feminist principles as women claiming control of their bodies, an approach that resonated with them. After all, if they had circumcised him, they would have been hypocrites to claim a right to control their own reproductive organs and yet would deny that same right to their son.

5. We know you sent your Global Survey of Circumcision Harm to the Canadian Paediatric Society (CPS) in 2013. Did the CPS respond to you? Do you feel that their policy was impacted in any way?

I sent the CPS a professionally printed and bound, fully tabbed copy of the 78-page report of findings from the survey that I conducted over a 15.5-month period in 2011 and 2012. The report contained the responses of 1,008 men from eight nations. Most respondents were from the U.S., but there were also 80 from Canada and even 10 from Israel. The report included photos of damage that more than 100 men submitted with their completed questionnaires. The report contained only two of the five photo galleries of harm that are on the website (circumcisionharm.org). I also included a copy of my earlier harm survey of 546 men that was published in 1999 by BJU International, here.

Since I wasn’t really expecting a response from the CPS, with James Loewen’s help I recorded on youtube an open letter to the CPS to document that I sent them the report. That way, there would be a historical record that they were put on notice that long-term harm exists. See it on youtube.

The CPS, of course, never responded. Realistically, had they confirmed receipt of the survey, they would have then been on record as possessing evidence about the long-term harm. As expected, there was no mention of long-term
circumcision harm in the CPS’ most recent policy statement of 2015, here.

What I find particularly damning to the CPS is that two provincial medical societies, Saskatchewan and British Columbia, had previously acknowledged not only long-term harm but critical issues of human rights!


Circumcision (Infant Male) - Professional Standards and Guidelines College of Physicians and Surgeons of British Columbia (2009), here.

In 2014, I also sent a copy of the Harm Survey findings by registered mail to the U.S. Centers for Disease Control and Prevention (CDC). At the time, the CDC’s proposed recommendations about circumcision were open to public comment. Despite being put on official notice that the harm exists, the CDC also ignored this issue without including it when they published their pro-circumcision guidelines.

Despite my earlier skepticism about trying to convince the medical or academic communities to recognize the harm of circumcision, in 2015 I compiled the survey findings into a journal article, and with the help of co-author Dr. Adrienne Carmack, we started submitting the manuscript to journals such as BJU International, Advancements in Sexual Medicine and the International Journal of Men’s Health. While these journals turned us down, our article was recently accepted by the International Journal of Human Rights. The title is ‘Long-term adverse outcomes from neonatal circumcision reported in a survey of 1,008 men: An overview of health and human rights implications’. The exact publication date has not been set, but we expect it to be published in early 2017.

6. What area of activism do you think holds the most immediate promise? Long term?

I think there are multiple answers to this question, depending on where in the world you’re talking about. If it’s Europe, I think the answer can be found in better education of medical professionals about long-term circumcision harm and conservative foreskin treatment alternatives, and holding doctors accountable to a higher level of medical ethics.

Jewish community, even in Israel, I think the answer will be found in the majority of Jews discussing non-cutting alternatives and in greater recognition of the human right to bodily integrity applies as much to Jewish boys as it does to Jewish girls or to children of either sex in Africa. But for U.S. doctors, especially the obstetricians and gynecologists that perform most of the infant male circumcisions in America, I’m confident the answer will be found in litigation and court decisions that will make it unprofitable for them to continue. I sincerely hope that instead of looking at an infant’s penis and seeing a quick surgery that with even a few being done every week can easily translate to a $30,000 automobile each year, they’ll contemplate a judge’s gavel leading to professional dishonor and financial ruin. This is where I’m looking to ARC to lead the way - and I’m eager to assist - in creating a system to identify young plaintiffs who are aware of and can document their harm and are about to reach the age of majority so that they can file a case within the allowable statute of limitations.

7. Is there something other activists can do to help you in your current endeavors?

Right now I’m working on several projects. One is an outreach effort to historically liberal, progressive Christian denominations who have not been afraid to stick their neck...
and human rights. Among the out and speak in favor of social justice and human rights issues (women’s rights, gay rights, an end to human trafficking, etc). One goal is to have the national office of such denominations endorse the 2012 Helsinki Declaration on Genital Autonomy.

Another project I’m working on is a media guide to circumcision and human rights. I’m also working at the regional level (Southern California) to plan events in the Los Angeles area to mark World Genital Autonomy Day each year on May 7th, here.

I also invite Southern California activists to contact me to coordinate an activist presence in the L.A. Pride Parade and Festival each June.

8. Does your gay activism affect your activism on behalf of genital integrity, and if so, how?

Some might wonder what in the world LGBT issues might have to do with activism. Well, gay men are just as much victims of circumcision as straight men. Same-sex couples these days are also having or adopting children, so they are confronted with ‘the decision’ just as straight couples are. Many activists who’ve work on other social justice and human rights causes (e.g., animal welfare, women’s rights, civil rights, and gay rights) can easily see the intersectionality or common ground among all of these issues. Steven Svoboda and the activist movement is following a similar trajectory as the LGBT movement and we have much to learn from LGBT political experiences. LGBT history is full of experiences with medical and religious communities attempting to control, suppress and sometimes even eradicate our ‘undesirable’ sexuality, much the way these institutions have attempted to eradicate the ‘undesirable’ foreskin. I think we’re also more politically fearless than most people in calling out institutions, beliefs and practices based on religion that harm others (intentionally or not). LGBT folk - I believe - can become some of our most socially, financially and politically potent allies. I explain this further in a brochure that we at CHHRP created called ‘Circumcision and the LGBTI Community’. Found here.

9. As founder and Executive Director of NOHARMM you were ARC’s mentor in our early years. What have you learned about the movement in the intervening years? When you think back to the days when you and Steven worked together learning to track monthly donations using index cards, what has changed since then, in yourself, in Steven, in ARC?

I think both Steven and I have expanded our awareness beyond male circumcision. Although our particular problem in the U.S. from a legal and human rights perspective, I think this is best addressed as a children’s rights issue that involves all children. I also believe Steven, Peter Adler and other ARC attorneys have done an amazing job at defining what the legal and human rights issues are. I think the next step for ARC and its lawyers is to design and find funding for a national program to find suitable young male plaintiffs who know they’ve been harmed (and can have it professionally documented) in order to bring legal action against their circumcisers and the facilitators (i.e., hospitals and insurance companies). The parents could even be co-plaintiffs on the grounds that they were fraudulently solicited to consent to their sons’ circumcisions. Ideally, this would be a case against ‘Big Circ,’ much the way we’ve seen lawsuits against “Big Pharma’ and ‘Big Tobacco’. I mean, just look at the magazine ads from the first half of the 20th century where doctors were endorsing cigarettes! You can’t convince me that they weren’t aware of the science behind the
other activists acknowledge that

I think the same holds true today for circumcision. Even if many of today’s doctors take a ‘neutral’ stand on circumcision, the very fact that they raise the issue with parents and are willing to do the circumcision sends a tacit message to parents, ‘It must be a good thing if the doctor is offering it.’

10. You lived in Canada for a number of years. Did your life outside the US affect your view of activism and activists in the US, and if so, how?

Having lived for the past eight years in Canada (Vancouver) I became aware of a very different sensibility about activism for genital autonomy. Since infant circumcision is no longer paid for by any provincial health plan, profiteers have sprung up to take advantage of this void by offering circumcision as a private, outpatient clinic ‘service’ to parents. The most notorious entrepreneur is Jewish mohel and physician Neil Pollock who runs a chain of circumcision clinics in British Columbia. Although there have been some organized street protests outside his clinics, I’m not aware of any

happens to target boys, speaking

Canadian Charter of Rights and Freedoms - which is similar to but stronger than the U.S. Bill of Rights - gender equality is supposedly a right of all Canadian citizens. Canada has a federal anti-FGM law that protects girls. So, any young man who was circumcision in Canada without medical indication and who becomes aware of and can document his harm can bring a lawsuit against the hospital and/or medical or religious circumciser within one year of turning age 18, based on harm done to his body and the violation of his Charter rights to equal protection based on gender. All it would take would be for one or two aware and courageous young Canadian men to become plaintiffs in such a case. As well, Canada has ratified the U.N. Convention on the Rights of the Child (UNCROC), as has every other nation in the world except the U.S.*. In this way, Canadian activists potentially have two means of engaging the government on this issue.

In the U.S., I predict the change must eventually rise to the level of the courts. Just as with the issue of marriage equality, the issue of children’s genital autonomy will entail a divisive political fight with human rights advocates on one side. On the other side will be the medical community trying to protect its prestige and profits, plus Jews and Muslims claiming ‘religious freedom,’ Christian fundamentalists claiming dangers of tobacco smoking, and

activism’ and ‘government intrusion’ into private family life. That said, this is not an issue we should shrink from. It just needs to be approached in a very careful, well thought out, and strategic manner. And that of course will not happen unless we come together to design the roadmap for change.

* If you support U.S. ratification of the U.N. Convention on the Rights of the Child, visit childrightscampaign.org. If you want to read the absurd arguments from those who oppose the UNCROC visit noCRC.org.

11. What are you most excited about in activism?

I’m most hopeful when I see the young people at high school and college level who grasp that this is a legitimate issue of gender equality and human rights. While having a presence at baby fairs is important, we can no longer confine ourselves to that brief nine-month window of opportunity. We need to transform the dialogue into a legitimate society-wide debate over children’s rights vs. parental responsibilities and the limits of religious freedom.

12. What are you most concerned about in activism?

I’m concerned that some of our organizations don’t seem to have clearly defined strategies. As well, many activists rely too
sustained effort at this. However, under the 1982

street protests as the only means of change. We also need to focus on creative ways to fund our movement. One way that I recently discovered was 1% cashback credit cards. I convinced and helped ARC to sign up for these programs. Anyone who applies for these cards can now designate 1% of their cashback rewards to go to ARC. [Editor's Note: Details regarding this program are available here: ] This is a start, but we need to combine our skills and talents to search for more ways to fundraise.

I believe public support for our message will be easier to secure if we focus—as ARC is doing—on protecting all children, male, female and intersex. I believe the physicians within our movement need to be better organized and aggressive in terms of creating lobbies within their respective fields to educate their peers about foreskin anatomy, development and function, conservative treatment alternatives to circumcision, and pushing for resolutions that recognize the ethical and human rights dimensions of non-consensual genital cutting of children.

I also believe that some activists need to do a better job at policing themselves on social media. When I speak to non-activists about our issue, I often hear impressions of activists as “rude bullies” who try to make circumcised men feel bad about themselves or make parents feel bad about choosing circumcision. There are methods of accomplishing ‘change without denigration’ that can be more effective than some techniques now being used by some U.S. activists.

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Canadian Circumcision Harm Survey Launched

In November 1, 2016, the Children’s Health & Human Rights Partnership (CHHRP) of Canada launched an online survey to explore possible harm from circumcision. The survey is open to males of any age who were circumcised IN CANADA (regardless of current residential status) and who wish to share their experiences regarding resulted from the circumcision.

The confidential ten-question survey is being conducted for research purposes to assist CHHRP in better understanding the possible consequences of circumcision on male health and sexuality. Respondents also have the option of follow up contact by providing their email address.

The survey is open until April 30, 2017 and can be accessed at: https://www.surveymonkey.com

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New Book Reviews by Steven Svoboda

The Foreskin and Why You Should Keep It. By Samuel M.
psychological harm or harm to their sexual health that may have


Carnes. CreateSpace Independent Publishing

who has written a work whose value should not be underestimated. The Foreskin and Why You Should Keep It contains just over 100 pages of text and the pages are not large ones, so clearly Carnes had no room to fit in all possible knowledge relating to his topics of intact genital anatomy and reasons for leaving your son intact.

Carnes is clearly an author passionately committed to getting the word out to the public on this topic, and he is already planning follow-up books he intends to write. His first chapter is titled, “The Basics in Plain Language,” and what could be more useful for someone new to the topic and a bit dazed by the onslaught of information from all directions that one can find online? The author sets the stage with a few brief paragraphs explaining (among other things) that seventy percent of the world’s males are intact. Carnes then calmly and in layman’s terms discusses potentially thorny topics such as the lack of need for retraction of a boy’s foreskin and the red herring of “cleanliness” that is still used to justify male circumcision.

Carnes does seem a bit disorganized at times in that topics are not necessarily always organized in a particularly intuitive manner. Also I wondered at the exposition of “religious arguments that people give” that discussed only Catholicism and other forms of Christianity without addressing at least equally the more pressing considerations relating to Judaism and Islam.

Cliched though it may be to say so, sometimes less is more. Carnes has written a book that is an invaluable gift for any expectant parents undecided on the issue of their unborn children’s genital autonomy.

Adrienne Carmack is a urologist and a colleague who has collaborated with ARC and published academic papers
Two excellent short books were published in 2015. Samuel Carnes is a medical dosimetrist

Her Little Boy’s Penis, is a short sixteen pages in length. It includes nine very appealing drawings showing a happy intact male baby and--in several of the drawings--different, helpfully labeled parts of his anatomy. Carmack provides a patient, very user-friendly description of normal male genital autonomy, explaining why no mother needs to do anything to change the wonderful system with which our boys first enter the world. One chapter answers the question that concerns many mothers (and fathers): how should the boy’s penis be washed?

Carmack ends by suggesting further reading and with a few useful conclusions: The foreskin is a highly sensitive part of the penis; cleanse the delicate foreskin gently and do not wash it with soap; the foreskin will separate naturally and painlessly as the boy ages; allow time out of diapers when feasible, and use positive language when changing diapers.

As a father of two children, I did wish that the author had made an allusion or two referring to the child’s father. Adrienne’s book is so charming and so clearly devoted to doing the right thing that I wholeheartedly recommend it to any interested reader.

This landmark event can be attributed in large part to the tireless efforts of our close colleague and friend James Chegwidden, who co-represented the plaintiff mother in this case. The case involved a threatened circumcision of two boys that was sought by the father to be performed by a medical professional, but for purely religious reasons. The court refused to permit the procedure to be performed, finding that circumcision carries real risks. The court also found that nothing in Islam requires male circumcision before an age when the boys could make the decision for themselves (15-16 years old) and that to the contrary, intact boys can fully participate in their father’s Muslim community and culture and would not suffer exclusion. The case can be accessed at http://www.bailii.org/ew/cases/EWHC/Fam/2016/849.html.

Subsequent chapters address the intact penis and its proper care, the cultural bias behind the continuation of the practice supporting genital autonomy. Her self-published book, titled 

Important New UK Decision Upholds Children’s Rights

We are pleased to announce that an important new legal decision has been handed down in the UK upholding children’s rights. While the judgment is not perfect, the judge’s primary reasoning protects the child's best interests and his right to personal autonomy.