

Chapter 1 : Neuroscience of sex differences - Wikipedia

The Truth About Sex Differences It's an elemental fact that people increasingly don't want to hear: Sex differences in personality and behavior are real.

See here for a translation of the rather funny Japanese text. An extensive University of Chicago study found that more than half of the men thought about sex every day or several times a day, compared to less than a fifth of women; another study reported men had 7. But the differences in the absolute numbers are not really the point. The differences in the relative numbers of men compared to women is what this post is about. But before we move on in earnest with the fantasy edition of this sex drive subseries, we need to ask: Why is fantasy a good measure, or even a better measure, of sex drive, compared to, say, actual sex acts? Thoughts VS Actions Source: When sex researchers measure sex drive, they rarely measure actual sex. Plus to the third power, fantasies remove consequential thinking, like "if I do sexual act X, I will end up with a baby which I will have to support", or "if I pursue sexual act Y, I will end up in jail". Studying fantasies rather than acts therefore probes deeper into our true core. We may also approach this from the other end of the stick. Consider that having lots of sex does not necessarily equal a strong sex drive: Yes, sex workers might initially go into the field because of a stronger-than-average sex drive; but the specific things they do, and the frequency with which they do them, are probably not reflective of their desires: So this is where KISS got their costume ideas from. So it seems, for all these reasons and more, that desire proper is the more appropriate thing to study if you want to get an accurate measure of sex drive. A taste of the literature Source: I could just quote you the one-line summary of a meta-study or two. So to give you a real taste, I decided it would be instructive to collect the fragments of several of the sex differences claims found in just one single paper part-survey in one long continuous quote. So here it is: Men are more likely than women to have sexual fantasies and to be physically aroused by their sexual thoughts [Feel free to express your commiserations in the comment section. I think it does. And I left one out to treat it individually, because I think it merits it: Women are more likely to imagine themselves as recipients of sexual activity, while men are more likely to imagine women as recipients of their sexual activity. So a woman, in a sense, and surely to the consternation of many a feminist myself included, objectifies herself. Oddly, fantasies involving being forced or overpowered into a sexual act are fairly common and more equal among men and women compared to all of the above. Women only "probably" have these fantasies more often than men. What role does socialization play in these sex differences? First, just as in my previous post, let me note that the authors of the long quote too found no differences in the feelings of women and men that accompany and follow their sexual fantasies regarding taboo encounters: In my opinion, the invention of contraceptives alone probably dealt such a devastatingly equalizing blow, that any other attempts to create or maintain sex differences will pale in comparison. Especially in affluent Western societies, sex differences are probably much lesser than they were in a state of nature. Until we put our sex parts on a blockchain, Hell knows how much double-spending is going on! Chains guarded against doublecrossing, presumably before the invention of fellatio. With contraceptives, women might behave much more like men. But people in nature had no access to contraceptives. Hard to see without a glow stick. Another argument against the data might go something like this: First, one could address this data-wise. For instance a study that found almost all the males but only half the females to have experienced sexual desire several times a week or more, has also found that "men and women endorsed essentially the same indicators of desire. Ramifications in everyday life Polygamists in prison. Researchers have understandably thought that a person with a stronger sex drive will want to have sex with more people. So they went ahead and asked young males and young females how many sex partners they would ideally like to have over the next N number of years, or over the rest of their lives. In one study, men were hoping poor things for an average of 8 partners over the next 2 years; women wanted 1. Over a lifetime, women wanted 2. For the romantics out there: The large difference in the over-a-lifetime study was almost entirely due to a minority of highly promiscuously-inclined men who greatly outnumbered the minority of highly promiscuously-inclined women. The median for both sexes was 1 partner over a lifetime. Curtain close Still

thinking about them strawberries In brief, male sexual fantasies tend to be more ubiquitous, frequent, visual, specifically sexual, promiscuous, and active. Female sexual fantasies tend to be more contextual, emotive, intimate, and passive. First, the differences do not appear to be the result of socialization, and exist in all countries ever surveyed. Our fantasies spill out into the real world. According to one study, there is "a significant correlation between sexual fantasy and sexual behavior"[3]. And that means conflict. If a skinny person is married to a big person, they can get along as each can cook and eat what he desires. Not so with sex. The result in many cases might be people being starved or force-fed. Or, to unpack the metaphor: According, for instance, to some studies, men get more sexually bored in long-term relationships, while women feel greater attraction because of the emotional closeness that develops; when men start a new love affair, their attraction toward other women increases, the opposite of what is true for women. A Duke university study found that older men report a higher chronic sexual arousal when they are not partnered, while women report more sexual needs when they are partnered. Sex differences in sexual fantasy: An evolutionary psychological approach. *Journal of Sex Research*, [online] 27 4 , pp. In Wikipedia, The Free Encyclopedia. Gender Differences in Cognitive Processes in Sexuality. *Annual Review of Sex Research*, [online] 7 1 , pp. Developmental and Evolutionary Strategies. Where are the gender differences? Where are the gender similarities? Evolutionary and feminist perspectives. Empirical tests of sexual selection theory: Predictions of sex differences in onset, intensity, and time course of sexual arousal. *Journal of Sex Research*, [online] 24 1 , pp. Gender differences in sexuality: *Psychological Bulletin*, [online] 1 , pp. A comparison of evolutionary and environmental theories of erotic response part II: *The Journal of Sex Research*, [online] 21 4 , pp. Serum androgenic hormones motivate sexual behavior in adolescent boys. *Fertility and Sterility*, [online] 43 1 , pp. Biosocial Foundations for Adolescent Female Sexuality. *Demography*, [online] 23 2 , pp. Personality and Social Psychology Review, [online] 5 3 , pp. Testing Evolutionary and Social Structural Theories. *Archives of Sexual Behavior*, [online] 38 5 , pp. Earlier Sex Differences episodes:

Chapter 2 : Debating Sex Differences: Talk transcript “ Mind Hacks

Regional sex differences in volume and tissue density include the amygdala, hippocampus and insula, areas known to be implicated in sex-biased neuropsychiatric conditions. Together, these results suggest candidate regions for investigating the asymmetric effect that sex has on the developing brain, and for understanding sex-biased neurological and psychiatric conditions.

Anxiety disorders Disorder develops more quickly For both sexes, marijuana use disorder is associated with an increased risk of at least one other mental health condition, such as depression or anxiety. However, men who are addicted to marijuana have higher rates of other substance use problems as well as antisocial personality disorders. By contrast, women who are addicted to marijuana have more panic attacks 39 and anxiety disorders. In contrast, female and male cocaine users show similar deficits in learning, concentration, and academic achievement, even if women had been using it longer. These findings suggest a sex-related mechanism that may protect women from some of the detrimental effects of cocaine on the brain. Weight loss is another incentive women cite for methamphetamine use—and one reported significantly more by women than by men. In rare cases, this can lead to increased water in the spaces between cells, which may eventually produce swelling of the brain and even death. Young women are more likely than men to die from this reaction, with almost all reported cases of death occurring in young females between the ages of 15 and One possibility is that women who inject heroin are more likely than their male counterparts to also use prescription drugs—a dangerous combination. Women who do not overdose within these first few years are more likely than men to survive in the long term. This could be due to differences in treatment and other environmental factors that impact heroin use. Prescription Opioids Some research indicates that women are more sensitive to pain than men 68 and more likely to have chronic pain, 69 which could contribute to the high rates of opioid prescriptions among women of reproductive age. Research also suggests that women are more likely to misuse prescription opioids to self-treat for other problems such as anxiety or tension. However, from to , deaths from prescription opioid overdoses increased more rapidly for women percent or sevenfold than for men percent or fourfold. Women between the ages of 45 and 54 are more likely than women of other age groups to die from a prescription opioid overdose. Anti-Anxiety Medications and Sleeping Aids Women are more likely to seek treatment for misuse of central nervous system depressants, 14 which include sedatives sometimes prescribed to treat seizures, sleep disorders, and anxiety, and to help people fall asleep prior to surgery. Women are also more likely than men to die from overdoses involving medications for mental health conditions, like antidepressants. Antidepressants and benzodiazepines anti-anxiety or sleep drugs send more women than men to emergency departments. Other Substances Alcohol In general, men have higher rates of alcohol use, including binge drinking. However, young adults are an exception: For example, heavy drinking is associated with increased risk of having unprotected sex, resulting in pregnancy or disease, 80 and an increased risk of becoming a victim of violence and sexual assault. In addition, drinking as little as one drink per day is associated with a higher risk of breast cancer in some women, especially those who are postmenopausal or have a family history of breast cancer. In fact, after drinking comparable amounts of alcohol, women have higher blood ethanol concentrations. Nicotine Tobacco Research indicates that men and women differ in their smoking behaviors. For instance, women smoke fewer cigarettes per day, tend to use cigarettes with lower nicotine content, and do not inhale as deeply as men. Because this decline in smoking was greater among men than women, the prevalence of smoking is only slightly higher for men today than it is for women. Several factors appear to be contributing to this narrowing gender gap, including women being less likely than men to quit and more likely to relapse if they do quit.

Biology of Sex Differences considers manuscripts on all aspects of the effects of sex on biology and disease. Sex has profound effects on physiology and the susceptibility to disease.

This article has been cited by other articles in PMC. Abstract The prevalence, age of onset, and symptomatology of many neuropsychiatric conditions differ between males and females. To understand the causes and consequences of sex differences it is important to establish where they occur in the human brain. We report the first meta-analysis of typical sex differences on global brain volume, a descriptive account of the breakdown of studies of each compartmental volume by six age categories, and whole-brain voxel-wise meta-analyses on brain volume and density. Gaussian-process regression coordinate-based meta-analysis was used to examine sex differences in voxel-based regional volume and density. On average, males have larger total brain volumes than females. Examination of the breakdown of studies providing total volumes by age categories indicated a bias towards the 18–59 year-old category. Regional sex differences in volume and tissue density include the amygdala, hippocampus and insula, areas known to be implicated in sex-biased neuropsychiatric conditions. Together, these results suggest candidate regions for investigating the asymmetric effect that sex has on the developing brain, and for understanding sex-biased neurological and psychiatric conditions. Introduction The prevalence, age of onset, and symptomatology of many neurological and psychiatric conditions differ substantially between males and females Bao and Swaab, ; Baron-Cohen et al. Factors influencing the asymmetric effect that sex has on brain development may help us understand how and why male and female brains differ in their predisposition for risk for or resilience to such conditions. Identifying where and in what way male and female brains differ will help illuminate these factors and associated mechanisms. To summarize the evidence, we report the first meta-analysis of overall and voxel-wise regional brain structure of sex differences in the typically developing human brain and provide a descriptive account of the breakdown of studies providing overall volumes by age category. Understanding the influence of sex on the developing brain can provide insight into what is happening during the development of psychopathological conditions that are asymmetrically affected between sexes. Sex differences in brain structure are a product of the interaction of biological and environmental influences on brain development McCarthy and Arnold, Animal studies have shown that prenatal hormones Arnold and Breedlove, ; Phoenix et al. In addition, brain development is also influenced by factors such as sex-biased gene expression Kang et al. Meta-analysis is a statistical framework summarizing themes from the existent literature. Within this framework bias and variability is characterized and quantified leading to a reliable consensus. Recent extension of meta-analysis to brain imaging datasets has identified key regions of structure and function that are consistently detected in a wide range of psychiatric disorders Etkin and Wager, ; Menzies et al. However, although a variety of phenomena differ in many psychiatric conditions as a function of sex Bao and Swaab, ; Baron-Cohen et al. In the current study, we carried out two types of meta-analysis. First, we examined sex differences in overall brain volumes. As development and ageing have a large influence on total brain volume, we also investigated if different age categories were well represented in the literature by providing a description of the number of articles, number of total participants and weighted mean volume of each compartmental volume for each of the six age categories. Next, we conducted foci-based meta-analyses on regional differences between males and females, one with voxel-based studies of volume and one with voxel-based studies of tissue density. Gaussian-process regression coordinate-based meta-analysis GPR-CBMA was used for the voxel-based meta-analyses, as this new technique allows for relatively more accurate results by incorporating effect-size estimates from source data Salimi-Khorshidi et al. Furthermore, GPR-CBMA is also advantageous because its output includes meta-analytic effects in both positive and negative directions as well as an estimate of magnitude models censoring within the source data i. The search, conducted in PubMed, Web of Knowledge and Scopus, included articles published between and January Only articles written in English were included in this analysis. Unpublished materials were not explored and publications performing region-of-interest analysis were excluded. Publications were first selected based on

title and then imported into EndNote X4 for abstract selection. After abstract selection, publications were checked for inclusion criteria and reference lists of included articles were crosschecked for potential articles. Selection criteria Articles were included in the overall volumes analyses if they explicitly provided 1 any of the following raw not corrected for age, body size, etc. Articles were included in the regional voxel-based meta-analyses if they provided 1 an explicit whole-brain voxel-based analysis of brain volume or tissue density between typically developing males and females, 2 spatial coordinates for key results, and 3 statistics or effect sizes of key results p , r , F , T , or Z -statistics, either present in the publication itself or provided by authors. All studies included in the analyses were double checked for inclusion criteria by A. Overall volumes meta-analysis In a meta-analysis differences between studies and the omission of studies can bias results. For example, overlooking studies with a negative or non-significant result, perhaps due to publication bias, will tend to overestimate effect sizes. Studies are also likely to have differences in sample populations and study design. This leads to heterogeneity between the studies in the meta-analysis and increases sampling error. Our meta-analyses were therefore tested for bias and heterogeneity of the sample, and based on those outcomes either a random effect model RFX or a fixed effect model FFX was performed Higgins et al. In an FFX it is assumed that there is one true effect size and differences between studies are due to sampling error, whereas in an RFX it is assumed that the true effect may vary from study to study due to differences in their design. However, the Q -statistic does not provide information on the significance of the heterogeneity unlike the I^2 statistic Huedo-Medina et al. In order to provide as much detail as possible about the pool of source data that our meta-analysis is based on, forest plots and funnel plots were generated Salimi-Khorshidi et al. A forest plot reports a summary of the information of individual studies that went into the overall volumes meta-analysis. They show the amount of variation between the studies and an estimate of the overall result. A funnel plot, on the other hand, is a useful visual aid designed to examine the existence of publication bias as well as heterogeneity in systematic reviews and meta-analyses. An asymmetric funnel plot indicates a relationship between effect-size and study size, which may be due to publication bias or small-study effects *i*. In neuroimaging meta-analysis, image-based meta-analysis IBMA refers to methods that use full statistic images and allows for the use of hierarchical mixed effects models accounting for differing intra-study variance and modelling of random inter-study variation. In CBMA, each study included in the meta-analysis is summarized using only the reported x , y , z coordinates of peak activations either with or without activation magnitude.

Chapter 4 : A meta-analysis of sex differences in human brain structure

Sex differences in humans have been studied in a variety of fields. In humans, biological sex is determined by five factors present at birth: the presence or absence of a Y chromosome, the type of gonads, the sex hormones, the internal reproductive anatomy (such as the uterus), and the external genitalia.

Sex differences in medicine Sex differences in medicine include sex-specific diseases, which are diseases that occur only in people of one sex ; and sex-related diseases, which are diseases that are more usual to one sex, or which manifest differently in each sex. For example, certain autoimmune diseases may occur predominantly in one sex, for unknown reasons. Gender-based medicine, also called "gender medicine", is the field of medicine that studies the biological and physiological differences between the human sexes and how that affects differences in disease. Traditionally, medical research has mostly been conducted using the male body as the basis for clinical studies. More recently, medical research has started to understand the importance of taking the sex into account as the symptoms and responses to medical treatment may be very different between sexes. Sex-related illnesses have various causes: Different levels of prevention, reporting, diagnosis or treatment in each gender. Research has found that female doctors may be providing better care than male doctors in the U. Sex differences in human physiology Sex differences in human physiology are distinctions of physiological characteristics associated with either male or female humans. These can be of several types, including direct and indirect. Direct being the direct result of differences prescribed by the Y-chromosome, and indirect being a characteristic influenced indirectly e. Sexual dimorphism is a term for the phenotypic difference between males and females of the same species. Direct sex differences follow a bimodal distribution. Through the process of meiosis and fertilization with rare exceptions , each individual is created with zero or one Y-chromosome. The complementary result for the X-chromosome follows, either a double or a single X. Therefore, direct sex differences are usually binary in expression although the deviations in complex biological processes produce a menagerie of exceptions. These include, most conspicuously, male vs female gonads. Indirect sex differences are general differences as quantified by empirical data and statistical analysis. Most differing characteristics will conform to a bell-curve i. Often only the mean or mean difference between sexes is given. This may or may not preclude overlap in distributions. For example, most males are taller and stronger than females , [8] but an individual female could be taller and stronger than an individual male. The extents of these differences vary across societies. There are also differences in the structure of specific areas of the brain. Sex differences in human psychology Research on biological sex differences in human psychology investigates cognitive and behavioral differences between men and women. This research employs experimental tests of cognition , which take a variety of forms. Tests focus on possible differences in areas such as IQ , spatial reasoning, aggression , emotion , and brain structure and function. Chromosomal make up is important in human psychology. Women have two X chromosomes while males have an X and Y chromosomal structure. The X chromosome is much more active than Y and it affects behavior. Areas where differences have been found include verbal and mathematical ability. Studies on this topic explore the possibility of social influences on how both sexes perform in cognitive and behavioral tests. His results also found that women tend to be more people-oriented and men more thing-oriented. While female jealousy is more likely to be inspired by emotional infidelity, male jealousy is most likely to be brought on by sexual infidelity. The research focused on cognitive variables for example, reading comprehension, mathematics , communication for example, talkativeness, facial expressions , social and personality for example, aggression, sexuality , psychological well-being, and motor behaviors. A few exceptions were some motor behaviors such as throwing distance and some aspects of sexuality such as attitudes about casual sex , which show the largest gender differences. She concludes her article by stating: She pointed out to several other studies on humans and other primates showing a levelling of sex differences in sociability and physical strength. Males and females might indeed have different timings of maturation of physical and verbal systems: This coincides with the higher mobility of boys, accompanied by their lower rates of speech development in childhood, in comparison to girls. This middle age " middle sex phenomenon might explain why meta-analytic reports

and several experimental studies of verbal abilities and dominance using adult participants reported no sex differences.

Chapter 5 : Sex differences in humans - Wikipedia

Debating Sex Differences: Talk transcript A talk I gave titled "Debating Sex Differences in Cognition: We Can Do Better" now has a home on the web. The pages align a rough transcript of the talk with the slides, for your browsing pleasure.

Brain networks[edit] A meta-analysis found that although men and women commonly used the same brain networks for working memory , specific regions were sex specific. One effect they exhibit is on the hypothalamus , where they increase synapse formation. Gonadal hormone receptors have also been found in the basal fore-brain nuclei. Too much estrogen can have negative effects by weakening performance of learned tasks as well as hindering performance of memory tasks; this can result in females exhibiting poorer performance of such tasks when compared to males. The role of AFP is significant at crucial stages of development, however. Prenatally, AFP blocks estrogen. Postnatally, AFP decreases to ineffective levels; therefore, it is probable that estrogen exhibits its effects on female brain development postnatally. This in turn can "attenuate the effects" of endogenous opioid peptides. Opioid peptides are known to play a role in emotion and motivation. In the absence of testosterone, female behavior is retained. It has been shown to influence proapoptotic proteins so that they increase neuronal cell death in certain brain regions. Another way testosterone affects brain development is by aiding in the construction of the "limbic hypothalamic neural networks". Oxytocin appears at higher levels in women than in men. However, as of evidence suggested that cognitive and skill differences are present earlier in development. For example, researchers have found that three- and four-year-old boys were better at targeting and at mentally rotating figures within a clock face than girls of the same age were. Prepubescent girls, however, excelled at recalling lists of words. These sex differences in cognition correspond to patterns of ability rather than overall intelligence. Laboratory settings are used to systematically study the sexual dimorphism in problem solving task performed by adults. Specifically, males have an advantage in tests that require the mental rotation or manipulation of an object. Additionally, males have displayed higher accuracy in tests of targeted motor skills, such as guiding projectiles. They have an advantage on processing speed involving letters, digits and rapid naming tasks. In maze and path completion tasks, males learn the goal route in fewer trials than females, but females remember more of the landmarks presented. This shows that females use landmarks in everyday situations to orient themselves more than males. Females are better at remembering whether objects had switched places or not.

Chapter 6 : UW science school dismisses science on sex differences

To investigate whether sex differences in risk factors differed by age group (sex, age group, and the risk factor of interest to the models.

Indeed, all of our brains seem to share a patchwork of forms; some that are more common in males, others that are more common in females, and some that are common to both. The findings could change how scientists study the brain and even how society defines gender. Some modest disparities have been reported: On average, for example, men tend to have a larger amygdala, a region associated with emotion. So in the new study, researchers led by Daphna Joel, a behavioral neuroscientist at Tel Aviv University in Israel, tried to be as comprehensive as possible. Using existing sets of MRI brain images, they measured the volume of gray matter the dark, knobby tissue that contains the core of nerve cells and white matter the bundles of nerve fibers that transmit signals around the nervous system in the brains of more than individuals. They also studied data from diffusion tensor imaging, which shows how tracts of white matter extend throughout the brain, connecting different regions. The team found a few structural differences between men and women. The left hippocampus, for example, an area of the brain associated with memory, was usually larger in men than in women. In each region, however, there was significant overlap between males and females; some women had a larger or more male-typical left hippocampus, for example, while the hippocampus of some men was smaller than that of the average female. The male end zone contained features more typical of males, and the female end zone contained the version of the same structures more often seen in females. Then, the team scored every individual region-by-region to find out where they fell on that male-to-female continuum. So how to explain the idea that males and females seem to behave differently? That too may be a myth, Joel says. Her team analyzed two large datasets that evaluated highly gender stereotypical behaviors, such as playing video games, scrapbooking, or taking a bath. Individuals were just as variable for these measures: Or if they exist they are really, really rare to find. For one, she contends, researchers studying the brain may not need to compare males and females when analyzing their data. For another, she says, the extreme variability of human brains undermines the justifications for single-sex education based on innate differences between males and females, and perhaps even our definitions of gender as a social category. But she disagrees that it might not be useful to consider sex as a variable when studying the brain. She looks at rodent models to evaluate, for example, why males are five times as likely to develop autism, or why females are twice as likely to suffer from depression.

Chapter 7 : Sex differences in cannabis pain relief - Lift News

We would expect gender differences to be more variable across time and cultures than sex differences. Even with these new definitions, there is a fairly large gray area between sex differences and.

Regardless of the issue at hand, we see them as wanting completely different things—especially when it comes to issues of sex and sexuality. From differences in the way they have approached the sexual assault allegations against Supreme Court Justice Brett Kavanaugh to their views on abortion and same-sex marriage, Democrats and Republicans appear worlds apart. According to the largest and most comprehensive survey of sexual fantasies ever conducted in the United States, it would appear that there are also political differences in our private sexual fantasies. I surveyed 4,000 adult Americans from all 50 states about what turns them on and published the findings in a book entitled *Tell Me What You Want*. As part of this survey, participants were given a list of hundreds of different people, places and things that might be a turn-on. For each one, they reported on how frequently they fantasized about it. I learned a lot about the nature of sexual desire in modern America, but one of the more intriguing things I uncovered was the political divide in our fantasy worlds. While self-identified Republicans and self-identified Democrats reported fantasizing with the same average frequency—several times per week—I found that Republicans were more likely than Democrats to fantasize about a range of activities that involve sex outside of marriage. Why do Republicans seem to be drawn to non-monogamy and Democrats to power play in their sexual fantasies? By contrast, self-identified Democrats were more likely than Republicans to fantasize about almost the entire spectrum of BDSM activities, from bondage to spanking to dominance-submission play. The largest Democrat-Republican divide on the BDSM spectrum was in masochism, which involves deriving pleasure from the experience of pain. Why do Republicans seem to be drawn to nonmonogamy and Democrats to power play in their sexual fantasies? On the surface, it might be tempting to see this as revealing a fundamental difference in their sexual psychology. This is why taboos, no matter what they are, often become turn-ons. Within the Democratic Party, much of what drives the political agenda is the view that inequality is the source of a wide range of social problems. To be sure, sexual fantasies have complex origins. But my research suggests that politics certainly seems to play some role. Most of us seek to meet a range of psychological needs in our fantasies, too, such as feeling desired, validated and competent. Incidentally, just about 1 in 10 Republicans and 1 in 10 Democrats reported ever having fantasized about a politician before. Interestingly, the single most commonly fantasized-about politician among both parties was the same: Sarah Palin though Republicans were much more likely to have Palin fantasies than Democrats. Kennedy, Bill Clinton and Nikki Haley. Note that my data were collected in and before the Trump presidency began and only into the early days of his campaign. At that time, I received only one fantasy about Donald Trump in the entire dataset. If only Congress could be as bipartisan as we are in our sexual fantasies. Justin Lehmiller is a research fellow at The Kinsey Institute. This article tagged under:

Chapter 8 : The Learning Differences Sourcebook - PDF Free Download

First, established sex and gender differences in health and longevity motivate very little research on genetics and health in these journals. Second, sex, when incorporated, is most often treated as a confounding factor, or a source of variation that needs to be controlled, to make room for substantive conclusions about other factors.

Chapter 9 : Sex and Gender Differences in Substance Use | National Institute on Drug Abuse (NIDA)

For example, though we seem content to speculate over which sex is more adept at "multi-tasking" or "spatial awareness", when it comes to mental health differences a baffling silence has prevailed.