

## Common Gender Differences

Page 1

MEN	WOMEN
Arousal may be more self-generative	Arousal may be more receptive
More visual receptors for sexual stimuli	Wider variety of sensual stimuli
	More likely to consider What their partner is doing as an important contextual cue
Narrower range of arousing stimuli	Wealth of arousing stimuli accumulates
Arousal may be more sequential – excitement, plateau, orgasm, resolution	Arousal may be more circular and interactive across processes
More focus on sexual energy release, instead of buildup phases	Greater enjoyment of sexual energy buildup
More awareness and connection between physiological cues and psychological cues	Psychological cues may be more important than physical - with a Gap of Appropriateness between physiological arousal and psychological arousal
Average sexual response cycle in about 3 days	Average sexual response cycle about 10 days
Needs average of 5 minutes of non-sexual touch and communication to trigger arousal	Needs average of 15 hours of non-sexual touch and communication to trigger psychological arousal
Less impacted by stress, but may be impacted by performance anxiety	Sexuality is more impacted by depression, anxiety, or stress. Cortisol levels may more greatly suppress testosterone functioning
May have anxiety about role expectations around male sexuality when examining emotional needs	May have anxiety about role expectations around female sexuality when examining sexual needs
Interacts with and accepts genitals from an early age	Often little experience with own genitals
May feel anxiety about expert role in sex	May not understand mechanics of own body, and wait for man to “give them an orgasm”

## Common Gender Differences

Page 2

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Less concern for social analysis of friends	Integrates emotional, social, cultural, and physical cues
More concerned that their partner is attractive, other driven cues	May be more concerned about their own body image. May have more self-driven cues
Less flexible cues. Some evidence that unique interests may form in adolescence	More flexibility and fluidity to cues
Easily orgasm from intercourse	More often orgasm from clitoral stimulation
	More impacted by sleep
Age, diabetes, alcohol, and tobacco use may decrease erections	Age and menopause may decrease lubrication
Feeling acceptance	Feeling cherished
Less likely to change over time in long term relationships, often responds to novelty	Becomes more responsive, less spontaneous in long term relationships
	Desire to feel like a unique special human being, not in a sexual context
More likely to experience low sexual desire as erectile dysfunction	More likely to have had negative sexual experiences
Early sex education discusses erections (pleasure orientation)	Early sex education discusses periods and pregnancy. Pleasure is rarely mentioned
More likely to have early and frequent experiences with genitals	Less experience with genitals – less likely to have seen or touched their genitals in adolescence

*Remember to consider what is typical with a wide normal curve!*