

19th November 2010

The Hon Julia Gillard MP
Prime Minister of Australia
Parliament House
Canberra

via Mr Craig Thomson MP

Good morning Ms Gillard,

I write to you regarding the act of circumcising infant males.

The attached (and as yet unanswered) letter to the New South Wales Premier, Ms Kristina Keneally, will provide the background and avoid the necessity for repetition here.

Since writing the letter to Ms Keneally, there have been a number of developments and I am no longer quite as innocent as to the strange interrelationship between governments and the medical regulatory bodies.

Firstly, I have received a number of responses to the other letters I have sent to various departments, organisations and Commissions. A selection is attached. As you will see, high intellect is under represented. In the instances where I have been graced with a reply, it is typically suggested that I write further letters to a plethora of other destinations.

I trust you can appreciate the mind numbing infuriation of having several departments all recommending writing letters to the each other as part of their considered advice.

Scanning the replies, you'll also notice a wide range of skills employed by the writers. From the polite and sympathetic but totally non-committal letter from Lou-Anne Lind of the NSW Commission for Children and Young People, to the unmitigated absurdity of a letter from Dr Andrew McDonald. Dr McDonald is writing on behalf of the NSW Health Minister, Ms Carmel Tebbutt, who is in turn responding on behalf of the Premier, Ms Keneally. His letter may well have been authored by a 10 year old with access to an internet search engine.

Prime Minister, I am not writing to you as a first port-of-call.

Secondly, I have become even more disbelieving that Dr xxxxxx's ethical and moral compass allowed him to circumcise my son without my consent. When my partner attempted to have our son circumcised in my absence, at a time when she was most emotionally vulnerable and susceptible to poor judgement, Dr Sxxxxx should have acted in moral neutrality, as a circuit breaker to safeguard the rights of my son and myself, not as an enthusiastic advocate to vandalise them. My partner is now remorseful and tremendously sad at her decision to have our son circumcised.

I am similarly stunned that Dr Sxxxxxx's peers, in the form of the various medical regulatory bodies, seem so totally relaxed and satisfied with his behaviour. I now understand that it was not only bad manners that caused letters sent to both Dr Andrew Pesce of the AMA and Dr Chris Mitchell of the Royal Australian College of General Practitioners to be ignored but also the measured belief that I am simply not owed any explanation or consideration.

Unfortunately, however, all of the indignations felt by me regarding the issue of my consent are insignificant compared with the harm done to my son. At the end of the day, no amount of lobbying, reflections or recriminations can change the outcome for him.

My son was recently taken to a well known and respected paediatrician to once again have his surgery and level of injury assessed. Early in that consultation, my partner was asked by the paediatrician if anaesthetic was used during my son's circumcision.

A lump formed in my throat as I waited for her answer.

Grasping for words, my first reaction was to assume that I had not heard the question correctly. No, his question was as I had first heard and yes, some doctors perform circumcisions without anaesthetic.

In what a number of people should reflect upon as the luckiest moment of their life, I learnt that anaesthetic was used on my baby boy.

So, Prime Minister, the third realisation I have made since writing my letter to Kristina Keneally is that I am now even more committed to changing the way this issue is viewed. For me it is likely to be the only way that I am able to find a personal peace and one day explain to my son that his misfortune at least resulted in protection for those that followed him.

Like the majority of Australians, I have long viewed circumcision with distain. But also like the majority of Australians, I have had no cause, before now, to fully understand the murky sub-culture that surrounds it. I've learnt much.

I have learnt that the zealots have ALWAYS managed to find a way to justify their barbarism. In 1888, John Kellogg (of Corn Flakes fame) suggested that:

“A remedy for masturbation which is almost always successful in small boys is circumcision. The operation should be performed by a surgeon without administering an anesthetic, as the brief pain attending the operation will have a salutary effect upon the mind, especially if it be connected with the idea of punishment. In females, the author has found the application of pure carbolic acid to the clitoris an excellent means of allaying the abnormal excitement.”

How enlightening.

I’ve learnt that in the era when I and many of my peers were routinely circumcised, it was in an almost Victorian belief that it made the penis more ‘neat, tidy and acceptable’. And a generation of overly trusting parents simply played follow-the-leader.

I’ve learnt that the same repackaged zealots are now promoting circumcision as a prophylactic measure against future STD and HIV infection.... on a 6 week old infant. I’m guessing that in ten years time circumcision will presumably cure baldness.

I’ve learnt that a ‘plastibell’ is not a Christmas ornament but a macabre device used to crush the life out of living tissue.

I’ve learnt that helpless infants are immobilised by being strapped into a medieval looking apparatus called a ‘circumstraint’ so as not to be able to struggle.

I’ve learnt that parents are generally discouraged from witnessing the circumcision for reasons that any clear thinking person could easily guess.

I’ve learnt that anyone can walk into a doctor’s surgery, claim to be an infant’s parent, and on their sole say-so submit the infant to be circumcised on the spot.

I’ve learnt that while it’s illegal to tattoo an infant, it is perfectly acceptable to cut off part of his penis.

I’ve learnt that while it’s illegal to dock the tail of a dog, it’s perfectly acceptable to dock the penis of a baby boy.

And I’ve learnt, against all reasonability, that this abject and obvious immorality is perpetuated by both levels of government as well as the timid, spineless and inept medical regulators.

I’m convinced without reservation that any reasonable person must acknowledge the indisputable injustice of this situation. The raw numbers already confirm that the vast majority of Australians are not supportive of circumcision generally. But that ‘non-support’ would turn to abject hostility if they became aware that such surgery was being performed, in any circumstance, without anaesthetic.

It’s high time that this murky sub-culture was subjected to intense public scrutiny. And I promise you once again that I will see that done; one way or another.

With the greatest of respect then, Prime Minister, I would be grateful if you would address the following points:

1. May I ask, firstly, if you are personally, for any reason, a proponent of infant circumcision?
2. Female genital circumcision or mutilation is explicitly banned in all States and Territories and is, in NSW at least, a reportable offence. Without such explicit legislation, devoid of ambiguity or the loophole of self regulation, it is probable that many of our ethical doctors would still be happily performing female genital mutilation.

The Australian Human Rights Commission appears to have more than adequate existing powers to address the obvious discrimination experienced by infant males in Australia by State governments and medical regulatory authorities. (see the Sex Discrimination Act 1984 and the Human Rights and Equal Opportunity Commission Act 1984).

The International Covenant on Civil and Political Rights (to which Australia is a signatory) has a SPECIFIC clause regarding guaranteeing 'physical integrity' of every human, irrespective of age or sex.

The United Nations Convention on the Rights of the Child specifically prohibits "traditional practices prejudicial to the health of children", a provision that clearly includes genital mutilation.

In 1993 the Queensland Law Reform Commission found that medically unnecessary circumcision of minors was unlawful under the criminal code of that state, while a considerable volume of scholarly literature since then has established that it is no less a violation of medical ethics and human rights than female genital mutilation.**

Non-medically indicated infant circumcision could probably be banned overnight without one additional law being passed.

Through the prism of existing powers, are you able to enlighten me as to why the attached responses from the AHRC are so dismissive and indifferent?

3. The Commonwealth government, via Medicare, pays a scheduled rebate for infant male circumcision. No rebate is payable for the act of female mutilation.

Far from being absolved of responsibility in this matter by simply deferring to the States as the controlling bodies, the act of paying a Medicare rebate for the 'procedure' is tantamount to an endorsement by the Commonwealth. To be even remotely in accordance with the Sex Discrimination Act 1984, the provision of a subsidy for male circumcision should also be subject to the proviso, 'if medically necessary'. Do you agree with this analysis?

4. At present, the States distance themselves from direct responsibility on the basis that the delivery of medical services and many of the attendant controls are delegated to the various regulatory bodies such as the Royal Australian College of General Practitioners and the Royal Australian College of Physicians.

In doing so, it appears that they feel absolved from legislative responsibility and the possibility of alienating the small (but extraordinarily vocal) minority of parents who remain determined, for one non-medical reason or another, to circumcise their boys before they are old enough to object or consent.

Do you feel that it is right and proper that non-government organisations be entrusted to assess and set societal ethics and morality?

Or do you feel, like me, that the community alone, via it's elected leaders, should alone be responsible for the setting of such standards?

5. Are you of the opinion that simply because an infant is unable to articulate a view, communicate a lack of consent or physically ward off the attack of circumcision that his future feelings or will are inconsequential?
6. As with their last statement on the subject dated 2004, the latest directive regarding infant circumcision from the Royal Australian College of General Practitioners again concludes that there is "no medical reason for routine infant circumcision".*

Myths and blatant mistruths about circumcision are propagated by 'special interest groups', while infants continue to be subjected to permanent, irreversible, debilitating and painful surgery for no medical reason.

Could you please comment on why the act of infant male circumcision is allowed by government to remain fogged by mythology, ritual and deliberate untruths?

7. Although the number differs from region to region, the Australia wide circumcision rate is now somewhere between 15 and 19%. That infers that over 80% of the Australian population already regard the procedure of circumcision as lying somewhere along a continuum bounded by 'unnecessary' and 'barbaric'. Would you please indicate clearly the Australian Labor Party's policy in regard to non-medically indicated infant circumcision.

If no policy currently exists, will you assure me that the formulation of such a policy will be forthcoming?

Looking past the idiosyncrasies and hurts associated with my son's and my situation in particular, it is often useful to distil ethical and moral arguments such as this to the simplest component pieces. In this case, they are:

- That the body of a human being belongs to that human being alone
- That children are given to parents in custody, not in ownership

One American commentator makes the astute observation that circumcision is a societal and philosophical issue masquerading as a medical issue. How true.

Please understand. You are being presented with the last opportunity that the political system will be afforded to be 'on the front foot' regarding this question. I have sent this letter to you in private, without media or extensive distribution, as an act of good faith.

I would urge you, please, to not simply throw this matter back into the water as a 'states issue'.

I look forward to receiving your reply in due course.

Yours sincerely,

References

* <http://www.racp.edu.au/page/policy-and-advocacy/paediatrics-and-child-health>

** See bibliography at <http://www.circinfo.org/ethics.html>

Excellent information can be found on the Australian site: <http://www.circinfo.org/>

In America, this site is also highly informative: <http://circumcision.org/>