

# THE WINHAM PAPERS

## 2. The Real Reason So Many Men are Lousy Lovers (2018)

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The cynic's answer to this question is that men are just selfish: they only care about maximizing their own sexual pleasure. This answer ignores an underlying issue: if men and women were sufficiently similar in their sexual responsiveness, then a man seeking his own pleasure would generate similar pleasure for his partner. But this often fails to happen, and the reason is that the genital anatomy and sexual physiology of women are different from those of men. Since few sex education courses explain these differences, men just do not know any better.

Women have multiple zones of erogenous tissues scattered around their genital area. By erogenous, I mean tissues that can become engorged with blood and provide pleasurable sexual sensations when stimulated. Two of these zones are the vestibular bulbs, one of which lies under each of the two major labia of the vulva. They wrap around the urethra and are joined just in front of it. A slim spur extends from the point of juncture into the underside of the clitoris. The whole ensemble is called the "corpus spongiosum". Each of the corpus spongiosum zones can fill with blood when the woman is aroused, although it lacks an inflexible outside coating. This allows it to expand but not get stiff from pressure build-up (e.g., it acts like a sponge). In contrast, two parallel tubes lying above the bulbs, called the "corpus cavernosa", do have a tough surrounding tunic and when they become engorged, they get quite stiff. These two tubes lie adjacent to each other inside the top of the clitoral shaft, but make an abrupt right angle at the base of the shaft, and then divide into separate "clitoral legs" that extend back, just above the bulbs, until they reach opposite sides of the vagina. In addition to these two complexes, a perineal sponge lies just inside the body wall between the vaginal opening and the anus. It is not clear whether this is a separate structure or just the ends of the two vestibular bulbs as they wrap around the vagina. Finally, although it does not consist of vascular tissue, the cervix of some women can serve as a source of arousal when stimulated.

Because of the wide distribution of these structures, stimulation of one zone does not necessarily stimulate other zones. Thus, the two vestibular bulbs and the two legs of the clitoris are each independently stimulatable, and all four are mechanically independent of stimulation of the clitoral shaft and its "glans" tip, the junction of the bulbs, the cervix, and the perineal sponge. The junction of the two bulbs, which can be stimulated by pressing on the lower front wall of the vagina, is the most likely candidate for the now well-known "G-spot". It can thus be stimulated independently of the vestibular bulbs. Not only are these zones mechanically independent, recent brain studies have shown that stimulation of different genital zones activates adjacent but separate areas in the woman's brain.

In men, most of the accessible erogenous zones are aggregated into one compact organ: the penis. As in the clitoris shaft, the adjacent tubes of the corpus cavernosa lie above a single spur of the corpus spongiosum. Unlike the situation in women, the urethra passes through the corpus spongiosum and opens on the glans tip of the penis. The rest of the corpus spongiosum extends

back into the pelvic cavity where it ends in a robust single bulb. As in women, the two corpus cavernosa divide at the base of the penis and each flanks one side of the corpus spongiosum until they reach the bulb where they flare out as anchors for the penis. When a man has an erection, the two corpus cavernosa tubes provide the stiffness, and the engorged corpus spongiosum prevents the swelling of the corpus cavernosa tubes from compressing the urethra. Because of this aggregate structure, stimulation of the external penis affects the corpus spongiosum and two corpus cavernosa tubes simultaneously. While stroking of the scrotum, pressing on the perineum to stimulate the internal penis bulb, or using a finger inserted in the anus to stimulate the prostate can add to the pleasure, most men focus only on stimulation of the external penis during intercourse or masturbation. It is interesting that in a 8-10 week old human fetus, both sexes have a similar structure with all future erogenous zones concentrated as they are in adult males. But as the female fetus develops a vagina, this inserts itself in the middle of the various complexes and spreads them all out.

In addition to these anatomical differences, men and women differ in one important physiological aspect. In most men, ejaculation and orgasm occur together. Ejaculation causes a man's brain to release hormones that soon undermine his erection and initiate a refractory period where further stimulation is neither pleasurable nor arousing. Women do not ejaculate during orgasm, (although some women emit fluids from their Skene's glands and bladders), and they do not suffer the same type of refractory process. When appropriately aroused, a woman can have multiple orgasms, right after the other, or have a long single orgasm with multiple waves of pleasure. Because separate nerves control ejaculation and orgasm in men, it is possible for a man to train himself to stifle ejaculation and then have multiple orgasms or waves of pleasure like a woman. However, this takes extensive effort and practice, and most men do not even know it is possible.

These gender differences in anatomy and physiology have profound consequences for how each sex can maximize sexual pleasure. When a man strokes his penis during masturbation or intercourse, he simultaneously stimulates the corpus spongiosum and corpus cavernosa tubes. He can thus bring himself to orgasm quickly, and if he ejaculates, he soon loses his erection and urge for further stimulation. As noted above, because the erogenous zones of women are spatially scattered and only loosely connected mechanically, stimulation of any one zone may have no effect on others. Women can learn to reach orgasm with continued stimulation of a single zone or combination of a few zones. Not surprisingly which zones are favored by particular women, and the nature of their orgasms can be highly diverse. The two zones most widely linked to orgasm are the accessible parts of the clitoris and the G-spot. College women in a recent survey seemed to agree that clitoral stimulation alone tended to produce a rapid rise to a peak of arousal, a strong but local orgasm, and a rapid fading in sensation, whereas G-spot stimulation showed a much more gradual rise in arousal, a whole-body orgasm that could include multiple waves of pleasure, and a very slow fade out of arousal and responsiveness to additional stimulation. Many women's magazines argue that simultaneous stimulation of both the clitoris and G-spot, after a slow G-spot buildup of arousal, yields the most powerful and long-lasting women's orgasms. In the popular literature, this type of orgasm is known as "the big O".

Clearly, these gender differences pose several problems for men. First, many men know little about female anatomy and physiology. At worst, all they know about sex is what they learned masturbating themselves; the simplest assumption when they first have sex with a woman is that

she has a similar pattern to the man's own pleasuring. Second, women take longer to arouse than men. Many men do not know this nor how to tell when stimulation of a given erogenous zone is sufficient. Third, the average penis is not a well-designed tool for simultaneous stimulation of multiple women's zones, or even stimulation of a single zone with finesse. Notably, it is very difficult for an average penis to stimulate a clitoris and G-spot at the same time.

Practitioners of Tantra have their own protocols for solving the gender differences. These can be quite complicated and claim a need for manipulating "energy fields", but the simplest elements of the routines can be adopted by anyone. After joint bathing and a few minutes of quiet meditation, the woman gives the man a full body massage ending with a slow and sensuous "lingam massage" to give him an orgasm. The man then gives his partner a full body massage ending with a "yoni massage" that ends with her having a combined clitoral and G-spot orgasm. A proper Yoni massage works from the "outside-in," and uses the man's hands, not his penis. The recommended sequence begins with massage of the outer labia (including the underlying vestibular bulbs), and progresses through stimulation of the lining between outer and inner labia, underside and shaft (including the base) of the clitoris, and then alternates between the clitoris and the opening of the vagina, the perineal sponge, and the cervix. The final stage involves steady stimulation of the G-spot and finally the clitoris and G-spot to trigger orgasm. Once orgasm begins, both the clitoris and G-spot receive continued stimulation until the woman indicates this is enough. If the man has an erection, this is a great time for normal intercourse as the woman is still in the long tail of her orgasm and can often have additional ones with penile stimulation. Tantric men often can separate ejaculation from orgasm and hence the earlier orgasm during Lingam massage has not left him refractory. However, if a man does not know how to do this, he can skip the Lingam Massage step and just begin with Yoni Massage. Note that this protocol only works well if the man knows his partner's anatomy and physiology well and is willing to patiently stimulate each erogenous zone in turn.

There are of course as many permutations of the protocol above as there are ingenious and amorous people. Some women can achieve advanced levels of erogenous arousal psychologically. The ears, lips, breasts, and toes can act as erogenous zones in early stages of arousal. Many women have learned to have clitoral orgasms without G-spot stimulation and not having ever had "the big O" do not know what they are missing. Men in other couples use their hands or mouths to complete the early stages and then use their penis to stimulate the woman's G-spot while she uses her fingers or a vibrator to stimulate her clitoris. A few talented and long-lasting men can use their penis to accomplish many of the steps without hands. But most men cannot do this and do not even know why they should try. Gay women know what their partners need and lesbian pornography often shows them following the protocol listed above.

It is ironic that western cultures in the late 19th and early 20th centuries largely believed that women were incapable of orgasms. These notions were gradually discarded with pioneering research in the 1950's and 1960's, but even then, it was largely believed that only clitoral stimulation was likely to produce female orgasms. While there is still a debate about which zones account for G-spot arousal, stimulation through the lower anterior vagina after prior arousal of other erogenous zones is now widely practiced. And the first time a man watches his partner have a long-lasting and full-bodied "big O", he will be astounded and even envious of her ability to have such a powerful experience.

Did anybody teach you about vestibular bulbs? Did you even know they exist? Where do any of us learn all this stuff?! We don't! Conservatives have successfully blocked discussion of anatomical details in most sex education programs in this country. Instead of detailed education during teenage years, both boys and girls largely learn about sexual responses through masturbation or pornography. And in the absence of contrary information, each sex assumes that what they experience with their own masturbation is how a member of the opposite sex responds to mutual stimulation. Men expect women to get turned on and have an orgasm as fast as they do. Women are surprised and disappointed when their partner is done, and they have barely started. This causes lots of problems when men and women do have sex together for the first times, and many never figure out a solution.

You might think the solution is simple: just provide suitable education in schools at the right age. But there are many forces in modern society that are blocking such a step. The claim is that discussing sex in detail at early ages will just encourage sex before the kids are responsible enough to make wise decisions (like using contraceptives). There are also the religious prohibitions against any sex outside of marriage including discussing it. There are issues of threatened male self-respect and dominance in partner relationships. And most pornography, except perhaps the lesbian sex footage, fails to educate anyone. We can only hope that if enough people perceive the problem, suitable materials will get posted online where our kids can access them on their own.

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#### Some useful references:

Sheri Winston (2009): "Women's Anatomy of Arousal" ( [Book on Amazon](#))

Tantric Sex without the Mysticism: A Blog by Shakti Amarantha: ["Extraordinary Passion"](#)

OMG Yes!: A website designed by women to enhance sexual pleasure in women:  
<https://www.omgyes.com/>

A good summary of current research on orgasms:

Pfaus, J.G., G.R. Quintana, C.M. Cionnaith, and M. Parada. (2016). "The whole versus the sum of some of the parts: toward resolving the apparent controversy of clitoral versus vaginal orgasms. *Socioaffective Neuroscience and Psychology* (access by entering this DOI into your browser: DOI: 10.3402/snp.v6.32578