



## HISTORY of U.S. LAWSUITS CHALLENGING THE LEGALITY OF NEWBORN MALE CIRCUMCISION

7/5/23 by T.Hammond

### PREFACE

## [Circumcision Legality and Consent Laws](#)

### Circumcision Legality and Consent Lawsuit

Circumcision is a common surgical procedure to remove the foreskin from the human penis. In the United States, the procedure has become so routine that new parents are generally asked shortly after birth about their preferences regarding circumcision (it's assumed that, more likely than not, the parents will request circumcision). The procedure is at times controversial because many circumcisions are performed on infants. Less frequently, circumcisions are completed on adolescent or adult males.

Those who favor the procedure and parents requesting circumcision for their newborn sons do so based on the general belief that parents of minor children can make decisions for their children as they see fit, based on what they believe to be in the best interest of the child.

Those who oppose the procedure being performed on infants argue that a newborn child is unable to consent to such a permanent and irreversible medical procedure that the child may, later in life, wish they had never undergone.

### Is Male Circumcision Legal in the U.S.?

Circumcision is legal in every state within the United States. This includes infant circumcisions consented to by parents, as well as adult circumcisions that are consented to by the patient.

Many circumcisions are performed within days after birth, or within the Jewish religion, 8 days after birth. Such circumcisions are completed based on the wishes of the parents, usually for non-medical reasons, such as societal norms, religious beliefs, or personal preferences.

Circumcisions on adult males are oftentimes undergone to prevent or rid the patient of diseases believed to be made more likely or made worse by the presence of a foreskin (e.g. HIV and other STDs). Scientific studies on the effectiveness of circumcision as disease prevention have shown mixed results.

## Is Female Circumcision Legal?

Female circumcision, also known as female genital mutilation, involves any medical procedure that results in the removal or injury of part or all of external female genitalia for non-medical reasons. There are variations of female circumcision which remove different anatomical portions of the genitalia, none of which have been shown to provide actual health benefits.

It violates US federal law to perform female circumcision, regardless of the type, severity, or motivation for performing the procedure. This includes transporting a female outside of the US for the procedure to be performed. Anyone violating the law can be punished by fines, up to five years in prison, or both.

Traditional or cultural beliefs are cited by those who support female circumcision, and the procedure is still performed in some countries. The procedure is most often performed between infancy and adolescence. Internationally, it is estimated that 3 million girls are subjected to the procedure each year. The procedure is most common in regions of Africa and in some countries in the Middle East and Asia, as well as among immigrants coming from these areas.

## If a Circumcision is Performed Without Consent, Can I Sue?

Circumcision, as with any medical procedure, absolutely requires consent. Decisions in recent court cases have suggested that someone circumcised without their consent, even if their parents consented for them as a child, may be able to sue the doctor when they reach 18 years of age based on medical malpractice or the idea that they suffered a personal injury.

This will generally only be the case if the circumcised patient suffered physical, sexual or psychological problems as a result of the circumcision. In such cases, filing a circumcision lawsuit may provide a legal remedy for the losses.

## What if My Spouse and I Disagree on Consent?

If two parents of a child disagree on whether to have the child circumcised, a doctor should not perform the procedure (unless deemed medically necessary) without a court order. This means that one parent must secure an [injunction](#) through the courts to either allow/disallow the procedure. The injunction provides a legal basis for enforcing the final decision regarding the procedure

## What if the Doctor Recommends a Circumcision?

Although rare, there are circumstances when a doctor may recommend a circumcision. The most common reasons for the doctor's recommendation include:

- Easier hygiene
- Decreased risk of urinary tract infections
- Decreased risk of STDs

As with any medical procedure, it is possible that complications will result from a circumcision procedure. The rate of complications is very low, but when significant complications occur, legal recourse is possible.

This means that an adult who underwent a circumcision procedure as a child and suffered significant and irreversible complications, (adhesions, phimosis, chordee, or even necrosis) may be able to recover damages from the doctor who performed the surgery.

### [How Can an Attorney Help?](#)

Circumcision injury cases are a highly specialized area of law. If you underwent a circumcision that was done without your consent—or with your consent, but with significant and lasting complications— it is best to contact a [personal injury lawyer](#) near you to figure out your options and secure compensation.

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**1985**

## **Adam London Case – The First Circumcision Lawsuit**

### **Hospital Sued in Circumcision (SF Chronicle, May 1985)**

<http://circumcisionharm.org/images-circharm.org/1985%20London%20filing%20SFChronicle.jpg>

### **Marin Judge Kills Suit over Circumcision (SF Chronicle, June 1985)**

<http://circumcisionharm.org/images-circharm.org/1985%20London%20dismissal%20SFChronicle.pdf>

### **Petition of Writ to CA Supreme Court**

<http://circumcisionharm.org/images-circharm.org/1985%20London%20Petition%20for%20Review%20Cover.pdf>

### **Petition Table of Contents**

<http://circumcisionharm.org/images-circharm.org/1985%20London%20Petition%20for%20Review%20TofC.pdf>

### **Petition Introduction**

<http://circumcisionharm.org/images-circharm.org/1985%20London%20Petition%20for%20Writ%20Intro.pdf>

### **The First Circumcision Case by R. Morris (Truth Seeker, 1989)**

[http://circumcisionharm.org/images-circharm.org/1989%20Morris%20First%20Circ%20Case%20\(London\)%20TruthSeeker.pdf](http://circumcisionharm.org/images-circharm.org/1989%20Morris%20First%20Circ%20Case%20(London)%20TruthSeeker.pdf)

### **Circumcision: Legal & Constitutional Issues by C. Bonner & M. Kinane (Truth Seeker, 1989)**

<http://circumcisionharm.org/images-circharm.org/1989%20Bonner%20Legal%20Constit%20Issues%20TruthSeeker.pdf>

## Mother Calls It 'Torture'

San Francisco Chronicle

Wednesday, May 15, 1985

# Hospital Sued in Circumcision

By Erik Ingram

A Marin County judge was asked yesterday to find Kaiser Foundation Hospital liable for damages in the circumcision of a 6-day-old baby.

Superior Court Judge E. Warren McGuire said he will rule soon on the suit filed by Trudie London of San Rafael, who claims the operation on her infant son, Adam, amounted to "torture, mutilation and physical distortion."

Attorneys for London said a favorable ruling will not only open the door for damage awards for circumcision but could also make physicians "think twice" before performing the routine surgery.

The suit, which also names Kaiser physician Mark Glasser, strikes at the issue of parental consent for elective surgery on minors.

Adam underwent the operation in August of 1983 after both parents signed a standard consent form that noted it was not an emergency medical procedure.

Mrs. London later had second thoughts and filed suit, claiming it was an unnecessary operation that inflicted pain and disfigurement on her son.

Her husband, Frederick, is a Kaiser physician and is not a party to the action, which seeks an unspecified amount in damages.

In depositions, Mrs. London said her husband is Jewish and encouraged her approval of the operation.

Kaiser's attorney, Jeffrey W. Allen, declined to discuss the case yesterday. But in court documents he asserts that state law allows parents to consent to elective and emergency surgical procedures on a minor.

Circumcision is an elective procedure, Allen said.

Richard W. Morris, one of two attorneys representing Adam and his mother, countered that the consent law does not cover "torture, mutilation and physical distortion."

It is forbidden, he said, "even if the name given to the torture, mutilation or physical distortion is surgery . . . done by a person licensed by the state as a physician . . . with the consent of a parent."

Thus, he said, Adam's parents could not legally give their consent.

Morris dismissed the hospital's claim that the operation did have some medical purpose as a prophylactic treatment for the prevention of penile cancer.

"Circumcision is no more a prophylactic treatment for the prevention of penile cancer than is tooth extraction a prophylactic treatment for tooth decay," Morris said, adding that the hospital has come up with no evidence to support its claim.

Jeannette Edell, Mrs. London's other attorney, said that if the judge rules in her favor the case will go to a jury to determine damages.

Establishing damages will not be easy, Edell said, noting that most

men in this country are circumcised, making it "hard to say the male has been deformed."

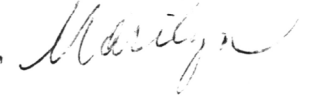
There have been awards given for unauthorized circumcisions and those may provide some basis for damages in this case, she added.

If McGuire rules in favor of the hospital, the case will be dismissed, but Edell said such a ruling would be appealed.

Greetings,

We haven't received the documents from the court yet--having learned of the decision only from the article below. Richard Morris will be working on the appeal once he has the actual legal papers and it will be filed as soon as possible. We'll keep you posted. Certainly, this is a disappointment, but not unexpected...merely another round. It would have taken a courageous judge to rule in our favor, even if he had understood the issue.

Sincerely,



San Francisco Chronicle

Tuesday, June 11, 1985

## Marin Judge Kills Suit Over Circumcision

A Marin County judge dismissed yesterday a San Rafael mother's lawsuit that claimed a routine circumcision performed on her infant son amounted to torture.

Trudie London — the wife of a Kaiser Foundation Hospital physician — asserted that the operation at Kaiser on 6-day-old Adam resulted in "torture, mutilation and physical distortion."

In dismissing the lawsuit, Superior Court Judge E. Warren McGuire noted that the mother had signed Kaiser's standard consent form authorizing the operation, which was performed without complications.

In his written decision upholding Kaiser's motion for dismissal, the judge said:

"Considering the traditional, cultural and religious history of circumcision as one of the most widely performed operations in human history and the constitutionally recognized right of raising children and to privacy in the realm of family life ... parents would appear to have the right to have their male child circumcised without the need for governmental intervention or permission...."



## DECLARATION OF THE FIRST INTERNATIONAL SYMPOSIUM ON CIRCUMCISION

We recognize the inherent right of all human beings to an intact body. Without religious or racial prejudice, we affirm this basic human right.

We recognize the foreskin, clitoris and labia are normal, functional body parts.

Parents and/or guardians do not have the right to consent to the surgical removal or modification of their children's normal genitalia.

Physicians and other health-care providers have a responsibility to refuse to remove or mutilate normal body parts.

The only persons who may consent to medically unnecessary procedures upon themselves are the individuals who have reached the age of consent (adulthood), and then only after being fully informed about the risks and benefits of the procedure.

We categorically state that circumcision has unrecognized victims.

In view of the serious physical and psychological consequences that we have witnessed in victims of circumcision, we hereby oppose the performance of a single additional unnecessary foreskin, clitoral, or labial amputation procedure.

We oppose any further studies which involve the performance of the circumcision procedure upon unconsenting minors. We support any further studies which involve identification of the effects of circumcision.

Physicians and other health-care providers do have a responsibility to teach hygiene and the care of normal body parts and explain their normal anatomical and physiological development and function throughout life.

We place the medical community on notice that it is being held accountable for misconstruing the scientific database available on human circumcision in the world today.

Physicians who practice routine circumcisions are violating the first maxim of medical practice, "PRIMUM NON NOCERE," "First, Do No Harm," and anyone practicing genital mutilation is violating *Article V* of the *United Nations Universal Declaration of Human Rights*:

**"NO ONE SHALL BE SUBJECTED TO TORTURE OR TO CRUEL, INHUMAN OR DEGRADING TREATMENT . . ."**

Adopted by the General Assembly  
*First International Symposium on Circumcision*  
March 1-3, 1989, Anaheim, California

## Circumcision Nightmare



June 25, 1989

Dear Jim:

It's so hard for me to put my thoughts down, just tell your readers the truth. Our son will grow to be a man in a wheelchair, he is blind, he may never speak, he may never say "Mommy, Daddy," or "I love you."

Sincerely,  
Parents of "John Doe"

In a lawsuit filed in the Superior Court for the State of Alaska, August 28, 1987, parents claim that circumcision constitutes an assault and battery upon their son's body. Allegedly, the baby's wound became infected by bacteria while he was in the hospital. He was returned to the hospital for treatment of the acute infection, developed toxic shock, which led to seizures, and was improperly treated. By virtue of the medical negligence and delay in proper treatment, the suit claims the baby sustained profound brain damage, retardation, palsy, lack of brain growth, damage to his vision and other related damages. To add to the horror of the story, the boy was born with a condition that requires circumcision **not** be done. The parents say the boy would not have been circumcised had they been told that the surgery is not necessary, causes pain, and has risks.

From: *NOCIRC NEWSLETTER*, Fall 1988  
Vol. 3, No. 1, page 2

1996

[http://www.cirp.org/news/1996.06.07\\_FargoForum/](http://www.cirp.org/news/1996.06.07_FargoForum/)

## **THE FORUM, Fargo, North Dakota, Friday, 7 June 1996.**

### **Suit claims N.D. genital mutilation law biased**

By Patrick Springer

The Forum [Fargo, ND--Friday June 7th, 1996]

[SideBar] {What's at issue?

The lawsuit argues females are solely protected "without any rational basis for this gender discrimination." Opponents of circumcision equate it with female genital mutilation.}

When Kevin and Donna Fishbeck had a son last year they faced a decision parents of male infants routinely confront in America: whether doctors should circumcise their newborn.

The couple from Mandan, N.D., were divided. Kevin wanted Jonathan to be circumcised; Donna did not. Their physician followed Kevin's wishes.

Now Donna and her infant son are among a group of plaintiffs challenging North Dakota's law prohibiting female genital mutilation and arguing male children should be granted the same legal protection from routine circumcision .

A lawsuit will be filed today in U.S. District Court in Fargo asking that the North Dakota Female Genital Mutilation Law, passed last year, be declared unconstitutional.

The lawsuit is believed to be the first of its kind in the nation and is expected to draw national and international attention, while providing a legal forum in which the practice can be debated.

"Our ~~position~~ is that the medical community should not be doing routine surgery on otherwise healthy genital tissue without medical indication, says [Zenas Baer](#), a lawyer from Hawley, Minn., who represents the plaintiffs.

Removal of the male's foreskin -- an age-old practice common in America but rare in most western, industrialized countries -- has come under increasing attack in recent years by opponents who argue there is no medical basis for the procedure.

The long-standing controversy surrounding male circumcision has been given added attention recently with the spate of new laws protecting females from genital mutilation. North Dakota was the first state to outlaw female mutilation; Minnesota passed a similar law and last month the U.S. Senate acted.

Opponents of routine circumcision say male circumcision is equivalent to female mutilation with cultural tradition being the only difference. Most Americans regard female genital mutilation as barbaric, while most give little thought to [male] circumcision.

"The reason is because we are immune to our own cultural traditions," says Jody McLaughlin, an active circumcision opponent from Minot and a plaintiff in the lawsuit. "The Europeans say that we're barbarians for doing this."

Figures indicate 60 percent of male newborns are circumcised in the United States, or more than 1.25 million annually, at a cost of \$250 million, according to one estimate. As recently as 1980, about 90 percent had the procedure. The lawsuit estimates the incidence of circumcision in North Dakota at 80 percent to 90 percent.

Jewish and Islamic males around the world are circumcised, but the practice is uncommon in most western countries: 20 percent in Canada, 15 percent in Australia, less than 1 percent in Denmark, according to the lawsuit.

Routine circumcision gained prominence in the United States in the late 1800s to curb masturbation, and was credited with helping to prevent numerous illnesses, including mental illness and tuberculosis.

Proponents today argue the practice helps prevent penile cancer, urinary tract infections and various sexually transmitted diseases. Both sides cite contradictory medical studies, and the pros and cons are debated among medical professionals. The [North Dakota Medical Association](#) has not taken a position on circumcision.

The lawsuit argues routine circumcision is done for cultural, not medical, reasons. "Not only is it not necessary, it is harmfully McLaughlin says. "It would be like someone telling you, you really don't need the tip of your tongue. You don't need the taste buds."

During a circumcision, 30 percent to 50 percent or more of the sensitive foreskin is removed, diminishing sensation in mature males. Female genital mutilation is performed in some cultures to promote chastity of young women and to discourage married women from straying from their husbands.

"The fundamental reason for this is to diminish sexuality, "says plaintiff Duane Voskuil of Bismarck, who equates male circumcision with female genital mutilation. "It's a controlling thing [when done to females]. It's the same kind of reason for males."

McLaughlin says: "Physicians say they're doing this because parents request it. The parents say they do it because the physicians recommend it. If anybody asks the babies, they say no by screaming."

The North Dakota law makes it a felony to "knowingly separate or surgically alter normal, healthy, functioning genital tissue of a female minor."

McLaughlin, who pushed for the law and testified in its support, originally sought a bill that was gender neutral, protecting male and female children from genital mutilation. The bill was rewritten to exclude male circumcision in order to overcome widespread opposition.

By protecting only females, the law violates the Fourteenth amendment's equal protection clause, the plaintiffs contend They argue it also violates the Fifth Amendment, because it allows for the permanent injury of a minor male without due process.

The lawsuit does not seek to outlaw circumcision for adult males. Baer says a court likely would grant exemptions for Jews and Muslims, whose religious practices are protected under the First Amendment.

If successful the lawsuit might prompt legislation requiring a legal guardian to look out for the interests of the child if his parents want the infant to be circumcised, Baer says.

"This raises significant human rights issues he says. "Each individual child is [legally] considered to be a human being that is to be free of unnecessary punishment, the right to life, liberty and the pursuit of happiness."

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2000

## William Stowell (Successful Settlement)

The screenshot shows a web browser window displaying an ABC News article. The browser's address bar shows the URL [abcnews.go.com/GMA/story?id=127183](http://abcnews.go.com/GMA/story?id=127183). The page features a blue navigation bar with the ABC News logo and menu items like 'U.S.', 'World', 'Politics', 'Lifestyle', 'Entertainment', and 'Health'. The main article title is 'Man Sues For Loss of Foreskin', dated March 12, 2017. The article text discusses William Stowell's lawsuit against a hospital for circumcision. A sidebar on the right contains a list of related news items, including 'Judge Issues Nationwide Restraining Order on Trump Immigration Action' and 'Trump Administration Announces New Sanctions on Iran'. The Windows taskbar is visible on the left side of the browser window.

### Man Sues For Loss of Foreskin

By ABC NEWS · NEW YORK, March 12

1K SHARES

Given the choice, William Stowell says he would have kept his foreskin.

Since the choice was made for him, he is suing the hospital where he was born and circumcised for depriving him of "the pleasure of natural, normal sexual intercourse."

Stowell says his sex life would be much better if he had been allowed to keep his foreskin — the loose fold of skin that covers the tip of the penis. But his mother denied that to him when she signed a circumcision consent form in the maternity ward where she gave birth; she says now that it was a mistake.

Stowell's attorney, David Llwellyn, has considerable experience with men who lament the loss of their foreskins. He has filed similar lawsuits in the past, winning as much as \$65,000 in one settlement.

In Stowell's case, Llwellyn will argue that the plaintiff's mother was under the influence of post-Caesarian painkillers when she agreed to the 10-minute surgical procedure at Good Samaritan Hospital in West Islip, N.Y.

Study Favors Foreskins

Sixty percent of American men in the U.S. have been circumcised.

Man Sues For Loss of Foreskin

- Judge Issues Nationwide Restraining Order on Trump Immigration Action
- Trump Administration Announces New Sanctions on Iran
- QB Michael Vick Tells ESPN He Is Retiring
- Army Corps of Engineers Closing Dakota Pipeline Protest Camp

<http://abcnews.go.com/GMA/story?id=127183>

<http://www.cirp.org/news/penthouse11-01-01/>

<http://www.cirp.org/news/mndnewswire04-29-03/>

<https://nypost.com/2000/12/23/serviceman-sues-over-docs-unkind-cut-at-birth/>

[https://en.intactiwiki.org/wiki/William\\_Stowell](https://en.intactiwiki.org/wiki/William_Stowell)

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**2003**

<https://www.nytimes.com/2003/01/23/us/opponents-of-circumcision-use-the-legal-system-and-legislatures-to-combat-it.html> See also this excellent summary: <https://www.circumstitions.com/flatt.html>

## **Opponents of Circumcision Use the Legal System and Legislatures to Combat It (NYT – 2003)**

By [Adam Liptak](#)

Jan. 23, 2003

Josiah Flatt, like about 60 percent of other newborn American boys, was circumcised soon after he was born here, in the spring of 1997. Two years later, his parents sued the doctor and the hospital.

They did not contend that the circumcision was botched or deny that Josiah's mother, Anita Flatt, had consented to the procedure in writing. They said, instead, that the doctor had failed to tell them enough about the pain, complications and consequences of circumcision, removing the foreskin of the penis.

The suit will be heard by a jury next month. In declining to dismiss the case here before trial, Judge Cynthia Rothe-Seeger acknowledged that the case was unusual in that nothing "went 'wrong' during the procedure." The main harm Josiah seeks compensation for, Judge Rothe-Seeger noted, is "diminished sexual sensation injury."

The suit is but one effort by a small but energetic group of loosely affiliated advocates and lawyers to use the legal system to combat the practice -- most American newborn boys undergo the operation when they are days old -- which they liken to genital cutting in girls.

The advocates have been active in state legislatures, too. Ten states no longer allow Medicaid to pay for circumcision.

"They have reached the ears of legislators and insurance companies," Dr. Thomas Wiswell, a professor of pediatrics at the State University of New York at Stony Brook and a proponent of the procedure, said about the opponents. "They are far more vocal than proponents of circumcision."

J. Steven Svoboda, director of Attorneys for the Rights of the Child, a group devoted to the issue, contends that circumcision is wrong as a matter of law, medicine and philosophy. Children of both sexes, Mr. Svoboda said, should be entitled to "bodily integrity."

Josiah Flatt's case appears to be the first to go to trial based on the theory that the absence of an exhaustive medical briefing about the risks and benefits of circumcision is tantamount to a lack of informed consent.

Among the possible complications in the operation are excess bleeding, infection and ulceration and occasional permanent damage to the penis.

"This could be a very important test case," said Geoffrey P. Miller, a professor of law at New York University who has written about legal and cultural issues of circumcision.

Josiah's father, James, died in 2001 in an automobile accident, but the boy's mother, Anita, 33, decided to proceed with the suit. The family's lawyer, Zenas Baer, said no sensible parent would willingly subject a child to circumcision knowing what it entailed.

"The practice is absolutely barbaric," Mr. Baer said.

The doctor who performed the circumcision, Sunita Kantak, and representatives of the hospital, the MeritCare Medical Center, issued this statement:

"Anita Flatt was given information about circumcision, and she asked to have her son circumcised. The circumcision was done because she requested it."

A hospital spokeswoman, Carrie Johnson, declined to elaborate.

In court papers, the hospital said the suit was part of a crusade.

"This lawsuit is an attempt to abolish circumcision in North Dakota of newborn males with healthy foreskin," the hospital's lawyers wrote. "Plaintiffs want to change public policy so that only a competent male once he reaches adulthood, and not his parent, should be able to consent to circumcision."

Only 3 in 1,000 men not circumcised at birth choose to have the procedure, experts say.

David J. Llewellyn, a Georgia lawyer who represents plaintiffs in circumcision malpractice cases, said the hospital was correct in identifying what would be the next step for opponents of the practice.

"The question of whether or not a parent can consent at all will come rather quickly," Mr. Llewellyn said.

Judge Rothe-Seeger, who will preside over the trial in Cass County District Court, seemed to agree in a pretrial decision. She suggested that Josiah could sue his parents some day if he could show that they failed to act in his best interests.

About 1.2 million newborns are circumcised in the United States every year, at a cost of \$150 million to \$270 million, the American Academy of Pediatrics says.

Circumcision for other than religious reasons is a relatively recent phenomenon in the United States. It began in the late 19th century and peaked in the 1960's at 90 percent of newborns. Circumcision rates vary widely. They are highest in the Midwest, about 80 percent, and lowest in the West, under 40 percent.

The procedure is not common elsewhere. In Canada, the rate is 17 percent and in Britain 5 percent. Elsewhere in Europe, in South America and in non-Muslim Asia, the procedure is rare.

There is powerful evidence, Dr. Wiswell said, that circumcision helps prevent urinary tract infections, penile cancer and sexually transmitted diseases, including H.I.V.

The American Academy of Pediatrics, in a policy statement in 1999, said that the risks of infection and cancer were low even without the procedure and that evidence on sexually transmitted diseases was "complex and conflicting."

The academy noted that the procedure could involve complications, as could any surgery. If performed without adequate anesthesia, it is very painful.

The academy concluded that "existing scientific evidence demonstrates potential medical benefits of newborn male circumcision."

"However," it added, "these data are not sufficient to recommend routine neonatal circumcision."

It added that it was "legitimate for parents to take into account cultural, religious and ethnic traditions, in addition to the medical factors, when making this decision."

Judge Rothe-Seeger wrote, "One of the earliest purposes of circumcision was to limit sexual intercourse and to curb sexual excitement."

It has also been prescribed through the years as a remedy for alcoholism, epilepsy, asthma, gout, hysteria, malnutrition, night terrors, clubfoot, eczema and promiscuity.

"Circumcision is a medical procedure in search of something to cure," said Mr. Baer, the Flatts' lawyer.

In the last year, Arizona, Missouri, Montana and North Carolina joined six other states -- California, Mississippi, Nevada, North Dakota, Oregon and Washington -- that do not offer Medicaid reimbursement for circumcision for any reason, including religious beliefs.

David L. Gollaher, who wrote "Circumcision: A History of the World's Most Controversial Surgery" (Basic Books, 2000), said that trend would "be the bullet that kills this thing."

"If people have to pony up a couple of hundred bucks, at the margin, they won't do it," Mr. Gollaher said. "And insurance coverage signals a certain attitude about medical appropriateness or necessity."

There is little legal scholarship in the area. That is partly attributable, Professor Miller said, to efforts intended to prevent genital cutting in girls, a practice prevalent in Africa that reduces sexual pleasure.

"It's all tied up in the politics of feminism," he said. "Some feminists take offense at the idea that there is any comparison between a highly damaging assault committed by a patriarchal society and male circumcision. It's a dangerous topic to get into."

In an interview, Ms. Flatt, who is a lawyer, said she was told next to nothing about circumcision before she consented to it. Asked what she wished she had been told, she grew animated and her voice rose.

"It's healthy tissue," she said of the foreskin. "It's useful. There's bleeding risk. There's pain. There's infection risk. There's death risk. There's no medical benefit.

"You'd better give me a very good reason why, and it's got to be more than he'll look like dad."

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**2004**

[https://bismarcktribune.com/news/state-and-regional/high-court-hears-circumcision-case/article\\_d47b169b-bf29-5278-9b2c-1141763c8cb8.html](https://bismarcktribune.com/news/state-and-regional/high-court-hears-circumcision-case/article_d47b169b-bf29-5278-9b2c-1141763c8cb8.html)

## **High court hears circumcision case (ND-2004)**

- the Forum (Fargo, ND)/Associated Press
- May 11, 2004

The parents of a newborn boy were not adequately informed of the risks of having their child circumcised before the procedure was done, their lawyer argued in the North Dakota Supreme Court.

Zenas Baer, a Hawley, Minn., attorney who is representing the boy, argued Wednesday that male circumcision is unnecessary in almost any case.

The youngster, who is now 7, was "surgically diminished without medical diagnosis, not for the purpose of curing a disease, and it was not for medical treatment," Baer said. "The integrity of genital tissue is a constitutionally protected right."

Baer is representing the boy, Josiah Flatt, who was born in March 1997, and the child's mother, Anita Flatt of Hawley. Josiah's father, James, died in a traffic accident three years ago.

Anita Flatt signed a consent form before the circumcision was performed. Angela Lord, an attorney for Fargo's MeritCare Hospital and Dr. Sunita Kantak, who circumcised the child, said Flatt was told about circumcision risks that may have affected the child's health.

The dispute went to trial in February 2003. East Central District Judge Cynthia Rothe-Seeger dismissed the hospital from the case before it went to the jury. After less than two hours of deliberations, the jury concluded Kantak was not negligent, and Rothe-Seeger later ordered Flatt to pay \$58,506 in defense costs.

In court filings, Baer is asking the Supreme Court to order a new trial. Anita Flatt does not argue the circumcision was botched, but says she should have been fully briefed about the procedure's benefits and consequences.

Circumcision involves removing sensitive skin from the penis. The American Academy of Pediatrics says most complications from the procedure, such as bleeding, are minor, and that circumcision reduces the risk of urinary tract infections.

However, the procedure's benefits do not justify routine circumcisions of newborns, the physicians' group said in a policy statement.

During Supreme Court arguments Wednesday, Baer and Lord argued about whether Anita Flatt had been given enough information about circumcision risks before she signed the consent form.

Baer argued that the parents should have been informed about any risk, no matter how remote. Lord contended that doctors should only be required to disclose "material risks," or those more likely to affect a patient's health.

Justice Dale Sandstrom wondered if a doctor should have to disclose any risk that could cause a reasonable patient to reconsider. Chief Justice Gerald VandeWalle suggested that the listing of potential risks should be expansive.

"Who knows what will cause an individual to change their mind," VandeWalle said.

Lord replied that the disclosure standard "is one of reasonableness and prudence, and it's not reasonable that every conceivable risk of any procedure could be told to every patient."

Baer said two doctors testifying on the Flatts' behalf were prevented from giving important testimony, and that Rothe-Seeger erroneously excluded other evidence, including a videotape that depicted circumcision procedures and instruments used in performing circumcisions.

Lord said experts for both sides had been allowed to testify in detail about the risks.

"Our experts didn't testify about anything more than their experts were allowed to testify," she said. "There were several hours of testimony where the (Flatts') experts addressed what the risks of circumcision procedure are."

The Flatts' lawsuit had also objected to a North Dakota law that forbids female genital mutilation, arguing that it did not give equal legal protection to both sexes.

Rothe-Seeger dismissed the claim before trial, saying the Flatts did not have legal standing to assert it. Douglas Bahr, an assistant attorney general, asked the justices Wednesday to affirm Rothe-Seeger's decision.

"Flatt was not forced to be circumcised, or prohibited from being circumcised. The medical decision was left to him and his parents," Bahr wrote in a court filing. "Flatt's surgery is traceable to his parents' consent for the procedure."

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**2005**

## **The cruelest cut? Circumcision opponents lose another round**

[Bismarck Tribune, May 21, 2005]

- JAMES WARDEN, Associated Press Writer
- May 21, 2005

Mervin Gajewski remembers hearing an infant's wails while he was having blood tests done in a Watford City hospital a few years ago.

"Somebody better help that baby. He sounds hurt," the 78-year-old Alexander man says he told a nurse. "You would be, too, if you were being circumcised," she replied.

When a friend's daughter chose to circumcise her son last year, Gajewski decided to sue, in an attempt to get North Dakota courts to ban circumcision.

A judge dismissed Gajewski's case last week, but he said he intends to continue, perhaps with an appeal to the North Dakota Supreme Court.

"I don't intend to be done with this case one way or another," he said.

Circumcision involves the removal of sensitive foreskin from the penis. The procedure is usually done on infants.



Nationally, about 56 percent of male infants are circumcised, according to a 2003 survey compiled by the federal Centers for Disease Control and Prevention.

The Midwestern region, which includes North Dakota, had a 78 percent circumcision rate, which is the highest in the country, said CDC spokesman Bill Crews.

In a March 1999 policy statement, the American Academy of Pediatrics said there are "potential medical benefits" to circumcision, including a lessening of the risk of getting urinary tract infections.

However, existing data "are not sufficient to recommend routine ... circumcision" of newborns, the statement says.

Gajewski says the reasons justifying the procedure are speculative, using the assumption that "somewhere down the line, it's going to be good for you."

"Surgery isn't done that way," he said.

Gajewski said he believes male circumcision is tantamount to genital mutilation. The Legislature made female genital mutilation a felony crime in 1995. Gajewski's lawsuit argued that courts should extend the ban to boys.

Northwest District Judge Gerald Rustad dismissed the case last week, saying Gajewski had no standing to bring the case.

Gajewski was suing on behalf of North Dakota boys younger than 18, but he is 78 years old, and does not represent any young boys, the judge said.

"Although the topic is one which could result in interesting information and analysis in the proper forum, this court has not been presented any precedent which would persuade it that (Gajewski) has standing to bring the action," Rustad wrote in his dismissal order.

North Dakota's state and federal courts have taken up the issue previously.

Last September, the North Dakota Supreme Court ruled in favor of a Fargo doctor who had circumcised an infant in March 1997.

The boy's mother argued she was not told in detail about the procedure's benefits and potential risks.

The woman, Anita Flatt of Hawley, Minn., also had argued that North Dakota's law barring female genital mutilation did not offer equal protection to males. The Supreme Court said Flatt did not have standing to make that argument.

In June 1996, a Bismarck woman, Donna Fishbeck, made similar equal-protection arguments in a federal lawsuit against the state. Fishbeck's infant son had been circumcised with the consent of the boy's father, even though she objected to the procedure.

U.S. District Judge Patrick Conmy dismissed the case, ruling that Fishbeck did not have legal standing to bring the lawsuit. A three-judge panel of the 8th U.S. Circuit Court of Appeals upheld Conmy's ruling in June 1997.

"Even if we were to declare the North Dakota statute invalid because it is underinclusive, and even if ... we could enter some kind of decree that would criminalize male circumcision, there is no assurance at all that the

injury claimed by Fishbeck, either on her own behalf or on behalf of her son, would be redressed," the appeals court's decision says.

Circumcision opponents say the foreskin protects the penis and can enhance sexual pleasure. Gajewski, who is not circumcised, said those benefits are being taken away without reason.

"It's unnecessary and detrimental to a male," he said. "You destroy too much potential."

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## 2005

[https://www.cirp.org/news/2005/2005-05-22\\_theforum.php](https://www.cirp.org/news/2005/2005-05-22_theforum.php)

THE FORUM, Fargo, North Dakota, Sunday, May 22, 2005.

### **Influenced by infant's cries, man wants ban on circumcision**

By JAMES WARDEN Associated Press Writer

BISMARCK, N.D.

Mervin Gajewski remembers hearing an infant's wails while he was having blood tests done in a Watford City hospital a few years ago.

"Somebody better help that baby. He sounds hurt," the 78-year-old Alexander man says he told a nurse. "You would be, too, if you were being circumcised," she replied.

When a friend's daughter chose to circumcise her son last year, Gajewski decided to sue, in an attempt to get North Dakota courts to ban circumcision. A judge dismissed Gajewski's case last week, but he said he intends to continue, perhaps with an appeal to the [North Dakota Supreme Court](#).

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## 2009

Oregon: Boldt and Boldt, 210 Or App 368, 150 P3d 1115 (2006).

<https://law.justia.com/cases/oregon/supreme-court/2008/s054714.html>

Full History (below): [https://en.intactiwiki.org/wiki/Boldt\\_v.\\_Boldt](https://en.intactiwiki.org/wiki/Boldt_v._Boldt)

**Boldt v. Boldt**, framed as a child-custody case originating in the state of Oregon, actually concerns the proposed non-therapeutic [circumcision](#) of a boy, intended to indulge his father's religious urges.

On Sunday, May 30, 2004, the mother, Russian-born Mrs. Lia Nikolaevna Boldt, learned from her son, nine-year-old Mikhail James Boldt, known as Misha/Jimmy, that the custodial father, James Harlan Boldt, was planning on having him circumcised as part of the father's plan to convert the child from the Russian Orthodox faith to the Jewish faith.<sup>[1]</sup>

## Legal proceedings

The case started in 2004 when James Boldt, a divorced father, who had custody of his nine-year-old son, decided to convert from Russian Orthodox to [Judaism](#) and wanted to have his son circumcised in accordance with the [Abrahamic covenant](#). The son, however, had not converted and did not want to be circumcised. He was supported by his mother in his desire for [genital integrity](#).<sup>[2]</sup>

His mother, Mrs. Lia Boldt, represented by Clayton C. Patrick, filed suit in the [Jackson County Circuit Court](#) for an injunction to prohibit the circumcision and for change of custody, which was denied. (No. 98-2318-D(3)) The court said:

I am still of the opinion that the decision of whether or not a child has elective surgery, which this appears to be, is a call that should be made and is reserved to the custodial parent.... I don't believe that there is any reason to have a hearing at this point on a motion for change of custody until and if – and I'm certainly not even saying it would be appropriate later. I don't see that this is grounds for an emergency change of custody. And as I said, I firmly believe that this is one of the very types of issues, because of the controversy surrounding it, the potential for disagreement, that are given to the custodial parent.

The court did not think that the father's desire to cut off part of his son's [penis](#) was grounds for a change of custody, however the court granted the injunction against the proposed circumcision. Lia Boldt then filed an appeal of the circuit court's decision with the [Oregon Court of Appeals](#) (OCA).<sup>[2]</sup> The OCA rejected Lia Boldt's appeal.

She then appealed to the [Oregon Supreme Court](#) (OSC) in 2007. It was at this point that [Doctors Opposing Circumcision \(D.O.C.\)](#) entered the case. [Doctors Opposing Circumcision \(D.O.C.\)](#) realized that the OSC needed information about circumcision and about the child's rights under Constitutional and international [human rights](#) law, so it filed an *amicus curiae* brief to help the Court understand why it should accept the case. The brief stated in part:

Mikhail (Misha/Jimmy) James Boldt, (hereinafter 'Misha/Jimmy') is a minor who is legally incompetent. Nevertheless, Misha/Jimmy is a person with rights of his own. As a minor he deserves special protection under Oregon, and international law. Misha/Jimmy has an unalienable right to protection and security of his person, and the Courts of the State of Oregon have a corresponding obligation to protect his rights independent from and even despite the wishes of a parent who might endanger the child unnecessarily.<sup>[3]</sup>

After the OSC granted review, DOC submitted a second *amicus curiae* brief to address the merits of the case. That second brief, in summation, stated:

There is no basis on which the father can hope to prevail in the face of overwhelming protections offered to Misha/Jimmy by the Washington, Oregon, and U.S. Constitutions, and moreover, in face of the protections offered by international treaties, in particular, the [ICCPR](#). The Supreme Court has stated that "a child, merely on account of his minority, is not beyond the protection of the Constitution." There are no material facts at dispute that require further hearings on the child's fundamental rights.<sup>[4]</sup>

When the OSC eventually ruled in an unanimous decision in January 2008, it reversed the decision of the trial court, reversed the decision of the OCA, and remanded the case to the Jackson County Circuit Court with instructions to determine the boy's wishes regarding circumcision. The opinion stated:

However, in this case, mother has averred in her affidavit that M objects to the circumcision. In our view, at age 12, M's attitude regarding circumcision, though not conclusive of the custody issue presented here, is a fact necessary to the determination of whether mother has asserted a colorable claim of a change of circumstances sufficient to warrant a hearing concerning whether to change custody. That is so because forcing M at age 12 to undergo the circumcision against his will could seriously affect the relationship between M and father, and could have a pronounced effect on father's capability to properly care for M. ... Thus, if mother's assertions are verified the trial court would be entitled to reconsider custody. As to that inquiry, however, we think that no decision should be made without some assessment of M's true state of mind. That conclusion dictates the outcome here.

We remand the case to the trial court with instructions to resolve the factual issue whether M agrees or objects to the circumcision. In order to resolve that question, the trial court may choose to determine M's state of mind utilizing means available to it under the relevant provisions of ORS 107.425. If the trial court finds that M agrees to be circumcised, the court shall enter an order denying mother's motions. If, however, the trial court finds that M opposes the circumcision, it must then determine whether M's opposition to the circumcision will affect father's ability to properly care for M. And, if necessary, the trial court then can determine whether it is in M's best interests to retain the existing custody arrangement, whether other conditions should be imposed on father's continued custody of M, or change custody from father to mother.<sup>[5]</sup>

The father, James Boldt, then appealed the decision of the OSC to the [United States Supreme Court](#), however a writ of certiorari was denied.<sup>[6]</sup>

The case on remand was now in the Jackson County Circuit Court again. Judge Lisa Greif held a hearing on 22 April 2009. Misha/Jimmy testified in chambers "that he did NOT want to be circumcised, he did NOT want to convert to Judaism, was afraid of his father and wanted to live with his mother."<sup>[2] [7]</sup>

[John Geisheker](#) commented:

"Misha went home with his father the day of the final appearance before Judge Greif on April 22. No one knows what transpired later between the father and the son who had bravely defied him -at age 14- in the Judge's chambers, and before the many attendees at the hearing."

The Court then issued a verbal order from the bench that the boy was not to be circumcised. The court then followed that with a written order on 2 June 2009, in which the court found that a substantial change of circumstances had occurred and ordered an investigation by an independent child custody evaluator for a future evidentiary hearing.<sup>[7]</sup>

In September 2009, facing a custody hearing he was likely to lose, the father voluntarily agreed to give up physical custody of Misha (now 14-years-old) to his mother with court approval. The stipulated custody order provides:

1. Mother and Father shall have joint legal custody of the minor child.
2. The minor child shall have his primary residence with Mother according to the joint parenting plan attached herein as Exhibit 1.<sup>[8]</sup>

The child's proposed circumcision, at one point only hours away, remains judicially prohibited so the proposed circumcision was never carried out.<sup>[9]</sup>

Thus ended in victory a five-year legal battle to save a boy's [foreskin](#). The boy's legal, constitutional, and [human rights](#) prevailed over the father's claimed religious right to excise a [functional body part](#) from his son's body. The father's supporters, the American Jewish Congress, the American Jewish Committee, the Anti-Defamation League, and the Union of Orthodox Jewish Congregations of America were also on the losing side.

[Doctors Opposing Circumcision \(D.O.C.\)](#) filed two *amicus curiae* briefs in this case and was successful in protecting the boy's [foreskin](#) from [circumcision](#).<sup>[3][4]</sup>

The case also set a legal precedent regarding the rights of the male child to judicial protection of his person.

## **[Commentary on Boldt v. Boldt](#)**

There has been a fair amount of commentary on this case.

Sherry F. Colb (2007) wrote:

Though it is, in some respects, very unusual, this case nonetheless highlights a somewhat hidden and more widespread assumption embedded in our laws - that if a couple's mainstream religion requires them to inflict harm upon their child, then the law will not interfere with that prerogative. ... In the *Boldt* case, the boy at issue is not a newborn but an adolescent, a 12-year-old, who not only has the self-evident capacity to feel pain but who could also offer his own opinion on the question of whether he should have his foreskin amputated. So far, we do not know from press accounts what the boy thinks about his father's plans, although his mother claims that he is opposed yet reluctant to say so. Even assuming, however, that the 12-year-old is neutral on the question, the notion of subjecting a child his age to such a surgery would likely seem barbaric to many people. There is, after all, no medical need to circumcise the boy. His foreskin is, so far as we know, not plagued with any disease or other malignancy. No doctor has offered the medical opinion that the family really ought to circumcise the boy. The only reason to do it is that his father has found religion and wishes to bring his son into the faith. ... It is when parents disagree with each other and ask the courts to step in that we are uniquely able to consider some of the harm to which people expose their offspring. The *Boldt* case thus may, in this way, help us focus on what is otherwise "routine" in parenting and perhaps become more sensitive to the sorts of harm that we might otherwise continue to take for granted.<sup>[10]</sup>

The 2009 NOCIRC Annual Newsletter commented:

The US Supreme Court in October turned down a father's petition in *Boldt v Boldt*. The boy's father, who converted to [Judaism](#) and wants his son circumcised, was unhappy with the decision of the Oregon Supreme Court to determine the wishes of the child, and appealed to the US Supreme Court, alleging the child's wishes are irrelevant. Fortunately, the right of the boy was paramount in the court's decision.<sup>[11]</sup>

Douglas Diekema (2009), a pediatric medical ethicist, commented:

The fact that Jimmy's father had sole custody does not eliminate the mother's ethical right and obligation to look after the welfare of her son. While the mother may not have legal decision-making authority, that legal determination does not appear to be related either to a lack of interest in her son's welfare or an inability to carry out that role. Jimmy is her son, and she has an interest in seeing his welfare protected. Whether or not she has legal rights, I would be very reluctant to perform an elective procedure for cultural or religious reasons without the permission of both parents and the unambiguous assent of Jimmy himself. Neither appears to be present in the case as it presented to the courts.<sup>[12]</sup>

John Geisheker (2010) observed:

The child's testimony showed courage and took a risk that he would be ignored, as children too often are. Because it would have been far easier for Misha to accede to his custodial father's wishes than to defy him in public, perhaps it can be assumed his testimony was truthful. Indeed, the child returned home with his father that day.

None of the amicus groups that supported the father's legal position all the way to the U.S. Supreme Court — and back to Oregon — appeared at the hearing on 22 April 2009 to hear the child's actual "voice" (nor did they express any written sympathy for the plight of the child throughout the proceedings.

...

In closing: children who are welcomed, gently, into their birth communities have been given the gift of Joel Feinberg's "open future." They may embrace their community or they may eventually drift away; there is no way to tell, in advance, what they will choose. But, importantly, their options are left open, and none of their



body parts will have been surgically modified or removed — without their consent — prior to the moment when we will be able to hear the voices of the adults they will become.<sup>[9]</sup>

J. Steven Svoboda (2010) commented:

Geisheker notes that the Court mentioned only the child's right to be heard, but did not recognize its paramount duty to protect him. Misha's case is a sad commentary upon American life and constitutional principles. *Boldt v. Boldt* eloquently demonstrates that in the US, at least, the law to date has not been able to effectively grapple with such a heavily contextual and cultural practice as male circumcision.

To date, with one known exception, all awards and settlements have occurred in cases involving either a “botched” procedure or a lack of [informed consent](#). At least three times, courts have avoided squarely addressing the legality of male circumcision by diverting the discussion into such peripheral, procedural issues as standing. Judicial views of standing are politically and culturally shaped in response to social mandates. Although MGC is currently illegal under existing laws and [human rights](#) treaties, if properly and objectively interpreted free of cultural bias, American cultural blindness has prevented recognition of this. Elsewhere in the world, Tasmania's Law Review Commission recently released a lengthy issues paper questioning the legality of male circumcision. Sweden has regulated circumcision and the practice was recently made illegal in South Africa, with religious and medical exceptions included that threaten to swallow the rule. While the practice is not otherwise explicitly prohibited anywhere in the world, it is of course illegal worldwide under a broad range of prohibitions imposed by statute, common or civil law, [human rights](#) treaties, and customary law.<sup>[2]</sup>

British law professors Marie Fox and Michael Thompson examine *Boldt v. Boldt* in comparison with British legal decisions:

On two occasions the Court of Appeal in England has addressed the legality of non-therapeutic circumcision performed on a minor unable to provide consent. Both cases involved disputes in post-separation families where one parent sought a male child's circumcision against the wishes of the other parent. In January 2008, the Supreme Court of Oregon was faced with a similar factual situation in the case of *Boldt v Boldt*. However, the boy at the center of the dispute in *Boldt* was significantly older than in the English cases. The Supreme Court therefore concluded that the testimony of the boy himself, who is now 13, was required and remanded the case for a re-hearing in order that the trial court could specifically address his wishes with regard to circumcision. In this paper, we offer a critique of the Oregon Court's somewhat elliptical reasoning in the *Boldt* case. We argue that cases involving male circumcision of older children raise important ethico-legal issues, which the *Boldt* judgments gloss over, and which English courts have yet to confront in the context of circumcision.

Consequently, our aim in this paper is to use *Boldt* as a lens through which to explore and inform UK practice. We argue that this case fits into a characteristic pattern according to which judges, law makers, and professional bodies shy away from confronting key ethico-legal questions raised by the tolerance in Anglo-American society of non-therapeutic genital cutting of male infants. In raising explicitly for the first time the position of older minors, the factual situation in *Boldt* affords us an opportunity to begin to address the limits of parents' rights to determine the future religious identity of their children. In seeking to analyze how *Boldt* and the questions to which it gives rise might inform UK law we focus on three issues. The first is the right of the boy at the center of the dispute to determine which medical treatments or interventions to his body are permissible. The father's subsequent petitions for reconsideration and for certiorari mean that, when the boy's testimony is finally heard by a court, it is likely that he will be 14 or 15 years of age. We aim to assess how a UK court might respond if faced with the task of determining whether a minor could choose circumcision for himself in such a scenario. A subsidiary question here is the extent to which circumcision procedures are appropriately categorized as “medical treatment.” Finally, we offer some more tentative thoughts on what limits may legitimately be placed on [parental rights](#) to make choices for their children when their choices are motivated by religious belief.<sup>[13]</sup>

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**2011**

<https://www.findlaw.com/legalblogs/personal-injury/botched-circumcision-family-to-get-46m-award/>

## Botched Circumcision: Family to Get \$4.6M Award (2011)

By [Stephanie Rabiner, Esq.](#) on July 20, 2011 12:46 PM

Los Angeles Superior Court Judge Rex Heeseman has agreed to approve a \$4.6 million settlement reached between former Los Angeleno Melanie Hall and Miltex Inc., the medical device company she feels is responsible for her son's botched circumcision.

The lawsuit alleged that a defective circumcision clamp led her son's doctor to remove 85% of the tip of his penis as opposed to just the foreskin.

He requires surgical and psychiatric care perhaps for the rest of his life.

While a botched circumcision would ordinarily be filed as a medical malpractice suit, *City News Service* reports that attorney Browne Greene decided to file a defective product lawsuit against Miltex.

The suit alleged that the [clamp was defectively designed](#), simultaneously giving little protection to and blocking the doctor's view of the head of the penis.

Greene's decision to go after Miltex is what has led to such a large settlement despite medical malpractice caps in California.

While California law allows for the recovery of economic damages, it limits non-economic damages, such as pain and suffering, to \$250,000.

These rules don't apply to product defect cases, allowing plaintiffs to recover significantly more in subjective damages.

Strategically, if possible, filing a product design defect suit is also a better option than a medical malpractice suit, as they are easier to prove.

While a plaintiff must prove that a doctor was negligent in a malpractice suit, California, like many states, imposes strict liability for design defects unless the benefits of the design outweigh its risks.

It's likely that Miltex realized that the botched circumcision could have been prevented with an easy design tweak, leading any potential jury to award significantly higher than \$4.6 million.

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**2012**

<https://www.findlaw.com/legalblogs/legally-weird/man-28-sues-over-circumcision-that-robbed-him-of-prowess/>

## **Man, 28, Sues Over Circumcision that 'Robbed' Him of 'Prowess' (SD-2012)**

By [Stephanie Rabiner, Esq.](#) on April 18, 2012 8:36 AM

Can circumcision rob you of your, uh, "sexual prowess"?

A South Dakota man thinks so, which is why he has filed a federal circumcision lawsuit against the hospital where he was born. He claims he [only recently learned of his missing foreskin](#), and that doctors misled his mother into believing the procedure was medically necessary.

It gets better. His name is Dean Cochrun. And he's asking for \$1,000 and free [reattachment surgery](#).

Cochrun, 28, is currently in prison on a kidnapping conviction, according to the Associated Press. This may explain why he had both the time to file such a strange lawsuit and why he only recently became aware that he was lacking in the foreskin department.

Unnerved by this revelation, he now claims he "was robbed of sensitivity during sexual intercourse." The circumcision lawsuit further states that he lost "the sense of security and well-being I am entitled to in my person."

This is all well and good -- and a little sad, to be honest -- but it's almost certain that a judge will toss Dean Cochrun's suit. Here's why:

1. **Consent.** Cochrun was an infant when he was snipped, which means his mother had the legal right to consent to the procedure. There's no indication that doctors lied to her.
2. **Statute of limitations.** Personal injury lawsuits can't be filed 28 years after the events in question. Sure, some states may [toll -- or pause -- the clock](#) and only restart it when the victim first learns of the injury. But it's highly unlikely Cochrun didn't know he was circumcised.
3. **Lack of jurisdiction.** Cochrun lives in South Dakota. The hospital he is suing is in South Dakota. He has filed a state law tort claim. He filed his circumcision lawsuit in federal court. Federal courts have no jurisdiction to hear his claim.

As to this third point, even if Dean Cochrun re-filed his circumcision lawsuit in state court, the first two points will still apply. His lawsuit will undoubtedly be cut short.

ALSO: <https://www.inquisitr.com/221281/man-sues-hospital-for-circumcising-him-as-a-baby/>

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2015

## Chase Hironimus: Circumcision of 4-year old and mother's battle

**Circumcision Armageddon. This poor kid.**

<https://slate.com/news-and-politics/2015/05/chase-nebus-hironimus-circumcision-battle-intactivists-form-chases-guardians.html>

**Inside the Battle Between Parents to Circumcise Their 4-Year-Old Son**

<https://www.yahoo.com/news/inside-the-battle-between-parents-to-circumcise-116493020197.html>

**Heather Hironimus Files Federal Suit To Block Son's Court-Ordered Circumcision**

[https://www.huffpost.com/entry/heather-hironimus-circumcision-lawsuit\\_n\\_7080144](https://www.huffpost.com/entry/heather-hironimus-circumcision-lawsuit_n_7080144)

**Mom Jailed Over Circumcision Dispute With Son's Father**

<https://abcnews.go.com/Health/mom-jailed-circumcision-dispute-sons-father/story?id=31127540>

**Fla. woman who fled to avoid son's circumcision still jailed**

<https://www.jacksonville.com/story/news/2015/05/15/fla-woman-who-fled-avoid-sons-circumcision-still-jailed/15663074007/>

**Hironimus Circumcision Case: Doctor Threatens to File Complaint Against Hospital**

<https://www.browardpalmbeach.com/news/hironimus-circumcision-case-doctor-threatens-to-file-complaint-against-hospital-7033048> John Trainer, MD Jacksonville, FL? (352) 294-5700 [johntrainer@ufl.edu](mailto:johntrainer@ufl.edu)

Ask him if he followed through with filing complaint per the above article.

[https://www.linkedin.com/in/johntrainermd?original\\_referer=https%3A%2F%2Fwww.startpage.com%2F](https://www.linkedin.com/in/johntrainermd?original_referer=https%3A%2F%2Fwww.startpage.com%2F)

**Mother sobs as she is 'bullied' into signing court agreement allowing her four-year-old son's circumcision after spending week in jail for kidnapping him in bid to stop surgery**

<https://www.dailymail.co.uk/news/article-3092339/Fla-mom-jailed-sons-circumcision-case-judge.html>

**Update: Federal circumcision lawsuit dropped by jailed mother**

<https://www.phillyvoice.com/heather-hironimus-circumcision--federal-court/>

**Mom signs consent for son's circumcision to get out of jail — but now faces new criminal charge**

<https://www.sun-sentinel.com/local/palm-beach/fl-circumcision-mother-court-hearing-20150522-story.html>

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**2017**

<https://www.thedickinsonpress.com/news/moorhead-lawyer-fights-two-decade-war-on-circumcision>

## **Moorhead lawyer fights two-decade war on circumcision (MN – 2017)**

MOORHEAD, Minn. -- If you listen to public radio in the Fargo-Moorhead area, you may be familiar with attorney Zenas Baer's ubiquitous ads touting a small but curious aspect of his firm's legal expertise -- "circumcision litigation."...



Attorney Zenas Baer at his home in Moorhead. Baer, who has a legal office in Hawley, Minn., has strived for years to bring awareness to the issue of infant circumcision. Dave Olson / Forum News Service

By [David Olson](#)

November 20, 2017 12:45 PM

MOORHEAD, Minn. - If you listen to public radio in the Fargo-Moorhead area, you may be familiar with attorney Zenas Baer's ubiquitous ads touting a small but curious aspect of his firm's legal expertise - "circumcision litigation."

The ads, according to Baer, do what he wants them to do: raise the consciousness of listeners about the issue of infant circumcision and "get them wondering about it."

Infant circumcision is the removal of the foreskin from the penis of a newborn male, a common practice today but one that was nearly nonexistent in the U.S. prior to about 1870, Baer said.

Around that time, a notion arose in the medical community that masturbation and the release of seminal fluid harmed the immune system and led to disease, he said.

By the same token, Baer said, it was believed removing the foreskin, a fleshy hood of tissue that covers the tip of the penis, would result in less masturbation.

Neither of those ideas enjoys widespread support today, but circumcision is entrenched in American culture, with about 56 percent of males born in the U.S. being circumcised, down from 75 to 80 percent a few decades ago, Baer said.

### Benefits and risks

The American Academy of Pediatrics is on record stating the benefits of circumcision outweigh the risks. Potential positive health benefits of circumcision often cited include easier hygiene, decreased risk of urinary tract infections and penile cancer, and decreased risk of some sexually transmitted diseases, including HIV.

Still, the AAP doesn't recommend routine circumcision for all male newborns and it advocates leaving the circumcision decision up to parents.

Dr. Stephanie Hanson, a pediatrician with Sanford Medical Center in Fargo, said circumcision is a very common procedure locally.

"It's a procedure we do in the hospital every day," Hanson said, adding that with the risks and benefits of the procedure deemed to be roughly equal, medical staff leave the decision-making to families.

Risks, she said, include the potential for infection, bleeding and cosmetic issues.

"When a family has a discussion about circumcision, it's our job as pediatricians to make sure they understand the risks and the benefits," Hanson said.

### 'Affront on manhood'

Baer, who lives in Moorhead and has an office in Hawley, Minn., started working in the mid-1990s against what he maintains is an unjustifiable procedure that brings shock and pain to a child's entry into the world.

Over the past two decades, Baer has filed about a dozen cases against doctors and medical facilities that perform circumcision.

Some cases have gone to trial. Some have been dismissed. Other cases have gone through arbitration and mediation, and some have been settled, with some money changing hands, Baer said.

In many instances, it is the parent of a boy who bring cases, but children themselves can bring cases once they reach 18.

"I'm reviewing one (case) right now with a man who just turned 18. He wants to bring an action against the doctor," Baer said, adding that the legal issue in many cases is informed consent, or lack thereof.

The challenge, Baer said, is convincing jurors that someone has been harmed, especially if those jurors are circumcised.



"One of the hardest things to overcome is the notion that a man is somehow diminished if he's circumcised; it's an affront on his manhood and some men just cannot accept the notion," Baer said.

Like father, like son

Baer said doctors he interviews in the course of lawsuits will often say the procedure is performed not because of a medical diagnosis but because families request it.

"Many times the reasons are: 'I want my child to look like me.' When a doctor has said that to me in a deposition, I ask the doctor: 'Well, did you ask the dad to pull down his pants to see what the target is?' " Baer said, adding he wants parents to think about the situation from the child's perspective.

"Let's imagine that a 1-day-old child has the ability to communicate," Baer said.

"That child would say: 'You know, that was a tight squeeze. I have a headache. My eyes are burning and the doctor just told me I'm a healthy newborn infant. Now, you want me to do what, Mom and Dad?'

"That's the way I hope people can understand and reflect on the impact on the individual," Baer said. "The only way that child can communicate is through resistance. With the arms and legs and screaming that child does everything in his power to say: 'No, no, no.' But nobody listens."

Baer said that while there is societal condemnation of the practice of removing the genital tissue of young females for cultural reasons, young boys receive no such consideration.

He maintains that informed consent for parents considering circumcision for their child should include receiving a detailed explanation of the procedure, the body part being removed and the function of that body part.

Also, he said, "I think it would be beneficial if the parents actually watched a video of that procedure."

Efforts are small scale

Last summer, a group called Bloodstained Men and Their Friends demonstrated against circumcision by holding up signs on a busy thoroughfare in south Fargo. The organization also demonstrated in other cities in the region.

A spokesman for the group, Dominic Barba, said Baer visited with members of Bloodstained Men when the organization held a demonstration in the Fargo area.

"We know and appreciate Zenas and his work," Barba said.

While infant circumcision remains common, Barba said the work done by his group and individuals like Baer may be having an effect on the country's collective mindset.

"What we're seeing is American parents are starting to see that (circumcision) isn't a necessary intervention and it's not an ethical one," Barba said.

Still, Baer said efforts to change ideas about circumcision remain small scale, with perhaps three or four other attorneys around the country waging similar fights.

The reason, Baer said, is that while circumcision is highly lucrative to the medical world, there's little reward in opposing it. "Where's the money? How are you going to make money on this?" Baer said.

http://thecircumcisionlawyer.com/verdicts/

## Verdicts and Settlements Tried by Attorney David Llewellyn (1995-2011)

**DAVID J. LLEWELLYN**  
Attorney At Law

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## The ARC website lists over 50 suits involving circumcision (1951-2019)

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### List of Court Settlements and Legal Victories Proving Harm of Circumcision

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*This list only represents a very small percentage of the total number of circumcision-related lawsuits. Privately arranged settlements and sealed settlements are both highly unlikely to appear in the list. Accordingly, this list grossly underestimates the number of successful circumcision-related lawsuits and the cost of male circumcision.*

*We thank David J. Llewellyn and Charles Bonner for their work in circumcision-related lawsuits.*

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Case number: 1  
Settlement amount: \$22.8 million  
Name of case: Antonio Willis v. Northside Hospital, Atlanta  
Hospital/Physician: Northside Hospital, Atlanta  
Place: Atlanta, Georgia  
Date of Trial: August 1995

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**LEAKED: Does human rights matter to doctors' groups deciding on circumcision?**  
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12 November 2016

**Canadian Circumcision Harm Survey Launched**  
7 November 2016

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Description: A 5-year-old boy has won a \$22.8 million settlement from an Atlanta hospital to compensate him for the severe burns he suffered to his penis in 1995 in a botched circumcision. Citation: "Lawyers: \$22.8 million to be paid over botched circumcision", The Atlanta Constitution, Tuesday, March 12, 1991, page A1 and "\$22.8 million awarded in botched circumcision", Palm Beach Post, March 12, 1991, page 1A and "Hospital set to pay in circumcision accident", Roanoke Times and World News, March 14, 1991.

**Case number: 2**  
Settlement amount: \$10.8 million  
Name of case: L. G. v. Mogen Circumcision Instruments, Ltd.  
Hospital/Physician: Mogen Circumcision Instruments was defendant  
Place: Brooklynn, NY (Judge Jack B. Weinstein)  
Date of Trauma: 2007  
Date of Award/Settlement or Date of Court Decision: July 16, 2010  
Plaintiff: L.G. and parents Dror and Sivan Geriges  
Plaintiff's attorney: David Llewellyn  
Description: "Infant lost portion of penis during 2007 infant circumcision using Mogen clamp and Mogen required to pay \$10.8M, \$10M to infant and \$777,070.96 to parents. Mogen claimed a few days later to be going out of business as a result. Company official still argue the clamp is 'painless and safe'."  
Citation: "Company that Lost \$10M in Botched Circumcision is Going Out of Business," Voazneias.com, July 19, 2010; "10M for Circumcising," New York Post, July 18, 2010; Ty Tagami, Atlanta Lawyer Wins \$11 Million Lawsuit for Family in Botched Circumcision," The Atlanta Constitution [www.ajc.com/news/nationworld/atlanta-lawyer-wins-11-573890.html], Advance My Lawsuit, "New York Dangerous Product Lawsuit Gets \$10.8 Million Award."

**Case number: 3**  
Settlement amount: \$10 million  
Name of case: Ian Carque v. Dr Martha L. Myers; Medina General Hospital  
Hospital/Physician: Medina General Hospital, Lake County, Ohio and Dr Martha L. Myers  
Place: Lake County, Ohio  
Date of Trauma: September 23, 1994  
Date of Award/Settlement or Date of Court Decision: March 24, 1999  
Plaintiff: Ian Carque  
Plaintiff's attorney: William Beyer  
Description: A 4-year old boy has won a \$10 million settlement from a Lake County, Ohio hospital to compensate him for a botched circumcision that severed the tip of his penis.  
Citation: "Suit over botched circumcision settled", Lake County News Herald, Friday, March 26, 1999.

**Case number: 4**  
Settlement amount: \$7.5 million  
Name of case: Maame v. Mogen Circumcision Instruments, Ltd.  
Hospital/Physician: Umass Memorial Medical Center  
Place: Umass Memorial Medical Center, Worcester, MA  
Date of Trauma: September 26, 2000  
Date of Award/Settlement or Date of Court Decision: August 24, 2007  
Plaintiff: Arvin Poku by parents Ankuma Maame and Kwasi Poku  
Plaintiff's attorney: Unknown; David Llewellyn in contact with them  
Description: Substantial part of boy's foreskin amputated in newborn circumcision with Mogen Clamp; settlement with doctor and medical center for \$200,000; Default judgment against Mogen was never paid.  
Citation: Maame v. Mogen Circumcision Instruments, Ltd., 2007 WL 2706273, Superior Court of Massachusetts, Worcester County, No. 20061234A

**Case number: 5**  
Settlement amount: \$4.6 million  
Name of case: Melanie Hall v. Militec Inc. and Integra Life Sciences Holding Corp.  
Hospital/Physician: Dr. Dr. Anthony Piskat performed surgery at Maternity Center of Vermont  
Place: Maternity Center of Vermont, Los Angeles, CA  
Date of Trauma: January 9, 2003  
Date of Award/Settlement or Date of Court Decision: July 18, 2011  
Plaintiff: Melanie Hall on behalf of her son  
Plaintiff's attorney: Browne Greene  
Description: Botched circumcision in Los Angeles clinic using Mogen Clamp. Due to defective clamp design, head of penis was unprotected and amputated during procedure. Case was settled.  
Citation: "Boys Botched Circumcision Leads to \$4.6 million Award," Bill Hetherman, Press Telegram. www.presstelegram.com/breakingnews/ci\_1850086.

**Case number: 6**  
Settlement amount: \$2.75 million  
Name of case: Terry W. Felice, Sr. v. State of Louisiana through the Department of Health and Human Resources (DHRH), Louisiana State University Board of Supervisors and Valley Lab of Boulder, Colorado  
Hospital/Physician: W.O. Moss Regional Hospital, Louisiana  
Place: Lake Charles, Louisiana  
Date of Trauma:  
Date of Award/Settlement or Date of Court Decision: 1986  
Plaintiff: Jeffrey Felice  
Plaintiff's attorney: David A. Frazer  
Description: The family of a then two-year-old boy, whose penis had to be amputated after it was severely burned during a circumcision performed at a state-run hospital, has won a \$2.75 million award from the State of Louisiana and the Valley Lab of Boulder, Colorado. The judge awarded a total of \$18,969 in special damages to the boy's parents for medical expenses and \$100,000 in general damages, and \$1.73 million to the victim. The judge said in his oral ruling that he felt Valley Labs was not negligent in providing warnings about the surgical instrument. Jurors disagreed and found Valley Labs 30 percent responsible for the injuries to the child. The jury awarded the boy a total of \$2.75 million.  
Citation: "Family gets \$2.75 million in wrongful surgery suit", Lake Charles American Press, Wednesday, May 28, 1986; "\$250,000 is Not Enough," Martin Dyckman, St. Petersburg Times, June 22, 2003.

**Case number: 7**  
Settlement amount: \$2.3 million  
Name of case: D. P., Jr. v. Dr. Cheryl Kendall (pediatrician) and Dr. Haiba Sonyika (surgeon who performed circumcision)  
Hospital/Physician: circumcising doctor Haiba Sonyika; pediatrician Cheryl J. Kendall  
Place: South Fulton Medical Center in East Point, Fulton County, Georgia  
Date of Trauma: November 6, 2004  
Date of Award/Settlement or Date of Court Decision: March 2009  
Plaintiff: D.P., Jr., et al.  
Plaintiff's attorney: David Llewellyn  
Description: severed tip of penis; lost part of glans. \$1.8 million awarded to boy and \$500,000 to boy's mother.  
Citation: "\$2.3M awarded in suit over botched circumcision" by Ty Tagami, The Atlanta Journal-Constitution, Monday, March 30, 2009. Also Jury verdict, D.P. Jr. v. Haiba Sonyika, Fulton County Civil Action File 2006EV001125-5.

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Place: Maternity Center of Vermont, Los Angeles, CA  
Date of Trauma: January 9, 2003  
Date of Award/Settlement or Date of Court Decision: July 18, 2011  
Plaintiff: Melanie Hall on behalf of her son  
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Description: Botched circumcision in Los Angeles clinic using Mogen Clamp. Due to defective clamp design, head of penis was unprotected and amputated during procedure. Case was settled.  
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Duivenbode R. (2021). **Criminalizing medically unnecessary child genital cutting in Western countries: the terms of the debate and some reasons for caution.** International Journal of Impotence Research. pp. 1-6.  
[https://www.researchgate.net/publication/356401533\\_Criminalizing\\_medically\\_unnecessary\\_child\\_genital\\_cutting\\_in\\_Western\\_countries\\_the\\_terms\\_of\\_the\\_debate\\_and\\_some\\_reasons\\_for\\_caution](https://www.researchgate.net/publication/356401533_Criminalizing_medically_unnecessary_child_genital_cutting_in_Western_countries_the_terms_of_the_debate_and_some_reasons_for_caution)

**Table 1.** Some examples of the past two decade's legal challenges to MGC in Western countries.

Year	State	Case
2001	Sweden	Sweden introduced a law regulating MGC, also known as "The Swedish Model." It states that MGC is permissible but requires consent from both parents and adequate pain relief. It is, apart from the first two months of life, to be performed by medical professionals. Before then, a certified religious practitioner (most commonly a Jewish mohel) is also allowed to perform the procedure.
2008	Finland	The Finnish Supreme Court, in a legal case against a (Muslim) mother who had a doctor perform MGC on her 4-year-old son, ruled that ritual MGC does not qualify as assault causing bodily injury (unlike FGC) and should not be prosecuted.
2011	The Netherlands	In a legal trial against a father who had MGC performed on his children without the permission of their mother, the Dutch Supreme Court ruled that while societal attitudes towards MGC are shifting, it does not qualify as aggravated assault (unlike FGC).
2011	California (United States of America) <sup>a</sup>	A citizen's initiative in San Francisco collected enough signatures to propose a prohibition of underaged MGC in a ballot measure (public referendum). In a legal suit from a collection of Jewish and other pro-circumcision groups the Superior Court of San Francisco ultimately ruled that the proposal should be removed from the ballot. To further protect the practice, the Californian governor then signed a bill that essentially prevents local governments in the state from banning MGC in the future.
2012	Norway	After a Muslim infant died following MGC, the center-right Center Party proposed to ban the procedure for those under 18 years old but was ultimately unsuccessful. They were joined by the right-wing Progress Party in 2017, who voted in favor of setting a minimum age of 16.
2012	Germany	The District Court of Cologne ruled MGC to constitute criminal battery in a case involving a Muslim boy. The controversial ruling was eventually overturned by the German Federal Parliament, which passed a bill declaring MGC to be permissible when performed by medically trained professionals with adequate pain management. While not directly creating a religious exemption, the Parliament stated that it wished to ensure the possibility of Jewish and Muslim religious life in Germany.
2012	Tasmania (Australia)	The Tasmanian Law Reform Institute published a report calling for state legislation to ban MGC of minors with exemptions for religious and cultural customs. This call was not taken up by the government.
2017	Belgium	The Belgian Advisory Committee on Bioethics advised the government to ban the performance of non-medical MGC before the age of 'informed consent.' The Minister of Health did not take up this advice and provided a harm-reduction-based argument to support her hesitancy towards criminalization.
2018	Denmark	A citizen's initiative collected enough signatures to petition the government to debate a ban on non-therapeutic MGC under the age of 18 years old. It ultimately did not acquire a political majority.
2018	Sweden	Several political parties have spoken out in favor of replacing "The Swedish Model" with a complete ban on MGC.
2018	Iceland	Four political parties jointly proposed a bill to amend the existing FGC legislation by replacing the word "girls" with "children" and thus including MGC under its prohibition. Both FGC and MGC would be classified as assault and subject to 6 years in prison. After international outcry, particularly from religious communities, the bill was eventually shelved.
2020	Finland	Finland came close to including MGC under their existing FGC legislation, but the language of the bill was adjusted in response to religious lobbying.

<sup>a</sup>The group behind the ballot measure has a website ([www.mgmbill.org](http://www.mgmbill.org)) on which their many efforts to prohibit MGC in the United States are listed, including bill proposals in 46 states, often submitted repeatedly, between 2004 and 2014, and a proposal to rewrite the federal 'Female Genital Mutilation Act' to include male children, last submitted to congress in 2014.

**Table 2.** Primary camps within the public debate over the criminalization of MGC.

<b>(i) Proponents: child right's activists</b>		<b>Example advocates</b>
Goal	Complete eradication of non-therapeutic MGC of minors through legal prohibition before the age of consent (generally suggested to be 16 or 18 years old)	Nordic Ombudsmen for Children and pediatric experts (2013)
Principal proposition(s)	<ul style="list-style-type: none"> <li>In the absence of considerable medical benefit that clearly outweighs the potential harms associated with the procedure, MGC unjustifiably violates the child's right to physical integrity</li> <li>By being an irreversible procedure of a highly personal part of the body to which a minor cannot provide meaningful consent, MGC violates their right to self-determination</li> <li>The rights of parents do not prevail over the rights of children in cases where the best interests of the child are not protected</li> </ul>	A group of 473 Icelandic physicians (25% of practicing physicians in the country)
Supporting evidence	<ul style="list-style-type: none"> <li>Medical data demonstrate minimal, if any, net health benefits; most purported health benefits can be obtained through less invasive means and/or through adult, voluntary circumcision.</li> <li>The procedure is painful and carries the risk of medical complications and psychological problems</li> <li>There is no (medical) evidence that proves it is essential to perform the procedure during infancy or childhood</li> </ul>	The U.S. based non-profit 'MGMBill.org'
Supplemental theoretical supports	<ul style="list-style-type: none"> <li>Non-therapeutic MGC conflicts with the UN Convention on the Rights of the Child (Article 12 and 24.3) as well as the Hippocratic oath ("first, do no harm")</li> <li>Treating MGC and FGC differently perpetuates gender inequality and is morally inconsistent</li> </ul>	
<b>(ii) Opponents: public health promoters</b>		<b>Example advocates</b>
Goal	To ensure MGC remains part of general medical practice as a preventative measure for which parents can opt	AAP CDC
Principal Proposition(s)	<ul style="list-style-type: none"> <li>MGC is a broadly accepted and an evidence-based medical procedure (its-public-health benefits outweigh its risks), making the state's interference with medical and parental authority unjustified</li> </ul>	
Supporting evidence	<ul style="list-style-type: none"> <li>Medical data demonstrate statistical, prospective health benefits as well as the cost-effectiveness of the procedure</li> <li>Medical data suggests that circumcision is safer when performed at a young age</li> </ul>	
Supplemental theoretical supports	<ul style="list-style-type: none"> <li>Evidence-based medicine should guide our judgment of MGC through balancing the risks and benefits</li> </ul>	
<b>(iii) Opponents: religious freedom activists</b>		<b>Example advocates</b>
Goal	To ensure the possibility for religious minority practice of MGC	Various representatives of religious organizations:
Principal proposition(s)	<ul style="list-style-type: none"> <li>Criminalization of MGC for minors would make sustainable Jewish and Muslim life problematic, if not impossible, and would enable the persecution of individuals based on their faith</li> <li>Criminalization of MGC further marginalizes and stigmatizes minority communities within a highly polarized political climate</li> <li>When balancing the right to physical integrity and religious freedom, the scales tip in favor of the latter given the minimal risks associated with the procedure</li> </ul>	<ul style="list-style-type: none"> <li>Catholic Bishop of Reykjavik</li> <li>President of the Conference of European Rabbis</li> </ul>
Supporting evidence	<ul style="list-style-type: none"> <li>For a large segment of the Jewish and Muslim population MGC is a meaningful religious practice with substantial ethico-legal grounding</li> <li>Medical data provides no evidence that, on average, MGC carries major harms</li> </ul>	
Supplemental theoretical supports	<ul style="list-style-type: none"> <li>Freedom of religion is a human right and a constitutional right in most Western countries</li> </ul>	
<b>(iv) Opponents: harm-reduction strategists</b>		<b>Example advocates</b>
Goals	To reduce the number of circumcisions and their associated harms as much as possible through strict medical regulation and social change efforts, such as dialogue with religious groups	KNMG (Royal Dutch Medical Society)
Principal proposition(s)	<p>They principally agree with the propositions of the proponents of legal prohibition, but the addition of the following propositions tip the scale in favor of legal permissibility:</p> <ul style="list-style-type: none"> <li>Given that it is unlikely MGC will be abandoned completely upon criminalization, allowing the procedure under strict medical regulation will ensure its safety while avoiding its occurrence under more harmful circumstances locally or abroad</li> <li>When societies are not ready for legal bans, they are most likely ineffective if not counter-productive</li> </ul>	The Brussels Collaboration on Bodily Integrity Danish Medical Association (Lægeforeningen)
Supporting evidence	<ul style="list-style-type: none"> <li>Initiatives aimed at complete eradication of FGC have yielded limited success</li> <li>Jewish and Muslim communities warn that the practice of MGC will go underground locally or relocate to different countries if banned</li> <li>Some proposals to criminalize MGC have resulted in legal backlash making it more difficult to ban the procedure in the future (e.g. San Francisco and Germany, Table 1)</li> </ul>	
Supplemental theoretical supports	<ul style="list-style-type: none"> <li>The principles of being harmed and/or 'morally wronged' should be the primary guides for our judgment of MGC</li> <li>Social norm theory has led legal scholars to argue that gradually eroding norms through careful measures is more effective to bring about social change than sudden and complete bans</li> </ul>	