

The Construction of Vulvovaginal Knowledge:
An Analysis of the Clitoris, G-spot, and Sexual Pleasure

Science, Technology, and Society Senior Thesis

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This thesis is for anyone who has ever felt confused, ashamed, curious, or excited about their vulva and vagina and its potential for pleasure. I hope the following pages can provide some clarity, solace, and hope.

Introduction

In this thesis I discuss the ways in which information regarding vulvovaginal pleasure has been prescribed throughout time with a special focus on the construction and upholding of the G-spot and the clitoris as central pleasure locations for people with vulvas and vaginas. I argue that knowledge is less discovered than created and that knowledge regarding vulvovaginal pleasure is heavily influenced by various individuals and institutions that embody the social consciousness of the time. This piece will serve as an exploration of the construction of social and scientific knowledge through the lens of human sexuality; in this case through explicit analysis of social and scientific discourse surrounding the clitoris and the G-spot. There are many aspects of sexuality that have been sold to the public as objective truths, however after scientific inquiry and discovery, many ideas have been overturned as erroneous or incomplete. The following chapters will analyze the history and politics of how the G-spot and the clitoris have come to be the focal points in science and societies' search for the ultimate region of vulvovaginal pleasure. Furthermore, this thesis will focus specifically on what discourses have been amplified and silenced, what is deemed important, and why.

The analysis of the G-spot and clitoris fits within the foundational framework of Science, Technology, and Society Studies (STS). STS investigates how knowledge is created and does so by placing emphasis on the ways in which humans influence knowledge with the understanding that science is ultimately a human product based on human endeavors and as such the circumstances and social attitudes from which the knowledge is produced are of the utmost importance. STS is described by Sismundo, author of *An Introduction to Science and Technology Studies* by stating, "The field investigates how scientific knowledge and technological artifacts are constructed. Knowledge and artifacts are human products and marked by the circumstances

of their production” (Sismondo, 11). This thesis is an analysis of social and scientific influences that shape current and historical knowledge regarding the experiences of pleasure among people with vulvas and vaginas. As much of historical discourse centers the binary G-spot versus clitoris narrative, this thesis will pay particular attention to the two suggested erotic regions. Human sexuality, more specifically the clitoris and the G-spot, will serve as a case study of how knowledge is produced over time.

One of the central theories that will be addressed, in addition to the central theory of STS as mentioned above, is the theory of co-production of knowledge. Co-production is a Science, Technology, and Society theory that knowledge is neither entirely a naturalist nor constructivist practice. That is to say that the things humans claim to be objective truth are less a pure reflection of the physical world and instead is a social interpretation of the physical world. Founder of the STS departments at Both Harvard and Cornell Universities, highly regarded and honored author, and pioneer in the field, Sheila Jasanoff, explains that the co-productionist framework “acknowledges that lived reality is made up of complex linkages among the cognitive, the material, the normative, and the social- and that understanding these links is indispensable to meaningful projects of social theory and prescriptive analysis” (Jasanoff, 274). This thesis uses co-production theory as the understandings of vulvovaginal sexual pleasure were and continue to be co-produced in the intersections of the material world and the social landscapes in which the physical world is explored.

Much of this thesis will discuss the history of social and scientific thought. In order to understand current knowledge, one must dive into the complexities that can only be provided by a historical context. Jasanoff explains the value and rationale for addressing historical context. She states, “An important value of the co-production idiom is that it may encourage more fruitful

dialogue between historical and contemporary studies [...] investigations of current science and technology stand to benefit immeasurably from greater historical depth” (Jasanoff, 4-5). As such, historical analysis will play a central role in this thesis.

Preface

Although the G-spot and Clitoris have been at the forefront of much debate surrounding vulvovaginal pleasure and as such will be the central components of this thesis, it is important to note that they are far from the only ways that people with vulvas and vaginas experience pleasure. A plethora of literature by sexual health educators, sexologist, physicians, research scientists, and public health officials all attest to the various forms of pleasure that people with vulvas and vaginas can experience with or without vaginal or vulvar stimulation. Despite the bombardment of information about the vulvovaginal genital anatomy, sexual pleasure is ultimately more complex than stimulating one erogenous zone or another. There is no “right way” to experience pleasure and as long as everyone involved in the sexual situation is enthusiastically consenting to the activities they are engaging in; it is completely healthy and often beneficial. To take a note from New York Times Bestselling author of *Come as You Are*, a revolutionary discussion of the new scientific research behind sexual pleasure and desire, Emily Nagoski, PhD, “if it feels good, you’re doing it right” (Kiefer, 2020).

This begs the question, if it does not matter how you or your partner(s) experience pleasure, and if limited dichotomous language of the clitoris versus the G-spot is reductive, then why is it important to engage with these ideas at all? It is true that there are many ways for people with vulvas and vaginas to experience pleasure, not all of which will be described here on; however, this is due to the content of the piece. The G-spot and the Clitoris are simply two

highly debated and discussed areas of the genital anatomy that have gained and lost traction and popularity within recent history. This is not an attempt to invalidate or minimize other forms of sexual pleasure, but instead provide an in-depth analysis of how two distinct modes of thought became the pinnacle of sexual pleasure discourse centered in ideas of the co-construction of knowledge. The history of vulvovaginal genital pleasure is complex. Knowledge has been forgotten, discovered, erased, and promptly discovered again, all at the whim of various social pressures that drive the construction of sexual pleasure knowledge. Focusing on the G-spot and the clitoris will allow us to recognize the politics that have and continue to define and prescribe acceptable ways to experience sexual pleasure. Once the root causes are identified it will become much easier to deconstruct the discourse that does not serve many people seeking sexual pleasure and work towards liberating human sexuality as the diverse and valuable subject that it is.

Before diving into the research, it is important to preface some of the language I will use throughout the following chapters. In this thesis I speak extensively about genital anatomy. As such, I will often refer to the organs and regions themselves rather than socially constructed gender categories. This may initially feel abrasive to some for a variety of reasons including the stigmatization and infrequent use of this type of language. However, terms such as vulva, clitoris, vagina, and penis will readily be used for the sake of clarity. I have chosen to avoid gendered and even sexed language, when possible, as one's genitals are not indicative of gender, and it is more direct to refer to the genitals themselves than sex of the body they belong to. However, at times I do use the terms “female” or “male” as well as “women” and “men”. This is due to the socially constructed intersection between vulvovaginal anatomy and society’s conception of womanhood and femininity. Although it is clear today that social roles nor anatomy define gender, historically much of the discourse surrounding vulvas and vaginas and

their proclivity for pleasure was influenced by the perceived gender associated with the anatomy. As such I may use gendered language when discussing historical beliefs, previous literature that uses this language, or the intersection of sexual expectations based on gender.

Structure

Chapter one of this thesis will lay out the current social and scientific knowledge regarding vulvovaginal anatomy and the potential of the body for pleasure. As vulvovaginal pleasure is often misunderstood and new research is constantly being produced, this chapter will provide the reader with invaluable information as well as a shared language to speak about the regions that will be discussed throughout the following pages.

In chapter two I discuss the construction of the social and the physical and how they relate to the production of knowledge. This chapter will focus on the Freudian theory of transference of sexual loci from the clitoris to the vagina as well as the understanding that clitoral sensation is immature and unnatural. From there I will introduce the scientific discovery of the G-spot, the societal impact, the failure of science to engage with human sexuality, and how each of these elements has impacted thinking regarding vulvovaginal knowledge historically and in the present.

In chapter three I introduce the sexual revolution as a separate yet connected discourse to the topic of human sexuality. I will introduce yet another example of knowledge that has been co-produced. This chapter highlights the influences of social knowledge and the ability of individual experience and interaction with physical anatomy worked to shifting social attitudes regarding vulvovaginal anatomy and pleasure.

Chapter four addresses the lasting effects of limiting patriarchal expectations and ideas of vulvovaginal pleasure on knowledge in the current moment. This discussion includes an analysis of the struggle to change discourse about vulvovaginal pleasure while there is little formal education about sex and pleasure in America and youth turn to their technological devices and popular music for answers to their burning questions. It concludes with a brief section on empowerment in the future.

Chapter One:

Social and Scientific Truths

Vulvovaginal Invisibility

If one is to search the internet for terms relating to sex, female pleasure, the clitoris, or G-spot they would find a plethora of websites brimming with information. However, the information online is often incomplete, contradictory, and frequently erroneous. Not only is the internet an unreliable source of consistent factual information, but social discourse provides little remedy to this issue, and medical and scientific journals often suffer from similar flaws. Scientific research about human sexuality, especially regarding the vulva and vagina and more specifically vulvovaginal pleasure is underfunded, under researched, and readily impacted by preconceptions and biases. Even if one is able to bypass paywalls, access medical literature, and has the education necessary to understand inaccessible scientific language, it can be difficult to decipher any form of consensus when it comes to clitoral and vaginal pleasure. Although much of the information that exists is labyrinthine and lacking in breadth and depth, there are some individuals and groups that aim to empower people through facilitating meaningful discourse and accumulate reputable and accessible information. One such organization is *Pussypedia* created by Zoe Mendelson and her colleagues who acknowledge the deep ties between knowledge and power. In Mendelson's book *Pussypedia*, the "pussy encyclopedia [...] based on peer reviewed, up to date, independently funded research" she explains the flaws of current discourse surrounding vulvas and vaginas (Mendelson, xxx). The author cites the inaccessibility of reliable information and presence of pseudoscientific information as partially causal, but she also highlights the concerning lack of information more generally. She explains, "*Knowledge is power, and pussy knowledge is tragically hard to come by*" (Mendelson, xxvi).

This lack of vulvovaginal information becomes glaringly obvious when comparing the volume of content regarding penises, which are the anatomical homologues to the clitoris. Mendelson demonstrates this phenomenon through a quick search of *PubMed*, a distinguished database for biomedical information and research publications. At the time of Mendelson's research in November of 2020 she noted the quantity of results generated when searching for anatomically homologous terms "clitoris" and "penis". Her search produced an abundance of articles. However, the volume differed significantly by search term. She found 50,671 articles when searching the term "penis" and 2,444 articles when searching the term "clitoris" (Mendelson, 11). This astonishing discrepancy accounts for an approximately 20.7 to 1 ratio of penile to clitoral information. Unfortunately, currently in February of 2022 the gap has anything but been remedied. More than one year after Mendelson's discovery, the discrepancy in abundance of publications that cite the clitoris or penis has only increased. Although the penis and clitoris are anatomical homologues, or originate from the same structure in utero, it is worth noting that the penis has various functions besides pleasure including urination and ejaculation that could contribute to the larger volume of publications as compared to the clitoris whose sole understood function is pleasure. As such, I decided to follow up Mendelson's search with two subsequent searches of the terms clitoris or penis with the addition of the words "pleasure" or "sexual" in an attempt to mitigate some of the discrepancy based on the difference in function of the anatomy. The search that included the term "pleasure" with either "penis" or "clitoris" resulted in 100 and 48 results respectively or less than half as much research on clitoral pleasure than penile pleasure. The second search that included "sexual" and either "penis" or "clitoris" resulted in 6,562 and 848 results respectively or almost eight times as much research on the sexual function of the penis than the clitoris. These results reify Mendelson's previous assertion

that the vulvovaginal sexuality and pleasure is respectively invisible to the anatomically homologous penis.

These jarring statistics only represent one way in which Mendelson depicts the failure of science to represent and research clitoral genital anatomy. Mendelson also cites Sarah Wallace, radical clitoris educator and founder of the social movement *Clitteracy*, and her *Ted Talk* in which Wallace discusses the erasure of clitoral anatomy within scientific communities and society as a whole. Wallace jokes “We walked on the moon 29 years before we discovered the anatomy of the clitoris” (Wallace). This statement was met with a chuckle from the audience, however, is it also indicative of the deeper social phenomenon in which scientists and society have and continue to repress knowledge regarding the clitoris and clitoral pleasure. The penis did not have to be “found” for the scientific community to begin studying it and take it into account when detailing sexual pleasure among individuals with penises. Wallace refers to this erasure of the clitoris from social and scientific discourse as a “psychological clitoridectomy” (Wallace). This phenomenon exists when the clitoris is actively removed from social and scientific discourse to the point that individuals with clitorises suffer the detrimental effects of never learning about their sexual anatomy and the potential for clitoral pleasure.

Although discussions of vulvovaginal pleasure have existed for centuries, the vulva and vagina are often described as historically invisible due to the lack of scientific research, failure to reach consensus, and social discomfort regarding sexual pleasure of people with clitorises. Both Mendelson and Wallace note inadequacies in the scientific and social understandings and teachings of sexual anatomy and pleasure. The literature is so deficient that they both took to their own devices with a common goal of bringing knowledge about the clitoris and sexual pleasure into public consciousness. They view this as an act of rebellion against the censorship of

clitoral pleasure throughout recent history. This informational failure is beginning to be remedied, however there is still much work to be done.

The Clitoris

As it has been established above, anatomical information does not readily exist in social consciousness. As such it is important to begin with an analysis of current clinical and scientific knowledge regarding vulvovaginal genital anatomy and their individual potentials for pleasure. Hereon I will often discuss “vulvovaginal anatomy” which includes all of the components of the external vulva including the labia, bulb of the clitoris, vaginal opening, opening to the urethra etc. as well as the internal components of the genitals including the internal clitoris, the vaginal canal, surrounding erectile tissue. Socially, many individuals refer to the entire vulvovaginal area as the vagina, however this is an inaccurate and limited view of the genital region and as such will not be used unless directly discussing the vaginal canal.

For centuries the clitoris has been socially acknowledged and discussed as a central organ of pleasure. Despite the existence of a plethora of social knowledge, the true anatomy of the clitoris was not established and modeled with scientific accuracy until Dr. Hellen O’Connell, an Australian Urologist, did so in 1998. Dr. O’Connell utilized cadaver dissection to identify the vast internal structure of the clitoris and deemed previous descriptions of clitoral anatomy inaccurate and incomplete (O’Connell et al., 1998). In her 1998-piece *Anatomical Relationship Between Urethra and Clitoris* O’Connell identified that what were, at the time, called the “bulbs of the vestibule” were inaccurately named and represented in previous literature. Her findings suggested that the internal bulbs of the genital anatomy are directly connected to the visible external clitoris and urethra rather than how they were previously understood as distinct entities.

Dr. O'Connell utilized her findings to challenge previous erroneous anatomical assumptions of clitoral genital anatomy and coined the term “bulbs of the clitoris” as a more accurate description of the internal structure of the genital anatomy (O'Connell, 1998). Dr. O'Connell followed up her famous 1998 study with another in 2005 validating her previous assertions. Dr. O'Connell's more recent study utilized magnetic resonance imaging (MRI) technology to identify the internal clitorises of live women of reproductive age. These women, unlike the cadavers in her previous research, had active blood flow and had not undergone postmortem atrophy and degeneration from the embalming process that could have distorted the genital anatomy in her previous study. By utilizing this new methodological approach, O'Connell was able to verify her previous findings. She concludes that the anatomy of the clitoris extends within the body and includes clitoral bulbs that descend on either side of the urethra (O'Connell et al., 2005). She was the first to accurately depict the gross anatomy of the greater internal clitoris (Figure I).

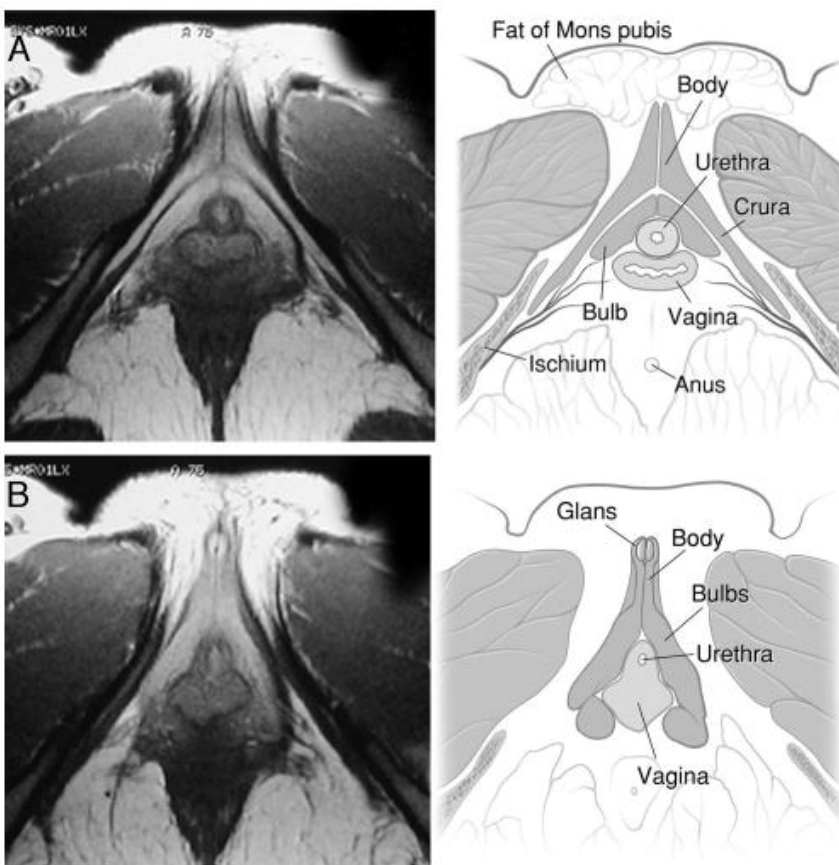


Figure I: A and B, MRI imaging of the clitoris from O'Connell's 2005 paper depicting the full structure of the clitoris on the axial plane including the internal components; note the bulbs of the clitoris as well as the interconnectedness of the clitoris, urethra, and vagina

Not only did O’Connell identify the internal bulbs, but she also utilized the MRI scans to identify the interconnectedness of the internal clitoris to the urethra, vagina, and surrounding tissue containing the pudendal nerve ending as the dorsal nerve in the clitoris and their relationship to sexual function and arousal (O’Connell et al., 2005) . She referred to the interconnected relationship among vulvovaginal genital anatomy as a “complex”. The concept of a cliterourethrovaginal complex remains the leading explanation for sexual pleasure and orgasm in modern publications. Since 1998 when Dr. O’Connell published her subversive research and in the following years, her research has been cited in a multitude of literature detailing female genital anatomy. This groundbreaking research has changed the way that individuals within and outside of sexual and scientific research fields understand vulvovaginal pleasure. It has laid the foundation for much of female sexual health and pleasure studies, theory, and public knowledge since 2005.

Although the scientific community and greater society are not always in complete agreement, the current anatomical knowledge regarding the clitoris remains fairly consistent. The entirety of the clitoris is a 9-11cm structure that extends within the body and has both internal and external components (Pauls). As such, the clitoris is approximately equivalent to the size of the clitoral homologue, the penis, with a global average flaccid measurement of approximately 9.1cm in length (Veale). Despite some debate regarding what should and should not be included in the description of the clitoris, the major consensus is that the clitoris

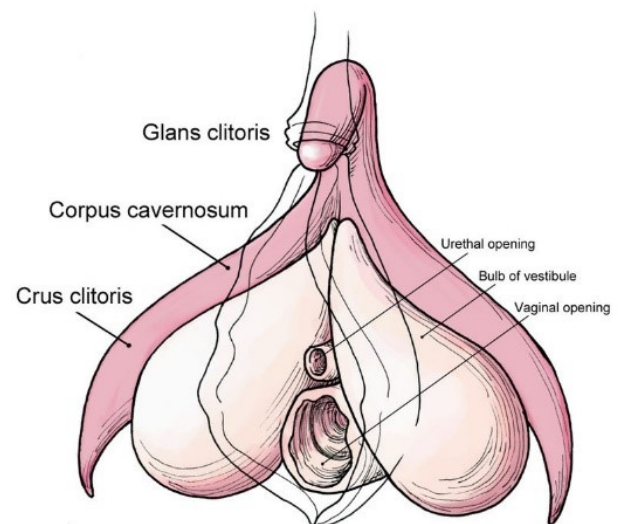


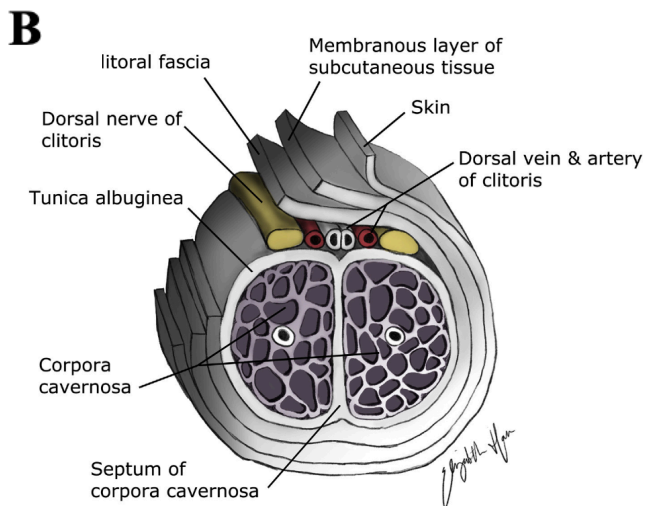
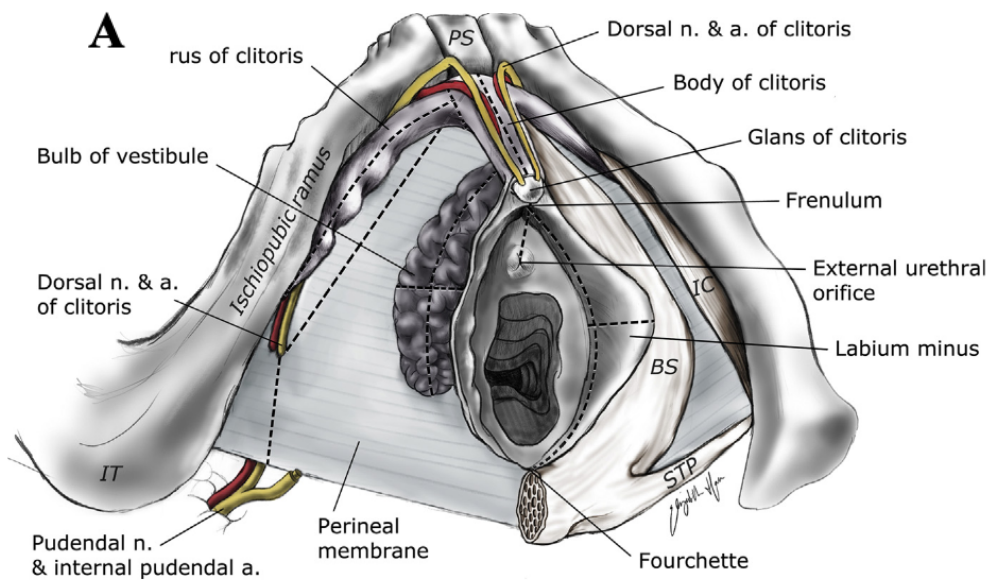
Figure II: Model of the clitoris
("You Asked it")

consists of the glans, prepuce/hood, suspensory ligament, body/corpora, crura, root and bulbs (Pauls) (Figure II). However, the discussion of clitoral pleasure usually focuses on the glans, crura, and bulbs. The glans of the clitoris is the external portion and has a width of approximately 0.5-1cm (Pauls). It contains the largest number and highest density of nerve endings in the clitoris whilst having the least amount of erectile tissue. It is typically covered entirely or partially by the clitoral hood or prepuce that protects the sensitive nerves on the glans from overstimulation (Pauls). The internal clitoris is much more complex and has multiple parts including the internal body (corpora) extending into the pelvis before separating into the two crura which extend down and lie laterally to the vaginal walls and urethra forming a wishbone configuration with the vagina and urethra situated in-between (Pauls). The bulbs of the internal clitoris, discovered by Dr. O'Connell, sit in the space between the aforementioned crura, internal body, vagina, and urethra, engorge with blood during arousal, and have been hypothesized to provide lubrication inside the vagina during sexual arousal (Pauls). Stimulation sensations, vasculature and nerves within the clitoris are complex, however the dorsal nerve (a structure of the pudendal nerve which runs through the pelvic floor and into the genitals) is the main source of sensation for the clitoris (Figure III).

Figure III Clitoris and associated nerves and vasculature.

A, schematic view (note the pudendal and dorsal nerves throughout the pelvis into the glans clitoris in yellow and red).

B, cross-section through mid glans clitoris highlighting the dorsal vein and artery of the clitoris. Jackson Et al.



Homologous Fetal Development

As noted above, there is much more research and social knowledge about the penis than the clitoris. As such, it can be beneficial to understand that the anatomy and morphology of the clitoris as a developmental homologue to the penis. This may seem antithetical to the goal of educating about the clitoris, however since more information exists about the penis than the clitoris scientists can gain perspective on the clitoris by utilizing research and knowledge about the penis. Referring to the clitoris in terms of the penis may deem the clitoris as a secondary entity, and that is not the case. They simply are derived from the same framework in utero and as such are valuable to discuss in tandem whilst understanding genitals come in a spectrum of configurations (Figure IV). As American sex educator and researcher, Emily Nagoski, explains, “We're all made of the same parts, just organized in different ways” (Nagoski, 32). All fetal human beings initially share a common anatomical feature called a genital tubercle and begin with identical genital anatomy. At approximately six to eight weeks of gestation, the tubercle begins to differentiate into the genitals that will be

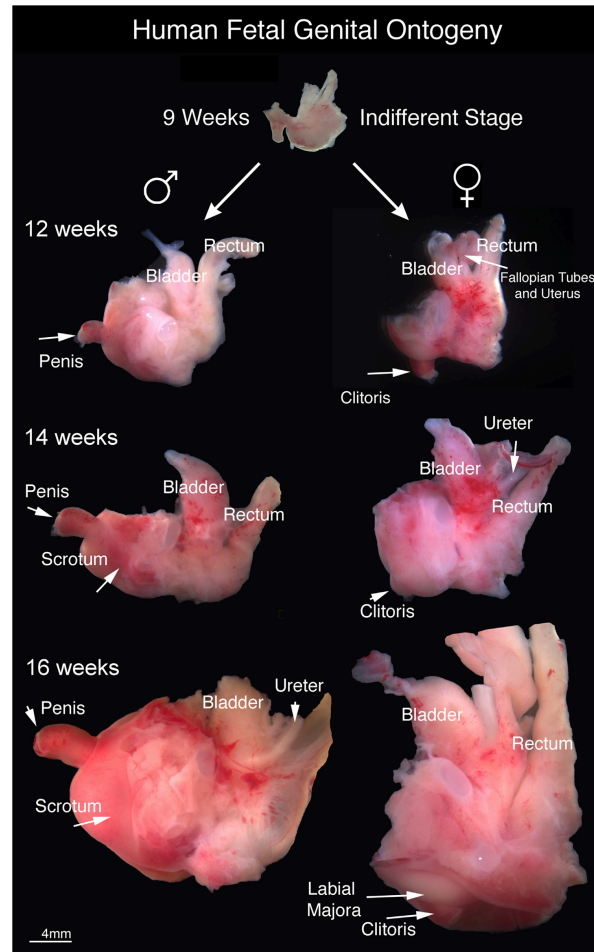
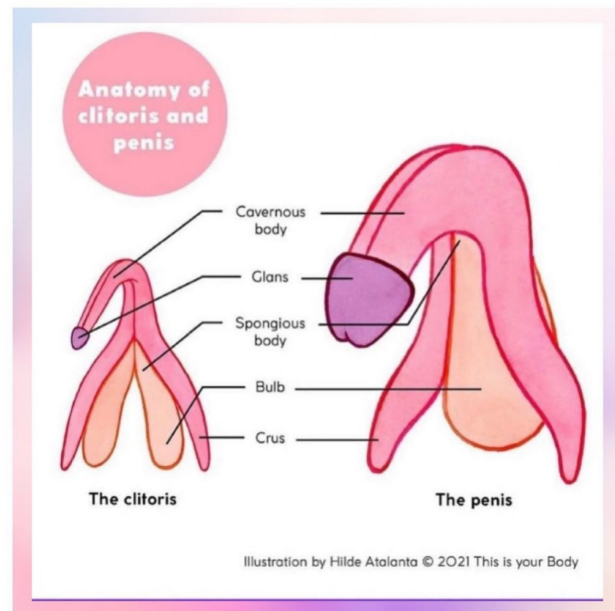


Figure IV 'Human female genital ontogeny: Gross Human Fetal Pelvic Ontogeny: gross ontogeny of the human fetal pelvis at 9 weeks of gestation (end of indifferent stage), 12 weeks, 14 weeks and 16 weeks of gestation. Note the divergent development after 9 weeks of gestation especially in respect to the orientation of the external genitalia with the penis clearly visible at ~ 90° angle from the body and the clitoris recessed close to the body wall" Baskin et al. 2018

present at birth. This differentiation process is dependent on the chromosomes and hormones present in the fetus. Generally, individuals with XX chromosomes lack androgen hormones. This lack of androgens leads to the development of the clitoris and other anatomy that is typically gendered female at birth including reproductive anatomy, vagina, and components of the vulva. Individuals with XY chromosomes typically have androgen hormones that initiate the formation of a penis (the homologous morphology to the clitoris) and other anatomy typically assigned male including scrotum, testicles, and internal reproductive structures. However, individuals may also have genitals that do not adhere to this limited description and may have a different configuration of genitalia or genitals that exist on a spectrum between a clitoris and penis anatomically and morphologically and as long as they do not cause any unwanted pain, become infected, or are prone to other medical issues they are healthy and normal genitals



**Figure V: two potential orientations of anatomical homologues
“Anatomy of the Clitoris and Penis”**

(Nagoski, 32). However, for the purpose of clarity in this piece, a clitoris will be defined as described above by Dr. O'Connell's research and other medical assertions aforementioned including the pictorial depictions.

Despite the clitoris and penis being homologous features, the clitoris and penis differ in a few ways. Most notably, the penis serves many functions including urination, penetration, sensation, and ejaculation, but the clitoris has one unique purpose: sensation and pleasure. The

clitoris is referred to as the primary organ of pleasure due to the 6,000-9,000 nerve endings present in the glans clitoris (external portion) and is primarily responsible for pleasure and orgasm in people with vulvovaginal anatomy (Nagoski, 21&12). There are many different ways to feel pleasure or experience orgasm not related to the clitoris that do not rely on stimulation of the clitoris or in some cases any physical touch at all. However, scientific research has deemed the clitoris as the central organ for “female” pleasure and one that most readily leads to orgasm.

The penis is also widely accepted as the primary sexual organ for experiencing pleasure and by understanding the homology of the clitoris to the penis, using the transitive property, if not the plethora of scientific as well as anecdotal evidence, one can understand the true potential of the clitoris in sexual functioning and pleasure.

The G-spot

The G-spot is another region that some scientists and lay people have claimed to be at the center of vulvovaginal pleasure. The G-spot is a suggested anatomical region that has not undergone the same recent scientific discovery process or reached the same consensus as the clitoris, however, remains central to vulvovaginal sexual pleasure discourse. The G-spot was originally described in 1950 by a German gynecologist named Ernst Grafenberg. The area the doctor detailed is often described as some variation of a particularly sensitive spot located a few inches inside the vagina on the anterior wall that has a slightly different, bumpier, and spongier, texture than the rest of the vaginal wall that

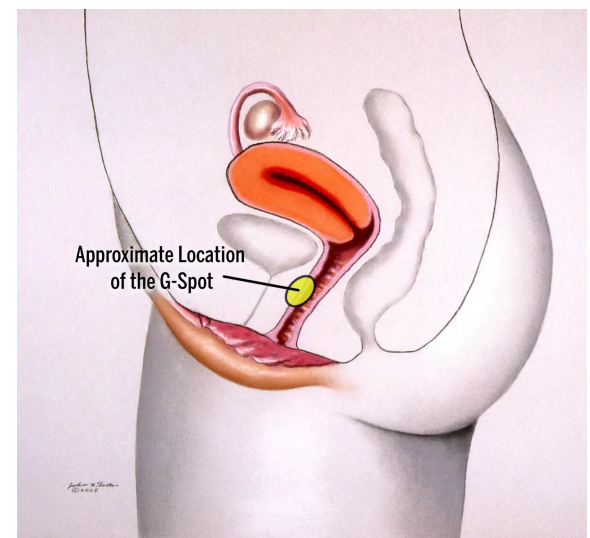


Figure VI: Suggested location of G-spot
MacMillan, 2020(Photo: John R Foster/Getty Images)

contributes to sexual sensation when stimulated. Graphenberg described the spot as ““a primary erotic zone, more important than the clitoris”” (Gross, 2021).

The existence of the G-spot has been and continues to be debated among both the scientific community and society more broadly since it was described by Dr. Graphenberg halfway through the 20th century. If an individual is to utilize the 21st century’s first line of intellectual defense and once again pulls up a web browser and searches the internet for “is the G-spot real” they will find a plethora of contradictory articles with some authors who believe the G-spot is an undeniable reality and others who deem it a ridiculous fallacy that has no merit scientifically or otherwise. Cosmopolitan magazine the self-proclaimed hub for sex tips cannot even decide their take on the G-spot. In 2009, they published an article entitled *Yes, You Have a G-Spot* followed by a less convincing article in 2019 called *Where is the G Spot? Here’s everything to know: No harm in trying to find it, right?* and finally a piece called *Debunking the Existence of the G-spot* in which they apologize to their readers for leading them astray in their search for a region that does not exist. The article begins by stating “You believe a total lie about your own body. And we’re...partly to blame” (Everything You Need to Know About the G-Spot, Katz, Kiefer).

Unfortunately, the lack of consensus and politicization of the existence of a distinct anatomical G-spot is not remedied among scientific studies and medical literature. Many contradictory studies exist describing either the existence of or lack of a distinct anatomical region on the anterior wall of the vagina or the G-spot. The debate over human anatomy can often be easily reconciled with a variety of techniques the 21st century is privy to as seen with the MRI technology and dissections of the clitoris by O’Connell; however, the enigma of the G-spot has yet to be reconciled in its entirety. The biomedical field of gross anatomy is generally

able to solve these types of debates, yet to this day the anatomy related to the vulvovaginal orgasm has proven an exception to this rule (Jannini et al., 2014). Various literature reviews of past research conclude that “From a scientific standpoint, there is poor evidence to confirm the existence of the G-spot” (Jannini et al., 2010). This lack of consistently reproducible data and the plethora of contradictory studies that are not able to find the G-spot results in an overall unconvinced scientific audience until further reliable and reproducible evidence is produced.

This is not to say that there is no research that believes to have found a distinct area of spongy tissue on the interior anterior wall of the vagina capable of evoking pleasurable sensations upon stimulation. Studies that include human dissections and biopsies on live participants have claimed to have found a distinct anatomical region containing substantial erectile tissue that has a higher nerve density than surrounding tissue near the aforementioned area (Ostrzenski et al., Jannini et al., 2014). Studies such as these, as well as anecdotal evidence from individuals with vulvas and vaginas do exist and are worth noting, however, the lack of consensus remains a significant issue that the scientific community cannot overlook.

This lack of consensus and convoluted discourse surrounding the G-spot is synthesized by Mendelson in her revolutionary book *Pussypedia: a comprehensive guide*. She describes the G-spot as “The mythic-but-actually-real, sometimes extra-sensitive part of the inside of a vagina that, when properly stimulated, can in some cases, produce vaginal orgasms” (Mendelson, 37). The irresoluteness of her statement accurately represents social and scientific thought about the G-spot. Physicians and authors of *Read my Lips: a complete guide to the vulva and vagina* provide an analogous conclusion in a comically similar way when stating, “the G-spot is kind of like the Tooth Fairy to some people. Or to science-y folks, perhaps the G-spot is one big placebo

effect that, if we believe it to be true, becomes true and fun and possibly orgasm-inducing when stimulated” (Herbenick et al., 28).

Although there is little reproducible evidence of a distinct G-spot region, some individuals do experience significant pleasure from what they have been taught is G-spot stimulation. In scientific reality, the most current description of what some individuals with vaginas refer to as the G-spot may be more closely linked to what Dr. O’Connell described in her discovery of the clitoral-vaginal-urethral complex. The combination of the clitoris, urethra, vagina, and other surrounding erectile tissue is the leading explanation for the pleasure that some individuals feel when applying pressure to the anterior wall of their vagina. Author of *Pussypedia* explains the current analysis of the G-spot phenomenon as caused by “the urethral sponge, clitoris, and vagina function[ing] as one glorious, pleasure-producing integrated system” (Mendelson, 38). Thus, as many sexual health and pleasure researchers and educators including Mendelson describe, all feelings of pleasure and orgasms originating in the vulvovaginal region are due to the extensive structure of the clitoris and its complex (Mendelson, 38). Therefore, according to science, most orgasms from vulvovaginal stimulation are clitoral orgasms. This is the scientific explanation for what most vagina owners have anecdotally been experiencing as pleasure derived from their G-spot. This begs the question of why science and society alike are so keen on keeping the idea of the G-spot as a distinct region alive. This question will be addressed later in the thesis.

This chapter has laid out the current scientific knowledge and present social truths regarding vulvovaginal pleasure and anatomy as well as introduced some primary social influences. As previously stated, knowledge of the vulval and vagina are limited and conflict ridden, and as such it is useful to provide the reader with the up to date consensus as to have a

common understanding and language in which to discuss further complexities and politics of the rise and fall of clitoral and G-spot centered pleasure discourse.

Chapter Two

Penetrative Sex: Amplifying the G-spot and Villainizing the Clitoris

Freud: The Co-Construction of Normative Sexuality

The history of sexual pleasure is complex, convoluted, and can be traced back to the conception of humanity. However, for the purpose of analyzing discourse surrounding the rise and fall of popularity of the G-spot and the clitoris in recent history, it is useful to begin with Sigmund Freud at the beginning of the 20th century. Freud published novel theories regarding human sexuality that were influenced by both his understandings of the social world in collaboration with his medical and scientific knowledge. The ideas he produced and published had an incredible impact on the century and beyond. Freud outlined normative sexual development and experiences defined by heterosexual penile vaginal penetrative sex. Not only did he highlight the importance of vaginal penetration, but he also villainized the clitoris as improper, and immature as compared to the vagina for sexual gratification in fully mature women.

Freud came to many of his conclusions about human sexuality through what is now understood to be a co-production lens in his construction of knowledge. He was influenced by both social and scientific thought of the time and thus his ideas were co-constructed by different influences. In Freud's texts it is clear that he shares many of the social understandings and values of his time including the supremacy of heterosexuality, sexual morality, anti-masturbation rhetoric, traditional gender roles including feminine submission, as well as the superiority and importance of the penis in sexual discourse (phallocentrism). However, Freud was also a medical doctor and academic and was intimately connected to the scientific field, publishing literature in

psychology, and creating clinical methodology that also shaped his world view to include medical and scientific consensus of the time. Due to his distinct connections to scientific and social knowledge, his publications regarding human sexuality can be thought of as co-constructed with influences from various scientific and social perspectives.

Not only was Freud's work influenced by local consciousness of the time, but his literature also shaped knowledge going forward. He was wildly influential in shaping popular social and scientific thought about sexual anatomy. Although just one of many theorists of his time, Freud's psychological and medical literature, specifically his "Three Essays on the Theory of Sexuality" have had lasting effects and radiate into the 21st century.

His work was instrumental in part due to the broad impact that it had around the world. When Freud initially published his essays they received significant and broad interest. His "Three Essays on the Theory of Sexuality" was published five consecutive times beginning in 1905 with the original piece and ending with a final edition in 1924. Not only was the piece re-published due to demand, but it was also translated into various languages for a global audience (Kistner, 2017). Freud's broad reach, although working off the ideas of human sexuality set by many predecessors, ultimately provided a groundwork for future discourse, extensive research, and social interest in vaginal pleasure.

Freud: Maturity and Femininity

Freud had various ideas about human sexuality that entrenched the understanding that penile-vaginal penetrative sex was the epitome of normative human sexuality. One of the ways that he exemplified this belief was through asserting a hierarchy in which the clitoris was immature as compared to the mature vagina. He asserted that fully developed women should not

only prefer, but exclusively utilize the vagina for sexual activity. He justifies this idea by theorizing a transformation from juvenile sexuality to post-puberty or mature sexuality in his final essay in his series entitled “The Transformations of Puberty”. He explains, “If the transference of the erogenous excitability from the clitoris to the vagina has succeeded, the woman has thus changed her leading zone for the future sexual activity” (Freud, 81). Freud deemed clitoral pleasure as an infantile stage of development that women will grow out of with the onset of adulthood. He laid out a narrative that deemed vaginal sexuality as the only biologically mature way to have sex.

To Freud, female sexuality is deeply rooted in social norms of femininity and the growth out of their childhood masculinity. Since Freud deemed clitoral pleasure equivalent to penile pleasure due to their status as anatomical homologues, it was therefore considered masculine in nature. Freud states, ““In respect to the autoerotic and masturbatic sexual manifestations, it may be asserted that the sexuality of the little girl has entirely a male character” (Freud, 79). In this statement, Freud is not only claiming a lack of femininity in pre-pubescent girls, but also deeming masturbation masculine and unfit for adult women. In order to maintain sexual femininity, women were expected to engage in heterosexual penile-vaginal penetrative sex under the pretense and expectation of childrearing as the ultimate goal of sexual encounters. The expectation of women in the home and as caregivers was deemed the norm in the past centuries and as such, penetrative sex allowed for women to engage in sex in a socially appropriate manner as Freud states, “The libido is regularly and lawfully of a masculine nature”, and as such no woman would want to show any tendencies towards sexual immaturity through masculine sexual desire and strictly is interested in fornication for copulation (Freud, 79).

Freud's biases against the clitoris may have been in part influenced by people of previous centuries and their fears of masturbation as licentious and shameful especially for women. Before that, vulvovaginal genital was shrouded in shame solely by existing. Physician Allison Draper speaks of her astonishment at the etymology of the word pudendum. She explains, "the pudendal nerve, which provides sensation to the vagina and vulva [...] [is] derived from the Latin verb pudere: to be ashamed" which comes from 16th century Italy and has persisted into the 21st century (Gross, 2021). The word pudendum, and Freud's piece works directly off and extends past that notion by claiming a connection between immaturity, masculinity, and clitoral pleasure.

Freud: Phallocentrism

Despite Freud's persistent attempts to alienate the clitoris, he could not deny its immense potential for pleasure. However, this acknowledgement did not stop him from minimizing the need for sexual pleasure derived from the clitoris and subsequently re-centering the penetrative penis as paramount to human sexuality. Freud addresses the potential of the clitoris by stating, "All I have been able to discover concerning masturbation in little girls concerned the clitoris and not those other external genitals which are so important for the later sexual functions" (Freud, 80). However, he goes on to discount this observation with phallocentric discourse that vilifies and delegitimizes the pleasure people experience from their clitoris. He deemed the only function of the clitoris to be for masturbation which he thought of as wildly insignificant as compared to penetrative sex with a penis. He states, "The sexual impulse of childhood is therefore objectless or *autoerotic*" (Freud, 91). As such, Freud deems heterosexuality as superior

to vulvovaginal autosexuality and re-centers the penis in discussions of female sexual experiences.

Freud's understanding that the primary mature sex organ of people with vulvovaginal anatomy is the vagina is not new. Nor is the idea that the vagina's function is to be a receptacle for penile penetration. The word "vagina" translates into "sheath, scabbard or close covering" (Gross, 2021). This ultimately suggests that when people created the word "vagina" the primary cultural significance of the organ was to be a resting place for a penis (Gross, 2021). The vagina has had a phallocentric connotation since the conception of the word and Freud's work reifies the social and anatomical phallocentric connotation in his "Three Essays on the Theory of Sexuality".

Freud: Pathologizing Clitoral Pleasure

Freud not only deemed the clitoris as socially masculine and infantile, but also went as far to claim that the use of the clitoris for sexual satisfaction was a medical condition. In this way he once again blurs the lines between social and scientific knowledge. Freud pathologized clitoral pleasure by claiming it was at the root of many psychological conditions. He believed that undergoing puberty transferred the pleasure center from the clitoris to the vagina and the failure to do so would lead to neurosis and hysteria. He states, "The main determinants for the woman's preference for the neuroses, especially for hysteria, lie in the change of the leading zone as well as in the repression of puberty" (Freud, 81). He claims that the main component to neurotic behavior was due to a failure in women stopping utilizing their clitoris for pleasure. This medicalization and pathologizing of clitoral pleasure have lasting impacts on both social and

scientific communities' discussion of female sexuality and is yet another example of Freudian co-construction of knowledge.

Freud's Impact

Although Freud's "Three Essays on the Theory of Sexuality" does contain some provocative discourse that at times queers sexuality, the 1905 piece is typically remembered for its tendency to prescribe normal and abnormal sexuality throughout human development while pathologizing different sexual behaviors that lay outside of his previously specified purview. Freud created lasting impact depicting normalcy of human sexuality and in turn deeming some behaviors immoral or psychologically neurotic. Freud's piece did not only prescribe penile-vaginal intercourse as the pinnacle of sexuality, but he deemed other forms of sexuality immature and psychologically flawed

Freud's assertion that clitoral masturbation was masculine, although not an entirely novel concept as aforementioned, served to further entrench the ideas of vaginal supremacy while pushing forth the stigmatization of clitoral pleasure. Freud's essays focused on the development of sexuality from autoerotic to heteroerotic through the shift from masturbatory tendencies of children using the clitoris and immature penis for personal pleasure to mature intercourse between the adult penis and vagina. Freud partially constructed and further entrenched the ideas that the vagina was the primary sexual locus, and that the clitoris was only relevant for children and the use of it for sexual gratification as an adult was unnatural and shameful. He produced these ideas through a combination of social and scientific understandings that culminated in his piece "Three Essays on the Theory of Sexuality" as discussed above. Freud's social understandings of heteronormativity, phallocentrism, femininity, and sexual shame as well as

scientific ideas of bodily development, pathologizing human behavior, and the need to create scientific truths culminated in the production and distribution of the understanding that vaginal penetration is the normative sexual experience for women.

Medical Anatomy

Freud's conceptualization of vulvovaginal sexuality, as described above, was not simply passing thought; instead, it persisted and became part of the dominant medical and subsequent societal knowledge. Freud's construction of human sexuality went as far as to alter medical definitions of genital anatomy. The pinnacle revered book of human anatomy in the medical community, *Gray's Anatomy*, removed the clitoris from diagrams of genital structure from the editions published between 1901 and 1948. Not only did the authors actively remove the clitoris, but they did not feel a similar need to remove what Freud had proclaimed to be the center of female sexuality; the vagina appeared in all editions of the publication (Moore and Clarke, 271).

A group of researchers found it peculiar that *Gray's Anatomy* changed their depictions of genitalia so drastically as it is not often that *the publication* alters their depictions to the point of removing an entire structure. The researchers, interested in the anomaly, decided to review the representation of the clitoris in medical anatomical literature over time. They were surprised to find this drastic change in volumes that excluded the clitoris. They summarize their findings by stating that they observed "a striking difference from the 1901 where the clitoris is not only labeled but in some respect is also featured prominently" (Moore and Clarke, 271). The shift in depictions of the clitoris coincides with Freud's 1905 text and subsequent social shifts that labeled the clitoris as infantile and named the vagina the primary erogenous zone in a mature woman.

Despite the changes in vulvovaginal genital anatomy, the penis did not face the same alterations. The researchers found this to be true and state, “penile narratives and visual representations in the same texts are dense and active” (Moore and Clarke, 274-275). Medical texts removed the clitoris from anatomical depictions because it was determined an unimportant region for adult females in part due to Freud’s theories of sexual transference from the clitoris to the vagina. However, his theories of genital transference do not apply in the same way to people with penises. The penis changes character with puberty, however it remains the primary sex organ from childhood to adulthood. Freud states, “while the primacy of the genital zones is being established through the process of puberty, and the erected penis in the man imperiously points towards the new sexual aim, i.e., towards the penetration of a cavity which excites the genital zone, the object-finding, for which also preparations have been made since early childhood, becomes consummated on the psychic side” (Freud, 91). Thus, it’s consistent representation in medical texts is reflective of sexual narratives of the time. This active scientific deletion of previously held knowledge as well as the maintaining focus on the penis provides insight into the immense power that social discourse has on science. Scientific truths are readily impacted by theoretical and social beliefs of the time and can shift to represent the current mode of knowledge.

This clitoral erasure in medical text continued for a few decades until around 1971 when feminist works began to appear, and the clitoris was being re-discovered for its sexual potential by individuals in the feminist movement (Moore and Clarke, 274). The authors of the analysis of anatomical text describe this resurgence by stating, “from 1973 to 1978, multiple parts of the clitoris were beginning to be labeled again but not extensively discussed” (Moore and Clarke, 274-275). It would take much longer until the clitoris would be included in social and medical

discourse with the specificity and prominence that its anatomical homologue, the penis, has always had.

The complex web between Freudian theory that itself was impacted by medical and social knowledge as well as the medical and scientific community's adherence to similar ideas melded together to co-construct a narrative that the vagina was the only socially and medically relevant part of the vulvovaginal anatomy. The idea that vaginal penetration was the key to vulvovaginal sexuality led to a society in which scientist and society members became hyper focused on reifying these ideas and proving why internal orgasm are natural, normal, and advantageous for women. After much research on the famed internal orgasm continued and built off of these new ideas, the "discovery" of the infamous G-spot and its relationship to female ejaculation was established by Dr. Graphenberg in 1950 (Graphenberg).

Discovering the G-Spot: Entrenchment of the Vaginal Orgasm

Due to the plethora of medical literature and social discourse describing the vagina as the ultimate location for vulvovaginal sexual sensation, the search began to find what exactly was responsible for the pleasure people were deriving from penetrative sex. After many years, researchers believed to have reached a conclusion. In 1950 German Physician Ernst Graphenberg was the first individual to describe the region that would later be referred to as the G-spot by noting its potential connection to orgasm and the urethra. However, it was not until 1981 that the sought-after location was officially named. The later discovery came about when researchers queried about the occurrence of what they thought to be urinary incontinence upon vaginal stimulation and orgasm (Addiego et al., 20). The researchers sampled the fluid from the expulsion following direct stimulation of the anterior wall of the vagina by a penis or fingers,

analyzed the contents, and concluded that what they had initially believed to be urine was actually a non-functional female homologue to ejaculation of semen through the penis (Addiego et al., 20). After many years, the authors concluded that “female ejaculation, a partial, infertile homologue of male ejaculation exists” (Addiego et al., 20). The researchers then credited Dr. Grafenberg for his preliminary research on the topic and his “discovery” of a sensitive region on the anterior wall of the vagina that was related to the urethra. The authors state, “we subsequently named [the area being stimulated in the study] the ‘Grafenberg spot,’ in recognition of the person who wrote of its existence and relationship to female ejaculation” (Addiego et al., 15). After this notable publication, the suggested sensitive area on the anterior wall of the vagina has since been referred to as the “Grafenberg spot” or “G-spot” for short.

Dr. Grafenberg was another figure of medical and scientific authority to minimize the value of the clitoris and uphold the importance of the vagina in achieving orgasm and sexual pleasure. His description of the G-spot further entrenched Freudian notions by providing an anatomical region that validated many of Freud’s claims of the value and validity of the internal orgasm. The G-spot was targeted to change the ways in which women experienced pleasure as well as label clitoral pleasure as a form of female sexual dysfunction much like Freud did earlier in the century. Dr. Grafenberg’s study not only discusses the G-spot region, but also highlights social ideas of female frigidity associated with non-adherence to normative sexual practices. The doctor's analysis of frigidity builds off of prescriptive depictions of acceptable and unacceptable female sexuality from the previous century. Pathologizing female sexual experiences was not new as predecessor Freud laid out a framework that dictated normal sexuality and deemed movement from this norm as psychologically concerning. However, Dr. Grafenberg limited the

scope of appropriate sexual acts even further with his publication as well as the social discourse that followed and have remained active through the 21st century.

Dr. Graphenberg, like Freud, used rhetoric deeming certain sexual acts, organs, and desires superior to others. Dr. Graphenberg's discovery of the G-spot was not a neutral endeavor. In his 1950 paper he claims penetrative sex to be the normal and natural way. He states, "Certain that it is that this area in the anterior vaginal wall is a primary erotic zone, perhaps more important than the clitoris, which got its erotic supremacy only in the age of necking" (Graphenberg). He not only denounces the clitoris as less important, but also reinforces heteronormativity and attempts to support his new anatomical discovery by stating that vaginal orgasms through the G-spot are "Caused by the direct thrust of the penis towards the urethral erotic zone" as if there are no other ways to stimulate the area (Graphenberg). Even when defining female genitalia, Dr. Graphenberg makes sure to discuss the importance of penises.

Not only does Dr. Graphenberg deem his newly discovered region to be more natural, but he simultaneously makes a point to fear monger by discussing potential ills caused by clitoral pleasure especially if achieved through homosexual sex. He explains, "A woman with only clitoris orgasm is not frigid and sometimes even more active sexually, because she is hunting for a male partner who would help her to achieve the fulfilment of her erotic dreams and desires" (Graphenberg, 144). Dr. Graphenberg adhered to the notion that there is an acceptable amount of sexuality for women and that the clitoris played a role in women's hyper sexuality which he deemed a form of sexual dysfunction. He cites hypersexuality in women to be a psychological condition due to excessive use of the clitoris. He explains, "The anterior wall of the vagina along the urethra is the seat of a distinct erotogenic zone and has to be taken into account more than the treatment of female sexual deficiency" (Graphenberg, 148). Dr. Graphenberg's analysis of

humanity as naturally heterosexual and his focus on the curative power of the penetrative penis for women is yet another prescription of the expected and proper way to engage in sex that centered vaginal penetration and the G-spot and minimized other forms of pleasure as abnormal.

Dr. Graphenberg, while writing a paper on his newfound female erotic zone, somehow manages to almost entirely disregard the female orgasm. Dr. Graphenberg explains the regularity of non-orgasmic sex for women to be quite frequent and deems this either a non-issue or places the blame on not utilizing the G-spot. He states, “Numerous women have satisfactory enjoyment in normal heterosexual intercourse even if they do not reach the orgasm” (Graphenberg, 144). Not only does Dr. Graphenberg deem penile-vaginal penetrative intercourse “normal” sex, but also discounts the potential value of orgasm for people with vaginas. Although current sexologists would agree that reaching orgasm is not the only goal of sex. However, in this way it is meant to remove limiting discourse that sex is only valuable if both partners are able to climax. The later is queering the discourse to value other forms of pleasure and free people from sexual scripts, however Dr. Graphenberg’s commentary is more prescriptive, limiting and negates a person’s right to orgasm and feel sexual pleasure.

Dr. Graphenberg’s discovery of the G-spot is deeply rooted in his biases and attempts to uphold discourse that maintained the importance of men in sexual encounters and attempts to label women as fragile and at the whim of their sensitive psychology. His discourse, although deeply rooted in biases, has had an immense impact on social and scientific understandings of human sexuality ever since its conception as the G-spot quickly rose to prominence and held its ground as a primary location for sexual pleasure. The discourse of fragile women needing a penis for ultimate sexual success may be upsetting or even comedic to readers in the 21st century, however Dr. Graphenberg’s scientific findings, like much of science, was impacted by the

societal norms and scientific knowledge, or in this case lack of knowledge, of the time. Although Dr. Graphenberg did find a pleasure locus in some individuals, he interpreted these findings as conclusive of a specific region of tissue inside the vagina that causes people immense pleasure. He also used his findings to validate his socially charged beliefs of heterosexuality, female frigidity, and devaluing the female orgasm. The way that the doctor interpreted his results continued to entrench damaging and scientifically inaccurate prescriptions of healthy ways to engage in sexual behavior would go on to continue the erasure of clitoral pleasure and delegitimize female sexuality and need for sexual pleasure. This is yet another example of the ways in which social knowledge and scientific knowledge intermingle to produce new knowledge or uphold knowledge that contributes to the status quo that benefits those in power and systemically oppresses those who lack it.

Scientific Discomfort

The rise of the G-spot and superiorization of penile-vaginal centric sex was in part facilitated by the absence of laboratory sciences and scientific discovery that could analyze the limitations of this viewpoint. As discussed in chapter one, the clitoris was not “discovered” in its entirety until just prior to the turn of the 21st century and the failure of scientists to achieve reproducible, consistent, and tangible evidence of the G-spot has only been determined in literature review from a plethora of contradicting studies analyzed in the first twenty years of the 21st century. Laboratory science dismissed human sexuality for years and was tactically left out of conversations regarding sexual pleasure. This ultimately allowed for social forces and a few dominant voices in the field of human sexuality, including Freud and Dr. Graphenberg, to create the majority of knowledge regarding sexual health and pleasure. Although the G-spot has failed

to uphold its scientific validity, it remains in social knowledge as ideas of compulsive heterosexuality, phallocentrism, performing femininity, pathologizing of clitoral pleasure and other social forces remain intricately tied to sex and sexual pleasure.

The stigmatization of human sexuality is a major contributing factor of the failure of scientists to introduce orgasm and sexual pleasure studies into formal laboratories and subsequently contributed to the slow and often inaccurate accumulation of knowledge regarding human sexuality. In New York Times Bestselling author Mary Roach's book *bonk: The Curious Coupling of Science and Sex*, the author points to this scientific hesitancy to study human sex. She explains, "it took science a very long time to get its nerve up to put sexually aroused human beings under scientific scrutiny" (Roach, 22). Roach highlights the tendencies of early 20th century scientists to utilize animal subjects in sexuality studies and the uncertainty attributed to those who used human subjects. One of the first scientists to deem human sexuality valuable enough to warrant formal study was Johns Hopkins University's Professor John B. Watson. Watson believed that failure to achieve arousal and orgasm was at the root of marital hardship and thus was worthy of scientific research. Roach explains his willingness to study human sexuality, but only under the pretense of emotional turmoil in heterosexual marriages. She states, "Watson chafed at science's reluctance to study human sexuality [...] he wrote 'it is admittedly the thing that causes the most shipwrecks in the happiness of men and women. And yet our scientific information is so meager'" (Roach, 26).

The modern public concern that science lacks adequate studies and data on human sexuality was also acknowledged by scientists of the late 20th century. Roach attests to Dr. Watson's concerns of social knowledge overtaking scientific thought. Roach cites a quote from Dr. Watson in which he states, "[We should have our questions] answered not by our mothers

and grandmothers, not by priests and clergymen in the interest of middle-class mores, nor by general practitioners, not even by Freudians; we [...] want them answered by scientifically trained students of sex” (Roach, 26). Although Watson’s discussions of sex were limited and heteronormative, his insistence for scientists to study human sexuality shifted discourse from theoretical assumptions and assertions such as those made by Freud and others in the social sciences, and the need for tangible data that although often wrought with bias at the time, was a step towards centering anatomical pleasure and decentering various social expectations surrounding human sexuality. Without this attitude, the field of human sexuality lagged and in turn non-scientifically based concepts such as the supremacy of the vaginal orgasm, the immaturity of the clitoris, and societal focus on heteronormative penile-vaginal penetrative sex flourished.

Chapter 3

The Sexual Revolution

While the scientific and medical communities were discussing the G-spot and the importance of penile vaginal penetrative sex, a different group of people were having a related, yet ultimately different conversation and producing their own knowledge about vulvovaginal anatomy. This conversation was happening in part due to the feminist movement and those in it questioning the legitimacy of dominant ideologies and information they had been taught about vulvovaginal anatomy and pleasure. Much of the knowledge that people in general society had regarding their sexuality had trickled down from the dominant thinkers in science, medicine, and social scientists of the current and previous centuries including some of the ones described in the previous chapter. Unfortunately, the people creating the knowledge that was pervasive in society came from a narrow portal of lived experiences. Most knowledge was created by white, cis-gendered, straight, wealthy, and otherwise privileged men with their own experiences and interests as well as those of others like themselves in mind.

For the purpose of this paper, the use of the patriarchy refers to a system in which socially, politically, and financially privileged groups maintain power and the ability to produce and prescribe dominant thought that serves themselves and undermines those who lack power and privilege in society. This term will also be used to signify the norms that the patriarchal figures stand for which overlap with Freud's ideas and typically include phallocentrism, heterosexuality, traditional gender roles, shame associated with vulvovaginal pleasure, as well as a plethora of other norms that reproduce their own power and challenge the autonomy and empowerment of others. This term often solely refers to male privilege, but a broader definition will be utilized hereon. The patriarchy had a strong hold on the construction of knowledge. As

such the information was not only biased in many ways, but also incredibly limited due to the fact that only a small subset of the population with narrow experiences were responsible for creating and upholding theories and understandings of human sexuality. People in the feminist movement found that the prominent understanding of the vulvovaginal complex opposed their lived experiences and thus deemed the current scientific knowledge of their anatomy and sexual experiences unsatisfactory. The sexual revolution was a time in which some less dominant voices had the chance to reconcile with the current knowledge and use public thought and experience sometimes in collaboration with and sometimes in opposition to scientific discourse in order to co-construct a new body of knowledge that spoke to people with vulvas and vaginas.

Second wave feminism and the sexual revolution that began in the 1960's was a period of pushback against the prominent rhetoric regarding human sexuality and social change in the United States. Social movements were erupting including the rise of second wave feminism, the gay rights movement after the Stonewall riots in 1969, and the continuation of the civil rights movement. Throughout this period of social critique individuals began questioning the validity of systems and ideas that ultimately only benefited few while oppressing many. Simone de Beauvoir's "The Second Sex", Betty Freidan's "The Feminine Mystique", the nine iterations of "Our Bodies Ourselves", and a plethora of other literature all called for a critique of society's patriarchal control and demanded a reconceptualization of the role of women in the work force, home, political space, doctors' office, and even the bedroom.

New Knowledge in the hands of People with Pussies

As feminism and the women's liberation movement continued throughout the century feminists' endeavors to embrace radical self-love and bodily autonomy grew strong. As these

values developed, activists through communal discussion and individual experience deemed the clitoris the central region responsible for vulvovaginal pleasure and worthy of medical acknowledgement. By 1981 the recently established *Federation of Feminist Women's Health Centers* published a book titled *A New View of a Woman's Body* (Mendelson, 21). This illustrated guidebook was created by a group of women who, when aiming to study literature on sexuality to learn about their bodies, discovered that the current works on vulvovaginal anatomy and pleasure did not resonate with them. They found various limitations and outright inaccuracies in the scientific knowledge they had hoped to learn from. Activist and major contributor to the publication, Carol Downer, explained ““Little of what we found in sex advice books or in medical texts seemed to correspond to our sexual experiences or to illuminate them in any useful way”” (Mendelson, 20). Disappointed with the current available literature, the women embarked on a journey to educate themselves using new methods. By doing so these women took the power of creating dominant knowledge into their own hands and they did so quite literally. Author of *Pussypedia* describes the women's unique research methods. She states, “[they] got together, talked about their experiences, took off their pants, compared their pussies to textbook illustrations, and took pictures and videos of one another masturbating, which they then studied carefully (Mendelson, 20). Through their research, Downer and her colleagues validated their assumptions that the books they were reading were not accurate representations of true lived experiences of people with vulvovaginal anatomy. With this knowledge the women created a new body of knowledge based on their own experiences that countered the predominant social and scientific understandings that penetrative sex was the best and only form of appropriate sexual experiences. The women took to remedying the issue of what they deemed inaccurate knowledge through self-discovery and sharing their new found knowledge and

experiences as a community in order to come to new frameworks for discussing vulvovaginal pleasure that was true to them.

This story is one of co-construction of knowledge. Feminists combined scientific knowledge, their physical realities, and a social attitude of sexual liberation to create a new reality. Their social world, material world, and scientific world were at odds with one another and as such they combined what was relevant to their experiences and created a new body of knowledge. After sharing their individual experiences and physicality with one another, the women in the federation came to the conclusion that the clitoris, which had been erased for decades, was important to the majority of them to reliably achieve orgasm. The women then published their results and reassured many people of the normalcy of the clitoral orgasm.

Social Change and Science

Although much of the dominant knowledge in the scientific community of the time and in previous eras in the scientific community focused on penile vaginal intercourse and shared similar beliefs to those of Freud and Grapenberg, the thoughts within medical and scientific communities were far from monolithic. The production of knowledge was not as simple as two men's assertions and discoveries. Ideas were also impacted by the social atmosphere and the societal outcry of the sexual revolution.

Scientists began pushing boundaries and performing taboo research to address the limitations in knowledge about human sexuality. Although much of the preliminary research on vulvovaginal anatomy and pleasure has since been problematized for inaccuracies, selection bias, etc., the mere existence of scientific studies on such scandalous topics highlights the more nuanced discussions that were being had. Scientists and authors including John B. Watson,

Robert Latou Dickenson, William H. Masters, Virginia E. Johnson, Alfred Kinsey and the Kinsey institute, Shere Hite as well as a plethora of other influential individuals began doing research and publishing papers on what was previously deemed too taboo to discuss (Roach, 2008). The interest and action towards addressing sexual topics was revolutionary and started a domino effect that sparked the interest of other scientists and created a new wave of individuals addressing human sexuality as a legitimate field.

The famous psychiatrist Dr. Mary Jane Sherfery published a piece in 1966 that summarized much of the social and scientific changes that were occurring throughout the decade. In her piece *The Evolution and Nature of Female Sexuality in Relation to Psychoanalytic Theory* she challenges the limitations of Freud's theory of the mature vaginal orgasm (Sherfery, 1966). While critiquing Freud, she highlighted a multitude of other research that was working to change limited understandings of female sexuality (Sherfey, 1966). She explained that despite the predominant thought that the vagina was superior to the clitoris, there were indeed other researchers that found evidence of the opposite. Dr. Sherfery explained that Freudian theory needed to be updated to include recent scientific discoveries that re-center the importance of the clitoris in orgasm and should shift away from prescribing one form of sexual activity as superior. She explained that in the decades since Freud's publications research has shown that many women cannot reach orgasm from penetration alone and many continue to enjoy touching their clitorises (Mendelson, 19). Although at the time Masters and Johnson as well as Kinsey had recentered the clitoris at its rightful place at the center of vulvovaginal sexual pleasure, it took a while to leave behind the phallocentric model of sexuality that ruled supreme for the past centuries. Sherfery was one voice of many scientists and feminists that described the social and scientific prescriptions of female sexuality as oppressive. Not only did she challenge the validity

of some of Freudian theories, but she also explained the impact of society adhering to these false notions. She explained “Probably no psychiatrist or analyst would agree to [Freud’s] conclusions- which imply that the fate of womanhood and hence of mankind hangs on the vaginal orgasm- nonetheless it is still true that we have created and fostered this impression” (Sherfery, 35).

Sherfery pointed to the deep impact that Freud and thinkers like him have had on understandings of female pleasure as based on the vaginal orgasm. However, she did not simply accept these ideas, instead she pushed back and highlighted the flaws in this type of thinking. Her discourse exemplifies the shift towards re-centering other forms of pleasure in vulvovaginal discourse despite the difficulties of battling deeply entrenched ideals within both the sciences and society. Although scientists definitively discovered the relevance of the clitoris, the social understandings of vulvovaginal pleasure would take much longer to overturn.

Second wave feminism in the second half of the 20th century played a crucial role in social and scientific shifts in sexual knowledge. Activists were fighting for social reform and scientific validation at the same time that opposing discourse by theorists and other scientists were attempting to justify the status quo. In this way, the knowledge regarding vulvovaginal pleasure was not simply based upon the material world. Instead, knowledge about vulvovaginal anatomy and sexuality was a reflection of various social attitude interacting with the physical world. In this case, either the goal of sexual liberation or further entrenchment of Freudian notions of normative sexuality interacted with the physical genitals and lived experiences. This co-production of knowledge between social and physical factors leads to various truths that have the potential to shift over time as social attitudes change and influence the way people view the natural world.

Many of the feminist's goals were achieved as stigmatization of sexual pleasure was challenged and the focus on the clitoris was restored with scientific validation and varying levels of social acceptance. One author goes as far to say that *A New View of a Woman's Body* and other publications like it served as "a redefinition of the clitoris as the broadening of the concept of women's sexuality to deemphasize orgasm reached by penis-in-vagina intercourse" (Fug-Berman, 17). However, the fight to demystify, validate, and destigmatize vulvovaginal sexual pleasure was not easily remedied, and the fight continued as different individuals, institutions, and technologies enter the conversation. As described in chapter one, in present day, the G-spot and the clitoris are still being researched and debated and although the clitoris has gained traction as the female pleasure organ in both scientific, medical, and social spheres it has not been able to completely withstand pushback as people reconcile with the discrepancies between the physical world and the social understandings of it.

Chapter 4:

Vulvovaginal Pleasure in the 21st Century

*Content warning: wartime rape

A Novel Forum for Knowledge

Although feminists worked to destigmatize sex, spread knowledge about the clitoris, and highlight the importance of sexual pleasure, their work was not as long lasting and complete as they would have hoped. The turmoil in the endless debate between the clitoris and the G-spot did not neatly end with the scientific validation of the clitoris by Hellen O'Connell in 1980, the continual disproving of the G-spot in scientific literature, nor the push for teaching people about sexual pleasure and their bodies from the sexual revolution. Despite the various attempts to change the dominant patriarchal discourse the tables were not easily turned, and sex remained highly stigmatized and inadequately talked about in the United States. However, the rules of the game changed in the 21st century with the immense popularization of the internet. A generation, faced with many questions and inadequate answers from formal institutions about their sexuality and abilities for sexual pleasure, went to the internet. They were met with a plethora of other people similarly searching for answers and sharing their thoughts and experiences. As a result, the internet became a hot spot for people to learn about this taboo topic in the absence of proper formal education.

The media that the youth of America were accessing to answer their sexual questions via the internet is a technological manifestation of the entanglement of social norms and the physical world and as such is co-produced. Jasanoff explains that technology and the knowledge produced by it “is not a transcendent mirror of reality, it both embeds and is embedded in social practices, identities, norms, conventions, discourses, instruments, and institutions” (Jasanoff, 3). The

information and media on the internet is ultimately created by humans who produced content based upon their personal experiences with the physical world. Media on the internet is neither completely natural nor socially determined, it is a combination of the two and as such is yet another locust of co-production of knowledge.

The internet is not only representative of the world in which it was created, but it also has the unique ability to spread knowledge throughout the population in a way that has not been seen before the advent of the internet and the subsequent integration of technology into people's daily lives. For example, if a piece of media resonates with a large group of people, it will exponentially gain popularity through likes, shares, comments, or simply just engagement. This in turn allows more people using the internet see the content as it has now been deemed "popular". Once the media is deemed as such it begins to spread throughout internet users at an exponential rate. This leads to a massive consumption of that particular content, so impactful and far reaching that it influences the internet user's consciousness and has the potential to change their reality. This phenomenon of virality or popularity ultimately has the ability to shape the knowledge of a generation. As such, popular media and content on the internet is not only impacted by society, but also has an immense power over the knowledge base of individuals who consume the media.

As seen above, popular internet content is not only a valuable depiction of the knowledge of the time in which it was produced, but also, due to its mass consumption and accessibility, has the potential to influence the dominant knowledge of the era in a massive way. Therefore, it is incredibly useful to study media. This chapter will work under the understanding that popular media both represents the society in which it was created and can also influence the people

consuming it. This analysis will provide a framework to gauge the knowledge of vulvovaginal sex and pleasure in the 21st century.

Sexual Education

In order to truly understand the influence of the internet, one must understand the failures of sexual education in the 21st century. By understanding the social taboo of sex and sexual pleasure, one can understand why the internet, in which an individual can anonymously search for information, would become a new catalyst for producing knowledge. The objective and design of sex education in America was not created to teach people about sexual pleasure or anatomy. It was created in response to a drastic increase in and fear of sexually transmitted infections (STI) during war time in the early 20th century. The history of sexual violence in times of war can be traced almost as far back as humanity and the soldiers in the 20th century were no exception. Military men of these wars, although some historians prefer to highlight the men's sex with prostitutes as causal, raped people in the communities in which they were stationed (Gottschall, 2004; Why Sex Education, 2021). Soldiers raping people coupled with other unprotected sex while away from their wives lead to a massive increase in rates of STIs in the military. This increase in STIs lead to men being discharged or placed on leave to treat their STIs. In order to address the new enemy of their soldiers, the nation launched a formal sexual education initiative (Why Sex Education, 2021). Sexual health education was created in order to keep the armed forces healthy and abundant. The goal was solely based upon preventing STIs and did not discuss sexual pleasure.



Figures VII :Two wartime posters attempting to shame soldiers into practicing safer sex (Source: Gettelman; Kennedy)

Unfortunately, the dominant sexual education in America has not come much farther than being based on STI prevention. The two main types of sexual education are Sexual Risk Avoidance and Comprehensive Sexual Education; However, many programs lie somewhere between the two (Why Sex Education, 2021). Sexual Risk Avoidance, previously known as “Abstinence Only Education” is a curriculum in which students are taught to entirely abstain from sexual action. The second curriculum, Comprehensive sex education, includes information on “the benefits of delaying sexual intercourse”, however does typically includes some information on methods to prevent STIs and unwanted pregnancy (Comprehensive Sexuality Education, 2016). Although it is often referred to as the opposite side of the spectrum to Abstinence Only Education, comprehensive sexual education often does not discuss the body’s potential for pleasure when engaging in sexual behaviors. Needless to say, most experts would agree that the failure to formally discuss the actual actions of engaging in sex is very concerning

for the sexual and social development of youth. Take it from expert Emily Nagoski who, when describing the information available regarding sex, concludes by stating “we are told the wrong story” (Nagoski, 2).

Not only is American sex education at a dire level, but proper sex education has the potential to enrich people’s lives. Experts explain that “proper sex education would be a game changer for our overall health and happiness. Now that’s power, power in knowing your body, which may be why we have been denied this information for centuries” (The Principles, 2022). Unfortunately, this is not the case with most of American sex education as there are no national laws or mandates regarding what

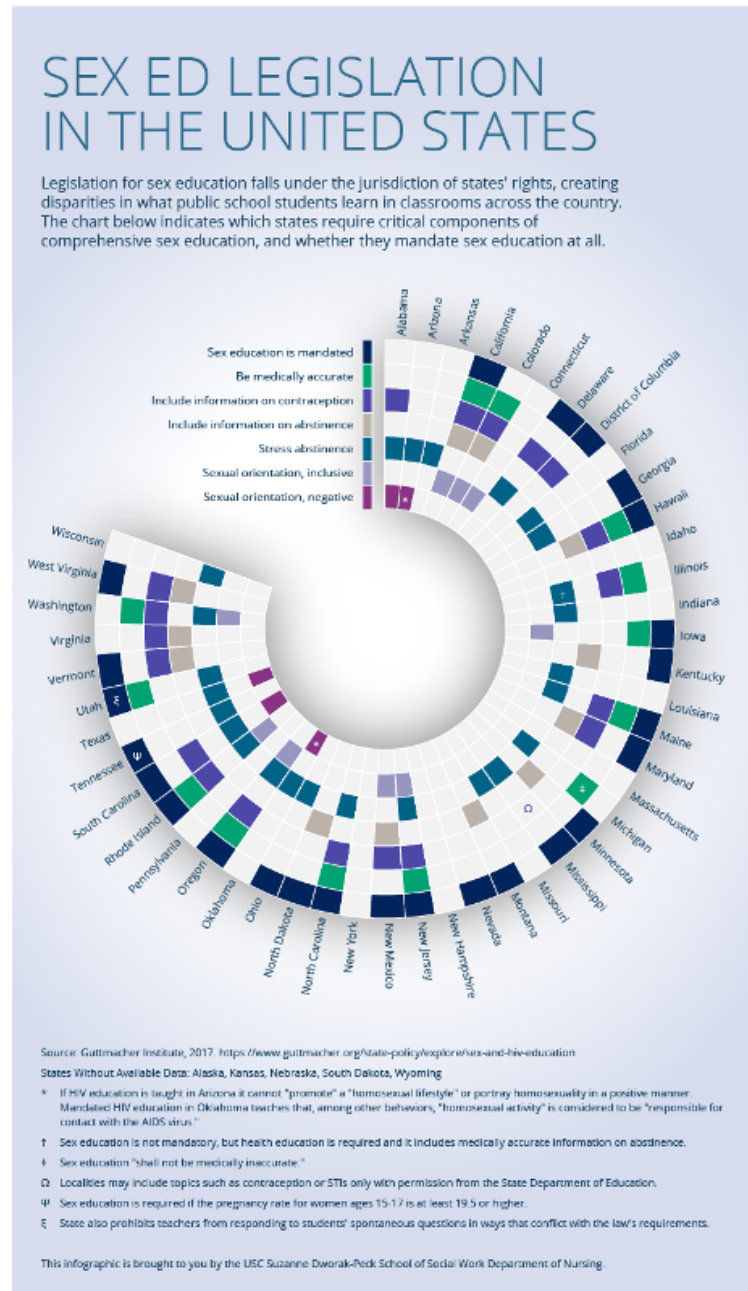


Figure VIII Sexual education legislation in the United States in 2017 :[†]“America's Sex Education: How We Are Failing Our Students.” USC University of Southern California, USC Department of Nursing, 18 Sept. 2017, nursing.usc.edu/blog/americas-sex-education/.

should be taught in sex education or even if it needs to be taught at all (Why Sex Education, 2021). Due to the lack of regulation only half of US states require sexual education and of those states thirteen require the information to be medically accurate (America's Sex Education, 2020). However, thirty-five states require information on abstinence or a "stress on abstinence" (America's Sex Education, 2020). That is more than double the states that require medical accuracy. In a time where the formal sexual education system suffers from extreme deficiencies; it is no wonder why adolescents leave their classes with questions about sex and pleasure and ultimately seek out other ways to answer their questions. In the 21st century, the internet and popular media was an anonymous and fairly unmonitored location people utilized to broaden their knowledge.

Internet Pornography

The failure to educate the youth of America about sex in a pleasure-centric context as well as long standing values such as those summarized by Freud including patriarchal control, heteronormativity, phallogentric, and anti-masturbation rhetoric led to the pendulum swinging back towards the re-popularization of the G-spot in the first decade of the 21st century. Music, internet pornography, comedy, and other forms of media all boosted the message that the G-spot was the epitome of sexual gratification for people with vulvas and vaginas.

Although people flock to many different forums on the internet for information, one entity that has played an especially large role in prescribing sexual behaviors especially among youth is internet pornography. Researchers in the study "Sexual Health and the Internet" explain "the vast majority of adolescents look for health information online" (Von Rosen). Not only are they seeking general information, but the author specifies, "Of particular interests for teenagers

is sexual health, an area raising a multitude of questions perceived as embarrassing, controversial, or sensitive” (Von Rosen). When curious individuals search the internet for sex information, they often find themselves on a pornography website. These sites are not difficult to come by as a 2021 publication points out that “Adult websites *Xvideos* and *Pornhub* are among the most trafficked in the United States, receiving an average of 693.5 million and 639.6 million monthly visitors respectively (Khalili, 2021)”. The author goes on to describe the vast impact of the sites by comparing viewership to some of the other top sites in America. He explains, “The two pornography giants outrank a number of major services, including Netflix (541 million), Zoom (629.5 million) and Twitch (255.3 million)” (Khalili, 2021). Internet pornography is incredibly popular, and it is readily available to the youth in America in a way that pornography has not been in the past. Before the internet, curious teens had to be more resourceful. They could search the stacks, look for their parents’ erotic magazines, or even possibly acquire a pornographic VHS. However, in the age of the internet, finding pornographic content is as easy as pulling out a phone, computer, or tablet and entering a few terms into an internet browser. This tactic is not only incredibly simple but is reliably popular among youth of the 21st century. In 2009 the terms “sex” and “porn” were the fourth and fifth most searched terms by people 18 and under (Kids ‘Top Searches in 2009, 2017). Pornography is being readily consumed by youth and shaping their understandings of sex and pleasure.

Internet pornography not only has an incredibly expansive reach, but it also has a tendency to get the facts of vulva-vaginal pleasure wrong according to the vast majority of pussy owners and scientists. Although the clitoris is readily understood by experts in sexology to be the main pleasure locust of vulvovaginal anatomy, this is not represented in pornography. By sheer volume, the G-spot and vaginal penetration receive much more viewership and video posts than

clitoral pleasure-based videos. A simple search of the top two pornography sites in the United States, *PornHub* and *Xvideos*, generates approximately 44,600 and 19,000 respective videos with a title containing the word “clit”. The term G-spot only warrants approximately 900 and 11000 videos respectively. However, a search for the term “squirt”, the colloquial name for female ejaculation typically achieved through penetration of the anterior wall of the vagina or what Dr. Graphenberg believed to be the distinct anatomical region of the G-spot, brings up 173,800 videos on *PornHub* and 47,5000 on *Xvideos*. This amounts to approximately 4x and 2.5x more squirting content than clit content on the sites respectively. These statistics do not match up with scientific understandings of the clitoris as the central pleasure organ of the female body. These results beg the question of why internet pornography has amplified the G-spot and squirting over the more scientifically backed conclusions regarding female genital stimulation.

Pornographic videos often focus on penetrative sex because it adheres to the norms and values of the patriarchy. Thus, when individuals visit pornography sites for information or pleasure, they are indoctrinated by subtle and not so subtle messages that have the potential to minimize clitoral sexual pleasure while simultaneously centering phallocentrism and heteronormativity. As previously stated, the internet including pornography websites are a location in which knowledge is co-produced and one of the factors of the production of knowledge is the social component. Internet pornography often centers videos that highlight the G-spot and squirting because it adheres to the social norms of the 21st century including traditional gender roles, phallocentric, female submission, and heterosexuality that are not much different to those of Freud’s time. Although porn actors and directors are faced with the physical genitalia on a daily basis, they are readily influenced by the society that they are producing the content for and as such produce content that adheres to the patriarchy.

One way that internet pornography adheres to the patriarchy is by producing content that is created for men by men. A Professor of Sociology and Gender Construction explains “[pornography] is an industry made by men for a male-oriented gaze” (Brown, 2017). Not only is it an industry, but it is also a very lucrative business. In order to continue to sell sex, pornography has centered its content around the expectations and wants of their main consumer. Men make up over 70% of Pornhub users and as such as article “sex education in the digital age” puts it, “so much freely accessible adult content features hypermasculinity and prioritizes male pleasure” (Sex Education in the Digital Age, 2019 and Dwulit, 2019). Pornographic content is less concerned with depicting scientifically accurate information or real vulvovaginal pleasure centric content and instead are more concerned with sales despite the value or validity of their content.

Pornography is not the only medium that influences people or is influenced by the social norms of the 21st century and the continued stigmatization of sex. The world wide web was rapidly growing and becoming more and more accessible with the creation and popularization of smart phones. The newfound availability to access the internet changed the ways in which people obtained information and shared ideas with one another. One revolutionary aspect about the internet is that it is a forum for people to connect and speak with one another. At the same time allowing everyone a voice allows for some harmful social and individual biases to flourish.

With little formal education on sexual health or anatomy, adolescents and even some adults flee to the internet and popular media accessible via the internet to answer all of their sexual questions. Although the internet provides an onslaught of information, it is not always a reliable source. Without the background knowledge about female pleasure and sex, people are at the whim of internet pornography, blogs, question and answer websites, sex and fashion

magazines, social media, and politically charged discourse surrounding all within the click of a mouse or touch of a button.

Popular Music

Music is another space in which Freudian and patriarchal norms dictates descriptions of sex and pleasure. Immensely popular and influential music genres R&B and Hip-Hop are wildly dynamic and diverse and include poetic discourse surrounding the Black experience, politics, adolescence, and a plethora of social issues. However, most importantly to this paper, some R&B and Hip-Hop artists also provide detailed accounts of normative sexual encounters in their lyrics. Some of the top performing songs of the 2000's not only alluded to vulvovaginal sexual pleasure, but directly explained the rappers' understandings of how to achieve it.

In chart topping song and influential anthem "Birthday Sex" artist Jeremih sings "Lemme hit that G-spot, G-spot, girl". He claims that his sexual ability is a "gift" and that he makes his partner "feel good" by hitting the G-spot. The song was released in 2009 and went on to hit 3x platinum, topped the Hot R&B/Hip-Hop Songs chart and reached 203 million views on the music video posted to *Youtube* (Jeremih, 2009). The song was an immediate hit and an article in *Vice* attests to its virality by stating, "There can hardly be a person in America, within a certain age bracket at least, who has celebrated a birthday during the last half-decade and not had someone bring up the song" (Kramer, 2016).

Jeremih is not alone in thinking that penetrating a vagina and stimulating his partner's G-spot is the ultimate goal. Iconic anthem of the early 21st century, "BedRock" by Young Money, a Hip hop group including some of the most influential artists in the genre including Lil Wayne, Niki Minaj, Tyga, Drake, Tyga, Lloyd and other popular artists discuss the G-spot in their highly

seductive and sexual anthem. The song is chalk full of word play and sexual innuendos including the line “My room is the G-spot, call me Mr. Flintstone I can make your bed rock” (Young Money). The artists refer to the socially acclaimed pleasure region, the G-spot, and their ability to stimulate it to claim their sexual prowess. The song was a wild success after its release in 2009. The anthem hit 3x platinum, number one on the billboard rap charts, and obtained 306M views on the music video uploaded to *YouTube* (Young Money).

Both of these songs set out to tell the story of the artists perceived sexual competence in pleasing their female partners. The artists’ lyrics work under the assumption that their ability to stimulate the G-spot is a testament to their sexual prowess. The mere fact that an anatomically questioned region made it into two of the top songs of 2009 attests to the influence and importance of the G-spot at the beginning of the century. These songs do not exist in a vacuum. Instead, they are representative of the social understandings of achieving peak vulvovaginal pleasure in the early 21st century. Not only are these songs representative of the vulvovaginal knowledge of the time, but also further reinforce the notion that the G-spot is the ultimate vulvovaginal pleasure locust.

Although the G-spot was represented in popular songs of the early 2000s, the region did not reign supreme for long. In the next few years, songs began alluding to the benefits of vulvovaginal oral sex and the stimulation of the clitoris. Some of the same artists who, a few years earlier, sang/rapped about the G-spot began including different language in their songs. The number one song that people listen to in sexual contexts determined by analysis of *Spotify* playlists is “All the Time” once again by the same artist of “Birthday Sex” Jerimiah (Khalili, 2021). His lyrics continue to describe his sexual encounters; however, in his song released in 2015, “All the Time”, the G-spot references have disappeared and were replaced with lines

discussing female pleasure through clitoral stimulation. Some provocative lines include “Pussy for breakfast, that’s how I start my day” (Jeremih, 2015). Jeremih not only discusses oral sex, but seemingly has no shame in it. Although many of Jeremiah’s songs are sexually explicit, he is not the only artist to discuss oral sex in his lyrics. Ty Dolla \$ign’s 2014 song “Or Nah” hit 6x platinum with lyrics such as “Do you like the way I flick my tongue or nah?” and “you can ride my face until your drippin’ cum” (Ty Dolla \$ign).

Both Jeremih and Ty Dolla \$ign describe their sexual skills very differently than a few years prior. They include their oral sex abilities and subsequently highlight the role of the clitoris in their partners’ sexual satisfaction. However, most of the artists’ lyrics regarding the clitoris are less about the importance of their partner achieving pleasure and more about their personal skill and abilities. The egotistical attitude reinforces their control over their partner and may be less liberatory than initially assumed. The singers seem to require and actively ask for praise or validation for contributing to their partner’s pleasure. This depicts the remaining social hesitancy to normalize clitoral stimulation and female pleasure without ultimately refocusing the discourse on the experience of the person with the penis. However, the shift from G-spot to clitoral centered pleasure lyrics are noteworthy despite the patriarchal tendencies to center the male experience. Unfortunately, these are somewhat rare cases in which a heterosexual cis-male artist even discusses the pleasure of his partner. Much of music remains phallocentric and heteronormative in discussions of sex and pleasure. The songs that allude to the clitoris also discuss penises and penetrative sex. However, interestingly the G-spot has fallen out of much of musical lyrics.

Although not a drastic shift in discourse away from patriarchal norms of sex, the inclusion of the clitoris and the disappearance of the G-spot in popular music lyrics is

noteworthy. Most of the songs describing the G-spot as the central locus of pleasure were created before 2010 and the songs discussing the clitoris began about five years later. This coincides with the official discovery of the internal clitoris and the following movement to inform society about the sexual potential of the clitoris which began in 2005 and continued into later years. The shift in lyrics marks the second component of a co-production framework; the physical world. In between the release of the songs with G-spot versus clitoral based lyrics, the world was reckoning with the new physical discovery of the full clitoris in which the social world and the physical world were forced to interact and reconcile with each other.

Limitations of the Internet

Although the internet provides information about sexual health and pleasure, it is simply a mediator of the current knowledge of the era as seen by the representation of the clitoris and G-spot in internet pornography and music. The internet can only remedy the lack of knowledge to a certain extent and despite the presence of the internet and popular media people still lack critical knowledge about their bodies and their right for sexual gratification. In a new docuseries entitled *The Principles of Pleasure*, the creators of the show interview a diverse group of women about their experiences with their body, sex education, and pleasure. One of the first questions the researchers ask is if the participants can describe their genital anatomy. The majority of the participants respond with some iteration of a blank stare, shaking of the head, or giggle in discomfort. However, some people offer answers such as “I don’t really know the workings of it” or “I could tell you 90 different slang terms” (*The Principles of Pleasure*). Despite the information that exists on the internet, many people still do not understand the anatomy of their genitals.

This begs the question if we have come so far in scientific and social discourse, why do people still lack the language to talk about their genitals. Part of the answer is that many people simply have not been told explicitly or implicitly that they are allowed to. When asked about their experiences discussing sex and pleasure the participants had a variety of answers.

Some comments were as follows:

“Everybody tries to avoid [talking about pleasure]”

“Sex was not a word we spoke about at all”

“We do not talk about such things”

“There was no introduction to anatomy there was no explanation of what a vulva was, just do not have sex”

“Female pleasure is hardly discussed”

“I don't think I've really talked to many people about [pleasure]. Like I don't even talk to my sisters about it”

“Talking about pleasure can feel awkward”

(The Principles, 2022)

A major component to this discomfort in talking about sex and pleasure is driven by shame and the belief that people with vulvas and vaginas do not deserve to experience pleasure. The lack of adequate discussions about sex and pleasure inadvertently gives women the message that their sexual experiences are not valuable and should not be discussed in detail. Some other participants gave greater insight into their personal experiences with shame and discomfort relating to their experiences of pleasure. Women explained:

“I would like to know how to not feel so guilty about having pleasure”

“Even though this was somebody I was deeply in love with it was also filled with the idea that what I’m doing is so”

“One of the biggest challenges to women’s sexuality is just the tremendous shame that exist around it both from ourselves and from partners, and society”

(The Principles, 2022)

These anecdotes come as no surprise as much of the historical discourse around human sexuality either did not include vulvovaginal pleasure or actively villainized it. Expert in the field Allison Davis explains “we’ve been told for so long who has sexual power and its never women, we’ve been told who can express sexuality and its generally white and heteronormative. It is hard to think I’m allowed to do this” (The Principles). Many of these historic beliefs and social scripts that have been outlined in previous chapters including phallocentrism, sexual morality, heterosexuality, prescribed gender roles, and other manifestations of the patriarchy continue to affect the knowledge we have today. This rich history has been difficult to entirely expunge, and the pendulum continues to swing as science and society reconcile with their understandings of vulvovaginal pleasure.

A Look Towards the Future

Although the continued struggle for people to be empowered about their bodies as women or people with vulvovaginal anatomy has not been entirely remedied, there is hope for the future. The mere fact that a docuseries was created detailing sexual pleasure is a step towards increasing knowledge and in turn empowering people and their sexuality. Social prescriptions of human sexuality including the current social framework of femininity, heterosexuality, phallocentrism, and associations of pleasure with shame remain and interact with the physical world. However, these ideas are not unchallenged. Social attitudes are changing with novel

scientific discoveries, increased conversations about genital pleasure, and different voices leading conversations about sex and pleasure.

The discipline of STS is based upon analyzing the effects of the physical world, power dynamics, and social beliefs as they interact with one another and ultimately influence knowledge. As such, this thesis has explored the impact of these influences on current and historical understandings of vulvovaginal anatomy and sexual pleasure. Throughout this thesis, I have outlined a plethora of social and physical forces including feminist thought, scientific discovery, normativity perpetuated by the patriarchy, technology, physical anatomy as well as a variety of other factors that have contributed to the production of knowledge throughout history beginning with Freud. In this thesis vulvovaginal anatomy served as a case study in the history of science, co-productionist framework, as well as the overarching concept that knowledge is constructed.

As seen throughout this thesis, there are many individuals and institutions working to suppress vulvovaginal pleasure. This is a sign of the power that vulvovaginal pleasure holds. Only something with the potential for great power and liberation would warrant attempted erasure to this magnitude. As such, people must continue to push back against oppressive notions of sexuality and replace them with newly empowered understandings of their bodies and their ability for pleasure as a human right. Simply acknowledging sexual pleasure as an enriching, healthy, and valuable sensation is an act of rebellion against patriarchal norms that try to minimize sexual pleasure. We must as Audre Lorde explains, use the erotic as power.

We have been taught to suspect [the erotic], vilified, abused, and devalued within western society [...] But when we begin to live from within outward, in touch with the power of the erotic within ourselves, and allowing that power to inform and illuminate our actions upon the world around us, then we begin to be responsible to

ourselves in the deepest sense [...] Within the celebration of the erotic in all our endeavors, my work becomes a conscious decision - a longed-for bed which I enter gratefully and from which I rise up empowered. Of course, women so empowered are dangerous.

-Audre Lorde

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