



Abstract

In 2010, Ontario’s Ministry of Education introduced a revised Health and Physical Education (H&PE) curriculum that promised to be a vital health promotion initiative. Yet, after a minority conservative backlash, the Ontario government withdrew the sexual health sections from the elementary school curriculum, reverting it back to its 1998 content. This study is a content analysis, informed by queer theory and institutional ethnography, of the current and proposed H&PE documents, with a focus on the sex education component. This research aims to examine i) the specific differences between the new and old H&PE documents with respect to referencing and delivering sex education, and more specifically sex education on queer/trans* issues; and ii) the potential social exclusion that the absence of queer/trans* curriculum content imposes on youth. The findings demonstrate that evidence-informed policy development cannot always overcome political power imbalances, such as those created by the socially constructed ideology of heteronormativity. As the Ontario government prepares to implement the reformed curriculum, this study provides insight into its controversial history and the complexities of policy development—insights that may extend beyond this moment.

Key Words Ontario, queer theory, sex-education, sexual health, social determinants of health, youth

Is Queer Sex Education in Ontario Finally Out of the Closet?

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Introduction

In light of the current controversy surrounding the newly implemented sex education curriculum for grades K-8 in Ontario, this timely comparison between the new and old curriculums is all the more critical. To this aim, this study provides such engagement, comparing the out-dated and new (proposed) sex education curricula to show how queer and trans*ⁱ and sexual pleasure issues are currently absent. I argue that withdrawing references to sexuality and gender construction exemplifies Foucault’s contention that discourse regulates and perpetuates “power-knowledge”, thereby reproducing historical power relations of sexual morality.[1] Queer theory, informed by Foucault and

materialized within Dorothy Smith’s method of textual analysis through institutional ethnography, illuminates the power relations within the microenvironment of the public school system and the micro-environment of society.[2]

Social exclusion, a vital social determinant of health, provides the rationale for this undertaking.[3,4] I argue that the sex education curriculum in Ontario excludes queer and trans* youth, through omission of gender identity and queer issues, and through overemphasising heteronormativity. Those who do not fit the normative mold become visibly ‘othered’.[5,1] This content analysis demonstrates that the heteronormative culture of policy-making contradicts the rhetorical commitment to “evidence-based” practices.[6] The 5-year struggle to update the sex education curriculum in Ontario demonstrates the importance of apprehending underlying power dynamics that prevent social change.

Background

With Ontario poised to update its sexual education

curriculum in autumn 2015, its controversial history provides a “teachable moment” for understanding the policy development process. The current elementary curriculum was last updated in 1998 despite an updated curriculum proposed in January 2010.[7,8] This proposed curriculum emerged from extensive consultation with Ontario public and Catholic school board representatives, and more than 50 writers from the education and public health sectors. [8] Reviewed by over 150 individuals and teams and pilot-tested through school boards, sports associations, and health units, it was considered “the most significant health promotion intervention this province has ever seen” for its 2.1 million children and their families.[8 p7] Yet, due to a minority community opposition, the sex education components of the broader Health and Physical Education (HP&E) curriculum were held back for “rethinking”.[9] In April 2010, Ontario reverted to its outdated 1998 content.[10] Consequently, it does not reflect how young people now find information (e.g., social media), excludes references to healthy, pleasurable sexuality and omits queer and trans* issues. As such, this curriculum does not comply with international equity and inclusion policies or with the Canadian Guidelines for Sexual Health.

Rayside attributed this stasis to media portrayals of sexuality, the ruling position of the educator and institution, the political legacy of homophobia, social conservatism and religious resistance, and media sensualisation of the issues.[11] Ongoing sex education curriculum debates illustrate the persistence of the legal purview over sexual behaviour when it becomes a “social concern” or the subject of “political uproar”, particularly when morality involving “obscenity, money, minors, and [to this day] homosexuality” are contested.[12 p160] Opposition to a comprehensive sex education curriculum coalesced when “forms of sexuality”, like homosexuality and childhood sexual development, were translated to textual discourse, for these counter heteronormative economic productivity.[1 p36]

In Ontario, the backlash came from conservative public discourse, which posits a romanticised childhood innocence corrupted by exposure to sexual themes and messages.[9] Privileged, conservative groups included right-wing fundamentalists or evangelical Christians, and “counterparts in Muslim, Sikh, Hindu, and Jewish religious constituencies”.[11 p2] The debate played out in a heated competition between Tory conservatism and Liberal opportunism. Premier McGuinty’s argued that children ought to have accurate information on sexuality before becoming sexually active, for making healthier choices[13 para 6],

until he feared that the contentious curriculum was “losing ground” with voters.[9 para 16]

Interestingly, resistance arose from “Christian groups outside of publicly funded Catholic educators”.[14 para 9] Evangelical pastor and President of Canada Christian College, Charles McVety, called the proposed curriculum a “form of corruption”, for being “sexually explicit”, arguing that “it is unconscionable to teach 8-year-old children about same-sex marriage, sexual orientation and gender identity”.[15 para 2] According to Brian Rushfield, Executive Director of Canada Family Action, it was “bordering on criminal ... [t]o cause confusion in a young child’s mind about being male or female ...”.[15 para 3] These sentiments reflect a mass “erotic hysteria” to protect children from inherently damaging notions of sexuality prevalent from the 19th century onward.[12 p141] Child masturbation was discouraged, while “erotic dissidence” —including homosexuality, transsexuality, and sadomasochism—were repressed.[12 p163] To this day, expressions of these sexualities may cause social discord and familial rejection.[16] This repression occurs due to sexuality’s susceptibility to “pathological processes” requiring “therapeutic or normalizing interventions”.[1 p68] Such rejection, however, also critically impacts young people’s mental health and high-risk behaviours.[17] As Rubin explains, “recurring battles” emerge in the ideological battleground of sexuality, where church, state, family, psychologists, and the media define and produce “acceptable” content that most impacts the “groups whose experience they name, distort, and endanger”.[12 p165] Implementing a more inclusive educational system confronts notions of normalcy while forcing engagement “with such conundrums”.[18 p66]

Theoretical framework

A social-determinants-of-health (SDH) framework considers the broader structural barriers to good health, as opposed to individual, biomedical explanations for health outcomes.[19,4] This framework illuminates that resources for health extend beyond health care because “social exclusion is an expression of unequal relations of power among groups in society responsible for determining access to...resources”.[3 p100] Thus, the potential “othering” of queer and trans* youth in the educational system is of serious concern. Indeed, the new curriculum was considered an effective health promotion tool precisely because it attempted to include issues of sexual orientation and gender identity.[7] In excluding this content, educational institutions become complicit in perpetuating fear, hostility, and marginalization

of these aspects of young people's identities. A growing body of literature highlights how gender-nonconforming adolescents experience health inequities.[20,21] Suicide and suicide ideation are especially serious concerns.[22,23]

Queer theory adds analytical tools for a more nuanced analysis of social exclusion in a heteronormative society than can be attained solely through an SDH framework. Queer theory recognizes sexuality and desire as "much more than mere, even minor, features of social life".[24 pviii] Rather, they are "constitutive elements" of identity as vital as race, gender, and class, and underlie a heterosexism that directs violence and hatred at those who exist outside the norm.[24 pviii] Foucault's "History of Sexuality" characterises sex in the eighteenth and nineteenth centuries as an intentional, political tool of power to uphold the pedagogy and economics of heteronormative reproduction, with homosexuality, in particular, subject to medicalization, legal frameworks, and other power apparatuses, like the public education system.[1] Thus, heteronormativity assumes a moral position on sexuality.[25] Morris defines heteronormativity as "the illusion that heterosexuals are the only people on the planet and are the center of all sexual practices".[26 p9] Within this space, queer theory emerged, denying dualisms of gay/straight and male/female and taking up a more inclusive conceptualization.[27] Indeed, the use of the term "queer" attempts to reclaim a previously derogatory term, while embracing all men and women, including trans* individuals who fall outside heteronormativity.[28,29] "Queer" is also a term that is favoured by the younger generation.[28] "Queerness" seeks to "offer more individual spaces for the construction of identity" that are decentered from otherwise arbitrary features, such as lifestyle choices.[28 p154] The term "queer" emerges from the theoretical assertion that sexual and gender identities are socially constructed, stemming directly from Foucauldian discourses in which homosexuality evolved as a stable and identifiable category as a means to pit it against the ideal of heterosexual monogamy.[1,27] Within queer communities, "the hegemonic constitution of masculinity" persists and alienates those who do not fit its performative criteria.[30 p175] The categorization of gender identities and sexual behaviours, complicated along axes of race, class, age, (dis)ability, and so on, has aided the persistence of a hierarchy of sexual acceptability.[12] In this hierarchy, "sex is a vector of oppression" and stratification, along which a white, male "pervert" will be less affected than a "poor, black, female pervert",[12 p164] again demonstrating the interplay of SDH.

While queer theory was not the first to assert these ideas,

it adds a proactive examination of how gender boundaries are regulated and contested.[31] Thus, queer theory demands recognition of sexual diversity and sexual power relations, and offers a more nuanced analysis of social exclusion in a heteronormative society, extending beyond hierarchical resource distribution. Queer theory alone can, however, sometimes "mute" group features of complex multiple subjectivities such as race, class and age, hence the advantage of combining it with SDH.[28 p156] When examining a curriculum implicating young people of multiple ethnicities, gender identities, and class divisions, an agreed-upon, inclusive form of sex education becomes all the more essential. As posited by Epstein, these multiple identities can be called upon in "productive tension" to strategically resist reification, drawing attention to the socioeconomic power dynamics at play.[28 p156]

Methods

My methodology rests upon the idea that sexual power relations are reflected and reinforced by public discourse, including public policy documents, curricula and the discussion and debates therein. These debates were largely formulated by the media, which portrayed a skewed right-wing, moralist position of the sexual education curriculum as harmful to elementary-aged children due to exposure to overly explicit, even "criminal" sexual content.[32,33 para 6] The full details of the curriculum, largely concealed from public view, became further obscured by smaller religious groups that introduced it to parents as "a sinister attempt to indoctrinate small children with tales of sexual adventure".[13 para 7] This media coverage exemplifies Foucault's seminal work on the role of discourse in shaping thinking and consciousness.[1]

Informed by Foucault, Dorothy Smith developed Institutional Ethnography (IE) as both a theory and a method for analyzing this discourse.[2,34-38] IE is in essence a mixed methodological approach, incorporating textual and data analysis with phenomenological and narrative data, making it an ideal method for examining the real world impact of a curriculum.[39] IE functions by problematizing everyday experience, emphasizing the importance of the researcher's "standpoint" over positivist objectivity, and seeking to uncover implicit "ruling relations" in social discourses.[36,2] It functions well alongside queer theory, which examines how texts historically create meanings around sexuality, by deconstructing these "meanings and contents, along with the power and concurrent identification of and with them".[40-42] In short, by comparing the old and new sex education

curricula, I provide a textual IE analysis that uncovers assumptions about those who are included or excluded, with or without power, consulted or disregarded, and whose voices are valued or dismissed, while queer theory reminds us that it is difficult to name those whose sexual desires are “conflictual, contradictory, inconsistent,” and have a “fictive border”. [43 p345, 42 p459]

Smith’s ruling relations are the “total complex of activities differentiated into many spheres, by which our kind of society is ruled, managed, administrated”. [2 p8] Emphasizing Smith’s standpoint theory, this study seeks to expose the content and process from the point of view of an excluded group through a textual analysis that is enriched via informant interviews, fulfilling the multilayered IE approach. IE does rely upon interview transcripts, observation, and secondary research, but it treats these data sources as “entry points” into “webs of sociality and work”, rather than as data sets for analysis. [44 p163] An entry point is located in the “everyday world” in which the particular text functions and is formed, at the local (educational institution) and extra local (community) level. [38 p191] This perspective also enhances queer theory, which has sometimes been critiqued for failing to situate texts within their geographic and social spaces. [27]

Four key informants brought perspectives based on their experiences with sex education issues generally and the Ontario curriculum specifically. Sarah Flicker (York University) has written extensively on adolescent sexual and reproductive health and consulted on the curriculum revisions. Rui Pires, Gay Men’s Community Education Coordinator with the AIDS Committee of Toronto has been a sexual health advocate for over twenty years and oversees a peer support program for young gay and trans* men, inspired, in part, by the inadequacy of the sex education curriculum. Nick Mulé (York University) chairs the advocacy group Queer Ontario. He researches social exclusion/inclusion of gendered and sexually diverse populations and social policy affecting them. j Wallace is a queer/trans* parent who works in gender-based violence prevention, and sits on the Toronto District School Board. (He spoke outside of his role on the school board.) Interviews, lasting 30 to 45 minutes,

were digitally recorded and transcribed. Key informants consented to use their full names. This group was not meant to be representative of expert opinion, but rather functioned as member checking to enhance interpretation.

Since IE does not treat the interview subject or “knower” from a position of bias, but rather as an “entryway into investigating the practices”—in this case, within the educational institution as both a place of learning and of social construction—the input of key informants with a personal interest in this topic and/or who identify as queer was a key aspect of the research. However, future research would benefit from including a wider array of participants. IE aligns with the perspective of queer theory, in which texts are seen to enforce “binary divides”, and makes transparent the power that is “embodied in different levels of society”. [27 p134] Taking the analysis one step further, queer theory also provides a platform to deconstruct, decenter and revise the “assimilationist politics” enforced by such texts. [27] Heteronormative politics in the modern West continue to support hierarchies of “sexual value” in which “reproductive heterosexuals” are highest, followed by coupled heterosexuals, trailed by other heterosexuals, and so on. [12 p149] In this hierarchy, masturbation or “solitary sex” has always been seen ambiguously, and definitely inappropriate for discussion in the presence of children. [1,12]

Content analysis

In each document, I determined the frequency of key terms deemed “controversial” in the sex education literature and policy debates, [45,15] specifically “gender identity” and “pleasure”. In objecting to the new curriculum, the Campaign Life Coalition specifically argued the discussion of gender identity would “normalize homosexual family structures”, offending some religious beliefs and creating significant confusion for young children. [46 para 9] These sentiments reflect what Monk describes as a “normative” idea that children are non-sexual. [47] The law to date vehemently protects childhood “innocence” from images of “adult sexuality”, including portrayals of caring, responsible sexual relations. [12 p161] Ironically, young people may view

Table 1: Frequency of health-related terms

| Health-related terms | Health and physical education curriculum | |
|----------------------|--|--------------|
| | Current (n) | Proposed (n) |
| HIV | 5 | 23 |
| STDs/STIs | 2 | 26 |
| Bullying | 41 | 39 |

graphic depictions of violence, but underage exposure to genitalia or healthy sexuality is criminalized, suggesting the urgent need for a sensitive, age-appropriate sex education curriculum, with references to sexual pleasure.[12]

While discussion of sexual pleasure is not innate to queer and trans* issues, its absence denotes a larger, societal discomfort with sexuality. Discussions of pleasure suggest non-reproductive, nonessential sexual characteristics that require strict regulation.[1] I thus also chose terms that explicitly refer to sexuality: “homophobia/homophobic” and “stereotypes/assumptions” along with “pleasure” and “gender identity” as “attitude-related terms” (Table 1).

I delineated the terms “HIV”, “sexually transmitted diseases/infections (STD/STI)” and “bullying” as “health-related terms”. It is noteworthy that the term “sexually transmitted disease” is considered out-dated. “Sexually transmitted infection” is “more encompassing, including infections that may be asymptomatic” and conveys less stigma than the term “disease”. [48,49] “Bullying” was included because of its well-documented health effects, such as psychosocial stress and suicide.[22,23,50] Although bullying is not exclusive to queer students, they are internationally recognized as a vulnerable group.[51 p16] The United Nations Educational, Scientific and Cultural Organization notes international studies show that schools are one of “the most homophobic social spaces”. [51 p16] One large international Canadian survey found that “three quarters of LGBTQ students and 95% of transgender students feel unsafe at school, compared to one fifth of straight students”. [52 p5] Over half of LGBTQ students report verbal harassment regarding their sexual orientation, with 90% of transgender students having experienced such harassment. [52] Another school-based study indicated that a “combination of LGBT identity and school victimization predicted high levels of health risk behaviour during adolescence” [23 p224] and poor health outcomes, “including substance abuse, depression, anxiety and suicide attempts and completions”. [22 p1611] The effects were worst for boys, who may feel pressured to conform to heteronormative, macho standards, while being

simultaneously “othered” and harassed by peers and teachers for queer gender performance.[53 p113] Though such problems may not be solved by a sex education curriculum that addresses queer/trans issues, this same survey indicated that schools with policies and procedures “that explicitly address homophobia and have informed students of their existence” have marked improvements in student safety.[53 p7] A carefully constructed curriculum could contribute to these improvements in a respectful manner that builds acceptance for traditionally “othered” students and does not make “queer” a category of heterosexual deficit.[53]

The incidence of HIV and STIs is also higher in the queer community. In Canada, HIV affects about 0.2% of the general population and 15% of men who have sex with men, who accounted for 47% of all new and existing HIV cases in 2011.[54,55] The Canadian Guidelines on Sexually Transmitted Infection notes that sexually active youth under 25 face higher risk for STIs.[56] As well, Canadian data have identified men who have sex with men as the “primary community” affected by syphilis.[48,56] Although the impact of school-based sex education on health behaviours is unclear, the queer and trans* community is undoubtedly at high risk and should be a health promotion concern.

Finally, a juxtaposition of terms and the broader context of terms is discussed, because the frequency of terms is not as informative as the context within which they appear.

Results and analysis

Health-related terms

Analysis revealed a stark contrast between the presence and placement of controversial terms, and terms relating to gender identity. Within IE, “texts” are seen as having influence only insofar as they are “activated” or interpreted by the reader.[37,44 p167] The proposed curriculum includes discussion prompts to broach difficult subjects to facilitate discourse between teacher and student. Thus, the discrepancy between the frequencies of terms in both documents primarily stems from the absence or presence

Table 2: Frequency of attitude-related terms

| Attitude-related terms | Health and physical education curriculum | |
|-----------------------------|--|--------------|
| | Current (n) | Proposed (n) |
| Gender identity | 7 | 19 |
| Stereotype / assumption | 7 / 2 | 21 / 13 |
| Sexual pleasure / enjoyment | 0 | 3 / 2 |
| Homophobic / homophobia | 3 | 2 |
| Hispanic Men/Latinos | 5 | 1 |

of these prompts. Looking at the frequency of health-related terms such as “HIV, STDs/STIs, Bullying” (Table 2), the proposed document shows greater attention to STIs, including the use of the updated terminology. The term STIs appears 26 times and HIV appears 23 times in the 2010 proposed curriculum, compared with only two and five times, respectively, in the current document. References to HIV and STIs appear throughout the grade seven and eight Human Development and Sexual Health section’s student/teacher prompts. For example, in grade seven when discussing the benefits of abstinence at a young age, students are also taught some specific symptoms of STIs, such as, “redness or pain when urinating”. [57 p184] They are also taught how STIs can be contracted: “sexual activities like oral sex, vaginal intercourse, and anal intercourse”. [57 p184] They are also given detail about HIV, how it affects the body, and that it is “incurable”. [57] HIV is briefly mentioned in the current curriculum, and defined only in the glossary. As Pires [October 31, 2013, oral communication] pointed out, a 2003 Canadian Youth, Sexual Health and HIV/AIDS Study revealed that “50% of grade nine students did not know there is no cure for HIV”. [58] This is startling considering that, as of 2010, about one third of teens aged 15–17 have had sexual intercourse. These statistics alone evidence a lack of HIV information in schools. [59]

All interviewees stressed that bullying and stereotyping require more emphasis, even in the proposed curriculum. Pires notes: “I think we need to listen carefully to what kids are saying, and probably the most important thing to them is not the condom. The most important thing to them is the loneliness and bullying” [October 30, 2013, oral communication]. Thus, Pires links the underlying messages of the policy and its ultimate impact on students in light of the well-documented negative impact of bullying. [60,61] Although the term “bullying” appears almost the same number of times in both curricula, the proposed curriculum directly tackles specific causes or examples of bullying and stereotyping. The frequency tally of terms suggests that the proposed document gives more attention to attitudes and assumptions than the current one. The term “stereotype” appeared three times more often in the proposed than the current one and the term “assumption” appeared nearly seven times more often in the proposed document. “Stereotype” first appears in a teacher prompt in grade five under “Personal Safety and Injury”. Students are asked to explain how negative actions cause harm: “name calling, making homophobic or racist remarks, mocking appearance or ability, excluding, bullying, sexual harassment”, [57 p147]

where the appropriate response prompt is:

When someone appears to be different from us, whether it is because of something visible like a physical disability or something invisible like having an illness such as schizophrenia or HIV/AIDS, we may view him or her in a stereotyped manner and make assumptions. Stereotypes can have a strong, negative impact on someone’s self-concept and well-being. [57 p147-8]

Students are taught that putting people down negatively impacts both their self-concept and the other person’s, and leads to social estrangement (of the bully). [57] Grade six students are taught to challenge negative assumptions regarding “normality” in appearance, (dis)ability, gender roles, and cultural stereotypes, and that assumptions, “can make people who do not fit into the expected norms feel confused or bad about themselves, damaging their self-concept, and they can cause people to discriminate against and exclude those who are seen as ‘different’”. [57 p165]

Attitude-related terms

“Gender identity” is only mentioned twice in the main text of the current curriculum and five times in the glossary. The proposed curriculum has no glossary, as information typically appears in teacher prompts and information boxes. In the proposed document, gender identity appears 19 times in student-teacher prompts. For example, grade five students are prompted to discuss what they can and cannot control, such as “personal characteristics such as my skin colour, hair colour, whether I am male or female, my gender identity, sexual orientation [etc.]”. [57] They are encouraged to consider a response such as “I cannot control these things, but I can control what I do and how I act”. [57 p146] For those who do not identify with their biologically assigned gender or as straight, and who may not be “out”, discussing sexual orientation and gender identity at school is essential to creating safe spaces [Mulé, October 31, 2013, oral communication].

Both documents mention homophobia equally frequently, but as discussed below, the context of these mentions suggest greater emphasis in the proposed curriculum. The proposed document’s discussion of stereotypes and underlying assumptions positions sexual orientation and gender identity as socially constructed.

Pires, Wallace and Flicker mentioned the lack of emphasis on healthy, pleasurable sexual relationships in both documents. There were no references to sexual pleasure/enjoyment in the current document, and only three and two respectively in the proposed one. Flicker and Wallace felt this was a

large oversight, especially when children and teens are often learning about sex through online pornography.[62] Additionally, as per Rubin, the mainstream media continue to perpetuate “marginal sexual worlds [as] bleak and dangerous” and unrealistic depictions of a queer lifestyle.[12,63] As Allen points out, “Sexual education that concentrates on reducing unplanned pregnancies and sexually transmittable infections implies ‘sexuality’ is accompanied by ‘risk’ and must be avoided”.[64 p145] The current curriculum thus invokes “moral panic” surrounding childhood over-sexualization and the preservation of the heterosexual family unit.[12 p168] In excluding references to healthy sexuality, relationships, and pleasure while focusing on potentially negative aspects of sexuality, youth remain vulnerable to media influences that perpetuate unrealistic sexual expectations, an unhealthy body image, and misogyny. As Rubin notes, “moral panic” thus disenfranchises both the “target population”, [12 p168] (i.e., young people whose gender identity or sexuality may develop outside the heterosexual norm), and everyone else in society who is impacted by exclusionary legalities and policies. In this sense, the text is a “mechanism for coordinating activity across many different sites”, as what is learned or omitted in the classroom spills out and implicates an individual’s interaction with other socially mediated texts, such as parental, church, and media discourses.[65 p32] This is extremely difficult to avoid, as the curriculum itself is a product of the systematically managed macro framework, within which the curriculum is an apparatus of social power, keeping more progressive revisions at bay.[66]

Absence of information of trans issues*

Terms related to trans* identities only appear once within the grade eight curriculum in the proposed document and not at all in the current document.

Terms in context

Sexual health equity requires that education for teachers have a “political intent to help them question, disrupt, and redefine heteronormativity”.[50 p387] But, training in addressing gender and sexual identity is lacking from teacher education. [67] Furthermore, teachers may lack administrative support for broaching queer issues in the classroom, may fear parental retribution, or may subscribe to heteronormative perceptions and stereotypes.[50] As Wallace pointed out, the proposed 2010 curriculum gives specific teacher prompts that may help mediate the discussion of specific issues: “If you were unsure of the topic, or uncomfortable with the topic, they can at least agree to say, ‘Here’s what we need to say, and

this is the specific language” [Wallace, November 1, oral communication]. For example, a grade six teacher prompt is “Having erections, wet dreams, and vaginal lubrication are normal things that happen as a result of physical changes with puberty. Exploring your body by touching or masturbating is something that many people will do and find pleasurable. It is common and is not harmful and is one way of learning about your body”.[57 p168]

Smith’s ruling relations are thus revealed in the text of a curriculum via its capacity to structure knowledge, organizations, and decision-making from within formal institutions, independently of individual influences (in this case, instructors or teachers).[34,35] As Smith has posited, the presence or absence of language in a text is crucial as it shows how every word can be problematized, bypassing the key issue: the need for healthier, inclusive sex education for young people.[34] The current curriculum provides a glossary of terms with minimal integration into the text; the proposed document embeds definitions within the text in a much more comprehensive fashion. For example, there is no difference in the number of times parent appears (71 times in both documents), but the context it appears in is significantly different. While the current document privileges parental and teacher rights/comfort levels over the emotional and physical safety of children, the proposed curriculum emphasizes student autonomy, with an objective of achieving of “...an understanding of sexual health in its broadest context”.[57 p33]

The current curriculum makes no reference to children needing specific knowledge in order to make healthy decisions, instead emphasizing the rights of parents and teacher comfort level in guiding decisions:

Parents and guardians are the primary educators of their children [emphasis added]. As children grow and develop relationships with family members and others, they learn about appropriate behaviours and values, as well as about sexuality. They are influenced by parents, friends, relatives, religious leaders, teachers, and neighbours, as well as by television, radio, videos, movies, books, advertisements, music, and newspapers....[68 p33]

This passage gives power to the parent or guardian to determine which fragments of knowledge and ideologies to transmit to their children. However, IE tells us that parents themselves are in a constant state of “articulation”—both exercising and undergoing the imposition of power within the larger hegemony. This form of organizational and textual power is ubiquitous and its significance is often undermined or marginalized, as the organization itself may not rest upon

the incorporation of one particular text.[38] This ubiquity, combined with the effect of a text being a definitive source of information “about something else”, as abstracted from the information itself, renders any systemic change incredibly difficult.[38 p168]

Wallace felt that introducing material on puberty in grade seven and eight “doesn’t match what students are experiencing with puberty” because “at least half of them need this at earlier ages because the students are encountering it elsewhere” [November 1, oral communication]. Furthermore, he felt that teaching sex education and gender identity issues at younger ages would help prevent bullying or “sexual misconduct in grade five and grade six” [November 1, oral communication]. Because attending school is a fundamental aspect of the everyday world of young people, “...engagement with the academic text in school can surpass even media and parental influence”.[38 p174] The sex education curriculum standardizes what is known and understood, and how experiences of gender identity and sexuality are evaluated.[38] Thus, the curriculum joins parents, teachers, and students in “the same set of categories, connections, subject object relations, etc., carried by the text”.[38 p174]

Furthermore, the current document defines “gender identity” as “a person’s sense of self, with respect to being male or female” and relegates these issues in a glossary that may or may not be incorporated into classroom learning. In contrast, the proposed curriculum discusses gender identity, sexual orientation and development with meaningful, real-life examples in the classroom material and develops the issue through techniques such as student/teacher dialogue prompts. By removing discussion, the existing text leaves no room for debate of the relevant issues, “suppressing divergent perspectives” in favour of an authorized heteronormative discourse.[38 p176]

Discussion

I have argued that queer theory illuminates the unstated reasons for the 2010 rejection and current contestation of an evidence-informed sex education curriculum in Ontario: fear of the “other”, or non-heteronormative and gender non-conforming expectations. The two documents’ substantially different approaches to sexual orientation and gender identity exemplifies queer theory’s premise of sexuality as social construct. The absence of reference to gender identity in the current curriculum is an outcome of textual instrumentality in different socio-political dimensions, like education, to express and enforce power “through boundaries and binary

divides”.[69] All interviewees felt the rigid binary created between male and female distorts children’s reality, leaving many feeling isolated and lonely in the absence of role models or even the mention of gender and sexual orientation.

An equally important oversight is discussion of trans* sexuality. Gender dysphoria issues have been noted at very young ages, leading to childhood psychological distress and self-harming behaviours.[70,71] Suicide rates are also extremely high among transgender youth. One Ontario study found that 47% of transgender youth report strong suicidal ideation, and one fifth (19%) had attempted suicide.[72] Conversely, when parents, teachers and administrators are well-informed on trans* issues, trans* students feel accepted and happy, and bullying issues are mitigated. For example, one 2013 article discusses an 11-year-old transgender student, Wren, who self-identified as a boy.[73] Teachers and parents supported his identity, and once Wren came out to classmates, “nothing changed in his classroom—he said no one has bullied him or called him names”. [73 para. 9] Yet, even in the curriculum slated for 2015, transsexuality is rarely discussed and the term “queer” is not used. As Foucault would argue, giving “queerness” a specific name would allow this identification a position of legitimization and power.[1]

When the Ontario government sent the revised curriculum back into the closet for “rethinking”, then-Premier McGuinty argued that “parents are obviously not comfortable with this proposal”.[74] In fact, the proposed curriculum had undergone wide consultation and had the blessing of the Catholic educators and parents and others.[75] As Wallace pointed out, parents often feel discomfort discussing sex and puberty with their children. He has heard many people say, “My parents told me nothing” [November 1, oral communication]. For many parents, having sex education taught in school is the only way for important information to reach their children in an accurate, sensitive manner. Yet, they are themselves “subjects” to the inter-textual nature of institutional interrelations within which the curriculum exists.[38] Parents reproduce society’s aversion to discussing sexuality, gender identity, and pleasure, while pushing the agenda of “neutral” sexual health, threatening to withdraw funding or their children from institutions seen to push inappropriate topics onto children.[76] This historical aversion enforces student compliance with the “operation at its basis in the profound insecurity of the instructor’s judgment”—the educator’s own ambivalence and uncertainty surrounding the appropriateness of a sex education curriculum.[38 p190]

Indeed, in Canada and globally, curricular reform is beginning

to meet young people's needs regarding sexual health, with other provinces encapsulating sexual diversity needs much better than Ontario.[7] As early as grade three, Saskatchewan students are told that families can be very diverse, including having same-sex parents.[7] The grade six curriculum in New Brunswick emphasizes sexual stereotyping and sexual identity.[7,77] In Manitoba, the grade seven curriculum explicitly discusses gender stereotypes and social influences on sexuality to promote self-acceptance and the acceptance of others.[7,78]

That other provinces have implemented up-to-date, inclusive sex education policies tells us it is possible. One area for further research is the experience of other provinces: which stakeholders were involved, how these stakeholders differed from or were similar to those in Ontario, and how they mediated tensions to help to bring sex education out of the closet.

Although this study cannot make a direct link between serious potential health effects of social exclusion for the queer community (such as suicide) and the sex education curriculum per se, it does suggest that the government is neglecting this group's social exclusion. Given the serious potential consequences of exclusion, we could expect even minimal gains from including the queer community in the curriculum to be welcome—unless we understand the power of heteronormativity. As Pires added, the impact of bullying and poor response from the school systems was most apparent with recent coverage of teen suicides, “when all of a sudden all of these kids started talking about how they were being bullied, and how they didn't want it in their lives and how it continued in their lives”. In light of the social isolation and bullying that queer/trans* youth experience, it is difficult to comprehend the ideological opposition to age-appropriate, comprehensive sex education [October 30, oral communication].

Flicker finds it absurd that sexualizing or corrupting “innocent” children is considered more of a threat to their well-being than social exclusion and out-dated information about health risks...She points out the need to strategize and mobilize through a complicated web of actors [October 31, oral communication]. To achieve sound public policy on contentious issues, grassroots organizations must be aware of the political pressure brought to bear on evidence, because evidence-informed policy development with extensive consultation with key stakeholders, no matter how thorough and compelling, is not guaranteed to overcome ruling relations, in this case stemming from the dominant ideology of heteronormativity. The Liberals, now with a

majority government elected in 2014, and under an openly lesbian premier, Kathleen Wynne, have completed “fresh consultations on the long-delayed [curriculum] reforms ... to allow implementation” in 2015.[79 para 19] Despite concern that reforms would be a watered-down version of the proposed curriculum, the Liberals have essentially resurrected the 2010 curriculum, with updates to information on HIV and “sexting”. [6,79] The latest update also expands information on disability and sexuality, absent in the 2010 version. Given persistent heteronormative ideology, as evidenced by the current eruption of protest, the question remains whether these political changes are enough to keep Ontario's sex education curriculum out of the closet.

Notes

i.Trans* is an umbrella term for individual diversities across the spectrum of gender boundaries. The term includes “those who identify as transgender, genderqueer, trans, transsexual, androgynous, agender, bigender, two spirit, and gender non-conforming. [80]

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