The Fertility of Hebephiles and the Adaptationist Argument against Including Hebephilia in DSM-5 [Letter to the Editor]

*Archives of Sexual Behavior*, DOI 10.1007/s10508-010-9610-7

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The original publication is available at [www.springerlink.com/content/y1021p7832j70725/](http://www.springerlink.com/content/y1021p7832j70725/)

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In a paper that generated a certain amount of controversy, Blanchard et al. (2009) proposed that the paraphilias section of DSM-5 be modified to include hebephilia, that is, the erotic preference for pubescent children. Pubescent children were characterized by Blanchard et al. (2009) as children around the ages of 11 through 14 years, but they could be described more precisely as children in Tanner stages 2 and 3 of pubertal development.

Franklin (2009) criticized the proposal to include hebephilia in the DSM on the grounds that “such attractions are evolutionarily adaptive” (p. 319). She did not explain this argument any further. Presumably she meant something along the following lines: In the environment of evolutionary adaptedness, men with an erotic preference for pubescent females had greater reproductive success, either because they acquired female mates near the onset of their fecundity and thus prevented them from being impregnated by other men, or because they had more years in which to impregnate their mates themselves, or both. Since hebephilia is of evolutionary design, it cannot be a mental disorder. Franklin’s hypothesis was probably intended to explain hebephilia only in heterosexual men, since same-sex copulation and pair-bonding with pubescent males in preference to physically mature males would not affect the reproductive success of homosexual men, either now or in the ancestral era.

The contemporary environment obviously differs in important and partly unknowable ways from the environment of evolutionary adaptedness. It does, however, offer modern men considerable latitude regarding the ages of the females they chose to court and to form relationships with. If a North American hebephile cannot marry a pubescent girl, he can still marry one as close to puberty as legally possible. There is, therefore, nothing in the
contemporary environment that would completely abolish the relation between hebephilia and fertility postulated by Franklin for the ancestral environment. I therefore conducted the following small study to investigate whether Franklin’s hypothesis agrees with the available empirical data.

It was convenient to use, for this investigation, three groups of heterosexual men included in a recent study with a completely different purpose (Blanchard et al., 2010). These men were male patients who were phallometrically classified as heterosexual teleiophiles, heterosexual hebephiles, or heterosexual pedophiles. All had been systematically asked about the number of biological children they had fathered, either in or out of wedlock. For the present investigation, I restricted the sample to white subjects to reduce potential variance in fertility caused by cultural influences. This reduced the groups to 818 teleiophiles, 622 hebephiles, and 129 pedophiles. The mean age of the teleiophiles was 37.25 years (SD = 12.57), that of the hebephiles was 39.14 years (SD = 14.02), and that of the pedophiles was 36.86 years (SD = 14.36). Differences in mean age among the three groups were statistically significant, F(2, 1566) = 4.03, p = .02.

The raw means showed that the teleiophiles reported 1.39 biological children (SD = 1.67), the hebephiles reported 1.30 biological children (SD = 1.55), and the pedophiles reported 0.74 biological children (SD = 1.29). The differences among mean numbers of children were tested in a one-way analysis of covariance (ANCOVA), with the patient’s age at assessment as the single covariate. Levene’s test of equality of error variances did not indicate any violation of the homogeneity of variance assumption in the ANCOVA, F(2, 1566) = 2.52, n.s.

Number of biological children was significantly related to age at assessment, F(1, 1565) = 463.63, p << 10⁻⁶, and to group, F(2, 1565) = 12.11, p < .0001. Pairwise comparisons of the three groups were carried out with the Sidak adjustment for multiple comparisons. After accounting for age, all comparisons were statistically significant: The teleiophiles had more
children than the hebephiles, \( p < .03 \); the hebephiles had more children than the pedophiles, \( p < .005 \); and the teleiophiles had more children than the pedophiles, \( p < .0001 \).

I am not concluding from these results that hebephilia should be included in the DSM on the grounds of reduced reproductive fitness. That reasoning would imply that homosexual teleiophilia should be reinstated in the DSM, which is not my view at all. My conclusion, rather, is that contemporary heterosexual hebephiles are significantly less fertile than are heterosexual teleiophiles. Thus, there is no empirical basis for the hypothesis that hebephilia was associated with increased reproductive success in the environment of evolutionary adaptedness. That speculative adaptationist argument against the inclusion of hebephilia in the DSM cannot be sustained.
References

