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Rethinking Circumcision and Sexuality in the United States

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Far fresher insights can be gained by reading the male body through the window of its vulnerabilities rather than the dense armor of its power — from the 'point of view' of the mutable, plural penis rather than the majestic, unitary phallus.

Susan Bordo (1993: 697)

Routinized male circumcision¹ is not a topic widely discussed in our society. Indeed, the mere referencing of this rite or operation often carries with it the aura of a taboo. 'I don't see what that has to do with society,' says one student. 'That is your research interest?!?' demands a worried colleague.

Problematizing the normalcy and taken-for-grantedness of this practice may be strange to readers for whom circumcision is just a necessary and unobjectionable correlate to hospital birth — a 'fact of life' for American boys and nothing more. As Wallerstein (1980: 217) reports, in the 1920s — for the first time in history — a majority of American males were to be circumcised, a trend that increased over the years, and then leveled off to about 85 percent of newborn males by 1980 (Laumann, Masi and Zuckerman 1997).

The debate over neo-natal circumcision is most frequently framed in terms of issues of hygiene, disease, appearance and purported dysfunction. In this essay, I argue that perhaps a more important reason not to circumcise may be the sexual consequences and ramifications of the procedure. I am interested in the possible impact of circumcision on forms of male and female sexual pleasure. The sexual dimensions to circumcision are a neglected topic of inquiry for sex and gender researchers. As Harrington (1968: 953) pointed out some years ago, ‘circumcision at infancy is distinct, and its meaning in regard to sexual differentiation remains to be investigated.’ Unfortunately, few researchers have taken up this charge over the intervening decades, and the relationship between circumcision and sexuality remains opaque.²

Unlike female circumcision or female genital mutilation (which is more universally condemned), responses to male circumcision in the US are diverse and often fractious. Sigmund Freud still seems to most adequately capture the poles of tension between circumcising and non-circumcising populations and their statesmen. He writes: ‘those who do not practice it regard it as very odd and find it rather abhorrent; but those who have adopted circumcision are proud of the custom. They feel superior, ennobled, and look down with contempt at the others, who appear to them unclean’ (Freud 1932 [1951]: 49). Similar sentiments may be found among contemporary sex researchers, for example, Laumann, Masi and Zuckerman (1997: 1507) who note, ‘a certain stigma . . . is attached to the uncircumcised penis in the white population.’

In this paper I suggest that sociological discourse on circumcision (where it exists at all) has taken a too medicalized approach to circumcision and has thus ignored a critique of circumcision on the grounds of gender and sexuality. I have come to my

conclusions reading research on circumcision from mainly outside the confines of sociology, for example, in cultural anthropology (Campbell 1990; Boon 1994), religious studies (Hoffman 1996), literary criticism (Seiden 1996), legal studies (Rabello 1995), journalism (Wallerstein 1980; Romberg 1985) and psychoanalysis (Tractenberg 1989). I also found intriguing some remarks of Derrida (Bennington and Derrida 1991 [1993]: 59-60). As James Boon writes: ‘Foreskins are facts - cultural facts - whether removed or retained. Absent versus present, prepuces have divided many religions, politics, and ritual persuasions . . . (non)circumcision involves signs separating an ‘us’ from a ‘them’ entangled in various discourses of identity and distancing’ (Boon 1994: 556). One form of separation that has not — to my knowledge at least — been previously addressed in this research area is the relation between male circumcision and forms sexual behavior and sexual pleasure. Yet, as the medical doctor Ritter suggests:

Males in particular, because of their convex genital makeup, visually confront, and probably assess, their penises many times a day. Daily the male awakens with an erection. The penis must be touched when washing, dressing, and directing the urinary stream. A man usually regards his penis as an extremely valued possession, and in its frequent perusal, cannot fail to associate with it emotions, reminiscences, and possible fantasies (Ritter 1985: viii).

This essay uses this assessment as a point of departure to ask how circumcision might influence sexuality and ‘masculinities.’ My methods span a variety of sources including phenomenology, analysis of interdisciplinary texts, and informal observation of the way people speak about circumcision in the United States.

In the first section of this paper, I discuss the history and preponderance of routinized male circumcision in the United States and try to describe some contours to the circumcision debate. This is followed by a brief tour of some instances of recent gender theory that I use to explore possible connections between routine circumcision and male sexuality. In the third section of this essay I suggest that circumcision impacts a man's sexual feeling, repertoires and forms of pleasure, which leads us to the rather simple conclusion that circumcised and uncircumcised males are differentially sexed.

CIRCUMCISION IN THE UNITED STATES

The routinized circumcision of boys flourished in the modernism of late 19th and early 20th century America. In 1870 only five percent of American males were circumcised (Wallerstein 1980: 217). By 1940, the rate was 55 percent, increasing to 85 percent of American boys some four decades later. Recent data (Laumann, Masi and Zuckerman 1997) report that the majority of males in the United States continue to be circumcised. In 'the United States, almost all hospital-born male infants undergo circumcision regardless of the religious affiliation of their parents' (Seiden 1996: 29). As reported in the New York Times, the current rate of circumcision is around '81 percent for non-Hispanic white men, 65 percent for black men. . . 54 percent for Hispanic men,' and 96 percent for Jewish men (Gilbert 1997). Relative to other nations³ the popularity of male circumcision in the US is highly anomalous, especially given the societal absence of a strong religious imperative toward the procedure.

Undoubtedly the institutionalization of hospital birth has played a determinate factor (Romberg 1985: 100; Laumann, Masi and Zuckerman 1997: 1053) in the prevalence of circumcision across the United States, as, it seems likely, does the trust Americans must have placed in their doctor's assurances of the epidemiological necessity and moral legitimacy of the practice. After all, what self-respecting parent would want her child to experience the sufferings prophesied by doctors such as Melvin Anchell, who has written:

Circumcision is a very simple operation . . . most easily performed in infancy. Like the appendix, the foreskin is an anatomical remnant from a previous stage of evolution when it served a purpose. Today it is useless and may cause physical problems. At times it becomes swollen and tightens like a noose around the penis . . . Irritating secretions tend to collect beneath the foreskin, requiring constant cleansing to prevent sores and tissue damage. (Anchell 1971: 135)

Until quite recently, the US medical establishment whole-heartedly endorsed this sort of perspective.

Psychiatrist Thomas Szasz (1996: 138) suggests that routine neonatal circumcision can be taken as a symbol of the birth of the US 'Therapeutic State,' a 'political order in which social controls are legitimized by the ideology of health.' Szasz argues that circumcision in the US is emblematic 'of the same puritanical zeal for health-as-virtue that has fueled other typically American crowd madnnesses, such as Prohibition, the War on Drugs, and the Mental Health Movement' (Szasz 1996: 140-141).

Historically, the roots of medical circumcision in the United States can be traced to 1870 when Dr. John Lewis A. Sayre, an orthopedic surgeon, discovered the (now

questionable) merits of circumcision in curing paralysis among male children suffering from phimosis, an especially tight foreskin (Gollaher 1994). After ‘curing’ a couple of cases with the procedure, Sayre soon believed that he had stumbled upon something important, and surmised that the problemed foreskin had produced ‘an insanity of the muscles,’ causing them to act ‘involuntarily . . . without the controlling power of the person’s brain’ (Sayre [1870-71] in Gollaher 1994: 6). As a result of Sayre’s endeavors, circumcision quickly became a panacea for solving almost any ailment the cause of which eluded the medical community. Not simply ‘orthopedic problems, but epilepsy, hernia, and lunacy appeared to respond’ (Gollaher 1994: 10).

In the late 1880s, it seems that discourse on circumcision gradually shifted from issues of its effectiveness in combating muscle spasms (though such ideas were still widely circulated) toward questions of general sanitation. Norman H. Chapman, a student of Sayre, wrote in The Medical News (1882), ‘if circumcision was more generally practiced . . . we would hear far less of the pollutions and the indiscretions of youth; and that our daily papers would not be so profusely flooded with all kinds of sure cures for loss of manhood’ (in Gollaher 1994: 10). A year earlier, P. C. Remondino had devoted a treatise to the redemptive effects of circumcision, how it cured masturbation (thought then to cause insanity) — as well as a host of other ‘ills, sufferings, and tribulations, all kinds of physical distortions and ailments, nocturnal pollutions, and other conditions calculated to weaken [the uncircumcised man] physically, mentally, and morally, to land him, perchance in the jail, or even in a lunatic asylum’ (in Romberg 1985: 98).

According to Schoen (1990), it wasn't until the 1960s that neonatal circumcision received any sort of criticism in the United States, from the medical community or US society at large. Then,

in 1971 and again in 1975, the Committee on the Fetus and Newborn of the American Academy of Pediatrics (AAP) took a stand against the routine circumcision of newborns. This position was reiterated in 1983 by both the AAP and the American College of Obstetricians and Gynecologists in their joint publication Guidelines for Perinatal Care. (Schoen 1990: 1308)

In 1989, and in light of new findings positing a link between circumcision status and 'urinary tract infections in infant boys and sexually transmitted diseases in young men,' the AAP once again appointed a taskforce to study the issue, 'but made no final recommendations' (Schoen 1990: 1308).

While US medical doctors were questioning circumcision — a procedure long considered their trans-historical touchstone⁴ — the operation was also under attack outside the medical community, among researchers, activists and members of the general public. The anti-circumcision forces argued that the procedure bears an unsettling resemblance to torture, violates an individual's right to self-determination, and on the whole seems like an unnecessary complication to an already eventful moment — the birth of a child. After all, they claimed, we see no reason to circumcise newborn puppies, ponies, or starfish. Somewhat strangely, unless he is circumcised, the American male is often considered sort of unfinished, impure, or prone to disease.

Some of the circumcision debate in the 1980s and 1990s was structured by organizations such as NOCIRC (National Organization of Circumcision Information and

Resource Centers), DOC (Doctors Opposed to Circumcision), and BUFF (Brothers United for Future Foreskin). The emergence of these groups also corresponded with an increasing number of circumcised men coming forward with feelings of resentment, anger, and loss (men in some cases seeking restorative surgery).⁵ In spite of the apparent parsimony of the procedure, neo-natal circumcision is by no means a risk-free operation. According to Romberg, a parent having one's son circumcised can be assured of an approximate 90-95 % chance that the wound would heal normally without undue bleeding or infection, and that the outcome will be a 'normal circumcised penis' (Romberg 1985:198).⁶

In greater numbers, doctors and lay-people now seem to be siding with those such as Thomas J. Ritter, who asks: 'How does one find fault with the beauty and perfection of the normal infant's body? What quirk in our psyche causes us to focus upon the prepuce as a mistake of creation, to be removed by our flawed judgment, believing that now the penis is improved and more acceptable?' (Ritter 1985: viii). In 1989, the American Medical Association adopted a more neutral stance toward the practice than it had ever stated in the past, which was followed in by a statement in 1997 that 'the operation is unnecessary and should be performed only for medical reasons' (Kennedy 2000: 12). The organization also said that it planned on revisiting the issue again soon, in light of new research and findings.

Whether or not new studies will settle the issues surrounding male circumcision is, however, another matter. Laumann, Masi and Zuckerman's (1997) work, for example, only seems to make the topic even more insoluble. From the standpoint of physiology and disease prevention, this study appears to demonstrate that, at best, there is no

advantage to being circumcised and at worst, that circumcision might actually increase the risk of contracting chlamydia: ‘With respect to STD’s, we found no evidence of a prophylactic role for circumcision and a slight tendency in the opposite direction’ (Laumann, Masi and Zuckerman 1997: 1056).⁷ Other notable results from this study are that ‘uncircumcised men appear slightly more likely to experience sexual dysfunctions, [and] that circumcised men engage in a more elaborated set of sexual practices’ (Laumann, Masi and Zuckerman 1997:1052).⁸

In the remainder of this essay, I depart from the research streams and arguments presented above, and instead theorize the possible relationships between (un)circumcision and sexual practice — between the foreskin and sexual forms of pleasure. To my mind, previous commentators have for the most part overlooked the focus of this essay – namely the functions of the foreskin for sexual activity and the more elaborate sexual practices available to uncircumcised men.

CIRCUMCISION THROUGH THE LENS OF GENDER THEORY

One of the aims of this paper is to construct a modest argument against circumcision on the grounds of sexuality. This is an avenue of thought that has not yet been discussed in contemporary discussions of sex and gender research. For instance, in her book Paradoxes of Gender (1994), Judith Lorber simultaneously condemns female circumcision (or FGM), while, to my mind, sort of advocates male circumcision as a necessary surgical procedure. As she puts it: ‘Circumcision of boys is much more common and occurs in societies throughout the world. Where it is associated with

sexuality, it is for women's and men's pleasure' (Lorber 1994: 65). In this essay, I take issue with such a categorical and unqualified position (which, incidentally, is quite widespread) and suggest that male circumcision, to the contrary, decreases forms of women's and men's pleasure.

In another exemplary work in recent gender theory — Susan Bordo's (1993) otherwise dynamic and insightful article — 'Reading the Male Body,' we do not find a distortion of the facts behind male circumcision, but rather a surprising neglect to address the question at all. In a crucial statement of her reconceptualization of masculinity, Bordo writes:

[L]et's . . . allow the imagination to play with the idea of aroused penis – aroused (as in a state of feeling), rather than 'erect' (as in a state of accomplishment and readiness to perform). This liberation of the sexually excited penis from its phallic signification allows us to radically re-imagine the erotic charge of what we usually call the 'erect' penis. Its charge becomes connected not to an imagination of where it can go, what it can do, etc. (the imagination that privileges its 'hardness,' its ability to penetrate, its performance) but to an imagination of what it is feeling – that is, arousal. The penis has a rather unique capacity to make erotic arousal visible and apparent to the other person; it wears its 'heart' on its sleeve, so to speak. That transparency of response can be profoundly sexually moving; it can also be experienced as a movement which empowers the one who has stirred the response, allows him or her to vitally move another person. (Bordo 1993: 727)

Let us cut to the chase. Does Bordo's new ideal penis type have a foreskin or not? Or, to put the point less crudely, might we not say that the foreskin plays some role in Bordo's notion of the 'aroused,' as opposed to the merely 'erect,' penis? Unfortunately, the rich

meaning of this passage and its relation to the practice and the movements of (un)circumcision Bordo leaves unaddressed.

We find a similar neglect of male circumcision in work that attempts to analyze the negotiation of 'manhood' in modern societies. It seems somewhat surprising, for example, that in his book Masculinities (1995) Robert Connell devotes not a single sentence to circumcision, especially when we consider its cross-cultural function as a right of passage for boys entering the 'League of Men.'⁹ But Connell does come close to addressing the issue in the context of his discussion of the 'sense of maleness,' in Gender and Power. Connell writes that:

The physical sense of maleness is not a simple thing. It involves size and shape, habits of posture and movement, particular physical skills and the lack of others, the image of one's own body, the way it is presented to other people and the ways they respond to it, the way it operates at work and in sexual situations. In no sense is all this a consequence of XY chromosomes, or even of the possession on which discussions of masculinity have so lovingly dwelt, the penis. The physical sense of maleness grows through a personal history of social practice, a life-history-in-society.
(Connell 1987: 84)

Despite that, in this passage, Connell seems to want to distance himself from discussions of 'the penis' per se, it seems clear that, whatever one's own feelings on the issue, the status of (non)circumcision undeniably plays some role in constituting 'the image of one's own body, the way it is presented to other people and the ways they respond to it,' not so much 'at work,' but certainly 'in sexual situations.' (Un)circumcision is always already, a 'social practice' and thus provides (for some, at least) an originary exemplar of something along the lines of a social construction of self-hood, or in Connell's terms, the

beginning of one's 'life-history-in society.' In his later work, Connell (1996: 46) writes that 'the body is a more or less neutral surface or landscape on which a social symbolism is imprinted.' Some might argue that there is no more important symbol imprinted upon a man's body than his circumcision status.

Finally, from Connell's theoretical frame, it seems plausible to argue that circumcision may have the unintended consequence of reinforcing unnecessary differentiation between men and women, thereby obscuring the fact that 'femininity is always part of a man's character' (Connell 1995:10).¹⁰ Ceteris paribus, the circumcised male is considered in many (especially male) social circles as more 'manly' than his uncircumcised brethren are. The latter are attributed a dimension of 'uncleanliness' (in the sense outlined by Freud, above) normally reserved for regressive myths concerning female 'impurity.'¹¹

This idea comes across forcefully in Lawrence Hoffman's Covenant of Blood: Circumcision and Gender in Rabbinical Judaism (1996). Hoffman's basic argument in this work is that circumcision is problematic not so much for its immediate or emergent 'effects' upon the individual male, but rather for the unintended consequences the procedure poses for female members of the (Jewish) community. Hoffman argues that since women do not undergo a comparable procedure whereby they are initiated into the larger religious body, they will always be perceived as having a lower status than men have and will therefore be relegated to peripheral social roles. Hoffman writes:

Circumcision is inherently sexist. It conflicts with the higher value of promoting egalitarian Judaism and thus cannot be justified any longer as a desirable Jewish ritual . . . The sign of the covenant can be made only on the male sexual organ. Women thus remain covenanted only

through the male who is stamped and in whose domain they have their official socially recognized existence. They are portrayed as uncontrolled, and therefore relegated to the margins of Jewish responsibility. (Hoffman 1996: 213, 214)

I think that Connell would agree that, in Hoffman's account, we can see the presence of a certain kind of 'hegemonic masculinity' which is 'always constructed in relation to various subordinated masculinities as well as in relation to women' (Connell 1987: 183). Where I differ from Hoffman is in my focus, not on the relation between circumcised men and women, but rather in analyzing uncircumcised men as an instance of such a class of subordinated masculinities, one sited in opposition to the supposedly more masculine and sexual practices of circumcised men.¹²

In their study of a number of non-Western cultures, Paige and Paige (1981: 147), suggest that a circumcision demonstrates 'visible public evidence that the head of a family unit of their lineage is willing to trust others with his and his family's most valuable asset, his son's penis.' Though for different reasons than in the cultures surveyed by these researchers, it may be indeed be the case that, in contemplating circumcision, parents in the United States are indeed thinking about how the broader 'community' will perceive their son's penis. In the US today, as elsewhere, circumcision provides visible public evidence of the sort of 'man' his parents are attempting to raise and it immediately affords him membership in a culturally defined, historically specific, category.

I hope the above remarks demonstrate how male circumcision might be conceptualized within the spaces of gender theory and a sociology of the body. Recognizing the fact that 'when men problematize themselves as men, a fundamental and

divisive sexual ontology is . . . disturbed (Bordo 1993: 697) and while also realizing the necessity of such ‘disturbing,’ in the following section I address some possible effects of male circumcision on sexuality and forms of sexual pleasure.

CIRCUMCISION AND SEXUALITY

So far in this paper I have been trying to address the ways in which circumcision may be seen as an issue of interest to sociologists and theorists of gender — a word that Lorber defines as ‘a general term encompassing all social relations that separate people into different gendered statuses’ (Lorber 1994:3). The gendered statuses I am discussing in this essay are between circumcised and uncircumcised men. At this point I would like to more directly address the impact of circumcision on male sexuality and sexual behavior. We are, admittedly, entering relatively new ground here. As Van Howe and Cold (1997: 203) report, ‘to date, the effect of circumcision on sexual function has not been carefully studied.’¹³

As noted above, in most social circles in the United States, the prepuce is viewed in either a neutral or a negative light. As Hirshfield noted long ago, ‘circumcision has few opponents’ (1935: 225). This scholar, who traveled widely researching his book The World Journey of a Sexologist, managed to find only one source who spoke in favor of the foreskin. As he recounts:

He laid great stress upon the fact that circumcision was injurious to the general health of the human being. He considered that the secretions from the female organs,

reabsorbed

introduced into the

bloodstream and the body of the man. He also felt that the man's genital secretions, absorbed by the mucous membranes of the female, have a beneficial effect on woman's entire organism.

(Hirschfield 1935: 225)

Although it is beyond the scope of this paper to verify such claims, I wonder if Hirschfield's informant may be on to something here. Assuming that it has at least some validity, is this benefit the only sexual advantage the prepuce affords men and women?

Productive insights on the circumcision controversy and its relation to sex can also be found in Melvin Seiden's essay, 'The Wound and the Covenant,' (1996). In that work he suggests (Seiden 1996: 30) that circumcision may serve to 'fetishize' the penis as the organ of procreation. There are undoubtedly many extrapolations that could be made from this observation. I would like to focus briefly on one, before turning to a discussion of some of the more sensual possibilities foreskin offers circumcised men and women.

Building on Seiden's remark, I think that the argument can be that routinized male circumcision serves to prematurely 'sex' the male body. Let me elaborate: the intact penis contains a certain piece of skin (not unlike the thing underneath your tongue) — the frenulum — that is attached to both the prepuce and the glans of the penis. Until the act of 'defloration' the frenulum seems to serve much the same function as the hymen does in girls/ women, i.e. as a barrier to unwanted or premature sexual activity. During the first act of intercourse (or masturbation), the frenulum is torn from the mucous membrane that keeps it in place, a change that subsequently allows the foreskin to be fully retracted over

the entire 'head' of the penis. Similarly, for women the hymen is broken during the first sexual act (though, of course, it could also be broken for reasons completely unrelated to sexual activity).

What might this all suggest? That, while women and uncircumcised men often experience pain during their primary sexual act, circumcised males do not. This is because the frenulum is removed, along with the foreskin, during the circumcision operation. Given this, it seems plausible to postulate that male infant circumcision might serve as something akin to a 'de-virginizing' experience which has the latent function of reinforcing male power over the sex act with females by decreasing their mutual pleasure.

Even if this is not entirely right, one could argue a weaker version, namely, that circumcised males gain awareness of sex and sexuality at an earlier age than uncircumcised boys since the 'operation forcefully and painfully draws his genital area to his attention' (Kennedy 1970: 184). If we believe in the ability of certain species of birds, for example, to 'imprint' upon the first being they encounter in the world, it does not seem too outrageous a claim to suggest that human babies may undergo similar mechanisms of 'imprinting' as they deal with various originary experiences during the first few days outside of the womb, or even for weeks or months after the procedure. As Wilhelm Reich suggested, circumcision is 'one of the worst treatments of children.' It forces pain on the infant, makes it cry and thus fills it with negative emotions. He comments, 'Here in the very beginning, the spite develops. Here, the 'no' develops, the big 'NO' of humanity. And then you ask why the world is in such a mess' (in Higgins and Raphael 1967: 27-29). The implications of Reich's point, that the operation does induce painful, unintended side effects, have been and continue to be the source of

scientific inquiry. According to the medical journal, The Lancet, circumcised infants may re-experience the pain of the operation for up to six months after the initial procedure:

‘Circumcision may induce long-lasting changes in infant behavior because of alterations in the infants’ central neural processing of painful stimuli’ (in Stein 1997: A02).

Another, and very different, set of variations between circumcised and uncircumcised men may be seen in the types of sexual techniques or relations available to uncircumcised men that are not available to those who are circumcised. As Ritter (1985: vii) notes, once a man is circumcised, ‘the mobility of the loose penile sheath, a function that greatly facilitates sexual dalliance, is destroyed.’ Romberg (1985: 6) concurs, saying ‘intact men do have greater sexual sensation due to the greater sensitivity of the protected glans, and that the foreskin is an erogenous zone in itself.’

Van Howe and Cold (1997) make a similar assessment, suggesting that ‘a foreskin and its full complement of neuroreceptors’ may make sex more satisfying. They argue: ‘The only portion of the prepuce remaining in a man with surgically altered genitalia is the remnant between the corona and the scar...[T]he most sensitive portion of the prepuce at the tip is removed in even the most moderate circumcision’ (Van Howe and Cold 1997: 203). The basic implication of all this research is that, for circumcised men, the sexual act is more utilitarian; for uncircumcised men, it is more potentially variegated. Since circumcised men have no feeling in their foreskin (in fact, no foreskin at all), the only form of stimulation comes in the form of pressure on the head and the shaft of the penis, and in the orgasm itself. Not only is the circumcised man deprived of sensations in his foreskin, but also ‘the epithelium of his glans become thickened and insensitive’ (Warren and Bigelow, 1994: 8).

One sexual practice that in my view demonstrates these notions of increased sensitivity or sexual dalliance in the behavior of uncircumcised men is a sexual act homosexuals describe as ‘docking.’ The general idea, essentially, involves one man extending his foreskin in such a manner that it forms an orifice that is then penetrated by another (presumably erect) object. To put the point very bluntly, circumcision prohibits men from ever being on the ‘giving’ end of such a relationship, closing off a potential form of pleasure that some find to be very satisfying. Parents who sanction the circumcision of their sons are therefore unwittingly circumscribing certain types of sexual behavior for their sons, and are thus limiting exploration of other sexual possibilities of the penis.¹⁴ Circumcision diverts male sexuality down a particular path, disallowing for certain erotic potentials.

In so doing, it seems to me, routinized male circumcision might subtly reinforce what Judith Butler has referred to as the ‘cultural field of gender hierarchy and the heterosexual imperative’ (Butler 1992: 2). If all men were circumcised, none would be tempted to dock — it would be a physical impossibility. Docking represents one of many ‘bodily permeabilities unsanctioned by the hegemonic order’ (Butler 1990: 132), and by learning to dock (or otherwise making erotic use out of the foreskin), uncircumcised males force common representations of the prepuce into a ‘demanding resignification’ (Butler 1992: 21). Using more commonsensical language, we may well agree with a certain knowing mother who simply says: ‘I don’t believe in doing something that would affect someone’s sexuality later on’ (Kennedy 2000: 12).

CONCLUSION

In this essay I have been trying to show how circumcision may be seen as an issue of interest to sociologists and theorists of gender and sexuality. I have traced the history of circumcision in the United States, analyzed the operation in the context of recent developments in gender theory and argued for a case against circumcision on the grounds of sexuality and forms of pleasure.

As far as the main focus of this essay is concerned — on issues of sexuality — the main conclusion of this study is that circumcision may delete from experience what many men and their partners consider to be worthy and playful sexual pursuits, and that uncircumcised men, more so than circumcised, have the propensity for a more gradual, yet in time, more elaborate, sexual history.

Regarding the broader question of the relationship between circumcision and gender identity, however, I think it is important to agree with Bordo, who notes that gender does not flow ‘simply and naturally from genital difference’ (Bordo 1993: 713). Also, as Butler (1990: 141) reminds us, ‘gender identity is the stylized repetition of acts through time and not a seemingly seamless identity.’ I would claim that while circumcision certainly plays a role in ‘doing gender’ but it is, of course, only one factor among many. And although I have made the argument that circumcision status may play a stronger role in ‘doing sexuality,’ I still think it is important not to essentialize circumcision. Gilmore’s comment is apropos here, ‘sex dualisms and oppositions are definitely out of fashion, and so are sexual universals and biological determinisms’

(Gilmore 1990 [1997]: 192). In short, it would be ludicrous to suggest that circumcision status, in and of itself, makes for more 'masculine' men.

The argument of this paper, on the other hand, has simply been that the practices and discourse that surround routinized circumcision in the United States may preclude, rather than open up, the opportunity for more egalitarian, sensuous sexual relations. Practices of uncircumcision, as I hope to have demonstrated in this work, foster the potential for forms of sexuality and sexual practice which are categorically different from, and perhaps even better than, the sex lives of men who are circumcised.

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Endnotes

¹ I originally arrived at this topic rather circuitously, via accounts (in the popular press and otherwise) of ‘female circumcision.’ While many theorists and social scientists have been outspoken critics of female circumcision, they have been reluctant in examining its connections to male ‘gender rituals.’ It is not my intention to engage the complex matrix of concerns surrounding this issue here. There does, however, seem to be a (presently equivocal) connection between practices of male and female excision. Edgar Gregerson, for example, notes: ‘Clitoridectomy is almost never found unless males are also circumcised, but male circumcision is found in many societies that do not practice genital mutilations on women’ (Gregerson 1986: 92). See Gruenbaum (1997 [1982]), Bryk (1974 [1974]): 270-288); Romberg (1985: 17-32), Mackie (1996) and Lorber (1997).

² Gollaher’s (2000) work represents one notable exception.

³ Wallerstein (1980: 28-29) estimated the 1976 circumcision rate in Australia to be 43.7%, the 1974 rate in Canada at 44.3, and in Britain in 1972, ‘fewer than one half of 1 percent (.41%).’ Warren and Bigelow (1994:8) estimate the circumcision rate in Britain at 6.6 percent. For more on British-US comparisons on circumcision, see Gollaher (1994, pp. 25-26).

⁴ Romberg’s statement that ‘circumcision is the oldest form of surgery’ (Romberg 1985: 48) is not quite correct. As Hazelrigg (1997) has pointed out, trephining antedates circumcision by thousands of years. Estes (1989: 56n) does suggest, however, that the ‘circumcision scene in the Old Kingdom mastaba of Ankh-mahor at Sakkara,’ (reproduced in his text), is ‘probably the oldest surviving portrayal of any activity even slightly surgical in nature.’

⁵ Cromie and Kelleher (1993: 529) write, ‘there are literally thousands of men who feel personally ‘victimized and mutilated’ by the fact that they were circumcised against their will.’

⁶ I am aware that some readers may criticize these percentages as being too high. According to Schoen (1990: 1310-311), who himself believes that ‘the advantages of [circumcision] outweigh the disadvantages,’ the 1989 AAP group found that ‘the rate of complications was low and adverse effects consisted mainly of local infection and hemorrhage (incidence, .02 to .6 percent); serious complications

were rare, and the number of deaths of circumcision was negligible.’ Warren and Bigelow (1994: 6) report hemorrhaging to occur in 2 percent of circumcision operations. Yet even if we go with Schoen’s estimate of .6 percent, in the United States every year somewhere around 12,000 boys will experience hemorrhaging during circumcision.

⁷ It has generally been assumed that uncircumcised men were more prone to sexually transmitted diseases. The validity of that claim takes on a particular significance today, in light of the AIDS crisis. While the evidence is by no means conclusive, at least one study has reported, contrary to received wisdom, that uncircumcised men may stand a lower risk of HIV transmission. As Philipson and Posner (1995: 847n) write: ‘Male circumcision makes men more vulnerable to being infected with HIV (and other sexually transmitted diseases that are cofactors for HIV infection) by women, because it increases the likelihood of penile abrasions, which provide an entry route for vaginal fluids.’ As noted above, however, Laumann, Masi and Zuckerman (1997) however, found no statistical difference in rates of HIV infection between circumcised and uncircumcised men.

⁸ These authors’ statement that ‘a slight tendency [exists] for [sexual] dysfunctions to plague uncircumcised men,’ (Laumann, Masi and Zuckerman 1997: 1054) strikes me as a hasty and possibly spurious generalization, given that they do not address how uncircumcised men can engage in sexual practices which are simply impossible for circumcised men to perform, and thus how uncircumcision can in fact promote healthy sexual behavior. We should also do well to remember that the conclusions of these researchers is drawn from some very subjective questions to men about their sexuality. In other words, Laumann, Masi, and Zuckerman do not have objective measures of the dysfunctions that they are asserting.

⁹ See Hirschfield (1935: 221-222), Campbell (1991 [1988]: 101-102) and Boon (1994: 565-566).

¹⁰ As the anthropologist Harrington (1968: 952) remarked some time ago, ‘the corona of prepuce is symbolically a vagina, the removal of which makes the subject entirely man.’

¹¹ See Gollaher (1994) and Grosz (1994).

¹² Connections between uncircumcision and abjection in popular culture may be readily found, for example, in certain rap songs and in film. Take, for example, the opening scene of the 1995 Sling Blade (written and directed by Billy Bob Thornton). Set in a mental-hospital, the main character, Karl, is told the following story (abbreviated here for purposes of presentation) by a fellow inmate: ‘She was standing, this girl, on the

side of the street where a chicken was standing. It wasn't the Colonel, but there was a chicken standing there. And she had this leather skirt on, and she had a lot of hair on her arms. I like that. It means a big bush. I like a big bush . . . So she says, "Are you dating?" you know. I says "Sure" . . . And she says to me, "How much do you want to spend?" And I said, "Whatever it takes to see that bush of yours 'cause I knows it's a big one." And she says to me, "\$25." . . . So I produce the \$25 and she sticks it down into her shoe, pulls up her skirt, and there, before me, lay this thin, crooked, uncircumcised penis . . . You imagine how much I wanted my \$25 back.'

¹³ They do suggest, however, that in 'rodent studies, removal of the prepuce resulted in marked changes in the mechanics of copulation, the hormonal response of the female partner, and aggressive behavior' (Van Howe and Cold 1997: 203)

¹⁴ In other possible scenarios and social situations being (un)circumcised may or may not play an important and quite significant political role in furthering one's agenda for action. Under extreme living conditions, human beings often become extraordinary resourceful. Tim Pat Coogan (1995: 227) provides an example of such resourcefulness in his recollections of the IRA's 'Dirty Protest' in Ulster, and how these men and women communicated with the outside world: 'Men secreted coms (messages written on cigarette papers) in their anuses, behind their testicles or in their foreskins. Women did likewise in their vaginas, sanitary towels, under their breasts, or in their hair. One prisoner is alleged to have transported some forty coms in his foreskin.'