

Women's Experiences of the Sexual Relationship
at the Age of Onset of Female Ejaculation

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Abstract

Ten women were interviewed about aspects of the sexual relationship they were in when they first experienced female ejaculation. Interview data was analyzed using phenomenology. Analysis revealed the women experienced their first female ejaculation in various types of sexual relationships all of which had some type of personal connection. Three types of personal connections defining their relationships are identified and described including “intimacy, closeness, friendship, or attraction;” “functional;” and “sexual exploration, discovery, learning, or experimentation.” The women were experiencing elements that were distinct and unprecedented in the sexual relationship they were in when they first experienced female ejaculation compared to previous and subsequent sexual relationships in which they did not. The most important “primary” elements and differences the women were experiencing are in the following areas: (a) trust, (b) positive traits and behaviors in their partner, (c) sexual receptivity, (d) comfort, (e) feelings for their partner, (f) sexual stimulation, (g) undergoing a biological change or transition, or (h) the overall personal connection that defined their sexual relationship. These “primary” elements and differences in turn created many equally important “secondary” elements and differences the women were experiencing. The “primary” and “secondary” elements and differences the women were experiencing in their sexual relationship when they first ejaculated can help explain the wide range in the age of onset in female ejaculation.

Keywords: ejaculation, female prostate, g-spot, orgasm, phenomenology, women’s sexuality, female sexual experience, sexual fluids.

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Women's Experiences of the Sexual Relationship at the Age of Onset of Female Ejaculation

Our ancestors acknowledged the existence of female ejaculation long ago. With or without error, over the centuries various cultures including the Greeks, Romans, Indians, Chinese, Japanese, and Europeans incorporated female ejaculation into their understanding of human female sexuality.

The Greeks called the labia minora *nymphae* or "water goddesses" in honor of female ejaculation while the Romans called female sexual fluids *liquor vitae* (Sevely, 1987, p. 65). Both the Greeks and Romans believed in a two-seeded theory of male and female sexual fluids (Sevely, 1987). Hippocrates and Galen believed both female and male sexual fluids contained seed, and were equally essential for the creation of life. Reflecting this view both female and male sexual fluids were referred to as semen. Conversely, Aristotle disagreed with the idea that female ejaculation contained seed and was life-producing.

The spiritual tradition of Tantra in ancient India called female fluids *amrita* or "the nectar of the gods" (Sundahl, 2003, p. 52). Tantra put female ejaculation into its own category of female sexual secretions called *suklum*, or ejaculate. It encouraged the practice of *amaroli*, or the drinking of female emissions like ejaculate for its nutritious value, and held female ejaculation as integral to achieving spiritual enlightenment (Sundahl, 2003).

In ancient Chinese Taoism levels of female stimulation and arousal, and their associated sexual secretions, were illustrated using the metaphor of water and a river.

The highest state of female stimulation and arousal, or the "third water," corresponded to female ejaculation and the height of orgasm when a river overflows the banks and nourishes the fields (Sundahl, 2003).

In 16th century Japan woodblock prints from the *Shung* art movement candidly depicted female ejaculation being caught in containers. Female ejaculation was prized, collected, and drunk from separate bowls, or bowls built into parts of dildos like the *harikate*, for the rejuvenating properties such as reversing the aging process (Sundahl, 2003).

Catholicism in medieval Europe opposed a form of pregnancy prevention called *amplexus enervators*, which involved men and women holding back their ejaculate, because both were considered fertile (Sevely, 1987).

In his 1672 *New Treatise Concerning the Generative Organs of Women*, Dutch anatomist Regnier de Graaf spoke of female ejaculation as lubrication, making women more libidinous, flowing outside the pudenda (vulva), coming from the female prostate, being a source of pleasure for women, and that it is stimulated by "frisky fingers" and that it "often rushes out at the mere sight of handsome men" (as cited in Sevely & Bennet, 1978, p. 9).

Obstetrician and gynecologist Ernest Grafenberg wrote that female ejaculate fluid is clear and transparent, is emitted from the urethra, gushes, upon examination has no urinary character, is secreted by the intraurethral glands (female prostate), is linked to the erogenous zone of the anterior wall of the vagina, and has no lubricating significance because it occurs during orgasm (Grafenberg, 1950).

Historically, along with those who have acknowledged the existence of female ejaculation, there are those who have refused to acknowledge the existence of it (Sevely & Bennett, 1978). Alfred Kinsey, a modern and very influential sexologist, refuted the existence of female ejaculation and the idea that the female prostate is non-vestigial. He refuted the idea that female ejaculation exists based on the mistaken claim that the female prostate is vestigial. He explained that any female sexual fluids released during or after orgasm was due to muscles contracting during orgasm that squeeze out female sexual fluids, and in some instances cause an actual ejection of female sexual fluids (Kinsey, Pomeroy, Martin, & Gebhard, 1953). Similarly, other prominent contemporary sexologists like William Masters and Virginia Johnson who have shaped current views on human sexuality dismissed the existence of female ejaculation. Masters and Johnson completely dismissed the existence of female ejaculation stating that it is an “erroneous but widespread concept” (as cited in Sevely & Bennett, 1978, p. 7).

There have clearly been many different ideas about female ejaculation throughout the ages. Eventually, concepts that at least acknowledged the existence of female ejaculation, whether correct or incorrect, slowly gave way and were exchanged for the predominant view that female ejaculation does not exist. At one time female ejaculation held a prominent place in human female sexuality. What happened that the existence of female ejaculation has come to be denied? An answer to this question surfaced in 1978 with the publication of the groundbreaking article *Concerning Female Ejaculation and the Female Prostate* by Sevely and Bennett. Sevely and Bennett (1978) believed that the catalyst for the rejection of female ejaculation dated back to Aristotle when female sexual

fluids were shown to be devoid of seed. It was then that ejaculation became associated solely with seed, and therefore solely with men. Other explanations have followed.

Winton (1989) proposed that female ejaculation has not been embraced in our society because those who have power and control have not been socially constructing and scripting female ejaculation as an integral aspect of human female sexuality.

Fortunately, Sevely and Bennett (1978) brought the topic of female ejaculation to the attention of the scientific community. In this report the authors confronted the presumption that women do not ejaculate, do not have a female prostate, and that women have a vestigial or rudimentary prostate despite scientific evidence to the contrary. They built their case on the following points: (a) women and men are more similar than different in their coital responses; (b) there is homology between the male and female prostate, because both develop from the same embryological tissue; (c) there are problems with female urinary-genital anatomical terminology; (d) there are wide variations in female prostates; and (e) the nature of the anatomical, urological, and pathological focus on female ejaculation at the exclusion of a perspective of sexual pleasure. Upon completing their review the scholars concluded that female ejaculation exists, women can ejaculate, and that female ejaculation is a source of erotic pleasure. They called upon the scientific community to research female ejaculation.

Since 1978 research on female ejaculation has been conducted in the following areas of study: (a) the existence of female ejaculation; (b) descriptions of female ejaculate fluid; (c) prevalence rates of female ejaculation; (d) the chemical composition of female ejaculation; (e) the medical pathologizing of female ejaculation as urinary incontinence,

and testing for and ruling out medical problems in female ejaculators; (f) the source, structure, and mechanism of female ejaculation; (g) the function of female ejaculate fluid; (h) the sexual stimulation needed for female ejaculation to occur; (i) the relationship of female ejaculation to orgasm; (j) women's emotional responses to female ejaculation, and the impact of female ejaculation on the sexual identities and lives of women; and (k) the implications of findings on female ejaculation in treatment.

Despite the present-day research that has accumulated in this area in response to Sevely and Bennett's 1978 article the matter of female ejaculation is still unresolved and continues to be a controversial topic to this day. A review of the literature reveals heated discussion characterized by disagreement rather than agreement on female ejaculation, and more questions about female ejaculation than answers. The overall tone is one of tension and perplexity due to researchers coming to different conclusions based on the evidence studies have produced, the actual mixed results of studies, and a lack of knowledge about the nature of female ejaculation. To enter the dialogue on female ejaculation means to enter this great sexual debate and mystery.

Reflective of the incomplete state of scientific knowledge of female ejaculation on the most fundamental level is the lack of a universal definition of female ejaculation. Definitions of female ejaculation vary in both the popular and scientific literature. Popular literature has referred to female ejaculation as "fluid created by the prostate gland in both men and women, emitted during arousal" (Sundahl, 2003, p. 195); "to push out semen or female ejaculate liquid" (Pokras & Tall Trees, 2009, p. 259); "the ejection

of fluid through the urethra at the moment of orgasm” (Ladas, Whipple, & Perry, 1982, p. 66); and “ejaculating fluids from the urethra” (Winks, 2007, p. 28).

Scientific literature has defined female ejaculation as “a partial, infertile homologue of male ejaculation” (Addiego et al., 1981, p. 20); “expulsion of fluid during orgasm” (Darling, Davidson, & Conway-Welch, 1990, p. 29); “spurt of fluid at the moment of orgasm” (Davidson, Darling, & Conway-Welch, 1989, p. 109); “expulsion of fluid during the orgasm or feeling a greater humid sensation that increments itself during the climax” (Cabello, 1997, Introduction section, para. 7); “a viscous, white secretion, which exits from the urethra upon sexual stimulation in some women” (Moalem & Reidenberg, 2009, Summary section, para. 1); “the fluid of urethral expulsions” (Zaviacic & Whipple, 1993, p. 149); “expulsion of fluid from the urethra” (Whipple & Komisaruk, 1999, p. 35); “expulsion of fluid from the urethra’ during sexual arousal” (Gilliland, 2009, p. 122); and “the release or gush of fluid around the time of orgasm” (Gilliland, 2009, p. 123).

Most of these definitions of female ejaculation in the popular and scientific literature are generic rather than comprehensive, and do not include any details about where the fluid is produced in the body, how it is ejected, the purposes of the fluid, nor do they describe the characteristics and composition of the fluid itself. Some of the definitions also conflict regarding where female ejaculation occurs during the sexual response cycle. The absence of a unanimous definition of female ejaculation demonstrates that a consensus in the scientific research community and vital information in our understanding of female ejaculation is missing.

All of this--the disagreement, the tone of tension and perplexity, the varying scientific research results and conclusions, the insufficient knowledge, and no widespread definition--makes for a complex topic. The range of research on female ejaculation adds even more to the complexity. Complicating things further, female ejaculation is often entwined in the literature with a variety of other subjects important in their own right, such as the female prostate and g-spot (Grafenberg Spot), which also are not fully understood, have sparked controversy of their own, and whose existences have also been called into question. To fully explore female ejaculation means to enter this multifaceted web of research, which contains other sexual debates and mysteries, and investigate the literature where the topic of female ejaculation emerges.

Purpose of the Study

This master's thesis enters the dialogue of the long-standing sexual debate and mystery of female ejaculation with the purpose of expanding knowledge of female ejaculation in general and expanding knowledge on qualitative phenomenological research on female ejaculation in particular. Presently, only one qualitative phenomenological study is known to exist on female ejaculation titled *Women's Experiences of Female Ejaculation* by Gilliland published in 2009. In this study women's emotional experiences of female ejaculation and the impact of female ejaculation on their sexual identities and lives was investigated, thereby officially opening and establishing the first forum in the scientific literature for women to speak about their experiences of female ejaculation. This master's thesis adds new voices to this chorus.

Currently, no studies are known to exist on the age of onset of female ejaculation, specifically on the sexual relationships women were in when they first experienced female ejaculation, nor are any studies known to exist that have corroborated Gilliland's (2009) findings either. Gilliland (2009) states:

For the most part this study highlights what we do not know about female ejaculation. It indicates several trends that may be of interest to sexologists and physiological researchers. The distinctive patterns in age of onset are deserving of further inquiry. Physiological changes may be responsible or it may have more to do with reaching a particular level of arousal, or a certain amount of intrapersonal safety and comfort. While I asked the age when sexual activity began, I did not inquire about the quality of sexual relationships in women's lives at the time they began experiencing ejaculation. (p. 132)

This master's thesis investigates the age of onset of female ejaculation by looking at women's experiences of the sexual relationship they were in when they first ejaculated. It asks women about: (a) their experiences of ejaculating for the first time, (b) their experience of the general and sexual relationship they were in, (c) their experience of having sex in the relationship in which they first experienced female ejaculation compared to previous sexual relationships, (d) what was happening in the larger context of their life at the time, and (e) why they believe they experienced female ejaculation for the first time when they did. The specific aspects of women's general and sexual relationships this master's thesis examines are: (a) general and sexual relationship quality, (b) sexual stimulation, (c) level of sexual desire, (d) level of sexual arousal, (e)

sexual receptivity, (f) general and sexual intrapersonal comfort, and (g) general and sexual intrapersonal safety. The central research question of this master's thesis is: What are women experiencing in the sexual relationship at the age of onset of female ejaculation?

Literature Review

Existence

Early investigations on female ejaculation have confirmed through various methodologies that women expel a fluid during orgasm. Some studies have proven the existence of female ejaculation through direct observation (Addiego et al., 1981; Weisberg, 1981). Others have validated the existence of female ejaculation by conducting literature reviews, and in some cases by further supplementing the literature reviews with information on female ejaculation received from interviews and personal testimonies (Alzate, 1986; Belzer, 1981). Others have verified the existence of female ejaculation through questionnaires results. For example, Darling et al. (1990) found that out of 1289 women in health-related professions 40% experienced ejaculation at orgasm, 82% considered the possibility that some women ejaculate, and 68.2% believed that some women ejaculate.

However, the results of one recent investigation have not supported the existence of female ejaculation as none of the women noticeably expelled a fluid during orgasm (Shafik, Shafik, Sibai, & Shafik, 2009). For the methodology in this study, Shafik et al. (2009) used clitoral electrovibration to produce orgasm and female ejaculation in 38 women while simultaneously measuring for other physical sexual responses such as

vaginal and uterine pressures, and EMG recordings of the corpus cavernosum, ischiocavernosus muscles, and bulbocavernosus muscles. The women achieved orgasm, but did not produce female ejaculation. The authors admitted the possibility that the women did not ejaculate due to the laboratory environment not being psychologically conducive for ejaculation to occur, and the absence of foreplay. They also acknowledged that an experiment does not duplicate the natural setting in which love making takes place between two people.

Additionally, Shafik et al. (2009) did not use the methodologies used by previous studies that have proven the existence of female ejaculation. For example, in contrast to Shafik et al. (2009), the laboratory methodology of Addiego et al. (1981) that produced orgasm and female ejaculation in their single research subject did not include measuring devices for other physical sexual responses, and permitted the woman's husband to stimulate her g-spot vaginally with his fingers to produce female ejaculation. Differences in methodology between studies such as Shafik et al. (2009) and Addiego et al. (1981) could explain differences in results that have not supported the existence of female ejaculation and results that have proven the existence of female ejaculation.

Description

Inquiries have gathered data on the characteristics of female ejaculate fluid itself including the color, appearance, consistency, forcefulness, volume, odor, taste, sensation, and the location from where the fluid is emitted. Consistently, researchers have sighted female ejaculation exiting from the urethra (Addiego et al., 1981; Alzate, 1985b; Goldberg et al., 1983; Weisburg, 1981). Female ejaculation has been described in the

literature as “watered-down fat free/skim milk,” “milky,” “white stuff,” “whitish opalescent fluid,” “prostatic fluid,” containing “whitish particles observable to the naked eye,” “turbid,” “yellow,” “clear,” “watery,” “thin,” “thick,” “slippery,” “intense,” “heavy water flow,” “wet orgasms,” “flowing,” “flooding,” “gushing,” “melting,” “squirting,” “releasing,” and “a balloon inside that finally bursts” (Addiego et al., 1981; Alzate, 1985b; Belzer, 1981; Darling et al., 1990; Davidson et al., 1989; Gilliland, 2009; Goldberg et al., 1983; Heath, 1984; Riley, Gibbin, & Riley, 2005; Weisberg, 1981; Whipple, 2000; Whipple & Komisaruk, 1999; Zaviacic, Zaviacicova, Holoman, & Molcan, 1988). The volume of female ejaculate fluid has varied widely in the literature measuring approximately from 0.20 to 10.14 teaspoons (1/5 teaspoons to 10 1/7 teaspoons), or 1 to 50 cubic centimeters and milliliters (Alzate, 1985b; Bullough et al., 1984; Goldberg, 1983; Heath, 1984; Whipple, 2000; Whipple & Komisaruk, 1999; and Zaviacic, Zaviacicova, et al., 1988). The amount of fluid women ejaculate has also left wet spots on towels comparable to the size of a soda can, compact disc, and larger (Gilliland, 2009). Female ejaculation has also been described in the literature as not resembling urine in taste or smell, nor as having the power to stain cloth (Addiego et al., 1981; Belzer, 1981; Gilliland, 2009; Goldberg et al., 1983; Whipple, 2000; Whipple & Komisaruk, 1999).

Prevalence

Prevalence rates of female ejaculation have varied in the literature. For example, Bullough et al. (1984) found through questionnaires that 123 of 227 women, or 54%, had experience with female ejaculation with 14% of the 123 women ejaculating most or all

the time upon orgasm. Darling et al. (1990) also found through questionnaires that 40% of 1289 women had experience with ejaculating at orgasm. Prevalence rates of female ejaculation based on sexual orientation have not varied in the literature. Specifically, although one study found a correlation existed between having sexual experience with a female partner and ejaculation, almost as many heterosexual women had experience with ejaculation as lesbians (Bullough et al., 1984).

Chemical Composition

A number of trials have established that the chemical composition of female ejaculate differs from urine and is comparable to sperm-less male ejaculate (Addiego et al., 1981; Belzer, Whipple, & Moger, 1984; Cabello, 1997; Schubach, 1997; Wimpissinger, Stifter, Grin, & Stackl, 2007; Zaviacic, Dolezalova, et al., 1988). Specifically, the chemical analysis from these trials have proven female ejaculate is not urine, and is similar to male ejaculate in the following ways: (a) by having higher levels of glucose; (b) by having higher levels of prostatic acid phosphatase (PAP), an enzyme produced by the male prostate that is found in semen; (c) by having lower levels of urea and creatinine, which are found in high levels in urine; (d) by having higher levels of fructose; and (e) by having higher levels of prostate specific antigen (PSA), the marker for identifying prostate tissue, which is also found in high levels in male ejaculate fluid.

However, two trials that analyzed the chemical composition of female ejaculate arrived at conflicting results in which the chemical composition of the fluid did not differ from urine (Alzate, 1985b; Goldberg et al., 1983). For the methodology of one of these studies, Goldberg et al. (1983) allowed six women to use any non-coital activity that

resulted in orgasm and female ejaculation. Individually in a private room the women engaged in the non-coital sexual stimulation of their choice to orgasm and ejaculate. Their ejaculate fluid was collected in sterile containers, but without a member of the research team present and observing. The chemical components of the ejaculate the investigators analyzed included PAP, glucose, urea, and creatinine. Chemical analysis revealed no differences in chemical composition between the ejaculate and urine.

Differences in methodology between the Goldberg et al. (1983) study in which the chemical composition of female ejaculate fluid did not differ from urine and studies in which the chemical composition of female ejaculate fluid did differ from urine could explain differences in the results of chemical analysis across studies. For example, when comparing the procedures of Goldberg et al. (1983) to Addiego et al. (1981), in which the chemical composition of female ejaculate fluid differed from urine, it is clear that they were very similar in design. They both analyzed the same chemical components of the ejaculate including PAP, glucose, urea, and creatinine using the same methods. However, although similar in design, the two studies were not identical. The procedures significantly differed in that the research participants in the Addiego et al. (1981) study ejaculated in the presence of the research team while the research participants in the Goldberg et al. (1983) study did not (Belzer et al., 1984). There was no way for the Goldberg et al. (1983) research team to know for certain if their research subjects actually engaged in sexual stimulation that produced orgasm and female ejaculation. In other words, there was no way for the Goldberg et al. (1983) research team to know for certain exactly by what means the fluid was produced.

For the methodology of the second study in which the chemical composition of female ejaculate fluid did not differ from urine, Alzate (1985b) used vaginal stimulation delivered digitally by one of the researchers to investigate vaginal erotic sensitivity in 27 women. One of the 27 women insisted she often ejaculated at orgasm, and while one of the researchers had his fingers motionless inside her vagina she demonstrated by stimulating her clitoris and ejaculating at orgasm. The investigators analyzed the chemical composition of the fluid, and the results of the chemical analysis indicated it did not differ from urine.

Differences in methodology between this second study in which the chemical composition of female ejaculate fluid did not differ from urine, and studies in which the chemical composition of female ejaculate fluid did differ from urine could again explain differences in the results of fluid chemical analysis across studies. For example, when comparing the procedures of Alzate (1985b) to Addiego et al. (1981), in which the chemical composition of female ejaculate fluid differed from urine, the sexual stimulation used to produce the fluid differed. In the Alzate (1985b) study, one of the researchers had his fingers motionless inside the woman's vagina as she demonstrated being able to ejaculate at orgasm by stimulating her clitoris. In contrast, the Addiego et al. (1981) study permitted the husband of their single research subject to stimulate her g-spot vaginally with his fingers to produce female ejaculation. Unfortunately, the published report of the Alzate (1985b) study does not state the procedures for how the chemical composition of the female ejaculate fluid was analyzed to compare the procedures to those of other studies.

Urinary Incontinence

The results of experiments have challenged the pathological view that all fluid expelled from the female urethra is rooted in urinary incontinence (Addiego et al., 1981; Belzer 1981; Belzer et al., 1984; Cabello, 1997; Cartwright, Elvy, & Cardozo, 2007; Heath, 1984; Schubach, 1997; Wimpissinger et al., 2007; Zaviacic, Dolezalova, et al., 1988). Experiments that have found the chemical composition of female ejaculate to differ from urine invalidate the view that fluid expulsions from the female urethra are caused by urinary incontinence (Addiego et al., 1981; Belzer et al., 1984; Cabello, 1997; Schubach, 1997; Wimpissinger et al., 2007; Zaviacic, Dolezalova, et al., 1988).

However, experiments that have found that the chemical composition of female ejaculate does not differ from urine legitimize the view that fluid expulsions from the female urethra are rooted in urinary incontinence (Alzate, 1985b; Goldberg et al., 1983).

Based on suggestions in the literature of possible sources of female ejaculate fluid, some experiments have tested directly for urological problems in female ejaculators to rule them out. These particular experiments have revealed female ejaculators do not have detrusor overactivity, have normal bladder activity as the results of bladder diaries and questionnaires indicated, and upon examination have no urethral diverticulum (Cartwright et al., 2007; Wimpissinger et al., 2007).

Source, Structure, and Mechanism

Researchers have theorized that the female prostate is the source of female ejaculate (Sevely & Bennett, 1978). The female prostate has been defined as the ductal and glandular tissue “below the bladder and surrounding the urethra” (Moalem &

Reidenberg, 2009, p. 1). The premise that the female prostate is the source of female ejaculate has been based on the concept of homology, and indeed science has increasingly discovered that the female prostate is homologous to the male prostate. Mounting evidence indicates the following: (a) the female prostate develops from the same embryonic tissue as the male prostate; (b) it is prone to the same diseases as the male prostate; (c) it visually resembles the male prostate using high-definition ultrasound; (d) Prostate-Specific Antigen (PSA) used to identify normal and abnormal prostate tissue in men binds to normal and abnormal prostate tissue in women; (e) enzymes found in the female prostate tissue are found in male prostate tissue; and (f) the female prostate is composed of the same glandular, ductal, and cellular structure as male prostate tissue (Tepper, Jagirdar, Heath, & Geller, 1984; Wimpissinger et al., 2007; Zaviacic, 1984a, 1984b, 1999; Zaviacic & Ablin, 2000; Zaviacic & Whipple, 1993; Zaviacic, Jakubovska, Belosovic, & Breza, 2000).

Studies have shown that the structure of the female prostate varies considerably from woman to woman (Zaviacic, 1984a, 1984b). Specifically, the number of ducts, glands, as well as the reaction of the ducts and glands to methods used to identify prostate tissue greatly differs. Furthermore, the arrangement of female prostate tissue along the course of the urethra varies considerably from woman to woman. Currently, four types of female prostates have been identified and described: (a) the anterior (meatal) type, (b) the posterior type, (c) the middle or dumbbell type, and (d) the rudimentary type (Zaviacic, 1999). In the anterior (meatal) type the female prostate tissue is located near the external urethral opening, and estimated to be the most common. In the posterior

type the female prostate tissue is located towards the back of the urethra near the bladder, and estimated to be the second most common. In the middle or dumbbell type the female prostate tissue is distributed along the entire length of the urethra, and is estimated to be quite rare. In the rudimentary type the ducts and glands of the female prostate are scarce, and is also estimated to be quite rare. Although studies have identified different types of prostates, and that they vary from woman to woman, to the student's knowledge at this point in time there is no scientific evidence showing a correlation between different types of prostates and quantity or quality of female ejaculation.

The theory that the female prostate is the sole source of female ejaculate has not gone without reasonable criticism. Stressing similarity between the sexes, some have contended that given the average volume of male semen produced during ejaculation, the multiple sources of male ejaculate, and the fact that the male prostate is larger and more glandular than the female prostate it would appear that additional structures must be involved in producing female ejaculate measuring more than 5ml or ccs (Bohlen, 1982).

One study has reinforced the view that additional structures may be involved in producing female ejaculate (Schubach, 1997). This study used catheters to separate the bladder from the urethra in seven women who ejaculate to clarify where the fluid originates. Upon ejaculating the fluid drained into the catheter collection bags of all the women, and milky discharge drained from the urethras of five of the women in the study. Chemical analysis of the fluid in the catheter collection bags showed significantly lower levels of urea and creatinine typically found in high levels in urine. According to Schubach (1997), the results implicated: (a) the possible involvement of the bladder and

kidneys in the production of female ejaculate along with the female prostate, and (b) female ejaculate could be an altered form of urine transformed through a hormonal chemical process.

Just as there may be multiple anatomical sources of female ejaculate, scientists have speculated there may be more than one direction in which the fluid flows. A study on the chemical analysis of women's post-orgasmic urine showed that the urine contained Prostate Specific Antigen (PSA), the main marker used to identify female prostate fluid in female ejaculate, supporting the idea that like men, women may also mechanically ejaculate both outwards from the urethra and inward back into the bladder, therefore making all or nearly all women ejaculators whether they realize it or not (Cabello, 1997).

As with female ejaculation, the existence of the female prostate has been met with resistance. Some have logically recommended ruling out all other anatomical and medical possibilities when identifying the existence of the female prostate (Bohlen, 1982). The conflict regarding the female prostate has mostly surrounded its level of functioning, and the use of the term *female prostate* (Alzate & Hoch, 1986). Opposition has endured for the following reasons: (a) the biomedical community regards the anatomical structure of the female prostate as rudimentary and vestigial based on the work of Alexander Skene dating back to 1880, and (b) the anatomical structure the terminology female prostate refers to has long been accepted and known by the medical community as "Skene's ducts and glands" named after Alexander Skene who is credited with discovering them. Opposition has endured despite the strong and substantial research in recent decades that has clearly shown that the female prostate is a functional

and distinct organ warranting a reconceptualization, and despite the fact that a careful historical review of the literature reveals that the Dutch physician Regnier de Graff is the true discoverer of the female paraurethral ducts and glands, not Alexander Skene, and that Regnier de Graff used the term female prostate and judged it to be functional (Zaviacic & Ablin, 2000; Zaviacic & Whipple, 1993; Zaviacic et al., 2000).

Function

Experts have theorized that female ejaculation plays multiple roles in women's health and reproduction in addition to contributing to erotic pleasure. Ejaculating may have positive effects on women's health whereas not ejaculating may have negative effects. Specifically, researchers have postulated that women who ejaculate have fewer bladder infections (Whipple & Perry as cited in Ladas et al., 1982). They have also postulated that refraining from ejaculating may cause pelvic tension, which in turn may cause vaginal and urinary tract infections due to a reduction in lymph and blood flow, which in turn may impair the circulation of white blood cells making this anatomical region susceptible to infection (Whipple & Perry as cited in Ladas et al., 1982).

Expanding on these ideas researchers have hypothesized that female ejaculation is evolutionarily advantageous. Specifically, women who ejaculate are more likely free from urinary tract infections, which in turn makes them more frequently available and open to coitus, which in turn makes them more likely to become pregnant, which in turn makes them more likely to reproduce the species (Moalem & Reidenberg, 2009).

Due to the presence of fructose in female ejaculate, scientists have speculated that it may play a role similar to male semen in reproduction by ensuring the vitality and

motility of sperm, or in other words by providing sperm with an energy source and the ability to swim well towards an egg to fertilize it (Zaviacic, Dolezalova, et al., 1988).

As with female ejaculation, researchers have theorized that the Grafenberg Spot, or g-spot, plays an important adaptive role in women's reproductive health. Specifically, the g-spot may raise women's pain threshold during childbirth when it is stimulated, or in other words g-spot stimulation may block pain during childbirth thus making delivery more bearable (Whipple, 2000; Whipple & Komisaruk, 1999).

Sexual Stimulation and Orgasm

In the literature female ejaculation has often been associated with the Grafenberg Spot, or g-spot, and sexual stimulation of the Grafenberg Spot has often been considered necessary for female ejaculation to occur. The g-spot has been defined as "a sensitive area felt through the anterior wall of the vagina about halfway between the back of the pubic bone and the cervix, along the course of the urethra, which swells when it is stimulated" (Zaviacic & Whipple, p. 149, 1993). It has also been described as feeling like a small bean that swells when stimulated (Ladas et al., 1982).

Several studies have demonstrated that the g-spot can be physically found as the researchers physically located the g-spot in their participants (Addiego et al., 1981; Perry & Whipple, 1981; Zaviacic, Zaviacicova, et al., 1988). However, in one study researchers were unable to physically locate the g-spot in all their participants (Goldberg et al., 1983). Similarly, several studies have demonstrated female ejaculation is produced with g-spot stimulation (Addiego et al., 1981; Zaviacic, Dolezalova, et al., 1988; Zaviacic, Zaviacicova, et al., 1988). However, in one of these studies researchers could

not produce female ejaculation in all participants despite physically locating and stimulating the g-spot in all participants (Zaviacic, Zaviacicova, et al., 1988). One study has suggested, based on sonographic evidence in five women, that the g-spot can be explained by the movement and pressure that the clitoris places on the lower anterior wall of the vagina during sexual stimulation and arousal (Foldes & Buisson, 2009).

Several studies have shown that the type of sexual stimulation that leads to female ejaculation varies, thereby challenging the notion that only g-spot stimulation brings on female ejaculation. In these studies women informed researchers that combined clitoral and vaginal stimulation (g-spot) as well as clitoral stimulation alone triggers female ejaculation in addition to g-spot stimulation alone (Addiego et al., 1981; Alzate, 1985b; Bullough et al., 1984; Gilliland, 2009).

In the literature female ejaculation has often been associated with orgasm in the sexual response cycle. However, a couple of studies have challenged this idea and indicate that female ejaculation occurs not solely upon orgasm, but throughout arousal, and immediately before, during, and after orgasm (Darling et al., 1990; Gilliland, 2009).

Women's level of sexual arousal has been considered in the literature. Researchers have noticed that women who experience g-spot stimulation and orgasm are more likely to experience female ejaculation, but that not all g-spot stimulation and orgasms produce female ejaculation (Darling et al., 1990; Davidson et al., 1989). To explain these differences they have proposed that a sufficient state of arousal, or full tumescence, is needed for ejaculation, but is not necessarily needed for a g-spot orgasm (Darling et al., 1990; Davidson et al., 1989).

Studies have uncovered other interesting relationships involving female ejaculation. First, women who ejaculate are more likely to be multi-orgasmic, and women who ejaculate *and* are multi-orgasmic are more likely to have multiple ejaculations (Darling et al., 1990; Gilliland, 2009). Second, women who ejaculate are more likely to have perceived themselves as having urinated during sex, and to hold back orgasm for fear of urinating (Darling et al., 1990; Davidson et al., 1989). Third, women who ejaculate have stronger pubococcygeal (PC) muscles than women who do not ejaculate (Whipple & Perry, 1981).

Currently, three types of sexual response patterns among ejaculators have been identified by scientists based on digital g-spot stimulation including “relatively hard to induce expulsions,” “easily induced expulsions,” and “intermediate” (Zaviacic, Zaviacicova, et al., 1988). The relatively hard to induce type is characterized by needing very specific stimulation, a lot of time, and a lot of personal involvement in stimulation to reach ejaculation. For these ejaculators clitoral stimulation is unproductive and unpleasurable, and they prefer vaginal stimulation (g-spot) to achieve orgasm. The easily induced type is characterized by needing very little specific stimulation technique, very little time, and very little personal involvement in stimulation to reach ejaculation. These ejaculators need clitoral stimulation to achieve orgasm, or vaginal (g-spot) and clitoral stimulation at different times. The intermediate type falls in the middle and is characterized by needing moderate specific stimulation technique, a moderate amount of time, and a moderate level of personal involvement to reach ejaculation. These

ejaculators need vaginal (g-spot) and clitoral stimulation with clitoral stimulation proceeding coitus, or vaginal (g-spot) and clitoral stimulation at different times.

As with female ejaculation and the female prostate, the g-spot has been met with resistance. Criticisms have included the following: (a) not all studies are able to physically locate the g-spot in all participants; (b) weak evidence exists to support that it is a distinct anatomical structure; (c) female ejaculation is often used as proof for the existence of the g-spot, that female ejaculation in and of itself is not proof that the g-spot exists, and furthermore female ejaculation is controversial due to mixed research results; and (d) the research does support the existence of vaginal zones, and therefore the terminology g-spot is misleading, because it's more of a zone than a spot (Alzate, H., 1985a, 1985b; Alzate & Hoch, 1986; Alzate & Londono, 1984; Belzer, 1984; Goldberg et al., 1983; Hines, 2001; Levin, 2003).

Emotions, Sexual Identity, and Sexual Lives

A report on women's experiences of female ejaculation has revealed that women have a distinct emotional pattern in how they respond to female ejaculation (Gilliland, 2009). Initially, women feel either humiliation or shame, or exploration and wonder. Over time these feelings grow into either resignation or acceptance of ejaculation. In the acceptance stage women feel lucky, special, and would miss and be saddened if they could no longer ejaculate.

Reports have also revealed that female ejaculation significantly shapes the sexual identities and lives of women (Darling et al., 1990; Gilliland, 2009). Women who ejaculate are more likely to believe they are above average for sexual responsiveness

compared to non-ejaculators (Darling et al., 1990). Women who ejaculate find meaning in ejaculating, define themselves by ejaculating, and see themselves as different because of ejaculating (Gilliland, 2009). Ejaculating impacts partner selection, deciding whether or not to have sex, and deciding whether or not to control ejaculating (Gilliland, 2009).

Treatment

As previously described, one study has demonstrated that women have diverse emotional responses to female ejaculation (Gilliland, 2009). For women who respond more negatively, whether it is due to lack of knowledge of female ejaculation or another reason, the research results on female ejaculation can be used to help these women who seek professional treatment for problems that are related to female ejaculation. A case study has demonstrated that women may develop hypoactive sexual desire due to female ejaculation (Riley et al., 2005). In this particular case study the etiology for one woman was avoidance behavior masked as loss of sexual desire, which was then treated with sex therapy and education to normalize the experience of female ejaculation, which ultimately brought back her sexual desire.

Researchers have pointed out that just as the results on female ejaculation may have positive treatment implications as the previous case study demonstrates, they may also have negative effects on women creating a new source of sexual problems. Learning about female ejaculation can free women who ejaculate, encourage them to accept the reality of their own experiences, relieve fears of being abnormal, improve their sexual adjustment, and remove their inhibition to orgasm when ejaculation is involved (Addiego et al., 1981; Alzate & Hoch, 1986; Belzer, 1981; Gilliland, 2009). On the other hand

researchers have expressed concerns that the existence of female ejaculation may create performance anxiety, frustration, and feelings of inadequacy in women who do not ejaculate (Alzate & Hoch, 1986; Belzer, 1981).

Generally, researchers have cautioned professionals who incorporate current scientific knowledge of female ejaculation into their treatment practices. Due to the findings on female ejaculation they have advised against assuming that all female urethral fluid expulsions are cases of urinary incontinence, and equally so against assuming that all female urethral fluid expulsions are instances of female ejaculation (Bohlen, 1982).

Methodology

This study was a qualitative phenomenological interview study on women's experiences of the sexual relationship at the age of onset of female ejaculation. As a qualitative study, the focus was on a specific human female sexual experience that can be described but not necessarily quantified, and on depth rather than breadth of the topic under investigation. Being a phenomenological study, data was analyzed using phenomenology to capture and describe the essences of the sexual relationship women were in when they first experienced female ejaculation, and the phenomenon of women experiencing female ejaculation for the first time at different ages. As an interview study, data on women's experiences of the sexual relationship they were in at the age they first experienced female ejaculation was collected through oral interviews and written questionnaires.

In this methodology chapter the following areas of study design are described: (a) the recruitment of participants; (b) the interview site where data was collected; (c) the

briefing interview; (d) the written questionnaires; (e) the oral interview; (f) the debriefing interview; (g) the amount of time that was needed to conduct individual participant data collection; (h) data preparation or transcription of the oral interviews; (i) data analysis; (j) qualifications of the student researcher; and (k) the demographics of the sample used in this study including age, birthplace and upbringing, current marital and relationship status, number of children, racial and cultural background, level of education completed, current occupation, religious/spiritual affiliation, sexual orientation, and age of onset of female ejaculation.

Recruitment of Participants

Over the course of two months during the winter of 2011, two advertisements were placed in a local newspaper to recruit participants in the Chicago, Illinois area. During this time an advertisement was also placed in a local female sexuality shop. Using Gilliland's (2009) definition of female ejaculation the advertisement asked women "who regularly experience the release or gush of fluid around the time of orgasm" (p. 123) to contact the student to participate in a master's thesis interview research study. The advertisement also informed the participants of how they would be compensated for giving their time. Participants were compensated monetarily for their time in the amount of \$50. Additionally, following in the footsteps of Gilliland (2009), participants were also compensated by being given educational materials on the subject of female ejaculation. Upon contacting the student, women expressing interest in participating were screened over the phone to ensure that they met the definition of experiencing female ejaculation "regularly." Gilliland (2009) defines regularly as, "If you can count

on ejaculating if certain conditions are met during sex. In other words, this is something that usually happens to you; it's happened before, and you think it's likely that it will happen to you again" (pp. 123-124). If eligible, the women were briefly instructed about the study and what to expect, and they were given the opportunity to ask questions in order to determine if they still wished to participate. A date and time for the interview was arranged, and directions to the interview site and cancellation procedures were given.

Interview Site

The student conducted one-on-one interviews in two different private conference room locations to ensure confidentiality, and it was hoped that all participants were as relaxed and as comfortable as possible due to the sensitive nature of the research topic. Both conference rooms were equivalent to standard meeting rooms. The first conference room where four of the 10 interviews used in this study were conducted was located on ground level in a secure residential apartment building with a doorman; was small in size, windowless, and carpeted; and contained a large table with cushioned office swivel chairs, a dry-erase white board, a door with a lock, and a refreshment area. The second conference room where six of the 10 interviews used in this study were conducted was located many floors above ground in a secure office building with a doorman; was large in size and carpeted; and contained windows, a dry-erase white board, many plastic folding tables, many standard wire plastic seated and backed office chairs, a water cooler with cups, a coat rack, and a door with a lock on it. The windows of the second conference room overlooked rooftops of other nearby buildings where no people were seen. Bathrooms for both conference rooms were located down the hallway and

accessible with a key. The student reserved both conference rooms for the timeframe when interviews were scheduled to ensure no interruption. The doors to both conference rooms were closed and locked during the interviews to ensure no interruptions. None of the interviews were interrupted. Both conference rooms were quiet. Noise traveling in and out was minimal. A person passing by either conference room in either hallway was infrequent. A person overhearing the interview process in either conference room location was unlikely.

Briefing

The student drew upon Kvale (2007) for the design of the briefing phase of the research, which he explains is the introduction to the interview. During briefing the student secured informed consent from each participant before the interview began. She covered all points of informed consent such as the purpose of the study, risks, benefits, confidentiality, if there were any questions before proceeding with the interview, and so forth. The student obtained informed consent to audio record the interview. She established rapport and trust with each participant. She orientated each participant to the interview site. None of the women took advantage of being able to withdraw from the study at any point.

Written Questionnaires

Upon completing the informed consent process, each participant filled out three written questionnaires. The personal background history questionnaire collected demographic data for sample purposes. Items on the personal background history questionnaire included the participant's: (a) age, (b) birthplace and upbringing, (c)

current marital and relationship status, (d) number of children, (e) racial and cultural background, (f) level of education completed, (g) religious/spiritual affiliation, and (h) sexual orientation.

The remaining two questionnaires collected data the oral interview did not on the sexual and female ejaculation history of each participant. Items the sexual history questionnaire inquired about included the following: (a) the types of sexual partners in the participant's lifetime at the age of first ejaculation, (b) the primary or preferred type of sexual partner at the age of first ejaculation, (c) average frequency of masturbation at the age of first ejaculation, (d) average frequency of watching pornography at the age of first ejaculation, (e) age of first intercourse, (f) total number of intercourse partners in the participant's lifetime at the age of first ejaculation, (g) age of giving first oral sex, (h) age of receiving first oral sex, (i) total number of oral sex partners giving and receiving in the participant's lifetime at the age of first ejaculation, (j) sexual education, and (k) a description of the participant's sexual attitudes at the age of first ejaculation.

Items the female ejaculation history questionnaire inquired about included the following: (a) the frequency of experiencing ejaculation, (b) age of first ejaculation, (c) feeling of ejaculating the first time, (d) a description of the first ejaculate fluid, (e) the amount of the first ejaculate fluid, (f) the timing of when the first ejaculation occurred during sexual arousal, (g) the types of sexual stimulation that led to ejaculating the first time, (h) whether or not multiple orgasms occurred with the first ejaculation, (i) whether or not multiple ejaculations occurred with the first ejaculation, (j) what menstrual phase the participant was in at the timing of the first ejaculation, (k) the participant's personal

reaction to the first ejaculation, (l) the reaction of the participant's sexual partner to the first ejaculation, and (m) comparing and contrasting the first experience of ejaculating to subsequent experiences of ejaculating.

Upon completing the written questionnaires the student reviewed them before proceeding with the oral interview in order to clarify written responses if needed. The student also reviewed the questionnaires before proceeding with the oral interview in order to steer the interview process. She also used them to check and enhance the reliability and validity, as Kvale (2007) defines and explains, of oral interview responses. In other words, she used the questionnaires to help determine the trustworthiness of the participants, and whether or not they were being consistent in their responses, and to help produce quality responses that were elaborate and detailed. Likewise, during the following oral interview process the student used the oral interview responses to check and enhance the reliability and validity of questionnaire responses.

Oral Interview

The student created an interview guide to use consistently with every participant during the oral interview. She crafted the interview guide based on the recommendations for design by Kvale (2007) and Riessman (1993). The guide consisted of twenty-one open-ended questions. The first question asked the women about their first experience of female ejaculation. Questions two through seven focused on the general relationship. They asked the women about: (a) their experience of the general relationship, (b) their experience of being satisfied and happy in the general relationship, (c) what satisfied them the most and made them the happiest in the relationship, (d) overall what satisfied

them the least and made them the least happy in the general relationship, (e) how at ease and comfortable they felt in the general relationship, and (f) what potential they felt of being harmed or hurt in any way in the general relationship.

Questions eight through 19 focused on the sexual relationship. They asked the women about: (a) their experience of having sex in the relationship, (b) their experience of being satisfied and happy with the sex in the relationship, (c) what satisfied them the most and made them the happiest about the sex in the relationship, (d) what satisfied them the least and made them the least happy about the sex in the relationship, (e) to describe the ways they really liked to have sex in the relationship, (f) what types of sexual stimulation brought the most pleasure and led them to orgasm in the relationship, (g) how often they wanted to have sex in the relationship, (h) how aroused they were in the relationship, (i) how open they were towards having sex in the relationship, (j) how at ease and comfortable they felt having sex in the relationship, (k) what potential they felt of being harmed or hurt in any way having sex in the relationship, and (l) to compare and contrast their experience of having sex in the relationship in which they first experienced female ejaculation to previous sexual relationships.

To end the interview, question 20 asked the women about what was generally happening in their life when they first experienced female ejaculation while question 21 asked the women if they had any thoughts or feelings about why they experienced female ejaculation for the first time at that particular point in their life.

As Kvale (2007) advises, the student addressed the reliability of oral interview responses by employing leading questions when necessary to determine whether or not

participants would change their answers. She also used leading questions to confirm or refute her interpretations of responses.

As Kvale (2007) also instructs, the student addressed the validity of oral interview responses by adhering to his quality criteria for interviews, which validate oral interview responses when they are met. According to Kvale (2007) interviews with strong, solid quality meet the following criteria, and are valid when: (a) responses are spontaneous, rich, and relevant; (b) questions are short and answers long; (c) the researcher follows up and clarifies responses; (d) the researcher interprets responses; (e) the researcher verifies interpretations; and (f) responses stand on their own and need no further explanation. As Kvale (2007) also instructs, the student further addressed the validity of oral interview responses by paying attention to her role as researcher, and how she affected the quality of interviews produced by ultimately being a methodological instrument of her own study. She aimed to meet Kvale's (2007) criteria for an interviewer who produces sound research, which is an interviewer who is: (a) *knowledgeable* of the topic, (b) provides *structure* for the interview like topics of informed consent such as the purpose of the research, (c) is *clear* and succinct with questions and when speaking, (d) *gentle* when participants are in the process of responding, (e) *sensitive* to the emotion and content of responses, (f) *open* to new aspects of knowledge by listening for and hearing what is important to participants, (g) *steers* the interview towards what is relevant to the research and away from what is irrelevant, (h) *critical* of what is said and questions to test reliability and validity of what is said, (i) *remembers* what has been said, and (j) clarifies and *interprets* what is said.

Debriefing Interview

For the debriefing interview the student drew upon the guidance of Kvale (2007) and Corbin and Morse (2003). Upon completion of the oral interview the student conducted a debriefing interview, which Kvale (2007) explains terminates and brings closure to the entire interview process. The student asked a few questions during the debriefing interview. She asked participants: (a) if there was anything else they wanted to bring up or ask before finishing the interview; (b) if they wanted to know more about the research study, and if so, she asked what they wanted to know; and (c) about their experience of being interviewed to assess the status of ethical issues such as the benefits and risks they experienced being a part of this study. Upon the suggestion of Corbin and Morse (2003), the student offered a follow-up phone call to monitor and manage any distress the participants may have experienced. If participants desired a follow-up phone call, a date and time was scheduled. If needed, the student took appropriate action if participants experienced any type of distress, such as staying with participants until they were stable or okay to leave, or giving psychological referrals. During the debriefing interview the student turned off the digital recorder, gave the compensation for being a part of this study, and took any important notes after the participants departed from the interview site.

Time

Three hours were allotted to complete the informed consent process, written questionnaires, oral interview, debriefing interview, and for taking any notes after finishing one interview and before the start of the next interview.

Data Preparation: Transcription of Oral Interviews

Upon completing the in-the-field phase of the research, all the interviews were transcribed from audio recording into written format. For this phase of the research, the student depended upon the guidance Kvale (2007) and Gibbs (2007) provide on the transcription process. The student transcribed the audio-recorded interviews in full length with no parts of the interview going un-transcribed. They were transcribed word for word including verbal fillers, repetitions, and the dialect of the interviewer and interviewee. However, details such as verbal tics, pauses, emotional expression, emphasis of words, or parts that could not be heard were not included in the transcriptions. For the purpose of reporting the data the verbal fillers, repetitions, and dialect of participants included in the transcriptions were edited from quotes used in the results section.

To ensure the reliability of the transcriptions as Kvale (2007) and Gibbs (2007) suggest, the student checked the written transcripts against the recorded interviews a number of times in the process of transcribing. To ensure validity of the transcriptions as Kvale (2007) suggests, the student transcribed the interviews to the level needed in order to carry out and fulfill the purpose of the research. For example, since this was not a study that used conversation analysis, which focuses on the process of talking between people, interviews did not need to be transcribed to the level of detail that included nuances such as pauses, emotional expression, emphasis of words, or parts that could not be heard. If this study had used conversation analysis, the level of transcription actually

used would not be valid, because interviews were not transcribed to the level needed to carry out and fulfill the purpose of the research.

Data Analysis

The student used phenomenology as her main theoretical foundation, and to analyze the written and oral interview data. Phenomenology is the study of direct experiences in order to determine their essences, and what it is like to have or live the particular direct experience under investigation. The student relied upon Bendall (2006), Bernard and Ryan (2010), Grbich (2007), and Moustakas (1994) in her understanding and application of phenomenology. To analyze the interview data the student largely followed the steps in the “Modification of the Stevick-Colaizzi-Keen Method of Analysis of Phenomenological Data” (p. 121) that Moustakas (1994) outlines. During the steps she applied the major phenomenological processes of epoche, phenomenological reduction, imaginative variation, and synthesis that Moustakas (1994) describes. Throughout analysis of the written and oral interview data, the student also relied heavily on and integrated the steps in the “Modification of the Van Kaam Method of Analysis of Phenomenological Data” (p. 120) that Moustakas (1994) describes, and his “Outline Summary of the Phenomenological Model” (p. 180).

The student started with the process of epoche, which means setting aside preconceptions and personal biases. In the process of epoche, she participated in her own research in order to free herself as much as possible from preconceptions and personal biases, and enter a clear, open state to be ready to gain new knowledge and encounter the phenomenon under investigation. To achieve this, first the student underwent the same

data collection procedures as the participants, and completed the written questionnaires and oral interview process. Next, the student's oral interview underwent the same data preparation procedures as the oral interviews of the participants when they were transcribed from audio into written format. Last, the student's questionnaires and oral interview transcript underwent the same steps in phenomenological analysis described below as did the questionnaires and oral interview transcripts of the participants.

Upon finishing being a participant in her own research, and better understanding her possible personal preconceptions and biases of the topic under investigation, the student took the written questionnaires and oral interview transcript of each participant and began to apply the process of phenomenological reduction. During phenomenological reduction she continued the process of *epoche*, and applied the *epoche* technique of *bracketing* where she literally placed the topic ["women's experiences of the sexual relationship at the age of onset of female ejaculation"] in brackets when working with the written questionnaires and oral interview transcript of each participant. Bracketing signified that the student was crossing a threshold and stepping into a state of *epoche*, or in other words entering a state where she was as free as possible from her preconceptions and personal biases, and was in a clear and open state ready to gain new knowledge and encounter the phenomenon under investigation. The brackets themselves acted as symbolic boundaries that kept out the student's preconceptions and personal biases from what rested within the brackets. They protected the topic of the study, and made space for the essences and meanings of ["women's experiences of the sexual relationship at the age of onset of female ejaculation"] to emerge as unaffected as

possible by the student's personal biases and preconceptions. Bracketing heightened the student's concentration and attention in the task of reduction.

After bracketing the research topic of this study when working with the written questionnaires and oral interview transcript of a participant, the student proceeded with the process of phenomenological reduction, and moved onto the step of *horizontalization*. During horizontalization the student took the written questionnaires and oral interview transcript of a participant, and reviewed all the statements within. She listed all the statements that were relevant in any way to the participant's experience of the sexual relationship she was in when she first ejaculated. All statements at this point were treated equally, and all were considered equally important to the descriptions of the participant's experience of the sexual relationship she was in when she first ejaculated.

After horizontalization, the student proceeded with the next step of *delimiting horizons*. Here the student tested the relevant statements and determined which relevant statements were variant and invariant aspects of a participant's experience of the sexual relationship she was in when she first ejaculated. If the statements were determined to be variant aspects of a participant's experience of the sexual relationship she was in when she first ejaculated, then these statements were eliminated. Additionally, overlapping and repetitive statements were eliminated at this point too. If the relevant statements were determined to be invariant aspects of a participant's experience of the sexual relationship she was in when she first ejaculated, then they were kept and carried over into the next step of *clustering and thematizing*.

During the step of *clustering and thematizing*, the student clustered or grouped together the related relevant statements that were the invariant aspects of a participant's experience of the sexual relationship she was in when she first ejaculated. The student labeled the clusters or groups of the invariant aspects. The clusters or groups, and their labels, became the core themes of the participant's experience of the current phenomenon under investigation. The student took the core themes and applied the phenomenological process of imaginative variation to compose a narrative of the themes, such as employing universal structures as themes like time, space, or relationship to self and others.

At this juncture the student moved onto the next step of composing an *individual textural description* for a participant. She took the invariant aspects and core themes and wrote an individual textural description that depicted *what* the participant was experiencing in the sexual relationship she was in when she first ejaculated. Verbatim examples from the participant's written questionnaires and oral interview transcript were included for illustration.

Upon completing the individual textural description for a participant, the student moved onto the next step of composing an *individual structural description*. The student took the individual textural description of a participant, and applied the phenomenological process of imaginative variation to compose an individual structural description that explained *how* the participant came to experience female ejaculation for the first time in the sexual relationship at the age she did.

At this point the student took the individual textural and structural descriptions for a participant, and combined them to compose an *integrated textural-structural*

description of the essences and meanings of the participant's experience of the sexual relationship at the age of onset of female ejaculation.

The student repeated the steps of bracketing, horizontalization, delimiting horizons, clustering and thematizing, composing the individual textural description, composing the individual structural description, and composing the integrated individual textural-structural description for each participant until all the integrated textural-structural descriptions of all the participants were composed. At this time the student took all the integrated textural-structural descriptions of the participants, and applied the phenomenological process of synthesis to compose a composite or universal integrated textural-structural description. The composite integrated textural-structural description captured the essences and meanings of women's experiences of the sexual relationship at the age of onset of female ejaculation, and represented the group of women in this study and their experience of the current phenomenon under investigation as a whole.

As Gibbs (2007) advocates, the student applied techniques to ensure the reliability of the analysis of the written and oral interviews, such as the idea of constant comparisons to guard against the hazard of definitional drift in coding. Gibbs (2007) defines definitional drift in coding as "when material you coded later in a project using codes established earlier, may be coded slightly differently from material coded at the start" (p. 98). Throughout analysis the student applied the idea of constants comparisons, and checked and compared her codes, or more appropriately for this study checked and compared the terms, themes, and the categorization of the themes that characterized or defined the current phenomenon under investigation.

As Kvale (2007) proposes, the student used audience validation to validate the analysis of her written and oral interviews, and the interpretations of her research findings. She brought the analysis of her written and oral interviews and the interpretations of her research findings to the general public for verification. Specifically, following the path of Gilliland (2009), she brought the analysis and the interpretations of her research findings to people she knew who regularly experienced female ejaculation for verification.

Due to the student being a lone researcher, the passing of time between when the interviews were conducted and completing the write-up of the research, and ethical considerations of keeping participants involved in a study over a prolonged period of time, the student did not use member validation. In other words, she did not take the analysis of her written and oral interviews and interpretations of her research findings to the participants for their verification, which may be considered a shortcoming of this study depending upon your theoretical approach to qualitative work.

Qualifications of the Student Researcher

The student possessed several qualifications to conduct this study. The student had knowledge of female ejaculation through personal experience, and by researching and taking a class on female ejaculation titled, “Female Sexual Behavior: Female Ejaculation”. Professionally, the student was pursuing her certification as a Certified Sex Therapist (CST) through the American Association of Sex Educators, Counselors, and Therapists (AASECT). Professionally, the student also had experience talking with women about very sensitive subjects of a sexual nature through her three-year internship

where she counseled survivors of sexual assault and abuse at a rape crisis center in the Chicago, Illinois area. Although the student did not have prior experience conducting interviews for research purposes, she had conducted numerous interviews in a counseling setting, and was familiar with and skilled in asking the types of questions common to interview research, and facilitating dialogue. As a result, and as Corbin and Morse (2003) suggest, her counseling interview skills were transferable to the current interview research. Due to the student training to enter the counseling profession she also had skills in establishing rapport and trust with others, and had traits common to counselors such as sensitivity, authenticity, and intuitiveness that were also transferable to the current interview research as Corbin and Morse (2003) suggest.

Sample

The student interviewed a total of 22 women. Of the 22 interviews, the student selected 10 interviews for use in this study that provided good diversity in the phenomenon under investigation. The student also selected 10 interviews for use in this study that proved the most reliable and valid. In other words, she selected the interviews in which the participants were consistent in their responses, and provided elaborate and detailed responses. (See Table A1 for the demographics of sample.)

Age. The ages of the participants (n=10) in this study ranged from 25 to 51 years old. Two women were in their mid-twenties at ages 25 and 26. Two women were in their early thirties at ages 31 and 32. Two women were in their late thirties both at age 39. Three women were in their early forties at ages 40, 42, and 43. One woman was in her fifties at age 51.

Birthplace and upbringing. Five of the 10 women in this study were born and raised in Illinois. One woman was born out-of-state, but raised in Illinois. Four women were both born and raised out-of-state.

Current marital and relationship status. Four of the 10 women in this study were married. Two women were single and dating. One woman had a boyfriend. One woman had a girlfriend. One woman was widowed and had a boyfriend. One woman was separated and had a boyfriend.

Children. Five of the 10 women in this study had no children while five did have children. Three women had three children. One woman had two children. One woman had one child.

Racial and cultural background. Four of the 10 women in this study were African American. Three women were Caucasian. One woman was half Caucasian and Asian. One woman was Hispanic. One woman was East Indian.

Level of education completed. Three of the 10 women in this study had Master's degrees, while one was in the midst of pursuing her PhD. One woman had a Bachelor's degree and some Master's education with no degree. One woman had a Bachelor's degree. One woman had an Associate's degree. Two women had some college education, but no degrees. One woman had a high school diploma.

Current occupation. Seven of the 10 women in this study were employed in different positions of work including being a restaurant server, barista, assistant manager, lobbyist, director, program coordinator, and administrative assistant. Two of the women were students. One woman was unemployed.

Religion/spirituality. Three of the 10 women in this study were Catholic. One woman was Christian. One woman was Baptist Christian. Two women were raised Catholics, but one was now a “pantheist” and “open to all religious and spiritual philosophies” while the other was now a “semi-spiritual atheist.” One woman was an atheist. One woman was a “cosmic spiritual being.” One woman simply went to church monthly and did not have a religious or spiritual affiliation.

Sexual orientation. At the time of this study six of the ten women identified as heterosexual. One woman identified as heterosexual with some sexual experiences with the same gender. One woman identified as bisexual. One woman identified as bisexual after having re-orientated from identifying as a lesbian at the age she first experienced female ejaculation. One woman identified as transgendered.

Age of onset of female ejaculation. The age in which the 10 women first experienced female ejaculation ranged from 14 to 46 years old, and can be divided into five groupings. Two women first experienced female ejaculation in their mid teens with one at age 14 and the other at age 15. Four women first experienced female ejaculation in their late teens with two at age 17 and two at age 19. One woman first experienced female ejaculation in her mid twenties at age 25. Two women first experienced female ejaculation in their early thirties at age 30. One woman first experienced female ejaculation at age 46.

Results

Phenomenological analysis of the oral interviews produced the key thematic findings in this study. Phenomenological analysis of the oral interviews revealed that the

key theme defining the sexual relationship the participants were in at the age they first experienced female ejaculation (FE) was the presence of a *connection* with their sexual partner, or with themselves and body during solo masturbation sex. Phenomenological analysis further revealed that the participants experienced their first female ejaculation in a sexual relationship defined by one of the following three major types of connection: (a) a connection of “intimacy, closeness, friendship, or attraction;” (b) a “functional” connection; or (c) a connection of “sexual exploration, discovery, learning, or experimentation” with oneself and one’s body during solo masturbation sex.

Participants were candid, open, and revealing when disclosing about the sexual relationship they were in when they first experienced female ejaculation during the oral interview, when completing their sexual and female ejaculation history questionnaires, and when sharing about their experience of participating in this study during the debriefing interview. Accordingly, their responses were rich, detailed, and elaborate and fit the validity criteria used in this qualitative phenomenological interview study as previously described in the methodology chapter. Furthermore, participants were consistent in their responses. Accordingly, their responses were also trustworthy and fit the reliability criteria used in this study as previously described in the methodology chapter.

The following results section is divided into three main sections. The results of the oral interview are reported first, the results of the written questionnaires on the participant’s sexual histories and female ejaculation histories are reported second, and the results of the debriefing interview are reported last. Each of these three main sections

provides a summary of the results, a review of the questions asked to participants, and in depth descriptions of the results summarized.

Oral Interviews

The findings in this small study (n=10) revealed that the participants experienced their first female ejaculation in various types of sexual relationships and contexts with varying degrees of sexual experience. All the sexual relationships had the presence of some type of personal connection. The personal connection present differed from relationship to relationship, and can be divided into three categories of personal connection including “intimacy, closeness, friendship, or attraction;” “functional;” and “sexual exploration, discovery, learning, or experimentation.” None of the women in this small sample experienced their first female ejaculation in the absence of some type of personal connection, or in other words where the connection was impersonal, anonymous, and brief such as during a one-night stand with a sexual partner they never saw again, or in a high-risk sexual situation such as masturbating in a public area around strangers they never saw again. Additionally, three women in this study spontaneously revealed during the written and oral interview process that they experienced their first female ejaculation along with other sexual firsts such as: (a) their first orgasm; (b) their first heterosexual intercourse, which they considered to be their first time having sex; or (c) their first true sexual relationship, or in other words they experienced their first female ejaculation in a sexual relationship they considered to be their first true sexual relationship.

Multiple themes characterize the connection categories of “intimacy, closeness, friendship, or attraction;” “functional;” and “sexual exploration, discovery, learning, or experimentation.” Themes common to all three connection categories include the following: (a) satisfaction and happiness, (b) sexual stimulation, (c) sexual desire, (d) sexual arousal, (e) sexual receptivity, (f) comfort, and (g) safety. Themes common to the two connection categories of “intimacy, closeness, friendship, or attraction” and “functional” include the following: (a) feelings, (b) traits and behaviors, (c) resolving issues and healing sense of self, (d) spending time together engaging in non-sexual activities, and (e) sexual decision-making. Themes unique to the connection category of “intimacy, closeness, friendship, or attraction” include the following: (a) trust and honesty, (b) the kiss and glance across the room, (c) confiding in, (d) being comforted, (e) communication, and (f) knowledge and understanding. The theme unique to the “functional” connection category includes the following: (a) economics. The theme unique to the personal connection category of “sexual exploration, discovery, learning, or experimentation” includes the following: (a) coping.

All the themes in each connection category did not necessarily apply to all the women. Various combinations of the themes defined the connection that was present in their relationship. Within the combinations of themes that made up the connection, the women emphasized some over others as being important to their first experience of FE, and as the main difference compared to previous or subsequent sexual relationships in which they did not experience FE. Additionally, some of the women emphasized the connection overall instead of, or in conjunction with specific aspects of the connection as

important to their first experience of FE, and as the main difference compared to previous or subsequent sexual relationships in which they did not experience FE. This is the case for the connection categories of “intimacy, closeness, friendship, or attraction” and “sexual exploration, discovery, learning, or experimentation.” However, none of the women in the “functional” connection category emphasized this particular connection overall as being important to their first experience of FE, and as the main difference compared to previous or subsequent sexual relationships in which they did not experience FE. Whether it was a specific aspect that defined the connection, or the connection overall itself, the women were experiencing things that were different and unprecedented in the sexual relationship in which they first experienced FE, some of which they identified as instrumental to their first experience of FE.

The questions asked during the oral interview that yielded these results collected data on all participants in the following areas regarding the relationship the women were in when they first experienced female ejaculation: (a) their experience of the general relationship they were in when they first ejaculated, (b) their experience of being satisfied and happy in the general relationship, (c) what satisfied them the most and made them the happiest in the relationship, (d) overall what satisfied them the least and made them the least happy in the general relationship, (e) how at ease and comfortable they felt in the general relationship, (f) what potential they felt of being harmed or hurt in any way in the general relationship, (g) their experience of having sex in the relationship, (h) their experience of being satisfied and happy with the sex in the relationship, (i) what satisfied them the most and made them the happiest about the sex in the relationship, (j) what

satisfied them the least and made them the least happy about the sex in the relationship, (k) to describe the ways they really liked to have sex in the relationship, (l) what types of sexual stimulation brought them the most pleasure and led them to orgasm in the relationship, (m) how often they wanted to have sex in the relationship, (n) how aroused they were in the relationship, (o) how open they were towards having sex in the relationship, (p) how at ease and comfortable they felt having sex in the relationship, (q) what potential they felt of being harmed or hurt in any way having sex in the relationship, (r) to compare and contrast their experience of having sex in the relationship in which they first experienced ejaculation to previous sexual relationships, (s) what was generally happening in their life when they first experienced ejaculation, and (t) if they had any thoughts or feelings about why they experienced ejaculation for the first time at that particular point in their life.

Connection of intimacy, closeness, friendship, or attraction. The sexual relationships in which six of the 10 women in this study first experienced FE fall into the connection category of “intimacy, closeness, friendship, or attraction.” These women experienced their first FE with another person in a relationship with the presence of intimacy, closeness, friendship, or a physical, mental, emotional, or spiritual attraction. Their fictitious names are Rose, Dawn, Jenna, Evelyn, Roxanne, and Gwen. Rose, Dawn, and Roxanne experienced their first FE with their boyfriends at ages 25, 19, and 30 respectively. Jenna experienced her first FE with her girlfriend at age 19. Evelyn experienced her first FE while married to her husband, and having a heterosexual affair with a man who she refers to as her “lover” at age 46. The term lover is used throughout

to refer to Evelyn's sexual relationship. Gwen experienced her first FE in a semi voyeuristic, group sex situation where she and her best friend had sex with their own boyfriends alongside each other without swinging at age 17. Gwen refers to this as having "side-by-side sex," "sex in pairs," "sex in the same space," "sex in the same bed," or "sex in the same room" with her best friend. The term side-by-side sex is used throughout to refer to Gwen's sexual relationship with her best friend. Gwen's sexual relationship with her best friend falls into the connection category of "intimacy, closeness, friendship, or attraction" while her relationship with her boyfriend falls into the connection category of "functional," and is described later.

It is in this connection category that three women in this study spontaneously revealed during the written and oral interview process that they experienced their first female ejaculation along with other sexual firsts. Jenna experienced her first female ejaculation along with her first orgasm. She says, "...it was pretty much my first orgasm ever that I ejaculated." Dawn experienced her first female ejaculation along with her first experience of heterosexual intercourse, which she considered to be the first time she had sex. In her words, Dawn refers to the first time she had heterosexual intercourse and ejaculated as her "...first sexual experience" and "...the first time I had sex." Rose experienced her first female ejaculation in what she considered to be her first true sexual relationship, which in her words she refers to as, "My first real honest sexual relationship."

In this connection category the overall connection some of the women have with their partner with whom they first experienced FE was unprecedented at the time. As

Roxanne says, “It was a physical attraction. There was a chemistry. There was definitely a chemistry with him. We had chemistry. It was kind of intense, probably the most intense I felt up until that point.”

Additionally, in this connection category some of the women emphasized the overall connection, or the overall connection in conjunction with specific aspects of the connection as the most important element in their sexual relationship in which they first experienced FE, or as the main difference compared to previous or subsequent sexual relationships in which they did not experience FE. Of all the women in this connection category, this is especially the case for Rose, Jenna, and Gwen. Jenna and Gwen exemplify this. For Jenna, the overall connection with her girlfriend, and the comfort it created, were the most important elements and main differences in the relationship in which she first experienced FE compared to subsequent relationships in which she did not experience FE. She says, “For the most part my sexual relationships after this first one have not been as intimate, have not been as close.” Jenna says further,

I haven’t been in a serious relationship since I was nineteen, twenty years old with that one relationship with that first girl. I’ve had a fair number, between ten and fifteen sexual partners, some of them more frequently than others. I’ve had boyfriends, girlfriends for lack of a better term, but they were never serious, monogamous, or official. So I’ve never had that super, super closeness in physical intimacy that I had in that first relationship where I feel fully comfortable enough to let go that much both physically and emotionally. So, mostly ejaculation occurs for me now when I’m masturbating alone.

Gwen emphasized the overall connection with her best friend with whom she had side-by-side sex, a connection that she did not have with her boyfriend, as one of the most important elements and main differences in the relationship in which she first experienced FE compared to previous relationships in which she did not experience FE. She says,

I feel like mentally I was having sex with her. That everything from the pattern of our heartbeats and everything, like rhythmically we put each other at the same pace. I mean my boyfriend was there. It was later that I realized it was this connection that her and I had that set things in motion.

Trust and honesty. The women spoke about trust and honesty in their relationships in various ways. Jenna says, “We were able to really talk about what we wanted... We both just figured it all out together because we had this really honest, open communication.” Evelyn says, “He knew his way around an affair... I trusted him in that he was looking out for himself at the same time he was looking out for me”. Rose exemplifies the element of trust. She says, “I was more willing to do different things with somebody I trust. I didn’t think he’d say to someone else, ‘Hey, guess what she did!’” She says further, “I would say trust really would be the most important thing for me to open up and say, ‘I really want to do this too,’ and not just trying to please somebody else, but learning how to please myself, and let him know what I want him to do.” Of all the women in this connection category Rose emphasized the aspect of trust in the connection with her boyfriend the most, and being the most important element in the sexual relationship in which she first experienced FE. For Rose, trust, and the connection

itself with her boyfriend were the main differences in the relationship in which she first experienced FE compared to previous sexual relationships. She says,

We were friends first. I knew I could trust him. I knew that what we did was not going to be broadcast or anything. He wasn't going to think badly about me for asking, or think, 'Oh, God, what a whore!' for wanting, for asking, for saying, 'I like this and this.' The trust and the friendship was the big thing that I didn't have before with other boyfriends.

The kiss and glance across the room. Some of the women told the story of kissing their boyfriend or girlfriend, and the sense of the visceral, palpable connection they felt. Jenna is representative of this. She says, "It's just one of those things where you kiss somebody for the first time, and you're like 'Oh, yeah, this fits. Very much.' And then we were not able to keep our hands off each other for two years."

Some of the women also described their experience of connection through what it was like to share a glance across the room with their partner. Dawn is representative of this. She says, "In a room full of people we'd just sort of look at each other and there was a 'Wow!' Like, 'I'm really into this guy, he's really into me, he's hot, and I want to jump on him.'"

Confiding in. Some of the women stressed being able to open up, talk to, and share things with their partner. Gwen's relationship with her best friend epitomizes this. She says, "She was the first person who I told that I was being molested. That took years for me to even have that conversation with her. She helped stop the situation, because she told her mother who told my mother."

Being comforted. For some of the women their relationship provided them with comfort. Gwen says, “We liked to sleep together...We didn’t have anything other than I think the security of intimacy of being able to provide like contact comfort for each other. We didn’t have a physical relationship.” Evelyn says, “Did you ever have somebody in your life that would tell you it’s going to be okay? Everything is going to be alright?...You always go back to him, because he’s your comfort...He was my rock.”

It should be noted that all the women in this study were directly asked about their experience of general and sexual comfort in the relationship in which they first experienced FE. Even still, for the women in this connection category the element of “being comforted” by their partner, such as physically or emotionally, uniquely defined the connection of “intimacy, closeness, friendship, or attraction” the women had with their partners. This warranted separating “being comforted” out and giving “being comforted” its own thematic descriptive space.

Communication. Some of the women talked about the communication they had with their partners during sex, which positively impacted their sense of comfort or safety. Roxanne says, “We were always very vocal about what felt good, and what didn’t feel that great. So, I felt pretty confident that I wouldn’t be physically harmed during the sexual part of the relationship.” Jenna says, “It was a feeling of supreme safety. It was just comforting. She was really safe. I felt like I could say or do anything and it was going to be okay, and not really freak anybody out or anything.”

Knowledge and understanding. Some of the women expressed knowing and understanding their partners extremely well, and their partners understanding and

knowing them extremely well. Gwen states, “It was also just a feeling of being a kindred spirit with someone, and having someone know who you are right, wrong, or indifferent.” In some cases knowing and understanding their partner extremely well, and their partner understanding and knowing them extremely well manifested in a sort of clairvoyance, or an ability to “read” one another. Dawn says, “There was a mutual level of attraction and understanding...Each of us understood how the other felt. We could sort of read each other, and know what the other one wanted.” Jenna says, “Being so intimately connected to another person you could tell from a glance, look, touch, or two words exactly what was going on...when you’re so close to somebody that you can just know things. That was really awesome.”

Feelings. The women expressed having positive feelings for their partner. None of the women expressed having negative feelings for their partner. Emotions the women experienced in their relationship ranged from care to love. Several of the women mentioned caring for their partner. Rose says, “I really cared about him.” Several of the women expressed loving their partners with whom they first experienced FE. Dawn says, “I was high on life and high on love. I think every time I would think about him, or talk about him, it would bring a smile to my face, a little spring in my step.” Jenna says, “It’s just one of the cliché first love kind-of-things where I was so head over heels it was like somebody hit me over the head with a baseball bat, or something, in a good way.” Gwen says, “The first time when I had this ejaculation...in my head I was like, ‘You really love her.’ That’s what at some point went across my mind.”

Of all the women in this connection category Dawn emphasized her feelings for her boyfriend as one of the most important elements and main differences in the relationship in which she first experienced FE compared to previous relationships in which she did not experience FE. For Dawn, the love she had for her boyfriend activated a change in her sexual beliefs that conflicted with having intercourse. This change in her sexual beliefs then ultimately led her to decide to have intercourse with her boyfriend, which is when she experienced her first FE. She says,

For awhile I thought, “Well, I can’t do it until I’m married, so I can do everything but.”...He changed it for me. I thought he was the game changer...I loved him...That relationship was the first time I ever exchanged that declaration with somebody.

Traits and behaviors. The women described specific traits and behaviors of their partner that were favorable and desirable to them in their relationship. Evelyn says, “He was very smart and very scholarly, and that’s what attracts me is power and knowledge.” Roxanne says, “I do remember being attracted to him...Nice face. Nice body...Average height. He had a really great smile...Personality-wise he was a really good guy.” For Rose, a difference between previous sexual relationships in which she did not experience FE and the sexual relationship in which she experienced her first FE were the traits and behaviors in her sexual partner. She says, “I could count on him. No drama like other boyfriends. No jealousy. Just somebody I could talk too.” She says further, “He didn’t decide everything, asked me what I wanted to do, where I wanted to go. Not

domineering...It was an equal relationship, which...made me happy, because I had dated guys that just wanted to be in charge.”

Of all the women in this connection category, Dawn and Evelyn emphasized the traits and behaviors of their sexual partners the most, and being the most important element in the sexual relationship in which they first experienced FE. For Dawn, her boyfriend caring about and paying attention to her sexual pleasure, and not just his own sexual pleasure, was the main difference in the relationship in which she first experienced FE compared to previous sexual relationships. She says,

I think the difference is maybe those guys were more self-centered, and maybe cared about their own pleasure as opposed to mine. That’s where this one was different. Or what they could get from me. I don’t know if there were bragging rights associated.

For Evelyn, her lover’s traits and behaviors of having sexual knowledge and experience by knowing how to sexually satisfy and stimulate a woman to produce FE, and caring about her sexual pleasure, were the main differences in the relationship in which she first experienced FE compared to previous sexual relationships. She says,

I think my lovers prior to that had lack of experience, where that lover had a lot of experience, and it showed. And he was interested in finding more...My girlfriend had started a sex toy business, and they were pushing a book, so I bought the book. I brought it to one of our meetings. It was just a little pamphlet book, and it just told about all these different things. When I was reading through it he already did most of those things. It was like he was textbook, but there were a

couple of things that he didn't know...But, it was good, because he saw something, did it, and 'Boom. Done. Did that. Onto the next thing.' He handled it like an education. Like a learning experience.

Evelyn continues,

It was someone who knew what he was doing. I've been with many other lovers since, and sometimes they just don't know, and they haven't experienced any other lover. The only thing that they've seen is maybe pornos...I think that he just had a thirst for that knowledge, and I think that he took it a step in that direction...And he cared enough to do it.

Commonalities. Some of the women expressed that they shared things in common with their partners such as traits, interests, beliefs, life experiences, and so on. Roxanne says, "We both got the same jokes. Our taste in movies, in television was relatively similar. So, we could laugh about different things." She also says, "The relationship prior to this one my boyfriend was a bit of a prude. So, this relationship was refreshing in that his sexual beliefs and interests fit with mine." Gwen says, "Mentally and intellectually, and all those things, we were on the same level. We had come through a lot of the same trenches and experiences." Jenna says, "Music was really important for us. We were both music majors. It's a total lesbian cliché, but we would drive around a lot just listening to music together...It was one of those storybook college loves you read about."

Resolving issues and healing sense of self. A healing component existed for some of the women in the relationship in which they first experienced FE. Issues

regarding their sexual sense of self were resolved in some way. The specific issues the women were striving to overcome varied. Gwen and Evelyn's relationships embody this. Gwen was specifically working to resolve her experience of childhood sexual molestation, and having side-by-side sex with her best friend, whom she loved, helped her with this. She says, "When I started having sex around my friend it was like, 'This is what it's really about. Feeling something for someone.' ...In those moments I felt whole, complete, and free of all that bullshit that happened." Evelyn was working to resolve being in a sexless marriage, and her negative feelings of self-worth as a sexual person that resulted, which having sex with her lover helped her to transcend. Evelyn says, "Not being a sexual person to my husband made me feel I was unworthy to have sex...Like nobody would want to have sex with me...The validation there was nothing wrong with me...was good for me."

Spending time together engaging in non-sexual activities. Many of the women gave positive accounts of spending time with their partners in non-sexual activities that were fun and enjoyable. For the women, spending time in these fun and enjoyable activities intersected with having things in common with their partner, and the traits and behaviors of their partner. Rose says, "He was a fun boyfriend. He had a good sense of humor. We'd make each other laugh. We went to fun places." Roxanne says, "We could talk on the phone. We had nice conversations...We enjoyed exploring Chicago together. Walking through the city during the day, at night going to new restaurants. And museums. Just really seeing the city. Going to street fairs." Dawn says, "He liked to take me out to dinners and lunches, and if there was something I hadn't seen before he

wanted to show me.” Jenna says, “We listened to a lot of really good music. For me music is a really big thing, and we would just drive around for hours singing in the car, and that was just really fun.”

Sexual decision-making. The women in this connection category were having sex in their relationship when they felt sure, ready, knew, and sensed that it was okay for them to do so. They were fully on board with having sex. None of the women in this connection category indicated having sex with their partner in their relationship for some other intention besides truly wanting to have sex, such as to get it over with, or just to please their partner because he or she wanted to have sex. They had sex in their relationship because they really wanted to. None of the women expressed the need to prepare mentally, emotionally, or physically in some way for some reason, because they ultimately did not want to have sex with their partner. Multiple factors were pivotal in their sexual decision-making process, and creating the feeling they were sure, ready, knew, and sensed it was okay for them to have sex, and creating the feeling of truly wanting to have sex. They included elements making up the connection with their partner such as love or trust, changes in sexual beliefs that conflicted with having sex, taking the time to make the decision to have sex to avoid negative thoughts and feelings, and previous negative experiences in sexual decision-making.

Pivotal to Dawn’s decision and sense it was okay to have sex with her boyfriend was her love for him, ideas of marriage, and the changes in her sexual beliefs that conflicted with having sex. She says, “A lot of it had to do with I felt I was in love with this person, and we were going to get married so it was okay. I thought for a long time

premarital sex was taboo.” She says further, “It was the first time I decided to have sex...This relationship broke a few barriers...Previously I put more restrictions on myself. No vaginal sex. I still had to be a virgin at the end of the day.”

Pivotal to Rose’s decision and knowing she was sure and ready to have sex with her boyfriend was taking her time to make the decision to have sex to avoid negative thoughts and feelings of regret. She says, “I never jumped into bed with somebody, because I never wanted to regret it. That’s why I took my time...I knew when I was ready I was going to know it...It took a couple of months, but I wanted to make sure.” She says further, “I had to make that decision mentally without hormones screaming at me that I was ready.”

Rose’s experience of sexual decision-making in the relationship in which she first experienced FE positively differed from her experience of sexual-decision making in previous sexual relationships. In contrast to the relationship in which she first experienced FE, in previous sexual relationships she decided to have sex with the intention of getting it over with, or because her partner wanted to. She says about her decision to have intercourse in previous sexual relationships, “I was 20 when I lost my virginity. I only did it to get it over with, because I thought I was too old. It was okay. But, I wish I would have waited until I was sure.” She says about her decision to receive oral sex in previous sexual relationships, “There had been somebody who did it to me before. It was just like, ‘Oh, God, hurry up and get this over with!’ I’m only doing it because they wanted to, not because I wanted them to do it.” In contrast, her experience of receiving oral sex dramatically differed in the relationship in which she first

experienced FE where her sexual decision-making also differed among multiple other factors such as trust, being open, and being relaxed. She says, “We waited for months. What we did I found enjoyable...I wanted to as much as he wanted to...Then after so many times, and I really knew I could trust him, I was more open with oral sex.” She continues, “Naturally it happened. It wasn’t forced or rushed. I was relaxed about it. I wanted him to keep going on instead of going, ‘Oh, God! Hurry! Finish! I don’t like this!’” She also says, “I wasn’t so embarrassed about him going down there.”

Pivotal to Roxanne’s decision and being ready to have sex with her boyfriend was the evolution of her sexual beliefs, and coming to a point in her life of wanting to build and expand upon previous negative sexual experiences. Roxanne says, “When I was a teenager I didn’t want to get pregnant...to get a bad reputation. I bought into my parents conservative views about sex and marriage.” She says further, “When I moved to Chicago...I was curious...about my own sexuality. Just wanting to take it to the next level after having been in a relationship that was restricting.” She says, “The two sexual experiences I had right after two years of being with him [previous sexual relationship before first experience of FE], sex wasn’t good at all. Both were fast ejaculators. I was just ready to have a mature sexual relationship.”

Pivotal to Evelyn’s decision and knowing about having sex with her lover was the enduring pattern of previous negative sexual experiences in her marriage, and being at a turning point in her sexual life. She says, “I had been in a marriage for sixteen years. It was pretty much sexless...I needed to do something about this sexual piece of my life. I knew I had to take a lover. So, that’s what I did.”

Satisfaction and happiness. The women clearly stated that their general and sexual relationship in which they first experienced FE was an overall positive and a good experience and relationship. Likewise, they clearly stated that they were overall satisfied and happy in their general and sexual relationship. None of the women overtly stated that their general or sexual relationship in which they first experienced FE was a negative or bad experience or relationship. Likewise, none of the women explicitly stated they were unsatisfied and unhappy in their general or sexual relationship.

Some of the women were most satisfied and happiest with specific aspects of the general or sexual relationship, or the connection and sex. But, some of the women were most satisfied and happiest with the general or sexual relationship overall, or the connection and sex overall. All the women were asked what satisfied them the most and made them the happiest about the relationship overall. To this question Jenna replies, “The sense of closeness.” Evelyn answers, “The friendship and emotional connection, and the sexual piece was something I had never experienced. Roxanne replies, “Sex, yeah, the sex.”

Some of the women declared that the sex they had in their relationship in which they first experienced FE was the best sex of their life at that point in time. Roxanne says, “My experience of being satisfied and happy with the sex was good. Extremely good. Probably next to my husband the best sex of my sexual history.” Evelyn says, “I was very satisfied with the sex, with it, with him. At the time I thought he was the cat’s meow. Like the best.” In contrast Evelyn described not being as sexually satisfied in her sexual relationship with her husband. She says, “My husband did care. When we did

have sex he did care. He did make sure that I was satisfied first. But, he only scratched the surface of satisfying me. He didn't realize what really satisfied me." She continues, "My lover had the knowledge of how to, and wanted to, and had the wherewithal to go for it where my husband just thought, 'Okay. She's done. Now it's my turn.'" Some of the women mentioned an increase in their sexual satisfaction and happiness by being in the relationship in which they first experienced female ejaculation. For Gwen, having side-by-side sex with her best friend improved her experience of having sex with her male partner, and increased her satisfaction and happiness. Gwen says, "Sex was always better when we were in pairs. At least for me."

Being satisfied and happy in their general and sexual relationship did not mean that the women did not experience some dissatisfaction and unhappiness in some way, or at different points in time. For the majority of the women the predominate sources of dissatisfaction and unhappiness in their general and sexual relationship belonged to the themes of sexual desire and feelings, specifically sexual frequency, discrepancy in feelings and interest of being in the relationship, or the deterioration of the relationship.

Some of the women wanted to have sex more frequently with their partner than they did despite being overall satisfied and happy in their sexual relationship. Evelyn says, "He didn't have time on his calendar for me as much as I wanted for the physical piece." Jenna says, "It's kind of annoying, because she just became not as interested in sex for the last six months of our relationships, and my libido never waned at all." Dawn says, "It didn't happen often enough, because it was long distance." Roxanne says, "Maybe sometimes I wanted it more than him, but that wasn't that often."

A few of the women had more interest in being in their relationship than their partner, and had more feelings for their partner than their partner had for them. As a result they experienced some emotional dissatisfaction and unhappiness in their relationship, especially towards the end. Jenna and Roxanne exemplify this. Jenna states, “Deep down inside I knew that I was way more into the relationship than she was...Towards the end it was just like, ‘Yeah, she’s not as into this, or into me as I am into her.’” Roxanne states, “Physically I was satisfied. That was never an issue...Emotionally, I guess I always felt like I had more feelings for him than he had for me.” She states further, “Even though we had this physical chemistry, passion, and lust I didn’t get the emotional connection...in the bedroom. I needed to feel he wasn’t just having sex with me, that we were making love, like he loved me.”

Dawn, Jenna, Gwen, Evelyn, and Roxanne all expressed that the deterioration of their relationship was something that made them dissatisfied and unhappy. As a result they experienced some emotional dissatisfaction and unhappiness in their relationship. Of all the women Gwen expressed that the deterioration of her relationship with her best friend was the greatest source of dissatisfaction and unhappiness for her. She says, “I know what made me the least happy. It has to do with the way things became disfractured.” She says further, “We never had enough within us as individual women to get to a point of truth about the nature of our friendship. That made me very regretful later...We just don’t have the level of relationship we did then.” In contrast, Rose did not express having emotional dissatisfaction and unhappiness due to the deterioration of her relationship with her boyfriend. She says, “When we broke up it wasn’t like some big

traumatic thing. He had to move, and it was like, ‘Alright, keep in touch.’” She also says, “I knew he was going to leave. I knew we were together for this amount of time too. I knew we weren’t going to get married or anything like that. He was a fun boyfriend.”

Sexual stimulation. The women in this connection category positively described their experience of sexual stimulation. None of the women in this connection category negatively described the sexual stimulation they received from their sexual partner as bad, insufficient, un-pleasurable, un-enjoyable, or unsatisfying. Some of the women who had previous sexual relationships described experiencing completely new sexual stimulation in the relationship in which they first experienced FE. Additionally, some of them described having better experiences with sexual stimulation and orgasm in the relationship in which they first experienced FE compared to previous sexual relationships.

A couple of women had better experiences with orgasm in the relationship in which they first experienced FE compared to previous sexual relationships. Rose says of having intercourse in previous relationships, “It was pleasurable, but I didn’t have an orgasm.” Roxanne really exemplifies this. She says, “The relationship prior...I didn’t regularly have orgasms...My boyfriend at the time wasn’t exactly sure how to help me get there. I wasn’t exactly sure...Although, there were...things I wanted to do he wasn’t willing to try.” She says further, “Moving into this relationship was very refreshing. I enjoyed sex. I had regular orgasms. He was concerned about my orgasms. I was able to tell him what I liked, to get what I wanted, and be assertive about it.”

Some of the women experienced completely new sexual stimulation in the relationship in which they first experienced FE. Evelyn and Gwen exemplify this. Evelyn says, “He had his fingers inside of me vaginally...I can’t put it in a nice term. He was fingering me. He was rough with it, but the rougher he was the better it felt. That’s when the gushes started.” She explains further, “It was some place I had never been touched before. Usually during that experience men had gone for more of a deeper kind of thrust, where this one his finger was...more curved up and not as deep.” Gwen says of her improved experience of sexual stimulation having side-by-side sex with her best friend,

My best friend, once we started having sex we used to have sex in front of each other, and that was more of a stimulation for us...There was a rubbing that we would experience if we were right next to each other. It was very interesting to me, because I started learning in that process how we could sync our bodies to react in a certain ways to each other without physically touching each other. And so, for me, it made the sex that I was having with my male partner better. But, later on I realized that my mind was so much engaged in the stimulation with her that more often when these instances occurred it had nothing to do with the men we were with.

Gwen says further, “To hear, smell, and see her visually in the act of sex was stimulating in a whole other way...To use my senses to really get in contact with her, or feel she was in contact with me.” She continues, “I could smell her arousal, and that was very stimulating.”

A couple of women experienced differences in penis shape or size with their partner with whom they first experienced FE. This is the case for Evelyn and Roxanne. Evelyn says, "Sex with my lover was wonderful. I had been used to my husband who is not very well endowed at all. This lover was very well endowed. There were places getting touched that had never been touched before." Roxanne says, "I remember with him in particular it might have been the shape or the curve of his penis."

Evelyn experienced differences in sexual stamina in her lover with whom she first experienced FE compared to previous sexual relationships. She says, "He would usually orgasm about five times. And he was an older man. I'd never been with a lover like that. I was always with my two husbands. That was the extent of my knowledge." She says further, "With both husbands it was five, ten minutes tops, you're done, now you go to sleep...He was very different in that he had a lot of stamina. Last longer. Go longer. All of it. All of the above."

Sexual desire. All the women expressed having a positive level of sexual desire. None of the women in this connection category spoke of having a low level, or absence of sexual desire in the relationship in which they first experienced FE. All the women were asked how often they wanted to have sex in their relationship. To this question Dawn replies, "All the time." Jenna answers, "Everyday." Gwen replies, "Pretty often. Like a lot. Like a lot, a lot that I wanted to." Evelyn answers, "Once a week. That was where I was, about once a week." Roxanne replies, "Often. Very often." Rose indicated her sexual desire increasing after her first experience of FE as she answers, "After that pretty much all the time."

The women described their level of sexual desire and elaborated on the frequency in which they wanted to have sex in their relationship in general terms. Evelyn says, “I just liked to have it as often as possible...Whenever I could grab it I would grab it.” She says further, “I could have sex daily. That would not bother me at all. And if I had the time then that would be fine, and a lover that would do that.” Jenna says, “Oh, I’m not going to lie. We were really crazy about sex. We had sex all the time...Not to be crass, but we were fucking like bunnies all the time. That was something very intense about our relationship.” Roxanne says, “I was probably the most sexually assertive woman he had been with. My sexual drive was probably the highest of anyone he had been with at the time. He liked that. He found that refreshing.” She says further, “He would joke, ‘Yeah, I know you’re going to want it. Don’t even act like you don’t. You know you want it.’ So, we joked like that.” Gwen says, “In my early adulthood a lot of my sexual experiences I wanted to have with her. After the ejaculation happened I knew I wanted to have sex in the same room with her as often as possible.” She continues, “I had thoughts of her when I masturbated, and when I was having sex...I was preoccupied with the thought of if her and I were going to ever release this sexual tension.” Gwen also says, “I thought about having sex with her... particularly in those situations I felt I was having sex with her without having sex with her physically... I wanted our yonis [vaginas] to come together without having a penis between us.”

Some of the women also elaborated on the frequency in which they wanted to have sex in their relationships in specific terms. Jenna described how often she had sex with her girlfriend on a weekly basis. She says, “Maybe three or four. Maybe sometimes

more. I think the least was like three or four.” Roxanne says, “During the week at least once or twice a week if we could get together...But, if we were together on the weekend it would happen anywhere from three to six times over the course of that weekend.”

Sexual arousal. All the women in this connection category expressed having a positive level of sexual arousal in their sexual relationship in which they first experienced FE. None of the women spoke of having a low level or absence of sexual arousal. All the women were asked how sexually aroused they were in their relationship. To this question Rose replies, “Very.” Dawn answers, “I was very aroused.” Jenna replies, “Very. Like all the time.” Gwen answers, “I was very aroused.” Evelyn replies, “Very aroused.” Roxanne answers, “Usually pretty aroused.”

All the women described their level of sexual arousal in their relationship in which they first experienced FE. Jenna exemplifies this. She says, “I was kind of like a boy stereotypically. I was just horny all the time. I wanted to have sex all the time. I was quote-unquote, ‘tingly in my pants all the time.’”

Dawn and Roxanne linked their level of sexual arousal to the connection with their partner, having time for sex, their partner’s skill at foreplay, or their partner liking and paying attention to their level of arousal. Dawn says, “I think he wanted to please me. He liked seeing me turned on, and aroused.” She says further, “I think he wanted to make sure that there was enough lubrication for him.” Roxanne says, “Usually pretty aroused. Partially because of the chemistry and physical attraction. But, usually we also had the leisure to spend a significant amount of time during foreplay, which he was pretty good at. That usually created a good arousal.” She continues, “He could stretch out

foreplay. I remember that. He could do thirty, forty minutes, sometimes almost an hour of foreplay. By the time we actually did have sex it was really intense, because you were so ready for it.” She adds, “That’s not typical.”

Gwen expressed experiencing an unprecedented level of arousal when she had side-by-side sex for the first time with her best friend the day she experienced her first FE. She says, “I remember my yoni [vagina] felt very swollen at the time, and that my lips and everything were like outward. My clitoris swole to such an extent at that time I don’t think it had been engorged to that level.”

Sexual receptivity. All the women exhibited an overall positive level of sexual receptivity in their relationship. The women expressed they were open to having sex. All the women were asked how open they are towards having sex in their relationship. To this question Rose replies, “I was very open.” Dawn answers, “Very.” Jenna replies, “Very.” Gwen answers, “I would have done it.” Evelyn replies, “Very open.” Roxanne answers, “Very open.”

Jenna and Roxanne described their level of openness towards having sex in their relationship through the thoughts and feelings they experienced. Jenna says, “In the beginning I was nervous and scared. I was afraid I wasn’t going to be good...It was performance anxiety. But, once I figured out what I was doing I felt very confident and was really [open]. Yes.” Roxanne says, “I knew the first couple of times we went out that I was open to sex in this relationship. After it finally happened I didn’t have any qualms about it. I was very happy to have sex with him.”

A couple of the women expressed either initiating or accepting sexual overtures in their relationship, and in this way demonstrated their level of openness towards having sex. Gwen exemplifies this, as she was open to going beyond having side-by-side sex to having physical sex with her best friend. She says, “If she would’ve said, “Let’s do it,” I would have done it...I just don’t think that she ever knew the way that I cared for her.”

Some of the women expressed sexually experimenting in their relationship, and in this way illustrated their level of openness towards having sex. Evelyn says, “He was very experimental...I told him that really anything that he wanted to try was okay in my book as long as it did not involve a third party, especially another woman.” She says further, “I had a suitcase of toys. I would always try to spice it up to make it a little better. But, we always played with something or made it a little different.” Dawn says, “We were pretty experimental. He was more experienced than I was at the time, so he’d want to try something. I’d say, ‘Yeah, let’s go ahead. Try it on me.’” She says further, “There was this purity test. It had a list. ‘Have you ever done this? Take away two purity points. I haven’t done that. Can we do that? Yes, I want to lose some purity points. Let’s try that.’” Roxanne says, “We were pretty spontaneous. We did like to have sex in interesting places. Like the hallway of his building, my elevator in my building. In front of a mirror. In the kitchen.” In contrast, Jenna and her girlfriend were not sexually experimental at all. Jenna says, “We were incredibly vanilla in this relationship. We were really vanilla. It was pretty much just your basic oral sex. We never even sixty-nined. We never really did any of that...We were just two girls in love.”

Several of the women expressed sexually exploring, discovering, and learning in their relationship, and in this way portrayed their level of openness. Gwen says, “Some of my greatest lessons on Tantra came through this friendship, because it was about not touching each other, and so bringing each other to the point of climax without.” She continues. “There was penetration we were receiving from the men, but then there was this whole other mind thing that we were doing with each other, and emotions.” Rose says, “He took his time to find out what I liked, and I found out what I liked. There were things I didn’t know that I would enjoy like the oral sex.” Dawn says, “A lot of things that happened were new with him...There was sort of a curiosity, fascination, and feeling of, ‘Am I going to like this? Am I not going to like this?’” Roxanne says, “I think it was within that relationship that I came into my own so to speak in terms of my sexuality. Being more comfortable with it, knowing my body, knowing what I like and what I didn’t like.” Jenna says, “How women have sex together. It’s not something either of us really knew or seen anything about. I was also figuring out how to be sexual at all. I never masturbated. Didn’t even kiss anybody until I was seventeen.” She says further, “I’d never had sex before with myself or anybody else, and it was fricken awesome! I was just like, ‘Oh my God! This feels great in every single way!’” I just wanted to explore everything about it.” She continues, “I like books, so I bought a bunch of books. I was like, ‘Okay, so how do I learn to do this and this and this?’...It was discovering everything all at once and quite literally diving in.”

Of all the women in this connection category, Roxanne and Jenna emphasized sexual receptivity the most, and being the most important element in the sexual

relationship in which they first experienced FE. For Roxanne, her boyfriend's level of sexual receptivity, or openness towards having sex, was the main difference in the relationship in which she first experienced FE compared to previous sexual relationships in which she did not experience FE. She says,

We both had pretty liberal, open views about sex. And he didn't have any hang-ups in the bedroom. I had a couple of previous relationships where the guys had hang ups...So, when I got with him it was refreshing that he was open about sex, I was open about sex.

Roxanne further emphasized that her boyfriend being receptive to what she wanted to do sexually was the most important element and main difference in the relationship in which she first experienced FE compared to previous sexual relationships in which she did not experience FE. She says,

I had only three previous partners before him. He was number four. The first partner was the boyfriend right as I was coming out of college, and he was the one who wasn't as open sexually. He was the type of guy who would say, 'You talk too much in the bedroom. Why don't you just be a little more quiet.'...He was a bit of a prude. In that relationship I always felt like I wanted to get more, like the potential was there, but he wasn't necessarily open to it...I was just learning. As I started getting to the point where sex was more comfortable for me physically I wanted to explore more. I wanted to do a few more things...I hadn't had penetration so I wanted that with him, and he didn't want that...I also felt with him like I couldn't get it as often as I wanted it...I felt that love, and that

emotional connection, but in the bedroom there were a few struggles...There were a few times we had some really pretty good sex, but it just never got to where it could've been in my opinion. A couple of experiences after that they were one and two time experiences. They were guys I knew from college, but there was no relationship. No commitment. If I compare those three to this one where I first experienced female ejaculation I would definitely have to say that the sex in this relationship with the female ejaculation was far better, and so that probably enabled me to experience that because I could take control and be assertive without fear of someone saying I'm doing too much. We were just both open to it. We had sex with enough frequency so that we could get more comfortable, and better at it. Practice makes perfect.

Jenna emphasized her level of sexual receptivity towards her own body as one of the most important elements in the sexual relationship in which she first experienced FE. For Jenna, being very receptive to her body's sensations and signals, and allowing herself to biologically go along with what felt good and natural to do was one of the most important elements in her first experience of FE. She says,

I didn't have any sexual relationships before then. I think that says a lot about my physiology. I was just naturally predisposed to do it, because being naive and sexually inexperienced, and not knowing about my body or anything like that sexually. The fact that it was pretty much my first orgasm ever that I ejaculated...I was just going with what felt good, and what felt natural.

Comfort. Four of the six women expressed feeling overall comfortable and at ease both in their general and sexual relationship in which they first experienced FE. They include Rose, Dawn, Jenna, and Roxanne. All four women were asked how at ease and comfortable they felt in general in their relationship, and how at ease and comfortable they felt having sex in their relationship. Rose replies, “Very, very comfortable.” Dawn answers, “I felt pretty safe and comfortable overall. Definitely safe.” Jenna replies, “For the most part. When we were alone totally at ease.” Roxanne answers, “I felt very at ease. I felt very comfortable having sex in this relationship.”

All four of the women elaborated on being comfortable in their general and sexual relationship, and on how they felt at ease and comfortable, or what made them feel at ease and comfortable. Some sources of ease and comfort included the following: (a) experiencing no sense of non-sexual or sexual pressure; (b) sex feeling natural; (c) having a positive experience of sexual decision-making such as having sex when they felt sure, ready, knew, and sensed that it was okay for them to do so; (d) having privacy; (e) having positive thoughts and feeling about one’s body; (f) trust in the overall connection of “intimacy, closeness, friendship, or attraction;” (g) the overall connection of “intimacy, closeness, friendship, or attraction;” (h) having mutual sexual understanding; and (i) traits and behaviors of their partner. Rose explained how she was at ease and comfortable in the relationship in which she first experienced FE, because sex felt natural and she did not feel pressured. She says, “I was just very comfortable with him all the time. No pressure for anything. No pressure for sex. No pressure to do anything. Just going along doing what came naturally. And that’s what made it very comfortable.” She continues,

“No rush for anything. I dated guys who wanted me to meet their families right away...You’d think it’s the girl...I’m like, ‘No! Slow Down!’ He didn’t all of the sudden say you’re my girlfriend...It took awhile.” Rose also explained how she was at ease and comfortable due to her positive experience of sexual decision-making such as feeling sure and knowing she was ready to have sex. She says further of being at ease and comfortable, “Very. I knew that I wanted to before, but I knew I was ready. I wanted to before, but I knew I was ready. Just a feeling. I was just sure.” Jenna explained how a source of ease and comfort in her relationship in which she first experienced FE was having privacy. She says, “We were always really comfy with each other especially alone.” She continues, “That really helped with the sexuality of it. I had to have somebody like that coming from where I came from...The fact we were so at ease with each other made that so much better.” Roxanne elaborated on how she felt at ease and comfortable having sex in the relationship in which she first experienced FE due to positive thoughts and feelings about her body; trust in the connection she and her boyfriend had; her experience of attraction in the overall connection of “intimacy, closeness, friendship, or attraction;” and having mutual sexual understanding. She says, “I felt pretty confident about my body at the time. I felt pretty confident about his level of attraction for me. I was attracted to him. We were comfortable having sex with each other.” She continues, “Whenever we got together it was kind of understood, or we would talk about that that’s something we wanted to happen.” Dawn described the traits and behaviors of her boyfriend with whom she first experienced FE that made her at ease

and comfortable. She says, "I think overall he was just pretty loving, caring, and attentive in the bedroom situation if you will."

Being overall at ease and comfortable in their general and sexual relationship did not mean that some of the women did not experience some unease and discomfort in some way, or at different points in time. Dawn exemplifies this. A source of temporary unease and discomfort for Dawn was due to experiencing things sexually for the first time. She says, "The first time I was definitely nervous." She continues, "There was all this build up. It was New Years Eve. We got a hotel room. He bought me lingerie. So, it was like, 'Oh, this is it.' But, once that happened I just wanted to all the time." Additionally, despite being overall at ease and comfortable in their general and sexual relationship, for some of the women their overall sense of comfort and ease changed over time. Dawn and Roxanne both expressed that their sense of comfort and ease changed over time where they felt more comfortable and at ease in the beginning and middle phases of their relationship, and less comfortable and at ease in the later phase of their relationship due to discrepancy in feelings, discrepancy of interest of being in the relationship, or the deterioration of the relationship. Dawn says, "I think earlier on I felt more comfortable and towards the end of it less comfortable." Roxanne says, "In general I felt pretty at ease and comfortable initially, especially during the first part of our relationship. The whole summer romance phase felt pretty at ease and comfortable."

Two women expressed having a mixed experience of being at ease and comfort in their relationship in which they first experienced FE. Strong differences existed in comfort and ease for these two women between the general and sexual relationship. This

is the case for Evelyn and Gwen. The difference in comfort regarded a very specific aspect of either their general or sexual relationship, but did not necessarily involve all the aspects of their general or sexual relationship resulting in them feeling completely uneasy and uncomfortable in either their general or sexual relationship as a whole. One area of discomfort and unease for one of the two women regarded the sense of self. Evelyn expressed unease and discomfort being herself with her lover in the general relationship, specifically regarding her level of education. She says, "I wasn't comfortable at all, because I was always on my best behavior. I came from a neighborhood that was clicky, mopped up. People spoke in their own language. It wasn't Ebonics, but similar. We never finished a sentence." She continues, "You could tell the whole area's uneducated, but more street smart than any book could ever lead you to. I always was on guard with regard to how I spoke, how I carried myself, what I was wearing." In contrast, Evelyn felt very at ease and comfortable being herself in the sexual relationship. When asking what ways she actually did feel at ease and comfortable with her lover she replies,

Sexually. Being able to be the sexual creature that I am is whom he brought out. Before I was guarded sexually with regards to my husband. Always trying to be what I thought he wanted me to be, and never letting go. Never. Never letting him experience all those things that my lover did.

Despite feeling overall comfortable and at ease having sex with her lover did not mean Evelyn did not experience some unease and discomfort, such as with her body image. When asked how at ease and comfortable she felt having sex with her lover she answers, "Oh, it was like breathing. I was a little self-conscious about my body... I feel I have an

awful body. I lost a lot of weight and have a lot of excess skin.” She continues, “Plus I’m still big. I’m not a small person. So, I was self-conscious physically of my appearance, but never the actual act of sex or orgasm.”

Another area of unease and discomfort for one of the two women regarded feelings of guilt and shame in the general and sexual relationship stemming from negative sexual beliefs, specifically regarding sexual orientation and same sex sexual behavior. Gwen expressed unease and discomfort having side-by-side sex with her best friend, specifically negative thoughts and feelings of guilt and shame regarding the physical sexual stimulation and arousal she experienced with her best friend. She says, “I always felt there was something wrong with what we were doing, that I would get such a stimulation, rush from it, from being in that situation with her.” She continues, “I always in the end would make myself think there was something wrong with it.” In contrast Gwen felt emotionally comfortable and at ease having side-by-side sex with her best friend. She says, “I felt comfortable that day when I ejaculated. Being able to cry in front of her, and not care about the other two guys in the room...She put a blanket over us... I was very comfortable in that way.” Gwen even expressed experiencing some of the same unease and discomfort in the general relationship with her best friend regarding physical sexual stimulation and arousal just sleeping together in the same bed in a non-sexual way, but not as pronounced. When asked how at ease and comfortable she felt in her relationship with her best friend in general she replies, “I think for the most part pretty good. Except for we would have these moments of being wrapped into each other.” She continues, “Sometimes when we went to bed we would end up curled into

each other. Then that feeling of body sensations became uncomfortable. It was just like, ‘Okay, we can’t do this this way.’”

Safety. The women expressed feeling safe overall physically and emotionally in their general and sexual relationship in which they first experienced FE. All the women were asked what potential they felt of being harmed or hurt in any way in their relationship generally and while having sex in their relationship. Rose replies, “None...I was relaxed and comfortable. I knew it was naturally going to end. I wasn’t worried about him cheating on me. I didn’t think I needed to keep tabs on him. I just trusted him. I was comfortable.” She says further, “He did take his time the first time we had sex...until I was really ready for him to enter me. Never any fear or hurt. It was just a very good experience.” Dawn answers, “None. Physically neither of us would do anything that the other didn’t want.” Jenna replies, “Physically none.” Gwen answers, “I didn’t feel a potential to be harmed.” Evelyn replies, “I didn’t. I never thought of being harmed or hurt ever. I totally trusted him with my emotional side and my sexual side. I totally trusted him with that.” Roxanne answers, “Sexually I didn’t feel like I would be harmed or hurt. We never took it to a place where we got involved in activities that would hurt or harm someone.”

None of the women felt physically threatened, or were actually physically threatened. They did not speak of enduring any type of intentional and non-consensual physical harm or hurt from within their relationship. They also did not speak of feeling a perpetual potential for intentional and non-consensual physical harm or hurt from within their relationship. The only type of physical harm or hurt the women reported

experiencing was due to the inherent physical nature of having sex, and the process of two bodies becoming entangled. Jenna says of what potential she felt of being harmed or hurt in any way having sex in her relationship, “Not at all. No. We were both very nice, caring loving people that absolutely neither of us were going to intentionally hurt one another aside from the occasional, ‘Oh, that doesn’t go there!’” She continues, “When you have sex it’s a physical thing. Sometimes you’re like, ‘My leg doesn’t go that high.’ Or, ‘Ouch, I hit my elbow.’” Something like that, but other than that no. There was no way.”

Despite feeling safe overall physically in their general and sexual relationships, a few of the women expressed having distinctive concerns about their physical safety. One concern about physical safety centered around differing sexual interests such as one partner being into kinky sex while the other was not. Gwen expressed the potential to be physically harmed or hurt having side-by-side sex with her best friend due to her best friend possibly giving verbal directives to their boyfriends to do something kinky. She says, “She liked her boyfriends to choke her. She would try to get me to do it. I’m like, ‘I’m not into that.’ Not my forte...I could be hurt if she’s telling our boyfriends, ‘And then you choke her.’”

A second concern about physical safety centered around the nature of how one of the women met her partner with whom she first experienced FE, such as the inherent risk that’s involved in meeting people on-line, and then meeting them in person behind closed doors the first couple of times. However, this specific concern was temporary and limited to the very beginning of the relationship. Evelyn says, “I didn’t know him... The

bad thing about meeting people on the internet is you don't know who you're meeting... You don't know who somebody is until the door shuts... You can be in there with a serial killer." She continues, "After the first or second time we were together I totally knew who he was. And I totally knew I could take him. So, it was okay."

A third concern about physical safety centered around the circumstances of how one of the women began her relationship with her partner with whom she first experienced FE, such as breaking up the relationship between her partner and her partner's boyfriend and eventual ex-boyfriend. Jenna says, "No fear of being physically hurt, not from within the relationship. From outside at first there was definitely a possibility of people coming after me just because I'd stolen this guy's girlfriend."

Despite feeling safe overall emotionally in their general and sexual relationships, differences clearly existed in some of the women's sense of safety physically versus emotionally generally and sexually. Dawn, Jenna, and Roxanne exemplify this. The predominate form of harm or hurt they experienced, or the women felt the potential for in their relationship, was emotional in nature. As Roxanne says, "I felt the potential to be emotionally hurt." The experience of emotional safety in their relationship changed over time where they felt emotionally safe in the beginning and middle phases of their relationship, but as their relationship progressed they felt less emotionally safe towards the end due to discrepancy in feelings, discrepancy of interest of being in the relationship, or the deterioration of the relationship. Ultimately, they experienced heartbreak from the deterioration and ending of their relationship. Dawn says, "Emotionally, ultimately I was hurt when it ended, but that happens in all relationships." She says further, "Obviously,

emotionally when it ended. That was the hurtful part.” Jenna says, “At the time I was so naive and wanted it so badly I just let all those guards down. I thought, ‘She’s going to maybe break my heart someday.’ And she totally did. But, that’s okay. These things happen.” She says further, “Emotionally, I was really naive so I did feel really safe in the beginning...totally let her in. She messed me up pretty bad towards the end. But, while it was good it was good. I totally felt safe.” Roxanne says,

Sex was opening me up to deeper feelings for him...Once the relationship progressed, and we’d been into the relationship for over a year, I was like, ‘Okay, I’m not sure I’m going to get that emotional connection with him in the bedroom that I’d like, because he doesn’t feel the same way about me as I feel about him.’

And so at that point I started holding back, because I didn’t want to get hurt.”

Roxanne says further, “He wasn’t in love with me. It got to the point that once I realized that I wasn’t going to get that from him that I started shutting down emotionally.” She continues, “Once I realized that I was with someone that didn’t feel the same way about me I basically had to start protecting myself.”

Functional Connection. The sexual relationships in which two of the women first experienced FE fall into “functional” connection category. These women experienced their first FE with another person in a relationship with the presence of a “functional” connection. Their fictitious names are Brenda and Gwen. Brenda experienced her first FE with her boyfriend at age 30. As previously described, Gwen experienced her first FE in a semi voyeuristic, group sex situation where she and her best friend had sex with their own boyfriends alongside each other without swinging at age

17. Gwen refers to this as having “side-by-side sex” with her best friend. Gwen’s sexual relationship with her best friend falls into the connection category of “intimacy, closeness, friendship, or attraction” while her relationship with her boyfriend falls into the current connection category of “functional.”

In the section on the connection category of “intimacy, closeness, friendship, or attraction” Gwen emphasized that the overall connection with her best friend with whom she had side-by-side sex, a connection that she did not have with her boyfriend, was the most important element and main difference in the sexual relationship in which she first experienced FE. Her responses supported this when asking Gwen about her relationship with her boyfriend. In her responses Gwen repeatedly emphasized that the difference between having sex with her boyfriend the first time she experienced FE, and previous times having sex with him was the presence of her best friend while having side-by-side sex, and the overall connection with her best friend. Gwen says, “I knew the experience wasn’t about him.” She described that at the peak of her arousal she merged with her best friend during side-by-side sex, and not her boyfriend. She says, “Our breathing was very synchronized. I remember feeling like, going to the engorgement part, she was looking at me so hard that I felt like she was within me, that she was really peering at me.” Gwen explained how even the boyfriends with whom she and her best friend had side-by-side sex could sense the connection between her best friend and her. She says,

I remember her boyfriend asked her, “Are you guys sure that you aren’t more into each other than what you guys realize?” It was just like, “No, we’re not.” We

were totally not into recognizing what was happening, or really acknowledging that there was a love for each other.

The “functional” relationships in which Brenda and Gwen first experienced FE remarkably differed in several ways from the six women who experienced their first FE in a relationship with the presence of “intimacy, closeness, friendship, or attraction.” First, was the stark absence of intimacy, closeness, friendship, or attraction in Brenda and Gwen’s “functional” relationships compared to the six women whose relationships in which they first experienced FE fall into the connection category of “intimacy, closeness, friendship, or attraction.” Second, Brenda and Gwen had a more overall negative to neutral to mixed experience of the sexual relationship in their “functional” relationships, whereas the six women who experienced their first FE in a relationship with a connection of “intimacy, closeness, friendship, or attraction” had an overall positive experience of the sexual relationship. Finally, Brenda and Gwen had an economic component coloring their “functional” relationships, which was notably absent for the six women who experienced their first FE in a relationship with a connection of “intimacy, closeness, friendship, or attraction.”

Economics. An economic component existed for the women who experienced their first FE in a relationship with a “functional” connection. The strength of the economic dynamic in the relationship varied. In Brenda’s case the economic dynamic of the relationship was strong where there was an exchange of sex for money and economic security. Brenda says, “The first time we did it was because he paid for it.” She says further, “Whatever I asked for he gave me. He worked two jobs to keep me satisfied. It

was like I was working. I was getting three, four hundred dollars a week from him. That would make any woman almost happy.” In Gwen’s case the economic dynamic of the relationship with her boyfriend was of a lesser degree where she received material things from her boyfriend. She says, “He would give me what I wanted. He had a source of income. He would get me things I wanted... At that time I was very materialistic in nature. I didn’t have the sense of consciousness I have now.”

Feelings. The two women described their feelings for their partner in negative to neutral terms. They did not express having feelings of care or love for their partner. Feelings ranged from dislike to tolerance to indifference. Brenda explicitly stated that she held feelings of dislike for her boyfriend with whom she first experienced FE. She says, “I didn’t like him.” In Brenda’s case her feelings for her boyfriend changed over time from negative to less negative, or from dislike to tolerance after her first experience of FE, which had some positive impacts on her feelings. She says, “At that time it was one hundred. It was great. I wanted to be around him. We could talk, laugh, giggle, but didn’t last long. I could tolerate him.” She continues, “I could tolerate him because I knew later on that night or... day I was going to be satisfied... I used that as a compensation for the lack of things he was doing in the relationship or providing.” Gwen indicated having more neutral feelings of indifference for her boyfriend due to how her relationship formed, which was based on outside forces such as peer pressure and wanting to fit in rather than based on her own desire to be in a relationship with him due to feelings of care and love. She says, “It seemed very much like we were into each other.” She continues, “But, there were the dynamics within our crew. We hung around

a group of 12 people. Everyone was hooked up with one of the friends. Within that social context I found myself feeling like we were paired up.” She says further, “Rather than me seeing him for myself, everyone else started seeing us together. The relationship was built more off of our peer group, and also just being together for the sake of being together.”

Traits and behaviors. The two women in this connection category described the traits and behaviors of their partner with whom they first experienced FE in negative to neutral terms. They did not describe their partners as having multiple desirable or favorable traits and behaviors. Brenda says, “I don’t know if it was mental problems. He didn’t want you to get dressed in front of the TV.” She continues, “If someone was to talk to me... I wasn’t supposed to say my name. He’d step in the middle of it. Or later on in the day he’d ask, ‘What did he want?’” She says further, “Plus he was an older guy. So, a big age difference. He was very controlling, demanding, and paranoid.” In Brenda’s case, her experience of her boyfriend’s traits and behaviors changed over time from negative to being bearable after her first experience of FE, which had some positive impacts on her experience of her boyfriend in the relationship. She says of her boyfriend’s traits and behaviors after her first experience of FE, “I didn’t care. I was like, ‘Okay let’s do it.’ His age. How he looked. His flaws. I didn’t care about his flaws at the time. I was willing to overlook them.” Gwen described some traits and behaviors in her boyfriend, and says, “He was a bit possessive, and when I say that he didn’t like me talking to other guys.” She continues, “I remember... I had gotten a massage, and I told him. He’s like, ‘Who did you get a massage from?’ I’m like, ‘I got a massage from

such and such.’ And he got very angry about it.” She says further, “I realized there were some traits in him I could recognize from the different partners my mother dated through my childhood. That frightened me to think he could get that possessive and jealous. That was a major turning point for me.” She also states, “He was overall a little bit chauvinistic in his own way.”

Commonalities. The two women in this connection category did not convey they shared multiple things in common with their partner with whom they first experienced FE such as traits, interests, beliefs, life experiences, and so on. In one instance the absence of commonalities was stressed. Gwen described the diverging interests between her and her boyfriend intellectually, conversationally, and pop-culturally. She says, “Stimulating conversation is everything to me. He wasn’t well read. He was just into what he was into at that time. So, it was about money, cars, and those things.” She continues, “I had read so many books...that I was always trying to engage him in conversations, and he’d just fall flat. We could talk about boys-in-the-hood...or 2Pac’s latest beefs...Anything pop cultural...he knew, but anything else he didn’t.”

Resolving issues and healing sense of self. A healing component existed for one of the two women in her relationship in which she first experienced FE. Issues regarding the sexual sense of self were resolved in some way. This is the case for Gwen. The specific issues she was striving to overcome varied. One of the issues Gwen was specifically working to resolve was her experience of childhood sexual molestation, and having sex with her boyfriend helped her with this. She says, “I thought I had all of these issues around not only sexuality, but just my sexual being-ness in general.” She

continues, “After I started having sex, and then I got a boyfriend I was becoming a little normal... I just felt normal once I started having sex, finally consensual sex, having a breakthrough.” She also says, “I was at that time learning to be okay.” She continues, “Okay with the interaction I had with the few males I had been with...and knowing I could be able to have I thought at the time a healthy sexual interaction...and break through all of that baggage of childhood.”

Spending time together engaging in non-sexual activities. The two women expressed having a more negative to neutral experience of spending time engaging in non-sexual activities with their partner with whom they first experienced FE. Limiting the women enjoying and having fun spending time engaging in non-sexual activities with their partner were frequently not getting along and having conflicts with their partner, or a lack of common interests. In Brenda’s case she and her boyfriend regularly didn’t “get along,” and had “conflicts” in the general relationship. In fact, she described how a difference in her relationship the day she first experienced FE was the absence of conflicts, and actually getting along with her boyfriend. She says, “We would have little times like maybe once every month, or once every two months where we’d get along for one day, or a couple of hours. But, we had gotten along that whole day without any conflicts.” In Gwen’s case, she and her boyfriend did spend time engaging in non-sexual activities, but the activities being fun and enjoyable for her was limited due to a lack of common interests. She says, “He did his best to appease me within the context of the relationship. We would do things together. We would go out. But, for the most part his thing was centered around him rapping, his friends, and hanging out.” She continues, “I

was more into books and other things. It was just like we were together, but as far as common interests we really didn't have anything other than the crew we were hooked into."

Sexual decision-making. The women in this connection category indicated being willing to have sex with their partner in their relationship when they truly did not want to. They had sex when they truly did not want to because their partner wanted to, to get it over with, or because of sexual beliefs or the circumstances of the relationship such as the exchange of sex for money and financial security. Consequently, the women expressed the need to mentally, emotionally, and physically prepare themselves to have sex, because ultimately they did not want to have sex with their partner. They were not fully on board with having sex when they did.

Brenda's responses indicated that her experience of sexual-decision making changed over time from negative to positive after her first experience of FE, which positively impacted her experience of sexual decision-making and sex. Before her first experience of FE Brenda had sex because her partner wanted to, and to get it over with rather than having sex when she truly wanted to. She described the experience of having sex negatively when deciding to have sex with these intentions. She says, "It was a chore. It was like 'Whatever.' It was like, 'Okay, if this is what you want let's do it. Let's get it over with.'" Additionally, before her first experience of FE Brenda needed to prepare to have sex when having sex with the intention of getting it over with, or just because her boyfriend wanted to. She describes her preparation process as, "Let me go take a bath he's been acting a fool so long, and we're going to do it. I just...let him do

it...get up...take a bath. There wasn't any cuddling...or talking." In contrast, after her first experience of FE Brenda had sex when she truly wanted to, and not just because her boyfriend wanted to, or to get it over with. She says, "After the first experience of the orgasm and stuff I was very satisfied. I didn't mind having sex with him." She continues, "But before that it was like, 'Let me just go ahead and do it so we don't have to argue later, or just get it over with.' But after that I started really wanting to have sex with him." In further contrast, after her first experience of FE Brenda did not need to prepare to have sex, because she was having sex when she truly wanted to, and not just because her boyfriend wanted to, or to get it over with. She says, "I didn't second-guess. I didn't have to mentally get myself prepared like, 'Oh, here we go again.' It just happened naturally."

Gwen's responses indicated that she had sex because her partner wanted to rather than having sex when she truly wanted to, and because of her belief that sex was a criteria of being in a relationship. She says, "It seemed like it was something we were supposed to do as a couple. Have sex." She elaborates, "At that time he used to drink a lot of gin. I knew if he was drinking gin that it was going to be this horny night for him, and that he would want to have sex." She continues, "For me I would sometimes just not want to have it then, but be willing to do so, because that was a condition of what I felt a relationship was built on." Gwen's responses also pointed out the need to prepare to have sex with her boyfriend. She says, "I was always willing. But, I had to get to a certain level of drunkenness... If I was going to be with him, and he was drinking, I would have to keep up to even get...to that level."

Satisfaction and happiness. The two women described the general and sexual relationship in which they first experienced FE in overall negative to neutral to mixed terms. Some main sources of dissatisfaction and unhappiness revolved around negative traits and behaviors in their partner sexually and non-sexually, lack of intimacy, lack of commonalities, and sexual stimulation and related areas such as orgasm or overall sexual pleasure. Brenda says, “It wasn’t a very good relationship. He was demanding, over possessive, and stuff like that. It wasn’t a very healthy relationship, but it was an okay relationship.” Gwen says, “I knew intellectually he could not divulge me in certain conversations, or we could not in certain atmospheres be together. He wasn’t on the level I was, and I wasn’t on his. It was functional for the time being.” Gwen also states, “With him it seemed that it was more about fucking. There wasn’t a whole lot of intimacy. It was just more for him to be able to cum and be done with it, like some instant gratification.” She states further about the sex with her boyfriend, “It was just mundane.”

Both women were asked what satisfied them the least and made them the least happy about their relationship overall. To this question Brenda replies, “His unsupportiveness, his possessiveness, not being emotionally supportive, and probably the age difference. As the relationship grew him getting to look older.” Gwen answers, “He wasn’t a very good conversationalist.” Additionally, both women were asked what satisfied them the least and made them the least happy about the sex in their relationship. To this question Brenda replies, “The movement, the kissing, the oral sex.” Gwen answers, “Sometimes he would fall asleep so fast that he would be on me, and it would feel like dead weight... Often times... he was inebriated to that extent... that it was like

sex and fall asleep.” She continues, “Most of the time I felt like mentally I would have to make myself cum, because if not then he was going to be done and gone with it.”

Experiencing a lower level of satisfaction and happiness in the general and sexual relationship, or having a more negative to neutral to mixed experience of satisfaction and happiness, did not mean the women did not experience some satisfaction and happiness. Sources of satisfaction and happiness strictly centered around resolving and healing issues regarding the sexual sense of self, money, or sex even though there was much about the sex in their relationship that made them unsatisfied and unhappy. When Brenda was asked what satisfied her the most and made her the happiest overall in the relationship she replies, “the sex and the money.” When asked what satisfied her the most and made her the happiest about the sex in the relationship she answers, “the gush of fluids.” Brenda also says, “I was happy with the sex life and the financial part of it. But, other than that, the emotional support, none of that. Nothing else. Just the financial part, and the sex. That’s it.” Brenda’s responses indicated her experience of satisfaction and happiness changed over time from a lower level and increased after her first experience of FE, which positively impacted her satisfaction and happiness. She says, “It wasn’t good until after that...Two years after that experience it was great...I enjoyed it...But, in the beginning it wasn’t all that hot. It was a chore. Like if you have to wash dishes.” Gwen’s experience of satisfaction and happiness in her relationship centered around what it meant for her to have a boyfriend at the time, and the implications of this meaning for the issues with her sexual sense of self she was trying to resolve or heal. Gwen says, “I was just happy to have a boyfriend. It was just something to do. I can say

that I wasn't dissatisfied with him... It was the norm." She continues, "It was something my friends were doing so it felt like I should have a boyfriend. It also meant I wasn't gay because I had these feeling for my friend. I had this boyfriend so it balanced that out." Gwen also states, "I didn't know anything about sex really. It was just something I was doing because I felt my peers were doing it. I was also trying to erase some of the guilt and shame I had from being molested." She continues, "When I first started having sex with men I was doing it to do it, to break through to make sure I wasn't gay..., a prude for my age, and...being known as the girl who wasn't having sex."

Sexual stimulation. The two women described the sexual stimulation they received from their partner with whom they first experienced FE in overall negative terms. They conveyed that the sexual stimulation was unsatisfying and insufficient. They did not indicate receiving completely new or improved sexual stimulation compared to previous sexual relationships or encounters. Outside of their first experience of FE, the women also did not indicate an overall improved experience of sexual pleasure and orgasm compared to previous sexual relationships or encounters. On the contrary, they indicated a poorer experience of sexual pleasure and orgasm compared to previous sexual relationships or encounters. Brenda states, "I'm particular...From being with my husband and another... there are certain things I like to feel...The way you rub me. It was...like he was doing it to see my reaction, if he was doing it right." She continues, "He lacked the confidence...If I would fake a moan or something then he'd be like, 'Okay, I'm doing it right.' But, then he really wasn't." Brenda also states, "He didn't have any rhythm. He couldn't kiss. He couldn't perform oral sex right. He was like an

old man sometimes, even though he was.” She continues, “I was always on top...when I wanted to get what I wanted from him. But, other than that part the sex was ‘yuck.’” She also says, “The oral sex was ‘yuck’.” Gwen says, “I started masturbating early in life... From different experiences I had early on I found a way to bring myself to...orgasm. What I experienced with this young man never brought me to the capacity I could bring myself.” She continues, “More often he would cum first. Once he came he would be exhausted. Done with it. More so wanting to pull out and just be done with it...Sometimes I would masturbate in the bed with him afterward.”

Sexual desire. The two women spoke of having an overall lower level of sexual desire in the relationship in which they first experienced FE. They described their level of sexual desire and elaborated on the frequency in which they wanted to have sex in their relationship in general and specific terms. Both women were asked how often they wanted to have sex in their relationship. Brenda’s response indicated that her overall level of sexual desire and frequency changed over time from a lower level and increased to a positive level after her first experience of FE. When Brenda was asked how often she wanted to have sex in her relationship before her first experience of FE she replies, “Once a week.” In contrast, when asked how often she wanted to have sex in her relationship after her first experience of FE she answers, “Almost every day. Everyday. Three or four times a day...Opened up something.” Gwen’s response to the question about sexual desire indicated she had a lower level of sexual desire and frequency in her relationship with her boyfriend with whom she first experienced FE. She replies,

“Maybe twice a month or something. I felt he wanted it more... The times that I wanted to have sex with him weren’t as frequent.”

Sexual arousal. The two women expressed having overall lower levels of sexual arousal in their relationship in which they first experienced FE. Both women were asked how sexually aroused they were in their relationship. Brenda’s response indicated that her overall level of sexual arousal changed over time from a lower level and increased to a positive level after her first experience of FE. To the question Brenda replies, “At that time. Very.” She continues, “At that time I felt him desirable. I could tolerate him a little more because of this. So, I was very turned on at the possibility I might have this feeling again.” She says further, “I was very turned on by him. I knew I was going to get that feeling. I could tolerate him being old, and he’s sexy because he gave me this feeling. But, other than that I didn’t like him.” Gwen’s response indicated solo masturbation produced a better arousal and orgasm than having sex with her boyfriend from whom she received direct genital stimulation during her first experience of FE. Her responses also indicated that the negative traits and behaviors in her boyfriend may have been the cause for a poorer experience of sexual arousal and orgasm with him during sex compared to solo masturbation. To the question Gwen answers, “I was a bit under stimulated. The orgasms that I had with him were never as satisfying as the ones that I had by myself.” She continues, “I didn’t feel he took the time to get to know me sexually when he was sober. I thought maybe the drunkenness had an influence on why he didn’t have as much stamina and would fall asleep so easily.”

Sexual receptivity. Both women possessed a positive level of openness towards having sex in the relationship in which they first experienced FE. They were both asked how open they were towards having sex in their relationship. To this question Brenda replies, “I’ve never had a closed mind when it comes to sex... The first time we did it was because he paid for it. So,...very open...But, I’ve always been open minded to sex. That’s how we were raised.” Gwen answers, “I was pretty open with him. If it was something that I knew that he wanted I wasn’t ever trying to not cooperate with him. I just often times wasn’t as excited as he was to do it.”

The women did not particularly emphasize that their relationship contained sexual exploration, discovering, learning, or experimentation. Gwen says, “We weren’t experimenting a lot with sex. It was pretty much just a few positions...It was just sex. In the beginning we might have made out a few times. Sometimes we would have sex without even making out.” Even though she did not particularly emphasize that her relationship with her boyfriend contained sexual exploration, discovering, learning, or experimentation did not mean that some degree of it did not take place. In Gwen’s relationship with her boyfriend, having side-by-side sex with her best friend and his friend was the height of sexual experimentation. Gwen states, “I think within that context me having sex with my friend and his friend in the room was the peak of pushing the envelope for everyone.” Additionally, some sexual learning took place for Gwen when having sex with her boyfriend, but without his awareness. She states, “I could practice the various kegel exercises, and just try things that I was learning.”

Comfort. The two women expressed having an overall negative to mixed experience of being at ease and comfortable in their relationship in which they first experienced FE. Sources of ease and comfort included sexual decision-making and having sex when one truly desired it instead of having sex with other intentions such as getting it over with or just to please their partner because he wanted to have sex, and the overall “functional” connection in the general relationship. Brenda’s experience of being at ease and comfortable having sex with her boyfriend changed over time from a lower level and increased after her first experience of FE, which positively impacted being at ease and comfortable having sex due to changes in her sexual decision-making and having sex when she truly desired it. She says, “In the middle I was at ease.” She continues, “I was just wanting it. I was craving it. Doing it wasn’t a problem. It wasn’t a hassle. It wasn’t a second thought. It was just something that came natural. That’s what it was. Something that came natural.” Gwen was at ease and comfortable in the general relationship with her boyfriend due to the overall “functional” connection in their relationship. She says, “Pretty good. I felt pretty good. It was like being betrothed to someone. You’re linked up because of the different conditions around you.” She continues, “Then you’re in it, and even though it might not be as real as it is, you play the role fully out. I felt he did well at playing his role to everyone...We were like the perfect couple.”

Strong differences existed in comfort and ease for both women between the general and sexual relationship. Sources of unease and discomfort included negative traits and behaviors in their partner non-sexually and sexually. Brenda expressed

experiencing an increase in ease and comfort especially after her first experience of FE in the sexual relationship, whereas she expressed being completely uneasy and uncomfortable overall in the general relationship due to her boyfriend's negative traits and behaviors, which negatively impacted her sense of self and feeling at ease and comfortable being herself. When Brenda was asked in general how at ease and comfortable she felt in the relationship she replies, "I didn't. Never...I felt like I was trapped, or not being my true self, which is fun, outgoing. I like to have fun, laugh, talk, joke. But, if I'm around him I have to watch what I say." She explains further, "If we went shopping... I had to hurry up and just go get whatever it is I'm going to get...I can't browse...shop...talk to the sales people, especially...men...I never felt at ease in the relationship." Gwen expressed being at ease and comfort in the general relationship, whereas she expressed being uneasy and uncomfortable in the sexual relationship due to her boyfriend's negative traits and behaviors sexually, which led to her needing to engage in preparations in order to be at ease and comfortable enough to have sex with her boyfriend. When Gwen was asked how at ease and comfortable she felt having sex in the relationship she replies, "Well, I was willing, so how comfortable?...A lot of times if I was sober and he was drunk it would take me to get drunk to get to where I could be able to have sex with him." She continues, "There was a level of aggressiveness that he would have. For me to be able to deal with that I had to be drunk too, because then it kind of numbed me."

Of the two women in this connection category, Brenda emphasized the aspect of comfort in the connection with her boyfriend the most, and being the most important

element in the general and sexual relationship in which she first experienced FE. For Brenda, comfort with her body image was one of the main differences in the sexual relationship in which she first experienced FE compared to previous sexual encounters with her boyfriend and previous sexual relationships. When asked about the difference between having sex with her boyfriend when she first experienced FE and previous times having sex with him she replies,

I had started losing some weight, and I got on top...That was the first time I was comfortable with doing it. Getting on top...I felt more comfortable...I was feeling a little bit sexier too at that time. I went to the beauty shop and stuff and went shopping. I was feeling kind of frisky and feisty.

Additionally for Brenda, comfort was created by the suspension of elements in the general relationship that routinely made her uncomfortable. Specifically, the day she first experienced FE with her boyfriend she did not experience his negative traits and behaviors that produced negative feelings of dislike for her boyfriend and conflict in the relationship. Additionally, the day she first experienced FE with her boyfriend she actually got along with her boyfriend, enjoyed his company, and had fun spending time with him engaging in non-sexual activities. When Brenda was asked about the difference between having sex with her boyfriend when she first experienced FE, and previous times having sex with him she answers,

I had a good day that day. We didn't argue, or he didn't stress me out so much...We were getting along at that time. We were just talking and laughing. He wasn't acting like a control freak...at that time. He wasn't being possessive,

or none of that. He just came and picked me up from the beauty shop and was like, 'Oh, you look nice'... We went shopping, and he didn't act a fool. He was just being on his best behavior. So, we had a good day that day.

Safety. The two women expressed feeling safe overall in their general and sexual relationship in which they first experienced FE. Neither felt physically threatened, or was actually physically threatened. They did not speak of enduring any type of intentional and non-consensual physical harm or hurt from within their relationship. They also did not speak of feeling a perpetual potential of intentional and non-consensual physical harm or hurt from within their relationship. Both women were asked what potential they felt of being harmed or hurt in any way in their relationship in general, and while having sex in their relationship. Brenda replies, "Never. Never." Gwen answers, "I didn't feel any potential of being harmed or hurt." Sources of feeling safe were a solid sense of identity and personal boundaries of what is an acceptable and unacceptable way to treat someone in a relationship, and a sense of power. Brenda says, "I could take him being possessive... I knew how to be like, 'I'm going to the store. No you can't go'... just to get away. But, I wasn't going to tolerate him threatening me, putting his hands on me." She also states, "I never felt unsafe, because I'm not going to tolerate that. If I don't want to do it with you I don't want to do it with you. That's it. Go do it with somebody else... No means no." Gwen says, "For a long time I felt I had a power over him, that the conditions of the relationship were set forth by me." She continues, "That's why I said at first he was very appealing to me in making sure things got done."

Despite feeling safe overall physically and emotionally in their general and sexual relationship, one of the women expressed having a distinctive concern about physical safety. The concern about physical safety was sexual in nature, and centered around sexual health and contracting a sexual disease. The source of the concern stemmed from negative traits and behaviors in her partner. Gwen says, “My only concern at that time was if he had sex outside the relationship would he use a condom or not? There were too many times he was trying to convince me it was okay to slip it off.” She continues, “I knew he had women interested in him...I felt I was pretty open if he was going to have sex with someone else. ‘At least...use a condom.’ That’s what I said to him at the time.”

Despite feeling safe overall physically and emotionally in their general and sexual relationship did not mean that some of the women did not feel the potential for or experience harm or hurt in some way at different points in time. Sources of feeling the potential for or experiencing harm or hurt in some way at different point in time again stemmed from negative traits and behaviors in their partner. Gwen’s experience of safety overall physically and emotionally in the general and sexual relationship changed over time from feeling safe overall to feeling less safe overall. The negative change in her experience of safety overall generally and sexually was due to an isolated incident with her boyfriend that occurred after her first experience of FE near the end of the relationship where his negative traits and behaviors came to the forefront. Gwen says, “This was after that...It had to do with me getting this massage and him getting angry...It was from one of my friends...who is gay now. He wasn’t interested in women. But, he was still very upset.” She continues, “Just how enraged he was, the vocal level of him

yelling at me on the phone, and him not getting over it, talking about it for days.” She says further, “Then we went to have sex, and he asked me, ‘Was he touching you like this, and you liked it?’ All of that was unhealthy for me.”

Despite feeling safe overall physically and emotionally in their general and sexual relationship, differences clearly existed in one of the women’s sense of safety physically versus emotionally. This is the case for Brenda. The predominate form of harm or hurt Brenda experienced in her relationship was emotional in nature, and was due to the negative traits and behaviors in her boyfriend, specifically him putting her down verbally. She says, “Sometimes he could say something that would really hurt your feelings. But, then I realized, ‘Well, That’s your mess, because that’s how you feel. I don’t think people feel that way about me. So, okay, whatever.’” She says further about the difference in her sense of safety physically versus emotionally, “Emotionally, okay, and sometimes verbal, but I never felt threatened.”

Connection of sexual exploration, discovery, learning, or experimentation.

The sexual relationships in which three of the women first experienced FE fall into the connection category of “sexual exploration, discovery, learning, or experimentation.” They experienced their first FE with themselves through solo masturbation. The women in this connection category were relating to themselves through their bodies, and connecting with their bodies by having solo masturbation sex. In the absence of a sexual partner, the experience of the sexual relationship became defined by sexual exploration, discovery, learning, or experimentation with their bodies. In other words, their sexual relationship became characterized by sexual receptivity, which in this study is defined as:

“A state of openness towards sex be it towards oneself sexually, one’s partner sexually, or the sexual situation as evidenced by things like sexual exploration and experimentation, and accepting and initiating sexual overtures.” Sam, Vicky, and Annabell are the fictitious names of the three women who fall into this connection category of “sexual exploration, discover, learning, or experimentation.” Vicky was in a sexual relationship with her boyfriend at the time she experienced her first FE during solo masturbation at age 17. Sam and Annabell were not in a concurrent sexual relationship with a boyfriend or girlfriend. Sam experienced her first FE at age 15 while Annabell experienced her first FE at age 14.

Of the three women in this connection category, Annabell emphasized the overall connection of “sexual exploration, discovery, learning, or experimentation” the most, and being the most important element in the sexual relationship in which she first experienced FE. Even though Annabell did not have previous sexual relationships to compare and contrast to her experience of having the solo masturbation sex in which she first experienced FE, she emphasized the most important element was taking action versus not taking action in response to her body’s sexual signals and sensations, or in other words her positive level of sexual receptivity. She says,

There wouldn’t be anything to compare. It was just feeling pleasurable sensations when talking about it with friends or watching movies versus acting on those pleasurable sensations. When acting on it and experiencing that first female orgasm is when all the thoughts of what this meant, and all that came. But, before that I didn’t know. So, I guess one day I decided to find out.

Coping. Some of the women in this connection category were coping in some way through having solo masturbation sex. For example, coping with not having a sexual partner, but still wanting to have sex and sexually explore, discover, learn, or experiment. Or, coping by being uncomfortable around people they were sexually attracted to and desired. Annabell says, “There was this one boy in middle school that I was really strongly attracted to. It was tunnel vision, and that was it. But, of course nothing ever happened.” She continues, “I think I was just giving that to myself, and fantasizing about that secretly to myself. It was almost like a release, and maybe a way to just deal with the fact I was not really comfortable around boys.” Some of the women were coping with a negative emotional life through sexual pleasure. Sam says, “I had an emotional void, and I was trying to fill it with something. So, there was that period around that point where I filled it with sex and a little bit of alcohol.”

Satisfaction and happiness. Two of the three women exhibited an overall positive level of satisfaction and happiness in the general relationship in which they first experienced FE. Some sources of satisfaction and happiness included various combinations of the following: (a) a positive sense of self that produced positive thoughts and feelings about oneself; (b) positive relationships with family and friends; (c) non-sexual self exploration, learning, discovery, or experimentation; (d) personal aptitudes and interests; (f) positive thoughts and feelings about the state of one’s life, life transitions, and life progress; (g) doing well in work or school; (h) enjoying one’s own company and spending time alone with oneself; and (i) being able to be oneself fully.

In her responses Annabell expressed being overall satisfied and happy in the general relationship in several of these ways. For example, she described being happy and satisfied with her positive relationships with family and friends, and her personal interests. She says, “My friends at that time...we all really clicked...We’ve always remained close. I was very happy with that. I was really into pop culture nineties stuff... I got pleasure from being with my friends and music.” She also says, “My home life, was happy there.” She says further, “I was very happy. I had a great childhood, a great family.” Annabell also described enjoying her own company, and her personal aptitudes. She says, “I did like being alone. I keep talking about my room. As the oldest I had my own. It was just my place.” She continues, “I was very creative and would always imagine and make up things. It always involved my room...I would pretend it was my apartment in New York. I think that’s maybe why I felt really safe going there.” Annabell also expressed being satisfied and happy with being able to be her full self at home. She says, “I was a teenager learning who I was. It took me awhile to learn that, just being comfortable in my own skin and really embracing who I was.” She says further, “At home I was myself. I was able to act silly and be with my family and not have this judgment over me.” She continues, “At home I was always the same. Happy. The base of who I am. And then just revealing that with peer pressure and friends, and learning how to do that a little bit separately.”

In her responses Vicky expressed being overall satisfied and happy in the general relationship in several ways too. For example, Vicky described being satisfied and happy with her non-sexual self exploration, discovery, learning, and experimentation; her

personal interests; having a positive sense of self that produced positive thoughts and feelings about herself; and positive thoughts and feelings about the state of her life, life transitions, and life progress. When asked in general what satisfied her the most and made her the happiest she answers, “The ability to learn..., to start to develop the things that I liked...It was all coming together into adulthood. I seemed...to be making the right adjustments. I was pretty satisfied with the way things were going.” She continues, “Probably the most was looking forward to adulthood. Being able to make more decisions. Making that step to cross that line really appealed to me at that point.” She also says, “I was pretty happy then. I was a senior in high school getting ready to graduate, and go off to the military. Everything seemed to be going pretty well, so I was pretty happy then.”

Being overall satisfied and happy in the general relationship did not mean that the two women did not experience some type of dissatisfaction and unhappiness. Both Annabell and Vicky expressed dissatisfaction and unhappiness stemming from their relationships with others. Both women were asked what satisfied them the least and made them the least happy in their relationship overall. Annabell answers, “That boy. I can recall...when I learned he didn’t like me just feeling so sad. I remember the car ride home from school that day, and just being really crushed. It felt like...the end of the world.” She continues, “I think maybe it did have to do with boys, and maybe just wasn’t this one boy, but in general.” Vicky replies, “My parents were pretty strict, so I didn’t have a lot of leeway... My movement was curtailed a lot ... So, I missed out on some things I thought might have been important to me at that point.” She explains, “Having

to check in...My curfew was earlier than most of my friends...It made it difficult for us to go out and stay together...A lot of times I wasn't allowed to go to parties, and they were."

One of the three women expressed strong dissatisfaction and unhappiness in the general relationship. The main sources of dissatisfaction and unhappiness centered around: (a) not being able to be oneself fully, (b) a negative sense of self that produced negative thoughts and feelings about oneself, and (c) negative relationships with others such as family. Sam expressed dissatisfaction and unhappiness in the general relationship regarding not being able to be her full self, specifically regarding her true gender identity. She says, "At that point of my life I didn't like myself very much,...because I hadn't dealt with any of my gender dysphoria at that point." Sam also expressed strong dissatisfaction and unhappiness in the general relationship due to her negative sense of self then that produced negative thoughts and feelings about herself, which was directly related to her negative relationship with her mother. She says, "I was never satisfied with myself...I had a very difficult relationship with my mother. A lot of the way I saw myself was affected by how I perceived she saw me...I was unsatisfied because she was unsatisfied." Sam also says, "I just never felt like I was good enough for anything. A lot of that came from my mother." She continues, "A constant reinforcement of being told, 'No, that's not good enough'...eventually you believe it. At that point it had been going on for long enough that I just decided that was probably right."

Being overall dissatisfied and unhappy in the general relationship did not mean that Sam did not experience some satisfaction and happiness. For example, Sam described being happy about personal aptitudes and interests. She says, “At the time that was when I first found out I was actually a fairly good musician, and so I had that. That actually made me happy.”

All three women exhibited an overall positive level of satisfaction and happiness in the sexual relationship in which they first experienced FE. As Annabell says, “I was satisfied with it.” Some women experienced an increase in sexual satisfaction and happiness after their first experience of FE. Vicky says, “I was very happy and completely satisfied after that first ejaculation with myself. It made me want to do it more.” The main sources of satisfaction and happiness included the overall experience of physical pleasure, specifically the pleasure of orgasm and the speed, easiness, and accessibility of feeling good through physical pleasure. All three women were asked what satisfied them the most and made them the happiest having solo masturbation sex. To this question Annabell replies, “The orgasm. That’s obviously why I kept doing it.” Vicky answers, “The feeling that I had during the orgasm.” Sam replies, “I was good at it. It could happen all the time. It was really fast.” She also says, “It was just one of those things where any time I could retreat and be by myself....It was the easiest way to feel really good as fast as possible.”

Other sources of satisfaction and happiness included the following: (a) learning sexual likes and dislikes through sexual exploration, (b) gaining understanding about sex through sexual exploration, (c) a positive sexual sense of self that produced positive

thoughts and feelings about oneself, and (d) being able to be oneself fully sexually.

Annabell expressed being satisfied and happy having solo masturbation sex due to the physical pleasure, her sense of self and positive thoughts and feelings of individuality and independence, and learning her sexual likes and dislikes. She says, "I was satisfied. I wanted to keep doing it. It felt pleasurable, so I did keep doing it...It was my own thing, just something I experienced with myself...I learned what made me feel good and what didn't." Vicky expressed being satisfied and happy having solo masturbation sex due to the physical pleasure, and gaining understanding of people's fascination with sexual pleasure. She says, "The rush from it all. The feeling was like, 'Okay. I can understand now why some of the girls were talking about it.' I got it now."

Strong differences existed in satisfaction and happiness between the general and sexual relationship for Sam. Whereas Sam expressed strong dissatisfaction and happiness in the general relationship regarding her negative sense of self and not being able to be herself fully, Sam expressed being satisfied and happy having solo masturbation sex due to a positive sense of self, and being able to be herself fully regarding her sexual orientation. In her words, "It was easy for me to be totally honest about my sexuality. I never liked boys. I mean I tried. I never liked them so that was fine. I dealt with that."

Being overall satisfied and happy in the sexual relationship did not mean that the women did not experience some type of dissatisfaction and unhappiness. Some sources of dissatisfaction and unhappiness in the sexual relationship included the following: (a) the short-lived nature or duration of physical pleasure; (b) the effort involved to produce

physical pleasure; (c) the messiness and cleanup of FE, and the effects on maintaining privacy and on giving time and opportunity for negative thoughts and feelings of guilt and shame to arise from negative sexual beliefs; and (d) not being in a relationship or having a sexual partner.

Sam expressed the short-lived nature or duration of physical pleasure was something that made her dissatisfied and unhappy with solo masturbation sex. She says, “There was just never enough. It was satisfying for some time afterwards. But, just always wanting more. It’s like anything else that feels really good. You just want more all the time. Plus, I was fifteen and very hormonal.” Vicky also expressed that the short-lived nature or duration of physical pleasure was something that made her dissatisfied and unhappy with solo masturbation sex, as well as the effort involved to produce physical pleasure. She says, “It seemed like it was over too quick. The feeling didn’t last long. There was a lot of work to get up to it. You got there, got the feeling, but it just didn’t last long enough.” Annabell expressed that the messiness and cleanup of female ejaculation was something that made her dissatisfied and unhappy, because it made maintaining privacy more of a challenge, and it gave more time and opportunity for negative thoughts and feelings of guilt and shame to arise from negative sexual beliefs. She says, “The female ejaculation part. It was hard to keep secret when there were physical things I had to do, hide, and wash. Even your inner things are so wet you have to go to the bathroom and clean up.” She says further, “In a way it’s a longer reminder during the...cleanup process of, ‘This is wrong. Why am I doing this?’ Feelings of, ‘Should this be happening? Is this right?’ At a young age not knowing what all that

was.” She continues, “It was more of a burden and a process, but I would still almost like an addiction put myself through it.” Annabell also expressed that not being in a relationship or having a sexual partner was something that made her dissatisfied and unhappy. She says, “My friends were experiencing their first kiss and doing things...I really wasn’t except for this secret masturbation thing I had going on... I can recall being sad about not having anyone for myself...I just couldn’t relate.”

Sexual stimulation. All three women in this connection category positively described their experience of sexual stimulation. None of the women in this connection category negatively described the sexual stimulation they experienced during solo masturbation sex as bad, insufficient, un-pleasurable, un-enjoyable, or unsatisfying. Some of the women who had previous sexual relationships or encounters described experiencing better sexual stimulation or orgasm having solo masturbation sex overall, and during their first experience of FE.

Vicky described how time, effort, and her mindset during her second solo masturbation experience in which she first ejaculated was better compared to her first solo masturbation experience in which she did not ejaculate. She says, “I put a little more effort into it, a lot more time.” She continues, “Probably about two minutes the first time. It was just like, ‘...Nothing is to this.’ But, the second time... maybe ten minutes or so. Just laying with a free mind. Just completely touching my entire body. Just experiencing that.” Vicky also says, “The first time it was digital stimulation of the clitoris. I was rubbing there for a couple moments. Nothing happened, and that was just it.” She continues, “This time I was exploring my entire body. My breasts, my thighs. My mind

was in a sexual place. And so I'm like, 'The girlfriends said there's this feeling, and I want to experience this feeling.'"

Annabell expressed that an important form of sexual stimulation for her during solo masturbation sex was the accompanying fantasy. She describes her fantasy life and says, "It was always a story in my head that I created. It was never just sex. It was someone I was dating. We lived in this New York apartment. Wanting to feel like I was in a relationship." She continues, "It was this fantasy of coming home from work, we go to bed, we start a movie, and we start touching and kissing."

Of the three women in this connection category, Sam emphasized sexual stimulation the most, and being the most important element and difference in the sexual relationship in which she first experienced FE. For Sam, being better at sexually stimulating herself during solo masturbation sex than her previous girlfriend was at giving sexual stimulation, and the positive impact of better sexual stimulation on her experience of orgasm was one of the main differences in the relationship in which she first experienced FE compared to previous sexual relationships in which she did not experience FE. She says,

It was more arousing to have sex with her, but I was better at masturbation than she was at sex with me. There's a different sort of thrill with somebody else than just with myself, but I was in a technical sense more competent than she was. So, I could usually have one orgasm with her. I could have pretty much as many as I wanted with myself. I was faster at it with myself than she was probably just

because you have to give another person directions. They don't know what it feels like. And so I have an innate advantage with myself.

Sexual desire. All three women expressed having a positive level of sexual desire. None of the women in this connection category spoke of having a lower level, or absence of sexual desire in the relationship in which they first experienced FE. All the women were asked how often they wanted to have solo masturbation sex in their relationship. To this question Sam replies, "All the time." Annabell answers, "Quite often." Vicky indicated her sexual desire increased after her first experience of FE as she replies, "After that I...wanted it quite a bit."

The women elaborated on the frequency in which they had solo masturbation sex in specific terms. Annabell says, "I would do it three to five times a week." She continues, "It was a before bed thing. It would help me go to bed. Sometimes I'd have this elaborate fantasy. Sometimes I did it just so I could go to bed, because it became so normal." Sam says, "I would say it would occur to me between ten to fifteen times a day. I would only actually do it once or twice a day." Some of the women elaborated on the increase in the frequency in which they had solo masturbation sex after their first experience of FE in specific terms. Vicky says, "It increased to maybe two or three times a week up from the one."

Of the three women in this connection category, Sam emphasized biological changes the most, and being one of the most important elements in the sexual relationship in which she first experienced FE. For Sam, her intense biological transition from childhood into adolescence significantly impacted her sexual desire and frequency, and

was one of the most important elements in the relationship in which she first experienced FE. She says,

It was this weird thing where you go from, and for me it was really almost literally overnight, knowing intellectually what sex is and being like, “Huh, I don’t know why I’d ever actually want that” to suddenly having all these brain chemicals going berserk, and knowing that I wanted it all the time. It was really almost overnight. It was not a gradual process for me at all. I can even remember the time of year that it happened. It was really weird, because I remember distinctly having the thought of, “Wow, I don’t know, maybe I’ll just never have sex. I just don’t even know why that would be fun. I know why it would be fun, but it’s not interesting enough for me to want to try” to “Yes! Now!”

Sexual arousal. All three women expressed having a positive level of sexual arousal. None of the women in this connection category spoke of having a low level or absence of sexual arousal in their solo masturbation relationship in which they first experienced FE. All the women were asked how sexually aroused they were in the relationship. To this question Annabell answers, “At that time pretty aroused.” Sam replies, “six out of 10” and that “it would go up to an eight.” Vicky indicated that her level of sexual arousal increased after her first experience of FE as she answers, “After the first orgasm, very aroused.”

Annabell described her sexual arousal in general terms. She says, “I think it was pretty much every time I was aroused. Just felt good. Physically I felt that kind of pulsating and swelling situation, and to release that.” She also says, “Depended on the

day, what fantasy I was thinking, maybe if there was a new crush I had in my life it was a little more arousing, because I had someone to think about.” Sam described her sexual arousal in specific terms by rating it on a scale. She says, “We’re going to call the background noise as being probably about a six out of 10 at that point in my life where just all the time, any time.” She continues, “If somebody just walked up to me and was like, ‘Hey, lets hook up right now,’ I would say, ‘Okay.’” She says further, “So that was the background rate, the background level. And so the times of day where I knew I would have an opportunity to escape I would say it would go up to an eight.” Vicky described her sexual arousal increasing after her first experience of FE, and that her first experience of FE had a positive impact on her level of sexual arousal. She says, “It seemed like the arousal became easier after the ejaculation and orgasm. It didn’t take a whole lot...But, it was afterwards.”

Sexual receptivity. All three women exhibited an overall positive level of sexual receptivity in the relationship in which they first experienced FE. All three women were asked how open they were towards having sex in the relationship. To this question Sam answers, “Very.” Vicky replies, “I was pretty open with myself about doing it.” Annabell answers, “open with it” and “pretty open with it.” Aspects affecting openness towards having sex included the following: (a) privacy; (b) positive sexual beliefs; and (c) an absence of negative thoughts and feelings such as guilt, shame, or fear stemming from negative sexual beliefs.

Sam described how her openness towards having solo masturbation sex centered around having privacy. She says, “If I knew I could be alone, and that nobody would

come looking for me, or come bother me I would probably try...I was willing to do it any time where I knew I would not be disturbed.” Vicky described how her openness towards having solo masturbation sex centered around having positive sexual beliefs, and the absence of negative thoughts and feeling of guilt and shame stemming from negative sexual beliefs. She says, “Just learning about my body, about me. I was pretty interested in knowing the different feelings I could have.” She continues, “No negative feelings. I didn’t think I was doing anything wrong. It was okay to want to do that. A lot of time there’s a stigma on sex, masturbation, any of that.” Annabell described how her openness towards having solo masturbation sex centered around maintaining her privacy, which helped her to buffer against negative thoughts and feelings of guilt, shame, and fear stemming from negative sexual beliefs. She says, “Open with it when I had the secret part down to a science. The clean-up. Where I was going to hide the tools I used. Because, at first it was like, ‘This is wrong. If I ever got caught.’” She continues, “I don’t know what I thought would happen to me, but it just felt like I was going to be punished in some way. When I got the art of it down, I enjoyed it.”

All three women repeatedly demonstrated and described throughout their responses having a positive level of sexual exploration, discovery, learning, or experimentation. Sam described the context in which she first experienced FE during solo masturbation sex. She says, “Just all by myself. More exploratory. I just wanted to see what everything was like, and then that was pretty much it...It was interesting. It was new.” Sam also shares, “When I was young my mother didn’t want to talk to me about sex at all, and so she took me to the library. She got me a little picture book.” She

continues “From that point I was like, ‘Oh. Okay.’ And then because I’m so naturally curious I would just very carefully research everything about that.” Vicky says, “I was really learning me, learning about me and me body, and the different things that can happen with the different things that you tried. So, definitely a lot of experimentation at that point.” Annabell says, “Just by myself. Just exploring the way different sensations felt. At first it really wasn’t pleasurable. It was just learning. Then it became pleasurable by accident...Maybe just hit the right spot. Then it was a whole different...feeling.” She continues, “But, at first it was definitely just exploring, ‘Why did I feel this way when I saw sex scenes in movies? And why did I feel it in this area?’ Then the pleasure came by accident.” Annabell also says, “My Mom explained around the time of my period, the biological aspects of sex, but the word pleasure was never used. I would get sensations when I would watch movies, or see scenes, and I was curious.” Additionally, Annabell described the presence of very specific sexual experimentation by using objects for sexual stimulation. She says, “God I’ve never told anybody this. I had a hairbrush and I used it like a dildo. That also took some time, because I was like, ‘This is really wrong.’ But, it just felt good.” She continues, “I wanted the g-spot stimulation all the time. I wasn’t getting it anymore with my fingers. I don’t...know why I first...thought to use that. That became a part of the hiding and cleaning up process...this tool.”

Some of the women demonstrated and described their positive level of sexual receptivity by whether or not they would accept sexual overtures from others. Annabell says, “If at that point I had the opportunity to have a sexual partner I would have. So, I

was pretty open with it.” She continues, “I was comfortable and enjoyed what my body did during it...I was open to it. More open than I thought I should have been.”

Comfort. Two of the three women expressed feeling at ease and comfortable overall in their general relationship in which they first experienced FE. Sources of feeling at ease and comfortable included the following: (a) privacy; (b) a positive sense of self that produced positive thoughts and feelings about oneself; (c) non-sexual self-exploration, discovery, learning, and experimentation; and (d) being able to be oneself fully.

Vicky expressed feeling overall at ease and comfortable in the general relationship due to a positive sense of self, and non-sexual self-learning. She says, “At that point I was pretty comfortable with myself. Like I said at that point I was definitely learning about me, and the things that I liked. So, I felt pretty good.” She explains, “Okay, just say my identity on who I was. The beginning of my teen years I was more of a follower. Now, I was stepping up to be a leader. I was setting the trend.” She continues, “I was becoming very independent at that point. I didn’t need somebody else to go along with me. I could just do it on my own.” Annabell expressed feeling overall at ease and comfortable in the general relationship being able to be herself fully in private. She says, “Privately very, and with the group a little more restrained. Would be feeling silly and not wanting to reveal all the things that did make me feel happy privately.” She explains, “Not being my full self for fear of maybe being made fun of, or it wasn’t cool to kind of play the way I was playing, where I’m pretending this it’s actually happening for some girls.”

One of the three women expressed strong unease and discomfort in the general relationship. Sam described being uneasy and uncomfortable in the general relationship due to her negative general sense of self that at the time produced negative thoughts and feelings about herself. When asked in general how at ease and comfortable she felt in the relationship she replies, "Not very much. I was just pretty unhappy and unsettled at that point. Just about my sense of self."

All three women expressed feeling at ease and comfortable overall in the sexual relationship in which they first experienced FE. They were all asked how at ease and comfortable they felt having sex. To this question Sam answers, "Very, very at ease." Vicky replies, "I was pretty comfortable with it." Annabell answers, "I was at ease with it." Sources of comfort centered around the following: (a) privacy, (b) a positive sexual sense of self that produced positive thoughts and feelings about oneself, (c) positive sexual beliefs, and (d) an absence of negative thoughts and feelings of guilt and shame stemming from negative sexual beliefs.

Strong differences existed in comfort between the general and sexual relationship for one woman. Whereas Sam expressed being uneasy and uncomfortable in the general relationship due to her negative sense of self, Sam expressed being at ease and comfortable in the sexual relationship due to maintaining her privacy having solo masturbation sex. When asking Sam how at ease and comfortable she felt having sex she replies, "Very, very at ease. It was fine as long as nobody would come and interrupt me." Vicky also expressed feeling at ease and comfortable in the sexual relationship due to having privacy, a positive sexual sense of self, positive sexual beliefs, and an absence of

negative thoughts and feelings such as guilt and shame from holding negative sexual beliefs. She says, “It was just with me so my level of comfortability was definitely there, because I didn’t have to share with anybody else.” She continues, “That’s why I said the first time it was by myself. After the first time, and I knew kind of what to expect it was okay to share that with my boyfriend. But, with myself I was very comfortable.” Vicky explained what made her feel at ease and comfortable having solo masturbation sex. She says, “To know that that’s a part of human nature.” She continues, “To know that by myself there could not be anything wrong. I was comfortable with me, and what I was doing. That it was okay. I wasn’t being a bad girl, because there was no guy there.” She says further, “And it’s okay to explore your body...Just, try it out first by yourself and see before you maybe open yourself up to what happens with another individual.”

Annabell expressed feeling overall at ease and comfortable in the sexual relationship due to having privacy, which helped buffer against negative thoughts and feelings of guilt, shame, and fear stemming from negative sexual beliefs. She says, “I was at ease with it as long as no one knew. I looked forward to it. It became my thing that I did.” She continues, “It wasn’t like I was totally uneasy, because I wouldn’t have kept doing it. I think there was just the slight fear of being caught.”

Of the three women in this connection category, Sam and Vicky emphasized being comfortable the most, and being one of the most important elements and differences in the sexual relationship in which they first experienced FE, or during subsequent sexual relationships in which they did ejaculate. For Sam, as she has become

more comfortable with who she is as a person regarding her true gender identity, the ease and frequency in which she ejaculates has increased. She says,

I have to say that as I'm gradually settling into this really odd gender identity problem, it's not even really a problem it's just a part of me, the more I am comfortable with thinking of myself as not a girl the easier it is to have female ejaculation, which I think is interesting. It's odd. But, it's interesting. It makes some sense...I'd figured out that a lot of my discomfort with myself was a gender dysphoria problem. And then the more I got used to thinking of myself in the masculine especially during sex, during masturbation, and with other people it was more frequent that there was ejaculation.

Vicky identified comfort as one of the most important elements and differences in the sexual relationship in which she first experienced FE when she compared and contrasted having solo masturbation sex to previous sexual relationships and encounters. For Vicky, being uncomfortable during previous sexual relationships centered around the following: (a) sexual decision-making and deciding to have sex with intentions like pleasing her partner, and because her partner wanted to; (b) being sexually inexperienced; (c) the newness of a sexual relationship; and (d) her body. She says,

I had sexual intercourse with my boyfriend before the first ejaculation. It was okay. Was not on a regular basis at all. It truly was like every blue moon. Not that I didn't like it. I didn't have the right kind of feelings. I wasn't comfortable at that point. Probably just going through the motions, because that's what he wanted to happen. That's before the ejaculation...There was not a level of

comfortability before the first ejaculation. Probably the whole awkwardness of not having on any clothes at all. Not really being experienced. Not knowing what to do. It was just really, I guess, the new part of a sexual relationship.

For Vicky, during previous sexual relationships and encounters in which she did not experience FE, being uncomfortable and deciding to have sex with intentions like because her partner wanted to, and to get it over with negatively impacted her sexual receptivity and experience of sexual stimulation. Below she describes being uncomfortable having intercourse with her boyfriend before she experienced her first FE during solo masturbation sex. Specifically, she describes being uncomfortable in terms of her experience of sexual receptivity, sexual stimulation, and sexual-decision making. She says,

I wasn't comfortable so I wasn't allowing a lot of experimentation with us to happen. Before it was just like, "Okay, well, I'm just going to go ahead and do this." And so it was straight to the point. There wasn't a lot of foreplay, or stimulation in there. Bare minimum. Just to get it in, and get it done and over with before the ejaculation...I didn't really want much of anything. Let's just get this done and over with.

For Vicky, having solo masturbation sex, and the sexual exploration and learning about her body that took place during it, helped increase her sexual comfort level. Here she describes the ways her sexual comfort level increased by what she was doing during the solo masturbation sex in which she first experienced FE. She says,

Exploration with my whole body. Just figuring out the different ways to touch myself, and the feelings that it would produce. Just being comfortable with myself, my body, even just laying there with no clothes on in the bed, touching my breasts, or rubbing my thighs, or any of that. Just truly becoming comfortable with that.

For Vicky, having previous experience with solo masturbation increased her comfort level during the solo masturbation sex in which she first experienced FE. Below she explains the origin of her idea to have solo masturbation sex, and the differences between the first and second time she masturbated, such as being more comfortable, that allowed her to experience FE for the first time. She explains,

Quite a few of the girls were already sexually active, and just talking about some of the different things. Some of the girls were saying that they had tried masturbation with their boyfriends watching. While I at that point didn't have enough nerve to do it with my boyfriend watching I was like, "I'm going to try this by myself again." ...I had tried masturbation one other time before, and it wasn't really that big a deal. I tried to give it some effort to see if I could produce what some of the other girls said that they had produced. My mindset was a little different. I was a little calmer when I started. I was a lot more comfortable on the second go around, the fact that it was the second time that I was trying this. I definitely enjoyed the feeling. I was like, "Wow, I think this was successful."

For Vicky, her first experience of FE during solo masturbation sex positively impacted her comfort level in her sexual relationship with her boyfriend where it

increased afterward. When she had sex with her boyfriend after her first experience of FE she was more comfortable. As a result of her comfort level increasing, when she had sex with her boyfriend her experience of sexual stimulation improved, sexual receptivity increased, being sexually assertive and communicating increased, and sexual decision-making positively changed where she was having sex when she was ready. Here she describes having intercourse with her boyfriend after her first experience of FE, and how it was dramatically different for her. She explains,

After the ejaculation there was much more stimulation. I was a little more comfortable. I wanted to figure out what kind of feeling I could experience with him trying different things. I was ready to make that big leap. So, it definitely was different before the ejaculation with him. Like I said my level of comfortability had changed at that point, and I was way more willing to allow for things to happen...Afterwards it's like, "Let me show you what to do." All of the sudden this completely changed me. He was like, "What happened?" I did a three hundred and sixty degree turn around. So, after the ejaculation I'm like, "Let's try this, and this is what you do, because this is what I did." Basically, that's what happened from there. I was much more willing to allow him to touch my body parts now to see what types of feelings I could get.

Safety. Two of the three women expressed feeling safe overall in the general relationship in which they first experienced FE. Sources of feeling safe included the following: (a) an absence of intentional self-harm or hurt, (b) an absence of negative

thoughts and feelings such as fear, (c) a positive general sense of self that produced positive thoughts and feelings about oneself, or (d) feeling comfortable.

Vicky described feeling no potential for harm or hurt in the general relationship due to a positive sense of self, feeling comfortable, and an absence of intentional self-harm or hurt. When asked what potential she felt of being harmed or hurt in any way in the relationship in general she answers, “I didn’t. I didn’t feel like I would be harmed in the relationship at all with myself at that point.” She continues, “It was starting to develop. I really liked who I was. I wasn’t doing anything I thought at that point would be destructive to myself. It all was positive. I was pretty comfortable. I didn’t think anything harmful would happen.” Annabell also described feeling no potential for harm or hurt in the general relationship, and not fearing being harmed or hurt. She says, “None. I had no fear of harming myself or anything. The initial ejaculation was kind of frightening. Maybe for a split second I thought maybe something was wrong with me. I thought this much just shouldn’t be happening.” She continues, “But, that was a quick thing, because I realized that it was pleasurable. Didn’t care at that point. So, I didn’t really fear, or have any fear towards myself.”

One of the three women expressed the potential for and experiencing harm and hurt in the general relationship. Sam described the potential for and experiencing physical, mental, and emotional harm and hurt in the general relationship and intentionally inflicting physical self-harm and hurt. She says, “That period did coincide with being somewhat suicidal. There was just too much pressure, and I just didn’t want to be around anymore.” She continues, “I was also cutting myself. Just feeling things

was enough to make everything feel better. Pain also worked. Pleasure and pain worked as coping mechanisms...A lot of harm could come from my relationship with myself at that point.”

All three women expressed feeling safe overall in the sexual relationship in which they first experienced FE. Sources of feeling safe centered around the following: (a) having privacy; (b) a positive sexual sense of self that produced positive thoughts and feelings about oneself; (c) positive sexual beliefs; (d) an absence of negative thoughts and feelings such as embarrassment, or guilt and shame stemming from negative sexual beliefs; or (e) feeling comfortable.

Strong differences existed in safety between the general and sexual relationship for Sam. Whereas Sam expressed a potential for and experiencing harm or hurt in the general relationship, Sam expressed no potential for and not experiencing harm or hurt in the sexual relationship due to positive sexual beliefs, and an absence of negative thoughts and feelings of guilt and shame. When asked what potential she felt of being harmed or hurt in any way having sex in the relationship she answers, “I didn’t feel that there was any harm at all. My logic was if all the boys are encouraged to do this all the time clearly it’s totally fine for me to feel this way too.” Vicky also described feeling no potential for harm or hurt in the sexual relationship due to positive sexual beliefs, an absence of negative thoughts and feelings such as guilt and shame, feeling comfortable, and having privacy. She says, “I did not feel that there was any potential for harm in this relationship. Again, because it was just me and I was comfortable with it just being me in that relationship. And I wasn’t doing anything wrong.” Annabell described feeling no

potential for harm or hurt physically in the sexual relationship, and feeling overall safe emotionally due to maintaining her privacy, which buffered against experiencing negative thoughts and feelings such as embarrassment. When asked what potential she felt of being harmed or hurt in any way having sex in the relationship she replies, “None. Maybe just embarrassed if I was caught. I didn’t even tell my friends. Just harmed emotionally, but never physically or anything.”

Written Questionnaires

Three questionnaires were used in this study that collected data on participants personal backgrounds, sexual histories, and female ejaculation histories. The personal background history questionnaire was used to collect data for sample purposes, and the results of the personal background history questionnaire were previously provided in the sample section located within the methodology chapter. The sexual history questionnaire collected data on each participant in the following areas: (a) the types of sexual partners in the participant’s lifetime at the age of first ejaculation, (b) their primary or preferred type of sexual partner at the age of first ejaculation, (c) average frequency of masturbation at the age of first ejaculation, (d) average frequency of watching pornography at the age of first ejaculation, (e) age of first intercourse, (f) total number of intercourse partners in the participant’s lifetime at the age of first ejaculation, (g) age of giving first oral sex, (h) age of receiving first oral sex, (i) total number of oral sex partners both giving and receiving in the participant’s lifetime at the age of first ejaculation, (j) sexual education, and (k) a description of the participant’s sexual attitudes at the age of first ejaculation. The female ejaculation questionnaire collected data on

each participant in the following areas: (a) their frequency of experiencing ejaculation, (b) age of their first ejaculation, (c) feeling of ejaculating their first time, (d) a description of their first ejaculate fluid, (e) the amount of their first ejaculate fluid, (f) the timing of when their first ejaculation occurred during sexual arousal, (g) the types of sexual stimulation that led to ejaculating their first time, (h) whether or not multiple orgasms occurred with their first ejaculation, (i) whether or not multiple ejaculations occurred with their first ejaculation, (j) what menstrual phase the participant was in at the timing of the first ejaculation, (k) the participant's personal reaction to their first ejaculation, (l) the reaction of the participant's sexual partner to their first ejaculation, and (m) comparing and contrasting their first experience of ejaculating to subsequent experiences of ejaculating. A summary of the results of the sexual history and female ejaculation history questionnaires are given here. The results of each item on the sexual history and female ejaculation history questionnaires are also individually reported in depth.

Sexual history questionnaire. The results of the women's sexual history questionnaires can be summarized as follows: (a) the majority had strictly male sexual partners at the age they first experienced female ejaculation; (b) the majority preferred male sexual partners at the age they first experienced female ejaculation; (c) the majority masturbated weekly on average at the age they first experienced female ejaculation; (d) the majority watched pornography yearly on average at the age they first experienced female ejaculation; (e) their ages of first intercourse ranged from 13 to 23 years old; (f) the total number of intercourse partners they had in their lifetime at the age they first experienced female ejaculation ranged from zero to "more than 10, but less than 20" with

the majority having between one and four total intercourse partners in their lifetime at the age they first experienced FE; (g) their ages for the first time they gave oral sex ranged from 15 to 28 years old with the majority giving oral sex for the first time in their late teens at ages 18 and 19; (h) their ages for the first time they received oral sex ranged from 15 to 30 years old; (i) the total number of giving and receiving oral sex partners they had in their lifetime at the age they first experienced FE ranged from zero to “more than 10 but less than 20” with the majority having between one and five oral sex partners; (j) the majority learned about sex from multiple sources, specifically with the majority learning about sex through talking with friends and acquaintances, media sources, and real life personal experiences; (k) the majority described their sexual attitudes at the age they first experienced female ejaculation in a way that fit the definition of sexual receptivity used in this study such as describing their sexual attitudes as “relaxed” or “open” (See p. 110 for definition of sexual receptivity); (l) when describing their sexual attitudes the majority also expressed having positive thoughts and feelings about sex at the age they first experienced female ejaculation; and (m) when describing their sexual attitudes the majority also expressed experiencing enjoyment, pleasure, or gratification from having sex at the age they first experienced female ejaculation.

Types of sexual partners. Six of the 10 women had strictly male sexual partners in their lifetime at the age they first experienced FE. Two women had strictly female sexual partners. One woman had both male and female sexual partners. One woman had no sexual partners except herself. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively had male, male and

female, male, and male sexual partners in their lifetime respectively at the age they first experienced FE. (See Table B2 for the sexual history of the women.)

Primary or preferred type of sexual partner. Seven of the 10 women preferred male sexual partners at the age they first experienced FE. Two women preferred female sexual partners. One preferred male sexual partners, but had an “emotional, sensual attraction to a woman at that age.” Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively all preferred male sexual partners at the age they first experienced FE. (See Table B2 for the sexual history of the women.)

Masturbation. Six of the 10 women masturbated weekly on average at the age they first experienced FE. One woman masturbated daily on average. One woman masturbated yearly on average. One woman reported masturbating just once in her life, but experienced her first FE the second time she masturbated. One woman reported never masturbating in her life at all. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively masturbated on average weekly, never, weekly, and yearly respectively. One of these women, Brenda, represents the lowest average of masturbation at the age of onset of FE, and lowest lifetime average of masturbation. (See Table B2 for the sexual history of the women.)

Pornography. Six of the 10 women watched pornography yearly on average at the age they first experienced FE. Three women watched pornography monthly on average with one of these women specifying “reading” pornography daily on average. One woman did not watch pornography at all. Rose, Brenda, Roxanne, and Evelyn who

had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively watched pornography on average not at all, monthly, monthly, and yearly respectively. (See Table B2 for the sexual history of the women.)

Age of first intercourse. The 10 women had intercourse for the first time between 13 and 23 years old. Two women had intercourse for the first time in their early teens at 13 years old. Two women had intercourse for the first time in their mid teens at ages 15 and 16. Four women had intercourse for the first time in their late teens with one at 18 years old, and three at age 19. Two women had intercourse for the first time in their early twenties at ages 20 and 23. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively experienced their first intercourse at ages 20, 13, 23, and 19 years old respectively. Two of these women, Rose and Roxanne, represent the latest ages of onset of intercourse. (See Table B2 for the sexual history of the women.)

Number of intercourse partners. The total number of intercourse partners the 10 women had in their lifetime at the age they first experienced FE ranged from zero to “more than 10 but less than 20.” Seven women had between one and four total intercourse partners in their lifetime at the age they first experienced FE. Of these seven women three of the women had one intercourse partner, one had two intercourse partners, one had three intercourse partners, and two had four intercourse partners. Of the remaining three women, two women had zero intercourse partners while one woman had between 10 and 20 intercourse partners. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively had three,

between 10 and 20, four, and four intercourse partners respectively in their lifetime at the age they first experienced FE. (See Table B2 for the sexual history of the women.)

Age of giving first oral sex. The age range for the first time the 10 women gave oral sex spanned from 15 to 28 years old. Two women gave oral sex for the first time in their mid teens at age 15. Five women gave oral sex for the first time in their late teens with four at age 18, and one at age 19. Two women gave oral sex for the first time in their early twenties with one at age 21 and one at age 22. One woman gave oral sex for the first time in her late twenties at age 28. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30 and 46 years old respectively gave oral sex for the first time at 18, 15, 28, and 22 years old respectively. Two of these women, Roxanne and Evelyn, represent the two latest ages of onset of giving oral sex. (See Table B2 for the sexual history of the women.)

Age of receiving first oral sex. The age range for the first time the 10 women received oral sex spanned from 15 to 30 years old. Three women received oral sex for the first time in their mid teens with two at age 15, and one at age 16. Three women received oral sex for the first time in their late teens with one at age 17, and two at age 19. Three women received oral sex for the first time in their early twenties with two at age 20, and one at age 21. One woman received oral sex for the first time at age 30. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 years old respectively received oral sex for the first time at ages 20, 15, 21, and 30 respectively. Three of these women represent three of the latest ages of onset of

receiving oral sex including Rose, Roxanne, and Evelyn. (See Table B2 for the sexual history of the women.)

Number of oral sex partners giving and receiving. The total number of giving and receiving oral sex partners the 10 women had in their lifetime at the age they first experienced FE ranged from zero to “more than 10 but less than 20.” Eight women had between one and five oral sex partners. Of the eight women three women had one oral sex partner, one woman had two oral sex partners, one woman had three oral sex partners, two women had four oral sex partners, and one woman had five oral sex partners. One woman had zero oral sex partners. One woman had between 10 and 20 oral sex partners. Rose, Brenda, Roxanne, and Evelyn who had the later ages of onset of FE at 25, 30, 30, and 46 respectively had four, between 10 and 20, three, and four giving and receiving oral sex partners respectively in their lifetime at the age they first experienced FE. (See Table B2 for the sexual history of the women.)

Sexual education. When the 10 women were asked where they learned about sex, five categories of sexual learning emerged from their responses including the following: (a) talking with friends and acquaintances; (b) media sources such as magazines, books, the internet, TV, movies, and pornography; (c) real life personal experiences with others such as a boyfriend, girlfriend, lover, or with oneself exploring one’s own body; (d) health and sex education classes in school; and (e) talking with parents. Six of the women referenced multiple sources that contributed to them learning about sex while four of the women referenced only one category. The majority of women learned about sex talking with friends and acquaintances and through media sources, then

from real life personal experiences, and finally from health and sex education classes in school and talking with parents. Six women learned about sex talking with friends and acquaintances. Six women learned about sex from media sources. Five women learned about sex from real life personal experiences. Three women learned about sex from health or sex education classes and school. Three women also learned about sex from talking with parents. (See Table B2 for the sexual history of the women.)

Sexual attitudes. Several themes arose when the 10 women wrote about their sexual attitudes they had at the age they first experienced FE. Two women described their sexual attitudes as “relaxed,” and that time and age had positively impacted their sexual attitudes. Dawn says, “For a long time I did not think I would have sex before I got married. Then I started dating and messing around. I thought I would do everything but vaginal intercourse. And I did.” She continues, “Then I really fell in love with a man, thought he was the one, and we went all the way... I have certainly relaxed my attitudes with time and age. I no longer...see things so black and white.” One of the two women who described her sexual attitudes as more “relaxed” with time and with age, also expressed being able to enjoy sex more. Rose says, “My attitude towards sex was a lot more relaxed than when I was younger. I trusted who I was with and was able to enjoy it more thoroughly.”

The descriptions five of the women gave of their sexual attitudes at the age they first experienced FE fit the definition of sexual receptivity used in this study. Sexual receptivity is defined as “A state of openness towards sex be it towards oneself sexually, one’s partner sexually, or the sexual situation evidenced by things like sexual exploration

and experimentation, and accepting and initiating sexual overtures.” Sam described her sexual attitudes at the age she first experienced FE in terms of sexuality receptivity. She says, “Beyond being a raging ball of hormones, I had a very ‘the world is my oyster’ approach to sex...I would try anything once.” Jenna says, “I had no idea what I was doing. I had never masturbated, because I grew up Catholic, and was scared of my Mom finding out. My first girlfriend showed me what to do. I was an eager learner.” Two of these five women explicitly described their sexual attitudes as “open,” and in one case being able to enjoy sex more as a result. Roxanne says, “By the age of 30 I had a pretty open, somewhat liberated attitude about sex... I was open to exploring new things, learning more, and enjoying it more.” Brenda says, “I have and always will be open to sex. But, after my first experience I have become more open and try to seek it out at every encounter I have with my boyfriend”. One of these five women described the impact of her first experience of FE on her receptive sexual attitudes. Vicky says, “After the first ejaculation I was all for receiving oral sex.”

The majority of the women predominately expressed having positive thoughts and feelings about sex at the age they first experienced FE, and experiencing enjoyment, pleasure, or gratification from having sex. Gwen says, “I had an insatiable appetite at the time, so I was very much into gratification through the act of oral sex. It made me feel very powerful and in shape!” Evelyn says, “It’s a gift that we should thank God for. One of life’s pleasures that should not be taken for granted.” Even though the women predominately expressed having positive thoughts and feelings about sex at the age they first experienced FE by conveying they experienced enjoyment, pleasure, or gratification

from it, two women expressed having negative thoughts and feelings related to sex mixed with positive ones. Specifically, two women expressed having negative thoughts and feelings about being sexually inexperienced, or having negative thoughts and feelings such as fear, guilt, and shame. Jenna and Dawn both expressed contending with negative thoughts and feelings along with positive ones when they described their sexual attitudes. However, Dawn exemplifies this when she described her sexual attitudes at the age she first experienced FE. She says, “Ignorant and unknown. Wasn’t sure what was really happening, but I enjoyed the erotic pleasure from it. I also felt scared for enjoying it, because I had a sense that it was ‘wrong’ so I kept it a secret.” (See Table B2 and C3 for the sexual history of the women and their sexual attitudes at age of onset of FE.)

Female ejaculation history questionnaire. The results of the female ejaculation history questionnaires can be summarized as follows: (a) the majority of the women experience female ejaculation “every time,” “almost every time’,” or “often” when they have sex, and know what factors affect their frequency of ejaculating; (b) the majority described experiencing positive feelings of physical pleasure when they ejaculated their first time, and associated the feeling of ejaculating their first time with urination; (c) collectively they described their first female ejaculatory fluid through various means such as sight, touch, smell, taste, speed, and compared and contrasted it to other substances; (d) the majority released an amount of ejaculatory fluid their first time that left a wet spot on a bath towel the size of a compact disc or larger; (e) the majority experienced their first female ejaculation during orgasm; (f) the majority experienced their first female ejaculation from either combined g-spot and clitoral stimulation, or clitoral stimulation

alone; (g) half of the women had multiple orgasms the first time they experienced female ejaculation; (h) the majority did not experience multiple ejaculations the first time they ejaculated; (i) none of the women were menstruating the first time they experienced female ejaculation; (j) the majority reacted to their first experience of female ejaculation by thinking that the fluid they gushed or released was urine or was possibly urine, and had a wide range of emotional responses spanning from adverse to negative to neutral to positive to mixed; (k) they described their sexual partners reacting in various different ways to their first experience of female ejaculation such as positively, being unknowledgeable of female ejaculation and mistaking it for urine, and not being aware of what happened and mistaking it for vaginal lubrication; (l) a few women described developing methods of dealing with female ejaculatory fluid after their first experience of female ejaculation such as laying down towels for fluid absorption; (m) identifying as ejaculators, a few women described their unique sexual decisions they make as ejaculators such when to ejaculate, whether or not to ejaculate based on their sexual partner, and the selection of their sexual partners overall; (n) the majority have experienced changes in ejaculating since their first experience of female ejaculation; and (o) a few women described examining their first female ejaculatory fluid and experimenting during subsequent sexual encounters to determine what their first female ejaculatory fluid was, and to rule out urination, such as by emptying their bladders before they had sex.

Frequency of ejaculation. The majority of the women explicitly expressed that they experienced female ejaculation “every time,” “almost every time,” or “often” when

they had sex. Dawn says of how frequently she currently ejaculates, “Every time I have sex with my boyfriend pretty much.”

The women showed they had a distinct sense of what conditions they needed met in order to experience FE, and what influenced their frequency of ejaculating such as their mental state, their sexual partner, sexual frequency, presence of children, type of sex, and sexual stimulation. Five of the women highlighted the significance of the type of sex they had on their frequency of ejaculation. Exemplifying this are Rose, Sam, and Vicky. Rose says of how frequently she currently ejaculates, “Every time my partner gives me oral sex.” Sam says, “75% of all orgasms result in ejaculation. With oral sex it is almost every time.” Vicky says, “I most often experience female ejaculation every time I have sex, whether it is sexual intercourse or foreplay.” One woman stressed the importance of sexual stimulation, specifically combined g-spot and clitoral stimulation on the frequency of her ejaculation. Annabell says, “I have sexual intercourse with my partner about 5 times a week. I experience female ejaculation 4 of 5 times, especially when g-spot and clitoral stimulation are performed together.” Two women emphasized that their sexual partner impacted the frequency of their ejaculation. Evelyn says, “Often depending on my partner”. Jenna says, “Almost every time while masturbating (2-3 times a week), and occasionally with partners. I don’t have a regular sex partner and ejaculation can get pretty messy so I save it for guys/girls I know can handle it.” One woman stressed that her mindset affected the frequency of her ejaculating. Gwen says, “It’s a mind thing—If I am having a holistically pleasurable experience then I am able to often. I’ve learned to operate with the sensations over time.” Another woman

emphasized that sexual frequency and having children impacted her frequency of ejaculation. Roxanne says, “Probably every other time I have sex. Sometimes more depending on sexual frequency. Percentage: About 50%-75% of the time. After the baby more like 50%. More like 75% before the baby with my husband for the past 5 years.” (See Table D4 for current frequency of ejaculating.)

Feeling of ejaculating. When the women described what it felt like to ejaculate the first time all 10 of them described experiencing positive feelings of physical pleasure from their first FE. Rose says, “It felt great.” Jenna says, “Physically it felt amazing like an ultimate release.” Annabell says, “A new and pleasurable sensation.” Brenda and Evelyn both say, “Intense pleasure.” Vicky says, “A wonderful feeling.” Roxanne says, “A really good orgasm.”

Six of the 10 women associated the feeling of first ejaculating with the feeling of urination. The descriptions Sam and Gwen gave of what it felt like to ejaculate the first time exemplify this. Sam says, “A buildup of pressure, almost like needing to urinate, but different, followed by what can only be described as a very satisfying release.” Gwen says, “The only thing I can think of is to compare it to when I was pregnant with my daughter, and my water needing to break. That urge of like I have to pee right now.” She continues, “I did think that I had to pee. But, then again I was not physically able to let him go either to be able to get up and go pee, and stop myself.” She says further, “It was like I had to get this off of me. There was a sense of urgency, and it was like pressure.” (See Table E5 for feeling of first ejaculation.)

Description of fluid. In their responses the 10 women described their first FE fluid through different means such as sight, touch, smell, taste, speed, and by comparing and contrasting it to other substances. Visually, the women described their first FE fluid as “clear,” “colorless,” “like a pool of water,” “clear with white color in certain spots,” “somewhat cloudy, not quite clear,” “a waterfall,” and “there was no blood in it.” Texturally, a couple of the women described their first FE fluid as “non-viscous,” “not thick,” “warm,” “a little slippery,” “a little thicker, a more milk like substance,” “elastic, just really sticky.” Some of the women described the taste and smell of their first FE fluid stating “there wasn’t an odor,” “it had a faint smell, kind of musky,” “it did have a smell to it,” and “it’s a lot like urination, but with a different taste and smell.” One woman described the speed of her first ejaculation. Sam says, “it was quick” and “one short burst.” A few women compared and contrasted their first FE fluid to other substances such as water, milk, urine, or lubrication. They state things like it was “watery,” “it wasn’t real thick, a thin liquid like skim milk,” “it felt like urine, yet upon examination on what had happened it had a milk-like substance to it,” “the consistency of urine,” and “not like vaginal lubrication that comes with arousal.” (See Table F6 for female ejaculation history.)

Fluid amount. To determine the amount of fluid the women ejaculated their first time, the women were asked “how large a wet spot on a fluffy bath towel would be” (Gilliland, 2009, p. 130) after they ejaculated the first time, and to compare this to the size of a “tablespoon,” “soda can,” “compact disc,” or “larger.” The amount of fluid the women ejaculated their first time varied. Two women ejaculated an amount of fluid

between the size of a tablespoon and soda can the first time. One woman ejaculated an amount between the size of a soda can and compact disc the first time. Two women ejaculated an amount of fluid the size of a compact disc the first time. Five women ejaculated an amount of fluid larger than a compact disc the first time. Jenna says, “It was a lot, approximately the size of this paper.” Annabell says, “The size of a football.” Brenda says, “It was real big. Like two compact discs. It soaked the sheets.” Vicky says, “The wet spot on the sheet was big, and my thighs were covered.” Evelyn says, “An old album.” Determining the amount of fluid they ejaculated the first time was challenging for the women as many of them modified the categories of tablespoon, soda can, compact disc, or larger to variations of the categories. Determining the amount of fluid was also challenging as one woman wrote how it was not just on the sheets or towels, but on body parts. Gwen says, it was “trickling down my inner thighs”. A couple of the women indicated that their fluid amount varied depending upon the length of time going without orgasm or fluid intake. Annabell says, “Even though I experience it regularly, the size always varies. But, it is largest when I have not orgasmed for a long period of time.” Evelyn says, “I would not masturbate... because the more I gushed the happier he was.” She continues, “I had to have gallons of fluid at one point. He was right. He would always say the week before, ‘...Make sure you drink a lot of water,’ because the more I gushed the happier he was.” (See Table F6 for female ejaculation history.)

Orgasm. Nine out of the 10 women reported ejaculating during orgasm the first time. Of these eight women, one specified ejaculating at a specific point during orgasm.

Sam says, “During the very beginning of orgasm.” The remaining woman reported being uncertain when during the sexual response cycle she first experienced FE. Dawn states, “I first noticed it after the orgasms”. Dawn also shared that since her first FE, when she ejaculates during sex changes. She continues, “Though, nowadays it’s before, during, and after.”

Two of the women described the orgasm they experienced with their first ejaculation and with ejaculation in general. Evelyn says, “It didn’t feel like much to release the fluid. It was the orgasm that went along with it that was the tremendous thing.” She continues, “It was stronger and more uncontrollable.” Roxanne says, “With an orgasm...with female ejaculation...It feels more like an overall body release. When I release it my orgasm tends to be more like a body orgasm. It just feels like a release all over.” (See Table F6 for female ejaculation history.)

Sexual stimulation. Four of the 10 women reported ejaculating the first time from combined vaginal g-spot and clitoral stimulation, however one of these four women stressed the clitoral stimulation over the vaginal g-spot stimulation. Four women reported that they ejaculated the first time from clitoral stimulation. One woman reported ejaculating solely from vaginal, g-spot stimulation. One woman reported ejaculating for the first time from vaginal g-spot and cervical stimulation. Roxanne says, “I was on top. My boyfriend’s penis stimulated the front of my vagina and my cervix. Penetration varied between deep and shallow.” (See Table F6 for female ejaculation history.)

Multiple orgasms. Five of the 10 women reported having multiple orgasms the first time they ejaculated while five women reported not having multiple orgasms the first

time they ejaculated. Two of the five women who did not report having multiple orgasms the first time they ejaculated explained that after ejaculating they stopped having sex due to the mental, emotional, and physical nature of their first experience of FE, and lack of knowledge of FE. Brenda says, “No just one. I could not handle more. I was confused. I really did not know what was happening.” Annabell says, “No, just one. Was so confused about what happened that I stopped after that.” Additionally, one of the five women who did not report having multiple orgasms the first time she ejaculated explained that over time during subsequent sexual encounters she did have multiple orgasms with FE. Roxanne says, “No. Just one. However, I soon discovered that I could have multiple orgasms and ejaculate.” (See Table F6 for female ejaculation history.)

Multiple ejaculations. Two of the 10 women reported having multiple ejaculations the first time they ejaculated. These two women also reported having multiple orgasms the first time they ejaculated. The remaining eight women reported not having multiple ejaculations the first time they ejaculated. Two of the eight women who reported not having multiple ejaculations the first time they ejaculated explained that they stopped having sex, because of the mental, emotional, and physical nature of their first experience of FE, and lack of knowledge of FE. Brenda says, “No. I was tired and confused.” Roxanne says, “No. Just one, because we both stopped after noticing the pool of fluid on his stomach in his navel.” (See Table F6 for female ejaculation history.)

Menstrual cycle. One of the 10 women reported being “halfway through” her menstrual cycle when she first ejaculated. None of the women reported menstruating at

the time they first experienced FE. Five of the women reported difficulty in remembering where they were in their menstrual cycle when they first ejaculated. (See Table F6 for female ejaculation history.)

Reaction to first female ejaculation. Six of the women reported thinking their first FE was urine, or at least considered the possibility that their first FE was urine. Jenna says, “I honestly thought I’d peed in the bed.” Annabell says, “I thought I had urinated, and changed the sheets in my bed.” Gwen says, “I was seized by an impulse to urinate, or I thought to pee.” Evelyn says, “I told him to never touch that spot again. I thought I peed.” Roxanne says, “I wondered if I had urinated, but I soon realized it wasn’t urine.”

In response to their first experience of FE, some of the women also described having other physiological concerns. They say they had thoughts such as “something’s wrong with me,” “maybe I’m loose down there,” or “he hit something.”

Collectively, the women described feeling a wide range of emotions in response to their first experience of FE. They say they felt “fascinated,” “curious,” “surprised,” “embarrassed,” “overwhelmed,” “fearful,” “confused,” “scared,” “guilt,” and “shame.” (See Table G7 for reaction to first FE.)

Some women described having a more neutral, non-reactive to positive emotional response. Sam says she thought, “Oh. Cool.” She says further, “It was kind of like, ‘Huh, that happened.’ I’m one of those very naturally curious people so I’d researched very heavily on everything at that point. I was slightly surprised, but no more than ‘okay.’ It was interesting.” Vicky says, “I wondered if other women had the same

experience that I was having.” Dawn says, “I was sort of curious and fascinated like, ‘Wow, I am wet, but it’s different from regular vaginal secretions and peeing.’”

Some women described having a more mixed emotional response. Roxanne says, “I was curious to know if I could make it happen again. I was a little embarrassed, but I got over it.” Rose says, “Surprised...I didn’t realize my body was capable of that”. She also says, “Oh my God, I don’t believe I can do that.” She also says, “I was embarrassed”.

Some of the women described having a more negative emotional response. Annabell says she was “scared and not sure what happened.” Evelyn says, “I was embarrassed. I thought that I had urinated.” She continues, “He was a new lover. You’re trying to impress somebody, and all of the sudden you wet yourself. I was like, ‘Oh my God! How embarrassing. I’ll never see this guy again.’” Gwen says, “After the experience, having a wet bed like that and feeling the ejaculation come forth, then there was an experience of shame and guilt, and that was a multi-level emotional experience.”

Of the 10 women, one woman described having a strong adverse reaction to her first experience of FE, which has negatively impacted her sex life years later. She described training her body to hold back ejaculation to such an extent that she no longer ejaculates with the ease she once did with her earlier ejaculations. Jenna says,

I taught myself not to do it. I had to teach myself to be able to orgasm without ejaculating just so we [her girlfriend with whom she first experience FE] could still have lots of sex, and not have to worry about the mess. It was kind of annoying, because for actually a few years I couldn’t do it at all. I got so good at

teaching my body to not let go that much that I just stopped being able to do it. I really wish I wouldn't have done that, because it's one of the only ways that I really feel completely sexually satisfied is when I do it. For me, that's just the ultimate release physically and emotionally. I don't think we really handled it the best way we could have. At the time we were really young, we didn't know any better, and we just made due with what we had.

Jenna says further,

It's one of the things where I usually don't do it with my first few orgasms, but if I'm getting up to four or five then that's when I do. So, in a way that works out well I think for me, because I can have sex, and I can still have an orgasm and feel good. I don't have to completely let go. Its also kind of a way of protecting myself, and maybe this is because I'm not in a relationship.

Jenna further described arriving at a place of embracing female ejaculation over time.

She says,

After the first time it started happening every time, and I had to train myself to not do it just to avoid constant messes. Now I embrace it, and it's the only way I can truly feel sexually satisfied, but I no longer do it with each orgasm.

Reaction of sexual partner to first female ejaculation. The seven women in this study who experienced their first FE with another person described their sexual partner reacting in various ways. Two women reported their sexual partner reacting positively to their first experience of FE. They described their sexual partner expressing positive feelings about giving sexual pleasure, being knowledgeable of FE, and normalizing FE.

Rose says, “He was thrilled.” Evelyn says, “He laughed, and told me to relax, that it was perfectly normal.” One woman reported her sexual partner responding positively, but not necessarily being knowledgeable of FE. Dawn says, “He liked that I was aroused and wet.”

Two women reported that their sexual partner with whom they first experienced FE were unknowledgeable of FE, and mistook it for urine. Roxanne says, “Surprised. He thought I peed. Then he realized the fluid wasn’t urine.” Jenna says her girlfriend said, “That’s not supposed to happen. Did you just pee?” Jenna described the reaction of her sexual partner further, and emphasized that her sexual partner responded negatively in addition to mistaking her first FE for urine. She says, “Somewhat poorly. She’d never seen anything like it, and didn’t like the mess.”

One woman reported her sexual partner being unaware that her first FE was taking place, and mistaking it for vaginal lubrication. Brenda says, “He did not know. He just thought I was real wet.”

One woman reported her sexual partner reacting with shock due to the powerful nature of her first experience of FE. Gwen says, “He was quite shocked, because I locked my legs around him and squeezed my thighs together so tight I would not release him until I came. He had already come.” (See Table H8 for reaction of sexual partner to first FE.)

Preparing for female ejaculation fluid. A few women mentioned they developed methods to deal with their first and subsequent releases of FE fluid. Two women described laying on a towel or t-shirt to absorb their ejaculate fluid. Annabell says, “I

would prepare for fluid by laying on a towel or an old rolled up t-shirt.” She says further, “I would always keep a towel or an old t-shirt under my bed, and try to keep that hidden from my Mom. I would have to have it, because I just figured this is what happens.”

Jenna says, “We got towels, and kept going. Even though it was messy it turned us on.”

(See Table I9 for preparing for FE fluid.)

Sexual decision-making. Some of the women described their sexual decision-making process as ejaculators, and the unique sexual decisions they make. As ejaculators they decide about when to ejaculate, whether or not to ejaculate based on their sexual partner, and the selection of their sexual partners overall. One woman described the evolution of her decision-making process about when to ejaculate after learning what stimulation produced FE for her. Rose says, “The first I was surprised, and didn’t know what made me ejaculate. Now I know what my body responds to so I can make the decision about when I’m ready.” Sam described “holding it back” based on her sexual partner, and that her current partner “is not a huge fan.” She says further, “I do actually try to hold it back, because my partner especially during oral sex really does not like it. She says it’s a little too surprising.” Another woman described how being an ejaculator determined her selection of sexual partners. Evelyn says, “I made him stop the first time. Now if a man doesn’t get me there I don’t see him again.” She says further, “Now when I interview other lovers I always ask the question if they’ve been with someone who squirts. If they haven’t I don’t usually entertain the idea of them being a possible lover.”

(See Table J10 for sexual decision-making.)

Subsequent experiences of female ejaculation. The women expressed that their experience of FE has changed over time since their first ejaculation. They described numerous changes such as: (a) changes in sexual stimulation that produces FE, (b) changes in types of sex that produces FE, (c) increasing their knowledge of the sexual stimulation that produces FE, (d) gaining control of their FE fluid, (e) becoming multi-ejaculatory, (f) becoming multi-orgasmic, (g) changes in the frequency of FE, (h) changes in the amount of FE fluid, and (i) feeling greater pleasure and enjoyment from FE. Roxanne says, “Now I know when it’s about to happen. I now can gush more fluid and can do it multiple times.” Brenda says, “It is only getting better because I am learning what works and what does not.” She also says, “At first it was my clitoris. Now it’s the inside of my vagina.” Vicky says, “I have learned how to have multiple orgasms and multiple ejaculations. It has only gotten better for me.” Gwen says, “I can ejaculate by masturbation now. I can sometimes shoot the ejaculation, project it to squirt, a trick I learned from an older female companion.” She also says, “The first time was the tip of the iceberg. My later same gender experiences were more pleasurable and quite titillating.” Sam says, “It happens now with only clitoral stimulation, especially if it takes awhile to reach orgasm.” (See Table K11 for subsequent experiences of FE.)

Examining female ejaculation fluid. A few of the women described investigating their first FE fluid using all their senses to determine what it was, and experimenting during subsequent sexual encounters to rule out urination. (See Table L12 for examining first FE fluid.) One woman shared how after her first ejaculation she experimented with emptying her bladder before having sex in order to rule out urination. Jenna says,

After the first couple of times it happened I was like, “I’m going to pee before we have sex just to make sure that’s not it.” But, then I was still doing it anyway.

We looked it up finally, and we found out this does happen every once in awhile for some people, it’s not crazy, and I’m not peeing. But, at the same time it was kind of annoying, because you don’t want to sleep in that.

Another woman shared about examining her first FE fluid, and experimenting during subsequent sexual encounters to reproduce the experience in order to determine whether or not it was normal. Brenda says,

I went in the bathroom and took a towel and tissue, and was like, “What is that? Did I urinate on myself?” That’s what I thought at first. Then I sat there, and I thought about it. I was like, “Maybe it was an orgasm. Maybe it was something that was supposed to happen.” After that I came to the conclusion that that’s what it was after trial and error a couple of times the next day or two.

Another woman told how she and her boyfriend reacted to her first FE, and used all their senses to investigate her first FE fluid to ascertain whether or not it was urine.

Roxanne says,

I actually hadn’t realized what happened until my boyfriend called my attention to the pool of fluid laying on his stomach. I looked at it, and was like, “I don’t know what that is.” He was like, “Did you pee?” I was like, “No. Not that I know of.” We both inspected it of course, and were like, “Well, no, it’s not urine.” It kind of clicked. I was like, “I’ve heard about this before. I think this might be female ejaculation.” So, we were both like, “Okay.” I don’t think we were really freaked

out by it, but we were both surprised. He a little bit more surprised than I was. I was a little embarrassed, because I made a little bit of a mess. So, I was like, “Uh, sorry.”

Roxanne says further,

We first looked at it. It was cloudy, grayish, almost clear, but not quite. So, that wasn't the typical color of urine. Basically, we both smelled it, stuck our fingers in it. We were like, “Well, no it's not urine.” It had it's own little smell, but it wasn't urine. It had an odd little smell, kind of musky. Didn't smell like roses or anything, but it didn't really stink either.

Debriefing Interviews

When the main written questionnaire and oral interview process for a participant in this study was completed an oral debriefing interview was conducted to determine whether or not the women benefitted or were harmed from participating in this study. In order to determine whether the women benefitted or were in distress due to participating in this study they were asked about their experience of being interviewed. The results of the debriefing interview indicated that none of the women participating in this study were harmed. On the contrary, all the women had an overall positive experience and benefited from participating in this study.

Experience of participating in the study. When the women were asked about their experience being interviewed the women expressed having an overall positive experience. None of the women explicitly stated they had a bad experience being interviewed. Rose says, “It was a very enjoyable experience.” Sam says, “It was fine.”

Dawn says, "It wasn't bad." Jenna says, "Completely positive. I felt very comfortable." Annabell says, "It was good and different for me." Brenda says, "Pleasant. Insightful." Gwen says, "I felt comfortable, and free to speak." Evelyn says, "It's been a wonderful experience. I'm glad that I came." Roxanne says, "It was overall positive."

The women reported that they received various benefits from participating in this study. Some of the women reported they learned about themselves, came to a greater of themselves, or gained self-knowledge. Rose says, "Talking, I just realized a lot of stuff that I didn't realize before. The trust thing, I didn't realize how big of an issue it was for me. It really was eye opening." Evelyn says, "It was a release. I developed more of an understanding of myself verbalizing some things I hadn't verbalized before."

One woman reported her experience of being interviewed was good, because of finally being able to finally confess. Annabell says, "Honestly, I've never told this to anybody. Just saying it out loud, talking out loud is nice. Talking though maybe why, and how it maybe led to something else emotionally." She says further, "Just finally telling someone what I did for all those years, and the ways I thought. And whom could I tell that to really? Not even my best friends. That was a neat process for me, the revealing."

The women reported various reasons for wanting to participate in this study, and their reasons being a part of their positive experience of being interviewed. They participated, because they wanted: (a) to help women have better sex, enjoy sex, be open about sex, and not be embarrassed about sex; (b) to help their daughters have healthy sexualities; (c) to help other women who ejaculate; (d) to help expand general knowledge

on female ejaculation; (e) to help men learn about female ejaculation; and (f) to learn more about female ejaculation themselves. Evelyn says, “I was looking forward to this interview. And I’m glad that I did it. I hope that I can help somebody else with whatever they might be experiencing, but questioning and too embarrassed to ask anybody about.”

Jenna says,

I’m really excited that I got to participate in this. I feel like it’s something that a lot of women are afraid of, and a lot of women don’t know anything about, or don’t know that it’s normal, healthy, or possible at all. I think it’s a totally natural, awesome, sexual thing to do. I’m really happy that people are studying it, and trying to make more sense of it, so that hopefully more women will know that it’s totally okay. And guys too, because a lot of guys are like, “Oh my God! What the hell is that?” And you’re just like, “It’s me being awesome.”

Six of the 10 women reported not experiencing any short-term distress of negative feelings such as nervousness or discomfort from being interviewed. Jenna says, “I’m always very open talking about sex and sexual experiences. For me, personally, it’s never an issue.” Sam says, “This is not very different from conversations I have with my work spouse” and “I’m not bothered talking about anything.” She says further, “It’s all old territory. That’s why I agreed to do the study. It’s not new, scary, or anything I’m uncomfortable with. It’s all worked out already.” Annabell says, “I wasn’t nervous to come into this interview at all...It’s something that I’m curious about. It was nice to say out loud, and even write. The process of writing it down was cool for me too.”

Despite that the women expressed they had an overall positive experience being interviewed, four of the women reported having some basic short-term distress of negative feelings. Two of the four women, Rose and Dawn, say they felt “nervous,” but that they were not as nearly as nervous as they thought they’d be. One of the four women, Roxanne, says she felt “a little uncomfortable,” but that she overcame the discomfort. Roxanne says, “But, I’m a pretty open person. I’m a pretty talkative person, so I can usually figure out how to get over it.” Specifically, she expressed being a little uncomfortable talking about sex so openly due to social and cultural conditionings, which teach people not to openly talk about sex. Roxanne says, “We’re all Americans. We have our hang ups about sex, so talking about sex in such an open way.” She reported that the more she talked during the interview the more comfortable she became. Roxanne says, “As I started talking more about it, I got more comfortable, and realized this is just human behavior. It’s natural. It happens. Maybe if more people started talking about women’s sexual experiences more women would have better sex.” She also expressed that she felt good breaking the silence on something others, or she, doesn’t usually talk about. Roxanne says, “I feel good about sharing something that a lot of people don’t like to talk about...It’s refreshing to just talk about the experience, and hopefully add to the general knowledge about it.” Another one of the four women, Gwen, says that the interview “was a bit overwhelming.” Gwen says and explains that it was due to “all these things I hadn’t talk about,” and “the feelings that come up with them.” However, Gwen says she felt a “tremendous sense of relief” in sharing, and that she was able to share without feeling anyone was “judging” her.

Nine of the 10 women felt no need for a follow-up phone call when offered. Only one of the 10 women requested a follow-up phone. She requested a follow-up phone call due to the study bringing up a meaningful relationship in her life that was unresolved for her, and the positive realization she needed to take action and find resolution regarding this relationship. Gwen explains, “It makes me just want to journal more about these things. There’s a long overdue letter that I have to write.” She continues, “There are still some things I want to say just because before I didn’t have a voice to say them. I think it’s important. Even if I don’t send it, and just burn it. Just to have it out.” During the follow-up phone call she did not report being in distress about the unresolved meaningful relationship in her life that the study brought up. However, she did demonstrate still being in a state of processing it. Regardless, the appropriate psychological referrals were given in case she felt the need to seek professional help to process things further.

Interpretation of Results

The responses of the 10 women in this study show that women are indeed experiencing things that are different and unprecedented in the sexual relationship at the age of onset of female ejaculation compared to previous or subsequent sexual relationships or encounters in which they do not experience female ejaculation. Women are experiencing things that are different and unprecedented in the sexual relationship at the age of onset of FE regardless of the type of personal connection be it with a partner where there’s the presence of “intimacy, closeness, friendship, or attraction;” in a relationship that’s more “functional;” or through “sexual exploration, discovery, learning,

or experimentation” during solo masturbation. Compiling all the elements and differences the 10 women in this study described experiencing in their sexual relationship at the age of onset of FE reveals that women are experiencing a diverse range of various combinations of positive elements and differences in the relationship in which they first ejaculate. The numerous elements and differences all play a contributing role for women in the appearance of FE for the first time, as many of the differences are interconnected or dependent upon each other. They coalesce to create the right conditions in which FE emerges for the first time. (See Table M13 for the type of personal connection in sexual relationship at age of onset of FE and primary/secondary elements and differences.)

Connection of Intimacy, Closeness, Friendship, or Attraction

The responses of six women in this study indicate that a woman who is in a relationship where she feels a connection of “intimacy, closeness, friendship, or attraction” with her partner when she first ejaculates has an overall positive experience of the sexual relationship. For example, she may think or feel that “it was a good experience” or “it was a positive sexual relationship.” The woman is overall sexually satisfied and happy, and has a strong level of sexual satisfaction and happiness. Her experience of sexual satisfaction and happiness in the relationship may be “extremely good.” For example, she may be “satisfied,” “pretty satisfied,” or “very satisfied” perhaps even “loving every minute of it.” She may think or feel that the sex is “wonderful.” In fact, she may have an unprecedented level of sexual satisfaction and happiness. At that point in time she may think or feel that the sex in the relationship in which she first ejaculates is “the best” sex she has had in her life so far. The sex in the

relationship may be something that satisfies and makes her the happiest about the relationship as a whole. The woman has an overall positive experience of sexual stimulation. In fact, she may experience improved or completely new and unprecedented sexual stimulation and orgasm. For example, she may be sexually stimulated some place she has “never been touched before,” or she may have “regular orgasms” for the first time. The woman has a positive or strong level of sexual desire in the sexual relationship. For example, she may want to have sex “everyday,” “all the time,” “pretty often,” “a lot,” “often,” “very often,” “as often as possible,” or “once a week.” She may experience an increase in sexual desire after her first experience of female ejaculation, and afterwards want to have sex “pretty much all the time.” The woman has a positive level of sexual arousal in the sexual relationship. For example, she may be “very” aroused, be aroused “all the time,” or be “usually pretty aroused.” In fact a woman may experience an unprecedented level of sexual arousal. The woman has a positive level of sexual receptivity. For example, she may be “very” open towards having sex in her relationship, or if asked to have sex by her partner that she “would” do it. There is a positive level of sexual exploration, learning, discovery, or experimentation in her relationship. The woman is having sex in her relationship when she feels sure, ready, knows, and senses it is okay to. She is having sex because she truly wants to instead of with intentions like getting it over with, or just to please her partner because her partner wants to have sex. The woman feels overall comfortable physically and emotionally in the sexual relationship. For example, she may be comfortable “for the most part,” or “pretty,” “really,” or “very” comfortable. Her sense or level of comfort may be like

“breathing.” If the woman is uncomfortable in some way or to some degree in the sexual relationship she may be “very” comfortable in some other way in the sexual relationship. The woman feels overall safe physically and emotionally in the sexual relationship. For example, she feels that the potential to be harmed or hurt having sex is “none,” “not at all,” “no,” “never,” or “I didn’t.” She does not feel non-consensually physically threatened, or is actually non-consensually physically threatened from within the sexual relationship. If the woman feels the potential for harm or hurt physically in some way or to some degree in the sexual relationship it is temporary. Or, her feeling of overall physical safety is much greater than the specific aspect of the sexual relationship in which she feels the potential for physical harm or hurt. The only physical harm or hurt she experiences in the sexual relationship is due to the inherent physical nature of having sex, and two bodies becoming entangled. The woman may feel the potential for and experience emotional harm or hurt due to discrepancy in feelings, discrepancy of interest of being in the relationship, and the deterioration of the relationship. Ultimately, the woman may experience heartbreak, which is a natural risk of being in a relationship.

The responses of six women in this study indicate that some of the most important elements and differences women are experiencing when they ejaculate for the first time with a partner where there’s a personal connection of “intimacy, closeness, friendship, or attraction” are in the following areas: (a) trust; (b) traits and behaviors in their partner; (c) sexual receptivity (See p. 110 for definition of sexual receptivity); (d) the overall sense of connection of “intimacy, closeness, friendship, or attraction” they feel with their partner; or (e) feelings. These “primary” elements and differences in turn positively impact other

areas, and create other equally important “secondary” elements and differences women are experiencing in their sexual relationship when they ejaculate for the first time. The other equally important elements and differences women are also experiencing are in the following areas: (a) sexual desire, (b) sexual decision-making, (c) sexual stimulation, (d) sexual arousal, (e) orgasm, (f) being relaxed during sex, (g) being comfortable, and (h) sexual beliefs.

A woman who is in a relationship where she feels a connection of “intimacy, closeness, friendship, or attraction” with her partner when she first ejaculates may be experiencing a greater or record level of *trust*. Trust may positively impact the woman in some way. Take the example of sexual receptivity. Since the woman trusts her partner she may be more open to trying oral sex, and for the first time in her life actually be relaxed while experiencing it. Or, trust may combine with the woman no longer being embarrassed about having sex in some way, such as receiving oral sex, which may help her to relax during sex. Or, trust may combine with the woman having some sexual knowledge and experience now, because it is no longer her first time having sex, which may also help her to relax during sex. The positive impact of trust on sexual receptivity in these ways may create an improved or new experience of sexual stimulation, sexual arousal, or orgasm for the woman such as orgasming for the first time. Additionally, take the example of sexual decision-making. The woman trusting her partner may help her with knowing she is ready and sure about having sex, and having sex when she truly wants to, which may be unlike previous relationships where she does not trust her partner, decides to have sex when she is unsure, and with intentions like getting it over

with, or because her partner wants to. As a result she may have an improved or new experience of other aspects of the relationship, because she is having sex when she truly wants to, and is sure about her decision to have sex.

A woman's partner may have favorable and desirable *traits and behaviors* she's never had in a partner before that positively affect her in some way. For instance, a woman may experience the absence of negative traits and behaviors in her partner such as jealousy or being domineering that helps her to trust her partner and develop an overall connection of friendship unlike with previous partners. Or, her partner may have a lot of sexual knowledge and experience, and specifically know how to sexually stimulate a woman to produce female ejaculation. As a result she receives completely new sexual stimulation she has never before experienced, and ejaculates for the first time. Or, her partner with whom she first ejaculates may have better or unprecedented sexual stamina, or a penis shape or size she has never before experienced that produces an improved or new experience of sexual stimulation, arousal, or orgasm. For further example, the woman's partner may care about and pay attention to her sexual pleasure unlike anyone she has been with before, as opposed to the partner focusing on his or her own sexual pleasure. As a result she has an improved or new experience of sexual stimulation, arousal, or orgasm.

A woman may experience strong or improved *sexual receptivity* in some way. For example, she may simply be very receptive to her body's sensations and signals, and allow herself to biologically go along with what feels good and natural to do. As a result she ejaculates for the first time. Additionally, a woman may experience strong or

improved sexual receptivity, because the partner with whom the woman first ejaculates may be more open towards having sex in some way. For instance, her partner may be far more open towards having sex in general unlike a previous relationship that may have been basically sexless, because a previous partner was not open towards having sex at all for some reason. Or, her partner is more open towards having sex by specifically being more receptive to what she wants to try sexually for her sexual stimulation, arousal, and orgasm on a level unlike previous partners. As a result the woman may have an improved or new experience of sexual stimulation, arousal, or orgasm such as having regular orgasms for the first time.

In a woman's relationship the *overall sense of connection of "intimacy, closeness, friendship, or attraction"* she feels with her partner may be strong or unprecedented, and therefore her experience of a combination of the various defining characteristics of this type of connection may be strong or unprecedented. For example, a woman may experience a strong or unprecedented level of comfort because of the strong or unprecedented overall sense of connection of "intimacy, closeness, friendship, or attraction" she feels with her partner. Being more comfortable may then positively impact the women in some way. For instance, being more comfortable may allow her to let go enough physically and emotionally to experience female ejaculation for the first time. Or for instance, the strong or unprecedented overall sense of a connection of "intimacy, closeness, friendship, or attraction" she feels with her partner may be sexually stimulating and arousing in and of itself. As a result the strong and unprecedented overall

connection may provide the woman with a strong or unprecedented experience of sexual stimulation, sexual arousal, and orgasm.

A woman may experience strong or unprecedented *feelings* for her partner such as love for the first time. Her feelings of love for her partner may positively impact the woman in some way. For example, the love a woman feels for her partner, combined with ideas or plans of marriage, may prompt a change in her sexual beliefs to where they no longer conflict with having premarital intercourse. As a result she may feel it is okay to have sex, decide to have sex, and lift the sexual restrictions she has on having premarital sex, which is when she first ejaculates.

The responses of three of the four women with later ages of onset of female ejaculation at 25, 30, and 46 indicate that a woman who ejaculates at a later age in a relationship where she feels a connection of “intimacy, closeness, friendship, or attraction” with her partner may be experiencing the elements and differences in trust, traits and behaviors in their partner, and sexual receptivity as described above. Consequently, a woman may also experience the associated and equally important elements and differences incidentally created in other areas as described above. She may have an improved or new experience of sexual receptivity, sexual stimulation, sexual arousal, orgasm, being relaxed during sex, and sexual decision-making because of a greater or record level of trust. She may have an improved or completely new experience of sexual stimulation, sexual arousal, or orgasm because of differences in traits and behaviors or sexual receptivity in her partner.

Functional Connection

The responses of two women in this study indicate that a woman who is in a relationship where she feels a “functional” personal connection with her partner when she first ejaculates has an overall negative to neutral to mixed experience of the sexual relationship. For example, she may think or feel that “it wasn’t a very good relationship,” “it wasn’t a very healthy relationship, but it was an okay relationship,” “I was just happy to have a boyfriend”, or “I can say that I wasn’t dissatisfied.” Although sex may be one of the few things that satisfies the woman the most and makes her the happiest in the relationship there is much about the sex that is dissatisfying and makes her unhappy. For example, she may think or feel the sex with her partner is “yuck” or “mundane;” more “about fucking” or for her partner “to be able to cum and be done with it, like some instant gratification;” or that “there wasn’t a whole lot of intimacy” or “it was just something to do.” The woman may not be satisfied or happy with very specific aspects of the sexual relationship. For example, she may be unhappy and unsatisfied with the sexual stimulation of “kissing,” “oral sex,” or “movement” of her partner. The woman may not even “like” her partner, or feel indifferent towards her partner. Her sexual satisfaction and happiness may increase after her first experience of female ejaculation. For example, she may think and feel that sex “wasn’t good until after that,” and that before her first ejaculation sex with her partner “wasn’t all that hot.” In fact, ejaculating may be an aspect of the sexual relationship that satisfies her the most and makes her the happiest. The woman has an overall negative experience of sexual stimulation. She does not necessarily experience improved or completely new and unprecedented sexual

stimulation and orgasm. In fact, masturbation may provide her with a better experience of sexual stimulation and orgasm than having sex with her partner. The woman has an overall lower level of sexual desire. For example, she may want to have sex “twice a month” or think or feel her partner “wanted it more.” She may experience an increase in sexual desire after her first experience of female ejaculation. For example, before her first experience of female ejaculation she may want to have sex “once a week” whereas afterwards she feels female ejaculation “opened up something” and wants to have sex “almost every day,” “everyday,” or “three or four times a day.” The woman has an overall lower level of sexual arousal. For example, she may feel “a bit under stimulated,” or that her orgasms with her partner are “never as satisfying as” the orgasms she has during masturbation. She may experience an increase in sexual arousal after her first experience of female ejaculation. For example, after her first experience of female ejaculation she may feel “very” aroused or turned on by her partner. The woman has a positive or strong level of sexual receptivity. For example she may be “pretty” or “very” open towards having sex in her relationship. There is not a strong presence of sexual exploration, discovery, learning, or experimentation in her sexual relationship. The woman is willing and decides to have sex in her relationship despite not truly wanting to. She decides to have sex with intentions like getting it over with, to get out of an argument, or just to please her partner because her partner wants to have sex. As a result she may need to prepare in some way mentally, emotionally, or physically to have sex. She may experience a positive change in her sexual decision-making after her first experience of female ejaculation. For example, she may decide to have sex because she

actually truly wants to. As a result she may feel no need to “prepare” to have sex, she may no longer “second-guess” her decision to have sex, or it may feel like sex happens “naturally.” The woman feels overall safe physically and emotionally in the sexual relationship. For example, she feels that the potential to be harmed or hurt having sex is “never” or “I didn’t.” She does not feel non-consensually physically threatened, or is not actually non-consensually physically threatened from within the sexual relationship. If the woman feels the potential for harm or hurt in some way or to some degree it occurs at a distinct point in time over the course of the sexual relationship. Or, her feeling of overall physical and emotional safety is much greater than the specific aspect of the sexual relationship in which she feels the potential for physical harm or hurt. The woman has an overall negative to mixed experience of comfort in the sexual relationship. Even though she may be open and willing to having sex with her partner she needs to prepare mentally, physically, or emotionally in some way in order to feel comfortable having sex. The woman’s level of comfort in the sexual relationship may increase after her first ejaculation, which may intersect with other increases such as in sexual desire or positive changes in sexual-decision making.

The responses of two women in this study indicate that some of the most important elements and differences women are experiencing when they ejaculate for the first time with a partner where there is a “functional” personal connection are in the following areas: (a) comfort, or (b) an improvement or complete change in the overall functional personal connection. These “primary” elements and differences in turn positively impact other areas, and create other equally important “secondary” elements

and differences women are experiencing in their sexual relationship when they ejaculate for the first time. The other equally important elements and differences women are experiencing are in the following areas: (a) sexual desire, (b) sexual decision-making, (c) sexual stimulation, (d) sexual arousal, (e) orgasm, (f) having things in common, or (g) feelings.

A woman who is in a relationship where she feels a “functional” connection with her partner when she first ejaculates may experience an increase in her *comfort* level at some point during the relationship. For example, her body image may change where she feels more comfortable having sex, which may further positively impact her experience of sexual stimulation, arousal, and orgasm. Or, she may feel more comfortable because of a suspension of negative traits and behaviors in her partner like him or her being controlling or possessive. She may feel more comfortable too because the suspension of negative traits may also lead to a suspension of routine conflict and not getting along in the relationship, and an increase in the quality of time the woman and her partner spend together. As a result she may have an improved or new experience of other aspects of the relationship such as feelings for her partner becoming less negative. Feeling more comfortable may also lead a woman to an improved or new experience of sexual desire and sexual decision-making. For instance, the sources of comfort and being more comfortable may trigger an increase in sexual desire. The woman may truly want to have sex and decide to have sex with this intention because she is more comfortable instead of not truly wanting to have sex and deciding to have sex with intentions like to get it over

with, to avoid an argument, or because her partner wants to. As a result she may have an improved or new experience of sexual stimulation, sexual arousal, or orgasm.

A woman who is in a relationship where she feels a “functional” connection with her partner when she first ejaculates may somehow experience a change in the type of *overall personal connection* present in the sexual relationship or situation. For example, the connection may change from “functional” to one where there is the presence of “intimacy, closeness, friendship, or attraction.” This may occur through means such as bringing a third party into the functional sexual relationship, a third party in which the woman feels a completely different type of connection. As a result the woman experiences some combination of the various defining characteristics of the new connection of “intimacy, closeness, friendship, or attraction” that drastically differs from the various defining characteristics of the “functional” connection. For example, due to the change in connection she may have an improved or unprecedented experience in feelings of care and love, sharing things in common, sexual desire, sexual decision-making, sexual stimulation, sexual arousal, or orgasm.

The responses of one of the four women with a later age of onset of female ejaculation at 30 indicates that a woman who ejaculates at a later age in a relationship where she feels a “functional” connection with her partner may be experiencing the element and differences in comfort as described above. Consequently, a woman may also experience the associated and equally important elements and differences created in other areas as described above. She may be more comfortable because of a change to a more positive body image, a suspension in negative traits and behaviors in her partner, or

a suspension in time spent together arguing and not getting along. As a result of being more comfortable she may have an improved or new experience of sexual decision-making, sexual desire, sexual stimulation, sexual arousal, orgasm, or feelings for her partner such as her feelings for her partner becoming less negative.

Connection of Sexual Exploration, Discovery, Learning, or Experimentation

The responses of three women in this study indicate that a woman connecting with her body and herself through “sexual exploration, discovery, learning or experimentation” during solo masturbation sex when she first ejaculates has an overall positive experience of the sexual relationship. The woman is overall sexually satisfied and happy. For example, she may think or feel “I was satisfied” or “I was very happy and completely satisfied after that first ejaculation.” The physical pleasure she experiences is one of the things that satisfies her the most and makes her the happiest in the sexual relationship. She may be unsatisfied and unhappy with things like not being in a relationship or having a sexual partner, or the effort involved to produce physical pleasure. The woman has an overall positive experience of sexual stimulation. In fact, she may experience improved sexual stimulation and orgasm. For example, she may be “better at masturbation” with herself than a sexual partner is at having sex with her. She may have “one orgasm” having sex with a sexual partner, but have as many orgasms as she wants with herself, and be “faster at it.” The woman has a positive level of sexual desire. For example, she may want to have solo masturbation sex “quite often” or “all the time.” Her sexual desire may increase after the first time she ejaculates. For example, she may think or feel “after that I...wanted it quite a bit” or “it increased.” The woman

has a positive level of sexual arousal. For example, she may be “pretty” aroused, aroused “pretty much every time,” or aroused “6 out of 10” and “up to an 8.” She may experience an increase in sexual arousal after the first time she ejaculates. For example, she may be “very” aroused afterward. It may seem like becoming aroused is “easier after the ejaculation and orgasm.” The woman is having sex because she truly wants to, and not with intentions like to get it over with, or just to please her partner because her partner wants to. The woman has a positive or strong level of sexual receptivity. For example, she may be “open with it,” “pretty” open, or “very” open towards having solo masturbation sex. There is a strong presence of sexual exploration, discovery, learning, or experimentation. For example, she may be “curious” about her body and sensations sexually. She may describe the sexual relationship with herself during the solo masturbation sex in which she first ejaculates as “more exploratory.” She may say things like, “I just wanted to see what everything was like;” “I was really...learning about me and my body, and the different things that can happen with the different things that you tried;” there was “a lot of experimentation;” or that she was “exploring the way different sensations felt.” The woman feels overall physically and emotionally comfortable in the sexual relationship. For example, she is “at ease with it” or “very” comfortable having solo masturbation sex. The woman also feels overall physically and emotionally safe in the sexual relationship. For example, she feels the potential to be harmed or hurt having solo masturbation sex is “none” or “I didn’t.” Feeling comfortable and safe is rooted in having privacy, a positive sexual sense of self that produces positive thoughts and feelings, positive sexual beliefs, and an absence of negative thoughts and

feelings of guilt and shame stemming from negative sexual beliefs. If there is discomfort or feeling unsafe in some way or to some degree in the sexual relationship such as having thoughts and feelings of guilt and shame stemming from negative sexual beliefs, having privacy during solo masturbation sex may buffer against this to create comfort and safety.

The responses of three women in this study indicate that some of the most important elements or differences women are experiencing when they ejaculate for the first time through solo masturbation where there is a personal connection of “sexual exploration, discovery, learning, or experimentation” are in the following areas: (a) comfort; (b) sexual stimulation; (c) the overall personal connection of “sexual exploration, discovery, learning, or experimentation” also known as sexual receptivity; or (d) a biological change or transition. These “primary” elements and differences in turn positively impact other areas, and create other equally important “secondary” elements and differences women are experiencing in their sexual relationship when they ejaculate for the first time. The other equally important elements and differences women are experiencing are in the following areas: (a) sexual stimulation, (b) sexual arousal, (c) orgasm, (d) sexual desire, or (e) sexual frequency.

A woman connecting with herself and her body through “sexual exploration, discovery, learning, or experimentation” during solo masturbation sex when she first ejaculates may have *a strong level of comfort*. For example, she may have a strong level of comfort because she has privacy, a positive sense of self that produces positive thoughts and feelings, or positive sexual beliefs that do not produce guilt or shame. Additionally, she may experience *an increase in comfort* in some way. For instance, she

may experience an increase in comfort because she is not sharing her sexual experience with anyone else, or because her sense of self changes from negative to positive and she is more comfortable with herself and who she is as a person. Or, she may experience an increase in comfort simply because it is no longer her first sexual experience, such as her first time masturbating or having sex with a partner, and she has some sexual knowledge and experience now. Or, she may experience an increase in comfort because she is deciding to have sex when she truly wants to, which may be unlike previous sexual relationships where she has sex when she truly does not want to, and with intentions like getting it over with, or because her partner wants to. Having a strong level of comfort or experiencing an increase in comfort may positively impact the woman's experience of sexual stimulation, sexual arousal, and orgasm. For example, because the woman has a strong level of comfort or experiences an increase in comfort she may allow more or new sexual stimulation to take place, which then positively impacts her experience of sexual arousal and orgasm.

A woman connecting with herself and her body through “sexual exploration, discovery, learning, or experimentation” during solo masturbation sex when she first ejaculates may experience better or new sexual stimulation. For example, she may experience better sexual stimulation and orgasm because she is not sharing her sexual experience with anyone else, and does not have to communicate to a partner what does and doesn't feel good, or how to bring her to orgasm. Or, she may experience better or new sexual stimulation because she is more comfortable, in a different mindset, or puts

more time and effort into the masturbation experience in which she first experiences FE compared to previous masturbation experiences.

When a woman first ejaculates during solo masturbation *the overall connection of “sexual exploration, discovery, learning, or experimentation”* she has with her body may be strong or increase. In others words, she may have a strong level of sexual receptivity, or experience an increase in sexual receptivity. For example, the woman may be receptive to her body’s sexual sensations and signals and act on them through sexual exploration and experimentation whereas before she did not. Or, she may sexually explore her body and experiment to an extent she has not before.

A woman connecting with herself and her body through “sexual exploration, discovery, learning, or experimentation” during solo masturbation sex when she first ejaculates may have recently gone through a biological transition of some kind. For instance, she may experience a dramatic developmental biological transition from childhood into adolescence that intensely affects things like her level of sexual desire and frequency, which then may positively affect things such as sexual stimulation, sexual arousal, and orgasm.

Women’s Experiences of The Sexual Relationship at the Age of Onset of Female Ejaculation

Collectively, the responses of the ten women in this study indicate that some of the most important elements or differences women are experiencing in the sexual relationship when they ejaculate for the first time are the following: (a) a greater or record level of trust in their partner; (b) improved or unprecedented favorable and

desirable traits and behaviors in their partner; (c) strong or improved sexual receptivity in some way (See p. 110 for definition of sexual receptivity); (d) a strong or unprecedented overall connection of “intimacy, closeness, friendship, or attraction” they feel with their partner, and therefore some combination of the various defining characteristics of this type of connection also being strong or unprecedented; (e) strong or unprecedented feelings for their partner; (f) a strong level of comfort, increase in comfort, or unprecedented level of comfort; (g) an improvement or complete change in the overall “functional” connection to a different type of connection, and some combination of the various defining characteristics of this new type of connection; (h) improved or new sexual stimulation; (i) a strong, improved, or unprecedented overall connection of “sexual exploration, discovery, learning, or experimentation” a woman has with her body; or (j) undergoing a biological change or transition that has positive sexual effects. Ultimately, these “primary” elements and differences in turn positively impact other areas, and create other equally important “secondary” elements and differences women are experiencing in their sexual relationship when they ejaculate for the first time. Equally important “secondary” elements and differences women are experiencing in their sexual relationship when they ejaculate for the first time are in the following areas: (a) sexual stimulation, (b) sexual arousal, (c) orgasm, (d) sexual desire, (e) sexual decision-making, (f) being comfortable, (g) being relaxed during sex, (h) sexual beliefs, (i) having things in common, (j) feelings, or (k) sexual frequency.

Audience Validation

As described previously in the methodology chapter, due to the student being a lone researcher and the ethical considerations of keeping participants in a study over a prolonged period of time, audience validation was used in place of member validation to determine the accuracy of the interpretation of the results of this study. Three women the student knew who regularly ejaculated were asked to read this master's thesis research for the purpose of verifying it (Gilliland, 2009). The three readers confirmed that the results of this study, and the interpretation of the results fit their experience of the personal connection that defined the sexual relationship they were in when they first experienced female ejaculation. Each reader identified strongly with the story of at least one of the 10 women in this study, if not multiple stories in the connection category that defined the sexual relationship the reader was in when she first experienced female ejaculation. Each reader also identified with the description of the connection category that defined the sexual relationship the reader was in when she first experienced female ejaculation. Each reader also identified strongly with at least one if not multiple "primary" and "secondary" elements and differences the women in this study emphasized as being the most important elements and differences they were experiencing in the sexual relationship in which they first experienced female ejaculation.

One reader related to the stories and descriptions of the connection category of "intimacy, closeness, friendship, or attraction" and the "functional" connection category when the sexual relationship in which she first experienced female ejaculation fell into the connection category of "intimacy, closeness, friendship, or attraction." This confirms

that all the themes in each connection category do not necessarily apply to all women, and that various combinations of the themes define the connection present in their relationship. However, this may also suggest that there is more variation in the characteristics defining the personal connection categories. Or, this may suggest a possible personal connection category that is missing from this current study, which the sample in this current study does not represent.

The personal connections of the sexual relationships in which the three readers first experienced female ejaculation fell into the categories of “intimacy, closeness, friendship, or attraction” and “sexual exploration, discovery, learning, or experimentation.” Even though one of the three readers related to some of the description of the “functional” connection category, the “functional” connection category remains to be completely verified through audience validation.

Discussion

Many of the findings on female ejaculation in this inquiry are supported by and verify the findings of other inquiries in the scientific literature on female ejaculation. The results of the student’s study are especially consistent with many of the results that Gilliland (2009) reported in her research on women’s experiences of female ejaculation. First and foremost is the wide age range in which women first experience female ejaculation. The age of onset of female ejaculation of the 10 women in this study spanned from 14 to 46 years old. Six women experienced female ejaculation for the first time in their mid to late teens, three women experienced female ejaculation for the first time in their mid twenties to early thirties, and one woman experienced female

ejaculation for the first time at age 46. Gilliland (2009) also reported a parallel pattern in her research with nine women experiencing female ejaculation for the first time in their late teens to early twenties, three women experiencing female ejaculation for the first time in their early to mid-thirties, and one woman experiencing female ejaculation for the first time at age 51. The student's study would not have been possible if the diverse age range in which women first experience female ejaculation that Gilliland (2009) noted in her research was not reproducible. The very existence of the student's study corroborates that women do indeed experience female ejaculation for the first time at different ages spanning from adolescence into mid-life, and possibly beyond.

The student's study shows that the mental and emotional reactions women have to female ejaculation that Gilliland (2009) documented in her research is correct. In this study, the mental and emotional reactions that the 10 women had to ejaculation varied from negative to neutral to positive, or a combination of, and changed over time. The women reported feeling "fascinated," "curious," "surprised," "embarrassed," "overwhelmed," "fearful," "confused," "scared," "guilt," or "shame" upon ejaculating the first time. Some of the women who had a negative response spoke of eventually coming to a place with ejaculating of being able to "embrace it." The mental and emotional reactions of the 10 women to ejaculation in the current study fit the mental and emotional response patterns that Gilliland (2009) reported the women in her research experienced, which was feeling either "humiliation and shame" or "exploration and wonder," and these feelings growing over time into either "resignation or acceptance" of ejaculation.

An array of other reactions that the 10 women have to ejaculation in this study are concurrent with a variety of other reactions Gilliland (2009) documented in her research. In this study some of the women believed their ejaculation was urine, or at least initially considered the possibility that it was urine. Some of the women also examined their initial ejaculatory fluids through the senses of sight, smell, taste, and touch to determine what it was. During subsequent sexual encounters some of the women experimented with emptying their bladders before sexual activity to rule out urination, but still released fluid regardless. During subsequent sexual encounters they also attempted to reproduce female ejaculation in order to determine whether or not it was normal, but also to re-experience the sexual pleasure from ejaculation and the accompanying orgasm. Through this type of examination and experimentation the women determined their female ejaculate fluid was not urine. During subsequent sexual encounters some of the women in the student's study described developing methods to prepare for female ejaculation such as laying down towels to absorb the fluid. Gilliland (2009) also identified these types of response patterns in her female respondents such as them believing their ejaculate was urine; examining their ejaculate fluid to determine what it was; emptying their bladders prior to sexual activity to rule out urination, but still releasing fluid regardless; and developing methods to prepare for ejaculate fluid. Additionally, Goldberg et al. (1983) identified some of the women in their study emptying their bladders prior to sexual activity, but still releasing fluid regardless.

This study demonstrates that the sexual decision-making process unique to female ejaculators that Gilliland (2009) first described her respondents going through in her

study is accurate. The sexual decisions the women made as ejaculators in this study matches the sexual decisions that Gilliland's (2009) respondents made as ejaculators. Some of the women in the student's study also made the same decisions such as when to ejaculate, whether or not to ejaculate based on their sexual partner, and about the selection of their sexual partners overall. As Evelyn says, "Now when I interview other lovers I always ask the question if they've been with someone who squirts. If they haven't I don't usually entertain the idea of them being a possible lover."

The amount of fluid the 10 women ejaculated their first time in the student's study varies considerably. The student used the same method of volume measurement as Gilliland (2009). Half of the ten women in the student's study ejaculated small to mid-sized volumes of fluid while the other half ejaculated large volumes of fluid their first time. The student's results slightly contrast with Gilliland's (2009) results. Gilliland (2009) recorded that her respondents ejaculated small and large volumes of fluid, but that the majority of her participants, or nine of 13, ejaculated large volumes of fluid outweighing the minority of her participants, or three of 13, who ejaculated smaller volumes of fluid. Gilliland (2009) suggested that the wording in her advertisement may have influenced the responses of her participants as it read "women who regularly experience the release or gush of fluid around the time of orgasm" (p. 131). However, the student also used the exact same wording in her advertisement for her study, and achieved more balanced results in the amount of fluid her 10 participants ejaculated. Even though the student had three fewer women in her study than Gilliland (2009), the majority of Gilliland's (2009) respondents ejaculating large volumes of fluid may have

had more to do with chance in random sampling than the wording of the advertisement. Secondly, some women in the student's study spontaneously indicated ejaculating larger volumes of fluid since their first experience of female ejaculation. The slight difference in fluid amounts between the student's study and Gilliland's (2009) study could also be due to the student only inquiring about the amount of fluid the women ejaculated their first time. Nevertheless, the considerable variation in the amount of fluid the 10 women ejaculated their first time in the student's study are in agreement with the varying volumes of fluid that Gilliland (2009) and other authors have reported women ejaculating. For example, Zaviacic reported fluid amounts of 1 to 5 ml up to 16ml (Zaviacic, Zaviacicova et al., 1988); Goldberg 3 to 15 ml (Goldberg et al., 1983); Bullough 1 to more than 6 teaspoons (Bullough et al., 1984); and Heath 30 to 50 ml (1984).

Different types of sexual stimulation led the 10 women in this study to experience female ejaculation for the first time. Four of the women ejaculated for the first time from combined vaginal g-spot and clitoral stimulation with one of these five women emphasizing the clitoral stimulation over g-spot stimulation. Four of the women ejaculated for the first time from clitoral stimulation. One woman ejaculated for the first time from vaginal g-spot stimulation alone. One woman ejaculated for the first time from vaginal g-spot and cervical stimulation. To the student's knowledge this is the first report of cervical stimulation being involved in a woman's experience of female ejaculation. Gilliland (2009) reported "deep vaginal" stimulation, but not specifically cervical stimulation as being a part of the sexual stimulation process leading any of the women in

her study to ejaculate. Nevertheless, the variation in sexual stimulation that induced female ejaculation for the first time in the student's participants is in accordance with the variation in sexual stimulation that induced female ejaculation in the participants of Bullough et al. (1984), Gilliland (2009), and Zaviacic, Zaviacicova, et al. (1988).

Different types of ejaculators have been previously identified in the research of Zaviacic, Zaviacicova, et al. (1988). The research team of Zaviacic, Zaviacicova, et al. (1988) administered sexual stimulation over the course of four sessions to 10 individual Czech women who either achieved ejaculation and/or orgasm with two members of the research team present. After data collection was complete, the women were then grouped into the "relatively hard-to-induce expulsion group," "easily induced expulsion group," and "the intermediate group." Gilliland (2009) discussed how it was possible for the women who ejaculated in her research to fit into these groupings of ejaculators. Likewise, it is also possible for the 10 women in the student's study to fit into these groupings.

An important area in which the results of this study largely differs with the results of Gilliland (2009) and Zaviacic, Zaviacicova, et al. (1988) is when women experience female ejaculation during the sexual response cycle. To determine when the 10 women in this study experienced their first female ejaculation during the sexual response cycle, the student asked her participants the following question: "When during sex did you ejaculate for the first time? For example, before, during or after orgasm? Please explain." In answering the question, nine out of 10 women reported that they first experienced female ejaculation during orgasm. The remaining woman reported being

uncertain when during the sexual response cycle she first experienced female ejaculation. Dawn states, "I first noticed it after the orgasms." The student's results in this area support the bias in the research that female ejaculation occurs during orgasm. However, the lack of variation in the student's results of when women experience ejaculation during the sexual response cycle could be explained by asking the women only about their first experience of female ejaculation. Some evidence exists to support this explanation. The woman who was uncertain when during the sexual response cycle she first experienced female ejaculation spontaneously conveyed that since her first ejaculation when she experiences female ejaculation during the sexual response cycle changes. Dawn states, "Though nowadays it's before, during, and after."

The research team of Darling et al. (1990) theorized that a certain level of arousal or "full tumescence" (p. 45) needs to be achieved for women to experience female ejaculation. Some evidence already exists in the scientific literature to support this theory. Most of the women in Gilliland's (2009) study reported that one of the conditions they need met during their sexual experience in order for orgasm and ejaculation to occur is to feel "very aroused" (p. 129). The results of the student's study further substantiate that achieving a certain level of arousal is important for female ejaculation to occur. The women in this study expressed having a positive level of arousal in the sexual relationship in which they first experienced female ejaculation. When asked about their level of arousal they said things like "very;" "I was very aroused;" "Very, all the time;" "pretty aroused;" "very aroused;" and "usually pretty aroused." One of the women explicitly expressed experiencing an unprecedented level of arousal during her first

experience of female ejaculation. Gwen states, “I remember my yoni [vagina] felt very swollen at the time, and that my lips and everything were like outward. My clitoris swole to such an extent at that time I don’t think it had been engorged to that level.” Reaching a certain level of arousal seems not only important for female ejaculation to occur as a whole, but specifically to the first experience of female ejaculation for some women.

The women in Gilliland’s (2009) study also reported that another condition they need met during their sexual experience in order for orgasm and ejaculation to occur is to feel “comfortable.” The results of the student’s study also substantiate that comfort level is important for female ejaculation to occur. One woman, Sam, emphasized that since her first experience of female ejaculation, as her comfort level has increased the “easier” it is for her to experience female ejaculation during subsequent sexual encounters. Four women emphasized comfort level as a “primary” or equally important “secondary” element or difference in their first experience of female ejaculation compared to previous sexual encounters. Comfort level seems not only important for the occurrence of female ejaculation as a whole, but specifically to the first experience of female ejaculation for some women.

Additionally, from the student’s results it also appears that for some women overall comfort in the general relationship is not absolutely necessary for female ejaculation to occur for the first time in their sexual relationship. Two women, Sam and Evelyn respectively, explicitly expressed being overall uncomfortable in their general relationships stating “not very much” and “I wasn’t comfortable at all.” In contrast, these two women, Sam and Evelyn respectively, explicitly expressed feeling “very”

comfortable, or described their comfort level being “like breathing” in their sexual relationship in which they first experienced female ejaculation. However, the majority of the women in the student’s study expressed being overall comfortable in both their general and sexual relationships in which they first experienced female ejaculation suggesting that feeling overall comfortable in both the general and sexual relationship in which they first experienced female ejaculation was important. Exemplifying this point is one of the 10 women in the student’s study, Brenda, who had a negative to mixed level of comfort in the general and sexual relationship in which she first experienced female ejaculation. Around the time Brenda first experienced female ejaculation the aspects of the general and sexual relationship that made her feel uncomfortable were suspended leading to feeling comfortable in both the general and sexual relationship, and it was then that she experienced female ejaculation for the first time. Brenda was one of the four women who emphasized comfort level as a “primary” or equally important “secondary” element or difference in their first experience of female ejaculation compared to previous sexual encounters.

In her conclusion section Gilliland (2009) suggested that a possible important element or difference women are experiencing in the sexual relationship in which they first experience female ejaculation is intrapersonal safety. In the student’s study the women felt overall safe in their sexual relationships. However, none of the women identified intrapersonal safety as an important element or difference they were experiencing in the sexual relationship when they first ejaculated. This does not mean that safety was not important. It may simply be that the women felt safe in previous

sexual relationships, so safety was not an issue in subsequent sexual relationships. Therefore, there was no need to emphasize safety as an important element or difference they were experiencing in the sexual relationship when they first ejaculated. This is in contrast to the element and difference in comfort at least four women in this study were experiencing as a “primary” or equally important “secondary” element or difference in the sexual relationship in which they first ejaculated. Whereas safety was not an issue for the four women in their previous sexual relationships in which they did not ejaculate, comfort was an issue.

In her conclusion section Gilliland (2009) also suggested that physiological changes may be involved in the wide age range in which women first experience female ejaculation. The results of this study provide some evidence for this. One of the 10 women in this study, Sam, emphasized that one of the most important elements in the sexual relationship in which she first experienced female ejaculation was her intense biological transition from childhood into adolescence. For Sam, her intense biological transition from childhood into adolescence significantly impacted her level of sexual desire, and therefore her sexual frequency of solo masturbation sex that eventually led to her first experience female ejaculation.

Gilliland (2009) reported that the respondents in her study who had prior knowledge of female ejaculation before experiencing it arrived at a greater acceptance of female ejaculation. She reasoned that greater acceptance of female ejaculation may be due to prior knowledge of female ejaculation, but that it might also be due to the sexual open-mindedness and high level of sexual education her respondents displayed. The

results of this study may help to shed light on this matter. Although not a direct interview question in the student's research design, two of the 10 women revealed having prior knowledge of female ejaculation while the stories of the other eight women about their first experience of female ejaculation inherently revealed them having no prior knowledge of it. Additionally, the 10 women were also queried about their sexual attitudes around the time of their first experience of female ejaculation. The two women, Sam and Roxanne, with prior knowledge of female ejaculation positively described their sexual attitudes around the time of their first experience of female ejaculation. Sam described her positive sexual attitudes as having "the world is my oyster approach to sex," and an approach of "I would try anything once." Roxanne described her positive sexual attitudes as "pretty open" and "somewhat liberated." Other women without prior knowledge of female ejaculation also positively described their sexual attitudes around the time of their first experience of ejaculation in a similar manner. For example, two women, Rose and Dawn, described their sexual attitudes as "relaxed." A third woman, Brenda, described hers as "open." From their responses in the written and oral interviews there's no indication that the two women with prior knowledge of female ejaculation before experiencing it came to a greater acceptance of female ejaculation in the long run than the three women who had no prior knowledge of female ejaculation. For these women at least, it appears that greater acceptance of female ejaculation over time may have had more to do with "open" and "relaxed" sexual attitudes than prior knowledge of female ejaculation. The student is concerned that this result of her study may potentially invalidate the importance of educating women on female ejaculation prior to them

experiencing it. It remains to be determined the full impact of prior knowledge of female ejaculation on women's first experiences of female ejaculation, subsequent experiences of female ejaculation, and their overall sexual identities and lives as ejaculators.

The source of female ejaculation remains unknown. The results of the student's study, like Gilliland's (2009), further reinforce the theory that large volumes of female ejaculatory fluid must come from other anatomical structures in addition to the female prostate. Like Gilliland's (2009) respondents, several of the women in the student's study released large volumes of female ejaculatory fluid suggesting the bladder is somehow involved in female ejaculation. However, similarly to Gilliland's (2009) participants, the women in the student's study determined their ejaculatory fluid was not urine either upon examination of the fluid, through trial and error in an effort to reproduce ejaculation, or upon emptying their bladders prior to sexual activity and still releasing large volumes of fluid. The scientific literature on female ejaculation shows the fluid women release during sexual arousal to be distinguishable from urine, indistinguishable from urine, or a mixture that lies somewhere in between. Until more evidence is produced through research to increase scientific knowledge of female ejaculation, it is best to remain open and receptive as to what female ejaculation really is and where it comes from in order to fully understand this mysterious and pleasurable phenomenon.

The results of the student's study support the research of Corbin and Morse (2003) on the benefits and harm that qualitative interview research poses, and the approaches they proposed to preventing participant distress. The results of the debriefing

interview in this study indicate that the 10 women benefitted from participating. When the women were asked about their experience of participating in the study they reported having an overall positive experience. Furthermore, all the women reported experiencing benefits that Corbin and Morse (2003) described. Six women reported experiencing no short-term emotional distress that Corbin and Morse (2003) described, but instead only experiencing benefits. One of these six women explicitly expressed that the interview process was no different than conversations she has on a regular basis. Sam states, “This is not very different from conversations I have with my work spouse”. Four women reported experiencing some emotional short-term distress that Corbin and Morse (2003) described, but that they overcame this. One woman requested a follow-up phone call while nine women felt no need for a follow-up phone to monitor distress. During the follow-up phone call the woman reported no serious distress, but instead still being in a place of processing what the study brought up for her, and consequently continuing to experience benefits such as catharsis and healing. Nevertheless, psychological referrals were given to support her processing, catharsis, and healing. To the student’s knowledge no undue distress of lasting harm was done to the 10 participants. Accordingly, the student’s results and study design supports the conclusions of Corbin and Morse (2003) that qualitative interview research “poses no greater risk than everyday life” (p. 335), and produces benefits “when conducted with sensitivity and guided by ethics” (p. 335).

This study brings to light two interesting patterns. The first pattern this study brings to light is between a later age of onset of various types of sexual activity, and a later age of onset of female ejaculation (See Table N14 for ages of onset of different

types of sexual activity and FE). In this study at least one of the four women with the later ages of onset of female ejaculation represented the latest age of onset of either first intercourse, giving of oral sex, or receiving of oral sex. Although age of onset of masturbation was not a direct question, one of the four women with the later ages of onset of female ejaculation spontaneously disclosed never masturbating in her life, thereby representing the latest possible age of onset of masturbation by having no age of onset of masturbation at all. This suggests some correlation between a later age of onset of female ejaculation and a later age of onset of some type of sexual activity, and a tendency for women who have a later age of onset of female ejaculation to also have a later age of onset of some type of sexual activity. Conversely, at least one of the four women with the later ages of onset of female ejaculation also represented the earliest or an earlier age of onset of either first intercourse, giving of oral sex, or receiving oral sex. This suggests that age of onset of sexual activity does not necessarily mean a matching age of onset of female ejaculation, and reinforces that what women are experiencing in their sexual relationships substantially impacts whether or not they experience female ejaculation for the first time.

The second pattern this study brings to light is between the type of personal connection that defines the sexual relationship in which women first experience female ejaculation, and their age of onset of female ejaculation (See Table M13 for the type of personal connection in the sexual relationship at the age of onset of FE). In this study the three women who experienced their first female ejaculation during solo masturbation sex in a sexual relationship with a connection of “sexual exploration, discovery, learning, or

experimentation” collectively had the earlier ages of onset of female ejaculation. In fact, two women in the connection category of “sexual exploration, discovery, learning, or experimentation” represented the earliest ages of onset of female ejaculation in the entire sample of the 10 women in this study. Annabell experienced her first female ejaculation at age 14 while Sam experienced her first female ejaculation at age 15. In contrast, the connection category of “intimacy, closeness, friendship, or attraction” and “functional” connection category both represented the later ages of onset of female ejaculation. Three of the six women in the connection category of “intimacy, closeness, friendship, or attraction” experienced their first female ejaculation at later ages with Rose, Roxanne, and Evelyn experiencing their first female ejaculation at 25, 30, and 46 years old respectively. One of the two women, Brenda, in the “functional” connection category experienced her first female ejaculation at 30 years old. All of this suggests a possible tendency for women who experience their first female ejaculation during solo masturbation sex in a sexual relationship with a connection of “sexual exploration, discovery, learning, or experimentation” to have an earlier age of onset of female ejaculation compared to women who experience their first female ejaculation in a sexual relationship with a different type of personal connection. In other words, women who have solo masturbation sex, and who start having solo masturbation sex at an earlier age may tend to have an earlier age of onset of female ejaculation compared to other women who do not. This does not necessarily mean women who experience their first female ejaculation during solo masturbation sex in a sexual relationship with a connection of “sexual exploration, discovery, learning or experimentation” may not have a later age of

onset of female ejaculation. As previously explained in the methodology chapter, a total of 22 women were interviewed for this study, but only 10 interviews were selected for use. One of the interviews not used was of a woman who experienced her first female ejaculation at age 43 while having solo masturbation sex in a sexual relationship with a connection of “sexual exploration, discovery, learning, or experimentation.”

Lastly, the student recognizes there are several limitations to this study. First, the student being a lone researcher poses limitations on this study. If a research team had been involved in interview data collection, transcription, and analysis more time would have been available to include a greater number of participants thereby strengthening the results. Additionally, if a research team had conducted this study, less time would have passed between interview data collection, transcription, and analysis making verification of the results through member validation instead of audience member validation more likely, thereby further strengthening the outcome of this study. The ethical consideration of keeping participants involved in this study over a prolonged period of time would have then been a moot point.

Second, the retrospective nature of this study poses limitations. Participants were asked to recall details about the sexual relationship they were in when they first experienced female ejaculation. Collectively, in this study the women were asked to remember events that took place between five and 22 years ago at the date of participation. In two cases the women recalled details and events from less than a decade ago. In six cases the women recalled details and events from over a decade ago, but less than two decades ago. In two cases the women recalled details and events from over two

decades ago. It is possible that the memory recall of the women regarding the details and events of the sexual relationship they were in when they first experienced female ejaculation was not entirely accurate, and that their memory recall in fact contained some inaccuracies. If this is true, the inaccuracies of the women's testimonies affect the accuracy of this study to capture and describe the essences of what women experience in the sexual relationship when they first ejaculate.

Third, this study not having a biological or chemical component poses limitations. If there had been a research team where some members were trained in biology, chemistry, or related sciences all the participants in this study could have been tested for being female ejaculators through visibly demonstrating it to these research team members. Additionally, a chemical analysis of the fluid released during physical demonstration could have been performed for all the participants. Without this process there is no way to know for certain if the participants in this study truly are female ejaculators, and if they do release or gush fluid around the time of orgasm whether or not their fluid is distinguishable or indistinguishable from urine. Even if all the participants had been identified as female ejaculators, there is no way to go back in time to visibly witness the women in this study first experiencing female ejaculation let alone perform a chemical analysis on the fluid they released or gushed the first time.

Conclusion

This study reveals that what women are experiencing in their sexual relationships significantly affects whether or not they experience female ejaculation for the first time, and ultimately their age of onset of female ejaculation. Women are indeed experiencing

various distinct elements and differences that are unprecedented in the sexual relationship in which they first ejaculate compared to previous or subsequent sexual relationships or encounters in which they do not experience female ejaculation. Even though there may be a tendency for a woman in the current study with a later age of onset of some type of sexual activity to also have a later age of onset of female ejaculation, a later age of onset of some type of sexual activity is not enough to explain later ages of onset of female ejaculation. Age of onset of different types of sexual activity does not necessarily mean a matching age of onset of female ejaculation. In this study only women who regularly ejaculate were asked about their age of onset of different types of sexual activity. It would be worth comparing and contrasting the ages of onset of different types of sexual activity in ejaculators versus non-ejaculators to see the results, and if there are any patterns.

In addition to this study uncovering some possible correlation between a later age of onset of some type of sexual activity and a later age of onset of female ejaculation, this study brings to light another pattern. Comparing the age of onset of female ejaculation across personal connection categories it appears that women who experience female ejaculation while having solo masturbation sex at an early age in a sexual relationship with a connection of “sexual exploration, discovery, learning, or experimentation” tend to have an earlier age of onset of female ejaculation. It would be worth investigating this further to confirm whether or not this is true.

Given this study is more of a comprehensive look at women’s experiences of the sexual relationship at the age of onset of female ejaculation, it would be worth

individually investigating any of the diverse “primary” elements or differences this study identifies that women are experiencing in the sexual relationship when they ejaculate for the first time including the following: (a) trust; (b) positive traits and behaviors in the partner; (c) sexual receptivity (See p. 110 for definition of sexual receptivity); (d) comfort; (e) feelings for the partner; (f) sexual stimulation; (g) undergoing a biological change or transition; (h) the overall connection of “intimacy, closeness, friendship, or attraction;” (i) the overall connection of “sexual exploration, discovery, learning, or experimentation;” or (j) the improvement or complete change in the overall “functional” connection can all be individually investigated further to deepen our understanding of what women are experiencing in the sexual relationship when they first ejaculate. Additionally, it would be worth investigating any of the equally important “secondary” individual elements or differences, created by the “primary” elements and differences, which this study also identifies women are experiencing in the sexual relationship when they first ejaculate. They include things such as: (a) sexual stimulation, (b) sexual arousal, (c) orgasm, (d) sexual desire, (e) sexual decision-making, (f) being comfortable, (g) being relaxed during sex, (h) sexual beliefs, or (i) sexual frequency.

Audience validation of the results and interpretation of the results in this study confirms that all the themes in each connection category do not necessarily apply to all women, and that various combinations of the themes define the connection present in their relationship. However, the themes in each connection category not necessarily applying to all women may suggest the possibility there may be more variation in the

characteristics of the personal connection categories defining the sexual relationship in which women first experience female ejaculation. It may also further suggest the possibility that a personal connection category defining the sexual relationships in which women first experience female ejaculation is not represented by the sample in the current study. It would be worth investigating the topic of the student's master's thesis research again to determine if there is greater variation in the characteristics of the personal connection categories, or if a personal connection category is missing.

Since the dawn of modern day research on female ejaculation in 1978, with the publication of the article *Concerning Female Ejaculation and the Female Prostate* by Sevely and Bennett, the scientific community has made strides in the knowledge and understanding of female ejaculation available today. Most importantly the idea that female ejaculation does not exist for the sake of all the women who ejaculate has been overturned. However, huge gaps in scientific knowledge and understanding of female ejaculation such as the source of female ejaculation persist. The source of female ejaculation needs to be ascertained once and for all. Sources of male ejaculation are known and understood. It is time to resolve this discrepancy between the scientific understanding and knowledge of male and female ejaculation that persists, ascertain the source of female ejaculation, and lay this mystery to rest. Scientific research on female ejaculation also needs to continue for the sake of female sexuality, and in order to help women who ejaculate have positive and healthy sexualities.

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Appendix A

Table 1

Demographics of Study Sample

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Age	43	26	40	32	25	39	39	31	51	42
Birthplace/Upbringing	Illinois	Out-of- state	Illinois	Out-of-state	Out-of-state	Illinois	Out-of-state/ Illinois	Illinois	Illinois	Out-of-state
Current Relationship Status	Married	Girlfriend	Separated/ Boyfriend	Single/Dating	Boyfriend	Widowed/ Boyfriend	Married	Single/Dating	Married	Married
No. of Children	3	0	0	0	0	3	3	1	0	2
Racial/Cultural Background	Caucasian	Caucasian & Chinese or Asian	East Indian or Asian	Caucasian	Hispanic	African American	African American	African American	Caucasian	African American
Level of Education Completed	Associates Degree	PhD in progress	Bachelors Degree	Some college. 5 years. No degree.	Bachelors Degree. Some grad school. No degree.	Some college. No degree.	Masters Degree	Masters Degree	High School Diploma	Masters Degree
Current Occupation	Restaurant Server	Student	Admin. Assistant	Barista	Assistant Manager	Student	Unemployed	Lobbyist	Director	Program Coordinator
Religious/Spiritual Affiliation	Catholic	Atheist	Raised Catholic. Currently Pantheist	Raised Catholic. Currently Semi-Spiritual Atheist	Catholic	Attends Church Monthly	Baptist Christian	Cosmic Spiritual Being	Catholic	Christian
Sexual Orientation	Hetero- sexual	Transgender	Hetero- sexual	Bisexual. Identified as lesbian at age of onset of FE.	Hetero- sexual	Bisexual	Hetero- sexual	Heterosexual with some same gender experiences.	Hetero- sexual	Hetero- Sexual

Appendix B

Table 2

Sexual History of Participants

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Types of Sexual Partners in Lifetime at Age of Onset of FE	Male	Female	Male	Female	None except with self	Male & Female	Male	Male	Male	Male
Primary/Preferred Type of Sexual Partner at Age of Onset of FE	Male	Female	Male	Female	Male	Male	Male	Male, and an emotional sensual attraction to a woman.	Male	Male
Ave. Masturbation at Age of Onset of FE	Weekly	Daily. At least 1x/day	At least weekly.	Weekly. 3x/week.	Weekly	Never in her life	Once before in her life	Weekly. At least 2x/week.	Monthly	Weekly
Ave. Porn Use at Age of Onset of FE	None	Read daily. Watched monthly.	Yearly	Yearly	Yearly	Monthly	Yearly	Yearly	Yearly	Monthly
Age of First Intercourse	20	15	19	19	18	13	13	16	19	23
No. of Intercourse Partners in Lifetime at Age of Onset of FE	3	1 (8 with someone else)	1	0	0	More than 10, but less than 20.	1	2	4	4
Age of Giving First Oral Sex	18	15	18	19	18	15	21	18	22	28
Age of Receiving First Oral Sex	20	15	19	19	20	15	17	16	30	21
No. of Oral Sex Partners Giving & Receiving in Lifetime at Age of Onset of FE	4	1	2	1	0	More than 10, but less than 20.	1	5	4	3
Sexual Education. Where the Women Learned about Sex.	Friends/ Acquaintances	Media sources	Friends/ acquaintances; Personal experiences; Sex/health ed. classes	Friends/ acquaintances; Media sources Personal experiences	Media sources; Personal experiences; Parents	Parents	Sex/health ed. classes	Friends/ acquaintances; Media sources	Friends/ acquaintances; Media sources; Personal experiences	Friends/ acquaintances; Media sources; Personal experiences; Sex/health ed. classes; Parents
Sexual Attitudes at Age of Onset of FE	"My attitude towards sex was a lot more relaxed than younger. I trusted who I was with and was able to enjoy it more thoroughly."	"I had a very 'the world is my oyster' approach to sex...I would try anything once."	"...I did not think I would have sex before I got married...I started dating and 'messing around' I thought I would do 'everything but' vaginal intercourse...I have certainly relaxed my attitudes with time and age..."	"I had no idea what I was doing. I had never masturbated because I grew up Catholic and was scared of my Mom finding out. My first girlfriend showed me what to do. I was an eager learner..."	"Ignorant and unknown. Wasn't sure what was really happening, but I enjoyed the erotic pleasure from it. I also felt scared for enjoying it because I had a sense that it was 'wrong' so I kept it a secret."	"I have and always will be open to sex, but after my first experience I have become more open and try to seek it out at every encounter..."	"Sexually intercourse was okay, however I was not into giving or having oral or anal sex...After the first ejaculation I was all for receiving oral sex."	"I had an insatiable appetite at the time so I was very much into gratification through the act of oral sex. It made me feel very powerful and in shape!"	"It's a gift that we should thank God for. One of life's pleasures that should not be taken for granted."	"...I had a pretty open, somewhat liberated attitude about sex... I was open to exploring new things, learning more and enjoying it more."

Appendix C

Table 3

Sexual History of Participants: Sexual Attitudes at Age of Onset of Female Ejaculation (FE)

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Sexual attitudes at age of onset of FE	<p>"My attitude towards sex was a lot more relaxed than when I was younger. I trusted who I was with and was able to enjoy it more thoroughly."</p>	<p>"I had a very 'the world is my oyster' approach to sex...I would try anything once."</p>	<p>"...I did not think I would have sex before I got married...I started dating and 'messing around' I thought I would do 'everything but' vaginal intercourse... I have certainly relaxed my attitudes with time and age..."</p>	<p>"I had no idea what I was doing. I had never masturbated because I grew up Catholic and was scared of my Mom finding out. My first girlfriend showed me what to do. I was an eager learner..."</p>	<p>"Ignorant and unknown. Wasn't sure what was really happening, but I enjoyed the erotic pleasure from it. I also felt scared for enjoying it because I had a sense that it was 'wrong' so I kept it a secret."</p>	<p>"I have and always will be open to sex, but after my first experience I have become more open and try to seek it out at every encounter..."</p>	<p>"Sexually intercourse was okay, however I was not into giving or having oral or anal sex...After the first ejaculation I was all for receiving oral sex."</p>	<p>"I had an insatiable appetite at the time so I was very much into gratification through the act of oral sex. It made me feel very powerful and in shape!"</p>	<p>"It's a gift that we should thank God for. One of life's pleasures that should not be taken for granted."</p>	<p>"...I had a pretty open, somewhat liberated attitude about sex... I was open to exploring new things, learning more and enjoying it more."</p>

Appendix D

Table 4

Female Ejaculation History: Current Frequency of Ejaculating

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Current Frequency of Ejaculating	“Every time my partner gives me oral sex.”	“75% of all orgasms result in ejaculation. With oral sex it is almost every time.”	“Every time I have sex with my boyfriend, pretty much.”	“Almost every time while masturbating (2-3 time a week) occasionally with partners. I don’t have a regular sex partner, and ejaculation can get pretty messy so I save it for guys/girls I know can handle it.”	“I have sexual intercourse with my partner about 5 times a week. Experience female ejaculation 4 of 5 times especially when g-spot and clitoral stimulation are performed together.”	“At least 1 time/day. My current boyfriend and I have a very healthy and active sex life.”	“Most often experience female ejaculation every time I have sex, whether it is sexual intercourse or foreplay.”	“It’s a mind thing. If I am having a holistically pleasurable experience then I am able to often. I’ve learned to operate with the sensations over time.”	“Often depending on my partner.”	“Probably every other time I have sex. Percentage: about 50%-75% of the time. After the baby more like 50%. More like 75% before the baby with my husband for the past 5 years.”

Appendix E

Table 5

Female Ejaculation (FE) History: Feeling of Ejaculating

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Feeling of First FE	“It felt great.”	“A buildup of pressure, almost like needing to urinate, but different, followed by what can only be described as a very satisfying release.”	“...Wet, but it's different from regular vaginal secretions and peeing.”	--“...Physically it felt amazing like an ultimate release.” --“I felt great physically.”	“A rush.... A new and pleasurable sensation.”	“Intense pleasure.”	“A wonderful feeling.”	--“The only thing I can think of is to compare it to when I was pregnant with my daughter, and my water needing to break. That urge of like I have to pee right now. I did think that I had to pee. But, then again I was not physically able to let him go either to be able to get up and go pee, and stop myself. It was like I had to get this off of me. There was a sense of urgency, and it was like pressure.”	“Intense pleasure—like a wave.”	“It felt like a really good orgasm.”
										--“There was a rush of sensations—very over-stimulating. I was seized by an impulse to urinate, or I thought to pee. I couldn't control the release. The more I struggled to control it the greater the impulse became until finally I felt a stream of cum.”

Appendix F

Table 6

Female Ejaculation History

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Description of First FE Fluid	--"Clear" --"A waterfall"	--"Clear. Non-viscous." --"It was quick." --"One short burst."	"Clear. Colorless."	"Mostly clear and watery. Not like vaginal lubrication that comes with arousal. It's a lot like urination, but with a different taste and smell."	--"It felt like urine. Yet upon examination on what had happened it had a milk-like substance to it." --"A little thicker, a more milk-like substance."	--"Clear. Like a pool of water." --"It wasn't thick or anything like that. It was just clear, watery fluid."	--"Warm liquid (not thick)." --"It was clear." --"It was warm, wasn't real thick. It was like a thin liquid ...like skim milk, the color and the consistency. Because... real watery, and it's not too thick..."	--"Clear with white color in certain spots. There wasn't an odor." --"There was no blood in it." --"Elastic, just really sticky."	--"Warm with the consistency of urine." --"It did have a smell to it."	--"Somewhat cloudy, not quite clear. It had a faint smell, kind of musky." --"A little slippery."
Fluid Amount of First FE	Compact disc	"Between a tablespoon and soda can."	"A little more than a tablespoon."	Larger than a compact disc. --"It was a lot. Approximately the size of this paper."	Larger than a compact disc. --"The size of a football the first time. Even though I experience it regularly the size always varies. But, it is largest when I have not orgasmed for a long period of time."	Larger than a compact disc. --"It was real big. Like two compact discs. It soaked the sheets."	Larger than a compact disc. --"The wet spot on the sheet was big, and my thighs were covered."	Compact disc	Larger than a compact disc. --"An old album."	"Between the size of a soda can and a compact disc."
Timing of First FE During Sexual Response Cycle. Before, During, or After Orgasm	During	"During the very beginning of orgasm."	Uncertain. --"I first noticed it after the orgasms. Though nowadays it's before during and after."	During	During	During	During	During	During	During
Sexual Stimulation Producing First FE	Combined vaginal g-spot and clitoral.	Clitoral	Combined vaginal g-spot and clitoral.	Clitoral	Combined vaginal g-spot and clitoral.	Clitoral	Clitoral	Combined vaginal g-spot and clitoral. Emphasizes clitoral.	Vaginal g-spot	Vaginal g-spot and cervical
Multiple Orgasms During first FE	No	Yes	Yes	Yes	No	No	No	Yes	Yes	No
Multiple Ejaculations During First FE	No	No	No	Yes	No	No	No	No	Yes	No
Timing of First FE in Menstrual Cycle	Not menstruating	Not menstruating	Not menstruating	Not menstruating	Not menstruating	Not menstruating	"Halfway through menstrual cycle"	Not menstruating	Not menstruating	Not menstruating

Appendix G

Table 7

Female Ejaculation (FE) History: Reaction to First FE

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Reaction to First FE	--"Surprised ... I didn't realize my body was capable of that." --"Oh my God, I don't believe I can do that." --"I was embarrassed."	--"Oh. Cool." --"Slight disbelief." --"It was kind of like, 'Huh, that happened.' I'm one of those very naturally curious people so I'd researched very heavily on everything sex... at that point. I was slightly surprised, but not more than 'okay.' It was interesting."	--"I was sort of curious and fascinated. Like, 'Wow, I am wet, but it's different from regular vaginal secretions and peeing.' --"I was overwhelmed simply because it was the first time I had sex..."	--"I honestly thought I'd peed in the bed and was kind of embarrassed." --"Embarrassed. We didn't know what had happened, and thought I'd peed the bed." --"After the first time it started happening every time, and I had to train myself to not do it just to avoid constant messes. Now I embrace it, and it's the only way I can truly feel sexually satisfied, but I no longer do it with each orgasm." --"I taught myself not to do it. I had to teach myself to be able to orgasm without ejaculating just so we could still have lots of sex, and not have to worry about the mess. It was kind of annoying, because for actually a few years I couldn't do it at all. I got so good at teaching my body to not let go that much that I just stopped being able to do it. I really wish I wouldn't have done that, because it's one of the only ways that I really feel completely sexually satisfied is when I do it. For me, that's just the ultimate release physically and emotionally. I don't think we really handled it the best way we could have. At the time we were really young, we didn't now any better, and we just made due with what we had." --"It's one of the things where I usually don't do it with my first few orgasms, but if I'm getting up to four or five then that's when I do. So, in a way that works out well I think for me, because I can have sex, and I can still have an orgasm and feel good. I don't have to completely let go. It's also kind of a way of protecting myself, and maybe this is because I'm not in a relationship." --"I was incredibly sexually inexperienced at the time, and didn't know what had happened. I thought there was something wrong with me."	--"Scared and not sure what happened. Thought I had urinated and changed the sheets in my bed." --"Felt a bit overwhelmed and fearful. Wasn't sure if that much fluid was 'normal.' However, it also felt very pleasurable, and I was willing to overcome the fear to feel that again." --"Maybe I'm loose down there."	"Confused. Scared."	"I wondered if other women had the same experience that I was having. 'I felt high. The extreme body rush, body shaking, and the ejaculation were over-whelming. Enjoyed it so I wanted it to happen again."	--"After the experience, having a wet bed like that and feeling the ejaculation come forth, then there was an experience of shame and guilt, and that was a multi-level emotional experience." --"I was scared because the powerful sensations took over me, and made me feel like I would consume my partner until this nut was unleashed." --"There was some shame and guilt afterwards. I felt being a woman I liked sex too much. Plus to have my friends witness this experience was overwhelming."	--"I was embarrassed. I thought that I had urinated. He was a new lover. You're trying to impress somebody, and all of the sudden you wet yourself. I was like, 'Oh my God! How embarrassing. I'll never see this guy again.' --"I told him to never touch that spot again. I thought I peed." --"I thought maybe he hit something."	--"I was curious to know if I could make it happen again. I was a little embarrassed, but I got over it." --"Surprised. I wondered if I had urinated, but I soon realized it wasn't urine."

Appendix H

Table 8

Female Ejaculation (FE) History: Reaction of Sexual Partner to First FE

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Reaction of Sexual Partner to First FE	“He was thrilled.”	NA	“He liked that I was aroused and wet.”	--“That’s not supposed to happen. Did you just pee?” --“Somewhat poorly. She’s never seen anything like it, and didn’t like the mess.”	NA	“He did not know. He just thought I was real wet.”	NA	“He was quite shocked, because I locked my legs around him and squeezed my thighs together so tight I would not release him until I came. He had already came.”	“He laughed, and told me to relax, that it was perfectly normal.”	“Surprised. He thought I peed. Then he realized the fluid wasn’t urine.”

Appendix I

Table 9

Female Ejaculation (FE) History: Preparing for FE Fluid

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Preparing for FE Fluid	NA	NA	NA	“We got towels, and kept going. Even though it was a mess it turned us on.”	--“I would prepare for fluid by laying on a towel or an old rolled up t-shirt.” --“I would always keep a towel or an old t-shirt under my bed, and try to keep that hidden from my Mom. I would have to have it, because I just figured this is what happens.”	NA	NA	NA	NA	NA

Appendix J

Table 10

Female Ejaculation (FE) History: Sexual Decision-Making

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Sexual Decision-Making	“The first I was surprised, and didn’t know what made me ejaculate. Now I know what my body responds to so I can make the decision about when I’m ready.”	“I do actually try to hold it back, because my partner especially during oral sex really doesn’t not like it. She says it’s a little too surprising.”	NA	NA	NA	NA	NA	“I still shock men if the orgasm is too much. I try to control it.”	--“I made him stop the first time. Now if a man doesn’t get me there I don’t see him again.” --“Now when I interview other lovers I always ask the question if they’ve been with someone who squirts. If they haven’t I don’t usually entertain the idea of them being a possible lover.”	NA

Appendix K

Table 11

Female Ejaculation (FE) History: Subsequent Experiences of FE

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Subsequent Experiences of FE	<p>"The first I was surprised and didn't know what made me ejaculate. Now I know what my body responds to so I can make the decision about when I'm ready."</p>	<p>"There is definitely more fluid now if I don't hold it back (My current partner is not a huge fan.) And it happens now with only clitoral stimulation, especially if it takes awhile to reach orgasm."</p>	<p>"No I am older, more experienced, have dated more and had other partners. I can enjoy sex and self-stimulation for their physical attributes as opposed to just pure emotion. I ejaculate more."</p>	<p>"After the first time it started happening every time, and I had to train myself to not do it just to avoid constant messes. Now I embrace it and it's the only way I can truly feel sexually satisfied, but I no longer do it with each orgasm."</p>	<p>"Other experiences, especially as I got older and had a partner, were much more pleasurable, especially since the men it has happened with seem to enjoy it as much as I do."</p>	<p>--"It is only getting better for me, because I am learning what works and what does not." --"At first it was my clitoris. Now it's the inside of my vagina."</p>	<p>"I have learned how to have multiple orgasms and multiple ejaculations. It has only gotten better for me."</p>	<p>"The first time was the tip of the ice burg. My later same gender experiences were more pleasurable and quite titillating...I can ejaculate by masturbation now. I can sometimes shoot the ejaculation, project it to squirt, a trick I learned from an older female companion."</p>	<p>"I made him stop the first time. Now if a man doesn't get me there I don't see him again."</p>	<p>"My first experience caught me by surprise. However, now I know when it's about to happen. I now can gush more fluid and can do it multiple times."</p>

Appendix L

Table 12

Female Ejaculation (FE) History: Examining First FE Fluid

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Examining First FE Fluid	NA	NA	NA	<p>“After the first couple of times it happened I was like, ‘I’m going to pee before we have sex just to make sure that’s not it.’ But, then I was still doing it anyway. We looked it up finally, and we found out this does happen every once in awhile for some people, it’s not crazy, and I’m not peeing. But, at the same time it was kind of annoying, because you don’t want to sleep in that.”</p>	NA	<p>“I went in the bathroom and took a towel and tissue, and was like, ‘What is that? Did I urinate on myself?’ That’s what I thought at first. Then I sat there, and thought about it. I was like, ‘Maybe it was an orgasm. Maybe it was something that was supposed to happen.’ After that I came to the conclusion that that’s what it was after trial and error a couple of times the next day or two.”</p>	NA	NA	NA	<p>--“I actually hadn’t realized what happened until my boyfriend called my attention to the pool of fluid laying on his stomach. I looked at it, and was like, ‘I don’t know what that is.’ He was like, ‘Did you pee?’ I was like, ‘No. Not that I know of.’ We both inspected if of course, and were like, ‘Well, no, it’s not urine.’ It kind of clicked I was like, ‘I’ve heard about this before. I think this might be female ejaculation.’ So, we were both like, ‘Okay.’ I don’t think we were really freaked out by it, but we were both surprised. He a little bit more surprised than I was. I was a little embarrassed, because I made a little bit of a mess. So, I was like, ‘Uh, Sorry.’”</p> <p>--“We first looked at it. It was cloudy, grayish, almost clear, but not quite. So that wasn’t the typical color of urine. Basically, we both smelled it, stuck our fingers in it. We were like, ‘Well, no it’s not urine.’ It had it’s own little smell, but it wasn’t urine. It had an odd little smell, kind of musky. Didn’t smell like roses or anything, but it didn’t really stink either.”</p>

Appendix M

Table 13

Results: Type of Personal Connection in Sexual Relationship at Age of Onset of FE & Primary/Secondary Elements and Differences

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Type of Personal Connection in Sexual Relationship at Age of Onset of FE	Intimacy, closeness, friendship, or attraction	Sexual exploration, discovery, learning, or experimentation (Solo masturbation)	Intimacy, closeness, friendship, or attraction	Intimacy, closeness, friendship, or attraction	Sexual exploration, discovery, learning, or experimentation (Solo masturbation)	Functional	Sexual exploration, discovery, learning, or experimentation (Solo masturbation)	Intimacy, closeness, friendship, or attraction; and Functional	Intimacy, closeness, friendship, or attraction	Intimacy, closeness, friendship, or attraction
Primary Element or Differences in Sexual Relationship at Age of Onset of FE	--Trust --Overall personal connection (friendship)	--Sexual stimulation --Biological change or transition *--Comfortable (Change in sense of self from negative to positive increases ease and frequency of FE during subsequent sexual encounters)	--Feelings for partner --Traits/behaviors of partner (Caring about her sexual-pleasure)	--Overall personal connection (closeness) --Sexual receptivity (To her body's signals, and going along with what feels natural to do)	--Overall personal connection of sexual exploration, discovery, learning, or experimentation (Sexual receptivity to her body's sexual signals, and acting on them.)	Comfortable (body image; and enjoying spending time together non-sexually due to suspension of uncomfortable elements in general relationship such as negative traits/behaviors of partner producing negative feelings for partner and relationship conflict)	--Comfortable (Privacy, previous sexual experience, sexual receptivity)	--Overall personal connection (Improvement or complete change in personal connection from functional to one with friendship and intimacy)	--Traits/behaviors of partner (Sexual knowledge and experience of how to sexually stimulate a woman to produce FE)	--Sexual receptivity (Of partner to what the woman desires for sexual stimulation, arousal, and orgasm)
Examples of Equally Important Secondary Elements or Differences in Sexual Relationship at Age of Onset of FE	--Sexual receptivity --Being relaxed during sex (No longer embarrassed about receiving oral sex, and not first time having sex/has sexual knowledge and experience) --Sexual decision-making	--Orgasm --Sexual desire and frequency	--Sexual beliefs --Sexual decision-making	--Comfortable	--Sexual stimulation --Sexual arousal --Orgasm	--Sexual decision-making --Sexual desire	--Sexual decision-making --Sexual receptivity --Sexual stimulation --Orgasm	--Sexual desire --Sexual stimulation --Sexual arousal --Orgasm --Having things in common --Feelings	--Sexual Stimulation	--Orgasm (Regular orgasms) --(Take control and be assertive sexually without fear of judgment + enough sexual frequency + becoming more comfortable =better sex)

Appendix N

Table 14

Sexual History: Ages of Onset of Different Types of Sexual Activity

Name & Age of Onset of FE	Rose 25	Sam 15	Dawn 19	Jenna 19	Annabell 14	Brenda 30	Vicky 17	Gwen 17	Evelyn 46	Roxanne 30
Ave. Masturbation at Age of Onset of FE	Weekly	Daily. At least 1x/day	At least weekly.	Weekly. 3x/week.	Weekly	Never in her life (No age of onset of masturbation)	Once before in her life	Weekly. At least 2x/week.	Monthly	Weekly
Age of First Intercourse	20	15	19	19	18	13	13	16	19	23
Age of Giving First Oral Sex	18	15	18	19	18	15	21	18	22	28
Age of Receiving First Oral Sex	20	15	19	19	20	15	17	16	30	21