

Transvestism

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Definitions and terminology	285	Differential diagnosis	287
Diagnostic features	285	Comorbid psychiatric diagnoses	287
Epidemiology	286	Comorbid paraphilias	287
Prevalence	286	Other comorbid psychiatric disorders	288
Age of onset	286	Etiological considerations	288
Gender and ethnicity considerations	286	Prognosis and treatment	288
Other demographic features	286	References	288
Developmental course	286		

DEFINITIONS AND TERMINOLOGY

In general parlance, *transvestism* (literally, “cross-dressing”) denotes dressing in the clothing of the opposite sex for any purpose. As a psychiatric diagnosis, transvestism denotes cross-dressing that is associated with or intended to produce sexual arousal;¹ this is called *fetishistic transvestism* in the *International Classification of Diseases (ICD-10)*² and *transvestic disorder* in the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*.³ Both diagnoses are classified as paraphilias in their respective nomenclatures. This chapter uses the term *paraphilic transvestism* to denote cross-dressing that is (or was) associated with or intended to achieve sexual arousal.

DIAGNOSTIC FEATURES

In the ICD-10, the essential diagnostic features of fetishistic transvestism are cross-dressing primarily to produce sexual excitement and “create the appearance of a person of the opposite sex.”² Clinically significant distress or functional impairment is not required, and the diagnosis can be given without regard to sex or sexual orientation. In the ICD-10, the diagnoses of fetishistic transvestism and transsexualism are not mutually exclusive. In the DSM-5, the essential diagnostic features of transvestic disorder are recurrent, intensely arousing sexual fantasies, urges, or behaviors involving cross-dressing, accompanied by clinically significant distress or

functional impairment.³ Here, too, the diagnosis can be given without regard to sex or sexual orientation, which represents a change from previous editions of the DSM.⁴ Transvestic disorder and gender dysphoria are not mutually exclusive in the DSM-5. Two specifiers can be applied to distinguish subtypes of transvestic disorder: *with fetishism*, when sexual arousal is to “fabrics, materials, or garments,”³ and with *autogynephilia*, when arousal is to “thoughts or images of self as female.”³ Autogynephilia is formally defined as “a male’s propensity to be sexually aroused by the thought or image of himself as a female.”⁵ Autogynephilic arousal can be associated with almost any aspect of female-typical appearance or behavior, not just cross-dressing.⁵ In a 2010 study of 247 men with transvestism, 11% acknowledged fetishism but denied autogynephilia, 32% acknowledged autogynephilia but denied fetishism, 49% acknowledged both, and 7% denied both.⁴

The ICD-10 contains another diagnosis, *dual-role transvestism*, applicable to cross-dressing designed to facilitate the “temporary experience of membership of the opposite sex”² but without associated sexual arousal or desire for sex reassignment. The ICD-10 classifies dual-role transvestism as a *GID*, not a paraphilia. The equivalent DSM-5 diagnosis would be *other gender dysphoria*.³ Because heterosexual men who deny sexual arousal in association with cross-dressing often, if not invariably, display such arousal when tested phallometrically,⁶ many cases that appear to represent dual-role transvestism in heterosexual men might more accurately be diagnosed as paraphilic transvestism.

EPIDEMIOLOGY

Prevalence

In a population-based study of Swedish men and women aged 18–60 years, Långström and Zucker found that 2.8% of men reported at least one episode of sexual arousal with cross-dressing;⁷ more than half of those so reporting considered their cross-dressing unacceptable to themselves. In a study of German male volunteers, ages 40–79, 7.4% of participants reported a history of sexual arousal associated with cross-dressing behaviors or fantasies, but only about 1.9% of participants described these behaviors or fantasies as intensely sexually arousing;⁸ nearly all denied associated distress. A review of data from 10 additional studies that addressed the prevalence of erotic cross-dressing or cross-gender fantasies concluded that probably about 2%–3% of men have experienced sexual arousal in association with cross-dressing and that sexual arousal associated with cross-gender fantasy probably is even more prevalent.⁹

Age of onset

Paraphilic transvestism, like other paraphilias, usually has a prepubertal onset. There are two case reports of 2-year-old boys who wanted to wear girls' or women's clothing and developed penile erections when allowed to do so.⁹ In a survey of more than 1000 American men with transvestism, two-thirds had begun cross-dressing before age 10.¹⁰ In another study of 85 American cross-dressing men, half began cross-dressing before age 7 and almost all before age 13.¹¹ In a survey of 34 Australian men with transvestism, most began cross-dressing before age 9.¹²

Gender and ethnicity considerations

Paraphilic transvestism is almost exclusively a male phenomenon.^{1,3} There are only a few case reports of transvestism in women.⁹ Långström and Zucker found that 0.4% of Swedish women reported at least one episode of cross-dressing associated with sexual arousal but speculated that these women might have been reporting something not genuinely analogous to paraphilic transvestism as it manifests in men.⁷ The female analogue of autogynophilia, *autoandrophilia*—a female's propensity to be sexually aroused by the thought or image of herself as a male—has rarely been reported in the clinical literature and is probably very uncommon.⁹ Paraphilic transvestism has been described principally in Western cultures; whether it is genuinely more prevalent in Western cultures or is simply more visible there is unknown.

Other demographic features

Långström and Zucker found that men with paraphilic transvestism resembled other men in most respects: They had a mean of 2.2 siblings, 51% had children, 72% were in a stable

relationship, and their socio-economic status and overall life satisfaction were unremarkable.⁷ They were, however, more likely than other men to give a history of separation from parents during childhood, describe themselves as easily sexually aroused, and report same-sex sexual experiences; they also masturbated and used pornography more often.⁷

With the exception of Långström and Zucker's study, most surveys of men with paraphilic transvestism have involved participants in social organizations for transvestites, who are not necessarily representative of transvestic men generally; demographic data from these sources have inherent limitations. In one such study, a remarkable 74% of transvestic men had been the eldest or only male child in their family of origin.¹¹ In another study, 83% of transvestic men were currently or formerly married, and 69% had fathered children.¹⁰ Men with paraphilic transvestism report a wide range of educational levels and occupations, but higher educational levels and professional and technical occupations appear to be over-represented.^{10,13}

DEVELOPMENTAL COURSE

The developmental course of paraphilic transvestism is incompletely understood. Much of the relevant information is derived from self-reports of uncertain accuracy, obtained either from participants in transvestite social organizations or distressed clinical populations, neither of which may be representative of transvestic men generally.

Men with paraphilic transvestism rarely describe themselves as having been effeminate during childhood or adolescence:³ Most engaged in rough-and-tumble play, participated in boys' sports, and had male-typical hobbies and interests.^{14,15} Many report that they envied girls,¹⁴ but few preferred girls' company or were accused of being sissies.^{14,15} Their first episodes of cross-dressing were usually undertaken on their own initiative, less commonly at the suggestion of female relatives or caregivers.¹⁴

Cross-dressing during childhood is usually conducted privately and in secret to avoid detection.¹⁴ The clothing used typically belongs to a female relative;¹⁴ undergarments are often the first articles of clothing worn.¹³ Cross-dressing that occurs before puberty is usually experienced as exciting¹⁴ but not necessarily as sexually arousing. Following the onset of puberty, cross-dressing is usually accompanied by sexual arousal and often by masturbation, ejaculation, and orgasm.^{12,13}

Adolescent and adult males with paraphilic transvestism episodically put on women's clothing and masturbate,^{10,13} sometimes wear women's clothing (e.g., undergarments or hosiery) under their male clothing,^{14,16} and often cross-dress fully when circumstances permit.¹⁰ In one study, 83% of men with paraphilic transvestism had cross-dressed at least once a week during the preceding year.¹³ Cross-dressing is usually accompanied by the fantasy of being female^{4,12} (i.e., autogynophilia). Depression, boredom, and tension sometimes precipitate cross-dressing.¹³ Following masturbation and orgasm, the desire to cross-dress often

subsides temporarily, and the individual may feel revulsion or disgust about cross-dressing. Transvestic men with cooperative female partners sometimes engage in coitus while cross-dressed¹³ and may fantasize that they are in a lesbian relationship. Some seek sexual encounters with men while cross-dressed¹³ or fantasize doing so. Men with paraphilic transvestism often report that the intensity and frequency of sexual arousal associated with cross-dressing diminishes over time or sometimes goes away completely,^{12,14} although there is reason to doubt the latter assertion.⁶

Men with paraphilic transvestism usually own one or more complete outfits of women's clothing.^{10,12} They often favor styles that are typically worn by younger women, are sexually provocative,¹⁶ or were fashionable during their own childhood. When men with paraphilic transvestism become romantically involved with new female partners, their desire to cross-dress sometimes temporarily diminishes or disappears, only to return weeks or months later.^{4,5} Most men with paraphilic transvestism make one or more attempts to abandon cross-dressing, during which they discard or "purge" their women's clothing.^{10,13} These attempts are invariably unsuccessful, and the men eventually reacquire women's clothing and resume cross-dressing.¹³

Buhrich and McConaghy divided men with paraphilic transvestism into two categories: *nuclear* transvestites, who cross-dress episodically and do not seek physical feminization, and *marginal* transvestites, who cross-dress more extensively and desire or undergo physical feminization via cross-sex hormone therapy or cosmetic surgery.¹² This categorization has been widely adopted. Nuclear and marginal transvestism may represent different developmental pathways or different points on a single pathway, but the observation that marginal transvestites are not significantly older than nuclear transvestites¹² suggests the former. Nuclear transvestites cross-dress less frequently than marginal transvestites do, begin to cross-dress completely at older ages, and are less likely to cross-dress in public.¹² Their sexual interest is more strongly directed toward women, and they report a younger age at first heterosexual intercourse and a greater number of female sexual partners.¹² They also report less childhood femininity than marginal transvestites.¹⁵ Nuclear transvestites are significantly taller and higher in social status than marginal transvestites,¹² suggesting that this categorization might reflect a rational calculus, at least in part. Perhaps some men with paraphilic transvestism decide to seek or eschew hormones and feminizing surgery based partly on how convincingly they believe they could pass as female and how much status they might lose if they were to become conspicuously feminized.

DIFFERENTIAL DIAGNOSIS

The differential diagnoses most relevant to paraphilic transvestism are fetishism for items of women's clothing and gender dysphoria (DSM-5)³ or transsexualism (ICD-10).² No distinct lines separate these diagnoses, however, and

they are perhaps best conceptualized as points on a continuous spectrum of symptomatology.⁹

Distinguishing between paraphilic transvestism and fetishism for articles of women's clothing can be difficult. Fetishism and paraphilic transvestism frequently co-occur, suggesting that they are closely related.^{5,16} Moreover, self-report and phallometric studies indicate that fetishists and paraphilic transvestites both display significantly greater fetishistic interest and arousal than nonparaphilic men but do not differ significantly from each other, leading to the conclusion that "transvestites are in fact fetishistic, and...difficult to distinguish from fetishists proper."¹⁷ Arguably the most useful distinction is that in paraphilic transvestism, items of women's clothing either are worn ("with fetishism" subtype in the DSM-5) or are associated with the autogynephilic fantasy of being female ("with autogynephilia" subtype in the DSM-5).^{9,12}

Distinguishing between paraphilic transvestism and gender dysphoria or transsexualism can also be difficult, in that the former sometimes evolves into the latter⁹ and the diagnoses are not mutually exclusive. The typical features of gender dysphoria and transsexualism are a strong and persistent cross-gender identification and a desire for the anatomy and gender role of the opposite sex.^{2,3} Men with paraphilic transvestism frequently exhibit these same features, at least to some extent. Most men with paraphilic transvestism report a partial or complete cross-gender identification when cross-dressed, and often at other times.^{10,12} Many also want to make their bodies resemble those of the opposite sex. For example, one large survey of men with paraphilic transvestism found that 5% had taken hormones previously, 4% took them currently, and 43% would like to take them in the future;¹⁰ in another large survey, 25% of transvestic men reported past or current hormone use.¹⁴ Stability and intensity of cross-gender identification and degree of physical feminization sought probably provide the most rational bases for differential diagnosis.

COMORBID PSYCHIATRIC DIAGNOSES

Comorbid paraphilias

Paraphilic transvestism is often comorbid with other paraphilias, some of which involve potentially illegal behaviors. Långström and Zucker observed that men who reported episodes of transvestism were more likely than other men to report episodes of voyeurism, exhibitionism, and sadomasochism (prevalence of 33%, 17%, and 14%, respectively).⁷ In one study of approximately 190 autogynephilic men with paraphilic transvestism, 55% also acknowledged fetishism.⁴ In another, among 269 transvestic men, 59% reported fetishism and 35% reported sadomasochism.¹⁶ Yet another survey of 18 men with paraphilic transvestism revealed a history of voyeurism in 33%, frotteurism in 28%, toucherism in 22%, exhibitionism in 17%, and sexual contact with pre-pubescent girls (not necessarily denoting pedophilia) in 11%; about half of the men had engaged in one or more of these activities.¹⁸

Other comorbid psychiatric disorders

There is conflicting information concerning the prevalence of other comorbid psychiatric disorders in paraphilic transvestism. Långström and Zucker found that men with transvestism were no more likely to report a current psychiatric disorder than other men and that they rated their psychological health as equally good; they displayed a nonsignificant trend toward a higher prevalence of illegal drug use, albeit not necessarily implying substance abuse.⁷ Men with paraphilic transvestism from nonpatient populations do not consistently display an elevated prevalence of comorbid psychopathology, but this is not the case for clinical populations. In one study, investigators observed that subjects from organizations for transvestites achieved unremarkable scores on the NEO Personality Inventory and Derogatis Sexual Functioning Inventory¹⁹ but noted that previous studies conducted in clinical samples of men with paraphilic transvestism had found elevated levels of neuroticism. In another study of transvestic men who had or had not sought treatment for transvestism, both subgroups reported an elevated prevalence of unipolar depression and alcohol dependence, relative to population norms.¹³

ETIOLOGICAL CONSIDERATIONS

Several etiological explanations of paraphilic transvestism have been proposed, but none have found widespread acceptance. Stoller suggested that many cases of paraphilic transvestism were attributable to mothers or other female caregivers who cross-dressed male children to humiliate them or undermine their masculinity.¹ Stoller's theory is no longer widely accepted, however, because most transvestic men report that their childhood cross-dressing was entirely self-initiated.¹⁴ Schott proposed that an especially close mother-child relationship, in the context of a remote or uninvolved father and (often) no male elder brothers, might play an important etiological role in paraphilic transvestism.¹¹ Counterintuitively, however, Schott observed that nuclear transvestites reported closer maternal relationships than marginal transvestites.¹¹ A recent review article summarized case reports of the familial co-occurrence of transvestism and related conditions;⁹ these are consistent with but do not clearly demonstrate a genetic predisposition to paraphilic transvestism. A large survey of men with paraphilias revealed unusually high correlations for sexual arousal to cross-dressing among 11 monozygotic and 14 dizygotic twin pairs,¹⁶ findings that are potentially attributable to either genetic or psychosocial factors.

PROGNOSIS AND TREATMENT

Paraphilic transvestism is a chronic, lifelong disorder, characterized by fluctuating intensity and occasional temporary remissions. It is often progressive, leading to the desire for more extensive, frequent, or public cross-dressing.¹² It can progress to or become comorbid with

gender dysphoria or transsexualism in some cases. Men with paraphilic transvestism often report adverse consequences of cross-dressing, including divorce, marital difficulties, objections by family members, interference with relationships with men and women, and occupational problems.¹³

Most men with paraphilic transvestism do not seek treatment for their condition,¹⁰ nor is treatment necessarily indicated. Men with paraphilic transvestism who go on to develop gender dysphoria, however, often seek treatment. Data to guide treatment selection are limited. Attempts to eliminate the desire to cross-dress through psychotherapy are invariably unsuccessful. Psychotherapy to address the frequency of cross-dressing, associated negative cognitions, or undesirable social consequences is potentially more successful. A 2008 review summarized possible therapeutic approaches, including relapse prevention, harm reduction, mindfulness, and emotional regulation paradigms.²⁰ Men with paraphilic transvestism sometimes benefit from participation in social support organizations. Reports of successful pharmacologic treatment of paraphilic transvestism are anecdotal.²⁰ Psychotherapy for spouses and family members of men with transvestism is potentially valuable but has not been adequately studied.

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