ABSTRACT

Background: Homosexual identification among women as lesbian, bisexual or transgender does not encompass the whole pool of women who practice same-sex behavior. Straight women especially youths are more increasingly willing to have sex with fellow women. This article establishes the reasons that influence same-sex orientation and behaviors among women in Tanzania. It explores the self-reported push/pull reasons that ultimately leads women to same-sex behavior among sampled through individuals.

Method: This is a cross-sectional descriptive and retrospective study which was conducted in Dar es Salaam between January and February, 2021. The participants of the study were WSW, proxy WSW, and women who at one time had female same-sex relationships. The study also used community members aged 18 years and above but only those who met the inclusion criteria. Data were collected through qualitative in-depth interviews, focus group discussions, interviews, and life stories. All the data generated through the study were analyzed thematically.

Results: The findings indicate that women who practice same-sex behavior believe that their behavior occurs naturally through biological reasons. Some of them attribute earlier negative experiences with men as a trigger to opt out of heterosexual sex. Most participants also cited past unpleasant sexual experiences with men such as rape, being emotionally detached from men as factors that lead to developing desires to have sex with fellow women.

Conclusion: There are biological and social-economic factors that lead women to practice same-sex behaviors. Women, who are born with male attributes become sexually unattracted to males, opt to engage in same-sex practices because of displeasure from having sex with men. Further, economic hardships in societies force women to engage in same-sex practices through peers who are financially well-off and are searching for peers to exploit sexually. Research should focus on investigating peer influence and social media’s effects on women’s decision to engage in same-sex practices.

Keywords:
Sexual orientation, Female same-sex behavior development, Sexual identity, Gender nonconformity, Tanzania

Introduction

Homosexuals are everywhere and their existence raises one of the most controversial debates in human sexuality research, thus what causes a person to have same-sex attraction or engage in same-sex practices? Homosexuality can be termed as the act of two individuals of the same-sex engaging in sexual activities. Homosexual are identified as Gays, Lesbians, Bisexuals, Transgender and Queer (LGBTQ), individuals might practice same-sex exclusively or occasionally, with research suggesting that same-sex activities even among heterosexuals is more welcome than exclusive homosexual identification as lesbians and gays [1-3].

The use of terminologies such as sexual orientation and sexual identity is a key to differentiate between the minority groups. Sexual orientation refers to emotional and sexual attractions, practices, desires and fantasies that directs an individual’s sexual disposition towards males, females or both [4,5]. Conversely, sexual identity refer to how individuals understand their sexuality in relation to social groups (e.g., gay/lesbian communities) [4]. There is a difference between sexual orientation and identity but they do possess common behavior and attributes. In this article we discuss and evaluate self-reported female same-sex behaviors and practices origins. The words sexual orientation and identity are used interchangeably with the goal of establishing behavioral contributing factors.

The scientific research on sexual orientation shows two sets of contributing factors that onsets homosexual practice, genetic and environmental factors. There is currently limited evidence that social environment impacts significantly upon development of sexual orientation. While in developing countries same-sex practices are still viewed as out of the norm and morally disruptive, legalizing and normalizing same-sex
acts in developed countries has resulted to scholarly debates on what causes same sex practices and homosexuality. The topic of discussion being, is the onset of same-sex behavior among individuals explained by scientific evidence rendering it a naturally occurring phenomenon or is it a learned process which is brought about by environmental and/or family factors during child development (“nurture”)?

In different cultures adulthood homosexual practices tend to be preceded by childhood gender nonconformity [6]. Gender non-conformity is believed by many same-sex sexuality researchers and theorists to be an indication of gender inversion. Hence, theoretical deductions have been made that early childhood gender non-conforming behaviors might lead to homosexuality [7]. Among the girls, gender non-conforming can be observed in clothing choice, activities, mannerisms, and interests.

In the1960s research, it was believed that homosexuality either stems from defective parent-child relationship and it is also an outcome of mental health disorders. Since the onset of 1970s, however, major medical associations in the U.S. have labeled homosexuality as a normal counterpart of heterosexuality [8]. The medical associations cited empirical scientific evidence that same-sex attraction and practices have a link to biological causes using research on twin studies.

A study conducted to investigate the relationship between sexual attraction and behavior in relation to childhood gender atypical behavior and parental relationship established that childhood gender atypical behavior is linked to same-sex behavior in women. The study also stresses out that negative parent-child relationships, thus over control of mothers and a cold (distant relationship with fathers) were reported more in lesbian women than heterosexual women [9]. A similar study addressed the differences between lesbians and heterosexuals (feminists and traditional) women and found that perceived attitudes were important in differentiating between lesbians and heterosexuals. Further, it stated that heterosexual women reported having a more affectionate and involved father (or fatherly figure) that also encouraged them more in the expression of anger than the lesbian feminists’ reported [10].

In an article aimed to review of the scientific literature on the biological causes and immutability of homosexual behavior, the author stated that; “The belief that homosexual attraction or orientation is biologically determined and thus immutable is now widespread. The immutability claims are dubious, speculative and are often backed by very tentative and disputable analyses of data... The “nature versus nurture” conflict in the search for the causes of homosexual attraction or behavior is far from settled, but it is clear that there is presently no compelling scientific evidence that homosexual orientation or attraction (much less behavior) is biologically fixed or immutable” [11].

As Bailey et al noted that despite the body of research, there is no causal theory of sexual orientation that has been globally accepted. However, there is more scientific evidence that support biological causes than social causes [6]. Evidence indicates that adult homosexuality is strongly related to childhood gender nonconformity [7]. Some scientists have also noted that female sexual orientation being linked with genetic factors, stressing that gender should not be termed as male and females only, but rather a continuum that arises from a person’s genetic make-up [12].

On the context of countries in Africa where homosexuality is vastly prohibited, majority of governments in African countries would attest to the ideology that homosexuality as a whole is a natural phenomenon. Out of the 54 African states, only 22 of them have legalized homosexuality. In some countries, homosexuality is punishable by life imprisonment, while it is also punishable by death in four countries of the continent [13]. For example, back in 2014 Uganda’s president while signing the Anti-homosexuality bill to make was quoted saying "It is on the strength that people are not homosexuals by genetics that I am going to sign the bill". The East African country leader believes that for somebody to be homosexual it is a combination of some genetic, but mainly it is influenced by external factors. He referred to the scientific evidence provided by “government scientists” that proved that homosexuality is a learned behavior, while suggesting it can also be unlearnt [14].

Materials and Methods

The study employed a cross-sectional descriptive and retrospective to evaluate the awareness of the link between female same-sex and other related health issues, such as STIs, HIV, and AIDS, among WSW. It was conducted at Ilala, Kinondoni and Temeke districts of Dar-es-Salaam Region. Dar-es-Salaam is the largest and most commercial city in Tanzania. It is known to have a large number of visitors from different backgrounds who engage in different health behaviors and practices. The characteristics of Dar-es-Salaam make it to have easy access to some WSW who is rather a typical of the participants required for the study. The study population included WSW aged 18 years and above, who had been living in Dar-es-Salaam for six (6) months or more, and had a same-sex relationship or have been in a same-sex relationship/s in the past year. The study also included individuals who knew the WSW’s living experiences and were willing to participate in the study.

In line with the aim of this study, Focus Group Discussions (FGDs), In-Depth Interviews (IDIs), Key Informant Interviews (KIsIs) and the collection of life stories were conducted to generate data from WSW community members. Interviewers were trained on the aim and procedures of the study, made aware of the vulnerability of WSW, oriented on appropriate interaction and interview ethics with study participants. All KIsIs, FGDs and IDIs were recorded and the interviewers took field notes with the permission of the study participants. The questionnaires were administered in Kiswahili, which is the language of the participants. Transcription and translation of the data was conducted before the actual analysis of the data. Data were analyzed thematically using an open coding approach that utilized the language of the participants and combined emergent emic concepts with preconceived theoretical constructs.

Results

One of the objectives of our formative study of sexual behavior and practices among WSW in Tanzania was to understand contexts within which female same-sex behavior and practices develop and practiced. We posed a question: What factors ‘pull’ or ‘push’ women and girls in Tanzania to engage in female same-sex behaviors and practices?
A participant aged 26, a transman, never married and a university graduate, reported, there are two main reasons or factors that influence women and girls to engage in female same-sex behaviors and practices ... First, there are women who are born with biologically female sex orientation but they possess some male attributes ... They tend to present and behave as males ... Some identify this situation at early ages of 9 years ... Others at puberty ... I am one of those ... I am not sexually attracted to men but only to women ... Believe it or not, that is how we are ... It is our nature” (IDI, F, 26 years, 2021).

Speaking in a tone as a leader of homosexual women, the same participant added, “The second factor is that women are good at caring for their partners (fellow women) than their counterparts ... So, once a woman recognizes this fact, she becomes more attracted and interested engaging in sex with other women than heterosexual sex with men... For example, there are married women who we occasionally have sex with, they would have heterosexual sex for the sake of satisfying the husbands and protecting their marriages but they always keep coming back to us to have it all (sexual satisfaction)” (IDI, F, 26 years, 2021).

Another participant, who is a mother of two children, aged 46, and never married, reported to have started engaging in same-sex behavior at the age of 19, reiterated, “I remember falling in love with two men, the fathers of my children ... I had sex with them but I was not enjoying it ... I felt pain during sex; whenever they pushed in and out ... I only did it (have sex) to satisfy them because I needed their financial support ... My friend introduced me to same-sex practices that I found gratifying ... I orgasmic several times whenever I was with her in bed ... During that time, I realized what I was missing (in heterosexual sex) ... Since then, I don’t desire having sex with men ... I am now a transgender caring for my babies (female partners)” (IDI, G, 46 years, 2021).

Another participant who is a mother of one child, never married and engaging in sex work remarked, “I swear, I get no sexual satisfaction when having sex with any man ... My child’s father run away from me when he realized I was pregnant ... I hated a man ... That is how all men are like... I really hate them ... They enjoy having sex with you but do not want to take responsibility for the outcome (pregnancy) ... I know I can’t become pregnant from having sex with other women, but that is fine with me because I am currently engaging in same-sex, a practice which is quite gratifying to me” (IDI, F, 32 years, 2021).

Explaining the difference between heterosexual union and homosexual practices among women, a participant aged 28, never married, with O-level education who also reported to have sex with men only for survival purposes (financial support), stated that, “In brief, I can say that men are only after sex, they do not care what happens to their partners ... Business ends after they ejaculate ... They would come to you once a month or two, just to quench their (sexual) thirst ... Some men are bad-mannered and oppressive all the time ... However, women are very caring, lovely and are available any time you need them and support in every need ... A female partner can’t scold or beat you in public ... If you do something wrong, she awaits until you are in good mood and at home to discuss about that event for reconciliation ... The opposite is true for men, and that is the reason I feel more comfortable having a female partner” (IDI, E, 28 years, 2021).
... Economically well-off women, therefore, take advantage of them ... They give them some money and use them (having same-sex) as they want ... Some women who come from well off families have uncontrollable lust... They end up engaging in same-sex practices to achieve their sexual gratifications” (IDI, J, 32, 2021).

Another Street Leader interviewed in Kinondoni district, aged 32, single and holding a Diploma in Human Resource Management, reported, “The existence of these women (WSW) in our society is an indicator for eroding cultural values ... They think imitating what happens in the West is always the best for them ... I think some of them (WSW) are unwell upstairs (mentally unwell) ... There is no way a normal human being can engage in behaviors and practices that are socially, religiously and constitutionally unwarranted” (IDI, K, 60 years, 2021).

Religious and community leaders had conflicting viewpoints on reasons why ladies engage in same-sex practices. They did not lean on biological causes for female same-sex practices but rather attributed lesbianism and female same-sex behavior to social-economic settings and learnt behavior as contributing factors. Some of the reasons for same-sex behavior reported by the group were economically motivated, peer influence and globalization (use of social media platforms). Limited research has ventured on peer pressure and social medias’ influence as factors for engaging in same-sex practices are not supported by research.

**Discussion**

The study focused on investigating self-reported factors that contribute to same-sex behaviors among women in Tanzania. Majority of participants reported cases of being born with male attributes that render some women to find men unattractive or exhibit female same-sex behaviors. The results are suggestive that primarily the behavior is naturally occurring. Though some participants reported that having sex with fellow heterosexual women occasionally felt a better emotional connection towards women, which felt more satisfying compared to connecting with men. The behavior is a business in Dar es Salaam that involved providing sexual satisfaction to women who are otherwise let down by their married counterpart’s sexual performance [15,16].

The reports of negative sexual experience with men which included rape, emotional detachment in relationships and pain during sex seem to develop a form of hatred towards having heterosexual sex. This is consistent with research that found childhood/late adolescent maltreatment and sexual abuse led to women to become averse to sexual relationships with men [17]. Traumatic experiences among these women might have a significant influence in how they view sex with men; avoidance of heterosexual sex might be their form of avoiding unwanted flashbacks.

**Table 1: Comparison between sexual groups that influenced sexual behavior.**

<table>
<thead>
<tr>
<th>Sexual gender</th>
<th>Age</th>
<th>Educational qualification</th>
<th>Sexual identity</th>
<th>Sexual orientation</th>
<th>Factors that influenced sexual behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>26</td>
<td>University graduate</td>
<td>Transman</td>
<td>Female</td>
<td>Being born with biological female sex orientation but possess some male attributes. Best caring attitudes from women to their partners.</td>
</tr>
<tr>
<td>Female</td>
<td>46</td>
<td>Primary Education</td>
<td>Female</td>
<td>Female</td>
<td>Sex dissatisfaction from men. Peer pressure from female friends.</td>
</tr>
<tr>
<td>Female</td>
<td>28</td>
<td>Secondary education</td>
<td>Female</td>
<td>Female</td>
<td>Men sex selfishness on their female partners.</td>
</tr>
<tr>
<td>Male</td>
<td>43</td>
<td>Diploma</td>
<td>Male</td>
<td>Female</td>
<td>Unlimited and uncontrolled friendship between two or more women. Lack of education about adolescent experiences and guidance from parents</td>
</tr>
<tr>
<td>Male</td>
<td>32</td>
<td>Diploma</td>
<td>Male</td>
<td>Female</td>
<td>Moral deterioration</td>
</tr>
<tr>
<td>Male</td>
<td>32</td>
<td>Secondary Education</td>
<td>Male</td>
<td>Female</td>
<td>Social media influence. Peer pressure</td>
</tr>
</tbody>
</table>

**Conclusions**

There needs to be an understanding of the context within which females engage in same-sex behaviors. This sets the groundwork for identifying and addressing health issues and other social problems accompanying the minority groups. There is a belief among study participants that females that practice same-sex behaviors are naturally born with male gender characteristics. That can be observed since early childhood ages which pushed them becoming attracted to female partners. Further, it can be deducted that a number of women have negative sexual experiences with men (including rape, sexual dissatisfaction,
undesirable pain during sex) during their early adult /late adolescent periods. This influences their decisions for opting to engage in same-sex behaviors rather than heterosexual sex on later of their lives. Poverty is also driving force for same-sex behaviors, as economic hardships among girls and women force them to use their bodies for sexual exploitation by groups that already practice same-sex behaviors. Overall, there were two categories of reported factors that associate with onset of same sex behavior among women: natural and social-economic factors. We recommend for a larger study with a different design and a nationally representative sample is required to assess the social environment factors that influence the onset of female same-sex behaviors in Tanzania societies. Additionally, more studies for female same sex behavior should aim to investigate how economic factors, peer pressure and influence of social media in women’s decisions to practice same sex.

Limitations
The study concentrates on individual reported reasons for engaging in female-same sex practices in Dar-es-Salaam, and through a sampling procedure that might exclude important categories of participants. Self-reports might sometimes be exaggerative/diminutive in nature results and conclusions made out of this study should be carefully considered and also, they should not be generalized for the entire community of women who have sex with other women in the country.

Conflict of Interest
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