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Does Autogynephilia Theory Still Provide a Useful Explanatory Framework for Understanding Transfeminine Identity and Sexuality?

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Autogynephilia (AGP) is defined as a male's propensity to be sexually aroused by the thought of himself as a female (Blanchard, 1989). In a recent article in *Archives of Sexual Behavior*, Hsu et al. (2025) investigated whether AGP offers a useful conceptual framework for understanding differences in sexuality between male cross-dressers, transfeminine individuals (persons assigned male at birth [AMAB] who have feminine gender identities), and cisgender men and women. The term AGP is sometimes used to denote not just the erotic phenomenon itself but also a set of associated hypotheses and concepts; I will refer to this body of ideas as *AGP theory*. AGP theory has not been formally codified, but Blanchard (2005) set forth what he considered its most important elements, including its central claim: "All gender-dysphoric biological males who are not homosexual (erotically aroused by other males) are instead autogynephilic" (p. 445).

The data presented by Hsu et al. (2025) invite a broader question: Does AGP theory still provide a useful explanatory framework for understanding transfeminine identity and sexuality? I will argue that the scope of AGP theory's useful explanatory power has declined significantly. Transfeminine identities have become so prevalent and diverse that AGP theory can no longer plausibly account for all of them. Moreover, the decision to adopt a transfeminine identity is now considered a matter of personal autonomy and self-determination that does not require an etiological explanation.

I will review the new data from Hsu et al. (2025) that bear on this point and then discuss the cultural changes that have reduced the domain in which AGP theory can provide useful explanatory value. I will close by describing some specific circumstances in which AGP theory remains useful and offering suggestions for future research.

Many Transfeminine Persons Now Report Little or No Meaningful Autogynephilia

A significant minority of the transfeminine persons studied by Hsu et al. (2025), over 95% of whom had a history of gender dysphoria, reported little or no meaningful past or current experience of AGP. If these individuals were reporting accurately—and there is no reason to suspect otherwise—then for some of them AGP provided little or no impetus to transfeminine identity. Hsu et al. did not address this issue, but the conclusion is inescapable.

Hsu et al. (2025) measured AGP in their transfeminine informants using two metrics, the first of which was the Core Autogynephilia Scale (CAS; Blanchard, 1989), which asks about any experience of sexual arousal associated with picturing oneself with female anatomic features or being a woman. The CAS does not measure

intensity of autogynephilic arousal, only how many different anatomic features have been experienced as arousing, but it has often been treated as a measure of intensity for lack of anything better. The mean CAS score in the transfeminine persons was moderate, *M* = 4.98 (0–8 scale) with *SD* = 3.16. Hsu et al. did not discuss the distribution of CAS scores, but it is possible to extrapolate from a similar sample described by Bailey and Hsu (2022). A figure in their article displayed the distribution of CAS scores in 96 ostensibly autogynephilic persons who had “ever wondered whether they might be transgender” (p. 3313). These individuals had a mean CAS score of 4.27 (*SD* = 3.18)—very similar to the Hsu et al. data—and 24% of them had CAS scores of zero: No history of AGP. If the distribution of scores in Hsu et al.'s transfeminine informants was similar, it is probable that a significant minority of them likewise reported little AGP or none at all, implying that AGP provided little or no impetus to their transfeminine identities. Note that socially desirable responding is unlikely to explain these results, given that the survey was anonymous and conducted online; Hsu et al.'s speculations to the contrary, based on observations published four decades ago (Blanchard et al., 1985), are unconvincing.

Hsu et al. (2025) also measured AGP in their transfeminine informants using the newer General Autogynephilia Scale (GAS; Hsu et al., 2015), which asks individuals how arousing they would find 22 different AGP erotic scenarios, scored on 1–5 Likert scales (“not at all,” “a little,” “somewhat,” “very,” or “extremely”). The mean GAS score for the transfeminine persons was moderate, *M* = 2.62, but there was considerable variability (*SD* = 1.23). If GAS scores were normally distributed—Hsu et al. provided no information about this—then probably 30% or more of the transfeminine persons had scores ≤ 2, meaning that they found AGP scenarios only a little arousing or not at all. Assuming accurate reporting, this is further evidence that AGP provided little or no impetus to transfeminine identity for a significant number of individuals.

Note that it is unlikely that many of these low-scoring informants were exclusively androphilic persons, who are theorized not to experience AGP. Based on their recruitment method, Hsu et al. (2025) expected to enroll only nonandrophilic participants, and the Kinsey scale data they collected would have alerted them if a large cohort of exclusively androphilic persons had unexpectedly been enrolled.

The Hsu et al. (2025) data demonstrate that for nonandrophilic persons in contemporary Western societies, transfeminine identities cannot be attributed exclusively to AGP. Although AGP arguably still provides the most important impetus to transfeminine identity, it is clear that other factors must also be making significant contributions in many nonandrophilic individuals. These other factors are incompletely understood, but autism spectrum disorder (ASD) and related neurodevelopmental conditions almost certainly constitute important predisposing factors, given their recognized association with gender incongruence and gender-atypical attitudes and behaviors (Wattel et al., 2024). In a study by van der Miesen et al. (2018), 10% of AMAB adults with ASD reported that they had sometimes or often wished to be of the opposite gender, more than three times higher than in controls. Bejerot and Eriksson

(2014) found that self-rated gender role in AMABs with ASD was “characterized by weak masculinity” (p. 6) and Stauder et al. (2011) observed that “male role behaviour in males with [autism spectrum conditions] showed a feminized pattern” (p. 1213). Kallitsounaki and Williams (2020) suggested that AMAB persons with autism might be less likely to internalize and comply with traditional male gender role expectations due to reduced mentalizing abilities and relative indifference to social disapproval.

Identifying as transfeminine can also offer social and psychological benefits that go beyond relief of gender dysphoria and expression of self-perceived femininity or non-masculinity. One of the developmental tasks of adolescence and young adulthood in Western cultures is individuation, the establishment of a distinctive personal identity (Snyder & Fromkin, 1977, 1980). Transfeminine identification provides a distinctiveness that differentiates the individual from the majority and confers membership in a community of similar others. A comparable phenomenon has been observed for neurodivergent identities, where self-identification as neurodivergent satisfies needs for both differentiation and minority-group belonging (Foster & Ellis, 2024). Pursuit of individuation probably provides an additional incentive to transfeminine identification for some nonandrophilic persons.

The Clinical and Social Context of Autogynephilia Theory Has Changed Dramatically

AGP theory arose in clinical and social circumstances very different from those of today. When Blanchard's (1989) studies of male-to-female (MtF) transsexuals led him to formulate the concept of AGP, MtF transsexualism was a rare condition, hormonal and surgical sex reassignment was controversial, and the psychosocial consequences of transition were usually severe. The estimated prevalence of MtF transsexualism in Western countries at that time was less than 0.01% (Zucker & Lawrence, 2009). Although a few autobiographies by MtF transsexuals had been published, role models for successful MtF gender transition were not readily available. Approval for medical and surgical treatment required extensive psychiatric evaluation, and practitioners willing to provide treatment were not always easy to find. Persons who underwent MtF sex reassignment often lost their jobs, friends, spouses, and children, and they faced pervasive discrimination with virtually no community support. In that era, pursuing MtF sex reassignment required powerful motivation. The motivation seemed reasonably clear for extremely feminine, exclusively androphilic persons, but for unremarkably masculine, nonandrophilic individuals who often had a great deal to lose, the motivation was less obvious. Blanchard’s insight was that AGP could provide powerful distal motivation for sex reassignment in these latter individuals.

Today the situation is different. Transfeminine identification, with or without social transition and gender-affirming medical and surgical treatment, is much more prevalent, is widely accepted or at least tolerated in many Western countries, and is typically associated with much lower psychosocial costs. In the United States, about 0.5% of AMAB adults currently identify as transwomen (Herman & Flores, 2025), and for those under age 30 the figure may be as high as 1.0% (Brown, 2022). In

the Netherlands, the prevalence of transfeminine identity in AMAB adults may be as high as 1.1% (Kuyper & Wijsen, 2014). Transfeminine autobiographies and role models for successful transition are easy to find on the internet, and social support in person and online is widely accessible. Gender-affirming medical and surgical treatment is sometimes available to adults and adolescents based on an informed consent model that does not require extensive psychiatric evaluation (Deutsch, 2012; Spanos et al., 2021), and treatment is covered by medical insurance policies in many U.S. states (Movement Advancement Project, 2026) and Western countries. I regard these as positive developments.

Nowadays, adopting a transfeminine identity is often associated with only mild psychosocial disruption. Post-transition, transfeminine persons frequently retain their jobs, their friends, and the support of their families. In some U.S. states and Western countries, they are legally protected from discrimination in employment, housing, and public accommodations (Williamson, 2024). Barriers to transfeminine identification have declined significantly, and a powerful impetus is no longer needed to surmount them. Some transfeminine persons acknowledge that their gender transition had an erotic component, but the observation that many cisgender women report AGP or something closely resembling it (Lawrence, 2010; Moser, 2009; Serano & Veale, 2023; Veale et al., 2008) suggests that such an erotic component is of no great significance. In this environment, clinicians and transfeminine persons have little need to invoke paraphilic sexuality as an explanation for transfeminine identity, which is considered unremarkable and moreover is not generally open to question.

In What Settings Is Autogynephilia Theory Still Useful?

The families of nonandrophilic persons who unexpectedly declare transfeminine identities may find useful explanatory value in AGP theory. They are often incredulous when a family member who had been enacting a male-typical gender role with apparent contentment and success declares a transfeminine identity, and they may have difficulty accepting the idea that this reflects a feminine essence that had always been present but had simply been unrecognized or suppressed. The explanation AGP theory offers, that transfeminine identity arising in adolescence or adulthood in an unremarkably masculine AMAB person can reflect the unfolding of an unusual sexual orientation, may not offer much consolation to families, but it may at least seem more plausible than an explanation positing latent inner femininity.

AGP theory will also continue to have substantial explanatory value for the subgroup of gender dysphoric AMAB persons who recognize that their transfeminine sexual fantasies and desires are undeniably paraphilic: intense, intrusive, often fetishistic, inimical to interpersonal intimacy, obligatory for maximum sexual gratification, and ego-dystonic or repugnant afterward. This description represents the lived experience of some transfeminine persons with AGP (Lawrence, 2013). They understand that their fantasies are not female-typical but rather reflect a disorder of sexual orientation (Lawrence, 2011). For these individuals, a pathologizing explanatory framework is not a disadvantage, because their

sexuality feels deeply pathological. AGP theory proposes that their erotic fantasies and desires reflect a paraphilic sexual orientation that can lead to gender dysphoria and transfeminine identification. This explanatory framework can facilitate decisions about the existential issues that arise for gender dysphoric persons with AGP. Some may conclude that because AGP is an unchangeable sexual orientation that is central to their identity, it constitutes a compelling reason to transition. Others may reach different conclusions. Persons who recognize that their transfeminine desires reflect a paraphilic orientation are not rare, and many report that AGP theory describes their lived experience in a way that is accurate and sometimes revelatory (Lawrence, 2013).

Whither Research on Autogynephilia?

The ethos of scientific sex research requires investigators to recognize that they owe a special duty of care to persons with stigmatized sexualities like AGP. In recent debates over transgender rights, AGP theory has been invoked to suggest that transfeminine persons are sexual predators and that transfeminine expression is reducible to paraphilic enactment (Serano, 2021). Research agendas like those of Hsu et al. (2025), who focused on stigmatized correlates of AGP such as sexual compulsivity, sociosexuality, and problematic pornography use, and Bailey and Hsu (2025), who tried to demonstrate that persons with AGP belong to the same "natural kind" as pedophiles, run the risk of generating data that can easily be misrepresented and weaponized against transfeminine persons. Researchers who study individuals with stigmatized sexualities must be attentive to this issue.

Notwithstanding the diminished explanatory value of AGP theory, the phenomenon of AGP is still of substantial theoretical and clinical interest. An important but under-explored component of AGP is analloeroticism, which is a lack of erotic interest in sexual activity with other people. Analloeroticism is erotic self-sufficiency, and it appears to be a relatively stable, dispositional feature of the sexuality of some persons with AGP (Blanchard, 1992). It is not rare: Blanchard (1989) classified 18 (19%) of his 95 nonhomosexual MtF transsexual patients as analloerotic, and in a study of 232 MtF transsexuals, Lawrence (2005) found that 27 (12%) reported no sexual attraction toward other people. Investigating the sexuality of these analloerotic individuals could provide a window into AGP in what is arguably its purest form, undiluted by alloerotic attraction and also unrestrained by it. On a practical level, analloerotic individuals face the challenge of meeting their needs for emotional and physical intimacy despite feeling little or no erotic attraction to human partners. Qualitative research would be key to understanding the unusual erotic subjectivity and unmet needs of this largely neglected population.

Blanchard (2005) observed that "The study of autogynephilia is, more than anything else, the study of what people *say* about their experiences" (p. 439; emphasis in original), and people with AGP have more to say than they can express using five-category Likert scales. Persons with AGP have much to tell us about their lived experiences, and we should listen to their actual words.

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