



SEX ANXIETY

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WHAT IS ANXIETY?

Generalised Anxiety Disorder (GAD)

- Chronic Fear and worry
- Physical symptoms
- Somatic symptoms
- Developing other mental health disorders

(Stein and Sareen, 2015)

DSM-5: more days than not that exhibit symptoms of GAD over 6 months, attributed to tasks and activities. (Andrews et al., 2010)



(Johnhain, 2015)

SEX ANXIETY

Sex anxiety is what it says on the tin, it's anxiety that centers around the act of sex. It is also known as sex performance anxiety.

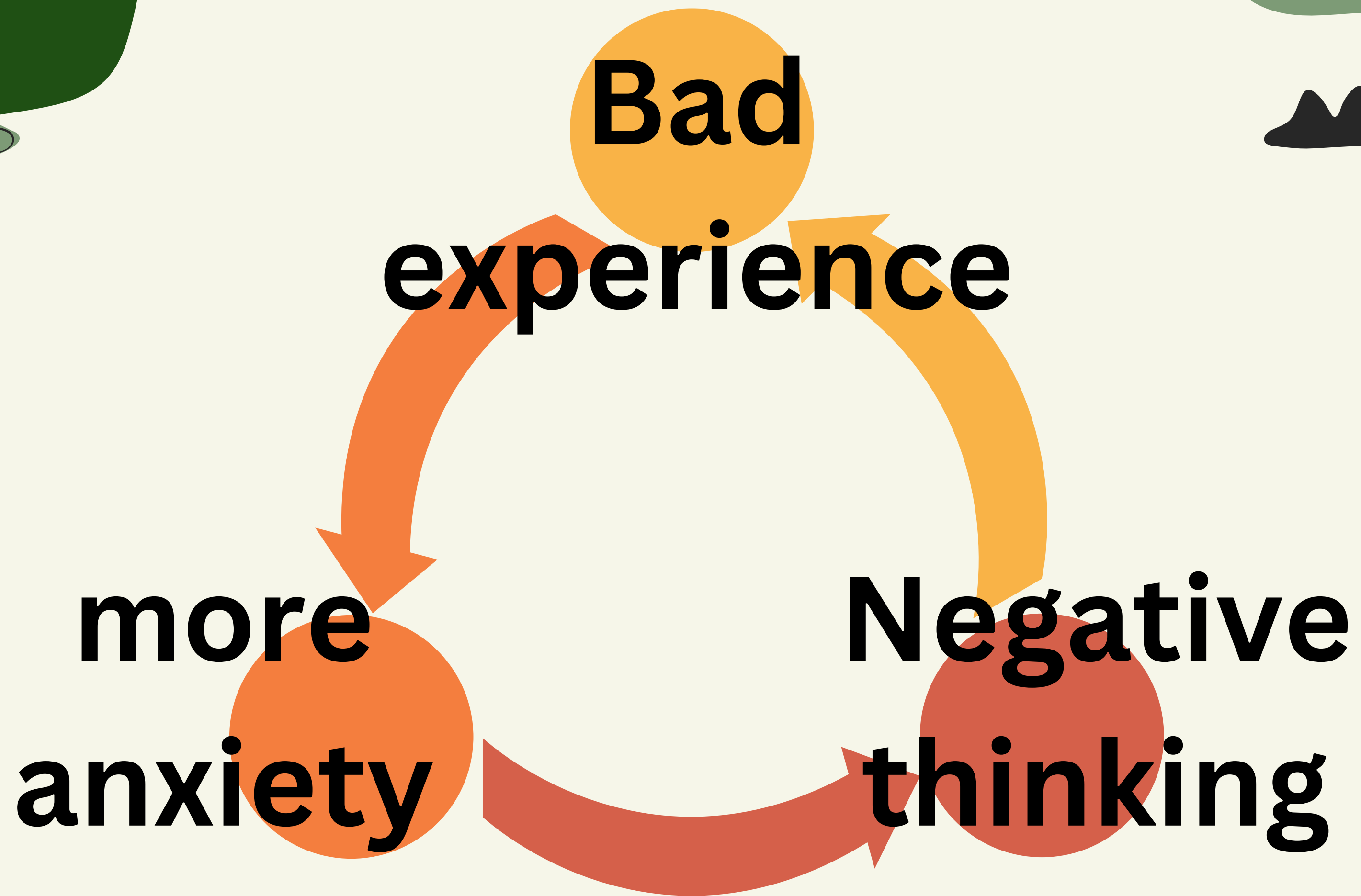
Symptoms of sex anxiety:

- GAD having a knock-on effect.
 - Relationship problems.
- Erectile dysfunction, premature ejaculation, vaginal dryness, inability to orgasm.
- Negative body image, self-confidence.
- Negative experience in the past (PTSD).

(Bockaj et al., 2024)



(Mprietou, 2020))



STATISTICS

Sex anxiety is the most common sexual health complaint in the world.

(Ohwovoriole, 2024)

MEN VS WOMEN

- 9-25% of Men
 - 6-16% of Women
- Experience sex anxiety

(Bockaj et al., 2024; Kirby, 2021)



(StockSnap, 2017)

AGE DIFFERENCES

- Under 40: 6 in 10
 - Over 50: 75.84%
- Men who experience sex anxiety

(Lu et al., 2020)

STUDIES

Arafa and Senosy (2018)

Egypt, found link
between women with
anxiety & experiencing
sex anxiety/sexual
dysfunction (77.6% of
p's).

Jiang et al. (2023)

China, found a gender
link between anxiety
and sex anxiety/sexual
dysfunction whereby
women were more
susceptible than men.
(43% vs 31%)

Grabski and Kasperek (2022)

Poland, Gay and bisexual
men significantly
experienced sex
anxiety/sexual
dysfunction more than
straight men

THEORETICAL MODELS OF SEX ANXIETY



SEXUAL SCRIPTS MODEL

Gagnon and Simon (1973)

Sexual behaviour is learnt through Cultural, Interpersonal and Intrapsychic scripts.

✿ CULTURAL SCRIPTS

Culture influences & expectations around sex

✿ INTRAPERSONAL SCRIPTS

Personal experiences around sex

✿ INTRAPSYCHIC SCRIPTS

Internalised expectations around sex

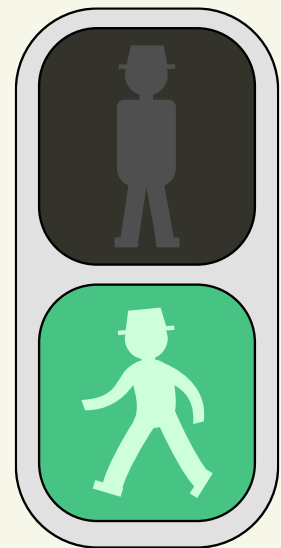
Together, shape sexual anxiety.



DUAL CONTROL MODEL

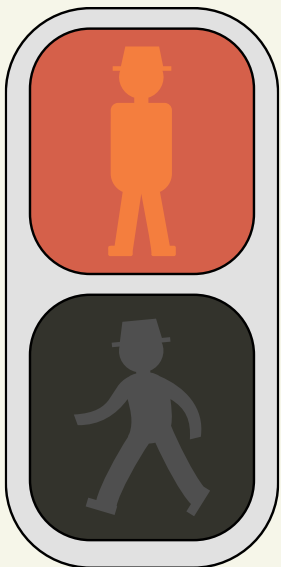
Bancroft and Janssen (2007)

Two systems drive sexual response:



EXCITATION SYSTEM

Triggers arousal



INHIBITION SYSTEM

Suppresses
arousal

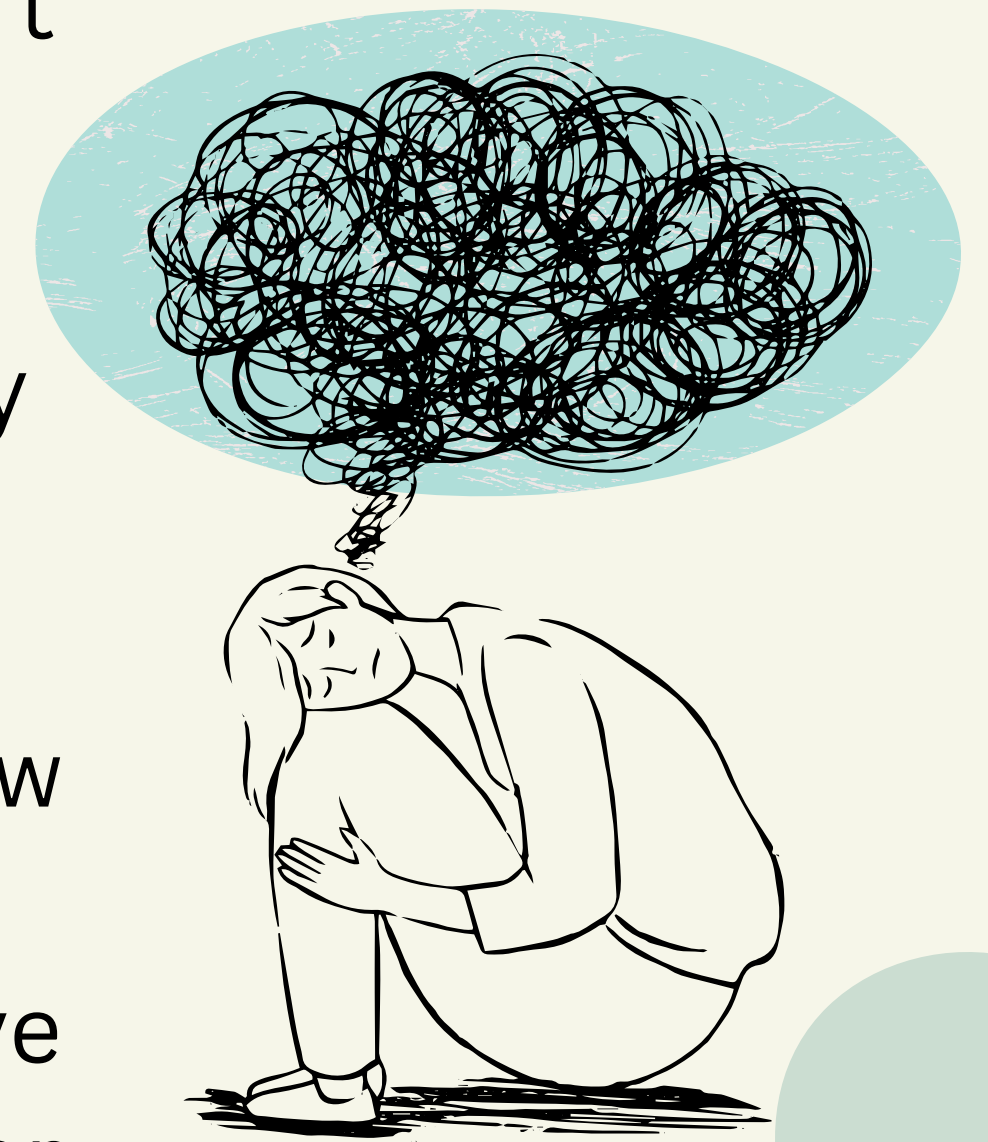
High inhibition and low excitation can contribute to sex anxiety, leading to difficulties like loss of arousal or avoidance of sex.

CASE STUDY

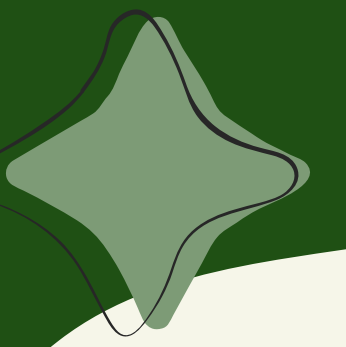
Maisy, 30 year old female, long-term relationship.

Maisy experiences intense anxiety before sex and is avoiding intimacy more and more. She feels that she isn't "good enough" in bed to satisfy her partner due to her gaining weight from having a baby over a year ago. She is the first one from her friend group to have a baby and they are still going out on weekends, whereas she now stays home. She spends most of her free time on social media, which makes her feel more down about how she looks.

In a past relationship, her boyfriend would make negative comments towards Maisy if she didn't have makeup on or look nice, even though her current boyfriend doesn't do this, she believes he could start to.



SEXUAL SCRIPTS MODEL



CULTURAL



INTRAPERSONAL



INTRAPSYCHIC

Women can multi-task and being a mum, does not stop you from being able to please your partner as you did before. You must lose all your baby weight within a year.

In past relationships, she felt she had to stay attractive and prioritise his pleasure over her own. She worries that her partner will find her ugly and won't be able to please him as she did due to being tired. She believes he will leave her & find someone else.

She tells herself, "if we don't have sex, he can't see that my body has changed"

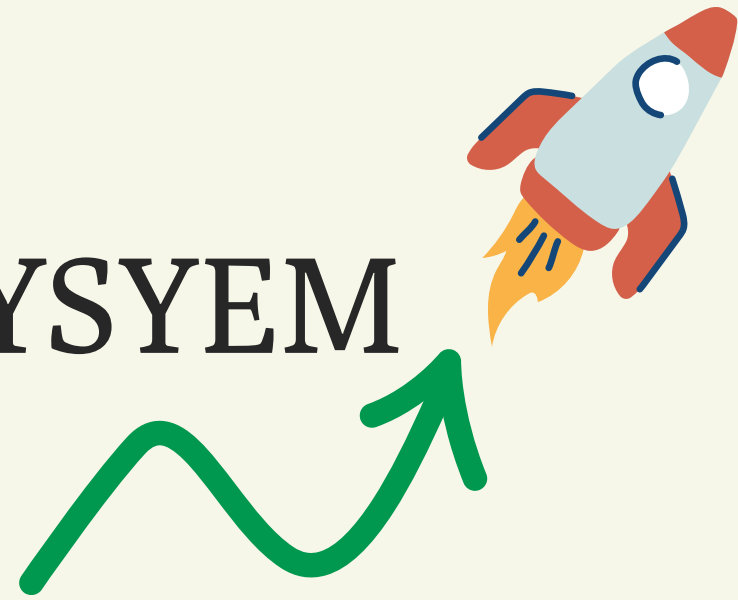
"If we don't have sex, he can't tell that I'm too tired to please him or be upset that he can't please me"

"If we don't have sex, he won't leave me"



DUAL CONTROL MODEL

EXCITATION SYSTEM



- She loves her partner and wants to be intimate with him
- Her self-confidence, self doubt and the fact she's always tired means she struggles to become aroused

INHIBITION SYSTEM



- Past experiences make her self-doubt her partner's attraction to her.
- Fear of judgment of how she looks and 'performs' causes avoidance, preventing arousal.
- Stress that because she has changed, he will not want her.

HOW TO DIAGNOSE SEX ANXIETY

Unfortunately, sex anxiety or sex performance anxiety is not recognised as a condition and often misdiagnosed as ‘erectile dysfunction’, which is a separate condition even though the outcome is usually the same.

As sex anxiety presents very similar to anxiety, this is the most common pathway that someone would walk down after disclosing their condition. A psychotherapist would then be the one to diagnose the client with sex anxiety.

(Ohwovoriole,
2024)



INTERVENTIONS

✿ MINDFULNESS ✿

Relaxation/Breathing/journaling

✿ MEDICATION ✿

Anxiety medication/prescription aids



✿ THERAPY ✿

CBT/Sex therapy/PCT/EDMR

✿ OPEN COMMUNICATION ✿

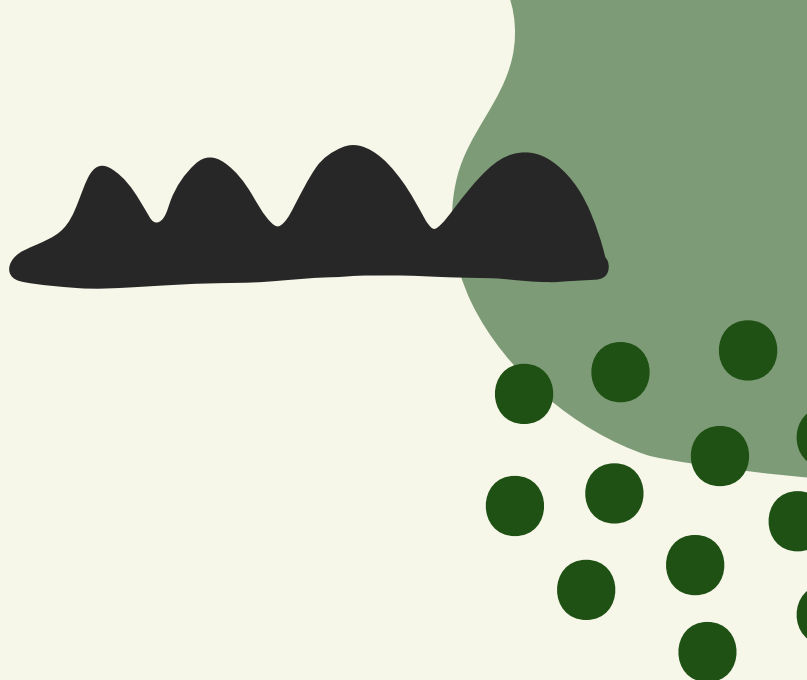
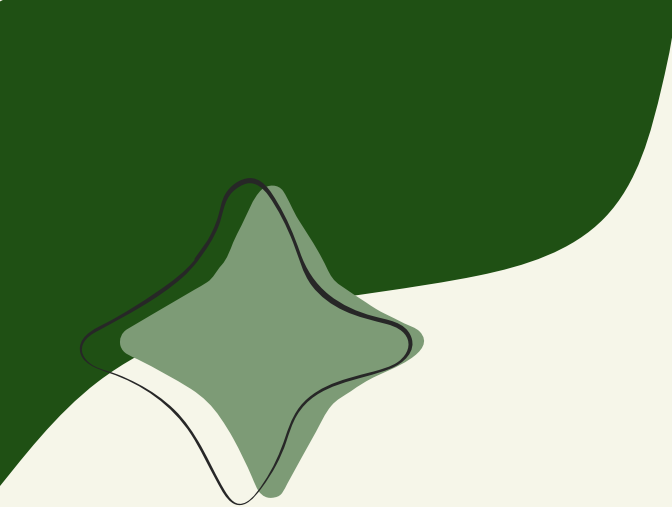
With your partner & yourself

✿ GOAL SETTING ✿

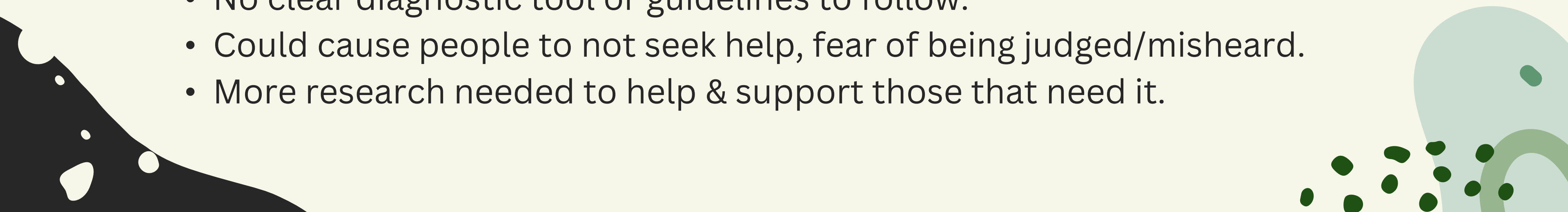
Setting realistic goals or milestones

(Villamil,
2025)





CONCLUSION

- GAD is the most diagnosed mental health condition in the UK and the world.
 - Sex anxiety has a significant link/overlap with those who have GAD (1 in 6).
 - Many contributing factors that may lead to sex anxiety.
 - Sexual scripts model & Dual control model.
 - Very little research into sex anxiety & how many it affects.
 - Little support and help for those who are struggling.
 - Commonly misdiagnosed as a sexual health dysfunction.
 - No clear diagnostic tool or guidelines to follow.
 - Could cause people to not seek help, fear of being judged/misheard.
 - More research needed to help & support those that need it.
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THANK
YOU!



QUESTION TIME

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