**Sexual Motivation**

Sex is a physiologically based motive, like hunger, but it is more affected by learning and values.

The four stages of the sexual response described by Masters and Johnson are:

1. Excitement

2. Plateau

3. Orgasm

4. Resolution

There is a **Refractory Period** (rest period) after orgasm, during which a man cannot achieve another orgasm.

**Research notes:**

* There has been some discussion as to whether hormone levels influence a persons sex drive. In most mammals sex coincides with fertility but in humans Womens sexual desire is only slightly higher at the time of ovulation when estrogen levels are peaked. As well, a mans testosterone level is not related to sexual drive. Normal short-term hormonal changes have little effect on sexual desire.
* Large hormonal changes appear to make a substantial difference to ones desire. Take for instance sexual drive during puberty for example or the study in which male sex offenders took Depo-provera (a drug that reduces testosterone levels) and lost their sexual urges.

**The Psychology of Sex**

Sex, as with hunger, depends on internal physiological factors but also external psychological factors such as external and imagined stimuli.

* External sexual stimuli such as erotic materials are known to stimulate both men and women. It can have negative effects if the material degrades the other sex but it may also cause people to develop unrealistic expectations of their partner.
* A persons imagination also affects sexual arousal. Dreams and fantasies have huge erotic potential. Interesting to note is that even people who are physically unable to become genitally aroused can still feel sexual desire.

**Sexual Disorders** are problems that consistently impair sexual arousal or sexual function.

In men, there may be **premature ejaculation**, when one ejaculates before they or their partner wishes. Another disorder is **impotence**, the inability to have or maintain erection.

In Women, a disorder called **orgasmic disorder**is defined byinfrequent or absent orgasms. All of these disorders are becoming more and more treatable with great success.

**Sexual Orientation**is onesenduring sexual attraction toward members of a particular gender or both genders. Whether a person is heterosexual, homosexual or bisexual todays research indicates that sexual orientation has more to do with genetic influences (see twin studies), prenatal hormones and anatomical brain differences (see Levays study on the hypothalamus) than with reasons to do with nurturing and environment.