

Pubic Hair Preferences, Reasons for Removal, and Associated Genital Symptoms: Comparisons Between Men and Women

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ABSTRACT

Introduction. Pubic hair grooming and removal are common behaviors among men and women. However, little is known about the reasons for grooming, preferred pubic hairstyle of sexual partners, and symptoms associated with regular grooming.

Aims. This study aims to assess pubic hair removal/grooming practices, pubic hairstyle preferences, and genital outcomes associated with pubic hair removal among men and women in a college sample.

Methods. Data were gathered from 1,110 participants (671 women and 439 men) at a large public Midwestern university and a small Southern public university.

Main Outcome Measures. Items assessed demographics, pubic hair grooming and removal practices in the past 4 weeks, reasons for pubic hair status, preference for pubic hairstyle of sexual partners, and symptoms associated with removal and grooming.

Results. Most (95%) participants had removed their pubic hair on at least one occasion in the past 4 weeks with shaving being the most commonly reported hair removal technique by women (82%) and men (49%). Women were significantly more likely to report their typical status as hair-free (50% vs. 19%; $\chi^2 = 165.528$, $P < 0.001$) and men were significantly more likely to prefer a hair-free sexual partner (60% vs. 24%; $\chi^2 = 211.712$, $P < 0.001$). Genital itching was experienced on at least one occasion by 80.3% of pubic hair groomers and was the most commonly reported side effect.

Conclusion. Genital grooming and pubic hair removal are common practices among both men and women of college-age. Women are likely to report stronger associations with feelings of cleanliness, comfort, sex appeal, social norms of their peer group, and affordability as reasons for their chosen pubic hair style. Women also report more experiences with genital side effects of pubic hair removal, an expected result as women are removing pubic hair more frequently and more completely than their male counterparts. **Butler SM, Smith NK, Collazo E, Caltabiano L, and Herbenick D. Pubic hair preferences, reasons for removal, and associated genital symptoms: Comparisons between men and women. J Sex Med **,**,**_**.**

Key Words. Pubic Hair; Removal; Genital; Symptoms; Vulva

Introduction

Body hair removal and depilatory practices are associated with cultural norms and gender roles [1–6]. In the United States and other Western cultures, pubic hair grooming and removal are common behaviors among both women and men

[1–10]. Prevalence and frequency of pubic hair removal are associated with being female, younger age, and income [2,7,8,10]. Shaving is the most commonly reported method of pubic hair removal, with far fewer individuals using wax, electrolysis, laser hair reduction, or hair removal cream [7,8,10]. A recent U.S. study conducted among sexually

active women ($n = 2,451$) indicated women under age 30 were more likely to remove all or some of their pubic hair within the last month [8]. Among 18- to 24-year-olds, 21% reported their pubic hair status as typically hair-free, 38% sometimes removed all pubic hair, 29% removed some hair, and 12% did not remove any pubic hair. Studies conducted among convenience samples of Australian and U.S. college students indicated that 76% of women had fully removed their pubic hair on at least one occasion [3] and 75% of men had recently shaved or trimmed the hair around their groin [1]. A study of Australian ($n = 224$) collegiate men and women indicated that women were more likely to remove their pubic hair than men and to do so more often [2]. Despite the common practice of pubic hair alteration, few studies have assessed the prevalence of pubic hair removal and grooming strategies among men, and only one has examined pubic hair preferences for sexual partners [11], even though pubic hair grooming practices appear to be related to sexual behavior [8,9].

The extent to which individuals partake in self-care practices because of sexual partner preferences is not well understood. What little evidence we do have outlines that women are motivated to remove their pubic hair for the following reasons: sexual attractiveness [3,7,12], cleanliness [2,7,12], social normative beliefs [3], sexual enhancement [12], and increased feelings of femininity associated with removal [3]. A study assessing pubic hair grooming and removal practices among men indicated cleanliness was the most common reasons for shaving (75%), followed by sex appeal (69%), and body definition/muscularity (39%) [1]. A similar assessment conducted with women indicated 85% of women reported “a cleaner look” as their most common motivation to remove their hair followed by the belief that pubic hair is unattractive (48%) [7]. In addition, women who removed the majority of their pubic hair were more likely to score higher on mean attitudinal assessments of sexual attractiveness, perception of social norms, femininity, and psychological perceptions of self-enhancement [3].

Pubic hair removal also is associated with higher self-reported scores of sexual functioning and response among women [8], and one study found that 32% of men who shaved off their pubic hair reported enhanced sexual experiences [1]. At this time, the relationship between pubic hair and sexual sensation is correlated and cannot be deemed causal in nature—and may likely be due to

the influence of other factors such as younger age or feeling more comfortable with one’s body. Prospective research is needed to shed more light on the nature of sexual pleasure and the presence or absence of pubic hair.

Trends in pubic hairstyle may be readily susceptible to changing patterns in popular culture and fashion or may be closely linked with sexual activity status. Results of one large-scale investigation revealed that 20% of women who had previously removed their pubic hair had discontinued the practice. Reasons for discontinuation included physical side effects (stubble, rash, bumps, and ingrown hairs; 23%), too much of a hassle (20%), and not currently sexually active (7%) [7].

In addition to the need to better understand what motivates pubic hair removal, we also need more information on how pubic hair removal is linked to health outcomes. According to the U.S. National Electronic Injury Surveillance System (NEISS), 335 pubic hair grooming-related genitourinary injuries resulting in emergency department visits occurred between 2002 and 2010. Extrapolating from the data provided by the NEISS, it was estimated that 11,704 (95% confidence interval = 8,430–15,004) emergency room visits occurred nationally during that time period [13]. A recent study assessed the prevalence of lifetime pubic hair removal and grooming-related complications among a sample of 333 women who attended a reproductive health clinic. Results indicated 60% of participants reported a complication with epidermal abrasion as the most prevalent condition (37%), and only 5% experienced an infection. In addition, 18% reported genital cuts, 13% genital rash, and 4% reported visiting a healthcare provider as a result of their complication [10]. A similar clinical investigation assessing viral infections of the pubis among 43 men and 18 women revealed that 10% of patients with high genital lesions reported pubic shaving compared with 3% among nonshavers [14], whereas other scholars have reported case studies that associated negative health outcomes with pubic hair removal [15–17]. Additional research is needed to assess the prevalence of these problems in a nonclinical population, among whom side effects may be less common and less severely experienced.

Aim

The purposes of this study were to assess the pubic hair removal and grooming practices of college students, as well as identify reasons for choosing a

particular pubic hair style, preferences for sexual partner's pubic hair, and possible health outcomes associated with common genital grooming and pubic hair removal practices.

Methods

Participants and Procedures

Data collection occurred simultaneously in two university settings, including a large public university in the Midwest and a small Southern public university. The Institutional Review Board at each institution approved all data collection procedures. In total, participants were recruited from 22 college courses in health science, humanities, business, social science, and physical science. Class size ranged from 8 to 100 students with an average participation rate of 78% for the students present on the day of data collection. Prior to data collection, the instructor of record for each course was contacted via e-mail, and permission was granted to distribute the survey during normal class time. Each student was asked to read the consent form and decide whether or not to participate. Completing the questionnaire indicated consent and participants had the option of keeping the consent form as it was provided separately from the questionnaire. Questionnaires were printed in two colors indicating versions for women and men; participants self-selected which questionnaire to complete. No incentives were provided for participation. Completion of the questionnaires required 10–15 minutes for most participants. Individual respondents could choose to skip any question(s) he/she did not feel comfortable answering or did not want to answer. Three questionnaires were eliminated from the final analysis due to extensive missing data.

Main Outcome Measures

Participants were asked to report socio-demographic characteristics including age, race/ethnicity, academic class (*freshman through senior*), sexual orientation (*heterosexual, bisexual, gay, asexual, or questioning*), relationship status (*single, partnered, married, separated/widowed/divorced*), and sexual activity status (*currently sexually monogamous, currently sexually active with no monogamous partner, or not currently sexually active with a partner*). Participant gender was determined based on the self-selected gender-specific questionnaire completed by the individual.

Pubic Hair Grooming Practices and Preferences

Participants were asked to describe their pubic hair removal behaviors (shaving all/some, waxing all/some, using cream to remove all/some, electrolysis, laser hair removal) in the past 4 weeks. Response options ranged from “*not at all*” to “*11+ times*.” Participants were asked to check the box that best indicated their current pubic hair style with the following item, “When it comes to your pubic hair, over the past four weeks, would you say that you . . . ‘*Were typically ‘hair-free’ (bare)*’”; “*Sometimes removed all of your pubic hair, but sometimes kept some hair*”; “*Removed some of your pubic hair, but did not remove all of it*”; “*Have trimmed your pubic hair, but not removed any of it*”; and “*Kept your pubic hair ‘natural’ (you haven’t removed any of it)*.” A series of 11 items on a four-point Likert scale from Strongly Agree to Strongly Disagree asked participants to rate, “Why have you chosen this particular hair style?” Finally, one item assessed participant’s preferred pubic hairstyle on sexual partners. Options included the following: “*Hair-Free*”; “*Partially shaved or waxed*”; “*Trimmed but without any of it removed*”; “*Completely natural (not trimmed or removed)*”; or “*It doesn’t matter to me.*”

Genital Symptoms

Participants were asked to report lifetime experiences with genital symptoms that occurred as a result of pubic hair removal behaviors by the following question, “Since you began removing your pubic hair, how many times have you experienced (i) Genital itching; (ii) Genital pain; (iii) Rash on your genitals; and (iv) Genital cuts, as a result of removing your pubic hair?” Response options included: “*Never*”; “*A few times*”; “*Every time*”; or “*I’ve never removed my pubic hair.*” Participants were then asked to report the length of time they experienced the symptom (*less than five minutes to more than one day*) and the severity of the symptom (1 = *not at all severe* to 10 = *very severe*). Additional items assessed which symptoms, if any, led to the individual seeking medical attention due to the removal of his/her pubic hair.

Sexual Health and Behavior

Four items assessed sexual health and behavioral characteristics. Participants were asked to indicate whether they had received/performed oral sex in the past month (*yes/no*); if they had completed the human papilloma virus vaccination (*yes/no*); and if they had received a gynecological/testicular exam

from a healthcare provider in the past year (*yes/no*). Male participants were also asked if they had conducted a testicular self-exam in the past year (*yes/no*).

Analyses

All analyses were conducted using SPSS version 20.0 (SPSS Inc., Chicago, IL, USA). Descriptive statistics were used to assess participant characteristics. Several one-way analysis of variance with Tukey's post hoc analyses were conducted to assess differences in sexual health and behavior characteristics and pubic hair preferences. Simple χ^2 tests were conducted to compare categorical responses across gender. Effect sizes were computed using Cohen's *d* for mean comparisons and phi coefficient/Cramer's *V* for χ^2 assessments. A binary logistic regression was conducted to estimate self-reported total pubic hair removal by sex.

Results

Socio-Demographics

Of the 1,110 students who participated in the investigation, 60% self-identified as women ($n = 671$) and 40% as men ($n = 439$), with an average age of 20.3 years old (median = 20; standard deviation = 2.02). More than one-third (38%) of participants reported their age as either 18 or 19 years, 56% reported their age as between 20 and 22 and 6% as 23 or greater. Participants from the Midwestern University comprised 78% ($n = 860$) of the sample. The majority (75%; $n = 831$) identified as non-Hispanic white and heterosexual (88%, $n = 980$). Additional data regarding participant demographics can be found in Table 1.

Pubic Hair Status and Preferences for Sexual Partners' Pubic Hair Style

Women were more likely than men to report their pubic hair status as typically hair free or sometimes removed their hair, whereas men most commonly reported either some trimming of their pubic hair, no removal, or no trimming at all ($\chi^2(4) = 165.53$, $P < 0.001$). Although men were more likely to report a preference for a pubic hair-free partner (60% vs. 24%), and women were more likely to prefer a partner who trims their pubic hair but not does not remove it (26% vs. 3%) or a partially shaved/waxed partner (24% vs. 16%, ($\chi^2(6) = 211.71$, $P < 0.001$), both women and men expressed

a range of preferences for partner pubic hair style. About 1 in 5 college men, for example, preferred that their female sexual partner have some pubic hair and an additional 10% said it did not matter, with the remaining men selected more than one preference. For women only, performing oral sex in the past month was significantly associated with a preference for a more "hair-free" or "partially hair-free/groomed" sexual partner ($P < 0.05$). Additional data regarding sexual behaviors, pubic hair status, and pubic hair preference on sexual partners can be seen in Table 1.

Results of the binary logistic regression assessment indicated for women total pubic hair removal was associated with younger age ($P < 0.05$); heterosexual orientation ($P < 0.01$); race/ethnicity (self-identified Asian/Asian American women and women in non-specified "other" race/ethnicity categories were significantly less likely to report complete hair removal as compared with white women; $P < 0.01$); and having either a monogamous ($P < 0.01$) or nonmonogamous sexual partner(s) ($P < 0.01$), as compared with having no sexual partner. Complete removal by men was associated with younger age ($P < 0.05$); race ($P < 0.05$); and having a monogamous sexual partner ($P < 0.01$) (see Table 2).

Self-Reported Pubic Hair Removal Behaviors

As can be seen in Table 3, shaving was the most common pubic hair removal practice, with 76% of participants reported shaving some pubic hair in the last month and 69% reported shaving all of their hair at least once in the last month. Women were more likely to report shaving some of their pubic hair (76% vs. 74%, $\chi^2(4) = 150.74$, $P < 0.001$) or all of their pubic hair (82% vs. 49%, $\chi^2(4) = 248.00$, $P < 0.001$). In addition, women reported increased frequency of shaving some pubic hair as well as all of their pubic hair ($\chi^2(4) = 150.74$, $P < 0.001$, $\chi^2(4) = 247.95$, $P < 0.001$), respectively. Less than 15% of all participants reported using a cream to remove some or all of their hair within the last month. Among those who reported waxing their pubic hair, 64% report having a professional performing the waxing and 36% performed the waxing themselves.

Most participants (95%; $n = 1,050$) had removed their pubic hair on at least one occasion in the past 4 weeks and 38% reported their pubic hair status over the previous month as typically hair free. Nearly one quarter (24%) reported sometimes removing all of their pubic hair, whereas 19% removed some but not all of their

Table 1 Participant Sociodemographic Characteristics (n = 1,110)

	Sample	Men		Women		χ^2	P value	Effect size	
		n = 439	39.60%	n = 671	60.40%				
Race/ethnicity						9.88	0.079	0.097	
Non-Hispanic white	831	74.9	322	73.3	509	75.9			
African-American/black	88	7.9	31	7.1	57	8.5			
Asian-American/Asian	72	6.5	38	8.7	34	5.1			
Hispanic/Latino	21	1.9	7	1.6	14	2.1			
Mixed Race	30	2.7	9	2.1	21	3.1			
Other	15	1.4	3	0.7	12	1.8			
Unreported	53	4.8	29	6.6	24	3.6			
Academic class							8.41*	0.038	0.089
Freshman	358	32.3	117	26.7	241	35.9			
Sophomore	188	16.9	80	18.2	108	16.1			
Junior	246	22.2	104	23.7	142	21.2			
Senior	263	23.7	107	24.4	156	23.2			
Unreported	55	5	31	7.1	24	3.6			
Sexual orientation							15.81**	0.007	0.123
Heterosexual/straight	980	88.3	377	85.9	603	89.9			
Homosexual/gay/lesbian	24	2.2	17	3.9	7	1			
Bisexual	27	2.4	6	1.4	21	3.1			
Asexual	6	0.5	2	0.5	4	0.6			
Questioning/uncertain	5	0.5	3	0.7	2	0.3			
Other	6	0.5	1	0.2	5	0.7			
Unreported	62	5.6	33	7.5	29	4.3			
Sexual activity status							12.56**	0.002	0.11
Sexually active, monogamous	536	51.9	193	48.9	343	53.8			
Sexually active, nonmonogamous	197	19.1	97	24.6	100	15.7			
Not sexually active with a partner	300	29	105	26.6	195	30.6			
Received oral sex past month							23.27***	0.0001	0.149
Yes	611	58.2	275	67.4	336	52.3			
No	439	41.8	133	32.6	306	47.7			
Performed oral sex past month							4.76*	0.029	0.067
Yes	562	53.7	201	49.5	361	56.4			
No	484	46.3	205	50.5	279	43.6			
Pubic hair status							165.53***	0.001	0.389
Typically hair-free	411	37.6	81	18.8	330	49.8			
Sometimes removed all hair but sometimes kept some hair	265	24.2	95	22.1	170	25.6			
Removed some hair but did not remove all pubic hair	202	18.5	103	24	99	14.9			
Trimmed hair but did not remove it	131	12	94	21.9	37	5.6			
Did not remove or trim any pubic hair	84	7.7	57	13.3	27	4.1			
Preference for partner's pubic hair							211.71***	0.001	0.443
Hair-free	415	38.4	255	60	160	24.4			
Partially shaved/waxed	223	20.6	68	16	155	23.6			
Trimmed but without any removal	180	16.7	12	2.8	168	25.6			
It does not matter	170	15.7	43	10.1	127	19.4			
No pubic hair removed	24	2.2	3	0.7	21	3.2			
Not attracted to the opposite sex	25	2.3	17	4	8	1.2			
More than one option selected	44	4.1	27	6.4	17	2.6			
HPV vaccine							130.8***	0.001	0.358
Yes	537	52.5	116	29.7	421	66.5			
No	486	47.5	274	70.3	212	33.5			
Gynecological exam past year									
Yes	395	61.5	N/A		395	61.5	N/A		
No	247	38.5			247	38.5			
Self-testicular exam past year									
Yes	245	59.5	245	59.5	N/A		N/A		
No	167	40.5	167	40.5					
Provider testicular exam past year									
Yes	158	38.8	158	38.8	N/A		N/A		
No	249	61.2	249	61.2					

* $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$

Table 2 Logistic regression estimates for self-reported total pubic hair removal by sex

	Women (n = 611)		Men (n = 374)	
	OR	95% CI	OR	95% CI
Age	0.875*	0.774–0.989	0.779***	0.670–0.905
Heterosexual orientation	3.013**	1.412–6.429	1.616	0.639–4.086
Race (ref: white)				
Black	1.36	0.627–2.951	0.596	0.216–0.1.642
Asian	0.376*	0.148–0.958	0.257*	0.069–0.953
Other	0.324*	0.108–0.976	1.068	0.299–3.819
In a relationship	1.445	0.799–2.615	1.164	0.627–2.160
Sexual activity status (ref: no sexual partner)				
Monogamous partner	2.898**	1.458–5.763	2.713**	1.243–5.925
No monogamous partner	7.587***	3.066–18.776	1.402	0.698–2.818
Received oral sex	0.698	0.419–1.162	0.924	0.508–1.682
Received genital exam	0.642*	0.418–0.987	0.859	0.552–1.337

* $P < 0.05$; ** $P < 0.01$; *** $P < 0.001$

CI = confidence interval; OR = odds ratio

hair, 12% trimmed their hair, and 8% reported no pubic hair removal or trimming. Participants who were currently sexually active with a monogamous partner were significantly more likely to report their status as hair-free when compared with those who were not sexually active (44% vs. 26%, respectively, $\chi^2(8) = 55.68$, $P < 0.001$). In addition, participants who were not sexually active were significantly more likely to report their hair status as natural when compared with those in a monogamous sexual partnership (14% vs. 4%, respectively, $\chi^2(8) = 55.68$, $P < 0.001$). For both men and women, receiving oral sex in the past month was significantly associated with removal of more pubic hair ($P < 0.001$). Additional data regarding typical hair removal behaviors over the past month can be found in Table 3.

Genital Symptoms Associated with Pubic Hair Removal

The results listed in Table 4 report genital symptoms experienced by those participants who reported any pubic hair removal behaviors in the past 4 weeks. For both men and women, genital itching was the most commonly reported side effect. Over 80% of participants experienced this symptom, and 12% reported itching occurred on every occasion. Women were more likely to report genital itching and more often ($\chi^2(2) = 22.34$, $P < 0.001$). The self-reported duration of itching was as follows: 38% less than 5 minutes, 20% less than 1 hour, 28% more than one hour but less than 1 day, and 14% more than 1 day. The mean self-reported severity of genital itching was 3.0 on a scale of 1–10 ($Mdn = 3.0$).

Table 3 Pubic hair removal practices over the past 4 weeks

		Not at all n (%)	1 Time n (%)	2–5 Times n (%)	6–10 Times n (%)	11+ Times n (%)
Shaved all	Women	117 (17.6)	57 (8.6)	201 (30.3)	98 (14.8)	190 (28.7)
	Men	222 (51.5)	81 (18.8)	101 (23.4)	16 (3.7)	12 (2.8)
Shaved some	Women	154 (23.7)	72 (11.1)	175 (26.9)	89 (13.7)	24.6 (160)
	Men	111 (25.7)	107 (24.8)	185 (42.8)	13 (3.0)	16 (3.7)
Waxed all	Women	601 (91.5)	30 (4.6)	18 (2.7)	3 (0.5)	5 (0.8)
	Men	425 (98.4)	4 (0.9)	1 (0.2)	0 (0)	2 (0.5)
Waxed some	Women	603 (92.3)	20 (3.1)	23 (3.5)	4 (0.6)	3 (0.5)
	Men	421 (97.5)	9 (2.1)	0 (0)	0 (0)	2 (0.5)
Used cream-removed all	Women	533 (81.2)	30 (4.6)	47 (7.2)	24 (3.7)	22 (3.4)
	Men	398 (92.1)	15 (3.5)	13 (3.0)	2 (0.5)	4 (0.9)
Used cream-removed some	Women	545 (84.4)	23 (3.6)	31 (4.8)	26 (4.0)	21 (3.3)
	Men	398 (92.1)	15 (3.5)	15 (3.5)	0 (0)	4 (0.9)
Electrolysis	Women	652 (98.9)	3 (0.5)	4 (0.6)	N/A	N/A
	Men	423 (97.9)	6 (1.4)	3 (0.7)	N/A	N/A
Laser hair removal	Women	654 (98.6)	3 (0.5)	6 (0.9)	N/A	N/A
	Men	428 (99.1)	3 (0.7)	1 (0.2)	N/A	N/A

Table 4 Symptoms associated with pubic hair removal among pubic hair groomers

Hair	Ever removed pubic hair		Men		Women		χ^2	P value	Effect size
	n = 1,041	94%	n = 397	38.10%	n = 644	61.90%			
Genital pain							34.69	0.001	0.183
Never	879	84.8	367	93.1	512	79.6			
A few times	149	14.4	25	6.3	124	19.3			
Every time	9	0.9	2	0.5	7	1.1			
Genital rash							52.35	0.001	0.224
Never	572	55	272	68.5	300	46.7			
A few times	434	41.7	122	30.7	312	48.5			
Every time	34	3.3	3	0.8	31	4.8			
Genital itching							22.34	0.001	0.147
Never	205	19.7	105	26.6	100	15.5			
A few times	735	70.7	264	66.8	471	73.1			
Every time	99	9.5	26	6.6	73	11.3			
Genital cuts							2.87	0.243	0.052
Never	512	49.5	207	52.4	305	47.7			
A few times	511	49.4	185	46.8	326	50.9			
Every time	12	1.2	3	0.8	9	1.4			

Genital cuts were also commonly reported; of those who reported cuts, 98% reported cuts on a few occasions and 2% reported cutting themselves every time they removed/groomed their pubic hair. There were no statistically significant differences between men and women, with genital cuts occurring in approximately half of all removal occasions. The self-reported duration was as follows: 35% less than 5 minutes, 19% less than 1 hour, 23% more than one hour but less than 1 day, and 22% more than 1 day. The mean self-reported severity of genital cuts was 2.6 on a scale of 1–10 (*Mdn* = 2.0).

Nearly half (45%) of all pubic hair removal episodes were associated with a genital rash. Women were more likely to have experienced a rash and more often ($\chi^2(2) = 52.35$, $P < 0.001$). Among those who experienced a rash, 39% reported that it had lasted more than 1 day. The mean self-reported severity of the genital rash was 3.4 on a scale of 1–10 (*Mdn* = 3.0).

Genital pain as a side effect of pubic hair removal was less often reported, with only 15% of participants reporting its occurrence. Among those who had experienced genital pain on at least one occasion ($n = 158$), 94% reported pain occurrence on a few occasions and 6% reported pain occurred on every occasion. Women were more likely to have experienced genital pain and more often ($\chi^2(2) = 34.69$, $P < 0.001$). Although 45% reported that the pain lasted less than 5 minutes, 12% reported that it lasted more than 1 day. The mean self-reported severity of genital pain was 3.7 on a scale of 1–10 (*Mdn* = 3.0).

Among pubic hair groomers, 3% reported one or more symptoms associated with removal/grooming that required them to see a healthcare provider on at least one lifetime occasion. The most commonly cited reason for seeing a provider included genital itching (3%), followed by irritation (2%), infection (2%), rash (2%), cut or bleeding (1%), acne (1%), allergic reaction (0.4%), and ingrown hair (0.3%).

Reasons for Pubic Hair Grooming and/or Removal

The largest number of respondents (49% of the total sample; 60% women and 32% men) strongly agreed with the statement “*It makes me feel clean*” as a reason for choosing their current pubic hairstyle. However, most participants reported multiple reasons for their pubic hair style, with the most common responses including, “*It helps me feel sexy*”; “*It’s a comfortable style*”; “*It makes sex feel more comfortable*”; “*It’s affordable*”; and “*It’s how most people my age wear their pubic hair.*” Results comparing reasons for pubic hair removal by gender are listed in Table 5. On seven of the 11 (64% of occasions) comparisons, a statistically significant difference was observed with women scoring higher on six (86%) of the statements. Men were more likely to report that their reason for their current style as “*It doesn’t require a lot of upkeep*” ($F(1) = 48.61$, $P < 0.001$).

The extent to which a participant agreed with certain reasons for his or her self-reported typical pubic hairstyle in the past 4 weeks differed by the amount of pubic hair removed. For example, those who were typically “hair-free” or “sometimes hair-

Table 5 Reasons for pubic hair removal by gender

	Men n = 411 (38.0) M (SD)	Women n = 265 (24.2) M (SD)	F	P value	Cohen's d
It makes me feel clean	3.19 (0.672)	3.49 (0.731)	47.27	0.001	0.42
It is a comfortable style	3.22 (0.638)	3.33 (7.14)	6.20	0.013	0.16
It makes sex feel more comfortable	2.96 (0.708)	3.06 (0.833)	4.21	0.04	0.13
It is affordable	2.99 (0.694)	3.08 (0.766)	4.28	0.039	0.12
It is how most people my age wear their pubic hair	2.72 (0.626)	3.06 (0.828)	49.43	0.001	0.44
I think my partner finds it sexy	2.86 (0.690)	2.91 (0.864)	0.78	0.379	0.06
It helps me feel sexy	2.76 (0.645)	2.94 (0.799)	15.94	0.001	0.24
It does not require a lot of upkeep	2.96 (0.638)	2.62 (0.860)	48.61	0.001	0.42
My partner told me it looks sexy	2.45 (0.839)	2.53 (0.942)	1.71	0.191	0.09
I think it makes me look adult	2.40 (0.693)	2.32 (0.784)	2.48	0.116	0.11
No particular reason	2.49 (0.820)	2.41 (0.898)	1.99	0.159	0.10

free” were significantly more likely to agree that they have chosen their pubic hair style because of the following reasons: “*It makes me feel clean*” ($F(4) = 58.77, P < 0.001$); “*It makes sex feel more comfortable*” ($F(4) = 30.16, P < 0.001$); “*It's how most people my age wear their pubic hair*” ($F(4) = 28.84, P < 0.001$); “*I think my partner finds it sexy*” ($F(4) = 28.16, P < 0.001$); and “*It helps me feel sexy*” ($F(4) = 31.65; P < 0.001$) as compared with those who are partially removing, trimming only, or are not removing any pubic hair. The reasons, “*It's affordable*” and “*I think it makes me look adult*” are the only two reasons that did not significantly differ based on typical pubic hair status. Additional results regarding reasons for pubic hair removal across pubic hair status can be found in Table 6.

Discussion

The present study is one of few empirical investigations to assess the pubic hair removal and

grooming practices among both men and women. Findings also present insights into the pubic hair-styles that women and men prefer for their sexual partners to have, which is a unique addition above and beyond previous research. What we found is more nuanced than is commonly described in popular media, demonstrating that there is no single style of pubic hair that either sex prefers on an opposite-sex sexual partner. Although more than half of college-aged men preferred female partners to be hairless, and most women preferred male partners to retain some pubic hair, about 1 in 5 men preferred for their sexual partner to retain some pubic hair and an additional 10% of men did not have a preference about pubic hair style, as did many women. Sexuality educators and clinicians may use these data to remind college-aged women and men that sexual attraction, satisfaction, and pleasure result from a constellation of factors including emotional intimacy, psychological connection, genital fit, sexual technique, overall

Table 6 Reasons for pubic hair removal by pubic hair status

	Hair-free n = 411 (38.0) M (SD)	Sometimes hair-free n = 265 (24.2) M (SD)	Partial remover n = 202 (18.5) M (SD)	Trims only n = 131 (12) M (SD)	No removal n = 84 (7.7) M (SD)
It makes me feel clean	3.59 (0.662)	3.53 (0.591)	3.22 (0.706)	3.10 (0.657)	2.47 (0.702)
It is a comfortable style	3.40 (0.715)	3.27 (0.678)	3.19 (0.608)	3.22 (0.685)	3.04 (0.665)
It makes sex feel more comfortable	3.25 (0.770)	3.10 (0.678)	2.87 (0.765)	2.76 (0.778)	2.38 (0.744)
It is affordable	3.09 (0.787)	3.00 (0.683)	3.02 (0.703)	3.13 (0.725)	2.91 (0.788)
It is how most people my age wear their pubic hair	3.17 (0.784)	2.97 (0.730)	2.63 (0.650)	2.77 (0.652)	2.44 (0.816)
I think my partner finds it sexy	3.11 (0.783)	2.98 (0.689)	2.67 (0.793)	2.68 (0.785)	2.29 (0.750)
It helps me feel sexy	3.09 (0.747)	2.97 (0.666)	2.68 (0.688)	2.62 (0.725)	2.29 (0.679)
It does not require a lot of upkeep	2.61 (0.889)	2.57 (0.765)	2.94 (0.708)	3.14 (0.688)	3.01 (0.720)
My partner told me it looks sexy	2.67 (0.931)	2.56 (0.894)	2.33 (0.823)	2.27 (0.867)	2.14 (0.828)
I think it makes me look adult	2.40 (0.791)	2.27 (0.723)	2.32 (0.713)	2.38 (0.737)	2.36 (0.733)
No particular reason	2.35 (0.911)	2.21 (0.711)	2.49 (0.820)	2.67 (0.853)	3.11 (0.857)

attraction, and so on, with pubic hair style being only one of many factors that sexual partners consider in one another.

Results also provide useful insights into the variety of grooming-related behaviors, as well as rationale/reasons for current pubic hair status, preferred pubic hair status on sexual partners, and genital symptoms associated with grooming and removal. Findings indicate that the majority of participants have trimmed or removed their pubic hair on at least one lifetime occasion. Only 4% of women and 13% of men reported not removing or trimming any pubic hair in the past 4 weeks, the remainder (96% women and 87% men) all report engaging in some to total pubic hair removal. These findings are consistent with previous research that indicated these practices are common among adolescents and young adults [1–10]. In addition, findings suggest college students perceive grooming and removal as normative for their peer group and that there is a high degree of variability of grooming-related behaviors within the last month among this population.

Many participants reported a variety of reasons for pubic hair removal that were associated with personal and sexual enhancement. These findings are consistent with previous studies that reported cleanliness, increased sex appeal, and sexiness as a common reason for pubic hair removal [2,3,7,12] and more positive sexual functioning and response associated with removal [8,12]. When assessing reasons for hair removal across gender, a statistically significant mean difference was observed in seven of the 11 (64%) comparisons. Results indicate decisions to engage in grooming among women were related to psychological, social, relationship, and sexual enhancement factors, whereas men are more likely to report financial affordability as a reason. Assessments comparing grooming and removal across pubic hair status revealed a statistically significant mean difference was in nine of the 11 (82%) comparisons. On six occasions, participants who reported their status as typically hair-free scored significantly higher, indicating positive emotional or psychological trends associated with removal. Overall, these findings provide unique insight into the relationship between pubic hair grooming, gender roles, and pubic hair status and suggest removal and grooming practices are highly contextualized.

The present study is one of a few nonclinical investigations to report the genital symptoms experienced by those who remove their pubic hair. More than 75% of pubic hair groomers have experienced

genital itching on at least one occasion, greater than 40% genital cuts, 40% a genital rash, and nearly 15% genital pain. Symptoms including itching, rashes, and genital pain were significantly more prevalent among women; however, most reported that these occurred infrequently over the lifetime and typically lasted less than 1 day. The severity associated with most symptoms was low to moderate ($M = 2.6\text{--}3.4$), and only 3% of groomers reported a symptom that required medical intervention by a healthcare provider on at least one lifetime occasion. These data provide a useful assessment of side effects experienced by both men and women. It is noteworthy that women were more likely to report lifetime experiences of genital pain as well as genital itching and cuts. Given the high prevalence of pubic hair and grooming practices among young women, it is not surprising that women more commonly report a lifetime event. Future research is needed to assess whether the higher prevalence of genital symptoms experienced among women is due to increased frequency of removal, specific removal strategies practices among women, anatomical differences (e.g., the vulva being generally more sensitive than the skin on men's genitals), extensiveness of removal (e.g., women being more likely to remove all of their pubic hair), or lack of adherence to removal recommendations offered by clinicians and providers.

The results of the present investigation have implications for clinical care practice and sexual health education. The identification of common grooming and removal practices as well as grooming-related symptoms may result in more effective standards of care by clinical professionals who treat young adults. Findings can assist in the creation of more effective outreach programs by sexuality educators and health promotion specialists who specialize in college health. Future research is needed to assist in the establishment of genital care benchmarks and standards for the college population.

Limitations

The present study has limitations to consider. First, while the procured sample was recruited through a number of different academic classrooms, it nonetheless represents a convenience sample. In addition, the sample was fairly homogenous including mostly non-Hispanic white, heterosexual students from two university settings. These factors may place limitations on the generalizability to more diverse populations of students as well as those in other university settings. Future research is needed

to assess the pubic hair removal practices in more racially/ethnically and sexually diverse populations and might also explore preferences for sexual partner pubic hairstyle by self-identified sexual orientation or by partner gender. Second, although the present investigation provides a useful account of symptoms associated with hair grooming and removal, it is difficult to ascertain the overall frequency and prevalence of these problems in relation to when students began removing their pubic hair. Third, although some participants reported they sought out a healthcare provider as a direct result of a grooming/related symptom, the overall prognosis of these effects is unknown. Fourth, although several statistically significant differences and associations were observed, many of the associated effect sizes were small to moderate [18]. These findings suggest that many of the assessment outcomes were due to large sample size. Nonetheless, the sample size of the present investigation may have prevented type two errors and aids in the generalizability of the findings. Finally, the data in the present study were self-reported and findings are dependent upon accurate account by the participants. Given the overall scope of the present study, including the need to assess behaviors and attitudes among a nonclinical population, self-report was the most feasible method of participant recruitment.

Conclusions

Genital grooming and pubic hair removal are common practices among both male and female college students. Reasons for pubic hair removal vary significantly by gender. Women are likely to report stronger associations with feelings of cleanliness, comfort, sex appeal, social norms of their peer group, and affordability as reasons for their chosen pubic hair style, whereas the ease of upkeep emerged as the defining characteristic for men's pubic hairstyle preferences. Younger age, self-reporting as white, and having a sexual partner(s) emerged as a significant predictors of total hair removal for both men and women. Women report more experiences with genital side effects of pubic hair removal, an expected result as women are removing pubic hair more frequently and more completely than their male counterparts. For both sexes, normalizing genital appearance, with or without pubic hair, by emphasizing individual choice and promoting safe genital hygiene practices will contribute to overall sexual health among young adults.

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