



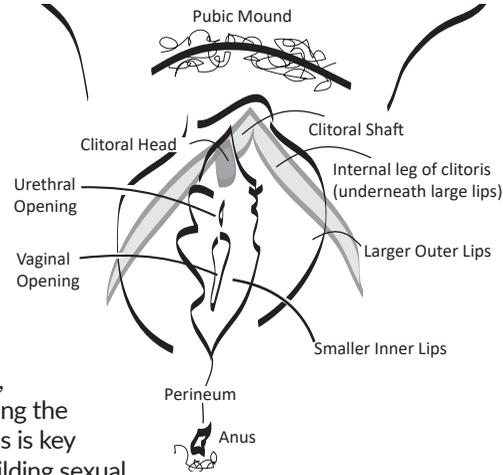
This brochure will help you understand how orgasm reflexes happen in the **body and mind**. It also provides information about ways to experience your **first** orgasm, more **frequent** orgasms, or **stronger** orgasms.

Orgasms are different for everyone. Some people:

- can always bring themselves to orgasm when they choose
- can only orgasm occasionally
- can't orgasm now, but used to be able to
- have never had an orgasm
- orgasm during sex play with a partner
- only orgasm when they are self-pleasuring solo

The ability to have orgasms depends on healthy blood flow, healthy nerves, strong flexible pelvic floor muscles, and a mind open and willing to release into sexual arousal and orgasm.

## An Anatomy Refresher



For many, stroking the clitoris is key to building sexual arousal. Many sexually-responsive nerves are located in the clitoris. The clitoris is about four inches long, but you can only directly touch the tip located at the top of the vulva near the pubic mound. From the tip, the clitoral shaft extends back toward the pubic bone and then the clitoral legs curve back under the lips to the vaginal opening. The shape of the entire clitoris is like a wishbone.

Because the legs of the clitoris lay underneath the lips surrounding the vagina, stroking the vulva can send arousing signals through to the clitoris. The first two inches of the vagina may also be sexually responsive since stroking or penetration can stimulate the clitoral legs internally.

Sometimes surgery can change where someone finds touch arousing. Transfeminine people who have undergone confirmation surgery sometimes notice that the tip of the clitoris is less sensitive due to surgical scarring. They may enjoy massage of the clitoral legs underneath the lips more and find that sexually arousing. Experimentation is the key to discovering your personal arousal points.

## What Happens Before Orgasm?

Human sexual arousal is turned **off** most of the time because it would be hard to get anything done in life if we were always sexually aroused. Sexual arousal involves unconsciously *checking for safety*, personal *willingness to engage* in sexual behavior, *turning the suppression off*, then *building the fire of arousal*. The period of high arousal just before orgasm is sometimes referred to as the **Plateau Phase**. The amount of time spent in this phase varies from person to person.

Some people experience frustration during the plateau phase, believing they are taking too long to have an orgasm or feeling like something isn't working. Each person experiences different lengths of time on the plateau and any length of time is completely normal. The plateau can be a very pleasurable place to be even if you do not have an orgasm. Many people find this period of high arousal to be the most pleasurable part of sex play. It isn't necessary to have an orgasm to have complete sexual satisfaction. We encourage you to *enjoy all* phases of arousal.

## What Is An Orgasm?

An orgasm (sometimes referred to as a climax) is a pleasurable peak experience most often brought on by sexual stimulation. First, the mind becomes aware of a tension related to the orgasmic threshold. Once sufficient stimulation triggers orgasm, the brain releases pleasure chemicals into the blood stream and causes pulsing contractions of the pelvic floor muscles.

All orgasms take different amounts of stimulation time and intensity. When adequate arousal stimulation time doesn't happen, orgasms don't happen. Some orgasms feel huge, some feel small, and others somewhere in between. No two orgasms are exactly alike.

## What determines whether an orgasm will happen?

**Every person is different.** The amount of time it takes a person to reach orgasm is individual and can change from day to day. What feels intensely pleasurable for one person may be too much or not enough stimulation for another. A person's frame of mind, stress level, stage of the menstrual

cycle or menopause all contribute to their perception of arousal, pleasure and orgasmic potential. Medications, especially SSRI and SNRI antidepressants, can increase the effort required to reach the orgasm threshold, so more time **and/or** more intense stimulation may be required to reach a climax.

Some level of **relaxation** is necessary for arousal to begin.

Factors that could inhibit sexual arousal include:

- stress
- concerns about work, kids, or a partner
- worries about body image
- religious, cultural, or family teachings
- unhealthy physical status
- being reluctant to engage in sexual play
- poor communication
- poor knowledge of technique
- unwanted pain or history of unwanted pain
- worrying about having an orgasm

The body and mind give priority to stressful thoughts and prevent us from focusing on arousal when safety is perceived to be at risk. Stress is managed by the same defensive response system (fight, flight, freeze or faint) that suppresses sexual arousal and keeps us aware of our surroundings and responsive to threat.

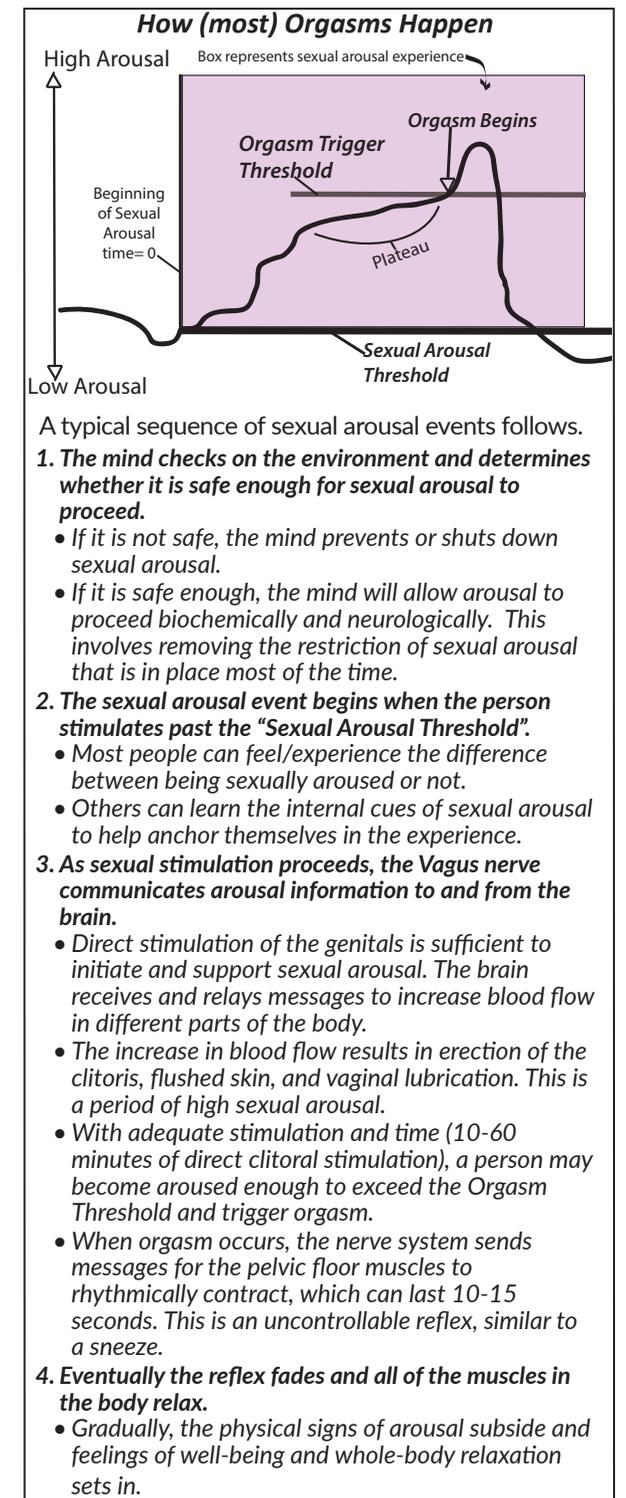
If stress is inhibiting sexual arousal, it helps to consciously choose to set yourself up with a time and place where you can feel safe, relaxed and sexually willing to invite sexual pleasure. It also helps to learn your personal mind-body sexual resonance patterns so you can more easily manage stressful intrusive thoughts.

## The Role of Self-Pleasure

Self-pleasuring is one of the most effective ways to determine what types of stimulation are most pleasurable for you and what kinds of touch you prefer. It's a great way to get to know yourself and your body, allowing you to experience pleasure without the pressure of anyone else's expectations. Many people find self-pleasuring a good place to start exploring if they have never experienced an orgasm.

Once you learn your preferred pleasure techniques, you can share what you have learned with a partner. Communicating in this way can help you build and increase arousal during partner sex while taking an active role in defining your pleasure and preferences. For more techniques to explore during self-pleasuring, see our *Self-pleasuring for Women* brochure.

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## Orgasm Challenges

### Rare or Absent Orgasms

This might be a technique issue. If you are relying solely on vaginal penetration alone to climax to orgasm, know that fewer than 30% of women have orgasms during vaginal penetration alone. Success more often occurs people add additional, direct stimulation to the clitoris by a hand or vibrator. Incorporating positions and techniques that allow you or a partner to provide focused clitoral stimulation can make orgasm more likely.

If you enjoy sex the way it is and you don't feel the need to make any changes, that is absolutely fine—**orgasm is not that important to some people**. If you orgasm infrequently, rarely, or never and are *comfortable* experiencing pleasure in other ways, communicate that to your partner(s). It's important to communicate that this is not about their skills as lovers and that you feel just fine the way you are. Often, partners worry that they are doing something wrong and that you are not enjoying the sexual contact. It can be helpful to reassure your partner(s) and communicate about the kinds of touch you enjoy, and what contributes to your sexual satisfaction.

However, if you feel that your inability to have an orgasm with a partner is affecting other parts of your relationship, or that relationship difficulties are affecting your ability to have orgasms, consider a sex counselor or therapist to help you work through what you both are experiencing and feeling.

### Changes in Intensity or Frequency

There are many reasons why people's orgasms change, become less frequent, or disappear altogether over time. Some issues are physical while others change the mind's ability to focus.

Some common physical causes of change are:

- medications
- circulatory problems
- metabolic disorders like diabetes
- neurologic disorders like Multiple Sclerosis
- scar tissue or nerve damage from surgery or radiation therapy

These physical issues can stop or inhibit the body from responding to the mind's call to sexual arousal. Consult a health care provider if you think an existing health condition or medication may be a contributing factor.

Psychological factors may also play a role in diminished arousal. Some common issues are:

- stress
- distraction from, or inability to focus
- physical or emotional trauma

All of these factors hamper the *mind's* ability to **focus** during the internal conversation of mind-body resonance or **arousal conversation**. Consult a mental health, couples or sex therapist to understand more about your situation.

If you've experienced a change, *experiment* to find new tools and techniques that help manipulate your sexual arousal patterns. Ask yourself: **"Is this pleasurable right now?"** Don't worry if arousal builds and fades as you experiment—that's normal. Above all, try not to be goal-oriented. Removing the pressure to have an orgasm **often makes it easier** to have one.

**Your first priority is to enjoy the ride,  
not simply to get to the show.**

### Muscle contractions and sensations of orgasm feel less intense than they used to

Learning to tone your pelvic floor muscles—the muscles that contract during orgasm—can help make orgasms feel stronger. See the *AWT Pelvic Floor Health Brochures* for more information.

### It takes longer to reach orgasm

If you find that you can get aroused but it takes longer to reach orgasm, the key is to return to a beginner's perspective and *experiment*. Frustration with performance always inhibits sexual arousal. Some suggestions:

- increase the amount of time you allow yourself
- stimulate your mind and the rest of your body before direct genital sex play (Read or listen to an erotic story. Watch an erotic movie.)
- try different kinds of touch and techniques
- avoid the head of the clitoris until right before orgasm. This helps keep the nerves at the tip fresh and ready for orgasm, rather than dulling them to arousal
- use a vibrator, dildo, vacuum pump, anal toy, etc. to see if that increases stimulation and decreases the time it takes for you to reach orgasm
- use a broad-headed vibrator that diffuses throbbing vibrations through the whole vulva
- incorporate all of your senses, see what it feels like to stimulate other parts of your body besides your genitals (nipples, ears, toes, back of your neck)

### Sensitivity of vulva has changed

If your clitoris doesn't feel as sensitive as you would like it to be and you've tried using a variety of vibrators with no success, you might want to try using a vacuum pump on your clitoris or vulva once you are aroused part way. This increases the blood flow to your clitoris, making it more engorged and therefore more sensitive.

### Having More, Better Orgasms

**Expand your field of play.** Many people find that they have longer orgasms when they incorporate a wide variety of stimulation to all of the parts of their bodies that enjoy touch. Stroking and caressing many different nerve endings will intensify your arousal and pleasure. In addition, the longer you pleasure your whole body, the more intense your orgasms may be. This means exploring all those places that feel wonderful when you or your partner strokes, licks, or rubs them.

**Peaking** is the process of stimulating yourself almost to the peak of orgasm and then stopping or decreasing the intensity of stimulation to *delay* orgasm. By restarting your stimulation--increasing then decreasing until you decide to orgasm--can *magnify* the overall experience of orgasm. Peaking *extends* the time in which you are experiencing higher levels of arousal and can result in a more intense-feeling orgasm.

**Practice.** The more frequently you have orgasms, the more *intense* your orgasms will likely be. The mind-body connection becomes stronger when you successfully use it. Although it may take longer to have orgasms when you have them often, many people report stronger, more satisfying orgasms when they set aside regular sessions for orgasmic self-pleasure.

### Resources

**Come As You Are** by Emily Nagoski

**Elusive Orgasm** by Vivienne Cass

**Multi-Orgasmic Woman** by Mantak Chia & Dr. Rachel Carlton Abrams

**OWow** by Jenny Block

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# Orgasms

## for people with vulvas & vaginas

~what is an orgasm &  
how do orgasms happen

~how to have orgasms more  
consistently

~how to make orgasms  
stronger

~things to try when you aren't  
having them



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