

# Investigating Motivations for Women's Skin Bleaching in Tanzania

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Kelly M. Lewis<sup>1</sup>, Navit Robkin<sup>1</sup>, Karie Gaska<sup>1</sup>, and Lillian Carol Njoki<sup>1</sup>

## Abstract

Why do many African women continue to use damaging skin-bleaching cosmetics that contain dangerous chemicals (e.g., mercury) that may increase their rates of infertility, skin cancer, and serious skin/brain/kidney disease? To address this question, our study investigated motivations driving the preservation of skin-bleaching practices in Tanzania. We conducted qualitative interviews with 42 urban women in Dar es Salaam who reported engaging in skin-bleaching practices and who were a subset of a larger sample of women from a study investigating the prevalence of skin bleaching in Tanzania. Results yielded six thematic motivations behind the practice of skin bleaching: (a) to remove pimples, rashes, and skin disease; (b) to have soft skin; (c) to be White, "beautiful," and more European looking; (d) to remove the adverse affects of extended skin bleaching use on the body; (e) to satisfy one's partner and/or attract male mates; and (f) to satisfy and impress peers. These findings provide empirical support for skin bleaching being linked to self-objectification, colonialism, and Westernization. Skin bleaching is discussed in the context of other potentially harmful body modification practices in which women participate as a result of external and internalized standards of beauty. Implications for future research and potential practice and policy interventions are discussed.

## Keywords

health behavior, body image, cross-cultural psychology, skin disorders, racial and ethnic groups, ethnic values, skin bleaching, body modification

Within the last several decades, women's skin bleaching has become one of the most common forms of potentially harmful body modification practices in the world (Charles, 2003; Hall, 1995). Skin bleaching is the application of topical creams, gels, soaps, and household products (e.g., toothpaste, bleach, washing powder, battery acid) to the skin. Commonly, these bleaching agents contain hydroquinone, glucocorticoids, steroids, and other caustic agents, posing great risk for a number of health problems (Boyle & Kennedy, 1985). These problems include irreversible skin damage such as skin lesions, epidermal atrophy (wasting of the epidermal layer of the skin), exogenous ochronosis (a blue-black discoloration), skin irritations (such as eczema, bacterial and fungal infections like scabies or acne), and cancers (e.g., skin cancer and leukemia; Mahè, Ly, Aymard, & Dangou, 2003; Ramsay, Goddard, Gill, & Moss, 2003). Users often go to great lengths to expeditiously lighten their skin's complexion (Mahè et al., 2003).

Although there have been many studies looking at the health risks and health complications of skin bleaching throughout the world, few studies have examined women's motivations behind the practice (Charles, 2009). We address this significant gap in the literature by examining African women's motivations for skin bleaching in an effort to inform the future design and implementation of interventions to reduce the prevalence and effects of this potentially harmful

practice. Previous studies indicate that mid-20s, educated women are increasing their rates of engagement in skin-bleaching practices (Lewis, 2009), a group that is oversampled in the current study.

## Background on Skin Bleaching

The global production and marketing of skin-bleaching products has become a multi-billion dollar industry, servicing all parts of the world, particularly the Global South (Glenn, 2008). Research has been conducted with populations that engage in skin bleaching, including women in the United States (Peiss, 1998), Asia (Ashikari, 2003; Skin Lightening Products, 2004), and India (Glenn, 2008), with the goal of understanding its prevalence and health effects.

Popular sources and health research literature conclude that African women are among some of the most widely represented practitioners of skin bleaching, including the use of local concoctions made from household chemicals and

<sup>1</sup>Department of Psychology, Georgia State University, Atlanta, USA

## Corresponding Author:

Kelly M. Lewis, Department of Psychology, Georgia State University, PO Box 5010, Atlanta, GA 30302-5010, USA  
Email: klewis28@gsu.edu

over-the-counter creams (Bongiorno & Aricò, 2004; Del Giudice & Yves, 2002). The practice of skin bleaching has been noted in sub-Saharan Africa for about four decades and is growing in its prevalence (De Souza, 2008). Approximately 25% of adult women in Bamako, Mali, reportedly use skin-bleaching products, such as Class 1 steroids or hydroquinone-containing solutions (Trend of Women, 2001). Case studies in Lusaka, Zambia, indicate that the use of skin-bleaching agents may be as high as 60% among women between the ages of 30 and 39 years (Pitche, Kombate, & Tchangai-Walla, 2005). This trend appears to be connected to the availability of these products in both legal and illegal markets.

Potent lighteners are easily available over the counter and at low prices in many African cities like Dakar (as in most cities of Senegal) where non-medical retailers of these products can be found in almost every neighborhood. Governments in Nigeria, South Africa, Kenya, and Zimbabwe have banned the import and sale of skin-lightening products containing mercury and hydroquinone; however, these products are continuously smuggled in from other African and European nations (Dooley, 2001).

Since the 1970s, there has been a notable demographic change in who engages in the practice of skin bleaching in Africa. Whereas previously the practice was typically observed among rural and poor women, there is now a rise of “upwardly mobile black women” who are propelling the skin-bleaching product market forward and increasing the numbers of skin bleachers in Africa (Glenn, 2008, p. 286). However, poorer women are still the primary consumers of black market commodities, often creating concoctions from household products to strengthen the potency of these creams. The existing research does not account for the underground distribution of skin-bleaching products and therefore may underestimate the number of those who engage in the practice.

Our current study focuses on women in Tanzania, East Africa, who practice skin bleaching. Substantially less research has been conducted on the practice of skin bleaching in East Africa as compared to West, North, and South Africa despite its widely observed use (Adebajo, 2002; De Souza, 2008; Del Giudice & Yves, 2002; Mahè et al., 2003). Our study specifically looks at one East African community—Dar es Salaam, Tanzania—where recent research indicates that skin bleaching is increasing at estimated rates of nearly 30% annually, with women being the primary users (Lewis, 2009). Similar to findings from other regions of Africa, there has been a rise in the practice of skin bleaching in Tanzania among educated women in their 20s and 30s who are financially secure (Lewis, 2009). For this reason, our study focuses on skin-bleaching practices among a diverse sample of Tanzanian women that oversamples this particular group. Skin bleaching is a widespread practice within the country, yet no known empirical research has examined its prevalence or the psychological motivations behind the practice.

The government in Tanzania has officially banned the manufacture, sale, supply, and distribution of 168 various

skin-bleaching cosmetic products containing prohibited ingredients such as mercury and hydroquinone (Tanzania Food and Drug Authority, 2003). Government agencies are also engaging in efforts to educate the public on the negative effects of skin bleaching via educational radio programs, brochures, books, and public forums (Tanzanian Food and Drug Authority, 2004; Warning Issued, 2009). However, creams are still readily accessible and the ban on importation, exportation, and sale of these creams is poorly enforced (Lewis, 2009; Lewis et al., 2009). According to a 2005 Tanzanian news article, 25 million Tanzanian shillings of skin-lightening creams were seized in Tanzania after being smuggled into the country (Barnett & Smith, 2005).

### *Cultural Contributions to the Practice of Skin Bleaching*

Over the years, theorists have attempted to explain the origins of skin bleaching in Africa dating back to colonialism and Westernization (BBC News, 2004; Hall, 1995, 2001). One central method for gaining control during the colonial period was the establishment of a racial hierarchy within which dark-skinned native Africans were considered “primitive” and inferior to light-skinned Europeans (Hall, 2003; Torgovnick, 1990). In doing so, colonialism and its remnants established both a psychological and practical racial hierarchy, ultimately strengthening the colonial mission of controlling and conquering native Africans (Torgovnick, 1990). Hall (2003, p. 43), a leading scholar on the social consequences of skin color, notes that hierarchies built on color distinctions are an “effective mechanism for sustaining control” by allowing for and justifying the unequal distribution of resources and the exploitation of the powerless. This method of control persisted even after colonial rule, imbuing colonized societies with a racially stratified distribution of power and status demarcated by skin color (Hall, 2003).

Colonialism ultimately left behind a social psychology and an African consciousness of submission and imitation—a psychological colonization. Psychological colonization is the “standardization of ideas previously less relevant to native populations and includes exportation of race constructs to native subjects among whom race was previously all but insignificant” (Hall & Livingston, 2003, p. 639). Before colonization, race was a less salient concept to African society. However, through the process of colonization and the institution of a racial hierarchy, race, and consequently skin color, gained significance and importance within society.

For decades, the execution of this hierarchy has been realized in Africa as light-skinned and mixed-race offspring have occupied positions of power and economic advantage over darker skinned populations (Washington, 1990). Hall (2001) contends that these widespread proscriptive beliefs—that darker skin is less beautiful and linked to lower status produces feelings of inferiority, poor identity, and low self-esteem—are reflected in the practice of skin bleaching.

Whereas some historians and anthropologists argue that pre-colonial African conceptions of beauty valued lighter skin tones, colonialism certainly further advanced this value system through its creation of a racial hierarchy (Burke, 1996).

After the colonial era ended, Western influences persevered, albeit in different forms, including the global media that flooded the African region. For years, billboard and print advertising in Africa portrayed European individuals as the image of beauty. Only recently has the cosmetic industry produced cosmetics to suit darker skin (Westerhof, 1997). Colonialism and Westernization can be understood as intersecting rather than as distinct unrelated phenomena. In its aftermath, colonialism left a region vulnerable to Western influences, specifically to those media images that portrayed lighter-skinned individuals. Media images reinforce racial hierarchies by presenting lighter skin as beautiful and preferable over darker skin.

### *Psychological Contributions to the Practice of Skin Bleaching*

Although colonialism and Westernization have been central to the development of skin bleaching, psychological contributions have also played a key role in determining its roots. Objectification theory (Fredrickson & Roberts, 1997) offers one model for understanding the psychological processes and social conditions that contribute to engagement in potentially harmful body modifications. Objectification theory is based on the principle that women internalize the perspectives of others as a primary reference for viewing themselves. The result of expected and actual exposure to objectification as well as female socialization to objectify one's own physical appearance is internalized as self-objectification. Self-objectification has been identified as a significant factor in body shame (Tiggemann & Slater, 2001), poor well-being (McKinley, 1999; Mercurio & Landry, 2008; Sinclair & Myers, 2004), negative health outcomes (Noll & Fredrickson, 1998), and low self-esteem (Breines, Crocker, & Garcia, 2008; Rosenberg, 1988).

Body-altering practices have received attention for their possible associations to self-objectification as an underlying motivating factor. Such body-altering practices include eating disorders (Dirks, Moradi, & Matteson, 2005; Fredrickson, Roberts, Noll, Quinn, & Twenge, 1998; Noll & Fredrickson, 1998), hair removal (Kitzinger & Willmott, 2002), and cosmetic surgery (Bazner, 2002). Skin bleaching can be viewed within a context of other body-altering practices and consequently, self-objectification can help explain women's skin-bleaching behavior.

### *The Present Study*

In the current study, we explore the motivations for skin bleaching in East Africa among a diverse sample of Tanzanian women. Through interviews with women, we elicited

the motivations behind the practice of skin bleaching and examined qualitatively whether these findings further substantiate objectification theory as a plausible framework in which to understand the practice. Further, we aimed to discover if the influence of colonialism and Westernization play a significant role in creating the underlying reasons that women bleach their skin.

Previous studies have been more centrally focused on women from high-poverty areas and concentrated in Western and Central Africa. Our study looks at a broader spectrum of women that includes more affluent representatives and a broader age range than previous research. Focused in an East African cosmopolitan city, we elicited information about women who have not been previously studied. Although theories have been set forth to understand the practice of skin bleaching, little has been done in terms of systemically investigating motivations as told by the bleach users themselves.

The current study addresses this gap by posing the following research questions: (a) Why do women in Dar es Salaam skin bleach? (b) Is self-objectification a sufficient theoretical framework to understand the motivations for skin bleaching among this population? and (c) How do colonialism and Westernization influence women's motivations to bleach their skin?

## **Method**

### *Study Setting*

The research was conducted in Dar es Salaam, the former capital and currently the largest city in Tanzania. Tanzania is the largest geographic East African nation and is bordered by Mozambique, Malawi, Zambia, Zaire, Burundi, Rwanda, Uganda, and Kenya, and on the east by the Indian Ocean. Gaining its independence from Britain in 1964, Tanzania is the result of a merger between the mainland (previously Tanganyika) and Zanzibar. It has a total population of 35.57 million (including 1 million in Zanzibar) in a geographic area slightly smaller than New Mexico and Texas combined. The population includes over 100 different ethnic groups that can be categorized into five encompassing ethnicities and comprising three primary religions: Islam (45%), Christianity (45%), and Indigenous beliefs/Traditional African Religions (10%). Only 1% of the population comprises people from Asian, European, or Arab descent. Kiswahili and English are the official languages in Tanzania, although English is spoken less often than Kiswahili (Bureau of African Affairs, 2006). Dar es Salaam has become a cosmopolitan multicultural center in which various ethnic groups live together and share their local traditions and practices as a basic form of interaction. Given the city's large size, the prevalence of skin bleaching in this region (Lewis, 2009), and the dearth of research that has been conducted on this topic in East Africa, Dar es Salaam, Tanzania, was an ideal city in which to conduct our study.

## Procedure

Drawing from a sample of participants enrolled in another simultaneous study (Lewis, 2009), a subset of 42 women who had reported engaging in skin bleaching were randomly selected to be interviewed. The full survey sample of 355 participants was acquired through a snowball sampling technique. Local approval was granted from the Tanzanian government to conduct all modes of data collection before the project began. Institutional Review Board approval was also granted at a university in the United States. Prior to participating, interviewees completed a consent form for adults or an assent/parental consent form for youth. The interview consent/assent forms were written and administered in Kiswahili or English according to the participant's preference by a fluent Kiswahili and English-speaking researcher. Interviewees also completed a consent form granting permission to be audio recorded.

Interviews were conducted by either the principal investigator or by one of three contracted research assistants from the University of Dar es Salaam at a location that was mutually convenient for the researcher and the participant (e.g., home, office, restaurant, park, school). Four different trained researchers conducted the interviews. This method was chosen in order to grant adequate time to each participant and enough time for the interviewer to conduct an intensive review of their identified cases. Each interview lasted approximately 1 to 1½ hrs. The researcher read items aloud to the interviewee and then documented the responses while also audio-recording each interview session. Only one participant denied permission to be audio recorded.

## Participants

The mean age of participants was 25.19 years ( $SD = 9.05$ , range = 13–51 years), with 62% of the sample in their 20s or 30s. Sixteen different ethnic groups were represented among the interview participants, with most originating from northern regions of Tanzania. None of the participants originated from Asian, European, or Arabic countries. Occupations varied and included students, vendors/merchants, beauty professionals, unemployed/not in school, finance workers, secretaries, entertainers, teachers/educators, and consultants. Almost all (98%) had some education, with 41% making it to high school and 45% attending elementary school only. Kiswahili was the primary language of 40% of our sample, with 60% speaking primarily other local languages. The majority of our sample was single (79%), with 17% who were married; 65% had no children, whereas 35% had one or more children.

## Interview Design and Analysis

Interviews served as the primary mode of data collection for our study. Language, subjectivity, and limited generalizability from

small samples may affect qualitative data (Gilgun, 1992, 2001a, 2001b). We worked to address these possible pitfalls in several ways. All interviewers spoke fluent Kiswahili and had lived in Tanzania for at least three years, ensuring accurate understanding of cultural influences and accurate analysis of interview and case study data. All field researchers were trained by the first author in qualitative data collection and how to maintain critical self-awareness during interviewing. Special attention was given to how researchers represented information and how they may influence interviewees. To further address concerns related to subjectivity, the data were analyzed by all of the researchers, not just the principal investigator.

An 80-item interview protocol was developed to assess interviewees' perceptions of beauty and motives for skin-bleaching practices. The interview format included semi-structured and open-ended questions that assessed five core domains: demographics, perceptions of beauty, knowledge about skin bleaching, participation in skin bleaching, and family background. Sample interview questions related to perceived beauty included: "Describe the ideal beautiful/handsome Tanzanian man" and "Have you ever been discriminated against because of your skin color complexion?" Other questions probed participants' knowledge about and participation in skin bleaching (e.g., "For what reason would you stop bleaching your skin?" "How often do you use skin bleaching products?" and "Which symptoms have you experienced because of your engagement in skin bleaching?" [a list of possible symptoms was provided]). Questions related to family background focused on economic status, religious affiliation, and educational background from both maternal and paternal sides of the family. This format was flexible, allowed for further probing as appropriate, and served as a guide for the researcher when time was limited.

All interview data were analyzed for content to identify emerging thematic categories and subthemes that described participants' motivations for skin bleaching. The author then briefly characterized consistencies between these identified motivations and the theoretical origins of skin bleaching, namely colonialism, Westernization, and self-objectification. After transcribing and translating all of the audiotapes from the interviews, three procedures that are established iterative techniques for aggregation and synthesis of qualitative data guided our thematic analysis (Morgan, 1998; Taylor & Bogdan, 1998). First, the author repeatedly read the transcripts to search for meanings and patterns in the data. An initial list of experiences consistent with objectification, colonization, and Westernization was then generated. For example, interviewees repeatedly described great pressure for women (in particular) to be lighter skinned in order to successfully attract a mate or keep their current partner happy.

Second, open coding procedures were employed in which the author produced initial codes from the data. Using grounded theory (Strauss & Corbin, 1998), the author noted and extracted concepts that exemplified cognitive schemas

about engagement in skin bleaching. These included the beliefs that skin bleaching would make them more beautiful, that skin bleaching would help to attract a mate, that skin bleaching would remove pimples on their body, or that skin bleaching would remove rashes. After this open coding, the author used a comparative approach to cluster related concepts. For example, the concepts of removing pimples and rashes were grouped together because they both describe the desire to remove marks from the body.

Third, another member of the research team then examined each of the concept clusters and named them by common theme, referring back to the data for confirmation. This peer examination, and the alignment of its themes with those documented in theoretical literature on skin bleaching, provided confirmation of the credibility of the six major themes identified and discussed in the next pages. Only consistently identified themes are reported and excerpts from participants' interviews have been selected to illustrate the identified themes. Pseudonyms are used throughout the remainder of the present article to maintain the anonymity of participants.

## Results

Six interrelated themes emerged about what motivates Tanzanian women to engage in skin-bleaching practices: (a) to remove pimples, rashes, and skin disease (17% of sample); (b) to have soft skin (5%); (c) to be White, beautiful, and more European looking (38%); (d) to remove the adverse affects of extended skin bleaching on the body (e.g., uneven skin tone and dark patches) (2%); (e) to satisfy one's partner and/or attract male mates (14%); and (f) to satisfy/impress peers (22%). We will further describe each theme below.

### *To Remove Pimples, Rashes, and Skin Disease*

Participants consistently described how important they felt it was to remove pimples, rashes, and to "cure" skin disease through the use of skin-lightening creams. For instance, Gloria (25 years old, merchant) noted that she uses bleaching creams "to remove rashes on [her] body," while Amina, (21 years old, beauty professional) said that she uses the creams "to remove chunusi or pimples." Although some creams are advertised as effective tools for curing skin problems, the high and sometimes unlawful levels of hydroquinone and other caustic agents within the creams may result not only in failure to clear acne but rather in new, and exacerbation of existing, acne (Del Giudice & Yves, 2002; Mahè et al., 2003; Ntambwe, 2004). Other skin-lightening products market themselves as tools to clear up marks and scars caused by pimples, rashes, and skin disease (Draeos, 2007). Long-term use of products containing high levels of caustic agents can actually worsen skin conditions.

### *To Have Soft Skin*

Similarly, there was a strongly held belief among a few participants that skin-bleaching creams would soften the skin and make skin more supple and attractive. Cecilia (30 years old, beauty professional) said that "women bleach their skin to make their skin soft and maintain . . . beauty." This type of assertion was most common among participants who used the creams with high frequency. Their belief was that the more often you use skin-bleaching creams, the softer and smoother it makes the skin. In an effort to have skin that was soft to the touch and even more importantly soft to the eye, participants reported using these creams with high frequency so that other people would perceive their physical attributes as most attractive and highly desirable. Gloria (25 years old, merchant), reported that "men love women who have soft skin . . . people apply creams and lotion to make your skin soft, beautiful, and attractive." Along these lines, participants reported the following messages about obtaining soft skin from using skin-bleaching creams that seem to align most closely with an intersection of self-objectification and Westernization patterns: "I want to be soft and beautiful like my sisters," Nelly (15 years old, student); "I want to look soft like my friends," Upendo (17 years old, student); "I want to be soft like Miss Tanzania," Zaina (16 years old, student); and "Skin bleaching advertisements show examples of girls who applied creams and look beautiful, soft skin, attractive," Grace (13 years old, student).

### *To Be White, "Beautiful," and More European Looking*

Although many women who use skin bleach acknowledge the need to internalize Black beauty, national and international pressures to look White have strongly outweighed this desire, and in turn, many Tanzanians have embraced more Eurocentric beauty ideals. The internationally shared belief that White is the absolute form of beauty is perpetuated through Western media images including television, radio, advertisements, cinema, and theater—all globally accessible through satellite and other forms of communication. This ideal is no less valued in Tanzania. Naeema (45 years old, merchant) strongly expressed this motivation: "People who use skin bleaching they look so light and smart [and are] also . . . quite different from Black people . . . they are attractive . . . I use skin bleaching creams to be quite different from other women and to be like Europeans." Another participant, Abiria (25 years old, transportation business), said that she "started bleaching to be beautiful and to look like Arabians or Europeans and attractive to people especially men."

### *To Counteract Extended Use*

Two central ideas are included in the finding that skin bleaching is used to remove adverse affects of extended skin

bleaching use: (a) Participants held a commonly perceived notion that continual use of skin-bleaching products would eventually remove or reduce the adverse affects caused by those same products (e.g., hypo-hyperpigmentation, striae atrophicans, and stretch marks); (b) many participants shared the belief that, despite negative consequences resulting from skin bleaching, the more often the products are applied, the more likely they will produce the advertised effects—even if the time period to achieve such results is longer than expected. One participant, Fahamu (15 years old, student) commented on her continual usage of the creams despite evidence that the products may cause harm: “I want to continue using them because I fear if I will leave them I will be having bad colour and I will leave some spots on my face and have black and blue marks . . . I know some of my relatives have been affected by skin lightening.”

Several other participants noted that the commonly held beliefs that skin-bleaching creams would remove the adverse affects of using skin-bleaching products over an extended period of time exist in large part because of the way most skin-bleaching products are marketed to “improve appearance.” These misconceptions were perpetuated orally through social networking in the community with very little information being exchanged about the actual adverse affects that can occur from using skin-bleaching creams over an extended period of time. In fact, medical research has found that the more skin-bleaching products are used over time, the more likely they are to adversely affect the body (Del Giudice & Yves, 2002). This medical finding is a polar opposite of what the majority of our sample believes.

However, a small minority articulated the direct connection between using skin-bleaching creams and subsequent medical problems. For instance, Grace (17 years old, student) said that she “heard a person gets problems when say she had an accident and needs operation — doctors can’t treat her easily [because the skin bleaching creams thin the skin so much that it is inoperable].” Another woman (45 year old, merchant) mentioned that “some of [her] friends have died because of using skin lightening like three years ago.” However, even among those women who are aware of the dangerous effects of using skin-bleaching products, the consequences do not prevent them from engaging in the practice.

### *To Satisfy or Attract Men*

Interviewees believed that people, particularly men, in Tanzania have a strong preference for lighter skinned women. Although women acknowledge that skin-bleaching practices are potentially dangerous and life threatening, participants believed that the benefits of using the creams (now) far outweighed the costs/risks (later). For example, participants who had partners felt it was important to satisfy them—many of whom had internalized Western standards of beauty. Salama (40 years old, teacher) expressed her desire to satisfy her husband:

I use skin bleaching creams to avoid my husband from being attracted by other girls since men in Tanzania prefer White and soft skin girls. . . . At first it was to maintain my beauty by having soft skins, White face as well as to attract men who loves girls of their character. After my marriage, I intended to maintain my beauty to make my husband proceed loving me.

Similarly, participants who did not have a partner felt it was important to do whatever was necessary to gain a mate even if it meant lightening one’s skin. Helima (17 years old, merchant) discussed the societal pressure to please one’s partner: “Some girls in Tanzania want to win men. In Tanzania, the majority of males like brown females. . . . Some females are given the creams by their husbands or boyfriends. So they need to use the cream otherwise they will get a divorce.”

### *To Satisfy and Impress Peers*

Interviewees reported experiencing strong societal pressures (direct and indirect) from their peers to be light skinned. In fact, many participants reported that their lighter skinned peers in Tanzania have higher status, income, opportunities for education and jobs, and more friends. These elevated possibilities bring social class and status to the family. As a result, darker skinned people are often envious of those with lighter skin and attempt to achieve that same status by engaging in skin-lightening practices. Mary (22 years old, student) commented: “I wanted to look different from what I am. I saw my friend had changed so I wanted to look like her.” These influences appear to persist over time and across age cohorts, evidenced by Mwajuma’s (51 years old, independent food preparer) about why she continues to use skin-bleaching products: “I use skin bleaching to attract my friends. . . . I will keep using skin bleaching creams if my friends encourage to me to do so.” Another participant, Naeema (45 years old, merchant) noted that she started using bleaching creams because her “colleague, the one [she] share[s] a husband with, was using” them.

## **Discussion**

The six motivation themes that emerged answered our first broad research question of why women in Dar es Salaam use skin-bleaching products. Our findings also affirmed our second research question of whether self-objectification is a meaningful theoretical framework from which to understand motivations for skin bleaching among women in Tanzania. In our study, interviewees’ comments consistently confirmed that women’s self-image is based on their perceptions of others as a primary reference point. The skin-bleaching motivation themes of satisfying one’s partner/attracting male mates and impressing one’s peers speak directly to these women’s desire to obtain the approval of others through modifying their own body. Similarly, the motivation themes to remove marks (pimples, rashes, and skin disease), to have soft skin,

to remove the adverse affects of extended skin bleaching use, and to be more beautiful and White-looking all speak directly to participants' desire for beauty, with reference to a beauty standard that stems from outside the individual. These motivations are yet another illustration of how women's motivations to skin bleach are informed by their image of self based on their perceptions of others. Essentially, self-objectification is a meaningful framework in which to understand all identified motivations to skin bleaching.

Support for self-objectification as a framework from which to understand skin-bleaching practices is significant because it aligns skin bleaching with other harmful body modification practices. It positions skin bleaching among the repercussions of oppressive and often unobtainable beauty standards internalized by women that currently threaten women's health. Skin bleaching is one of many practices that have potentially harmful consequences as women often go to extreme lengths to obtain a standard of beauty derived from foreign influences.

Our results also squarely placed the practice of skin bleaching in the context of colonialism and Westernization, which affirmed our third and final research question. Participants in our study reported strong desires to look White, soft, and smooth as well as equated "Whiteness" and clear, soft skin with beauty. Participants' beauty ideals, ultimate self-objectification, and skin bleaching appear to be influenced by an intersection of remnants of colonialism where light complexion is at the top of the skin color hierarchy as well as notions of Westernization where local Western images (e.g., billboards, television and radio advertisements, product labels, music videos, songs, and peers) equate beauty with having a whiter, softer, smoother/clearer complexion.

Western media has played an active role in reinforcing the perception that lighter skin is more beautiful and powerful in Africa, as well as in many other locations where Western media is pervasive. One study of women's magazine advertisements in four countries (India, Russia, Mexico, and the United States) found that depictions of women focused primarily on Eurocentric or White ideals of beauty (Mayorova & Kwan, 2003). Only 3% of women depicted in a sample of India's most popular women's magazine had dark skin, and no depictions of dark-skinned women were found in a sample of Mexico's most popular women's magazine. Advertising images have been noted as one of the most important archival records for storing cultural images and texts (Belk & Pollay, 1985; Li, Min, Belk, Kimura, & Bahl, 2008), and this influence is no less true in Tanzania.

### *Limitations and Future Research*

Our qualitative study allowed for the collection and analysis of descriptive data from multiple sources in a way that facilitated inclusion of experiences common across, as well as unique to, individuals. However, small sample size and snowball sampling likely limited generalizability of our findings.

Still, there are sound reasons to suggest that the motivations expressed by this sample may be indicative of motivations held by a more general population of Tanzanian women, such as similar exposure to media images, societal and relationship pressures, and effects of colonization.

Given the exploratory nature of our study, several avenues for future research could be pursued. First, further quantitative confirmation of these motivations to skin bleach might be sought out using larger samples or focusing on other specific subsets of the population. In addition, more historical research is needed to clarify the precise origins of skin bleaching in Tanzania. It is possible that other skin-bleaching beginnings exist that have not otherwise been represented in the literature, yet warrant further examination and analysis by historians.

Second, the results could be used as a springboard to begin to test psychological constructs and correlates associated with skin bleaching. Future studies might specifically test directional hypotheses regarding self-esteem, identity, and self-concept to examine their relationship to skin-bleaching practices. Additionally, other biases may be tested such as preferential attention and information processing biases that could bring clarity to the internal motivations of women who use skin-bleaching products. Along these same lines, future research should test the directional relationships between colonization/Westernization and beauty standards, self-objectification, and skin-bleaching involvement to further elucidate their links.

Third, the health and economic implications of these practices need further research. Understanding the long-term effects of skin bleaching from a population perspective will allow researchers, governments, and academics to better understand the phenomenon of skin bleaching and help prioritize areas for research, intervention, and governmental regulation. Finally, future implementation research should examine what potential intervention and prevention strategies could be effective at curtailing dangerous skin-bleaching practices in Tanzania.

### *Practical Applications*

The motivations behind skin bleaching could inform government policies and the enforcement of bans on skin-bleaching products. For instance, knowing why people skin bleach can help the government understand the origin of the demand for these products and why some products remain easily accessible, as well as why there is continued use of skin-bleaching products, despite the bans and governmental regulations on their sale. With this deepened understanding of why people skin bleach comes a need for stricter enforcement if further bans on cream importation and exportation are to be created. It also supports a need to supplement these bans with national social change that affects the motivations to bleach and promotes national psychological and health liberation.

The results of our study confirm that much misinformation exists around the health consequences of skin bleaching, supporting the need for intervention initiatives to inform the public about the health risks of engaging in such practices as well as the adverse effects of extended skin bleaching use. These types of intervention efforts could potentially reduce the incidence of cancer, skin disease, liver/kidney failure, and other health-related chronic conditions in East Africa and other cultures where similar body modification practices are present. Understanding the motivations behind skin bleaching will help interventions target the psychosocial and cultural factors that perpetuate the practice. Specifically, understanding skin-bleaching motivations through the intersections of self-objectification, colonialism, and Westernization highlights the need to address the unobtainable standards of beauty held by many women and men of color, the social and environmental norms that perpetuate these standards, and the notion that these standards are derived from oppressive influences.

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