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## Fetishism

Strictly, fetishism means the worship of inanimate objects but when given a sexual connotation may be defined as 'the use of non-living objects as a repeatedly preferred or exclusive method of achieving sexual excitement' (DSM III, 1980). Perhaps because fetishism is an unassuming and private activity in most instances, cases are exceptionally rare in clinical populations and little is known about them except that the vast majority is male. Gossein and Wilson (1980) included rubber and leather fetishists in the study mentioned earlier. They found that 69 per cent and 66 per cent respectively of the respondents in these two groups had steady partners compared with 78 per cent among the controls. This might be in line with the theoretical contention of psychoanalysis that fetishism is the result of a developmental disturbance leading to sexual interest in symbolic objects rather than real people but the data can not be interpreted with any confidence. <sup>[1]</sup>

Fetishistic disorder is a paraphilic disorder recognized by DSM-5, which is less likely to involve illegal behavior or victimization but is essential to characterize the versatility of human sexual imagination. This disorder is marked by a distressing and persistent pattern of sexual excitement involving the use of nonliving objects or atypical, nongenital parts of the body. The term fetish refers to idols and talismans that have religious meanings. <sup>[2]</sup>

Clinicians can specify if the fetish is a:

- Part(s) of the body-often includes the feet, toes and hair.
- Nonliving object(s)-Fetish objects frequently include shoes (men's or women's) and underwear, panties or bras for women. They may be made of specific materials like leather or rubber. It is common for a person with a fetish not to be able to achieve orgasm without their fetish object being involved in the sexual act (e.g. by getting the fetish object to be worn by their partner).

## Other

- In a controlled environment- usually applicable to individuals living in institutions or other settings where opportunities to engage in fetishistic behaviors are limited.
- In full remission - there has not been distress or impairment in social, occupational or other areas of functioning for at least 5 years while in an uncontrolled (non-institutional) environment. <sup>[3]</sup>

Fetishism has been recognized as a sexual variation for over 100 years, and has very often been considered a disorder in all of its presenting forms. Recent and ongoing social developments through the exposure of the internet have confirmed the high incidence of fetishistic behavior. We see eccentric behaviors that are met with acceptance by online communities of like-minded individuals, and ready availability of means for adaptation and integration into the mental and sexual lives of individuals so

affected. Clinical distress of affected individuals, when present and persisting, can now be highlighted as an essential diagnostic feature of fetishistic disorder, and can be considered as a potential target for treatment. <sup>[2]</sup>

## References

- J R Brown, BJP 1983, *Paraphilias. Sadomasochism, Fetishism, Transvestism and Transsexuality* DOI: 10.1192/bjp.143.3.227
- Richard Balon. Practical Guide to Paraphilia and Paraphilic Disorders, DOI- 10.1007/978-3-319-42650-1
- Kathryn Patricelli, *Fetishistic Disorders*, retrieved from <https://www.gracepointwellness.org/98-sexual-disorders/article/541-fetishistic-disorder>