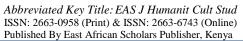
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Original Research Article

Heterosexuals' Perceptions and Attitudes towards Female Homosexuality in Tanzania: Qualitative Findings from Women Who Have Sex with Women in Dar-es-Salaam City

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Abstract: Until a decade or so, ago, the general public demonstrated negative perceptions and attitudes towards homosexuality and homosexuals: lesbians, gays, bisexuals and transgender (LGBT). However, there is empirical evidence that from the 1970s, the public has progressively embraced positive attitudes ranging from tolerance to more acceptance. Unfortunately, much of data available on this issue come from the US and Europe. Little is known from the developing world and in Tanzania, in particular. This knowledge is critical because public perceptions and attitudes influence the formation of multifaceted policies and legislative frameworks that address and impact the health and wellbeing LGBT people. Conducted a cross-sectional descriptive formative study in Dar-es-Salaam region, Tanzania to understanding the general public's perceptions and attitudes towards female homosexuality and factors that influence the perspectives they hold. Findings showed majority of the general public hold negative perceptions and attitudes towards female homosexuality that adversely impact women's health and wellbeing. Homophobia, religious beliefs, socio-cultural constructs, heteronormality, criminalization by national laws and the constitution greatly informed public's constructs of female homosexuality in this country. I recommend the Ministry of Health to initiate and support larger ethnographic and multidisciplinary studies, and nationally representative samples among WSW and other homosexual subgroups to establish empirical database on predictors and time trends of public perceptions and attitudes towards WSW and other sexually minority groups that influence rise in acceptance. Data would facilitate improving healthcare professionals' ability to diagnose, treat, control, and prevent illnesses among WSW and other sexually minority groups in Tanzania.

Keywords: Public perceptions and attitudes, Female homosexuality, Female sexuality, women who have sex with women, lesbians, qualitative study, Tanzania.

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INTRODUCTION

Universally, the general public has negative perceptions and attitudes towards sexual minority populations: lesbians, gays, bisexuals, and transgender (LGBT) and the women who have sex with women (WSW) (Kremer, 2014; Human Rights Watch/PEMA Kenya, 2015) that negatively impact them. On daily basis, the LGBT/WSW face discrimination, rejection, abandonment, rape, sexual and physical abuse, stigma, segregation, homophobic and attitudinal harassment, discrimination and homonegative attitudes (Drake,

2013; Lin, et al., 2021). In South Africa, for example, WSW and lesbian are frequently raped ('corrective rape') or killed by (heterosexual) men as a corrective measure (en.wikipedia.org, nd. a). Along the Kenya coast, community members attack LGBT/WSW and threaten attacking activists and burning down centers that work for the LGBT (KNCHR, 2012; Human Rights Watch/PEMA Kenya, 2015). Studies have reported WSW are denied healthcare services (that they need most) due to their sexual orientations (Cloete, et al., 2011).

Above all, homosexuality is illegal in many countries worldwide, and in African countries in particular (Ouma, 2014; Kamazima, *et al*, 2021; Kamazima, *et al.*, 2021). Consequently, the illegal status of homosexuality in this part of the globe explains, in part, why there is limited literature on homosexuality and more so on the public's perceptions and attitudes towards minority populations (Bowman, 1979). Where data is available, is from the developed world compared to the African countries. In Tanzania, however, researchers have conducted studies focusing on men who have sex with men (MSM) in the context of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS): Moen, et al., 2012: Ross, et al., 2014: Anderson, 2015: Magesa & Leshabari (2017); Mgopa, et al., 2017; Ishungisa, et al., 2020; Mbita, et al., 2022 and with women who engage in sex work or female sex workers (FSWs) (Kamazima, 1995; MoHSW/NACP, 2012; Kamazima & Kazaura, 2012) but remain silent on WSW's existence, health and wellbeing (Kamazima, et al. 2021). In this paper, therefore, I present data from the first study on this public health issue in Tanzania intended to fill the existing gap in knowledge about public perceptions and attitudes towards female homosexuality: the reported general public's perceptions and attitudes towards women who have sex with women (WSW) in Tanzania and their implications to the WSW's health and wellbeing.

MATERIALS AND METHODS

Study design and setting

Researchers conducted a cross-sectional descriptive formative study in Ilala, Kinondoni and Ubungo districts of the Dar-es-Salaam region, Tanzania between January and February 2021. The researchers purposely selected Dar-es-Salaam region because it is the largest commercial city in Tanzania, hosting people from diverse backgrounds, lifestyles and presenting wide range of sexual behaviors and practices ¹³. Dar-es-Salaam region, therefore, allowed access to study participants.

Study participants

Researchers used snowball method to recruit WSW aged 18 and above, had stayed in Dar-es-Salaam for six months or more; have had sexual/physical attraction to other women, and had engaged in same-sex sex in the past year. Researchers used purposeful sampling method to recruit community leaders, community members and underground-operating NGOs' Managers supporting sexually minority groups assumed knowledgeable of female same-sex sexual activities in their areas. All potential WSW contacted, willingly accepted to participate in this study.

Methods

Researchers used four qualitative methods: FGDs with WSW; IDIs with WSW and community leaders/members; observation and documentation of

WSW's life stories on motives, historical perspectives and same-sex sex experiences. The four methods enabled the researchers to understand, recognize and appreciate female same-sex sexual behaviors and practices from the WSW's perspective. Researchers interacted with study participants in Kiswahili the national and common language in the study area. The average duration of the FGDs and IDIs was one and half hours. However, as participants had interest in this study, some FGDs IDIs took longer time, up to two hours. With participants' permission, all FGDs, IDIs and life stories were audio recorded.

Twelve WSW participated in each of the two FGD; each conducted by the three research assistants (RAs). The RAs conducted FGDs in all-WSW supporting NGOs or in places perceived convenient to the WSW invited to participate in the group discussions. The recorder took short notes on emerging key issues to supplement recorded information.

Female same-sex is illegal in Tanzania making discussion around it sensitive that individuals would hesitate talking about openly. Researchers used IDIs to gather personal information created within and outside the WSW's-defined world: eight WSW; three with community leaders, one with a male community member, and three with WSW-supporting NGOs' Managers. The researchers conducted initial interviews with three leaders of WSW's organizations supporting all-WSW groups (Moen, et al., 2012; Kamazima, et al., 2021). Through these initial interviews, researchers were able to identify FGDs participants. Researchers interviewed three NGOs' Managers supporting three times each to clarify on issues that emerged from IDIs, FGDs and observations.

Researchers conducted observations to learn what life feels like for an "insider" while remaining, inevitably, "outsiders." The researchers recorded observation as much detailed as possible. Researchers used data from observations to: facilitate developing positive relationships (rapport) among researchers and key informants, stakeholders, and gatekeepers, whose assistance and approval were needed for this study; identifying and gaining access to potential study participants; improving the IDI and FGD guides and facilitating the interpretation of data collected through discussions and interviews, thus, ensuring study trustworthiness.

We collected life-stories of three WSW: one transgender man on hormonal treatment, one tomboy and Manager of NGO supporting WSW; and one WSW engaging in sex work with both men and women. Life stories allow the researcher to explore a person's microhistorical experiences within a macro-historical framework to understand an individual's current attitudes and behaviors and how they may have been influenced by initial decisions made at another time and

in another place (Kamazima, *et al.*, 2021). Data from life stories enabled capturing personal experiences in the WSW's-defined and external worlds.

Research assistants' selection, training and roles in the study

Researchers selected and trained three female RAs to assist in some aspects of this study: data collection and transcribing recorded interviews. The RAs held first degrees in social sciences and experienced field researchers. Researchers trained the RAs for five days to orient them on the objectives and procedures for this study. In addition, the RAs were made aware of the vulnerability of WSW and exposed to proper interaction and interviewing procedures.

The RAs transcribed recorded IDIs, FGDs and life stories verbatim. Data was analyzed using thematic analysis approach by applying five stages according to Braun and Clarke¹⁷ to establish meaningful patterns: familiarization with the data, generating initial codes, searching for themes among codes, reviewing themes and presenting the results; where open systematic coding of data in the participants' language and combining emerging emic concepts with preconceived theoretical constructs. Nvivo 12 version computer software was used to aid data analysis process.

Ethical Considerations

Researchers obtained research clearance for the study protocol from Muhimbili University of Health and Allied Sciences (MUHAS) Institutional Review Board (IRB). District Administrative Secretaries (DAS) granted permission to collect data needed in their respective areas. Street authorities, managers of NGOs/institutions caring for WSW granted permission to conduct the study in their respective areas and institutions. The process of interacting with the study participants had no harm to them and we kept their story telling to only needed information.

Female same-sex sexual behaviors and practices are illegal in Tanzania. So, study participants provided oral consent. Researchers anticipated chances of encountering cases of traumatized (potential) WSW, their relatives or fellow WSW. Researchers, therefore, arranged with the WSW activist organizations and healthcare providers to provide appropriate assistance. Researchers compensated study participants with TShs, 10,000 [Appr. \$4] for transport fare (to and from interview places) and for time spent during the interviews.

RESULTS

Characteristics of study participants

A total of 39 individuals participated in this study: 24 in FGDs; 8 WSW in IDI, 3 community leaders in IDIs, 1 community member in IDI and 3 in IDIs with WSW's organizations. The participants' age ranged between 26 and 60 years. The WSW were

currently single with majority never married and a few were divorcees. Their education levels ranged from Primary Education complete to First University Degree. Of the 36 WSW interviewed, only one reported never had sex with a man.

During the IDIs and FGDs we asked our study participants a question: What are the daily life experiences of WSW in this country? We further probed on the general public's and the families' reactions to female same sex behaviors and practices and how they affect their health and wellbeing. **WSW** Analysis of the and community leaders'/members' narratives provided the following categories of public's perceptions and attitudes towards WSW: the general perceptions; Public's/community reactions towards WSW; Family reactions towards female same-sex-oriented members: WSW's experiences with rape; WSW's experiences with rejection and discrimination; WSW's stigma, experiences with law enforcement machinery: the police; and the Legal status of female same-sex sexual behaviors and practices in Tanzania.

General perceptions

Explaining daily life experience, a participant aged 28, never married, a female sex work (FSW) with O-level education, running a males' salon and playing a female role in same sex relationship, reported,

I live and enjoy my life like other citizens ... I dress and present myself a woman ... No one could suspect I practice same-sex sex ... None of my family members has an idea of my sexual behaviors ... However, the tomboys, the transmen and transwomen, face challenges from the community ... Some of them are raped, beaten and stigmatized ... Some are evacuated from houses or rooms they rent ... Some face discrimination at workplaces, at home and at worshiping places (IDI_E, 28 years, 2021).

Another participant aged 29, never married and exclusively having sex with women, stated, "Some of our colleagues are well educated with qualifications and some hold positions in the public or private sectors ... However, others never get employed due to their sexual orientations ... Whenever they do get such opportunities, they are required to dress like females, which pushes them off" (IDI_D, 29 years, 2021).

Public's/community reactions towards WSW

Discussing how the community treats the WSW, a participant aged 35, divorced, a female sex worker and started engaging in same sex at the age of 19, explained as follows,

"You know, we [WSW] are the same as other women in this country and our daily life is similar to that of straight women ... However, the problem arises when community members recognize that you are engaging in same-sex sexual behaviors and practices ... They bull you when walking on the streets ... For example, I comfortably lived in Magomeni [Kinondoni district] area for about five years ... When the landlord and neighbors knew I engage in same sex they started pointing a figure at me ... The youth and adults on that street looked at me in a manner that devalue me ... Some would directly confront me threatening to beat or rape me ... It reached a point I couldn't handle such harassments ... I decided moving to Sinza [Kinondoni district]" (IDI B, 35 years, 2021).

Another participant aged 46, never married, a mother of two children, identifying a tomboy and started engaging in same sex at the age of 19, reported,

Our society is divided with regard to us [WSW] ranging from those who accept us, those who tolerate us to those who criminalize us ... Majority of community members do not accept our sexual behaviors and practices ... They wonder why should women engage in same-sex sex ... They believe we are cursed ... They have no idea that we were created to be who we are and what we want to be ... It [same sex] is common and accepted in Europe, Uganda and South Africa ... In Dar [Dar-es-Salaam] there are places like Kinondoni, Oyster Bay, Masaki and Magomeni where same-sex sexual behaviors and practices are common and are either accepted or tolerated ... Not in Mbagala, Tandika [Temeke district] and other similar areas of the [Dar-es-Salaam] city where same-sex [sexual behaviors] is still considers a taboo and immoral ... In those areas, people will ridicule you, gossip about you at every corner you pass ... In fact, you will be treated in a mockery way ... You know, same-sex sex, be it women having sex with women or SMS, is illegal in Tanzania ... It [same-sex sex] is a criminal offence in our country (IDI_G, 46 years, 2021).

Discussing how the public perceives WSW, a participant aged 26, a transman and a university graduate reported, "Almost all religious leaders are against our behaviors and practices ... They believe [same-sex sex] is devilish and bad luck to our families ... Majority say we should get fiancés and then marry and nurture our [nuclear and extended] families" (IDI F, 26 years, 2021).

Reporting on WSW's evacuation from houses or rooms they rent due to their sexual orientations, a participant aged 46, never married, a mother of two children and has sex with men, stated,

As I told you, I am living with my family, so I have no such experience ... However, I know

my friends [WSW] who have been chased out of the house they rented when the land-lords knew they were lesbians ... You know, when they rent a house or rooms, they are accepted as sisters or a mother and her daughter ... As days pass on, they demonstrate lesbian-like behaviors which, irritate the landlords and the neighbors leading to their evacuation ... However, there are some of them [WSW] who are living amicably with their landlords and the neighbors (IDI_G, 46 years, 2021).

Family reactions towards female same-sex-oriented members

The participants were asked if their families knew they engage in same-sex sex. A participant aged 32, never married, mother of one kid and has sex with men, for example, reported, "None of my family members know I engage in same-sex sex practices" (IDI_B, 35 years, 2021). Another participant aged 46, never married, a mother of two children and has sex with men, reported, "Aaaaah, [laughter] ... None of my family members knows that I engage in same-sex sex ... All they know is that I enjoy having females' company ... So, even if I 'import' [bring a female partner at home] they can't be suspicious and no one would come to my room to check what is going on between us ... So, I am safe that way" (IDI_G, 46 years, 2021). A Street Leader interviewed in Kinondoni observed, "Yes, when some parents learn their child is a lesbian, they become angry and may reject that child even expel or chase her from their homes" (IDI_K, 60 years, 2021).

WSW's experiences with rape

We probed if participants have ever experienced rape. One participant said, "Personally, I have never experienced rape although, I have never been threatened to be raped... However, it happened to my closest friend." Regarding rape experiences among WSW, a participant aged 26, a transman and a university graduate reported, "I have never experienced rape harassments ... However, I know one tomboy [transman] who was recently raped by a gang of men who claimed punishing her for her same sex behaviors and practices ... They call it ... I don't know, correct rape" (IDI_F, 26 years, 2021). Another participant aged 46, never married, a mother of two children and has sex with men, said, "I have never been raped or rape a woman ... I have no experience with rape among us [WSW] ... However, I have heard such cases of a man raping a kid or a woman on a TV [television] and radio" (IDI_G, 46 years, 2021).

WSW's experiences with stigma, rejection and discrimination

A participant aged 32, never married, mother of one kid and has sex with men, reported, "Stigmatization exists among community members ... Once they recognize you are a lesbian or a sex worker you can't be elected a member of the Street

Committees" (IDI_H, 32 years, 2021). A participant aged 35, divorced and a FSW reported, "It happened that I was evacuated from the house I rented in Sinza three years ago because the landlord recognized I am a lesbian and 'najiuza' [FSW] ... Otherwise, I have never experienced any problem at work and worship places" (IDI_B, 35 years, 2021).

Discoursing of stigma, rejection and discrimination by the family and religious domain, the same participant stated,

Majority of parents become furious to children born feminine but pretend to act as men [presentation, clothes and haircuts] ... Some families reject and neglect such children, which adversely affects them physically, psychologically and morally ... Some of the neglected children run away [from the families] to live on the streets ... Some religious elders do not allow a female-looking person wearing a trouser and a shirt or a Tshirt to enter the Church ... If you are lucky, they will give you a piece of cloth [kitenge or khangalto wrap around the hips so as to look modesty to get into the worship place ... Some women and girls presenting in that fashion are sometimes summon you to the Church Leaders' Committee, where they would be prohibited from coming to that Church or punished at per the committee's discretion (IDI_F, 26 years, 2021).

Reporting on stigmatization at work places, the same participant informed,

I am employed ... I conduct business online dealing with customers in Zambia, Zanzibar and Malawi ... My customers recognize, I am a man ... They never stigmatize me at all ... However, I have a friend, a worked transwoman, who for Vodacom Company The authorities terminated her employment contract when they knew she was a trans [transwoman] ... It is due to this reason that some of our colleagues with qualification never bother to apply for formal employment ... They are either selfemployed or engage in sex work for their survival" (IDI F, 26 years, 2021).

A Street Leader interviewed in Kinondoni reported, "I don't think anybody can stigmatize them [WSW] as we cannot prove that they engage in same sex behaviors and practices ... I have heard that unproperly dressed women are restricted entering worshiping places and government offices" (IDI_K, 60 years, 2021). Another Street Leader interviewed in

Kinondoni reported, "These women [WSW] are stigmatized because their sexual behaviors and practices are un-African, unwarranted in our society and illegal by constitution" (IDI_L, 32 years, 2021).

Experiences with law enforcement machinery: the police

We asked our participants on their (and their colleagues') experience with the law reinforcement machinery, the police, in particular. A participant aged 46, never married, a mother of two children and sells sex to men, presented,

I have never heard of a case where the police harassed us [WSW] ... You know, there is no way the police would, beyond reasonable doubts, rule out that the two women sitting close to each other are lovers ... All I know, is that the police hunt and harass the MSM and female sex workers [FSWs] on the streets or in brothels... We [WSW] have sex with our partners at our homes, the partners' residences or lodges and guest houses ... It all depends on the couples' desired comfort, income, and status ... No police would follow us at such places (IDI_G, 46 years, 2021).

Reporting on experiences with the police, a participant aged 26, a transman and a university graduate, reported, "I have never had a problem with the police ... However, women dressed like men are restricted from accessing some government offices, the Immigration Offices, for example, where the guards send them back to get a piece of cloth [khanga or kitenge], failure of which, she will be denied services she needs" (IDI_F, 26 years, 2021).

Participants' perceptions of female same-sex legal status

During the IDIs and FGDs, we asked our study participants to share their perceptions of female samesex legal status in the country. All of the study participants, WSW and members of the community, knew that female same-sex sex is illegal and punishable by law in Tanzania. For example, a participant aged 26, never married, started engaging in same-sex in 2012 and a university graduate, reported, "WSW are found in every region in Tanzania ... However, female same-sex sex is illegal in this country ... Thus, female same-sex behaviors and practices are conducted in secrecy and in private places known among themselves" (IDI, F, 26 years, 2021). Emphasizing on the same point, the same participant added, "There are advocacy groups for women's rights [including sexual rights] that have empowered us to come out and express our sexual feelings ... However, these activities are conducted underground because female same-sex sex is illegal in this country" (IDI, F, 26 years, 2021)

A Christian Religious leader interviewed in Ubungo district observed, "There are few women who

have sex with women in Dar-es-Salaam ... However, female same-sex sex is illegal in this country ... The women, therefore, practice female same-sex sexual behaviors in secrecy which, makes it difficult to estimate their numbers" (IDI, H, 43 years, 2021). A participant in a FGD reported, "The number of women having sex with women in Dar-es-Salaam has increased ... You know, female same-sex sex is illegal in Tanzania ... WSW operate underground ... However, nowadays those who used to camouflage under their religions or family status are now surfacing to express and defend their sexual feelings and rights" (FGD_1, 2021).

Reported implications of female same-sex illegal status to the WSW's health and wellbeing

A participant aged 35, started engaging in same-sex at the age of 19, divorced and engages in sex work, had this to say;

"As you may be aware, our [Tanzania] government banned importing lubricants ... As a result, we use what is available for us ... We use Vaseline jelly to avoid bruises from fingering or genital-genital rubbing ... However, our doctor told us that the jelly is harmful to delicate membranes in the vagina ... We plead the [Tanzania] government to lift the ban on lubricants importation for our safety" (IDI, B, 35 years, 2021).

A participant aged 35, divorced, started engaging in same sex behaviors and practices at the age of 19 and engages in sex work, stated, "As I told you, the [Tanzania] government banned importing lubricants some years ago ... As a result, we use petroleum jelly, especially Vaseline jelly or cooking oil ... We plead the government to lift this ban" (IDI, B, 35 years, 2021). A participant in the FGD with WSW narrated,

We know there are condoms for the fingers and the tongue that we would like to use whenever we have sex ... However, they [protective gears] are so expensive and are not available in this country ... You may remember, a few years back the [Tanzania] government banned importation of lubricants claiming their availability could fuel homosexual behaviors and practices among the citizenry ... As a result, we have unprotected sex (FGD_1, 2021).

DISCUSSION

Public perceptions and attitudes towards homosexuality

Studies indicate that in countries where homosexuality is illegal (Burn, 2000; Izugbara, et al., 2020; Kamazima, et al, 2021; Kamazima, et al, 2021; Women's Initiatives Supporting Group. 2022), the public holds and demonstrates negative perceptions and attitudes towards homosexuality and the homosexuals (MSM and WSW or lesbians). Consequently, hatred,

discrimination, threats, rejection, violence, verbal insults, abandonment, rape, sexual and physical abuse, stigma, segregation and police roundups characterize the LGBT's life (Izugbara, et al., 2020; Kamazima, et al., 2021). Feng, et al., (2012) observed that homosexuals in Asia were highly marginalized and stigmatized. A study among college student, for instance, showed that "a homosexual male would be looked down since he is lowering his social ranking by being more feminine (see also, Bowman, 1979), and that a female might not be "punished" for acting in an opposite gender role because the male role is considered superior" (Wong, et al., 1999). In another study with a similar population, Burn (2000) reported male students commonly used anti-gay language and towards male homosexuality. However, students who knew a gay or lesbian individual exhibited positive perceptions and attitudes towards homosexuals. In another study, Kim, et al., 1998) reported students knowledgeable of homosexuals' lifestyles had a positive perceptions and attitudes towards gays and lesbians. Herek's (1998) study showed that heterosexual males from societies that emphasize the importance of heterosexuality being linked to masculinity, were more anti-gay hostile compared to their counterparts.

Hacker, (1971) and Thio, (1978) observed that "homosexuals feel that the root of their problem lies in social attitudes toward them". A study seeking opinion on "sexual relations between two adults of the samesex" among African Americans (172) and American Whites (1203) reported that 88% and 80% respectively indicated homosexual relations were "almost always wrong" or "always wrong" (Alston, 1974). Levitt & Klassen (1974) reported that the Institute for Sex Research's (1970) National Survey of 3,018 American adults showed high levels of negative attitudes toward homosexuality where 70.2% responded sex acts were "always wrong" between "two persons of the same sex even when they love each other"; and public cynicism of homosexuals in positions of public responsibility was prevalent. Similarly, in the same study, "50% of the respondents agreed that homosexuality as a corruption of society can cause a civilization's down-fall and 55% at least somewhat in agreement that homosexuality is no problem in and of itself".

In a study conducted in New Zealand (Bowman, 1979), over three-quarters of the sample reported willing to regard homosexuals as "ordinary people" and to accord them a "right" to their homosexuality. Over half agreed that homosexuality is a "natural sexual variation" in humans; and over 46% agreed that "people are homosexual because they want to be". In addition, on the one hand, male homosexuals were perceived being more effeminate in attitude, posture, dress and more emotional and sensitive than heterosexual men. On the other hand, perception of lesbians was "both clear and uniformly negative; seen being "tough," aggressive, "butch," and "masculine" (in

a disparaging sense) in temperament and behavior". In the same study, respondents reported willing to allow homosexuals to work in some occupations like: Armed Forces (87%); Members of Parliament, (835); Social Workers (76%); Teachers (74%); and Clergy and Police (70%). Objections were made to homosexuals being in positions of public responsibilities involving moral leadership and where high levels of contact with children would occur.

However, a study in the US, (Levitt & Klassen, 1974) reported that less than one-third of American respondents were willing homosexuals to serve as judges, teachers, clergy, doctors or government officials. In a study in Three Asian Cities, Feng, et al., (2012) reported that although homosexuality was thought normal and or accepted, adolescents and young adults studied mainly hold a negative perception of homosexuality. Magesa and Leshabari (2017) reported of confidentiality, fear of stigma and discrimination, shame and mistreatment at the health facilities, and fear of the healthcare worker's reaction after they disclosed their sexual orientation to them main factors limiting MSM's access and utilization of healthcare in Tanzania. In June 2020, 60% of the respondents reported discrimination against LGBT exist in Britain (Ipsos MORI, 2020). A study conducted in Taiwan (Lin, et al., 2021) showed that the general population had lower acceptance to homosexuality.

Negative public attitudes and perceptions towards homosexuality and homosexual (LGBT persons in most of African countries has roots in interwoven factors: homophobia, religious beliefs, socio-cultural constructs, criminalization by national laws and the constitution (en.wickpedia.com, nd. b.). Negative public perceptions and attitudes towards homosexuality and discrimination against homosexual individuals, for example, are common in Kenya, Uganda and Tanzania (Kamazima, et al., 2021). Samesex relationships are punishable in Uganda; and samesex marriage is a crime punishable on conviction by life imprisonment. The law punishes heterosexuals engaged in oral sex, anal sex and masturbation. In 2014, the government tried to impose the death penalty on those of being homosexual, because guilty homosexuality is perceived 'un-African' and, therefore, 'non-Ugandan'. However, the controversial law was later repealed (Kimani & Musa, 2017).

According to en.wikipedia.org, (nd. c), LGBT persons in Kenya face legal challenges. Religious, political leaders, and members of the community "condemn homosexuality and transgender identity as public signs of decadence, disease, and immorality." Sodomy is a felony per Section 162 of the Kenyan Penal Code, punishable by 14 years' imprisonment, and any sexual practices between males are a felony under section 165 of the same statute, punishable by 5 years' imprisonment. The state does not recognize any

relationships between persons of the same-sex; and same-sex sex is banned under the Kenyan Constitution. However, there are no explicit protections against discrimination on the basis of sexual orientation and gender identity. In addition, adoption is prohibited to homosexual people (KNCHR, 2012).

The Tanzania Constitutions (Mainland and Zanzibar) do not recognize same-sex relationships. Thus, same-sex relationships or couples have no recognition on Tanzania Mainland (The Tanzania Penal Code of 1945 as revised by the Sexual Offences Special Provisions Act, 1998) and Zanzibar (The Zanzibar Penal Code of 1934, as amended in 2004). Homosexuality in Tanzania is a social taboo recognized as 'non-Tanzanian' and 'un-African' culture (Kimani and Musa, 2017; Ghashal, 2020). Similarly, same-sex sexual acts (even in private and consensual) are criminal offences, punishable with life imprisonment. The law also punishes heterosexuals who engage in oral sex, anal sex and masturbation. Same-sex behaviors and practices, therefore, are crimes punishable on conviction by life imprisonment (Nyanyuki, 2018; BBC News, 2019).

Consequently, discrimination, violence, threats and persecutions, is normal for LGBT individuals making it a matter of survival to keep their homosexuality hidden and rarely reported on (LHRC, 2018; Kimani, 2018; BBC News, 2019). All of the participants in the formative study with WSW in Dares-Salaam, were aware that their same-sex behaviors and practices are illegal in this country and if known (to law reinforcing machinery) could be arrested, prosecuted, and penalized as per the Tanzania Constitutions and anti-homosexuality laws (Kamazima, et al., 2021).

Implications of negative public perceptions and attitudes to homosexuality and homosexuals

Empirical data available (Lax & Phillips, 2009, for example) prove that public attitudes influence the formation of multifaceted policies and legislative frameworks that address and impact the health and wellbeing LGBT people. That is, the politics and the legal contexts influence the dominant public discourse and regulate violent behavior and discriminatory treatment towards homosexuals and their behaviors and practices (Broer, 2006; Williams, *et al.* 2014). In part, this fact explains why there are limited studies and (public) health interventions targeting sexually minority groups in the developing world, and more so in countries where homosexuality is strictly illegal (Ouma, 2014; Kamazima, *et al.*, 2021; Kamazima, *et al.*, 2021).

Like other studies on this issue (Lax & Phillips, 2009; Rigl, *et al.*, 2010; Takax & Zalma, 2011) our formative study findings indicated that negative public attitudes towards homosexuality have adverse impact to their heath, health seeking behaviors and

utilization of healthcare services available (Saronga, et al.,2021). For instance, all participants in our formative study were aware of how the illegal status of female same-sex activities in the country impacts their health and wellbeing directly and indirectly. The WSW interviewed, for example, were aware that the Tanzania government banned community organizations from importing and distributing lubricants and other same-sex products in the country. As a result, WSW are forced to have unprotected sex, or use substances or products, which puts them at high risk of contracting HIV, STIs and vaginal infections (Kamazima, et al., 2021; Saronga, et al., 2021).

Similarly, the WSW interviewed observed the transgender men face harsh treatment and disrespect whenever they seek healthcare services at (public) health facilities. The healthcare providers often do not keep their information confidential, 'lecture' them on the immorality of their same-sex behaviors and practices instead of providing them with required health services. Consequently, WSW who could afford paying for health services opt visiting private facilities. Those who cannot, turn to self-medication and other alternatives perceived efficacious at that time. The implication is that WSW demonstrate poor utilization of healthcare services (Mbishi, et al, 2021), which limits health professionals' ability to diagnose, treat, control, and prevent illnesses among this group (Kamazima, et al., 2021; Mbishi, et al., 2021; Hughes & Evans, 2003).

CONCLUSIONS AND RECOMMENDATIONS

Like in many African countries, sexually minority persons in Tanzania face varied challenges rooted in interwoven factors: homophobia, religious beliefs, socio-cultural constructs, and criminalization by national laws and the constitution. Homosexuality in Tanzania is a socially taboo subject recognized as 'un-African' culture. Same-sex sexual acts (even in private and consensual) are criminal offences, punishable with life imprisonment. Negative public attitudes and perceptions reflected in WSW's narratives captured in this study coupled with anti-homosexuality policies and laws toward homosexual behaviors and practices in the country, have detrimental consequences to the groups' health and wellbeing.

Explicitly, negative public attitudes and homosexual restrictive policies, laws and bylaws limit (public) health research and interventions among homosexuals' subgroups. To fill this gap, I recommend for larger ethnographic and multidisciplinary (longitudinal/cohort) $\quad \text{and} \quad$ nationally studies, representative samples among WSW and other homosexuals' subgroups. The goal is to establish empirical database on predictors and time trends of public perceptions and attitudes towards WSW and other socially minority groups that influence rise in acceptance and facilitate improving healthcare professionals' ability to diagnose, treat, control, and

prevent illnesses among WSW and other sexually minority groups in the Tanzania context.

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