

Evolution and Race Differences in Views on and Prevalence of Fellatio: Did Bill Clinton “Have Sex with That Woman, Miss Lewinsky”?

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Abstract

A number of studies have implied that fellatio may reflect aspects of a slow Life History Strategy. Specifically, it involves bonding with the partner, and if the semen is swallowed, the woman's immune system may become used to one specific male, aiding pregnancy by that male. We surveyed the small number of available studies on race differences in the prevalence of fellatio. Consistent with Life History Theory, it is less prevalent among blacks than among whites and is considered, by blacks, to be far more serious and intimate. However, fellatio is also less prevalent among Northeast Asians than among whites, implying that the difference might partly reflect issues such as race differences in curiosity and Openness, specifically in relation to sexual matters.

Keywords: Race, Life history strategy, Fellatio, Sex

1 Introduction

President Bill Clinton famously told the world in 1998 that, “I did not have sex with that woman, Miss Lewinsky.” However, Miss Lewinsky did fellate President Clinton; that is, engage in oral sex with him. According to a 1999 study, 44% of men and 37% of women believed that “oral sex” counted as “having sex” (Worthen, 2021, p. 133).

Interestingly, there are also race differences in this view. A meta-analysis of the views of young American adults found that “a majority believe oral sex to be less intimate compared to intercourse and that oral sex does not spoil virgin status.” However: “African Americans may view oral sex as more ‘intimate, involved, and serious’ and hence would be more likely to agree that oral sex is sex. . . European Americans being statistically more likely than African Americans to agree that oral sex is not sex” (Dotson-Blake et al., 2012). In other words, from an African American viewpoint, Clinton lied to the nation. He had indeed “had sex with that woman,” because she had fellated him. Why would there exist such stark differences in racial attitudes towards oral sex? Indeed, are there race differences in the extent to which oral sex is engaged in at all? If so, why is this the case?

2 What Is fellatio?

As was explained in Dutton (2018a), “Fellatio” is defined as the oral stimulation of the penis, especially to orgasm. The word derives from the Latin “*fellatus*,” meaning “to suck” and is commonly referred to as a “blow job,” “giving head” or “noshing.” Fellatio is a form of foreplay in sexual relationships as well as a sexual act in itself. The practice has been found in animals, ancient societies, and also in contemporary tribal societies. This may imply that fellatio involves some form of evolutionary benefit. However, it could be a side effect of the way sexual functions are wired that manifests repeatedly because it is not selected against. It could also be a “side effect” of some other adaptive trait.

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Flying foxes and fruit bats have been found to engage in oral sex, with coitus lasting longer between fruit bats if the male is first orally pleased (Tan et al., 2009). The *Kama Sutra*, written in the 1st century AD in India, explores the subject of fellatio in some depth. Oral sex is portrayed on the Greek Attic red figure Kylix, dated to approximately 510 BC. Anthropologists have documented homosexual fellatio among assorted tribal groups. The initiation rite of passage of the Simbari of Papua New Guinea involves boys, aged between 7 and 10, daily fellating older males and swallowing their semen. This is, supposedly, the only way they can attain their own semen (Soble, 1997, p. 124).

3 The evolution of fellatio

A number of studies have indicated direct benefits to fellatio in terms of fertility and health. The first is that oral sex makes fertilization more likely. Tan et al. (2009) suggest that fellatio increases the extent to which the penis is lubricated, it increases the size of the erection, and it increases the length of sexual intercourse. This was demonstrated based on research with fruit bats. All of these factors, they maintain, increase the likelihood of fertilization. The researchers aver that saliva reduces the risk of transmitting certain sexually transmitted diseases, meaning a healthier partner and offspring. Such behaviour may, however, also risk disease transmission in humans.

Further, when a woman regularly swallows her partner's semen, the woman's immune system becomes used to it, making it more likely that her immune system will accept the proteins in this specific man's semen. It has been documented that many miscarriages, or preterm births, occur because the mother's immune system treats these proteins, also found in the foetus, as foreign invaders. One study documented that 82% of women without preeclampsia — high blood pressure during pregnancy which can cause miscarriages and premature births — regularly practiced fellatio and swallowed, but only 44% of those with preeclampsia regularly fellated their husbands and swallowed (Koelman et al., 2000). Consistent with this exposure model, a number of studies have found that women with greater vaginal exposure to their partner's semen were less likely to suffer from pre-eclampsia (Saftlas et al., 2014; Di Mascio et al., 2020, meta-analysis) and increased exposure to a specific mouse's semen means that female mice better tolerate pregnancies (Robertson et al., 2009). Sperm donor pregnancies, where there has been no exposure to the partner's semen, also have a higher preeclampsia risk (Kho et al., 2009). Accordingly, fellatio aids pregnancy and aids offspring survival. One can legitimately imagine a situation where a couple presents to a doctor because they are struggling to become pregnant or stay pregnant and the doctor inquires of the wife: "Well, are you regularly fellating your husband and swallowing?" It should be stressed, however, that no attempt appears to have been made to replicate Koelman et al. (2000). Nevertheless, it is clear that other studies are indirectly congruous with it.

These results indicate that fellatio appears to have evolved, in part, because it is associated with fertility and health. However, parallel dimensions to its evolution have been explored. Pham and Shackelford (2013) have argued that infidelity detection or, perhaps more likely, infidelity prevention may be one reason why women may wish to orally pleasure their partners. Perhaps cues of infidelity could be unconsciously picked up via tasting the penis. Pham et al. (2015) found that both men and women reported being more satisfied with their relationships the more oral sex they received. Moreover, length of relationship was moderately positively correlated with frequency of and length of oral sex. Thus, one aspect of the purpose of oral sex would appear to simply be bonding. This is most obviously evidenced in the so-called "Sixty-Niner", when a male-female couple perform oral sex on each other simultaneously. Giving oral sex within a relationship has been shown to be positively associated with the personality trait Agreeableness; that is altruism and empathy (Pham et al., 2015), which is itself associated with the capacity to foster strong bonds.

4 Fellatio, group differences, and Life History Strategy

A number of studies have found race differences in the extent to which fellatio is performed. If an important dimension to fellatio is bonding, then this is to be expected. Rushton (2000) showed that different racial groups vary in their Life History Speed, in a model known as Differential-K. Fast Life History (LH)

Table 1: Relative ranking on a set of life history variables across three major races: Northeast Asians (“Asian”), Caucasians (“European”), and Sub-Saharan African (“African”). Adapted from Rushton, 1995, Table 1.1.

	Asian	European	African
Maturation Rate			
Gestation time	Longer	Intermediate	Shorter
Skeletal development	Later	Intermediate	Earlier
Motor development	Later	Intermediate	Earlier
Dental development	Later	Intermediate	Earlier
Age of first intercourse	Later	Intermediate	Earlier
Age of first pregnancy	Later	Intermediate	Earlier
Life span	Longer	Intermediate	Shorter
Personality			
Activity level	Lower	Intermediate	Higher
Aggressiveness	Lower	Intermediate	Higher
Cautiousness	Higher	Intermediate	Lower
Dominance	Lower	Intermediate	Higher
Impulsivity	Lower	Intermediate	Higher
Self-Concept	Lower	Intermediate	Higher
Sociability	Lower	Intermediate	Higher
Social Organization			
Marital Stability	Higher	Intermediate	Lower
Law abidingness	Higher	Intermediate	Lower
Mental health	Higher	Intermediate	Lower
Administrative capacity	Higher	Higher	Lower
Reproductive Effort			
2 egg twinning (per 1000 births)	4	8	16
Hormone levels	Lower	Intermediate	Higher
Size of genitalia	Smaller	Intermediate	Larger
Secondary sexual characteristics	Smaller	Intermediate	Larger
Intercourse frequency	Lower	Intermediate	Higher
Permissive attitudes	Lower	Intermediate	Higher
Sexually transmitted diseases	Lower	Intermediate	Higher

strategists, evolved to an easy but unstable ecology, invest bio-energetic resources in reproduction. As life is unpredictable, they are adapted to copulate with as many fertile, healthy people as they can, investing little in the partners and hoping some offspring survive. Slow LH strategists are adapted to a harsh yet predictable ecology, where the group has reached the carrying capacity of the ecosystem. Thus, they start competing with each other. This selects for “quality over quantity”. When a fast life history strategist has lots of offspring by lots of partners and invests nothing in them then, in such an ecology, the offspring could all perish. As such, they invest more energy in the nurture of their (smaller number of) offspring and energy in their (smaller number of) sexual partners, to ensure their offspring's survival. To this end, they also create strongly bonded units. Accordingly, to the extent that fellatio is a matter of bonding, there should be racial differences in its extent and in attitudes towards it.

Rushton argues that Sub-Saharan Africans are, on numerous measures, faster life history strategists than are Caucasians, as would be predicted from the highly divergent nature of their ancestral environments. The most salient differences are set out in Table 1. For a more detailed exploration of these differences, which examines more of them, see Dutton (2020).

Pham et al. (2015) have shown that Agreeableness (an aspect of a slow LH) positively predicts

Table 2: Race differences from D'Souza et al. (2014), Table 3.

	White	Black	Mexican	Hispanic	Other	<i>p</i>
<i>Males</i>						
N. performed oral sex on	12.6	5.2	4.2	6.2	3.1	<.001
Age first performed oral sex	19	20.4	21	19.1	22.3	<.001
Ever performed oral sex	90.8%	76.5%	72%	84.6%	62.9%	
More oral than vaginal sex partners	12.2%	7.9%	11.3%	8.3%	7%	<.001
First sexual exp. <18	55.7%	75.4%	56.8%	72.3%	25.6%	<.001
First oral sex exp. < 18	37.5%	23%	22.4%	27.2%	13%	<.001
Oral sex at sexual debut	43.5%	17.6%	25.9%	26.5%	32%	<.001
Oral sex after sexual debut	49.5%	60.7%	48.2%	59.4%	33.4%	-
Never oral sex	7%	21.7%	25.8%	14.1%	34.6%	-
<i>Females</i>						
N. performed oral sex on	4.5	2.5	2.1	2.7	2.6	<.001
Age first performed oral sex	19.6	21.9	21.2	21.9	21.5	<.001
Ever performed oral sex	90.7%	63.2%	63.1%	75.5%	73.9%	<.001
More oral than vaginal sex partners	11.1%	8.9%	6.2%	7.2%	8.1%	<.001
First sexual exp. <18	53.8%	66.6%	48%	46%	30.2%	<.001
First oral sex exp. < 18	32.8%	14.4%	14.7%	16.2%	19.2%	<.001
Oral sex at sexual debut	40.5%	12.7%	23.1%	21.2%	31.7%	<.001
Oral sex after sexual debut	52.5%	54.6%	42.1%	56.5%	44.3%	-
Never oral sex	7%	32.7%	34.7%	22.3%	23.9%	-

performing oral sex. The available studies on fellatio are congruous with this. They all find that African Americans, compared to whites, are significantly more likely to have never been fellated or to have never fellated and to have experienced or performed fellatio in a relationship only after the performance of penetrative sex. This ordering is reversed in whites (D'Souza et al., 2014). So, let us look at these data. They can be seen in Table 2.

Unfortunately, studies comparing white and Northeast Asian people are confounded by the fact that relatively youthful samples were employed (e.g. Meston et al., 1996). Northeast Asians appear to become sexually active later than white people (Rushton, 2000). Moreover, there is evidence that Northeast Asians are extremely sexually restricted, and this includes oral sex (Meston et al., 1996). Indeed, even among adult samples, 50% of white Americans had engaged in oral sex in the last year compared to only 7% of Chinese (Parish et al., 2007). Consistent with the idea that fellatio is associated with slow LH, some research has found evidence that lower socioeconomic status (SES) people are less likely to engage in fellatio than higher SES people (e.g. Schofield, 1965). Black people in the US, on average, are of lower SES than white people (Lynn, 2002), so SES may be the mediating factor.

It can be seen from Table 2 that oral sex is more prevalent among whites than blacks, in the case of both men and women. Whites, on average, have more oral sex partners, perform oral sex at a younger age, perform oral sex more, are more likely to have more oral than vaginal sex partners, are more likely to have oral sex as their first sexual experience, are more likely to have experienced oral sex during their sexual debut, and are less likely to have never had oral sex. This is despite the fact that, as noted in Table 1, Blacks are, in general, more sexually promiscuous and experimental. Moreover, the authors found white adolescents progressed through a predictable pattern of kissing, above the waist touching and then below the waist touching before engaging in coitus. Black adolescents engaged in very little behaviour of this kind and quickly advanced to sex. It can be seen in Table 2 that "Hispanics" — usually a blend between whites and Native Americans (see Dutton, 2020) — are between whites and blacks in terms of oral sex performance. Based on various measures, we would expect Hispanics to follow a faster LH strategy than

whites but slower than blacks (see Lynn, 2002), and the results are consistent with this.

5 What do these results tell us?

These results, it should be noted, are consistent with a number of other published studies. A literature review (3 studies in the US) on this subject found that one study noted that 87% of white American but only 70% of African American women reported having ever received cunnilingus, implicitly from partners of the same race. However, 93% of white American women reported that they had, at some point, fellated a man compared to only 65% of African American women. Another study in the US found that 81% of white men had performed cunnilingus on a female compared to 51% of African American men. Further, 75% of white women had fellated a male compared to 34% of black women who had done so. However, only 10% of black women had themselves experienced cunnilingus (Jemmott et al., 1995). A study of teenagers aged 15 to 19 in the US found that 45% of white males had given oral sex whereas 50% of white girls had given oral sex. Among blacks, around 30% of males and females had given oral sex (Shapiro & Maras, 2015, p. 42). Auslander et al. (2009) conducted a study of 202 American girls aged between 14 and 21 (26% white, 43% black and 31% Hispanic) and found that black girls were significantly less likely than white or Hispanic girls to have ever given or received oral sex and, if they had, they were significantly older than whites or Hispanics when they had it for the first time.

The race differences we have noted can be neatly understood in terms of Life History Theory. As we have seen, one possible reason to perform oral sex is as part of a mate retention strategy. Fast LH strategists should be inclined to invest more energy in reproduction and far less energy in maintaining their relationship or bonding with their partner; as their strategy would be inherently promiscuous. Accordingly, if oral sex is primarily a matter of partner retention, then fast LH strategists should be less inclined to perform it on their partner. This is indirectly evidenced by the way in which black couples in the US have less oral sex than do white couples. As we have discussed, slow LH strategists have longer, more faithful, more stable and happier marriages and so it seems that, implicitly, oral sex is an aspect of ensuring this.

An alternative possibility is that heightened oral sex among European people reflects some underlying European personality trait relating to curiosity; exploring your partner and exploring ways in which you can pleasure each other. In this regard, it has been found that Europeans are higher than East Asians in a series of polymorphisms that relate to Openness and curiosity (Kura et al., 2015). In the US, whites score higher in Openness even than acculturated East Asian Americans (Benet-Martínez & Karakitapoglu-Aygun, 2003; Eap et al., 2008). Consistent with this, a survey of sex workers found that white clients were particularly interested in “kinky sex” and also in kissing compared to blacks. The Northeast Asian sample was not big enough for statistically significant comparisons, but they liked kissing less than did whites (Francis & Kirkegaard, 2023). This explanation would also be congruous with the social class differences in fellatio noted above (Schofield, 1965). Openness is associated with socioeconomic status (Sutin et al., 2015).

It is interesting, with regard to the racial differences in fellatio, that kissing appears to have developed as a learned behaviour. Anthropological studies find that only 46% of societies engage in kissing and that it is not practiced at all in primitive Central American or Sub-Saharan African societies or in Melanesia. It has been argued that the practice started in Ancient Mesopotamia in about 2500 BC and spread as a learned behaviour, possibly because it aided bonding or reflected a desire to bond (Arboll & Rasmussen, 2023). It has been suggested that mouth-to-mouth kissing stems from primate grooming behaviour, but that it has only expressed itself in certain societies and especially more developed ones (Lameira, 2024), though this would imbricate with Life History Strategy. The oldest depiction we have of female-on-male fellatio in Europe is on a 5th century BC Greek Kylix (drinking cup) at the Louvre in Paris, this society being relatively developed. Thus, it may be that oral sex is an expression of a desire for sexual exploration and bonding occasioned by being a developed, and, thus, relatively “open” and “curious” society.

We have seen that another proposed reason for oral sex is infidelity detection. From the perspective of a fast LH strategist, partner infidelity would not be an especially significant concern because they would be investing relatively few resources in either the sexual partner or any resultant offspring. As such, we would expect — for this reason as well — lower levels of oral sex among blacks than whites and this is what

we find. The pattern of sexual intercourse noted among blacks — very little petting and moving straight to penetrative sex — seems to imply less of an interest in exploring the partner and even in discerning factors that might be germane to the future relationship, such as genetic similarity, and this may be another relevant issue in terms of the function of oral sex. It has been argued that we mate assortatively to optimize the extent to which we pass on our genes, and we unconsciously pick up clues of “genetic similarity” (Rushton, 2005). Oral sex, tasting the bodily fluids of one’s potential partner before committing to sex, may be a means of doing this, as may be tongue kissing. Fast LH strategists are simply less sexually selective and select more for physical health than for compatibility, so oral sex at an early stage would be less necessary.

The next proposed reason is that in order to become pregnant, and stay pregnant, by a specific male. In this sense, fellatio involves investing energy in a specific male in order to become pregnant by that specific male, who is attractive for whatever reason. Alternatively, from the male perspective, receiving oral sex relates to impregnating a specific female. We would expect this to be anathema to a fast LH strategist, who would be better off investing his time and energy in sexual intercourse with a variety of partners. By contrast, for the slow LH strategist, penetrative sex is a serious risk because you only want to get pregnant by the “right man”, one who is strongly adapted to the specific ecology and who will invest in you and your offspring, promoting offspring survival (see Dutton, 2018b). If you’re a slow LH man, and you will invest in the partner and offspring, you want to ensure that she will not cuckold you, that she is genetically healthy and that she will be a good mother. Thus, from your perspective, penetrative sex is more intimate than oral sex. However, it seems likely that cunnilingus is more relevant as a means of avoiding cuckoldry, as it pleases the female and causes her to bond with the male.

In summary, fellatio appears to combine a number of inter-related factors: it appears to ensure that the female gets pregnant by a particular male and bonds with him (implying a slow life history strategy), but race differences in its prevalence are complicated by race differences in Openness and general curiosity. This helps to explain why fellatio is so low among slow Life History Strategy North East Asians.

6 Future research

In order to test the hypotheses advanced here, it would be useful to explore, at the individual level, whether life history strategy is correlated with oral sex prevalence or preference. In this regard, it would also be very useful if general sociosexuality could be controlled for, as this is a component of a fast life history strategy.

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