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Why American Parents Circumcise Their Sons: An Integrative Review of Literature

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Why American Parents Circumcise Their Sons: An Integrative Review of Literature

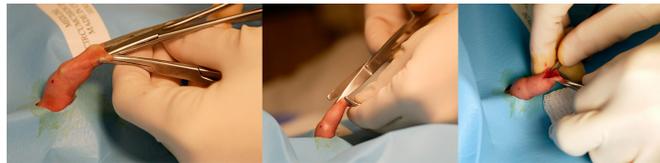
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Abstract:

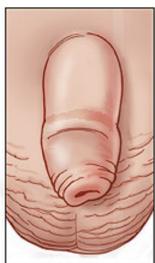
Since medical evidence supports both pros and cons of routine neonatal male circumcision, expectant and new parents are left to make the decision to circumcise their sons on their own. There is limited research as to why American parents choose to circumcise their newborn sons. The purpose of this integrative literature review was to identify the reasons behind parental decision making in neonatal male circumcision in the United States. Understanding motivating factors in parental decision-making can highlight areas of prenatal education for expectant parents. The primary motivating factor for parents choosing to circumcise their newborn sons was so that their son's penis would look like the father's. A secondary factor was the cost or availability of the procedure. Surprisingly little heed was given to the perceived medical benefits of the procedure. Parents who choose to have their sons circumcised due to American cultural norms were resolute in their view, whereas parents who left their son's penis intact tended to examine relevant literature and expressed a primary concern with medical benefits rather than cultural adherence. Providers must ensure that parents are making the decision based on knowledge of the benefits and risks of the procedure rather than cultural patterns. Providers should provide education in order to ensure informed consent is obtained.



Retrieved from: <https://rudhro.files.wordpress.com/2010/07/circumcision-04-big1.jpg>

Background

In male infants circumcision refers to the surgical operation in which the foreskin is removed from the glans penis, clamped down and discarded leaving the head of the penis exposed. The practice of circumcision is older than recorded history, but became a western cultural normality, rather than just a religious practice, in the late Victorian Era as an attempt to prevent masturbation. The practice initially became a social norm in the United States as a means of reducing male sexual pleasure and the perceived sin of masturbation correspondent with the cultural morality of the late Victorian Era. During the mid-20th century circumcision rates rose steadily as low-risk childbirth began to be shaped after an obstetric model. In the 1970, 80's and 90's the American Academy of Pediatrics refuted the procedure stating there was no medical benefit to the cosmetic procedure. However, in 2012 their position statement changed to what could be perceived as affirmative stating that "Evaluation of current evidence indicates that the health benefits of newborn male circumcision outweigh the risks and that the procedure's benefits justify access to this procedure for families who choose it" (p.585).



Natural penis



Circumcised penis

Retrieved From: <https://myhealth.alberta.ca/Health/pages/conditions.aspx?hwid=127196> Incorporated

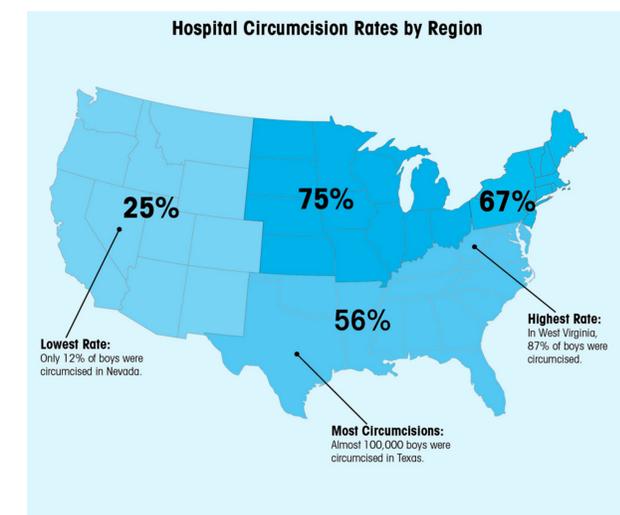
Journal Article	Cost/Availability	Cultural Beliefs/Aesthetics	Health
Bisono, G M., Simmons, L., Volk, R. J., Meyer, D., Quinn, T. C., & Rosenthal, S. L. (2012) Attitudes and decision making about neonatal male circumcision in a Hispanic population in New York City.	"...there were systemic issues, such as timing that influenced the circumcision decision" (p961)	"In this study we found, similar to another study, that social reasons were indicative of whether a child was circumcised or not... in both cases of circumcised and uncircumcised boys, the father's status played a role in the final decision...One study found that that the circumcision decision is often made before the health care providers has a discussion with the parents" (p961-962)	
Castro, J. G., Jones, D. L., López, M. R., Deeb, K., Barradas, I., & Weiss, S. M. (2010) Acceptability of neonatal circumcision by Hispanics in southern Florida.	"The majority of the participants in the study indicated they would be willing to circumcise their child if circumcision was free of charge" (p3)		
Freeman, J.J., Spencer, A.U., Drongowski, R.A. et al. (2014) Newborn circumcision outcomes: Are parents satisfied with the results?		"The most common reason for circumcision were 'to be like dad' (69%) and social acceptance among peers (69%) which were followed closely by health reasons (59%). (p334)	
Mielke, R. T. (2013) Counseling parents who are considering newborn male circumcision.	"Parents more likely to elect circumcision had private insurance, higher socioeconomic status, fewer comorbidities and were white or black" (p 671)		
Mitchell, Teri M. (2015) Shared decision making for routine infant circumcision: A pilot study.		"...among both parents who chose RIC and those who kept their son's penis natural, the circumcision status of other males in the family was influential in the decision" (p191)	
Otto, R., Evans, G., Boniquit, C., Peppas, D., & Leslie, J. (2016) Why Desired Newborn Circumcisions Are Not Performed: A Survey	"Categorizing these Results shows that the health care system was unable or unprepared to provide NBC in 57% of responses..." (p190)		
Sardi, L., & Livingston, K. (2015) Parental Decision Making in Male Circumcision		"Parents who were more likely to believe that the benefits of circumcision outweighed the risks also believed that aesthetic reasons for circumcision were of primary importance" (p113)	"The factor analysis demonstrates that if parents believe the benefits of circumcision outweigh the risks, they were also more likely to report that fathers should look like their sons" (p113)
Wang, M. L., Macklin, E. A., Tracy, E., Nadel, H., & Catlin, E. A. (2010) Updated parental viewpoints on male neonatal circumcision in the united states.		"This study attempted to determine if education about circumcision would change options. Overall, we found that respondents generally maintained their initial viewpoints" (p135)	"We had anticipated an overall increase in respondent support for circumcision after the HIV/HPV reading, but this was not observed. Our study findings were consistent with prior studies that demonstrated parental views on circumcision remain unchanged, regardless of discussions with health care providers or distributed information" (p133-134)

Method

An integrative literature review was conducted utilizing these online databases: PubMed, The Cumulative Index of Nursing and Allied Health (CINAHL) Complete, ProQuest Nursing & Allied Health Source, and PsycInfo. The Health Belief Model was used as a framework for this paper.

Purpose

Circumcision rates have remained relatively steady in the United States varying slightly from 83% in the 1960s to 77% by 2010 (Morris, 2014). With medical evidence supporting both pros and cons of the procedure, parents are left to make the decision to circumcise their sons. There is limited research as to why American parents choose to circumcise their newborn sons and said research has yet to be synthesized. The purpose of this integrative literature review is to identify the reasons behind parental decision making in neonatal male circumcision. Understanding motivating factors in parental decision-making can highlight areas of prenatal education for expectant parents.



Retrieved From: <http://forward.com/news/161642/circumcision-rates-vary-widely-in-us/>

Results and Implications

- The desire for a child's penis to aesthetically resemble his fathers was the primary motivating factor in parental decision-making.
- The availability of the procedure while the mother was in the hospital was a secondary motivating factor in parental decision-making.
- The perceived health benefits of the procedure had little to no influence on parental decision making.

A review of the relevant literature has shown that routine infant circumcision in the United States is perpetuated by cultural norms that are handed down generation to generation. It would seem that the perceived seriousness of the decision is not heavily weighed. The majority of parents do not stop to ask why the procedure is done and therefore, are not basing their decision off of current recommendations (affirmative or non-affirmative) rather they are choosing to do what has always been done. This finding is disconcerting as the 2012 AAP recommendation is based on the potential health benefits of the procedure not the psychological or social aspects of normality. Are parents truly giving informed consent? Or are they merely consenting to the procedure because it is what has always been done? This is of particular concern to the nurse who statistically is the first, and sometimes only, medical professional to ask expectant or new parents about circumcision (Mielke, 2013). Care needs to be given that informed consent is obtained and that parents have weighed the decision with due process.