

INTERVIEWER Here.

1:

GIGI: I wondered how a teacher of the healing arts could watch someone suffer and not offer assistance. I wondered about the doctor's power, which could intimidate others from following protective instincts. When he did arrive, I immediately asked the doctor if I could help the baby.

He told me to put my finger into the baby's mouth. I did and the baby sucked. I stroked his little head and spoke softly to him. He began to relax and was momentarily quiet.

The silence was soon broken by a piercing scream-- the baby's reaction to having his foreskin pinched and crushed as the doctor attached the clamp to his penis. The shriek intensified when the doctor inserted the instrument between the foreskin and the glands, tearing the two structures apart. The baby started shaking his head back and forth-- the only part of his body free to move as the doctor who used another clamp to crush the foreskin lengthwise, which he then cut.

This made the opening of the foreskin large enough to insert a circumcision instrument, the device used to protect the glands from being severed during the surgery. The baby began to gasp and choke, breathless from his shrill, continuous screams. How can anyone say circumcision is painless when the suffering is so obvious?

My bottom lip began to quiver, tears filled my eyes and spilled over. I found moan, sobs difficult to contain. How much longer could this go on?

During the next stage of the surgery, the doctor crushed the foreskin against the circumcision instrument and then finally amputated it. The baby was limp, exhausted, spent. I'd been prepared. Nothing could have prepared me for this experience.

To see a part of this baby's penis being cut off without anesthetic was devastating. Even more shocking was the doctor's comment, barely audible, several octaves below the piercing screams of the baby. There's no medical reason for doing this. I couldn't believe my ears.

My knees became weak and I felt sick to my stomach. I couldn't believe that medical professionals dedicated to helping and healing could inflict such pain and anguish on innocent babies unnecessarily. What I had allowed my own babies to endure and why? The course of my life was changed on that day in '79. I've now dedicated my life to bringing an end to this horrendous practice.

INTERVIEWER Well, you got through it.

1:

[LAUGHTER]

I didn't think you were going to there for a second. But that is an emotional rendition of what happens.

GIGI: Yes. And it still goes on--

INTERVIEWER Yes.

1:

GIGI: --oftentimes without any anesthesia.

INTERVIEWER Although, frankly, I mean, for those of us who, I guess, were babies when we had it, well, we don't remember.
2:

[LAUGHTER]

GIGI: No, I don't remember.

INTERVIEWER Yeah, yeah, yeah.

2:

GIGI: --at a conscious level.

INTERVIEWER Yeah.

2:

BOBBY: Perhaps, you do at an unconscious level. I don't know.

INTERVIEWER I don't know.

2:

BOBBY: I think the jury is out on that.

GIGI: Yeah.

BOBBY: But I wish that I had not been circumcised, actually.

GIGI: But it's kind of interesting. Why did circumcision come about? What was it intended for? And it kind of goes through the history. And throughout all the history and all the cultures they studied, it comes down to one thing--

BOBBY: Cleanliness.

GIGI: No.

BOBBY: No.

GIGI: Control of sex drive in the little children. And later even in adults to stay monogamous.

BOBBY: Well, yes, I can--

GIGI: Even though it was a fallacious belief--

INTERVIEWER I can understand that. But it's really hard to imagine, since--
1:

GIGI: Even though it's a false belief, at one time it was believed if you cut off the foreskin-- it made the penis less sensitive-- it would lower sex drive.

INTERVIEWER: I got to tell you.

GIGI: [LAUGHS]

INTERVIEWER I've had quite a history. And I can't imagine that my sex drive could have been any bigger than it was in my
2: youth.

[LAUGHTER]

I would have exploded had it been--

[LAUGHTER]

I was very active sexually in my youth.

GIGI: Oh yes. Oh, I was, too. But I think the real big thing about circumcision is-- and when it came about in our country, it was kind of an interesting time when it really hit big time in '40s, '50s.

INTERVIEWER Yes.

2:

GIGI: And I've read some other research. And this was kind of an interesting time because there's a time around the turn of the century, when we first started getting the word heterosexual and homosexual, but they weren't very deeply embedded into society.

INTERVIEWER No, No.

2:

GIGI: But it was around the '30s, '40s, '50s. Then all of a sudden, it's kind of-- and especially in the '50s, the witch hunt occurred, looking for gays, looking for perverts, looking for people that didn't fit the kind of norm of romantic love, boy meets girl, has 2.5 kids.

BOBBY: No, I understand that in an uncircumcised penis that the head is the mucous membrane. And when you circumcise it, that it doesn't-- I mean, it stops being a mucous membrane, which means loss of some sensitivity.

GIGI: Yeah. What happens is you grow thicker layers of skin on the head of the penis, which is a gland.

INTERVIEWER Yes.

2:

GIGI: Glands aren't really meant to have thick layers of skin. And all the nerve endings recede a little deeper. And the skin dries out. And it's constantly being abraded against cloth if you're wearing clothes, which does help to desensitize.

And before I move on too much further, I want to touch on something else. Many Victorian physicians theorized that good nutrition was the key to avoiding masturbatory tendencies. Special diets which avoided spicy, hot, or stimulating foods were often prescribed.

John Harvey Kellogg, a concerned physician and health food pioneer, sought to create a special food that would inhibit sexual procliv--

INTERVIEWER Proclivities.

2:

GIGI: --proclivities in growing bodies. After several months of experimentation, he finally introduced his food at his sanitarium in Battle Creek, Michigan. These anti-masturbation foods were none other than Kellogg's breakfast cereals.

INTERVIEWER Right, yeah. Yeah. Yeah, if you've ever read TC Boyle's novel-- I can't even think of name of it now. But they
2: turned it into a movie with John Cusack and Anthony Hopkins a little bit. *The Road to Wellville*.

GIGI: Yes. With Matthew Broderick.

INTERVIEWER Yeah, but he pretty much followed long story pretty closely.

2:

GIGI: Yeah, he was--

INTERVIEWER The other outshoot of all that is the graham cracker, because graham was the other one.

2:

INTERVIEWER No kidding.

1:

INTERVIEWER Yeah, Graham, Post, and Kellogg. And these were all designed for basically controlling sex drives and--

2:

INTERVIEWER Well, Kellogg was really--

1:

INTERVIEWER --health issues and all kinds-- they were all nuts.

2:

INTERVIEWER --weirdo. Yes! I mean, he didn't believe in sex at all and made a big deal of never having sex with his wife and
1: had adopted like, 10 kids or something.

INTERVIEWER Yeah. And Graham spent a lot of time down here.

2:

INTERVIEWER Really?

1:

INTERVIEWER Yeah, no. I don't think it was a native Texan, but he did spend a hunk of time.

2:

GIGI: Kellogg had a lot in common with his creation. He was a real flake.

INTERVIEWER Yeah.

2:

MAN: Ha, ha.

[INTERPOSING VOICES]

INTERVIEWER He came all the way in here from the lobby to tell us that.

1:

INTERVIEWER I know.

2:

[LAUGHTER]

Something else that you said that brought my-- but that's a whole other conversation.

GIGI: OK.

INTERVIEWER Never mind.

2:

INTERVIEWER OK. [LAUGHS]

1:

GIGI: But I mean, think about it. Why would grown people want to hover around a baby and mutilate its penis?

INTERVIEWER Well, because doctors tell parents that that's the right thing to do. That they should have it done.

1:

INTERVIEWER Yeah.

2:

INTERVIEWER That's why.

1:

INTERVIEWER Yeah.

2:

GIGI: And it's like, what is the big concern to--

INTERVIEWER Well, because the hospital can charge an extra fee.

1:

GIGI: I don't think that's just it. I mean, that's part of it. That's the economic side of it.

INTERVIEWER You always look for the economics out of it.

1:

[LAUGHTER]

INTERVIEWER But I think so much of it it's just self-perpetuating.

2:

INTERVIEWER That may be. Yeah, I was circumcised, you're supposed to be--

1:

INTERVIEWER If I'm a teacher-- yeah, yeah, or I'm the teaching physician, whatever they call them, I'm teaching my young
2: interns, I'm going to teach them what I learned 40, 50 years ago, which is what my teacher, in turn, learned 40 or
50 years ago from his mentor.

We're just passing down the same thing over and over until somebody finally says, hmm, maybe let's think about this for a minute. Is this a good idea? And then it just takes enough people to say maybe it's not a good idea and we stop doing it.

INTERVIEWER And perhaps in some men, you might have to do it because the foreskin is so tight that the head of the penis
1: never comes out--

GIGI: Actually that's a myth, too.

INTERVIEWER Oh, really?

1:

GIGI: Yes.

INTERVIEWER OK.

1:

GIGI: There is another surgery that can be performed. that--

INTERVIEWER To loosen it?

1:

GIGI: To loosen it, but does not damage the foreskin and keeps the gland a moist membrane. So it's totally an unnecessary surgery. But most doctors are reluctant to give that option to patients. And basically, all they do is cut a slight little slit in the tight area to release the pressure.

INTERVIEWER Yeah.

2:

GIGI: I get that part, which is much less invasive.

INTERVIEWER Yes. So why is it? Why do you?

1:

GIGI: I think part of it is we live in a very sex-negative culture. And--

INTERVIEWER Since the '80s, yes.

1:

GIGI: Yeah. Well, even since the '50s or even before then--

INTERVIEWER Oh, honey.

1:

GIGI: It goes way back.

INTERVIEWER Yes, I know, but the '60s and '70s just burst out.

1:

GIGI: It burst out in some ways, but we still have a lot of the sex-negative--

INTERVIEWER Oh, sure we do, of course.

1:

GIGI: --taboos. We have the sex-negative kind of mentality.

INTERVIEWER Yeah, yeah.

1:

GIGI: And so I think part of what happens is this kind of weird dynamic gets set up. And that as adults, we try to destroy that which we could never have. And so what do we do? We turn to our infants and mutilate their penises.

INTERVIEWER Let me jump in here.

1:

GIGI: And this is a very subconscious level, I know.

INTERVIEWER Yeah, let me jump in here and say Stanley in Baytown called and wants to know if there is someone he can contact regarding the subject. Is there books or there's--

GIGI: Yes, there is a book And it's called--

INTERVIEWER And we're going to be talking about that.

1:

GIGI: --*Decircumcision*. And it's by Gary M. Griffin, MBA. And there are some resources in the back. Let's see. There are some organizations. Let's see if I can find them here.

Ah, here we go. There's an organization-- and I'm this is kind of old. This book was published in '91. But there's NOCIRC, National Organization of Circumcision Information Research Centers. PO BOX 2512, San Anselmo--

INTERVIEWER San Anselmo?

1:

GIGI: Yeah, California. And there's Intact Education Foundation, Box 5. Wilbraham, Ma, 01095. Unfortunately, this book was published before the internet, so we don't have websites.

There's Informed Consent, PO Box 493, Forest Knolls, California, 94933.

INTERVIEWER OK, let's take a little break here.

1:

GIGI: And [INAUDIBLE].

INTERVIEWER Hold on, hold on, hold on.

1:

GIGI: Sure.

INTERVIEWER We got to take a little break here. I need to remind folks that they are listening to *After Hours Queer Radio with 1: attitude* on KEOS College Station and KPFT Houston, the voice of the many who have no voice. We'll be right back.

[MUSIC PLAYING]

ANNOUNCER 1: Join us for the Texas debates. The leading Democratic candidates for governor and US Senator will debate in a statewide broadcast, and will discuss timely issues such as the economy, education, and domestic security. Want to hear what the candidates have to say? Join us for the Texas debates.

ANNOUNCER 2: Join us this Friday night from 9:00 PM for the Texas debates live here on Houston's 90.1 KPFT.

[MUSIC PLAYING]

ANNOUNCER 3: Tune in to *Nuestra Palabra*, Latino writers having their say on the air every Tuesday night from 9:00 PM to 10:00 PM. You'll hear interviews. You'll hear teatro, rap, poetry, fiction, memorias, composer spotlights. And you'll be surprised to find out what else is included on *Nuestra Palabra*, Latino artists having their say on the air on Houston's 90.1 FM, KPFT, the sound of Texas.

[MUSIC PLAYING]

JOAN DEVLIN: Hi, this is Joan Devlin, you're listening to KPFT's lesbian and gay voices.

MAN 1: We want to create the political climate for--

MAN 2: Same-sex marriages.

MAN 3: Let's just talk about some of this stuff.

WOMAN: The neutron lesbian strikes again.

JOAN DEVLIN: We're going to be doing some radical radio right now.

MAN 4: Legal changes decriminalizing gay sex.

MAN 5: We celebrate the diversity.

JACK VALINSKI: Welcome to another edition of *Lesbian and Gay Voices*, this is Jack Valinski.

JOAN DELVIN: It wasn't until I had lived with a woman for a year that it even occurred to me to ask, do you think we're lesbians? Civil rights for gays, the ending of Don't Ask, Don't Tell.

JACK VALINSKI: Listen to *Lesbian and Gay Voices*.

MAN 6: My prediction, Al Gore 276 electoral votes, George W Bush, 262.

JACK VALINSKI: That's *Lesbian and Gay Voices*, Mondays at 8:00 PM.

(WHISPERING) I hear gay people.

[MUSIC PLAYING]

ANNOUNCER: Welcome back to the new gospel revival hour. Ha, ha, ha, gotcha! Seriously, folks, it's *After Hours on KPFT Houston*, celebrating life in the heart of Montrose. And now I'm handing it over to the collective to see what they do with it.

INTERVIEWER [CHUCKLES] Well--

1:

INTERVIEWER That's beautiful.

2:

INTERVIEWER --we're going to do lots of fun things with it.

1:

BOBBY: That's wonderful.

GIGI: Ooh, we will do it.

INTERVIEWER And before we get back to that, Elaine called in. It seems that Christy Claxton will be performing at the River Cafe from 8:00 to 10:00 next Saturday night. The event is called the Lavender Lounge. And other performers are Roberta Donnay, Holly Figueroa, and Sharon Bousquet.

There is a \$10 cover charge, but it is a non-smoking event, which is really cool for a lot of people who have those problems. And I've got an email in to Christy because I will be hosting the Afternoon Crossroads on Tuesday from 3:00 to 6:00, and I'll be playing mostly queer music. 3:00 to 6:00 Tuesday afternoon.

And I've asked Christy to be a guest. I don't know if she can make it yet, but we'll find out. And let's you see--

GIGI: Do you remember sunlight looks like?

INTERVIEWER I know, I know.

1:

GIGI: [LAUGHS]

INTERVIEWER It's not often they let me at the [? micster ?] when the sun is out. Robin in southeast Houston wanted to say that--
1: what did she say? Did you write that?

BOBBY: No, I didn't.

INTERVIEWER: Oh, OK. Well, why did you read it?

BOBBY: Robin in southeast Houston said, "I understand it all now. And thanks to Gigi for explaining it to me."

INTERVIEWER 1L Yeah. OK, good. Good.

INTERVIEWER2: So, perhaps Robin will not be circumcising her baby.

GIGI: Oh, good.

INTERVIEWER That's one down, that's millions to go.

1:

GIGI: Well, one thing, I think it's OK if a boy wants to be circumcised when he's of age to consent to it. And there are some men that want to be.

INTERVIEWER Yes.

1:

GIGI: And I have no problems with that. But how do the infant that you're butchering, this one that wants to be butchered?

INTERVIEWER Well, if you use emotional words like that, you're not going to sway very many people.

1:

GIGI: [LAUGHTER] True. I know, I get kind of--

INTERVIEWER Yes, I know because you're very emotional about this subject.

1:

GIGI: Yes. Well, I was done without consent.

INTERVIEWER Well, we all were.

1:

GIGI: Yes.

INTERVIEWER No, not all of us. All of us as babies were circum-- the ones who were circumcised as babies were done without consent.

GIGI: Right But I do know some adults that later went and got their--

INTERVIEWER Yes, I do, too. I never understood it. I tried to talk them out of it.

1:

GIGI: I did, too.

INTERVIEWER That was a good bit--

2:

INTERVIEWER Usually, it was like I don't want to look different than from everyone in the shower. And now that they're circumcised, they're starting to look different because more and more men are not circumcised.

INTERVIEWER Well, it's funny because I grew up in a very Catholic neighborhood--

2:

INTERVIEWER Oh, yeah. Me, too.

1:

INTERVIEWER --in Chicago. And I don't-- and plus, I was in Boy Scouts and also everybody was Catholic. I don't remember
2: seeing an uncircumcised penis until I was probably in my 30s.

GIGI: Wow.

INTERVIEWER Everyone was cir-- I just assumed everyone was.

2:

INTERVIEWER Yep. I grew up that same way. In the showers, everyone was circumcised. But I came from a small town in New
1: Jersey that was mostly either Italian or Czechoslovakian or Polish.

INTERVIEWER It was just like my neighborhood.

2:

INTERVIEWER Yeah.

1:

INTERVIEWER Yeah. Your occasional Lithuanian. Yeah.

2:

INTERVIEWER Yeah.

1:

[LAUGHTER]

But there was not the Latin and there was not the Afro-American.

INTERVIEWER Right, right.

2:

INTERVIEWER Those are the communities that over the years have resisted circumcision.

1:

INTERVIEWER Yeah.

2:

GIGI: Well, there is good news, though--

INTERVIEWER Yes.

2:

GIGI: --for those that was circumcised. If they choose, it's a long and lengthy process.

INTERVIEWER So to speak.

1:

GIGI: There is a way to restore. Well, actually there's two ways. There's a surgical method, which I don't--

INTERVIEWER I don't want anybody cutting there, you know?

1:

INTERVIEWER Yeah. No, no.

2:

INTERVIEWER I'm sorry.

1:

INTERVIEWER Just the thought of that is--

2:

GIGI: The surgical method is very invasive and not very pleasant.

INTERVIEWER Yeah.

1:

GIGI: And there's a lot of medical risk.

INTERVIEWER Yes. And please talk to your legitimate doctor before you even consider doing anything like this.

2:

GIGI: And it's really a nasty operation. And I won't even go into the details here. Just trust me.

BOBBY: OK. I know the details.

INTERVIEWER That's right. You just said you were circumcised as an adult, Bobby?

1:

BOBBY: I was a teenager.

INTERVIEWER Was it your idea?

1:

BOBBY: Oh, hell no!

INTERVIEWER Oh.

1:

BOBBY: That was my dad's idea. And let me just state for the record both of my parents were doctors. They're both dead now.

INTERVIEWER Amazing. Amazing.

1:

BOBBY: Yeah, they thought that was a brilliant idea at the time. I've seen people with circumcised-- and all I've got to say about this-- and here's telling some personal business.

INTERVIEWER OK.

1:

BOBBY: This was not the neatest job done.

[GUYS OOHING]

They didn't cut off anything-- let's just say they didn't cut off anything they shouldn't have.

INTERVIEWER We're glad of that.

1:

BOBBY: But the stitching was not done particularly neatly. That's all I'm going to say on the subject. Yeah. And I was 14, 15.

INTERVIEWER And that's when you have erections without even wanting those.

1:

BOBBY: Oh, yeah. We don't even want to go into how it feels to have that part of your body on fire for weeks. Just the simple act of taking a pee is a brutal experience when you're a teenager.

GIGI: Yeah.

INTERVIEWER Stop!

1:

INTERVIEWER Well, I think we've covered that [INAUDIBLE].

2:

BOBBY: Yes, can we get beyond this, please?

[INTERPOSING VOICES]

INTERVIEWER But there is another way of doing it, isn't there?

2:

GIGI: But there another way. It's called the non-surgical foreskin restoration method.

INTERVIEWER Do you have to-- what if, when you were circumcised, it was really a neat job and you have no foreskin?

1:

GIGI: I had none.

INTERVIEWER Oh, you had none?

1:

GIGI: I had none to begin with.

INTERVIEWER OK.

1:

GIGI: And basically, what it involves is pulling the skin over the head of the penis--

INTERVIEWER Sure.

1:

GIGI: --and taping it off.

INTERVIEWER OK, let me get this right. So you pull the skin over the head of the penis. Obviously, it has to be soft to do that.

1:

GIGI: Yes.

INTERVIEWER And you tape it?

1:

GIGI: You take some--

INTERVIEWER What? Duct tape? What?

1:

GIGI: No, no, no. Medical.

[LAUGHTER]

JACK VALINSKI: It works for everything.

GIGI: Uh, no. Medical surgical type that is hypoallergenic, because you don't want rashes. You don't want skin irritations.

INTERVIEWER No.

1:

GIGI: And that is very tender skin. And they sell that in any drugstore--

INTERVIEWER OK. Now, realistically--

1:

GIGI: --first aid tape.

INTERVIEWER --OK, you've done that. You get up in the morning. You do your toilet. And you tape yourself up and you go to work.

Now, men of all ages are going to have an erection sometime during the day. What happens then?

GIGI: Basically, what happens is the penis gets erect. And it pulls the skin very tight. [GIGGLES]

INTERVIEWER I'll bet it does.

1:

GIGI: And at the beginning, it's-- I mean, for me, it was just slightly uncomfortable. But it wasn't-- and if it gets painful, you just pull the tape off and let it pop out.

INTERVIEWER No kidding. Yeah.

1:

[LAUGHTER]

BOBBY: Whoa. That's a foregone conclusion.

GIGI: Yes. And actually, it's tape. I mean, if it's too much pressure it's going to pop off on itself anyway.

INTERVIEWER OK.

1:

[LAUGHTER]

GIGI: You're not--

INTERVIEWER The tape?

1:

INTERVIEWER The tape.

2:

GIGI: The tape. And it's going to pop out. It's not going to do any damage. One thing I did find was--

INTERVIEWER How long did it take doing this?

1:

GIGI: It took me-- it can take anywhere from eight months to two years.

INTERVIEWER Oh, my God!

1:

GIGI: Yes. [LAUGHS]

INTERVIEWER Taping your dick every day?

1:

GIGI: Yeah.

[LAUGHTER]

INTERVIEWER Well, it's just like brushing your teeth.

2:

INTERVIEWER I guess it becomes that, huh?

1:

GIGI: It does. But the other thing is that actually the first month and a half was the hardest, because after--

INTERVIEWER The most difficult.

1:

GIGI: The most difficult.

INTERVIEWER The first--

1:

[LAUGHTER]

GIGI: Because after that, the skin started actually stretching, and so there was more room.

INTERVIEWER Oh, OK. So, OK. Gotcha.

1:

GIGI: And so even with tape on and I get a hard on, even that wasn't uncomfortable, because all of a sudden it was starting to stretch out.

INTERVIEWER Yeah.

1:

INTERVIEWER OK.

2:

BOBBY: It's like weights-- it sounds like weight surgery in reverse.

INTERVIEWER Oh, wait, there's more to it.

1:

BOBBY: When they remove skin on people who used to be heavy, because there's so much excess skin that it sounds a lot like that, only in reverse. You're adding skin.

GIGI: Yeah. Well, that's kind of the first step. And after you do that for a while, then what you want to do is start using something inside, because you've stretched it as far as it will stretch when you get erections and all that just by taping it off.

BOBBY: Yeah.

INTERVIEWER Yeah.

2:

GIGI: Some men pack it with cotton inside.

JOAN DELVIN: Pack it?

GIGI: Yeah. They put some cotton around--

INTERVIEWER Wait, what's this for? I'm confused.

1:

GIGI: Well, hang on. OK, let me explain. They put some cotton around their penis. They stretch the skin around that and then tape it off. And what that does is it adds more bulk so the skin will keep stretching beyond--

INTERVIEWER Oh.

2:

INTERVIEWER Oh.

1:

INTERVIEWER I've got the-- yeah--

2:

INTERVIEWER OK.

1:

GIGI: The tip of the penis.

BOBBY: OK, boy, you really want to do this bad.

GIGI: [LAUGHS] You can use cotton. They make devices. There's all kinds of things, resources out there.

BOBBY: Well, packing materials.

GIGI: Yeah.

INTERVIEWER So a little bubble wrap.

1:

BOBBY: And that's kind of--

INTERVIEWER [? Blue T-90 ?] bubble wrap. Yes.

1:

INTERVIEWER And a trip to your tailor to expand your pants also.

2:

INTERVIEWER No kidding. Say goodbye to those tight Levi's.

1:

INTERVIEWER Yeah.

2:

[LAUGHTER]

I'm thinking the practical part here.

GIGI: So that's the second phase. And then once after you've worn that for a while, then it's pretty well stretched out.

INTERVIEWER By this time, does it cover the head?

1:

GIGI: Yes.

INTERVIEWER OK. OK, so we've got it covering the head.

1:

GIGI: Yeah.

INTERVIEWER OK.

1:

GIGI: Now, the one thing that the stretching doesn't do, it doesn't reduce the circumference of the skin.

INTERVIEWER Yes.

1:

GIGI: In a naturally uncircumcised male, the skin circumference of the original foreskin is narrower than what you get when you stretch it back out. It's a big diameter.

INTERVIEWER It won't stretch back smaller.

1:

GIGI: Yeah.

INTERVIEWER OK.

1:

GIGI: So what tends to happen is that it won't stay covered all day and night even though you've stretched it all the way out. It tends to slip back.

INTERVIEWER OK, so then what do you do?

1:

GIGI: So there's two alternatives.

INTERVIEWER OK, here we go.

1:

GIGI: There's one where you can go in and get a simple little surgery done where they cut a little--

INTERVIEWER Tighten it up? It's the opposite of the [? formosus, ?] where it's too tight.

1:

GIGI: What they do is they cut a little diamond shape out and then stitch it back together, and that reduces the circumference.

INTERVIEWER OK.

1:

INTERVIEWER It's a nip and tuck.

2:

INTERVIEWER Let's try something else here.

1:

GIGI: The other way is to get a piercing.

INTERVIEWER Ah!

1:

BOBBY: Oh, that's not much better, no.

GIGI: I got the piercing. It's cheaper, believe me.

[LAUGHTER]

INTERVIEWER Yeah, I bet.

2:

GIGI: But the benefit of all this--

INTERVIEWER OK, wait a minute. Wait a minute. Wait a minute. OK, I want to know the benefit, but I will also want to know how

1: much did it hurt and for how long?

GIGI: It didn't hurt at all.

INTERVIEWER The piercing.

1:

GIGI: The piercing didn't hurt because I went to a doctor and had it done when he did the piercing.

INTERVIEWER OK, so they stick this needle into your--

1:

GIGI: No. It's not into, it's just into the skin.

INTERVIEWER Yeah. [EXHALES] OK.

1:

GIGI: It doesn't penetrate--

INTERVIEWER OK, it's like going to the dentist, I guess. Yeah.

1:

GIGI: I mean, he takes the skin, he pulls it out. He kind of sticks the needle into the skin and injects deadening material. It's instantly dead.

INTERVIEWER OK. And then it-- yeah, OK.

1:

GIGI: And then he pierce--

INTERVIEWER Pierces it. OK. And how long does it take for that to heal up?

1:

GIGI: It took mine about a week.

INTERVIEWER Really? It's like your ear.

1:

GIGI: Yeah. Like your ear.

INTERVIEWER [INAUDIBLE] even less than--

1:

GIGI: --or nipples--

INTERVIEWER Yeah, OK. Because I'm thinking--

1:

GIGI: It varies from person to person.

INTERVIEWER --because I'm thinking you have to urinate and stuff like that. And what do you have to do to keep it from getting infected?

GIGI: Antibiotic cream.

INTERVIEWER The same thing.

1:

GIGI: Yeah, same thing. And actually, urine is sterile.

INTERVIEWER Oh.

1:

GIGI: When it comes out of the body, it's sterile.

INTERVIEWER Who knew?

1:

[LAUGHTER]

INTERVIEWER Well, some of us probably have enough alcohol in there anyway.

2:

[LAUGHTER]

GIGI: Oh, even without alcohol, urine is totally sterile.

INTERVIEWER Oh, OK.

1:

GIGI: Now, if it sits around for a while and collects bacteria later after it's outside the body, that's a different story.

INTERVIEWER Stop!

1:

INTERVIEWER Yeah, yeah.

2:

GIGI: As it leaves the body, urine, in healthy men, it's sterile.

INTERVIEWER So you're pierced. And that's like, forever?

1:

GIGI: Yes.

BOBBY: You have a little ring or something.

GIGI: It's a bar.

BOBBY: A bar or whatever.

GIGI: So, but the plus side on all this was that before I restored my foreskin, I could feel nothing through a condom. But even before I totally regrew it just by keeping it covered around the clock, it became a moist membrane.

BOBBY: Really? I didn't think it could go back to being a moist membrane. Because it's covered. It's sort of like having facial hair, makes your skin underneath it very sensitive.

GIGI: Yeah. So what happens is-- what happened in the first few weeks of stretching it back out was I shed layers of skin on the gland of my penis. And--

INTERVIEWER I know.

2:

GIGI: It seems strange, but--

BOBBY: Don't give me that visual.

GIGI: But all this thick, calloused skin shed off. And all of a sudden, the nerve endings come up to the surface, and it became much smoother and softer, what it was supposed to be.

BOBBY: But it took two years to do it?

GIGI: No, no. That happened early on when I first started.

BOBBY: Oh.

GIGI: When it first started becoming a moist membrane again. Because what happens is-- it's kind of like when you're using your hands and you're doing a lot of rough work, you build up all these calluses. You stop doing heavy work with your hands and start using some hand lotion, and all of a sudden they get soft again.

BOBBY: Yeah. OK.

GIGI: And think what you can feel through a callus. When you have real thick calluses on your hand?

BOBBY: I don't have any.

GIGI: I know, but--

[LAUGHTER]

--think back when--

INTERVIEWER No, I can't. I can't say that in this show because we're going to have every woman calling in.

2:

[LAUGHTER]

GIGI: Think to a time, one time in your life, when you did some heavy work for a few days with your hands.

[LAUGHTER]

And--

INTERVIEWER They were mostly blisters. But I get your point.

1:

GIGI: They're callouses.

INTERVIEWER I get your point, I guess.

1:

BOBBY: I have calluses on my hand from walking with that walking stick all the time.

INTERVIEWER Oh, I'll bet. Yeah.

1:

INTERVIEWER Yeah.

2:

GIGI: And think what you can--

INTERVIEWER That's why you wear the fingerless gloves. Yeah.

1:

GIGI: How much can you feel through a callus?

BOBBY: Right, it's true. Yeah.

GIGI: But then when you start softening the hands again, think how much more sensitive and how much more receptive your feeling is without calluses. The same principle applies to the head of the penis.

And think about it, when you're walking and you're cut, when you're circumcised, it's constantly abraiding against your jeans or your underwear or whatever. When you're sleeping, it's getting rubbed against stuff, especially when you have these erotic dreams and you're kind of humping the sheep.

INTERVIEWER What?

1:

GIGI: [LAUGHS]

INTERVIEWER We're not going there.

1:

[LAUGHTER]

GIGI: But you're constantly braiding the skin and it's building up this callus material. Not as thick is what you get on your hands, but it's adding skin layers. And the nerve endings are receding.

INTERVIEWER Oh, I got you.

1:

INTERVIEWER But I would think on the plus side then, since you have built up this for one protective layer, yeah, it's not going
2: to be as sensitive when you don't want it to be sensitive.

INTERVIEWER Yes.

1:

INTERVIEWER So I'm just thinking of those times while you're uncut, you're walking down the street, and all the sudden you say,
2: ooh, jeez, that's really rubbing me quite the wrong way right now.

GIGI: But when you have the covering over it, it never rubs the wrong way on the gland.

INTERVIEWER No, I just picture it like--

2:

[LAUGHTER]

GIGI: No, it's doesn't pop out.

INTERVIEWER It's always an extra pop.

2:

GIGI: It doesn't pop out, unless I get a hard on.

[LAUGHTER]

And then I get enough of those, but it pops right back in.

INTERVIEWER OK, gotcha.

1:

GIGI: But I think the main thing is that we're given this myth that, oh, you've got to get it cut off. It's more hygienic, it's more--

INTERVIEWER Well, that's what I've been told all my life.

1:

GIGI: Yeah. Basically, as long as you take a bath daily, that's a real key.

INTERVIEWER Just keep it clean.

1:

INTERVIEWER Keep it dry.

2:

GIGI: Keep it clean. And whether you're circumcised or uncircumcised, it makes no difference. If you wash regularly and keep clean, you're not going to have problems with cancer.

INTERVIEWER There you go. Well, I guess guys learn that early.

1:

GIGI: If you don't wash--

INTERVIEWER If you want to have sex, keep it clean.

1:

INTERVIEWER Yeah.

2:

GIGI: If you don't wash, the risk for penile cancer goes way high.

INTERVIEWER Sure. But it's very small--

1:

INTERVIEWER But it's still a very low--

2:

[INTERPOSING VOICES]

INTERVIEWER Very small.

2:

GIGI: The other thing that I found interesting in this book-- and they talked about this-- is-- and I don't have the exact page right here. But they're kind of going over the incidents of people who have died of penile cancer or from complications of not being circumcised, which are extremely rare.

INTERVIEWER Oh, yeah. Yeah.

2:

GIGI: And penile cancer is something that would occur whether you're circumcised or not. It's a matter of hygiene. But they're comparing that with the number of people who have died or have had major complications from circumcision.

INTERVIEWER Oh, really?

1:

GIGI: And the number of people that have major problems is very high.

BOBBY: Much higher than the rate of penile cancers.

GIGI: Oh, much higher. Because during circumcision, right afterwards, you're susceptible to all kinds of infections.

INTERVIEWER Sure.

1:

INTERVIEWER Well, that's what I would think. Two big things would be infection and shock.

2:

GIGI: And shock. Yeah. The other thing is, during circumcision, there's several things that can go wrong. If they're using the electronic device to catheterize the circumcision, there's been many cases where the--

INTERVIEWER Cauterize.

1:

GIGI: Cauterize. There's been many cases where the instrument failed and fried the entire penis--

INTERVIEWER Oh, my God.

1:

GIGI: - --and left a little crispy charcoal. And they had to do reassignment surgery and turn them into girls.

INTERVIEWER Oh, great. And that doesn't work at all.

1:

GIGI: And that didn't work out.

INTERVIEWER We already had shows on that.

1:

GIGI: I mean in fact, the John Money case with Joan, John.

INTERVIEWER Yeah.

2:

GIGI: That was the case that happened in that case. there's a set of identical twins. They both got circumcised. And one of them, the cauterizing machine malfunctioned and fried his penis.

INTERVIEWER So they formed a vagina.

1:

GIGI: They turned John into Joan and tried to raise her that way without telling her. And she realized that--

INTERVIEWER Something inside so strong and you know that ain't me.

1:

GIGI: So there's a lot of complications with circumcision, which is a totally unnecessary surgery to begin with. It really started in a sense of trying to control little boys from masturbating or playing with themselves.

INTERVIEWER Well, you're never going to do that. And I think it's meant to be. It's a healthy thing. All kids play doctor, so get over it.

GIGI: But the other thing I always get [? asked ?] is--

INTERVIEWER And besides, you have sex probably, whether you're gay, straight, whatever, bisexual-- you're probably down the road, when you think about it, your, most often, sex partner's probably your hand.

GIGI: The other thing I'd like to kind of bring up, and that's I'm going to kind of end it on, is that just our bodies were designed and have gone through a process of evolution and of refinement and changes. Everything about our bodies has a purpose and a reason for being there. When we go in and start interfering with what we've been given--

INTERVIEWER Body hair.

1:

INTERVIEWER I would say, what about your appendix?

2:

GIGI: Appendix?

INTERVIEWER Appendix has no function.

2:

GIGI: It had at one time.

INTERVIEWER It had at one time.

1:

INTERVIEWER It had at one time, but it's--

2:

GIGI: And it's--

INTERVIEWER But we still all got 'em. [LAUGHS]

2:

BOBBY: Yeah.

INTERVIEWER But there are things that we are always in the middle of evolving.

1:

BOBBY: Yeah, we are in the process. But I think what I'm trying to say is that the foreskin was put there for a reason. It was to protect a very sensitive part of our bodies. But also to the design of the foreskin was that it would retract during sex so that we could really ultimately enjoy pleasure.

INTERVIEWER Got you.

1:

GIGI: And so mother nature gave us this kind of sheath to keep something very precious and good covered until it was ready for use. And then when it retracts, it's kind of like a flower blooming. And all of a sudden the petals come out, and it's like, wow.

[LAUGHTER]

Baby, baby.

[LAUGHTER]

BOBBY: You are one of a kind, GiGi.

GIGI: I know it.

[LAUGHTER]

And I guess what I'm trying to say is that if it ain't broke, don't fix.

BOBBY: There you go. That's right. That's right.

GIGI: And it can do so much good. I mean, and in this day of AIDS-- and I've heard this over and over again from a lot of men, oh, I don't want to wear a condom because I feel anything through it.

And I used to scream the same story until I did this restoration process. And for the first time, I could feel through a condom.

INTERVIEWER Good.

1:

GIGI: And all of a sudden, I realized the sensitivity that I had lost that had been taken from me. And the incredible feelings when you can re-- and the only unfortunate thing about restoring the foreskin, it doesn't quite 100% restore everything.

BOBBY: No, it doesn't.

GIGI: You can't because there's some scarring that occurs that can't be repaired. But I probably got about 85% of the sensitivity that was lost.

INTERVIEWER Not bad. Not bad, but it does take a long time to do it.

1:

GIGI: But I won't get the 100%.

INTERVIEWER No. OK.

1:

GIGI: But that was-- the trade-off was I got something back that. And that was what was so empowering for me was to do something with my body that I wanted to do that was against what had been done to me. And that was so self-empowering to be able to say, hey, I want this.

It took a long time. It took a lot of work, but it was worth it. And on that, I'll turn it back to you, Tim.

INTERVIEWER No, actually, I want you to tell us more about BiNet now because there's been some changes I hear.

1:

GIGI: Yes.

INTERVIEWER What's going on with BiNet?

1:

GIGI: We've decided to change our format. And we've gone to a monthly party instead of weekly meetings. So we're no longer having meetings for a while.

INTERVIEWER For a while.

1:

GIGI: We want to see how the party format goes.

INTERVIEWER OK, so how do you get invited to this party?

1:

GIGI: You can call the BiNet line, which is 713-467-4380.

INTERVIEWER 4380.

1:

GIGI: I did it. I remembered.

INTERVIEWER You remembered.

1:

GIGI: I'm not a dizzy [? bun ?] tonight.

[LAUGHTER]

Or you can visit--

INTERVIEWER Not tonight.

2:

GIGI: Or you can visit our website, which is [? www.flash.net/tildebihouse ?]

BOBBY: Good Lord.

GIGI: And I'm really not a dizzy [? bun ?] now.

[LAUGHTER]

INTERVIEWER Not really. Ooh.

2:

INTERVIEWER Now, I know that there's some talk about continuing a bi group at the community center. Tim over there is interested in keeping a bi group there. So maybe there's going to be a group that meets there still.

GIGI: Who knows?

INTERVIEWER But who knows?

1:

GIGI: We'll have to see on that.

INTERVIEWER We'll have to see on that.

1:

GIGI: But it's BiNet's here. And I do want to say not only come to BiNet Houston, but join BiNet USA.

INTERVIEWER Yes!

1:

GIGI: We're in need of you-- especially right now, we are launching our executive director. We're starting up programs now. This is a crucial time. Join BiNet USA.

You can join easily by going to www.binetusa.org.

INTERVIEWER: That's easy.

GIGI: Very easy.

INTERVIEWER: Nice.

GIGI: Even a dumb blonde like me can ring it right off.

INTERVIEWER There's nothing dumb about you, honey.

1:

[LAUGHTER]

Tony, thanks for being here.