Chapter 9 Other Aspects of Autogynephilic Sexuality

The narratives submitted by the transsexual informants addressed several other aspects of autogynephilic sexuality in addition to those discussed in the previous chapters. Many informants observed that autogynephilic fantasies were always or almost always necessary to achieve orgasm in all sexual situations, including during masturbation. Some described autogynephilic arousal as being, at least at times, unpleasant, psychologically distressing, or unwanted. Informants reported a variety of unpleasant feelings immediately following orgasms that had been achieved with the help of autogynephilic fantasies. Several narratives discussed the effects of feminizing hormone therapy on autogynephilic arousal. Others described additional paraphilic sexual interests that co-occurred with autogynephilia.

Autogynephilic Fantasies Required for Orgasm

As noted in Chap. 7, several informants reported that autogynephilic fantasies were always necessary to achieve orgasm during sexual intercourse with female partners. Still others observed that achieving orgasm was contingent on autogynephilic fantasies in all sexual situations, including during masturbation. Here are some representative excerpts:

As an adolescent and young adult, I would often masturbate, but I couldn't get aroused without picturing myself as a woman. It is still impossible for me to have an orgasm without some form of autogynephilic fantasy. (056)

From a sexual standpoint, I can not have an orgasm unless I am thinking about being a woman. (223)

I have never been able to orgasm without thinking of being a woman. (049)

For me, sex always involved visualizing myself being a woman in some variation: clothes, sexual situations, genitalia, breasts, the whole gamut. I still cannot orgasm without visualizing something about being a woman. (224)

One individual conceded that she had managed to climax a few times without resort to an autogynephilic fantasy but that such occurrences had been rare:

Just about every time I masturbated, I'd be fantasizing about being a woman, being transformed into a woman, or having sex with a woman while being one, too. I can count on one hand the times I successfully masturbated to the thought of having sex with a woman being a man, and those times it was through speed alone (having a limp dick) that I was able to climax. (225)

Altogether, about two dozen transsexual informants—roughly 10%—spontaneously volunteered that autogynephilic fantasies were always or almost always necessary to achieve orgasm during masturbation or partnered sex, even though the issue of obligatory reliance on autogynephilic fantasies for orgasm was never asked about or alluded to in any of the survey solicitations.

Discomfort with Autogynephilic Arousal

Gender dysphoric men and other men who cross-dress sometimes report that sexual arousal associated with cross-dressing is unwanted or bothersome (Blanchard & Clemmensen, 1988; Buhrich, 1978). In the current study, several informants similarly reported that they disliked or were made uncomfortable by autogynephilic arousal. Some stated that their autogynephilic feelings made them feel driven, were intrusive, or interfered with their concentration:

I was extremely autogynephilic. My fantasies were of my feminization, which still continue, despite not having testosterone. My sexual urges have virtually disappeared since surgery. I hope I get horny again, but I am very happy not to be as driven as I once was. (136)

Every day is a constant fight between the things that I have to do and the autogynephilia that creates disruptive thoughts. It is not easy to study when your mind pops up thoughts of being a girl. It is impossible to concentrate at your job when you envy the pantyhose that a stranger outside wore. It is hard to maintain a healthy relationship with your girlfriend when you envy her for being female. (006)

The latter narrative implied that both autogynephilic erotic arousal and the intrusive feelings of envy and longing it caused were experienced as disruptive factors.

Other informants observed that autogynephilic arousal acted as an unpleasant reminder of their unwanted maleness:

I am 23 years post-op. I would like to distinguish between the sense of well-being resulting from being a girl and the sexual arousal of a male body. The former was always welcome; the latter wasn't. If fantasy or crossdressing was leading to arousal, I'd generally either try to avoid it or speed it up to get it out of the way. (138)

I began crossdressing when I was 10. I was having a shower and my sister's bathing suit was hanging there. I put it on and had an erection; it felt nice to wear it, but I hated my penis. I wanted the erection to go away. For the next 9 years, my cross-dressing increased, the erections persisted, and I continued to hate my penis. (214)

Like many others, I, too, have always had these feelings of arousal at the mere thoughts associated with being female. And it always pissed me off! I hated that putting on a dress or wearing other feminine attire or even just fantasizing about being a normal woman would elicit such an "un-female" response both physically and mentally. I wanted so badly for the things I was doing to simply be and feel normal. I didn't want to be aroused by them! Because of my attitude, I never felt right feeding these reactions to cross-dressing by masturbating during them. I was therefore never fetishistic with any clothing or with anything, a fact I took comfort and pride in. (021)

These narratives suggested that the informants found autogynephilic arousal to be both physically distressing and invalidating to their cross-gender identities.

Practical considerations, especially the difficulties of wearing women's clothing in the presence of an erection, were also emphasized in some narratives:

Two years ago, I started wearing my mother's clothes, particularly her underwear. Every time I used her clothes, I had erections. I do not like having erections during my crossdressing sessions; sometimes I let my mother's underwear somehow get wet. I try not to have these erections doing my cross-dressing sessions; a big penis makes it hard to put on skirts and look feminine. It is not something I like and I definitely prefer not having them. (207)

I would guiltily sneak into my mother's closet when she was away and wear as many combinations of her clothes as possible. I was almost always turned on by it, but I mostly did not masturbate. Instead, I'd condemn my penis for getting in the way. My friends still can't understand why I hate my penis so damn much, even after I told them that I am very committed to the idea of becoming a woman. Wearing women's clothing is always something that initially turns me on, but when that damn penis of mine eventually becomes flaccid, I feel very comfortable and natural. (003)

In the early days, I would become aroused whenever anyone—a sales clerk, a casual stranger—would address me as "Ma'am" or perform some courtesy, such as holding a door for me. This arousal led to a heightened fear of discovery, i.e., that my erection would give me away. (001)

When I reached adolescence, I started cross-dressing discretely and would get aroused and masturbate. After the sexual part of the experience, I would remain dressed as long as was safe, glad that I didn't have an erection to ruin the lines of the dress or skirt. (056)

Taken together, these accounts make it clear that autogynephilic transsexuals do not always enjoy autogynephilic arousal but sometimes experience it as invalidating, distressing, inconvenient, or otherwise undesirable.

Postorgasmic Reactions: Disgust, Remorse, and Remission of Gender Dysphoria

Several informants described their feelings immediately following orgasms that were associated with cross-dressing or cross-gender fantasies. Many reported temporary remission of their gender dysphoria, feelings of disgust or remorse about their cross-dressing or cross-gender fantasies, or a combination of these.

Consequently, they not infrequently tried to avoid having orgasms or postponed them for as long as possible. Some narratives emphasized negative feelings immediately following orgasm:

I went for extended periods with no sex or masturbation, because I believed that being aroused by sex-change fantasies was a mental illness. Also, I found that orgasms immediately made me feel masculine and ruined the feminine fantasy. (119)

Though I liked the pleasure associated with orgasm, I did not like the feeling afterward. I felt dirty, and for a short time after it lowered the intensity of my cross-gender feelings. Because of these feelings, I masturbated infrequently, mostly to get rid of sexual energy that had no other outlet. (222)

Eventually I was completely taken over with my feminization fantasies. There were times the urge to be transformed into a female was overwhelming. After I shaved my legs or took a Premarin pill, I would climax and suddenly feel dirty and disgusted with myself. I kept having these fantasies, and I couldn't help it. (097)

Many years ago, before hormone therapy, I did obtain a certain sexual satisfaction from cross-dressing. I masturbated to orgasm with thoughts of being a woman and having a woman's body. But immediately afterwards, I always felt a crushing loss that the fantasy was not a reality. I loathed the sight of my male-shaped body and face so much I couldn't bear to look in a mirror. (062)

When I was younger, after orgasm I felt rather ashamed about my thoughts. I began to cross-dress so I could better imagine myself as female, and after orgasm I would rush to remove all traces of womanliness from my body. I was embarrassed and didn't want to be caught doing something wrong. (066)

Other informants emphasized the dramatic and almost instantaneous, albeit only temporary, remission of their gender dysphoria or desire to be female:

I was surprised by the abrupt alternation of my feelings that occurred in fractions of seconds when an "en femme" session ended with an ejaculation (and most of the time I ended masturbating). Before orgasm, I was ready to sacrifice everything to become a woman. And suddenly, after having an orgasm, the feeling was totally reversed! I was flooded with powerful remorseful feeling, which made me unhappy and miserable. (006)

I wanted to be a girl since age 5 or 6. Although my desires did not begin as sexual, sex certainly became the focus. I found that, after orgasm, my entire thoughts on the subject reversed. I couldn't believe I could think that I wanted to be a girl! Within minutes, however, my "normal" state of mind returned. (112)

Every time I have an orgasm, including to this day, the strong sexual urge to imagine myself as a woman goes away completely. It is like flipping off a light switch in my brain. Then, anywhere from a couple of hours to many days later, it always reappears. I have noticed that during periods of great stress, the length of time it takes for these feelings of autogynephilia to return is shortened. (127)

When the woman sexual feeling is aroused in me, I can't make myself not act on it. When ejaculation happens, I always lose my woman sexual feeling, and I really hate this. I feel guilty and don't know what to do. My mind becomes that of a man again for a while, and this is so confusing. (226)

A few informants, aware that their desire to be female would quickly if only temporarily dissipate once orgasm occurred, tried to prolong their feelings of sexual arousal and their resulting desire to be female for as long as possible by postponing or avoiding orgasm.

I knew that as soon as an orgasm was achieved, the desire to be female would disappear for a time. For that reason, I often tried to delay orgasm or avoided orgasm at all. Whole weeks sometimes passed before I masturbated. All this time, I went out wearing female underwear under my clothes and generally tried to do normal female activities, avoiding masturbation and orgasm. (006)

Autogynephilic gender dysphoric clients I have seen in my practice have also described postponing or avoiding orgasm in order to prolong their feelings of sexual arousal and their resulting desire to be female. We ordinarily tend to think about erotic desire and sexual arousal as emotional/motivational states that prepare individuals for action—specifically, in the case of men, for sexual behavior leading to ejaculation and orgasm (Janssen, 2011). Consequently, it might seem counterintuitive that a person would try to prolong these feeling states, rather than trying to promptly discharge or resolve them through orgasmic release.

I can think of at least two plausible reasons, however, why autogynephilic gender dysphoric men might enjoy the feeling of autogynephilic arousal and the resulting desire to be female and want to prolong it, apart from simple avoidance of any dysphoric feelings associated with orgasm itself. First, experiencing autogynephilic arousal or the autogynephilic desire to be female can potentially reduce stress by concentrating the individual's attention and directing it away from unpleasant feelings or cognitions. As Docter (1988) noted, "by having something specific to concentrate upon, the unpleasant or anxiety-laden thoughts, which are derived from our daily experience, are somehow pushed into the distant background" (p. 118). Docter went on to observe that "both transvestism and transsexualism are, in part, mood altering behavioral strategies. They generate pleasurable excitement and a sense of well-being" (p. 118). It is hardly surprising that individuals would seek to prolong such feelings of pleasurable excitement and well-being. Second, to the extent that autogynephilic arousal and the autogynephilic desire to be female are "action tendencies," they can plausibly motivate other desired behaviors, not merely their discharge through orgasm. For example, a few of my patients have told me that they are more likely to adhere to their weight loss and exercise regimens and save money for feminizing surgical procedures when they can maintain or prolong their feelings of autogynephilic arousal and their associated autogynephilic desire to be female.

Postorgasmic Remission of Gender Dysphoria Implies that Transsexualism Is Paraphilic

A few informants independently concluded that the rapid disappearance of their gender dysphoria following orgasm confirmed that their cross-gender wishes were a direct outgrowth of their autogynephilic sexual desires and, by implication, that their transsexualism was a paraphilic phenomenon:

Something that I have not seen anybody write about with regard to autogynephilia is the phenomenon of the urge to be a woman disappearing for a time just after sexual climax. I find that before and during masturbation, the feelings of autogynephilia are very strong,

and I find myself wishing that this feeling would continue after climax. Yet in almost every instance, I can feel it ebb away, much to my chagrin. This lessening of the feeling of autogynephilia right after orgasm may seem a trivial and frivolous matter, but it is of importance to me because it relates to my opinion of how "serious" I am about wanting to be a woman. It makes me think that somehow it is more of a sexual perversion than a true wish, even though the autogynephilic feelings usually return fairly quickly (but sometimes recede for days at a time). (212)

When my longing to be a woman becomes more than I can bear, I resort to masturbation. The result of my masturbation is a decrease in my desperate desire to live as a woman. That yearning never goes away, but it is controllable with sexual release. I consummate my feelings with fantasy and masturbation, the sense of urgency decreases, and I carry on with my unsatisfactory life. This makes me more aware of the vicious circle I am in. My sexual roller-coaster has undermined my belief in my essentially transsexual nature. Clearly, my transsexual feelings are intimately intertwined with my sexual desires. (175)

The assumption implicit in both of these narratives is that transsexual desires that are "true" or genuine should not be evanescent; they should not suddenly recede, even temporarily, after a sexual climax. The disappearance or significant diminution of one's desire to be a woman immediately after orgasm, even if it is temporary, feels like incontrovertible evidence that this desire is an erotic phenomenon: One's desire to be a woman seemingly requires a certain level of sexual drive or tension to exist, because when sexual tension falls to zero immediately after an orgasm, the desire to be a woman falls to zero or greatly diminishes, too.

I admire the keen insight and fearless honesty of these informants. They accurately observed that in their own cases, as in autogynephilic transsexualism generally, the desire to be a woman is a paraphilic phenomenon, deeply entwined with autogynephilic erotic desire. I differ with these informants, however, concerning their assumption that one's desire to be a woman is somehow less true or genuine if it derives from a paraphilia (i.e., autogynephilia). Many or most cases of MtF transsexualism in Western countries occur in nonhomosexual individuals, most of whom are putatively autogynephilic. In my clinical experience, autogynephilic transsexuals unquestionably suffer from real gender dysphoria, exhibit strongly held cross-gender identities, and experience their autogynephilic sexual orientations as essential aspects of their personalities.

Although autogynephilic arousal and gender dysphoria are sometimes present from an early age, it apparently takes time and experience for autogynephilic men to develop strong, persistent cross-gender identities—ones that will not disappear, even temporarily, following orgasm. Docter's (1988) studies of autogynephilic cross-dressers and transsexuals, discussed in Chap. 5, revealed that autogynephilic men typically develop strong, persistent cross-gender identities only after years or decades of experience with cross-dressing. Once this has occurred, however, these cross-gender identities feel like and operate as powerful forces in the lives of the autogynephilic transsexuals who experience them. In particular, these cross-gender identities become strong enough to withstand the temporary reduction in autogynephilic arousal that follows orgasm.

Effects of Hormone Therapy

Feminizing hormone therapy, which usually consists of estrogen with or without an antiandrogen, exerts its effects not only through the feminizing effects of estrogen but also through the demasculinizing effects of decreased testosterone production. Both estrogen and antiandrogens act to decrease testosterone levels. The diminution of male sex drive that occurs with hormone therapy is a direct result of decreased testosterone levels.

Several informants described the effects of feminizing hormone therapy on their sex drives, autogynephilic feelings, gender identities, and cross-gender behaviors. Some reported a gratifying loss of sex drive and autogynephilic arousal with hormone therapy:

I used to find the idea of being a girl erotically arousing. In the UK, we are usually prescribed Androcur, an antiandrogen. Within quite a short time of commencing the Androcur, my male sex drive began to lessen and soon went away completely. I was quite happy about this, and it was part of my intention. In consequence, I was no longer aroused by my own body or the prospects of becoming female. I realize that there is a possibility I may no longer be able to achieve orgasm when postoperative. This has never deterred me, since I believe I'm motivated by the need, the desire, to be female, rather than by the possibilities of sexual gratification. (227)

I've experienced autogynephilia strongly while wearing women's clothes. I went to my doctor and asked if she could give me anything to stop my strong sexual feelings. She warned me that my sex drive would go and my desire to dress might also go. My compulsion to dress did not alter, just my sex drive, which I hated anyway. I went on to live full-time as a woman, and I'm due for SRS at the end of the year. (201)

I am using hormones simultaneously to suppress my libido, which drives me to distraction, while achieving as much feminization as possible. I am totally infatuated with what development I have achieved. (193)

All of these informants stated that one of their reasons for wanting feminizing hormone therapy was to reduce or eliminate their unwanted sex drive, in addition to the physical feminization hormone therapy provided. Their statements are consistent with several previous narratives that described autogynephilic sexual feelings as sometimes distressing or invalidating. Two of the informants stated or implied that their desire to live as women had continued unchanged, despite the reduction in their sexual feelings: Evidently their cross-gender identities were strong and persistent enough to survive the reduction or elimination of autogynephilic sexual desire.

Other informants painted a more complicated picture: They not only lost their sex drive but also their cross-gender identification or their desire to continue hormone therapy:

I used to take hormones, birth control pills. The first time was about 2 years ago. It started with a very intense woman-pressure. I went to the drug store and told the seller what I needed. I got home and began to take it daily, one by one. When the pills were almost gone, my woman sex emotion was suddenly gone, too. I hated this feeling and didn't know what to do next. (226)

After 4 months on hormones my old male urge to "jerk off" ceased. I was very pleased over this at the time. My breasts were just starting to develop and I felt fit and sexy. But—nothing seemed to work. My nipples were just too sensitive at the time, and I seemed to lose all my sexual fantasies as well. It was hard to masturbate at all in the old way, and if I did get an erection, it was labored and felt afterwards like someone had placed an iron band around it. In this case there was little incentive to continue. (087)

In the latter case, the informant's loss of the ability to enjoy a satisfying sexual response felt like a sufficient reason to discontinue hormone therapy, despite her satisfaction with the physical feminization and reduction in sex drive that hormone therapy produced.

Another informant lost both her sex drive and her desire to transition after 3 months of hormone therapy. She concluded that her desire to live as a woman was an outgrowth of her autogynephilic sex drive:

Last year, things progressed to the point where I left my wife and began living full time, taking hormones and antiandrogens. After I had been taking the hormones and antiandrogens for 3 months, I totally lost my sex drive. That's when I got lonely and missed my wife, and she was more than willing to have me come back. That was 8 months ago, and now that my sex drive is back to normal, I am again struggling. I think about going back to living full-time as a woman, an experience that more than exceeded my wildest dreams. This desire does not go away, but the hormones caused me to lose my desire temporarily. I would only be satisfied with a level of hormones and antiandrogens that would maximize my transformation. I don't want the male sex drive. I don't like my male body and the body hair. But even though it is such a pleasant, wonderful feeling when I am fully transformed into a woman, that feeling unfortunately is generated from my male sex drive. I would end up the same way again if I tried to transition. (215)

This informant described one of the key dilemmas that many autogynephilic gender dysphoric men confront: They are troubled by their sex drive, but their desire to be a woman (and to continue to use hormones) disappears when their sex drive disappears.

A physician informant similarly described how her desire to cross-dress waxed and waned with her changing testosterone levels. In her case, this was caused by the addition or withdrawal of transdermal testosterone following her orchiectomy, rather than by stopping or starting feminizing hormones:

I am a licensed, board certified surgeon who is transgendered. I want to describe my recent discovery of the overwhelming (and seemingly contradictory) role of testosterone in this process. During my entire life, I have had the strong desire to be female and make a sex transition. I had a persistent desire to cross-dress and did so from as early as I can remember. Although I was excited to get dressed in female clothing, once dressed, I was always very relaxed and any emotional excitement subsided. I found hormone therapy very comfortable. Although I have taken hormone therapy for several months at a time, I have never been on hormones for more than 3 months continuously. During those times, however, I never experienced a decrease in the desire to dress in female clothing. I became comfortable with a plan for a slow transition and felt I was ready.

Approximately 18 months ago, I had a bilateral orchiectomy, as I felt it would make the transition easier and would allow me to use lower doses of estrogen. Even without any hormone therapy, the physical changes became progressive and dramatic. My body hair almost totally disappeared, my skin became smoother, and I began to lose muscle mass and strength. Around this time, I found it necessary to briefly postpone the final transition.

Interestingly, I totally lost the drive to cross-dress. I was still comfortable dressed as a female, I just lacked the urge to do so. When I developed rather troubling symptoms of hot flashes and sweats and I began using the new topical testosterone, the drive and urge to crossdress again became prominent. I was fascinated with this finding; I tried again, stopping and starting testosterone (without taking any estrogen) and the phenomenon repeated. I know that this is a one-person experiment and that I am not an unbiased observer. However, I am expert in conducting controlled clinical trials. The point is that the result was totally unexpected, and although I believe I have read just about every article on transsexualism, transgender, and transvestism, I have never seen it mentioned. (147)

One could hardly ask for a more convincing demonstration that the desire to cross-dress that autogynephilic men experience is a sexual phenomenon—one that increases in strength with the administration of testosterone.

Yet another informant described how a high dose of estrogen and antiandrogen eliminated both her libido and her desire to present as a woman, whereas a low dose of estrogen—insufficient to completely suppress testosterone—preserved her desire to present as a woman:

From the earliest time I can recall, I felt like I wanted to be female. I wore my sister's clothes in secret and sometimes under my normal clothes. Cross-dressing usually involved a pattern of dressing up, masturbating, and intense feelings of guilt and shame. An on-line gender therapist suggested I take Diane-35 [an estrogen/progesterone combination] to help alleviate the tensions I felt. I started taking it and, to my surprise, these worked just like they were described. My libido went down, my erections were nil, and I even lost the compulsion to present as a woman. Because of the risks of Diane-35, I later switched to 1 mg estradiol per day, an intentionally low dose. Estradiol has had a calming effect and I am a much happier person when I am on it. While I was on Diane-35, I was happy and had no sex drive at all and little or no desire to present as a woman. Now on estradiol, I feel good, but I still want to present as a female. Testosterone drives my libido. When I get horny, I want to look as much like a female as I can. This would explain the compelling desire to present as a woman. (228)

I have observed this same phenomenon in a few autogynephilic transsexual clients in my practice, who began feminizing hormone therapy and initially found the experience very gratifying. If they stayed on a low dose of estrogen, they continued to find the mild feminizing effects satisfying, and their desire to transition remained strong. But if they began taking fully feminizing doses of estrogen and antiandrogen, which reduced their testosterone levels to the normal female range, their desire to transition suddenly disappeared. After they discontinued feminizing hormones and their testosterone levels returned to normal a few months later, their desire to transition reappeared. Sometimes this cycle occurred more than once in the same client.

Although some autogynephilic clients lose their desire to transition after taking fully feminizing doses of hormones, others do not: Their desire to transition remains strong, even after the complete loss of their sex drive and associated autogynephilic arousal. I hypothesize that individuals are more likely to want to continue hormone therapy and gender transition, despite a complete loss of sex drive and autogynephilic arousal, if their gender dysphoria is more intense, of longer duration (and therefore associated with stronger and more persistent cross-gender identification), and more intensely focused on anatomical features (i.e., driven primarily by anatomic autogynephilia). I am not aware of any formal research on this issue, however.

Co-occurring Paraphilias

Paraphilias tend to cluster or co-occur: Men with one paraphilia have an increased likelihood of having one or more other paraphilias as well (Abel & Osborn, 1992; Wilson & Gosselin, 1980). Because autogynephilia is conceptualized as a paraphilic phenomenon, it is not surprising that many informants described other paraphilias as well. These included sexual masochism and forced feminization, gynemimetophilia and gynandromorphophilia (attraction to feminized men), pedophilia, autonepiophilia (infantilism or adult baby syndrome), abasiophilia and autoabasiophilia (leg brace paraphilia), and unspecified paraphilias.

Sexual Masochism

Sexual masochism is a paraphilic sexual interest in which affected individuals are intensely sexually aroused by fantasies or behaviors involving "being humiliated, beaten, bound, or otherwise made to suffer" (APA, 2000, p. 573). A few reports have suggested that sexual masochism not uncommonly occurs in association with MtF transsexualism (e.g., Bolin, 1988; Walworth, 1997), although these reports have not distinguished between homosexual and autogynephilic subtypes.

In the current study, some informants described masochistic fantasies or believed that there were connections between their autogynephilic feelings and sexual masochism.

One thing I can affirm about autogynephilia, based on my personal experience with it: It has a masochistic dimension to it. Being feminized is perceived as humiliation, and this sense of humiliation is a basic ingredient of the sexual turn-on. (102)

My school age fantasies always started off something like, "Will she tie me up and then when can I dress up like her?" Since junior high school, I have been involved in relationships that involved cross-dressing and being submissive. I had my first experience at 15 with a 16-year-old girlfriend; she was dominant. The understanding of the sexual desire to be a woman is so clear when I am doing sadomasochism. I somehow feel a punishment for not being a woman and yet can get as close to a woman as possible. (178)

One informant described masochistic fantasies during adolescence involving dismemberment and dehumanization—fantasizing herself as a female farm animal being butchered. These fantasies later evolved to emphasize having female genitals:

I grew up on a farm. I was masturbating by around age 13 or 14. My first fantasy was that I was a cow and my penis was the teat of a female cow. Then I imagined I was a mother sheep and I ended up getting slaughtered, because animals on farms get that done to them. I saw myself as all these pieces of meat. I thought this probably was not a very good thing to fantasize about. I developed the fantasy about having a vagina, which still remains. (229)

The evolution of this informant's fantasies provides an example of an interesting phenomenon in which very distressing or ego-dystonic paraphilic fantasies sometimes become superseded by less distressing, more acceptable ones. The paraphilic fantasy of having female genitalia undoubtedly felt more acceptable to the informant than the paraphilic fantasy of being butchered. I will present other examples of this kind of "paraphilic substitution," in which unacceptable paraphilic fantasies are replaced by more acceptable ones, later in this chapter and in Chap. 11.

Forced Feminization

A particular genre of masochistic fantasies and behaviors involves forced or coerced feminization; the masochistic aspect of feminization derives from "its humiliating associations" (APA, 2000, p. 572). Forced feminization fantasies are a staple of transgender erotica (Beigel & Feldman, 1963), although there is disagreement about how prevalent and popular they truly are (Buhrich & McConaghy, 1976). In earlier chapters, several informants mentioned such fantasies in passing, with little elaboration. Other informants described their forced feminization fantasies in greater detail:

My main fantasies revolved around being forced by a woman into becoming one myself. I started buying the little pink trans novels at the bookstores and became obsessed with their visions of my wife burning all my male clothing, injecting me with giant syringes of hormones, and hauling me off to the beauty parlor against my will. (182)

About sex: I usually do it myself, with pictures of women in dresses. I imagine that I am one of the women, stuck in the role; often forced into it by a man. I imagine myself with breasts and with no choice but to live as a female. (035)

My sexual fantasies usually involve being made into a woman in some way, usually against my will. Specifically, I experience erotic fantasies of being coerced or duped into being a woman, against my will initially but then gradually being won over until I can't go back. (212)

I fantasized about being forced to dress as a woman as a punishment for various offenses, such as not acting masculine enough. I would also combine the cross-dressing fantasy with being dominated by a woman. Sometimes this woman would make me look like her. When I was attracted to some girls in school, I would fantasize about being forced to wear their clothes and have hair like theirs. Sometimes I would add to this fantasy being bound and forced to watch them have sex with their boyfriends. My current fantasies involve becoming a woman. I imagine myself forced to become a woman in dress, manner, and physique (through hormones and surgery). (056)

Another informant reported that she was attracted to the idea of observing a man who was "trapped" in the body of a woman; she imagined this to be a real-life instance of forced feminization.

I became obsessed with transsexual women. To observe a young man being transformed into a woman was now my fantasy. I haunted clubs where they would gather. I was particularly attracted to transsexuals who were "women" in every way except one. I dated transsexuals who could pass in public but who had not yet had final surgery. Although I dated post-operative transsexuals, I was only satisfied with pre-operative transsexuals. I still date genetic females, but I catch myself longing for signs—a slightly deeper voice or some other evidence that she is a transsexual—that will arouse my ardor. I am particularly attracted to transsexual women who are autogynephilic. The idea of a man "trapped" in the body of a

transsexual, experiencing the daily humiliation and degradation of being a woman, forced to wear women's clothes and lipstick, is extremely attractive to me. (194)

I have not been able to find a satisfactory explanation in the literature as to why forced feminization fantasies are so powerful and exciting for so many of us autogynephilic transsexuals. The conventional explanation is that being forced to become feminine absolves us of responsibility and thereby relieves us of guilt. One informant proposed this exact explanation:

I believe that the forced feminization scenario is particularly stimulating to a lot of transsexual women because it relieves us of the guilt of wanting to be feminine. Someone else is forcing us, and we have no choice in the matter. No guilt, all fun, and you are experiencing life in the body you desire to be in. (041)

Personally, I don't find such explanations very convincing. Relief from guilt might make fantasies more pleasant, but it would not necessarily make them more exciting; in fact, I suspect the opposite would be true. Some psychoanalytically inclined writers have attempted to explain forced feminization fantasies as reenactments of childhood experiences in which a boy's masculinity was devalued by powerful female caregivers (e.g., Stoller, 1975) or as attempts to deal with unresolved oedipal wishes and conflicts (Beigel & Feldman, 1963); interested readers are referred to these accounts for details.

One might ask why forced feminization fantasies should succeed at all as masochistic fantasies for autogynephilic transsexuals. Why should we identify with male protagonists who feel shame and humiliation at being turned into girls or women—isn't becoming a girl or a woman precisely what we want? Wouldn't we experience pride and gratitude instead of shame and humiliation if someone turned us into women? The whole premise of forced feminization fantasies should mystify us: Why should we identify with male protagonists who need to be forced into becoming girls or women—aren't these precisely the outcomes we seek voluntarily? Surely no one would need to force us to become women, so it makes no sense that we should identify with protagonists who need to be forced.

Reality is, of course, considerably messier. We do, in fact, consider becoming feminized—becoming women—to be shameful and humiliating. We grew up receiving an unending stream of explicit and implicit messages—from the boys and men we knew and from society at large—about women's inferiority. We believed these messages and internalized them. Even though we now genuinely desire to be women, we find the idea of becoming women profoundly humiliating. Probably we will always feel that way to some extent. That is plausibly why forced feminization fantasies continue to work as masochistic erotic fantasies for many of us, even years or decades after we have completed sex reassignment: We never entirely get over our shame.

Interestingly, forced feminization fantasies are also symbolic representations of our actual life experiences. Because we find the prospect of becoming women so shameful and humiliating, we really do have to be forced into it. We are forced by our unremitting gender dysphoria, by our powerful erotic desires, by our love and admiration for women's bodies and our wishes to turn our bodies into facsimiles of them, and by our need to honor our strongly held cross-gender identities in order to give meaning and vitality to our lives. If we are prudent, we autogynephilic transsexuals undergo sex reassignment only if we feel we have no other viable alternative: We transition because we feel forced to do so. Forced feminization is, in a very real sense, the story of our lives.

Gynemimetophilia and Gynandromorphophilia

Money and Lamacz (1984) coined the term *gynemimetophilia* to describe paraphilic sexual attraction to surgically or hormonally feminized men who had not undergone SRS (often called *she-males*; Blanchard, 1993b). Money (1986, p. 262) later broadened the definition of gynemimetophilia to include paraphilic attraction to feminized men who *had* undergone SRS (i.e., postoperative MtF transsexuals). A few years later, Blanchard and Collins (1993) coined the closely related term *gynandro-morphophilia*, which they used to describe paraphilic sexual attraction to feminized men who had not undergone SRS—a group that included transvestites as well as she-males, but did not include postoperative MtF transsexuals. Thus, those of us who study and describe paraphilias are presented with the confusing situation of having two very similar terms with overlapping but not identical applicability. To summarize: Men with a paraphilic interest in transvestites are properly called gynandromorphophiles. Men with a paraphilic interest in postoperative MtF transsexuals are properly called gynemimetophiles (Money, 1986). Men with a paraphilic interest in she-males are properly called by either term.

A narrative by an informant who was sexually attracted to MtF transsexuals was presented previously in connection with the discussion of forced feminization. Several other informants also described their experience of particular sexual attraction to transvestites, she-males, or postoperative MtF transsexuals. In some cases, their gynemimetophilia or gynandromorphophilia dated from a time prior to their identifying as transsexual or beginning the sex reassignment process.

Early in my transsexual days, I had crushes on more advanced transsexuals. I decided to start dating again, and I find myself dating heterosexual crossdressers. I find myself appreciating the feminine in my lovers. (230)

When I was 29 years old, I met a beautiful pre-op transsexual who was also a street prostitute and a glamorous showgirl. I fell in love and my first experience with a transsexual was wonderful, although I was unable to orgasm. She was not fond of my cross-dressing and although she fell in love with me, couldn't be physically involved because I was a cross-dresser, which was looked down upon in the homosexual drag community. (214)

I have been involved with cross-dressing behavior since I was 5 or 6 years old and it has been sexually arousing for me. I met a drag queen almost 6 years ago at a gay bar, and within minutes we were heavily petting on a pool table. I had never been this aroused by anyone so quickly. We have been together ever since. As our relationship continued, she was the "female" and I was the "male" of the relationship, literally. I was allowed to dress on Halloween but at no other times. I became increasingly unhappy about my role and inability to be who I wanted to be. I would sit in extreme jealousy when she would get dressed to go out and I began to realize that I wanted to be who she was. She is very attractive and I found

myself dreaming constantly of changing my appearance to be feminine. She will not accept my transition in any way and I can not bring myself to leave her. For the longest time, I felt confusion as to whether my sexual orientation would change with time and exposure to hormones. When I read about MtF-to-MtF attraction, I realized that my sexual orientation was and still is towards other transsexual women. (042)

Some informants emphasized how much they identified with and envied the MtF transsexuals to whom they were attracted.

I am astounded that doctors perform so many sex changes. There must be hundreds of thousands of transsexuals, and when I see pictures of them, I am aroused as well. I look at photos of lovely young boys transitioning and am jealous of them, or want to be with them, or wish I were one of them. (133)

I am obsessed with the desire to be female. My first experience picking up a transsexual was at age 18. I was very excited to hold a large manicured hand and see a hotel full of "girls." I ended up submitting to anal intercourse, which hurt, but I did not object. My greatest moments of joy would be spending hours with transsexual prostitutes, watching them dress and prepare and joining them. My favorite photos are of groups of transsexuals together at parties, dancing, taking baths, etc., with me as one of them. I can function sexually with women or transsexuals, but I don't feel much thrill with women. (176)

It is important to note that some cases in which autogynephilic transsexuals become sexually involved with other MtF transsexuals do not necessarily represent instances of gynemimetophilia. Some informants who described sexual involvement with other MtF transsexuals did not explicitly describe any special or specific attraction to the MtF transsexual phenotype:

I began picking up and having sex with transsexual prostitutes, first acting as "the man," but as my guard lessened, wanting to simply be around them, observe and learn from them, and also act feminine. (179)

I have noticed that there are two types of transsexuals. In fact, I am dating someone of the other type now. My transsexual girlfriend is of the "primary" type. She was able to transition early and has always maintained her interest in men, before and after transition. (074)

In my experience, MtF transsexuals often partner with each other, before and after SRS, for reasons that have more to do with mutual acceptance and an absence of other viable alternatives than with specific sexual attraction to one another. Indeed, many of these partnerships appear to be affectionate but largely asexual.

Pedophilia

One informant stated that she was aroused by the fantasy of having sex with female children, although she claimed that she had never acted on her fantasies:

I have been diagnosed as transsexual by four separate therapists, and I am taking hormones. I live full time as a woman and have for almost five years. I have fantasized about sex with a man a time or two, but mainly I have been aroused by the idea of penetration with female children. I don't have these fantasies anymore, as I am chemically castrated and have gotten

relief from them by being on hormones. I have never done any of these things I have fantasized about; I would not be free very long if I did. (231)

Co-occurrence of transsexualism and pedophilia has been reported (Abel & Osborn, 1992), but it appears to be rare.

Autonepiophilia (Paraphilic Infantilism or Adult Baby Syndrome)

Autonepiophilia is a paraphilic sexual interest involving sexual arousal to the thought or image of being an infant, often an infant wearing diapers specifically (Money, 1986). It is sometimes referred to as paraphilic infantilism (Money, 1986) or adult baby syndrome (Kise & Nguyen, 2011). One transsexual informant reported this co-occurring paraphilia:

When I was younger, maybe 8 years old, I had always wanted to wear diapers and pee in them. Around this same age and later, I would often put my penis and testes down and cross my legs, so as to hide them and see how I'd look with female genitalia. I remember that I wanted the feeling of it getting wet "down there," near my butt, like I imagined it was for a girl. In exploring erotic imagery on the Internet, I came across pictures of females peeing in their pants. This provided some validation that others got arousal from it, too. I also found pictures of people in diapers and subsequently found out about infantilists. I had a friend help me buy training pants, basically diapers, in the store. He assumed I wanted the boy ones. I said, "No! I want the girl ones." In exploring with these, I found that fantasizing about being a girl who didn't have full control over her bladder was immensely satisfying. I would imagine I was age 5 or so to pre-teen, something in there. I have been aroused by imagery of females in swimsuits, since they show the crotch area in all its smoothness. I have had this arousal for many years. Recently, I had the idea that I wanted to actually be this. I have never found breasts to be arousing. I'm more obsessed with the child female form. (209)

The co-occurrence of MtF transsexualism and autonepiophilia or infantilism has been reported previously (Kise & Nguyen, 2011), and I have seen one case of diaper fetishism in an autogynephilic transsexual in my practice.

Abasiophilia and Autoabasiophilia (Leg Brace Paraphilia)

The term *abasiophilia* refers to a paraphilic interest in "having a partner who is lamed, crippled, and unable to walk" (Money, 1990, p. 165). Money called the reciprocal paraphilia—sexual arousal to the thought or image of oneself being lamed, crippled, and unable to walk—*autoabasiophilia* (p. 166). The use of leg braces offers visible evidence of this kind of disability, and wearing or using leg braces is often the focus of abasiophilic and autoabasiophilic sexual interest. One informant reported experiencing both abasiophilia and autoabasiophilia:

I am a 60-year-old retired psychiatrist who is currently in the hormonal and hair removal phase of my gender transition. Since my childhood, I have dressed as a crippled female, with this usually ending in masturbation. I have known my female gender identity since age

4, but negative messages about cross-gender behavior led me to repress the expression of it, except as a crippled female. I have also dated several brace-wearing females and was engaged to one. (232)

The occurrence of autoabasiophilia in an autogynephilic transsexual with abasiophilia is not unexpected. As I noted in Chap. 2, autogynephilia is theorized to reflect an erotic target location error (Freund & Blanchard, 1993): the tendency to be sexually aroused by the idea of becoming a facsimile of the kind of person to whom one is attracted. Men who are autogynephilic are attracted to women and are aroused by the idea of becoming women. Men who are autogynephilic and are also specifically attracted to women who wear leg braces would predictably be especially sexually aroused by the idea of becoming women who wear leg braces. This kind of specificity of autogynephilic arousal is apparently not uncommon; it will be discussed in greater detail in Chap. 11.

A second informant also reported autoabasiophilia, but did not describe abasiophilic attraction to other persons:

I remember in about first grade being fascinated by posters of child polio victims wearing leg braces, particularly those showing little girls. My older sister wore a leg brace due to an injury when I was between the ages of 1 and 4. As an infant, I must have seen my sister getting love, sympathy, and attention because of her disability. Somehow I must have gotten the subconscious message that I must wear leg braces and be female to have that, too. Throughout my teen years, I remember reading all about polio and looking at pictures of children and women in leg braces. I had no idea why I would be fascinated by this and was embarrassed by it. As a teen, my most powerful masturbatory fantasies were of me being attended to as a disabled teenage girl. Occasionally in private I would pretend with clumsy props to be wearing leg braces. When I graduated from college, married, and finished grad school, I suppressed all of this, but sexual fantasies of my being female and sometimes female in leg braces continued to interfere with my sexual relations with my wife. My fantasy images kept interfering with what was right in front of my eyes. Eventually, when making love with my wife, the "in leg braces" part became less important and the being female part became overpowering, such that that was the only way I could stay aroused.

I had never seriously cross-dressed until about 5 years ago, when I happened upon some leg braces that were about to be thrown out in the physical therapy section of a hospital. By happenstance, they were almost exactly my size. This was too much to ignore. I set about with intense, amazing energy to ready myself for a public experience as a woman wearing leg braces. In a short time, I read everything I could find about successful cross-dressing. Several months later, when I was ready for this foray in public, as I was completing my feminine look in private and without the leg braces on, I was absolutely overwhelmed about how natural and at home I felt as a woman. While the braces were the catalyst that set this going again so powerfully, now they were superfluous. I did go out a few times with the braces on, but it seemed silly and deceptive. And all the energy was around being female, not being disabled.

At first, I thought I must be what writers referred to as a fetishistic transvestite. Gradually, I have come to realize that it is not the dressing, but the being female with a female body, that is such a powerful urge in me. My female identity and potential body seems to be my spiritual soul, my heart. It is certainly sexual, but much more. Somehow it seems my whole life before this has had a certain void at the center. At this point, I am on the verge of going full time and doing all the things necessary to be very passable, including SRS. (233)

This narrative offers another example of the phenomenon of "paraphilic substitution," which was discussed earlier in this chapter. Paraphilic substitution is the

term I used to describe the process by which disturbing or unacceptable paraphilic fantasies are sometimes replaced by less distressing, more acceptable ones. Autoabasiophilic fantasies are not necessarily highly disturbing, but they were apparently more embarrassing to this informant—and surely more inconvenient to actualize—than her autogynephilic fantasies. The outcome was that the more embarrassing and inconvenient paraphilia, autoabasiophilia, receded and the more acceptable paraphilia, autogynephilia, assumed greater prominence.

I have observed a similar case of paraphilic substitution in my own practice: An autogynephilic transsexual client whose most intense paraphilic interest was autoabasiophilia eventually gave up her desire to live full time as a woman with a highly visible disability and decided instead to be content by simply undergoing sex reassignment. Her autoabasiophilic paraphilia did not exactly recede—the fantasy of being a woman wearing leg braces remained her most reliable source of erotic arousal—but she made a deliberate choice to deemphasize it. She stated that she reached this decision because "the leg brace thing just felt too crazy."

Unspecified Paraphilias

Two informants stated that they experienced other co-occurring paraphilias (or fetishes) but did not describe the content or focus of these paraphilias.

The thought of being female turns me on, so much so that it's my primary sexual attraction mechanism. I do have a separate, unrelated fetish, and I can feel a significant difference between the fetish and my autogynephilia. With the fetish, I can be turned on very strongly, but I don't actually want it to be made manifest; it's just a fantasy. But with the desire to be female, there is nothing I want more, even though it usually doesn't turn me on quite as much as my fetish. (004)

My autogynephilic fantasies probably kicked in with puberty. In the early days, I think they were more clothes/forced feminization-based. Later on they were more based on the idea of a change of genitals. Interestingly, autogynephilia is not, and never was, my primary paraphilia. I really can't trace autogynephilia back too much beyond adolescence. My primary paraphilia is rooted back to my earliest memory, and I can remember distinct interests at about 5 years of age. It began to manifest around age 10. It is now my only source of orgasm. (065)

Note that the second informant described her primary paraphilic interest as having been present from about age 5, roughly the same age at which many autogynephilic transsexuals first became aware of their autogynephilic interests.

Concluding Comments on Other Aspects of Autogynephilic Sexuality

This diverse collection of narratives concerning other aspects of autogynephilic sexuality illustrates three important themes that are fundamental to understanding autogynephilic transsexualism. First, autogynephilia resembles and operates as a

paraphilic sexual orientation in autogynephilic transsexuals: Autogynephilic themes are central to the sexuality of most autogynephilic transsexuals and are often obligatory for achieving orgasm. Moreover, autogynephilia is accompanied by other paraphilic sexual interests in a significant number of autogynephilic transsexuals, which is consistent with the theory that autogynephilia is itself a paraphilia. Second, gender dysphoria and cross-gender identity in autogynephilic transsexuals are direct outgrowths of this autogynephilic sexual orientation: Autogynephilic transsexuals not uncommonly report that their desire to be a woman temporarily disappears immediately after orgasm, suggesting that this desire is driven by or dependent on some minimal level of sexual desire or tension, at least initially. Moreover, testosterone reduction associated with feminizing hormone therapy sometimes leads to the disappearance of autogynephilic arousal, gender dysphoria, and cross-gender wishes in autogynephilic transsexuals, suggesting that all of these phenomena are erotic and testosterone-driven, at least initially. Finally, although autogynephilic arousal is the defining and animating element of autogynephilic transsexualism, it is not always regarded as pleasant or desirable by those who experience it: On the contrary, some autogynephilic transsexuals describe autogynephilic arousal as distressing, invalidating, or inconvenient.