

**Inclusive and Comprehensive
Sexual Health Education for LGBTQ+ Youth
in Alberta Schools**

by

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Abstract

Sexual health education in Alberta is a highly contested topic, particularly how inclusive and comprehensive sexual health education in Alberta should be taught and incorporated in K-12 schools. While all students are impacted by the health curriculum, LGBTQ+ students are particularly vulnerable, as the current curriculum does not equip them with the knowledge and understanding to navigate the complexities of sexual health and relationships they encounter. This research focussed on the lived experiences of five young LGBTQ+ individuals from a variety of backgrounds. By sharing their lived experiences and perceptions on the current state of education, the participants hoped to contribute to future changes in the ways Alberta's LGBTQ+ youth interact with sexual health education. Participatory action research and an online focus group provided an opportunity for the participants' experiences and opinions to shape recommendations on how sexual health education in Alberta can begin to respond to the needs of LGBTQ+ youth. It was found that, in order for LGBTQ+ youth to be liberated from a prescriptive sexual health education, the curriculum must become more inclusive of LGBTQ+ perspectives and educators must participate in relevant and appropriate professional learning experiences, so they are prepared to support all students to learn more about sexual health.

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Chapter 1: Introduction

Personal Narrative

Did you know that you can reclaim your virginity? I did not know this was “possible” until I watched a video in my sixth-grade sexual health education class where we covered topics such as chastity, virginity, and our relationship with God. Sex was projected as a negative experience, and if we faltered, we would be required to ask for God’s forgiveness. The Catholic sexual health education I received was not inclusive and forced me, and I am sure many of my classmates, to fail to understand how to have a healthy relationship with our bodies, sex, and sexuality.

I bought into this troubling narrative for a long and complicated time. Wearing my virginity with pride, “slut shaming” my friends who wanted to have sex, waiting until marriage before I had sex (only for procreation, not for pleasure), and standing on a pillar of morality judging those who strayed, I was the perfect Catholic, apart from being gay.

I was a queer kid growing up in a small Catholic town where heteronormative forces tried their best to make me into a “normal” boy. Many of my classmates had parents who grew up in town and married their neighbour or a distantly related cousin. In school, we had dances where boys would stand on one side of the gym and girls on the other. We were implicitly required to wear certain clothes and act in certain ways. Girls were to be subservient, meek, and mild. Boys were to be strong, flirtatious, and rough. We were restricted by our gender, and there was only one correct God-given sexuality. Even being in drama class was considered “gay”. Wearing pink was “gay”. Hanging out with girls was “gay”. I was gay.

As we grew into teenagers, many of my peers started to date, kiss, and have sex (despite our Catholic teachings). I was criticized for having girl friends, but not a girlfriend. My voice was slightly different than the other boys, which many picked up on. Having emotions and expressing myself led me to be defined as dramatic and flamboyant. I tried to play my hetero-scripted part for a while, but I could not force myself to date or kiss a girl. I was a good actor, but even my award-winning acting had its limits. As a result, I overcompensated by trying to be “extra” heterosexual, but I occasionally let my gayness come out. I would sometimes stare at a boy too long, other times I was too slow in acknowledging how sexy certain female celebrities

were, and I did not treat my girl friends as overt sexual objects. Everybody knew I was different. I denied it vehemently, as did my good friends, but we all knew there was a secret.

As we grew older, the sexual health education my peers and I had received years earlier did not seem to be remembered in our teenage years; most of my peers lost their virginity before they got their driving licenses. Condoms were a rarity; sex was not. There were many pregnancy scares and even a few unplanned pregnancies. Some of my friends participated in unhealthy relationships with controlling or jealous partners. Curiously, no one seemed interested in reclaiming their virginity as our teacher once taught us.

Growing up gay in a small town forced me to develop ways of protecting myself. I was obviously different and an easy target. So, I developed a sense of humour, a snarky attitude, and a love for sarcasm. People left me alone for the most part, but I was still miserable due to the overwhelming heteronormativity around me and my own increasing internalized homophobia. I was never allowed to feel “normal.” I lived in constant fear of being outed. When someone would say to me, “Can I ask you a question?” I felt that “THE question” was coming. They would ask if I was gay, they would know, and the world would know.

As a result, I stayed hidden in the closet for a few years after high school, and finally came out at age twenty. I was asked by my mother to not tell people in town that I was gay, as it was something “that did not need to be talked about.” It was a blemish on our family that would feed the town gossips.

After coming out, I learned a lot about sex and sexuality. My small-town education did not give me much preparation for a gay life. The only time the word “gay” came up in my town was when someone was acting too effeminate and had to be forced back into normality. My teachers never talked to me about two men falling in love, let alone sex between two men. Up until this point most of my “real” sexual health education, like most youth, came from Google and pornography. I jumped into having sex a month after coming out. I was being safe, but I was not necessarily participating in healthy sex. I was having sex with people because I felt the need to explore my sexuality; I wanted to learn more about myself as my knowledge was seriously lacking. During this process, however, I had little respect for myself or the people I was sleeping with. Despite having what is considered to be a formal sexual health education, I was extremely unprepared to be a gay young adult.

The bulk of my real education came after my coming out experience; I learned the most from my peers and from my community. The more I engulfed myself in the LGBTQ+ community the more I learned about sex, sexuality, and gender. I discovered things about myself that I would never have considered before. My identity blossomed as my mind opened. I found myself evolving into a comfortable and confident queer person.

I once viewed sexuality as black and white, gay and straight, wrong and right. It took me a long time to accept my own sexuality as something that was normal and fluid. To this day, it is something I still struggle with in our heteronormative society. At times, I still find myself scared to hold my husband's hand in public or show affection. When I see other LGBTQ+ individuals expressing themselves I quickly judge, before questioning what it is I am judging.

I needed to learn about more than my own sexuality. Sexuality, gender, and sex in general are extremely complex, and the definitions of these labels are constantly evolving. As I connected to my community, I found myself embracing my queer identity and growing into a more fully actualized individual. It was not until I was around twenty-two years old that I began an authentic journey toward self-discovery. Looking back, I can only question why it had taken over twenty years for me to begin the process of embracing my community, and myself.

I recognize that sexuality and gender are fluid, and that I may never completely understand myself. Therefore, it makes sense that I was not fully self-actualized at twenty, and that I am not self-actualized now; however, it should not have taken until my twenties to be “exposed” to inclusive and comprehensive sexual health education, and the fluidity of sexuality and gender. Why did it take me twenty years to begin to accept my sexuality? Why did it take an additional two years to understand and embrace my sexuality, and the sexualities of others? Why is it that to this day I have never been taught to love myself, or to accept myself? I have never been formally taught that being a part of the LGBTQ+ community is normal and healthy.

Today, I feel that I have discovered quite a bit about myself. My knowledge regarding sex and sexuality has grown exponentially, and I have found myself developing into an advocate for inclusive and comprehensive sexual health education. I am also aware, as a teacher within the Alberta education system, that sexual health education has not expanded or changed in the decade since I have been out of high school. Even today, many of my teaching colleagues have,

admittedly, little to no knowledge of the LGBTQ+ community and many of them teach sexual health education without any formal training.

Background

Teacher training and inclusivity. Teachers in Alberta are not being prepared and supported in a way that creates an inclusive educational program. As a classroom educator, one of the major issues I have noticed is how LGBTQ+ youth are recognized by educators, if they are acknowledged at all. Within a variety of educational contexts, I have witnessed a spectrum of concerning behaviours. For example, in one school setting, I observed a teacher in the staff room refer to a student as a “faggot.” Not only did this happen in a school, but shockingly many people seem unbothered by his language. Perhaps they were too scared to speak up. In other cases, perhaps rooted in ignorance, I have seen teachers misgender students or frequently make stereotypical assumptions about their sexuality and gender. It seems to be a struggle for many educators to alter their lexicon to use more inclusive language, let alone to practice inclusivity in all aspects of education. While these situations are extreme, they signify the climate in schools; a climate where teachers can say horribly offensive things and not be reprimanded. A climate where teachers can teach in an exclusive way, and not be made to be inclusive of all their students.

Often when attending professional development sessions there is a focus on inclusivity on a very basic level. Inclusivity is simplified and is presented as a change in how educators label our students. This is an important step, but the conversation rarely goes further. While perhaps basic and evident to some teachers, this is a reflection of how far behind we are as educators. Many people are still at the point where, inexplicably, inclusivity is not natural. Instead of being at a point where we can begin to transform education, activists are stuck attempting to stop people from using derogatory, colonial, and aged terms. While this is a change that needs to be made, the foundations of education remain untouched. Education at its core lacks inclusivity. As a result, LGBTQ+ and other marginalized individuals remain oppressed.

It is clear to me that this is a continual problem in many Alberta schools. I came to realize this when I volunteered as a youth mentor and leader at Camp fYrefly. Grace and Wells (2015), the camp’s founders, state that fYrefly is a summer camp for LGBTQ+ youth with a focus on

resiliency, leadership, and social justice. The camp provides youth with a safe space, while also educating them on a variety of topics, including comprehensive sexual health education. During my summers volunteering at camp, I met youth who have never been taught about their sexuality or gender in school; much like me, they had to search to discover themselves. When the youth participated in the camp's sexual health programming, much of the information provided was new and relevant to youth needs today. The youth I observed also appreciated the inclusivity of the camp's sexual health programming due to the lack of inclusivity found in their own schools.

Now, as a classroom teacher, when I talk to my own students, they continue to express the ineffectiveness of sexual health education. I often hear students talking about dating, sex, and sexting. I try to catch potentially harmful situations before they happen and educate students on a case-by-case basis; hardly a comprehensive or sustainable approach.

Broken curriculum. Teacher training is a major concern, but what must be realized is that teachers are guided by an aged and exclusive curriculum. The lack of knowledge, understanding, and inclusion of LGBTQ+ individuals and sexual health education is often reflected in various statistics and news articles. This ignorance leads to improper education and complete disregard for the needs of LGBTQ+ youth. Wood (2017) reports that HIV rates in Alberta are on the rise. In 2015 it was reported that per 100,000 people there were 5.5 cases of HIV, this number rose to 6.63 in 2016. Despite advances in knowledge around HIV/AIDS, these numbers continue to rise. If LGBTQ+ youth were effectively taught about safer sex, then these statistics could, possibly, be reduced.

Many LGBTQ+ students still feel alienated within educational settings as exemplified by a young gay student whose sexuality led him to be ostracized by his classmates, principal, and schoolboard; an event which caused much divisiveness in Edmontonians (Edmonton Journal, 2016). The news article tells of a student wanting to wear a pride flag during a pep rally. He was told by a teacher that he was not allowed to, as it was not appropriate for the "formal" event. This resulted in the student, and many others, standing up to the homophobia and heteronormativity reinforced by the school. The student and community received much support from Edmontonians, other educators, and even government officials; however, reading the comments section of these news articles reveals many negative opinions towards the student, the community, and their supporters. These comments are not isolated to this article alone and can

often be found in local news articles regarding equality, inclusivity, and sexual health education. They not only exemplify the rejection of LGBTQ+ individuals, but also talk of special “privileges” LGBTQ+ individuals fight for (such as inclusive education and anti-bullying policies).



Edward Yatscoff

Save it for your own parade kid.

Like · Reply · 4 · Feb 6, 2016 7:09am



Reg Lauzon · Owner at Retired

The gays and lesbians feel that they have to show off after all the years in the closet. Why can't they live their lives like everybody else ?

Like · Reply · 1 · Feb 6, 2016 7:50am · Edited



Sara Morrison · Austin O'brien Senior High

I am very grateful. And Dylan should be to. It's not the 70s or the 80s. We've come a long way. We have equality. Dylan wears this costume a lot. About 8-10 times this year. No one minds, he is free to be himself. This was just not the time or the place. He sounds like the type of person who needs a lot of attention drawn to himself. Well he has succeeded.

Like · Reply · 23 · Feb 5, 2016 9:52pm

Janet French (2017) reports that Dr. Kristopher Wells criticizes these educational absences, giving some schools a “failing grade” when it comes to inclusive sexual orientation and gender identity policies. Wells supports an inclusive education system that respects all student identities. The response to Wells’ criticism saw Grande Prairie Catholic school board state, “Is Dr. Wells lecturing his U of A students to promote their grade school students being sexually active?” Another commenter states, “The man in this article [sic] is no friend to children, so I’m not sure why he decided he is qualified to grade schools. He was just found out to be running a website that directs children (ages 5-17) to sexually explicit content. So, if those are his standards - thank goodness those schools failed them!”

My desire to engage in research in the area of comprehensive sexual health comes from my own personal experiences and feelings that I was inadequately prepared for sex, adulthood,

relationships, and life as a gay man. Today, I see history repeating itself within the classrooms of my own school. I frequently read news articles and see how many individuals actively fight to keep sexuality and gender out of schools, to marginalize youth, and promote a certain compulsory heterosexual lifestyle. By performing and participating in research around comprehensive sexual health education, I hope to continue to shed light on a contentious issue that is still highly debated and contested within Alberta politics and education.

Research Objective

The problem, then, is sexual health education in Alberta is not meeting the needs of today's youth. Teachers are not properly trained and curriculum is not responsive to the issues LGBTQ+ youth are facing. While I have shared parts of my own journey towards identity to help situate the importance of this research, my research goal was to investigate how are sex, sexuality, and gender identity are or are not integrated into Alberta's current sexual health education curriculum, educational resources, teacher training, and other aspects of public life. This will be accomplished through the examination of existing Alberta sexual health curriculum and teacher training materials, and through the collection of LGBTQ+ youth narratives reflecting on their own experiences with sexual health education. Additional research questions include:

1. Is Alberta's sexual health education meeting the current needs of LGBTQ+ youth?
2. What changes, if any, can be made to Alberta's sexual health education program to ensure it is more comprehensive and inclusive of sexual and gender minorities?

An often absent, yet critical, piece of discourse regarding sexual health education is the opinions of youth. Curriculum is often prescriptive; being created by policy makers and educators, while being heavily influenced by dominant societal beliefs and values. While creating solutions based on research, statistics, and ethical reasoning are very important considerations, what is often missing is direct input from youth on how they want to learn, what they want to learn, and what they need to learn. When examining sexual health education and inclusivity it is essential to have the direct input of the LGBTQ+ youth who have experienced a

sexual health education that did not meet their unique needs. It is my objective to use the narratives of young LGBTQ+ Albertans to supplement and enhance existing research on sexual health education. It is my hope that myself and the participants of the study, are able to invoke positive changes within education; changes that will potentially see the development of inclusive, comprehensive, and relevant sexual health education in the province of Alberta.

Situating the Researcher

Although I am impacted by this research, I am aware that my own experiences cannot and should not be construed to speak for the entire LGBTQ+ community. Having talked to many of my LGBTQ+ peers one of the largest criticisms of academia, and the LGBTQ+ community in general, is that there are certain groups or people that speak for, or “represent” the community as a whole. I am of the belief that as scholars move forward, looking at injustice in the world, we must take intersectionality into account. LGBTQ+ issues cannot be solved if all LGBTQ+ individuals (including trans, two-spirit and people of colour, intersecting with various socioeconomic backgrounds, abilities, etc.) are not considered. As a cisgender, white, able-bodied, gay male, I experience high levels of privilege and need to be aware of these privileges when conducting research and interacting with the broader LGBTQ+ community.

As Armato (2012) states, “All too often, the expectation of working-class people, people of colour, women, and lesbian, gay, bisexual, transgender and queer (LGBTQ) people in academe has been that they will assume the politics, values, and ideals of their upper-middle-class, White, male, heterosexual peers” (p. 2). Too often, it is the voice of the non-marginalized person that is heard over the marginalized community. It is my intent to help provide respect, recognition, and voice to the diverse spectrum of the LGBTQ+ youth identities in this research study.

Defining Terms

Privilege. Before examining the problems with sexual health education, one must understand privilege. Privilege is the inherited benefit of one’s identity (based on race, sexuality, gender, etc.) It is important to understand that LGBTQ+ youth are not privileged and that dominant societal structures and systems are often not working in their favour or to their

advantage. Society is not structured in a way that empowers the marginalized; society is built to empower the privileged. Sexual health education, traditionally, was not created for those who do not fit into the mold of “normality”; rather, it was created for the white, cisgender, able-bodied, and heterosexual majority.

Sue (2003) defines white privilege as, “unearned advantages and benefits that accrue to White folks by virtue of a system normed on the experiences, values, and perceptions of their group.” (p. 137). While Sue’s definition of privilege looks at race, the same principle can be applied to various other identities including sexual orientation, gender, ability, and socioeconomic status. It is the idea that certain people are afforded advantages based on their identity. Privilege is something you are born with; it is the value that society gives you based on your identity.

In the context of examining privilege in association with identity, one must not confuse the idea of privilege with life experiences and obstacles. A white person may still have to overcome many barriers in their life; however, white privilege allows them to navigate situations differently than someone with black or brown skin. While individuals may attribute their position, power, money, etc. based solely on merit, the reality is that privileged individuals typically face less barriers due to their identity. Privilege is not just an idea born of the liberal agenda.

Mujcic and Frijters (2013) performed a social experiment in Australia, where individuals of various ethnic appearances asked bus drivers for a free ride as their bus pass was faulty. The results saw white and Asian testers allowed on the bus over 70% of the time. Black testers were only allowed on 36% of the time. The study moved beyond race and found that black participants who dressed to match a higher level of status were allowed on more often than black individuals who dressed casually. Self-reporting found many bus drivers saying they would allow a person on, regardless of race.

Williams’ (2017) research shows that white individuals were set up for a successful future more than their non-white counterparts. White individuals had more educated families, were expected to inherit money, had more access to human capital, and had better access to education. White families experienced the ability to transfer knowledge and wealth to future generations, whereas Latino and Black families had to overcome social stratification.

Geiger and Jordan (2013) state that privilege can often be invisible. It is evident in the idea that all are equal; yet, ignores the reality that societal structures favour certain attributes. The authors state, “the most significant result for those who have societal privilege is the freedom to ignore that privilege” (p. 263). This ignorance allows for individuals to avoid acknowledging oppression and experiencing discomfort (whether purposefully, or not); thus, privilege and oppression goes unchallenged.

Within this thesis, privilege refers to the idea that a person is born with a social standing. Their identity from birth gives them potentially more or less access, power, and position with privilege acting as an intangible force that reinforces social stratification and often works against people of certain (less desirable) identities.

The highest level of privilege is given to cisgender and heterosexual people. This is due to an idea that heterosexuality is the preferred or default identity, while all other sexualities and gender variances other than biological male or female are considered to be deviant or abnormal.

Heteronormativity. Heteronormativity is the belief that being heterosexual is the preferred or superior sexual orientation. This unquestioned belief has shaped much of the current sexual health education and society in a way that minorities are often excluded, ignored, or silenced. The resistance toward an inclusive sexual health education program can be traced to the dominance of heteronormativity. Oswald, Blume, and Marks (2005) discuss heteronormativity as a cultural device that allows people to perpetuate heterosexuality while marginalizing those who do not. Their research refers to heteronormativity as a composition of the gender binary (i.e., “real” males and females vs. gender “deviants”), sexuality binary (i.e., “natural” sexuality versus “unnatural” sexuality) and the family binary (i.e., “genuine” families versus “pseudo” families) that act together to create a hierarchy where those who conform to the real, natural, and genuine models are legitimate, while those who are deviant, unnatural, or partake in pseudo families are illegitimate.

Heteronormativity is not necessarily an aggressive and overt act; it can be linked to implicit assumptions and seemingly harmless questions. For instance, asking a young man if he has a girlfriend dismisses the idea that the young man may be anything other than straight. It ignores the possibility that the young man may be asexual, gay, bisexual, etc. Schieble and Polleck (2017) believe such questions cause individuals to feel as though they are a part of what

Oswald, Blume, and Marks (2005) label as the deviant and unnatural, thus creating a culture that can make individuals uncomfortable about their identity and afraid to speak out.

Schieble and Polleck (2017) express concern that heteronormativity is not just present in such questions, but has become systemic and entrenched within many institutional practices. This implicit and explicit framing of what is “normal” and “natural” rewards and grants privilege to certain individuals, while punishing others. It causes certain individuals to force themselves to conform or face consequences.

While heteronormativity affects the whole of the LGBTQ+ community, there are individuals within the community that are oppressed for various other reasons such as their race, age, or ability. Thus, it is important to recognize the role of intersectionality and its impact on members of the LGBTQ+ community.

Intersectionality. One is not either privileged or not privileged. There are varying degrees of privilege that one can experience based on their identity. This concept can be referred to as intersectionality. Essentially, the various aspects of your identity either privilege you, or cause you to become less privileged.

Collins (2015) states that intersectionality, “references the critical insight that race, class, gender, sexuality, ethnicity, nation, ability, and age operate not as unitary, mutually exclusive entities, but as reciprocally constructing phenomena that in turn shape complex social inequalities” (p. 2).

Historically, social justice movements have been touted as all encompassing. Feminism, for instance, is the fight for women’s rights. Yet, critics suggest that certain movements, such as second wave feminism, focused on the rights of middle-class white women. Eisenstein (2018) discussed this idea stating that second wave feminism sought to fix the problems that women faced, but often ignored the issues that were more specific to women of colour. Feminism looked at the history of women, but ignored the history of women of colour. Ignoring critical aspects of history such as white suffragettes fighting for the right to be slave owners and thus participating in historical and contemporary oppression of black women.

Eisenstein states that during this second wave of feminism there was a need for a separate, Black feminism that looked at issues that black women faced: social welfare, mass incarceration, and police brutality – issues that did not plague middle-class white women. If

feminism was truly inclusive, encompassing, and intersectional, it would also take into consideration these issues.

Intersectionality is the idea that the research and researcher must not assume that what is right for some LGBTQ+ people will be right for all. It also acknowledges the complexity of sexual health education research in that students of colour may be experiencing more complex issues in accessing proper education than their white counterparts.

Logie and Rwigema's (2014) study summarizes the intersectionality of privileges that some white gays hold. They reveal that queerness seems to be forgivable when one has "favourable" characteristics, such as white skin. Gay men who are viewed as desirable by dominant society are able to have their homosexuality looked passed; however, having dark skin, a disability, or feminine traits in addition to being homosexual is deemed unfavorable (p. 182).

The intersection of sexuality and race. Intersectionality in North American society has often been used by black females but has also been applied to race in general. Black Millennials (2015) write about white gay culture and its transition into mainstream society. They state that the white male has taken on a (unwarranted) leadership role in the fight for queer rights. The achievement of same-sex marriage, while positive, represents a victory for only a portion of the entire queer community. Issues, such as the criminalization of black trans people, continue to exist, but are not given value within mainstream society. Black Millennials also calls out popular culture, where white gays are represented (although disproportionately), but gay men of colour, and other queer identities are not represented. Black Millennials feels that this celebration of white gay culture is based in privilege (both male privilege and white privilege), and that intersectionality is met with societal apathy.

While our society has seemingly progressed past genocide and lynching, many LGBTQ+ individuals are still being discriminated against at alarming levels. For example, recent statistics show that recent years have seen a rise in the killing of trans women of colour. Schmider (2017) states, that in 2016, 27 transgender people were murdered. Schmider suggests this number may be higher due to errors in the reporting based on misgendering by police reports, news stories, and by the victim's families. The Human Rights Campaign (2018) states that this number rose to 28 in 2017 and was at 16 as of August 2018.

Privilege and intersectionality in activism. White men are the largest benefactors of social and physical wealth because the structure of society has, historically, been shaped by white men. Even within the marginalized LGBTQ+ community, white gay men are afforded more power than their non-white peers.

Within the LGBTQ+ community those with higher levels of intersectionality are often afforded less privileges and rights. Case, Hensley, and Anderson (2014) state male privilege was created based on social norms put in place by historically patriarchal societies that were designed by men, and for men (p. 723). These foundational aspects of a predominantly white patriarchal society are still maintained in the present day. For example, Singh (2009) believes that sex and sexuality in Canada has become static and reflective of one ideological source.

Canadians of all backgrounds are informed by Western, patriarchal notions about sexuality. Though Canada is diverse in population, many cultural norms and practices have largely been eroded in favour of a white, European, Christian value system. A highly-gendered depiction of sexuality, moral judgments around “promiscuous behaviour” and the invisibility of people of colour and sexuality have helped to distort many diverse and inclusive expressions of sexuality. (p. 90)

Giwa & Greensmith (2012) state that LGBTQ+ activism, has largely been seen as white. While people of colour have been fighting alongside white people, it is the white person who most often becomes the face of the gay community. Giwa and Greensmith state that it is often believed that the white activist has fought for the LGBTQ+ community, but those interviewed feel that white LGBTQ+ individuals have, largely, only fought for other white people. One participant felt that the blue-eyed white male was an ideal that all gay men had to live up to. White gay men set a standard – in beauty, behavior, and actions – that the rest of the community must meet. Their presumed success within society is falsely assumed to be the success of the entire community.

It seems then, that those deemed to have the highest level of privilege in the LGBTQ+ community are white, cisgender, gay (or bisexual) men. These individuals are often afforded the greatest level of privilege as they almost perfectly resemble the epitomized privileged white,

cisgender, heterosexual male. The only way that differs from the heterosexual male is sexuality, which can be hidden if needed to fit in. Gay, white, cisgender males have their own valid experiences, but space needs to be made for people of colour, trans individuals, and everybody else within the LGBTQ+ community. Kendall (2002) discusses the idea of white gay men speaking on behalf of the entire LGBTQ+ community. Due to their privileged position, white gay men can make decisions that benefit them without thinking of others. White people also silence others, whether on purpose or not, because they have the privilege of being heard. White privilege allows white gay men to be valued, to have their voices heard, and grants them the ability to make decisions. Meanwhile, intersectional individuals within the community are often devalued, ignored, and silenced.

Freire (2015) calls on those with power and privilege to become allies. He states that in order to free oneself from being an oppressor, one must recognize the oppressed as people who have faced injustice and had their voices stifled. Freire states believing in equality is not enough, one must act in order to make equality a reality. This does not mean speaking on behalf of the marginalized and oppressed; rather, it means working as an ally to help them speak authentically. Because of the power and unearned privilege many white gay men hold, it is important that white gay youth not become the sole focus of my research. It was part of my goal to highlight the importance of intersectionality and thus it was important to recognize the intersectionality of the LGBTQ+ community and to receive input from many diverse segments of our community. With this research, I hope to provide a platform for LGBTQ+ youth of varying identities to share their stories and to affect change in sexual health education.

In an attempt to support and empower my research participants, and to allow them space to communicate their narratives that are rarely asked about and appreciated, I attempted to continually check my privilege and focus on making space for those who are often not afforded such an opportunity. I allowed members of my community to review my work in order to ensure it was, in fact, inclusive and not misogynistic, whitewashed, or problematic in any other way.

The Anti-Defamation League's (2011) resource, "If we could end hatred imagine what more we could do..." has adapted a "Pyramid of Hate" that highlights various levels of discrimination. The Pyramid of Hate highlights levels of oppression, from the blatant to the subtle. At the highest level, hate results in genocide, which is "the act or intent to deliberately

and systematically annihilate an entire people.” Below this, perhaps more common, are bias-motivated acts of violence including murder, rape, assault, and threats. Nearer the bottom are subtle institutionalized acts, such as economic and educational discrimination. Finally, the bottom level highlights stereotyping, normative language, and jokes as a form of discrimination. This pyramid, while a part of a resource about racism, can also be applied to LGBTQ+ youth, especially those with multiple oppressed identifications who experience hate on numerous levels. Educational discrimination, which takes various forms such as silencing, ignores the narrative of LGBTQ+ youth and allows for the normalization of hate. The acceptance of these “minor” and perhaps covert acts of hate allow for the more overt and “major” acts to occur.

Awareness of intersectionality. Research, activism, and academic thought need to be guided by intersectionality and inclusivity. Solutions must be beneficial to those most oppressed. The goal of this thesis was not to examine intersectionality in relation to sexual health education. That is a much more complex issue that would require further exploration; however, as a researcher, I did want to attempt to be aware of privilege, be inclusive of all individuals and intersecting identities, and do more than pay lip service to the entire LGBTQ+ community and other intersecting communities.

The purpose of including intersectionality at all is to, hopefully, give voice to those who are not always given voice. While research always has the potential to liberate individuals, it is not expected for this research to solve the problems of LGBTQ+ individuals with intersecting identities.

Chapter Two: Literature Review

The Purpose of Sexual Health Education

Sexual health education is defined by Teaching Sexual Health Alberta (2018) as teaching students about their social, physical, mental and emotional well being. Sexual health education is achieved through an examination of numerous topics including sexuality, gender, healthy relationships, and decision making regarding the individual and others. The purpose and role of sexual health education, however, remains a much-contested issue. Scholars, such as Grace and

Wells (2015) believe in a comprehensive and inclusive sexual health education that allows youth to know their bodies and understand their sexuality and gender identities.

The World Health Organization (WHO) defines sexual health as, “a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity” (2010, p. iv). The World Association for Sexual Health (WAS) reaffirms this stating, “sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence” (2008, p. 1).

The WHO (2010) states that certain responsibilities regarding sexual health fall within the domain of education such as, “providing comprehensive education on sex and relationships to young people in school” and, “training in sexuality and sexual health education for health workers, teachers, social workers, youth workers and other professionals...” (p. vii). The WHO believes that sexual health education should examine a variety of topics including human rights, diversity, gender equality, gender norms, sexual and gender identity, sexual choice, condemning violence, and building positive social norms. The World Association for Sexual Health supports this belief, stating that everyone has the right to comprehensive education that is age-appropriate, scientifically accurate, culturally competent, and grounded in human rights. They also believe that comprehensive, rights, and evidence-based sexuality education should be mandated at all levels of education and should promote “fully informed, autonomous decision-making” (p. 5).

The WHO places value on teacher training by calling on the field of education to provide any person involved in the teaching of sexual health education with training to ensure the information they provide to youth is, “accurate, evidence-based, appropriate, and free from discrimination, gender bias and stigma” (2010, p. 8). They also call for curriculum to be reviewed and updated on a regular basis to ensure youth have information to make informed decisions.

On the other end of the spectrum, there are people such as Karl Germann who refuse to acknowledge youth’s identified gender. Germann went against recommended provincial guidelines that are stated in the document *Guidelines for Best Practices: Creating Learning Environment that Respect Diverse Sexual Orientations, Gender Identities and Gender Expressions* (Alberta Education, 2016). The guidelines make recommendations such as

respecting students rights to self-identification, minimizing gender-segregated activities, providing safe access to washroom and change-room facilities, and ensuring safety and inclusion for all students, staff, and families. The Council of Catholic School Superintendents of Alberta, led by Germann, wanted to draft their own curriculum as they were worried that a new curriculum would be “very prescriptive” and would require them to cover topics that were contrary to Catholic education such as contraception and same-sex relationships. Despite not being approved for a government grant to develop their own curriculum, Germann stated the project would go ahead using funding from Catholic school districts across the province (French, 2017c).

Individuals, such as Germann, fall into a category of people who believe sexual health education should reproduce a norm that sees youth fitting into a structure that has been established for many years by the religious right (Carlson, 2012). The belief that many progressive educators hold is that sexual health education should be focused on teaching youth about their bodies, healthy relationships, and safety; yet, in many cases the original, and perhaps true, purpose of sexual health education is often very different.

Carlson (2012) states that historically the goal of sexual health education has been to suppress adolescents in their sexual prime and to focus on the development of strong marital relationships (p. 2). Sexual health education seeks to fit youth into existing societal structures; societal norms have been created and it is the job of sexual health education to ensure that youth follow these norms. This means that youth must perform their gender in a way that is deemed normal. Youth must conform, rather than try to change the expectations of men and women. Carlson views sexual health education as a way to perpetuate ideas of what sex should and should not be, which “traditionally” was only to be had between two, monogamous and married, heterosexuals (p. 11). Boas (2012) agrees, stating that schools, especially elementary schools, typically stay within societal lines that define how one should, and should not act, stating that “lines epitomize organization – they are neat, manageable, and safe” (p. 131). It is the goal of this research, to examine how these heteronormative lines can be erased in order to promote inclusivity and to teach youth what they must know to navigate sex, sexuality, and gender in their lives.

Perspectives on Sexual Health Education

At the core of most sexual health education programs is an intent to ensure the safety and health of youth; however, how this is achieved is where there is often large disagreement. There are many perspectives on health education. They are similar in that they teach about the body and are touted as being taught out of a concern for the safety and education of youth. They differ in that the true purpose of sexual health education can actually be to reproduce what dominant society believes to be right. Forms of sexual health can fall on various spectrums. For example, sexual health education can punish and confine while for others it can be liberatory. Likewise, sexual health education can be based purely on religious belief or grounded in science.

Carlson's (2012) historical observations position most traditional forms of sexual health education as focusing on heterosexuality. Homosexuality, amongst other topics such as abortion and prostitution, have historically been viewed as immoral and problematic. Sexual health education resources propagated fear around homosexuality and aimed to make those with such tendencies to feel shame and guilt (p. 14). Overall, sexual health education worked to combat homosexuality and other "deviances," while promoting the morals and ethics of the political and religious right. For example, Carlson (2012) states that Western society and education had transformed to become generally accepting of homosexuality; however, both continue to marginalize queer people. Rather than viewing homophobia as a problem, sexual health education often legitimizes and institutionalizes negative thoughts and attitudes towards LGBTQ+ individuals. Homosexuality continues, to be portrayed as something that is preventable, curable, and a negative alternative to heterosexuality. Even with a fact-based approach, homophobia is reinforced due to homosexuality being discussed alongside negative discourse, such as disease and crime.

Abstinence education. Abstinence education is based in sexual purity and morality and is not necessarily based on fact and science. It is important to note that despite research into the ineffectiveness of such an education, it is still taught in many contexts. Sethna's (2010) research discusses a movement for social and sexual purity that began in England in the late 1880s. This movement spread West and became, what Sethna refers to as the abstinence agenda. The abstinence agenda sought to put a stop to prostitution and sexual disease, while promoting Christian morality. This movement saw danger in sexual ignorance and the need for sexual

health education, while being concerned that talking about sex would promote sexual exploration. During the early 1900s, the abstinence agenda also sought to portray people of colour, people of certain religions, and homosexuals as sexual deviants and animalistic.

Elia and Eliason (2010a) discuss contemporary forms of abstinence education, which see students taking virginity pledges and discussion of abstaining from sex for health reasons promoted by abstinence curriculum. Abstinence education also focuses on the heterosexual relationship, marriage, and reproduction. When sex does occur, it should be for procreation; certain sexual acts, such as oral sex, are disapproved.

In Fisher's (2009) research, he found abstinence-only education was highly ineffective, inaccurate, and made students feel othered. Students described how abstinence only education took a toll on their mental health. The othering nature of abstinence only education led to students feeling depressed and suicidal. They were able to seek out information and the truth on their own and discover themselves outside of education (p. 75). While the fact that these youth were resilient enough to use the Internet or seek out community resources should be celebrated, it also highlights the inability of the education system to meet the needs of these youth.

Elia and Eliason (2010) agree, stating abstinence-only education has had a huge impact on how sex education has been carried out in schools. "Sexuality education has not changed much since its beginnings in the early twentieth century. The focus has always been on promoting heterosexual, procreative sexuality within the confines of marriage" (p. 33). Likewise, Boas (2012) describes that by remaining neutral, and not acknowledging the existence of LGBTQ+ individuals, teachers are reinforcing heteronormativity (and the erasure of identity). By not teaching an inclusive and comprehensive sex education, teachers continue to perpetuate heteronormativity, and disallow for their queer students to feel normal.

Within K-12 education, the teaching of topics such as abstinence, which is presented as a way to avoid pregnancy, can also be harmful to LGBTQ+ students. Carlson (2012) states how abstinence only education became popular in the 1990's and continues to be taught in today's contemporary classrooms. Abstinence only education is supported by the religious right, and while it seemingly targets all students, it directly marginalizes LGBTQ+ students. Carlson refers to abstinence only education as a pedagogy of fear, where youth are taught to fear sex whether it be because it is unsafe or immoral. Carlson's historical analysis sees abstinence only education

being pushed upon youth, even in public schools, as a form of propaganda. Not only is abstinence education prescribed to youth through pedagogy, but also through so called educational events that see students walking through “haunted houses,” which depict sins such as homosexuality and premarital sex.

Abstinence only education not only seeks to suppress sexual desire, but also homosexuality. Being abstinent means waiting for marriage; thus, those who “choose” to be homosexual need to either abstain for life or enter a heterosexual marriage. The language used in abstinence only education also allows for many families and youth to be illegitimated due to their non-traditional family structure or identities. For example, abstinence only education often does not mention same-sex partnerships, single-parented families, or adoption. Thus, this highly exclusive language ignores students and families from these populations as it does not recognize them within the classroom setting (p. 109). The issue here is not that LGBTQ+ students are not being included in abstinence only education, it is that their identities are being ignored all together. Their sexuality and gender are not acknowledged as existing or as valid. Validity is only afforded to those who have procreative sex, within the bounds of heterosexual marriage. The process of invalidating LGBTQ+ individuals steals the opportunity for power and place within society while maintaining dominant, heteronormative societal structures.

Absence of power. Combined, the dominant narratives in sexual health education of heteronormativity and abstinence education have served to discredit and diminish LGBTQ+ topics and voices. Elia and Eliason (2010) state that ignoring or silencing LGBTQ+ topics can be emotionally and psychologically damaging to LGBTQ+ youth as the lack of recognition leads to individuals feeling invisible. When LGBTQ+ youth are not acknowledged during sexual health education, they may develop the feeling of being “the only one in the world” (p. 37). While not explicit, seemingly neutral topics can cause LGBTQ+ youth to question their worth. This pedagogical neutrality reinforces the idea of heteronormativity or the assumption that heterosexuality is the norm. Enson (2015) highlights how gender is a social construct, which is reinforced to students through the media, self-policing, education, and health services. She states that when marginalized individuals interact with teachers and health practitioners, who may not be vocal about LGBTQ+ issues, they may have feelings of deviancy knowing they do not fit into the social norm. These beliefs cause stress and are harmful to the development of a positive

sense of self. Enson states that such negative situations often lead to sexual and gender minorities avoiding accessing services or engaging in education (p. 75).

What Enson also skillfully points out is how LGBTQ+ individuals develop a sense of being an “other.” If LGBTQ+ support is not explicitly stated, many individuals may assume they are not normal or deserving enough to access health or education. They have been taught, whether explicitly or implicitly, to be aware that these services tend to the (hetero)normal, not to LGBTQ+ individuals.

The explicit erasure of queer and other identities is purposeful. McNeil (2013) reveals many American states require sexuality to be viewed in a negative light and require educators to not promote the “homosexual lifestyle”. Louisiana, for example, prohibits the use of “any sexually explicit materials depicting male or homosexual activity” (p. 830). Oklahoma provides HIV/AIDS education that blames homosexual activity for the spread of AIDS. Twenty-two other states have abstinence only based education that is heteronormative and erases the existence of LGBTQ+ people. Despite moves toward inclusive LGBTQ+ policy, McNeil argues the “traditional” family is still the model for “correct” family, and all other families, while noted and “celebrated,” are deemed to be inferior. Often, curriculum is conflicting; it can call for equality, but can also be systemically heteronormative and causes students who are not classified as “normal” to feel like an “other.”

Friend (1993) states that systematic exclusion operates by having the heterosexual hegemony ignoring and denying the presence of LGBTQ+ people. Curriculum that ignores LGBTQ+ youth, proceeds to delegitimize them. This hegemonic discourse operates through systematic inclusion by only including LGBTQ+ people in the discussion of negative topics, framing homosexuality as dangerous. The inclusion of LGBTQ+ identities in the discussion of only negative topics, such as disease and sin, allows people to make false correlations. LGBTQ+ then becomes synonymous with only negative perspectives and influences.

Dated views. Heteronormativity, and the fight to maintain the status quo, is not only a problem within Alberta. Theresa Do (2015) states that in 2015 a new sexual health education curriculum was proposed in Ontario, a province which has not seen any changes to their sexual health education curriculum since 1998. The goal of this new curriculum sought to provide an inclusive and comprehensive sexual health education that students not only need, but also have a

right to learn. This curriculum sees topics such as consent, sexual orientation, and gender identity being added to existing classroom topics. The curriculum also responds to contemporary issues such as sexting and the safer use of technology. Supporters of the new curriculum praise the balance between prevention and positive messages about sex and sexuality.

Csanady (2016) reports that almost half of Ontarians approve of the curriculum. Amongst religious groups, support wanes with only 20 percent of Evangelical or Pentecostal Christians supporting it. Those who identified as having no religion were overwhelmingly in favour of the new curriculum with 82 percent stating support. Those in opposition state that parents should be in charge of teaching sexual health, as they would be able to align sex education with their own beliefs. Parents feel that the new curriculum pushes ideologies and threatens their children's innocence. Some feel that their own children should not have to learn about same-sex relationships and gender identity in schools. Herein lies the first major issue of inclusivity of LGBTQ+ youth in education; curriculum does not reflect the needs of LGBTQ+ individuals; rather, it reflects the needs of society as perceived by the dominant heteronormative narrative.

Societal needs. Sexual health education is not only being taught to benefit youth, rather it is to benefit society as a whole by participating in heteronormativity. Mirk (2016) states sex-education films have not become better over time; rather, the “content, messages, and accuracy of sex-education films have fluctuated with the moral and political forces of each era” (p. 21). Mirk states that sexual health education reflects what society and politics dictates is proper; not necessarily what youth want or need. Meanwhile, Carlson (2012) cites Foucault's theory of biopower stating those in control of the curriculum are trying to assimilate and control those on the margins of society. Foucault (1977) states that biopower in education sees subservient students submitting to the educational institution. The institution manages students in a way where they become heterogeneous, regulated, and controlled.

Carlson continues stating sexual health education works on behalf of hegemonic power (taking various forms, but typically the privileged) to ensure youth do not rock the proverbial boat. In order to facilitate change, it is time to challenge this hegemony in a way that not only sees youth being given a voice in the discourse regarding their sexual health education, but also alters sexual health education to reflect the needs of youth rather than those who hold the greatest positions of power and influence.

The proposed purpose of sexual health education is to prepare youth in an inclusive and comprehensive way; yet, historically and currently, sexual health education acts as a socializing agent that oppresses and marginalizes many young people. The purpose, then, of my research was to dismantle the socializing aspects of sexual health education in order to bolster inclusion and comprehensiveness for the benefit of LGBTQ+ youth. This research is one attempt to legitimize sexual and gender minorities in our schools, while deconstructing oppressive forces within sexual health education that would render them invisible and silent.

Issues Within Education

Oppressive foundations. At the core of education lies curriculum. Curriculum acts as a foundation on which education is built. Teachers look to curriculum for guidance on what to teach. If the foundations of education are not supportive of LGBTQ+ youth, then education in general will not be support of LGBTQ+ youth. As Elia and Eliason (2010) suggest, “sexuality education has been exclusionary for the most part leaving LBGTQ+ youth out of the educational picture” (p. 30). These authors also suggest the “heteronormative mode” of sexual health education is divisive and harmful to LBGTQ+ youth (p. 45).

Likewise, Robinson (2005) believes youth, especially in early childhood education, are often viewed as asexual; that is, sexuality is not yet relevant to their lives. With the mention of sexualities and genders that are not the ‘norm’, people often conclude children are too young to be dealing with such things. The reality is, there are children, of all ages, that are dealing with sexuality and gender that fall outside the ‘norm’. For instance, children can be a part of a queer family, or have queer family members. Children can also begin questioning their sexuality and gender at a young age. Despite the idea that children are asexual, heterosexuality is consistently pushed on them. Children’s gender is policed by educators, parents, media, and society in order to ensure the child grows up within the confines of normality and heteronormativity. Robinson highlights how an examination of children’s literature revealed that many stories ended with a happily ever-after heterosexual relationship. This discourse reinforces the idea that in order to be happy, students must be heterosexual. Furthermore, Røndahl (2011) states such silencing of gender and sexuality can eventually lead to feelings of low self-worth, and feelings of deviance and abnormality. Enson (2015) identifies how educators may not explicitly teach students in a

heteronormative manner; but, language and lessons can perpetuate heteronormativity and allow ‘normal’ students to develop the belief that queer students are abnormal; this can lead to bullying, and physical violence. In cases where queerness is discussed in the classroom, it is often talked about in a negative manner.

MacDonald (2006) believes LGBTQ+ youth are often ignored due to the idea that all children are inherently heterosexual. This also gives credence to the idea that children are turned into “homosexuals” through the influence of adults. This belief not only marginalizes the LGBTQ+ child, but the LGBTQ+ teacher who is seen as having an agenda. Due to these beliefs, it is thought to be education’s job to protect the child from a perverse queerness. MacDonald identifies an additional issue with how society and education sexualize homosexuality, but continue to overexpose youth to heterosexuality as if it were any different.

Freire’s criticisms of education continue to be valid when discussing contemporary society. Freire (2015) states, that the traditional teacher’s task is to fill students with knowledge. This knowledge differs based on the teacher, but is often shaped by the teacher’s own experiences. If a teacher’s narrative shapes what they teach, then the teacher who is comfortable within the institution is at risk for perpetuating the institutions’ injustices.

The filling of the student’s mind is referred to, by Freire, as the banking method of education. The teacher is providing the student with the gift of knowledge with the student showing gratitude. Alberta’s current education system sees educators, regardless of their identity, teaching predominantly heterosexual epistemology. The teacher is to fill the student’s head, regardless of the student’s sexuality or gender, with heterosexual knowledge that has been deemed suitable by those who create curriculum. Thus, LGBTQ+ students must participate in a heteronormative education system, as this form of education is deemed to be the most relevant and valuable.

Freire believes that transformative educational leaders need to engage in a “quest for mutual humanization” (p. 75). Educators must work with students to seek and co-create knowledge rather than bestowing knowledge upon students. Yet, if what educators are teaching is based solely on mandated curriculum, the quest for mutual humanization rarely occurs. Students should be free to, and perhaps even encouraged to, question truth, knowledge, and reality. Through active questioning, students can learn to challenge and change the status quo.

Awareness (or critical consciousness) disallows for oppression to occur and can aid in the dismantling of oppressive institutions.

Carolyn Shields (2012) states that educational leaders need to “critique underlying social, cultural, and economic norms, but also to offer promise...” (p. 19). Transformative educators seek to not only change their immediate surroundings, but to also reorganize society. It is the job of the educator to ensure that oppression is not actively occurring in their classroom by educating themselves and being able to recognize oppression.

Taylor and Peter (2011) agree about the harmfulness of heteronormativity. Their study reveals that the more students strayed from the norm, that education perpetuates, the more likely they were to be harassed by their peers. At one point, Taylor and Peter call upon Canadian law that states all human beings have certain rights. They sarcastically state that queer students must not be human as they are not treated as such in their schools. LGBTQ+ people are often viewed as less than their heterosexual or cisgender peers. While the queer students that Taylor and Peter are referring to are human, their sarcasm reflects the fact that they seldom have the same rights and privileges as their heterosexual and cisgender counterparts. The norm is reinforced by heteronormative curriculum, but as Freire states can be broken by educators who seek to liberate. The question then becomes, are teachers able to aid in the liberation of their LGBTQ+ students? What role might the sexual health curriculum play in this liberatory pedagogy?

“Special privileges.” As an illustrative example, Gloria Filax (2006) describes how Dianne Mirosh, an Alberta government official in the 1980s, led an anti-LGBTQ+ movement stating, “gays and lesbians are having more rights than anybody else... a lot of heterosexuals feel uncomfortable with this” (p. 115). Opinions such as these are echoed throughout Alberta’s history and anti-LGBTQ+ sentiments continue to be found within contemporary contexts. When individuals believe that LGBTQ+ people are the privileged ones, it blocks progress toward achieving LGBTQ+ rights. Burtch and Haskell (2014) agree, stating that often the fight for equality is labelled as the “gay agenda.” These authors discuss the hypocrisy in the socializing nature of education (and other such institutions), which work to promote heterosexuality and “traditional families” on a daily basis (p. 240). Burtch and Haskell also state it is not just LGBTQ+ youth that suffer from heteronormativity; it is all those who fall outside the strict confines of gender norms and “traditional” sexuality (p. 244).

Gowen & Wings-Yanez (2014) suggest that LGBTQ+ youth are not looking for a special sexual health education program of their own; rather, they are looking for an inclusive program that recognizes them as human beings. LGBTQ+ youth want to understand themselves and the world around them, this means a sexual health education program that is relevant to everyone and addresses issues that LGBTQ+ people experience. When discussing heterosexual relationships, LGBTQ+ youth are often left out of the conversation and not shown examples of a healthy relationship that they can relate to. Solutions to this include using more inclusive and less heteronormative language, and the checking of bias to ensure that all students are being taught in a positive manner (p. 797). Checking bias would also help to combat the negativity of exclusive practices, such as abstinence only education, which criticizes those from non-traditional families and privileges morality and religious values.

Teacher training. In a society influenced by heteronormativity inclusion does not come naturally. Everyone, including teachers, have been socialized to work within the heteronormative confines of society. Teachers with the best of intentions may still reinforce exclusive classroom practices while teaching a curriculum that is not supportive of LGBTQ+ youth.

Lee and Carpenter's (2015) research examines preservice teachers in New Zealand. They found that preservice teachers identified their undergraduate education to be lacking in LGBTQ+ content. One student research participant suggested that lecturers often talk about diversity, but their lectures would lack any mention of marginalized groups (including LGBTQ+ people). Students also realized that at some point in their teaching career they would come into contact with an LGBTQ+ student, or LGBTQ+ families, and wondered why they were not being taught how to engage in these likely situations. One student stated that during her practicum it was perceived that one student's poor behaviours were blamed on the fact that his mom was a lesbian. The teacher felt unprepared to speak up on his behalf, and thus homophobia went unchallenged.

Schneider and Dimito's (2008) research also reveals how many Canadian educators felt they were ill prepared to talk about queer issues and lacked proper support to do so. Wickens and Sandlin (2010) reinforce this finding by examining teacher training programs, which reproduce heteronormativity. In this example, teachers were taught to model and teach

heteronormative values. Those teachers who want to stray from the idyllic normative curriculum do not feel safe and are not supported.

Bias. Freeman (2014) believes classrooms need to be safe physically and psychologically in order for students to learn. To do this, educators must be aware of their implicit and explicit biases. Implicit biases occur when an individual rejects stereotypes and perhaps even supports social justice; but, has unconscious biases. Freeman cites research by Greenwald and Banaji (1995) that found individuals believing themselves to be unprejudiced; yet, displayed some form of implicit racial bias. Within the classroom, Freeman believes this bias can disadvantage certain groups of students as studies have shown that students who have been stereotyped often underperform.

Queering Education. Heasley and Crane (2012) state how current patriarchal and heteronormative systems of education must be disassembled. Such systems are damaging to all students, even the ones that they seek to privilege (p. 104). Heasley and Crane's solution is to "queer" education. By queering education, toxic masculinity and heterosexuality are challenges removed and space for queerness (difference) is made. These spaces are beneficial to all individuals who do not identify with the norm and allow for all youth to more fully explore gender and sexuality in a safe environment. These spaces allow males and females to not be restricted by expected gender behaviours and to learn about, and become comfortable with, difference. Through disruption of normativity, society is able to, "engage the overall project of democratization and the possibility for the enhancement of human potential" (p. 115). Heasley and Crane conclude by suggesting that queering space is not beneficial to only queer people, but to society as a whole. Queer space, teaching queer topics, and promoting inclusion are not privileging queer youth; rather, such tactics are promoting growth for all of society.

It seems there is a belief that heterosexuals deserve the same levels of "exaggerated" visibility, and rights, as queer people. This highlights the repetitive argument of falsely perceived prejudice against the privileged. Wickens and Sandlin (2010) state that the oppressors feel they too are being discriminated against by not being able to discriminate themselves. It leads to cries of oppression from those who benefit from heteronormative, and hegemonic systems of oppression. These instances highlight heterosexual and cisgender privilege. These ideas ignore

the fact that heterosexuality, and conforming to the gender binary, is consistently rewarded within society (p. 661).

School climate. Schools and educational organizations in Alberta are fighting to be inclusive. Policies and guidelines are being promoted by the socially progressive governments and enacted by school administrators and educators who care; yet, school climate is still not necessarily conducive towards inclusivity. The want or desire for an inclusive school does not create an inclusive school. There are a variety of factors that contribute to school climate, and while many schools promote inclusivity, reality may be vastly different. In their research, Taylor, Peter, et. al. (2015) demonstrate that conditions for Canadian LGBTQ+ youth in education may be improving, but heteronormativity, exclusivity, and bullying still exist. Their national study shows 49% of educators reported hearing homonegative (sayings such as, “that’s so gay”) remarks daily or weekly, with 56% of LGBTQ+ students reporting hearing these comments. They also found that one in five participants reported hearing their teachers using derogatory language, with the rates of derogatory language rising when reported by Catholic school participants. GSAs were most prevalent in high schools, with over half of the schools reporting having GSAs; however, this rate was lower in lower grades with only one in four participants reporting that their junior high school has a GSA.

While almost all participants reported that it is important for students to have someone to talk to, only 73% of educators indicated they would be comfortable discussing LGBTQ+ topics with students. Thirty-seven percent of educators reporting having participated in LGBTQ+ inclusive efforts with their schools; however, Alberta was noted to have regions that reported this participation as low as 15%. It was also noted that teachers felt their job security was jeopardized when discussing LGBTQ+ issues; with 34% of non-secular and 55% of Catholic teachers feeling their jobs would be at risk. Thirty-three percent of teachers reported feeling unprepared, lacking training, and lacking resources. Teachers also reported fear of parental opposition, administration opposition, and opposition from religious figures as major obstacles to LGBTQ+-inclusive education.

Youth, especially marginalized youth, need advocates working within the education system; however, many teachers still seem afraid and unprepared to advocate for them. Overall, less than 60% of educators reported that they felt their school was safe for trans youth, and under

80% reported they felt their school was safe for LGB students, or students who did not perform their gender roles as society sees fit. Language, inclusivity, and the LGBTQ+ community is not always easy to understand. There are a wide variety of identities, new terminology, and changing definitions; however, this does not mean people can disregard how important this inclusion is in our schools.

The Alberta Context

Curriculum. Over the past two decades sexual health education has remained somewhat stagnant as Alberta's current curriculum is sixteen years old. A review of Alberta's current Program of Studies for *Career and Life Management* (2002) reveals keywords such as queer, lesbian, gay, homo*, etc. are absent. Career and Life Management is a required course for students in high school. Secondary students, some of whom are questioning or exploring their identities, are not necessarily being taught about the full spectrum of sexuality and gender. While some, progressive, educators may choose to include LGBTQ+ topics and issues, it is not mandated by the curriculum to cover these topics in a certain (inclusive) way, or at all.

Program of Studies. Ambiguous curricular goals from the *Health and Life Skills Kindergarten to Grade 9 Program of Studies*, such as, "examine a range of behaviours for handling sexual involvement" could easily be extended to include sexual and gender minorities, if the teacher so chooses (p. 8). The Health and Life Skills curriculum is another mandatory curriculum taught to students from kindergarten to grade 9. While Alberta Education talks about the need for diversity and inclusion, curricular content is stagnant and originates from a time where heteronormativity was clearly the dominant discourse. The current curriculum does not promote sexual and gender equality, rather it reproduces exclusive structures that have been purposely put in place to create "normal" citizens that do not challenge the desired status quo.

Educators are expected to be inclusive; however, their job becomes harder when they are teaching a curriculum that does not lend itself to inclusivity. Inclusivity needs to become natural and easy; a problem if curricular documents, textbooks, and resources continue to reproduce exclusivity. It is the job of the educator, then, to go beyond curriculum in order to truly support their students through the inclusion of LGBTQ+ content that is framed in a positive and constructive manner. This is only effective for the educators who choose to do this and remains

inconsistent across individual educators. Educators must also avoid the stigmatization of LGBTQ+ people by avoiding systematic inclusion, which sees youth associating LGBTQ+ individuals with negative topics such as disease and sin.

Revamping the curriculum. Within the past five years there has been a push towards revamping Alberta's current sexual health education comparable to Ontario. Grace and Wells (2015) both have an ideological stance that sees youth as independent and capable. While youth still need informed guidance in order to make decisions regarding sex, sexuality, and gender, they are fully capable of making these decisions. The information needed must be given in a safe, age-appropriate, and inclusive educational space that accommodates students of all identities. Grace and Wells have no intent of influencing youth decisions; rather they simply want them to be prepared to make their own decisions while also feeling safe, comfortable, and included.

French (2016) identifies Dr. Andre Grace as a critic of Alberta's sexual health education. Grace states that teens are not being prepared for sex, and thus Alberta is seeing consequences such as higher rates of HIV. Grace believes youth are capable of navigating sex and sexuality if given the proper tools, a belief based in statistics; however, the opposition believes otherwise, despite being presented with evidence supporting Grace's claims. Within the comments section of the article Grace is criticized by one commentator who wrote, "...next time keep your bias and ideological agendas in check and cite some hard research."

Alberta's Education Minister David Eggen has stated his intention to review the current sexual health education curriculum. Minister Eggen has already shown support for more inclusive policies in schools and wants to see more inclusion in health programs. With Eggen wanting to transform the sexual health education program to be more inclusive, Alberta's future curriculum can most likely expect similar levels of opposition as the Ontario curriculum received (CBC News, 2015). With this curricular review now underway, research on the needs of Albertan students is timely and relevant.

Despite the NDP and Eggen supporting inclusiveness and comprehensiveness, the new curriculum will not be written until 2018 for K-4, 2019 for 5-9, and somewhere between 2020 and 2022 for grades 10-12 (French, 2017a). This means that there is potentially a five-year wait before changes in sexual health education will be seen in high school classrooms, and it is still

not evident whether or not this new curriculum will include the inclusive changes necessary to fully support LGBTQ+ youth. Now is the perfect time to give youth a voice and allow them to participate in the co-creation of a new inclusive sexual health education curriculum.

French (2017b) reports that Edmonton Public School Board is in the process of developing a more local and comprehensive sexual health education curriculum with a focus on, “evidence-based, age-appropriate, medically accurate, comprehensive, consent-based, and inclusive sexual health education.” There are two apparent sides that have polarizing opinions on sexual health education. One tries to restrict what is told to youth in order to socialize and moralize them in order to prevent them from engaging in sexual activities. The other side takes an approach that sees youth exposed to sex and sexuality with the hopes that being prepared will allow for them to be safe and healthy.

Teachers work with dated curriculum in many subjects, using their expertise and education to supplement curriculum; however, teachers in Alberta often struggle to supplement the sexual health education program with their expertise due to the fact that a majority are not trained to be sexual health educators.

Teacher preparation. Taylor, Peter, et. al. (2015) questioned Canadian teachers on a variety of questions regarding preparation and school climate. Despite many educators wanting to provide students with a safe and inclusive environment, “Almost two-thirds of participants who had completed their B.Ed. degrees in the previous five years reported that they had not been at all prepared for sexual and gender diversity education in their B.Ed. degrees” (p. 24). Educators reported that few courses incorporated LGBTQ+ content. Only one-third of participants had attended professional development on LGBTQ+ education.

There have been advances in LGBTQ+ rights; however, evidence shows that LGBTQ+ people in Alberta are still suffering from oppressive educational systems. A local university study by Kinkartz, Wells, and Hillyard (2013) found that 17% of the University of Alberta undergraduate student population surveyed identified as non-heterosexual. While the authors admit these numbers may be inflated due to selection bias, the statistics reveal there are many LGBTQ+ individuals on campus. These non-heterosexual individuals are largely hidden with forty-seven percent of minority students stating they thought they would be stereotyped if they came out, with 31% also stating they feared derogatory comments. Fear of intolerance rose with

the addition of intersectionalities such as age and race. The fears of minority students show that, while the University mandates an inclusive environment, the university climate cannot escape the impacts of heteronormativity. The study also reveals that students were presented with heteronormative experiences, not only from their peers, but also within their classes. One student stated, “It is common to have an exercise for a student to explain what celebrity they find attractive or what they look for in a person they would date” (p. 27). Such activities would impose a supposed sexuality and gender upon the classes’ students. After graduating high school, students who continue with post-secondary education are still faced with heteronormative educational environments. By allowing heteronormativity to be reproduced in professional programs, such as teacher training, universities normalize such thoughts and ideas. If teachers are not learning inclusivity, then they may not teach it. Experiences of heteronormativity in professional training programs is not only harmful to students, but also allows heteronormativity to be reproduced in all aspects of the professional world (e.g., policy makers, lawyers, doctors, etc.). Thus, LGBTQ+ people are potentially pressured by their doctors, lawyers, and teachers to be and act “normal.” It is important then, that educators lead the way in transformation and change.

Since inclusivity is not mandated by the Alberta K-12 Program of Studies, it is the ethical responsibility of educators to promote inclusivity within their practice; however, exclusivity and heteronormativity are also enforced at the post-secondary level. If educators, as well as other professionals, are not being taught to be inclusive, then it is unlikely that inclusivity will be reproduced in our schools or larger society.

Support for inclusivity. Sexual health education has been a focus of increasing public debate in Alberta, evident by the numerous news articles focused on sexual health education. The current rejection of “gay rights” is similar to the stance of some Albertans from the 1990’s. The promotion of inclusive and comprehensive sexual health education, especially in relation to LGBTQ+ students, is often combatted with prejudicial rhetoric based on the “protection” of vulnerable youth from the “gay agenda” and “explicit” materials. This defense of youth, however, is not based in research, but in a personal and/or religious belief of what is wrong and right for youth to learn. For instance, Lisa Bourne (2017) quotes Reverend Dave Welch, who is from Houston, Texas, stating that children “are to be protected, nurtured, and educated, not used

as a social experiment of a radical political agenda” in response to the local school board proposing adding LGBTQ+ history into the curriculum. Even if teachers want to support LGBTQ+ youth, they may face potential backlash from the community.

Reading the comments sections of news articles, one can see adults arguing that children should not be exposed to “explicit” sexual health education and those that believe otherwise have an agenda (even if their belief is based in scientific facts). These opposing adults do not believe in the abilities of youth and feel they must advocate for them, so they are not exposed to knowledge that is deemed unfit for them.

Hampshire (2017) reports that in May of 2017 an Edmonton Catholic School Board trustee was removed from her position due to stating her opinion that sexual health education needed to be revamped, and for her support of LGBTQ+ students. Educators that support inclusivity are potentially putting themselves at risk; some may be ostracized while others may lose their job.

Resisting inclusivity. Analysis of the current situation about sexual health education in Alberta indicates that three major trends contribute to a widespread resistance to inclusive sexual health education. They are heteronormativity, beliefs about adolescents, and the religious right. If these three issues are not taken into consideration, attempts to reform sexual health in Alberta will be in vain.

Heteronormativity. In Alberta, heteronormativity operates in a way where the privileged do not realize they are privileged. Heteronormativity, in the context of Alberta education, has somewhat morphed. It seems the existence of LGBTQ+ students is acknowledged, and heterosexuality is not assumed; however, those who benefit from heteronormativity have the opinion that LGBTQ+ people have already gained equality. By recognizing LGBTQ+ individuals and not explicitly discriminating against them, heterosexual and cisgender people have allowed LGBTQ+ individuals to become “normal” and “equal.” Heteronormativity allows a level of ignorance where heterosexual and cisgender people fail to recognize their position as privileged and the position of LGBTQ+ people as marginalized.

Within education, heterosexual and cisgender individuals are provided with an education that is inclusive of them and relevant to their lives. They have never had to fight to be validated and recognized within a classroom due to their sexuality or gender. Instead, those who not only

partake in heteronormativity, but revel in it, have proceeded through education never truly thinking of their privilege and their power.

Due to this assumed privilege, heterosexual and cisgender individuals have never had to ask for and be granted equality; thus, when the marginalized student asks for more equality and inclusion, it seems they are being given something that the heterosexual and cisgender students are not getting. This is not a gift of privilege; it is a gift of equality. LGBTQ+ students are being given an education that heterosexual and cisgender students have; yet, it continues to be labelled as a part of the gay agenda. Gloria Filax (2006) further discuss the opposition of “gay rights” in Alberta by examining Woodard’s statement, “tell a militant homosexual that he already has toleration. He’ll explode with indignation. Toleration’s not enough; he wants social affirmation...” (p. 116). Woodard’s statement reflects the feelings of some Albertans in 2018. The idea that LGBTQ+ people want to be seen as valid and equal is unfathomable, and they should be happy with tolerance.

Adolescent autonomy. The adults who oppose changes to the curriculum in its current form do not want a responsive curriculum; rather, they want a prescriptive one that reflects an assumption of what students’ needs are and ignore the decision-making capabilities of youth. Brown and Rodriguez (2009) state this is part of the socializing agenda of education, whose purpose is to, “safeguard against unrestrained power and the suppression of ideas” (p.21). In addition, adults often discredit youth believing them to be too fragile, ignorant, innocent, and inexperienced to partake in adult matters. Wagaman and Sanchez (2017) state, “research on youth often overlooks young people’s ability to critically analyze their own experiences and respond to issues that affect their development and advancement” (p. 79). Students would, perhaps, respond better to a curriculum that is flexible and more attuned to the experiences that are happening to them. While one can be seen as fighting more for youth, rather than morality, they often fight without the input of youth.

Hill (2009) concludes there is a disconnect between parents and their children. This is particularly true in the case of children with gender variances. Hill’s study sees parents pushing masculinity and femininity on their children in order to avoid homosexuality, gender variance, and other deviances from the norm. Hill describes how the educational system is failing to educate parents on LGBTQ+ issues. What is missing is programs that focus on teaching parents

that their children's differences are natural and provide them with the tools and training to support their child (p. 249). This type of gender-affirming education sees parents changing with their child, rather than working to change their child. By helping and accepting their child, parents can begin to change how society understands gender differences (p. 248). Hill's proposal may be too idealistic, as education is failing to protect and educate LGBTQ+ students, let alone able to reach out to parents.

The process of redesigning the curriculum, assumedly, is for the well being of Alberta youth. While many, such as the NDP and Minister Eggen, recognize the needs of youth, particularly LGBTQ+ youth, they continue to forget to involve youth voices in the process of gathering accurate knowledge to create a more robust and inclusive curriculum. Despite fighting for youth, those currently involved in the curricular redesign remain somewhat prescriptive and not necessarily responsive to the needs of LGBTQ+ youth.

What is most often missing from the discourse on sexual health education is the voice of those directly affected by it. Brown and Rodrigues (2009) state that the voice of youth is necessary and critical; however, within their research they take empowerment a step further. Rather than simply providing youth with a voice or a platform, they allow youth to become, "change agents" (p. 19). It is important to involve youth in these processes, as they often have "unique perspectives on learning, teaching, and schooling" (p. 21). While the lack of youth voice is a problem in general, the researchers also found that there was disproportionate silencing of marginalized individuals, such as students of colour, and LGBTQ+ youth.

The religious right. The religious right has a strong influence on politics in Canada and Alberta. Moves toward equality and inclusivity are often labelled by the religious right and more conservative thinkers as granting special privileges to marginalized groups. When evaluating how effective and inclusive sexual health education is, the major pushback from the religious right and other opponents must be considered. One of the most prominent members of the religious right, Jason Kenney, is currently leading Alberta's provincial United Conservative Party, a party which currently serves as the official opposition to the New Democratic Party government. The religious right believes sexual health education cannot simply change. Robles-Fernandez (2014) highlights that when LGBTQ+ individuals gain rights, the opposition depicts those rights as special privileges. These special privileges act as a, "powerful political

rhetoric” (p. 40) giving straight and cisgender individuals the impression they are losing their rights, or that LGBTQ+ individuals are getting more than their fair share of attention, rights, and privileges.

In an assessment of the religious right’s power in Canada, Coren (2017) states that the far right of Canada is not as powerful as in the states, but it still holds clout. The reality is, the rights that LGBTQ+ people want are the human rights that the majority currently enjoys.

Evaluating how inclusive sexual health is inclusive education must consider the major pushback the religious right and other opponents of comprehensive and inclusive sexual health education. In an assessment of the religious right’s power in Canada, Coren (2017) states that the far right of Canada is not as powerful as in the states, but it still holds clout. One of the most prominent members of the religious right, Jason Kenney, is currently leading Alberta’s provincial United Conservative Party, a party currently being touted as the opposition to the current NDP government.

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What’s Missing from Sexual Health Education?

Many factors contribute to LGBTQ+ people feeling unsupported by the education system. Teacher training, curriculum, and support for inclusion contribute to environments that do not ensure safety and comfort to LGBTQ+ youth. Schneider and Dimito’s (2008) research highlights that a majority of Canadian teachers feel comfortable with LGBTQ+ topics with their peers, admin, and trustees; however, this comfort is lost when educators must discuss queer topics with students and parents. Fifty-six percent of those surveyed said they felt parents would be angry, while 40% felt students would harass the teacher. The educators surveyed did not feel that their job was threatened, but did feel that they would receive backlash; thus, these educators

had an awareness of queer topics, but did not feel safe discussing them in a classroom context. What appears to be missing is a general sense of safety for both the student and the teacher.

Gowen and Wings-Yanez' (2014) study sought to examine what LGBTQ+ students needed from sexual health education. It was effective in asking youth what they thought inclusion in sexual health education would look like. Gowen and Wings-Yanez found that LGBTQ+ students reported that there was very little representation of LGBTQ+ people within education and the students often felt silenced. Teachers would often ignore questions relating to queerness or address such topics after class (p. 791). The students stated that many of their teachers were not competent or confident enough to answer questions on queer topics. They also believed that their teachers did not feel responsible for inclusivity (p. 794). The youth stated that inclusive and comprehensive sexual health education was not only beneficial to LGBTQ+ youth, but to all youth. It created a safer environment where students began to understand one another (p. 795). The students stated that this was also necessary as there may be many closeted students who would not ask questions and many questioning students who needed support. Gowen and Wings-Yanez state that sexuality is fluid and to assume that all heterosexual students would remain heterosexual is wrong, and a potentially harmful assumption (p. 798). What Gowen and Wings-Yanez's research demonstrates is how input from youth in their own education is vitally important, as they often are in the best position to know what is missing or absent.

Gaps and Relevancy

The marginalization of LGBTQ+ youth in North American schools is evident; research on the subject often comes to the same conclusion. The lack of LGBTQ+ inclusion in education causes queer students to feel deviant, unusual, stigmatized, and marginalized (Cragun and Sumerau, 2015). While many educators enjoy the idea of inclusivity, they often fail to provide an inclusive environment (Abbott, Ellis, & Abbott, 2015, p. 1653). Clearly, sexual health education needs to be improved.

While scholarly contributions to discourse are welcome and needed, those working directly with LGBTQ+ youth may not know how to take the research and turn it into practice. There is a consensus in much of the research that highlights the need for more inclusive policies, curriculum, resources, and practices in education, but these solutions are often presented from an

academic standpoint and do not have clear practical solutions for educators. What needs to be developed are critical and plausible strategies that can be taken up by educators. Educators are not being prepared to help LGBTQ+ youth; thus, there is a lack of inclusivity and comprehensiveness in schools. There needs to be a connection between the research and the change needed. This essential connection is the youth themselves. Instead of only responding to research and prescriptive educational strategies, educators need to respond to their students' needs.

If LGBTQ+ youth are to be liberated from heteronormative discourses, then they need to somehow be empowered. While all contributions are welcome, the study of sex education seems to be over saturated with the identifications of problems and recognition of what is missing from schools. Clearly, there is a need for more research that focuses on bridging between theory and practice. What can educators be doing? What should curriculum specifically include? Such questions, and their solutions, can be utilized by policy makers, curriculum creators, and educators. Taylor and Peter (2011) suggest that for LGBTQ+ youth, “best practices need to be developed by assessing the effectiveness of different approaches... well-publicized and enforced harassment policies, inclusive curriculum, student clubs...” (p. 309). Much current research is able to identify the need for change, and offer solutions based on observations by adults; yet, it often fails to include the direct consultation of youth. Due to the absence of youth participation in research around sexual health education, youth are not being directly empowered to create change.

The second major gap in research is the lack of a focus on intersectionality. Intersectionality adds a complexity that must be addressed in order to solve a larger societal issue. The consideration and acknowledgement of intersectionality is absent from most of the examined sexual health education literature. While individuals of varying backgrounds participate in research, their additional identities (such as their race, age, abilities, etc.) are not considered to in addition to their sexuality and gender. The goal of sexual health education research should not be to liberate only LGBTQ+ students; rather, it should be to alter education to be inclusive of all youth. For example, D’Elio (2015) states that LGBTQ+ people often experience multiple types of oppression, not just based on sexuality or gender. Intersectionality highlights the importance of multiple aspects of individual identities. Thus, when researching the

marginalization of LGBTQ+ individuals, one must be aware that some individuals are marginalized in multiple ways. In the case of D'Elio, this means that the marginalization of students is happening at multiple levels, based on many different facets of their identity. For example, trans students of colour may be doubly oppressed due to their skin colour and their gender identity. Thus, it is important to be aware of multiple intersectionalities when discussing sexuality and/or gender. Crenshaw (1989) summarizes this by identifying how a woman who is also black experiences discrimination as *Black* women. This means that black women are not just experiencing discrimination for being a woman or for being black; rather, the discrimination experienced is multifaceted. Crenshaw believes that most anti-discrimination laws, research, and policies do not take this into account; thus, they are not proper solutions. They focus on one aspect of the problem, such as only skin colour or only sexuality. These solutions are not all encompassing. Solutions, such as laws or policies are simplified and targeted, but they need to become more comprehensive and inclusive of intersectional identities. While research can focus on the issues that LGBTQ+ students face, it must see all individuals, with intersecting identities, benefitting from the solutions to their proposed problems. Solving issues of sexuality and gender in education may benefit the white queer or the able-bodied queer, but may inadvertently continue to keep others on the periphery of education.

The final gap in the sexual health education literature is relevance to Alberta youth. While Western education has many similarities; there are also great differences between countries, provinces, cities, and even schools. Sexual health education ought to be examined contextually in order to bolster the argument for comprehensive sexual health education for students in Alberta. It is important that research be conducted within the province, and includes local youth, in order to gain insight into current trends, issues, and successes. By having Alberta-based research to back up arguments for inclusion and comprehensive sexual health education, the opponents of such inclusion can be challenged in a more direct manner.

What must be realized, however, is that the research has been identified by the opposition as liberal rhetoric. Inclusive research is often positioned as part of the “gay agenda” with the hopes of turning children against social norms. Referring to research as the “gay agenda” is additionally a way to delegitimize the findings, as this term is usually met with connotations of propaganda. With more inclusion from the voices of young Albertans, there will be a point

where the need for inclusion and comprehensiveness, in Alberta schools, will be undeniable. The creation of curriculum cannot be prescriptive, but neither can the defense of LGBTQ+ youth. Supports for LGBTQ+ youth need to be created, but the youth also need to be given the position to have their voices heard.

Youth need to be supported to be co-creators of their own sexual health education. It is time that sexual health education stop being prescribed by parents, policy makers, and educators; instead, sexual health education should respond directly to the needs of youth and reflect what they feel is relevant and necessary.

Clearly, students need to be provided with a comprehensive sexual health education that allows them to make good decisions based on age-appropriate, factual, and non-judgmental information. Students need to be prepared for any and all situations they may encounter. Presumed heterosexuality and heteronormative sexual health education does a major disservice, because it is not guaranteed that a youth's sexuality or gender identity will remain the same throughout their life. It also fails to prepare youth to interact with LGBTQ+ individuals, and to view them as peers who are deserving of equality and respect. If truly inclusive and comprehensive sexual health education is to be taught in schools, it may need to ignore the wants of some parents, in order to meet the needs of youth. As Kumashiro (2000) states, education needs to be discomforting for it to be effective. It cannot give in to the desires of the religious right, and the forces of heteronormativity and homophobia.

Chapter 3: Theoretical Foundation

Queer Theory

An examination of the etymology of the word queer reveals it being used in two very different ways. In its origins, queer was used to describe something strange or peculiar; however, the advancement of LGBTQ+ rights saw it reclaimed. As Bérubé & Escoffier (1991) suggest,

queer is meant to be confrontational—opposed to gay assimilationists and straight oppressors while inclusive of people who have been marginalized by anyone in power...to combine contradictory impulses: to bring together people who have been

made to feel perverse, queer, odd, outcast, different, and deviant, and to affirm sameness by defining a common identity on the fringes. (p. 12)

With the advancement of LGBTQ+ rights in the Western world, Meyer (2007) states that the word queer is being reclaimed and has become “liberatory.” The word queer has been reclaimed by a marginalized community in order to take away power from their oppressors and back to those who are so often marginalized due to their sexuality or gender identity. Meyer states while the idea of queer theory emerged from gay and lesbian studies, it now encompasses a much broader community and seeks to challenge the social norm. She suggests, “it questions taken-for-granted assumptions about relationships, identity, gender, and sexual orientation. It seeks to explode rigid normalizing categories into possibilities that exist beyond the binaries of man/woman, masculine/feminine, student/teacher, and gay/straight” (p. 15).

In this regard, queer theory seeks to dismantle the normative nature of society. Queer theory is an essential tool when examining the hierarchical, oppressive, and dichotomizing nature of heteronormativity; it seeks to examine the binaries created within society, and to disassemble them. By employing aspects of queer theory, I intend to interrogate Alberta’s education system, and seek ways to challenge the heteronormative sexual health curriculum.

Eugene Wolters (2013), in line with Butler’s performative gender theory, asserts that queer theory supports the idea that humans are all performing a certain narrative. This performance is mandated by society with those not performing properly being cast as outsiders. Society is at a point where the narratives of LGBTQ+ individuals are assumed. The promiscuous gay boy and the masculine lesbian are two common stereotypes that are attached to queer identities. Perhaps these receive some attention from society and educators, but rarely are the true narratives of LGBTQ+ individuals shared.

Queer narratives continue to be moderated, and recent events highlight the need for queer perspectives. In March of 2017, the popular video sharing website YouTube began to declare many videos that contained LGBTQ+ content, not necessarily sex related, as restricted. This label is often used on videos that have “mature content.” Despite YouTube stating that they would only be restricting “mature content,” many video logs (vlogs) created by LGBTQ+ YouTubers were blocked. These vlogs are often used as a platform for LGBTQ+ YouTubers to

share their personal stories. They are accessed by LGBTQ+ youth, who may not hear these narratives anywhere else. The article states that LGBTQ+ YouTubers feel that these videos are “safe spaces” for youth who may not have access to any other resources (*ABC News*, 2017).

As highlighted by the YouTubers fighting these restrictions, LGBTQ+ narratives are essential. Queer narratives are needed to help LGBTQ+ youth feel safe, secure, wanted, and normal. Queer narratives need to be heard worldwide so progressive changes can reflect the needs of queer individuals. Without these narratives, society will not progress or react; thus, it is important that these narratives, particularly in relation to education, are heard.

Queer theory is also important because it not only fights for equality and inclusivity of LGBTQ+ individuals, but for all individuals. Queer theory seeks to dismantle what is seen as “normal” and traditional and replaces it with inclusivity and equality. It not only challenges heteronormativity, but also misogyny, racism, and other oppressive narratives. By employing queer theory, one seeks to disable binaries, assumptions, and rigidity. Employing queer theory within educational contexts accepts all students for whatever identity they may have and promotes learning in a way that is equally beneficial to all.

Qualitative Research

Narratives, or in the case of this thesis, counter-narratives, seek to bring forward the voices of a marginalized community in order to challenge the dominant discourses of heterosexual and other privileged individuals (Mertens, 2014). The narratives of the dominant (white, heterosexual, cisgender, etc.) are too often heard, and what is needed to guide the future of sexual health education is the narratives of those most marginalized. This can be done through the collection of narratives and discourse that sees participants as co-researchers rather than study subjects.

Participatory action research saw participants of the study using their past and present knowledge to critically review sexual health education; this was done through the sharing of their narratives with myself and their peers. Their experiences with both education, and young adulthood, then guide the synthesis of the research. Data collection then comes from within the individual. Cohen, Manion, and Morrison (2011) believe this allows data to transform from

external to the individuals, to a knowledge that is created through discourse. Through PAR, my role as a researcher is, at times, to be passive, listen actively, and allow participants to provide and perform research.

This means that participants not only have the ability to create questions, but also gather evidence, perform analysis, and offer solutions. Rather than having an outsider analyze the data, the analysis happens as the narratives were shared. The participants then act as co-researchers and potentially co-creators of change. By doing so, the participants may achieve a level of autonomy that is not typically presented to youth due to policy being prescribed by adults.

Participatory Action Research

Participatory action research is used in this research in order to give those affected by education the ability to change education. Brown and Rodriguez (2009) describe participatory action research (PAR) as a way for people directly affected by a problem to engage with corresponding research. This is essential as those who can relate to the issue often have direct knowledge of the problem, can offer unique perspectives, and can speak with authority. By giving these individuals the ability to participate in the research, the subjectivity of the researcher is lessened. Rodriguez and Brown give the example of poverty being blamed on cultural differences. While a researcher may observe evidence to support such a claim, it can be subject to bias. The researcher may be entirely removed from the field, and they may not be able to view all facets of the problem. For example, PAR sees those living in poverty as an active part of the research team. Their experiences shape and influence the research. Rather than only evidence being observed, it is being lived and experienced. The researcher(s) may then discover more about power, privilege, and hegemony; the problem and solution are being formulated by the researcher and their observations of the research participants. It is the value placed on people and experiences that makes PAR “genuinely aimed at sociopolitical justice” (p. 23).

Bertrand, Durand, and Gonzalez (2017) state that PAR allows for the formation of coalitions between individuals that transcend race, age, social class, and gender. They also found that the introduction of intersectionality into the collaborative process “trouble hierarchies related to age, race, social class, sexuality, and other axes” (p. 150). When youth gathered to discuss issues, they were able to recognize, and appreciate, that their peers contributed in

different ways than themselves. Despite sharing a common identity and facing similar issues, each participant had their own unique narrative that allowed them to analyze sexual health education.

Kornbluh, Ozer, Allen, et. al. (2015) state that key activities in PAR include,

“(1) reflecting on current and past experiences in school to identify a problem, (2) reviewing existing sources of information on the problem of interest, and (3) synthesizing and paraphrasing existing information to guide research design.” (p. 877)

Participatory action research, then, works within my research design as it sees those directly affected by exclusive and non-comprehensive sexual health education, engaging in social change. Despite “knowing” what students need (i.e., inclusive, comprehensive, and relevant sexual health education) in order to be prepared for young adulthood, sexual health education remains stagnant, prescriptive, and often acts as a (hetero)socializing agent. Rather than telling youth what they need, educators should strive to understand how youth are highly capable and should be part of the process that decides what they are to learn.

When researching sexual health education, researchers must examine the needs of those most affected by it. While I believe sexual health education needs to be examined on multiple levels and from various angles, my research focuses on young LGBTQ+ individuals and how they have interacted with sexual health education in their recent school years. I intend to provide these youth the opportunity to not only share their narratives, but to also help co-create criticisms and solutions of the current system.

A primary goal of my research was to provide LGBTQ+ individuals a voice and allow them to be a part of a potential shift from the current sexual health education, to a more inclusive and comprehensive sexual health education. Wagaman and Sanchez (2017) believe that PAR allows participants the ability to have a voice and the ability to create both resistance and resiliency (p. 80). This supports my additional goal of not giving supplemental power to those who often speak for the LGBTQ+ community; but, to allow those who often do not have a voice the platform to influence change within their own community and within the educational community. Wagaman and Sanchez highlight how shared experiences and the relationships

established through PAR allows theory to become reality: “we can move beyond an exploration of what is, and into an exploration of what could be” (p. 93). By listening to LGBTQ+ youth, society can uncover what is missing from education and what is needed in order to better sexual health education in Alberta. As co-creators, my hope was that, the participants would take our discussions and co-constructed research and begin to create change within their own worlds.

Focus Groups

Focus groups allow participants to come together as a community in order to create change. Together they can discuss a topic, state any issues, and create potential solutions that can then be put into action.

Bongiorno (2014) states that at the beginning of the PAR process, “...each participant will have his or her own point of view, but over time, it is expected that these will meld into a new dialogue that reflects a jointly held frame of reference” (p. 23). The very structure of a focus group supports PAR in that it brings a group of people together to discuss a common theme. The interaction within the focus group will aid in this process; allowing participants to co-create a dialogue on their view of the state of sexual health education and the future that they envision for sexual health education. At its core, PAR is about collaboration, a process supported by the focus group. Mertens (2014) agrees:

The focus group interaction allows the exhibition of a struggle for understanding of how others interpret key terms and their agreement or disagreements with the issues raised.

They can provide evidence of ways that differences are resolved and the consensus is built. (p. 382)

Liamputtong (2011) states that focus groups can also support PAR in that they allow participants to gain perspectives and discuss experiences that may not come up in personal interviews. The group setting allows for constructive dialogue that promotes PAR. Participants’ various strengths can be used to create a common solution that works for all. Rather than the creation of a prescriptive solution by one individual, issues and solutions can be discussed by a diverse community for a diverse community.

Liamputtong states that focus groups also allow for diversity to be represented. Through the selection, participants with various identities discuss ideas and does not remain stagnant or

focused on one group over another. When working with the LGBTQ+ community, the perspectives of various sexualities and genders can be gathered through a focus group process. In relation to PAR, this also allows for more marginalized individuals to be present in the construction of knowledge rather than being represented by those with dominant experiences and privileges. This begins to dismantle the hierarchy of credibility, in which the opinions and experiences of the privileged are valued more than those of the underprivileged. This is a partial solution to the identified problem of privileged individuals speaking on behalf of the entire LGBTQ+ community. The discourse, then, will represent a broader community than issues and solutions identified in personal interviews.

The focus group, as a site of knowledge construction, can also act as a clarifying agent. Liamputtong discusses how focus groups often contribute to the wording of surveys, with participants discussing which terminology, definitions, and language would be best to use. In the case of this research, dialogue such as this can allow for solutions to be inclusive and comprehensive. Participants can correct each other on language and ensure that the knowledge that is being constructed, and the research that is being done, is cognizant of the variety of identities that fall under the LGBTQ+ umbrella. This process allows for a higher level of inclusivity and again acts as a checks and balances system that disallows for one identity to hold more influence, power, and authority than another identity.

Lijadi and van Schalkwyk (2015) state that online focus groups reduce complications in regard to geography and time. Participants can respond to questions when convenient for them, in a location that they are comfortable in. The environment is also conducive to a higher level of self-disclosure; a positive when working with participants who have spent parts of their lives closeted or hiding their opinions and identities. Likewise, McInory (2016) states that young people are increasingly using technology as a communication tool that is integrated into various aspects of their lives. Online methodologies allow for researchers to investigate hard-to-access populations, such as the LGBTQ+ community. Online methodologies also may reduce barriers and allow ease of access for these individuals.

Major concerns with online focus groups are access to the Internet and anonymity. These issues, however, can be resolved through the selection process. Individuals can be asked if they

have Internet access prior to participation. The participants will also lose anonymity with the researcher due to their participation in personal interviews that precede the focus group.

One component of the online focus group that allows for the development of the research is the asynchronous aspect; participants can login whenever they want to answer questions, can create thought out responses, and can have time to reflect on their peers' posts. While real time conversation allows for spontaneity, asynchronous conversation can promote reflective responses.

Ingram and Steger (2015) found that online discussions, when moderated consistently and effectively, can elicit longer and more complete answers. It also allows time for participants to reflect on others' responses and respond accordingly. The online focus group is an efficient way to gather individuals of varying identities to participate in constructive discourse. The barriers of online focus groups are able to be nullified while thoughtful discourse is created through careful moderation where the researcher can respond to and draw out elaborations to responses.

The purpose of the focus group within this study was to bring together a community of individuals, who have multiple identities, to discuss a common topic: sexual health education. The goal of the focus group process was to allow for multiple identities to be represented and for new discourse to be created. The focus groups in this research took place online to allow participants ease of access and comfort; thereby creating a safe space that is essential when working with LGBTQ+ individuals. The online focus group also allowed for participants to be reflective of their peers' opinions and to create connections between opinions and identities due to the asynchronous nature of the forum. The forum also provided participants with the ability to assess, over time, the conversations that occurred.

Mertens (2014) states PAR is a process of building knowledge; it is a collaborative process in which each of the participant's experiences and skills are a part of the outcome. PAR is focused on solving community problems; thus, all participants, including myself, are co-researchers that are coming together to analyze sexual health education. The opinions of those sharing their narratives are just as important as my own and they not only constitute the research, but guide where the research should go next. PAR also eliminates harmful objectivity that has the ability to ignore the importance of subjectivity in relation to sexual health education and

LGBTQ+ individuals. It highlights the importance of the LGBTQ+ person's voice and experience as intangible, yet essential, pieces of research.

Chapter 4: Research Design

Ethics Review

Prior to starting my research, ethics approval from the University of Alberta Research Ethics Board (REB) was obtained. I submitted my ethics review on February 16, 2017 and was approved on March 3, 2017. The study began on October 30, 2017 and concluded on November 25, 2017. The study was extended to allow for additional participants to replace participants who dropped out of the study.

Participants were given the choice to have their contact information given to me, or to contact me themselves. Participants contact information was kept private and only seen by myself and my supervisor, Dr. Kristopher Wells.

Prior to participation in the study, each participant was required to sign a consent form that detailed the study and my intentions (See Appendix A). This form confirmed that they agreed to participate in the study (focus group and analysis) and have their narratives shared.

The ethics review stated that participants may encounter feelings such as stress and anxiety due to discussions around their past and present experiences. In order to aid in the management of such situations, I implemented supportive discussion, mental health breaks, and referrals to community resources that may be beneficial to participants (if needed).

Participants were told they could withdraw consent up until the point that they approved the transcript of their interviews. If they withdrew consent their interview was deleted (including recordings and the transcript). If they had participated in the focus group their contribution would not be directly referenced; however, topics that were introduced by them, but discussed by others, were not removed. Verbal consent was present throughout the entire process. All those who participated, even if they withdrew their consent, were given a \$25.00 gift card at the end of the study.

All participants were asked if they would like to remain anonymous and be given a pseudonym within the research. Descriptions of participants remained vague (identified by their

sexuality and gender, but not their physical attributes). Participant contact information and descriptors were known by myself and my supervisor, but were not shared with anyone else.

The information gathered from the participants (recordings, transcripts, contact information, etc.) will be held for a period of five years on a USB drive that is only accessible by the researcher. After the five-year period, the files will be deleted. If the interview was conducted online, the interview was recorded and stored on the USB, with the original being deleted soon after. On August 1, 2018, I received final confirmation from all participants that they gave consent and were satisfied with how their interviews were being utilized in the research.

Participant Recruitment

Research participants for this study were recruited through three means. The first method was indirect recruitment through research posters, which were shared through physical and digital means. The second method involved direct recruitment, and finally the third method included snowball sampling that saw participants contacted by intermediaries.

Direct recruitment was used in order to find individuals who identified as having an intersectional identity. The secondary purpose of direct recruitment was to find individuals who were connected to their community in order to enable the process of snowball sampling that saw participants connecting the researcher to hard-to-reach participants within the community (McInroy, 2016). Snowball sampling is beneficial in reaching participants from target populations that are not “easily accessible to outsiders” (p. 190). It begins with “seeds” that are typically selected through convenience sampling, who then connect the researcher to others within their community (Wohl, et.al, 2017).

While I am a part of the LGBTQ+ community, my position as a researcher creates a potentially complicated power dynamic. Lucassen, Fleming, and Merry (2017) state that minority groups often have a distrust of researchers.

Roffee and Waling (2017) state that LGBTQ+ individuals may expect to be victimized within a university setting due to previous experiences. LGBTQ+ individuals often experience barriers when accessing education and health, and thus may have a distrust of such systems. They also highlight how participants may be harmed due to a brief relationship with the researcher, who is essentially utilizing the participant then disappearing, leaving the participant

to deal with their feelings without support. Snowballing removes the researcher, to an extent, and brings in participants through community connections.

The snowballing method, then, was used to bring together a community of participants in a way that sees trust being built, as well as a community that will hopefully hold together after the research is completed. The snowball method, in tandem with the focus group and PAR, was helpful in creating a resilient group of individuals who wish to see change in their world.

My goal was to select a group of participants chosen based on a set of criteria. The criteria stated that they must be between 18-25 years old, have participated in sexual health education in Alberta (within their high school years), identified with any gender (including those who do not identify with the gender binary), and had to identify as LGBTQ+.

This age requirement was designed to ensure that participants were not current students, but still had a recent educational experience in Alberta. It was also hoped that participants would also have some life experience in which they could relate to their previous education. Further research could see these individuals interacting with youth that are still enrolled in schools to further co-create curriculum, policy, and social movement.

Participants also had to have experience with sexual health education in Alberta. Finally, the study focused on LGBTQ+ individuals (including varying genders, lack of gender, and varying sexualities) and thus the opinions of heterosexual individuals were not relevant to the study.

Individuals with multiple intersectional identities were given priority as their stories are so often left out of LGBTQ+ research. I chose participants who had different identities to ensure for increased diversity and voice. For example, gay, white, cisgender men could apply as participants; however, they were not given priority in this study due to my intended focus on intersectionality. This focus on intersectionality related to PAR in that the experiences of all individuals need to be valued and heard. By having participants from diverse identity backgrounds, the voices of more people can influence the co-constructed research process and outcomes, and potentially address gaps in existing research and curriculum.

Identifying Participants

There were six participants that participated in this study. All six identified as queer or LGBTQ+ and were 25 years of age, or younger. Each participant had experience, as a student, with sexual health education in Alberta. Within the study they reflected on how sexual health education, prepared them (or did not prepare them) for life as a young LGBTQ+ adult.

The participants identification as young LGBTQ+ adults is important. While they are somewhat removed from the current system of sexual health education, curriculum has not changed since they were in school 2 to 8 years ago. While practices, resources, and knowledge may have grown; curriculum remains stagnant. The age of the participants is also important as they have had some years as a young, sexually active adults who can rationalize whether or not sexual health education was beneficial to them or not.

The participants chose to identify aspects of their sexuality and gender in order to relate the process to their identity. The participants chose pseudonyms in order to maintain anonymity. The identified participants include Michael, a gay Asian male; Kate, a white bi-sexual woman; Nicole, a pansexual trans woman of colour; 4489¹, a queer East Asian cisgender woman; and Juan, a bisexual and non-binary Latinx² person.

Each participant answered a series of introductory questions positioning themselves within the research (Appendix B). They were then asked to reflect on their identity and their navigation of sexual health education.

Research Instrument

The participants were brought together in an online forum in order to discuss their experiences with sexual health education. The forum was used in order to maintain anonymity, while also giving the participants the ability to answer questions on their own time. The participants were asked seventeen questions, which allowed them to reflect on the past, present, and future of sexual health education in Alberta. Together, they stated what their experiences with sexual health education were, noted gaps and absences, reflected on the challenges of being

¹ This participant decided to use a number, rather than a name, as a pseudonym

² Latinx is a gender-neutral form of Latina/Latino.

LGBTQ+ in a heteronormative sexual health education classroom, and formulated ideas for future directions.

Participants were asked to answer all questions. They were given a month to respond to all the questions posed to them, but were not required to spend a certain amount of time on the forums.

Chapter 5: Data Presentation and Analysis

As Mertens (2015) suggests, I reviewed and reflected upon the data as it was collected. I read each forum post and the responses as they were posted. At this point I began discerning which posts may not have answered the question posed, and which posts went above and beyond what was being asked.

After the research was completed, I moved onto coding the data. The forum posts were printed out on paper in order for coding to occur.

Research interviews and data were coded in two ways. The first method grouped participants experiences into one of three categories: past experiences, current views, and thoughts on where sexual health education should be in the future. These codes allowed for the research to be presented in a linear and coherent fashion.

Additional codes were drawn from common themes found in the research literature. This approach is what Urquhart (2013) describes as top-down coding. Other codes and themes were derived from concepts found in the first read through of the qualitative interview data, which Urquhart (2013) describes as bottom-up coding. Sections of the research interviews were also coded using a word or phrase that best describes the intent of the paragraph transcript. These codes were then grouped into what Saldaña (2014) calls clusters, wherein codes are grouped with similar codes, but unique codes can generate their own category. This occurred with some themes being generated such as allyship and informal education. Other codes fell under the themes of teacher training and curriculum, which were derived from the research literature.

The initial coding saw responses broken down into four categories. The first was identification of the participants. This category included posts, or parts of posts, that placed the participants within the research. Participants were asked to describe their identities (pronouns,

sexuality, gender) and other aspects of their identity that they thought might fit into the research (such as their race, career, etc.)

The second category was past experiences with sexual health education. This category saw participants discussing their personal experiences as a youth taking sexual health education, as well as their reflections on their education as young adults.

The third category was present observations of sexual health education. Participants reflected upon what they saw in the news, curriculum, in their jobs, and with their family members in relation to sexual health education in Alberta.

The final category included participants discussing where they think sexual health education is going and possibilities of where it could go. Participants were encouraged to reflect on their answers, provide an example of what they feel should be changed or expanded within the curriculum, and their overall thoughts on the topic of sexual health education as a whole.

Identifying Themes

The nature of the questions allowed for some themes amongst the initial four categories to become evident. Within the broader category of personal experiences, participants discussed safety, acceptance, inclusivity, needs of students, teachers, curriculum, consent, informal, and formal education as reoccurring themes. Some themes, such as curriculum, inclusivity, informal, and formal education were identified as issues in both past experiences and in current observations of sexual health education in Alberta. The participants unanimously agreed that sexual health education needed to respond to the needs of today's youth.

The initial separation of content occurred in response to the setup of the forum questions.

1. Participants' past experiences with sexual health education. Here participants described their own sexual health education classes and the response to their sexuality and gender in their youth.
2. Participants' views of sexual health education in Alberta as of 2017. Here participants described their perception of sexual health education based on observations of people they interact with (e.g., like Juan's younger brother, or the youth that 4489 works with) and the current situation in Alberta (e.g., news articles, curriculum development, etc.)

3. Participants thoughts on what sexual health education should/could be. Here participants describe what they needed from a sexual health education program and what should happen when developing future programs.

These themes, and subsequently titles, create what Mertens (2015) refers to as a model. The model, and the theory behind it, is later grounded by the data (p. 442).

The actual writing of the research was done using progressive focusing, where the researcher starts by looking at an overarching theme and analyzing details within that theme. These overarching themes arose from the literature review, where common identifications were made. These themes include curriculum and resources, teacher training, and a more general look at how education can become more inclusive. These themes act as headings in the analysis portion of the collected research.

Mertens also recommends that the researcher be aware of their own cultural bias, so that the reader is aware of how the researcher's identity may influence the analysis of qualitative data. Mertens discusses how the researcher should identify their identity and biases early on, as I have done earlier in this thesis. Mertens recommends that having someone review potentially problematic interpretations may rid of some cultural bias. This was done by having the participants review the research section to ensure that they were being represented properly, and that I was representing the diverse population of the LGBTQ+ community properly (p. 444).

Findings

Past experience. The participants were asked to share their experiences with sexual health education and to reflect on what they, as LGBTQ+ individuals, needed from sexual health education. Each participant discussed their perception of how sexual health education differed for them due to their personal identity.

A poor education. Juan stated that their sexual health education, "...perhaps felt somewhat adequate at the time..." However, Juan went on to elaborate that as they continue looking back on their educational experience, they find it to be inadequate, "...it feels now like teaching was specially tailored to keep me from having a proper understanding of myself."

Nicole agreed, she found that sexual health education was “a way to kill time, but wasn’t telling me things that would have been useful, like consent, or gender, or queer sex.” Michael’s experience with sexual health education gave him knowledge of the biology behind sex, but was no help when it came to being able to understand his identity and himself. 4489 felt that sexual health education was “superficial surface-level material” asserting that they were confused about their own anatomy for a long time. They also felt that it was heteronormative, which did not allow for them to connect, as they were not heterosexual.

Epstein, O’Flynn, and Telford (2000) assert that sexuality is rarely permitted in Western Anglophone schools, and when it is, it is “the straightest of the straight” (p. 3) They state that schools tend to stay away from the topic of sexuality, at least on a surface level. However, sex and sexuality are embedded in everyday school life. In elementary school, playing house reinforces gender roles and the typical heteronormative family; as students grow they are expected to show their sexuality by writing about their love of pop stars or athletes. As students age into their teenage years, they are expected to go to dances and prom, and in physical education classes boys are meant to be tough and aggressive while girls are meant to be shy and submissive. The integration of these dominant discourses into everyday school life allows for heteronormativity to remain unchallenged. Children are constantly being sexualized by heteronormative culture, structures, and tradition in a way that makes heterosexuality almost compulsory; meanwhile, any attempt to discuss or acknowledge other diverse sexualities and genders often results in a student being othered or silenced.

The inclusive educator. While at times their education may not have been respectful to LGBTQ+ individuals, the participants did have some positive experiences due, in large part, to committed and inclusive educators. The first adult who Juan came out to was their English teacher. Juan states, “Even though she didn’t completely understand the intricacies of non-hetero sexualities ... she listened and was open to helping.” Juan shared how this teacher had made herself approachable, something that they did not necessarily feel from other teachers.

Nicole had a teacher who helped her when it came to self-harm. Nicole was comforted because she felt the teacher was on her side. Nicole’s guidance counsellor was open to receiving LGBTQ+ friendly resources. What Nicole experienced was compassion, a trait that Kate feels all

teachers need. Kate suggests that all teachers need to have the ability to understand the diverse needs of their students, and to be prepared for any sort of questions they may ask.

Indicative of the importance of teacher support, Wilson, Asbridge, and Langille (2018) found that students who identified as a sexual minority had lower school connectedness than their heterosexual peers. Feelings of school connectedness had a positive impact on the mental health of students. 4489, unfortunately, experienced a disconnected relationship from their school and their teachers. 4489 states that teachers allowed homophobic comments to be used in the school. The teachers' and school's apathy made 4489 feel as though they were potentially unsafe, exemplified by the ominous statement, "no one took their chances," referencing the fact that LGBTQ+ students did not make their sexuality or gender public knowledge.

For Michael, his teachers were complacent; "The actual teachers who had to teach sex ed ... seemed to stick to a script and were neutral over everything." Michael credits some inclusiveness to outside organizations that were invited into his classroom in order to provide information on sex and sexuality; yet, his teachers seemed to err on the side of caution when it came to LGBTQ+ topics.

Carr (2008) challenges the idea that educators should be apolitical. He states that by remaining complacent or uninvolved in social justice issues, teachers are in fact "making a political decision" (p. 90). Kelly and Brandes (2001) agree stating how schools are a reflection of society and are "sites of struggle and social change" (p. 3).

Within schools there are social inequalities that must be discussed and challenged. Through complacency, teachers allow inequality to flourish. Kelly and Brandes (2001) suggest that neutrality is often desirable in order to not be accused of indoctrinating; however, they also warn that for students to learn about democratic citizenship they need to realize the inequalities that exist in schools preventing some students from participating or being heard.

The research participants who had supportive teachers had a more positive outlook on safety and inclusivity in schools than their counterparts who had unsupportive teachers. The neutrality and complacency of teachers disallows for marginalized youth to be heard and valued. When teachers, like Michael's, "stick to a script" they do not go beyond the prescribed curriculum and opportunities for social justice are lost. In Alberta, where the existing curriculum

does not include LGBTQ+ youth, these constructed absences and educational silences can have dangerous consequences that leave youth feeling othered, alone, and unprepared.

Safety and acceptance. 4489 felt that school, in general, did not meet their needs. They felt that once they realized they were queer they repressed and ignored their queerness due to their school's homophobic culture. They expand on this idea of homophobic culture by stating that there were no consequences for homophobic language and the absence of discussion around LGBTQ+ topics.

The Gay, Lesbian, and Straight Education Network (GLSEN) (2016) states that schools often have discriminatory policies that affect LGBTQ+ youth. Over half of those surveyed by GLSEN stated that they had experienced some form of discrimination at school, including not being allowed to wear clothing that supports LGBTQ+ people, not being allowed to write about or discuss LGBTQ+ issues, not being allowed to promote or create a GSA, not being allowed to attend school functions with individuals of the same gender, not being allowed to wear gender affirming clothing, and not being allowed to show affection towards individuals of the same sex. These forms of discrimination are worrying as they can have an effect on students' attendance and graduation rates. Feeling unsafe can also negatively affect students' academic abilities and mental health.

Juan encountered similar feelings of exclusion, stating their school did not meet their need for safety. Juan, however, realized that they could find safety in their outward appearance as a heterosexual cisgender male "...I think I got somewhat lucky in being a bi AMAB³ person...".

Michael feels that the need for safety and acceptance must be met at school. All LGBTQ+ people and youth have the need to have their existence acknowledged rather than ignored. Nicole lacked these supports and found herself wanting more resources. Not only was Nicole not receiving an education that fit her identity, she was also othered by these silences and absences. She recalls "during one religious studies class we [sic] had a handout to work through [sic] that basically said being gay was a sin, but to love the person and condemn the sin." Nicole and 4489 further elaborated upon this culture of othering by stating that there was stigma around

³ Assigned male at birth

topics such as pregnancy and STIs. The purpose of sexual health education was to scare rather than educate.

4489 and Michael both felt that even small gestures would have made an impact, with 4489 stating, “I think having a designated safe teacher or a GSA or even just a teacher with a rainbow flag sticker would have made a huge difference in my life.”

Crothers, et. al. (2017) state that in an environment that can often be exclusionary, having a supportive adult can act as a protective factor. Yet, many educators may not be outwardly supportive as they fear discrimination or loss of their job. In Crothers, et. al.’s study, some educators felt that LGBTQ+ bullying was not being reported due to students not feeling safe or supported. The study also found that more teachers than students thought that school was doing a good job when it came to preventing bullying. Finally, the study found that educators may not find bullying based on sexual health education to be a serious problem due to their perspectives on LGBTQ+ individuals. Overall, the study showed that the perceptions around bullying differed between the youth and the adults. It is essential, however, for teachers to recognize the issues. Importantly, Crothers et. al. highlight how students who have teachers that are involved in their personal lives are more likely to feel safe and connected to their school community. Likewise, Thapa, Cohen, Guffrey, & Higgins-D’Alessandro (2013) suggest that having supportive teachers appears to have a positive correlation with the “overall school climate and student academic outcomes and relational, social, and emotional functioning” (p.367).

The participants within my study had mixed critiques of sexual health education. Michael gave credit to his teachers by stating they taught him about the biology of sex, but did not further the discussion enough to allow him to learn about sexuality. The participants were, however, in agreement that their identities were seldom acknowledged, and the sexual health education they received did not meet their needs as LGBTQ+ individuals.

Current observations. Research participants were asked how they thought their personal experiences related to the broader LGBTQ+ community. Their responses showed that they felt most LGBTQ+ individuals have had similar experiences regarding sexual health education.

The state of education. When it comes to the question of whether sexual health education in Alberta is meeting the needs of LGBTQ+ students, all the participants agree. In their experiences with sexual health education, they felt that LGBTQ+ topics were rarely mentioned.

In other words, they described that sexual health education was not queer friendly. In regard to Alberta schools meeting the needs of students Juan believes, “They’re not meeting anyone’s needs, but especially not LGBTQ+ students. Not enough is being done to teach about so many of the things that young people may be asking themselves about, and this lack of knowledge manifests itself through bullying and self-hate.” Kate shares Juan’s sentiments stating, “I think they fail all students, but LGBT students in particular. There was almost no information about trans issues in my sex ed, and gay issues are simply mentioned, there is no specific discussion of resources, same gender relationships, or specific needs for women who have sex with women and men who have sex with men.”

Elia and Eliason (2010) call this form of exclusive education “anti-democratic in a pluralistic society” and that it only represents a specific subset of values (p. 36). By not presenting an inclusive and comprehensive form of sexual health education LGBTQ topics get “pushed...into the margins” and are “systematically erased” (p. 36).

Comprehensive sexual health education is important for all students, regardless of gender or sexuality. Schwarz (2007) cites that before graduation nearly half of all high school students in the United States will engage in sexual activity. This means that nearly half of all high school students will be at risk for things such as pregnancy and the spread of sexually transmitted infections. Schwarz states the refusal to engage in a comprehensive sexual health education program, and the focus on ineffective programs such as abstinence only education, places teens at greater health risks. Schwarz identifies how abstinence only education programs are provided large amounts of funding by the federal government, responding to certain religious ideologies rather than reality and the needs of a diverse youth population.

Statistics Canada (2005) reported that 43% of teens had sexual intercourse. Freeman et al. (2011) performed a more recent, but less expansive study, that found that 23% of grade nine males have engaged in sexual intercourse, while 18% of grade nine females have engaged in sexual intercourse. With 6% of boys reporting they had sex at 12 years or younger. Almost one quarter of students who had engaged in sexual intercourse admitted to not using a condom. Teens of all sexualities and genders are undeniably having sex.

Comprehensive sexual health education has the goal of informing teens to help prevent pregnancy and the spread of disease. Comprehensive sexual health education also seeks to

prepare teens emotionally and psychologically for sex (e.g., healthy relationships, abuse, etc.) The Sex Information and Education Council of Canada (2009) found that comprehensive sexual health education programs resulted in postponement of first sexual intercourse and an increase in condom use; meanwhile, abstinence programs were found to be ineffective at delaying intercourse, preventing pregnancy, and preventing the spread of STIs.

Nicole states that sexual health education continues to lack content on consent and is still ineffective. She believes that consent and queer friendly sexual health education are something that everyone should know about, “Even if you end up not being queer (LGBTQ+) later on in life, you’re almost guaranteed [sic] to have a friend who is.”

Nicole’s statement highlights several salient points. The first, sexuality and gender are not concrete; rather, they are fluid. Manley, van Anders, and Diamond (2015) state that the development of certain relationships may influence sexual orientation. For example, people may identify with a sexual orientation based on the person they are currently in a relationship with.

Pattatucci and Hamer’s (1995) research showed that 20% of their participants had shifts in their personal placement on the Kinsey Scale. Butler (1990) has similar views on gender stating, “Gender is the repeated stylization of the body, a set of repeated acts within a highly rigid regulatory frame that congeal over time to produce the appearance of substance, of a natural sort of being” (p. 45). Butler views gender as a social construct in which humans perform. It is not biological; rather, it is something we, as humans, are told to do. Butler’s analysis of gender then, allows for gender to be understood as more fluid as a person grows and changes.

In elementary and junior high school, the research participants experienced heteronormative sexual health education. Despite now identifying as LGBTQ+, they were, at some point, assumed to be heterosexual. Nicole states, “I remember searching up so many websites about being bisexual at one point in life, as well as watching so many YouTubers [sic], including watching transgender videos before I even realized I was trans.” Nicole’s statement reveals the reality that youth may not fully realize their sexuality and gender until after high school, and perhaps into later life. Nicole’s lack of knowledge regarding herself can be credited to a dominant and restrictive heteronormative culture, “Up until my second year of university people actively stopped me from exploring my gender.”

If school is not teaching about LGBTQ+ friendly topics, then these individuals risk ending up unprepared, invalidated, and confused. This is exemplified by Nicole's own lived experience where she did not realize she was transgender until after exploring sexuality and gender and 4489 not accepting herself as bisexual until university.

Curriculum and the classroom. When students see themselves in what they are learning they begin to develop a connection to the content. Curriculum that excludes certain identities causes the exclusion of individuals within the classroom. The direct and explicit inclusion of LGBTQ+ youth was a common theme discussed by all participants; they felt that if they were represented within the curriculum, perhaps their education would have turned out differently.

Michael felt that when he was in school he needed his existence as a LGBTQ+ person to be acknowledged, "I think even just a topic for a day about LGBTQ+ people, the biological nature of sex, and the human rights issues they face will help LGBTQ+ students not feel ignored by the school." When asked what LGBTQ+ students need from a sexual health education program Kate responded, "I think to have things normalized, to have same gender attraction normalized."

Consensus from the research participants identified how the current educational system is missing some essential topics for both LGBTQ+ youth, and non-LGBTQ+ youth. Topics such as anatomy, birth controls, STIs, and consent need to be covered.

Nicole's ideas on an inclusive sexual health education program go beyond her own needs. She strongly supports consent being taught in the classroom and has noticed support for these ideas has grown in recent years. Campaigns such as the #metoo⁴, that are currently trending on social media, give her hope that there are positive changes (such as public support) in the discourse around sexual health education and consent.

Building on Nicole's desire for consent to be included more prominently in sexual health education, Kate identifies consent as a topic often discussed amongst her peers. Consent does not seem to be an issue just with the participants, but with their peers as well. Kate feels that sexual health education needs to go beyond simply stating the uses of a condom, "Another thing friends

⁴ A hashtag made popular in 2017. The hashtag is used as a way for victims of sexual assault and abuse to support one another and diminish the stigma around assault.

and I have discussed is that consent is not broadly discussed... another thing that isn't address is how to ask someone to wear a condom, how to ask for consent, and how to communicate, which is really important." 4489 supports this idea stating that there needs to be more extensive information in order to prepare students.

Michael suggests that sexual health education should not just be focused on sex as a science, but also as a social topic. 4489 wants to break the stigma around sex and sexuality. She states that education needs to talk about sexual health education as if it were not a "big issue." Michael feels that educators must continue to discuss the act of sex as biological, but also break free of the dichotomous nature of heteronormativity. If educators begin talking about sex in a different way then it will no longer be seen as inappropriate. The social issues that Michael mentions, then come in when discussing relationships, consent, and sexuality. This also means doing away with opinion-based sexual health education, such as connecting sex to procreation and homosexuality to disease. Michael feels that these changes will allow students to understand sex and enable them to make more rational decisions thereby reducing risk.

Kate proposes enabling students to navigate good quality, nonjudgmental information as an essential tool. Youth need to be able to determine, themselves, what is true and false and right and wrong for them. They need to be able to seek out proper sources of information and understand how to process it. This exploration process needs to be supported and youth need to feel safe as they grown and learn. This is especially important in today's society where "fake news" on social media is increasingly seen as a legitimate and trustworthy source of information. While the internet can be an excellent resource for teens who do not benefit from a heteronormative education, being given a formal education in a formal educational setting will lessen any chances that they will receive false information, or at least have the tools and knowledge to discern truth from fiction.

Nicole's hope for sexual health education is that educators begin to discuss different bodies and how gender and how bodies look do necessarily correlate to the binary that has been constructed. Nicole also feels that the purpose of sexual health education should not be to scare youth away from sex; instead, it should be informative and allow students to learn about different relationships and attractions including queer relationships and the lack of attraction that some people feel.

Juan wants more comprehensive sexual health education that is not just dropped into a health class mid-year. Juan describes how sexual health education needs to start earlier in a child's life, exploring topics about gender and sexuality in their formative years. Juan highlights how sexual health education needs also needs to diversify its audience, so it meets the needs of all students, regardless of their identity. Juan wants education to respond to the needs of today's youth and encourage educators to start really listening to the questions that students are asking.

Nicole knows that this process is not easy. She states that LGBTQ+ people need momentum, and that this momentum can come from research, which can influence how curriculum and policy are created, and how sexual health education is taught and presented in the classroom. Most importantly, Nicole feels that all these changes should be driven by the needs of the youth themselves. She states that her opinions on sexual health education are valid and make sense for her experience; however, she is now far removed and finished with that part of her life, "This generation of kids will have different questions than previous generations."

Sexual health education must be responsive and should strive to meet the needs of today's generation of young people. This means that sexual health education not only needs to be inclusive and comprehensive, it also needs to be relevant and current. In an ever-changing world, curriculum that remains stagnant becomes unresponsive to the needs of youth. The dated Alberta curriculum, and the lack of youth involvement in the development of new curriculum, is a proverbial recipe for disaster. Alberta's curriculum must be responsive and meets the needs of all youth in the province.

The Internet as an educator. Jones and Biddlecom (2011) highlight how teens are using the Internet more than ever. Young adults are using the Internet to connect to educational resources with 72% of young adults stating that they have gone online for health or medical information. There are many websites that provide factual information about a range of sexual health issues; however, there are also many websites that contain false information. Jones and Biddlecom interviewed youth to see how they were utilizing the Internet in relation to sexual health education. They found that for many youth the Internet provided them with an opportunity to avoid awkward conversations with parents and provided them with a connection to anonymous communities where people discussed issues such as mental health and sexuality.

The use of the Internet as the only source of education for youth can also present significant challenges. While information found on the Internet may be factual, there is the risk that many youth may be unable to discern factual and useful information from poor information. Secondly, while many young people are uncomfortable approaching their parents for information, the use of the Internet as an alternative educational venue highlights the absence of (and need for) conversation at home and in school surrounding sexual health.

Jones and Biddlecom's research found that while some youth are clearly wary of the Internet as a source of good information; they still use it. Many youth are attracted to the idea of the Internet as an information source due to their own lack of understanding of sex and sexuality. In my research study, all participants agreed that the Internet was a highly useful educational tool for them in learning about sex and sexuality. Michael stated that he did learn about sex in school, but needed the Internet to learn about what LGBTQ+ means and the issues around identifying as LGBTQ+. It was not until university that Michael broadened his understanding of gender and "how it's really just a social construct and how gender norms are all invented and upheld by society." Juan received his education from places like Tumblr⁵; which had a big impact on how they understood their sexuality. Juan still, however, had to seek out other sources to learn about their own gender identity. The Internet helped by connecting them to communities that were inaccessible to them as a young adult. 4489 stresses the importance of the Internet giving them a foundation, which they then expanded upon in the post-secondary setting. Once they were connected to the LGBTQ+ community, they were able to meet activists and other people within the greater community. Nicole also credits the Internet as an important source of information. Watching YouTube videos allowed Nicole to gain information on being bisexual and transgender (prior to the realization that they were trans). Nicole felt that their knowledge was still restricted; with people trying to stop her from exploring her identity.

Juan and Kate identified how pornography can act as a source of informal information for youth. Due to the conservative nature of society, youth are rarely exposed to LGBTQ+ role models and overt sexuality. While youth can turn on almost any television channel and see

⁵ <http://www.tumblr.com> is a social networking website that allows users to share posts that contain videos, photos, and text.

heterosexual relationships, and even heterosexual sexual acts, rarely are other sexualities portrayed on television. Due to this absence, many LGBTQ+ youth seek representation online and through pornography.

All the participants discussed the idea that youth are being educated by the Internet and media, much more than by their parents or schools. An example of the information sources they cited are blogs, social media, TV, and pornography. While some of these sources were helpful to the participants in discovering their identities and their bodies, they are not always credible or reliable sources of information.

Despite the potential problems with credibility, online communities can also link youth to the larger LGBTQ+ community. Nicole highlights the important visibility and voice that the Internet and media provide: “Years ago it was easy to have not heard the term transgender but with big names like Caitlyn Jenner (despite being problematic) and Laverne Cox, I think everyone has heard the word.” Nicole elaborates further by describing how there is now more representation of LGBTQ+ individuals in the media. Some of these LGBTQ+ individuals use platforms such as YouTube to promote more open communication and awareness of diverse sexual orientations, gender identities, and gender expressions.

Kate believes that many of these informal online sources of information are not necessarily credible or positive. Nicole agrees mentioning that news often has stories on LGBTQ+ issues such as bathroom bills and trans* rights. While these stories bring about LGBTQ+ visibility, they do not necessarily contain accurate information and may present negative and harmful opinions.

Through their introductions and their reflections on various sources of sexual health education, all the participants agree that the Internet gave them more much information about being LGBTQ+ (both good and bad) than sexual health education classes. While it did provide them with information they were not getting in school, the quality and even validity of information garnered from the Internet and media depend on the source. While post-secondary education seemed to allow them to connect more readily to the LGBTQ+ community, and courses that explored sexuality and gender, their education in high school was largely poor and informal.

Poor quality education for LGBTQ+ youth. Michael felt that most LGBTQ+ people go through a period of confusion at some point with many feeling potentially alone. He feels that the way schools teach is too “black and white” and can cause individuals to feel even more lost and helpless. Juan believes that there is too much reliance on informal discussions and sources of information rather than on comprehensive formal education for LGBTQ+ individuals, which could be potentially harmful to all students. 4489 felt that many of the LGBTQ+ people they have talked with have felt shame, fear, and isolation. They feel that many LGBTQ+ people go through a similar process of coming out, feeling liberated, and searching for answers. 4489 also highlights that LGBTQ+ who have intersectional identities deal with additional difficulties in relation to their race, ethnicity, and culture. Juan highlights how schools need to acknowledge the existence of LGBTQ+ youth and validate their feelings. They lament how the lack of this acknowledgement could be a literal matter of life and death for many young people.

The research participants did show signs of hope that the system was improving. Michael believes that with the New Democratic Party in government, education may be changing. 4489 now works in schools and has experienced teachers using a more comprehensive form of sexual health education, but fears for what is happening in rural Alberta where the culture is typically more conservative.

Juan, however, felt discomfort in trusting the system. They feel an obligation to their younger brother to teach him things such as consent, as they do not think Alberta’s education system will, claiming that “not enough is being done to teach about so many of the things that young people may be asking themselves about, and this lack of knowledge manifests itself through bullying and self-hate.”

The participants all believe that their experiences with sexual health education and coming to terms with their LGBTQ+ identity are not isolated cases. Interactions with others in the community have allowed them to realize that poor sexual health education is a significant issue within the greater LGBTQ+ community.

The Future of Sexual Health Education

Unfortunately, none of the participants have had a positive experience with sexual health education in their schools. Upon reflection, they recalled how the curriculum they experienced

was inadequate and continue to be critical of the educational system. Despite this, none of the participants felt they had the power to directly influence policy and curriculum. Participants stated that they are not doing enough to promote change; however, each one continues to act as an ally for youth currently engaged in Alberta's education system. Each participant contributes to the fight for social justice in some way. The participants' responses were a mix of hope and hopelessness. They believed that the future was brighter and that youth were going to make change, but they also felt somewhat helpless against policy and law makers, administration, and the underlying conservative and neoliberal nature of schooling in Alberta. Clearly, change has been slow to come in Alberta schools, but by amplifying the voices of today's youth, change is possible.

Allyship. Gordon (2005) highlights how young adults can help fight for social change in K-12 schools. Young adults can act as the "face" of a movement, giving validity to the experiences of teenagers who may be invalidated due to ageism. As allies, it is not the job of young adults to speak on behalf of teenagers; rather, they are to push for youth leadership and to strategically support youth in their endeavors to legitimize youth movements. Allies must not lead; instead, they must work alongside the marginalized. Allies must truly believe in what students are fighting for. This can sometime mean giving up power and privilege in order to give students space, voice, and autonomy.

Allies also connect younger generations to past struggles. The young adults that participated in this study, while close in age to current high school students, have experienced similar oppression in a different context. By connecting to younger generations, they bridge a gap that allows youth to realize that they are not alone in the fight for inclusive and comprehensive sexual health education.

Research participants were asked how they continue to support other youth, particularly those still in school, in the fight for comprehensive and inclusive sexual health education. Michael admits that it is hard for him as his job does not directly correlate to LGBTQ+ rights. He advocates for the LGBTQ+ community in his spare time through social media and through peer interactions. 4489 states she tries to advocate when necessary, but also finds it hard. While she works to support Gay-Straight Alliances and LGBTQ+ student rights, she also realizes the need for a careful approach to sexual health education as people often, wrongly, associate GSAs and

LGBTQ+ rights with sex and sexualization. She's working to disassociate the negative stereotypes around LGBTQ+ people and sex, stating that the queer community faces the same complex issues as the non-queer community. With that said, she hopes that her work will open up the discourse around the needs of LGBTQ+ youth, including inclusive and comprehensive sexual health education. Kate writes a blog that relates to reproductive justice, rape culture, and consent. She feels her work is contributing the proper sexual health education and is also considering becoming a certified sexual health educator. Nicole feels that she is not doing much for sexual health education. She teaches anti-oppression workshops that target homophobia and transphobia, which leaves her with little time to target other issues. She plans to continue to be an advocate when she can, stating, "A single person changing the subtle views of those around them can sometimes have ripple effects..."

4489 hopes that by sharing her experience and knowledge she can highlight the continued failures of sexual health education. She has pledged to better educate herself on the current sexual health education system in Alberta, in order to better prepare herself to fight for more comprehensive education. Kate feels enriched by contributing to this study knowing her voice will be heard by those who are shaping education. She hopes that her contribution may, "have a hand in influencing the direction the province takes in sexual health education." Nicole believes that research can be the push that is needed to make change. Nicole is hopeful that research can create a societal momentum that can be utilized by progressive governments, such as the New Democratic Party.

None of the participants, who are all involved in various levels of advocacy for the LGBTQ+ community, have the ability to dedicate the entirety of their time to fighting for changes in sexual health education. The participants must act as part-time advocates in order to focus on their own lives and other areas of advocacy (such as trans rights and the rights of queer people of colour). The desire for change is present, but the ability to take action is often hard and complex. Despite some of the participants self-criticism of how much they are doing to promote change, their involvement in this study shows a dedication to making a positive difference in the education system. The current political climate in Alberta sees individuals fighting against climate change deniers, homophobes, transphobes, capitalists, and far right conservatives. Those

fighting for positive social change (such as the participants in this study) are trying to not only survive as oppressed individuals, but also fight for the rights of others.

Teacher training. Perhaps, the lack of inclusiveness in education is not to blame solely on the educator. Instead, it is possible that educators do not feel comfortable or prepared to work with LGBTQ+ students. As Kate suggests, “I think that many teachers feel uncomfortable or are simply uninformed, like they provide inaccurate information about certain topics, particularly things like HIV/AIDS, in my own experience.” Here Kate highlights the inefficiency of teachers who are not qualified to teach sexual health education.

Nilsen (2013) found that teachers in Norway sometimes did not emphasize the importance of sexual health education. Nilsen found that teachers showed a lack of interest, felt it was not their job, were generally uncomfortable with the topic, or felt they lacked the competency to teach it effectively. These teachers reported that sexual health education was not something they were prepared for in their university training, and K-12 schools often implemented it in “unsystematic” ways. Even the organization of sexual health education varies, with no consistency on how much time should be spent on instruction. Essentially, teachers were provided with little knowledge or guidance on when or how sexual health education should be taught.

Importantly, Michael finds that newer teachers are more open to learning about LGBTQ+ individuals and seem to be more comfortable talking about LGBTQ+ issues. 4489 has talked to some older teachers who shared that younger teachers are “learning so much more than they ever did in university.” 4489 is aware that education courses at the University of Alberta occasionally bring in guest speakers that come in to talk about LGBTQ+ content, thus better preparing educators who are currently entering the profession.

Kate’s experience saw guest speakers providing information to students. She suggests that these guest speakers are not enough and believes that a sexual health education certificate should be required in order for a teacher to teach sexual health education. This idea of a required sexual health teacher preparation course is supported by Michael who believes teachers need to be taught how to address the various needs of all students, including those who identify as LGBTQ+. 4489 also supports this requirement, stating that all teachers need information to feel confident and prepared. She highlights the fact that these teachers also need the support of their

schools, their school boards, and legislature. An inclusive teacher, working within an exclusive system, cannot do their best work. She also thinks parents need to be on the side of educators, but feels that parents may be among the most strident opponents in supporting inclusion.

The lack of inclusion in schools, according to my research participants, is not due to malicious teachers; rather, complacency seems to be the culprit. In the experiences described by the participants, teachers were not going out of their way to deliberately ignore LGBTQ+ students, but were reinforcing the expectations of a dominant heteronormative education system. Those who were seen as inclusive seemed to step outside of the structure of typical education and provided the participants with positive experiences. Complacency, while not an overt act of aggression towards LGBTQ+ youth, does not provide much-needed support. Those who went out of their way to recognize and validate the participants made them feel welcome, safe, and recognized.

Curriculum. Michael also proposes that school boards and the government start hiring experts in the field of education, child development, and sexuality to aide in the creation of an inclusive, comprehensive, and evidence-based sexual health education curriculum and resources. These professionals can create age-appropriate materials that respond to the needs of youth at various stages of their life; they can also be created to include all youth rather than those that prescribe to heteronormative ideologies.

Upon examining Alberta's K-12 curriculum, there are no clear guidelines on how and when sexual health education should be taught, just that it should be taught. Alberta's Guide to Education (2017-2018) states the amount of time that should be spent teaching general subject areas in each grade. The Guide to Education, however, does not specify how much time should be spent on sexual health education; rather, it states that it needs to be covered in the Health and Life Skills and CALM courses. The lack of clarity leaves the decision to the school, or in some cases to the individual teacher.

Discussion

Having gone through the education system in Alberta around the same as the participants, I can empathize with many of their experiences. In the experiences of the participants, sexual health education for LGBTQ+ youth was often seen as unimportant or altogether absent.

LGBTQ+ youth frequently seemed to be treated as an anomaly or erased entirely from classroom discussions. However, despite these challenges, knowledge about LGBTQ+ youth has improved. The participants were aware of such improvements, but the credit seems not to fall on the education system; instead, credit is given to the Internet and peer groups. This can be potentially problematic as the education received is not from the formal institution that is tasked with protecting and educating youth. While the participants discussed specific topics that were not covered in their education, they also highlighted some general practices that promote inclusivity and comprehensiveness. The participants experiences and opinions could be summarized in three overarching themes: curriculum and resources, teacher training, and informal education

Curriculum and resources. The major theme arising focused on the criticism of curriculum and resources that support teachers and LGBTQ+ students. Students crucially need access to resources that align with their identity and teachers need to be providing support to these students. If not mandated by the government, school boards, and administration, educators can stray from inclusive topics and stick to what they know: heteronormative topics. Curriculum and policy need to support the inclusion of LGBTQ+ topics in sexual health education and mandate that students be provided with the opportunity to engage with these topics.

Current curriculum leaves too much room for interpretation and is criticized for, not being inclusive. Huncar (2017) reports that the current Alberta NDP government is now working on unprecedented changes to the Alberta curriculum. Education Minister David Eggen has pushed back against Alberta Catholic Schools; stating their proposed curriculum does not meet Eggen's standard of inclusivity, disallowing church doctrine to influence curriculum and override the rights of LGBTQ+ students. Eggen assures Albertans that the new curriculum will be inclusive of all students. French (2018) reports that the NDP's opposition, the United Conservative Party, accuses the NDP of "socially engineering" children, with some in the party, threatening to cancel the curriculum rewrite should the UCP form government in the next provincial election. Clearly, any changes to Alberta's sexual health curriculum will be contested.

Sexual health education in today's schools needs to meet the needs of the youth it is designed to serve. Sexual health education should not be taught for the sake of the government, school board, parents, or community. Wages (2015) discusses how culturally responsive educators often work around curriculum. Responsive educators react to formal curriculum by

making changes in order to focus on multiple perspectives and study a wide range of individuals from various races, classes, ethnicities, genders, and sexualities in order to meet their students' needs. Wages recommends that "curriculum should be structured in order to respond to students' individual differences" (p. 76). Curriculum is not something that should be prescribed to youth in a manner that adults deem fit. While adults do need to be a part of the process, it should not be solely their decision on what is taught in schools. Instead, the needs and opinions of youth should be one of the primary foci of curriculum-making. Within the arguments against the NDP's inclusive curriculum are arguments for prescriptive education. Donna Trimble, an executive director of Parents for Choice in Education, claims that the rights of parents are being challenged. She believes parents should be allowed to choose an education that protects students, and that the NDP seek to force a singular perspective on Alberta students (Huncar, 2017).

My research participants recognized the potential for change in Alberta with the NDP in power. Some participants were able to gain solace in knowing the current government, in an unprecedented move, is trying to change the sexual health education curriculum as well as inclusion within the province. As Nicole states, while they are all still youth, none of the participants are currently being affected by sexual health education in K-12 schools. While all the participants still have a connection to the LGBTQ+ community and thus are invested in improvements, they realize that their voice is not the most important; committing instead to advocate for youth voices currently in the educational system.

Reflecting on their hopes for the future, the participants all agreed that there was pushback from certain individuals and groups within Alberta. The realization that the fight is far from over has given the participants the drive to continue to fight for LGBTQ+ individuals within their work or spare time.

Teacher training. The second significant thread of the participants conversations was a strong focus on the importance of teacher training. They stated that if teachers are not prepared to teach the subject of sexual health education, then they should not be teaching it. By their own experience, the participants suffered when their teachers were not comfortable with the material they were required to present. They fear that students today will continue to face the same problems and challenges.

The issue of teacher training is evident when examining course offerings at the University of Alberta. The University of Alberta currently does not require students in either the Elementary or Secondary Bachelor of Education programs to take a course on sexual health education. A review of the University of Alberta's 2017/2018 course catalogue sees a lack of courses that focus explicitly on inclusion of LGBTQ+ youth. The only courses focusing on any sort of inclusion are EDU 211 – Aboriginal Education and Contexts for Professional and Personal Engagement, where the focus is on Aboriginal Education, and EDPY 301 – Introduction to Inclusive Education: Adapting Classroom Instruction for Students with Special Needs, where the focus is on inclusion of diverse learners.

Once certified, teachers continue to lack opportunity to grow as sexual health educators. A lack of professional development, in regard to inclusion and sexual health education after post-secondary, is evident. Upon review of the 2018 Greater Edmonton Teacher's Convention's speaker schedule, there were no speakers on sexual health education, and only two speakers presenting on inclusion. When examining the descriptions of the two speakers presenting on inclusivity, neither specifically mentioned LGBTQ+ inclusion.

When it comes to teaching sexual health education, the lack of teacher preparedness on essential information is what causes students to seek out other informal, and often less credible sources of information.

Informal education. Due to the lack of teacher preparedness and non-responsive curriculum, the participants identified that youth were learning about sex, sexuality, and gender through informal sources such as YouTube, Tumblr, and pornography. If learning is going to occur on the Internet rather than in the classroom, educators should be proactive in teaching students how to navigate these online sources and provide them with accurate and factual links to resources.

Byron and Hunt (2017) found that the social media site Tumblr was a gathering place where issues regarding gender were discussed and solutions shared. While this form of online community is needed, it also suggests the need for "health promoters, researchers, and professionals to directly engage with young people of diverse genders and sexualities, rather than devising and delivering interventions without their input" (p. 324). Byron and Hunt's research highlights how gender diverse youth are utilizing non-professional sources as they are more

readily available than actual health professionals, and youth may feel more comfortable with the informal setting. Byron and Hunt also note the negative side of Tumblr, such as the toxic environment created when there are disputes around sexuality and gender. The solution, then, is not to abdicate responsibility to informal sources; rather, it is to look at why students do not feel comfortable engaging with mechanisms for formal sexual health education.

Byron and Hunt also discuss the positive aspects of YouTube as a form of education. While informal, YouTube allows the expertise of individuals to be shared. Information is shared from the bottom-up; rather than the top-down. Information is not chosen by administrators or policy makers; rather, it is based on the experiences of people who have lived the life of an LGBTQ+ person. Byron and Hunt discuss how these informal networks allow for LGBTQ+ youth to have a space of their own and allow youth to have their own experiences.

Juan and Kate both mention how pornography can be used by youth to learn about their attractions when they are not taught about it in school. Allen (2011) agrees, suggesting youth use pornography to satisfy curiosity, prove to their peers their sexual knowledge, and in order to conform to normative gender expectations. Albury (2014) identifies how pornography can also serve an educational purpose. For example, when other sources of information are not available or inclusive, it may provide same-sex-attracted people with visibility, sexual confidence, and positive community formation. However, pornography may also provide less attractive ideals such as eroticising the inequality between genders. Pornography can also promote unrealistic ideas of what the human body should look like and can potentially promote risky behaviors. Albury argues that pornography can be utilized by adults as a form of education; however, youth require what he describes as “porn literacy” (p. 173). Albury describes porn literacy as a way to navigate pornography in a manner similar to how youth are taught to navigate other forms of media. This literacy focuses on the ability to discern what is real and what is not, and to critique aspects of pornography that promote misogyny, homophobia, and racism.

Chapter 6: Conclusion

Self-Reflection and Limitations

The experiences and responses provided from the research participants were valuable, as the situations they faced in their own education still currently impact youth in today’s schools.

The participants highlighted deficiencies of the education system. They were able to make rational assumptions based on their own experiences, observation of other youth (in their work and personal lives), and the current political climate, which allowed them to observe how things may be changing. A potential next step for this study is to extend this research to youth under the age of eighteen – who are currently able to speak to their everyday experiences with sexual health education in Alberta schools. This too, reflects the idea proposed by the participants that it is the youth currently in the system, that should be influencing the system. Further actions could also be taken by creating of a coalition between LGBTQ+ adults – who understand curriculum, policy, law, and the research – and LGBTQ+ youth, whose lived experiences need to be reflected in the sexual health curriculum. Participatory action research would be one significant way to not only gather evidence, but also to advocate for much needed policy and curriculum change.

Reflecting on my experiences with PAR, the involvement of my research participants was limited. The participants engaged and wanted to participate, but many did not answer questions until near the deadline. This left little time for responses to build upon one another and did not allow for a community of participant researchers to be formed. While the forum allowed for anonymity and well thought out responses, it did not create a space where participants readily conversed with one another. If given the opportunity to expand my study, I would allow for more time to respond and perhaps open the forum up to a larger group of participants to ensure more consistent discussion.

While the participants felt a strong connection to the topic, and saw importance, they could not dedicate enough time to do a thorough analysis of the topic. With their personal lives keeping them busy, the study was not a priority for many participants. The benefits of online participation did not allow for participants to fully commit. A study, such as this, needs commitment; but, the participants also need to be reimbursed for that commitment.

At the conclusion of the study, all participants expressed interest in continued involvement and wanted to further explore the topic. I am sure, that if asked, the participants would all make time to continue the conversation and working to produce solutions; however, the participants would most likely agree that the focus must also expand to include a more broad and diverse population in order to meet the needs of the larger LGBTQ+ community.

Despite including a diverse sample of participants, the examination of the importance of intersectionality lacked depth. Participants with intersecting identities did not engage in the research as intersectional individuals; rather, they focussed mostly on their sexual orientation and gender identity, rather than race, socioeconomic status, or ability. This could be due to the position of power I hold as a researcher and a cisgender, white, male. Despite discussion and research being done on the intersections of race, sexuality, gender, and ability, these topics can require a lot of resources and time to fully explore. Further research would see additional researchers involved whose research and lived experience more broadly focuses on intersectionality. This community of “insiders” might encourage more broad participation from underrepresented groups.

Further research should move beyond theory and focus on practical applications, creating new resources, and evaluating them. For example, creating evidence-based resources, lesson plans, and a sample curriculum that could be tested in classrooms would be a beneficial outcome of more action-based research. Additional research could also see classroom teachers working with their students to diagnose areas of need, creating, and then implementing lessons plans that meet these needs.

While this research did explore important questions and provided a rich context on the experiences of youth in Alberta in relation to the sexual health curriculum, other areas of much needed inquiry also became apparent. For example, there are some recent findings on increasing STIs rates among youth across North America; however, the past ten years has seen an absence of information on the age youth are becoming sexually active. In the current political climate, where many are fighting to talk less about sexual health in schools, it is important to note that youth are having sex and need to be fully educated with evidence and facts.

Another topic that could be more fully explored would examine what educators and administrators are actually doing within their schools to promote comprehensive sexual health education. For example, how is sexual health education actually being taught in K-12 schools? What resources are being used? How do teachers and administrators handle pushback and resistance? These are all important questions which deserve further research and analysis.

Recommendations for Change

The combined experiences and opinions of the participants, the research, and the researcher allow for some general observations and conclusions. While positive changes are being made within Alberta, in regard to sexual health education, these changes may still not be enough to truly transform sexual health education into a fully inclusive and comprehensive program. Below are several key recommendations to help improve sexual health education in Alberta's schools.

Youth influencing curriculum and resources. One of the reasons that youth aged 18-25 were chosen for this study was due to the fact that they had recent experiences with sexual health education, but also adult experiences (which arguably, sexual health education prepared them for). These individuals were able to speak directly to the effectiveness of sexual health education and make recommendations based on lived experiences. Currently, sexual health education is often shaped by the observations of those who are far removed from the classroom.

Stevens, et. al. (2013) suggest that sexual health education researchers frequently ask teachers what they think students are talking about regarding sex and sexuality. Stevens, et. al. identify this approach as problematic as teachers may be misguided by their own bias and beliefs or might not accurately recall what students have shared. Instead, they recommend a youth-driven approach in which young people generate questions about sex and sexuality that are used to help develop a curriculum that is based in decolonization, feminism, and the empowerment of marginalized gender and sexual minorities. This humanistic approach addresses the issue of comprehensiveness by directly responding to the questions and needs of youth, in addition to mandated curricular outcomes. It also addresses the issue of inclusiveness and intersectionality, by centering the experiences of marginalized groups such as Indigenous youth and youth of colour.

Alberta's curriculum could benefit from the framework proposed by Stevens, et. al. If students can have more direct influence on sexual health education, not only will they be more engaged, but their various needs would more likely be met. Clearly, sexual health education must be contextual and responsive to youth. A prescriptive sexual health education program prepares youth for what policy and law makers deem important; but not necessarily what is important to students directly. Not only will such a participatory curriculum allow for responsive education, it will also allow for LGBTQ+ youth to see themselves reflected in their classrooms.

Zook (2017) argues that educational leaders are in the position to “interrupt the status quo of the insensitive hetero/cisnormative and homo/transphobic culture of our schools, and by extension through time, our entire society” (p. 1764). Democratic and transformative leadership sees educators committing to “just reform” and to be critical of a system that oppresses certain individuals. Educators must be purposeful in their support for the liberation of students by providing opportunity for reform and revolution in regard to sexual health education curriculum.

In order for youth to be supported in this plight, adults must support curricular changes proposed by youth. Researchers and educators can promote such changes through participatory action research where youth are supported to develop voice and agency. Rubin, Ayala, and Zaal (2018) warn that in order for PAR to work within the classroom, adults need to be able to step away from the role as leader. Youth also need to be supported as the hierarchy of educational administration and policy may limit or even subvert the process of student led educational reform. Rubin, Ayala, and Zaal suggest that navigating power relationships with administration can be challenging, and some educators may feel that they are in jeopardy; this is due to the educator and students challenging a power structure that often remains unchallenged.

In the Alberta context, educators that support such changes to sexual health education not only face the challenge of administrators and policy makers, but also the religious right and the aforementioned community members who seek to stifle inclusiveness and comprehensiveness. Change is not an easy task.

Importance of informal education. Currently, as discussed by my research participants, students are relying on informal education as the core of their sexual health education. While this provides a safe space, and perhaps information not covered by formal sexual health education, it also comes with potential dangers.

Byron and Hunt’s (2017) research highlights the positives of informal education, allowing youth to create their own experiences and to learn from each other. They support less intervention by formal education, as it can turn informal information into a prescriptive dialogue shaped by those who do not share in the experiences of those presenting informal knowledge. For example, Tumblr provides diverse youth with access to an open online community. While this is a positive, youth still need to be able to navigate such communities with care and confidence. Tumblr could be a good alternative for educators to explore communities of sexual

and gender diverse individuals who may not be prevalent in society or in teacher resources. The digital nature of online communities may also allow youth who experience physical distance and isolation to connect to one another.

YouTube is another online resource where youth can learn about sex, sexuality, and themselves. It allows youth to view media that is targeted towards them, something that perhaps does not occur often in other forms of mainstream media such as television and movies. However, caution is still warranted as youth need to be aware of the factuality of information presented on the Internet. Educators could help by prepping their students to navigate content or creating online content themselves. Sexual health agencies and the provincial government could also create such resources. TeachingSexualHealth.ca is an excellent example of local online resources that have been created for youth, educators, and parents. These resources can be used with confidence as they have been created with experts in the field of sexuality studies and are supported by Alberta Health Services.

Finally, pornography is prevalent in our society. Hare, et. al. (2014) found that young Canadian adults use pornography as a way to explore aspects of sexuality that are not discussed publicly. Their study showed that young adults sometimes viewed pornography as the “best” alternative to actual sexual health education. The issue here is not with pornography in which the intended purpose is for pleasure and not education; rather, it is with the use of pornography as an educational tool which may be correlated with the effectiveness of sexual health education to meet youth needs. A solution offered by the participants in Hare, et. al.’s study is for sexual health education not to ignore pornography, but to take on its positive aspects in an educational role. As the participants in Hare et. al.’s study indicated, the inclusivity and sex positivity of some aspects of pornography allowed them to explore sex and sexuality more comfortably.

The simple solution is not to ignore informal sites of learning about sexual health, such as Tumblr, videos, and pornography; rather, it is to research why youth are choosing these venues over more formal modes of education. Ultimately, it should be the educator’s job to either prepare youth to critically access these sources safely, or to develop curriculum and educational tools to offer youth what Tumblr, YouTube, pornography, and other online sources offer, which seem to include feelings of inclusion, community, and important information they are not receiving in schools.

The need for teacher training. Schools need to require their teachers to be trained to teach sexual health education in comprehensive and age-appropriate ways. Unfortunately, teaching assignments may not be reflective of a teacher's training; rather, it can be more reflective of a school's needs. If a teacher's assignment is to teach a course they are unfamiliar with, regardless of subject matter, they should be offered adequate training and support. McKay (1999) suggests that teachers need to feel comfortable with sexual health education in order to teach it properly. McKay notes that the effectiveness of sexual health education was found to, "depend heavily on the comfort, skill and preparedness of the teachers involved" (p. 92).

The landscape of sexual health is constantly evolving, even while sexual health education remains stagnant. For example, societies knowledge of STIs and HIV has dramatically increased, yet curriculum seldom reflects these advances. Our understandings of identity and language are also evolving. For example, youth now openly talk about pansexuality, consent, the complexities of gender. Are educators equipped to help guide and lead these conversations?

While youth input can influence curriculum in Alberta, there still needs to be teachers who can teach the curriculum. Universities need to prepare all teachers to effectively teach sexual health education, and to teach a responsive sexual health curriculum that will respond to the changing needs of students that a teacher will encounter throughout their career. Almost two decades ago, McKay (1999) identified an issue with Canadian universities and their offerings of sexual health education training; many universities had explicit offerings of health education, but not necessarily sexual health education. Sadly, many of these programs have yet to evolve and include a substantial sexual health education component.

Universities need to prepare educators to not only teach about sexual health education now, but also to teach future generations of learners. Human sexuality is in constant motion. Examining Carlson's (2012) history of sexual health education in the 20th century, it seems that education and educators would not be able to fathom the topics that are relevant today. Future generations of university graduates should learn how to recognize sexual health trends and adapt their teachings to stay relevant for the culture and time they teach. Onus does not just fall upon the universities, but all levels of education. School districts need to start promoting professional development sessions regarding sexual health as well as sexual and gender diversity training for all teachers. While sexual health education would benefit from an inclusive framework,

educators in general (as stated by my research participants) need to become more aware and inclusive. The importance of teaching comprehensive and inclusive sexual health education is of particular importance due to the correlation of sexual health education to students' mental and physical health.

The Sex Information & Education Council of Canada (2018) released a draft copy of their new resource entitled "*Core Principles of Comprehensive Sexual Health Education for Canadians.*" The document, with the final version to be released in fall of 2018, provides an important foundation on which a new sexual health education curriculum can be built. Guidelines within the document suggest that sexual health education should promote human rights and autonomy. This process sees educational programs aligned with the *Canadian Charter of Rights and Freedoms*, which states that all Canadians' (regardless of age) have the freedom of thought, belief, and opinion. This does not mean that schools should have right to exclude topics of their choosing, rather, "sexual health education should emphasize that individuals have an equal obligation to respect the rights of others" (p. 4). Importantly, the guidelines also state that sexual health education should be evidence-based and scientifically accurate and inclusive of LGBTQ+ identities.

The guidelines also highlight how sexual health education should be, "responsive to and incorporates emerging issues related to sexual health and well-being." (p. 3). For example, consent is emphasized stating that all people, regardless of gender and sexuality, should be free of gender-based violence.

Importantly, the guidelines, like my research findings, identify the need for educator training. Teachers need to be, "well-trained in the theory and practice of comprehensive sexual health education, and administratively supported" (p. 8). If a teacher cannot be provided with proper training, they should not be required to teach sexual health education. The importance of sexual health education to developing youth is clear; thus, it cannot be taught by the uninformed or the biased.

While the core principles provide a strong foundation for change, educators, administrators, and the government still need to be aware of the needs and voices of the youth they serve. If sexual health education is to be truly responsive to emerging issues, then youth

must consistently be involved in the process to ensure that education meets the needs of youth and not merely the interests of adults.

Personal Reflections

Having been educated as a student in Alberta's school system, none of the experiences shared by the participants were particularly surprising to me. I expected young adults, that are close in age to myself, would have been failed on some level by the system. While the purpose of this study was to examine the experiences of young adults who had recently participated in sexual health education, I hoped that they would highlight an important need: the input of those affected by exclusive and non-comprehensive sexual health education. As their experiences indicate, sexual health education needs to be responsive to today's youth and their culture. The knowledge my research participants sought was not obscure or hard to come by, yet was still a struggle to obtain in their schools.

I strongly believe in the abilities and capabilities of our youth. Having been a leader at Camp Fly, and a teacher within the Alberta education system, I have seen the astounding capabilities of youth. While students can always use tools and the aide of adults, they do not need their lives controlled or dictated. I have worked with many youths who may need guidance, but not once have I had to make a decision for a student. Youth can be very capable and confident decision-makers.

My personal practice when working with youth is not telling them what they need. Of course, being a math teacher, students constantly ask when they will ever use these concepts in the everyday reality of their lives. I try to explain how math is important and show my students what they can do with math. What I do not do is tell students to sit down, be quiet, and learn the math. My students are not empty vessels that I pour knowledge into, they are intelligent beings who have many amazing capabilities. Often, my students surprise me with their thought processes and their opinions. I am confident in the abilities of my students, and I am confident in the abilities of all youth. It is not my job to decide things for them. It is not my job to tell them what is best. It is my job to guide and to be there when they need help and support. I want my students, and all youth, to make good decisions for themselves and one important way to do that is by providing evidence-based, age-appropriate, and non-judgemental information to them.

In conclusion, participant 4489 reflects many of the hopes, wishes, and desires of youth when it comes to sexual health education: “I think we should be able to talk about it without it being a big issue. I know some people think it’s pushing an agenda, but not including it is also an agenda – a much more harmful one.”

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Appendix A: Participant Agreement

Study Title: Queer Narratives on Sexual Health Education in Alberta

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Background

You are being asked to participate in this study because you identify as a part of the LGBTQ+ (lesbian, gay, bisexual, trans*, queer, etc.) community; you are between the ages of 18 and 25; and you have participated in sexual health education in an Alberta K-12 school.

You have agreed, verbally, to take part in this study and were either asked to participate by me or referred by a mutual contact. The results of this study will be used in support of my master's thesis research.

Purpose

The purpose of this research is to provide LGBTQ+ young adults the opportunity to reflect upon the sexual health education they received in K-12 schools in Alberta, and to provide recommendations to make sexual health education more inclusive of and responsive to LGBTQ+ identities. Findings from this research will be shared with educational stakeholders to help guide curriculum reform and policy development.

Study Procedures

As a participant, you will be asked to participate in an online focus group for a two-week period. During this time, you will respond to questions posed by myself (the research investigator) and participate in discourse around sexual health education in Alberta with other participants. You will be asked to log in periodically over the two-week period, and agree to login a minimum of three times, to post initial thoughts to questions and subsequent responses to the researcher and other participants' posts. This timer period may be extended if ample responses are not given.

Benefits

There are no guaranteed benefits to this study. Your experiences will have the potential to help shape policy and curriculum to become more inclusive of LGBTQ+ individuals. We hope that the information gained from this study will help educational stakeholders better understand sexual and gender minorities in relation to general education and comprehensive sexual health education in Alberta's K-12 schools. You will receive a \$25.00 gift card upon the conclusion of the study.

Risk

There are no evident risks in participating in this study. At times you may be asked personal questions or may have to recall past experiences. While this may be traumatic you are not required to share any information and will be supported if any issues arise. The forum will be moderated on a daily basis and participants who do not remain respectful will be removed from the study.

There may be risks to being in this study that are not known. If we learn anything during the research that may affect your willingness to continue being in the study, we will inform you right away. You must also provide an email to an online forum and agree to their terms of service; thus, agreeing to any statements that these terms of service outline.

Voluntary Participation

You are under no obligation to participate in this study. The participation is completely voluntary. You are not obliged to answer any or all questions asked of you. The level of participation is up to you.

You may withdraw from the focus group portion at any time up until the research portion of my thesis is completed (you will be notified of this date once it is known, and allowed an additional opportunity to withdraw). You will not be directly referenced or quoted in the thesis; however, topics introduced by you, but discussed by others, will remain in the research and thesis.

You can opt out at any time during focus group process. You will be given the opportunity to review your transcript and the research portion of the thesis. If at either of these points you would like to opt out, we can come to an agreement (editing or deletion of your participation). You will be able to withdraw at any time until the research portion of my thesis is completed.

If you submit any material that you have created yourself it can be withdrawn at any time up until the thesis is completed (you will be notified of this date).

Confidentiality & Anonymity

Your initial contact with the research investigator will be through email, Facebook, or by phone/text. This information will remain private and will only be seen by the research investigator.

In the thesis, you will be identified by your stated position within the LGBTQ+ community, age, and first name (you may provide a pseudonym). At no time will any other personal information, or physical descriptions, be used. Your identity will only be known to myself, and my supervisor, Dr. Kris Wells.

When you register on the forum the only mandatory information you will be required to share will be your email address. This will be private and only seen by the research investigator. Again, this email address may be shared with forum host and you will agree to the sites terms of service. You will be asked to share your username with the research investigator so they can connect your identity with your experiences and opinions.

All data will be kept confidential and you will have a high level on anonymity; however, you may be recognized by others in the online forum depending on how you speak and present yourself. The forum will be deleted after the two-week period with transcripts of your comments being kept on a private, password protected, drive. All files will be destroyed after a required five-year period. You will be shown a copy of the thesis prior to its submission to guarantee that you were represented in a way you see fit.

I may use the data we get from this study in future research, but if I do this it will have to be approved by a Research Ethics Board.

Further Information

If you have any further questions, comments, or concerns about the research or thesis you may contact me through email (sabobass@ualberta.ca) or by phone (780-991-4118).

The plan for this study has been reviewed for its adherence to ethical guidelines by a Research Ethics Board at the University of Alberta. For questions regarding participant rights and ethical conduct of research, contact the Research Ethics Office at (780) 492-2615.

Consent Statement

I have read this form and the research study has been explained to me. I have been given the opportunity to ask questions and my questions have been answered. If I have additional questions, I have been told whom to contact. I agree to participate in the research study described above and will receive a copy of this consent form. I will receive a copy of this consent form after I sign it.

Participant's Name (printed) and Signature

Date

Name (printed) and Signature of Person Obtaining Consent

Date

Appendix B: Study Questions

- 1) As a (insert identity here), what was sexual health education like for you?
- 2) How do you think your experience relates to the broader LGBTQ+ community?
- 3) Where do you think a majority of your knowledge about sex, sexuality, and gender came from?
- 4) Are Alberta schools meeting the needs of LGBTQ+ students in regard to sexual health education? Explain. What about all other students?
- 5) How were your needs met/not met in school in relation to your sexuality and/or gender?
- 6) What were the characteristics of the teachers you felt were most inclusive? What about exclusive? Did this change how you access sexual health education (or education in general)?
- 7) Do you have any other comments about your experiences?
- 8) What do you think you needed out of a sexual health education course? What do you think all LGBTQ+ students need out of a sexual health education course?
- 9) Where should sexual health education go from here? What needs to happen?
- 10) Where do you think a majority of LGBTQ+ youth are learning about sexuality/gender?
- 11) Do you have any other comments on the state of sexual health education?
- 12) How can we improve sexual health education for LGBTQ+ students? How can we improve sexual health education for all students?
- 13) Do you think sexual health education in Alberta is improving or has improved since you've left school?
- 14) Do you think teachers are being prepared to teach sexual health education? What do teachers need in order to effectively teach sexual health education to LGBTQ+ students?
- 15) Where do we go from here in regard to sexual health education?
- 16) Do you have any other suggestions for sexual health education?
- 17) How do you feel participating in this process will change things? What will you do with this experience after the participation period is over?