the discovery raises doubts about their own sexuality and self-worth, and they may decide to terminate the relationship. Some women are not threatened by the cross-dressing but fear it will become public knowledge. Other women move on to full acceptance and understanding of their partner’s cross-dressing.

**PARAPHILIAS**

The DSM-IV-TR classifies paraphilias as a group of psychosexual disorders characterized by unconventional sexual behaviors. The person, usually a male, has learned to associate sexual arousal with some environmental stimulus, which triggers the unusual behavior.

Paraphilias have a strong obsessive–compulsive component. Affected individuals are often preoccupied with, and feel compelled to engage in, their particular sexual behaviors. One of the distinguishing characteristics of paraphilias is the person’s inability to control or stop the behavior.

**Noncoercive Paraphilias**

Noncoercive paraphilias are unconventional sexual behaviors engaged in by oneself or with a consenting adult. Many people engage in mild forms of the noncoercive behaviors and consider them simply love play. According to the DSM-IV-TR the behavior becomes pathologic when it is severe, insistent, coercive, and harmful to self or others. There is a movement to remove the category of noncoercive paraphilias from the DSM-IV-TR by those who believe these behaviors are normal activities that have been labeled inaccurately as pathological by conservative health care providers. See the DSM-IV-TR Diagnostic Criteria for Noncoercive Paraphilias on page 526.

**Fetishism**

Humans respond to a wealth of sexual stimuli. Some people are aroused by the strident beat of rock music, while others are aroused by romantic music. Some people prefer making love in a brightly lit room; others, by candlelight; still others, in the dark. Everyone associates sexual arousal with an individual set of stimuli.

An association or stimulus that is not typical for the culture is called a fetish. A fetish is the sexualization of a body part, such as feet or hair, or an inanimate object, such as shoes, leather, or rubber. In fetishism, early associations of a particular object or body part with sexual arousal condition the person to respond sexually to that stimulus. Once the initial association is made, repeated viewing or use (fantasized or actual) of the part or object during sexual activity (usually masturbation) reinforces its arousing nature. For instance, a boy may get an erection after trying on his mother’s panties. The erection is pleasurable. The next time the boy masturbates he puts the panties on or fantasizes about them. With repeated experiences, seeing the panties or putting them on becomes a sexual stimulus.

The following clinical example illustrates how a fetish can become an obsessive–compulsive behavior.