

# DSM Revision Project

Over 3,000 people signed NCSF's DSM Revision Petition urging the American Psychiatric Association (APA) to depathologize sexual behaviors by consenting adults. Many mental health professionals denounced the inclusion of BDSM in the DSM, due in part to NCSF's outreach at conferences such as the American Association of Sexuality Educators, Counselors and Therapists.

In the survey of Violence and Discrimination Against Sexual Minorities in 2008, over 37% of more than 3,000 respondents said they had been discriminated against, had experienced some form of harassment or violence, or had some form of harassment or discrimination aimed at their BDSM-leather-fetish-related business. This persecution is a direct result of the false stereotype that people who practice BDSM are "mentally ill."

NCSF appreciates that the American Psychiatric Association responded to the underserved population of BDSM practitioners and clarified that:

**"Healthy adults who engage in kinky sexual behavior are not considered to have a mental disorder."**



**DID YOU KNOW?** Even with the landmark changes to the DSM, BDSM today can be prosecuted in many jurisdictions, under laws dealing with assault and sexual abuse, even if it's entirely consensual. And these are serious criminal offenses, with the potential for extended jail time.

The **Consent Counts** project works for the nationwide decriminalization of BDSM/Leather/Fetish activities and lifestyle. Visit [www.consentcounts.org](http://www.consentcounts.org) for more information.

## how you can help

The NCSF relies overwhelmingly on contributions from individuals and local BDSM, Swing and Polyamory groups for financial support. Ask your group to organize a fundraiser for NCSF, and contact us at [info@ncsfreedom.org](mailto:info@ncsfreedom.org) to find out how easy it can be!

You can also participate in NCSF activities, ranging from writing letters to the media and government officials, to joining in community outreach. Get information about NCSF actions, as well as coverage of mainstream news concerning sexual freedom issues, by subscribing to our free newsletter at [www.ncsfreedom.org](http://www.ncsfreedom.org).

### NCSF Mission Statement

The NCSF is committed to advancing the rights of consenting adults in the BDSM-Leather-Fetish, Swing, and Polyamory communities through education, advocacy, and outreach.

The Foundation of the National Coalition for Sexual Freedom (FNCSF) is NCSF's 501(c)(3) charitable foundation. It provides educational programs related to our mission. Tax-deductible donations support the projects of our foundation.



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# kink is OK!



# DSM Revision Project: Kinky is **not** a diagnosis!

In 2013, the American Psychiatric Association depathologized sadism, masochism, cross-dressing and fetishes in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5).

The DSM-5 defines paraphilia as “any intense and persistent sexual interest other than sexual interest in genital stimulation or preparatory fondling.” A paraphilic disorder is a “paraphilia that is currently causing distress or impairment to the individual or a paraphilia whose satisfaction has entailed personal harm, or risk of harm, to others.” (DSM-5, pp. 685-686)

“A paraphilia is a necessary but not sufficient condition for having a paraphilic disorder, and a paraphilia by itself does not necessarily justify or require clinical intervention.” (DSM-5, p. 686)

The revised DSM is helping to change the way society views kinky people. For example, in all 41 child custody cases in 2012 in which NCSF provided the proposed DSM-5 criteria, the BDSM evidence was set aside and child custody was determined on its own merits. In contrast, NCSF’s success rate in 2006 was approximately 20% when it came to refuting the false contention that parents are unfit because they are kinky.

## The revised (and greatly improved!) language of the DSM-5:

### Sexual Masochism

“Such individuals openly acknowledge intense sexual arousal from the act of being humiliated, beaten, bound, or otherwise made to suffer, as manifested by fantasies, urges, or behaviors.... In contrast, if they declare no distress, exemplified by anxiety, obsessions, guilt, or shame, about these paraphilic impulses, and are not hampered by them in pursuing other personal goals, they could be ascertained as having masochistic sexual interest but should not be diagnosed with sexual masochism disorder.” (DSM-5, p. 694)

### Sexual Sadism

“The majority of individuals who are active in community networks that practice sadistic and masochistic behaviors do not express any dissatisfaction with their sexual interests, and their behavior would not meet DSM-5 criteria for sexual sadism disorder.” (DSM-5, p. 697)

### Fetishism

“Many individuals who self-identify as fetishist practitioners do not necessarily report clinical impairment in association with their fetish-associated behaviors. Such individuals could be considered as having a fetish but not a fetishistic disorder.” (DSM-5, p. 701)

“For example, an individual whose sexual partner either shares or can successfully incorporate his interest in caressing, smelling or licking feet or toes as an important element of foreplay would not be diagnosed with fetishistic disorder; nor would an individual who prefers, and is not distressed or impaired by, solitary sexual behavior associated with wearing rubber garments or leather boots.” (DSM-5, p. 702)

### Transvestism

“The diagnosis of transvestic disorder does not apply to all individuals who dress as the opposite sex, even those who do so habitually.” (DSM-5, p. 703)



**OK!**