

# Slippery desire: Women's qualitative accounts of their vaginal lubrication and wetness

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*Feminism & Psychology*

2017, Vol. 27(3) 280–297

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DOI: 10.1177/0959353516674239

journals.sagepub.com/home/fap



## **Abstract**

In the shadows of the cultural obsession with male erections, women's vaginal lubrication and experiences of wetness have received surprisingly little academic attention. Framed largely as a biological or normative behavioral "sexual function" issue and not as a subjective experience, no previous qualitative studies have asked women to discuss their feelings about their vaginal lubrication and wetness. This study analyzed semi-structured interviews with 20 women from a diverse 2014 community sample collected in a large Southwestern U.S. city in order to examine American women's subjective feelings about their own vaginal lubrication and wetness, particularly the sensations they experience and the meanings they make around wetness. Results revealed four themes in how women described vaginal lubrication: (1) wetness as pleasure, joy, and connection; (2) wetness as physical and biological phenomenon; (3) anxiety about insufficient wetness; and (4) having excessive or "too much" wetness. Tensions surrounding women's sexual anxieties and where they place responsibility for "too little" wetness is discussed in tandem with analyses of how pleasure and arousal may (or may not) overlap with feelings about sexual normality and health. Ultimately, renewed attention to the complexities of women's sexual arousal and function, particularly in stark contrast with pharmaceutical efforts to medicate women's sexual arousal and reduce it to "brain chemistry," are examined.

## **Keywords**

women's sexuality, sexual arousal, sexual desire, vaginal lubrication, women's bodies, sexual dysfunction, pleasure, medicalization, sexual satisfaction

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The recent FDA approval of Addyi (Flibanserin) on 18 August 2015 signals a shift in thinking about women's sexual function and dysfunction in the United States. Despite clear evidence that the drug barely increased the numbers of "sexual events" during an average month, that the placebo effect was uncommonly strong for this drug, that it posed serious health risks, and that the alcohol interactions were tested overwhelmingly on men instead of women (Boseley, 2015; Kroll, 2015; Streicher, 2015), the drug is now widely available. The highly conflictual FDA approval process for Flibanserin revealed a number of underlying tensions about what scientists know, how they conceptualize sexual "failure" and adequate research designs, and what they never thought to ask about women's sexuality. In particular, clear notions of sexual dysfunction as located within the individual woman rather than within the context of a couple or partnership seemed to underlie lobbying efforts for Flibanserin. Further, pharmaceutical companies largely avoided studying women's subjective accounts of sexual pleasure, desire, lubrication, arousal, and interest, instead aiming for "brain chemicals" that they could alter (Boseley, 2015; Cacchioni, 2015; Streicher, 2015). After failed attempts to artificially induce women's vaginal lubrication with "female Viagra" in 2004 (Harris, 2004), Flibanserin has now bypassed increased blood flow and arousal for women and has instead targeted the interplay between dopamine, norepinephrine, and serotonin to induce sexual desire, moving the pharmaceutical lens from vaginal lubrication to the brain's desire for sex.

When looking at the existing literatures on women's subjective accounts of vaginal lubrication and wetness, shockingly few studies appear, though it does seem clear that vaginal lubrication is constructed in the existing literature as a tangible indicator of women's "normal" sexual functioning and of sexual arousal. In the shadow of the near cultural obsession with male erections in the Western world – not only in academic writing about sexuality but also in the symbolic realm (Gohr, in press) – women's vaginal lubrication has primarily been framed as a sexual dysfunction issue rather than something connected to desire, pleasure, satisfaction, or partner connection. When researchers have studied or measured vaginal lubrication, they have approached it as a physical response rather than a social one (for a critique of this, see Tiefer, Hall, & Tavris, 2002) and have largely ignored any vaginal lubrication that occurs outside of the context of penile–vaginal intercourse (e.g. masturbation, same-sex sexual contact). These oversights not only promote the idea that vaginal lubrication exists for intercourse but they also overwhelmingly ignore women's subjective stories about how they feel about their wetness.

In an effort to move away from highly clinical interpretations of vaginal wetness and instead ask women to narrate their complex experiences with their vaginal lubrication, this study examined qualitative narratives from semi-structured interviews with 20 U.S. women with diverse backgrounds (race, age, current relationship status, parental status, class backgrounds, and sexual identities) in order to examine women's feelings about, and subjective interpretations of, vaginal lubrication and wetness. These discussions provide a crucial link between women's understanding of wetness, feelings of self-worth, and satisfaction with

their partners. Conversations with women illuminated four themes that appeared in women's responses while showcasing the powerful complexities of how women locate the "cause" of wetness within themselves, their partner's connection with them, their personal joy, or in biology.

## Literature review

### *What do we know about vaginal wetness?*

While no studies have used interviews to study women's experiences with vaginal lubrication and wetness, a small handful of studies have examined, using quantitative measures, vaginal wetness as an indicator of biological sexual function (Hilber et al., 2010; Leclerc-Madlala, 2001; Leiblum, Seehuus, & Brown, 2007; Tanner et al., 2009). Other related work has examined women's experiences with synthetic lubricants. For example, one study found that the majority of women in the U.S. have used lubricants (65% have ever used them, 20% have used them in the past 30 days), primarily to increase pleasure and decrease discomfort (Herbenick, Reece, Schick, Sanders, & Fortenberry, 2014). Another recent study of 2451 U.S. women found that they preferred penile-vaginal intercourse to feel more wet, were more easily orgasmic when sex was wet, and thought their partner preferred sex to feel more wet than dry; further, women in their 40s felt more positively about using synthetic lubricants than did women under the age of 30 (Jozkowski et al., 2013). Three studies mentioned vaginal wetness in relation to condom use and public health (Higgins, 2007; Higgins & Hirsch, 2008; Skafta & Silberschmidt, 2014), while one study found that women with sexual pain also reported more frequent use of synthetic lubricants than did women without sexual pain (Sutton, Boyer, Goldfinger, Ezer, & Pukall, 2012). Still, these studies tell us very little about women's subjective feelings about vaginal lubrication or how they experience their natural lubrication.

A somewhat larger body of studies have examined women's loss of vaginal wetness in relation to aging, medical problems, or taking medications. Older, post-menopausal women experienced decreased vaginal lubrication and more sexual dryness compared to younger women (Hayes & Dennerstein, 2005; Meston, 1997), while women with high blood pressure reported less vaginal lubrication and more problems achieving orgasm than women with normal blood pressure (Franklin, Kanigel, & Lehrman, 1998). Women who took injectable contraception also reported problems with vaginal wetness as a side effect of the drug (Smit, McFadyen, Zuma, & Preston-Whyte, 2002).

Some cross-cultural work has examined women's experiences and perceptions of vaginal wetness and dryness as cultural ideals. One large-scale cross-cultural study of 11 countries (UK, Germany, Japan, Australia, Canada, Spain, Italy, Mexico, Argentina, Brazil, and Thailand) found that perceptions of vaginal dryness varied from a minimum of 5.8% in Italy to a maximum of 19.7% in Brazil; perceptions of whether it bothered women varied from 5.6% in the UK to 26.4% in Germany, with women over age 50 reporting more dryness than women under 50

(Leiblum, Hayes, Wasner, & Nelson, 2009). In sub-Saharan Africa, many women practice “dry sex” by inserting various substances to dry up their normal lubrication fluid and give the impression that the vagina is “virginal” and “tight”; such practices often lead to damage to the cervix and vaginal canal, condoms breaking, and can increase the risk of HIV transmission (Civic & Wilson, 1996; Levin, 2005). These risks are especially concerning for sex workers who must practice “dry sex” to please clients (Schwandt, Morris, Ferguson, Ngugi, & Moses, 2006).

### *The problem of sexual function and dysfunction*

Research on sexual dysfunction has also overwhelmingly blamed women for their problems and located the problems as medical, biological, and physiological rather than social (e.g. lack of desire as about the body “failing” rather than about relationship or communication problems). To address this, The New View, a group dedicated to challenging the medicalization of sex, argued that sexual problems connect to sociocultural, political, and economic factors, partner and relationship factors, psychological factors, and medical factors (Tiefer, Hall, & Tavis, 2002). Some feminist critics have also challenged the assumed overlap between desire and arousal, particularly in relation to language in the DSM about women’s arousal and desire as essentially the same thing (Graham, 2010).

Debates exist about whether there are gender differences in how women experience arousal within their genitals and arousal within their minds. One study that measured women’s subjective arousal and physiological arousal after exposing participants to erotic stimuli found that these were largely in sync for women (Rellini, McCall, Randall, & Meston, 2005), while another study found that, compared to men, women had far greater discrepancies between self-reported and genitally measured sexual arousal (Chivers, Seto, Lalumiere, Laan, & Grimbos, 2010). This implies that women’s sexual desire and arousal may or may not match their physiological responses. Women also desired shorter periods of intercourse compared to men (Miller & Byers, 2004), perhaps due to discomfort with intercourse once their natural lubrication becomes dry.

Researchers who study sexual dysfunction have noted that women attach feelings of shame, guilt, and depression to various sexual dysfunctions. One study of women’s sexual distress found that emotional problems (individually or with a partner) predicted sexual distress far more than physical aspects of sexual dysfunction related to vaginal lubrication and arousal (Bancroft, Loftus, & Long, 2003). One study of vulvodynia (chronic vulvar pain) found that most women blamed themselves as “failures” when they experienced pain during penile–vaginal intercourse, resulting in feelings of shame, guilt, and decreased sexual desire (Ayling & Ussher, 2008). Problems with lubrication were associated with distress, depression, and lower partner communication (Hayes et al., 2008). Further, while most sexual problems for women decreased with age, vaginal dryness increased with age, causing marked distress in older women who experience lack of vaginal lubrication (Laumann, Paik, & Rosen, 1999). Connections between pressure to orgasm, women’s self-blame, lack of reciprocity, and power imbalances between men and

women have also been noted in the literature (Fahs, 2014; Braun, Gavey, & McPhillips, 2003; Jackson & Scott, 2002), suggesting numerous avenues for women to feel distressed about their sexual practices, arousal patterns, and sensations.

### *Hard versus soft: Erections and wetness*

The relative lack of attention to women's narratives about vaginal lubrication, particularly those outside of penile–vaginal intercourse, starkly contrasts the near cultural obsession with men's erections found in popular, medical/pharmaceutical, and research literatures. An abundant number of studies have directed attention to men's erections, seeing them as a benchmark for sexual health and well-being (Adams, Wright, & Lohr, 1996; Rosen, 1996; Rowland, Georgoff, & Burnett, 2011), while a smaller body of work has criticized this obsession with erections and sperm as problematic for sexual health, feminist politics, and relationship well-being (Loe, 2004; Moore, 2008; Potts, Grace, Vares, & Gavey, 2006).

Very few studies have asked men to narrate their experiences with erections and sexual arousal. One study of men in New Zealand found that the cultural stories of “sex for life” that encourage older men to have penetrative sex during old age often stand in contrast to men's wishes to relate sexually to their partners in other ways that they consider healthy, normal, enjoyable, and satisfying (Potts et al., 2006). Further, men who used Viagra did not experience it as a mechanistic intervention into a “disorder” but saw it in much more complicated and emotional terms (Potts, Grace, Gavey, & Vares, 2004). This suggests that both vaginal lubrication and erections are constructed more as medical, clinical entities rather than complicated subjective experiences of arousal and connection.

### *Research questions*

Given the relative lack of studies examining women's narratives about vaginal lubrication and wetness, this study began with several research questions to guide its analysis: First, what do women say about their vaginal wetness and how do they frame vaginal wetness in relation to themselves, their partners, and their biology? How do women's ideas about vaginal lubrication map onto, and differ from, clinical understandings of “sufficient” and “insufficient” lubrication for intercourse and the focus on penile–vaginal intercourse? Is wetness a source of shame, embarrassment, and anxiety, or is it a source of pleasure, joy, and satisfaction (or both)? Finally, how do women's ideas about vaginal lubrication and wetness connect to bigger stories around gender, power, and sexual scripts?

### **Method**

This study utilized qualitative data from a sample of 20 adult women (mean age = 35.35, SD = 12.01) recruited in 2014 in a large metropolitan Southwestern

U.S. city. Participants were recruited through local entertainment and arts listings distributed free to the community as well as the volunteers section of the local online section of Craigslist (for the benefits of using Craigslist to recruit participants see Worthen, 2014). Both outlets reached wide audiences and were freely available to community residents. The advertisements asked for women ages 18–59 to participate in an interview study about their sexual behaviors, practices, and attitudes. Participants were selected only for their gender, racial/ethnic background, sexual identity, and age; no other pre-screening questions were asked. A purposive sample was selected to provide greater demographic diversity in the sample: sexual minority women and racial/ethnic minority women were intentionally oversampled, and a diverse range of ages was represented (35% or 7 ages 18–31; 40% or 8 ages 32–45; and 25% or 5 ages 46–59). The sample included 60% (12) white women and 40% (8) women of color, including two African-American women, four Mexican-American women, and two Asian-American women. For self-reported sexual identity, the sample included 60% (12) heterosexual women, 20% (4) bisexual women, and 20% (4) lesbian women (though women's reported sexual *behavior* often indicated far more same-sex eroticism than these self-categorized labels suggest). All participants consented to have their interviews audiotaped and fully transcribed and all received US \$20.00 compensation. Identifying data were removed, and each participant received a pseudonym to ensure anonymity. Participants directly reported a range of socioeconomic and educational backgrounds, employment histories, and parental and relationship statuses.

Participants were interviewed using a semi-structured interview protocol that lasted for approximately 1.5 to 2 hours, where they responded to 32 questions about their sexual histories, sexual practices, and feelings and attitudes about their sexuality and their body. The questions asked prior to the questions on vaginal lubrication included best and worst sexual experiences, feelings about the different sensations of sex, and feelings about sexual satisfaction. Questions in the study emphasized women's subjective feelings about sexuality and not behavior per se. This study and the specific interview protocol were both approved by the Institutional Review Board. All participants were interviewed by the first author in a room that ensured privacy and confidentiality of responses. In the whole interview guide, questions included aspects of their best and worst sexual experiences, attitudes about good and bad sex, feelings about their bodies and sexualities, and questions about body image. For the purposes of this study, women were asked four questions: "Tell me about your experiences with vaginal wetness or lubrication"; "What does it feel like to be wet?"; "Does wetness happen easily or is it more difficult for you?"; and "What emotions do you have about wetness?" These questions were scripted, but served to open up other conversations and dialogue about related topics, as follow-up questions, clarifications, and probes were free-flowing and conversational. No specific questions were asked about positive or negative experiences with vaginal wetness.

Responses were analyzed qualitatively using a phenomenologically oriented form of thematic analysis that draws from feminist theory and gender theory

(Braun & Clarke, 2006). This type of analysis allowed for groupings of responses based on women's attitudes and feelings (e.g. excessive wetness; personal feelings of anxiety). This method of analysis also supported an examination of the sometimes competing or contradictory beliefs women had about vaginal lubrication and wetness. To conduct the analysis, I familiarized myself with the data by reading all of the transcripts thoroughly, and I then identified patterns for common interpretations posed by participants. In doing so, I reviewed lines, sentences, and paragraphs of the transcripts, looking for patterns in their ways of describing attitudes about vaginal lubrication and wetness (Braun & Clarke, 2006). I selected and generated themes through the process of identifying logical links and overlaps between participants. After creating these themes, I compared them to previous themes expressed by other participants in order to identify similarities, differences, and general patterns. I then utilized a small team of readers who read the transcripts separately. In the course of meeting together, we refined and reworked the themes, until we arrived at a mutually agreed upon list of four themes that reflected women's narratives about wetness.

## Results

All participants had something to say about their experiences with vaginal wetness and lubrication, though how women discussed their feelings about this aspect of their bodies differed in notable ways. While most women framed wetness in positive terms, conflicts about its meaning also arose. This study identified four themes associated with women's feelings about vaginal lubrication and wetness: (1) wetness as pleasure, joy, and connection; (2) wetness as physical and biological phenomenon; (3) anxiety about insufficient wetness; 4) having excessive or "too much" wetness. As evident in the descriptions below, some participants' responses overlapped between themes in that one participant's responses fit into multiple themes.

### *Theme 1: Wetness as pleasure, joy, and connection*

The majority of women identified feeling wet as a pleasurable experience. Specifically, nine women discussed wetness as primarily about pleasure, joy, and connection rather than about feelings of anxiety, partner problems, or excessiveness. Three women felt that wetness signaled connection to a partner and an awareness of positive relationship dynamics. Daphne (33/White/Heterosexual) felt that wetness helped her to get in touch with her own body and understand connections to others:

Sometimes I can notice there's some kind of secretion and it makes me check in, like 'What's going on with my body?' With someone I'm having sex with, it's even more of a turn on when you're playing around and then they touch down in that area and discover that you're wet. Everything is so inner with us so it's almost like they have to go a bit further within to really find out what's going on.



Joyce (21/Filipino/Bisexual) described wetness as a way of knowing she felt desire for someone:

If there's a connection with the person that comes with eye contact, dialogue, conversation, competition, if someone impresses me in some shape or form then I do feel more wet and I have more desire for that person. With the mind/body connection I don't restrain my mind from having desire for people so I think my body responds to that.

Iris (22/Mexican-American/Lesbian) connected wetness to feelings of love and satisfaction:

It's a big factor in creating pleasure and then also knowing that your partner is pleased. I like wanting it. It's a lot of arousal. I don't feel arousal if I'm not emotionally connected to someone, so I guess when I'm wet, it's *love* that I feel. I don't get that arousal without feeling love.

Connection to partners and desire for others represented a primary way that women imagined their feelings about wetness, as powerful emotional feelings of connection-inspired arousal.

Wetness also signaled a way for women to feel pleasure and comfort in their own bodies. Antonia (25/Mexican-American/Lesbian) felt that wetness allowed her to feel normal, content, and aware of her body:

It is what it should be. I'm never embarrassed about it. I think that you can just feel it. There's the constant normal day-to-day quality, just feeling normal. You can kind of feel like a vaginal discharge in a way when you're around arousing thoughts, images, people. Their actions sometimes, depending on who it is, and the way they touch me can do that for me, or the way somebody dances can do that for me.

Bea (37/Filipina/Heterosexual) described feeling wet easily and how that connected to her anticipation of pleasure:

I can get pretty wet pretty fast. So if we are not going to have it, then I don't want him playing with me! I'm like 'Don't go touching those areas if you don't plan on following through.' It's like walking around in a wet diaper almost. I like the feeling though, imagining that something's going to happen.

These two examples emphasize women's sense of connection to their bodies, awareness of how to get wet, and pleasure from feeling arousal.

## *Theme 2: Wetness as physical, biological phenomenon*

As a second theme, four women described wetness as a physical, biological phenomenon and did not relay any particular feelings about it aside from its functionality. For example, Yvonne (41/Mexican-American/Heterosexual) described her lack of



emotions about it when I asked her about her emotions about wetness: "That's a weird question. I don't think I have any emotions about it. I don't dislike it, but I don't know how to describe any feelings about it. It's just wet and warm." Emma (42/White/Heterosexual) also described it in highly physical and biological terms rather than emotional terms: "It feels slippery. I've always been ready to go when I needed to be. It doesn't take much. I don't have any real emotions about it. It's just my body. It tells me I'm ready." In these narratives, wetness did not necessarily connect to women's emotions but instead to their sense of readiness for sex.

Two women also described wetness as connected to their bodies behaving normally. Zari (43/African-American/Heterosexual) described wetness as normal and not worth much analysis:

I think you're supposed to be that way. I figured it's normal. That's the only feeling I have is that you're supposed to be that way. I always seem to be wet when I'm supposed to be and dry when I'm supposed to be so I don't have a problem with it. I think it's just a normal thing I guess.

Veronica (49/African-American/Heterosexual) also described wetness as a straight forward biological response that signaled good health: "I see it as something that's there when I'm healthy and in good physical shape. It's the body's way of showing that you're ready to have sex. It's how I know I'm normal." This language of health, biology, and normality differed from other women's constructions of wetness as about relationships, personal body image, and identity.

### *Theme 3: Anxiety about insufficient wetness*

Eleven women mentioned having anxiety about insufficient wetness, sometimes in relation to what they saw as their own bodily failure to become wet and sometimes in relation to partner dynamics, though such a line was not always easily drawn in their accounts. Six women mentioned feelings of anxiety related to their vaginal lubrication and wetness, blaming lack of wetness on their failing personal bodies rather than partner dynamics. For example, two middle-aged women mentioned that going through menopause had negatively impacted the ease of becoming wet. Kathleen (49/White/Heterosexual) said of her post-menopausal state:

It's frustrating as a woman when you know your desire is there but your body is like 'Nope, sorry it's not there.' It's not a good feeling. I think it's more hormonal rather than lack of interest. Like all of a sudden, it's just not there when it was there a minute go. Where'd it go?

Gretchen (52/White/Heterosexual) also described frustration about not getting wet as easily following menopause:

Now that I've gone through menopause, it kind of makes me sad. I was never ashamed of it before. It was always a good thing and things were working the way

they should. Now, it's one of the side effects of menopause. Less estrogen and less vaginal fluid production, and I'm not happy with it because it is signaling the end of reproduction but it's also like 'Oh you, you're old, you've become invisible.'

This sense of becoming invisible after menopause and its connection to losing the ease of vaginal wetness shows how wetness connects to ideas about aging, self, and value as well as sexual desire.

Three younger women also struggled with vaginal wetness because they felt that their bodies did not work. The relationship between this perceived lack of function and its impact on partner dynamics was tricky as these women saw the problem as an individual one. Corinne (21/White/Bisexual) talked about her difficulty with wetness related to her own body:

Wetness is more difficult for me. I have no idea why. I've always wondered. I went to the doctor and talked to her about it because even sometimes when we're going to have sex it's hard for me, but she said that it's normal. For some people it's easy and sometimes it's harder. Some people have to use lubrication. When I have sex without enough lubrication, it feels like scraping, forceful, too much rubbing and friction.

Trish (19/White/Lesbian) felt that alcohol impaired her vaginal wetness:

Sometimes it's frustrating when you can't get as excited, especially if there's drinking involved and so you get this super horny feeling but that alcohol stops you from getting wet. I'm like, 'Wait, why am I not excited? I feel exactly like I am. I feel like I should be wet but I'm not.'

In these examples, women located their difficulties with wetness as failing to measure up to what they *should* feel, however perceived.

Five women mentioned feeling that they had insufficient lubrication because of certain dynamics that happened with their sexual partners, assigning responsibility to the couple rather than to themselves for their wetness (though again, such a line is tricky to define in a definitive sense). Some women described this as a problem with the technical aspects of partnered sex. Gretchen (52/White/Heterosexual) remembered that even when she did feel wet, her male partner would insist on having vaginal sex for too long and she would then dry up:

With one boyfriend, he would go on for hours and hours and it was just like my body had kind of run out of fluid and hadn't had a chance to reload yet. The pleasure was gone and then it became more friction and rubbing, like I was dehydrated.

Lila (36/White/Heterosexual) felt that partnered sex had to involve a certain kind of manual stimulation or else she would not become wet:

I just need some digital fingers and I'm good to go, like on the top, not in. I'll tell them right away to go counter-clockwise and I will place their fingers right where they need

to be. If they don't do that, I won't become wet. If they're doing it correctly, I'll become wet, but otherwise if they're far off I won't.

In these examples, women assigned responsibility for lack of wetness to a lack of partner skill or awareness of their sexual wishes.

Two women described having insufficient lubrication for pain-free intercourse, but they still wanted to proceed in order to please a partner. Rachel (39/White/Bisexual) discussed her feelings about having painful sex with her partner:

When I'm not wet, it's painful sex. It doesn't feel comfortable. I think to myself, 'Okay this is uncomfortable. My body's slow. Things aren't happening like I want them to.' It feels like a mind-body disconnect, but he wants it so I try it. My husband and I have kids, so it's like there are kids around all the time so when we have a moment it's like five minutes is all we got. I can't necessarily have the ten minute warm-up I would love so I'll take what I can get. But I'll tell you, I pay for it later.

Naomi (18/White/Bisexual) said that she kept having sex despite not wanting to and became dry:

It was really hard. We were doing it a lot and I got dry after a while and it hurt so bad. I kept going because he was hot and I knew that I wasn't gonna be able to see him very much after that.

This sense of settling for less-than-ideal partner dynamics also contributed to women's lack of vaginal lubrication and wetness.

#### *Theme 4: Excess: Having excessive or "too much" wetness*

As another way that women criticized themselves for their wetness, three women described feeling like they had excessive or "too much" wetness, with one believing that this connected to her ability to ejaculate and two others believing that they produced too much lubrication. Gail (46/White/Bisexual) worried that something was wrong with her because of her excessive wetness:

Sometimes I wonder, 'Is there something wrong with me?' because I'm very, very lubricated and wet depending on what time of the cycle I'm in. Sometimes I wonder, 'Is that something I need to get checked out?' or 'Is that normal and I should just be happy that I have it?'

Felicity (20/White/Heterosexual) also felt some anxiety about her extreme wetness combined with worrying about how she tasted to her boyfriend:

I tend to be pretty damp. I have a *lot* of lubrication. My boyfriend usually complains because I don't drink a whole lot of water and he can taste it. For him, sex can be bad

if I taste really bitter and sometimes I do taste really bitter and that's something I've tried really hard to control.

These feelings about “excessive” wetness connected to other anxieties about being normal or tasting bad to a partner, again revealing how “noise” from other aspects of women’s sexuality impacts their feelings about vaginal lubrication.

One woman also expressed uncertainty about her body’s production of vaginal lubrication in relation to the idea of “peeing” or “squirting.” Martha (52/White/Heterosexual) described feeling embarrassed by her wetness during arousal:

It was embarrassing. I squirt. When I did it with my husband, he was like, ‘You just peed on me,’ and I said, ‘No I didn’t.’ And he got up and took a shower. I thought, ‘Well, this must be bad.’ But my husband likes it. It means I had an orgasm. I feel water gushing out of me, sometimes too much water.

This sense of wanting a partner to validate the “embarrassment” of too much lubrication and/or “squirting” signaled her awareness of not only her own pleasure but also her partner’s experience of sex.

## Discussion

Wetness is an often overlooked aspect of women’s sexuality, hidden beneath the more performative or measurable or well-studied dimensions of orgasm and (for men) erections. Women’s sexual subjectivities about sexual “function” overlap here with sexual performance and sexual desire, making women’s feelings about wetness an interesting subject of inquiry for feminist-minded critical sexuality studies researchers. This study found that women’s attitudes about their vaginal lubrication and wetness showed great diversity in how women interpreted their body’s arousal responses, revealing new insight about women’s subjective feelings about embodiment, arousal, and sexual functioning. The divide between women immediately seeing wetness as a sign of their anxiety about wetness – either personal anxiety related to their own bodies or couple anxiety related to partner dynamics – compared to women seeing wetness as a sign of pleasure, joy, connection, or biological normality/health shows the diversity women have when thinking about their physical arousal responses. Because researchers have not studied this subject beyond its connection to highly clinical notions of sexual dysfunction (and the related area of pharmaceutical “interventions” to treat low sexual arousal in women), these varied responses reveal the importance of soliciting women’s narrative responses in tandem with, or instead of, their physiological arousal patterns. Because women cannot compare their own wetness to many other women’s bodies (except for women who have sex with many other women), most women seem to have internalized some ideal version of wetness that they evaluated themselves against; we do not yet know whether partner attitudes impacted women’s feelings about vaginal wetness (Hoffman et al., 2010) or whether women self-generated notions of “proper” lubrication.

Women's stories about wetness highlighted some key tensions that exist in the study of women's sexuality more broadly. For example, are "problems" with arousal located in the individual or in the couple? Should women be "treated" for problems with arousal, or should they work on their couple dynamics, communication, expression of sexual needs, and relationship issues? This study suggested that women who struggled with wetness sometimes assigned responsibility to their own bodies (e.g. menopause impacting ability to become wet) and sometimes saw it as related to partners (e.g. not having enough time to become aroused because of a partner rushing). The implications of this for clinical practitioners, medical providers, and (particularly in light of Addyi/flibanserin's recent release onto the market) the pharmaceutical industry seem notable. How women understand their sexual arousal patterns and wetness, and what emotions they attach to wetness, can connect to how they view their sexual relationships and their bodies more broadly. For example, those women who chose to have vaginal sex despite feeling "dry" often did so to please a partner, which relates directly to literatures on sexual compliance (Katz & Tirone, 2009; Vannier & O'Sullivan, 2010).

Further, women sometimes saw their vaginal lubrication as "excessive," signaling yet another area where stories of excess and being "too much" follow women around. Women already struggle with accusations of "excess" in relation to their emotional lives (Sachs & Blackmore, 1998), menstrual cycles (Stubbs & Costos, 2004), body hair (Fahs, 2011), and body weight (Spitzack, 1990); notably, even something as personal and intimate as vaginal lubrication also seemed to absorb these narratives of excess. That women imagined their wetness as "too much" or even as medically concerning (see Gail's narrative) connected to a larger cultural story of women's bodies "failing" either by being "insufficient" or by being "too much."

On a more positive note, many women seemed to experience their vaginal lubrication and wetness as a sign of connection, pleasure, and joy, finding ways to feel comfortable in their bodies and close to their partners. Women imagined their arousal in relation to not only sex per se but also people, activities, moods, anticipation, imagination, states of mind, or even dancing. This description of the erotic – of what women imagined as connected to their body's responses of excitement – went far beyond the notion of mere "stimulation." Rather, women talked at length about arousal as connected to things that extended far beyond sexual technique (e.g. being looked at in a certain way, emotional connections, taking time or feeling rushed, desiring and feeling desired, use of alcohol, etc.), complicating and refuting the idea that wetness merely arises from certain kinds of touching or stimulation alone.

For women who imagined their wetness as connected to physical and biological processes, an emphasis on health and well-being appeared. Seeing wetness as a biological response did not preclude their appreciation of it as a sign of health and wellness. The sense that women's bodies are wet and dry on demand, that they can control their body's responses and their experiences of sexual arousal, showed women as embracing agency, empowerment, and control, even when they did not frame wetness using emotion language. Feeling at ease with sexual arousal also

contrasts with the stories that the pharmaceutical industry promotes, as comfort, satisfaction, pleasure, and relaxation (emotions women seemed to feel about their wetness quite often in this study) cannot serve as good marketing points for an industry hell-bent on medicalizing women's sexual desire and framing all women as "deficient." In this regard, this study's results are reasonably hopeful and present a counter-narrative to the story that women find their sexual arousal universally distressing and troubling.

In general, these findings suggest that women's experiences of "wet embodiment," that is, imagining wetness, having emotions about wetness, giving narrative to wetness, or discussing the meaning of wetness, is largely without a pre-existing script. Unlike the later questions I asked in the study about menstruation (another bodily fluid with clearly scripted meanings around "grossness" and needing "management"), wetness seemed more difficult for women to discuss in an emotional sense in part because it is largely invisible (or, more accurately, *made* invisible) in mainstream culture. This status impacts how women described wetness, as their reference points were more diffuse and difficult to access compared to other bodily fluids like menstrual blood, urine, feces, and breast milk.

### *Limitations and future directions*

Certain research decisions may have affected this study's results, as the choice for wording the interview questions may have captured only some, but certainly not all, of the facets of women's ideas about vaginal lubrication and wetness. For example, asking about women's emotions about wetness may have pushed some women to think about wetness using emotion language, while others felt puzzled or confused by the question. Future studies could more closely assess women's ideas about *why* they become wet (or not) and how this connected to their ideas about their body's responses versus couple or partner dynamics. Specific questions about how women talk about wetness to others, how they imagine its consistency, and how they came to understand that their bodies could become wet could all constitute areas for future research. Researchers could also ask about other markers of women's sexual arousal (e.g. nipple hardness, ability to orgasm) and how they feel about those aspects of their sexuality, just as they could ask more questions about women's use of synthetic lubricants and its relationship to sexual arousal, pleasure, and partner dynamics. (Notably, no women directly discussed using, or not using, lubricants, which is something that future studies should ask directly about. See Hensel et al., 2015 and Schick et al., 2015 for two large-scale studies of lesbian and bisexual women's lubricant use with partners.)

Wetness during masturbation could also be an interesting target for future research, as none of the women in this study mentioned wetness in the context of solo sex. It also seemed notable that, aside from Hensel et al. (2015) and Schick et al. (2015), which both analyze lesbian and bisexual women's lubricant use, *no other previous research* has ever asked lesbian and bisexual identified women to describe their experiences with wetness, as most previous research incessantly focused on penile-vaginal intercourse as the "reason" for wetness. Future research

could specifically target larger numbers of sexual minority women to discuss arousal, lubrication, and wetness. Research could also directly compare women's discussions of orgasm (often seen as a partner "accomplishment") with wetness (often seen as a mixture of individual and partner efforts) as a way to assess the emotional labor and performance dimensions of women's sexuality. Finally, while this study drew upon a sample far too small to draw any conclusions along race, class, and sexual identity lines, it also seemed notable that women of color in this study were far more likely than white women to describe their feelings about wetness in positive terms, either related to biology or to their feelings of pleasure and connection. Future research could test this using quantitative measures and could use a much larger sample size to assess such patterns.

Ultimately, this study emphasizes the importance of women's qualitative narratives about wetness in an age where pharmaceutical companies are seeking to medicate and "normalize" a reductive vision of women's sexual arousal and desire to have sex. Further, given that emphasis on men's arousal is often constructed as primary and important, while women's arousal is seen as secondary and forgotten (often because synthetic lubricants can seemingly substitute for the functionality of wetness), this study suggests that attention to wetness both within and outside of medical discourses is crucial to understanding women's sexuality. As these narratives reveal, women's ideas about wetness extend far beyond notions of feeling stimulated and aroused by specific actions, as they instead focused on complicated notions of body image, partner communication, desire to please partners, feelings about aging, concerns about excessiveness, joy in being with a partner, and appreciation of the body's natural processes (among others) to describe vaginal lubrication. These aspects of women's arousal will continue to evade and elude the reach of what pharmaceutical companies can medicate and, as such, reveal the power and complexity of women's sexuality as a flexible, fluid, and defiant entity.

### **Acknowledgements**

Special thanks to Corie Cisco, Rose Coursey, Eric Swank, and the Feminist Research on Gender and Sexuality Group for their contributions to this manuscript.

### **Declaration of conflicting interests**

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

### **Funding**

The author(s) received no financial support for the research, authorship, and/or publication of this article.

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