

Chapter 1

Men Trapped in Men's Bodies

Two Types of Male-to-Female Transsexuals

Male-to-female (MtF) transsexuals—men who want to have sex reassignment surgery (SRS) and live as women—are often described by themselves and others as “women trapped in men’s bodies” (e.g., Benjamin, 1966, p. 34; Person & Ovesey, 1974a, p. 17). This metaphor implies that these transsexuals not only want to look like women and live as women but that they also display the behavioral and psychological traits that are typical of women, their male bodies notwithstanding.

It is doubtful whether any MtF transsexuals can accurately be described as women trapped in men’s bodies, but there are two distinctly different types of MtF transsexuals, and the metaphor is much more applicable to one type than to the other. One MtF transsexual type consists of males who have a life-long history of female-typical interests, behaviors, and personality characteristics. From earliest childhood, these individuals behaved like girls, identified with girls, and often proclaimed themselves to *be* girls. Their interests, mannerisms, and preferred toys and activities were female-typical, and girls were their favored playmates. They began cross-dressing openly in early childhood and continued to cross-dress into adulthood, and their cross-dressing was not associated with sexual arousal. Their feminine identifications and behaviors persisted throughout adolescence and into adulthood. They discovered that they were sexually attracted exclusively to men. They usually chose occupations, hobbies, and leisure activities that were female-typical.

If any MtF transsexuals deserve to be thought of as women trapped in men’s bodies, these pervasively feminine MtF transsexuals have the best claim. Because MtF transsexuals of this type are exclusively sexually attracted to men and thus homosexual relative to their biological sex, and because they resemble (or, more accurately, *are*) the most feminine of homosexual men, they are usually referred to in the medical and scientific literature as *homosexual* MtF transsexuals.

There is a second MtF transsexual type, however, consisting of males who bear little resemblance to women trapped in men's bodies. Although they intensely desire to be female, they display few of the interests, behaviors, and psychological traits that are typical of women. In most respects, they closely resemble ordinary non-transsexual men. From earliest childhood, these individuals knew they were boys and behaved like boys, although many of them report that they had secret fantasies about becoming female as far back as they can remember. Their interests, mannerisms, and preferred toys and activities were usually male-typical. In most cases, other boys were their favored playmates, but a few primarily engaged in solitary play. Some began cross-dressing in early childhood, almost always surreptitiously. Nearly all were cross-dressing secretly by the time of puberty, and their cross-dressing was associated with intense sexual arousal. In other respects, however, their masculine interests and behaviors continued to be, at least superficially, unremarkable throughout adolescence and into adulthood. They rarely chose female-typical occupations and usually chose strongly male-typical ones, in fields such as engineering, computer programming, or military service. They discovered that they were either sexually attracted to women or, less commonly, were not strongly attracted to other people of either sex. Many of them fantasized at times about having sex with men, but only when they also fantasized about themselves as female; at other times, they found the idea of sex with men unappealing or repugnant. They also continued to be erotically aroused by cross-dressing and by the fantasy of being female—something traditionally associated with transvestic fetishism, not transsexualism.

Several years ago, I described MtF transsexuals of this second type as “men trapped in men's bodies” (Lawrence, 1998), because in most respects they resemble nontranssexual men, although they genuinely *do* feel trapped in their male bodies and have an intense desire to have female bodies. Because transsexuals of this second type are nonhomosexual relative to their biological sex (i.e., they do not experience exclusive sexual attraction to men), they are usually referred to as *nonhomosexual* MtF transsexuals in the medical and scientific literature, to distinguish them from their exclusively homosexual MtF counterparts. Nonhomosexual MtF transsexuals are also, and more controversially, referred to as *autogynephilic* transsexuals, because some clinicians and theorists have concluded that these transsexuals almost always share an unusual erotic interest called *autogynephilia*—a propensity to be erotically aroused by the thought of being female. This unusual erotic interest, and what transsexuals who experience it have to say about it, is the subject of this book.

Trapped in the Wrong Body

Jay Prosser, a female-to-male (FtM) transsexual, explained that “transsexuals continue to deploy the image of wrong embodiment because being trapped in the wrong body is simply what transsexuality feels like” (Prosser, 1998, p. 69), and I would not

disagree with his assessment. But I believe that MtF transsexuals of the second type—nonhomosexual MtF transsexuals—continue to employ the image of being “*women* trapped in men’s bodies,” not because they believe it is truly accurate, but because it is concise and superficially plausible. Attempting to provide a more accurate explanation would be a lengthy process and would not necessarily result in a more nuanced understanding, because the feelings associated with nonhomosexual MtF transsexualism are very difficult to understand, even for those of us who experience them firsthand. I routinely warn my nonhomosexual MtF transsexual patients: “Some people will accept you; some will support you; some will admire your courage; some will be your advocates; but no one except another transsexual *like yourself* will really understand you, because the feelings you experience are so strange that they defy most people’s comprehension.”

Homosexual MtF transsexualism is easier to comprehend. Extremely feminine men who are sexually attracted to other men and who dress as women have been observed in essentially all cultures. In some cultures—primarily in Asia, Oceania, and Latin America—such men are sufficiently prevalent that socially sanctioned transgender roles exist to accommodate them (e.g., Bartlett & Vasey, 2006; Nanda, 1994; Teh, 2001; Whitam, 1997; Winter, 2006). Ordinary men and women often seem to find it understandable, even predictable, that extremely feminine homosexual men might want to live full-time or part-time as women. As Levine (1993) observed, “Many people intuitively grasp a relationship between homoeroticism and the persistent intense, but transformed childhood wish to be female.” (p. 134). Bloom (2002) similarly noted that “Drag queens (gay cross-dressers) make sense to most of us. There is a congruence of sexual orientation, appearance, and temperament [in] feminine gay men dressing as women” (p. 51).

Nonhomosexual MtF transsexualism, in contrast, seems to make little sense: Why would an apparently masculine man who is attracted to women want to make his body resemble a woman’s body and live as a woman? The image of being a woman trapped in a man’s body—being a woman mentally and psychologically but a man anatomically—at least begins to suggest something of the pain, frustration, and incomprehension that nonhomosexual MtF transsexuals feel about not having the bodies they want. But it is a misleading metaphor, because it erroneously implies the presence of female-typical attitudes and behaviors, which are rarely present in nonhomosexual MtF transsexuals. It also omits the element that nonhomosexual MtF transsexuals find hardest to talk about: the intense, perplexing, shame-inducing erotic arousal that seems to simultaneously animate and discredit their desires to have female bodies. Sometimes that erotic arousal is center-stage and obvious; sometimes it lurks around the edges of the phenomenon and even briefly seems to disappear. For many affected persons, the arousal feels almost incidental much of the time: merely an unsought physical response that is somehow linked to one’s longing to be female and one’s distress over one’s male embodiment. Yet, for nonhomosexual MtF transsexuals who pay close attention, the sexual arousal that accompanies the desire to be female is difficult to ignore completely.

An Autogynephilic Transsexual's Case History

Although I have suggested that the feelings that accompany nonhomosexual (or autogynephilic) MtF transsexualism defy most people's comprehension, I will nevertheless try to convey some sense of them. Here, then, is a psychosexual autobiography, written from a third-person perspective by a colleague who is an autogynephilic MtF transsexual—a transsexual who recognizes herself to be autogynephilic. I'll refer to her as Ms. Z. Like all brief personal histories, Ms. Z's account necessarily omits many details, but she affirms that, to the best of her knowledge and recollection, it is entirely accurate. I present it here as an illustrative case history; I do not claim that it is typical or representative.

In most respects, he seemed to be a normal boy. He liked toy cars and airplanes, engaged in rough-and-tumble play, and did not seem to be delicate or effeminate. According to his mother, however, he showed an early interest in women's bodies and clothing: At about age 4, for example, he loved to stroke his mother's legs when she was wearing nylon stockings. His first conscious memory of wanting to wear girls' clothing occurred when he was age 6: A girl who was his regular playmate had a ballerina tutu that he yearned to wear. The fantasy of doing so felt both exciting and shameful. By the age of 8, he fantasized about being a girl and wearing girls' clothing nearly every night as he lay in bed. Whenever he did this, his penis became erect. He didn't understand why this happened, and he didn't like it. He found photographs of women's and girls' clothes in magazines and catalogs; he fantasized about wearing these pretty clothes. He fantasized about having long hair and being treated like a girl and having a girl's name; these fantasies also made his penis become erect. He was ashamed of having a penis and wanted it gone. He fantasized about having an operation to remove his penis; ironically, this also caused his penis to become erect.

When he was age 9, he was sometimes allowed to stay home alone. He used these opportunities to try on his mother's clothing. This felt exciting and shameful. The clothes were too big, but that wasn't important; they were women's clothes. He tried on panties, bras, slips, and dresses. His penis always became erect, and sticky fluid oozed from its tip. He didn't like the erections; they were unpleasant and made the clothes not fit well. Sometimes fluid from his penis got on the clothes. He feared that his cross-dressing would be discovered, but he couldn't make himself stop. His mother eventually did discover his cross-dressing; she confronted him and made him promise to stop. He stopped briefly but soon resumed, trying to be more careful.

His cross-dressing and fantasies of being female continued throughout adolescence. He hated the physical changes that accompanied puberty: facial hair, a deeper voice, genital enlargement. He was attracted to girls but too timid to date them. He envied their clothes and their lovely bodies; he burned with envy. His interests, however, were not notably feminine: His favorite subjects in school were geometry and calculus, and his hobby was programming computers. He read about transvestites and MtF transsexuals but couldn't identify with either category. Transvestites were attracted to women and sexually aroused by cross-dressing, like him; but transvestites valued their penises and didn't want them to be cut off, which was *not* like him. MtF transsexuals wanted female bodies, like him; but they were attracted to men and were never sexually aroused by cross-dressing, which was *not* like him. His feminization fantasies caused a buildup of sexual tension, but his only relief was in wet dreams. He read that boys masturbated by stroking their penises, but he couldn't stand to touch his. At age 18, he finally discovered how to give himself an orgasm by rubbing against the bed sheets; he would masturbate that way for the rest of his life.

When he went away to college, he finally had his own room and could cross-dress in privacy. He bought female clothes and wore them in private and occasionally in public; this was always erotically arousing. He experimented with black market estrogen. He liked the physical effects and found it sexually arousing to develop breasts, but taking estrogen seemed futile: He knew that he couldn't pass as a woman and that he would never be accepted for sex reassignment, because he wasn't attracted to men. He reasoned that if he could learn to like sex with men, he might qualify for sex reassignment. He met gay men and let them penetrate him, but he was simply not attracted to men and couldn't pretend to be. He dated a few women during his final years in college but never had sex with any of them; he was too inhibited. He thought about castrating himself but couldn't find the courage. He wished that he could be normal but feared that he never would be.

After college, he overcame his inhibitions and had sex with a woman for the first time. He loved looking at and touching her naked body. Although her body was exciting, it was not exciting enough that he could ejaculate inside of her. For that, he had to fantasize about being female. He did not fantasize about being female *with her*, just about being female; she was superfluous to his fantasy. He dated over a dozen women during his young adulthood, but he could never ejaculate with any of them except through the fantasy of being female. He tried having sex with very attractive women, hoping they would excite him enough that a fantasy would be unnecessary; this never worked. His female partners observed that he always "went away" immediately before his orgasm. He invariably felt miserable and depressed after orgasm, when he once again had to confront the reality of being male. He continued to cross-dress but found little satisfaction in it: What was the point if his body was male? He discovered erotica written for cross-dressers but could never find precisely what he wanted. Complete, permanent physical feminization, especially genital surgery, was what he found sexually exciting, but this was rarely emphasized. Stories that culminated in sex with men seemed to be the rule, but these were a turn-off for him. His fantasy world would have no men in it. With the exception of occasional nocturnal emissions, he had never experienced an orgasm in his life without a feminization fantasy playing in his head. He felt that some essential element of normal sexuality was missing in him; he felt sexually crippled. His obligatory reliance on feminization fantasies for arousal felt like a mental illness.

He consulted three different psychologists and psychiatrists about his wish to be female at various times in his life, but none was able to offer him any solutions, nor even a diagnosis that made sense to him. Eventually he consulted a therapist who specialized in transgender issues. She told him that he might be able to pass as a woman after all and might even be a candidate for SRS. At last he thought he saw a way forward. He started attending cross-dressing conventions and gradually developed confidence in his ability to pass as a female. He underwent facial hair removal and medically supervised hormone therapy. He grew his hair long, learned makeup skills, and acquired an appropriate feminine wardrobe. He changed his name, started living full-time as a woman, and eventually underwent SRS.

She—a pronoun change is now required—was delighted with the results of SRS. She loved having female genitalia; she liked her body for the first time in her life. She loved living as a woman, too; she adored women and was proud to be one of them at last. She had her first awake orgasm as a woman a few months after SRS, masturbating the same way she had as a man. She still found that feminization fantasies were obligatory to reach orgasm. Her orgasms after SRS were less intense and harder to achieve, but at least she was no longer miserable and depressed after having them: Her body was finally as it should be. She dated lesbian women and other MtF transsexuals and had sex with some of them, but she could never achieve orgasm in their presence. She would have needed to rely on feminization fantasies for this, and she somehow couldn't bring herself to do so. Eventually she resigned herself to celibacy, although she missed the simple comfort of another woman's body

pressed against her own. She still has never had an orgasm while awake without a feminization fantasy running in her head. She still regards her obligatory reliance on feminization fantasies for arousal—her autogynephilia—as a mental illness: a profound, disabling defect in her ability to feel genuine sexual love for another person.

The Concept of Autogynephilia

The term *autogynephilia* was introduced in 1989 by psychologist Ray Blanchard (Blanchard, 1989a); it literally means “love of oneself as a woman” (in Greek, *auto*=self, *gynē*=woman, and *philia*=love). Blanchard formally defined autogynephilia as “a male’s propensity to be sexually aroused by the thought of himself as a female” (Blanchard, 1989b, p. 616). Blanchard theorized, based on his own research and that of other investigators, that all or almost all nonhomosexual MtF transsexuals have the propensity to be sexually aroused by the thought of themselves as females. He further theorized that these transsexuals’ desire for sex reassignment is directly linked to their autogynephilic desire to be female.

Blanchard’s theory that “nonhomosexual MtF transsexualism equals autogynephilic transsexualism” was both evolutionary and revolutionary. It was evolutionary in the sense that it could be seen as a logical extension of previous observations about transvestism (i.e., erotic cross-dressing) and MtF transsexualism that had been published in the psychiatric literature, albeit that perhaps were not yet widely appreciated. Clinicians and researchers had observed, for example, that:

- Some cases of MtF transsexualism developed from what originally appeared to be transvestism (Lukianowicz, 1959).
- Transvestites as well as transsexuals experienced a form of cross-gender identity (desire to be the other sex; Stoller, 1968).
- The transvestite’s “key fantasy” was “becoming a woman” (Ovesey & Person, 1976, p. 229), not merely dressing as a woman.
- Some MtF transsexuals were homosexual in orientation, whereas others were primarily heterosexual but also had a history of transvestism (Money & Gaskin, 1970/1971).
- MtF transsexualism was (virtually) always accompanied or preceded by one of two anomalous erotic preferences—either homosexuality or erotic arousal associated with cross-dressing or cross-gender fantasy (Freund, Steiner, & Chan, 1982).

To synthesize these observations and derive from them the theory that all or almost all MtF transsexuals who are nonhomosexual in orientation have the propensity to be sexually aroused by the fantasy of themselves as female could be seen, at least in retrospect, as an unremarkable deductive leap.

But Blanchard’s theory equating nonhomosexual MtF transsexualism with autogynephilic transsexualism was also revolutionary, in that it emphasized *the erotic fantasy of oneself as a female* as the essential feature underlying this variety of transsexualism. The concept of autogynephilia placed erotic desire at the center of

the transsexual experience for nonhomosexual men: It suggested, at least implicitly, that autogynephilic erotic desire, or some closely related derivative of it, could be thought of as the driving or motivating force behind the desire for sex reassignment in nonhomosexual MtF transsexuals. This was a revolutionary challenge to the dominant paradigm, which asserted that transsexualism was entirely about expressing one's "true" gender identity and had nothing whatsoever to do with sexual arousal or erotic desire.

The concept of autogynephilia, then, provided more than just a new and more precise name for a recognized erotic phenomenon—sexual arousal associated with cross-dressing or cross-gender fantasy. It also provided the basis for a proposed typology of MtF transsexualism, in that Blanchard theorized that all or virtually all MtF transsexuals were either exclusively homosexual or were nonhomosexual *and* autogynephilic. Moreover, the concept of autogynephilia at least implicitly provided a theory of motivation for the pursuit of sex reassignment by nonhomosexual men: These autogynephilic men plausibly were motivated to seek sex reassignment because it would allow them to actualize their desires to have female bodies—desires that grew out of their autogynephilic fantasies.

The narrative histories of MtF transsexuals who have experienced autogynephilic arousal are the subject of this book. These transsexuals, whom I have called "men trapped in men's bodies," have important stories to tell—stories that are virtually unknown, both to the professionals who treat transsexual clients and to persons who experience autogynephilic arousal, think about undergoing sex reassignment, and may be searching for narrative histories that will help them better understand themselves. Before considering these narratives of autogynephilic transsexualism, however, it will be helpful to examine the observations and investigations that led Blanchard to develop the concept of autogynephilia and the MtF transsexual typology and implicit theory of transsexual motivation associated with it. It will also be useful to review the limited studies of autogynephilia conducted by other researchers.

Definitions and Terminology

Clarifying some definitions and terminology is a necessary first step. The task is complicated by the fact that definitions of some important terms related to transsexualism have been used inconsistently or have changed over time. Three terms that come up repeatedly are *gender identity*, *cross-gender identity*, and *gender dysphoria*. Briefly, gender identity is "a person's inner conviction of being male or female" (American Psychiatric Association [APA], 2000, p. 823). Cross-gender identity denotes the desire to belong to the opposite sex or gender. Gender dysphoria denotes discomfort with one's biological sex or assigned gender. Cross-gender identity and gender dysphoria are highly correlated phenomena, as one would predict; but the denotations of the two terms are slightly different.

The term *gender identity* has been used in two different ways. Sometimes it denotes the fundamental sense of being male or female that an individual develops during the first 18–30 months of life and that is usually unchangeable thereafter; Stoller (1968) called this *core gender identity*. Nonhomosexual MtF transsexuals do not have female core gender identities: In childhood and adulthood, before and after sex reassignment, they know they are and always will be biologically male. Gender identity, however, can also denote a person's sense of being psychologically male or female (Money, 1986). Ovesey and Person (1973) distinguished between core gender identity and this latter type of gender identity, which "can be defined as an individual's self-evaluation of psychological maleness or femaleness" (p. 54). Docter (1988) described how nonhomosexual MtF transsexuals (and many transvestites) gradually develop strong, persistent female gender identities of this latter type after years or decades of presenting themselves as women. Nonhomosexual MtF transsexuals experience their newly developed female gender identities as incongruent with their core gender identities (Stoller, 1968).

Cross-gender identity (sometimes called *cross-gender identification*) is usually thought of as being aspirational, at least initially: It reflects, in the words of Ovesey and Person (1973), "a wish, not a conviction" (p. 64). Typical symptoms of cross-gender identity or identification include "stated desire to be the other sex [and] desire to live or be treated as the other sex" (APA, 2000, p. 581). In the context of transsexualism, there is usually an assumption, implicit or explicit, that a person's cross-gender identity must be "strong and persistent" (APA, 2000, p. 581) to be clinically significant. When a MtF transsexual's cross-gender identity has become sufficiently strong and persistent, it can supplant her original core gender identity and become her new primary or dominant gender identity (Docker, 1988).

The word *dysphoria* denotes discomfort or discontent; the term *gender dysphoria* is applicable to persons who are "intensely and abidingly uncomfortable in their anatomic and genetic sex and their assigned gender" (Fisk, 1974, p. 10). Fisk also noted, however, that one of the cardinal signs of gender dysphoria is the intense wish to change sex—in other words, cross-gender identity. Blanchard did not always use the term *gender dysphoria* consistently; sometimes he described it exclusively in terms of discontent (e.g., "persistent discontent with the primary or secondary sexual characteristics of one's body"; Blanchard, 1993b, p. 70) and at other times in terms of discontent *and* aspiration (e.g., "discontent with one's biological sex, the desire to possess the body of the opposite sex, and the desire to belong to the opposite sex"; Blanchard, 1993a, p. 301). Gender dysphoria and cross-gender identity seem to operate as two sides of the same coin in many or most patients with long-standing, clinically diagnosed transsexualism. Many autogynephilic men, however, probably experience significant gender dysphoria years or decades before they develop strong, persistent cross-gender identities.

Transsexualism usually denotes either the combination of persistent cross-gender identity (desire to be the other sex) and severe gender dysphoria (APA, 2000, p. 828) or cross-gender identity that is *usually* accompanied by gender

dysphoria and the wish for hormonal and surgical sex reassignment (World Health Organization [WHO], 1992, p. 365). Blanchard (1993a) considered transsexualism to be simply severe gender dysphoria. Transsexualism was an official diagnosis in the 1987 edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM; APA, 1987), but it was replaced in the 1994 edition by the new diagnosis of *gender identity disorder* (GID; APA, 1994). GID is conceptualized as involving both strong, persistent cross-gender identity and persistent gender dysphoria (APA, 2000, p. 581). The terms transsexualism and GID are often used synonymously (e.g., Selvaggi et al., 2005). Recent studies have demonstrated that most of the symptoms that are associated with GID, transsexualism, and gender dysphoria—for example, cross-gender identification, feelings of similarity to the opposite sex, desire to live as the opposite sex, anatomic dysphoria, and desire for hormonal and surgical sex reassignment—are highly correlated in patients who have been diagnosed with GID (Deogracias et al., 2007; Singh et al., 2010). Accordingly, distinctions between “men with severe gender dysphoria,” “men with persistent cross-gender identities,” “men with GID,” and “MtF transsexuals” are likely to be subtle, if they are meaningful at all.

Sexual orientation refers to the category of persons to whom an individual is sexually attracted (or with whom he or she tends to fall in love). The two terms most commonly used to describe sexual orientation are *homosexual* (sexually attracted to persons of the same sex) and *heterosexual* (sexually attracted to persons of the opposite sex). Because these terms are referenced to biological sex, they do *not* change after sex reassignment. For example, a MtF transsexual who has completed sex reassignment and is attracted to women is considered heterosexual. Alternatively, the terms *androphilic* (sexually attracted to men) and *gynephilic* (sexually attracted to women) can be used to describe sexual orientation without referencing the sex of the person who experiences the attraction.

The latest edition of the DSM describes *paraphilias* as psychosexual disorders “characterized by recurrent, intense sexual urges, fantasies, or behaviors that involve unusual objects, activities, or situations and cause clinically significant distress or impairment in social, occupational, or other important areas of functioning” (APA, 2000, p. 535). Some paraphilic behaviors are illegal or potentially harmful to other people; other paraphilic behaviors are both legal and harmless. Autogynephilia is one of the latter type of paraphilias (Blanchard, 1993a). Other recognized paraphilias that will be mentioned in this book include *pedophilia* (sexual attraction to children), *fetishism* (sexual attraction to specific inanimate objects), *zoophilia* (sexual attraction to nonhuman animals), *transvestic fetishism* (sexual arousal to wearing women’s apparel), and *sexual masochism* (sexual arousal to experiencing suffering or humiliation). In some cases, a pattern of sexual attraction can be considered both a paraphilia and a sexual orientation; pedophilia and zoophilia are examples (Miletski, 2005; Seto, 2012). Blanchard (1989a, 1993a) considered autogynephilia to be both a paraphilia and a sexual orientation.

Early Development of the Concept of Autogynephilia

Blanchard developed the concept of autogynephilia in the course of his attempt to create a coherent system or taxonomy for classifying various types of gender dysphoria or GID in men (Blanchard, 2005). Clinicians had recognized for decades that men with gender dysphoria or transsexualism were heterogeneous in their clinical presentations. Many observers hypothesized that there were two or more distinct forms of MtF transsexualism, possibly with entirely different etiologies. Theorists had proposed several different taxonomies and classification schemes for MtF transsexualism (for a review, see Lawrence 2010b). No one taxonomy, however, was generally accepted when Blanchard began his investigations.

Blanchard decided to start with the classification system originally proposed by Magnus Hirschfeld, the pioneering German physician and sex researcher who coined the term *transvestite* in 1910 (Hirschfeld, 1910/1991). Hirschfeld (1918) classified the individuals he called transvestites—a category that included both MtF transsexuals and transvestites, as the terms are used today—into four groups, based on their erotic interest in men, women, both men and women, or neither men nor women. He referenced his classification system to a person's biological sex; consequently, his system categorized a transvestite (or MtF transsexual) attracted to men as homosexual, one attracted to women as heterosexual, and one attracted to both men and women as *bisexual*. Hirschfeld called those transvestites and MtF transsexuals who were attracted to neither men nor women *automonosexual*, a term that is no longer widely used. Nowadays the preferred term for these individuals is *analloerotic*, “not sexually attracted to other people” (Blanchard, 1989a), although the more familiar but less accurate term *asexual* is sometimes substituted.

In an early investigation, Blanchard (1985b) classified 163 MtF transsexual patients using Hirschfeld's four categories and examined the percentage of patients in each group who gave a history of sexual arousal in association with cross-dressing. He discovered that 73% of the patients in the combined heterosexual, bisexual, and asexual/analloerotic groups gave such a history (the three groups were statistically indistinguishable from each other), versus only 15% in the homosexual group—a highly significant difference. Based on this result, Blanchard theorized that there were probably only two basic types of MtF transsexuals: a homosexual type and a “heterosexual” (nonhomosexual) type. His theory was consistent with Freund et al.'s (1982) observation that there existed two distinct types of cross-gender identity among transvestites and MtF transsexuals: one type associated with homosexual orientation and another type associated with what Freund et al. called *cross-gender fetishism*—sexual arousal in connection with cross-dressing or cross-gender fantasy.

Because Blanchard had not yet coined the term autogynephilia, his study (Blanchard, 1985b) also used the term *cross-gender fetishism* to refer to sexual arousal associated with cross-dressing. Freund et al. (1982) had stated that

cross-gender fetishism is characterized by the subject's fantasizing, during fetishistic activity, that he or she belongs to the opposite sex and that the fetish, always in such cases an object characteristic of the opposite sex, is used to induce or enhance cross-gender identity. (p. 50)

Both Freund et al. and Blanchard realized that the sexual arousal men experienced in association with cross-dressing and other forms of cross-gender fetishism was related to the fantasy of being female—the essential concept in autogynephilia—but this arousal was still linked conceptually to the idea of a fetish object. Blanchard (1985b) expanded the idea of the fetish object to include activities symbolic of femininity; he noted that “the individual’s favorite such symbol might not be women’s clothing but some aspect of the feminine toilet, such as putting on makeup or shaving the legs” (p. 249). This expanded concept of the fetish object can be seen as laying the foundation for the more encompassing concept of autogynephilia.

Blanchard (1985b) also conceptualized the bisexual and analloerotic subtypes of MtF transsexualism as resulting from the interaction of a fundamentally heterosexual orientation with the yet-unnamed “erotic anomaly” that underlay cross-gender fetishism:

The differentiation of these subtypes from the heterosexual “parent group” is brought about by two different processes. In asexual [MtF] transsexualism, cross-gender fetishism (or the anomaly underlying it) so overshadows, or competes with, the erotic attraction to females that the individual appears to have little erotic attraction to other persons at all; his heterosexuality is, in a sense, latent. The process believed to account for the apparent existence of bisexual [MtF] transsexuals is somewhat different. In these individuals, the erotic anomaly manifested in cross-gender fetishism also finds expression in the fantasy of having intercourse, as a woman, with a man. The effective erotic stimulus, however, is not the male physique per se, as it is in true homosexual attraction, but rather the thought of being a female, which is symbolized in the fantasy of being penetrated by a male. For these persons, the imagined—occasionally real—male sexual partner serves the same function as women’s apparel or makeup, namely, to aid and intensify the fantasy of being a woman. (pp. 249–250)

Four years later, Blanchard would coin a term for the underlying erotic anomaly in cross-gender fetishism: autogynephilia.

Accounting for Departures from Theorized Associations with Sexual Orientation

Astute readers will have noted that the association Blanchard (1985b) observed between cross-gender fetishism and sexual orientation in MtF transsexuals was not a perfect one: About 27% of nonhomosexual MtF transsexuals denied cross-gender fetishism, and about 15% of homosexual MtF transsexuals reported it. These departures from the predictions of Blanchard’s theory have not escaped the notice of his theory’s critics. Some of them have argued that, because many nonhomosexual MtF transsexuals deny cross-gender fetishism, at least some cases of nonhomosexual MtF transsexualism may be unrelated to cross-gender fetishism or autogynephilia and that these may constitute a putative “third type.” Others have argued that, because some homosexual MtF transsexuals report cross-gender fetishism, this (or the erotic anomaly that underlies it) is merely an incidental finding with no particular typological or etiological significance. Subsequent investigations have also found

the relationship between MtF transsexual typology and autogynephilia to be strong but not perfect (Blanchard & Clemmensen, 1988; Blanchard, Clemmensen, & Steiner, 1987; Lawrence, 2005; Nuttbrock, Bockting, Mason, et al., 2011). Blanchard conducted two additional studies prior to his introduction of the term autogynephilia that helped put these departures from his theory's predictions into perspective.

Blanchard, Racansky, and Steiner (1986) measured changes in penile blood volume in 37 heterosexual cross-dressing men who listened to audiotaped recordings of narratives describing four scenarios: cross-dressing, sex as a female with a male partner, sex as a male with a female partner, and solitary, nonsexual activity. The participants included transvestites, nonhomosexual MtF transsexuals, and nonhomosexual men with intermediate conditions. The participants were divided into groups, based on whether they claimed they had always, usually, rarely, or never felt sexually aroused when cross-dressing during the previous year. All four groups displayed significantly greater physiological sexual arousal (measured as mean increase in penile volume) in response to the cross-dressing narrative than in response to the neutral, nonsexual narrative; this included the group that denied having felt sexually aroused during cross-dressing. Interestingly, six out of nine members of the latter group claimed that they had *never* been aroused by cross-dressing at *any* time. Blanchard et al. concluded that nonhomosexual cross-dressing men, “even those who deny recent or past erotic arousal in association with cross-dressing or applying makeup, still tend to respond with penile tumescence to fantasies of such activities” (p. 460). In short, many or most nonhomosexual cross-dressing men who deny sexual arousal in association with cross-dressing are not reporting accurately. This result suggested, at least by implication, that many or most of the nonhomosexual MtF transsexuals who deny sexual arousal in association with cross-dressing or autogynephilic fantasy are also not reporting accurately. Blanchard theorized that the misreporting his participants engaged in probably was not intentional, but reflected a genuine lack of awareness of their sexual arousal. This explanation plausibly accounts for many or most instances in which nonhomosexual MtF transsexuals deny having experienced autogynephilic sexual arousal.

An interesting incidental finding of the Blanchard et al. (1986) study was that, for many of the participants—including those who described themselves as sometimes but not always sexually aroused by cross-dressing—the most sexually arousing scenario of the four was the fantasy of being a female having sex with a male. Blanchard had previously argued that sexual arousal in this context reflected the autogynephilic fantasy of enacting the female sexual role, not genuine attraction to the male physique. One could speculate that this pattern of autogynephilic fantasy might eventually lead some heterosexual cross-dressing men, including some nonhomosexual MtF transsexuals, to conclude that their sexual orientation had changed and that they had become exclusively sexually attracted to men. This might account for the existence of supposedly “homosexual” MtF transsexuals who report a history of sexual arousal with cross-dressing or cross-gender fantasy. A recent article that summarized data from four northern

European gender clinics provided additional support for this explanation: It reported that 23 (52%) of 44 male patients with adult-onset gender dysphoria described themselves as exclusively sexually attracted to men, but their treating clinicians believed that only 4 (9%) were genuinely androphilic, based on patient interviews and clinical records (Nieder et al., 2011). There are also several reports of nonhomosexual MtF transsexuals who admitted that they deliberately misrepresented themselves to clinicians as homosexual (Blanchard, Steiner, & Clemmensen, 1985; Walworth, 1997).

In a second important study that is relevant to understanding departures from the predicted relationship between autogynephilia and MtF transsexual typology, Blanchard, Clemmensen, & Steiner (1985) studied the association between a self-favorable or *socially desirable* response style (the tendency to describe oneself in morally excellent or admirable terms) and several aspects of self-reported clinical history in 64 heterosexual male gender patients, about two thirds of whom were MtF transsexuals. Blanchard, Clemmensen, et al. found that a socially desirable response style was strongly correlated with the tendency to describe oneself as a “classic” or “textbook” example of MtF transsexualism: one “who has felt and acted feminine from earliest childhood, has never been sexually aroused by women’s apparel, and is romantically inclined toward males” (p. 508). The aspect of clinical history that was most highly correlated with socially desirable responding was absence (or denial) of cross-gender fetishism. It seems plausible, therefore, that some cases in which nonhomosexual MtF transsexuals deny autogynephilic arousal may reflect the influence of self-favorable or socially desirable responding.

Further evidence that persons who experience autogynephilic arousal with cross-dressing often deny such arousal and that denial is associated with socially desirable responding comes from a recent study involving adolescent boys, mean age 14 years, who were referred to a gender identity clinic because of transvestic fetishism (Zucker et al., 2012). Remarkably, 45 (47%) of 96 boys did not admit to sexual arousal associated with cross-dressing on even a single item of a 10-item scale measuring transvestic fetishism, even though this was the very problem for which they were clinically referred. In this study, too, a socially desirable response style was strongly correlated with denial of sexual arousal with cross-dressing.

It is important to recognize that socially desirable responding does not necessarily imply deliberate misrepresentation or lying. Paulhus (1984) observed that socially desirable responding can reflect either *impression management* (conscious misrepresentation) or *self-deceptive enhancement* (self-favorable presentation that is genuinely believed to be true). It is entirely possible that many instances in which Blanchard et al.’s (1986) heterosexual cross-dressing men denied being sexually aroused, despite the fact that they actually were, and many instances in which Zucker et al.’s (2012) adolescent boys denied transvestic fetishism, despite being clinically referred for this, were attributable to self-deceptive enhancement, not deliberate misrepresentation.

Additional Correlates of Sexual Orientation in MtF Transsexualism

In another investigation of MtF transsexual typology, Blanchard et al. (1987) studied 125 gender dysphoric male patients, of whom 52 were classified as homosexual and 73 as heterosexual (i.e., nonhomosexual). About 82% of the nonhomosexual patients had a history of sexual arousal with cross-dressing, compared to roughly 10% of the homosexual patients; this was consistent with previous observations of a statistically strong but not perfect relationship between sexual orientation and cross-gender fetishism (i.e., autogynephilia). The nonhomosexual patients presented for assessment at an older mean age than the homosexual patients, about 34 vs. 26 years. The nonhomosexual and homosexual patients began cross-dressing at about the same mean ages—9.6 and 11.0 years, respectively—but the mean age of first cross-gender wishes was significantly older in the nonhomosexual group, 9.8 vs. 7.7 years. On average, then, the nonhomosexual gender dysphoric men began to have cross-gender wishes around the same time or shortly after they began cross-dressing, whereas the homosexual gender dysphoric men began to have cross-gender wishes more than 3 years before they began cross-dressing. Blanchard et al. concluded that the pattern of the data was “consistent with the view that heterosexual and homosexual gender dysphoria are likely to prove etiologically distinct conditions” (p. 149).

Blanchard (1988) subsequently examined self-reported childhood femininity and age at clinical assessment in 256 MtF transsexuals, whom he divided into homosexual, heterosexual, bisexual, and asexual/alloerotic groups. Comparing equal numbers of participants ($n=16$) from each of these four groups, Blanchard found that the homosexual participants reported significantly greater childhood femininity and also presented for assessment at a significantly younger mean age than the heterosexual, bisexual, and asexual/alloerotic participants; the three nonhomosexual groups did not differ significantly from each other on either childhood femininity or mean age at assessment. Although this study did not address autogynephilia or cross-gender fetishism directly, it provided further evidence that there are two distinctly different types of MtF transsexualism: one associated with homosexual orientation and greater childhood femininity and another associated with nonhomosexual orientation and less childhood femininity.

In the same year, Blanchard and Clemmensen (1988) investigated the relationship between severity of gender dysphoria and frequency of sexual arousal and masturbation accompanying cross-dressing in 193 nonhomosexual gender dysphoric men. Lacking a specific measure of gender dysphoria, they used persistence of cross-gender identity as a proxy for this—a reasonable strategy, as the latter measure was strongly associated with the likelihood that an individual had an interest in SRS. Blanchard and Clemmensen found that the gender dysphoric men with more persistent cross-gender identities (and by implication, more intense gender dysphoria) reported less frequent sexual arousal and less frequent masturbation with cross-dressing—a relationship that the authors thought might reflect socially desirable

responding, at least in part. Nevertheless, more than half of the men with the most intense gender dysphoria reported that they had sometimes been sexually aroused when cross-dressing during the past year, and just under one-half reported that they had at least occasionally masturbated when cross-dressing during the past year. Among the men who acknowledged ever having experienced sexual arousal with cross-dressing—only about 84% of the men did—roughly half reported that they sometimes considered sexual arousal with cross-dressing to be bothersome. This finding was consistent with a previous report by Buhrich (1978) that heterosexual cross-dressing men sometimes experience sexual arousal associated with cross-dressing as unwanted.

Introducing the Term *Autogynephilia*

Blanchard first used the term *autogynephilia* in two articles published in 1989. In the first of these (Blanchard, 1989a), he reviewed his own and earlier attempts to construct meaningful taxonomies of gender dysphoria and gender identity disorders in men. He concluded that “the nonhomosexual gender dysphorias, together with transvestism, constitute a family of related disorders” (p. 322) and that the “erotic (or amatory) propensity” (p. 323) underlying these disorders should be called autogynephilia (“love of oneself as a woman”). As far as I am aware, this was the first article in which Blanchard referred to autogynephilia as a *sexual orientation*, when he theorized that “All gender dysphoric males who are not sexually oriented toward men are instead sexually oriented toward the thought or image of themselves as women.” (pp. 322–323). Blanchard would reintroduce the concept of autogynephilia as a sexual orientation 4 years later in a more elaborated form (Blanchard, 1993a).

In a second article published in the same year, Blanchard (1989b) described two newly developed scales for measuring aspects of autogynephilia and one for measuring sexual interest in other persons. He reported on the ability of these scales to distinguish homosexual, heterosexual, bisexual, and asexual/alloerotic subgroups within a sample of 212 MtF transsexuals. Blanchard found that scores on the Core Autogynephilia Scale, a measure of erotic arousal in association with the fantasy of having various features of the nude female form (face, breasts, vulva, etc.) were significantly higher in the three nonhomosexual groups than in the homosexual group. Scores on the Autogynephilic Interpersonal Fantasy Scale, a measure of erotic arousal in association with the fantasy of being admired as a female by another person, were significantly higher in the bisexual group than in the other three groups. Scores on the Alloeroticism Scale, a measure of sexual attraction to other people, were significantly lower in the asexual/alloerotic group than in the other three groups. Two previously developed scales also differed between groups: The homosexual group achieved significantly lower scores on measures of Heterosexual Experience and Cross-Gender Fetishism than the three nonhomosexual groups. Blanchard concluded that his findings supported the theory that “the major types of nonhomosexual gender dysphoria constitute variant

forms of one underlying disorder, which may be characterized as autogynephilic gender dysphoria” (p. 616). Among the three nonhomosexual types, bisexual MtF transsexuals achieved significantly higher scores on autogynephilic interpersonal fantasy, suggesting the hypothesis that “bisexual gender dysphorics’ interest in male sexual partners is mediated by a particularly strong desire to have their physical attractiveness as women validated by others” (p. 622). Blanchard cautioned, however, that the term “bisexual” should not be interpreted too literally: “This ‘bisexual’ behavior need not reflect an equal erotic attraction to the male and female physiques (and would perhaps be better characterized as *pseudobisexuality*)” (p. 622).

Blanchard’s Proposed Transsexual Typology: Brief Comments

Blanchard’s (1989a) proposal that “all gender dysphoric males who are not sexually oriented toward men are instead sexually oriented toward the thought or image of themselves as women” (pp. 322–323) was the first explicit statement of the MtF transsexual typology that would prove to be the most controversial outgrowth of the concept of autogynephilia. Some readers might expect me to discuss this typology in detail, setting forth the evidence pro and con; but I have decided not to do so. The aim of this book is to present and discuss the narratives of transsexuals who report that they have experienced autogynephilia, whereas most of the debate about Blanchard’s typology concerns the experiences of nonhomosexual MtF transsexuals who allege that they have *not* experienced autogynephilia and therefore purportedly do not conform to the typology. Consequently, a detailed examination of the arguments for and against Blanchard’s typology is really peripheral to the aim of this book.

I would simply like to state for the record that, based on my clinical experience and my reading of the scientific literature, I am firmly convinced that the overwhelming majority—probably 98% or more—of cases of severe gender dysphoria in men arise in connection with either effeminate homosexuality or autogynephilia; most of the rare exceptions probably arise in connection with conditions such as schizophrenia and certain personality disorders. The idea that substantial numbers of MtF transsexuals belong to a putative “third type” that is neither homosexual nor autogynephilic is inconsistent with my clinical experience and is, in my opinion, inconsistent with the best available empirical evidence. It is true that, in several major studies (Blanchard 1985b; Blanchard et al., 1987; Blanchard & Clemmensen, 1988; Lawrence, 2005; Nuttbrock, Bockting, Mason, et al., 2011), between 11% and 27% of nonhomosexual MtF transsexuals or gender dysphoric men denied having experienced autogynephilic arousal; but, based on observations in other studies described earlier (Blanchard et al., 1986; Blanchard, Clemmensen, et al., 1985; Zucker et al., 2012), their denials can easily be accounted for without theorizing the existence of a third major MtF transsexual type. Some clinicians and researchers disagree with my point of view. Arguments against Blanchard’s transsexual typology have been presented in recent articles by Moser (2010) and Serano (2010); interested readers may wish to consult these articles.

Exploring the Implications of Autogynephilia

In proposing the concept of autogynephilia, Blanchard took a huge step toward explaining the phenomenon of “men trapped in men’s bodies”—men who are not effeminate and are sexually attracted to women but also want to become women. The concept itself was only the beginning, however: Blanchard continued to conduct research on autogynephilia during the early 1990s, further extending and developing the associated theory. Other clinicians and researchers neglected Blanchard’s concept for several years, but eventually some of them also began to investigate the clinical manifestations of autogynephilia, the associated MtF transsexual typology, and the implications of these for understanding and treating male gender dysphoria. These developments will be the subject of Chap. 2.