

16th January 2012

The Hon Jillian Skinner – NSW Minister for Health
Governor Macquarie Tower
Level 31, 1 Farrer Place
SYDNEY NSW 2000

cc: Mr Barry O’Farrell - NSW Premier
Mr Greg Smith - NSW Attorney-General
Mr David Clarke MLC – NSW Parliamentary Secretary for Justice
Mr Warwick Marshall - Tasmanian Law Reform Institute
Ms Megan Mitchell - NSW Commissioner for Children and Young People
Ms Lou-Anne Lind - NSW Commission for Children and Young People

Re: IM11/3346
File10/005444
Matter11/003630
M11/6015

Good morning Ms Skinner,

Thank you for your letter dated the 1st December 2011 and received by me on 7th January 2012. You write in response to my letter dated the 11th October 2011 (attached) and a letter to me from Ms Nicola Roxon, the Minister for Health and Ageing (attached). I appreciate the demands which must be placed on your time and greatly appreciate the fact that you appear to have personally signed your reply.

Thank you also for invested the time to read my correspondence prior to responding, a courtesy that is obviously not universally extended. This fact is underlined by your recognition that Ms Roxon omitted one of the central issues contained in my letter, namely my lack of consent to my son’s circumcision.

Your acquiescence to the current state of affairs regarding non-medically indicated infant male circumcision, however, is disappointing; particularly in light of the fact that over 85% of Australian parents and by extension the population at large, view the act of performing permanent surgery on an infant without demonstrable therapeutic value as unacceptable.

Ms Roxon would be relieved to hear, I’m sure, that you agree with her contention that “*in Australia, infant male circumcision may be carried out for a range of reasons, including religious and cultural reasons, or*” (almost as an afterthought) “*for medical purposes*”.

Perhaps, Ms Skinner, you could explain to me what possible mandate the health bureaucracy has to condone a procedure, even tacitly, on any basis other than pure medical science. Is it simply because the procedure is performed by a Doctor in a surgery?

Does that mean that should a motor mechanic want to drill a 3/8" hole in his son's calf muscle for religious or cultural reasons, the Motor Traders Association should be tasked to sanction the procedure as the peak body representing mechanical workshops?

Ms Roxon would also probably blush with appreciation that you "can confirm that her observations on infant male circumcision provide an acceptable overview of legal and medical complexities which are consistent with NSW Health policy". Once again, what possible mandate does either Ms Roxon or you have to assess or comment on the legal complexities of this issue?

Perhaps you could elucidate a little more about the "legal complexities" that Ms Roxon and you have acknowledged arise from your ongoing countenance of non-medically indicated infant male circumcision by the medical profession and bureaucracy.

Perhaps, while you are both explaining the legal complexities, the county's Attorneys General could put together a paper as to the method of kidney dialysis that they collectively consider most appropriate. This would complete nicely the circle of inappropriate departmental jurisdictions.

I understand, as should you Ms Skinner, why the various Attorneys General want to keep this issue 'medicalised'. Even a cursory amount of research reveals the minefield waiting for them when this issue eventually lands decisively on their collective desks. This realisation goes some way to explain their united and sometimes belligerent insistence that the issue should continue to be seen through a medical prism. As far back as 1993, a non-binding research paper by the Queensland Law Reform Commission (Circumcision of Male Infants) concluded that "*On a strict interpretation of the assault provisions of the Queensland Criminal Code, routine circumcision of a male infant could be regarded as a criminal act*", and that "*doctors who perform circumcision on male infants may be liable to civil claims by that child at a later date*".

I have attached a letter from Mr David Clarke, the NSW Parliamentary Secretary for Justice. As you can see, Mr Clarke is predictably of the view that this issue belongs anywhere else but on his desk or the desk of his boss, NSW Attorney General Greg Smith. You'll note that Mr Clarke is sitting by his phone, patiently waiting for someone of your stature and influence within the medical fraternity to ring him and urge him to action. Ms Skinner, I invite you to make that call.

The question is not why the Attorneys General keep on kicking this ball to the Health care fraternity. That is self evident. The question is why people in positions such as yours keep accepting it.

Non-medically indicated infant male circumcision is not an issue for the medical bureaucracy to agonise or pontificate over any longer. It is a matter the Attorneys General and Parliaments.

As you rightly observe, the other part of my letter dealt with the fact that that my little boy was circumcised, for no medical reason, without my consent. Believe me Ms Skinner, your glib assessment that “the circumcision of my son against my will must have caused me distress” is an understatement of gargantuan proportions.

To seek to placate me by reassuring me that my lack of consent was “correct and consistent with current policy” is an unadulterated insult.

Please find attached a copy of recent correspondence to the Commonwealth Attorney General, Mr Robert McClelland. The carbon recipients of today’s letter to you have been sent my letter to Mr McClelland previously.

Much is riding on his response because, I must confess, I am quickly approaching the end of my tether.

Thank you once again for your reply.

Yours sincerely,