
THE TYPES OF HETEROSEXUAL
GENDER IDENTITY DISORDER

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ABSTRACT

The rationale for dividing the clinical spectrum of DSM-III-R male heterosexual gender identity disorder into three types was examined. The DSM-III-R category of fetishism for female attire, was included in the analysis. There were 266 male participants divided into three groups: 172 fetishists for female attire or gender identity patients, 52 androphiles, and 42 gynephiles. A 16 item questionnaire was used to examine the groups. A three factor scale ("Fetishism", "Gender Dysphoria" and "Androphilia") was derived from the questionnaire. Only the Gender Dysphoria Factor Scale successfully differentiated between all four conditions, supporting the notion that the three types of gender identity disorder represent a continuum of degree of severity of gender dysphoria. Defining two of the three types of gender identity disorder in terms of the patients' self-reports on fetishism, as DSM-III-R does, is therefore unnecessary.

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The following is a report of a formal analysis of the types of Gender Identity Disorder in males as defined in *The Diagnostic and Statistical Manual of Mental Disorders*, Revised Third Edition (DSM-III-R; American Psychiatric Association, 1987). DSM-III-R divides the clinical spectrum of gender identity disorders into three types: transvestic fetishism; gender identity disorder of adolescence or adulthood, non-transsexual type (GIDAANT); and transsexualism. These types were formulated on the basis of broad clinical experience, but until now the rationale for this division had not been formally tested. The present study conducted such a test and included, for reasons which will become evident later on, fetishism for female attire, also as defined by DSM-III-R.

A DSM-III-R essential characteristic of "transvestic fetishism" is "recurrent, intense, sexual urges and sexually arousing fantasies of at least six months duration, involving cross-dressing" (p.288). These sexually arousing fantasies clearly indicate the presence of fetishism. Conversely, a feature of GIDAANT is that "cross-dressing is not for the purpose of sexual excitement" (p. 76). Further, GIDAANT is without the presence of the diagnostic criteria for transsexualism as there is "no persistent preoccupation ... with getting rid of one's primary and secondary sex characteristics and acquiring the sex characteristics of the other sex" (p. 76).

The differential diagnosis between fetishistic transvestism and GIDAANT has obviously been based on the self-reports of gender identity disorder patients as to the degree of their fetishism. However, self-reports of fetishism in patients of this sort should not be considered sufficiently reliable to be used in defining the types of this disorder. Playing down or denying fetishism is typical of a majority of these patients (Blanchard, 1988; Blanchard, Clemenssen, & Steiner, 1985; Blanchard, Racansky, & Steiner, 1986); they apparently want their transvestism to be viewed as resulting from a genuine psychological femaleness. However, this is not to say that these patients' self-reports of fetishism are of no use and should therefore be ignored.

Self-reports about discontentment with gender appear to better serve the purpose of defining the types of heterosexual gender identity disorder. This is because: (a) This kind of self-report information is more directly connected to the patient's state than self-reports on fetishism. The more dysphoric the patient is, the more he will say so (and show it by other means). The less dysphoric he is, the less reason he has to claim gender dysphoria. (b) Fetishism cannot serve as a practical criterion for differentiation between GIDAANT and transsexualism. Therefore DSM-III-R differentiates only between two of the three types of gender identity disorder, using fetishism as a criterion. In contrast, gender dysphoria can serve as a unitary criterion differentiating all three types of gender identity disorder.

The term "gender dysphoria" was introduced by Fisk (1973) who characterized

it as a chronically recurrent or sustained wish to possess the anatomy of the opposite sex, accompanied by discontentment with one's own anatomical sex and assigned gender.

The current study avoided using patients' self-reports of degree of fetishism as the basis for defining the types of gender identity disorder, and used only the self-reports of degree of gender dysphoria. This was expressed by a replacement of the labels of two of the three types of gender identity disorder. The types originally labelled by DSM-III-R as transvestic fetishism and GIDAANT, were re-labelled "non-gender-dysphoric transvestism" (an abbreviation for "minimally gender dysphoric" transvestism) and "gender-dysphoric transvestism".

METHOD

Research Participants & Procedure

Three groups, totalling 266 male participants, were included in the study: (1) 172 patients with fetishism for female attire or gender identity disorder (collectively abbreviated as G.I.D.); (2) 52 clients and paid volunteers who were androphilic (androphilia is an erotic preference for physically mature males); and (3) 42 paid gynephilic volunteers (gynephilia is an erotic preference for physically mature females).

With the exception of the members of the androphilic group, homosexual persons were excluded from the study. This was to insure that androphilia would not confound pseudo-androphilia, a condition which, in contrast to androphilia, is not based on an erotic preference for male body shape but on a G.I.D. patient's longing to play the female role in a female-male relationship. Further, only persons seen from 1980 onward were included because some of the questionnaire items used were not added to the Erotic Preferences Examination Scheme (EPES -- Freund, 1965) until 1979 (see below).

Participants in the study were obtained from the following sources; 103 of those in the G.I.D. group were referred by the physicians to whom they had turned for help with respect to their gender identity problem or fetishism. Sixty-three of these men were seen at the Gender Identity Clinic of the Clarke Institute. All gender dysphoria patients included in the study had indicated fetishistic or transvestic activities to the attending clinician. The participants in the androphilic group came from two sources; 46 had presented for counselling for difficulties in regard to lifestyle, and 6 were recruited by advertisement in a gay bookstore. The gynephilic volunteers were recruited from a governmental agency for the unemployed and from community colleges.

Mean age and median education are presented in Table 1.

Preference for sex of partner was determined using the following EPES question: Since age 16, have you ever been equally, or more, attracted sexually by a male age 17 and over than by females age 17-40? -- (1) yes: -- (2) no. Except for the members of the androphilic group, who had to have chosen answer (1), all participants had to have chosen answer (2) to be included in the study.

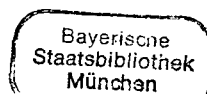
Following this selection, the four paraphilic syndromes in question (fetishism for female attire, non-gender-dysphoric transvestism, gender dysphoric transvestism, and heterosexual transsexualism) were differentiated in the research participant groups by a set of three hierarchically ordered EPES items. Fetishism for female attire, an essentially non-gender dysphoric condition, was included for comparison with gender dysphoric and with non-gender-dysphoric transvestism; the least gender dysphoric of the types of gender identity disorders. All G.I.D. patients passed through a hierarchy of questions beginning with the following question to differentiate the fetishists for female attire from the other three types; (a) Since age 17 did you put on women's underwear or clothing? -- (1) once a month or more, for at least a year; -- (2) less often but several times a year for at least a year; -- (3) very seldom did this during this period; -- (4) never did this during this period. Gender identity disorder patients who chose answers (3) or (4) were labelled non-transvestic. Those who chose answers (1) or (2) were considered transvestic.

The differentiation between non-gender dysphoric and gender dysphoric transvestism was accomplished by means of the following question; (b) Since age 17 have you ever wished you had been born a girl instead of a boy? -- (1) often; -- (2) occasionally; -- (3) never. Patients who chose answer (1) were labelled gender dysphoric, while those answering either (2) or (3) were considered non-gender dysphoric.

Table 1
Age and Education of Research Groups

	G.I.D.	Androphiles	Gynephiles
N	172	52	42
Age Mean	33.6 ^a	31.1 ^{a,b}	28.9 ^b
SD	9.8	10.4	6.8
Median Education ^c	12	12	12

Note: G.I.D. = Gender identity disorder patients and patients with fetishism for female attire; a, b: Groups sharing common subscripts are not different at the $p < .05$ level; c: Participants had at least 12 grades education, but no more.



The following item was used to differentiate transsexual from non-transsexual patients; (c) Have you ever felt like a woman -- (1) only if you were wearing at least one piece of female underwear or clothing; -- (2) while wearing at least one piece of female underwear or clothing and only occasionally at other times as well; -- (3) at all times and for at least one year; --(4) never felt like a woman. Patients who chose answer (3) were deemed to be heterosexual transsexuals.

The typing procedure described above leaves one issue unresolved. There exists a subgroup of gender identity disorder patients for whom the rule regarding differentiation between fetishism proper for female attire and transvestism (as defined in DSM-III-R) does not appear to fit clinical experience. This subgroup is composed of "panty fetishists" who put female panties on for masturbation purposes and sometimes wear them all day under their trousers. Rarely do such individuals put on other female garments, except for equivalent garments with a crotch region, which some of these patients -- those who prefer used panties -- smell and suck. While some panty fetishists report transvestic urges or fantasies, most do not. The classification of these individuals is addressed below.

From a set of sixteen EPES items (see Appendix 1), 3 scales were constructed to differentiate between fetishism for female attire and each of the three types of gender identity disorder in regard to degree of fetishism and gender dysphoria. The participants for this procedure consisted of the G.I.D. patients, and of the gynephilic and androphilic groups who had completed all these EPES items.

RESULTS

While there were no significant differences found among the three groups with respect to level of education, significant differences in age were found ($F = 4.593$, $df = 2,263$, $p < .02$). Tukey H.S. D. multiple range tests indicated that the G.I.D. group was significantly older than the group of gynephilic volunteers. There were no other significant differences.

Principal components analysis of the 16-item EPES set (Appendix), with eigenvalue > 1.0 as a criterion and Varimax rotation (SPSS, 1990), yielded three factors which accounted for 61.6% of the total variance (Table 2). The factors were labelled: 1) Fetishism proper for female attire, 2) Gender Dysphoria and 3) Androphilia (or Pseudo-Androphilia). The unwieldy label applied to factor 3 reflects this factor's inability to differentiate between true androphilia and pseudo-androphilia encountered in transvestites or heterosexual transsexuals. Presently, it is very difficult to determine whether or when pseudo-androphilia reflects a real "secondary erotic interest in males" (Blanchard, 1985, p. 257) or is

Table 2
Factor Analysis of 16 EPPS Scale Items

Variable	Varimax Rotated Factor Loadings			
	Communality	Factor 1	Factor 2	Factor 3
1	.918	.957	-.021	.027
2	.872	.931	-.027	.066
3	.789	.886	-.041	.051
4	.681	.821	-.075	.030
5	.479	.658	.214	.003
6	.391	.619	.037	.083
7	.442	.479	-.415	.199
8	.870	-.007	.928	.092
9	.675	.156	.752	.292
10	.565	-.104	.744	-.041
11	.507	.028	.693	.160
12	.488	.015	.689	.113
13	.458	-.009	.663	.136
14	.851	.135	.089	.908
15	.629	.029	.111	.785
16	.234	.035	.221	.429

Note: The three factors were labelled respectively "Fetishism", "Gender Dysphoria", and "Androphilia" and had unrotated eigenvalues of 4.734, 4.305, 1.813 an accounting for 29.6%, 26.9% and 11.3% of the total variance respectively.

simply faked by a patient who wants to be perceived as having female interests.

One way analysis of variance was used to compare the three groups on each of the three factors separately. The Tukey-H.S.D. tests with a significance level of $p < .05$ were used as post hoc to compare group means. The results are shown in Table 3. For factor 1, $F = 16.387$, $df = 2, 263$, $p < .001$. According to the Tukey H.S.D. test, the group composed of fetishists for female attire and of patients with gender identity disorder scored significantly higher on fetishism than did the androphilic clients and the gynephilic paid volunteers who did not differ from each other. For factor 2, $F = 109.497$, $df = 2, 263$, $p < .001$. The Tukey H.S.D. test showed that the groups differed in the same way as for factor 1. For factor 3, $F = 68.054$, $df = 2, 263$, $p < .001$. The Tukey H.S.D. test showed that all three groups differed significantly from each other. The androphiles scored highest on Androphilia, the G.I.D. patients second, and the gynephilic volunteers scored

Table 3
Mean Factor Scores For Research Groups

Factor		G.I.D. (N=172)	Androphiles (N=52)	Gynephiles (N=42)
1. Fetishism	Mean	-.238	.357 ^a	.532 ^a
	SD	.984	.866	.749
2. Gender Dysphoria	Mean	.478	-.834 ^a	-.925 ^a
	SD	.849	.425	.187
3. Androphilia	Mean	-.145	1.038	-.693
	SD	.827	.836	.191

Note: G.I.D. = Gender identity disorder patients and patients with fetishism for female attire. ^a: Means sharing common subscripts are not different at the $p < .05$ level (Tukey's HSD multiple range tests).

lowest on this factor.

The validity of the rationale for dividing the clinical spectrum in question into four types was tested for each factor separately by ANOVA and Tukey H.S.D. tests, with the four types as the independent variables and the scores on

Table 4
Mean Factor scores Across Types of Heterosexual Gender Identity Disorder

Factor		Fet (N=16)	Non-DysTV (N=50)	Dys TV (N=44)	Transsex (N=62)
Fetishism	Mean	-.723 ^a	-.847 ^a	-.202	1.352
	SD	.762	.661	.951	.928
Gender Dysphoria*	Mean	-.653 ^a	-.328 ^a	.842	1.162
	SD	.443	.633	.488	.204
Androphilia	Mean	-.601 ^a	-.507 ^a	-.248 ^a	.339
	SD	.212	.409	.833	.936

Note: Fet = Fetishism for female attire; Non-Dys TV = non-gender dysphoric transvestism; Dys TV = gender dysphoric transvestism; Transsex = transsexualism. ^a: Means sharing common subscripts are not different at the $p < .05$ level (Tukey's H.S.D. multiple range tests). * The reclassification of panty fetishists (see Method) resulted in a significant difference between the Fet and Non-dys TV on the Gender Dysphoria Factor (n , means and SD were 19, -.846, .161 and 47, -.230, .630 respectively).

each of the three factor scales as the dependent variables (Table 4). The sizes of the groups, according to types classified by the three EPES items, were as follows: 16 non-transvestic fetishists for female attire, 50 non-gender dysphoric transvestites, 44 gender dysphoric transvestites, and 62 heterosexual transsexuals.

The result of the comparison for factor 1 (Fetishism) was; $F = 20.233$, $df = 3$, 168 , $p < .001$. According to the result of the Tukey-H.S.D. test, the standing of the heterosexual transsexuals on fetishism was lower than that of each other group, and the non-gender-dysphoric transvestites had a higher standing on fetishism than the gender dysphoric transvestites. Fetishists did not differ significantly from non-gender dysphoric transvestites.

The result of the ANOVA for factor 2 (gender dysphoria) was: $F = 139.108$, $df = 3$, 168 , $p < .001$. The Tukey H.S.D. test showed that the transsexuals had a higher standing on gender dysphoria than any of the remaining groups and that the gender dysphoric transvestites had a higher standing on gender-dysphoria than the non-gender-dysphoric transvestites and the fetishists for female attire. There was no significant difference between fetishism for female attire and non-gender dysphoric transvestism.

The result of the ANOVA for factor 3 "androphilia" was: $F = 15.096$, $df = 3$, 168 , $p < .001$. According to the Tukey H.S.D. test, the transsexuals had a higher standing on androphilia than each of the remaining groups. There were no other significant differences. As stated above, in the context of heterosexual gender identity disorders, this "androphilia" is actually pseudo-androphilia.

None of the three factor scales differentiated between fetishism for female attire and non-gender dysphoric transvestism. However, when the panty fetishists (who put on the panties when masturbating, and/or who wear them sometimes all day under their trousers) were re-classified as fetishists for female attire, factor 2 (gender dysphoria) differentiated between fetishism for female attire and non-gender-dysphoric fetishism ($t = 6.22$, $d.f. = 58.21$, $p < .001$, using separate variance estimates). Factors 1 and 3 did not differentiate between the two types even with this reclassification.

SUMMARY AND DISCUSSION

This study tested the rationale for the differentiation of four related clinically observed erotically anomalous conditions defined by DSM-III-R. These conditions were characterized by DSM-III-R as fetishism for female attire and as three types of gender identity disorder (transvestic fetishism, GIDAANT, and transsexualism).

The differentiation between these types in heterosexual patients was tested by means of a 16-item scale, developed for this purpose, which contained 3 factor miniscales which could be fittingly labelled as a fetishism scale, a gender

dysphoria scale, and an androphilia scale. The differentiation between the types was tested with each factor scale separately.

The results supported the notion that the three types of gender identity disorder represent increasing degrees of gender dysphoria, whereas patients with fetishism for female attire are not gender dysphoric. However, only the Gender Dysphoria Scale differentiated between all four conditions. The Fetishism Scale differentiated significantly between the types only with gender identity disorder patients, and these three types represented decreasing degrees of fetishism.

Gender dysphoria is the main condition clinicians must address in patients with gender identity disorders. The inability of the Fetishism Scale to differentiate among all four investigated conditions, whereas the Gender Dysphoria Scale did accomplish this differentiation, is an indication that it would be advantageous to give priority to gender dysphoria in defining the types of gender identity disorder. This is not to suggest that the type labels be abandoned and replaced by a gender dysphoria score. The types do provide a practical means for assessing and communicating about a patient's degree of gender dysphoria. In keeping with this consideration, two of the three DSM III-R gender identity types were re-labelled.

Several details of the analysis require further explanation:

(1) A scale for the differentiation of patients types in terms of fetishism and gender dysphoria had to be developed for this analysis because (a) while a validated fetishism scale does exist (Blanchard, 1989), it was not administered to a sufficient number of participants in the current study, and (b) the Gender Dysphoria subscale of the MMPI (Althof, Lothstein, Jones, & Shen, 1983) has been demonstrated to be inefficient (Langevin, Majpruz & Handy, 1990).

(2) Androphilic gender identity disorder patients were excluded from the analysis. This was done to prevent mixing-in of true androphilia with what, in the current context, should be understood as pseudo-androphilia. It appeared likely that in this process a few of the most extreme pseudo-androphilic patients were also excluded from the study.

(3) All fetishists for ladies' panties (whose fetishism was only for underwear and who did not put on any other female underwear or outer clothing), were subsequently classified as fetishists for female attire and not as transvestites, notwithstanding whether these patients were wearing these panties or not. This reclassification reflects the senior author's clinical observations and was in contradiction to the diagnostic rules implied by DSM-III-R and those used in the present analysis. Because the clinical picture of "panty fetishism" differs to such a high degree from transvestism and is very similar to fetishism for female attire proper, this reclassification appeared reasonable. In our experience, such panty fetishists virtually never wear female underwear and

are only rarely gender dysphoric. Indeed, none of the panty fetishists reported in this study were gender dysphoric.

(4) While a significant difference in age was found between the G. I. D. and the group of gynephilic volunteers, it has been our experience that differences of the nature reported (mean ages of 33 and 28 respectively) have little impact with respect to erotic preference.

Acknowledgements

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APPENDIX

**16-item Three Factor Scale
(Fetishism, Gender Dysphoria, Androphilia)**

Note: The scoring weights for each of the possible responses are given in parentheses. These weights were assigned according to the senior author's clinical experience with gender identity disorder clients. Questions 1 to 7 pertain to the sexual attractiveness of inanimate objects. Factor 1 (Fetishism) -- Items 1 to 7; Factor 2 (Gender Dysphoria) -- Items 8 to 13; Factor 3 (Androphilia) -- Items 14 to 16.

1. *Was the sexual attraction of a thing greater if you got it without permission from someone you didn't know very well?* Yes (-1); No (-1); Have never been sexually attracted to inanimate things (0).

2. *Is there more than one kind of inanimate thing which arouses you sexually?* Yes (-1); No (-1); Have never been sexually attracted to inanimate things (0).

3. *Did the inanimate thing affect you sexually through your sense of touch?* Yes (-1); No (0); Have never been sexually attracted to inanimate things (0).

4. *Did the sexual attractiveness to you of such a thing ever increase if you wore it or were otherwise in contact with it yourself?* Yes (-1); No (0); You have never been sexually attracted to inanimate things (0).

5. *At about what age do you remember first having a special interest in an inanimate thing which later aroused you sexually?* Younger than 2 (0); Between 2 and 4 (0); Between 5 and 7 (0); Between 8 and 10 (0); Between 11 and 13 (-1); Older than 13 (-1); Have never been sexually attracted to inanimate things (0).

6. *Did the inanimate thing affect you sexually through your sense of smell?* Yes (0); No (-1); Have never been sexually attracted to inanimate things (0).

7. *Did you ever feel sexually aroused when putting on females' underwear or clothing?* Yes (-1); No (0); Never put on females' underwear or clothes (0).

8. *Have you ever wanted to have an operation to change you physically into a woman?* Yes (+2); No (-1); Unsure (0).

9. *Do you look at women you don't know, for instance, on the street... Because*

you ... Feel sexually attracted to them (-1); To see if you want to look like them (+1); Rarely look at women (0).

10. *If you have ever wished to have a female body rather than a male one, was this...* Mainly to please men but also for your own satisfaction (0); Mainly for your own satisfaction but also to please men (0); Entirely for your own satisfaction (+1); Entirely to please men (0); About equally to please men and for your own satisfaction (0); You have never wanted a female body (-1).

11. *Can you usually feel satisfied by only wearing female underwear, under male clothing?* Yes (-1); No, you also have to wear female outer clothing (+1); You have no desire to wear female clothing (-1).

12. *When completely dressed in male clothing (underwear, etc.) would you...* Have a feeling of anxiety because of this (+1); Have no feeling or anxiety but have another kind of unpleasant feeling because of this (+1); Have no unpleasant feelings to do with the above (-1).

13. *When having sexual intercourse with a female, have you sometimes imagined...* That both you and your partner were men (0); That the woman was a man while you were a woman (+1); That both you and your partner were women (0); Did not imagine any of these during sexual intercourse with a woman (-1); Never had sexual intercourse with a woman (0).

14. *Would you prefer to kiss...* A handsome male (+1); A pretty female (-1); The sex of the person makes little difference (+1); Never had the desire to kiss anybody (except close relatives or children) (0).

15. *Do you prefer...* To have sexual intercourse with a man (+1); To have sexual intercourse with a woman (-1); To satisfy yourself sexually without any partner (+1).

16. *What kind of sexual contact with a male would you have preferred on the whole, even though you may not have done it?* Inserting your privates between your partner's upper legs (thighs) (-1); Putting your privates into your partner's rear end (-1); You would have preferred one of those two modes but you cannot decide which one (-1); Your partner putting his privates between your upper legs (thighs) (+1); Your partner putting his privates into your rear end (+2); You would have preferred one of those two latter modes but you cannot decide which one (+2); You would have liked all four modes equally well (0); You would have preferred some other mode of sexual contact (0); Had no desire for physical contact with males (-2).