Definition: **paraphilia** from *Dictionary of Psychological Testing, Assessment and Treatment*

A group of psychosexual disorders, in which the patient solely or principally gains sexual gratification from activities and items either forbidden by societal conventions, or which would not elicit such extreme responses in an average person. See atypical paraphilia, ecotism, exhibitionism, fetishism, masochism, paedophilia, sadism, transvestism, and voyeurism.

Summary Article: **Sexual Deviations**
from *The Corsini Encyclopedia of Psychology and Behavioral Science*

Few people would question whether sexual activities that involve force or coercion of an adult or any sexual activity with a child are deviant. These behaviors are not only maladaptive—they are criminal. But what about other atypical or unusual sexual behaviors that are noncoercive or do not involve children? Certainly, unusual sexual practices find their way into the sex lives of so-called normal people. For example, normal sexual interactions between consenting adults may include tying one another to the bedpost while making love. Or a man may enjoy sex more when his partner wears lacy panties because he finds it particularly titillating. Are these normal or deviant practices?

It is not easy to determine what is actually sexually deviant. Many societal factors influence what is considered deviant sexual behavior. These include subjective viewpoints (one’s judgment of what is appropriate), statistical norms (what most people do), religious beliefs (what is permitted or prohibited by prevailing religions), and cultural influences (what a particular culture supports or discourages; Purcell & Arrigo, (2006)). These factors change over time and vary across cultures. For example, in the original *Diagnostic and Statistical Manual of Mental Disorders* (DSM), the American Psychiatric Association (APA, (1952)) included homosexuality in the category of disorders then known as *sexual deviations*. Today, with greater understanding and acceptance of homosexuality, it is no longer considered deviant behavior. Nonetheless, it was not until 1973 that the American Psychiatric Association removed homosexuality from its list of mental disorders.

**Definition**

Sexual deviations are more appropriately termed **paraphilias** because this term has a less pejorative connotation. Paraphilia literally means “abnormal” (*para*) “love” or “attraction” (*philia*) and is defined by the APA as “recurrent, intense sexually arousing fantasies, sexual urges, or behaviors generally involving (1) nonhuman objects, (2) the suffering, humiliation of oneself or one’s partner, or (3) children or other nonconsenting persons that occur over a period of at least 6 months” (2000, p. 566). A key feature of deviant sexuality is a nearly exclusive reliance for sexual arousal and satisfaction on the preferred object (e.g., shoe), act (e.g., inflicting pain), or nonconsenting adult or child.

Generally speaking, paraphilias involving another person (e.g., pedophilia, voyeurism, exhibitionism, frotteurism, sadism) require that the person act on the urge or otherwise experience significant distress or interpersonal conflict because of the sexual urge, fantasy, or behavior. In pedophilia, voyeurism, exhibitionism, and frotteurism, the person who is the object of the urge, fantasy, or behavior is, by definition, nonconsenting. A diagnosis of sexual sadism is given, however, even if the activities involve a consenting adult (sexual masochist, perhaps), provided that the sexual urges,
fantasies, or behaviors are personally distressing or cause interpersonal difficulty. The other major paraphilias—fetishism, sexual masochism, and transvestic fetishism—are diagnosed only if marked psychological distress or impairment in social, occupational, or other important areas of functioning result from the sexual urges, fantasies, or behaviors (APA, 2000)). Except for sexual masochists, paraphilics are believed to be almost exclusively male (APA, 2000)). However, many experts believe that there may be more women paraphilics than typically believed and that stereotypes of female sexuality as passive, inhibited, and dependent on committed, loving relationships prevent us from interpreting paraphilic behaviors observed in women as deviant. For example, a woman who bares her breasts to male passersby is not likely to draw the same reaction (“Pervert!”) as a man who flashes his genitals at women. However, she might very well be an exhibitionist.

The Paraphilias
The most common paraphilias are as follows:

Exhibitionism: “flashing,” recurrent and intense sexual fantasies and urges to expose one’s genitals to an unsuspecting stranger. Generally, exhibitionists engage in a chain of responses, such as fantasizing about the act, going to a preferred location (usually secluded), selecting a victim (generally an unaccompanied female), mentally rehearsing the act, and then exposing himself, followed by masturbating to orgasm either during exposure or later while mentally recalling the exposure. Although it is commonly believed that exhibitionists are aroused by shocking their victims, they are generally excited by the hope that the victim will find exposure to their genitals arousing or will respond by exposing themselves.

Fetishism: sexual urges, fantasies, or behaviors focused on a nonliving object (e.g., women’s shoes, underpants; not limited to cross-dressing as in transvestic fetishism). The most common objects of fetishists are women's clothing. Selection of an object is often based on texture (e.g., silky) or smell (e.g., rubber). A fetishist either uses the object during masturbation or requires a sexual partner to wear the object during sex. For most fetishists, the object is necessary for sexual arousal.

Frotteurism: sexual fantasies, urges, or behaviors involving touching and rubbing against a nonconsenting person. Typically, frotteurism takes place in crowded public places, such as in an elevator or on public transportation, where a person can rub up against or touch the genitalia or breasts of the victim, then escape undetected into the crowd.

Pedophilia: sexual fantasies, urges, or behaviors involving a prepubescent child, usually age 13 or younger. The person must be at least 16 years old and at least 5 years older than his child victim. Exclusive pedophiles are attracted only to children, and nonexclusive pedophiles are also attracted to adults.

Sexual Masochism: sexual urges, fantasies, or behaviors that involve being subjected to physical or mental suffering. These can include being bound, beaten, or humiliated. Although some people may role-play such actions, true masochism involves actual suffering or humiliation. Masochists generally have very specific preferences for the type of pain or humiliation they find sexually arousing.

Sexual Sadism: sexual urges, fantasies, or behaviors that involve acts of physical or psychological suffering on another person. These acts are real, not simulated or role-played. Many experts believe that sadists’ primary need is to exert power and control, not to injure, and that most sexual
sadists do not seriously injure others. On the other hand, some sexual sadists exhibit a need to intensify these acts, and if they are also antisocial personalities, they have the potential to escalate their behavior to serious injury or murder.

Transvestic Fetishism: sexual urges, fantasies, or behaviors involving dressing in women’s clothing for purposes of sexual excitement. This paraphilia is considered exclusive to heterosexual men. Not all people who cross-dress are transvestic fetishists. For instance, some cross-dressers, called transsexuals, believe themselves to be the opposite sex and, therefore, wear the clothing of and live as the opposite sex at all times. Transvestic fetishists have a masculine identity and no desire for sex reassignment.

Voyeurism: peeping, sexual urges, fantasies, or actual behavior involving the observation of an unsuspecting person who is naked, in the process of disrobing, or engaging in sex. Like the exhibitionist, the voyeur might masturbate either while in the process of peeping or afterward, while fantasizing about the voyeuristic act. Generally, voyeurs gain sexual satisfaction by knowing the victim is unaware, but some voyeurs attempt to get the victim’s attention, startle the victim, and then flee the scene. Voyeurs usually have a preferred series of houses or a neighborhood they frequent, often under the guise of going for a walk in the area.

Paraphilia Not Otherwise Specified: There are many other less common paraphilias—too many to list. Examples and their focus of sexual arousal include coprophilia (feces), autoerotic asphyxia (cutting off oxygen), klismaphilia (enemas), necrophilia (corpses), partialism (exclusive focus on one part of the body), telephone scatalogia (obscene phone calling), urophilia (urine), and zoophilia (animals). Some paraphilias are derived from combinations of two or more paraphilias. For example, erotophonophilia, also called lust murder or sexual homicide, may involve necrophilia and extreme forms of sadism (Wright, Hatcher, & Willerick, 2006), as well as other paraphilias.

The Origins of Paraphilias

If one could fully understand how normative sexual attraction develops, perhaps there would be greater understanding of what causes an individual to develop attractions to atypical objects and practices. Although various theories emphasize the relative importance of each of the following, it is most likely that paraphilic patterns are determined by a combination of various biological, psychological, and sociocultural influences. No biological variables have emerged as directly causal. Some research on early childhood experiences of paraphiles shows disturbed parent–child relationships. Furthermore, early sexual experiences (e.g., trauma), exposure to atypical sexual behavior, and parental attitudes toward sex most certainly play a role in both typical and atypical sexual development. Poor social skills development, which reduces opportunities for forging healthy social and sexual relationships, has been observed in paraphiles as well. Sociocultural factors that may play a role might help to explain why men, more than women, develop atypical sexual patterns. Men, for example, are more likely to learn that sexual aggression is acceptable behavior.

In general, our understanding of how sexually deviant patterns of arousal develop is lacking, and many questions remain unanswered. Why is it, for example, that feet are more likely to become the objects of sexual fantasies than are hands or other body parts that are not typically sexualized? No doubt, a tremendous amount of research is needed to help us understand typical sexual patterns as well as the unusual and even bizarre.

See also

https://search.credoreference.com/content/topic/paraphilias
Exhibitionism; Voyeurism.

References

Suggested Readings

M. MICHELE BURNETTE
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