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## **Inclusivity of LGBTIQ perspectives within school-based sexuality education: An exploratory study**

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## **Abstract**

In Aotearoa/New Zealand, sexuality education is one of seven key areas of learning in the Health and Physical Education (HPE) subject area within The New Zealand Curriculum. Since 2015, sexual diversity (lesbian, gay, bisexual identities and perspectives) and gender diversity (transgender; non-binary gender) have been explicitly included in the curriculum guidelines for teaching sexuality education in schools. Based on survey data collected from a convenience sample of 73 participants aged between 16 and 19, this study focused on the prevalence of sexuality education provision, its content and the inclusion of sexuality and gender diversity in the wider school environment. Despite sexuality education being a mandatory part of HPE, only around three-quarters of respondents remembered having been taught it at some point in years 9 and 10. Sexuality education was also reported to primarily attend to conventional content areas (e.g. heterosex; biological function) and therefore was not inclusive of sexuality and gender diversity. Inclusion in the wider school environment was also limited; mainly being restricted to easy to implement measures (e.g. allowing same-sex partners at balls; having a rainbow ally group). The implications of these findings for the development, wellbeing and human rights of young people are also discussed.

## **Keywords**

LGBTQ, Gender diversity, sexuality education, inclusivity, health education

## **Introduction**

Sexuality education, sometimes referred to as simply 'sex education' comprises a wide remit including sexual decision making, sexual communication and sexual and reproductive function (Ponzetti 2015). While school-based sexuality education has largely focused on conventional heterosexuality, over recent years there has been a move toward the inclusion of lesbian, gay, bisexual, trans, intersex and queer (LGBTIQ) perspectives: often referred to as 'inclusive sexuality education' (Formby 2015; Gegenfurtner and Gebhardt 2017; Gowen and Wings-Yanez 2014).

For young people, sexuality education provides the foundation for developing a healthy sense of self and the ability to make informed choices around sexuality in adulthood. To achieve this aim, it is widely agreed that comprehensive sexuality education (CSE) is the best approach as it ensures that young people are equipped with the information they need to make those choices. One of the problems though is that conventional CSE does not necessarily orient to the lived realities of young people in the western world today. As Svendsen (2012) highlights, the sexual identities and practices of young people cannot be accounted for within the conventional heterosexual narratives of monogamy and procreation. In a world where sex between people of the same sex is more normalised, young people are increasingly conceptualising sexuality as fluid (Katz-Wise 2015); many identifying as 'heteroflexible', 'bisexual' or 'pansexual' and/or defining gender in diverse ways. Essentially, young people are growing up in a world defined by 'queer' in the sense that their experience of gender and sexuality falls outside that of conventional norms (Robertson 2018; Svendsen 2012). It is therefore important to ensure that all young people have access to sexuality education that reflects this level of diversity and does not assume that students are heterosexual and cisgender.

Adopting a rights-based framework, and encompassing a queer understanding of sexuality and gender, this article focuses on the inclusion of gender and sexuality diversity within sexuality education in Aotearoa/New Zealand.

### ***Sexuality Education in Aotearoa/New Zealand***

In Aotearoa/New Zealand, sexuality education is one of seven key areas of learning within Health and Physical Education (HPE) in The Aotearoa/New Zealand Curriculum (Ministry of Education 2015b) and its Māori language counterpart Te Marautanga o Aotearoa. This curriculum is taught in all state and state-integrated schools including Kura Kaupapa Māori<sup>1</sup>; or 96.4% of schools in Aotearoa/New Zealand (Education Counts 2020). Sexuality education is mandatory for students in years 1-10 (approximately age 5 to 15) and schools are required to consult with their community (e.g. Boards of Trustees; parents) and other stakeholders (e.g. proprietors of state-integrated schools) about proposed taught content. Parents also have the right to exclude their children from classes. Consequently, the breadth of sexuality education content that students encounter may vary.

In 2015, the New Zealand Ministry of Education published a revised set of guidelines on sexuality education (Ministry of Education 2015a). The revised guidelines indicated that students should be provided "with the knowledge, understanding and skills to develop positive attitudes towards sexuality, to take care of their sexual health, and to enhance their interpersonal relationships, now and in the future" (Ministry of Education 2015a, 12). In terms of content, while sexual and reproductive health is a part of sexuality education in

Aotearoa/New Zealand, the guidelines go well beyond these topics to include a range of other important aspects of sexuality such as how to build healthy relationships based on respect and making decisions about sex. The guidelines also draw on Māori and Pasifika health and wellbeing frameworks that emphasise the interrelatedness of sexual health with other aspects of health and wellbeing.

Both sexual diversity (e.g. lesbian, gay, bisexual identities and perspectives) and gender diversity (transgender; non-binary gender) are an explicit part of the curriculum. For example, the guidelines (Ministry of Education 2015a) indicate that it is important to “acknowledge the sexual diversity of New Zealand communities and recognise the rights of those who identify as lesbian, gay, bisexual, transgender, intersex, and other sexual and gender identities” (11) and that in years 9-10 “programmes will affirm sexual diversity and gender identity” (23). While the explicit inclusion of LGBTIQ perspectives is not unique to Aotearoa/New Zealand, the affirmative and rights-based approach that is employed differs from the approach in some other jurisdictions where neoliberal directives (Ferfolja and Ullman 2020; Shannon 2016), token inclusion (Elia and Eliason 2010) or the stipulation that same-sex relationships be presented negatively (Hoefer and Hoefer 2017) inhibit healthy and open discussion of LGBTIQ issues. The guidelines also encourage the extension of these principles to the wider school environment.

### ***Including LGBTQ perspectives in sexuality education***

With the increasing visibility of sexual and gender diversity across the western world, there has been a drive to ensure that sexuality education (and school-based education generally) is inclusive. Some jurisdictions, notably Norway and Sweden, have included ‘homosexuality’ in sexuality education since the 1990s (Røthing and Svendsen 2010; Svendsen 2012). In Sweden the approach has been particularly progressive and includes the integration of sexuality education into a range of taught subjects (Bengtsson and Bolander 2020; Ekstrand et al. 2011); and the use of innovative strategies such as the careful choice of language to avoid unnecessary gendering and adopting an overt ‘norm-critical’ approach to avoid assumptions of heterosexuality (Bengtsson and Bolander 2020). In some jurisdictions, inclusivity is firmly on the sexuality education agenda, but is focused on cultural diversity rather than LGBTIQ perspectives (e.g. see Krebbekx 2020).

In contrast, other western jurisdictions have been far more reticent about including LGBTIQ perspectives (Gegenfurtner and Gebhardt 2017; Shannon and Smith 2015). For example, in the US abstinence-only approaches to sexuality education are still common, with the inclusion of LGBTIQ content actively discouraged; and in Australia, the inclusion of LGBTQ perspectives is rare (Hillier et al. 2010; Shannon and Smith 2015). In England, the latest guidelines for (the now compulsory) ‘sexuality and relationships education’ include reference to LGBTQ perspectives, but this change has not been without controversy (Formby and Donovan 2020). Levels of resistance vary from country to country but are largely underpinned by arguments around the ‘normalisation’ of expressions of gender/sexuality not consistent with traditional views (Shannon and Smith 2015); sometimes, but not always, aligned to particular religious or cultural perspectives.

A number of studies have explored the inclusion of sexuality and gender diversity in sexuality education; primarily through interviews or focus groups with LGBTIQ youth (Estes 2017; Formby 2011; Hillier et al. 2010; Hobaica, Schofield and Kwon 2019). Overwhelmingly, this international research literature indicates that LGBTIQ youth are poorly served by

school-based sexuality education (Estes 2017; Gowen and Wings-Yanez 2014). Particular issues that have been highlighted include the acknowledgement of heterosexual students, their sexual practices and sexual health needs to the exclusion of those of LGBTIQ students (Formby 2011; Hillier et al. 2010; Hobaica and Kwon 2017), teachers who appeared to have limited knowledge of LGB perspectives (Formby 2011; Lee and Carpenter 2015) and the inclusion of LGBTIQ issues solely in connection with HIV/AIDs risk (e.g. Hoefer and Hoefer 2017; Lee and Carpenter 2015). Furthermore, information about transgender identities and sexual health is invariably absent (Hobaica, Schofield and Kwon 2019). Even in contexts where the inclusion of LGBTIQ content is actively encouraged, analyses highlight that this does not always result in progressive sexuality education provision (see Røthing and Svendsen 2010; Svendsen 2012).

### ***Rationale***

Teaching sexuality education that is inclusive of LGBTIQ perspectives is important for a range of reasons (e.g. see Formby and Donovan 2020). In every classroom, there will be students who are (or may be) LGBTIQ or know people who are. Also, LGBTIQ people are part of Aotearoa/New Zealand society. Importantly though, inclusion of gender and sexuality diversity is a social justice issue. LGBTIQ youth are at high risk of adverse mental health due to marginalisation (Gegenfurtner and Gebhardt 2017; Veale et al. 2019) and visibility in education helps to break down stigma and discrimination. Comprehensive sexuality education that is attentive to LGBTIQ issues is therefore central to creating a safe school environment for and improving the mental health of LGBTIQ students (Baams, Dubas and van Aken 2017; Hoefer and Hoefer 2017; Snapp et al. 2015) and ensuring good sexual health among LGBTIQ youth (Bodnar and Tornello 2019).

Although there is an established body of recent work engaging with the practice of school-based sexuality education in Aotearoa/New Zealand (e.g. see Allen and Rasmussen 2017; Garland-Levett 2017; Quinlivan 2018); to date no recent published studies explore how sexuality and gender diversity are – or are not – included in actual school-based sexuality education. Although a preliminary study was undertaken by New Zealand Family Planning in 2018, this did not systematically explore sexuality and gender diversity inclusion in relation to the specific content stipulated in the sexuality education guidelines.

Using the sexuality education guidelines (Ministry of Education 2015a) as a framework, the purpose of this study was to explore (1) the extent to which sexuality and gender diversity are included within the teaching of sexuality education and (2) the extent to which schools demonstrate LGBTIQ inclusion in the wider school environment. In contrast to other studies that have either focused on the views of teacher education students (e.g. Lee and Carpenter 2015) or solely LGBTIQ youth (e.g. Estes 2017; Proulx et al. 2019; Hobaica and Kwon 2017); this study focuses on experiences of young people aged 16-19; regardless of how they identify (or not) their sexuality and gender. Therefore, this study focuses on young people's perspectives on a topic invariably defined and regulated by adults.

### **Methodology**

The research was approved by the Human Research Ethics Committee (Health) at the university where the authors are based (2019#75). This committee is accredited by the New Zealand Health Research Council.

### ***Specific Ethical Considerations***

Given the potentially sensitive nature of the content, and the potential vulnerability of younger participants, a number of decisions were made to ensure that content was appropriate. We set a lower age limit at 16 because this is the age at which (in Aotearoa/New Zealand) people can independently consent to participate in research. Beyond demographic information (sexual identity; gender identity) participants were not asked any questions about their own sexuality or engagement in sexual practices. Given the age of target participants, the inevitable variation in self-awareness of – and exposure to – sexuality in this age group was also a consideration. Care was therefore taken to ensure that the survey only exposed participants to ideas and concepts that they should have encountered in sexuality education in school and that they might reasonably be expected to have engaged with in their everyday lives (e.g. through age-appropriate films and tv shows).

### ***Research design***

This study employed a survey design to explore young people's experiences of school-based sexuality education in Aotearoa/New Zealand. To develop the survey, questions used in previous research (e.g. Abbott, Ellis and Abbott 2015; Bodnar and Tornello 2019; Proulx et al. 2019) were reviewed and assessed for suitability. Given the limited scope of questions asked in previous studies, most questions in our survey were developed specifically for this study. In producing the survey, care was taken to ensure that all aspects of the curriculum guidelines relevant to LGBTIQ perspectives were asked about, including 'diverse sexual practices' (e.g. oral and anal sex).

Beginning with demographic questions (age; region where domiciled; ethnicity; gender; etc.) and other background information (e.g. type of school attended), the focus of the survey was on experiences of sexuality education itself. Respondents were asked a range of questions about their experiences of sexuality education in school including who it was taught by, what topics were covered, and what (if any) content about gender and/or sexuality diversity was included. In the main, questions comprised fixed or multiple-response options to questions such as 'did your sexuality education include information about sexual relationships between people of the same sex?' and 'thinking about the sexuality education you have had, which of the following topics have been included?'. Some questions were designed to elicit more detailed written responses; for example, 'If you feel comfortable doing so, please describe what information was included about sexual relationships between people of the same sex.'

Given the potentially sensitive nature of some of the survey content, the draft survey was reviewed by various stakeholders (e.g. parents of teenagers; health education teachers) and cultural advisors prior to ethical clearance being granted. In each instance, feedback was considered and the survey refined to address issues raised. While the initial survey included a greater emphasis on diverse sexual practices, some of the cultural advisors felt that the explicit mention of sexual practices would be too confronting for teenagers raised in more conservative communities. Some members of the Human Research Ethics Committee (Health) also raised concerns that the explicit use of terms such as 'oral sex' and 'anal sex' was not appropriate for those under 18 years. Therefore, in order to gain ethical approval research questions that specifically mention sexual practices were kept to a

minimum. Where explicit terms were used, we ensured that these were consistent with the terms used in classroom teaching and resources designed for teaching sexuality education in Aotearoa/New Zealand schools. The wording of information to participants and some of the questions were also modified to optimise accessibility for the target age group. The survey was created using the online survey platform Qualtrics, and tested by a group of young adults for flow, functionality and correct operation.

### ***Data collection***

Participation in the study was voluntary and recruitment of participants was carried out via advertising the study through third parties. Many organisations/groups facilitated distribution of the survey through their electronic networks. These included organisations focusing on all youth (e.g. Ara Taiohi; St John Youth; YWCA), as well as LGBTIQ specific organisations (e.g. Rainbow Youth; Qtopia; Intersex Youth Aotearoa). We also shared the survey link and explanation directly with relevant groups on Facebook (e.g. LGBTQ+ NZ – Amazing Individuals; Asexuals NZ). The survey was open for completion from December 2019 to March 2020. As participants were recruited and completed the survey remotely and the survey results comprised an aggregated set of responses, the confidentiality and anonymity of participants was maintained throughout the research process.

### ***Participants***

Our self-selecting sample comprised 73 participants aged between 16 and 19, who lived in Aotearoa/New Zealand. Most regions were represented, and more than three quarters (78.1%) of our participants identified Pākehā/New Zealand European as their ethnicity; meaning Māori, Pasifika and Asian participants were underrepresented. Nearly half of our participants (46.6%) indicated diversity in their sexual attraction while one in ten (11%) reported being unsure of their sexual attraction. Three in ten (30.1%) of our participants indicated a non-binary gender identity (i.e. not a woman/girl or man/boy). Most of our participants attended co-educational schools (76.7%), while 15.1% had attended a single-sex (i.e. boys or girls only) school and 8.2% had attended a mixture of co-educational and single-sex schools. Most (79.5%) had attended a school that did not have a religious ethos.

### ***Statistical analysis***

We analysed our quantitative data using IBM SPSS Statistics (version 25). We produced descriptive statistics of responses, then explored the relationships between the questions about students' education and wider-school experiences on a basis of school composition (single-sex or co-educational) and ethos (religious or not). To explore these relationships, we used Cramer's V-tests and Pearson's chi-square test of independence; and used Fisher's exact test to ascertain differences. Due to a large number of questions, we only reported on those questions that had a statistically significant result.

A rudimentary thematic analysis (Boyatzis 1998) was undertaken of open-ended responses to survey questions asking about the reasons participants thought that same-sex relationships and/or gender diversity were not discussed as part of sexuality education; and also things that schools could do to be more inclusive. To carry out the analysis, each written response was reviewed and assigned a descriptive code that was indicative of its

content (e.g. 'ill-informed teachers'; 'not considered important'). The codes were then reviewed and written responses organised into theme categories on the basis of similar codes.

## **Results**

To align with the structure of the survey, analyses are reported across the three main topic areas: the prevalence of sexuality education, content of sexuality education and LGBTQ inclusion in the wider school environment.

### ***Prevalence of sexuality education***

Of all participants, 76.7% (n=56) indicated that they had been taught sexuality education at some point in years 9-13. Eighty-two percent of participants who reported participating in sexuality education (n=46) indicated that they had participated in sexuality education that was part of compulsory timetabled health or physical education classes. Less frequently, sexuality education was reported to have occurred as part of optional health or physical education classes (19.6%), as part of other timetabled subjects (17.9%) or as part of a short programme (21.4%) or one-off event (21.4%). A small number of participants (n=9) indicated that they had studied health and physical education as a subject for NCEA. Of these, most (n=7) studied sexuality at NCEA level 1 and/or 2 (years 11-12).

### ***Content of sexuality education***

A high percentage of participants reported having been taught basic biological facts about men's and women's bodies (89.3%), contraception and pregnancy prevention (83.9%), the prevention of STIs and/or HIV (82.1%) and relationships education (80.4%). Conversely, topics that are especially relevant to gender and sexuality diversity were much less commonly included; for example, sexual diversity (42.9%), diverse sexual practices (30.4%) and gender diversity (28.6%). Surprisingly, the least included topic was masturbation (19.6%). Detailed information about topics included in sexuality education is provided in Table 1. Students who attended a school with a religious ethos were more likely to report that abstinence was a topic taught in their sexuality education (75.0%) compared to students who attended a school without a religious ethos (16.7%). This result was significant ( $p = .002$ ) with a moderate effect size ( $V = .471$ ).

[insert Table 1 about here]

Around half of respondents (48.2%) indicated that sexual pleasure was not a feature of their sexuality education (i.e. that sex was only ever discussed in relation to biological function). More than two thirds (69.6%) of participants reported their sexuality education mentioned diverse sexual practices (e.g. oral and/or anal sex) or decision making about sex, including choices about sexual activities. Of these participants, 46.2% reported learning about oral sex on a person with a penis, 41.0% reported learning about oral sex on a person with a vulva/vagina and 25.6% reported learning about anal sex. In relation to sexual health practices, while 91.1% of respondents reported being taught about condom use in vaginal



sex; the use of barrier protection for other sexual practices was far less common. Only 48.2% of respondents reported learning about condom use in performing oral sex on a person with a penis, only 35.7% in relation to condom use in anal sex and only 32.1% in relation to dental dam (or other barrier) use in performing oral sex on a person with a vulva/vagina.

Despite the inclusion of sexual and gender diversity in the curriculum, only around one-third of respondents reported that their sexuality education had included information about sexual relationships between people of the same sex (33.9%) and/or gender diversity (35.7%). Even where some inclusion of sexual and/or gender diversity occurred it was reported as overwhelmingly heteronormative: e.g. “consent was covered but mostly in a very heteronormative dynamic of ‘promiscuous man wants to sleep with woman who is on the fence about it’” (Participant 10); “the definition of sex for them [teachers] seemed to be very centred around the idea of penetration and procreation” (Participant 69). Furthermore, inclusion was often tokenistic. For example, one respondent wrote “it [same-sex relationships] was mentioned but wasn’t taken into depth, I would assume the teachers aren’t allowed to talk about it as it was glossed over” (Participant 19) and another “it was mentioned but [they] didn’t go into it” (Participant 42).

An analysis of responses to questions about reasons participants thought that sexual and gender diversity were not included mainly comprised three reasons: A conservative school/community, a belief that LGBTIQ perspectives were not important and a lack of knowledge on the part of teachers. Many participants reported a conservative school/community ethos as preventing the inclusion of content on sexual and/or gender diversity. For example, “my school is catholic and doesn’t talk about same sex relationships” (Participant 17), “because transgender and non-binary people don’t exactly fit with the idea of single sex education” (Participant 9) or “strict catholic parents might complain so they [teachers] have to be careful” (Participant 58).

A number of participants indicated that they thought their school did not think that including LGBTIQ content was important: “they didn’t think it was necessary (it obviously was)” (Participant 11), “they don’t seem to think its [sic] necessary... maybe because they think we’re too young or don’t want to ‘expose’ us” (Participant 6). There was also a strong indication across the data that participants felt that teachers often lacked sufficient knowledge about sexual and gender diversity. For example, comments like “my teachers seemed to brush across subjects that they had no personal experience with” (Participant 69), “teachers just have such a lack of understanding and information about gender identity” (Participant 6) and “teachers have not been taught a lot about the LGBTQ community; we (the students) taught our teacher about pansexual, nonbinary, etc.” (Participant 65) were common. Some also highlighted that teachers were ill-informed about contemporary understandings of sexuality and gender:

[We] had a single lesson on sexualities, and all of the terms were out of date. I ended up correcting the teacher during the entire lesson. (Participant 7)

My teacher’s idea of gender diversity seemed to be solely limited to transgender people and that all transgender people went through surgery which was sort of this one-off gender switch procedure. (Participant 69).

### ***LGBTQ inclusion in the wider school environment***

Around half of participants in this study (50.7%) reported that sexual and gender diversity had been mentioned in subjects other than sexuality education (e.g. history or social studies). Most commonly this was through positive comments by a teacher (83.8%) or a student (75.7%).

In the wider school climate, the most commonly reported forms of inclusion were not tolerating bullying of students who are homosexual/bisexual (64.4%) or who are gender diverse (63.0%), allowing same-sex partners to go to events (65.8%) and having a 'rainbow' or 'ally' group at school (58.9%). Measures such as providing toilets that are not gender specific, having changing rooms that provide individual privacy, uniforms that are not gender specific and the presence of gender and/or sexuality diverse role models were much less often reported (see Table 2 for a detailed breakdown of responses). Students who attended a school with a religious ethos were less likely to report that their school had a rainbow or ally group (16.7%) compared to students who attended a school without a religious ethos (65.5%). This result was significant ( $p = .002$ ) with a moderate effect size ( $V = .381$ ).

[insert Table 2 about here]

Participants were also asked what the school could do to be more inclusive of sexual and gender diversity. Many responses pertained to issues of binary gender demarcation within school settings. For example, as well as adopting 'gender neutral' uniforms and bathrooms, some suggested things like "allowing girls to wear suits to school formals" (Participant 67), to have "individual cubicles in P.E. changing rooms" (Participant 7) and "avoiding gender segregation in some sports, haka and assembly" (Participant 69). Others pertained to being more open about inclusivity including things like "talking about it [sexual/gender diversity] during classes" (Participant 30), "education on the queer rights struggle in history" (Participant 9) and to "specifically say this school welcomes the LGBTIQ community" (Participant 32).

## Discussion

The aim of this study was to explore the extent to which sexuality and gender diversity are included in the teaching of sexuality education; and that schools demonstrate LGBTIQ inclusion in the wider school environment. Despite being mandatory, the findings of this study indicate that a sizeable minority of students may not be receiving any identifiable sexuality education. This possible gap in provision is worrying as it means many young people are potentially unprepared for making these decisions. The findings of this study also indicate that sexuality education is dominated by traditional topics such as the biological function of men's and women's bodies, contraception and STI prevention; despite the scope for presenting STI prevention in ways that embrace sexual practices relevant to both heterosexual and same-sex relationships.

While relationships education and 'safer sex' practices were commonly taught, respondents reported that these were taught solely in relation to heterosexual relationships. A whole range of topics directly relevant to LGBTIQ people (e.g. diverse sexual practices; sexual pleasure; masturbation) were much less commonly included. So, despite policy guidelines including sexual and gender diversity, this aspect of sexuality education

appears to be infrequently delivered in practice; a finding congruent with other recent studies (Formby and Donovan 2020; Shannon and Smith 2015). Moreover, our analysis of qualitative responses indicates that even where sexual and/or gender diversity is included, this is often delivered in a way that is superficial or ill-informed. Delivering sexuality education in such a narrow way denies LGBTIQ youth their right to relevant sexuality education. While some resistance to the inclusion of sexual and gender diversity might be expected in schools with a strong religious ethos; the findings of this study are not explained by this factor given that only 16.4% of our participants attended religious schools.

Delivering sexuality education that centres on conventional heterosexuality (i.e. vaginal intercourse and reproduction) is incongruent with the lived experiences of many young people in today; many of whom are sexually fluid (e.g. see Katz-Wise 2015) and/or engage in a wide range of sexual practices, regardless of their sexual identity (e.g. see Ellis and Aitken 2020; Lewis, Marston and Wellings 2013). Despite this, the findings of our study are congruent with others (e.g. Svendsen 2012) in that it is relatively uncommon for sexual practices to be included in sexuality education teaching, except where directly related to reproduction. This indicates a continued reluctance both to accept young people as sexually developing people (Garland-Levitt 2017) and to frame sexuality in relation to pleasure (Fine and McClelland 2006; Svendsen 2012). Not including content around a range of sexual practices is problematic as it does not engage with young people's experiential understandings of sex and sexuality. Through contemporary platforms such as social media and streaming services; young people are exposed to a wide range of representations of sex and sexuality (e.g. see Wright and Rubin 2017). Diverse sexual identities and practices are therefore an integral part of the worlds occupied by young people; and the framework within which they develop understandings of sex/sexuality. It would seem then that the delivery of sexuality education in schools is not well matched to the needs of today's young people.

There was evidence that at least some schools demonstrated inclusion in the wider school environment. However, qualitative comments indicated that there was much more that schools could be doing; with many participants highlighting that mundane aspects of school (e.g. uniforms; changing rooms; sports) were organised around a rigid gender binary and therefore did not reflect understandings of gender prevalent among young people today. While some participants indicated that their school did not tolerate homophobic bullying; others suggested that this was an area that needed addressing. Efforts to enact inclusivity are laudable, but we noted that things that were relatively easy to implement such as not tolerating bullying, allowing same sex partners to balls and having a rainbow or ally group at school were reported at least twice as often by participants compared to harder to achieve outcomes like toilet, changing room or uniform changes. This could be due to resource constraints or community resistance, but equally could reflect a poor understanding of non-binary gender, or the school wanting to appear to be inclusive with minimal effort. As highlighted by many (see Ferfolja and Ullman 2020) inclusivity in the wider school environment is imperative to LGBTIQ students' sense of safety and belongingness in the school context. That fewer than two-thirds of participants reported their school did not tolerate bullying of students who are gender diverse, homosexual or bisexual, suggests that in many cases even the most basic measures of inclusivity may not be being implemented

Consistent with studies undertaken in a range of countries, including the US (Estes 2017; Gowen and Winges-Yanez 2014), the UK (Formby 2011) and the Netherlands (Baams,

Dubas and van Aken 2017), the overall findings of this study indicate that LGBTIQ youth in Aotearoa/New Zealand are poorly served by school-based sexuality education; with much of what is delivered falling short of what is stipulated in the guidelines. However, many of the issues with provision potentially stem from the guidelines themselves. For example, the guidelines are not explicit about the need to discuss diverse sexual practices from both heterosexual and LGBTQ perspectives and therefore as Garland-Levett (2017) highlights they erase the physicality of sexual pleasure in favour of an outdated ideal of sexuality (Garland-Levett 2017; Simon and Gagnon 1986). This omission is especially problematic because in ignoring sexual practices that are not procreative, you necessarily exclude same-sex relationships; resulting in the perpetuation of heteronormative provision (Svendsen 2012). Furthermore, all youth, regardless of sexual or gender identity, are denied access to education about a range of normative sexual practices prevalent in western societies today (e.g. see Lewis, Marston and Wellings 2013). Second, throughout the guidelines there is a schism between the framing of heterosexuality in relation to sexual behaviours (e.g. 'vaginal intercourse') and outcomes (pregnancy and STIs) and therefore as inherently sexual, while framing sexual and gender diversity solely as identities (cf. Quinlivan 2018) effectively desexualising LGBTIQ people. Third, content is framed within a gender binary model with no recognition of gender diversity. For young people growing up in a world where gender diversity is normalised – and specifically for those who may identify as 'transgender', 'gender diverse' or 'non-binary' – presenting content within a binary framework simply does not make sense. All of these issues could be mitigated by reimagining sexuality education in a way that includes both explicit reference to sexual practices (see Svendsen 2012) and adopting a 'norm-critical' approach to sexuality education (Bengtsson and Bolander 2020) in both policy and practice.

This study shows a mismatch between policy, practice, students' understandings of sex and sexuality and students' sexuality education needs. This mismatch aligns with a study by Coll, O'Sullivan and Enright (2018) which highlighted that what adults, who control policy and practice, think is important for sexuality education can differ markedly from young people. One explanation for these findings is that the 'student voice' was not included in the development of sexuality education policy and practice. By not including this student voice, sexuality education content does not best reflect the needs and interests of the students.

### **Limitations of the study**

The findings of this research are exploratory and therefore are not intended to provide a definitive account of what is, or is not, taught in schools in Aotearoa/New Zealand. Despite a concerted effort to cast the net wide to maximise recruitment, the sample for this study was self-selecting and small. The findings reported here therefore may not necessarily be representative of the experiences of young people more widely. However, a range of issues are identified that would benefit from more systematic exploration, perhaps as part of a large-scale study of sexuality education provision more generally. It might also be useful to investigate practices in different schools so as to identify examples of good practice.

Also, the study centres on young people's perspectives, which is valuable, but may not provide the complete picture. For example, it does not provide any indication of the extent to which the reported non-inclusion of sexual and gender diversity may be attributable to resistance to inclusion (e.g. see Shannon and Smith 2015) rather than other factors. Importantly, while the findings indicate that teachers may lack the knowledge to

offer genuinely inclusive sexuality education; it does not provide insight into the structural and contextual issues that may make it difficult/impossible for teachers to deliver inclusive sexuality education. As Ball, Maguire and Braun (2012) highlight, schools are complex policy enactment environments that often means that policy fails to transfer into (good) practice. Therefore, future research could usefully explore teachers' perspectives of the barriers and enablers to the inclusion of sexual and gender diversity in sexuality education to gain an understanding of how the gender and sexuality inclusion might be better effected.

## **Conclusion**

For young people growing up in a world where sexual and gender diversity is prevalent, and with understandings of sexuality and gender that are markedly different from that of previous generations, the delivery of a sexuality education that does not explicitly address diversity is not fit for purpose: it is merely rhetoric, not education. It is important that all young people – regardless of how they may sexually identify – have the opportunity to acquire appropriate and accurate information about sexuality that extends beyond a mainstream heteronormative approach. At the very least, a truly inclusive approach to sexuality education will mean that young people are well prepared to engage in sexual relationships in the future; whatever those might entail. They will also have a better understanding of diversity. For LGBTIQ youth, even more is at stake as equitable inclusion is important to wellbeing (e.g. see Riggs and Treharne 2017). Therefore, there is much more to be done to ensure that the human rights to comprehensive and non-discriminatory education about sexuality are realised for all young people, in particular LGBTIQ youth.

## **Notes**

<sup>1</sup>Schools that teach in the Māori language and adopt a philosophy and practice consistent with Māori culture.

<sup>2</sup>The National Certificate of Educational Achievement (NCEA) is the official Aotearoa/New Zealand qualification studied in the final three years of secondary school (Years 11-13).

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**Table 1***Frequency of Topics Covered in Sexuality Education*

| Topic  | <i>n</i> | %    |
|--|----------|------|
| Basic biological facts about men's and women's bodies (e.g. sexual organs and how they operate; periods; 'wet dreams')                             | 50       | 89.3 |
| Contraception and pregnancy prevention   | 47       | 83.9 |
| The prevention of STIs and/or HIV  | 46       | 82.1 |
| Relationships education (e.g. qualities of healthy/loving/safe relationships; communication skills for relationships; rights and responsibilities) | 45       | 80.4 |
| Consent within sexual relationships  | 40       | 71.4 |
| Making decisions about sex (e.g. whether or not to have sex; making choices about sexual activities; making choices about 'safer sex' options)     | 38       | 67.9 |
| Vaginal sex between a man and a woman  | 34       | 60.7 |
| Sexual harassment and/or bullying of a sexual nature (e.g. sexting; anti-gay comments)   | 25       | 44.6 |
| Sexual diversity (e.g. gay relationships; bisexuality; sexual identity)  | 24       | 42.9 |
| Prevention of sexual violence  | 23       | 41.1 |
| Gender roles and stereotypes (e.g. ongoing issues around men vs women in employment, sport, and other roles)                                       | 22       | 39.3 |
| Evaluating social and/or cultural messages about sexual behaviour  | 19       | 33.9 |
| Other gendered health and wellbeing issues (e.g. period poverty; teenage pregnancy; men's health)  | 19       | 33.9 |
| Diverse sexual practices (e.g. oral sex and/or anal sex)   | 17       | 30.4 |
| Pornography  | 17       | 30.4 |
| Gender diversity (e.g. transgender; gender identity)   | 16       | 28.6 |
| Abstaining from sex until married or in a long term committed relationship   | 14       | 25.0 |
| Sex diversity (i.e. intersex identities)   | 13       | 23.2 |
| Masturbation   | 11       | 19.6 |

**Table 2***Frequency of Practises Used to Try and Create LGBTQ Inclusive Environments*

| Practice  | <i>n</i> | %    |
|---|----------|------|
| Allows same sex partners to go to events (e.g. school dance/ball)   | 48       | 65.8 |
| Does not tolerate bulling of students who are homosexual or bisexual  | 47       | 64.4 |
| Does not tolerate bullying of students who are gender diverse   | 46       | 63.0 |
| Has a 'rainbow' or 'ally' group at school   | 43       | 58.9 |
| Has role models who are sexually diverse (e.g. lesbian, gay and bisexual identities) and/or gender diverse (e.g. transgender; non-binary) | 27       | 37.0 |
| Has uniforms that are not gender specific   | 19       | 26.0 |
| Provides toilets that are not gender specific   | 18       | 24.7 |
| Has changing rooms that provide individual privacy  | 15       | 20.5 |